

The Clatterbridge Cancer Centre NHS Foundation Trust

BOARD OF DIRECTORS MEETING PART ONE – PUBLIC SESSION

**Wednesday 29 July 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
	Sheila Lloyd (SL)	Director of Nursing & Quality
	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
	Mike Varey (MV)	RCN Staffside
(Item P1/115/20)	Fiona Jones (FJ)	Managing Director of Strategy

Observers: None

Item No.	Item	Action
	Opening Matters	
P1/105/20	Chair Welcome and Note of Apologies The Chair welcomed everyone to the Board meeting with apologies noted from Terry Jones.	
P1/106/20	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 	
P1/107/20	Minutes of Previous Meetings: The Board approved the minutes of the meeting held on 24 June 2020 were agreed as an accurate record of the meeting.	

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P1/108/20	<p>Matters Arising Actions were agreed to be either complete, on the Agenda or not yet due.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Approved the position relating to the matters arising 	
P1/109/20	<p>Chair's Report The Chair acknowledged this is the first meeting since opening the new hospital in Liverpool and further acknowledged the hard work that had taken place during the last four weeks has resulted in a remarkable achievement especially during Coronavirus.</p> <p>The Chair further updated the Board in relation to two recent meetings with Bill McCarthy and one meeting (joint with CEOs and Chairs) with Simon Stevens where the message from the latter meeting is that there remains ongoing debate nationally in relation to future management relating to finances and recovery post Covid-19.</p> <p>Following the Liverpool Chair's meeting, much good will remains to work together on a range of issues to deliver across the system.</p> <p>The Board were updated that a further virtual briefing has taken place with the Governors who are all very positive about the new hospital. One of our Governors, Keith Lewis has recently completed a sky dive through our Charity and raised a significant amount of money for the Trust. The Board wished to pass on their thanks to Keith for his achievement.</p> <p>Following the round of appraisals for the Non-Executive Directors AW will be arranging a Governor Remuneration Committee and Council of Governors for September. In addition, we are looking to schedule our Annual Members Meeting which is likely to be held via virtual means.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the Chair's update 	
P1/110/20	<p>Chief Executive's Report The CEO noted that the majority of her update to the Board is contained within the papers however, LB informed the Board that the Trust had received feedback from the National Institute for Health Research confirming that our application to be a designated academic health centre had not been successful as although it was noted we delivered excellence in care, we had not been able to demonstrate the breadth of research and education required.</p> <p>LB informed the Board that a second whistleblowing episode had been reported via the CQC which was largely around ward care and the Liverpool site. The CQC require a written response by 4 August 2020 following which the Quality Committee will review the issues raised and response in detail and agree the way forward in order to provide assurance to the Board.</p> <p>AH added that as Non-Executive lead for Freedom to Speak Up she was aware of the first one and it is important the Board has assurance on the issues raised.</p>	

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	<p>LB added that we are expecting the Phase 3 letter to be received today, 29 July which will focus on system working rather than individual organisations.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the updates provided 	
P1/112/20	<p>Care Quality Commission: Update</p> <p>SL provided an overview of the report which re-introduces the CQC update report into business as usual and highlighting that the CQC had, in response to Covid-19 postponed their normal activity but continue to action any patient safety concerns. The CQC have implemented an emergency support framework which will look at the Infection Prevention and Control during Covid-19. In addition, the Trust has recently met with the CQC to look at evidence to support the Infection Prevention and Control Board Assurance Framework and we are awaiting the report following this.</p> <p>SL confirmed that registration of the new site was completed. SL further informed the Board that the CQC will be attending the Integrated Governance Committee, Quality Committee and Trust Board in October.</p> <p>SL informed the Board that there had been a second incident of whistleblowing to the CQC whereby staff had raised concerns around CCC-Liverpool; the issues raised are currently in the process of being investigated in order to respond to the CQC by 4 August 2020.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the update provided within the report and • Requested an update to September Board on the findings relating to the recent whistleblowing letter. 	SL
P1/113/20	<p>Integrated Performance Report: Month 3</p> <p>JSp introduced the report highlighting the following in relation to Access and Efficiency:</p> <ol style="list-style-type: none"> a) Access is excellent with 62 day performance at 93.1% against a target of 85%. b) There have been no avoidable breaches during Month 3. c) There are pressures with the 28 day faster diagnosis standard. We have recently mapped out the ideal diagnostic pathway for Haemato-oncology and the Alliance will be funding a Band 7 post for six months to support the development of a rapid diagnostic clinic. LB clarified that there are three pilot sites across the region for 'vague' symptoms with development into site specific pathways. d) An action plan is in place to address the performance of Cheshire and Merseyside overseen by the Cancer Alliance. e) Efficiency: We have had some pressures around length of stay relating to Haemato-oncology with complex patients driving up the length of stay. In addition we are seeing an increase in the bed occupancy for solid tumour. 	

