

Council of Governors – Part 1 (in Public) Item 5

minutes

Minutes of the Council of Governors – Part 1 (in Public) meeting held on 06th March 2017

Present:

Neil Large
Lynne Addison
Mike Brereton
Ken Blasbery
Amanda Clarke
Charles Cowburn
Kerry Fitzpatrick
Roy Griffiths
Vera Hornby
Michelle Laing
Caroline McCann (part)
Arthur Newby
Paula Pattullo
Allan Pemberton
Doreen Russell
Roy Stott
Ged Taylor
Alexandra Thompson
Lynn Trayer-Dowell (part)

Chair
Governor – Rest of England & Wales
Governor - Cheshire
Governor - Cheshire
Governor – North Wales
Governor - Staff
Governor - Staff
Governor – North Wales
Governor – Merseyside
Governor – Liverpool JM University
Governor – Staff
Governor – Merseyside
Senior Governor
Governor – Cheshire
Governor – Staff
Governor – Merseyside
Governor – Partner Organisation
Governor – Staff
Governor – Staff

In Attendance:

David Bricknell

Julian Farmer
Harriett Franks
Jennifer Furlong (presentation only)
Lesley Hughes
Mark Jackson
Mark Jones
Lucy Lavan
Robert Peat (presentation only)
Sue Pemberton
Joanne Twist
Michael Tomkins

Tony Wilding

Deputy Chair/Senior Independent
Director
Non-Executive Director
Graduate Management Trainee
Clinical Physiologist
Executive Office Manager
Director of Research & Informatics
Non-Executive Director
Director of Corporate Affairs
Clinical Physiologist
Director of Nursing & Quality
Director of Human Resources
Membership and Communications
Officer
Director of Strategic Partnerships & Chief

Claire Wilson	Operating Officer Chief Finance Officer
Apologies for Absence:	
Dennis Bennett	Governor – North Wales
Eddie Connor	Governor – Partner Organisation
Glenda Corkish	Governor – Partner Organisation
Sharon Hindley	Governor – Staff
Brian Roberts	Governor – Merseyside
Trevor Wooding	Governor – Merseyside
Judith Wright	Governor - Cheshire
Public:	
Katherine Griffiths	
Maureen Worrall	

<p>Jennifer Furlong and Robert Peat were invited to the Council of Governors (CoG) meeting to provide an overview of the role the Pulmonary Function department took in tackling health inequality across the region. They described how the service operated across nine locations and how it supported the substance misuse clinics through the use of the 'Anchor' model where key workers offered help on a social and practical level incorporating breathing tests. They informed Governors how drug abusers often had underlying medical conditions that went undiagnosed and that 47% of those tested had spirometry consistent with chronic obstructive pulmonary disease (COPD).</p> <p>Mark Jackson (MJ) congratulated them on the service innovation and agreed to discuss further possible developments outside of the meeting.</p> <p>The team were congratulated on being shortlisted for this year's Academy for Healthcare Science Award for Innovation; the event was being held on 31st March 2017 where the winners would be announced.</p> <p>Jennifer Furlong and Robert Peat left the meeting.</p> <p>1. Patient Story</p> <p>The CoG noted the patient story that was delivered by Alexandra Thompson.</p> <p>2. Apologies for Absence</p> <p>As above.</p> <p>3. Declaration of Interests Relating to Agenda Items</p> <p>None to declare.</p> <p>4. Minutes of the Council of Governors (CoG) meeting held on 5th December 2016</p>	Action
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Agreed as a true record.

The Chair welcomed Michael Tomkins (MT) to his first meeting who had been appointed Membership and Communications Officer until January 2018 covering Gill Donnelly's maternity leave.

5. Action Log

Item 1: Call After Discharge Pilot Scheme:

Sue Pemberton (SP) informed the Governors of the plan to contact aortic surgery patients within 7 days following their discharge from hospital. Data was still being collated; the outcome would be presented to the June 2017 meeting.

SP

Items 2, 3 and 4 from the action log were all incorporated into the main agenda, items 7.1, 7.2 and 6 refer respectively.

Item 6: Re-assess the Quoracy of the Quality Account Group:

The CoG discussion group held prior to the public meeting had discussed the quoracy of the Quality Account Group. It was agreed that recommendations would be brought to the June 2017 meeting.

NL/LL

6. Chair's Briefing

The Chair reported on the following:

Photography Competition: Winners of the competition had been announced in the recent edition of the "Members Matters" magazine; the photographs would be displayed during the course of the month.

ALL

Heel a Heart Day: The event would take place on 8th March 2017 and aimed to raise awareness of women and heart disease coinciding with International Women's Day.

