

The Clatterbridge Cancer Centre NHS Foundation Trust

BOARD OF DIRECTORS MEETING PART ONE – PUBLIC SESSION

Wednesday 27 November 2019 at 11:15am
JKD Conference Room

Present:	Kathy Doran (KD)	Trust Chair
	Alison Hastings (AH)	Non-Executive Director
	Geoff Broadhead (GB)	Non-Executive Director
	Mark Tattersall (MT)	Non-Executive Director
	Terry Jones (TJ)	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
	Sarah Barr (SB)	Chief Information Officer
	Sheena Khanduri (SK)	Medical Director
In Attendance:	Jane Wilkinson (JW)	Governor
	Angela Wendzicha (AW)	Associate Director of Corporate Governance
	Gill Murphy (GMu)	Associate Director of Improvement (for SL)
	Mike Varey (MV)	RCN Staffside
(Item P1/200/19)	Karen Kay (KK)	Deputy Director Nursing
(Item P1/200/19)	Priscilla Hetherington (PH)	Matron – Haemato-Oncology
(Item P1/209/19)	Tom Pharaoh (TP)	Associate Director of Strategy
	Clare Jones	Corporate Governance Manager (Minutes)
Observers:	Laura Brown	Staff Governor
	Louise Gately	Higher Principal Medical Physicist
	Samantha Davies	Care Quality Commission

The Board took part in Cyber Security training as part of role essential training prior to the Board meeting.

Item No.	Item	Action
	Opening Matters	
P1/196/19	Chair Welcome and Note of Apologies The Chair welcomed everyone to the meeting and noted that apologies have been received from Elkan Abrahamson, David Teale and Sheila Lloyd.	
P1/197/19	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 – Nominated Non-Executive Director for CPL James Thomson – Executive Lead for PropCare and CPL Angela Wendzicha – Company Secretary for PropCare and CPL 	
P1/198/19	Minutes of Previous Meetings: <ul style="list-style-type: none"> <u>25 September 2019</u> JSh identified some minor amendments to the minutes, and will liaise with AW to amend these.	

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	Subject to the above amendments, the Board approved the minutes of 25 September 2019.	
P1/199/19	<p>Matters Arising</p> <p>Actions were noted to be either completed, in progress or on the agenda. The following updates were provided as follows:</p> <ul style="list-style-type: none"> • P1/171/19 – Safeguarding Annual Report 2018/19 – <i>Clarity on NED Champion roles to be provided to November Board</i> – A scoping exercise has been undertaken in relation to statutory and regulatory requirements across the organisation for Non-Executive Director Champion roles, and further details were provided. Gaps have been identified where a Champion role has not been agreed and further discussion around this will be held with the Chair, and a complete schedule will be presented at the January 2020 Trust Board. • P1/170/19 – Clinical Quality Strategy - <i>Identified amendments to be made prior to publication</i> – the amendments have been made and work is underway with the Communications Team to plan the launch of the Strategy for January 2020. 	
P1/200/19	<p>Patient Story</p> <p>The patient story was introduced by KK and PH, and was provided by JG and CG.</p> <p>JG provided the Board with an overview of his experience post- transplant and his experience of Graft versus host disease (GvHD) describing his care at Whiston Hospital as 'first class'. Several particular aspects of the patient journey were discussed further, which included items for future consideration for the service; i.e. appointments with a regular Consultant to ensure continuity of care; ensuring patient records are updated in a timely way to ensure ease of access to all information; improved quality of care post-transplant, and clear referral pathways in to other specialities, i.e. Dermatology, Respiratory, Physiotherapy and Mental Health. This would allow the patient journey, post-transplant, to be managed more efficiently and effectively.</p> <p>LB identified that as there are a number of complex issues to be addressed, it would not be possible to carry out a 'quick fix' of the service. However, there are a number of pieces of work currently underway that should support improvements to the service:</p> <ol style="list-style-type: none"> a. The new hospital is scheduled to be opened in Liverpool in May 2020, and there will be three additional floors which will provide additional space for clinics, and dedicated space for Haemato-Oncology. The Trust is also currently advertising for a number of Consultant posts, and specifically for a Bone Marrow Director who will cover the 'pre' and 'post' phases of care and who would manage the Late Effects and GvHD cases. b. The Trust is in discussion with Liverpool University to create an academic role to support ongoing research, and the job description is currently being agreed. c. Further consideration will be given to how clinics are modelled, and how a dedicated Consultant led service can be achieved. It may be 	

