

## Item 5

minutes

### Council of Governors

**Minutes of the Meeting of the Council of Governors held on Tuesday 1st March at 1pm  
(via Zoom)**

#### **Present:**

Neil Large  
Mark Allen  
David Bromilow  
Joan Burgen  
Denis McAllister  
Dorothy Burgess  
Wendy Caulfield  
Terence Comerford  
Charlie Cowburn  
Megan Cromby  
Ray Davis  
Dr Rebecca Dobson  
Elaine Holme  
Sharon Faulkner  
Peter Humphrey  
Allan Pemberton  
Dusty Rhodes  
Peter Wareham  
Trevor Wooding

Chair  
Public Governor - Cheshire  
Public Governor - Merseyside  
Public Governor – North Wales  
Public Governor - Cheshire  
Public Governor - Merseyside  
Nominated Governor – Friends of Robert Owen House  
Public Governor - Merseyside  
Staff Governor – Registered and Non Registered Nurses  
Staff Governor – Non Clinical  
Public Governor - Cheshire  
Staff Governor – Registered Medical Practitioners  
Public Governor - Merseyside  
Staff Governor – Registered and Non Registered Nurses  
Public Governor - Merseyside  
Public Governor – Cheshire  
Public Governor – North Wales  
Public Governor – North Wales  
Senior Governor/Public Governor - Merseyside

#### **In attendance:**

Laura Allwood  
Margaret Carney  
Val Davies  
Jonathan Develing  
Gill Donnelly  
Karen Edge  
Julian Farmer  
Nusaiba Hannan  
Jonathan Mathews  
Karen Nightingall  
Karen O'Hagan  
Sue Pemberton  
Dr Raphael Perry  
Jane Tomkinson  
Karan Wheatcroft

Patient and Family Support Manager  
Non Executive Director  
Chair Designate  
Director of Strategic Partnerships  
Membership and Communications Officer (Minutes)  
Chief Finance Officer  
Non Executive Director  
Executive Office Manager and Corporate Governance Lead  
Chief Operating Officer  
Chief People Officer  
Non Executive Director  
Director of Nursing  
Deputy CEO & Medical Director  
CEO  
Chief Governance Officer

#### **Apologies for absence:**

Lynne Addison  
Cllr Sharon Connor  
Karen Higginbotham  
Rachael McDonald

Public Governor – Rest of England and Wales  
Nominated Governor – Liverpool City Council  
Nominated Governor - LJMU  
Staff Governor- Non Clinical

**1. Opening Matters**

In accordance with the Trust's response to Covid 19, the Council of Governors meeting was conducted remotely via video conferencing to maintain social distancing. In order to conduct this meeting efficiently, the papers were produced as usual and in accordance with the business cycle and distributed on 23rd February 2022 by e-mail and post.

A template was circulated in advance for each Governor to complete individually. This gave each participant the opportunity to record comments and questions as they reviewed each paper prior to the meeting. Responses were collated and those questions/comments were raised by the Chair during the course of the virtual meeting. This pre-work enabled the Council of Governors meeting to be conducted efficiently given the number of participants. The Chair also invited governors to make contributions during the course of the meeting. Governors posed questions and made comments using the 'raise hand' or 'chat' functions on the video conferencing facility.

**2. Apologies for absence**

Noted above.

**3. Presentation – Patient and Family Support Team**

Laura Allwood, Patient and Family Support Team Manager outlined the role of the team which included the robust management of patient concerns and complaints, volunteering, translation, patient information, chaplaincy and post bereavement services. It was highlighted that the team had an important part to play during the pandemic and worked closely with the Patient and Family Liaison Team who were a team set up to support patients and their families in keeping in touch during their stay in hospital. This had been very well received and was an important service as patient visiting had been suspended at this time. It was added that the volunteer service was back up and running now and that there were plans for further recruitment to this service in the near future.

There was a discussion around the complaints process and governors asked if meetings were held face to face with the patient/family members to discuss complaints. The Patient and Family Support Manager explained that these meetings were held in person if preferred and supported with written letters in response to the complaint. The Director of Nursing & Quality added that meetings were often held in the patient/family members home to support them as the distance to travel to the hospital site can be significant.

The Council of Governors received the update.

**4. Patient Story**

The Director of Nursing shared a patient story which highlighted the experience of a surgical patient who had a genetic defect and had received at second operation at Liverpool Heart and Chest Hospital. They highlighted the

respect and gratitude they had received from all staff during their stay. It was noted that the environment and surroundings in Intensive Care had supported and enabled them to make a full recovery. In particular, the clock denoting the date and time had been important for the patient's orientation.

