

Item 10.3.2

## Board of Directors (in Public)

### Item 7

## minutes

### Minutes of the Board of Directors' meeting held on 27<sup>th</sup> March 2018

<b>Present:</b>	<p>Neil Large Jane Tomkinson Nicholas Brooks Julian Farmer Mark Jones Sue Pemberton Raphael Perry</p> <p>Darren Sinclair Tony Wilding</p> <p>Claire Wilson</p>	<p>Chairman Chief Executive Non-Executive Director Non-Executive Director/ Deputy Chair Non-Executive Director Director of Nursing and Quality Medical Director / Deputy Chief Executive Non-Executive Director Director of Strategic Partnerships &amp; Chief Operating Officer Chief Finance Officer</p>
<b>In Attendance:</b>	<p>Mark Jackson Lucy Lavan Joanne Twist</p>	<p>Director of Research and Innovation Director of Corporate Affairs Director of Workforce Development</p>
<b>Apologies for absence :</b>	<p>Marion Savill</p>	<p>Non-Executive Director/ Senior Independent Director</p>
<b>Observers: Governors / Staff/ Members of the Public:</b>	<p>Tony Bennett</p>	<p>Divisional Head of Operations - Medicine</p>

		Action
<b>1</b>	<b>Welcome and Opening Matters</b>	
<b>1.1</b>	<b>Apologies for absence</b> Apologies were received from Marion Savill.	
<b>1.2</b>	<b>Declaration of interests relating to agenda items</b> The Chair asked Board members if they had any interests to	

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Chair's  
Initials

declare in respect of items listed on the Board's agenda. All directors declared that they had no interests.

It was acknowledged that the Board would be reviewing Directors' interests, independence and fit and proper persons' compliance under Item 5.2 and would be mindful of any discussion involving individuals' personal circumstances if / when these arose.

### **1.3 Patient Story**

The Director of Nursing & Quality read a patient story and noted that action was underway to improve the process for transferring patients to and from the Isle of Man; and also to formalise a training process for diabetes management for medical and nursing staff.

### **1.4 Chairman's Briefing**

The Chairman recognised the work of David Bricknell who had served on the Board of Directors for a period of eight years up until his retirement at the end of February 2018. The Board noted their appreciation for David's valued input and wished him well for the future.

It was noted that the governor by-election (North Wales) was underway and progressing well with five candidates; also that there would be a further number of governors reaching the end of their term of office in September 2018, with annual elections taking place in the summer.

Professor Ian Jones would succeed Michelle Laing as appointed governor for Liverpool John Moores University – the Board wished to record their appreciation for Michelle Laing's valued service.

## **2 Patient Safety and Quality**

### **2.1 National staff Survey Results 2017**

The Director of Workforce presented the detail of the 2017 staff survey results, highlighting in particular the improvements in Workforce Race Equality Standards (WRES), staff appraisals and staff feeling able to make suggestions for improvement. The overall staff engagement score had remained unchanged and the Trust was ranked second amongst providers nationally in the combined score for staff recommending the organisation as a place to work or receive treatment.

The HR team would now analyse the results at departmental level and Divisional action plans would be developed for review at Operational Board.

The Board discussed the 'free text' comments made by staff noting three themes around car parking, lack of recognition and thanks and limited opportunity for career development. It was noted that the mock CQC inspections had also highlighted some pockets within the Trust where improvements in staff

engagement and experience were not improving at the required pace and these would form the focus of developmental work in 2018/19.

It was noted that staff experiencing physical violence did not correlate with reported incidents and that the focus on staff training on critical care to manage patients with delirium would be rolled out across all wards.

Plans to re-launch 'Listening into Action' in 2018/19 were noted and this would enable more staff to have the opportunity to highlight the things that are important to them and also be involved in finding the solutions.

The Chairman concluded that the overall results were excellent and that People Committee would receive assurance around further improvement work.

## **2.2 LHCH Monthly Staffing – January 2018 and February 2018\***

The Board received and noted the reports on staffing levels by ward and care hours per patient day for January 2018 and February 2018, and acknowledged the process of daily risk assessment to ensure safe staffing by flexing staffing levels in accordance with patient numbers and acuity.

It was noted that the detailed annual review of staffing levels had been presented to People Committee on 19<sup>th</sup> March 2017.

The Board noted the report.

