

## TRUST BOARD OF DIRECTORS MEETING

### MINUTES OF MEETING

WEDNESDAY 6 NOVEMBER 2019 at 2.00 PM

TRAINING SUITE, 3<sup>RD</sup> FLOOR, ST. CATHERINE'S HEALTH CENTRE

#### Members:

Ms Sarah Alldis	Associate Director for Social Care	(SA)
Prof Chris Bentley	Non-Executive Director	(CB)
Dr Nick Cross	Medical Director	(NC)
Mr Mark Greatrex	Chief Financial Officer/Deputy Chief Executive	(MG)
Mrs Karen Howell	Chief Executive	(KH)
Mrs Alison Hughes	Director of Corporate Affairs	(AH)
Ms Beverley Jordan	Non-Executive Director <b>(Deputy Chair)</b>	(BJ)
Ms Val McGee	Chief Operating Officer	(VM)
Mr Gerald Meehan	Non-Executive Director	(GM)
Mrs Jo Shepherd	Director of HR & Organisational Development	(JS)
Mr Brian Simmons	Non-Executive Director	(BS)
Mrs Paula Simpson	Director of Nursing & Quality Improvement	(PS)

#### In Attendance:

Mr Kevin Sharkey	Deputy Lead Governor	(KS)
Mrs Heather Stapleton	Board Support Officer	(HS)

Reference	Minute
1. WCT19/20-051	<p><b>Journey of Care Story - Trusted Assessor</b></p> <p>AH reminded the Board of Directors that the Trust was in Purdah and to be aware that they were not at liberty to discuss anything connected with policy or future policy.</p> <p>PS welcomed and introduced Cherish Cadelina, Trusted Assessor, to the Board of Directors. The Journey of Care focussed on an individual who was deceased but it was felt to be appropriate for the story to be told from the perspective of the care giver. PS explained that the role of Trusted Assessor was a pioneering and innovative role and the way in which Cherish had undertaken this function was inspirational and had an impact on the system flow. There was also an impact on individual people's outcomes by delivering assessments for people who lived in the care sector and enabled a safe discharge from hospital back to the residential home facility.</p> <p>Cherish provided a brief background to the Journey of Care story. Prior to being admitted to hospital, the patient had lived in a care home for five years where he was very happy and comfortable. His condition was terminal and he expressed a</p>

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	<p>wish not to have any further treatment and wanted to spend his last days and weeks at home. Cherish confirmed that the patient had full mental capacity to make this decision and an emergency healthcare plan was prepared by the Community Geriatrician and the discharge co-ordinator was contacted for a fast track discharge. Four weeks later the patient passed away peacefully in the care home. This Journey of Care encapsulated the purpose of the service by bridging the gap between acute and community care.</p> <p>VM stated that the job title 'Trusted Assessor' described the role perfectly as people were confident that when an approach was made the patient's wishes would be honoured. This role was vital and the relationship with the consultant also valued.</p> <p>PS stated the emergency healthcare plans were key and everyone had a responsibility to support the wishes of the patient as the care home was where he wanted to be.</p> <p>NC stated that the outcome could have been different if Cherish had not been involved and it was important to be able to create better outcomes and discharge patients from hospital quicker.</p> <p>KH stated that the Board was proud of Cherish and thanked her for working so hard for the Trust.</p> <p>The Board of Directors noted the high quality care and support provided by the Trusted Assessor service.</p>
2. WCT19/20-052	<p><b>Apologies for Absence</b> The board received apologies from: Prof Michael Brown, Chairman Mr Bill Wyllie, Lead Governor</p>
3. WCT19/20-053	<p><b>Declaration of Interests</b> The members of the Board confirmed standing declarations of interest but it was noted that there was nothing on the agenda for the meeting that required further action in respect of standing interests.</p>
4. WCT19/20-054	<p><b>Minutes of the previous meeting - 4 September 2019</b> Subject to a number of amendments as noted, the Board of Directors agreed that the minutes of the meeting held on 4 September 2019 represented a true and accurate record. The Chair signed the minutes with amends annotated.</p>
5. WCT19/20-055	<p><b>Matters Arising - 4 September 2019</b> AH provided an update on the actions from the previous Board meetings. The Board of Directors reviewed the current status and noted the outstanding actions. <i>(See separate actions/matters arising tracker.)</i></p> <p>BJ referred to Minute WCT19/20-042 - Delegation of Authority to Quality &amp; Safety Committee for submission of EPRR Annual Return. The delegation of authority was approved by the Board of Directors in September and it was agreed the completed document would be noted by the Board, however this was not included on the Board agenda. It was agreed the completed EPRR would be circulated to Board members (this was subsequently completed).</p>
6. WCT19/20-056	<p><b>Chair's Report</b> In the absence of MB, BJ presented the report and highlighted the following:</p> <ul style="list-style-type: none"> <li>• <b>Council of Governor Elections</b> - all members of the Trust would be able to vote from 15 November 2019. There had been a question about the elections taking place in light of Purdah but AH had confirmed that further guidance had been received from NHSE/I which stated the elections could go ahead. It was</li> </ul>

