

The Clatterbridge Cancer Centre NHS Foundation Trust

BOARD OF DIRECTORS MEETING PART ONE – PUBLIC SESSION

**Wednesday 30 September 2020 at 09:00am
CCC-Liverpool and Webex**

Present:	Kathy Doran (KD)	Trust Chair
	Alison Hastings (AH)	Non-Executive Director
	Mark Tattersall (MT)	Non-Executive Director
	Geoff Broadhead (GB)	Non-Executive Director
	Elkan Abrahamson (EA)	Non-Executive Director
	Liz Bishop (LB)	Chief Executive Officer
	James Thomson (JT)	Director of Finance
	Jayne Shaw (JSh)	Director of Workforce & OD
	Joan Spencer (JSp)	Interim Director of Operations
	Sheena Khanduri (SK)	Medical Director
	Sarah Barr (SB)	Chief Information Officer
In Attendance:	Jane Wilkinson	Lead Governor
	Angela Wendzicha (AW)	Associate Director of Corporate Governance
	Karen Kay (KK)	Deputy Director of Nursing (for Sheila Lloyd)
	Mike Varey (MV)	RCN Staffside
	Jon Hayes (JH)	
	Staff Story	Dr Noor -ul -Ain Tariq (NT), Willhermina Alfama (WA), Beauty Appleyard (BA), Evangeline Kunaka (EK) and Hannan Hussain (HH)
Observers:	None	

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	Opening Matters	
P1/128/20	Chair Welcome and Note of Apologies The Chair welcomed everyone to the Board meeting with apologies noted from Sheila Lloyd	
P1/129/20	Declaration of Board Members' and other attendees interests concerning agenda items Declarations of interests were received from the following: <ul style="list-style-type: none"> • Mark Tattersall – Nominated Non-Executive Director for PropCare • Geoff Broadhead – Director of CPL • James Thomson – Executive Lead for PropCare and CPL • Angela Wendzicha – Company Secretary for PropCare and CPL 	
P1/130/20	Minutes of Previous Meetings: The Board approved the minutes of the meeting held on 29 July 2020 were agreed as an accurate record of the meeting.	

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P1/131/20	<p>Matters Arising</p> <p>Actions were agreed to be either complete, on the Agenda or not yet due with the following updates approved by the Board:</p> <p>P1-111-20: Covid-19 Recovery: The Board approved the revised date for the Digital Strategy to January 2021 to allow for alignment to the next 5 Year Strategy.</p> <p>P1-117-20: Adult In-Patient Survey: Food Audits – KK provided a verbal update to the Board advising that a minimum of six patients per ward have been involved in the audit which have been led by PropCare with assistance from the volunteers. The feedback is good with reports of food presentation being superior to other Trusts with a focus on nutrition. KK informed the Board that an action plan is being drafted to address the findings.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the verbal update and requested sight of the food audits at the October Board. 	KK
P1/132/20	<p>Staff Story: BAME Staff Experience at CCC.</p> <p>KK introduced the item highlighting the paper provided by Tabettha Dorman (TD) describing her experiences; KK further added that she had previously had a number of discussions with TD who had since left the Trust but wanted to share her experiences with the Board and we will thank her formally following Board. KK provided the context to the session in that discussions had taken place at previous Board meetings in relation to acknowledging the contribution of our BAME staff.</p> <p>The Board welcomed Dr Noor -ul -Ain Tariq (NT), Willhermina Alfama (WA), Beauty Appleyard (BA), Evangeline Kunaka (EK) and Hannan Hussain (HH) to the Board meeting.</p> <p>NT began by informing the Board that at times she feels invisible at CCC providing examples to the Board relating to both patients who she felt do not give her a chance to speak to them before they are asking why they cannot see another doctor and staff who do not ask if she would like a drink when they ask the white doctor stood next to her. However, despite this, NT felt that the Trust does embrace diversity and acknowledged her own Clinical Director whom she believes approaches staff based on their capabilities and not their ethnicity.</p> <p>NT added that some organisations have BAME networks which provide support. JSh added that the Trust had tried very hard to set the networks up but to date have not been able to get staff engaged with them which has been disappointing. In addition, the Board discussed unconscious bias training and agreed to scope the introduction of this for the Trust.</p> <p>WA added that she had been in the Trust for one year and from her perspective of coming from a London Trust which was more multi-cultural, she has noticed that when she is with a white colleague, that colleague will be approached or addressed first, even if the answer to a question has come from her.</p> <p>WA added and the Board discussed the fact that talking about BAME as a</p>	JSh

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	<p>concept may increase social disparities. HH informed the Board of her feelings when being one of only four members of staff being asked directly by the Trust to have a photograph taken when the Liverpool Premier League Trophy came to the Trust; HH further added her thoughts as to whether she was being chosen for her qualities or because she is a person of colour. HH added that small things build up and make you feel very lonely for example when patients have said something to her adding that not once has she been told by colleagues that her feelings are valid.</p> <p>LB thanked the staff for their time with an apology to HH for feeling singled out in relation to the photo opportunity which was not the intention. LB added that the overall approach of the Executive team is to promote and encourage inclusivity and further acknowledged that we have tried to establish BAME network groups but have not been successful. However, as an organisation we are not that diverse at the moment but that is expected to change with the Liverpool move.</p> <p>In addition, LB emphasised that we have policies and procedures in place to support against racial abuse and we want to hear from staff and assure staff we have escalation processes in place as we do not tolerate racial abuse from staff or patients.</p> <p>TJ reflected that the discussion had been enlightening and sobering and whilst systems and processes are in place in the Trust, there is still more work to do. KD added that an assembly has been established in the North West which looks at best practice around the region and SL is the Trust representative on this.</p> <p>On behalf of the Board, KD thanked the team for attending and sharing their experiences and invited them to return to Board in 12 months to provide an update on what we hoped would be an improved environment.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Thanked the staff for their attendance • Requested the Trust scope unconscious bias training including for Board members 	<p>AW</p> <p>JSh</p>
P1/133/20	<p>Chair's Report</p> <p>The Chair informed the Board that both Steve Warburton and Bill McCarthy had visited the new hospital in addition to the former Chair, Phil Edgington and Ray O'Rourke noting that without exception all were very impressed with the building.</p> <p>In addition the Chair informed the Board of a range of meetings with NHSE/I, the STP and the Liverpool Chairs with the arrangements for funding post Covid high on the agenda. It was noted that the Medical Director of NHSE/I very much welcomed the contribution of the three Cancer Alliances emphasising the need for all Trusts across the network to work together.</p> <p>The Board were updated in relation to the recent Consultant interviews with two successful appointments being made and the Board will receive more detail on those appointments in due course.</p>	

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	The Trust Board: <ul style="list-style-type: none"> • Noted the Chair's update. 	
P1/134/20	Chief Executive's Report The CEO informed the Board that a number of local MPs had been able to safely carry out some visits to the areas in the new hospital that are currently vacated. LB highlighted that the majority of the art work is now in place in the new building and suggested that Lesley Greene, Public Arts Consultant be invited to the next Board to present an overview of the art work in place. The Trust Board: <ul style="list-style-type: none"> • Noted the update and • Agreed to invite Lesley Greene to the next Board. 	
P1/135/20	Updates on Walkabouts KD informed the Board that, due to the current circumstances we have not been able to carry out our joint NED and Governor walkabouts and therefore requested SL and SK take on this responsibility and report back to Board monthly. SK informed the Board that there has been a focus on CCC-L and that patients liken the new hospital to a '5 star hotel'. It was acknowledged that the nursing staff have found it a different experience and have provided some useful comments in how we can make it more functional. SK further highlighted that the transition of Haemato-oncology went very smoothly with the teams settling in very quickly. In addition, the IT team have been very responsive with upgrading the mobile connectivity which will be welcomed by a number of colleagues. SK informed the Board that we have introduced 'walk and talk' sessions to support serious incident investigations. In addition, we have increased support for junior doctors and recently welcomed medical students who have fed back they are receiving good experiences of out-patients and wards. In relation to the recent round of Consultant appointments, we are now seeing high calibre candidates with LB adding that we have previously been unable to appoint to the Bone Marrow Transplant Clinical Director post which was a significant risk to us and the post is imperative for our JACIE accreditation. KD requested this item to remain as a standing agenda item with JW requesting the same overview be provided at the Council of Governors. The Trust Board: <ul style="list-style-type: none"> • Welcomed the feedback from walkabouts and • Agreed to this being a standing agenda item and included on the next Council of Governors 	
P1/136/20	Integrated Performance Exception Report: Month 5 JSp introduced the report, highlighting the following in relation to Access and Efficiency:	

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	<p>a) The Standard Operating Procedure has now been activated relating to repatriation delays</p> <p>b) Bed occupancy is currently under target</p> <p>c) There is good recovery across the SACT and radiotherapy activity in addition to recovery of the bone Marrow Transplant service which had been reduced in preparation for the haemato-oncology move.</p> <p>GB informed the Board that the Performance Committee had received a deep dive report into haemato-oncology and the Committee was reassured that actions were being taken to support the services.</p> <p>LB added that JSp and the team had worked hard to increase the diagnostic activity including providing mutual aid to the system with 450 CT scans being completed for Liverpool University Hospital during July and 10 scans a day for the Countess of Chester.</p> <p>Quality</p> <p>KK provided the Board with an overview of the exception report highlighting the two Serious Incidents reported during August, both of which relate to medicine management in addition to the two IRMER reportable incidents.</p> <p>MT noted that medication incidents are featuring on a number of reports including the Quality Committee Chair report. MT questioned whether there are environmental issues or CPL system issues. KK informed the Board that it is a combination and that Quality Committee will be sighted on these incidents.</p> <p>MT further highlighted that medication incidents have been the subject of the CQC whistleblowing incidents with TJ adding that this will be kept under review at the Quality Committee. KD added that this is an example of the system working well with the Board seeking assurance and remitting this to TJ as Chair of the Quality Committee.</p> <p>Workforce</p> <p>JSh provided an overview to the Board highlighting the following:</p> <p>a) Sickness: The Trust remains on target and our performance across the system is good.</p> <p>b) Anxiety/Stress/Depression remains the highest reason for staff sickness with some work related and relating to home circumstances.</p> <p>c) PADR: We have previously experienced low performance at 71% when the report was created. A significant amount of work was put into improving this and as of today our performance is 93%</p> <p>The Board congratulated the team on the good performance around PADR compliance.</p> <p>Research</p> <p>SK informed the Board that the metrics relating to research will be reinstated from next month as 60% of the trials will have been re-instigated by the end of the week. SK further informed the Board that a total of 429 patients have been recruited into studies and that the Trust is involved in the SIREN study. In addition, Professor Palmieri has been awarded £340K grant for a cancer</p>	

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	<p>and Covid study. In addition we have recently recruited Professor ChristianOttensmeier with TJ adding this is a very positive appointment for the Trust.</p> <p>KD welcomed the update on research and highlighted that a desire for enhanced board awareness around our research agenda had featured on every NED appraisal and the Board agreed to include this in the Board work programme.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the report 	AW
P1/137/20	<p>Cheshire and Merseyside Cancer Alliance</p> <p>JH attended Board as the Managing Director for the Cheshire and Merseyside Cancer Alliance.</p> <p>JH informed the Board that cancer services are under pressure and the Alliance is working with the in-Hospital Cell and partners to try and restore services, mutual aid and increase public confidence to encourage them to return to hospital services.</p> <p>It was noted that urgent cancer referrals are one third of the normal levels and that surgical capacity is similar to that of pre-Covid levels however skin and urology surgery is being supported with mutual aid. In addition, it was noted that the Cheshire and Merseyside Cancer Alliance has been noted to be one of the best performing Alliances.</p> <p>The Board were further informed that there are an increasing number of endoscopy patients waiting more than 62 days for a diagnosis.</p> <p>JH further advised the Board of the emerging risks to be aware of in the resurgence of Covid and the move into the second wave. LB has written to all parties in the system for them to maintain cancer services wherever possible.</p> <p>It was further noted that we are maintaining the surgical hub arrangements and there has been a £5.4m capital investment secured by the Alliance for investment in Endoscopy.</p> <p>In addition, the Communications team are working hard to help maintain public confidence throughout this period.</p> <p>KD noted the comprehensive report and the significant leadership shown by LB in leading the work across Cheshire and Merseyside.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report and • Commended the work of the Cheshire and Merseyside Cancer Alliance 	

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P1/138/20	<p>Finance Report: Month 5</p> <p>JT provided an overview of the financial position as at Month 5 highlighting the following:</p> <ul style="list-style-type: none"> a) The financial arrangements previously put in place from April to July whereby the Trust is funded on a cost basis by way of a top-up has been extended to the end of September. b) The financial position at the end of August was a deficit of £406K against a planned deficit of £461K. c) Cost Improvement Programme: Officially Trusts are not required to deliver the CIP but we are starting to pick these up within the Trust. d) Discussions remain ongoing in relation to the block funding e) The Trust cash position remains healthy <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report and the Trust's financial position. <p><i>GB left the meeting at this point</i></p>	
P1/139/20	<p>CCC-Liverpool: Phase 2 Progress Report</p> <p>TP provided the Board with an overview of the current position highlighting that the Haemato-oncology service has successfully moved into the Liverpool hospital.</p> <p>Work remains ongoing with the Café and the aseptic pharmacy unit with both these matters being dealt with as business as usual. In addition, the work relating to the Service Level Agreement with the Liverpool Hospital remains ongoing.</p> <p>EA sought assurance that the walkway has been used with JSp confirming the same. In addition, MT highlighted the time it is taking to finalise the Service Level Agreements. TP highlighted that Covid has caused some of the delay but the target for completion is now the end October 2020. In addition MT sought assurance that the issues relating to switchboard have been resolved. TP added that there have been issues on both sides and staff have been asked to record any incident on the Datix system.</p> <p>The Board discussed and agreed that given the Programme Board has been stood down and the remaining issues are being reported into the Trust Executive Group this is the final report to the Board; the Board being kept updated via the remaining reporting structures.</p> <p>KD requested that a date is set for the completion of all the SLA's and legal agreements and that the Board is notified of this.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the Report • Thanked TP and his team for the hard work and • Requested a date for completion of all legal matters. 	
P1/140/20	<p>Annual Report – WRES and P1-141-20 Annual Report - WDES</p> <p>JSh provided an overview of the reports, informing the Board that we have a statutory duty to publish our Workforce Race Equality Standard data and</p>	

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	<p>associated action plans in addition to our data around our Workforce Disability Equality Standard. It was noted that the statistics within the reports have been generated from information on our system.</p> <p>The WRES and the Workforce Disability Equality Standard both have specific metrics to allow us to compare experiences of staff. The reports are based on a national template and have to be published by the end October 2020. JSh added that we scored in the top quartile for Equality, Diversity and Inclusion with recognition there is more work to do. We currently have a vacancy despite interviewing and making an offer; the plan is to work collectively with Alder Hey to fill this gap across the system.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of both reports and • Approved the WRES and WDES Annual Reports 	
P1/141/20	<p>Annual Report: WDES</p> <p>This agenda item was taken in conjunction with the item above.</p>	
P1/142/20	<p>New Consultant Appointments</p> <p>JSh introduced the report highlighting the recent Consultant appointments.</p> <p>TJ added that it was important that the Trust now delivers on what we aspire to do.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted and welcomed the new appointments to the Trust. 	
P1/143/20	<p>Flu Campaign Plan and Trajectory</p> <p>KK introduced the report confirming it provides assurance that the Trust has a robust flu campaign in place that vaccines have arrived and will be available from next week.</p> <p>It was noted that Board members can contact KK should they wish to receive the flu vaccine.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report. 	
P1/144/20	<p>Cancer Patient Experience Survey 2019</p> <p>KK provide an overview of the findings highlighting that the results had been received in June 2020 and that we have maintained an overall score of 9 for patient experience which is excellent.</p> <p>KK confirmed that an action plan is being generated and will be presented at the Committees in October.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Discussed and noted the report 	

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P1/145/20	<p>Quality Committee Chair Report</p> <p>TJ provided an overview of the report informing the Board of the following:</p> <ul style="list-style-type: none"> a) AW reminded the Committee of the need to ensure the Quality Committee receives assurance around compliance with the statutory Duty of Candour for our Serious Incidents as referred by the Performance Committee; the Committee received the assurance from SL through the IPR report. b) Research and Innovation: TJ alerted the Board around the detailed discussion relating to the lack of external biopsy service which is preventing the opening of a number of studies and the associated potential negative impact on our ECMC renewal. c) CQC Whistleblowing: The Committee noted this matter had been dealt with and noted it is on the Board agenda d) Medication Incidents: The Committee noted the increase in medication incidents and the Committee has requested sight of the outcome of the investigation. <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	
P1/146/20	<p>Performance Committee Chair Report</p> <p>In the absence of GB, the Board noted the content of the report.</p>	
P1/147/20	<p>Care Quality Commission Whistleblowing Outcome</p> <p>KK provided an overview of the report informing the Board of two separate occasions whereby the CQC have been contacted by individuals raising concerns.</p> <p>Both matters were discussed at Quality Committee in September and it was noted that both enquiries have been closed by the CQC.</p> <p>Discussion ensued in relation to the various routes staff can raise concerns within the Trust such as through their managers, staff side, Freedom to Speak Up. KD sought assurance that managers are sighted on the issues raised with KK assuring they were and are also sighted on the action plans.</p> <p>It was further noted that whilst we would prefer for staff to raise any issues they have internally, they equally have a right to go outside the Trust.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	
P1/148/20	<p>Annual Report</p> <p>AW informed the Board the report was for noting given the delegated authority to Audit Committee to approve.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	
P1/149/20	<p>Board Committee Review</p> <p>AW provided the Board with an overview of the paper reminding the Board</p>	

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	<p>that the current structure has been in place for over 12 months and we had agreed to review at this time. AW further informed the Board that MIAA had carried out a review on the effectiveness of the Committees and found Substantial Assurance.</p> <p>AW set out the next stage for the review as detailed in the paper which the Board agreed.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report and • Agreed with the proposal for completing the review. 	
P1/150/20	<p>Board Meeting</p> <p>The Board agreed the correct detail had been provided at Board although there were some issues with connectivity.</p> <p>The Chair thanked the Board for their input.</p>	
P1/151/20	<p>Any Other Business</p> <p>None raised</p>	
	Date of Next Meeting: Wednesday 22 October 2020 via Webex.	

Signed:

Kathy Doran

Chair

Dated: