

Board of Directors (in Public)

Item 11.4.2

minutes

Minutes of the Board of Directors' meeting held on 3rd July 2018

Present:	<p>Neil Large Jane Tomkinson Nicholas Brooks Julian Farmer Mark Jones Sue Pemberton Raphael Perry</p> <p>Marion Savill</p> <p>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/ Senior Independent Director Director of Strategic Partnerships & Chief Operating Officer Chief Finance Officer</p>
In Attendance:	<p>Mark Jackson Lucy Lavan Joanne Twist</p> <p>Rod Stables</p> <p>Gregory Lip</p>	<p>Director of Research and Innovation Director of Corporate Affairs Director of Workforce Development</p> <p>Consultant Cardiologist / Honorary Professor of Interventional Cardiology, University of Liverpool (Item 2 only) Price-Evans Chair of Cardiovascular Medicine, University of Liverpool (Item 2 only)</p>
Apologies for absence :	<p>Ken Morris</p>	<p>Non-Executive Director</p>
Observers: Governors / Staff/ Members of the Public:	<p>Peter Brandon Dorothy Burgess Ruth Rogers Jason Cashen</p>	<p>Governor Governor Governor Abbott (Healthcare Supplier)</p>

1 Welcome and Opening Matters

1.1 Apologies for absence

Apologies were received from Ken Morris.

1.2 Declaration of interests relating to agenda items

The Chair asked Board members if they had any interests to declare in respect of items listed on the Board's agenda. All directors declared that they had no interests.

1.3 Chairman's Briefing

The Chairman commented on the positive national publicity for the NHS surrounding the NHS 70th Birthday celebrations, which at LHCH would be recognised with a celebratory staff barbecue on 5th July 2018.

It was noted that a recent meeting of local Specialist Trust Non-Executive Directors had been well received by all and plans were in place to follow this up with a further meeting in September.

The next meeting of the Cheshire and Merseyside Health and Care Partnership would take place on 4th July 2018 and the Chairman would be in attendance.

The Chairman paid recognition to and congratulated Mark Allen, Governor (Cheshire) who had recently participated in the European Heart and Lung Games in Italy, noting that Mark had added further to his growing collection of medals from this annual competition.

The Chairman welcomed Professors Stables and Lip to the meeting.

1.4 Patient Story

The Board heard a patient story in the form of a video involving a patient involved in a research trial.

2 Research and innovation

2.1 Research and Innovation Strategy 2018/19 – 2020/21

The Director of Research and Innovation presented the Research & Innovation Strategy 2018/19 – 2020/21, noting the need for research and innovation to drive change, improve patient care and outcomes, build reputation and support economic growth. The previous strategy had focused upon commercial activity, recruitment to trials and placing research activity on a stronger financial footing; there had also been some notable academic successes. The key features of the new strategy included the development of an aortovascular partnership with the Royal Liverpool Hospital and St Bartholomew's Hospital, London; robotics research in surgery; new research initiatives in the fields of cardiomyopathy, cardio-

oncology, interventional endoscopy, cardiovascular imaging, artificial intelligence in radiology, adult congenital heart disease and community cardiovascular and respiratory services. There would be continued focus on the Institute of Cardiovascular Medicine and Science (ICMS) led by Professor Stables and a new Liverpool Centre for Cardiovascular Science (LCCS) led by Professor Gregory Lip.

The strategy set out intent to build on partnerships with the University of Liverpool, Liverpool John Moores University, Edge Hill University and Liverpool Health Partners in the field of education as well as research. Measures to increase research capability included the introduction of non-medical consultant positions and higher degree opportunities. Plans to maximise patient involvement and to exploit opportunities to commercialise innovations were set out and the Board noted the performance management and governance framework that would support ongoing research and innovation. The ultimate aim of the strategy was to develop LHCH as a major player in contributing to the health needs of the City through research and innovation.

2.2 Institute of Cardiovascular Medicine (ICMS) Overview

Professor Stables presented to the Board on the work of ICMS during the year 2017/18, highlighting the complementary strengths of LHCH and Royal Brompton & Harefield in working collaboratively and with industrial partners. The 2017 ICMS Symposium had enabled development workshops which focused upon establishing adult congenital heart services in Liverpool and across the Northwest, acute stroke services and cardio oncology services. Going forward there would be a greater focus on promotion of the impact of ICMS via improved communication, staff exchanges, improved research planning, developments at the University of Liverpool and preparation for the 2018 ICMS Symposium.

