



**Wirral Community  
Health and Care**  
NHS Foundation Trust

**NINETY SEVENTH BOARD OF DIRECTORS  
MEETING  
(Clinical Skills Lab, St Catherine's Health Centre)**

**WEDNESDAY 17 APRIL 2024**

**2.00 PM**

**BOARD OF DIRECTORS' MEETING**  
Clinical Skills Lab, St Catherine's Health Centre

Wednesday 17 April 2024 at 2.00pm

**AGENDA**

No	Time	Item (10 minutes)	Action	Reference
1.	14:00	<b>Journey of Care: HomeFirst</b> Chief Nurse	To assure	WCT24/25-001 (p)
PRELIMINARY BUSINESS: (10 minutes)				
2.	14:10	<b>Apologies for Absence</b>	To note	WCT24/25-002 (v)
3.		<b>Declaration of Interests</b> <i>(Any action to be taken as a result)</i>	To assure	WCT24/25-003 (v)
4.		<b>Minutes of the previous meeting</b> <ul style="list-style-type: none"><li>21 February 2024</li></ul>	To approve	WCT24/25-004 (d)
5.		<b>Matters Arising:</b> <ul style="list-style-type: none"><li>21 February 2024</li></ul>	To assure	WCT24/25-005 (d)
6.		<b>Shadow Board Programme Report</b> Chairman/Chief People Officer	To assure	WCT24/25-006 (d)
STATUTORY BUSINESS: (15 minutes)				
7.	14:20	<b>Chair’s Report</b>	To assure	WCT24/25-007 (d)
8.		<b>Lead Governor’s Report</b>	To assure	WCT24/25-008 (d)
9.		<b>Chief Executive’s Report</b>	To assure	WCT24/25-009 (d)
COMMITTEE ASSURANCE REPORTS: (20 minutes)				
10.	14:35	<b>Brief reports from the sub-committees of the Board</b> <ul style="list-style-type: none"><li><b>Quality &amp; Safety Committee - 13 March 2024</b> Non-Executive Chair of the Committee</li><li><b>Finance &amp; Performance Committee - 3 April 2024</b> Non-Executive Chair of the Committee</li><li><b>People &amp; Culture Committee - 10 April 2024</b> Non-Executive Chair of the Committee</li><li><b>Informal Board - 20 March 2024</b> Director of Corporate Affairs</li></ul>	To assure	WCT24/25-010 (v)
PERFORMANCE: (15 minutes)				
11.	14:55	<b>Integrated Performance Report (live from TIG)</b> Chief Executive	To assure	WCT24/25-011 (d/p)
RISK: (10 minutes)				
12.	15:10	<b>Board Assurance Framework (BAF)</b>	To approve	WCT24/25-012 (d)

		<b>strategic risks year-end 2023-24</b> Director of Corporate Affairs		
STRATEGY & PLANNING (15 minutes)				
13.	15:20	<b>Organisational Strategy 2022-27 - Year 2 progress report</b> Deputy Chief Strategy Officer	To assure	WCT24/25-013 (d)
CORPORATE GOVERNANCE (15 minutes)				
14.	15:35	<b>Place / system governance briefing</b> Chief Executive Director of Corporate Affairs	To assure	WCT24/25-014 (v)
15.		<b>Delegated Authority for approval of the Annual Report and Accounts 2023-24</b> Director of Corporate Affairs	To approve	WCT24/25-015 (d)
16.		<b>Revised Audit Committee Terms of Reference</b> Director of Corporate Affairs	To approve	WCT24/25-016 (d)
QUALITY GOVERNANCE (10 minutes)				
17.	15:50	<b>Care Quality Commission Statement of Purpose</b> Chief Nurse	To approve	WCT24/25-017 (d)
18.		<b>Mortality Report - Learning from Deaths Q3 2023-24</b> Interim Medical Director	To approve	WCT24/25-018 (d)
GROUP MINUTES (For noting):				
19.	16:00	<b>Staff Voice Forum:</b> <ul style="list-style-type: none"><li>9 November 2023</li><li>22 January 2024</li></ul> Chief People Officer	To assure	WCT24/25-019 (d)
20.		<b>Council of Governors</b> <ul style="list-style-type: none"><li>The Lead Governor report attached provides a briefing on recent governor activity (including the CoG development session on 13 March 2024, and the Governor’s Quality Forum on 13 March 2024).</li><li>The CoG will meet formally on 8 May 2024</li></ul>		WCT24/25-020 (v)
ITEMS FOR INFORMATION: (15 minutes)				
21.	16:05	<b>Any Other Business</b>		WCT24/25-021 (v)
22.		<b>Invitation for Public Comments:</b> Any questions on the items on the agenda should be raised with the Director of Corporate Affairs in advance to be addressed here.		WCT24/25-022 (v)
23.		<b>Items for Risk Register</b>		WCT24/25-023 (v)
24.		<b>Staff Story: Sarah Leaver, Healthcare Assistant, HomeFirst</b> Chief People Officer	To assure	WCT24/25-024 (v)
25.		<b>Summary of actions and decisions</b>	To assure	WCT24/25-025 (v)
<b>Date and Time of Next Meeting:</b> The next Public Board of Directors meeting will take place on <b>Wednesday 19 June 2024.</b>				

