

Combined General Meeting of the Council of Governors and Annual Members Meeting 2017

Item 4

minutes

Date of Meeting: 25th September 2017
Time: 4.30 pm
Venue: Conference Room, Research Centre

Present:

Board of Directors: Neil Large/Chairman
David Bricknell/Deputy Chair/Senior Independent Director
Nicholas Brooks/Non-Executive Director
Julian Farmer/Non-Executive Director
Mark Jackson/Director of Research & Informatics
Mark Jones/Non-Executive Director
Lucy Lavan/Director of Corporate Affairs
Raphael Perry/Medical Director
Sue Pemberton/Director of Quality & Nursing
Marion Savill/Non-Executive Director
Jane Tomkinson/Chief Executive
Joanne Twist/Director of Workforce Development
Claire Wilson/Chief Finance Officer
Tony Wilding/Director of Strategic Partnership & Chief Operating Officer (part)

Governors: Lynne Addison/Governor – Rest of England
Ken Blasbery – Governor – Cheshire
Mike Brereton/Governor – Cheshire
Amanda Clarke/Governor – North Wales
Charles Cowburn/Governor – Registered & Non Registered Nursing Staff
Kerry Fitzpatrick/Governor – Registered & Non Registered Staff
Roy Griffiths/Governor – North Wales
Sharon Hindley/Governor – Non-Clinical Staff
Vera Hornby/Governor – Merseyside
Michelle Laing/Governor – Partner Organisations
Caroline McCann/Governor – Staff (Part)
Paula Pattullo/Senior Governor – Merseyside
Allan Pemberton/Governor - Cheshire
Roy Stott/Governor – Merseyside
Ged Taylor/Governor – Partner Organisation
Lynn Trayer-Dowell/Governor – Registered & Non Registered Nursing Staff (Part)
Trevor Wooding/Governor – Merseyside
Judith Wright/Governor - Cheshire

Auditors:	Georgia Jones/Audit Manager – Grant Thornton Michael Thomas/Director – Grant Thornton
Staff and Members of the Public:	Mathew Back/Communications & Marketing Manager John Black/FT Member Peter Brandon/FT Member Dorothy Burgess/FT Member Gillian Donnelly Katherine Griffiths Elaine Holme/FT Member J Richard Holmes/FT Member Lesley Hughes/Executive Office Manager (Minutes) Mary Liley/Head of Fundraising Ruth Rogers/FT Member Joan Sambrook/FT Member Robyn Sefton/Charity Administrator David Skelton/FT Member Derek Thomas/FT Member Michael Tomkins/Membership & Communications Officer (Interim) Maureen Worrall/FT Member
Apologies for absence:	Denis Bennett/Governor – North Wales Glenda Corkish/Governor – Partner Organisation Christina O'Hare/Governor – Partner Organisation Brian Roberts/Governor – Merseyside Darren Sinclair/Non-Executive Director Alexandra Thompson/Governor – Non-Clinical Staff

1. **Welcome and Introduction**

The Chair welcomed members and attendees to the Combined General Meeting of the Council of Governors and Annual Members Meeting 2017 which was an opportunity to share the results of the previous year and the future vision of the Trust in addition to formal receipt of the 2016/17 Annual Report and Accounts.

2. **Patient Story**

A patient story was read by Sue Pemberton, Director of Nursing & Quality.

3. **Apologies for absence:**

As noted above.

4. **Minutes of the Annual Members Meeting held on 26th September 2016**

The minutes of the Annual Members meeting held on 26th September 2016 were approved as an accurate record.

There were no matters arising.

5. **Board of Directors' Reports**

5.1 Receipt of Annual Report and Accounts 2016/17:

The Council of Governors and Members formally received the Annual Report and Accounts for 2016/17.

Full copies of the Annual Report and Accounts for 2016/17 were available to collect following the meeting or to download via the Trust's website www.lhch.nhs.uk via the following link:

<https://www.lhch.nhs.uk/media/5409/lhch-annual-report-2016-17-final.pdf>

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5.1.1 Overview of 2016/17

Sue Pemberton, Director of Nursing & Quality presented an overview of the Trust's 2016/17 performance which set out the key priorities around quality, safety and patient and family experience; workforce, performance and finance. The following points were highlighted.

- The Care Quality Commission had rated the Trust 'outstanding' in September following their initial inspection in April 2017.
- National Inpatient Survey: Second in the country in 2016 for overall patient care (top for overall patient care in eight of the last 11 years).
- National Staff Survey: Top hospital provider in the country to work and receive treatment.
- One of 18 Trusts rated 'outstanding' in the Department of Health's 'Learning from Mistakes' League.
- Ranked in the top 100 best places to work by the Health Service Journal.

A copy of the Care Quality Commission's report can be accessed via the following link:

<http://www.cqc.org.uk/provider/RBQ>

The presentation provided examples of the Care Quality Commission's findings in relation to safety, effectiveness, care, response to patients and families and how the Trust was well led and managed by a stable, visible and accessible Executive team.

The Trust's focus was to make the patient and family experience the best it could be through a "Care Partner Programme" to engage family and friends in the care of the patient. Open visiting and the launch of "Speak out Safely" three years ago were now embedded across the Trust with staff empowered to speak out against any potential safety concerns. A HALT programme for patients and families had also been launched.

All infection indicators were met in relation to MRSA and clostridium difficile.

The improvements in the environment were noted including the Outpatients Department and the Critical Care garden area which is utilised by patients and families.

The organisational learning process supported the provision of safe care via:

- Daily safety and ward huddles where all departments shared concerns around safety and/or incidents.
- Learning from deaths; the Trust's policies to be strengthened following new national guidance.
- Freedom to Speak Up Guardian and network of champions.
- Implementation of a new Organisational Learning Policy.
- Building capability and learning from human interaction (Human Factors) with colleagues supporting each other to ensure the safety of patients.
- Sharing mechanisms.
- Clinical audit.
- The implementation of the "Safety Seven".

The workforce highlights included the following staff survey results:

- Highest response rate in the country to the staff survey.
- Top provider countrywide as a place to work or receive treatment.
- Highest number of staff appraised.
- Highest response in "role makes a difference to patients".
- Staff not experiencing bullying and harassment.

Performance:

Regulatory requirements were met in 2016/17 via:

- Focused capacity planning.
- Improvements to patient flow.
- Embedded strong leadership across the divisions.
- Weekly Executive Group performance reviews.
- Chief Executive leading the Operational Board which was attended by divisional heads, clinical leads and reported on performance.
- Reduced mixed sex breaches and delayed discharges.

Considerable work had been undertaken around capacity planning.

Finance:

An overall summary of the year set out that the Trust had continued to face a challenging financial environment with the year ending on plan, with a deficit of £392k. £2.5m of efficiencies had been delivered while continuing to maintain an outstanding quality of care.

The Trust had invested £5.95m to improve its estate and environment.

The Chair invited questions from the members in relation to the 2016/17 results. No questions were raised.

5.2 Report of the Auditor:

5.2.1 Audit Findings for Year Ending 31.03.17

Michael Thomas/Director – Grant Thornton (external auditor) was welcomed to present the Audit Findings Report which highlighted the key issues affecting the results of the Trust; preparation of the Financial Statement for the year ending 31st March 2017; and reported the audit findings to management and those charged with governance in accordance with the requirements of the International Standard on Auditing.

The key messages arising from Grant Thornton's audit of the Trust's Financial Statements were:

- The accounts presented for audit were high quality and were available to them by the required deadline.
- The accounts were supported by high quality working papers.
- Only minor amendments were made to the disclosures and presentation of the accounts.