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	<p>SL provided an overview of the Quality section highlighting the following:</p> <ul style="list-style-type: none"> f) Two Serious Incidents have been reported in Month 3 with more detail provided in the Quality Committee papers. g) There has been one incident reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). h) There has been one in-patient fall categorised as moderate harm. i) We have reported one episode of Clostridium difficile. j) In date Policy compliance is currently at 99%. <p>In respect of Research and Innovation, SK advised that the recovery plans are starting to be implemented.</p> <p>JSh provided an overview of the Workforce section highlighting the following:</p> <ul style="list-style-type: none"> k) Sickness: There has been a slight increase in sickness from May in addition to a change in the top three reasons for sickness. Anxiety/Stress/Depression is now the top reason for sickness. Further detailed work has been undertaken as a result of this and it has been found that none of the episodes are work related issues rather they relate to personal circumstances. l) Turnover: The emerging theme of 'incompatible working relationships' as a reason for leaving the Trust has been picked up with one specific department and support provided. Discussion ensued in relation to the fact that in one area there are a number of HR investigations ongoing which always impacts on how individuals feel. <p>The Trust Board:</p> <ul style="list-style-type: none"> • Discussed and • Noted the content of the report. 	
P1/114/20	<p>Finance Report – Month 3</p> <p>JT provided the Board with an overview of the Trust's financial performance for month 3, highlighting the following:</p> <ul style="list-style-type: none"> a) The Trust continues to be funded on a costs basis rather activity and it is likely this will continue through August and September. We have received an additional top up income of £971K which is required to deliver the break-even Control Total Surplus. b) Additional expenditure due to Covid-19 continues to be monitored with total to date approximately £0.5m for Covid related expenditure such as IT equipment to facilitate remote working and Personal Protective Equipment. c) Pay: Departments are operating with underspends on pay; it is expected that as we have over 1500 members of staff for the first time the pay variance will reduce. d) Cash and Capital: Our cash position remains healthy. The final bill of accounts in relation to the capital expenditure for the new building is due in September via PropCare; we are currently awaiting receipt of the final position from Laing O'Rourke. <p>MT highlighted that funding relating to research is not visible in the report with JT clarifying that the Research and Innovation Department have reserves in</p>	

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	<p>place but what is key is how quickly the department can get the trials back and therefore the income streams back. MT requested that more detail relating to the income streams from research be included in the finance report at the next Performance Committee in September.</p> <p>SK added that discussions have been taking place with both the Charity and the University with regard to research funding.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Discussed and noted the current financial position. 	JT
P1/115/20	<p>CCC-Liverpool: Phase 2 Progress Report</p> <p>FJ attended and provided the Board with an overview of the report highlighting the following:</p> <ol style="list-style-type: none"> The new hospital has been open for four weeks now and things are settling down from both an operational and building perspective. An unexpected issue has been reported relating to mould in the Aseptic suite resulting in the pharmacy production unit being transferred back to CCC-Wirral whilst we await the results of the cleaning and further microbiological cleaning. Ongoing monitoring continues in relation to switchboard and Liverpool University Teaching Hospital continues to work with us to resolve the initial issues encountered. The transfer walkway is progressing with a programmed completion planned for end August 2020. <p>GB queried the progress made on the land transfer agreement and leases. FJ confirmed that progress is being made albeit slow and steady with Executive to Executive meetings taking place to aid progression.</p> <p>MT raised a query around access control and that a number of reports he has had sight of refer to difficulties with access control in several areas including pharmacy. FJ confirmed that work remains ongoing with some areas being identified as needing access control and none had been installed.</p> <p>JSp added that a daily meeting takes place whereby staff can identify any issues that require resolution.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the update. 	
P1/116/20	<p>Staff Survey: Update</p> <p>JSh provided an overview of the report to the Board reminding the Board that the staff survey is an annual event taking place in Quarter 3 with the results being published in February. The initial findings were presented to Board in March 2020 following which the Board requested an update within 6 months.</p> <p>The report indicates that there has not been significant change from the last staff survey and we did not see the decline we expected to see following the period of change the Trust went through. The response rate was 66% which</p>	

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	<p>is an improvement of 4% on the previous staff survey.</p> <p>Discussion ensued in relation to particular areas that are consistently 'red rated' such as finance, administrative services and corporate services. JSh highlighted that those areas have long programmes of change including performance management ongoing which may account for the results but it is expected that the results will improve in time.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the update. 	
P1/117/20	<p>Adult In-Patient Survey Results 2019</p> <p>SL provided an overview of the Adult In-Patient Survey 2019 highlighting the following:</p> <ul style="list-style-type: none"> a) Care and treatment has scored very well in the survey. b) The positive feedback relating to the Doctors has been fed back to the Doctors via the Medical Director. c) Feedback in relation to nursing staff is not as good but overall the results are good. <p>Discussion ensued in relation to the feedback around food with the Chair reminding the Board we heard from a patient at one of the patient stories at the beginning of the year that focused on the quality of the food provided. The Chair asked for an update on the Food Strategy and how are patients responding to this. SL added that service providers have changed and that food audits are carried out and that good results have been found from the PLACE (Patient-Led Assessments of the Care Environment) assessments. The Board requested sight of the outcomes from the recent food audits.</p> <p>SL further added that the action plan associated with the survey will be monitored via the Quality Committee.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the good results within the Survey and • Requested sight of the results from the food audits carried out. 	<p>SL</p> <p>SL</p>
P1/118/20	<p>Risk Management Committee: Update</p> <p>SAL provided an overview of the report informing the Board that the first Risk Management Committee had taken place since the Board agreed to pause the Committee for a period of time.</p> <p>SL informed the Board that there have been some improvements seen in the risk register although it is better in some departments than others.</p> <p>Discussion ensued in relation to the section within the report relating to risk appetite. AW provided clarity that risk appetite is set by the Board and some focused time will be dedicated for the Board to consider and agree this.</p> <p>Further discussion took place in relation to the current risk register with LB highlighting that the risk register is still unwieldy and still cannot function on it</p>	AW

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	<p>at the Risk Management Committee with the Risk Management Committee not how we would want it to be yet with much work to be done between now and the end October.</p> <p>GB added that the paper takes us in the right direction and time needs to be set aside to discuss and agree the risk appetite statement.</p> <p>The Board discussed the draft Terms of Reference for the Risk Management Committee and approved the same.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the update provided and • Welcomed some dedicated time to discuss the risk appetite statement. 	
P1/119/20	<p>Complaints Review</p> <p>SL provided a verbal update to the Board confirming a detailed report in relation to the review of the complaints process was incorporated into the Risk Management Annual Report.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the update. 	
P1/120/20	<p>Guardian of Safe Working</p> <p>SK introduced the report highlighting that it provides assurance that the Trust maintains compliance with the Junior Doctor's 2016 Terms and Conditions.</p> <p>SK added that for Quarter 1, there has been no exception reports and that working hours for doctors in training are considered safe and that the position will continue to be monitored.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the report 	
P1/121/20	<p>Audit Committee Chair's Report</p> <p>MT introduced the Chair's reports highlighting to the Board that two Audit Committees had taken place on 30 June and 21 July 2020.</p> <p>30 June 2020 Audit Committee</p> <p>MT reminded the Board that due to the timings of the Annual Report and Annual Accounts to be filed with NHSI, delegated authority was given to the Audit Committee to complete sign off at the meeting scheduled for 30 June 2020.</p> <p>MT alerted the Board that the Audit Committee received and considered the draft Audit Findings Report as Grant Thornton had not completed all the work necessary to provide a final External Audit Findings Report and the Audit Committee, whilst expressing dissatisfaction were reassured that Grant Thornton would complete the required work within a few days and that the final report would be received by 3 July 2020. The Committee noted that no material issues had been found to date and the Committee signed off the Annual Governance Statement.</p>	

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	<p>MT reported that the Audit Committee noted and welcomed the overall Head of Internal Audit Opinion as 'substantial Assurance'. In addition, the Audit Committee received and approved the budget and annual work plan for 2020/2021 for both Internal Audit and Anti-Fraud.</p> <p>21 July 2020 Audit Committee</p> <p>MT highlighted to the Board that the final External Audit Report had not been provided by 3 July as expected and it was discussed at the meeting on 21 July 2020. The Audit Committee noted the Qualified Opinion and recognised that as the External Auditors had not been able to visit on site to carry out the required stock take, nothing other than a Qualified Opinion could be provided. The Audit Committee have requested a lesson learnt paper to the next Committee in October. In addition, MT will be having a one to one meeting with Grant Thornton on 17 August.</p> <p>MT informed the Board that the Audit committee dealt with 'business as usual' in July highlighting the following:</p> <ul style="list-style-type: none"> a) MIAA – Internal Audit Progress Report: The Committee noted high assurance had been received with the HR/ESR review with substantial for the Business Unit Governance and the Service Review relating to Breast and Lung Site Reference Groups and Data Quality/Business Intelligence. MT highlighted that the review relating to Medical Devices (with an IT focus) received limited assurance and as the subject crosses over a number of departments, the Audit Committee was encouraged by the collaboration within the Trust to manage the actions required. b) MIAA – Board Assurance Framework: The Audit Committee acknowledged the number of changes and development in relation to the BAF that had taken place over the last 12 months. c) Schedule of Outstanding Debt: The Committee discussed the number of aged debts and requested additional commentary around the actions being taken to resolve. d) Management of Litigation: The Audit Committee welcomed the report and received assurance that processes have now been established to manage litigation within the Trust. <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report. 	
P1/122/20	<p>Performance Committee Chair's Report</p> <p>GB provided the Board with an overview of the Report highlighting that July had been the first meeting since the streamlining of meetings following the response to Covid-19.</p> <p>GB informed the Board that a verbal report had been received relating to the TCC Financial Report and that the final report relating to the finances will be presented at the Board in September.</p> <p>GB informed the Board that the Integrated Performance Report for Month 3 had been presented and discussion had taken place around the level of detail relating to the Serious Incidents and acknowledged advice provided by AW on the need for transparency in reporting but the detail should be available once the investigation has been completed. The Performance Committee</p>	