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	<p>noted that there had been a considerable amount of interest. The guidance had been circulated to Board members including the Lead Governor who would circulate to governors.</p> <ul style="list-style-type: none"> <li>• <b>Council of Governors Development Day</b> - This was scheduled to be held on 19 November 2019 and the topics to be discussed included an update on the recommendations since the last CQC inspection and progression with the SAFE tool.</li> <li>• <b>Board annual cycle of meetings</b> - Currently revisiting the timing of bi-monthly formal Board of Director meetings with the intention to move to February, April, June, August, October and December. AH confirmed that a forward workplan would be completed to ensure all regulatory submissions were timetabled appropriately.</li> </ul>
<p><b>7.</b> WCT19/20-057</p>	<p><b>Report from the Council of Governors - Lead Governor</b></p> <p>In the absence of BW, KS presented the Lead Governor report and highlighted the following:</p> <ul style="list-style-type: none"> <li>• At the last meeting of the CoG in September, a summary of the contract monitoring and performance monitoring processes across the Trust was received.</li> <li>• A briefing on the proactive well-led development review the Trust would be completing was received.</li> <li>• Information was available on the timetable for the Council of Governor elections. There had been a lot of interest shown in the roles and KS was looking forward to working with new colleagues in due course.</li> <li>• The requirement of the Foundation Trust constitution in relation to governor attendance at meetings was discussed; the governors present agreed to remove one of the public governors from office due to their inability to attend meetings. This seat had been included in the available seats in the elections.</li> <li>• A development day for the Council of Governors was due to be held on 19 November. These were always engaging sessions and provided governors with the opportunity to contribute to the agenda.</li> <li>• At the next development day, the role of the Your Voice Group was to be considered. There were a number of governor colleagues who were members of this group.</li> </ul> <p>The Board of Directors welcomed the ongoing work and engagement with the Council of Governors.</p>
<p><b>8.</b> WCT19/20-058</p>	<p><b>Chief Executive's Report</b></p> <p>KH presented the Chief Executive's report highlighting developments of local and national interest and issues relating to the local health and social care economy, particularly those that might impact on the Trust. An overview was also provided of the communications and engagement activities undertaken by KH and a summary of business conducted through the Executive Leadership Team.</p> <p>The following were highlighted:</p> <ul style="list-style-type: none"> <li>• The priority focus placed on the NHS in the Queen's speech was welcome, targeting changes to the law aimed at enabling the integration of services. This would be suspended during Purdah.</li> <li>• A significant step forward was promised in the introduction of the Health Services Safety Investigation Bill to help trusts and their workforce adopt a systematic approach to investigating and learning from incidents. This would also be suspended due to Purdah.</li> <li>• NHS England and NHS Improvement had made recommendations for the new NHS Bill in late September and included removing Section 75 procurement regulations.</li> </ul>