Value for Money: The auditor confirmed an unqualified opinion in respect of the financial statement. The auditor confirmed satisfaction that in all significant respects, the Trust had proper arrangements in place to secure economy, efficiency and effectiveness in its use of resources.

Grant Thornton was required to disclose their views on significant qualitative aspects of the Trust's arrangements for delivering economy, efficiency and effectiveness. The work focused on significant risks which were identified by the Trust therefore the following was considered:

- Good financial planning and reporting arrangements were in place.
- There was a level of challenge via "confirm and challenge" meetings.
- A CIP Improvement Group was in place.
- The integration of a risk management framework.
- There was a culture of openness and transparency at the Trust.
- There was recognition for the need for transformational change.
- Strong arrangements in place to address the findings from Care Quality Commission inspection and Monitor's licence conditions.

It was concluded that no issues had been identified for referral to the regulator or required a public interest report to be issued.

5.2.2 Quality Report to Governors

Michael Thomas also presented the limited assurance opinion on the Quality Report 2016/17 confirming that based on the results of the audit findings the following had been established:

- The report was consistent with NHSI's guidance.
- The content of the report was consistent with the information and auditors knowledge.
- Stakeholder feedback had been received and was consistent with the key messages in the report.

An unqualified conclusion was provided on the Quality Report and the two mandated indicators were noted as:

- Percentage of incomplete pathways within 18 weeks for patients on incomplete pathways at the end of the reporting period.
- Maximum waiting time of 62 days from urgent GP referral to first treatment for all cancers.

The auditors were also required to review one local indicator which was chosen by Governors, namely post aortic surgery follow-up call. The auditor was unable to confirm that the indicator complied with all six dimensions of data quality and a number of recommendations were made in respect of these issues.

The Chair invited questions to the auditor. No questions were raised.

The audit findings were noted; the Chair thanked Michael Thomas for his attendance and presentation.

5.3 Forward Look – Our Vision and Future Plans

Jane Tomkinson, Chief Executive and Dr Raphael Perry, Medical Director provided a forward look on the Trust's vision and future plans. The presentation focused on the Trust's future and its continuing journey to 'be the best' and the progress to date. A video was played which presented comments from patients who shared their experience.

As a Foundation Trust the organisation was required to deliver statutory targets of performance and finance while focusing on improving the environment and delivering clinical excellence. The presentation set out the golden thread which linked the following key areas:

- Personal objectives
- Trust Values
- MyPACT:
 - Patient and family experience
 - Accountability
 - Continuous improvement
 - Teamwork
- Our Mission: Excellent, compassionate and safe care for every patient every day.
- Our Vision: "To be the Best".

The presentation then addressed the 5 key facets of the Trust's future journey:

a) Systems:

The Sustainability and Transformational Partnership, Liverpool being one of the largest in the country. The Trust had members of its Executive Group in leadership roles working with local government, academia and patients to shape how it delivered improvements in

cardiovascular disease across the region. The cardiovascular disease programme focused on core areas being clinically driven to improve care, audits, access and value for money by way of:

- Primary pacing services.
- Extending cardiac rehabilitation.
- Integrated community heart failure services.
- Managing lifestyle and risk factors.
- Diagnostics.
- Stroke services.
- Acute coronary syndrome pathway.
- Standard aortic dissection pathway.

Dr Raphael Perry informed members that this was an opportunity to improve the health of the nation; funding was limited and savings had been identified therefore it was now the primary objective to partner with local hospitals and stakeholders on service change and improvement.