2.3 The new Liverpool Centre for Cardiovascular Sciences – Strategy and Opportunities

Professor Lip set out the aims of his new role and key research interests in epidemiology, and pathophysiology of thrombosis in cardiovascular disease. His intent was to establish a Liverpool Centre for Cardiovascular Science (LCCS) with objectives to build a unifying cardiovascular research strategy for the City, coordinate all cardiovascular related research in the health economy and make a meaningful contribution to the CVD cross cutting theme of the Cheshire and Merseyside Health and Care Partnership; and to support Liverpool Health Partners in its pursuit of Biomedical Research Centre status for the City.

The Board discussed the Research & Innovation Strategy and the presentations received, noting strong progress and the exciting opportunity afforded by the establishment of the LCCS. Professor Lip's appointment would attract more clinical fellows and would hopefully lead to more joint academic appointments. LCCS represented a sea change in the approach of the

University of Liverpool. Which previously had not recognised CVD as a research priority.

It was noted that the Health Research Authority had recently lifted the requirement for peripheral research staff to be GCP certified which was important for the rollout of randomised trials.

Professor Stables reflected on the success of the HEAT PPCI trial, noting that LHCH's biggest strength was the prevalence of substantial clinical material afforded by the population demographic, and staff of the highest calibre who had demonstrated an ability to deliver a fast recruiting major trial in a cost effective way.

The Board approved the Research & Innovation Strategy, noting its strength and granularity and the significance of Professor Lip's appointment.

The Board recognised the work of the Director of Research and Innovation and thanked Professors Stables and Lip for their contributions.

Professor Stables and Professor Lip left the meeting.

3

Patient Safety and Quality

3.1

CQC Mock Inspection Report 2018

The Director of Nursing & Quality reported on the comprehensive programme of mock inspections that had been conducted over the past year to support the maintenance of standards across the Trust. The fortnightly Sharing and Learning Forum continued to meet and had provided opportunity for teams to work through the new CQC standards and key lines of enquiry as well as sharing learnings and examples of outstanding practice.

It was noted that the Director of Nursing & Quality and the Director of Corporate Affairs had planned a mock well led inspection which would be conducted in September and October 2018 and report to the Board in November.

The Board noted the report and that preparation for the next CQC inspection was progressing well. Staff morale was positive as evidenced through the Listening into Action work and National Patient Survey results. It was agreed that the Board would receive a further update report in 6 months' time.

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3.2

CQC National Patient Survey Results 2017

The Director of Nursing & Quality reported that LHCH had been ranked top in the country for overall patient care for the ninth time in the last 12 years. LHCH was also ranked top in the results relating to 'Care and Treatment' and 'The Hospital and Ward'.

The Board reviewed the detailed results, noting that the Quality

Committee would undertake a deep dive of all sections of the survey and identify areas for improvement.

The Chairman expressed on behalf of the Board, thanks and appreciation for the staff who had again achieved exceptional feedback from patients through their tireless focus on patient and family centred care.

3.3 Doctors in Training Update

The Medical Director presented the report, noting that due to the restructuring of the Deanery, there had been no visit since November 2016 and that the Trust's action plan had been completed 12 months ago. The Trust remained on enhanced monitoring by the GMC.

The Board noted that poor experiences reported by surgical trainees were common to all cardiothoracic centres and as a result there had been a national review of training provision. The report and recommendations were awaited.

The Board discussed the long-standing issue of trainees having insufficient experience of theatre due to pressures to manage patients on critical care. Action had been taken to release 2 days per week of registrar cover on POCCU through development of Advanced Nurse Practitioners who now provided cover to release medical trainees, allowing them more time in theatre.

The Medical Director advised that despite the designation of enhanced monitoring, the GMC's criteria for enhanced monitoring was unclear and in practice no monitoring was taking place.

The Board noted the report and the continued efforts to improve the experience of doctors in training.

3.4 LHCH Monthly Staffing – April 2018 and May 2018*

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

The Board noted the report.

3.5 Guardian of Safe Working – Q1 Exception Report *

The Board noted the report.

3.6 Winter Preparedness Plan 2018/19*

The Board noted the report.