## **3 Strategy and Development**

### **3.1 Health Economy Update – NHS Cheshire and Merseyside 5YFV and CVD Pathway**

The Chief Executive updated the Board, noting that the focus for the Cheshire and Merseyside systems wide work had moved away from the three local delivery systems to nine place based care localities. Liverpool had established an Integrated Care Partnership Group with a focus on 3 schemes of work – Prevention, Community Services and Hospitals. A series of high impact schemes had been identified which would secure early traction and there would be greater input going forward from the local authority and third sector. LHCH would offer leadership in two areas of high impact work on long term conditions – respiratory and cardiac rehabilitation. A high level template had been delivered to set out high level plans for each high impact work programme.

It was noted that Andrew Gibson had confirmed his availability and would attend the Board Strategy Day on 29<sup>th</sup> May 2018 and that Jan Ledward would also be invited to share thinking on how LHCH can consolidate its place within the wider strategic work programme.

The Chairman provided feedback on the recent Chairs and CEOs meeting, referring to the presentation slides he had

previously circulated and noting that the drive and energy to change was now gaining momentum with the first tranche of transformation planned for Southport and East Cheshire.

The Board noted the update and plans to explore the Trust's positioning and role further on 29<sup>th</sup> May 2018.

All

### 3.2 Sustainability Strategy – Annual report 2017/18 and Forward Plan

The Director of Strategic Partnerships & Chief Operating Officer presented the report, noting good progress on delivery of the action plan with a number of schemes improving both the environmental impact and cost efficiency. He advised the Board that there was further opportunity around environmental improvements and also in relation to corporate social responsibility and that a new strategy was being developed which would be brought to the Board for consideration in July 2018.

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The Board discussed opportunity to further consolidate services across Liverpool, noting the progress made in embedding the shared estates service. It was noted that there was now a clear understanding of what facilities services were provided and where and that ERIC data was being utilised to identify opportunities for greater efficiency.

It was noted that the CQC's well led domain now had a renewed focus on sustainability and there was a need for a strong plan in this area spanning the next few years.

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The Board noted the report.

### 3.3 Gender Pay Gap Reporting

The new requirement to publish gender pay gap analysis by 31<sup>st</sup> March 2018 was noted.

The Board discussed the report noting that this was not about equal pay but about representation, with the analysis providing a focus for the organisation to reflect on what opportunities it was providing in relation to access to leadership positions.

The analysis highlighted that the Trust's consultants were predominantly male and whilst more than 50% of entrants to medical school were female, there remained a tendency for men and women to adopt differing career pathways within medicine.

The Board concluded that the data provided useful intelligence and noted that the Equality and Inclusion Group would consider this further and determine any actions to target improved representation across the workforce going forward. The report would be published on the Trust's website by 31.3.18.

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**Targets and Financial Performance**  
**Strategic, Financial and Operational Dashboards - period ended 28<sup>th</sup> February 2018**

The Director of Strategic Partnerships and Chief Operating Officer presented the report and noted that work was underway to improve and streamline the performance dashboards for the 2018/19 reporting period.

He advised that there were no new areas of exception to highlight and noted the continued management focus on RTT, diagnostic waits, HSMR and staff sickness.

It was noted that the primary reason for high cancellations in February had been high patient acuity which had restricted flow through critical care. The Board discussed the continued workforce challenge for POCCU posed by inability to recruit middle grade doctors and the lead time involved in training Advanced Nurse Practitioners. The Division were currently considering a range of options to enable full bed capacity to be released safely.

A discussion followed around the wider issue of shortage of surgical trainees and opportunities that could arise from the new training module for medicine which required a 3 month rotation into critical care.

It was noted that medical staffing within radiology and POCCU were currently the two most challenged areas from a workforce perspective.

The Board heard that there was a further risk around rejection of Certificate of Sponsorship for Trust Grade doctors as medicine was not recognised by the Government as a profession for which there is shortage of supply.

The Medical Education Workforce Group was maintaining oversight of the workforce supply issues and reviewing arrangements for out of hours staffing.

The Board discussed the underperformance of activity in February and heard that there were no concerns about the volume or flow of referrals or the waiting list. February had been reported as the most pressured month nationally. The key constraint at LHCH had been critical care capacity and shortage of Level 3 beds had resulted in a 'spike' of cancelled elective procedures.