ALL

Stoke Rehabilitation: The first event for Cheshire members would be held on 23rd March 2017 at Chester Football Club where staff would explain treatment and outcomes for stroke patients.

ALL

Election and Nominations Open Evening: 19th April 2017 5.30 – 6.30 pm. Governors were asked to support the event encouraging friends and colleagues to attend.

ALL

Cardiac Devices Presentation: Dr Jay Wright would be presenting on 19th April 2017 to explain various cardiac devices.

ALL

Chairs Lunch with Governors: scheduled for 24th April 2017 at 12.30 in the Conference Room.

ALL

Open Day: Members were invited to take a tour of various departments on Saturday 6th May 2017 10 – 1 pm.

ALL

Diabetes and Heart Disease: An event for North Wales members has been arranged for 24th May 2017 at 7pm in Wrexham where tips and

ALL

advice on living with the diabetes, heart disease and its treatment would be given.

All information for the above events will be circulated via e-mail.

Awards: The Chair announced that the Knowsley Multidisciplinary Community Cardiovascular Disease and Respiratory Service had won the North West Coast Research & Innovation Awards and congratulated the team on this achievement.

MT

The Chair also informed the CoG that Mr Richard Williams, Consultant Cardiac Surgeon and his team had successfully performed the first right anterior thoracotomy (AVR) via a 6 centimetre incision through the rib cage using femoral cannulation which reduces trauma.

Media: Dr Tim Fairburn, Consultant Imaging Cardiologist had appeared on ITVs Granada Reports 19th February 2017 to discuss a new non-invasive diagnostic test for patients with coronary artery disease. Governors were informed that the Trust is one of a small number in the UK using this technology.

7. Strategy & Service Improvement

7.1 Cheshire & Merseyside 5 year Forward Plan Update

The Chair reported that Jane Tomkinson/Chief Executive was leading on the cardiovascular disease (CVD) work stream. The Cheshire and Merseyside Five Year Forward View (5YFV) set out the requirement for a more integrated approach and how this would deliver better care, health and value.

7.2 Financial Planning Update

Claire Wilson (CW) presented the financial plan update highlighting the salient areas:

- The financial plan for the next two years was submitted in December 2016.
- A £3m surplus was planned for 2017/18.
- The Trust were required to deliver a £3.7m cost improvement programme (CIP) target equating to 3% in 2017/18. 98% of schemes had been identified for next year to deliver savings but Governors were assured this would not impact on the quality of care and patient safety.
- A quality impact assessment was underway for each scheme

Assumptions:

- Activity plans had been agreed with the divisions.
- Significant capital expenditure would be subject to a separate Business Case.
- The Trust was in discussions with NHSI around the control total for 2017/18.

Risks:

- A recurrent CIP needed to be delivered each year.
- The control total had not been agreed; a surplus target had been set.
- Welsh commissioners were disputing HRG4+ which overall would provide income of £2.5m.
- Clinical Commissioning Group contracts had been signed off with a block contract agreed due to this being an area of activity that was not expected to increase however this would be closely monitored.

Mitigations:

- Contingency stood at £800k.
- Potential slippage against the £2.7m investment programme and the addition of beds and junior doctors in CCU.
- The Trust was working collaboratively as partners across North Mersey tracking activity.

The Chair opened the meeting to questions from Governors who were assured that the capital expenditure associated with the Robot and CT scanner would be subject to separate Business Cases.

The Chair commended the work of CW since joining the Trust.

7.3 Quality Account Priorities 2017/18

The CoG received and noted the Quality Account Priorities for 2017/18 reported by Sue Pemberton (SP) setting out the key areas including the management of delirium and the challenges of patients requiring post discharge support following an extended stay in ITU. A considerable amount of work was being done around patient flow and the complexities of discharge.

Governors and other stakeholders who attended the engagement day in February 2017 had selected the quality priorities and those recommendations were noted within the report.

Governors supported the selection of the quality priority for 50% of complex aortic patients to receive follow-up calls within 7 days for the limited assurance audit for the 2016/17 Quality Report and the recommended quality account priorities for 2017/18 were accepted. Support for families was a key element and changes in practice around prescribing were also being reviewed due to the impact of some drugs.

Discussions followed around discharge planning and the home for lunch scheme which had been included at the request of the stakeholder group. Governors noted that this was being addressed separately through the ongoing discharge planning work.

7.4 Corporate Governance Statement 2017

The CoG received the Corporate Governance Statement (CGS) for 2017

and its attached statements which were presented by Lucy Lavan (LL). and were to be considered by the Board of Directors (BoD) at their March 2017 meeting.

The CGS was submitted annually as a requirement of the Provider Licence. It was assumed that the BoD would be required to submit the same declaration as in 2016. The duty of the Board to take into account the views of Governors was highlighted.

Governors noted a review of evidence to support the CGS would be carried out by Mersey Internal Audit Agency and supported the recommendation that if the review identified any exception of issues or if there was a notified change in regulatory requirements, these would be reported to them at their June meeting.

The BoD was also required to ensure Governors were equipped with the training, skills and knowledge required to undertake their role. Therefore Governors were asked to provide assurance that they were confident they had sufficient training to discharge their duties and this was confirmed. Allan Pemberton would provide some additional points outside of the meeting and these would be incorporated into the document and saved as the final version within the CoG electronic folder.

8. Performance and Operations

8.1 Single Oversight Framework Dashboard

The Single Oversight Framework for 2016/17 was presented by MJ describing how the process had been streamlined bringing one performance framework for all providers. MIAA had provided assurance that the framework was fit for purpose and Governors noted the new indicators (or those that were now graded higher therefore 'new' at this level) were identified accordingly and would be brought to the BoDs attention.

Caroline McCann joined the meeting.

8.2 Performance Assessment using the Strategic and Operational Dashboards

The CoG received and noted the strategic and operational dashboards presented by Tony Wilding (TW) who highlighted the salient points:

- Mixed sex accommodation breaches were above the norm in February 2017 driven by the high levels of activity, high bed occupancy and need to prioritise the care of patients.
- Staff sickness reported at 3.62% which was slightly above the target of 3.6%.
- Falls were continuously monitored by the Executive Team.
- Blood cultures taken within 24 hours preceding first antibiotic reported 59 which was currently below the target of 66.
- 14 day cancer target had dropped below target in month due to a patient choosing to be seen on day 15, highlighting the impact of low volume activity.

- The 31 day cancer target was breached in month due to complex medical issues of three patients.
- Both cancer targets were on track to be delivered for Q4.
- The recruitment of suitable patients fell below plan. Opportunities for recruitment totals were now being sought through adult congenital heart disease patients.
- The Trust was assisting commissioners in identifying ways of improving the Welsh referral process to achieve the 26 week to treatment target.
- Policies and procedures for winter planning would be adapted accordingly but could impact on length of stay.

Discussions followed in relation to the shortened mortality review process due to the introduction of a screening stage and Governors were assured that every mortality was screened by an independent clinician and learning extracted from the outcome.

Further work was to be done around the blood culture target in relation to the management of sepsis; Governors noted that divisions reported individually on their performance to the monthly Operational Board meeting, chaired by the Chief Executive and attended by the senior medical team.

Improvement work was underway around sepsis with a new risk identification tool being piloted to identify patients at risk of developing sepsis. The CoG noted that the Trust's internal target is set at one hour compared to the national target of 3 hours.

Discussions followed around how the report was presented and although the contents were discussed at the CoG interest groups held prior to the main meeting, it was requested that the report be simplified allowing the information to be more easily identified and the main issues being the focus of the report.

MJ

8.3 Finance Report for period ending 31.01.17

The Finance Report was delivered by CW and the following salient points were noted:

- The overall financial position reported a deficit on £64k against a planned £148k.
- Actual CIP achieved stood at £2.1m against a plan of £3.1m; a shortfall of £1m. The impact of schemes identified at this point would be minimal but would impact in the next financial year.
- Income stood £154k above plan and £889k ahead of plan for the year to date. February and March 2017 activity was expected to report a higher level; March's activity would be closely monitored.
- High capital expenditure was projected in last two months. It was anticipated that the full capital programme would be spent by year end. The key projects were noted as Maple Suite bathroom refurbishment, IT network upgrade, bedside monitoring system and the theatre refurbishment.

The CoG noted the remainder of the report.

8.4 Q3 Patient & Family Support Team Activity Report 2016/2017

The CoG received the quarter three Patient & Family Support Team activity report for 2016/17 which outlined the themes from concerns raised and those under investigation. The tables demonstrated complaints per division and compared the numbers and subject of complaints with those of the previous year.

The CoG also noted the learning from complaints and the improvements that had been implemented providing assurance that all complaints were thoroughly investigated and that the learning was embedded.

8.5 Staff Survey 2016: Headlines

The Chair introduced Jo Twist (JTw), the newly appointed Director of Human Resources.