(d) = document included in the paper pack  
(v) = verbal report to be provided at the meeting  
(p) = presentation to be provided at the meeting

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

**MINUTES OF MEETING**

**WEDNESDAY 21 FEBRUARY 2024 at 2.00PM**

**Members:**

Mr Anthony Bennett	Chief Strategy Officer	(AB)
Prof Chris Bentley	Non-Executive Director	(CB)
Prof Michael Brown	Chair	(MB)
Dr Jo Chwalko	Chief Operating Officer	(JC)
Mr Steve Connor	Non-Executive Director	(SC)
Dr Nick Cross	Medical Director	(NC)
Mr Mark Greatrex	Chief Finance Officer/Deputy Chief Executive	(MG)
Ms Beverley Jordan	Non-Executive Director	(BJ)
Mr Claus Madsen	Chief People Officer	(CM)
Mr Gerald Meehan	Non-Executive Director	(GM)
Mr Dave Murphy	Chief Digital Information Officer	(DM)
Mrs Paula Simpson	Chief Nurse	(PS)

**In Attendance:**

Ms Lynn Collins	Lead Governor	(LC)
Mrs Cathy Gallagher	Senior Assistant (minute taker)	(CG)
Mr Jim Cadwallader	Public member	(JC)

Reference	Minute
<b>1.</b> WCT23/24-130	<p><b>Journey of Care: Therapy Dogs UK and how they support Trust services</b></p> <p>PS introduced the Journey of Care story from Eileen Slattery, founder of Therapy Dogs UK.</p> <p>Eileen and Spartacus, the therapy dog, had supported visitors and patients at the Trust for over four years. They had recently visited the Bluebell Ward at the Community Intermediate Care Centre (CICC) and Eileen described how Spartacus had given great comfort to a patient and her family.</p> <p>The Board of Directors welcomed the opportunity to receive the Journey of Care story and thanked Eileen, Spartacus and all those involved.</p>
<b>2.</b> WCT23/24-131	<p><b>Apologies for Absence</b></p> <p>Steve Connor, Non-Executive Director Nick Cross, Medical Director Karen Howell, Chief Executive</p>
<b>3.</b> WCT23/24-132	<p><b>Declaration of Interests</b></p> <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><b>4.</b> WCT23/24-133</p>	<p><b>Minutes of the previous meeting - 13 December 2023</b></p> <p>The Board of Directors approved the minutes of the meeting held on 13 December 2023, as a true and accurate record.</p>
<p><b>5.</b> WCT22/23-134</p>	<p><b>Matters Arising - 13 December 2023</b></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><b>6.</b> WCT22/23-135</p>	<p><b>Chair's Report</b></p> <p>MB presented the Chair's Report which included key updates for members' attention and assurance.</p> <p>The Board of Directors received the report with no further questions or comments.</p>
<p><b>7.</b> WCT22/23-136</p>	<p><b>Lead Governor's Report</b></p> <p>LC presented the report and highlighted in particular that the Remuneration &amp; Nomination Group of the Council of Governors had been reconvened to support the process to appoint a new Audit Chair for the Trust.</p> <p>The Board of Directors received the report with no further questions or comments.</p>
<p><b>8.</b> WCT22/23-137</p>	<p><b>Chief Executive's Report</b></p> <p>MG presented the report which highlighted key issues of local, regional and national importance.</p> <p>MG highlighted the Trust's recent CQC inspection which provided an overall rating of Good and recognised the provision of Outstanding services across the Trust.</p> <p>Following a competitive tender process, the Trust had been awarded the contract to deliver Healthy Young People and Families services across Lancashire.</p> <p>In January 2024 the Trust welcomed colleagues from NHS England to discuss on-going national work to define productivity and community services data sets. The NHSE team was impressed by the Trust Information Gateway (TIG) system and its ability and potential to support greater analysis of service productivity in a community setting.</p> <p>The Trust had received the National Preceptorship for Nursing Quality Mark from the NHS England National Preceptorship Programme.</p> <p>With the support of the Cheshire &amp; Merseyside MHLDC Provider Collaborative, the Trust had launched the NHS Cadets Programme across St Helens and Knowsley, complementing the established programme in Wirral.</p> <p>The Trust was looking forward to welcoming Amanda Doyle, NHSE Director of Primary Care and Community Services, to Wirral in March 2024 to share developments across the Wirral Place. In April 2024 the Trust would welcome Sir Julian Hartley, NHS Providers Chief Executive.</p> <p>MG advised that the Planning Guidance for 2024-25 had been delayed and was not expected until March 2024.</p> <p>MG welcomed any comments or questions on the report; there were no further questions or comments from members of the Board.</p>
<p><b>9.</b> WCT23/24-138</p>	<p><b>Care Quality Commission (CQC) Trust Inspection Report</b></p> <p>PS presented the CQC Inspection Report and highlighted the following points:</p> <p>The Trust was subject to a comprehensive CQC inspection in July - September 2023 and the final report was published on 13 December 2023.</p>

