

**TRUST BOARD OF DIRECTORS MEETING
(CSL, St Catherine’s Health centre)**

DRAFT MINUTES OF MEETING

WEDNESDAY 14 December 2022 at 2.00 PM

Members:

Prof Michael Brown	Chairman (via Teams)	(MB)
Mr Anthony Bennett	Chief Strategy Officer	(AB)
Prof Chris Bentley	Non-Executive Director	(CB)
Mr Steve Connor	Non-Executive Director	(SC)
Dr Nick Cross	Medical Director	(NC)
Dr Joanne Chwalko	Chief Operating Officer	(JC)
Mr Mark Greatrex	Chief Finance Officer/Deputy Chief Executive	(MG)
Ms Karen Howell	Chief Executive	(KH)
Mrs Alison Hughes	Director of Corporate Affairs	(AH)
Ms Beverley Jordan	Non-Executive Director	(BJ)
Mr Gerald Meehan	Non-Executive Director	(GM)
Mrs Paula Simpson	Chief Nurse	(PS)

In Attendance:

Ms Lynne Collins	Lead Governor	(LC)
Mrs Cathy Gallagher	Senior Assistant (minute taker)	(CG)
Mr Simon Garner	Deputy Director of Adult Social Care	(SG)
Mr Dave Murphy	Chief Information Officer	(DM)
Mrs Alison Jones	Freedom To Speak Up Guardian (agenda item 16)	(AJ)

Reference	Minute
1. WCT22/23-103	<p>Journey of Care: An example of Compassionate Personalised Care delivered by the Specialist Dental service</p> <p>NC introduced the story, which was told by Danielle Owens (Team Leader) and described the experiences of a regular service user who had complex medical needs and was nonverbal.</p> <p>Danielle described how well staff could communicate with the service user and understand his needs. The dentist’s approach to the service user was sensitive, caring and he listened to staff on their opinion of his treatment.</p> <p>BJ praised the staff for having a personalised care plan in place for the service user.</p> <p>The Board of Directors welcomed the opportunity to receive the Journey of Care and thanked all those involved.</p>
2. WCT22/23-104	<p>Apologies for Absence</p> <p>Apologies for absence were received from:</p> <p>Roger Wilson, Interim Director of HR & OD</p>
3.	<p>Declaration of Interests</p>

WCT22/23-105	<p>The members of the Board confirmed standing declarations of interest, but it was noted that there was nothing on the agenda that required further action in respect of standing or new interests.</p> <p>AH advised the meeting was being recorded on MS Teams.</p>
<p>4. WCT22/23-106</p>	<p>Minutes of the previous meeting - 19 October 2022</p> <p>The Board of Directors approved the minutes of the meeting held on 19 October 2022, as a true and accurate record.</p>
<p>5. WCT22/23-107</p>	<p>Matters Arising - 19 October 2022</p> <p>The Board of Directors reviewed the current status and noted any outstanding items. <i>(See separate actions/matters arising tracker.)</i></p>
<p>6. WCT22/23-108</p>	<p>Chair's Report</p> <p>Due to technical difficulties with MS Teams, the Chair was not present for this item. It was noted that the written report was included in the paper pack and in MB's (temporary) absence, BJ highlighted MB's recent appointment as the independent Chair of the regional People Board.</p> <p>BJ thanked staff on behalf of the Board of Directors for their continued commitment and dedication during another challenging year for the NHS.</p> <p>The Board of Directors received the report with no further questions or comments.</p>
<p>7. WCT22/23-109</p>	<p>Lead Governor's Report</p> <p>Following the declaration of results from the recent elections, LC confirmed</p> <ul style="list-style-type: none"> - Kevin Sharkey as Public Governor for Wirral South and Neston - Ronnie Morris as Public Governor for Wirral West - Jenna Brassington as Staff Governor <p>LC noted that there remained two vacant seats in both Birkenhead and Wallasey and one seat in the Rest of England constituency.</p> <p>LC reflected that governors had recently considered options to fill vacant seats with the Director of Corporate Affairs and options included co-opting members, revisiting the timing of the elections in the calendar year, and engaging with new partners through the ICB governance.</p> <p>KH suggested engaging with the VCFSE sector across all Places where the Trust provides services.</p> <p>BJ asked if Your Voice members were well represented in local constituencies; AH confirmed that members represented Wirral constituencies but there was further work to do to increase membership from Cheshire East, St Helens and Knowsley.</p> <p>The Board of Directors received the report.</p>
<p>8. WCT22/23-110</p>	<p>Chief Executive's Report</p> <p>KH presented the Chief Executive's report highlighting key points of national and local interest.</p> <p>CB referred to the development of the Place based arrangements and asked how the structures were replicated in the other Places. KH advised that all Places should have a Partnership Board and a Provider Partnership.</p> <p>The Board of Directors received the report with no further questions or comments.</p>
<p>9. WCT22/23-111</p>	<p>Reports from the committees of the Board</p> <p>Informal Board - 2 November 2022</p>

AH advised that a report from the Informal Board session on 2 November 2022 was included in the papers, providing an overview of the topics discussed.

There were no further questions or comments

Quality & Safety Committee - 9 November 2022

CB provided a verbal report highlighting the following key points;

- The committee reviewed all pending and open actions from previous meetings with a status provided as required
- A report was received following the Integrated Performance Board (IPB) with the following key points highlighted;
 - The committee was assured that highlight reports were to the oversight groups to provide assurance on the delivery of safe performance and that all risks were being reviewed at locality level
 - An increase in referrals to Children’s Speech & Language Therapy was noted and a deep dive had been commissioned by IPB to address concerns about children being impacted by lockdown
 - The committee had previously raised a question regarding the recording of moderate harm incidents and whether they were attributable to the Trust or elsewhere and the Chief Nurse had agreed to review the definitions
 - The lower level of incident reporting in GP Out of Hours was noted and the SAFE Operations Group had been asked to monitor and report on this
 - IPB had requested a review of pressure ulcer incidents to identify those that were referred in and those which occurred in the Trust’s care and triangulate this data with staffing levels.
- An update on the Quality Strategy Delivery Plan was provided noting that all 52 actions were progressing with eight extensions requested. There was discussion on governance and reporting, and it was agreed that the committee would continue to receive the detail of the plans as an appendix with a report by exception from the owners of the three components of the plan.
- A detailed Quality Performance Report was received, and it was noted that there had been no StEIS reportable incidents in quarter 2. It was also noted that the StEIS process was evolving into the PSIRF (Patient Safety Incident Response Framework) and Board members would receive further information on this in due course.
- The 59 risks related to quality and safety were reviewed, broken down by service. All were green RAG rated and it was noted that mitigations relating to the Knowsley staffing risk had been reported to the Knowsley Health & Wellbeing Board and were well received.
- The Board Assurance Framework was reviewed, and the revised risk descriptions were acknowledged. The committee had requested that some of the sections that had previously been struck out as complete be retained to show the history of the risks and mitigations. This had now been implemented.
- The committee received the Mortality Report for quarter 2 and approved its passage to Board for publication on the Trust’s website. The committee had received assurance that all expected and unexpected deaths were reviewed at the weekly Clinical Risk Management Group meeting and if any other Trusts were involved the information was passed on, and any transfer of care issues were referred to the system wide performance group.
- The committee received the Infection Prevention & Control quarterly report and noted the improved position on a range of elements. There was just one amber rated criterion remaining which had mitigations in place. There had also been two COVID outbreaks in the Community Intermediate Care Centre during the reporting period, both of which had been effectively managed with no serious issues to escalate.
- The committee welcomed the Freedom to Speak Up mid-year report and received assurance from the Caldicott Guardian and FTSU Guardian on how information

was triangulated with feedback from other systems and fed through the governance structure.

- The Complaints and Concerns mid-year report was presented and provided a breakdown by theme and locality. The main service areas were unplanned care and regional children's services; the committee had asked for a review of cases referred to the Ombudsman, which was also received. The committee was also pleased to note that Wirral Council had confirmed that there were good procedures in place for responding to and learning from Adult Social Care complaints and the arrangements were clear and well developed.
- The committee received an update on the implementation of internal audit recommendations and on trust-wide policy status; it was noted that 46 of 49 policies (with oversight by the committee) were in date and the remaining three were under review.

