

Item 3**Council of Governors (in Public)****minutes**

Minutes of the Meeting of the Council of Governors held on Monday 26th September 2022 at 1pm (in the Conference Room and via Microsoft Teams)

Present:

Val Davies
David Bromilow
Dorothy Burgess
Joan Burgen
Wendy Caulfield
Terence Comerford
Megan Cromby
Ray Davis
Sharon Faulkner
Peter Humphrey
Denis McAllister
Allan Pemberton
Trevor Wooding

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

In attendance:

Nicholas Brooks
Bob Burgoyne
Margaret Carney
Jonathan Develing
Gill Donnelly
Karen Edge
Julian Farmer
Nusaiba Hannan
Jonathan Mathews
Karen Nightingall
Sue Pemberton
Dr Raphael Perry
Louise Robson
Karan Wheatcroft
Mr Richard Williams

Non Executive Director
Non Executive Director
Non Executive Director
Director of Strategic Partnerships
Membership & Communications Officer (minutes)
Chief Finance Officer
Non Executive Director/Deputy Chair/Senior Independent Director
Corporate Governance Lead
Chief Operating Officer
Chief People Officer
Director of Nursing & Quality
Medical Director/Deputy CEO
Non Executive Director
Director of Risk & Improvement
Medical Examiner (for Item 7 only)

Apologies for absence:

Lynne Addison
Cllr Sharon Connor
Charlie Cowburn
Dr Rebecca Dobson

Public Governor – Rest of England & Wales
Nominated Governor – Liverpool City Council
Staff Governor – Registered and Non Registered Nursing
Staff Governor - Registered Medical Practitioners

Elaine Holme	Public Governor - Merseyside
Karen Higginbotham	Nominated Governor - LJMU
Rachael McDonald	Staff Governor- Non Clinical
Dorothy Price	Staff Governor – AHP, Technical and Scientific
Dusty Rhodes	Public Governor – North Wales
Princey Santhosh	Staff Governor – Registered and Non Registered Nurses
Hollie Swann	Nominated Governor – University of Liverpool
Peter Wareham	Public Governor – North Wales

1.

Opening Matters

The Council of Governors meeting was conducted face to face for the second time since the start of the pandemic in 2020. A hybrid approach was provided and governors could attend in person or via video conferencing to ensure ease of access. In order to conduct this meeting efficiently, the papers were produced as usual and in accordance with the business cycle and distributed on 21st September 2022 by e-mail, and post to those who had requested this.

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 or referred to the Governor to raise during the course of the meeting. This pre-work had been particularly helpful for virtual meetings and 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 attending virtually posed questions and made comments using the 'raise hand' or 'chat' functions on the video conferencing facility.

2.

Apologies for absence

Noted above.

3.

Declarations of interest relating to Agenda Items

There were no conflicts of interests declared.

4.

Minutes of the Council of Governors (CoG) held on 7th June 2022

The Council of Governors agreed the minutes were an accurate reflection of the meeting and **approved** these for the meeting held on 7th June 2022.

There was a discussion from governors which re-emphasised the importance of ensuring acronyms and abbreviations were defined within minutes and reports. The Director of Risk and Improvement confirmed this was on the action log and we would continue to look to improve this.

5.

Action Log

Action 1 – completed and closed

Action 2 – in progress and open. Contact had been made with Liverpool City Council and feedback was awaited.

Action 3 – completed and closed

Action 4 – completed and closed

Action 5 – completed and closed

Action 6 – completed and closed

Action 7 - it was discussed with governors that this work was on-going and work would continue on this.

The Council of Governors **received** the updates.

6.

Patient Story

The Director of Nursing, Quality and Safety shared a story of a patient who experienced chest pain and was admitted to the Accident and Emergency Department at his local hospital and brought to Liverpool Heart and Chest Hospital for cardiac surgery. The patient praised the work of the surgeon and the skilled team who had saved his life.

The Director of Nursing, Quality and Safety noted that it was really important that the Trust hears first hand from patients like this about their experiences. It was added that this patient had clearly had an emotional journey but was thankful he had received good care.

There was a question from Governors as to if there were any lessons learned from this experience and the Director of Nursing, Quality and Safety confirmed that this was the importance of receiving feedback such as this. These experiences meant that improvements could be made to enhance care in the future. In addition to this, Governors asked if there were plans to communicate the work on quality and safety further. The Director of Nursing & Quality confirmed there were plans to hold a 'marketplace' style event later in the year to celebrate some of this work.

The Chair thanked the patient for sharing his inspirational story and the teams that had provided the care for him.

The Council of Governors **received** the patient story.

7.

Medical Examiner Presentation

Mr Richard Williams, Medical Examiner provided an overview of the Medical Examiner system and the team involved in providing this service at the Trust. It was explained that medical examiners ensured the accuracy of the death certificate. It was added the Trust had regular interaction with the senior Liverpool Coroners. The Medical Examiner explained the system worked well at the Trust and governance arrangements were robust.

The Council of Governors received the presentation.

The Chair thanked Mr Williams for his informative presentation.

Chair's Briefing

8.

The Chair noted that she had attended a number of meetings within the regional healthcare system and provided an update on the Cheshire and Mersey Acute Specialist Trust Alliance (CMAST). The Chair had become a secondary sponsor to the Clinical Pathways workstream and was supporting the work of orthopaedics. It was added that work was progressing on the five workstreams and that governors would continue to receive updates.

The Non-Executive Directors (NEDs) were starting to engage more fully in the wider system and had just recently attended an event for NEDs.

Work was progressing well with Liverpool University Hospitals Foundation Trust on developing a single cardiology pathway for the benefit of patients. It was added that the new Royal Liverpool Hospital site was due to commence a phased opening this week and the Chair would be attending for a tour.

The Trust had been shortlisted as finalists for two Health Service Journal (HSJ) awards in the Trust of the Year category and Health and Wellbeing category. The winners would be announced and presented in November 2022.

It was highlighted that the Trust was expecting the Care Quality Commission's (CQC) National Inpatient Survey Results imminently and the Trust had been informed they were in the 'much better than expected' category. This was a very positive indication and a detailed breakdown of the results would be shared in due course.

The Chair added that interim appraisals had been completed with the Non Executive Directors and that she had visited 30 wards/departments to date. She had been very impressed with the culture she had observed so far at LHCH. Opportunities were available for governors to join Non-Executive Director walkabouts and governors were encouraged to join these.

There was a question from governors as to how the move of our patients from the old Royal Liverpool Hospital to the new would be managed. The Chief Operating Officer explained there would be a phased approach to manage this safely and appropriately. He was attending system calls and intended to visit the new site on a tour and would feedback at future meetings

The Council of Governors **received** the briefing.

9.

Strategy and Service Improvement

9.1 CoG Objectives

The Director of Risk and Improvement presented the Council of Governors objectives paper and noted good progress had been made. It was explained the forthcoming Joint Council of Governors and Board of Directors Development Day on 8th November 2022 would be utilised to review the progress against objectives for 2022 and look to develop those for 2023.

The Governors raised that a note should be added under Objective 6 to highlight that governors were benefiting from using NHS Providers as a source of information on Integrated Care Systems (ICS).

GD

The Council of Governors **received** the report.

Performance and Operations

10.

10.1 Strategic and Performance Dashboard

The Chief Operating Officer presented the report on Trust performance for the period ending 30th June 2022. It was noted that the Trust continued to operate in an environment that was focused on safely restoring high levels of elective activity as an output of the Covid 19 pandemic.

The referral to treatment (RTT) waiting times remained below target as expected due to the significant backlog accumulated during the pandemic, however the Trust was working hard to improve this.

Performance in month stood at 81.44% for English commissioned activity and 84.34% for Welsh commissioners. It was added that there were 58 patients waiting longer than 52 weeks at the end of June and it was explained staff sickness, urgent demand and dropped anaesthetic sessions had all impacted the quarter 1 trajectory.

Cancer was a specific area of focus and there was a cross divisional action plan in place to ensure improving performance against three cancer targets.

There was a question from governors asking if the Trust had a process in place to ensure good communication was managed with the number of colleagues off long term sick. The Chief People Officer confirmed there was a robust managing attendance policy and the number of staff off long term sick was reducing.

It was requested by governors that performance reports avoided acronyms or included definitions to support governors in defining the terminology moving forward. The Chief Operating Officer agreed that he would look at this for the next meeting.

There was a further question around what is meant by improving private patients' income. The Chief Operating Officer clarified that the Trust was aware that private patients' income could be improved and the teams had met to devise and implement plans.

There was a concern raised by governors around the level of staff turnover being over 10%. The Chief People Officer explained that this was currently 11.7% however there was work underway including the appointment of a new Nurse Recruitment Lead to focus on this area. It was noted that nationally under 15% was considered a healthy turnover. The Trust had this firmly in their focus to ensure this figure improved to be meet the Trust's target of 10%. There was a query around if the Trust collected and analysed the data from exit interviews to understand why staff are leaving the organisation. The Chief People Officer confirmed that this process was in place however, focus was more on targeting the staff who hadn't decided to leave, but may be thinking about it. Governors noted that they had been pleased to see an improvement in mandatory training.

Council of Governors **received** the update.

10.2 Finance Report

The Chief Finance Officer presented the Finance Report detailing financial performance for the period ending 30th June 2022. The financial plan agreed at the start of the year was to achieve a breakeven position however, further funding had been made available nationally and increased non-recurrent CIP (Cost Improvement Plan) had been required of all providers in the Integrated Care System. These adjustments had been made to the plan with the revised plan being to deliver £2,328k surplus.

In summary the Trust year to date position at month 3 was a surplus of £586k and was consistent and in line with plan. The month 5 update would be presented to the Board of Directors the next day and governors were welcome to observe.

There was a question from governors as to if the Trust would be able to meet the Cost Improvement Plan (CIP) and the Chief Finance Officer was confident this would be met.

The Heads of Departments were working hard to ensure the CIP is met and there was lots of scrutiny on ensuring delivery of this.

Governors asked if the Trust would benefit from subsidised energy costs. The Chief Finance Officer noted that it was envisaged that whatever the pressure was this would be managed through the Integrated Care Board (ICB) level and nationally, however, the detail had not been confirmed on this yet.

There was a question from governors to the Chief Finance Officer as to what control the Trust now had on capital allocations within the Integrated Care System (ICS). The Chief Finance Officer explained the Integrated Care Board (ICB) receives the allocation and was required to work with the providers to prioritise the allocation. It was highlighted that not all organisations received what they required in 2022/23 as there were significant pressures in terms of capital developments in Cheshire and Merseyside. The schemes that did not receive funding will be first on the list for the Trust in the next financial year.

The Council of Governors **noted** the financial position of the Trust and received the report.

10.3 Patient & Family Support Team Quarterly Report

The Director of Nursing, Quality and Safety presented the Patient and Family Support Team Quarter 1 report for 2022/23. It was noted that the Trust had received 9 formal complaints in quarter 1, 77 contacts had been made, 57 informal concerns and there had been 20 requests for information or advice. 13 compliment letters/emails had also been received.

The Director of Nursing provided assurance that the complaints process and management was robust and monitored for effectiveness based upon the Trust's Complaint Policy. It was added that all actions and learning from both informal and formal complaints were discussed at both divisional and organisational level.

There was a question from the governors asking whether a patient's discharge could be 'potentially' negligent. The Medical Director confirmed that this had been investigated and discharge had been considered clinically appropriate. There was a request from governors as to if the number of patients receiving treatment per division could be incorporated into the report to provide comparable data. The Director of Nursing & Quality agreed to seek input from the Information Team on this.

The Council of Governors **received** the update.

SP

10.4 Annual Staff Survey

The Chief People Officer presented the Staff Survey Action Plans and People Pulse Results. It was noted the paper provided a full analysis of the 2021 survey and associated actions and was noted that the Trust was rated as the highest acute trust in 8 out of 9 themes. It was highlighted that a number of Trusts had been in touch to share learning which may help them improve their ratings. A 'You said, We did' approach had been taken to demonstrate some of the work that had been undertaken to improve further.

There was a discussion from governors as to how staff receive financial support and assistance. The Chief People Officer explained that an 'Ask for Freddy' food bank had been introduced for staff to utilise anonymously and free sanitary products were now available onsite for colleagues as part of a wider wellbeing offer.

There was a discussion from governors around the timing of the report and how the 'you said, we did' piece had been cascaded throughout the Trust. The Chief People Officer explained that the paper demonstrated learning from last year's survey and the work that had been undertaken in response to this and the NHS Staff Survey 2022 would be distributed to staff imminently. It was raised by governors that there was an exemplary model of wellbeing and this had been shared with the Chair and Chief People Officer for information. The Chief People Officer offered her thanks and added this had been shared with the Health and Wellbeing team.

The Council of Governors **received** the update.

10.5 Annual Staff Survey

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The Council of Governors **received** the update.

11.

Governance and Assurance

11.1 External Auditor: Auditor Effectiveness Review

The Chief Finance Officer presented the report and highlighted that as the external audit had concluded for 2021/22 that feedback from those involved had been sought. The feedback received showed that the audit focused on the risks, was thorough, and that Grant Thornton were professional, knowledgeable and the audit was well organised. It was noted that 2021/22 was the final year of the contract with Grant Thornton and the Trust was currently out to tender for a supplier of external audit services for the 2022/23 accounts.

The Council of Governors **received** the update.

11.2 Governance Developments Update

The Director of Risk and Improvement presented an update on Governance Developments which would change how Foundation Trusts would operate in the future. The Trust was awaiting final publication of the documents and these will be used to review current arrangements and agree any actions in conjunction with the Council of Governors.

There was a discussion from governors noting that there were still many unanswered questions as to how the governance would look moving forward. The Director of Risk and Improvement noted that further briefings would follow as and when this was published nationally. It was noted that ensuring Black Asian Minority Ethnic (BAME) representation in the workforce and at Board Level continued to be a focus for the Trust.

The Council of Governors **received** the report.

12.

Governor Issues

12.1 Feedback from Network/Engagement Events

- PLACE Assessment – Trevor Wooding, Senior Governor updated the Council of Governors of his attendance, along with Elaine Holme, Public Governor, to support the PLACE Assessment of external areas on the hospital site.
- Disability Awareness Day – Denis McAllister, Public Governor – Cheshire discussed this event which he had attended with members of the Membership and Communications Sub Committee. Volunteers attending on the day had successfully recruited new foundation trust members of the Trust.
- NHS Providers GovernWell Virtual Workshops – It was noted by governors that a report would be produced and feedback provided in due course.
- Patient Engagement Event – Trevor Wooding, Senior Governor provided feedback from the recent patient and family engagement event which had been the first face to face since before the pandemic. It was noted that there were common themes identified which would be used to embed learning and make improvements. He offered his thanks to the nursing team facilitating the event.

12.2 Governor Elections

The Chair presented the Governor Elections report to governors which highlighted the outcomes of the recent Staff Governor and Public Governor elections.

The Chair welcomed Stephen Storey as Public Governor – Cheshire and Michelle Beaver, Staff Governor – Registered and Non Registered Nurses. In addition, the Chair welcomed Rebecca Dobson as Staff Governor – Registered Medical Practitioners and Sharon Faulkner as Staff Governor – Registered and Non Registered Nurses who had both been re-elected.

The Council of Governors **received** the report.

Working Groups

13.1 Membership and Communications

13.

Dorothy Burgess, Public Governor – Merseyside and Deputy Chair of Sub Committee presented the report from the last meeting and highlighted all key performance indicators had been achieved. Thanks were offered to the clinical teams who supported the membership engagement agenda and it was explained that a campaign was being worked on to raise awareness of heart health in women.

In addition to this it was noted that a membership recruitment day was due to take place at Liverpool John Moores University at the end of October and thanks was offered to Michelle Laing, LJMU for organising this. Lastly, it was added that new members of the Membership and Communications Sub Committee would be welcome.

The Council of Governors **received** the report.

13.2 Feedback from Development Groups

The Chair noted that there was no feedback from this meeting to discuss.

14. Committee Updates

Julian Farmer, Audit Committee Chair provided an update from the meeting held on 19th July 2022 and highlighted that the Trust was on track and work was progressing in maintaining robust audit arrangements. This included achievement of risk management KPIs, updating of the governance manual, compliance with license, losses and special payments, MIAA progress reports, clinical audit plan, Anti-Fraud service rating and external audit.

Margaret Carney, Non-Executive Director presented a report from the People Committee held on 20th September 2022. It was added that the committee looked at the strategy and also delivery of this strategy with consideration of the workplans in place, performance indicators and risk. It was added that work had taken place however there was more to do. A key area of challenge was in ensuring high standards for doctors in training. It was added that the questions today from governors on health and wellbeing, recruitment and retention were all areas of focus.

There was a comment from governors that walkabouts were important to see how staff were feeling. The Chair confirmed that walkabouts were operational again and the Governors were welcome to join Non-Executive Directors on their walkabouts.

Nick Brooks, Chair of the Quality Committee presented a report from the Quality Committee meeting held on 12th July 2022. It was noted that there had been good progress in areas listed on the clinical quality dashboard and also in terms of completed quality impact assessments for CIP (cost improvement plan) schemes. It was added there had been excellent work in nearly all areas of the stroke annual assurance report.

Louise Robson, Non-Executive Director presented a report from the Integrated Performance Committee meeting on 25th July 2022. The committee had carried out a deep dive exercise on the performance report and in particular on the surgical long waiting patients and cancer. It was also explained that the Year 2 Service Line Reporting strategy had been reviewed with key risks and achievements.

Bob Burgoyne, Non-Executive Director provided an update from the Charitable Funds Committee on 12th July 2022. It was noted there had been extensive fundraising activity with income being 33% ahead of plan. It was noted that six new bids to utilise charitable funds had been approved. It was explained that two new charitable campaigns suggested by the Consultants Fundraising Group had been approved which included a 3D echo machine for cardio-oncology and simulation centre for training.

The Chair thanked the Non-Executive Directors for the updates and the Council of Governors **received** the reports.

15.

Date and Time of Next Meeting: Tuesday 6th December 2022