The Trust also had ambitions to improve its international profile and was exploring international collaborative working, where there was opportunity to bring benefit to the NHS.

b) Staffing:

Evidence showed that motivated staff provided better care. The Trust worked with its 1,580 staff by:

- Developing its leaders.
- Staff retention.
- Listening events and 'big conversations'.
- Enhancing its inclusivity programme.
- Embedding the Freedom to Speak up Guardian role.
- Promotion of HALT.

c) Service:

Further ambitions to 'be the best' were demonstrated through the following:

- Enhanced inherited cardiac condition service.
- The introduction of cardio oncology clinics.
- Introduction of cardiac and thoracic robotic surgery; on course to develop the service over the next 12 months.
- Extending imaging and diagnostics through skilled radiographers.
- Upgrading of Maple Suite and Catheter Laboratories.
- Potential invasive stroke service in conjunction with The Walton Centre.
- Expanding community services following on the successful launch of the Knowsley service.

d) Science and Digital

Work relating to the development of technology and science would see the

implementation of:

- Robotic Surgery:

The introduction of Robotic surgery would allow for:

- Minimal tissue trauma.
- Shorter ICE/ward stay.
- Would be cost neutral once established.
- Provide a new hybrid coronary artery bypass graft programme
- The Trust would be the first robotic cardiac centre in the United Kingdom.
- Provide huge research potential.
- Would improve the outcome for thoracic patients.

The development of technology brought:

- Digital integration with the health economy.
- Upgraded electronic patient record system.
- The launch of new research trails.
- Enhanced remote digital patient monitoring.
- The 2nd centre worldwide to use Konica Minolta x-ray machine.
- 3rd centre in the United Kingdom to use Fractional Flow Reserve technology (the measurement of blood pressure and flow through the coronary artery).

e) Sharing and Learning

The Trust had also implemented a number of initiatives to promote “Sharing and learning”, namely:

- The Human Factors Strategy.
- An organisational learning programme.
- The roll out of EPR into the community.
- Learning from incident reporting through the introduction of the DATIX system; a web-based incident reporting and risk management software system for healthcare.

Jane Tomkinson, Chief Executive reflected on the challenges both internally and externally, the need to take risks but how the culture within the organisation and the drive of its staff would meet the challenges.

5.3 LHCH Charity:

During 2016/17 the Trust had a new vision to deliver robotic surgery and had worked hard to establish a new brand with a series of new events, literature and new ways of communicating with donors and making donations through merchandising, lottery and a ‘just giving’ campaign.

Charitable funds had also supported the following initiatives:

- Ward refurbishments equating to £83k.
- The purchase of new medical equipment to the value of £15k.

- Research, training and education to the value of £62k.
- Patient welfare £17k.
- Robotics campaign; contribution to the capital costs.

Jane Tomkinson expressed the gratitude of the Trust to all fundraisers for their contributions and support. Further information in relation to fundraising initiatives was available from the Charity office.

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The Chair invited questions from the members. There were none raised.

6. Council of Governors' Reports

6.1 Governors' Reports 2016/17:

Paula Pattullo, Senior Governor provided an overview of Governor activity and development during 2016/17 and the following was noted:

- Joint development day with the Board of Directors had been held on 16th November 2016.
- Governors were represented on local and national Governor networking events.
- The Council of Governor meetings received presentations on topics of interest at the start of Governor meetings.
- Governors conducted regular 'walkabouts' to wards and departments.
- Continuation of improved 'interest groups' pre Council of Governor meetings led by an Executive Directors.
- Regular communications and development through a range of meetings and events.

The presentation set out the key tasks for the period and the responsibilities that had been undertaken, namely:

- Holding the Non-Executive Directors to account for the performance of the Board of Directors.
- The appointment and re-appointment of Non-Executive Directors.
- Governors' role in the Trust's vision to 'be the best'.

Council of Governor meetings were held in public and open to all staff to attend.

The Chair invited questions from the members. No questions were raised.

Lynn Trayer-Dowell left the meeting.

6.2 Membership Report:

Mike Brereton/Governor – Cheshire provided an overview of work by the Membership and Communications Sub-Committee and highlighted the key activities across the year:

- The Trust had maintained its target optimum membership of 10,100.
- Recruitment activity in 2016/17 aimed to improve representation of

- members across geographical area, age, gender and ethnicity.
- No staff members had opted out to date.

Membership activities were noted which reflected the Trust's vision to 'be the best' focusing on the engagement and retention of members; improvement of the quality of engagement, active recruitment of new members and focused on improving representation of patients and the public.

The events attended and organised were across the region and included:

- "Today's Research is Tomorrow's Medicine", Wrexham, 26 May, 2016 (in collaboration with Wrexham Health support groups)
- "Breathing Easier", Whiston, 14 June 2016.
- "Would you know what to do in an emergency?", Warrington, 13 July 2016.
- "Annual Members' Health Event", 10 September 2016.
- "Stroke Rehabilitation", Chester, 23 March 2017.

Community events included:

- "Disability Awareness Day", Warrington, 10 July 2016.
- Liverpool John Moores University recruitment event, 29th November 2016.

Governors also supported regional Patient and Family Listening Events during the year.

The Membership and Communications Group met quarterly with Governors represented from each area and supported by the Director of Corporate Affairs. The group monitored the membership profile to assist with recruitment and engagement and each event to inform future plans.

The presentation also set out the plans for 2017/18 and the following was noted:

- "Cardiac Devices" Medicine for Members Event, LHCH, 19 April 2017.
- "Annual Members Health Day", LHCH, 6 May 2017.
- "Diabetes" Medicine for Members Event, Wrexham, 24 May 2017.
- "Disability Awareness Day", Warrington, 16 July 2016.
- Liverpool John Moores University Spring recruitment event, 4 April 2017.

Plans for the future included:

- LHCH Charity event "In Living Colour" (8th October 2017).
- "Sounds of the Season" (8th December 2017, Litherland).
- "Shineathon" (LHCH, December 2017).

A copy of the latest "Members Matters" Newsletter was available to those present and published quarterly, available via the Membership Office.

The Chair invited questions from the members; Derek Thomas asked the Trust

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to give consideration to providing information such as “Members Matters” in an audio format to aid those with visual impairment. The Chair thanked Mr Thomas for his suggestion and confirmed that this was something that the Trust would explore further.

7. Appointments/Changes to the Board of Directors and Council of Governors 2016/17 and 2017 Election Results

The Chair presented the appointments/changes to the Board of Directors and Council of Governors during 2016/17. The Council of Governors noted the following:

Executive Directors:

- Chief Finance Officer: David Jago left the Trust on 31st May 2016. Claire Wilson took up the post on 1st June 2016.
- Director of Strategy & Organisational Development: Debbie Herring left the Trust on 8th January 2017. Joanne Twist took up the post of Director of Workforce Development on 9th January 2017 initially on secondment from Merseyside. She was subsequently appointed permanently on 1st July 2017.
- Director of Strategic Partnerships & Chief Operating Officer: Tony Wilding was assigned Executive Director status on 9th January 2017 with an extended portfolio for strategic partnerships.

Non-Executive Directors:

- Professor Lawrence Cotter retired June 2017.
- Darren Sinclair was appointed 1st July 2017.
- Nicholas Brooks was appointed 11th July 2017.

During 2016/17 there were 25 Governor seats consisting of:

- 14 Public Constituency:
 - Merseyside 6
 - Cheshire 4
 - North Wales 3
 - Rest of England & Wales 1
- 7 Staff Constituency:
 - Medical Practitioners 1
 - Registered and Non Registered Nurses 3
 - Allied Healthcare Professionals, Technical and Scientific 1
 - Non Clinical 2
- 4 Nominated from Partner Organisations
 - Liverpool City Council
 - Liverpool John Moores University
 - Friends of Robert Owen House
 - Knowsley Council

The presentation detailed the changes within the Public Governors as follows:

Public Governors (North Wales)

- Ian Painter stood down from his role in July 2016.
- Amanda Clarke joined in October 2016 as the next highest polling candidate from the most recent election for North Wales.
- Rest of England and Wales; Lynne Addison was elected uncontested in June 2016.

