



**OPEN TRUST BOARD MEETING**  
The Boardroom, WCFT Thursday 25 April 2019  
**09.30 – 12.30**  
**AGENDA**

Item	Time	Item	Owner	Purpose	Process	Preparation
1	9.30	Apologies	J Rosser	<ul style="list-style-type: none"> <li>To note apologies for absence</li> </ul>	Verbal	NA
2	9.30	Declaration of Interests Fit and Proper Annual Self-Declaration for Directors. Declaration for Governors	J Rosser	<ul style="list-style-type: none"> <li>For the Board to declare commercial and material interests relevant to the agenda</li> </ul>	Verbal	NA
3	9.30	Minutes of the meeting held on 28 March 2019	J Rosser	<ul style="list-style-type: none"> <li>To review</li> <li>Confirm accuracy</li> <li>Review Action Tracker</li> <li>Consider matters arising</li> </ul>	Minutes	Enclosed
<b>PATIENT STORY</b>						
4	9.40 30 mins	Patient Story	M McKenna	<ul style="list-style-type: none"> <li>To receive a patient story</li> </ul>	Presentation	Doc Ref TB 19/28 <i>(to follow)</i>
<b>GOVERNANCE</b>						
5	10.10 10 mins	Continuation in NED Term of Office	J Rosser	<ul style="list-style-type: none"> <li>To receive</li> </ul>	Verbal	Doc Ref TB 19/29
6	10.20 10 mins	Same Sex Accommodation: Declaration of Compliance	L Salter	<ul style="list-style-type: none"> <li>To receive</li> </ul>	Report	Doc Ref TB 19/30
7	10.30 10 mins	Terms of Reference: Research, Development and Innovation Committee	S Crofts	<ul style="list-style-type: none"> <li>To approve</li> </ul>	Report	Doc Ref TB 19/31
<b>QUALITY</b>						
8	10.40 15 mins	Cauda Equina Consensus International Meeting	N. Srikandarajah A. Nicolson	<ul style="list-style-type: none"> <li>To receive</li> </ul>	Presentation	Doc Ref TB 19/32 <i>(to follow)</i>
<b>COMFORT BREAK 11.10 – 11.25</b>						
<b>PERFORMANCE</b>						

Item	Time	Item	Owner	Purpose	Process	Preparation
9	10.55 30 mins	Integrated Performance Report: March 2018	Executives	<ul style="list-style-type: none"> <li>To review and discuss</li> <li>To agree actions regarding Trust performance</li> </ul>	Report	Doc Ref TB 19/33
<b>EXPERIENCE</b>						
10	11.25 20 mins	PICKER Inpatients Survey	L Salter	<ul style="list-style-type: none"> <li>To receive and note</li> </ul>	Report	Doc Ref TB 19/34
<b>STRATEGY</b>						
11	11.45 15 mins	Gender Pay Gap Report	M Gibney	To receive	Report	Doc Ref TB 19/35

#### Chair's Reports and Committee Minutes Board Pack (to follow, due to timing of meetings)

12	12.00 10 mins	<b>Chair's Reports:</b> a. Quality Committee (AM) 18/04/19 b. Audit Committee (AS) 16/04/19 c. Research, Dev. & Innov. Committee (SC) None d. Bus. Performance Comm (SS) 23/04/19 e. Walton Centre Charity Committee (AS) 12/04/19		<ul style="list-style-type: none"> <li>To highlight key points</li> </ul>	Reports	a.Doc Ref TB19/36 b.Doc Ref TB19/37 c.None d.Doc Ref TB19/38 e.Doc Ref TB19/39
13	12.10 10 mins	<b>Confirmed Minutes:</b> a. Quality Committee (AM) 21/03/19 b. Audit Committee (AS) 15/01/19 c. Research, Dev. & Innovation. Committee (SC) None d. Bus. Performance Comm (SS) 26/03/19 e. Walton Centre Charity Committee (AS) 18/01/19		<ul style="list-style-type: none"> <li>To receive and note for information</li> </ul>	Minutes	Enclosed

14	12.20 10 mins	Any Other Business	All	<ul style="list-style-type: none"> <li>To raise any other matters not on the agenda</li> </ul>	Verbal	None
15	12.30	Meeting Review	J Rosser	<ul style="list-style-type: none"> <li>To review the meeting</li> </ul>	NA	NA

