

## MINUTES [UNRATIFIED] [PUBLIC MEETING]

TITLE OF MEETING:	SHEFFIELD PLACE HEALTH AND CARE PARTNERSHIP BOARD
DATE:	MONDAY 9 OCTOBER 2023
TIME:	12:30-15:30
VENUE:	BOARDROOM, SHEFFIELD CHILDREN'S HOSPITAL, WESTERN BANK, SHEFFIELD, S10 2TH
ATTENDEES:	Dr Andrew Hilton (AH), Chief Executive, Primary Care Sheffield (PCS) [CHAIR] Cllr Angela Argenzio (AA), Elected Chair of Health and Wellbeing Board, Sheffield City Council (SCC) Ruth Brown (RB), Chief Executive, Sheffield Children's NHS FT Alexis Chappell (AC), Director of Adult Health & Social Care, SCC Meredith Dixon-Teasdale (MD-T), Director of Children and Young People, SCC Philip Gregory (PG), Director of Finance and Commercial Services, SCC Jackie Mills (JM), Chief Finance Officer Sheffield Place, SY ICB Judy Robinson (JR), Healthwatch Representative Helen Sims (HS), Chief Executive Voluntary Action Sheffield Moira Wilson (MW), Non-Executive Director, SY ICB Alun Windle (AW), Chief Nurse for Sheffield Place, SY ICB
In Attendance:	Ian Atkinson (IA), Interim Deputy Executive Place Director for Sheffield, SY ICB Sarah Burt (SB), Deputy Director, SY ICB Dominic Carrell, Development Manager, PCS Nicki Doherty (ND), Deputy Chief Executive and the Director of Strategy and Operations, PCS Lucy Ettridge (LE), Deputy Director of Community Development & Inclusion, SY ICB Kate Gleave (KG), Deputy Director of Children and Young People and Urgent Care, SY ICB Dr Tom Holdsworth (TH), Clinical Director, PCS Kathryn Robertshaw (KR), Deputy Director Sheffield Health & Care Partnership (HCP) Neil Robertson (NR), Director of Operations and Transformation, Sheffield Health and Social Care NHS FT Mark Tuckett (MT), Director of Strategy and Planning, STH Hawa Yatera (HY), Buddying Programme Attendee Lorraine Wood (LW), Interim Director of Communities, SCC Alison Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of Meeting]  Laura Mizzi, Improvement Project Manager (Policy & Strategy Trainee) STH attended as an observer.



ITEM	AGENDA ITEM	ACTION	
NO.	AGENDA ITEM	ACTION	
INTRO	INTRODUCTION		
00/00	Available Basins I and Oversey		
62/23	Apologies Received and Quoracy		
	> Emma Latimer		
	<ul><li>Kirsten Major (Mark Tuckett representing)</li></ul>		
	> Kate Josephs		
	<ul><li>Zak McMurray</li><li>Salma Yasmeen (Neil Robertson representing)</li></ul>		
	Greg Fell		
	> Josie Soutar		
63/23	Declarations of Interest		
	Mr Hilton declared an interest as a GP partner with regard to the		
	Primary and Community Delivery Group update.		
64/23	Questions from the Public		
	No questions were received from the public.		
	The questions were reserved from the public.		
65/23	➤ Minutes of the last meeting dated 15 August 2023 – the minutes		
	were agreed as a true record and marked as ratified.		
	Summary report from last meeting – for information only.		
	Action Log – the action log was updated during the meeting.		
PART 1	- PARTNERSHIP SECTION		
ATTEN	DEES:		
Dr And	rew Hilton (AH), Chief Executive, Primary Care Sheffield	Chair	
	gela Argenzio (AA), Elected Chair of Health and Wellbeing Board,	Member	
	ld City Council rown (RB), Chief Executive, Sheffield Children's NHS FT	Member	
	Chappell (AC), Director of Adult Health & Social Care, Sheffield City	Participant	
Counci	l ' '	•	
	th Dixon-Teasdale (MD-T), Director of Children and Young People, ld City Council	Member	
	Gregory (PG), Director of Finance and Commercial Services,	Member	
Sheffie	ld City Council	Member	
	Jackie Mills (JM), Chief Finance Officer Sheffield Place, SYICB  Member		
	Judy Robinson (JR), Healthwatch Representative Helen Sims (HS), Chief Executive Voluntary Action Sheffield Member		
	Moira Wilson (MW), Non-Executive Director, SYICB  Member		
	Alun Windle (AW), Chief Nurse for Sheffield Place, SYICB Member		
IN ATTENDANCE: Ian Atkinson (IA), Interim Deputy Executive Place Director for Sheffield, SYICB			
	Sarah Burt (SB), Deputy Director, SYICB		



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**Dominic Carrell, Development Manager, PCS** 

Nicki Doherty (ND), Deputy Chief Executive and Director of Strategy and Operations, PCS Lucy Ettridge (LE), Deputy Director of Community Development & Inclusion

Kate Gleave (KG), Deputy Director of Children and Young People and Urgent Care, SYICB Dr Tom Holdsworth (TH), Clinical Director, PCS

Kathryn Robertshaw (KR), Deputy Director Sheffield Health & Care Partnership (HCP) Neil Robertson (NR), Director of Operations and Transformation, Sheffield Health and Social Care NHSFT

Mark Tuckett (MT), Director of Strategy and Planning, STH

Hawa Yatera (HY), Buddying Programme Attendee

Lorraine Wood (LW), Interim Director of Communities, SCC

Alison Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of Meeting]

Laura Mizzi, Improvement Project Manager (Policy & Strategy Trainee) STH [Observer]

Sheffield HCP Priorities Updates

66/23 | Community Development and Inclusion Priority Programme Plan

Ms Ettridge and Ms Wood outlined the plan for a model neighbourhood which has been submitted for approval. Ms Mills confirmed that the plan is attached to a small amount of funding. Ms Ettridge noted that the funding is ring fenced for this year.



Comm Dev Plan -HCP 9.10.23.pptx

Ms Chappell reported that she is happy link in with Ms Ettridge on this work and link to the adult early intervention work (which also has funding attached).

AC/LE

Ms Brown outlined that she is very supportive in approving the plan and asked what, as anchor institutions, can be done to raise its profile further? It was noted that the data around absence from schools in South Yorkshire is one of the worst in the country, this may be a useful dataset to connect into this work. SCH will also continue with the "Super Saturday" initiative and recommended partners become involved. How can we manage this programme within communities and roll it out across Sheffield?

Cllr Argenzio acknowledged that the funding was only confirmed for one financial year but asked what happens after that? The North-East area of Sheffield, highlighted in the report, is one of the most deprived in the city and requires further investment but this also needs to be over a sustained period of time. Ms Wood responded that there is a lot happening in that area, but it is not as well connected as it could be. Colleagues within the Voluntary, Community and Social sector (VCSE) concur with that view. Ms Ettridge confirmed that the plan is just for financial year 2024/25 and will bring back a costed plan for years 2-5, within quarter 4 next year, along with plans for all 4 geographical areas in Sheffield. Non-recurrent funding is not ideal which is why would like to provide an outline 5-year plan.



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	Ms Dixon-Teasdale reported 28% of school age children are not in full time education in Sheffield which is a huge health inequality. This starts within the 0–5-year-old period when behaviours are set and contact between schools and parents has deteriorated since Covid, therefore, we need to do something radical to ensure children have the best available opportunities and support them to be in school.	
	Ms Robinson noted that providing public services in different ways is key and therefore, would like to see that in this programme, alongside political support for financial sustainability. Outcomes detailing how people feel, are subjective, and would like to see additional measures that are more tangible and robust, or we will be unable to ascertain if they are working. Ms Ettridge responded that this work is around healthy communities, wider system work and public services reform. This is a starting point and outcome measures and governance will evolve.	
	Mr Atkinson suggested that need to describe the totality of the work happening in the north-east of Sheffield and layer up the narrative as to what other parts of system are doing and will do to support the populations in that area (eg; including the lung health work and "live well, breath well", etc.)  Mr Windle noted that there is an important link to make with the violence reduction programme work led by South Yorkshire Police as there are pots of money available to bid for.	
	ACTION: AW will link with Ms Ettridge and Ms Woods to explore opportunities.	AW/LE/ LW
	Ms Wilson commented that anchor institutions are very important, this is a brilliant piece of work and we are all behind it but, with only 6 months remaining until the end of March 2024, could celebrate any early successes to help galvanise this work and for community groups to say, "this is what we've done"!	
	Ms Yatera outlined that need to engage and gain the trust of the community. Engagement will definitely have an impact around marginalised communities coming together.	
	Sheffield HCP Partnership Board approved the Community Development and Inclusion Priority Programme Plan.	
67/23	Winter Planning	
	Mr Atkinson outlined that the winter plan provides the highest level of assurance to the Board and that have engaged with all partners who have had the opportunity to comment.	



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	Ms Wilson enquired whether we can demonstrate the schemes that worked last year and how are we going to bring those trajectories forward this year?	
	Cllr Argenzio noted that she would be interested to know if there are any statistics of what is expected this winter and are there things underway around, for example, infection prevention control (IPC). At the Adult Social Care Committee at SCC there is a £250k public health yearly grant that goes into IPC, what else is happening around prevention work?	
	Mr Tuckett asked if the scale, scope and pace of the changes are sufficient for the scale of challenge, and can we gain a sense of that?	
	Mr Windle responded that there are millions (£) spent locally and nationally on IPC and there is legitimate question as to whether we are doing it right and getting the right messages over, therefore, need to take some messages and do something differently.	
	Mr Atkinson noted that this is a bridging year, building on last year's work to shore up the system. There are longer term areas of work that are strategically taking place and changes are being made.	
	Ms Robinson enquired if doing anything around housing, inequalities and the virtual ward. Ms Gleave responded that these are areas of concern and conscious not to worsen inequalities and the housing situation.	
	Ms Dixon-Teasdale noted that it links to the community development work and one of the successes of Covid was around sharing messages around health prevention and SCC can help to join things up.	
	Ms Brown outlined that there are a number of delays in SCH and STH and not sure what "significant" means, how do we know if we are getting better/worse and, additionally, need to recognise that any future industrial action is an enormous risk and if it continues it will be extremely challenging.	
	Ms Chappell commented that information will be in the public domain which will support some of the questions raised today. Data is available and a weekly discharge pack is received from NHS England which shows performance around discharge planning and there has been an improved trajectory in Sheffield. How do we enable people to return home from hospital on the same day, etc, to enable the range of interventions to come to fruition.	
	ACTION: Ms Gleave to share more detail on the winter schemes with the Board to address the questions raised	KG