Staff Governors (Registered Nurses and Non Registered Nurses):

- Neville Rumsby retired from his role in May 2016.
- Kerry Fitzpatrick and Charlie Cowburn commenced their roles in September 2016.

Registered Medical Practitioner:

- Dr Mike Desmond retired in January 2017.
- Caroline McCann was elected uncontested in February 2017.

Nominated Governors:

Knowsley Council:

- Cllr Eddie Connor resigned from his role in May 2017.
- Cllr Christina O'Hare commenced her role in May 2017.

Liverpool City Council:

- Ruth Hirschfield completed her term of office in July 2016.
- Cllr Ged Taylor commenced his role in July 2016.

The results of the elections held during 2017 culminated in 10 governors being either elected to take up office from 25th September 2017 or re-elected as follows:

Public Governor – Merseyside:

- Elaine Holme elected
- Dorothy Burgess elected
- Trevor Wooding re-elected
- Ruth Rogers elected
- John Black elected

Public Governor – Cheshire:

- Mark Allen – elected
- Peter Brandon – elected

Public Governor – North Wales

- Denis Bennett – re-elected
- 1 vacant seat

Staff Governor – AHP, Technical & Scientific:

- Dot Price – elected

Staff Governor – Non-Clinical:

- Sharon Hindley – re-elected

The Chairman expressed the appreciation of the Council, Board of Directors, volunteers and staff of the Trust for the support and dedication of the following Governors who were leaving having served their maximum permitted tenures of three terms or retiring following the Annual members Meeting; they were:

- Mike Brereton
- Roy Griffiths
- Paula Pattullo
- Brian Roberts
- Roy Stott
- Judith Wright

Members also noted the following resignations during the year:

- Arthur Newby (Merseyside) stood down on 12 May 2017 (one term).
- Doreen Russell (Staff AHP, Technical and Scientific) stood down on 11 August 2017 (two terms).

8. Questions and Answers

The Chair invited questions from members.

Derek Thomas enquired about arrangements for disabled patients. As a visually impaired patient he referred to a personal experience resulting from a lack of communication and asked what processes the Trust had in place to support the needs of people with disabilities. He was assured by both the Chair and Sue Pemberton, Director of Nursing & Quality that the Trust had various methods for flagging individual patient needs pre admission through discussion at pre-operative clinic appointments or home visits to assess any requirements. Care is then planned accordingly with each patient treated as unique. Sue Pemberton and Derek Thomas agreed to meet at the end of the Annual Members' Meeting to discuss this in more detail.

J Richard Holmes asked what plans the Trust had in place to address the issue of staff turnover during 2017/18 and to improve on the 9% turnover rate. Jane Tomkinson, Chief Executive responded stating that the percentage Trust stood Below the Trust target of 10% and the national average and has seen an improvement on the previous year of 2016/17. Turnover by staff groups are regularly monitored and exit interviews are carried out to learn from staff feedback.

Joanne Twist, Director of Workforce Development informed the meeting that the Trust had in place a comprehensive Recruitment and Retention Plan and had reviewed its People Strategy re-launching this as "Team LHCH at its Best" capturing how we will attract, develop and retain the best staff over the next three years.

Other initiatives to improve the staff experience and promote staff retention, attract and develop staff were:

- Annual staff survey
- “Big Conversations”
- Staff engagement events
- Regional and national networks
- Training and development and partnership working with Edge Hill and Liverpool Universities.

The Trust had also implemented its own local target which formed part of the Board of Directors monitoring dashboard.

9. Date & Time of Next Meeting:

Tuesday 18th September 2018

Full copies of the Annual Report and Accounts 2016/17 were made available or could be download via the Trust website www.lhch.nhs.uk under the ‘About our Hospital’ section.

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The Chair thanked all present for their attendance and continued support. In particular he paid tribute to all the staff and volunteers saying they were all very special people doing special things every day for our patients and their families.