Date and Time of Next Meeting: **Friday 24<sup>th</sup> May 2019 at 10am in the Boardroom**

**CONFIRMED**

**Minutes of the Open Trust Board Meeting held on Thursday 25<sup>th</sup> April 2019**

**Present:**

Ms J Rosser	Chair
Mr M Burns	Director of Finance and Information Technology
Ms H Citrine	Chief Executive
Mr S Crofts	Non-Executive Director
Mr M Gibney	Director of Workforce and Innovation
Ms A McCracken	Non-Executive Director
Dr A Nicolson	Medical Director
Ms L Salter	Director of Nursing and Governance
Ms S Samuels	Non-Executive Director
Mr A Sharples	Non-Executive Director

**In attendance:**

Mr J Baxter	Personal Assistant (for minutes)
Mr M McKenna	Head of Patient Experience (minute ref TB 42/19)
Ms N Mellor	Partnership Governor, The Brain Charity
Mr N Srikantharajah	Specialist Trainee and Research Fellow (minute ref TB 46/19)
Mr S Winstanley	Public Governor, North Wales

**Apologies:**

Ms J Ross	Director of Operations and Strategy
Professor N Thakkar	Non-Executive Director

**Welcome and Introductions**

Chair welcomed and introduced Ms Mellor and Mr Winstanley to the meeting.

**TB 38/19 Apologies**  
Noted.

**TB 39/19 Declaration of Interest**  
None.

**Fit and Proper Persons Annual Declaration for Directors**

It was noted that annual fit and proper person annual declaration for Directors compliance was reported to Council of Governors in March 2019.

Compliance was noted by the Board.

**TB 40/19 Minutes of the previous meeting held on 28<sup>th</sup> March 2019**  
The minutes were agreed subject to a minor amendment to item 29/19: Mr Burns clarified that the final sentence under the Finance heading should read "It was noted that agreement has been reached on the financial value of the contract with NHSE. The Trust was also close to agreeing the overall contract income with Liverpool CCG for 2019/20."

**TB 41/19 Action Log**  
See TB 54/19.

**TB** **Patient Story (Presentation: Doc Ref TB 19/28)**

**42/19**

Mr McKenna presented the story about a patient who was also a member of staff in the MRI department. The patient had produced a short video discussing her care within the MRI department and this was presented to Board. The patient stated that she felt like she had been treated as a patient and not just as a work colleague, she talked through her experience of using the MRI scanner as she suffered from claustrophobia and how staff had helped her through the scanning process. The flexible approach tailored to patient needs utilised by staff was highlighted and the patient stated that they would encourage anyone to attend the Trust for a scan if they were claustrophobic or suffered from anxiety issues. The patient noted that staff had showed compassion throughout her scan

It was recognised that patient care could be compromised if patients were unable to overcome their fear of using the MRI scanner and the Medical Director highlighted that a Claustrophobia Clinic was available at the Trust. It was noted that over 500 patients had attended the Claustrophobia Clinic and 97% of these patients had undertaken their scan.

The Director of Workforce and Innovation informed the Board that a blog had been published on the Forbes website regarding the Trust inviting patients to Trust Board to share their stories and how powerful that approach can be, the blog can be found at the following web address. <https://www.forbes.com/sites/adrianswinscoe/2019/04/16/are-your-brave-enough-to-bring-your-customers-or-patients-into-your-boardroom/#12a7eb3b54be>

The Board thanked Mr McKenna for sharing the patient story and he left the meeting.

**TB** **Continuation in NED Term of Office (Doc Ref TB 19/28)**

**43/19**

The Chair updated that Mr Sharples would be continuing in his role as Non-Executive Director until Ms Rai was able to take up her role during September 2019. This decision had been ratified at the Council of Governors meeting held on 7<sup>th</sup> March 2019.

The continuation in term of office of Mr Sharples was noted by the Board.

**TB** **Same Sex Accommodation: Declaration of Compliance (Doc Ref TB 19/30)**

**44/19**

The Director of Nursing and Governance presented the declaration of compliance for same sex accommodation; it was noted that there had been no mixed sex breaches during 2018/19.

The report was noted by the Board.

**TB** **Terms of Reference: Research, Development and Innovation Committee (Doc Ref TB 19/31)**

**45/19**

Mr Crofts presented the terms of reference for the Research, Development and Innovation Committee and stated that there had been minor changes made from the previous terms of reference. The Chair noted that there was no statement within the terms of reference that the committee has an overview of all research, development and innovation across the Trust however it was recognised that this was implicit within the terms of reference.