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	<p>discussed the need for compliance with Duty of Candour and referred the matter to the Quality Committee to seek assurance of compliance.</p> <p>The Committee discussed and noted that more detail in relation to the rationalisation of the Wirral site will be presented to Trust Board in due course.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the Report. 	
P1/123/20	<p>Charitable Funds Committee Chairs Report</p> <p>AH provided an overview of the Report highlighting the following:</p> <ol style="list-style-type: none"> The Committee noted that revenue is down due to the effects of Covid-19 with a reforecast of the target to £2,615,000 which represents a 17% decrease in year and a 32% decrease in the initial target. The total Appeal income at the time of the meeting was £8,492,583 which represents 72.6% of the required £11.7m. The team are currently considering new ideas for income generation. <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the updated position in relation to the Charity and income. 	
P1/124/20	<p>Board Assurance Framework: Quarter 1</p> <p>AW provided an overview of the Board Assurance Framework highlighting the changes to the new format for Quarter 1 with the Strategic Priorities and Principle Risks from a 'top down' approach. The ongoing work with the risk register will be key in ensuring proper alignment to the Board Assurance Framework which will in turn link to the wider Corporate Governance review of the Board Committees.</p> <p>The Chair highlighted the new format is very clear and MT added that the additional detail around the assurance levels had been welcomed by the Audit Committee.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted and welcomed the changes to the Board Assurance Framework. 	
P1/125/20	<p>Freedom to Speak Up: Quarter 1 Report</p> <p>AW, as Lead Guardian presented an overview of the report to the Board reminding the Board of the background to the concept of Freedom to Speak Up. AW further highlighted that during Quarter 1 there was one contact through Freedom to Speak Up relating to concerns around allegations of bullying and harassment. The individual was signposted to the existing HR processes and the matter was resolved.</p> <p>Discussion ensued as to the lack of volume of concerns being raised through the Guardian route with the Board acknowledging there are already a variety of ways in which staff can raise concerns. MV was asked if, as the Staff Side representative at Board was he aware that staff are concerned but not raising</p>	

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	<p>issues. MV responded that staff are settling into the new hospital and that staff side are planning to do some supportive work with staff, however he has not been made aware of any staff concerns.</p> <p>AW added that overall we rate well in the Freedom to Speak Up Index which has been developed by the National Guardian's Office in conjunction with NHS England. A total of four questions were added to the annual staff survey that serve as indicators of the speaking up culture within an organisation; the questions relate to whether the Trust encourages speaking up, would staff feel secure raising concerns and whether staff know how to report concerns. The highest index is 87% and we have been rated at 82%.</p> <p>Regardless of our Freedom to Speak Up Index, AW highlighted the objectives and milestones noted within the Report to raise the profile of the Guardian role within the Trust. In addition, LB informed the Board that following receipt of the whistleblowing letter, JSh, JSp and SL will be holding focus groups with staff, the outcomes of which will feed into the overall staff plan.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report and • Welcomed the planned actions to raise the profile. 	
P1/126/20	<p>Board Meeting (including quality content)</p> <p>The Board discussed the format of the Board and agreed that the correct level of detail had been provided and discussed. The Board agreed to keep the partial virtual element under review as the NHS continues to respond to Covid-19.</p> <p>The Chair thanked the Board for their input.</p>	
P1/127/20	<p>Any Other Business</p> <p>None noted.</p>	
	Date of Next Meeting: Wednesday 30 September 2020 via Webex.	

Signed:

Kathy Doran

Chair

Dated: