

Item 4

minutes

Council of Governors

Minutes of the Meeting of the Council of Governors held on Tuesday 22nd September 2020 (via Microsoft Teams)

Present:

Neil Large
Lynne Addison
Mark Allen
Peter Brandon
Joan Burgen
Dorothy Burgess
Wendy Caulfield
Terence Comerford
Charlie Cowburn
Dr Rebecca Dobson
Sharon Faulkner
Elaine Holme
Ian Jones
Allan Pemberton
Dorothy Price

Ruth Rogers
Dusty Rhodes
Lindsey Van Der
Westhuizen
Trevor Wooding
Rachel Glynn Williams

Chair
Public Governor – Rest of England and Wales
Public Governor - Cheshire
Public Governor - Cheshire
Public Governor – North Wales
Public Governor - Merseyside
Nominated Governor – Friends of Robert Owen House
Public Governor - Merseyside
Staff Governor – Registered and Non Registered Nurses
Staff Governor – Registered Medical Practitioners
Staff Governor – Registered and Non Registered Nurses
Public Governor - Merseyside
Nominated Governor - LJMU
Public Governor – Cheshire
Staff Governor – Allied Healthcare Professionals, Technical & Scientific
Public Governor - Merseyside
Public Governor – North Wales
Public Governor - Cheshire

Senior Governor/Public Governor - Merseyside
Public Governor - Merseyside

In attendance:

Nick Brooks
Bob Burgoyne
Marga Perez Casal
Megan Cromby
Gill Donnelly
Karen Edge
Manoj Kuduvalli
Mark Jones
Lucy Lavan
Jonathan Matthews
Karen O'Hagan
Sue Pemberton
Jane Tomkinson
Kate Warriner
Robin Wiggs
Vicki Wilson

Non Executive Director
Non Executive Director
Director of Research & Innovation
Finance Business Partner - Medicine
Membership and Communications Officer (Minutes)
Chief Finance Officer
Associate Medical Director - Surgery
Non Executive Director
Director of Corporate Affairs
Divisional Head of Operations - Medicine
Non Executive Director
Director of Nursing & Quality
Chief Executive Officer
Chief Digital & Information Officer
Deputy Director of Strategic Partnerships
Acting Director of HR

Apologies for

absence:

Cllr Sharon Connor
Lynn Trayer Dowell
Sharon Hindley
Hollie Swann
Peter Wareham

Nominated Governor – Liverpool City Council
Staff Governor – Registered and Non Registered Nurses
Staff Governor – Non Clinical
Nominated Governor – University of Liverpool
Public Governor – North Wales

1. Opening Matters

In accordance with the Trust's response to Covid 19, the Council of Governors meeting was again 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 15th September 2020 by e-mail and post.

A template was produced for each Governor to complete individually. This required each participant to record comments and questions as they reviewed each paper, and where a decision was needed, to record whether or not they supported the recommendation. The responses were collated and summarised by the Director of Corporate Affairs in advance of the virtual meeting. This pre-work enabled the Council of Governors meeting to be conducted efficiently and facilitated the production of a minute for each agenda item, supplemented by discussion and clarification via the video conferencing call. Given the number of participants, Governors were asked to utilise the chat function during the meeting and to note that the Chair would invite each Governor in turn to speak at the end of the agenda to make any comments or seek further clarity.

2. Apologies for absence

Noted above.

3. Patient Story

The Director of Nursing & Quality shared a patient story relating to a patient that had received emergency treatment at Liverpool Heart and Chest Hospital. He had experienced hallucinations and delirium within the Post Operative Critical Care Unit (POCCU) and paid testament to the excellent reassurance and care received from the staff in this area. The patient explained he was delighted to have been able to celebrate his 86th birthday with family and friends and thanked all staff at the hospital for their skill and expertise which had made this possible. The patient had paid tribute to the service of the patient and family liaison team who provided regular updates to his family during this worrying time. He also noted that the care did not stop when he had been discharged and described a Health Care Assistant from Birch Ward that had called check how he was getting on post discharge.

4. Declaration of Interests

None declared.

5. Minutes of the Council of Governors (CoG) held in public on: 2nd June 2020

The Council of Governors approved the minutes of the meeting held (in public) on 2nd June 2020, subject to a correction to confirm the attendance of Dorothy Burgess.