The Council of Governors received the story.

**5. Declaration of Interests Relating to Agenda Items**

None declared.

**6. Minutes of the Council of Governors (CoG) held on 7<sup>th</sup> December 2021**

The Council of Governors agreed the minutes were an accurate reflection of the meeting and approved these for the meeting held on 7<sup>th</sup> December 2021.

Governors requested an update on HIMSS rating. The Chief Governance Officer confirmed that HIMSS Level 6 had been achieved in 2021 and the Trust was working towards HIMSS Level 7. It was added that nationally the required standard was likely to be Level 5 and therefore the Trust was working much higher than this level already.

The Chief Operating Officer responded to a query about how the trust was planning to work to ensure diagnostic targets were met and explained there had been challenges in the radiographer workforce. However, this would be monitored and risk mitigated on an ongoing basis. It was noted that further detail and updates around performance would be provided later in the meeting.

The Chair added that a presentation on how various incidents were classified would be scheduled for the Council of Governors to enhance governor understanding.

The Council of Governors received the updates.

**7. Chair's Briefing**

The Chair opened his briefing by welcoming David Bromilow, Public Governor-Merseyside and Denis McAllister, Public Governor-Cheshire to their first Council of Governors' meeting.

The Chair introduced Jonathan Mathews who had recently been appointed as Chief Operating Officer and Karan Wheatcroft as Chief Governance Officer. In addition to this, the Chair introduced Val Davies who had been appointed to the role of Chair and commenced this role on 1<sup>st</sup> April 2022. Val Davies noted that she would be looking forward to meeting all the governors on a one to one basis in the near future.

The Director of Nursing & Quality informed the Council of Governors that due to a change in national guidance patient visiting had been reinstated at the trust. This had been well received by all and enabled one patient to visit relatives for one hour per day with the same infection prevention and control mechanisms in place.

The Chair offered his congratulations to Julie Tyrer, Consultant Nurse – Tissue Viability who had recently launched a new national awareness day on

17<sup>th</sup> March to highlight nationally Moisture Associated Skin Damage. This has been covered nationally in the Nursing Times.

The Chair offered further congratulations to the Cath Lab, Holly Suite and Research teams who had just completed the ARCH trial. With over 2,100 participants, the team believed ARCH to be the largest ever single-centre randomised controlled trial in world cardiology – breaking the previous record set by the HEAT-PPCI trial, also entirely designed and conducted at LHCH. ARCH aimed to compare conventional absorbent and haemostatic dressings in a trial of expedited haemostasis following radial artery access.

It was added that three Staff Governors would be coming to the end of their term of office at the Annual Members' Meeting in September 2022. All of those governors were eligible to re-stand and a governor election process would run over the summer months.

The Chair explained that as this was his last Council of Governors' meeting he wanted to express how proud he was of the every member of the Board of Directors, every Governor, Volunteer and every Member of staff for making the hospital what it was today and thanked everyone for their support.

The Council of Governors received the update.

## **8. Performance and Operations**

### **8.1 ICS and Provider Collaborative Update**

The Director of Strategic Partnerships presented an update and noted that the trust had a long history of providing mutual aid support from all aspects of the trust and collaboration with other trusts. It was added that the white paper and new Integrated Care Systems brought further opportunities for collaboration to improve population health. It was added that cardiovascular disease (CVD) remained a key cause of morbidity and mortality and that there were wide and growing health inequalities in Liverpool, with unacceptable life expectancy gaps between the most affluent and deprived communities. Recognising the standards of care for patients with CVD varies. It was noted that Liverpool Heart and Chest Hospital and Liverpool University Teaching Hospitals were committed to levelling up access, improving outcomes, addressing health inequalities and developing a new single cardiology service that connects the whole patient pathway.

There was a discussion from governors regarding the evidence which had suggested that these improvements were needed. The Director of Strategic Partnerships confirmed that there had been benchmarking and research data available from other areas of the country which had suggested that these improvements were required. It was added that collaboration would also benefit patients from outside the Cheshire and Mersey area e.g. North Wales.

The Council of Governors received the update.

### **8.2 Performance Report for Period**

The Chief Operating Officer presented the performance report and noted that the trust was focused on safely restoring high levels of elective activity to treat

the backlog of patients as an output of the Covid 19 pandemic. Referral to treatment waiting times remained below target as expected due to the significant backlog accumulated during COVID. Performance in month stood at 82.34% for English commissioned activity and 77.79% for Welsh commissioners. An increase in staff sickness and urgent pressures had continued to impact on performance against the recovery trajectory.