The Chief Finance Officer advised that referrals were higher than expected for the year to date with a total of 47,500 referrals to the end of February compared to 45,000 for the same period in 2016/17. Within this, external referrals had increased from 10,800 to 11,080.

The Board noted the report.

#### **4.2 Going Concern Report**

The Chief Finance Officer presented the report, demonstrating the range of evidence used to assess the Trust's position as a Going Concern. The Board of Directors confirmed its reasonable expectation that the Trust had adequate resources to continue in operational existence for the foreseeable future; also that there were no material uncertainties that cast doubt on the Trust's ability to continue as going concern that required disclosure.

### **5 Governance and Assurance**

#### **5.1 Ratification of Consultant Appointments**

The Board ratified the following consultant appointments:

- Vasileious Papaioannou - Consultant Cardiologist
- Ian Wilson - Consultant Cardiac Surgeon.

#### **5.2 Annual Review of Director's Disclosures**

The Board noted that all Directors had been formally requested to review their declarations of interest.

The Board reviewed the updated Register of Directors' interests and confirmed that there were no material conflicts with the business of the Trust.

The Board received evidence that all Non-executive directors (NED) had recently reviewed their self-declarations of NED independence and determined the continued independence of all NEDs.

The Board noted that Neil Large was in his ninth year of service as Chair and gave careful consideration to his circumstances, determining that he remained independent based on (but not limited to) the following points:

- No material conflicts of interest;
- Clear boundaries maintained between professional and personal relationships;
- No involvement in Audit Committee or Board Assurance committees;
- No involvement in Operational Board, Executive or management forums.

The steady turnover of NEDs had brought independence and fresh perspective to the collective Board and there continued to be strong evidence of constructive challenge as evidenced in the Well Led review and ongoing documentation of Board meetings.

The Board received evidence that all Board Directors (voting and non-voting) had completed unqualified self-declarations in respect of the fit and proper persons criteria set out in Regulation 5 (Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and as required by the Trust's Fit and Proper Persons Policy.

- 5.3 Code of Governance : Compliance Review and Disclosure Statement**  
The Board noted the report and approved the proposed disclosure (at Appendix 2) for the 2017/18 annual report.
- 5.4\* Freedom to Speak Up Guardian – Annual Report 2017/18\***  
The Board noted the report.
- 6 Board Assurance**
- 6.1 BAF Key Issues Reports and Minutes from Assurance Committee Meetings:**
- 6.1.1 Audit Committee**  
The Board received the approved minutes of the meeting of the Audit Committee held on 7<sup>th</sup> November 2017.
- 6.1.2 Integrated Performance Committee (IPC)**  
The Board noted the BAF key issues report and received the approved minutes of the meeting of the Integrated Performance Committee held on 30<sup>th</sup> October 2017.
- 6.1.3 People Committee**  
The Chair of the People Committee noted that work was underway to explore reasons why staff leave with a focus on key roles and capabilities in order to better inform retention strategies and succession planning.
- The committee would also seek to align the staff survey results with key workforce indicators including sickness absence and turnover to triangulate and inform improvement work. It was agreed that it would be timely to review the workforce dashboard to ensure that the KPIs were relevant to a new generation of the workforce who expected and sought to move jobs more rapidly than the preceding generation. It was noted that partnership working offered opportunity to rotate staff and create new career opportunities.
- The Board noted the BAF key issues report and received the approved minutes of the meeting of the People Committee held on 5<sup>th</sup> December 2017.
- 7 Minutes of the Board of Directors Meeting held on 30<sup>th</sup> January 2018 (in public)**  
The minutes of the meeting of the Board of Directors held on 30<sup>th</sup> January 2018 (in public) were reviewed for accuracy and approved by the Board.
- 8 Action Log from Previous Meeting**  
The action log was reviewed and updated as follows:
- Action 2 – The requested enhancement to the SOF dashboard to include RAG rated forecast outturn for performance indicators would be implemented for 2018/19 reporting.
- Action 3 – completed and closed.

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All actions not listed above would carry forward per designated review dates.

- 9      Legality of Board Documentation and Decisions**  
Board members confirmed that the conduct of the meeting and decisions made by the Board, to the best of their knowledge, complied with the law. Board members confirmed they were satisfied with the format of the meeting.
- 10     Date and Time of Next Meeting:**  
Tuesday 1<sup>st</sup> May 2018 at **9.00 am**.
- 11     The Board resolved to exclude the public at this point by reason of the private nature of business to follow.**