

# TRUST BOARD OF DIRECTORS MEETING (via Zoom)

# **MINUTES OF MEETING**

### WEDNESDAY 14 APRIL 2021 at 2.00 PM

## **MICROSOFT TEAMS**

### Members: **Prof Michael Brown** Chairman (MB) Associate Director of Adult Social Care Ms Sarah Alldis (SA) Mr Anthony Bennett Chief Strategy Officer (AB) Non-Executive Director **Prof Chris Bentley** (CB) Interim Chief Finance Officer Ms Jennie Birch (JB) Mrs Jo Chwalko **Deputy Chief Operating Officer** (JC) Dr Nick Cross Medical Director (NC) Mr Mark Greatrex Deputy Chief Executive Officer (MG) Ms Karen Howell Chief Executive Officer (KH) Mrs Alison Hughes **Director of Corporate Affairs** (AH) Ms Beverley Jordan Non-Executive Director (BJ) Ms Val McGee **Chief Operating Officer** (VM) Mr Gerald Meehan Non-Executive Director (GM) Mr Brian Simmons Non-Executive Director (BS) Mrs Paula Simpson Chief Nurse (PS) In Attendance: Mrs Cathy Gallagher Senior Assistant (CG) Mr Kevin Sharkey (KS) **Deputy Lead Governor** Mrs Heather Stapleton **Board Support Officer** (HS)

Reference	Minute Minute						
<b>1.</b> WCT21/22-001	Journey of Care & Staff Story - Community Intermediate Care Centre PS presented a joint Journey of Care and Staff Story featuring experiences and feedback from the Community Intermediate Care Centre (CICC), opened by the Trust in January 2021.						
	The stories featured a member of staff who had returned to the Trust from retirement to support the response to COVID-19 on the CICC and a gentleman who was a patient on Bluebell Ward.						
	The member of staff supported staff and sixteen students on Bluebell and Iris wards to complete their necessary training. Staff and students worked tirelessly to provide exceptional care to patients and the member of staff was proud to be part of the team.						

Reference	Minute
	The patient shared his experience describing how he was admitted to Bluebell Ward following a fall. During his time on the ward he had been well looked after and had been seen by a physiotherapist. An Occupational Therapist had been arranged to do a home visit assessment as the patient had difficulty managing the stairs.
	PS reflected on the positive experiences shared and extended thanks to both the staff member and patient. PS also praised the wider team's hard work and commitment to the CICC.
	The Board of Directors welcomed the stories shared and supported the note of thanks to all.
2.	Apologies for Absence
WCT21/22-002	Apologies for absence were received from:
	Jo Shepherd, Director of HR & Organisational Development
	Bill Wyllie, Lead Governor
3.	Declaration of Interests
WCT21/22-003	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 or new interests.
4.	Minutes of the previous meeting - 3 February 2021
WCT21/22-004	Minute WCT20/21-111 - Chief Executive's Report - 3 <sup>rd</sup> bullet point: MG advised that the Chief Executives and Chief Operating Officers from the Local Authority and WUTH met with the Trust's Chief Executive and Chief Operating Officer on a daily basis.
	Following this amendment, the Board of Directors approved the minutes of the meeting held on 3 February 2021 as a true and accurate record.
5.	Matters Arising - 3 February 2021
WCT21/22-005	AH provided an update on the actions from the previous Board meetings. The Board of Directors reviewed the current status and noted the outstanding items. (See separate actions/matters arising tracker.)
6.	Chair's Report
WCT21/22-006	MB presented the full report to the Board of Directors and highlighted the following:
	A welcome back was extended to KH following her secondment with the National team.
	MG was thanked for his hard work and contribution as Interim Chief Executive, particularly during a challenging period.
	Appreciation was also expressed to JB for the work she had done as Interim Chief Finance Officer noting that she would leave the Trust at the end of the month.
	<ul> <li>The emergency governance arrangements established in the Trust at the start of the pandemic remained in place. The success of these arrangements provided the opportunity to review and streamline processes for the future.</li> </ul>
	The weekly NED assurance meeting had continued to meet throughout February and March as part of the emergency governance arrangements. The detail of briefings shared providing assurance to Non-Executive Directors, was noted in the report.
7.	Lead Governor's Report
WCT21/22-007	KS presented the report in the absence of BW and highlighted the following:
	<ul> <li>A governor development day was held on 29 March 2021. KH and MB had provided an update on the proposed NHS reforms and the work on-going across Cheshire &amp; Merseyside and Wirral to determine the specific arrangements.</li> </ul>
	An update was provided on the Quality Strategy Workplan for 2021-2022.
	Governors spent time discussing opportunities to enhance and strengthen communications with members and the wider public.