Board members made the following comments:

- KH asked whether the committee was satisfied that the Integrated Performance Board provided enough assurance that triangulation of information had taken place. CB confirmed that members were generally assured and having a mechanism in place to refer areas to IPB for further discussion was useful.
- BJ added that having recently observed an IPB, she was assured by the level of detail being discussed but recognised on-going work to ensure active triangulation across performance domains. To this end, BJ advised that when reviewing the IPB ToRs, the members of the Finance & Performance Committee had suggested a revision to articulate the role of IPB more clearly in relation to triangulation across domains.

Finance & Performance Committee - 30 November 2022

BJ provided a verbal report highlighting the following key points;

- The committee received the Board Assurance Framework and the revised Standing Financial Instructions for approval, both of which were presented to Board for final approval (today). FPC had previously requested an update to the SFIs to address a gap in relation to asset disposal, and this had been addressed in the revised version.
- Updates on the financial position, operational performance and the Productivity & Efficiency programme were shared and there was a good discussion about underlying cost pressures e.g., inflation, agency costs and potential sources of additional income, cost savings and risks. Consequently, the committee had requested confidence levels be developed for the most likely, worst, and best year-end position.
- The committee received an update on the Digital Strategy Delivery Plan with an assurance that all projects were progressing to plan.
- The high-level risk report was presented with no risks to escalate to the committee and confirmation that all risks had been reviewed in the last four weeks.
- The Integrated Performance Board Terms of Reference were reviewed, with an addition suggested relating to triangulation across performance domains.
- The committee reviewed its three remaining Internal Audit recommendations and noted that they were progressing well and were on track to meet delivery deadlines.
- An update on policies was received and it was noted that seven of the committee's eight policies were in date and the remaining one was due to be circulated for approval imminently.

People and Culture Committee - 7 December 2022

GM provided a verbal report highlighting the following key points:

- The committee received an update on the recruitment of the Director of People & Culture and noted that interviews would take place on 12 January 2023.
- An update on the completion of the NHS Staff Survey was shared with members noting a response rate of 44% (reduced from 54% last year). The committee

	<p>considered the possible reasons for the lower uptake, including organisational change and the move to localities.</p> <ul style="list-style-type: none"> • The People Strategy Delivery Plan was received, and it was agreed that the people metrics would be reviewed to ensure that they added value and impact. All actions were on track although some timescales had been amended due to work pressures and capacity. • The committee noted the level of interrogation in a recent recruitment and retention deep dive. This remained a key risk (ID 2874) and a new Recruitment & Retention Group had been established to look at data by staff group and locality to provide a more forensic approach, including the use of information from exit interviews. • The Safe Staffing model for the Community Intermediate Care Centre was reviewed and the committee was assured by the progress to develop the model. The committee did not consider that staffing levels were a factor in any safety incidents reported. It was agreed that a quarterly update would be provided to the committee and half-yearly to the Board of Directors. • The high-level risks relating to people and culture were reviewed and it was acknowledged that risk ID2874 relating to turnover had been given a real focus. The risk rating would be reviewed. • The committee reviewed the Board Assurance Framework and did not propose any changes to ratings but did request that the recruitment and retention deep dive be considered as a key mitigation. • An update on trust-wide policy status was provided with the committee approving extensions to some HR policies. <p>Staff Council - 8 November 2022</p> <p>AH provided a verbal report highlighting the following key points:</p> <ul style="list-style-type: none"> • The 11th birthday celebrations of Staff Council had been a key focus of the most recent meeting and the group had looked back on achievements such as the Bee Well Garden, the NHS Games and participation in interview panels and focus groups and the Staff Awards judging process. • Staff Council had supported a comms campaign for the Trust's Green Plan on the theme of small changes making a difference, such as using reusable cups at the café, switching equipment and lights off when not in use etc. • An update on service visits by executive and non-executive directors was given, and a member of Staff Council requested a visit to the Podiatry Service, which had since been arranged. • Staff Council received updates on the Productivity & Efficiency programme and the Recruitment & Retention campaign. • Members discussed how they could encourage colleagues to join Staff Council, particularly in the Trust's new geographies.
<p>10. WCT22/23- 112</p>	<p>Integrated Performance Report (<i>live from TIG</i>)</p> <p>KH introduced the report which provided the Board of Directors with a summary of performance across the Trust up to the end of October 2022. Each performance domain was presented by the relevant Director.</p> <p>JC highlighted the following from the operational dashboard, which demonstrated the Trust's responsibility in achieving local, as well as national and regional performance indicators:</p> <ul style="list-style-type: none"> • The Trust had 46 green Key Performance Indicators (KPIs), 13 amber and 26 red which were predominately related to waiting lists. This was a consistent position across trusts nationally. • There had been an increase in referrals but waiting lists were currently within the national time frames. • Waiting lists in children's services were triaged consistently and there were named practitioners for active caseloads. • This week (<i>w/c 12.12.22</i>) the Trust's Walk-in Centres and Urgent Treatment Centre had seen a 300% increase in attendances, which was the highest number of