6. Chair's Briefing

Neil Large, Chair opened his briefing by thanking Lynn Trayer Dowell, Staff Governor – Registered & Non Registered Nurses, Sharon Hindley, Staff Governor – Non Clinical and Ruth Rogers – Public Governor-Merseyside for their time and commitment to the governor role. All three governors would end their terms of office at the end of the Combined General Meeting of Annual Members' Meeting 2020 which would follow today's meeting.

The Chair added his congratulations to those governors that had been re-elected in the recent Governor Elections and welcomed Peter Humphrey as Public Governor-Merseyside, Princey Santhosh as Staff Governor – Registered & Non Registered Nurses and Rachael McDonald and Megan Cromby as Staff Governors-Non Clinical. They would commence their three year terms of office at the end of the Annual Members' Meeting 2020. It was added that Ian Jones would be shortly stepping down as the Nominated Governor-Liverpool John Moores University and a new representative would be identified. The Chair offered his thanks to Ian Jones for his support and time in the role to date.

The Chair outlined a number of changes to the Board of Directors and welcomed Kate Warriner as Chief Digital & Information Officer. It was noted Jonathan Develing, Director of Strategic Partnerships had retired and would be returning shortly on a part time basis. He added that Sue Hodgkinson, Interim Director of People & Culture had now left the Trust, Vicki Wilson was Acting Director of HR until the newly appointed Chief People Officer, Karen Nightingall started in the role in early November.

The Trust would be marking World Heart Day on 29th September and celebrations include the LHCH Main Entrance to be lit up in red. It was added that Kate Warriner, Chief Digital & Information Officer would be part of a quartet attending from Maghull Wind Orchestra to provide themed music on the day and this would be shared online.

7. Chief Executive's Briefing

Jane Tomkinson, Chief Executive Officer provided an update on the Specialist Trust Alliance in Liverpool and noted that the alliance had been working together very effectively now for a number of years. The alliance incorporated the largest grouping of specialist trusts in the country with 8,000 staff, 706 beds and a combined turnover of £700 million. There had been a number of examples of good collaborative working for the Trust. This included the joint appointment of a Chief Digital & Information Officer with Alder Hey, joint estates work with Clatterbridge Centre of Oncology, collaborative working with the Communications team at Alder Hey and Procurement Team collaboration led by the Walton Centre. All the work of the alliance aligned to integration of plans across Cheshire and Merseyside for integrated care systems.

The Chief Executive Officer provided an update on the Trust's response to new Covid 19 government restrictions just announced that day. It was highlighted that Gold Command would be looking at what implications these would have on the Trust with regards to staffing. It was noted Covid 19 related hospital admissions had increased in the Liverpool region.

The Council of Governors received the update.

8. Covid 19 Updates

8.1 Covid dashboard

Jonathan Mathews, Head of Operations – Medicine summarised the Covid dashboard and explained that this was presented to the Executive Team on a weekly basis and tracked key indicators across the Trust.

It was explained that there had been a shift resulting in the higher numbers of patients waiting more than 18 weeks. This was primarily monitored via weekly performance meetings. It was noted that there was a new process of how Service Line Managers would review any deaths that occur on the waiting list and a RCA would be completed. Critical Care current occupancy was 60% and 6 out of 8 theatres were utilised at present. Staff sickness in August was 3.5% and Covid absence 1.5%. It was noted that the swabbing had now picked up on a higher number of Covid 19 cases in recent weeks. This followed a fairly static summer period. It was noted that Outpatient appointment cancellations had continued to increase and this was primarily due to the cancellation of community setting appointments including spirometry activity and the reduced number of face to face appointments that could be safely brought into hospital. The Trust is currently working with CCG partners regarding aerosol procedures and it is hoped that from September onwards that there could be an increase in this activity, subject to a second surge and the level of community transmissions of Covid 19.

Trevor Wooding, Senior Governor asked if the Trust had been able to source sufficient testing for staff and patients through the use of a private laboratory. Jonathan Mathews, Head of Operations – Medicine added that the Trust is now using Liverpool Clinical Laboratories which had been able to meet demand at present. This would continue to be monitored on a weekly basis. Lindsey Van Der Westhuizen, Public Governor - Cheshire Hospital noted cancellations were still continuing to rise for outpatients, month by month and asked what was the plan for reducing this. Jonathan Mathews explained that the significant difference in numbers related to community and respiratory appointments and the restrictions regarding aerosol procedures. The Trust continued to work with CCG partners to look at the air flow of different venues and although there have been cancellations efforts had been made to rearrange these as far as possible.