Reference	Minute				
	Governors discussed the process for the new governor contact form that was set up on the Trust public website.				
	A number of governors had attended and engaged in the Your Voice meeting in March and provided an update on the work of the Council of Governors.				
	The next scheduled Council of Governors meeting on 26 April would be rescheduled to early June.				
	On behalf of the Council of Governors, KS extended a welcome back to KH.				
	KS noted that at the end of the development day a short formal meeting of the Council of Governors had been convened to consider a specific agenda item related to the external audit contract for the Trust. JB and AH had provided an update on the contract in place and provided a recommendation for the audit of the financial year 2021-22.				
	The governors supported the recommendation to directly award the audit contract for the financial year 2021-22 to the existing external auditors, Ernst and Young.				
	MB stated that the support and understanding of the governors during the COVID-19 pandemic had been greatly appreciated.				
8.	Chief Executive's Report				
WCT21/22-008	KH presented the Chief Executive's report to the Board of Directors and thanked AH for producing the report.				
	The following was highlighted:				
	Sincere thanks were expressed to MG and the Executive Team for their response to the COVID-19 pandemic. Business as usual was maintained and the challenges and demands from the national and regional teams were met under MG's leadership.				
	Following re-entry into Wirral, Cheshire East and St Helens, work continued on building political alliances with senior politicians and managers which would focus on primary care and move positively towards innovation, collaboration and joint working.				
	KH had almost completed her training to enable her to return to the 'shop floor' over the next few months, working on the wards and then with district nursing, therapies, 0-19 and social care. KH noted that she was looking forward to this opportunity.				
9.	Reports from the Sub Committees of the Board - February/March 2021				
WCT21/22-009	Quality & Safety Committee				
	CB provided a verbal report following the meetings held in February and March 2021. The committee had continued to meet throughout the Trust's response to the COVID-19 pandemic.				
	The following summary was provided following the meeting held in February:				
	Assurance was received from the tracking of risks in the SAFE report.				
	A report was received on the key elements of the national COVID-19 patient safety				
	bulletin and updates received from safeguarding and resuscitation teams.				
	<ul> <li>Excellent audit results on PPE were reported providing assurance to members.</li> <li>The Quality &amp; Patient Experience Report provided assurance on safe, effective and</li> </ul>				
	quality services.				
	Discussion took place and suggestions made on the first view of the new quality				
	strategy plan for 2021-22.				
	The CQC compliance report based on CQC assurance framework was received and included new COVID-19 quality standard with checklists and audits.				
	<ul> <li>Discussions took place on the restart and restore plans and monitoring of procedural documents to ensure they were up to date.</li> </ul>				
	A Safe Staffing Group had been established and supported compliance against the COVID-19 quality standard framework and audit results provided good assurance.  Place of Place 2 and a standard framework and audit results provided good assurance.				
	<ul> <li>Discussion took place on reporting of Phase 2 requirements to report on E&amp;D.</li> <li>Triannual reports were received on claims, complaints &amp; concerns and safeguarding.</li> </ul>				

Reference	Minute
	<ul> <li>It had been agreed that there should be a nominated NED with a specific interest in safeguarding issues and GM had agreed to take on this role.</li> <li>The Learning from Deaths Mortality Report for Quarter 3 was received. A few adjustments were made, particularly regarding themes of learning.</li> <li>The Data Security &amp; Protection Toolkit report was received. The committee agreed a summary report would be presented to the next meeting of the committee in order to observe progress.</li> </ul>
	The following summary was provided following the meeting held in March:
	<ul> <li>Key assurances were provided on team leader checklist completion, IG checklist completion and medicines management compliance. Exceptions were reported in Community Nursing, Urgent &amp; Primary Care and Corporate teams and actions were underway to improve the position.</li> <li>The Complaints Report was received and a focus on thematic learning was requested.</li> <li>A revised version of the draft Quality Strategy Workplan was presented. Further refinements had been incorporated including a one page statement of key priorities and an adjustment in relation to the new strategy and the CQC. A positive discussion took place on this document and it was agreed more details would be provided on what was hoped to be achieved moving forward.</li> <li>The Quality &amp; Patient Experience Report included a COVID-19 vaccine uptake report. Assurance was provided on the current uptake for clinically vulnerable staff and BAME staff. An in-month increase on moderate harm incidents was reported and managing this through CRMG was discussed.</li> <li>One new high level risk was reported in the Risk Report and related to the risk of falls on Bluebell Ward. None of the falls had resulted in significant harm. A multifactorial risk assessment and post-falls review had been introduced and an action plan put in place. Since implementation, the number of falls had greatly reduced and the</li> </ul>
	<ul> <li>situation continued to be closely monitored.</li> <li>An update on the Data Security &amp; Protection Toolkit was received and there was a significant improvement reported on the RAG rating with no red rated risks. The committee was assured that a robust action plan was in place. The Information Governance &amp; Data Security Group continued to monitor.</li> <li>The Medicines Optimisation Supplementary Report was presented. High risk antibiotics were being scrutinised across the system and NC provided assurance there were no adverse outcomes in the local area.</li> <li>The Audit and Quality Improvement Annual Programme 2021/22 was received and the detail was available on the SAFE system. The audit programme going forward was extensive and would be reviewed after Quarters 1 and 2. Thanks had been extended to the small audit team for their hard work.</li> </ul>
	Audit Committee