patients recorded, predominantly due to concerns over Strep A for which a communication plan was in place.

- The Discharge to Access (D2A) bed occupancy in Community Intermediate Care Centre and length of stay had been high predominately due to the need for complex care packages. The Home First scheme had recently been introduced to support this.
- The 2-hour and 2-day urgent care response targets were aimed at keeping people out of hospital and the Trust was performing above national targets. The Trust had capacity to accept more referrals and was working on a process for patients to refer themselves.
- NC advised that the position around GP Out of Hours CAS and UCAT call response times had improved despite the pressures of increased activity and overall response times were becoming shorter.
- BJ added that Finance & Performance Committee regularly reviewed these indicators and had received assurance that those people most at risk on waiting lists were triaged and seen first, and that services were being encouraged to think innovatively to address waiting lists.

AH highlighted the following from the people dashboard:

- Staff turnover had seen a slight reduction in October 2022 from 15.3% to 15%. The People & Culture Committee was continuing to receive assurance on the work of the Recruitment & Retention Task and Finish Group.
- Mandatory training remained strong, and compliance was currently at 94.4% (up from 92.5% in September).
- Sickness absence remained largely unchanged.
- Vacancy rates had reduced slightly.
- Agency usage in October 2022 had decreased to just under the monthly target.

PS highlighted the following from the quality dashboard:

- The majority of metrics remained within normal variation.
- At the end of September 2022 there had been two months with no moderate harm falls. However, one StEIS reportable fall occurred in October 2022 bringing the total number of incidents for the year to four. The latest fall involved a clinically complex patient with a history of falls and would be reviewed in more detail by the Quality & Safety Committee when it met in early January 2023.
- The year-to-date position for falls resulting in moderate harm or above per 1,000 bed days stood at 0.35, which remained lower than the previous 12-month period and demonstrated that the Trust's improvement plan was having a positive impact.
- The Friends and Family Test year to date position was a 92.4% favourable response rate, and the in-month position was 93.8%; 14,500 returns had been received in the reporting year.
- NC added that there had been no medication incidents resulting in moderate harm but any incidents which did occur were recorded on Datix and reviewed at the Medicines Governance Group and escalated to the Clinical Risk Management Group and Quality & Safety Committee as appropriate.

MG highlighted the following from the finance dashboard:

- The Trust had reported a surplus of £438k at M7 which was slightly ahead of the plan of £420k.
- Key pressures on the budget included staffing in the Community Intermediate Care Centre and agency use linked to vacancies, sickness, skill mix review for safe staffing, non-pay pressures due to inflation, utilities, and shortfalls on MSK and Podiatry income.
- The productivity and efficiency shortfall was £215k, which was slightly better than expected.
- Capital expenditure at M7 was £4.1m against a plan of £4.3m due to a shortfall in relation to the Marine Lake development which was expected to be resolved before

	<p>the end of the year and the Trust was confident about all other elements of the plan.</p> <ul style="list-style-type: none"> • The Trust had a healthy cash balance of £18m and had continued to improve its performance in relation to the Better Payment Practice Code which stood at 93% in month in terms of volume, and value against targets of 95%. • BJ added that the Finance & Performance Committee had a good discussion about the financial position and the variables which were impacting on the Trust's ability to achieve its targets and noted that the Trust's Productivity & Efficiency programme was one of the best performing across Cheshire & Merseyside. <p>The Board of Directors noted the updates provided and the performance shared via TIG dashboards up to M7 and was assured by the governance arrangements in place to monitor performance across the Trust.</p>
<p>11. WCT22/23-113</p>	<p>Adult Social Care Contract</p> <p>KH advised that Wirral Council's Adult Social Care and Public Health Committee had determined that they would not issue a further five-year contract to the Trust but would renew the contract for one further year.</p> <p>The risks involved in this decision were significant and not sustainable and the Trust was working with Wirral Council to resolve the situation. If a decision was made prior to the next Board of Directors meeting an Extraordinary Board meeting would be arranged.</p>
<p>12. WCT22/23-114</p>	<p>Board Assurance Framework (BAF) 2022-23 strategic risks</p> <p>AH provided an update on the tracking of strategic risks through the committee structure and highlighted the information and progress shared in the papers, together with updates shared by the Chairs of the relevant committees.</p> <p>Of the nine strategic risks being tracked through the Board Assurance Framework none were scoring more than a risk rating of 12.</p> <p>There were three high-level organisational risks which were being monitored via the committees of the Board. It was not proposed that these risks would impact on the current scoring of any strategic risk.</p> <p>The members of the Board were asked to consider the revised risk description of ID03 following a further review by the Finance & Performance Committee. This was approved by the Board. AH also noted that a Place-based risk management framework was anticipated in early 2023 which would support further review and mitigation of this risk.</p> <p>The Board of Directors noted the position as reported and was assured of the oversight and management of strategic risks through the sub committees of the Board.</p>
<p>13. WCT22/23-115</p>	<p>Operational Winter Plan</p> <p>JC presented the Operational Winter Plan for 2022-23 noting that NHS England had requested enhanced winter resilience plans and the identification of 'Go Further' projects e.g., Home First.</p> <p>JC advised that Home First had been piloted in September 2022 and had been successful.</p> <p>Other projects included falls prevention and the Single Point of Access which supported the avoidance of admission to hospital. The Trust had recently piloted having a GP stationed in the Single Point of Access to improve pathways.</p> <p>The Board of Directors welcomed the detail shared and was assured by the operational plans in place to support winter.</p>

<p>14. WCT22/23-116</p>	<p>Communications & Marketing Strategy Assurance Report Q2 2022-23</p> <p>AH provided an update on Communications & Marketing activity during Q2 reflecting on the previous agenda item and the communications and marketing support to key winter projects including Home First.</p> <p>AH also noted that the Communications Team had been shortlisted for a national award demonstrating the health and wellbeing campaigns they had supported across the Trust.</p> <p>A funding request had been submitted to the ICB Workforce and Transformation Group for future funding to build the NHS Cadets programme across Cheshire & Merseyside.</p> <p>MB expressed his admiration that such a small team had produced such a volume and quality of work and recognised how well respected the team was by colleagues across the organisation.</p> <p>The Board welcome the report and the detail provided.</p>
<p>15. WCT22/23-117</p>	<p>Standing Financial Instructions (SFIs)</p> <p>MG presented the revised Standing Financial Instructions, noting that the Finance & Performance Committee had reviewed them in August and subsequently in November 2022.</p> <p>MG noted that changes to the SFIs had been highlighted and a summary table included for reference.</p> <p>The Board approved the revised Standing Financial Instructions.</p>
<p>16. WCT22/23-118</p>	<p>Freedom to Speak Up Bi-Annual report Q1 and Q2 2022-23</p> <p>AJ was in attendance as the Trust's Freedom To Speak Up Guardian and presented the report highlighting the following key points.</p> <ul style="list-style-type: none"> • The report included the number of concerns raised, the themes and actions taken to resolve concerns. • There were 14 concerns reported in Q1 and Q2 2022-23. Seven concerns (50%) were reported openly by staff, three (21%) confidentially via the FTSU Champions and four (29%) anonymously. • The area with the most concerns reported was the Community Intermediate Care Centre (CICC). Outcomes and learning included better communication and processes to reach all team members. • The FTSU team was aiming to increase the number of Champions in areas where a concern had been reported to promote and support ongoing communication. • From 2023 staff would be asked when completing a feedback questionnaire if their information could be used anonymously for training purposes. • This week 63 nominated education link persons who support students had agreed to become Freedom to Speak Up champions, taking the total across the Trust to over 100. <p>NC also advised that FTSU mandatory training would soon be available for Board members, managers, and staff.</p> <p>The Board of Directors acknowledged the work of the FTSU Guardian and the team of FTSU Champions and thanked AJ for her hard work and commitment.</p>
<p>17. WCT22/23-119</p>	<p>Mortality Report - Learning from Deaths Q2 2022-23</p> <p>NC presented the report in relation to the implementation of the Learning from Deaths Framework, confirming a nil return for the Trust for Quarter 2. There were eight reported deaths, but none had resulted from harm or care provided by the Trust and no deaths had met the criteria for StEIS reporting.</p> <p>The Board of Directors approved Appendix 1 for publication on the Trust's website.</p>