8.2 Resuming activity/operations – Phase 3

Jonathan Mathews, Head of Operations-Medicine highlighted that the Trust was working against the national plan to accelerate the levels of non covid health services to near normal levels. It was noted that activity levels in August had been 70% and there was a forecast of 80% for September and 85% October with a plan to meet the 90% requirement for activity and 100%

for diagnostics. Draft plans have been developed and this will be developed across STPS/ICSs with clear triangulation between commissioner and provider activity and performance plans. In relation to cancer activity it was noted that the Trust had been a strong performer throughout Covid 19 and consistently hit 100% targets. It was noted that the divisions had been working hard on the recovery trajectory and that Radiology as an example had reverted to a seven day service to meet year end compliance of 99.9%.

The Chair thanked all staff who had worked hard through these challenging times and exceptional circumstances. Jane Tomkinson, Chief Executive Officer added the Executive Team were working through a range of scenarios which may impact the workforce as a result of the latest government restrictions. It was added that patient and staff safety would continue to be paramount as had been the case throughout the pandemic.

There was a discussion around how the Trust compared in relation to levels of activity with other providers and Jonathan Mathews, Head of Operations – Medicine explained that the Trust was doing well in and ahead of the curve in relation to other providers.

8.3 Infection Prevention and Control

Mr Manoj Kuduvalli, Associate Medical Director – Surgery provided an update on the six point plan for Infection Prevention and Control. Significant progress had been made and it was reviewed on a regular basis. The Infection Prevention and Control Board Assurance Framework was in place and a gap analysis had been conducted, with any gaps mitigated and reported to the Board of Directors. It was noted additional equipment had been purchased for fit testing and ultraviolet cleaning. Cleaning processes had been increased to include greater frequency of deep cleaning.

It was highlighted that the biggest challenge for the Trust in terms of infection prevention was in managing the balance between Covid 19 and maintaining patient activity. There would also be a need to support the local health economy as required.

The Council of Governors received the update.

8.4 Visiting

The Director of Nursing & Quality highlighted that visiting had been suspended during the Covid 19 pandemic. On 7th September 2020 the Trust enabled visiting again and this had worked very successfully. However, in light of the increased prevalence in the community visiting had ceased again to ensure patient and staff safety. It was noted that visiting had now been limited to families of end of life patients and those with caring responsibilities. It was added that family members had been very understanding about the suspension and that the stance on visiting was the same throughout the whole of the Liverpool health system.

Sue Pemberton, Director of Nursing & Quality also highlighted that a recent virtual review had been conducted by the Care Quality Commission (CQC) and the surgical team. No issues had been raised as part of the review and

the CQC are producing a written report which would be shared with the Council of Governors and Board of Directors when available.

The Council of Governors received the update.

8.5 Research

Marga Perez Casal provided an update on the developments in research during the Covid 19 pandemic. It was explained that the Trust had received a mandate to stop all non-covid research activity in March 2020 as part of the national lockdown for Covid 19. It was highlighted that the Trust had been able to recruit close to 100 patients to a range of Covid 19 research studies. The Liverpool System Response had been through the Strategic One Liverpool Partnership for COVID which was a city wide initiative to help decrease the burden of Covid 10 locally, nationally and globally. It was explained that this collaboration had resulted in improved overall research performance and there had been a number of successes. It was noted that plans for the Trust included a target for 80% resumed clinical trials by March 2021, 60% of Covid patients to be offered participation in Covid19 therapeutic trials and to continue with the STOP Covid collaboration.

The Council of Governors received the update. Allan Pemberton, Public Governors-Cheshire highlighted he had seen evidence of some amazing research projects and results through the North West ARC group he has been involved with.

9. Capital Projects Update

Jonathan Mathews, Head of Operations – Medicine highlighted it would be a challenging year for capital projects. It was noted there were multiple projects running at the present time including Cath Lab Re-development, Estates and Electric infrastructure, Cath Lab Roofing and Highfield House.

Ruth Rogers, Public Governor – Merseyside requested an update on how the IT infrastructure was working within the hospital. Kate Warriner, Chief Digital Officer added that the feedback had been good on the investment in digital systems such as Microsoft Teams to invest in this way of working for the future. Additional equipment had been invested in and reconfiguration work and increased bandwidth particularly to support staff working from home. The Digital Strategy had been developed and would be brought to the Board of Directors next week. This outlined a number of further improvements that should be made to make further marked improvements.

The Council of Governors received the update.

10. People Plan

Vicky Wilson, Acting Chief People Officer presented an update on the NHS People Plan published by NHS England & Improvement and Health Education England. It was noted that the LHCH People Strategy will be based on national NHS People Plan and include what this means for the LHCH workforce in terms of health and wellbeing, equality and inclusion, new ways of working such as education and growing for the future e.g. workforce

planning. National metrics will be reviewed to develop a single dashboard to enable the Trust to review consistently against the national and LHCH plan.

The Council of Governors received the update.

11. Performance

11.1 Performance Report for Period Ended 30th June 2020

Jonathan Mathews, Head of Operations-Medicine presented the Performance Report and added the main areas that had been discussed within the Covid Dashboard. The Trust had been proactive in recreating RTT trajectory and added there is not a national requirement to address this at present. There was a discussion around the possibility of a second wave and the impact this would have on patient activity. Jonathan Mathews, Head of Operations-Medicine added that this would have an impact and it was important the Trust was able to care for patients with covid and without covid. The Chief Executive Officer added that it was vital the Trust maximised the current time to fulfil as much non-covid patient activity as is absolutely possible in light of the increasing infections in the community.

There was a discussion with Governors as to if the Phase 4 diagnostic plan had been achieved. Jonathan Mathews confirmed that this had been achieved and following a discussion it was noted that work continued to be focused on retaining staff via a range of staff health and wellbeing initiatives e.g. car parking and food provisions and this would be re-visited.

The Council of Governors received the report.

11.2 Finance Report for Period Ended 30th June 2020

Karen Edge, Chief Finance Officer provided a summary of the Trust's financial position at the end of quarter 1. A break even overall financial position was recorded at the end of month 3. The Covid interim financial providers were that providers receive a fixed level of income based on prior year averages. Total expenditure was £1.4m lower than planned due to less clinical activity being undertaken.

The Council of Governors received the report.

11.3 Patient & Family Support Team Activity Report Q1

Sue Pemberton, Director of Nursing & Quality presented the report and highlighted there had been 4 formal complaints, 52 contacts and 18 compliments within Quarter 1. 12 informal responses had been resolved by consultants, matrons and specialist nurses. A breakdown of complaints were referred to within the report which included a review from the ombudsman.

The Council of Governors received the report and governors requested a selection of compliment letters to be circulated for information. In addition to this, more information as to the steps taken which resulted in closure of a complaint would be included within future reports.

SP/GD

SP

11.4 Annual Patient Survey

The Director of Nursing & Quality highlighted the results of the Annual Patient Survey which had seen the Trust come second in the country for overall patient care. There were three areas that the Trust's score was significantly lower than previous years these included the discharge process, research participation and seeking patient views on the quality of care. Overall, the results for the Trust were excellent with many areas the Trust came top in the country. The Director of Nursing & Quality provided assurance that the action plan had been undertaken to address the areas for improvement.

There was a discussion from the Council of Governors around the challenges of raising the profile of research with every patient. It was requested that an update be brought to the Council of Governors later in the year in relation to research.

MPC

Dorothy Burgess, Public Governor – Merseyside raised a point about the resumption of the Council of Governor focus groups. It was agreed that the Chair and Director of Corporate Affairs would discuss this and bring a recommendation to a future meeting.

NL/LL

The Council of Governors received the report.

12. Governance and Assurance

12.1 Amendment to the Constitution of Liverpool Heart and Chest Hospital

The Director of Corporate Affairs presented the paper outlining the rationale for five amendments to provisions of the LHCH Constitution. It was noted that the main driver for reviewing the constitution at this time related to the issue of membership for the staff of organisations hosted by LHCH. It was explained that it was recommended that employees of hosted organisations should not be eligible for staff membership (and hence may stand for staff governor and vote in staff governor elections) but instead provision would be made for eligibility to apply for public membership. This was because it would be difficult for members of staff from hosted organisations to understand the issues faced by staff of LHCH and therefore inappropriate for them to be eligible to represent the interests of staff members.

It was also recommended that staff employed by other parties who worked exclusively for LHCH should be eligible to opt in as staff members.

All 5 proposed amendments, as set out in the paper were discussed and governors invited to ask questions or seek points of clarity.

It was explained that to amend the constitution more than half of the Council of Governors and Board of Directors would need to vote in favour. All 20 members of the Council of Governors present at the meeting (via video link) voted in favour of accepting all five amendments, as described. The vote was conducted via a show of virtual hands using the 'raise hand' icon on the MS teams or by physically raising a hand on camera. It was confirmed that there were no abstainers or votes against and therefore that the vote was unanimously in favour.

The Council of Governors approved all 5 amendments to the constitution.

It was noted that the Board of Directors would be asked to consider the amendments at its meeting on 29th September 2020.

12.2 Report to BoD of the Freedom to Speak Up Guardian

The Director of Corporate Affairs asked the Council of Governors to note the report of the FTSU Guardian to the Board and highlighted the Trust had ranked top in the FTSU Index for the second year running.

It was noted The Director of Corporate Affairs had been invited to sit on the national FTSU Advisory Group as FTSU Executive Lead. It was also noted the Trust would shortly be recruiting a new FTSU Guardian as Helen Turner would shortly be leaving for a new position at another Trust. Plans were also in place to refresh the network of champions.

The Council of Governors received the report.

13. Governor Issues

13.1 Governor Elections 2020

Gill Donnelly, Membership and Communications Officer presented the Final Report of Voting and noted the interest in the governor elections had been high this time with eleven out of the thirteen seats contested. The national turnout in all elections had been above the national average for governor elections.

Thanks were noted to Ruth Rogers, Public Governor – Merseyside, Lynn Trayer-Dowell, Staff Governor – Registered and Non Registered Nurses and Sharon Hindley, Staff Governor – Non Clinical who were stepping down at the end of their terms of office.

13.2 CoG Objectives 2020: Progress Report

Lucy Lavan, Director of Corporate Affairs outlined the progress against the set Council of Governor objectives 2020 and noted the intention to re-start the Membership and Communications Sub Committee now the Governor Elections had concluded. It was noted that it had been a challenging year and progress towards delivery of the objectives had been the best it could have been in the context of the pandemic and limitations around delivering the planned membership engagement programme of community events. The Joint Board of Directors and Council of Governors Development Day would provide an opportunity for governors to shape their objectives for 2021.

The Council of Governors received the reports.

14. Governor engagement during COVID pandemic

The Chair discussed that a number of new ways of working had been introduced to continue to engage with governors during the pandemic and explained he envisaged that this new virtual way of working would be the

norm for the foreseeable future. The Council of Governor received the update.

15. Board of Directors

15.1 Report from the Audit Committee

Mark Jones, Non Executive Director presented the Audit Committee report on behalf of Julian Farmer, Deputy Chair and Chair of the Audit Committee. It was explained that at the last meeting the Audit Committee had identified no major issues and the committee had the ability to track and ensure that audit findings and recommendations were being addressed. It was noted that a two year extension had been agreed in principle for the external auditor. However, given the significant changes to external audit requirements fee negotiations continued and were expected to be finalised at the October Audit Committee. Governors would be kept informed.

The Council of Governors received the report.

15.2 Report from the Quality Committee

Nick Brooks, Non Executive Director explained the role of the Quality Committee was to carry out an independent and objective review to assure the Board of Directors on all aspects of quality including delivery, governance and clinical risk management. He provided assurance that all cost improvement programmes had to undergo a quality impact assessment. It was noted that a focus for 2019/20 had been progress of the Getting It Right First Time surgical action plan, sepsis documentation and management and reduction of medication errors. Nick Brooks, provided assurance everything possible was being completed with regards to these work streams. It was noted that the priorities for 2020/21 included mortality, management of sepsis, infection rates and consent for procedures.

The Council of Governors received the report.

15.3 Report from Charitable Funds Committee

Bob Burgoyne, Non Executive Director and Chair of the Charitable Funds Committee presented the report from the Charitable Funds Committee and highlighted £171,000 had been raised for 2019/20. It was noted that despite a challenging year due to Covid 19, where there had been reduced income due to the suspension of community events, that the income for the year to date was currently £291,000. This included a substantial donation from NHS Charities Together.

It was also noted that the Charity Office continued to work in partnership with Liverpool University and were looking to explore opportunity for collaborative work around the research for Liverpool Centre for Cardiovascular Science.

Bob Burgoyne, Non Executive Director thanked the Charity Team for their hard work during the pandemic and noted the new LHCH Charity website was now online bringing greater visibility to the hospital charity and facility for

cashless donations.

15.3.1 LHCH Charity Annual Report and Accounts 2019/20

The Council of Governors noted the LHCH Charity Annual Report and Accounts 2019/20.

16. Action Log

Item 1 – completed and closed

Item 2 – completed and closed

17. Date and time of the next meeting

Tuesday 1st December 2020 at 1pm in the LHCH Conference Room.