The CoG were informed that the results of the staff survey were embargoed by NHS England until the following day but in the meantime the following information could be noted:

- Staff response rate stood at 69% which was a 10% improvement on previous.
- The Trust was highest in the country for its response rate.
- 10 results were top in the country against 10 of the key themes.
- Results would be circulated by division and areas that required focus would develop action plans. Progress against the action plans would be reported to the June 2017 meeting.
- The published report would be available on the NHS England website.

JTw

ALL

JTw would circulate the report to Governors.

JTw

9. Reports from Board of Directors:

9.1 Receipt of Minutes of Board of Directors (Public) Meeting Held on 13th December 2016

The CoG received and noted the minutes from the BoD meeting (in public) held on 13th December 2016.

10. Governor Issues

10.1 Review of Register of Interests

The CoG received and noted the annual review of interests being reminded that Governors were required to update the declaration if any new interests arose.

ALL

It was confirmed that there were no declared interest that materially conflicted with the work of the Council of Governors.

10.2 Licence Condition G4: Fit & Proper Persons Requirements

The CoG received the report and Governors were asked to complete and return and outstanding Fit and Proper Person Test self-declaration to MT by Friday 31 st March 2017.	ALL
10.3 CoG Objectives 2017: Progress Report	
The CoG received and noted the progress against the four set objectives for 2017 that had been approved by the Governors at their December 2016 meeting.	
Harriet Franks (HF), Graduate Trainee was welcomed to the meeting and introduced to the Governors. She reported on the Governor election campaign which supported the expected turnover of Governors and asked colleagues to highlight and promote the governor role to help attract candidates with the appropriate skill set.	ALL
Progress of CoG objectives would be reported to the June 2017 meeting.	LL
Lucy Lavan asked Governors to inform her of any other support required to deliver their objectives.	ALL
10.4 Elections Campaign Update	
The CoG noted the overview of the Governor Election 2017 campaign plan where seven seats are available for election or re-election in Merseyside, Cheshire, North Wales and staff while noting the key dates.	
The closing date for nominations was noted as Monday 5 th June 2017.	ALL
10.5 Feedback from Governor Walkabouts	
The Chair reported that Governors had visited the following areas:	
<ul style="list-style-type: none"> • Cedar Ward • Outpatient Department 	
Lynn Trayer-Dowell joined the meeting.	
11. NED Update	
11.1 Report from the Audit Committee	
The CoG received an update on the work of the Audit Committee from its Chair, Julian Farmer. The key items of business were explained as being delivered through the committees annual work plan.	
The outcomes of the January 2017 meeting were set out within the presentation.	
11.2 Report from the Quality Committee	
Lawrence Cotter/Chair of the Quality Committee was absent from the meeting; SP confirmed there were no further issues to highlight.	

11.3 Non-Executive Director (NED) Walkabouts

The CoG noted that NED walkabouts continued to take place on a regular basis with areas specifically identified throughout the year.

The Chair welcomed Caroline McCann, the newly appointed Registered Medical Practitioner staff governor who introduced herself as a Consultant Radiologist and had been with the Trust for six years.

12. Working Groups

12.1 Memberships and Communication Group Sub-Committee

The CoG received and noted a report from the Membership and Communications Committee which outlined its strategy and presented an evaluation of the membership events.

As previously reported, the Governor elections would commence May. Governors were invited to be interviewed for a short video which would highlight the role via the Trust's website and social media.

ALL

Governors were informed of the publicity by Chester Football Club advertising the stroke rehabilitation event being held on 23rd March 2017.

ALL

MT offered publicity assistance to the Governors for any future events.

ALL

Governors were also asked to support future events that were detailed within the report.

ALL

12.2 Quality Account Group

Ken Blasbery reported that the Quality Account Group had met on 21st February 2017 and was attended by three Governors. The quoracy of the group had been raised previously and had also been discussed at the pre-meeting; recommendations from which would be considered at the next CoG meetings. Item 5 within the minutes also refers.

12.3 Staff Governors Group

There was no further information to report.

12.4 Feedback from Interest Groups/External Events

There was no further information to report.

13. Any Other Business

The CoG discussed issues around disabled parking and noted that although the need for additional bays had been raised through various avenues, the Trust was dependent on the decisions of the Royal Liverpool University Hospital Trust which managed the Contract with Indigo, the car park management group. Tony Wilding would continue to raise concerns and update Governors at the June 2017 meeting.

TW

Governors also noted that utilisation figures had identified a period of only two hours in one day car parking per week where disabled parking was insufficient. Governors also noted that disabled parking within Robert Owen House was also underutilised and that there were no recorded formal complaints registered. There were no other financially viable options to consider.

14. Date and Time of Next Meeting

Monday 5th June 2017 at 1 pm in the LHCH Conference Room

ALL