<p>18. WCT22/23-120</p>	<p>CQC Statement of Purpose - Annual Review 2022</p> <p>PS presented the CQC Statement of Purpose - Annual Review 2022 for approval in advance of resubmitting to the CQC. The changes had been highlighted in red text.</p> <p>The Board of Directors approved the CQC Statement of Purpose.</p>
<p>19. WCT22/23-121</p>	<p>Staff Council - 22 September 2022</p> <p>The decision and action log from the meeting of the Staff Council held on 22 September 2022, was received and noted.</p>
<p>20. WCT22/23-122</p>	<p>Council of Governors</p> <p>AH advised that the minutes from the CoG meeting on 14 June 2022 were subject to approval. The Lead Governor report (at agenda item 7) provided a briefing from the formal meeting in November 2022.</p>
<p>21. WCT22/23-123</p>	<p>Any Other Business</p> <p>There were no items of Any Other Business.</p>
<p>22. WCT22/23-124</p>	<p>Invitation for Public Comments</p> <p>There were no comments or questions from members of the public.</p>
<p>23. WCT22/23-125</p>	<p>Items for Risk Register</p> <p>There were no new risks identified for the risk register.</p>
<p>24. WCT22/23-126</p>	<p>Staff Story: Providing a Specialist Dental service with the Patient at the heart of care delivery</p> <p>NC introduced the Staff Story which featured Helen Adams, Clinical Director and Specialist in Special Care Dentistry.</p> <p>Helen shared her experience of supporting the service user with complex medical needs (who featured in agenda item 1) and highlighted the importance of tailoring pathways for each individual, adding that the role of the Community Dental Service was not just to support service users but to work with their families and carers.</p> <p>NC highlighted the complexities of the environment the team was working in, but they still provided exceptional care which was tailored for every individual.</p> <p>LC shared that a family member had recently had a similar experience with the service and received the same exceptional care. MB thanked LC for the personal feedback.</p> <p>The Board of Directors welcomed and appreciated the story shared.</p>
<p>25. WCT22/23-127</p>	<p>Summary of actions and decisions</p> <p>AH provided a brief summary of actions and decisions taken during the Board of Directors meeting.</p>
<p>Date and Time of Next Meeting: The next formal Trust Board meeting will take place on Wednesday 15 February 2023. Further details on the venue and joining instructions will follow.</p>	

<p>Board - Chair Approval</p>			
<p>Name:</p>		<p>Date:</p>	
<p>Signature:</p>			

The Board of Directors Meeting closed at 4.20pm.

Board of Directors - Matters Arising 2022-23

Actions from meeting held in April and June 2022 are complete and have been archived.

There were **no actions** from the meeting held in August 2022.

Actions from meeting held on **19 October 2022**

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Social Value Mid-Year Report	WCT22/23-087	Review the wording of the 'Engaging with and supporting communities' subtheme (gifts in kind) and the metric associated with the VCF groups	A.Bennett	December 2022	Complete.
The national staff influenza programme 2022-23	WCT22/23-092	Share (staff) COVID booster uptake figures	P.Simpson	December 2022	Complete. Figures not available to the Trust.
		Share uptake on children's flu vaccine across children's services	P.Simpson	December 2022	Complete. During the December Board of Directors meeting P.Simpson provided the current children's flu vaccination uptake figures: Wirral 72.5% and Cheshire East 70.2%



Actions from meeting held on **14 December 2022**.

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
Lead Governors Report	WCT22/23-109	Engage with the VCFSE sector and other providers at Place regarding governor roles and raise awareness	A.Hughes	April 2023	Complete and on-going.