# **Audit Committee**

BS provided the following summary from the meeting held on 24 March:

- The Audit Committee had continued to meet during the COVID-19 pandemic.
- Substantial assurance was received following a review undertaken by MiAA on the risk management processes in place within the Trust.
- Three other internal audits had taken place of various service areas and were rated Substantial Assurance. The committee noted that despite the COVID-19 emergency, the Trust had made excellent progress implementing MiAA review report recommendations over the past year.
- The Anti-Fraud Specialist reported the Trust had a continuing commitment to tackling fraud and corruption and a high level of compliance with National Standards.

BS added that in view of the COVID-19 emergency and the pressure on the management team, this was an excellent achievement and recognised the ethos of an organisation committed to improving services.

Reference	Minute					
	Informal Board AH reported that an Informal Board session due to take place in January had been postponed due to the third wave of the COVID-19 pandemic.					
	An informal Board session was held on 3 March 2021 and the meeting topics included the Shaping Our Future programme of work including strategy refresh and 12-month strategic workplan development, and a productive discussion on risk appetite, future management of risk and elements of system working.					
	<ul> <li>Staff Council</li> <li>In the absence of JS, VM provided a verbal report following the meeting held in March 2021:</li> <li>The meeting was attended by enthusiastic members of staff and it was hoped more people would be encouraged to attend the Staff Council meetings.</li> <li>Staff feedback was positive in relation to the new approach to Executive briefings and staff were finding the topics informative and helpful.</li> <li>Discussion had taken place on supporting staff who would be returning to their roles following reassignment. This had been a theme throughout the year at meetings of the Staff Council to ensure host teams and host managers ensured staff were welcomed back and supported through any changes.</li> <li>Further discussion had taken place on empowering managers and teams to take forward improvements. This aligned well with the strategic plans and organisational redesign and formed part of the work supported by Organisational Development, encouraging innovative ideas and taking these forward.</li> </ul>					
	MB remarked that Staff Council had developed well under the current chairmanship.					
<b>10.</b> WCT21/22-010	Board Assurance Framework (BAF) - year end 2020-21  AH presented the BAF which provided the Board of Directors with assurance on the ongoing use of the BAF for 2020-21 and the governance arrangements in place. The report included assurance on the actions to address recommendations for improvement following the annual Assurance Framework Review. These recommendations had been well received and reported to the Audit Committee on 24 March 2021. They mainly related to the new structure and format of the BAF.					
	AH reported on the following:					
	<ul> <li>There were 13 principal risks that had been tracked through the BAF during the financial year and were clearly aligned to the NHS Phase 3 letter in response to COVID-19 requirements.</li> <li>The report included a proposed reduction to the risk ratings for ID04, ID05, ID06, ID08 and ID12, all of which had a risk rating of 12.</li> <li>There was one high level risk remaining, ID02 - Inability to measure equity of access, experience and outcomes for all groups in our community - and this would continue to be a priority in the new financial year.</li> <li>Four of the 13 principal risks had achieved their risk rating and would be reviewed to decide what needed to be reflected in the BAF for 2021-22.</li> <li>Seven risks remained live and continued to be monitored.</li> </ul>					
	AH reflected that outcomes had been included in the BAF but it was acknowledged that given the nature and scope of some of these risks, they were more outputs to determine that action had been taken in response to the national command and control position. The agreement of outcomes to support appropriate risk reduction would be key for 2021-22.					
	In relation to the development of the BAF for 2021-22, it was recommended that the committees would regularly review relevant principal risks alongside organisational risks to determine any impact for reporting to the Board.					

Reference	Minute				
	BJ referred to ID04 - Low uptake of COVID-19 vaccination programme - and queried reducing the likelihood from 2 to 1, highlighting that although 87% of staff had received their first vaccination, 75% of the BAME community had been vaccinated and this figure had not increased for some time. PS agreed to check the threshold with JS and report back.				
	CB referred to the recent issues raised in terms of the AstraZeneca vaccine and whether this would have an adverse effect on the uptake of the second vaccination. AH advised that the uptake rate for staff having the second vaccination was now 48%. AH proposed an update be provided on these issues at the next NED Assurance meeting.				
	CB referred to some risks that despite being on track with actions completed, had not reduced their risk rating from 12. AH advised that she would be working with PS reviewing the risks and thresholds and would report back to the NED Assurance meeting.				
	The Board of Directors was:				
	<ul> <li>assured of the ongoing use of the BAF and the governance arrangements in place</li> <li>assured of the actions the Trust would be taking to address the recommendations for improvement from the recent MiAA Assurance Framework Review</li> <li>approved the year end position for the BAF for 2021-21</li> </ul>				
	<ul> <li>approved the plans for the development of the BAF for the new financial year 2021- 22.</li> </ul>				
11.	Communications, Marketing & Engagement Strategy				
WCT21/22-011	AH gave a presentation to provide an update on activity to deliver Communications, Marketing & Engagement Strategy for Quarter 3.				
	<ul> <li>AH highlighted the following:</li> <li>The digital presence continued to grow and the benefits of the redevelopment of StaffZone and the public website were evident with impressions increasing.</li> <li>The overview of Quarter 3 highlighted the amount of work delivered by the team and positive feedback had been received across the organisation on internal communications.</li> <li>The priority during the last twelve months had been to keep lines of communication open to the Trust's workforce. The daily updates continued with weekly CEO blogs and vlogs, Friday round up e-mails and many other channels.</li> </ul>				
	<ul> <li>The following key projects were highlighted:</li> <li>Flu campaign: Despite the added challenges and delayed vaccine delivery, the Trust achieved 91% flu uptake of front line staff and 85% of all staff. This had been a successful campaign using an integrated mix of channels.</li> <li>IPC week: IPC had always been a big public health campaign and this had continued due to COVID-19. It provided the opportunity to remind everyone of its importance. Videos had also been shared with local care homes.</li> <li>Covid-19 vaccinations: Communications had sought feedback from the workforce</li> </ul>				
	<ul> <li>and ran a poll for staff taking up the vaccine. Rates had continued to rise, indicating the success of the campaign.</li> <li>Staff medals: These were awarded to all staff in recognition of their hard work and</li> </ul>				
	<ul> <li>personal commitment. Positive feedback from staff had been received.</li> <li>Staff Survey: A campaign to staff to complete the NHS Staff Survey had been promoted.</li> </ul>				
	Staff Facebook: A closed group staff facebook had been launched to engage with the workforce and enabled a two-way communication.				
	<ul> <li>Shaping our Future: This would be a key priority for Quarter 4 as staff were being encouraged to be involved in developing the new values for the organisation.</li> <li>Virtual Christmas: This had been a great success and increased staff engagement across the organisation.</li> </ul>				

Reference	Minute
	MB acknowledged the work of the team recognising it was a small but highly skilled and committed team.
	BJ referred to the NHS Staff Survey results in relation to staff engagement as the Trust had scored below the national average, and asked whether any insight had been received from teams when talking about staff engagement. AH advised that in 2019 a review of all internal communications channels had been undertaken and given the introduction of new channels during the last year, it was recognised that it would be useful to conduct another detailed review. In respect of staff engagement, AH reflected that the dissemination of messages by managers and service leads was key to success.
	KH also praised the work of the Communications Team and appreciated the format used for the update report. This succinct method of reporting would be followed through for the future.
	The Board of Directors was assured that the activity evidenced in the report met the aims of the Trust, with particular focus on the communications needs of the organisation during COVID-19.
12.	Approval of 2021-21 Annual Accounts Delegated Authority
WCT21/22-012	AH presented a paper requesting the Board of Directors delegate authority to the Trust's Audit Committee to adopt and approve the Trust's Annual Accounts for 2020-21.
	The timetable for the process of the completion of Foundation Trust Annual Accounts was included in the report and AH reported that NHSE/I had granted the Trust an extension to the final submission date due to the Local Authority pensions issue experienced in the previous year.
	The Board of Directors approved the request to delegate authority to the Trust's Audit Committee to sign-off the Foundation Trust Annual Accounts for 2020-21.
<b>13.</b> WCT21/22-013	Annual Declarations of Interest 2020-21  AH presented the report providing assurance that the Trust was compliant with the
	requirements of Standing Order 8 'Declaration of Interest and Register of Interests' and General Policy 7 Managing Conflicts of Interest' whereby all Board Directors had to annually declare all interests that were relevant and material. Following guidance received from NHS England in June 2017, this principal was extended to all senior and decision-making staff in the organisation.
	The register for members of the Board and deputy directors was included as an appendix and all those included had given their consent to have their declarations published. These would be reported through the Trust's Annual Report 2020-21.
	The Board of Directors received the report and was assured by the processes in place to ensure compliance with Trust policy and the subsequent register of interests for members of the Board and Deputy Directors for 2020-21.
14.	Mortality Report - Learning from Deaths Framework (Quarter 3)
WCT21/22-014	NC presented the Mortality Report which provided assurance on the implementation of the Learning from Deaths Framework. The report had previously been submitted to the Quality & Safety Committee for scrutiny and approval.
	NC reported there had been a total of 11 unexpected deaths in Quarter 3. Paragraphs 23 and 24 of the report provided a high level summary of the reported deaths and paragraphs 25 - 27 provided a summary of internal learning themes.
	Detail was provided on a system-wide quality group that had been established with multiple roles, one of which was to focus on incidents and concerns that occurred through