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NO.	Sheffield HCP Partnership Board noted the update on winter planning.	
68/23	Ageing Well	
	Ms Burt joined the meeting to provide an overview on the delivery of the nationally funded NHS England Ageing Well Programme in Sheffield Ms Burt highlighted that this programme had been a really good example of how working in collaboration and building strong relationships /has helped in the space and strength of taking a personalised approach. Ms Burt went on to outline the work moving into the final 6 months of the programme, anticipated benefits to be realised and plans for sustainability beyond the close of the programme at the end of March 2024. The report was submitted to the September Transformation/Oversight Committee and will return to the November 2023 Committee to consider the details of recommendations and plan for practical alignment with planning processes.	
	ACTION: Ms Burt to provide a further update to the Sheffield HCP Partnership Board at its 11 December 2023 meeting to include more specifics (and different options if applicable) around sustainability of each of the programme areas.	SB
	Ms Wilson referred to sustainability and suggested RAG (Red Amber/Green) rating the ones that we are keen to support and identify funding for them (eg; falls) in the December update.	
	Ms Dixon-Teasdale enquired if "dying well" is part of the strategy? Dr Hilton responded that there are other specific areas of work underway that do not fall specifically under Ageing Well. Ms Burt outlined that the programme does not ignore "dying well" but confirmed that there is extensive palliative care development work across Sheffield that is not directly connected to this national programme.	
	Ms Chappell noted that there are a range of aspects that support the prevention agenda, so it is helpful to see sustainability. Compassionate Sheffield crossovers with this work and can start to link that together.	
	Mr Tuckett suggested that include successes that have been achieved to-date, sustainability, different levels of support, setting some different options and how it works as a group.	
	Ms Burt confirmed that she would:	
	<ol> <li>strengthen the personalised approach in this space, and incorporate learning around value of strong relationships across the system, which cannot be undervalued moving forward.</li> </ol>	



ITEM	AGENDA ITEM	ACTION
NO.	Sheffield HCP Partnership Board noted the paper and welcomes the update to the December meeting.	
69/23	Primary and Community Delivery Group Update	
	Ms Doherty, Dr Holdsworth and Mr Carrell presented an update from the Primary and Community Delivery Group. The aim is to provide an understanding of the context and drivers, update on the PCN development work, share challenges and next steps and to enquire how the partnership can help with the work.	
	PCCC delivery group update Oct 2023.pptx	
	Ms Brown noted that this is a priority and Sheffield Children's NHS Trust certainly buy into the vision. However, there are a lot of initiatives around integrated working and we cannot seem to bring them together. We definitely require buy-in, but administration is enormous and how do we articulate that and ensure we take it forward together with the right skill mix, ie; the programme management has to be available.	
	Cllr Argenzio commented that this should be joined together as we keep coming back to the same space. The will is there and there are discussions taking place across the board but how do we progress with the lack of sustainable (long term) resources?	
	Dr Hilton responded that the scope is huge and organisations have a lot of different services and, although we all recognise the parallels, it is a real challenge trying to lead in this space. There is so much more we can do around, for example, elective pathways, but if the partnership is going to deliver it has to be done in an integrated way.	
	Dr Holdsworth reported that work is on-going within community areas but that does not include programme resource.	
	Ms Doherty confirmed that the strategy presented at the meeting is South Yorkshire wide, we need to consider the implications of the strategy locally for Sheffield 'place'.  Ms Chappell agreed this is a priority and SCC have already redesigned home care services around primary care services to strengthen links. We need to consider lifting and shifting resource amongst partners to	
	fund programme management, how can we do that so that we can be more strategic for the people of Sheffield? Ms Chappell was keen to look where SCC could offer resource.	
	ACTION: Dr Hilton and Ms Chappell to consider how that can be taken forward.	AH/AC
	Ms Mills cautioned that need to ensure not putting funding into silos and need to think about how we do that so that we can be creative with	



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	resources. It requires people to work differently which will be very challenging.	
	Sheffield HCP Partnership Board noted the update from the Primary and Community Delivery Group.	
70/23	September Board Development Session Feedback	
	Ms Mills confirmed that a series of actions were agreed at the session around the five SHCP priorities and she and Mr Atkinson are articulating the benefits (including financial ones) and how they can be measured and delivery groups and leads held to account.	
	Directors of Finance within Sheffield are meeting in two weeks to discuss how each organisation can contribute. Several projects are being managed across health and social care and need to consider how they are faring in the medium-term financial projections to ensure the financial position doesn't worsen.	
	Ms Brown noted that at the session didn't have the SCC financial position and require a whole system discussion for Sheffield including what is within South Yorkshire and the broader system as it is hard to know what the Sheffield pound (£) actually is. There is a workshop taking place on 10 October in South Yorkshire around funding, we could take any collective messages/concerns into that.	
	Mr Gregory outlined that there are difficult targets to meet and need to be clear, within both the SCC and NHS budgets, and think holistically what is best for the people within the city and what is cost effective.	
	Ms Wilson queried how can we make changes that will improve outcomes and then remove unnecessary duplication?	
	Ms Dixon-Teasdale enquired how we are prioritising children and young people. Funding has been reduced across the piece which will have a long-term impact, how do we discuss the most vulnerable children, but not forgetting all other children?	
	Mr Atkinson noted that as a mature partnership we need to understand respective partner financial positions, what is costed out in the plan and what can be taken out. Within a few areas we may need to make some difficult decision.	
	Ms Chappell reiterated that we need to:	
	<ol> <li>learn from what has worked well, the outcomes we want to achieve and what strategic decisions/disinvestments we want to make, and</li> <li>are we spending our money wisely? There is a need to keep focus on outcomes and recognising the investment/disinvestment in an</li> </ol>	



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	owned position and require a collective discussion around what that looks like and are there things that we could benchmark from within Sheffield and from other areas.	
	Mr Tuckett suggested that with a potential change of government within the next 12-18 months we should aim to prepare some investable propositions should new funding streams become available in that time.	
	Ms Robinson noted that we do not look at new models or engage patients and communities sufficiently and we need to shift the view to a different way of thinking as they will alter how health is conducted. Ms Yatera commented that regarding inclusion and the winter plan we lose the gap connecting the community of what we are wanting to implement and what the VCSE sector is doing. Cannot see the connection between those that are very ill or those who are not using services or cannot gain access. Need to dig deeper regarding the inequality gap and how we can reach those.	
	Future Sheffield HCP Partnership Development Session to focus on the priority areas and financial efficiencies.	
71/23	Sheffield Transformation and Oversight Committee Update, including detail on Performance Reporting and Risk Register	
	Mr Atkinson reported that the Committee has now come together as one meeting with two parts to the agenda. Key areas to note are:	
	<ul> <li>Continuing need to clarify reporting and programme management arrangements for the delivery groups;</li> <li>Ms Chappell and Mr Robertson have stepped forward as Senior Reporting Officer's (SRO's) for the crisis mental health priority. Linking in with the mental health discharge work;</li> <li>On-going risks related to estates availability from the primary and community mental health transformation programme.</li> </ul>	
	Dr Hilton noted the ongoing pause of the Elective/Planned Care Delivery Group due to the lack of resource for programme management.	
	Mr Tuckett reported that links have been made between STH renal service and primary care teams despite the capacity challenges described. Noting that for a small investment to bring smaller teams together there are some things can do quite quickly and easily.	
	Risk Management – Ms Robertshaw provided an overview via the attached presentation.	



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1101	PDF	
	[PAPER Fii] Sheffield Place Partnership Risk	
	Looking for support to develop a risk management framework for the partnership and to continue working with delivery groups to look at how to identify the benefits of the programmes of work, risk and mitigating actions. Keen to identify areas of commonality and embed a culture of learning from issues across the programmes.	
	Dr Hilton noted that the challenge will be the buy-in for all of the areas from partners and avoid becoming and overly bureaucratic process. Need to be clear who will complete the reports and returns on a monthly basis. Ms Robertshaw responded that it is also important to understand where risk management is already happening to ensure there is no duplication of effort. Mr Atkinson confirmed it is not a box ticking exercise but a live document within the Delivery Groups and Sub-Groups to own those risks.	
	Ms Wilson noted that it is important to have some risk management at this level and ensure it is fed into.	
	Ms Brown reported that things are also happening in provider collaboratives and need to ensure we are not duplicating that, and it is important that we are discussing risks and what we can do to mitigate those.	
	Ms Mills agreed that the importance of it not being a box ticking exercise is important, but it will become that if we are not careful and we need to make it workable and provide support with that.	
	Ms Chappell enquired about the governance and what is the interface between SCC and this process and how do we ensure a shared approach and thinking space around that.  Cllr Argenzio noted that we are aware of risks, but it is important how we mitigate them and what are the shared plans and what can we all do to ensure we do not replicate.	
	Mr Tuckett noted that it is more about risk management from a system perspective.	
	ACTION: Sheffield HCP Partnership Board noted the report and requested that an update on risk management is brought back to the December meeting.	IA/KR
PART 2	- ICB SHEFFIELD PLACE SUB-COMMITTEE	
ATTEN		
Dr Andı	rew Hilton (AH), Chief Executive, Primary Care Sheffield	Chair



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ITEM NO.	AGENDA ITEM	ACTION
Clir Ang	gela Argenzio (AA), Elected Chair of Health and Wellbeing Board,	Participant
	heffield City Council	
	Ruth Brown (RB), Chief Executive, Sheffield Children's NHS FT	
	Alexis Chappell (AC), Director of Adult Health & Social Care, Sheffield City	
Council		
-	Gregory (PG), Director of Finance and Commercial Services,	Participant
	d City Council	
	Mills (JM), Chief Finance Officer Sheffield Place, SYICB	Member
_	obinson (JR), Healthwatch Representative	Participant
	ims (HS), Chief Executive Voluntary Action Sheffield	Participant
	Vilson (MW), Non-Executive Director, SYICB	Member
	indle (AW), Chief Nurse for Sheffield Place, SYICB	Member
	ENDANCE:	
Kathryn Hawa Y Alison (	nson (IA), Interim Deputy Executive Place Director for Sheffield, SY named to Robertshaw (KR), Interim Director Health & Care Partnership (HCP) atera (HY), Buddying Programme Attendee  Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of Meet Itzzi, Improvement Project Manager (Policy & Strategy Trainee) STH	<b>)</b> ing]
72/23	Sheffield Place Finance Report Month 5 and Benchmarking Data	
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	The report was received as read and outlined the financial position for	
	month 5. From an NHS perspective there is a significant amount of risk	
	and uncertainly around how much funding will come down for various	
	areas nationally. Require more focus on the longer-term plans so that	
	can provide some protection.	
	Sheffield HCP Partnership Board noted the report.	
73/23	Digital and Data Update	
	This item is deferred to the December meeting.	
DADT 2	SECTION 75	
PARI 3	- SECTION 75	
N/A		
PART 4	- ITEMS OF ANY OTHER BUSINESS	
74/23	Items for Escalation to the SY ICB Board	
	No items were escalated to the SY ICB Board.	
75/23	Items of Any Other Business and Forward Plan	
	Unpaid Carers – Ms Chappell referred to the annual report submitted	AC
	to the Health and Wellbeing Board and will share with colleagues.	AC
	to the Health and Wellbeing Doard and Will Share With Colleagues.	
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ITEM NO.	AGENDA ITEM	ACTION
	<u>Changing Futures Programme</u> – Ms Chappell noted that this programme is tackling inequalities and would like to present the coproduction to show how we can improve outcomes at a future meeting.	
	Adult Social Care Strategy Refresh – Ms Chappell noted that "living the life you want to live" Strategy had received approval at SCC and it set the priorities over the next couple of years.	
	Community Development and Inclusion – Ms Wilson suggested that an update is provided to the SY IBC Board. Ms Robertshaw to progress with Ms Ettridge.	KR
	Questions from Public – Ms Robinson enquired if we need to think more about how we can encourage questions from the public. Ms Robertshaw to pick up with Ms Robinson outside of the meeting.	KR/JR
Date an	d Time of Next Meeting	

## **Date and Time of Next Meeting**

Monday 11 December 2023 from 14:00-17:00 – Conference Suite, The Circle, 33 Rockingham Lane, Sheffield, S1 4FW