	<p>The overall Trust rating was 'Good' with an 'Outstanding' rating for Community Services for Adults in the caring domain and the Sexual Health Service was rated 'Outstanding' in the Responsive and Well-Led domains and 'Outstanding' overall as a core service.</p> <p>The CQC report described the positive feedback from service users and highlighted outstanding practices and quality improvements with a focus on population health to reduce health inequalities.</p> <p>PS paid tribute to all staff for the exceptional care they delivered every day and for their engagement during the CQC inspection process.</p>
<p><b>10.</b> WCT23/24-139</p>	<p><b>Reports from the committees of the Board</b></p> <p><b>Quality &amp; Safety Committee - 17 January 2024</b></p> <p>CB provided a verbal report highlighting the following key areas:</p> <ul style="list-style-type: none"> <li>• There was one high-level risk related to Cloughton Community Nursing team which was reviewed at Integrated Performance Board (IPB) and Quality &amp; Safety Committee (QSC) and referred to People &amp; Culture Committee (PCC) for information.</li> <li>• A deep dive had identified a slight increase to moderate harms although numbers were downgraded.</li> <li>• System Place updates continued to be reported to QSC.</li> <li>• The Quality Strategy Delivery Plan had three exceptions to the delivery of key actions and approvals to extend due date were given.</li> <li>• The committee received a good update on co-produced pathways.</li> <li>• The committee received the PSIRF triannual report and was assured on how the programme was progressing.</li> <li>• The Safeguarding Strategic Plan 2024 was the first safeguarding strategy which covered the next 12 months and committee asked for Equality, Diversity and Inclusion, Place and Lancashire to be included.</li> <li>• The Medicines Optimisation Strategy had been delayed due to the recent CQC inspection.</li> <li>• An update on the completion of the Emergency Preparedness Resilience &amp; Response (EPRR) annual self-assessment against 58 core standards was provided. An action plan to address any identified gaps had been included in the report for assurance to committee and an associated risk was being managed on the risk register (ID2992 at RR6).</li> <li>• The Incident Management Policy was approved by committee.</li> <li>• Of the 238 local procedural documents, 231 were approved.</li> </ul> <p><b>Finance &amp; Performance Committee - 7 February 2024</b></p> <p>BJ provided a verbal report highlighting the following key areas:</p> <ul style="list-style-type: none"> <li>• There were three items presented for approval to committee - the Board Assurance Framework, updated Terms of Reference for IPB and the decision and action log from previous meetings.</li> <li>• As part of the regular debrief from IPB it was noted that costs in the CICC were under budget during that month and thanks to the service were expressed.</li> <li>• The Productivity &amp; Efficiency (P&amp;E) programme was on track to deliver the required savings this year.</li> <li>• There were no new high-level risks to escalate to the committee.</li> <li>• With regard to the financial plan for 2024/25, national planning guidance was not yet available but was expected mid-February 2024.</li> <li>• An update was received on the National Cost Collection Patient Level and Information Costing System (PLICS) report 2022-23.</li> </ul>

