

The Clatterbridge Cancer Centre NHS Foundation Trust

BOARD OF DIRECTORS MEETING PART ONE – PUBLIC SESSION

**Wednesday 28 October 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
	Sheila Lloyd (SL)	Director of Nursing & Quality
	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)
Item P1-157-20	Lesley Green(LG)	Arts Consultant
	Sam Wade (SW)	Arts Co-ordinator
Item P1-161-20	Dr Nagesh Kalakonda (NK)	Director of Research and Innovation
	Gillian Heap	Director of Research and Innovation Operations
Observers:	None	

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	Opening Matters	
P1/152/20	Chair Welcome and Note of Apologies The Chair welcomed everyone to the Board meeting with apologies noted from Mike Varey.	
P1/153/20	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 • Terry Jones – Director of Liverpool Head and Neck Centre • Geoff Broadhead – Director of CPL • James Thomson – Executive Lead for PropCare and CPL • Angela Wendzicha – Company Secretary for PropCare and CPL 	
	P1/156/20 – Patient Story The Board welcomed LS via a video link from Ward 4 and heard that she	

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	<p>cannot fault the ward with rooms that are airy and light. However, the one negative issue related to the food as LS described how she has specific requirements relating to diet which has not always worked well. Whilst acknowledging this has improved over the last couple of days, this has added to stress and anxiety at mealtimes.</p> <p>KD thanked LS for speaking to the Board, apologising for the experience relating to the food, informing LS that the Board has had a recent focus on food provided to our patients. KD assured LS that the Board will pick the issues up that have been raised and make sure that our patients who have specific dietary needs are catered for.</p> <p>LB added her thanks to LS acknowledging that a number of our patients have found it difficult as family and friends have not, due to Covid, been able to visit and bring in home food but that we will follow this up and feed back to you.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Welcomed the patient story and • Acknowledged the difficulties highlighted in relation to the food. 	
P1/154/20	<p>Minutes of Previous Meetings:</p> <p>The Board approved the minutes of the meeting held on 30 September 2020 as an accurate record of the meeting.</p>	
P1/155/20	<p>Matters Arising</p> <p>The Board noted that actions were either completed or not due with the following updates provided:</p> <p>P1-117-20: Food Audits – KD acknowledged that copies of some recent food audits are attached to the action log and that the Board is required to look at these in the context of the issues highlighted by LS during the patient story.</p> <p>SL acknowledged that whilst the food audits provide some feedback but it is disappointing that the audits do not seek feedback on whether the food was right for the patient on an individual basis; KK will pick this up with PropCare who lead the audits in addition to working with Ward Managers.</p> <p>Discussion ensued as to how such individual patient needs are highlighted with SL informing the Board that each patient has an individual care plan which addresses nutritional needs.</p> <p>MT added that whilst it was positive that the particular issues for LS had been resolved at ward level, clarity was sought as to whether there is a systemic issue that needs addressing.</p> <p>LB added that the dieticians need to be involved in the review to ensure that specialist needs of our patients are being catered for.</p> <p>KD reminded the Board that a patient attended Board approximately one year ago and shared his experience of the food with GB adding that concerns with the food should be resolved before they become an issue.</p>	