3.7 Safeguarding Annual Report 2017/18*

The Board noted the report.

3.8 Organisational Learning*

The Board noted the report.

4 Strategy and Development

4.1 Service Improvement Plan and Listening Into Action

The Board received the report and supported the recommendation that the Trust adopt the Institute of Healthcare Improvement (IHI) methodology to support its service improvement work. The A3 reporting tool would be utilised to measure project success over 90 day improvement cycles.

It was noted that the Board had received the results of the Listening into Action (LiA) pulse check at the last meeting and that since this time, three engagement events had been held to engage staff in the prioritisation and delivery of improvement projects over the remainder of the financial year.

The Board approved the planned approach to service improvement which would improve staff engagement and assist in meeting the quality and financial challenges presented by the economic environment.

4.2 Corporate Social Responsibility Strategy

The Board reviewed the work to date and noted that the strategy brought together the estates led sustainability plans and responsibilities associated with good corporate citizenship.

The Corporate Social Responsibility Strategy, which had previously been approved by Operational Board was ratified by the Board of Directors.

4.3 Membership Strategy 2018-2021

The Director of Corporate Affairs noted that Board Directors had previously been sighted on revisions to the Membership Strategy following approval by the Council of Governors. The key changes included a reduction in the target public membership from 10,100 public members to a minimum of 8,000 public members with an emphasis on representation and quality of engagement, including increased communication via social media.

It was noted that there was a cost to maintaining a membership and the revisions sought to improve effectiveness.

The Board ratified the Membership Strategy 2018-2021.

4.4 Annual Review of Team LHCH Objectives*

The Board noted the report.

5 Targets and Financial Performance

5.1 Board Dashboard - period ended 31st May 2018

The Director of Strategic Partnerships and Chief Operating Officer presented the performance report, highlighting that compliance with the RTT target had returned at Month 2 and was on track for Month 3, following the breach at Month 1.

A discussion followed around the adverse variance against the target for cancelled operations. The internally set target was a stretch target in recognition of the negative impact that cancellations have on patient and family experience but remained challenging in the context of increasing numbers of urgent cases from referring hospitals, particularly in aortics, together with the impact of new pathways for out of hospital cardiac arrests. It was acknowledged that a different model of care would be needed to address this issue and was constrained by the significant investment that would be required to separate elective and emergency scheduling.

It was noted that the Integrated Performance Committee had reviewed benchmarking data in relation to cancelled operations and assurance had been received that LHCH's performance compared favourably to that of other providers.

The Board noted the report.

6 Governance and Assurance

6.1 Ratification of Consultant Appointments

The Board ratified the following consultant appointments:

- Vasileious Papaioannou - Consultant Cardiologist (ACHD)
- Avante Gulhane - Consultant Radiologist
- Ahmed Kharabish – Consultant Radiologist
- Susannah Love – Consultant Thoracic Surgeon

6.2* Emergency Preparedness and Business Continuity Assurance Report *

The Board noted the report.

6.3* Health and Safety Assurance Report*

The Board noted the report.

6.4* Annual Complaints Report 2017/18*

The Board noted the report.

7 Board Assurance

7.1 BAF Key Issues Reports and Minutes from Assurance Committee Meetings:

7.1.1 Audit Committee

The Board received the approved minutes of the meeting of the Audit Committee held on 10th April 2018.

7.1.2 People Committee

The Chair of the People Committee highlighted the Committee's focus on key skills and talent in relation to retention, voluntary turnover, culture and leadership, staff development and freedom to speak up.

The Board received the approved minutes of the meeting of the People Committee held on 19th March 2018.

- 8 Minutes of the Board of Directors Meeting held on 1st May 2018 (in public)**
The minutes of the meeting of the Board of Directors held on 1st May 2018 (in public) were reviewed for accuracy and approved by the Board.
- 9 Action Log from Previous Meeting**
The action log was reviewed and updated as follows:
- Actions 1-3 : completed and closed;
Action 4 – to be concluded as part of refresh of the Quality Strategy (September 2018);
Action 5 – implementation of RAG rated forecast performance outturn on Board dashboard linked to business intelligence review and action plan – closed on Board action log.
- 10 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 4th September 2018 at **9.00 am**.
- The Board resolved to exclude the public at this point by reason of the private nature of business to follow.