The ICB and Wirral Council had approved an extension to the CICC contract for one year. The extension would complete the first year plus one taking it to September 2025.

MB highlighted that after April 2024 53% of Trust income would be for NHS work in Wirral, the remaining 47% would be for public health contracts. BJ acknowledged that a discussion had been had at committee in relation to cost investment leading to savings being generated.

#### **People and Culture Committee - 14 February 2024**

GM provided a verbal report highlighting the following key areas:

- The flu vaccination uptake for the Trust was at 49% in January 2024. The national uptake was between 40-60%. The committee had asked IPB to review the position.
- An update on the People Strategy Year 2 delivery plan was provided and it was confirmed that the Year 3 plan would be presented to the committee in April 2024.
- The committee received the high-level workforce report reviewing YTD performance data against people metrics from TIG.
- The Staff Survey results would be published on 7 March 2024 and an update provided to the committee in April 2024.
- The committee received an update on the Equality Delivery System (EDS).
- The committee received an update on the mobilisation of the Lancashire contract.
- There were no moderate or severe harm incidents in the Safe Staffing report for quarter 3.

#### **Informal Board - 10 January 2024**

AH presented the report and highlighted a briefing on the mobilisation of the Lancashire contract which included the establishment of the project team and engagement with commissioners and the current service provider.

The members of the Board would also be participating in a two-day bespoke board development session in February 2024.

#### **Audit Committee - 7 February 2024**

In SC's absence and as Executive Lead for the Audit Committee, MG provided a verbal report highlighting the following key areas:

- The committee received the revised Terms of Reference and approved them for onward recommendation to the Board of Directors.
- The committee annual cycle of business was approved.
- The plans for the preparation of the 2023/24 Financial Statements were approved.
- An update was provided for assurance on the Trust's response to the MIAA *'FTSU - Through the Audit Committee Lens'*
- The Audit & Fraud Tracker Tool provided assurance on the work completed to implement recommendations from completed reviews, with committee noting oversight at each of the committees of the Board.
- The committee received the Board Assurance Framework and an update on the work of the committees to ensure a robust process to track and monitor strategic risks. An update on the management of organisational risks across the Trust was also provided.
- The draft Internal Audit Plan 2024-25 was received for comment.
- An Anti-Fraud Update was provided with committee noting in particular that 60% of staff had already completed the new anti-fraud training on ESR.

The Tender Waiver applications were presented for assurance.

	<p><b>Staff Voice Forum - 22 January 2024</b></p> <p>CM gave a verbal update highlighting the following key areas:</p> <ul style="list-style-type: none"> <li>• The minutes of the meeting were pending approval and would be shared at the next Public Board meeting in April.</li> <li>• Representatives of the Staff Network groups had joined the Staff Voice Forum as members.</li> <li>• The Staff Voice Forum received an update on the Winter Plan and the Lancashire 0-19 contract.</li> <li>• The Deputy Chief Nurse presented the Trust's CQC Inspection report.</li> </ul>
<p><b>11.</b> WCT23/24-140</p>	<p><b>Integrated Performance Report</b></p> <p>MG introduced the report which provided a summary of performance across the Trust up to the end of December 2023, noting that a detailed analysis of performance was completed in the oversight groups reporting to the Integrated Performance Board (IPB).</p> <p><b>Operational Performance</b></p> <p>JC highlighted the following position for operational/service performance:</p> <ul style="list-style-type: none"> <li>• JC advised that there were 66 green KPIs, 8 amber and 12 red. Good progress had been made to increase performance and the red and amber KPIs were only 1-2% away from green. The red KPIs predominately related to waiting lists. All services were holding waiting lists under 52 weeks apart from Paediatric Speech &amp; Language.</li> <li>• Performance against the four-hour target in the Walk-in Centres and Urgent Treatment Centre was 96.9% year to date.</li> <li>• Bed occupancy in the Community Intermediate Care Centre (CICC) had dropped slightly to 87.7% in month and 88.2% year to date. The median length of stay target was 21 days and was currently 17 days.</li> <li>• Referrals to the Home First service were exceeding targets.</li> <li>• Urgent Community Response 2-hour and 2-day performance continued to be above the 70% target.</li> <li>• GP Out of Hours emergency times continued to improve. At IPB there was a request for an action plan to further improve targets.</li> </ul> <p><b>Quality Performance</b></p> <p>PS highlighted the following position for quality performance:</p> <ul style="list-style-type: none"> <li>• There had been 0 StEIS reportable incidents, resulting in a YTD position of 1.</li> <li>• There had been 0 category 3 and above pressure ulcers attributable to the Trust, 0 moderate harm incidents attributed to the Trust and 0 IPC incidents attributed to the Trust.</li> <li>• The level of incidents and patient safety reporting had reduced in December 2023 since the transition to the Learning from Patient Safety Events (LFPSE) system on 1 December 2023. A reduction in reporting and time lag had been identified and was being investigated.</li> <li>• QUAL 18 (the percentage of all incidents reported with moderate and above harm level) remained in a good position at 5.9%.</li> <li>• There had been a reduction in complaints during December, a total of 2 complaints had been received.</li> <li>• 2,151 Friends and Family Test responses were received with a 91.8% satisfaction score. The year-to-date position was 92.5%.</li> </ul> <p><b>Workforce Performance</b></p> <p>CM highlighted the following position for workforce performance:</p> <ul style="list-style-type: none"> <li>• Staff turnover was at 10.7% which was under the strategic target of 12%.</li> </ul>



	<ul style="list-style-type: none"> <li>• Mandatory training compliance had increased from 95.1% to 95.3% and had been over 90% since May 2022.</li> <li>• Sickness absence had increased slightly to 6.6% due to an increase in seasonal flu/covid and norovirus.</li> <li>• Agency usage was at 1.4% which was well below the cap of 3.7%.</li> <li>• Full time equivalent vacancies had increased due to the 75 vacancies for Home First.</li> <li>• There was a 21% response rate to the Pulse Survey in January 2024.</li> <li>• The results from the Staff Survey were expected on 7 March 2024.</li> </ul> <p>CB asked if there was a plan to fill the 75 vacancies for Home First. GM advised that most of the vacancies had already been filled.</p> <p><b>Financial Performance</b></p> <p>MG highlighted the following position for financial performance:</p> <ul style="list-style-type: none"> <li>• In Month 9 the Trust had achieved a £426,000 surplus against a plan of £237,000. However, there was a £1.7m deficit which was £1.9m away from plan. To offset this non-recurrent income and vacancy slippage had been added.</li> <li>• The non-pay overspends related to premises, the cost of energy, service charges and pressure on domestic services.</li> <li>• The Productivity &amp; Efficiency programme was forecast to achieve £500,000 which would take the surplus to £600,000.</li> <li>• Better Payment Practice Code performance by volume and by value both achieved the target.</li> </ul> <p>AH provided an update following a recommendation from external auditors to develop a published Integrated Performance Report. This would be launched in phased from April 2024.</p>
<p><b>12.</b></p> <p>WCT23/24-141</p>	<p><b>Board Assurance Framework (BAF) 2023-24 strategic risks</b></p> <p>AH presented the updated position in relation to strategic risks managed through the BAF following detailed review by the committees during January and February 2024.</p> <p>There remained one high-level strategic risk (ID04). All other risks remained at a risk rating of 8 or 12.</p> <p>Risk ID03 continued to achieve the target risk rating based on the risk appetite of 'open'.</p> <p>At the Board of Directors meeting in December 2023 a recommendation was supported to consider a new risk related to retaining talent and growth of the workforce. A new risk had been developed (ID10) and was reviewed by the People &amp; Culture committee in February 2024.</p> <p>Following the Board of Directors meeting in December 2023, ID04 had been reviewed to consider a revised risk description for the new financial year.</p> <p>The Board of Directors was assured of the oversight and management of strategic risks in the BAF through the sub-committees of the Board and approved the revised risk description for ID04 (with effect from the new financial year) and approved the risk description for the new risk ID10.</p>
<p><b>13.</b></p> <p>WCT23/24-142</p>	<p><b>Revisions to Standing Financial Instructions (SFIs)</b></p> <p>MG confirmed that the revised SFIs had been presented to the FPC in December 2023 and were recommended to the Board of Directors for approval. MG summarised the changes as follows:</p> <ul style="list-style-type: none"> <li>• The 25 references to NHSI throughout the document had been changed to NHSE.</li> </ul>

	<ul style="list-style-type: none"> <li>Section 9 of the Delegated Financial Limits had been amended to support invoice approval flow following a review of Better Payment Practice Code (BPPC).</li> </ul> <p>The Board of Directors approved the amendments to the SFIs.</p>
<b>14.</b> WCT23/24-143	<p><b>Place / System governance briefing</b></p> <p>AH provided the following update on the Place governance:</p> <ul style="list-style-type: none"> <li>The Wirral Place Based Partnership Board (WPBPB) continue to meet and engage actively with partners across Place.</li> <li>The Wirral Place Manual would be presented to the WPBPB on 22 February 2024 following phase 2 of the governance review which included a review of the terms of reference of all sub-groups.</li> <li>KH, Chief Executive and BJ, (independent) Non-Executive Director were members of the MHLDC provider collaborative leadership board.</li> <li>KH as Chief Executive was a member of the MHLDC provider collaborative leadership board and BJ had recently attended the meeting as an independent Non-Executive Director.</li> </ul> <p>The Board of Directors welcomed the update and had no further comments.</p>
<b>15.</b> WCT23/24-144	<p><b>Review of Terms of Reference - Remuneration and Terms of Service Committee</b></p> <p>AH presented the Remuneration &amp; Terms of Service Committee (RemCom) Terms of Reference following review in December 2023.</p> <p>AH highlighted a discrepancy between membership and quoracy and suggested a change of quoracy from 5x Non-Executive Directors/Chairman to 3x Non-Executive Directors/Chairman equating to 60% of members.</p> <p>MG referred to the aim of the RemCom and the purpose and asked if there should be a distinction between 'determine the expenses policy of the Trust' and the agenda for change expenses policy of the Trust.</p> <p>The Board of Directors did not approve the revised Terms of Reference but requested an further revised version in April 2024.</p>
<b>16.</b> WCT23/24-145	<p><b>Communications &amp; Marketing Strategy Assurance Report Q3 2023-24</b></p> <p>AH presented the Communications and Marketing report for Q3 2023-24 highlighting activity both externally facing activity and internal campaigns.</p> <p>The following key projects were highlighted:</p> <ul style="list-style-type: none"> <li>A report was included on the volume of visits to the health and wellbeing section of Staff Zone as requested by the People &amp; Culture committee on 14 February 2024.</li> <li>During Q3, there had been a number of case studies published highlighting services across the Trust e.g., Home First, CICC and Urgent Community Response, in local, regional and national newsletters and bulletins.</li> <li>The Trust was visited by a team from NHS England in January 2024 which created an increased in engagement on LinkedIn.</li> <li>The Stakeholder Update had been well received.</li> <li>The Communications Team was reviewing the objectives and goals that were set in the enabling strategies and 5-year plan to align accordingly and to be able to track the impact and delivery of the plans.</li> </ul> <p>The Board of Directors welcomed the report and noted the detail provided.</p>
<b>17.</b> WCT23/24-146	<p><b>Care Quality Commission (CQC) Statement of Purpose</b></p> <p>PS presented the CQC Statement of Purpose and the following points were noted:</p> <ul style="list-style-type: none"> <li>The CQC Statement of Purpose was a legally required document that included a standard set of information about a provider's service.</li> </ul>

	<ul style="list-style-type: none"> <li>The annual review of the CQC Statement of Purpose had been completed and the amendments were highlighted red in the document. The changes included the Lancashire contract and Sexual Health Wirral contract.</li> </ul> <p>The Board of Directors approved the amendments to the CQC Statement of Purpose.</p>
<b>18.</b> WCT23/24-147	<b>Equality Delivery System Assurance Report</b> <p>CM presented the Equality Delivery System (EDS) System Assurance Report highlighting the following:</p> <ul style="list-style-type: none"> <li>The EDS was a system that helped NHS organisations to improve the services they provided for their local communities.</li> <li>CM requested approval from the Board of Directors for publication of the report on the Trust's website.</li> </ul> <p>The Board of Directors approved EDS Assurance report for publication on the Trust's website.</p>
<b>19.</b> WCT23/24-148	<b>Sexual Safety Charter</b> <p>CM presented the Sexual Safety Charter and highlighted the following:</p> <ul style="list-style-type: none"> <li>The report provided an overview of the Sexual Safety of NHS staff and patients national programme and charter. The principle was to ensure that every part of the NHS took a systematic zero tolerance approach to sexual misconduct and violence, prioritising the safety of both patients and staff.</li> <li>The action plan summarised key actions within the presentation along with the links to the national guidance.</li> <li>The Chief Executive and Chair were asked to sign up to the NHS Sexual Safety Charter.</li> <li>CM would also apply for membership of the Employers Initiative on Domestic Abuse (EIDA) but following a discussion with members of the Board some of the wording in relation to the commitment would need to be changed.</li> </ul> <p>The Board of Directors were assured and approved the Sexual Safety Charter.</p>
<b>20.</b> WCT23/24-149	<b>Staff Voice Forum</b> <p>The decision and action log from the meeting of the Staff Council held on 22 January 2024 were pending approval and would be shared at the next Public Board meeting in April 2024.</p>
<b>21.</b> WCT23/24-150	<b>Any other Business</b> <p>MB confirmed that GM had been appointed as a Non-Executive Director at Alder Hey Children's Hospital but advised that he would continue to serve his current term of office with the Trust until early 2025.</p>
<b>22.</b> WCT23/24-151	<b>Invitation for Public Comments</b> <p>JC praised colleagues at Arrowe Park Hospital for the care and treatment of a friend that had suffered a stroke.</p>
<b>23.</b> WCT23/24-152	<b>Items for Risk Register</b> <p>There were no new risks identified for the risk register.</p>
<b>24.</b> WCT23/24-153	<b>Staff Story</b> <p>CM introduced the Staff Story which featured Jenni Harvey, Deputy Ward Manager, Bluebell Ward, Community Intermediate Care Centre (CICC) and the patient in the Journey of Care at the beginning of the meeting.</p> <p>Jenni described Bluebell Ward as a reablement unit to support patients to get back to their baseline of mobility. The team included nursing staff, physiotherapists and occupational therapists.</p>

	Jenni described the incredible impact that Spartacus the therapy dog had made on the patient and her family members and the joy he gave to all the patients and staff on the ward.  The Board of Directors welcomed and appreciated the story shared.
<b>25.</b> WCT23/24-154	<b>Summary of actions and decisions</b>  AH provided a brief summary of actions and decisions taken during the Board of Directors meeting.
<b>Date and Time of Next Meeting:</b> The next formal Trust Board meeting will take place on <b>Wednesday 17 April 2024 at 2.00pm, St Catherine's Health Centre.</b>	

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

The Board of Directors meeting closed at 3.50pm.

## Board of Directors - Matters Arising 2023-24

All previous actions from meetings in 2023-24 have been completed and archived.

Actions from meeting held on **17 October 2023**.

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Place governance arrangements</b>	WCT23/24-097	Consider how MHLDC developments and progress, reports via the governance structure and to Board	A.Hughes K.Howell	<del>December 2023</del> February 2024	Further confirmation following presentation of the MHLDC governance documents and as the Programme Board establishes.

There were **no actions** from the public Board of Directors meeting on 13 December 2024.

Actions from meeting held on **21 February 2024**.

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Remuneration &amp; Terms of Service Committee Terms of Reference - Annual Review</b>	WCT23/24-144	Review membership and quoracy as described in the ToRs.	A.Hughes	March 2024	<b>Complete.</b>
		Review and clarify the reference to the expenses policy for the Trust.	A.Hughes / M.Greatrex	April 2024	<b>Complete.</b>



**Wirral Community  
Health and Care**  
NHS Foundation Trust

Topic Title	Minute Reference	Action Points	Lead	Due Date	Status
<b>Sexual Safety Charter</b>	WCT23/24-148	Employers' Initiative on Domestic Abuse - request caveat to the fourth of five commitments to 'providing <u>access to</u> training and support...'. 	C.Madsen	February 2024	<b>Complete.</b>

Shadow Board Programme			
<b>Meeting</b>	Board of Directors		
<b>Date</b>	17/04/2024	<b>Agenda Item</b>	6
<b>Lead Director</b>	Claus Madsen, Chief People Officer		
<b>Author(s)</b>	Claire Rostance, OD Manager		
<b>Action required</b> (please select the appropriate box)			
<b>To Approve</b> <input type="checkbox"/>		<b>To Discuss</b> <input type="checkbox"/>	<b>To Assure</b> <input checked="" type="checkbox"/>
<b>Purpose</b>			
The purpose of this paper is to provide an overview and assure Board of the Shadow Board programme.			
<b>Executive Summary</b>			
<p>As part of our People Strategy and approach to Talent Management we worked with ILN (Inspiring Leaders Network) to deliver a Shadow Board programme. This was a six-month leadership programme which equipped our senior leaders with the knowledge and skills to operate at Board level and further develop their strategic thinking.</p> <p>This report provides an overview of the programme.</p>			
<b>Risks and opportunities:</b>			
<p>The Shadow Board programme has provided a development opportunity for our senior leaders to gain insight into Executive roles, responsibilities and the challenges they face, develop their strategic thinking and work together to explore some of the key system challenges. This programme links into our approach to talent management and succession planning enabling us to nurture and develop our senior leaders for the future.</p>			
<b>Quality/inclusion considerations:</b>			
Quality & Equality Impact Assessment completed and attached No.			
<b>Financial/resource implications:</b>			

This programme was funded by NHS North West Leadership Academy.

**The Trust Vision** – To be a population health focused organisation specialising in supporting people to live independent and healthy lives. The Trust Objectives are:

- Populations – We will support our populations to thrive by optimising wellbeing and independence
- People – We will support our people to create a place they are proud and excited to work
- Place - We will deliver sustainable health and care services within our communities enabling the creation of healthy places

Please select the top three Trust Strategic Objectives and underpinning goals that this report relates to, from the drop-down boxes below.

People - Grow, develop and realise employee potential	People - Better employee experience to attract and retain talent	Place - Improve the health of our population and actively contribute to tackle health inequalities
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## The Trust Social Value Intentions

Does this report align with the Trust social value intentions? Yes.

If Yes, please select all of the social value themes that apply:

**Community engagement and support** ☐

**Purchasing and investing locally for social benefit** ☐

**Representative workforce and access to quality work** ☒

**Increasing wellbeing and health equity** ☒

**Reducing environmental impact** ☐

## Board of Directors is asked to consider the following action

This paper is to assure Board, providing an overview of how this programme supports our approach to talent management and succession planning.

**Report history** (Please include history of where the paper has been presented prior to reaching this meeting, including the title of the meeting, the date, and a summary of the outcome)

Submitted to	Date	Brief summary of outcome





# Shadow Board Programme

**Claus Madsen, Chief People Officer**  
**17 April 2024**

# Shadow Board Programme

- As part of our People Strategy and our approach to talent management and succession planning, we worked with ILN (The Inspiring Leaders Network) to deliver a Shadow Board programme.
- This was a six-month leadership development programme aimed at our Deputy Directors and Senior Leaders offering both experiential and modular learning to equip participants with the knowledge and skills of working at Board level and further develop strategic thinking.
- The programme comprised of four taught modules, four ALS and four Shadow Boards. In addition, as part of the programme, members of our ELT shared their leadership journeys with participants to explore together some of the key system challenges.

# Shadow Board Programme

- The Shadow Board operated as a real Trust Board and was supported by our Chair which provided alignment and synergy to both Boards.
- The programme ran from October – April and has been successfully completed by 12 participants .
- Reflections and learnings took place following the programme and some of these key reflections will now be shared.