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	<p>SL clarified that the process highlighting dietary requirements being part of the nursing care plan and questions should be asked at an early stage. LB noted that the Board will be updated once the additional work has been carried out in relation to patient food.</p> <p>P1/132/20: Staff Story – Explore unconscious bias training. JSh informed the Board that she has been engaged in conversations with an independent Equality, Diversity and Inclusion specialist who will be able to carry out a session with the Board in January or February with the Board agreeing for this to be carried out.</p> <p>JSh further informed the Board that additional focus group sessions had taken place with the staff who attended Board who fed back their appreciation at being invited to talk to the Board and look forward to returning in a year's time. JSh added that the group of staff had a number of creative suggestions and it felt like the beginning of a cohesive group who would work well together.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the updates provided. 	JSh
P1/156/20	Agenda Item dealt with at the beginning of the Board meeting.	
P1/157/20	<p>Presentation of Art Work at CCC-Liverpool</p> <p>LB introduced LG to the Board who led on ensuring the installation of the art work at CCC-Liverpool was completed. LB further introduced SW to the Board as the newly appointed Arts Co-ordinator.</p> <p>LG presented an overview for the Board in relation to the Public Arts Steering Group, chaired by LB which commissioned the art installations in CCC-Liverpool including the 'quiet room'. The Board heard about the staff engagement groups and the plan to hold an arts event in order to showcase all the art work but this has been put on hold due to Covid.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Acknowledged art installations and • Thanked LG for her inspirational work and welcomed SW as the new Arts Co-ordinator. 	
P1/158/20	<p>Chair's Report</p> <p>KD informed the Board that we are currently in the process of recruiting a new Non Executive Director as the replacement for AH and we had received a good response with interviews taking place on 18 November.</p> <p>KD further informed the Board that Consultant interviews took place earlier with a new Consultant Radiologist being appointed.</p> <p>Feedback from the NHSE/I meeting is that whilst Covid-19 positive cases across the North West are increasing and greater than previously, the number of patients being admitted to intensive care is currently lower than previously.</p>	

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	The Trust Board: <ul style="list-style-type: none"> • Noted the update. 	
P1/159/20	Update on Walkabouts SK informed the Board that she conducted recent walkabouts with KK as Deputy Director of Nursing and focused, when talking to staff on the impact of Covid-19. SK noted that staff articulated the impact on self-isolation and the fact that staff had to rely on the Health Care Assistants to keep the wards running. SK further informed the Board Ward 3 that has the Red area was full at the time of the walkabout which had an impact on the level of nursing care required. In addition, bed occupancy has increased and nursing staff are being supported to accept that they will see an increase in activity and acuity. SK further informed the Board of the impact of patients not receiving visitors has been the increase in the number of telephone calls taken by the ward clerks. In summary, SK noted staff acknowledge the changes that Covid has brought in terms of how we work in addition to the recognition that we have to remain flexible and agile in how we deploy staff. KD added that one of the issues discussed at a regional Chair meeting was the support offered to staff. SK noted that she had previously spoken to a Ward Manager who assured her that her staff were supported to take breaks. KD added that the welfare of staff is a matter that the Governors are particularly sighted on with JW confirming that she will feed back to the Governors that the Trust is doing all it can to support staff. KD acknowledged that this agenda item is becoming invaluable and requested that if any of the Board had a particular issue to raise it with both SK and SL. The Trust Board: <ul style="list-style-type: none"> • Noted the update provided. 	
P1/160/20	5 Year Strategy TP introduced the paper highlighting that it sets both the national and local landscape in addition to the main risks facing the organisation in addition to outlining the proposed strategic priorities for the next 5 years. TP further outlined the emphasis is now to translate the document into measurable actions in addition to the development of a detailed implementation plan and version which will be accessible to the public. The oversight against delivery of the implementation plan will be via the Trust Executive Group and Trust Board. Discussion ensued in relation to the desire to attain Teaching Hospital status with LB adding that whilst the University are keen for the Trust to achieve this, there is a detailed programme of work that will need to be completed. JSh added that it is more likely to be at least a 12 month programme before we are able to complete a robust application.	