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	<p>that a coordinator post is established, which would function as a link to named Consultants in other services and specialities, and would be the initial point of contact for referral issues.</p> <p>The Chair thanked JG and CG for attending and noted that KK and PH would continue to provide updates on the work being undertaken to improve the service for patients.</p> <p>The Trust Board discussed the potential solutions to the issues identified and the challenges to be addressed.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the patient story • Requested the development of an action plan to address the issues raised. 	SL
P1/201/19	<p>Chair's Report</p> <p>The Council of Governors met on 7 November 2019, with seven new Governors in attendance. However, it was sadly noted that Stephen Sanderson has stepped down from his role as Lead Governor, due to ill health, although he hopes to continue as a Governor when he has recovered. The process to appoint a new Lead Governor will be undertaken and Trust Board will be kept informed of progress.</p> <p>The Chair thanked JW for stepping in to cover the role in the interim.</p> <p>The Chair attended the North West Provider/CCG Chairs Event, arranged by NHS England in October 2019, which will be established as a regular quarterly meeting. Attendees received a briefing on current performance and issues across the region.</p> <p>The Chair and Director of Quality and Nursing undertook a walk round of wards on the Wirral site on 25 November 2019. Staff were positive and enthusiastic across speciality and grade, and no negative feedback was received. A discussion was held with one of the Junior Doctors that had previously presented at Trust Board, who was very pleased about the work that had been undertaken to address the concerns and issues that had been raised. However, a colleague did note some issues he was experiencing with Meditech, and this will be raised with the Chief Information Officer.</p> <p>The Chair noted that Elkan Abrahamson attended the NHS Providers North West meeting on her behalf, where the three key issues discussed were Pensions, Planning and Winter Pressures. The Pensions issue is scheduled to be discussed at a Remuneration Committee meeting after the Part 2 Board meeting.</p> <p>AH noted that the Cyber Security Board Briefing held prior to Part 1 Trust Board was very informative, although it had been anticipated that this would be undertaken in conjunction with all WUTH Board members to enable a discussion around use of beds on the Wirral site to take place. Discussion ensued as to whether a further attempt would be made to schedule a Board to Board meeting. It was identified that there is no immediate need for a Board to Board meeting with WUTH as this matter was being delegated to the Executive Team to deal with.</p>	SL

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	Trust Board: <ul style="list-style-type: none"> Noted the update. 	
P1/202/19	Chief Executive's Report The CEO attended at Adult Care and Health Overview & Scrutiny Committee on 19 November 2019, to provide an update on the CCC-L site. The questions raised related mainly to patient and staff transport, and a request was made for an update on the plans for the CCC-W site, once this is available. The BBC is currently filming patient stories across the region and the Trust, in partnership with other Trusts, continues to facilitate this, as required. The Trust held its first drop-in session relating to travelling to CCC-L on public transport, on 26 November 2019. The event was well attended by staff, and well received. Trust Board: <ul style="list-style-type: none"> Noted the contents of the update. 	
	Strategy Updates	
P1/203/19	Staff Survey Update JSh provided the background to the presentation, which gave an update on the actions undertaken following receipt of the 2018 National Staff Survey results, informed the Board of the Quarter 1 and 2 Staff Friends and Family results, and provided a position statement in relation to the 2019 National Staff Survey. The report was discussed and the following points were highlighted: <ol style="list-style-type: none"> Comments received as a part of the Q2 results show a number of positive statements. However, a number of themes have also emerged which include references to management style and reducing levels of morale. There is a need to understand the responses and to align these to the national survey. Over recent months, the Trust has been working with staff to be clear on staff responsibility, accountability, and the Trust's position on performance management which is part of the wider cultural changes taking place across the organisation. A piece of work is also being undertaken to support managers in supporting their staff, to ensure a positive and effective management style for all staff with line management responsibility. Discussion took place in relation to differentiating between holding to account and perceptions of negative management styles. It was noted that there have been no particular issues relating to poor management style of individuals identified through exit interviews, high turnover figures, or grievances raised. Nursing staff remain the most significant area of concern, with only 50% of Nurses willing to recommend the Trust as a place to work. GMu highlighted that the recent appointment of the new Chief Allied Health Professional will help to address some of the challenges experienced by nursing staff. One of the first pieces of work they will be undertaking is the development of an Allied Health Professional 	

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	<p>Strategy in line with national guidance.</p> <p>c. Due to a data lag, it is not yet possible to benchmark the Trust's data to that of other Trusts. However, compared to the figures available for 2018, the Trust's position is broadly similar. The 2019 data for other organisations will be available in June 2020.</p> <p>d. MV highlighted that from a Staff side perspective, with regard to nursing, there are a lot of separate issues contributing to a larger picture, i.e. the expansion to CCC-L, education and training and perceived staffing levels. However, the continuation of frequent and early communication to staff would be beneficial to keeping staff engaged.</p> <p>e. The results of the staff survey will be provided to the Trust in February 2020, which will then be presented at Trust Board in March 2020.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the update. • Agreed that the staff survey results will be presented to Trust Board in March 2020. 	JSh
	For Approval	
P1/204/19	<p>Annual Radiation Safety Report</p> <p>GMu provided the background to the report, which gave the detail of the annual review of Radiation Protection Adviser's report, which covers the period of 1 April 2018 to 31 March 2019.</p> <p>The report was discussed and the following points were noted:</p> <p>a. It was acknowledged that the report is quite technical and challenging to interpret. Therefore, it was suggested that, for future reports, a one page executive summary is developed which identifies the key points and provides greater details on these.</p> <p>b. Following discussion at Quality Committee, the Committee requested an update on progress against those actions identified in the action plan.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the annual review of Radiation Protection Adviser's report. 	
P1/205/19	<p>7 Day Services Assurance Framework</p> <p>JSp provided the background to the framework, which is a self-assessment of the Trust's compliance against ten clinical standards set out in the seven day services (7DS) programme led by NHS England (NHSE). The aim of the programme is to ensure patients, who are admitted as an emergency, receive high quality consistent care, whatever day they enter hospital.</p> <p>The framework was discussed and the following points were noted:</p> <p>a. The Trust is required to be compliant with four priority standards by April 2020, the details of which are included in the report. A target date for compliance with the remaining six standards is to be set by NHSE in the near future.</p> <p>b. The Trust is partially compliant with Standard 9 which relates to support services as not all services are available across 7 days.</p>	

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	<p>c. Following approval at Trust Board, the framework will be submitted to NHS England.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Approved the status of the 7 Day Services Board Assurance Framework. 	
	Risk and Performance	
P1/206/19	<p>Integrated Performance Exception Report - Month 7</p> <p>JSp provided an overview of the report, which gives an update on performance for month seven (October 2019). JSp provided an update in relation to the timeliness of data availability and validation highlighting that the Performance Committee will receive a position paper on this in January.</p> <p>The report was discussed and the following points were noted:</p> <ol style="list-style-type: none"> At Quality Committee on 13 November 2019, there was a lack of confidence in some of the data provided, due to the timeframe available for the development of the report. There is now assurance that the data is accurate, following validation. An in-depth Radiology report had been requested by the Performance Committee, and this was received at the meeting on 18 November 2019. The report provided an overview of the challenges being experienced, which is a national issue and is outside the control of the service, and the mitigations implemented to ensure safe patient care is provided. The risks are managed on a daily basis, but remain challenging for the service. There are currently seven Radiology posts out to advert and an update on progress will be provided to January Trust Board. <p>Action: Update on Radiology recruitment to January 2020 Trust Board.</p> <ol style="list-style-type: none"> During October, 'red bed status' was reached on 7 occasions, although all occurrences were managed on the day with no patients being turned without being treated. It is anticipated that the launch of NHS Professionals will support staffing levels on wards. Nurse recruitment events continue to be held to recruit new and experienced staff for the Trust. There continue to be challenges to place appointed staff in post, which also relates to notice periods required, and the Trust is making every effort to facilitate early release dates for newly appointed staff. GMu provided an overview of the Quality section of the report. Four patients were reported to have developed a category two pressure ulcer during their inpatient stay in October 2019. Following a review meeting on 12 November 2019, three cases were deemed as no lapses in patient care with one case deemed to have a lapse in care which related to lack of escalation. It was identified that, although all incidents occurred on the same ward, no themes or trends have been identified. SK provided an update in relation to the Research section. Twenty-four studies have been opened year to date, against the internal target of thirty-seven. It is anticipated that the newly appointed SRG Research Leads will increase the study numbers within their SRG. JSh provided an update in relation to Mandatory training – there are a number of Amber areas for training, which were highlighted and discussed at Performance Committee, and which relate to Safeguarding, IL and BLS training. 	JSp