Reference	Minute					
	a person's journey. The group would play a critical part and would be embedded within the internal governance processes and in particular clinical risk management. Learning and outcomes would also be received as a result of review by the group.					
	The appendix highlighting the learning from deaths for the quarter was attached to the report and would be published on the Trust website subject to the report being approved by the Board of Directors.					
	The Board of Directors was assured that:					
	<ul> <li>Quality governance processes were in place to ensure continuous monitoring and learning from deaths in accordance with the Trust policy.</li> <li>The Trust was actively involved in supporting the system-wide development of processes reporting and learning from deaths.</li> </ul>					
15.	Staff Council - 12 January 2021					
WCT21/22-015	The decision and action log from the meeting of the Staff Council held on 12 January 2021 was received and noted.					
16.	Any Other Business					
WCT21/22-016	There was no Any Other Business to be reported.					
17.	Invitation for Public Comments					
WCT21/22-017	There were no members of the public present and no public comments had been received.					
18.	Items for Risk Register					
WCT21/22-018	There were no risks identified for the risk register.					
19.	Summary of actions and decisions					
WCT21/22-019	AH provided a brief summary of actions and decisions taken during the Board of Directors meeting.					
Date and Time of Next Meeting:						

Date and Time of Next Meeting: The next formal Trust Board meeting will take place on Wednesday 9 June 2021.

Further details on the venue and joining instructions will follow.

Board - Chair Approval				
Name:	Date:			
Signature:	·			

The Board of Directors Meeting closed at 3.30pm.



# **Board of Directors - Matters Arising 2021-22**

All actions from meeting held in January, March, May, July, September and November 2019 now complete. All actions from meeting held in May, June and August 2020 now complete.

At the meeting of the Board on 2 December 2020, it was agreed that all pending actions would be reviewed for continued relevance and where appropriate new due dates agreed. The revised position would be shared at the February meeting of the Board.

Actions from the meeting held on 5 February 2020

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Inclusion Strategy Update	WCT19/20- 090	To ensure EDS2 is submitted to both EWC and QSC.	J.Shepherd	March/April 2020 February 2021 April 2021	Complete. The EDS2 evaluation was carried out by CCG on behalf of the Trust to support Covid response with a focus on workforce. The overall grade for Goal 4: Inclusive Leadership was "achieving". The report was presented to the Education & Workforce Committee in May 2021.
		The total number of FFT responses to be provided in the Integrated Performance Report in order to give some perspective.	J.Shepherd	April 2021	Complete  National FFT is incorporated into People Pulse survey.  Automated report which will address the statistical issue.



# Actions from meeting held on 7 October 2020

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Journey of Care Story	WCT20-21- 059	The discharge processes implemented as a result of COVID-19 to be included in a future Journey of Care story.	P.Simpson	December 2020 February 2021 April 2021	Complete

# Actions from meeting held on 2 December 2020

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Whole system integration and response to Covid-	WCT20- 21/094	Consider including a health inequality score sheet/checklist dashboard to enable reporting back on inequalities.	V.McGee	February 2021	Complete It is proposed that this action is closed acknowledging the extensive work on-going led by the Chief Nurse as Health Inequalities Lead for the Trust and in the restoration and future operational delivery of Trust services.

# Actions from meeting held on 14 April 2021

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Board Assurance Framework (BAF) -	WCT21-22-	In the development of the BAF and the review of strategic risks consider the	A.Hughes	April 2021	In progress.



Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Year end 2020-21	010	thresholds for risk review of both new and current risks.			