There was some discussion around the appointment of a Chair for sub-committees of the Board and it was agreed that the constitution would be checked for clarity around

appointments.

The Board approved the terms of reference subject to minor amendments.

**TB  
46/19**

**Cauda Equina Consensus International Meeting (Doc Ref TB 19/32)**

Mr Srikandarajah gave a presentation detailing the core outcome set approach utilised in a research project undertaken to identify if early surgical decompression in Cauda Equina syndrome improved bladder outcomes. An overview of the core outcome set concept and how this differs from normal research methods was provided and it was recognised that the evidence reflects standardised outcome measures. An international consensus meeting was held at the Trust following both patient and professionals input into which outcomes were important. The meeting was attended by a number of high profile professional delegates from across the world who discussed the outcomes and agreed a core outcome set which would be recommended for use in research internationally going forward. It was noted that there was already a large patient study underway utilising this core outcome set. In effect, the research agenda in Cauda Equina for the next decade has been set by this Trust. It is due to be the subject of a Lancet report later this year. An overview of conclusions and the next steps to be undertaken was provided.

The approach undertaken to date was commended particularly obtaining views from patients and professionals and this was an area for the Trust to develop in other specialities. The Director of Workforce and Innovation recognised that the portfolio for research needs to align with the strategic aims of the Trust and the approach utilised raised the level of research and profile of the Trust.

The Board thanked Mr Srikandarajah for the presentation and he left the meeting.

**TB  
47/19**

**Integrated Performance Report : March 2019 (Doc Ref TB 19/33)**

The Chief Executive introduced the report which is shared at the Quality and the Business Performance Committees for scrutiny and any issues were reported via Chairs Reports. It was noted that the Director of Operations and Strategy would undertake a review of the Integrated Performance Report format, including RAG rating calculations, and comments were requested to be forwarded.

It was noted that the Trust had a good year with excellent performance in mandatory training compliance and very good compliance with quality and financial metrics. Areas of focus continued to be reviewed and monitored at Business Performance Committee and Quality Committee.

The overall assessment of the metrics across each domain were:

**Green:** Safe, Effective  
**Red/ Green:** Caring, Responsive, Well Led

The following areas were highlighted:

- Overall, the Trust met RTT; however Pain and Neurosurgery did not meet the 92% standard at speciality level. It was noted a robust report had been shared at BPC and it is anticipated the RTT neurosurgery position will further improve and was anticipated to meet 92% by May

- No breaches of mixed sex accommodation were reported
- All cancer standards were achieved

Ms Samuels, in capacity as Chair of Business Performance Committee (BPC), concurred that overall, the report was positive. Difficult discussions had been held through the year to challenge where any issues lay and it was recognised that there were areas of focus such as QIP targets not being met and issues related to Welsh HRG however financial management was progressing well.

Operational targets were reported to be going well and work to focus on alternative methods to improve performance in Pain and Neurosurgery was underway with Neurosurgery on target to improve by May 2019. There was some discussion around the issues facing the Pain target and it was noted that an MDT approach was required to review the issues. Patient waiting lists and follow-up waiting lists were increasing and work was ongoing to focus on these areas with good assurance provided.

### **Finance**

The key risks were noted as:-

- 1 Welsh HRG 4+ payment
- 2 QIP

The Director of Finance and IT gave a brief update stating that the Trust had posted a surplus against the control total. Following additional funding the revised surplus for the year 2018/19 was £5.679m. Discussions were ongoing on how this surplus could be best utilised.

### **Sickness**

Sickness rates had decreased however it was recognised this figure was still not within target and work was ongoing to reach compliance targets.

### **Turnover**

Work to review turnover figures was ongoing. It was noted that the Carter review looked to standardise the methodology for recording turnover in all Trusts however this was not finalised. It was recognised that work completed by the Director of Nursing and Governance during the previous year had reduced the turnover figure. A report would be submitted to the next Trust Board meeting around nursing turnover as part of the Biannual Nurse Staffing Report.

### **Quality**

Ms McCracken, in capacity as Chair of Quality Committee gave an overview of the position:

- All CQUINs were reported to be on target
- All HCAI targets for the year had been met with the exception of MSSA which had exceeded the annual internal trajectory
- There had been 28 falls with minor harm reported during the year and 3 falls with moderate or major harm reported. A new piece of work was ongoing to review patient falls going forward.
- There was a continued reliance on waiting list initiatives. It was felt that this would be an increasing problem as more Consultants retire and was identified as one of the biggest risks to service delivery going forward. Work was underway to understand how this felt from a patient experience point of view.

The Board discussed and noted the integrated performance report.

**TB PICKER Inpatients Survey (Doc Ref TB 19/34)**

**48/19**

It was noted that there had been errors by both the Trust and Picker in relation to informatics information required for the survey and an overview of these was provided. This had resulted in a lower response rate than the minimum number of responses required for publication by the CQC. A number of discussions had been held with CQC but they had reported concerns around statistical bias of the mix of patients. As a result, data relating to the Trust's patient's responses will not be included in the full CQC report. The Trust can compare results against other Picker organisations following publication of the full report by Picker.

The inpatient survey was undertaken by Picker and initial feedback had been very positive with a formal report to be submitted to Trust Board following publication of results. There was significant improvement recorded on 16 questions compared to the previous year results and significant improvement in 37 areas from the Picker average with no areas of significant decrease.

The Board noted the report and the updated action plan from the previous year.

**TB Gender Pay Gap Report (Doc Ref TB 19/35)**

**49/19**

The Director of Workforce and Innovation presented the report into the gender pay gap across the Trust and noted the scale of the challenge across the NHS regarding the gender pay gap. There was a gap identified in average pay rates between male and female staff and also a big gap in bonus payments. It was noted that the data in the report is from April 2017 to March 2018 and improvements had been made since publication of this data however the issue still remained. The conclusions and next steps detailed in the report were reviewed and it was noted that while the majority of the Trust workforce is female, a high proportion of medical and senior management posts were filled by males. It was recognised that it would take a number of years to resolve the issue and discussions around the potential to open reciprocal mentoring up to encompass gender as well as race were underway.

However, Board members welcomed the report recognising that the transparency of the report enables good debate to enable policies and actions to be taken to reduce the pay gap, although recognising this will take a number of years.

The Board noted the report and agreed that the data would be run for the year 2018-19 and published; following this an action plan would be formulated to address the pay gap.

**TB Board Committee Chair's Reports**

**50/19**

The Chair of each board committee presented their report and noted the key highlights:

**a. Quality Committee 21/03/19**

Ms McCracken drew attention to the following key points:

- Bank and agency spend on CRU was reported to be £880k YTD due to an increase in the number of patients who require specialising and the possibility of reviewing the specialising pool was being explored. Turnover and exit interviews were highlighted as an area of focus and actions being taken shared.
- There had been 43 incidents of violence and aggression towards staff this year. The Personal Safety Officer and Risk Management Lead would be invited to a future committee meeting to give an update on the impact of violence and aggression against staff.

- The Darzi themes presentation was well received and it was highlighted that the critical care garden room was now open. The winning entry for the Roy Ferguson award was a piece of equipment which could alert families when their family member in ITU was deteriorating. It was stated that another Trust has already been in contact requesting information about the system.
- The medical devices management update report highlighted the lack of service the Trust had previously received under the previous service level agreement however it was noted that this had much improved since the new contract was agreed with the Royal Liverpool & Broadgreen University Hospital. Regular quarterly meetings were held with the EBME providers and they also regularly attended daily safety huddles.

**b. Audit Committee 16/04/19**

Mr Sharples drew attention to the following key points:

- Five High Assurance reports had been reported by MIAA and the external auditor commented that he had not seen such a strong report at any Trust.
- Benchmarking of the annual report highlighted lower results than previously received regarding an open and honest culture and clarity had been sought regarding this. It was noted that this was potentially due to freedom to speak up issues not being reported. The potential for utilising a proforma approach to completion of the annual report was being considered. Auditors offered to attend a future board development session to share their feedback with the Board and/or Governors on the Trust's assessment of the annual report.

**c. Research, Dev. & Innovation (RD&I) Committee**

None this month

**d. Business Performance Committee 23/04/19**

Ms Samuels drew attention to the following key points:

- The terms of reference for the committee did not state that the Communications Quarterly Report was to be submitted to the committee. Clarification would be sought if this report should be submitted to the committee or to Trust Board.
- The Trust was as well placed as it could be in relation to the potential for a cyber-attack and this would be added to the Board Assurance Framework.
- The three key schemes noted in the initial report from the Service Improvement Plan were discussed and profiling of expected savings was underway. A3 improvement plans would be submitted to future committee meetings to monitor progress.
- Staff require a satisfactory appraisal to be completed to enable progression through pay increments and an updated pay progression policy would be submitted to a future committee meeting.

**e. Walton Centre Charity Committee 12/04/19**

Mr Sharples drew attention to the following key points:

- An application for funding to purchase 50 Personal Kinetic Graph (PKG) movement recording reports was made. Following discussion it was agreed that the application would be supported but the committee requested that the 4552 Parkinson's Disease Fund be explored and if there were longer term commitments it was agreed that funding could come from Sid Watkins Innovation Fund.
- The Sutcliffe Kerr lecture had been relaunched and feedback from the lecture was



positive. The committee agreed that it would continue to support the event.

- Discussions around processes designed to protect the Trust in relation to potential donations were ongoing. The Ethical Donations Policy would be revised and submitted to a future Trust Board meeting for approval.

**TB**  
**51/19**

**Confirmed Committee Minutes:**

The Board received and noted the following confirmed minutes:

- a. Quality Committee – 21<sup>st</sup> March 2019
- b. Audit Committee – 15<sup>th</sup> January 2019
- d. Business Performance Committee – 26<sup>th</sup> March 2019
- e. Walton Centre Charity Committee – 18<sup>th</sup> January 2019

**TB**  
**52/19**

**Any Other Business**

The Chief Executive reported that initial feedback from the recent unannounced CQC visit had been positive with some areas noted for review which were shared with the Board.

Initial feedback from the CQC Well Led inspection was also positive with one area of focus again shared with the Trust Board.

The initial CQC report would be submitted to the Trust towards the end of May for factual accuracy checking with publication of the full report anticipated at the end of June. The Chair wished to record her thanks to the Executive team, Non-Executive Directors and all staff across the Trust for their work to prepare for the visit.

**TB**  
**53/19**

**Meeting Review**

The Chair reviewed the meeting and confirmed actions as detailed in the action tracker (minute ref. TB 54/19).

The meeting closed.

**Date of the next meeting: Friday 24<sup>th</sup> May 2019**

The Walton Centre NHS Foundation Trust

TB  
54/19 Action Log:

**Closed Actions**

<b>Actions : Trust Board meeting: April 2019</b>				
<b>Item</b>	<b>Action</b>	<b>Update</b>	<b>Lead</b>	<b>Timescale</b>
<b>TB35/19: Any other business</b>	Flu vaccine uptake to be added to the Trust Board work plan	Trust compliance figures were confirmed at the April 2019 Trust Board meeting	L Salter	April 2019

**Open Actions**

<b>Actions : Trust Board meeting: March 2019</b>				
<b>Item</b>	<b>Action</b>	<b>Update</b>	<b>Lead</b>	<b>Timescale</b>
<b>TB27/19: Review of patient stories</b>	Consider suggestions from Trust Board for future years patient stories	All were asked to provide further input to LS	L Salter	May 2019
<b>TB28/19: Learning from Staff Feedback; National Staff Survey Results 2018</b>	Updated staff engagement plan will be presented to a future Board meeting		M Gibney	June 2019
<b>TB29/19: Integrated Performance Report: February 2019</b>	Nursing Turnover; data to be sourced from NHSI to enable the Trust to compare with other organisations.	Nursing turnover data to be included in the Integrated Performance Report from May 2019	L Salter	May 2019

<b>Actions : Trust Board meeting: April 2019</b>				
<b>Item</b>	<b>Action</b>	<b>Update</b>	<b>Lead</b>	<b>Timescale</b>
<b>TB45/19: Terms of Reference: Research, Development and Innovation Committee</b>	Clarity around appointments of Chairs for sub-committees to be sought from the Trust constitution.		J Rosser	May 2019

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<p><b>TB47/19</b></p>	<p>Any comments on format/ content of the IPR to be sent to Director of Operations &amp; Strategy</p> <p>Bi-annual nurse staffing report to include information on the work to be undertaken to reduce nursing turnover</p>		<p>All</p> <p>L Salter</p>	<p>ASAP</p> <p>May 2019</p>
<p><b>TB49/19:</b> <b>Gender Pay Gap</b></p>	<p>Data around the gender pay gap to be run for 2018/19 and published with an action plan formulated to address issues,</p>		<p>M Gibney</p>	<p>June 2019</p>