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	<ul style="list-style-type: none"> <li>• The launch of the Community Network as the national voice for community services in England was proving to be extremely beneficial and was the product of lobbying by Chief Executive colleagues. The link was provided to their first full report and reading this was recommended.</li> <li>• KH had been invited to participate in a panel at an NHS Confederation fringe event at the Conservative Party Conference. The topic was about social care and KH had been invited as an active partner in the provision of health and social care. It was a privilege to be invited and proved to be a positive session.</li> <li>• The annual staff flu campaign was well underway with 50% of the eligible workforce having been vaccinated. Support for UNICEF continued as in previous years.</li> <li>• National Speak Up Month was celebrated during October. A vlog had been delivered from Sarah Aldis who was the new Freedom to Speak Up (FTSU) Guardian. FTSU Champions had been raising awareness in the Trust and providing advice and support to staff where needed.</li> <li>• The national NHS staff survey had been launched and staff were being actively encouraged to complete it.</li> <li>• The Trust had received a visit from the new CQC inspection team. PS and AH were leading on this and KH had met the new inspection team and the meeting had gone well. They were considering the position of the Trust in terms of inspection dates but clear changes were going to be made to the way in which the CQC worked as they would be going out to consultation within the next six months.</li> <li>• The Adult Social Care Peer Review will be presented to the full Cabinet at the end of November. A number of Trust staff had presented at workshop sessions at the Overview &amp; Scrutiny Board and provided the opportunity for Councillors to question members of staff regarding the transfer, integration and how this was working. KH had had a positive meeting with the new Chief Executive of the Council.</li> <li>• A new significant function was to be brought together across the Trust within the next few months. The Business Delivery &amp; Strategy function would provide a new commissioning function to strengthen contract negotiation and focus and lead on strategic development and partnership working. The post for Chief Strategy Officer had been advertised with interviews taking place on 2 December 2019. There had been a positive response to the advert.</li> <li>• The Trust was delighted to have been awarded the Wirral 0-19 contract and KH had met with Public Health and the Chief Executive of the Council who were equally pleased for the Trust.</li> <li>• Compliance for mandatory training continued to be sustained at over 95% and staff were thanked for this performance.</li> <li>• The Trust had been awarded the Fair Train Work Experience Quality Standard Bronze Award to recognise the value of work experience placements offered to young people. This was recognised as being worthwhile for the future of Wirral. Work was also taking place with children as young as 8 and 9 years.</li> <li>• Healthy Wirral workstreams continued across the system and the Trust continued to be an active participant. KH continued to chair the Healthy Wirral People Programme Board.</li> <li>• The NHS winter warm up conference had been held and the focus had been on good practice, integration and improving ambulance turnaround. These were all relevant and challenging and the Trust continued to play a vital role.</li> <li>• The HEART awards 2020 had been launched and this was always one of the highlights of the year and acted as a reminder of the hard work done by the workforce. The winners from the 2019 awards were to be invited to the Informal Board in December to meet board members.</li> </ul>

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	<ul style="list-style-type: none"> <li>The Standards Assurance Framework for Excellence (SAFE) tool had won an award for innovation and this was acknowledged as a great achievement.</li> </ul> <p>KS asked about the timelines for the next CQC inspection of the Trust. KH noted that close working with the CQC was a priority and as previously referenced the new inspection team were aware of the Trust's ambition for a follow-up inspection quickly.</p> <p>The Board of Directors was assured by the contents of the report.</p>
<p>9. WCT19/20-059</p>	<p><b>Reports from the Sub Committees of the Board - September &amp; October 2019</b></p> <p><b>Quality &amp; Safety Committee</b></p> <p>CB provided a verbal report following the meeting held in September 2019:</p> <ul style="list-style-type: none"> <li>The structure of the committee was slightly changing to allow time for more detailed discussion on topics of interest. Some reports were reporting tri-annually and policies were submitted for approval.</li> <li>The minutes from the Oversight &amp; Management Board and a verbal report highlighting the key topics were welcomed as important assurance.</li> <li>CB had attended a recent SAFE meeting and was very assured by the discussions and tracking arrangements in place through the group.</li> <li>The Quality Patient Experience &amp; Risk Report was received. The FFT response rates continued to be good with 96% recommending the Trust as a place to work. The overall response rate was noted and it was anticipated that the electronic version would increase these numbers. The good progress made with incident reporting was noted and the Deputy Director of Nursing reported that the incident reporting goal would be reviewed to determine if this should be stretched further. The number of reported moderate harm incidents had reduced and good progress was being made. The position in relation to pressure ulcers was noted. Although numbers were low, there was the ambition to have no avoidable pressure ulcers in the year. The Deputy Director of Nursing advised that there had been three since the beginning of the financial year and work was on-going to improve this. The patient safety incidents were received and the Medical Director provided assurance that the details of every death was looked at; none of the deaths were associated with incidents caused by the Trust.</li> <li>The CQC Assurance Report was received and it was noted that all the 'should do' and 'must do' actions had been completed. The Director of Nursing confirmed that the internal CQC team were supporting the services and ensuring all evidence was on the SAFE system. SAFE Focus Groups had been initiated with Non-Executive Directors facilitation; these were positive and provided good assurance about the way teams were functioning.</li> <li>The Safeguarding Governance Performance Report was received for assurance and the committee advised of the new Wirral Safeguarding Partnership which would launch on 26 September. In relation to safeguarding enquiries, the committee had suggested it would be helpful to identify the theme of the enquiries in order to have a sense of what was coming through.</li> <li>The Complaints and Concerns tri-annual report was received with a focus on adult social care complaints. Discussion had been focussed on ensuring complaints could be de-escalated and closed before reaching the complaint stage and the committee was assured of lessons learned.</li> <li>The tri-annual Medicines Optimisation Report was received and the committee was impressed by the amount of scrutiny needed around any medication issues.</li> <li>The Infection Prevention and Control tri-annual report was received providing assurance against each of the ten criteria detailed within the Health &amp; Social Care Code of Practice on the prevention and control of infections. The Deputy Director of Nursing provided a summary by exception.</li> <li>The updated Terms of Reference were agreed for the Information Governance</li> </ul>