It was explained that the biggest challenge for the trust had been staffing and this had been felt across the NHS, particularly in January, due to the Covid 19 Omicron surge. It was added that these risks will continue to be mitigated in quarter four and there would be great emphasis on how the trust moves forwards with its plans for 2022/23.

The Chief Operating Officer explained that the target for cancellations for non clinical reasons was 2%. However, the Trust had just exceeded this at 2.3%. The Chief Operating Officer highlighted that the teams were focused on minimising this and identifying learning from previous cancellations. The Chief People Officer noted that sickness had been high at 8.2% in January 2022 primarily due to the Omicron surge and 3.8% of this had been non covid sickness. It was noted that when compared with other trusts in the region the trust's sickness levels had been significantly lower.

There was a discussion from governors around the 10% staff turnover for the trust and whether there were any trends around the reasons for leaving. The Chief People Officer explained that the key reason for leaving had been for re-location or promotion purposes. However, there was ongoing work underway currently to focus on staff retention particularly with the nursing groups. The Chief People Officer added that an exit survey and interview process had been implemented following a member of staff resigning. This enabled the capture of this data. It was requested that governors see some of this information at a future meeting.

The Council of Governors received the report.

### **8.3 Finance Report for Period**

The Chief Finance Officer noted that the financial performance for the period ending 31<sup>st</sup> December 2021 was £321k surplus. It was added that the financial plan for the second half of the year (H2) had now been finalised and the trust planned to deliver a breakeven position. The expenditure trends remained stable and there were no significant income risks predicted for the last quarter. In closing, the Chief Finance Officer added that there may be additional risks and challenges in the next financial year for the trust to mitigate and manage.

The Council of Governors received the update.

### **8.4 Planning Update**

The Chief Operating Officer presented the key planning guidance for 2022/23. It was noted that it set the context of looking at this year with low levels of covid, investing in the workforce and responding to covid 19 more effectively. The guidance outlined that every organisation was expected to treat 10% more patients than pre-pandemic levels as part of the elective care recovery plan and to reduce long wait patients. Outpatient transformation would be key

and there was a target of achieving 25% less outpatient follow ups within the guidance. There was also a focus on cancer services such as targeted lung health checks, delivering community diagnostic centres, transforming and building community services such as development of virtual wards and digital improvement plans.

The Chief Finance Officer noted that the ICS position would be key and there was a breakeven requirement with single system plan submission. It was added that elective recovery was a key focus with two key targets – 110% of completed pathways to 19/20 baseline and 104% of a costed activity basis. It was added that Covid 19 system allocation was to continue but reduced from H2. There would be no continued support for loss of non NHS income and it was expected that providers would return to pre covid levels. The Chief Finance Officer added that initial trust plans had been calculated based on a standard set of assumptions and using recurrent budgets as a start point. The financial plans were still in development however and key uncertainties included delivery of CIP, Elective Recovery Fund Income and System top up funding.

The Chief Operating Officer noted that guidance was received on 24<sup>th</sup> December 2021. It was highlighted that the final plan would be brought to the Board of Directors at the end of March 2022.

There was a discussion from governors around the impact increasing energy prices would have on the Trust. The Chief Finance Officer confirmed that this had been felt by the Trust and managed accordingly however this was a national issue and would be felt by the whole NHS.

There was a discussion around the reduction of outpatient follow ups. The Chief Operating Officer noted that the hospital would be clinically led as to what was appropriate in terms of reducing the number of follow ups. It was explained that only patients who were fit to be discharged would be and that patient initiated follow up (PIFU) may be more suitable in some service lines than others.

The Council of Governors received the update.

### **8.5 Patient & Family Support Team Activity Report Q3**

The Director of Nursing & Quality presented the Patient & Family Support Team Activity Report and highlighted the trust had received a total of 4 formal complaints for quarter 3 and 49 contacts, 34 informal concerns and 14 requests for information were made.

The Council of Governors were requested to receive assurance that the complaints process, management and procedure was robust and monitored for effectiveness and was based upon the Trust's Complaint Policy.

There was a request from governors for an update on the action plan to make improvements to the trusts mortuary facility which was being managed by Liverpool University Teaching Hospitals. The Director of Nursing highlighted that actions were underway and she was hopeful that these would have been completed by LUTH and would update on this at the next meeting.

SP

The Council of Governors received the report.

#### **8.6 Licence Condition G4: Fit and Proper Persons Requirement**

The Chief Governance Officer presented the report and asked governors to note the fit and proper persons declarations received and confirmed all criteria had been met. It was added that a small number of governors were yet to complete the annual declarations and were requested to do so as soon as possible.

The Council of Governors received the report.

### **9. Governor Issues**

#### **9.1 CoG Objectives 2022**

The Chief Governance Officer presented the Council of Governors objectives report and highlighted that the paper incorporated the agreed six objectives discussed by a governor task and finish group on 11<sup>th</sup> January 2022. Every objective had outlined actions, measures and progress updates against each.

The Council of Governors noted the agreed objectives and progress to date.

#### **9.2 Corporate Governance Statement**

Karan Wheatcroft, Chief Governance Officer presented the proposed Corporate Governance Statements and asked for views for consideration by the Board of Directors.

The Council of Governors received the Corporate Governance Statements.

#### **9.3 Annual Review of Register of Interests**

The Chief Governance Officer presented the Annual Review of Register of Interests and noted that governors were required to declare interests that were material to the council annually or as they arise. It was added that a small number of governors were yet to complete the annual declarations and were requested to do so as soon as possible.

The Council of Governors received the report.

#### **9.4 Membership and Communications Sub Committee**

Elaine Holme, Public Governor-Merseyside and Chair of Membership and Communications Sub Committee presented the hot topics report from the Membership and Communications Sub Committee. It was noted that all key performance indicators had been achieved with the exception of the response rate from the members survey which had been lower than the previous survey in 2018. However, it was important to note that the format had been different on this occasion and patient stories and experiences had been sought. A fantastic number of experiences had been received and it was felt that the quality of the survey responses was more important than the quantity of responses received. It was added that the Head of Fundraising had attended the last meeting to explain opportunities for governors to support the hospital charity and details of this was provided within the report. Lastly, all governors were invited to get in touch with the Membership and Communications Sub Committee if they were aware of a community group that may benefit from a talk or presentation to support health awareness and education.

The Council of Governors received the report.

### **9.5 Feedback from Governor development groups**

There was a discussion from governors that had attended the recent NED Led Quality Development session and had found this very helpful.

## **10. Governor Engagement during COVID Pandemic**

The Chair invited the Director of Nursing and Quality to provide an update on the current position within the hospital in terms of the COVID pandemic. The Director of Nursing & Quality confirmed that infection prevention measures were still in place including social distancing, PPE and mandatory self testing and that the conference centre was still being utilised for the Vaccine Centre. It was suggested that an update be brought to the governors in April as to the current position and whether a face to face meeting of the Council of Governors may be possible.

The Council of Governors received the update.

## **11. Board of Directors**

### **11.1 Report from the Audit Committee**

The Deputy Chair/Senior Independent Director presented an update from the Audit Committee and added that he had been pleased with the Risk Management arrangements and excellent working of the joint iDigital teams. It was added that the Trust continued to have a strong anti fraud culture. It was added that the 2021/22 external audit is at the planning stage with an opinion deadline of 22<sup>nd</sup> June. Grant Thornton had also highlighted the good progress the firm had made in strengthening it's audit quality arrangements.

The Council of Governors received the report.

## **12. Update on Appointment from External Auditors**

The Chief Finance Officer noted that the Trust would need to tender for provision of external audit services for 2022/23 audit and beyond. The usual contract commitment was 3 years. A procurement process had been outlined and would be concluded with a recommendation to the Council of Governors at the June 2022 meeting. It was noted that a number of governors would be required to support the process. The Chair requested the Chief Finance Officer work with the Senior Governor to arrange this.

The Council of Governors received the update and approved the outlined process.

## **13. Process for Chair's Appraisal**

The Chief Governance Officer presented the timetable and process for the Chair's appraisal and noted that this had followed the same format as previous years. However, there was a tighter timeframe to this year's process due to the retirement of Neil Large, Chair from the role on 31<sup>st</sup> March 2022.

The Council of Governors were requested to complete the questionnaire and return this directly to the Senior Governor by 11<sup>th</sup> March 2022.

SP/VD

KE/TW



The Council of Governors confirmed support for the process outlined and for the SID to progress with the 2021/22 Chair's appraisal with a summary report which would be provided to the Council of Governors in June 2022.

**14. Action Log**

Action 1 – open – presentation to be scheduled for 2022/23.

Action 2 – completed and closed

**15. Date and Time of Next Meeting**

Tuesday 7th June 2022 at 1pm

DRAFT