

DRAFT
MINUTES OF THE TRUST BOARD MEETING – PART ONE
HELD ON WEDNESDAY 5TH JULY 2017
IN JKD CONFERENCE ROOM

Present	:	Mrs W Williams Mr A Cannell Mrs Y Bottomley Miss H Porter Mr B Schofield Dr P Kirkbride Mr G Black Mr P Edgington Prof. M Baker Mr D Teale	Chair Chief Executive Officer Deputy Chief Executive/Finance Director Director of Nursing and Quality Director of Transformation and Innovation Medical Director Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director
In Attendance:		Mrs A Leather Mrs H Bebbington Mrs A Traynor	Corporate Governance Manager Director of Workforce & OD Associate Director of Strategic
Communications & Marketing		Mrs S Jones Ms R Ellison Ms S Clough Ms S Hewson Ms C Thomas	Secretary/Minutes Trade Union Representative Critical Care & MET Team Critical Care & MET Team Public Governor

Mrs Williams welcomed the Board and introduced Ms Carla Thomas, Public Governor to the meeting as an observer and Ms Sara Clough and Ms Suzanne Hewson from the Critical Care & MET Team for items P1/150/17 and P1/151/17 only.

P1/150/17 Patient Story

The Patient Story was presented to the Board.

The female In-Patient was being treated for sickness and nausea symptoms following a course of Radiotherapy. The Patient has secondary Bone and Liver cancer and requires Radiotherapy and Chemotherapy.

The Patient was very complimentary about her experience, finding it hard to be critical about anything. The Patient found the food ok, she liked the soup, it was hot and ok. The Staff had been very attentive, introducing themselves, explaining treatments and next steps, even asking about the Patient's family which the Patient had really appreciated. Whilst an In-Patient, the Patient needed to attend Radiotherapy appointments and commented that she hadn't had to wait long at each appointment and the Staff and Porters had been chatty and attentive.

During her time on the ward, the Patient hadn't seen her own consultant but had seen a consultant each day. It had been explained to the Patient that this was the process, there was a 'Consultant Of the Week' who would do the ward round each day and report back to

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the Patients own consultant with any issues and progress updates.

The Patient and her family had commented how clean they found CCC compared to other hospitals. Overall the Patient was very pleased with the care she had received so far.

When asked what she thought about the single room accommodation for In-Patients in the new hospital in Liverpool, the Patient was very balanced and recognised there is for and against single rooms. Although it's good to have privacy, it's also nice to be able to chat to other patients going through the same journey and so, thought the proposed communal area for socialising in the new hospital was a good idea and she would use it.

RESOLVED:

The Board of Directors resolved:

- To note the contents of the Patient Story.

P1/151/17 Tell the Board

Mrs Williams welcomed Sara Clough and Suzanne Hewson to the meeting and invited them to explain to the Board their role.

In 2009 the Critical Care and MET team were formed as an outreach services for unwell patients and lead resuscitation at CCC. Their role is to identify deteriorating patients and trying to prevent them from becoming 'End of Life'. Together they have created a tool to regularly check on patients by using clinical observations and giving each observation a score. The scores are added together to give a total and the total then determines an action. This is a prevention tool to recognise patients who need acute care.

Two thirds of patients that the team are called to assess are not ward based but are attending for appointments such as Out-Patients. The ambition of the early warning system is to train all staff and give them the encouragement and confidence to assess patients themselves, allowing them to make appropriate decisions and deliver treatments to prevent the patient becoming more unwell. The aim is to improve the patient's journey.

Mrs Williams asked Sara and Suzanne what timeframe the patient can expect a response from this service. The guidelines give the team 15 minutes to respond but the average time that the MET team responds to calls is 2 minutes. All staff are aware that they can always call the team to ask any questions that they may have as it is a judgement and the score from the observations is only an indicator of symptoms.

The team have met with the outreach team at the Royal with a view to working together when CCC moves to the Royal and with the newly transferred HO service. Both teams are beginning to develop relationships and will look to rotate their shifts. The team at the Royal are keen to support the CCC staff.

Mr Cannell asked what the outreach service looks like at 2am on Sunday morning, are the Patients as safe as during the week days?

The service is 24/7, it is a smaller team but it is always covered by an Advanced Practitioner Nurse.

The Team would like to do more teaching with all staff and already teach Advanced Life Support courses.

The Trust currently has 2 Step-Up beds on Conway Ward which are built to a full level 2 monitored beds with dedicated nurse led care. These give palliative patients more

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respiratory and monitored care when they need it to hopefully prevent them becoming 'End of Life' patients. Suzanne and Sara would like to increase the number of these Step-Up beds in the Trust.

Mrs Williams thanked Sara and Suzanne for their presentation and they left the meeting.

RESOLVED:

The Board of Directors resolved:

- To note the contents of Tell the Board

P1/152//17 Apologies

Apologies were received from Mrs Alison Hastings and Mr Stephen Sanderson.

P1/153/17 Minutes of Previous Meetings:

The Board of Directors agreed the minutes of the 9th June 2017 to be a true and accurate record of the meeting.

P1/154/17 Matters Arising

P1/063/17 – this action was included as agenda item P1/166/17 and so can be recorded as complete.

P1/066/17 – this action was recorded as complete

P1/082/17 – this action was recorded as complete

P1/082/17 – this action was recorded as complete

P1/155/17 Declaration of Board Members' and other attendees interests concerning agenda items.

No declarations concerning agenda items were made.

P1/156/17 Chair's Report and notification of any urgent matters for consideration

No update was presented to the Board.

P1/157/17 Chief Executive's Report

Mr Cannell introduced his report by confirming to the Board that the contract with Laing O'Rourke had now been signed and work had started to build the new hospital. Johnny Vegas and Ian Snodin had marked the occasion on site with Mrs Bottomley and Mrs Traynor in conjunction with the Clatterbridge Charity with a 'Sod' Cutting PR event on 3rd July 2017. A further major internal and external Communications programme will follow.

Mr Cannell asked his colleagues to update the Board on the current key issues.

STP Update

Mr Cannell advised the Board about forthcoming changes to the Leadership of the Cheshire & Merseyside (C&M) 5YFV (STP) – five year forward view, Sustainability and Transformation plan. Since its inception, The Cheshire & Merseyside Five Year Forward View (STP) has been chaired by Neil Large, Chair of the Liverpool Heart and Chest Hospital NHS Foundation Trust. Neil has felt it would be appropriate to transfer that responsibility to a Chair who was independent of the Cheshire and Merseyside System and the rationale for this is to ensure that the role was not subject to any conflict of interest, whether real or perceived, and also to bring a truly objective (external) perspective to the task. Andrew Gibson will take over as Chair bringing capabilities and energy to a very demanding role.

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The STP Lead, currently held as an interim post by Louise Shepherd, will now be formalised to drive forward the agenda. Louise has taken the decision not to put herself forward for the role due to her existing significant commitments. The proposal to formalise the posts responsibilities and recognise the significant commitment that is required of the role if it is to provide the leadership necessary to the Partnership going forward. Mr Cannell will bring an update back to the Board with any further details of the new lead.

Mr Cannell wished to note his thanks on behalf of the Board to Louise and Neil for their hard work and extensive input moving things forward so far. He also advised the Board of an Inaugural meeting on July 5th at The LACE Conference Centre in Croxteth, Liverpool for the 5YFV System Leadership Board to take the collaboration to the next level and build on the commitment from across Cheshire and Merseyside to develop the thinking and plans. Mr Cannell and Mrs Williams were unable to attend due to this Board meeting but Mr John Andrews, Deputy Director of Finance was attending on their behalf.

LHP

Mr Cannell advised the Board that KPMG have been commissioned by the LHP Board to undertake a review of effective working relationships across the community and how to use it to improve vision and strategy.

Medical Staffing

Dr Kirkbride reminded the Board of the short term plan to cover all patient clinics during the summer holiday season until September which included cross covering , working in teams, taking on extra responsibilities and consolidating services. Mr Kirkbride reiterated that this is not an early implementation of the clinical model but it is testing the long term plan. By mid to late Autumn, the Trust will have recruited Consultant Pharmacists, Nurse Consultants and Advanced Nurse Practitioners and Medical Consultants. The Trust is actively recruiting in different ways from past processes. They are looking and advertising for much more generic job descriptions i.e. looking for any site groups and experience so the potential candidate will be much more flexible with additional income attractions. The Trust is trying to use existing contacts of current medical staff and approaching registrars who left recently and may want to come back into a different role. Dr Kirkbride is hopeful the Medical Consultant posts will be filled by December 2017/ January 2018.

Mr Black asked if other Trusts are using similar recruitment techniques. Dr Kirkbride advised that CCC are using new techniques and the roles we are looking to fill are relatively new posts for the UK.

Mr Teale asked if the Trust had a 'plan B' if more staff resign. Dr Kirkbride reiterated that resources are currently stretched and although all clinics are being covered, it is taking a huge amount of planning to do so. Mr Cannell advised the Board that the Trust would do what they can if further vacancies arise and would be careful not to lose any of the goodwill that staff are currently offering.

Dr Kirkbride confirmed he would include an update on the situation in his September update report for the Board.

Mr Cannell thanked all the medical staff, Junior Doctors, Radiotherapy and admin teams for all their efforts and hard work.

RESOLVED:

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The Board of Directors resolved:

- To note the content of the report.

Improving Quality

P1/158/17 Infection Control Annual Report

Miss Porter presented the Infection Control Annual Report for the Board's information and comment. She highlighted that although the Trust had exceeded the *Clostridium difficile* infection target of 1, none of the cases were deemed due to a lapse in care or cross infection in the Trust.

Mrs Williams noted the importance of the impact of hand hygiene. Miss Porter added it is an observed practice with this particular process above the national benchmark. Mrs Williams asked for the score and the benchmark information to be included in the next report. **HP**

Mr Teale and Mr Edgington both queried points raised in 1.3.2, page 6 of the report. Mr Teale asked if there was an action plan and Mr Edgington asked about the 'clutter' and lack of storage space mentioned. Miss Porter explained that issues such as these tended to arise where CCC had to share space with another Trust at the clinics. Other Trust Estate teams had been slow to respond to improvement requests.

RESOLVED

The Board of Directors resolved:

- To note the positive performance with regard to infection prevention and control.

P1/159/17 Integrated Performance Report

The Integrated Performance Report was presented to the Board for their information and comment.

Mr Schofield updated the Board on the delivery of the 62 day cancer target with a detailed action plan on how CCC will achieve the target set by NHS England. The Trust is under immense pressure to achieve the post re-allocation target of 85% by September with the added pressure of changing from 42 day to day 38. CCC is one of five Trusts under significant focus from NHS England, identified as using the pre-allocation position. The action plan requires real time tracking and identifying persistent late referrals.

Dr Kirkbride assured the Board that each patient that has to wait or has gone over the 62 day target has had their case reviewed and to date, not a single patient has been adversely affected. It is a very complex pathway but the aim is to improve the service and keep the patients safe.

The consequence of not achieving the target will be a loss funds but this is not about any individual Trust but the all the alliance providers working together.

RESOLVED

The Board of Directors resolved:

- To note the report and approve the actions being taken to address highlighted areas.

MAINTAINING FINANCIAL SUSTAINABILITY

P1/160/17 Finance Report

The Finance report was presented to the Board for review.

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The Trust reported a reduced deficit of £51k against a planned deficit of £154k. Mrs Bottomley highlighted to the Board the Activity data and that the contract with NHS England, Specialised Commissioning for 2017/18 – 2018/19 has been signed and all the paperwork being finalised.

CIP target is slightly below plan however a number of additional income generating schemes had been identified to offset this shortfall.

RESOLVED

The Board of Directors resolved to:

- Note the satisfactory financial performance and planned deficit for month 2.
- Note the overall financial risk rating of a 1 under the risk assessment framework,
- Note the Trust has delivered its NHSI control total of (£532k), with an actual year to date comparator of £113k.

TRANSFORMING HOW CANCER CARE IS PROVIDED ACROSS THE NETWORK

P1/161/17 Haemato-Oncology Update

Mr Schofield confirmed the H-O service transfer as of 1st July had been a smooth transition. On Thursday 13th July, there is a welcome event at The Royal for the new H-O staff with the Executive Team, followed by a series of induction sessions on various dates. Two future milestones will be the first payday and July month-end. In case of any issues or queries, there will be a pop-up clinic in the Royal so staff have the opportunity to raise any queries or issues with pay.

Mrs Williams congratulated Mr Schofield on a great effort.

RESOLVED

The Board of Directors resolved to:

- Note the information.

GOVERNANCE AND ASSURANCE

P1/162/17 Finance & Business Development Committee – 28th June 2017

Mr Edgington presented the Finance & Business Development Committee update report from its meeting of 28th June 2017. He highlighted two areas for information – Agency spend and PET CT.

RESOLVED

The Board of Directors resolved:

- To note the report and detail any requests for further scrutiny or assurance.

P1/163/17 Quality Committee – 20th June 2017

The Quality Committee update report from its meeting of 20th June was presented to the Board for their information and comments. Dr Kirkbride highlighted that the Serious Illness programme is being funded from the Medical Director's budget as there is currently no other funding available. Dr Kirkbride will continue to look for alternative funding.

RESOLVED

The Board of Directors resolved:

- To note the report.

P1/164/17 Board Assurance Framework 2017/18 – Bi-Monthly Update

Miss Porter presented the Board Assurance Framework to the Board and highlighted the format will change in the future with the introduction of the Risk Escalation framework.

Mrs Williams asked Miss Porter to include the mitigation to reduce the risk and show the tri-angulation with Workforce & OD. Currently the information looks as though there is extensive risk relating to recruitment but when discussed, there is assurance provided.

HP

RESOLVED

The Board of Directors resolved to:

- Approve the Board Assurance Framework 2017/18 updates.

P1/165/ Strategic Plan Actions Bi-Monthly Update

The Trusts Business Plan 2017/18 was presented to the Board to update on the delivery of its actions.

The majority of actions have commenced and progress is on target.

Mr Black asked how detailed is the plan to move staff to the new building. Mrs Bebbington advised the Board that whilst there is a wide range of planning and high level intelligence being gathered, very detailed planning around individuals won't be scheduled until twelve months before the move. Before then the planning will involve age profiling/areas for concern and hot spot areas to focus on better understanding of requirements. A further update is provided in the Workforce & OD update, agenda item P1/166/17.

RESOLVED

The Board of Directors resolved to:

- Approves the Trust Business Plan 2017/18 Progress Report.

P/166/17 Workforce & OD Strategy Quarterly Update

The Workforce & Organisational Development Quarterly Report was presented to the Board for their information.

Mrs Bebbington quoted "Leadership is the biggest influence of Culture'. Effective leadership will be essential to a successful transition period between now and 2020. The Trust is currently working with AQUA (Advancing Quality Alliance) to develop a programme for managers. The programme aims to equip leaders with the skills to have the necessary challenging conversations, to be resilient and support staff through change and to drive a performance led culture.

Continuing with staff engagement, the Honest Conversation programme is being refreshed. Up to now, the programme has been HR led and identified the uncertainty of future location of work and environment is the biggest concern for staff.

Any member of staff recruited currently has a clear understanding that they will be moving job location to Liverpool from the Wirral.

Currently work is progressing to identify how corporate services will function and support clinical services across the different sites, focusing on the concept of 'dwellers', 'hoppers' and 'nomads'. It has been recognised that the 'honest conversation' programme now needs to be more service led and so a Staff Engagement Steering Group has been

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established to progress the planning and implementation of staff initiatives and further communication around the move and journey to Liverpool.

PADR compliance is still a concern and needs the senior management to encourage all staff to action and complete this Trust policy. The process has now had key questions incorporated relating to individual's career and personal intentions in relation to the opening of the new hospital in Liverpool. Managers will need to provide evidence that all staff have been appraised between April and June each year which will enable objectives to be set at Directorate, team and individual level that align back to the corporate objectives. Information will feed into an annual trust learning and training assessment in September each year.

Over the last three months, the Trust has run some department level staff focus groups with the focus on the impact of bullying and harassment and the effects of stress to better understand what can be done to minimise areas of concern.

Prof.Baker added that one of the impacts following Brexit is a national shortage of available health staff and the Trust's ability to attract and recruit staff.

RESOLVED

The Board of Directors resolved to:

- note progress made and to provide feedback and steer on the level of intervention and timing for delivering this agenda.

P1/167/17 Workforce Race Equality Standard

The Workforce Race Equality standard report was presented to the Board for information, demonstrating progress against the 9 indicators. It is a data exercise to review the Trust's data against the indicators to produce an action plan to close gaps in workplace experience and improve BME (White and Black and Ethnic Minority) representation at Board level.

Mrs Williams reminded the Board that the 'Insight Scheme' for potential NEDs to apply to our Trust as our local population is over 94% white. Candidates from a more diverse population should encourage a wider range to apply for NED roles. However the current board does reflect the local population from ethnic groups.

RESOLVED

The Board of Directors resolved to:

- Approve WRES data submission and supporting action plan.

P1/168/17 Risk

Miss Porter presented the Risk Report to the Board for their information. This report is a repository for all identified risks within the Trust and the top ones are reviewed at each Board meeting.

New Risks

Risk 20: Inability to provide medical cover to ensure safe delivery of services

Revised Risks

Risk 618: Connectivity to EPR and Trust systems in peripheral clinics. Reduced from 16 to 12.

Risk 790: Level of cross charging for RLBUHT clinical and non-clinical support service provision to HO service could be significantly higher than the estimated £3.2 million

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originally outlined in Heads of Terms agreement. Reduced from 16 to 9.

Risk 721: Integrating HO services into CCC Meditech and E-prescribing may impact the safe and effective delivery of the HO service due to the inter-operability with RLBH IT systems. Reduced from 15 to 12.

Miss Porter highlighted to the Board that the format of this report will change in the near future due to the new risk escalation process being included.

Mrs Williams asked Mr Schofield to review the mitigations of risk 17 to see if this would decrease the score.

RESOLVED

The Board of Directors resolved to:

- That the Board note the top risks including the new 'top risks'.
- Approve any changes to the scores.
- Discuss any new or emerging risks additional to those included in the paper.

P1/169/17 Partnership Working Update

This report provides an up-date on national, regional and local workforce issues that are currently being discussed in partnership with Trade Unions

Ms Ellison listed a few of the areas that the TU is currently working on including the staff survey, they are undertaking work to understand the results and reviewing the car parking policy to ensure fairness over the different working sites.

Ms Ellison talked about how the TU are currently looking at how they can streamline their organisation at STP level along with other Trusts and still work together.

They are also looking at the results of the 2016 staff survey to see how to deliver what was asked and needing to be pro-active as an organisation not just as individuals. Ms Ellison advised the Board that the TU had invited a Mediator to act on behalf of the Trust at four focus groups with carefully selected staff representing a cross section of the staff population to discuss subjects such as bullying and harassment. The mediator has been asked to report back to the Trust and an action plan will be proposed. Miss Porter asked for the Trust's security officer, Mrs Derry Sinclair to be included in the process.

RE

RESOLVED

The Board of Directors resolved:

- To note current issues being discussed in partnership.

P1/170/17 Liaison with Governors

Mrs Leather updated the Board with following a recent Council of Governors meeting. The Trust's membership database use to be provided by Capita and has now transfer to Membership Engagement Service so there has been a slight delay in the upcoming Governor elections.

The Governors agreed a recommendation from the Trust Board to extend the contract for another final year with Grant Thornton as the Trust's external Auditors.

The Governors also agreed to extend, for another year, Phil Edgington's term of office as an Non-Executive Director.

RESOLVED

The Board of Directors resolved:

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- To note update.

P1/171/17 Reflection on effectiveness of Board meeting

Mrs Williams observed that there had been a heavy emphasis during the meeting on staff and the workforce.

Mrs Traynor highlighted topics from the meeting to be included in either team brief or wider communications:

- H-O
- Office Accommodation

Mr Cannell offered his thanks to all the staff for their response to the recent staffing level challenges and that by being so accommodating with their shifts and taking on more responsibility the Trust has continued a safe service.

P1/172/17 AOB

No further items of business were raised.

P1/173/17 Date of Next Meeting

Wednesday 6th September 2017

WENDY WILLIAMS
CHAIR

DATE