Reference	Minute
	<p>and Data Security Group.</p> <ul style="list-style-type: none"> <li>The Trust-wide policy schedule relevant to the duties of the committee was reported with a number of policies submitted for approval. Two of the policies required further action. Eight other policies were approved: <ul style="list-style-type: none"> <li>Transition for Children to Adults Services Policy</li> <li>Security Policy and Procedures</li> <li>Information Lifecycle and Retention Policy</li> <li>Slips, Trips and Falls Policy</li> <li>Promotion of a Smoke Free Workplace Policy</li> <li>Lone Workers Policy</li> <li>Active Directory Password Policy</li> <li>Chaperone and Intimate Care Policy</li> </ul> </li> </ul> <p><b>Education &amp; Workforce Committee</b></p> <p>GM provided a verbal report following the meeting held in October 2019:</p> <ul style="list-style-type: none"> <li>The Strategic Discussion on Place and System Workforce Development was received. The national consultation on pensions was discussed as it affected everyone across the organisation. The second government review was due on 1 November and this would be further discussed after purdah.</li> <li>The issue of how the workforce aligned between Wirral and Cheshire &amp; Merseyside was discussed. This related not just to NHS staff but also social care, voluntary sector, GP's and domiciliary care. This was a useful discussion and would be taken to a development day to be discussed by the whole Board.</li> <li>The Workforce Report was received and the sickness absence level of 5% was acknowledged. There had been an increase in long-term sickness in Urgent &amp; Primary Care and Community Nursing and additional interventions were being put in place to support teams. Short term sickness had decreased. Musculoskeletal issues had been discussed previously and the provision of a fast track physiotherapy service to staff was proving to be beneficial. There was a slight improvement in the agency spend position and particularly in the walk-in centres. The forecast position demonstrated an over cap position by 32% at the end of the financial year.</li> <li>The findings of the appraisal audit were reported and the appraisal survey (experience) and appraisal audit (quality) had been conducted at the end of the appraisal window. There was a 99.2% completion rate and it was noted that a holistic discussion was needed on this with a view to putting some SMART objectives into the process.</li> <li>The committee noted a decrease in the staff friends and family test results for Q2 and a decrease was noted in the number of respondents with only 35 responses received in the whole of the Trust. Working on a higher completion rate was acknowledged and the committee requested a detailed discussion on options and proposals at the next meeting in December 2019.</li> <li>The Trust-wide policy schedule relevant to the duties of the committee was reported with a number of policies submitted for approval. A number of policies were approved and it was noted that within the Leave Policy (HRP16) the compassionate leave entitlement following the death of a child was to be reviewed. Three other policies were approved: <ul style="list-style-type: none"> <li>Redeployment Policy (HRP32)</li> <li>Supporting Mental Wellbeing Policy (HRP29)</li> <li>Disclosure and Barring (DBS) Policy (HRP26)</li> </ul> </li> </ul> <p>KH advised that in her role as SRO following a meeting with the TUC representatives, agreement had been reached to put a Partnership Forum in place for Wirral. Agreement had also been reached that Cheshire &amp; Merseyside HCP would support the TUC conference in 2020.</p> <p><b>Finance &amp; Performance Committee</b></p> <p>BJ provided a verbal report following the meeting held in October 2019:</p> <ul style="list-style-type: none"> <li>Regular updates were received including an update on the Finance &amp; Activity</li> </ul>

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	<p>Report, Cyber Security Action Plan and three final reports following MIAA reviews. A number of policies were also approved (as noted below).</p> <ul style="list-style-type: none"> <li>• A copy of the Financial Trajectory Letter from NHSE/I was received informing the Trust of its financial trajectory requirement for 2020/21 and the new national approach. The focus on system working was recognised by the committee with MG noting that the Trust might expect more activity as work continued to relieve pressure on the hospital, but in financial terms this would need to be balanced across the system. Committee members also reflected on how the aspiration of the workforce plan discussed at EWC would need to be reconciled with financial trajectories.</li> <li>• The detail of the current financial and contractual performance was covered in the Integrated Performance Report and the committee was assured on the delivery to date against the Financial Plan, noting a surplus ahead of plan at M6, and although the CIP programme was slightly behind plan, savings to date represented nearly 54% of the annual total. This was a stronger position than the Trust had seen in previous years. The continued strong performance against contractual KPI's was also noted with over 90% reporting at green or amber.</li> <li>• In terms of the financial review, it was noted that non-pay expenditure continued to exceed target due to ongoing unexpected premises charges for the current and prior year from NHS Property Service. Pay expenditure remained below target due to vacancies which was leading to increased pressure on agency spend. The agency spend rate had reduced slightly during the month but remained at 29% over the agency cap which was impacting on the Trust's Use of Resources rating. Part of the increased tension in agency spend was coming from adult social care where the related cap uplift given by NHSI for 2019/20 was proving inadequate against demand to safely fill roles. The committee agreed that the CEO would raise the issue with the regional regulatory team. The committee gained some assurance from the work of the recent Task &amp; Finish Group on agency spend but agreed the risk should remain on the risk register. In addition to this the committee highlighted that a reconciliation would be useful between vacancy rates and agency spend to ascertain if a reduction in recruitment times was supporting reduced demand for agency staffing.</li> <li>• In relation to contractual performance, the committee noted that actions to address the small number of red and amber KPI's were discussed in detail in the Oversight &amp; Management Board.</li> <li>• The risks requiring escalation to the committee were presented as part of the financial and operational performance report rather than a standalone review of the Risk Register. There were no new high risks escalated to committee and the two existing high risks were the impact of agency spend on the Use of Resources rating already discussed and the high level risk relating to GP OOH's and the difficulties in filling GP shifts at weekends. Consultation had begun on a new workforce model and a number of other initiatives were being put in place to safely fill the shifts but until these were fully embedded the risk remained and would be monitored by the Finance &amp; Performance Committee and the Quality &amp; Safety Committee.</li> <li>• The 2018-19 Reference Costs report was received as submitted to the regulators noting that the total cost of delivering services in 2018-19 had fallen by 2.5% but in parallel related activity had declined at 8.5% meaning that reference cost index against the national average had worsened slightly. The data would now go through a national validation exercise before publication in January and it was expected that the Trust's result would show that delivery of equivalent services was at a cost lower than the national average.</li> <li>• The committee received three final audit reports from MiAA. Performance data/KPI's and GP out of Hours reviews received substantial assurance and the Fuel Card System received limited assurance. The committee reviewed the reports and was assured by the actions being taken against the</li> </ul>

Reference	Minute
	<p>recommendations.</p> <ul style="list-style-type: none"> <li>• The Cyber Review action plan update was received and continued to show good progress with the actions remaining on track and no areas of concern identified. The migration to Windows 10 was confirmed as 87% complete and remained on track to deliver against the agreed deadline. It was confirmed that MiAA would re-audit this area again in Q4.</li> <li>• The committee received the FPC policy schedule and was assured that they remained up to date with policy reviews. Three policies were approved: <ul style="list-style-type: none"> <li>○ E.mail Policy (GP20)</li> <li>○ Safe Use of Mobile Phone Policy (GP31)</li> <li>○ Directors Lease Car Scheme Policy (FP6)</li> </ul> </li> </ul> <p>AH provided assurance to the Board of Directors that the integration of risk into the assurance reports to committee was facilitated through a live Datix feed to TIG. This would continue to be evaluated with the committees.</p> <p><b>Audit Committee</b></p> <p>BS provided a verbal report following the meeting held in September 2019:</p> <ul style="list-style-type: none"> <li>• The committee's Terms of Reference were recommended for Board approval following some changes noted at the meeting.</li> <li>• The Quality Improvement Annual Programme was approved.</li> <li>• The audit tracker tool was presented to the committee using a new format through TIG and this was welcomed.</li> <li>• The new format for the Board Assurance Framework was noted and the risks were approved.</li> <li>• The committee was assured by the actions undertaken in response to the internal report on the Trust-wide Conflicts of Interest Policy.</li> <li>• The committee was assured by the new SAFE tool and the procedural document module providing a record of all trust-wide policies, standard operating procedures and guidelines.</li> <li>• The revised cover sheet was received having been trialled in the Quality &amp; Safety Committee. Suggested changes had been incorporated and the committee was assured that the new cover sheet format and content was appropriate for Trust business.</li> <li>• The internal audit progress report was received and reported that the GP Out of Hours Service Review had received Significant Assurance. The Fuel Card System Review had received Limited Assurance and was reviewed by the Finance &amp; Performance Committee. The committee was assured that remedial actions were in progress.</li> <li>• The Internal Audit follow-up report was received and the committee noted the substantial amount of work planned for Q3.</li> <li>• Ernst &amp; Young presented their Health Audit Committee Briefing which covered the EY economic forecast, the NHS new Accounting Manual and the Competition and Market Authority Report on the audit market and EY's response.</li> <li>• The Anti-Fraud Progress Report was received and reported that work was on track against the plan. Extensive communication activity in relation to fraud awareness had taken place and this had been noted in the Staff Bulletin. The new Anti-Fraud and Corruption Policy had been approved by the Finance &amp; Performance Committee and was now on StaffZone. The national procurement review was being undertaken and fraud prevention guides had been circulated.</li> <li>• The tender waiver applications were noted and the committee was assured of the process.</li> <li>• A full update report was received from the Local Security Manager Specialist.</li> <li>• There was one item of private business in relation to the Memorandum of Understanding between Cheshire &amp; Merseyside Health &amp; Care Partnership &amp; MiAA. Internal and external auditors and GM (reflecting a declaration of interest) left the room whilst this item was discussed.</li> </ul>



Reference	Minute
WCT 19/20-060	<p><b>Informal Board Sessions</b></p> <p>AH presented the report following the informal board session on 2 October 2019. The topics discussed had been wide-ranging and continued to support the annual programme of informal board sessions.</p> <p><b>Staff Council</b></p> <p>JS highlighted the following points discussed at the meeting held on 19 September 2019 and confirmed it had been a positive and engaging meeting:</p> <ul style="list-style-type: none"> <li>• Estates issues had been raised regarding out of date road markings in the car park and signage in the building for patients. Both of these were being followed up by Estates.</li> <li>• There had been a suggestion to improve the basic IT training for new entrants to the Trust. Discussion had taken place in terms of supporting staff across the Trust and ensuring they had the skills needed.</li> <li>• A positive discussion had taken place on Just Culture and Staff Council supported its implementation in the Trust.</li> </ul>
<p><b>10.</b></p> <p>WCT19/20-061</p>	<p><b>Integrated Performance Report - September 2019</b></p> <p>KH introduced the Integrated Performance Report to provide assurance on the safe, effective quality services and performance against the Board approved strategic objectives. It was noted that work continued on the report to align with the reports from the Chairs of the committees which provided sound assurance to the Board of Directors and the Board Assurance Framework. KH therefore requested the Board of Directors receive the report in its current format noting the strong performance reported whilst acknowledging that further consideration was being given to its format and content.</p> <p>The Board of Directors approved the report for the reporting period 1 August - 30 September 2019 and was assured of the actions being taken to address any concerns that had been identified.</p>
<p><b>11.</b></p> <p>WCT19/20-062</p>	<p><b>Board Assurance Framework (BAF)</b></p> <p>AH presented the paper for review and approval on the proposed principal risks for the BAF for 2019-20.</p> <p>AH advised that all changes made to the BAF were highlighted in red text and comments and feedback was welcomed from Board members.</p> <p>AH highlighted the following:</p> <ul style="list-style-type: none"> <li>• ID09 - <i>Failure to deliver the efficiency programme resulting in a reduction in service delivery and options for people</i> - had been reduced to RR8 and related to the delivery of the efficiency programme reported to Finance &amp; Performance Committee which was also closely tracked through the Programme Management Board.</li> <li>• ID10 - <i>Failure to achieve all the relevant financial statutory duties</i> - had been reduced to RR8 given the strong mid-year position report submitted to the Finance &amp; Performance Committee.</li> <li>• In order to reflect the discussions following the previous Board meeting, changes to target risk ratings had been made to ID09 and ID03. The target risk rating for ID09 had been reduced to RR4 (4x1) and the target risk rating for ID03 had been reduced to RR8 (4x2).</li> <li>• ID05 - <i>Failure to engage and support staff to deliver the Trust's vision and strategy for outstanding services</i> - was discussed at the October meeting of the Education &amp; Workforce Committee and action taken to review the strategic risk associated with engagement with staff. There had been no change made to the risk rating currently but further discussion would be supported at the Education &amp; Workforce Committee and an update provided to the next meeting of the Board.</li> <li>• ID11 was the highest scoring risk with a risk rating of 20 and assurance was</li> </ul>

Reference	Minute
	<p>provided that this remained a key topic of discussion by the Executive Leadership Team. MG advised that having had conversations with commissioners regarding the impact of the outcome of the Urgent Care Review, whilst the Trust's financial position could be compromised the likelihood in year was less likely. Some additional resource to create an Urgent Treatment Centre and funding had been approved from reserves to accommodate that. The service requirement would be over 24 hours however, the impact may not be as originally anticipated so the consequence had been reduced to 4 and the likelihood reduced to 3 making the overall risk rating 12. This would need to be kept under constant review.</p> <p>More broadly, CB commented that further agreement on the thresholds to support risk reduction would be useful; AH agreed to discuss this through each of the committees of the Board.</p> <p>The Board of Directors approved the updated BAF for October 2019.</p>
<p><b>12.</b> WCT19/20-063</p>	<p><b>Audit Committee Terms of Reference</b></p> <p>AH presented the revised Terms of Reference which were submitted for review to the Audit Committee on 25 September 2019. These were supported by the committee members for final ratification by the Board of Directors.</p> <p>The Board of Directors approved the Audit Committee Terms of Reference.</p>
<p><b>13.</b> WCT19/20-064</p>	<p><b>Service Shadowing Summary Report (Quarter 2)</b></p> <p>AH presented the report providing an update on the Service Shadowing programme for senior leaders during Q2. AH reported that the new approach to was tailored more to a shadowing experience and was well received by teams welcoming senior leaders into their services. The quarterly reports provided an overview and feedback from the visits completed and a forward view of the visits scheduled for Q3.</p> <p>It was noted that feedback was overwhelmingly positive and feedback was also shared across the Trust through the weekly CEO blog.</p> <p>The Board of Directors was assured by the value of the service shadowing programme and noted the planned shadowing for Q3.</p>
<p><b>14.</b> WCT19/20-065</p>	<p><b>Healthy Wirral - Whole System Integration Update</b></p> <p>VM presented the paper which described the activities across the health and social care system which the Trust was leading on and supporting, to ensure a strong out of hospital focus and clear leadership as work progressed in the development of Place Based Care, in particular the neighbourhood developments.</p> <p>VM highlighted the following:</p> <ul style="list-style-type: none"> <li>• <b>Healthy Wirral - Senior Change Team (SCT) Neighbourhood development</b> Work continued with Primary Care Networks around service development and interfaced with the work the council was leading on. A workshop had been held with the Brighter Birkenhead PCN which had brought together primary and community staff and provided the opportunity to understand each other's roles.</li> <li>• <b>Integrated Health and Social Care</b> <b>MASH:</b> Work continued on developing a new enhanced Multi Agency Safeguarding Hub (MASH) which would have a greater involvement from partner agencies and a dedicated pathway to manage the high number of care concerns being received. The Trust was also involved in implementing a Wirral wide electronic referral safeguarding form which would strengthen the process and provide an audit trail. This had been endorsed by the Merseyside Safeguarding Adults Board. <b>Safeguarding Peer Review:</b> A Safeguarding Peer Review was being scheduled to take place in the second quarter of 2020 as the Local Authority had been identified as not having had one in the last five years.</li> </ul>

Reference	Minute
	<p><b>Liberty Protection Safeguarding (LPS):</b> LPS would replace the current Deprivation of Liberty Safeguards (Dols) and would not come into force until October 2020. Currently the process does not cover individuals who may be deprived of liberty in their own homes, however this legislation would include this and could have an impact on Adult Social Care. Training of staff would be required and the Trust was working closely with WH&amp;CC to ensure readiness.</p> <p><b>Peer Review Actions:</b> Work was on-going across the organisations to strengthen the actions following the Peer Review that took place earlier in the year. Monthly meetings with providers were taking place to ensure the actions were taken forward.</p> <p><b>Admission Avoidance - Right Care, Right Place:</b> A number of community services were involved in supporting admissions avoidance. The statistics were available within the report to show the work being done in this area.</p> <p><b>Initiatives and service developments to support avoiding admissions:</b> There were a number of initiatives including length of stay in hospital that the Trust were being scrutinised closely on.</p> <p><b>Heart Failure Transformation Project Update:</b> This proved the amount of work that was taking place and the impact it had on the individual. Consideration would be given to focussing on the Heart Failure Transformation in either the Journey of Care or Staff Story.</p> <p>The report demonstrated the place the Trust had in the system and the data was self-explanatory in terms of the positive impact the Trust had. CB agreed this was a positive report and provided a balance of what it was like on the front line.</p> <p>The Board of Directors was assured that the Trust was instrumental in Healthy Wirral ensuring the delivery of a high quality service which enhanced patient care and patient experience.</p>
15. WCT19/20-066	<p><b>Staff Council - 17 July 2019</b></p> <p>The minutes of the Staff Council held on 17 July 2019 was noted.</p>
16. WCT19/20-067	<p><b>Any Other Business</b></p> <p>There was no Any Other Business.</p>
17. WCT19/20-068	<p><b>Invitation for Public Comments</b></p> <p>There were no comments from the members of the public present.</p>
18. WCT19/20-069	<p><b>Items for Risk Register</b></p> <p>There were no items identified for the risk register.</p>
19. WCT19/20-070	<p><b>Staff Story - This is me</b></p> <p>JS presented an audio recording and storyboard from a member of staff who was currently working as a Dietetic Assistant. The staff member talked about her experience of being a transwoman and the positive way the Trust had supported her through her journey. The revision to HR processes and adjustments made by managers were highlighted as incredibly supportive and empowering.</p> <p>The Board of Directors appreciated hearing the story and expressed their sincere thanks to the staff member for sharing her powerful story.</p>
20. WCT19/20-071	<p><b>Summary of actions and decisions</b></p> <p>AH provided a brief summary of actions and decisions taken during the Board of Directors meeting.</p>
<p><b>Date and Time of Next Meeting:</b> The next formal Trust Board meeting will take place on <b>Wednesday 5 February 2020 (to be confirmed)</b> at 2.00pm in the Training Suite, 3<sup>rd</sup> Floor, St. Catherine's Health Centre.</p>	

<b>Name:</b>		<b>Date:</b>	
<b>Signature:</b>			

The Board of Directors Meeting closed at 4.15 pm.

