#### **Update to Trust Board July 2019**

### Sustainability Committee 18th July 2019

The meeting was held on 18 July 2019 and was chaired by Ben Reid. The meeting was not quorate and any decisions were agreed to be ratified by Trust Board.

#### Digital Strategy

- Presentation provided by NHS Digital . The review had shown that SaTH needs to invest in capacity and also the structure to support its processes as well as the technology. There were 4 critical recommendations (to be done immediately) and 2 essential recommendations (to be completed by August 2019). It was agreed that the issues raised would be added to the Trusts risk register.
- There was a need to understand what is plugged into the Trusts network and what information is being shared. Also governance processes would need to be reviewed. It was agreed that by 1/8/2019 there would need to be solutions in place to address these concerns
- There was an ongoing process in place to undertake an inventory of systems that were connected to the Trusts network, a list of these systems was in the process of being collated and at the time of the meeting this was approx. 330 systems, with further collating work ongoing. There were concerns that some of these systems were a security risk to the Trust.
- Channel 3 had presented a range of options and timescales for the A&E system. There are ongoing weekly calls with
  Director of Finance, Director of Clinical Effectiveness and NHSE to progress these options. Options for the Trust would
  be presented at Trust private board with Chairman's action from Sustainability Committee, due to the tight timescales
  involved with this process. It was agreed that the CEO would inform NHSI and NHSE of this process for decision making.
- The upgrade of Semahelix was entwined with the Windows 10 upgrade. Currently the Trust did not have the resources to support this in the timescales required and were looking to expand the team. There was a request for allocation for the expanded team and it was agreed that options for this would be presented at the next meeting.
- The cost of replacement for IT hardware was in the region of £1.5m which the Trust was not able to afford. However the upgrade was still needed. Funding for this was agreed to not be a capital issue this year and therefore would come from capital from next year's allocation (1/4/2020). It was noted that there would be some PC's equipment that could have the upgrade this year as were compatible.
- Concerns re new proposed storage at Atcham for offsite medical records. No bus route for staff that were not able to drive and remote location so security could be a risk. N Lee reviewing and will feedback to next meeting.
- Fertility Database looking at options to replace the server and back up the data.

## Sustainable Services Programme

- Work underway to look at scope, timeline and critical path summary and programme risks and mitigation to give best delivery of the £312m.
- Options for the ward block being considered and what was affordable.
- Cancer Centre would need to be changed to cancer unit as part of the SSP Programme.
- It was agreed that the savings associated to EPR would be de-coupled from SSP and would then be brought back together at a later date.
- There would be a tendering process undertaken for technical project support and it was requested that when this took place it took into consideration a more consolidated approach to include architects and project support being as one. It was noted that larger architects are able to offer a number of services under one roof making it easier to communicate with one person other than with several.
- At SSP Steering Group there had been approval for the SSP to change its name to better reflect the programmes
  objectives and this had been agreed to be Hospital Transformation Programme (HTP). The Chair requested that this
  change was approved by the STP to ensure that the Trust had stakeholder approval

### Pathology Network

- The pathology team and LTS Health had completed a project as to who was the best network partner for SaTH. The report had been reviewed by the pathology steering group and made the recommendations that UHNM was the preferred pathology network partner.
  - The Committee accepted the recommendations and was agreed that a paper would be presented to Executive Committee for approval and would then be endorsed by Trust Board for approval.

# <u>Transforming Care Production System/Guiding Group Update</u>

• The KPO Lead position remains vacant, which meant that the KPO Team was not up to full capacity. – The Chair confirmed that he would discuss this with the CEO and feedback to the KPO team/next meeting.

# Capital Programme

The Committee approved

- The rolling replacement programme for SaTH Dialysis Machines.
- Medical Engineering Services Increase in contingency allocation It was requested that this was also reflected in the contingency funding and to confirm how much capital funding is remaining.