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	<p>Action: Additional narrative on training will be included within the January 2020 report.</p> <p>g. Staff sickness – It is not possible to determine the proportion of staff that are referred for counselling, due to challenges obtaining the data from Occupational Health. However, the majority of anxiety/stress related cases are not work related and work is underway to obtain the additional detail.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. • Requested that additional narrative around forward planning be included in the next report relating to Mandatory training. 	JSh
P1/207/19	<p>Improvement & Assurance Plan – CQC</p> <p>GMu presented the paper which notes the progress made against implementation of regulatory actions and recommendations by the CQC following the publication of the report on 16th April 2019.</p> <p>The plan was discussed and the following points were highlighted:</p> <p>a. An engagement visit with CQC took place on 12 November 2019, and they are content with the progress made. CQC has arranged to undertake some focussed visits, in clinical areas, during December 2019 and January 2020.</p> <p>b. MIAA are currently undertaking a view of the Improvement and Assurance Plan and a draft report is expected week commencing 2 December 2019.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the Plan. 	
P1/208/19	<p>Finance Report – Month 7</p> <p>JT provided an overview of the report, which presents the Trust's financial performance for month ending October 2019. The report was discussed and the following points were highlighted:</p> <p>a. Income and Activity – The NHS England Specialist Commissioning block contract is ahead of plan by £5.050m, year to date.</p> <p>Action: It was agreed that, once more detail is available the benefits this has provided to system sustainability will be separated out and identified.</p> <p>b. External audit - The invitation to tender was re-issued in October 2019, and will close on 9 December 2019. It is anticipated that the subsequent process will conclude late January/early February 2020. The market has become increasingly challenging with a number of companies choosing not to tender for this type of work and further details were provided. The issues has been raised with the NHSE/I national team.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. 	JT
P1/209/19	<p>TCC Programme Update</p> <p>TP provided an overview of the report, providing a summary on the progress</p>	

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	<p>of the Transforming Cancer Care programme and includes an executive summary of progress across the programme in addition to a high-level milestone plan through to the opening of CCC-Liverpool in Spring 2020.</p> <p>The update was discussed and it was noted that the TCC Programme Board has agreed the high-level move plan and it is intended that this will now take place over one weekend rather than two. Discussions remain ongoing with LUHFT to agree processes for treatment of emergency patients.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. 	
P1/210/19	<p>Northern England Clinical Senate Report on Haemato-Oncology</p> <p>SK provided the Board with a summary of the report which had been commissioned by the Trust to inform our decision-making on the timing of the transfer for Haemato-oncology (H-O) services to CCC-L.</p> <p>The report sets out a number of options and a series of associated recommendations all of which were discussed with the following points being highlighted:</p> <ol style="list-style-type: none"> The Senate panel met with organisational leaders, clinical and nursing leads and other staff from across the relevant specialities from both CCC and LUHFT. All staff involved are supportive in principle of the move and the benefits this will bring to patients and discussions are ongoing to address any remaining concerns regarding practicalities. Preliminary architectural drawings have been drawn up for the covered walkways that will provide access between CCC-L and The Royal. The recommendation made by the Northern England Clinical Senate was that serious consideration is given to making Option 4, the full movement of H-O services into the new CCC-L building before the new LUH is completed, the preferred option for the interim model of H-O Services. However, it was also recommended that this option only moves to implementation when key conditions are met, and further details were provided. The implementation and monitoring of this will be undertaken by the Transforming Cancer Care (TCC) Board and will inform the Assurance Report submitted to Trust Board. <p>Action: An interim report on progress against the recommendations will be provided to January 2020 Trust Board.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Received the full Clinical Senate Report; • Noted the options and associated conditions. • Agreed that the conditions be accepted and fully scoped; that implementation and monitoring of this be undertaken by TCC Board and informs the Assurance Report submitted to Trust Board • Requested a formal written note of thanks be sent to the Chair of the Northern England Clinical Senate. 	<p>SK</p> <p>SK/LB</p>
P1/211/19	<p>Guardian of Safe Working Report – Quarter 2</p> <p>SK provided the background to the report, which outlined the arrangements</p>	