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	<p>GB added that it is a very clear document; Section 2.2 refers to the local landscape but does not reference the regions with the highest levels of deprivation. GB further added that we should consider if it is appropriate to add an element of education for our patients in relation to cancer. LB confirmed the addition of the deprivation and correlation to high mortality but in terms of the education around cancer, there is an overlap with the work of the Cancer Alliance which the Trust has a link to.</p> <p>MT agreed that the document reads really well and suggested the addition of the move to the Spine be included. MT noted that there is reference to the Charity in a number of sections but little that provides clear direction as to where the Charity is going for the next 5 years. AH added that the Charity put forward an aggressive growth strategy at the Board away day last year but given the recent changing landscape, they will have to be clear about what they can deliver.</p> <p>LB agreed in relation to the addition of the Spine and that we will ensure the Charity has a clear plan which aligns with our own. In addition EA requested reference is made to environmental sustainability and that he would share details of the United Nations Global Compact around sustainability to AW.</p> <p>KD noted that we are, with LB's strong leadership of the Cancer Alliance and our place within the STP/ICS we are in a good position to ensure the Trust plays a full part in the future.</p> <p>KD concluded that the new Strategic Priorities provide a focus and a framework for the work plan next year. The Board approved the 5 Year Strategy subject to the agreed minor amendments discussed.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted and discussed the content and • Approved the 5 Year Strategy. 	EA
P1/161/20	<p>Research Strategy</p> <p>NK and GH attended the Board with NK introducing the key elements of the Strategy. SK added that the document is an aspirational strategy to improve which we will not be in a position to do without significant investment; in addition, there remain a number of unknowns in relation to CRUK and our ECMC renewal.</p> <p>TJ commented that it is difficult to see where the document integrates across the region adding that it is not a strategy but an aspirational document. In addition, from a Non-Executive Director perspective, the financial request is large with no clarity as to what we would do with the amount requested.</p> <p>Discussion ensued in relation to the document in context of research in Liverpool in comparison to research in Manchester. NK acknowledged the aspirational angle of the document further explaining that the Trust has a functioning research strategy group chaired by SK who will oversee the detail in the document being translated into work plans.</p>	

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	<p>SK added that we have engaged with all tumour groups who all have a research lead.</p> <p>Discussion ensued in relation to the lack of Intellectual Property Policy acknowledging that this is in progress.</p> <p>MT noted that he welcomed the document but that we need to ensure that we are investing in the correct areas and further requested more detail around the business plan and financial assumptions at the Performance Committee in January.</p> <p>LB highlighted to the Board that there is recognition that development has taken place over the last year in research and the focus needs to be on how we link the research to the needs of our population. NK noted that whilst there has recently been some excellent appointment, there is a need to recruit additional academics. TJ added that the strategy needs to be clear in relation to how we would grow and what the return on investment would look like.</p> <p>In conclusion KD added that research is one of the Trust's priorities going forward and that the Board is not refusing finding but the Board does need to understand the investment requirements. The Board approved the strategy in principle with the request that a business plan is brought back to Board via the Performance Committee.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Discussed and approved the strategy in principle and subject to the detail in the Business Plan • Requested that a Business Plan be presented at the Performance Committee in January. 	GH
P1/162/20	<p>Research and Innovation Annual Report</p> <p>GH presented an overview of the report highlighting the strengthening of the governance processes within the department.</p> <p>GH added that a total of 11 research leads have been linked into the Site Reference Groups with additional notable achievements that we have seen the highest level of recruitment, with 1 205 patients recruited into research studies during the last year. In addition, the Board noted the achievements of Professor Palmer who has led a team to become the first in the world to trial a drug used in the RAGNAR clinical trial on a patient with a brain tumour.</p> <p>KD congratulated the team on the achievements over the last year highlighting the importance for the Board to understand this work in detail.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report and • Acknowledged the hard work carried out over the last 12 months. 	
P1/163/20	<p>Integrated Performance Report – Month 06</p> <p>Access and Efficiency</p> <p>JSp introduced the report highlighting to the Board of the two additional KPI's</p>	

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	<p>reported in month 6 following the publication of the Cheshire and Merseyside Cancer Alliance's 'Cancer Long Waiters and Covid-19 Policy. JSp further advised the Board that performance around access was excellent in month 6 as a result of the work the Haemato-oncology team have carried out on the pathways.</p> <p>JSp informed the Board that challenges remain around length of stay for non-elective patients and work remains ongoing in relation to the project around ambulatory care in haemato-oncology.</p> <p>Discussion ensued in relation to the current set targets with GB adding that the Performance Committee are currently considering this with a request to differentiate those patients who are fit for discharge but waiting for care packages or a bed back at their base hospital.</p> <p>The Board noted that performance against the Covid-19 recovery plan continues to be good. EA sought clarification on the Nightingale Hospitals with LB advising that the Nightingale Hospital is for step down beds.</p> <p>Quality</p> <p>SL provided the Board with an overview of the Quality section of the report noting that the complaints report for Quarter 2 is contained within the report with the addition of Quarter 1 to understand the themes. SL added that a total of 8 complaints have been received in Quarter 2 with a number relating to communication around clinical treatment.</p> <p>SL informed the Board that further work will be carried out on those complaints where it is documented as no learning identified as it has been recognised that learning can always be identified. In addition a task and finish group will be established, Chaired by SL to review the process and ensure we get complaints right. Further training is also planned for all involved in complaints.</p> <p>SL informed the Board that there will be a clear plan of all the things we need to do will be presented at the Quality Committee in November. SL informed the Board that this will include a review of the average number of days taken to respond to a complaint in addition to ensuring the central team and the Directorates are working together.</p> <p>KD welcomed the focus on lessons learned highlighting that as a Board we need to be assured that we are learning. TJ added that this issue has been picked up in his Quality Committee Chair report.</p> <p>SL further added that in relation to the number of policies in date, AW has a robust system in place to manage this process.</p> <p>Workforce</p> <p>JSh provided an overview to the Board highlighting one exception report relating to sickness absence. The Board noted there had been a slight increase in month with stress/anxiety and depression as being the main reason for the last four months. JSh informed the Board that we are now seeing work related stress as one of the reasons with further work ongoing to understand this more.</p>	

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	<p>JSh highlighted to the Board compliance in relation to ILS and BLS training which has been discussed in detail at Board Committees noting that additional sessions have been put on to improve compliance.</p> <p>KD congratulated the team on the PADR compliance rate with JSh adding that audits will be carried out on the quality of the PADR's findings of which will be presented to the Committees in January.</p> <p>SLK added that the flu vaccination data will be presented in the next report adding that current compliance is 60% for clinical staff and 59.1% for non clinical staff.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report. 	
P1/164/20	<p>Infection Prevention and Control Board Assurance Framework</p> <p>SL provided an overview of the paper noting that the report provides an update position on compliance with the 60 Key Lines of Enquiry.</p> <p>KD noted assurance has been provided that systems and processes are in place with LB informing the Board that Gold command meetings have recommenced in response to the second wave of Covid. KD added that the Board will keep under review any additional reporting requirements.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report. 	
P1/165/20	<p>Emergency Preparedness Annual Assurance Report</p> <p>SL introduced the report informing the Board that as part of reducing the burden Trusts have been asked to provide assurance on a reduced number of standards. SL provided assurance that the Trust is compliant with the requirements.</p> <p>JSh requested the narrative in relation to risk assessments be amended as the Trust has offered risk assessments but we have not achieved 100%.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Approved the submission subject to the above amendment. 	SL
P1/166/20	<p>Cheshire and Merseyside Cancer Alliance: Performance Report</p> <p>LB provided an overview of the report to the Board indicating this is the third month the report has been shared with Chief Executives within the region.</p> <p>The Board noted that in terms of restoration of services endoscopy capacity remains a challenge at 85% with the endoscopy recovery group receiving some additional capital investment to assist. In addition, the weekly surgical hub meetings have been reinstated.</p> <p>LB noted that cancer surgery is at pre-Covid levels and challenges continue to maintain this level of activity.</p>	

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	<p>TJ commented on the excellent work carried out to date by the Alliance with a recognition that Covid has made organisations work as a system.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the update provided in the report. 	
P1/167/20	<p>Finance Report – Month 6</p> <p>JT presented an overview of the report to the Board highlighting the following:</p> <ul style="list-style-type: none"> a) Clarity has been received in relation to the ‘top up’ funding with the Trust requiring £3.2m for September, cumulatively £0.9m. b) The Trust was underspent on pay by £138K which is expected to reduce and appointments are made in the next six months. c) The Trust continues to recover costs relating to Covid. d) Drug costs have increased due to activity in chemotherapy. e) Capital expenditure continues to be supported by the Trust cash position. <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the finance report and the continuing strong liquidity position of the Trust. 	
P1/168/20	<p>Audit Committee Chair Report</p> <p>MT provided an overview of the Audit Committee held on 20 October with the Board noting there are no alerts identified within the report.</p> <p>MT informed the Board that the Committee is seeing progress around the internal audit process with substantial assurance being received for the MIAA review of the Effectiveness of the Trust’s Committees.</p> <p>MT further assured the Board that confirmation had been received from MIAA that the follow up reviews have been completed on a number of reviews confirming that all agreed recommendations had been implemented.</p> <p>MT advised the Board that two follow up reviews relating to CQC Action Plan and Serious Untoward Incidents had one low recommendation and one medium recommendation respectively outstanding, the Committee noting a plan in place for completion.</p> <p>MT confirmed that the Audit Committee received assurance in relation to the Trust Audit Tracker acknowledging the significant work that had been carried out in order to improve the position.</p> <p>MT further advised the Board of the Audit Committee discussions in relation to the Board Assurance Framework acknowledging that this will be redefined to align with the new 5 Year Strategy. MT further advised the Board of the discussions and inconsistencies found in the Register of Interests which are currently being addressed.</p> <p>MT further informed the Board that the draft Annual Quality Account has been circulated to the Audit Committee members in line with the delegated authority to approve from the Trust Board.</p>	

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	<p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	
P1/169/20	<p>Quality Committee Chair's Report</p> <p>TJ presented an overview of the Chair's report following the October Quality Committee highlighting that although there is an increase in 'red alerts' to the Board assurance can be given that this is a reflection on the different way in which the Committee is now working by drilling down into specific issues.</p> <p>TJ alerted the Board to the discussion in relation to complaint management highlighting that work is ongoing in relation to how we manage complaints.</p> <p>In relation to the risk register, TJ alerted the Board to the ongoing work in relation to improving the risk register.</p> <p>TJ alerted the Board to the discussion at the Committee in relation to Serious Incidents acknowledging that this was the first time the Committee had been sighted on summaries of Serious Incidents which the Committee welcomed.</p> <p>TJ further alerted the Board to the Cancer Patient Experience Action Plan and in recognising the importance of this requested clarification on some actions and for the Committee to have sight of it again in November.</p> <p>KD acknowledged the comprehensive report highlighting the areas that we need to get right.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	
P1/170/20	<p>Performance Committee Chair's Report</p> <p>GB provided an overview of the report, alerting the Board to the Health and Safety Report commissioned by PropCare. The Committee acknowledged that the actions had been completed but would have expected the report to have been presented at the Committee much earlier than it was. In addition the lack of signed Service Level Agreement between PropCare and Aintree has now been escalated to AW who will pick this up and action.</p> <p>GB advised the Board of the discussions at the Committee in relation to the financial position in addition to the continued method of funding on a costs basis.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	
P1/171/20	<p>Charitable Funds Committee</p> <p>AH provided an overview of the report alerting the Board that the Charity has had to reforecast their target as a direct impact of Covid-19. In addition, there is a £2.3m funding gap which is currently being reviewed.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	

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P1/172/20	<p>Care Quality Commission – Whistleblowing Outcome and Update</p> <p>SL informed the Board that a third Whistleblowing incident has been received via the CQC with focus on a particular ward. SL indicated that something is still not right and that she takes full responsibility for that. SL informed the Board that new roles have been put in place with additional investment in the nursing team. In addition, some nursing tools to support staff and competency frameworks have been introduced.</p> <p>SL further informed the Board that she meets the Ward leaders quarterly but will increase the frequency.</p> <p>Discussion ensued in relation to other avenues available for staff to raise concerns such as Freedom to Speak Up with AW adding clarity that the majority of issues raised via this route are workforce issues and staff are supported and redirected to use the existing policies.</p> <p>MT added that there are usually other indicators evident when a particular ward area is feeling under pressure. SL added that the 'Perfect Ward' has been introduced as a way of supporting staff and that a deeper dive will be carried out to look at the relationships within the nursing team. In addition, SL added that the safer staffing report will be presented at Board in January.</p> <p>KD concluded that the Board looked forward to hearing more in relation to the ongoing work with the nursing staff.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • Noted the content of the report 	SL
P1/173/20	<p>Board Meeting</p> <p>The Board agreed the format with all via virtual attendance as opposed to a mixture of virtual and on site.</p> <p>The Chair thanked the Board for their input.</p>	
P1/174/20	<p>Any Other Business</p> <p>None raised</p>	
	Date of Next Meeting: Wednesday 25 November 2020 via Webex.	

Signed:

Kathy Doran

Chair

Dated: