

## MINUTES [UNRATIFIED] [PUBLIC MEETING]

TITLE OF MEETING:	SHEFFIELD PLACE HEALTH AND CARE PARTNERSHIP BOARD
DATE:	TUESDAY 13 JUNE 2023
TIME:	11:30-12:30
VENUE:	MS-TEAMS
CHAIR:	EMMA LATIMER, EXECUTIVE PLACE DIRECTOR FOR SHEFFIELD
ATTENDEES:	Emma Latimer (EL), Executive Place Director for Sheffield, SYICB [CHAIR] Cllr Angela Argenzio (AA), Elected Chair of Health and Wellbeing Board, Sheffield City Council (SCC) Ruth Brown (RB), Chief Executive, Sheffield Children's Hospital FT Alexis Chappell (AC), Director of Adult Health & Social Care, Sheffield City Council (SCC) Kate Josephs (KJ), Chief Executive, Sheffield City Council (SCC) Tony Kirkham (TK) Director of Finance and Commercial Services, Sheffield City Council Jackie Mills (JM), Chief Finance Officer Sheffield Place, SYICB Judy Robinson (JR), Healthwatch Representative Helen Sims (HS), Chief Executive Voluntary Action Sheffield Moira Wilson (MW), Non-Executive Director, SYICB
In Attendance:	Ian Atkinson (IA), Interim Deputy Executive Place Director for Sheffield, SYICB Dr Mike Hunter (MH), Medical Director, Sheffield Health and Social Care Trust Dr StJohn Livesey (SJ), Clinical Director, SYICB Eleanor Rutter (ER), Public Health Consultant, SCC Martin Smith (MS), Deputy Director Planning & Joint Commissioning, SYICB Alison Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of Meeting]



ITEM	AGENDA ITEM	ACTION
NO. INTRO	DUCTION	
32/23	Apologies Received and Quoracy	
02/20		
	Apologies were received from:	
	<ul> <li>Cllr Stephen Ayris</li> <li>Sandie Buchan</li> <li>Jan Ditheridge (Dr Mike Hunter attending)</li> <li>Greg Fell (Eleanor Rutter attending)</li> <li>Dr Andy Hilton</li> <li>Andrew Jones</li> <li>Zak McMurray</li> <li>Kirsten Major</li> <li>Kathryn Robertshaw</li> </ul>	
	<ul> <li>Alun Windle</li> <li>The meeting was declared quorate.</li> </ul>	
33/23	Declarations of Interest	
	No declarations were made to the meeting	
34/23	Questions from the Public	
	No questions were received from the public.	
35/23	Minutes of the last meeting dated 18 April 2023 – the minutes of the previous meeting were agreed as a true record.	
	Summary report from last meeting – Ms Latimer outlined that this provides a summary of the minutes and has been used by some of NHS Providers to update their Board meetings.	
	Action Log – the action log was outlined at the meeting and Ms Latimer paid tribute to Cllr George Lindars-Hammond, who is no longer an elected member at Sheffield City Council (SCC) but provided a lot of input into this partnership and Board.	
36/23	Feedback from Internal Auditor re Governance Arrangements	
	Mr Atkinson referred to the report circulated which was drafted by SY ICB's internal auditor. The auditor observed the Sheffield HCP Board meeting on 18 April to ensure that the Board was undertaking its delegation regarding decision making and governance. It is a positive report, with no actions to immediately undertake.	



NO.	Ms Robinson noted that, beyond Healthwatch representation and public questions, there are other ways to open engagement and	
	suggested that it is added to a future agenda. Mr Atkinson responded that he would welcome a discussion outside of the meeting as the auditors were keen to include public voice as much as possible. Ms Robinson agreed and to also include Ms Sims who is carrying out work in this area within the community and voluntary sector. Ms Chappell enquired how do we ensure peoples voices are the core to what we do? It was suggested the partnership could link to work on-going across the system, eg: akin to the adult care festival last June, which included Healthwatch colleagues, to involve adult voices for them to help co-produce what is required for the city of Sheffield. Additionally, the Autism Partnership Board and the Learning Disabilities Partnership Board will be Co-Chaired by service user individuals to ensure we are gaining people's voices for the core of what we do. There is something about how we connect some of these pieces of work across the system, particularly across health	
	and social care, and happy to provide support with that work. <b>ACTION:</b> IA/JR/HS to discuss outside of the meeting.	IA/JR/HS
PART	1 – PARTNERSHIP SECTION	
ATTEN	NDEES:	
Cllr An Sheffie Ruth E	Latimer (EL), Executive Place Director for Sheffield, SYICB ngela Argenzio (AA), Elected Chair of Health and Wellbeing Board, eld City Council Brown (RB), Chief Executive, Sheffield Children's NHS FT Chappell (AC), Director of Adult Health & Social Care, Sheffield ouncil	Chair Member Member Participant
	Kirkham (TK) Director of Finance and Commercial Services,	Member
Sheffie Jackie Helen Moira	eld City Council Mills (JM), Chief Finance Officer Sheffield Place, SYICB Sims (HS), Chief Executive Voluntary Action Sheffield Wilson (MW), Non-Executive Director, SYICB	Member Member Member
	TENDANCE:	
Dr StJ Sarah SYICB	lan Atkinson (IA), Interim Deputy Executive Place Director for Sheffield, SYICB Dr StJohn Livesey (SJ), Clinical Director, SYICB Sarah Burt (SB), Deputy Director for Commissioning Development (Planned Care) SYICB	
	Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of Mo	eeting]
37/23	Sheffield Place Priorities Discharge and Home First Model Development – update provided	



ITEM NO.	AGENDA ITEM	ACTION
	Mr Atkinson noted that this report follows on from previous papers on the subject to Board and now providing more detail on the delivery plan and expected impact.	
	The team are developing the work and have tried to ensure partners are buying into the vision and strategy, at all levels, and there are additional events happening throughout the month of June to ensure that happens.	
	There are activities already taking place focussed on removing the queue for discharge and colleagues have made progress over the last 4-6 weeks to gain a position of understanding of the 'ask' and mobilisation. There is a link within the appendix with an outline draft of what we will be identifying to support the programme, using the Better Care funding that has come via the ICB 'place' allocation, which will be signed off by the Health and Wellbeing Board, to expedite the work in terms of improving flow.	
	In parallel, the team are engaged in a dialogue with colleagues in mental health, and although slightly behind with that work that can be caught up quite quickly in terms of removing the queue for mental health service discharges. That area has been rated as amber regarding the work required but there is a commitment through the Urgent Care Group to bring that proposal through for the end of August.	
	Looking for support today to confirm the Board are assured that the activity is taking place as described and check whether there is anything else required, as a Board, to receive assurance?	
	Ms Chappell thanked Mr Atkinson for the overview, it is positive having the governance behind this work moving forward. To note for the minute the paper for Hospital Discharge, including the model, has been submitted to the Adult Policy Committee taking place on 14 June for approval, which includes the allocation of the resource to enable the model to be implemented.	
	In terms of transparency the plan is to also report to the Adult Heath and Social Care Policy Committee on discharge performance as part of the Council's cycle of assurance. What the data doesn't say, from an adult social care perspective, is that we are already showing a reduction in terms of waits, which will be reported in the public domain. At the same time last year, it was around 165 waits and now currently it is around 28, which is a significant difference. As we move forward, in terms of mental health waits, it has been agreed that Mr Atkinson and Neil Robertson (SHSC) will take a lead and will submit a paper to the Urgent and Emergency Care Board.	



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110.	Ms Chappell provided links to the Council's Discharge report, which can be found at the end of the minutes.	
	Dr Hunter commented that an equality impact assessment (EIA) has not been produced which could capture the gap for mental health. Dr Livesey outlined that have done home first for a long time but do not have the capacity to do that without a queue. It means that hospital staff can't tell families when someone needs to go home and, therefore, there are hospital wards open unnecessarily, which costs huge amounts of money, although it is important to understand that this is not what is driving this, it is around social justice for the people involved. The problem with the queue for the frail and elderly is that while they are waiting to be discharged, something else often happens, ie; they catch a hospital infection or have a fall. It will save a lot of money if we get this right but more importantly it will be very positive for the hospital staff and for the families.	
	Ms Chappell commented that she would be happy to share the EIA with Dr Hunter which has been submitted to the Adult Health and Social Care Policy Committee and is being further updated to ensure it reflects hospital discharge for people with a learning disability or mental health issues. <b>ACTION:</b> AC to share EIA with MH.	AC
	Ms Latimer enquired if we know who is at risk of being admitted into acute beds this winter and how can identify them and avoid some of the need for these patients to be admitted? Mr Atkinson responded that there has been a lot of discussion around the areas to start but currently looking at the capacity available. Dr Livesey responded that it is an unknown but could try and identify as a staged project as we ultimately need a system to support pathways for frail people who require support at home and could start with those already in hospital.	
	Ms Latimer enquired how we identify people who are frail and support them before they go into the hospital? Dr Livesey responded that there is a lot of work in this area currently and we need to ensure that it all joins up.	
	Ms Chappell noted the aim is to have an integrated community team who discharge people from hospital and refer people in who are at risk of going into hospital but do not think that will be ready for this winter but that is the goal. Ms Chappell outlined some examples of current work:	
	<ol> <li>A partnership with Yorkshire Ambulance Service and the Falls Team – looking at measuring how we evidence prevention of admissions by preventing falls;</li> </ol>	



ITEM NO.	AGENDA ITEM	ACTION
	<ol> <li>Joint post with the Pharmacy Service – pilot working well for education management when people are at home and living the life want to live – bring back practical example;</li> <li>Mental Health, LD, Autism – how do we start to look at resource in Sheffield for short-term intervention towards the prevention of admission into hospital.</li> </ol>	
	Ms Latimer noted the need to focus on the problem that we are trying to solve and ensuring we are doing things in the right order with the right data and intelligence supporting the programme.	
	Dr Hunter thanked Mr Atkinson for ensuring that that there is good alignment with the Provider Collaborative for Mental Health and LD in the discharge work.	
	Dr Hunter asked whether we are aiming for an 80% gain focussing on 20% of PCN's focussing on the most vulnerable with interventions at that level. Dr Livesey responded that he wants to remove 100% of the queue but committed to considering the work from that perspective during the design period.	
	Ms Latimer thanked everyone involved for their hard work and looks forward to seeing the benefits for the population of Sheffield.	
	Sheffield Health and Care Partnership Board noted the update.	
38/23	Autism Strategy	
	Ms Chappell reported that she currently Chairs the Autism Partnership Board and are currently recruiting a co-chair who is an autistic individual.	
	The Board has done a programme of engagement events aiming to ensure that it captures and represents voices from childhood right through to adulthood.	
	One of the key pieces of feedback had been that people felt mistrustful of the current ways of working and therefore, the strategy includes one-year priorities to ensure transparency about what is being delivered. New ones will be set each year to maintain a focus on delivery.	
	The Strategy was approved at the Adult Social Care Committee and thanked Cllr Argenzio for her input and support.	
	The Sheffield Health and Care Partnership Board noted the Strategy.	



ITEM NO.	AGENDA ITEM	ACTION	
_	2 – ICB SHEFFIELD PLACE SUB-COMMITTEE		
ATTEN	ATTENDEES:		
Emma Cllr Ar	Latimer (EL), Executive Place Director for Sheffield, SYICB gela Argenzio (AA), Elected Chair of Health and Wellbeing Board, eld City Council	Chair Participant	
Ruth E Alexis	rown (RB), Chief Executive, Sheffield Children's Hospital FT Chappell (AC), Director of Adult Health & Social Care, Sheffield	Participant	
City Co		Participant	
	Kirkham (TK) Director of Finance and Commercial Services, eld City Council	Participant	
Jackie	Mills (JM), Chief Finance Officer Sheffield Place, SYICB	•	
	Sims (HS), Chief Executive Voluntary Action Sheffield Wilson (MW), Non-Executive Director, SYICB	Member Participant Member	
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lan Atl	kinson (IA), Interim Deputy Executive Place Director for Sheffield, State of the St		
	Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of M	eeting]	
39/23	Final Sheffield Place Finance Report		
	Ms Mills reported the 2022-23 year-end position of £17.5 m deficit, (£11.1m SCC and £6.4m NHS) which was an improvement on the forecast earlier in financial year achieved through good partnership working and conversations. Now in the new financial year and efforts are being made on mitigating the financial risks with significant efficiency savings required, therefore, the next report will focus on those levels of risk and delivery of efficiencies.		
	Ms Latimer asked for some feedback on actions that had followed from the efficiency's presentation at the Board Development session.		
	Ms Mills noted that the presentation is work in progress, had been updated and will continue to be updated. She had held helpful discussions with Philip Easthope (Director of Finance; Sheffield Health and Social Care NHS Foundation Trust) about how we could mirror some of the discharge work on the mental health pathways. The challenge is to start to translate opportunities into reality for the delivery of schemes and understand and quantify the discharge programme.		
	Ms Mills discussed with Ms Chappell the use of collective resources for adult social care, continuing health care, etc, therefore, there are a range of areas that the proposed Joint Efficiency Board could focus on, both short term (in year) and longer-term projects. Will bring the work to the Oversight Committee and will report back to the Partnership Board.		



ITEM	AGENDA ITEM	ACTION
NO.	The Obeffield Heelth and Oene Destructed in Deend noted the	
	The Sheffield Health and Care Partnership Board noted the update.	
	upuale.	
PART	3 – SECTION 75	
ATTEN	IDEES:	
	Latimer (EL), Executive Place Director for Sheffield, SYICB	Co-Chair
	gela Argenzio (AA), Elected Chair of Health and Wellbeing Board,	Member
	eld City Council	Dentisinent
	Brown (RB), Chief Executive, Sheffield Children's NHS FT Chappell (AC), Director of Adult Health & Social Care, Sheffield	Participant Member
City C		Weimber
-	Kirkham (TK) Director of Finance and Commercial Services,	Member
-	eld City Council	
Jackie	Mills (JM), Chief Finance Officer Sheffield Place, SYICB	Member
	Sims (HS), Chief Executive Voluntary Action Sheffield	Participant
	Wilson (MW), Non-Executive Director, SYICB	Member
	ENDANCE:	SVICD
	kinson (IA), Interim Deputy Executive Place Director for Sheffield, 3 Smith (MS), Deputy Director Planning & Joint Commissioning, SY	
	Garrett (AG), Senior Business Manager, SYICB/SCC [Minutes of Mo	
40/23	Draft Joint Forward Plan	ootiingj
	Mr Smith reported that the purpose of the paper was to outline the	
	latest working draft of the Five-Year NHS Joint Forward Plan (JFP)	
	for South Yorkshire to enable consideration by the Partnership. The	
	South Yorkshire Integrated Care Partnership meeting on 23 May set out the national expectations for Joint Forward Plans, our	
	engagement approach with citizens, patients, and carers and how we	
	have worked together taking a distributed leadership approach to	
	develop our draft Joint Forward Plan for South Yorkshire.	
	Joint Forward Plans are expected to set out how Integrated Care	
	Boards together with their partner NHS Trusts will arrange and	
	provide NHS services to meet both the physical and mental health	
	needs of their local population, aligned to local joint strategic needs	
	assessment and Health and Wellbeing Strategies.	
	The guidance is clear that systems are to use their Joint Forward Plan	
	as a shared delivery plan for their Integrated Care Strategy, setting	
	out the NHS contribution. The expectation is that year one is closely	
	aligned to operational planning submissions for 2023/24. Our NHS	
	Operational Plan for South Yorkshire for 2023/24 has been submitted	
1	to NHS England.	
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	The draft plan has been coordinated by a Joint Forward Plan	
	Coordination Group through which we have brought together leads	
	from our places, provider collaboratives and alliances and taken a	



ITEM NO.	AGENDA ITEM	ACTION
	distributed leadership approach.	
	Ms Mills noted that there are no statistics around each of the 'places' and wondered if that was an omission. In addition, Ms Mills enquired how the plan will be publicised for each 'place'. Is there something we could take away to think about as a partnership?	
	The Sheffield Health and Care Partnership Board noted the update.	
41/23	Better Care Fund	
	Mr Smith provided an update on the progress to date on the development of the Sheffield Better Care Fund plan 2023-25, and ambitions for utilising pooled budgets to support Sheffield Health and Social Care to deliver the right service, at the right time, in the right place, in response to the changing population and changes to their needs.	
	Guidance was received from NHS England on 4 April and the final submission date is 28 June. Approval is owned by the Health and Wellbeing Board with several key lines of enquiry and reporting between the integrated teams with from the ICB and SCC.	
	The fund doesn't currently include a children's element, but it does include:	
	<ul><li>a) prevention services to help people stay safe and well (including voluntary sector provided care); and</li><li>b) discharge to the right place at the right time.</li></ul>	
	The draft plan is currently with NHS England for comment but Mr Smith was happy to receive any comments from the Board.	
	Ms Latimer noted that the Board's forward plan includes an organisational development session on the Better Care Fund to gain further understanding. The Health and Wellbeing Board will sign-off the plan at an exceptional meeting, prior to the 28 June deadline.	
	The Sheffield Health and Care Partnership Board noted the update.	
PART	4 – ITEMS OF ANY OTHER BUSINESS	
42/23	Items for Escalation to the SY ICB Board	
	No items were noted for escalation.	



ITEM	AGENDA ITEM	ACTION	
NO.			
43/23	Future Governance Arrangements		
	Board members to note that plans for light tough review of current arrangement is to take place for partners to consider in time for discussion at the next meeting.		
	Ms Latimer requested that any comments are fed back on governance arrangements and that there is a requirement to nominate a Vice-Chair, therefore, would welcome any nominations to ensure resilience.		
	ACTION: Ms Latimer to discuss the process with Ms Robertshaw	EL	
44/23	Items of Any Other Business and Forward Plan		
	No items of other business were raised.		
Date a	Date and Time of Next Meeting		
Tuesday 15 August 2023 from 09:30-12:30 – Undergraduate Common Room, Medical Education Centre, Northern General Hospital			

## Item 37/23 Above:

Hospital Discharge Report

https://democracy.sheffield.gov.uk/documents/s60046/9.1%20Report%20to%20AHSC%20Co mmittee%20-%20Hospital%20Discharge%20and%20Urgent%20Care%20Delivery%20Plan.pdf

Appendix 1 Model https://democracy.sheffield.gov.uk/documents/s60047/9.2%20Appendix%201%20-%20New%20Discharge%20Model.pdf

## Papers circulated for information only:

- Paper 1 Oversight Committee Update
- Paper 2 Transformation Committee Update
- Paper 3 HCP Director's Report