Improving lives

Sheffield Health Partnership University
NHS Foundation Trust

Public Board of Directors
Item number: 27
Date: 25 November 2026

Confidential/ public paper:	Public
Report Title:	**Board Committee activity reports**
Author(s)	Corporate assurance team
Accountable Director:	Executive leads and the chairs of the assurance committees
Presented by:	Olayinka Monisola Fadahunsi-Oluwole, non-executive director, chair of mental health legislation committee Heather Smith, non-executive director, chair of quality assurance committee Dean Royles, non-executive director, chair of people committee Owen McLellan, non-executive director, chair of finance and performance committee Ian Lichfield, non-executive director, chair of audit and risk committee
Vision and values:	The Trust vision is **to improve the mental, physical and social wellbeing** of the people in our communities. The role of each committee is to support the Trust Board by ensuring the strategic priorities are met. This ensures that **we keep improving**, whilst we work together so **we are inclusive.**
Purpose and key actions:	This report highlights key matters, issues, and risks discussed at committees since the last report to the Board in September 2026 to alert, advise and assure the Board.
Executive summary:	Each committee has considered issues under three key categories in their alert, advise, assure (AAA) reports. **Alert:** items from the from the meeting that require highlighting positive or negative and how it is being actioned. **Advise:** summary of the agenda items raised, and any new areas of monitoring or existing monitoring where an update has been provided to the committee and there are new developments. **Assure:** specific areas of assurance received warranting mention to Board or for noting key reports received at an assurance committee. The AAA reports for the Board subcommittees are attached at the **appendices.** Appendix 1 - **Quality and assurance committee** AAA report from October 2026 Appendix 2 - **People committee** AAA report from October 2026 Appendices 3 - **Finance and performance committee** AAA report from AAA report from October, November 2026 Appendix 5 **Audit and risk committee**

	AAA report from October 2026 Minutes from board assurance committees will be shared with the board via iBabs and non-confidential minutes are available to the public upon request

Which strategic objective does the item primarily contribute to:					
Effective Use of Resources	*Yes*	**X**	*No*		
Deliver Outstanding Care	*Yes*	**X**	*No*		
Great Place to Work	*Yes*	**X**	*No*		
Reduce inequalities	*Yes*	**X**	*No*		

What is the contribution to the delivery of standards, legal obligations and/or wider system and partnership working.	
• Well-Led Development plan that effective governance systems are in place to assess, monitor and improve the quality and safety of services. • Supporting principles within the Code of Governance for NHS provider Trusts (April 2023) issued by NHS England to help NHS providers deliver effective corporate governance, contribute to better organisational and system performance and improvement, and ultimately discharge their duties in the best interests of patients, service users and the public, through effective flow of information between the committees and the Board.	
Board Assurance Framework (BAF) and corporate risk/s:	The committees have oversight of all BAF and corporate risks. Different committees offer assurance on a range of these including the management of associated risks.
Any background papers/ items previously considered:	Reports highlighted in the alert, advise assure reports have been received at all the assurance committees: • Quality assurance committee • People committee • Finance and performance committee • Audit and risk committee
Recommendation:	The Board of directors are asked to: • **formally note the minutes** of the committee meetings being presented to the Board • **receive the alert, advise, assure** (AAA) committee activity reports within the appendices for **assurance** and **discussion**.

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Alert Advise Assure
Quality Assurance Committee:
Date: 7 October 2026

Alert:
None

Advise:

Committee Relevant Update

- Governance maturity continued to improve during August and September 2026, with increasing focus on demonstrating measurable improvements in patient outcomes, safety, experience and reduction of health inequalities.
- Restrictive practice remains one of the Trust's most significant patient safety concerns. Whilst recent increases were largely associated with a small number of highly complex patients who have now transferred to more appropriate settings, continued oversight is required.
- Executive Quality Governance Group (EQGG) identified a recurring challenge in demonstrating that learning from incidents, mortality reviews, complaints and quality improvement activity is translating into measurable improvements in outcomes, safety and experience. The proposed Mortality Surveillance and Learning from Deaths Improvement Programme is intended to strengthen organisational learning and impact evaluation.

Medicines Safety Report Q4 (January 2026- March 2026)

- Controls and improvement programmes are established, and no incidents resulted in major or catastrophic harm.
- A depot form has been introduced and rolled out in response to the longstanding risk, allowing team members and senior staff to see what is due, what has been completed and what is scheduled next.
- The committee requested medication incidents to be expressed against the total number of medication administrations and to include denominators for all administrations and expansion to the action table to include expected data, milestones, target or goal state and evidence of impact
- The committee noted whilst there are ongoing concerns in some areas there is evidence of an emerging rounded plan in place with deliverables.

Suicide Prevention in England Annual Report

- The overall position provides moderate assurance, with several identified improvement actions that, once embedded and evidenced, are expected to strengthen assurance further and support progression towards good assurance
- Suicide-prevention and learning-from-deaths work will initially map outcomes against postcodes and social deprivation, alongside equality data.
- The committee commended the report's dedicated learning section and its table linking learning sources, changes made, status, effectiveness measures and timescales, requesting an additional status/outcome column going forward.
- The committee **recommended** the report for **onward submission** to the Board of Directors

Safeguarding Annual report 2025/2026

- The Trust has maintained effective safeguarding arrangements throughout 2025/26 and continues to demonstrate compliance with its statutory safeguarding responsibilities, with one exception: Section 42 enquiries. As of September 2026 (following management focus) there were no outstanding Section 42 enquiries, compared with approximately 14 around ten weeks earlier.