## Board of Directors - Matters Arising 2018-19

All actions from meeting held in January and March 2019 now complete.

Actions from the meeting held on: **1 May 2019**

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Chief Executive's Report</b>	WCT19/20-142	Future informal board session to include a briefing and discussion on the funding pledges associated with the NHS Long-Term Plan	A.Hughes	Aug 2019	<b>Complete.</b> Updates on Healthy Wirral to be available at next Informal Board. This item will therefore be dealt with through Informal Board in the future.
<b>Healthy Wirral - Whole System Integration Update</b>	WCT19/20-155	<i>Referral to ELT:</i> Quantify the financial offer to the system to mitigate the control total and system deficit position.	K.Howell	July 2019	<b>Complete</b> <i>See Board minute WCT19/20-005 for full report. Further update on plan to be provided in Q3/4.</i>

Actions from meeting held on: **3 July 2019**

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Journey of Care Story - Teletriage</b>	WCT19/20-001	CEO blog topic to cover the work in the Tele-triage service on staff wellbeing and creating a supportive culture	K.Howell/ A.Hughes	Aug 2019	<b>Complete.</b>



Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Reports from sub committees - EWC	WCT19/20-009	Clarify the process for monitoring of the recommendations and stretch targets in the national publication ' <i>A fair experience for all</i> '.	J.Shepherd	Sept 2019	<b>Complete.</b> The target within the document for the process for monitoring stretch targets was aspirational but may in future form part of the requirements. The contents of the document would be reviewed by reports to board committees and the Inclusion Group to ensure all actions needed are in place.
Staff Council	WCT19/20-010	CEO vlog to focus on the work of the Staff Council with the joint Chair	K.Howell/ F.Davies	Sept 2019	<b>Complete.</b>
Board Assurance Framework	WCT19/20-012	Clarify the golden thread of specified controls and mitigations	A.Hughes	Sept 2019	Ongoing through development work on the new BAF for 2020-21. This will be discussed at informal board in March 2020.

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
		Review the scoring of ID03 and ID09	V.McGee	Aug 2019	<b>Complete.</b>
<b>Trust Developmental Review of Leadership &amp; Governance</b>	WCT19/20-015	Provide a briefing to the Council of Governors on focus group activity as part of the review	A.Hughes	Aug 2019	<b>Complete.</b>
<b>Annual report - Complaints &amp; Concerns</b>	WCT19/10-019	Further discussion to be undertaken at Quality & Safety Committee on the actions to meet the target to respond to complaints.	P.Simpson	July 2019	<b>Complete.</b>

Actions from the meeting held on: **4 September 2019**

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Informal Board Sessions</b>	WCT19/20-038	To look into having two services attending the 'lunch and learn' sessions.	A.Hughes	Oct 2019	<b>Complete.</b>

Actions from the meeting held on: **6 November 2019**

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Integrated Performance Report - September 2019</b>	WCT19/20-061	Clarity to be given to the Chairs of Board committees the topics to be reported on in their reports from committees.	A.Hughes	Feb 2020	<b>Complete.</b>
		To consider the format and content of the IPR report.	K.Howell/ A.Hughes	Feb 2020	<b>Complete.</b> See agenda item 10.

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Board Assurance Framework</b>	WCT19/20-062	Relevant strategic risks from the BAF to be taken through each committee.	A.Hughes	Nov 2020	<b>Complete.</b>
<b>Service Shadowing Summary Report (Quarter 2)</b>	WCT19/20-064	Consideration to be given to the tracking of progress made re immunization and vaccination and whether this would be reported to the Quality & Safety Committee	P.Simpson	Feb 2020	<b>Complete.</b>
		Adult Social Care and Nursing teams to be visited together.	A.Hughes	Jan 2020	<b>Complete.</b>
<b>Healthy Wirral - Whole System Integration Update</b>	WCT19/20-065	To consider focusing on the Heart Failure Transformation in either the Journey of Care or Staff Story.	P.Simpson/ J.Shepherd	Feb 2020	This has been scheduled for April 2020.
		The papers from the Healthy Wirral Partnership Board to be circulated separately.	VMcGee	Dec 2019	<b>Complete.</b>