

Board of Directors Meeting in Public - Cover Sheet

Subject:	NHS National Oversight Framework Segmentation Review – 2023/24 Quarter Four		Date:	4 th July 2024	
Prepared By:	Mark Bolton, Associate Director of Operational Performance				
Approved By:	David Selwyn, Acting Chief Executive				
Presented By:	David Selwyn, Acting Chief Executive				
Purpose					
To update Trust Board on the Integrated Care Board review of SFH against the NHS National Oversight Framework segmentation review for 2023/24 quarter four.				Approval	
				Assurance	X
				Update	
				Consider	
Strategic Objectives					
Provide outstanding care in the best place at the right time	Empower and support our people to be the best they can be	Improve health and wellbeing within our communities	Continuously learn and improve	Sustainable use of resources and estates	Work collaboratively with partners in the community
X	X	X	X	X	
Principal Risk					
PR1	Significant deterioration in standards of safety and care				X
PR2	Demand that overwhelms capacity				
PR3	Critical shortage of workforce capacity and capability				X
PR4	Failure to achieve the Trust's financial strategy				X
PR5	Inability to initiate and implement evidence-based Improvement and innovation				
PR6	Working more closely with local health and care partners does not fully deliver the required benefits				
PR7	Major disruptive incident				
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change				
Committees/groups where this item has been presented before					
Executive Team meeting on 26 th June 2024.					
Acronyms					
BAME: Black, Asian and Minority Ethnic ICB: Integrated Care Board ICS: Integrated Care System NHS: National Health Service SFH: Sherwood Forest Hospitals NHS Foundation Trust All other acronyms are defined.					
Executive Summary					
On the 6 th June 2024 the NHS Oversight Framework 2023/24 quarter four segmentation letter was received from Amanda Sullivan, Chief Executive, NHS Nottingham and Nottinghamshire ICB. The letter provides thanks for continued leadership and ongoing contribution to the local system. SFH remains in segment two of the NHS Oversight Framework. Segmentation ranges from segment one (no specific support needs) to segment four (requirement for mandated intensive support). Nationally there are:					
<ul style="list-style-type: none"> • 29 providers in segment one, • 83 (including SFH) in segment two, • 77 in segment three and 					

- 21 in segment four.

The quarter four letter bore many similarities with the letter received earlier in the year reflecting on quarter three. As a result, the letter did not reflect some of the positive progress we made in quarter four against the quality of care, access, and outcomes that we have previously presented to Board in our Integrated Performance Report. In the letter there were statements about deteriorating positions, increasing difficulties and pressure at a higher level than previously seen; however, during the period we had seen improvements from the previous quarter in our cancer 62-day backlog, elective long waits, overall diagnostic waits and 4-hour emergency access. We recognise there remain areas of challenge such as Echocardiography (which is contributing to low benchmark diagnostic performance) and further work to do where we have plans in place to improve timely access to services in line with the 2024/25 national ambitions.

With reference to the preventing ill health and reducing inequalities section, the letter stated that our representation into the ICS Health Inequalities and Prevention Oversight Group had reduced. SFH have a regular attendee at this forum together with the Mid-Nottinghamshire Health Inequalities Oversight Group. We have subsequently reached out to system colleagues ensure that the work underway is represented in future reviews.

Considering finance and use of resources the letter presents our position and how this relates to the segmentation rating. The driving factors behind our deficit position was the inability to reduce our bedded capacity due to demand pressures on the non-elective pathway and the need to fund surge and escalation actions together with pressure from the withdrawal of Community Diagnostic Centre funding which had been assumed in our plans. The challenges were communicated in-year with the year-end position being in line with our collective expectations. Our agreed deficit for 2024/5 is £14m and we will work to deliver and improve on this where possible. We are developing a financial recovery plan aligned to the system approach to get to breakeven by March 2026; we will work collaboratively with system partners as we require their ongoing support.

From a people perspective, the letter detailed key positives and challenges we face. To support workforce availability, we are considering different supply options including looking at recruitment of students and actively promoting apprentices and wider use of the apprentice levy. We have also appointed a People Promise Manager who is working to maintain our turnover level at 8.1%. We have plans to reduce our agency and bank reliance and these have started to show an improvement to our position. To achieve the reductions to bank and agency we understand we need to substantively recruit for agency posts, understanding that there are cost and quality benefits of having substantive staff in place. We note in the NHS Oversight Framework we are ranked in the lowest areas for the proportion of BAME and Women in Leadership roles, this is partly driven by local demographics; however we are actively promoting fully inclusive learning and development opportunities to support our staff , and external staff who wish to work for SFH..

Based previous segmentation reviews, we expect the next letter reflecting on 2024/25 quarter one to be received in September 2024.

Trust Board is requested to note the contents of this cover sheet and the accompanying letter from the ICB.