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	<p>for doctors in training during Quarter 2 (July to September) 2019, including the number of doctors in training, exception reports on hours during the period, and the number of agency shifts used. The report was discussed and noted.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. 	
P1/212/19	<p>Audit Committee Chairs Report</p> <p>MT provided an overview of the report highlighting the following:</p> <ol style="list-style-type: none"> MIAA progress report highlighted a Moderate Assurance for the Serious Incidents Review as there had been one high risk recommendation relating to timescales for uploading reports to StEIS. The review around Fit and Proper Person Requirement has received a Moderate Assurance; areas of good practice were highlighted however there was recognition of the historical position prior to December 2018. The Medical Appraisal and Validation review remains in progress and has exceeded the contract performance KPI due to challenges in relation to the management response. The Audit Committee welcomed the revised audit tracker which highlighted a much improved position. It was noted that, due to the widening of the responsibilities of the Corporate Governance Team and its current capacity, some items were not fully presented at the meeting. However, it was noted that the appointment of a Band 6 Legal Governance Manager has been made, and work is underway to develop a job description for a Head of Legal position. This will provide capacity for the management of new and ongoing legal cases. <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. 	
P1/213/19	<p>Performance Committee Chairs Report</p> <p>MT provided an overview of the report, highlighting the following:</p> <ol style="list-style-type: none"> A deteriorating trend in pressure ulcers was noted and the matter was referred to the Quality Committee. Supply of Fluorodeoxyglucose (FDG) continues to be an area of challenge and a deep dive paper has been requested for the next Performance Committee in January. <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. 	
P1/214/19	<p>Quality Committee Chairs Report</p> <p>TJ provided an overview of the report, noting that some of the issues have already been discussed through earlier discussions but highlighting the following:</p> <ol style="list-style-type: none"> As the data for the Integrated Performance report was not available in sufficient time for circulation with papers, the report was not 	

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	<p>available until the day of the Committee and therefore could not be read in advance of the meeting.</p> <p>b. Turnover of registered nurses across the last 12 months is high and a detailed report on nurse staffing has been requested.</p> <p>c. The deteriorating infrastructure at the Royal Hospital remains a concern for our Haemato-oncology service – this links with the Clinical Senate Review discussed earlier.</p> <p>d. The Committee recommended the Annual Radiation Protection Report to Board for final approval.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. 	
P1/215/19	<p>Charitable Funds Chair's Report</p> <p>AH provided an overview of the report, which was discussed and the following point was noted:</p> <p>a. The Charity has proposed a business case to recruit two new fundraisers, with the potential to raise income quickly, as soon as possible. The two posts proposed are a Challenge Events Fundraiser and a Community Fundraiser. The Trust Board, as Trustee, is asked to approve the business case.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the report. • As Trustee, Approved the recruitment of the two additional posts as described. 	
	Corporate Governance	
P1/216/19	<p>Board Assurance Framework – Quarter 2</p> <p>AW provided an overview of the document, which shows a revised approach to presenting the Board Assurance Framework following presentation of Quarter 1 at Audit Committee and Trust Board.</p> <p>The document was discussed and the following points were noted:</p> <p>a. Each priority provides a summary of performance and key issues, and a Heat map cross-references the risk register, for those risks aligned to BAF risks.</p> <p>b. The revision work has identified the need for closer correlation of the BAF and Risk Register, and a meeting has been scheduled with the Head of Risk to review and align both documents. Further work will then be undertaken with Executive Directors to review the BAF risks prior to Quarter 3 submission to the Audit Committee in January.</p> <p>c. Cyber security is an ongoing issue and a narrative would be reported in the performance section of the BAF, with actions within the summary report.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the report and current BAF risks. 	
P1/217/19	<p>Liaison with Governors</p> <p>JW provided an update and the following points were noted:</p>	

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	<p>a. The Council of Governors meeting on 7 November 2019 was a positive meeting and the Trust's new Governors were in attendance.</p> <p>b. The Patient Experience Committee took place on 14 November 2019, and was a positive and productive meeting.</p> <p>c. However it was noted that the Membership and Communications Committee on 21 November 2019 was not as well attended. A meeting has taken place with the Communications Team to discuss the meeting and there are opportunities available for consideration to improve the Committee.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the contents of the update. 	
P1/218/19	<p>Board Meeting (including quality content)</p> <p>The following point was noted:</p> <p>a. There is no update available in relation to Proton Therapy, as feedback on the commissioning issue is awaited from NHS England.</p>	
P1/219/19	<p>Any Other Business</p> <ul style="list-style-type: none"> • MT identified that clarity is required in relation to Non-Executive compliance with mandatory training and iPad access. AW highlighted that a meeting has been scheduled with the Head of Learning and OD to develop the matrix for NEDs and this will be circulated to all NEDs. <p>Action: SB will be requested to review connectivity challenges being experienced, and identify whether this is due to issues with individual devices or whether this is a wider issue.</p>	AW
	<p>End of Meeting held in Public:</p> <p>The Board resolved that in accordance with Section 1(2) of the Public Bodies (Admission to Meetings) Act 1960, representatives of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, publicity of which would be prejudiced to the public interest.</p> <p>The meeting closed at 2.50pm</p>	
	Date of Next Meeting: 29 January 2020, 9:30am, JKD	

Signed:

Kathy Doran, Trust Chair

Date: