

## Minutes of the Board of Directors held in Public

Monday 6 April 2020

|                      |  |
|----------------------|--|
| <b>Time</b>          | 9:30 - 11:45   |
| <b>Location</b>      | Virtually via Microsoft Teams  |
| <b>Chair</b>         | John Church, Deputy Chair  |
| <b>Members</b>       | <p>Heather Barnett, Director of Workforce and OD</p> <p>Trevor Brocklebank, Non-Executive Director</p> <p>Lorraine Butcher, Non-Executive Director</p> <p>Russ Favager, Deputy Chief Executive &amp; Director of Finance</p> <p>Murray Luckas, Medical Director</p> <p>Lesley Massey, Non-Executive Director</p> <p>Chris Oliver, Chief Operating Officer</p> <p>Les Philpott, Non-Executive Director</p> <p>James Sumner, Chief Executive</p> <p>Julie Tunney, Director of Nursing and Quality</p> <p>Andy Vernon, Non-Executive Director</p> |
| <b>In Attendance</b> | <p>Denise Frodsham, Director of Strategic Partnerships</p> <p>Amy Freeman, Chief Information Officer</p> <p>Caroline Keating, Company Secretary</p> <p>Katharine Dowson, Head of Corporate Governance</p> <p>Chris Ralphs, Board Committee Secretary</p>   |
| <b>Apologies</b>     | <p>Dennis Dunn, Chairman</p> <p>Katherine Birch, Lead Governor</p> <p>Alexa Traynor, Associate Director of Communications</p>  |

### **1 Welcome and Introductions**

9:30 Deputy Chair

- 1.1 Mr Church noted the apologies given and introduced Ms Caroline Keating, Company Secretary to her first Board of Directors meeting.
- 1.2 Mr Church welcomed everyone to the first virtual Board meeting via Microsoft Teams and outlined meeting etiquette in order that the meeting runs as smoothly as possible. All video and audio should be turned off unless presenting or asking a question, the chat function should be used to ask a question or to be called into the conversation. Mr Church added that people should avoid speaking over each other. It will be assumed that all papers have been read beforehand and the presenter will put forward some headline comments and then move to questions and discussions.

### **2 Board Member's Interests**

9:32 Deputy Chair

- 2.1 There were no declarations of changes in interests of Board Members.
- 2.2 There were no declarations of interest in any items on the agenda.

### **3 Draft Minutes of the Last Meeting**

9:34

Deputy Chair.

3.1 The minutes of the meeting held on 2 March 2020 were agreed as a true record of the meeting subject to the following amendments:

3.2 Mr Church advised of a few minor typing errors to be corrected which were noted.

3.3 Mr Favager noted that his name should be removed from the attendance.

**Resolved:** Subject to the changes above the minutes were agreed as a true and accurate record of the meeting of 2 March 2020.

### **4 Matters Arising and Action Log**

9:37

Deputy Chair

4.1 Action No 45 – the Quality Governance Committee (QGC) to review the patient experience section of the Quality, Safety and Experience Board Report – Mrs Tunney advised that some progress had been made and QGC had decided on what would be included in the new report. Mrs Tunney anticipated this would be available by the next Board of Directors, but there may be a delay due to Covid-19 operational pressures.

4.2 Actions 61 and 62 had both been completed and closed.

**Resolved:** The Deputy Chair noted the update to the action log.

### **5 Annual Work Programme**

9:39

Deputy Chair.

5.1 Mr Vernon asked what adjustments to the workplan would be required to ensure the Board discharged its responsibilities around Covid-19. Mr Sumner agreed that there were several items that would need to be worked through and reconfigured based on what is known not to be happening this year. Mr Sumner added that Ms Keating and the Governance team will be working through what was required.

5.2 Mrs Dowson drew the Board's attention to the two items on the workplan that were for April: Annual Budget and Trust Strategy. Mr Favager noted he would be presenting the Annual Budget later in the agenda, although the final budget was not here for approval but noting at this time. Mr Sumner added that conversations are taking place to decide realistic timings for launching the Trust Strategy.

**Resolved:** The Board Work Programme for 2020/21 to be reviewed and updated.

**6 Chairman's Announcements**

9:42 Deputy Chair

Mr Church read out a brief statement from the Chairman who thanked Mr Church for taking the Chair of the Board meeting today at short notice.

**6.1 CQC Report**

Mr Church advised that this item would be taken under the Chief Executive Report.

**6.2 Remuneration Committee – 2 March 2020**

6.2.1 Mr Church advised that two key items were covered at the meeting. Annual Executive Director remuneration following guidance from NHSI/E was agreed. Mr Church noted that the second item was approval to recruit to the post of Chief Operating Officer. Mr Church advised that recruitment is now underway, but the original interview date has had to be postponed.,

6.2.2 Mr Church noted that the Remuneration Committee had also agreed their Terms of Reference.

**Resolved:** The Board noted the update from the Remuneration Committee

**7 Governor's Items**

9:47 Deputy Chair

**7.1 Temporary Suspension of Governor and Membership Activity**

7.1.1 Mr Church advised that he had initiated contact with Dr Birch to discuss the suspension of Governor and Membership activity and the importance of keeping the Governors informed.

7.1.2 Mrs Dowson added that she was in regular contact with the Governors and a further discussion was required with Mr Church about Governor activity going forward.

7.1.3 **ACTION: Mr Church, Ms Keating and Mrs Dowson to ensure Governors are communicated with. Ms Keating to provide an update at the May meeting – (Ms Keating).**

**7.2 Governor Election Results & Induction**

7.2.1 Mrs Dowson provided an update for the election completed on 9 March 2020. All the new Governors were now in place and the paper included a short biography about the three new Governors. Induction of the new Governors was unable to take place and therefore the new Governors were being provided with information virtually.

7.2.2 Mrs Dowson noted that two Governors, Mr Mark Perry and Mr Ben Selby had been disappointed not to be re-elected. There had been no nominations for one staff group. The Chairman had asked that a new election for this staff group was run immediately but this had now been postponed due to Covid-19.

7.2.3 Mr Vernon welcomed the new Governors to the team. Mr Church noted his appreciation of the input from the two Governors not re-elected.

- 7.2.4 Ms Massey noted that the Chair's appraisal had been put on hold during the current period and would take place once the system allowed.

**Resolved:** The Board noted the Chairman's updates.

**8. Covid-19**

- 9:52 Mr Sumner noted that this item would be discussed during Item 9 – Chief Executive's Report

**9 Chief Executive's Report**

- 10:00 Mr Sumner presented the report and noted he had briefed the Non-Executive Directors accordingly

- 9.1 Covid-19 Response – Several working groups are focusing on key issues and meeting daily reporting into the Operations Group. A separate team of staff has been tasked to focus on business continuity.

- 9.2 Financial Planning – A paper from Mr Favager is included on the agenda at Item 13.1.

- 9.3 Quality & Safety – It was noted that the Trust has now gone a full year without any patients suffering an MRSA bacteraemia and the work carried out by the Quality teams was applauded.

- 9.4 CQC Report – Mr Sumner advised that the report was currently embargoed, and agreement is being reached around the publication of the outcome on 14 April 2020.

- 9.5 Chief Operating Officer recruitment – the interviews had had to be postponed due to the Covid-19 situation but were rearranged for 22 April 2020. The interviews will be taking place in person in line with guidance for social distancing. Mr Brocklebank, Non-Executive Director will be on the panel as Chair of Performance & Finance Committee. Further communications will be circulated once the time has been agreed.

- 9.6 Variation to Standing Orders (SO) and Standing Financial Instructions (SFI) – Ms Keating presented a paper that outlined arrangements that had been reviewed to ensure they allowed for effective and timely decision-making. The Trust's existing SOs include Emergency Powers and SFIs included the Scheme of Reservation & Delegation (SORD) that were robust, but it was considered some amendment was required to ensure decisions could be made safely, at pace and with a clear audit trail.

- 9.7 Ms Keating advised that the proposed amendments included a change in quorum, and reinforced the national directive of Board meetings to be held virtually and therefore excluded the public. These changes would be reviewed by 6 July 2020. The Terms of Reference would therefore be temporarily amended to reflect these agreed changes.

- 9.8 **Resolved:** The Board approved the proposed temporary amendments to the Standing Orders and Standing Financial Orders of the Trust.

- 9.9 Mr Vernon raised a concern in relation to the suspension of public Board meetings and the Trust's accountability as a Board. Mrs Keating replied that the agendas, papers and minutes would continue to be posted onto the website which was in line with national guidance.

9.10 Mr Sumner noted Annex II – NHSE/I – Reducing Burden and Releasing Capacity.

9.11 Mr Sumner noted that Annex III Pre-Mortem paper would be discussed in Part 2.

**Resolved:** The Board noted the Chief Executive's Report

## 10 **Quality, Safety and Experience Report**

10:12 Director of Nursing & Quality/ Medical Director

10.1 Mrs Tunney presented the key highlights of the report:

- C Difficile cases have risen by two so that the full year limit has been reached, and there is likely to be one unavoidable case reported in March. The Trust continues to aim to reduce the number of cases, but this is a significant improvement on levels compared to 12 months ago
- Safe Staffing levels fell below the 85% of Registered Nurses shifts filled in six areas in February but mitigation was put into place to ensure that no areas were unsafe
- Closed complaints have been reviewed for the month and no new themes were identified. Lessons learnt have been shared and actions put in to place where identified

10.2 Mrs Tunney noted that Friends and Family reporting rates in CCICP require some focus to improve the levels but that, in light of the Covid-19 situation, all Friends and Family reporting has been paused.

10.3 Mr Vernon asked what additional reporting is needed to monitor the Covid-19 situation and what impact will this have on the measures. It was noted that national guidance continues to arrive and be adopted. Mr Vernon added that the report identified the settlement of a £10m claim which was significant and should be noted. Mrs Tunney replied that this was a historical settlement rather than a new claim.

10.4 Mr Luckas advised that Root Cause Analysis (RCA) guidance has been received which increases the time available to conduct these during Covid-19. Mr Sumner added that the Trust must continue to focus on non-Covid-19 patients as well and ensure that all the normal measures continue to be monitored. Mr Oliver advised that the Trust was reporting on a number of measures in regard to Covid-19 including how many patients are in the Trust and how many have recovered. Mrs Tunney added that the ward accreditation measures have been reduced and a shortened version will be used over the next few months.

10.5 Mr Sumner reported that the Executives were still planning to introduce a new version of the Quality, Safety and Experience report to Board next month.

**Resolved:** The assurance provided in the Quality, Safety and Experience report was noted.

**11 CARING**

**11.1 Draft Quality Governance Committee (QGC) draft notes**

10:17

Committee Chair.

11.1.1 Ms Massey presented the action notes of the last meeting held on 9 March 2020 noting the following escalations:

- 11.1.2
- Refresh of the Terms of Reference reflecting the changes on subcommittees overall
  - Review of the Annual Workplan and Annual Report
  - Received an update on the review of follow up Colorectal cancer patients
  - Received the new structure of Quality Governance oversight and Board assurances in relation to outputs of patient safety and patient summit learning coming through which is expected to continue during this period

**Resolved:** The Board noted the items escalated by QGC

**11.2 Serious Untoward Incidents (SUI) and RIDDOR Events**

10:19

Medical Director

11.2.1 Mr Luckas advised that there were four SUI to report for February:

- Two relate to a delay in diagnosis of patients suffering a stroke
- One was due to a delay in treatment regarding a pressure ulcer
- The last one was a delay in appropriate action for a patient with renal problems which resulted in the removal of a kidney.

11.2.2 Mr Luckas advised that there were two RIDDOR reportable events which were both injuries to staff that resulted in an absence of more than five days.

**Resolved:** The Board noted the report of SUI.

**12 RESPONSIVE**

**12.1 Performance Report - for discussion**

10:22

Chief Operating Officer/ Deputy Chief Executive & Director of Finance

**12.1.1 Performance**

Mr Oliver presented the performance report which used data from February 2020. Mr Oliver advised that that report did not reflect the current challenges of Covid-19.

12.1.2 Mr Oliver highlighted the cancer position and what is in place. The Trust is currently running one theatre list throughout the week and has secured additional cancer capacity with the Regency and The Christie; therefore, cancer delivery will continue as planned.

12.1.3 Mr Oliver explained that the A&E performance improved in February from 69% to 79% and further increased in March to 86%. April to-date has an A&E performance of 95%. The change in ED presentations from a previous average of between 250-300 per day has decreased to an average of 140 per day.

**12.1.4 Finance**

Mr Favager presented the finance section of the report highlighting the improvement in the position that reflects that the Trust was on trajectory for its year end Control Total at the end of February 2020.

12.1.5 Mr Favager reported changes in the financial regime with a significant increase in supplies and equipment ordering. With the suspension of elective activity, there will be no income from out of area activity and car parking charges have ceased. A national system is in place for a reimbursement process which will cover any costs or expenditure associated with Covid-19.

12.1.6 Mr Favager advised that a series of national returns are due for finance. The national objective is for organisations to not be disadvantaged in achieving their Control Total through the current situation hence a reimbursement system for any costs associated with Covid-19. Mr Favager summarised that the Trust was on target to achieve the Control Total.

12.1.7 Mr Vernon thanked Mr Favager, his team and the Executives for a great performance.

**Resolved:** The Board noted the Performance Report.

**12.2 Draft Performance and Finance (PAF) Committee Notes**

10:27 Committee Chair.

12.2.1 Mr Brocklebank presented the notes of the last PAF meeting on 26 March 2020 noting items for verbal escalation

- 12.2.2
- Received two business cases Items 13.3 and 13.4 below
  - Received an update to the financial regime
  - Received the Pre-Mortem paper which will be discussed in more detail in Part 2
  - Discussed the proposed changes to the Standing Orders and Standing Financial Instructions as ratified by the Board under the Chief Executive's Report - Item 9.7 above.

**Resolved:** The Board noted the items escalated to the Board for information.

**12.3 Draft Audit Committee Notes**

10:29 Committee Chair

12.3.1 Mr Philpott presented the notes of the Audit Committee meeting held on 9 March 2020 noting the items for verbal escalation:

- Received a report from Internal Audit which gave an opinion of *Substantial Assurance* for the Financial Systems, Key Controls and Financial Reporting audit
- Approved the Internal Audit Plan for 2020/21 which will be kept under close review and appropriate changes made as current changes unfold.

Mr Philpott advised that the committee has reviewed the Terms of Reference for the committee which require Board approval and are due for discussion at the Board Away Day.

**Resolved:** The Board noted the items escalated to the Board for information.



**13 WELL LED**

**13.1 Changes to NHS Finance Regime to support the response to Covid-19**

10:32 Deputy Chief Executive & Director of Finance.

13.1.1 Mr Favager advised that the current financial regime would be suspended between 1 April and 31 July 2020 and replaced with block funding and reimbursement arrangements which should see no NHS organisation in deficit across this period. Mr Favager noted that all appropriate costs associated with Covid-19 would be reimbursed for the first four months. It is unclear currently what will happen after the end of July 2020.

13.1.2 Mr Favager advised that all operational planning processes would be suspended, this includes planning around RTT and normal performance targets. The Pre-Mortem exercise would focus on internal future planning for when we return to business as usual. The Audited Accounts deadline has been moved back from 29 May to 25 June 2020.

13.1.3 Mr Favager noted that whilst associated costs will be reimbursed, no new revenue investment should be entered into unless directly related to Covid-19, with one potential exception being business cases currently in the system, eg the Trusts EPR. New business cases will be accepted nationally but could take longer to process.

13.1.4 Mr Vernon stated that he understood that certain business cases may need to be put on hold where they do not meet the threshold for investment at this stage and queried the process of how cases would be judged to decide what will go forward. Mr Favager replied that the Executive Directors would re-look at the intended investments and what is believed to be urgent from a materiality perspective and make any decisions as a team, before seeking NHSI approval as appropriate.

**Resolved:** The Board noted the Changes to NHS Finance Regime paper.

**13.2 Draft Financial Plan 2020/21**

10:42 Deputy Chief Executive & Director of Finance

13.2.1 Mr Favager explained that the Plan reflected the work carried out pre-Covid-19 and represented the budgets that would have been proposed to the Board, although noting that they did not deliver against the control total issued by the regulators. He advised that this draft financial plan however would enable expenditure budgets to be set for the divisions in order to monitor expenditure against, if the Board were in agreement. Mr Favager continued that, if in six months' time organisations were required to produce a plan, this would be used as a starting point.

**Resolved:** The Board noted the Draft Financial Plan for 2020/21

**13.3 eRostering Business Case**

10:47 Chair of Performance & Finance Committee.

13.3.1 Mr Brocklebank advised that the e Rostering Business Case had been recommended for approval at PAF and that the Committee had considered an eRostering system to be essential in a modern hospital and had noted the benefits received from the limited



trial to date which were extremely positive and provided significant savings in efficiencies.

- 13.3.2 Mr Vernon agreed and strongly supported the recommendation, noting that this system has the potential to make a material impact even in current circumstances.

**Resolved:** The Board approved the e Rostering Business Case.

**13.4 eExpenses Business Case**

10:57 Chair of Performance & Finance Committee.

- 13.4.1 Mr Brocklebank advised that the eExpenses Business Case had been recommended to the Board for approval by PAF and noted the savings realised in relation to both benefits and efficiencies. PAF considered that the additional benefit of the integration of the CCICP system justified the extra cost of the preferred option.

- 13.4.2 In response to some concerns raised by Mr Vernon, Mrs Freeman explained that the case is not ESR versus another supplier. Both solutions feed into ESR and have the necessary endorsement from the national team. The preferred solution is planned to be used widely across the Cheshire & Merseyside area and, in terms of staff learning, either solution would require change as currently all expenses are manually submitted; any electronic system will require a level of engagement and training.

- 13.4.3 Mrs Freeman continued that the preferred option includes the incorporation of the CCICP system, Malinko which automatically processes and records every mile and without this the staff would have to write and calculate manually.

- 13.4.4 Mr Vernon thanked Mrs Freeman for her summary and commented that this explanation had not been clear from the business case. Mr Sumner endorsed Mrs Freeman's summary and added that the preferred solution was extremely user friendly with the added benefit of the incorporation of Malinko.

- 13.4.5 As a point of clarity Mr Church noted that the Board was not asking for the business case to be re-written and his view was that, with Mrs Freeman's clarification, the Board approves the business case, and this was accepted by Board members. All future business cases to consider the points made in relation to a clear Executive summary.

**Resolved:** The Board approved the eExpenses Business Case.

**14 EFFECTIVE**

**14.1 Workforce Report**

11:07 Director of Workforce and OD

- 14.1.1 Mrs Barnett reported that the report covers pre-Covid-19 impact on some of the workforce metrics.

- 14.1.2 Mr Church asked if there had been any significant deterioration of the figures in March. Mrs Barnett replied that sickness absence rate for the whole Trust in March was 5.5%. If sickness, self-isolating, carers leave etc are included the rate is 12%. Mrs Barnett added that during a national call this week it appears that 12% was average across the north west.

14.1.3 Mr Church thanked Mrs Barnett for the useful information.

**Resolved:** The Board noted the Workforce Report.

**14.2 Transformation and People Committee Notes**

11:12

14.2.1 Ms Butcher noted five items for verbal escalation from the meeting of TAP on 5 March 2020:

- Received the eRostering Business Case and recommended it for approval to the Board – Item 13.3.
- Received an end of year report on the Workforce Information Project with a focus on the importance of the next phase
- Received a presentation on CCICP projects for the last quarter
- Received a presentation in relation to the Digital Outpatients system

14.2.2 Ms Butcher explained that towards the end of the meeting it became inquorate due to the Executive Directors being required to attend another meeting, as a result of the Covid-19 situation.

**Resolved:** The Board noted the report on the work of the committee.

**14.3 Consultant Appointments**

11:14

Medical Director

Mr Luckas advised that there had been no Consultant Appointments to report.

**15 Any Other Business**

11:17

There was no other business to discuss.

## Minutes of the Board Meeting held in Private

|                      |   |
|----------------------|---|
| <b>Date</b>          | Monday 6 April 2020   |
| <b>Time</b>          | 9:30 - 11:35  |
| <b>Location</b>      | Virtual via Microsoft Teams   |
| <b>Chair</b>         | John Church, Deputy Chair   |
| <b>Members</b>       | Heather Barnett, Director of Workforce and OD<br>Trevor Brocklebank, Non-Executive Director<br>Lorraine Butcher, Non-Executive Director<br>Russ Favager, Deputy Chief Executive & Director of Finance<br>Murray Luckas, Medical Director<br>Lesley Massey, Non-Executive Director<br>Chris Oliver, Chief Operating Officer<br>Les Philpott, Non-Executive Director<br>James Sumner, Chief Executive<br>Julie Tunney, Director of Nursing and Quality<br>Andy Vernon, Non-Executive Director |
| <b>In attendance</b> | Denise Frodsham, Director of Strategic Partnerships<br>Amy Freeman, Chief Information Officer<br>Caroline Keating, Company Secretary<br>Katharine Dowson, Head of Corporate Governance<br>Chris Ralphs, Board Committee Secretary   |
| <b>Apologies</b>     | Dennis Dunn, Chairman<br>Katherine Birch, Lead Governor   |
| <b>16</b><br>11:37   | <b>Welcome and Apologies</b><br>Deputy Chair<br><br>Mr Church welcomed Board members to Part II of the meeting and noted the apologies given.   |
| <b>16.2</b><br>11:37 | <b>Board Member's Interests</b><br>Deputy Chair.<br><br>There were no declarations of interests in the agenda.  |
| <b>17</b><br>11:40   | <b>Draft Minutes of the Last Meeting</b><br>Deputy Chair.<br><br><b>Resolved:</b> The minutes were agreed as a true and accurate record of the meeting held in private on 2 March 2020.   |
| <b>18</b><br>11:43   | <b>Matters Arising and Action Log</b><br>Chairman   |

18.1 Mr Oliver noted that Action No 48 – Review of Cheshire Medical Imaging LLP was still in progress and he would provide a further update at the next meeting.

**ACTION: To provide an update on Action No 48 to the next meeting – (Mr Oliver)**

**19**

**EFFECTIVE**

**19.1**

**Medical Staffing Update**

11:45

Medical Director.

19.1.1

Mr Luckas advised that there have been no changes and noted that national guidance has indicated that disciplinary investigations should be paused during the current climate.

**Resolved:** The Board noted the update provided.

**WELL LED**

**20**

**Chief Executive Update in Private**

**20.1**

**Covid-19 Update**

11:55

**Paragraph removed under Section 36 of the Freedom of Information Act.**

20.1.1

20.1.2

Mr Oliver added that the Trust is submitting, as required, eight SITREPs per day, together with a teleconference seven days a week in Critical Care at regional level. Bronze Tactical meetings take place 4 times a day, 7 days a week. There are a range of workstreams reporting into the Silver Tactical Group chaired by Mr Oliver or Ms McGuigan which have recently been increased to twice a day, 7 days a week. Gold Command are at Executive level and monitor any escalations from Silver Command.

20.1.3

Mr Oliver continued that the operational acute divisional structure has been split into four to support Covid-19 from a nursing perspective: Emergency Department and Acute Medicine; Covid positive and surveillance; Surgery, including Critical Care; and other Medical Wards. These teams are being led by the appropriate Head of Nursing and are helping to spread the load and workforce required across all areas in the Trust.

20.1.4

Mr Church was impressed by the transformation that had been made at such short notice and he added that he thought the daily briefing was very informative.

20.1.5

Mr Sumner advised that the key risks remain similar to the Non-Executive briefing last week: Personal Protective Equipment (PPE), Ventilators and Staff Testing.

PPE

20.1.6

Mr Sumner explained that the biggest issue is, that whilst the Trust now has the equipment, the position is ever changing with people asking for PPE that the guidance indicates is not required; therefore, supply and demand does not correlate. Mr Sumner added that there has been some

pressure from Unions for certain groups of staff to be issued with PPE or they will be withdrawing from their duties. The pressure is now requiring the Trust to consider and make concessions alongside the national guidance to ensure the best is being done for all staff, but to balance this with complying with the national guidance and the supply. Mr Sumner noted that Floor Walkers were now in place getting the message out, but it was acknowledged that it was hard to get staff to stick to guidance when it is constantly changing.

- 20.1.7      Ventilators  
Mr Sumner advised that the Trust has enough capacity now although that may be challenged at the weekend. The evening briefing from the Secretary of State indicated that it was hoped that the curve was starting to be flattened by the numbers in lockdown, reducing the impact on Critical Care. As it stands today, MCHFT is managing demand.
- 20.1.8      Staff Testing  
Mr Sumner advised that staff testing is being increased nationally, although it was felt that it was a little too late as there was nowhere near the numbers that are required. There was some slight wariness in the system that one negative test is not sufficient and may need to be done two or three times to be sure.
- 20.1.9      Mr Oliver advised that as part of SITREP reports, numbers of staff who are inpatient on a ward, on Critical Care or on a ventilator need to be reported nationally twice a day. This will be picked up as part of normal reporting. Mr Oliver stated that there had not been any staff to report to date.
- 20.1.10     Mr Sumner noted the concern around Cancer care and advised that Mr Oliver and the team are working on additional capacity at the Regency and The Christie. He expressed concern that, nationally, treatment programmes for cancer have been limited, therefore the private sector capacity will be less than required. Mr Sumner added that the Trust's plans are good but will require flexibility. Mrs Massey was reassured that the Trust was doing all it could to ensure cancer patients get the treatment they require.
- 20.1.11     Mr Sumner expressed his gratitude to the Estates team and how they have transformed the organisation in just a few weeks. He added that London trusts were trying to transform hospitals that are full of patients, and he was pleased MCHFT were ahead of the curve..
- 20.1.12     Mr Vernon asked what the Trust had put in place for the health & wellbeing of the staff to support morale and mental health. Mrs Barnett advised that there is a broad programme of Health & Wellbeing programmes in place, and Mental Health has its employee advice programme which covers all aspects. Additional support has been sourced for senior leaders and clinicians called the Listening Ear and that commences today. Mrs Barnett continued that there are Mental Health First Aiders available, relaxation rooms, downtime rooms which allow staff to escape from what is happening across the clinical areas.

- 20.1.13 Mrs Barnett explained that consideration is being given to setting up remote Schwartz meetings for staff when times are so challenging. Mrs Barnett stated that national guidance on Psychological Support has been taken on board – this advises not to put in too high impact measures too soon. Other areas of support have come from donations received ranging from food and toiletries to furniture to put into the relaxation rooms. Mrs Barnett noted that a fruit and veg stall had recently been set up in line with social distancing and a local butcher will be on site from today to enable staff to purchase fresh goods.
- 20.1.14 Mrs Barnett noted that the Trust now has access to accommodation locally, with a national helpline that enables staff to book hotel accommodation. There have been numerous offers from local hotels for staff who may want to stay away from home during this period.
- 20.1.15 Mrs Barnett advised that staff morale was at the stage of team spirit and coming together; however, care needed to be taken to ensure the Critical Care team who are seeing the impact of Covid-19 first, are getting the support they need specific to their needs.
- 20.1.16 Mr Vernon and Ms Butcher thanked Mrs Barnett and welcomed the good sensitive support that is in place.
- 20.1.17 Mr Sumner advised there have not been any significant issues with discharges with enough beds in the system to support. He was mindful this will not be the case in the coming days. Mr Sumner drew the Board's attention to a plan drawn up by the Cheshire & Merseyside Regional team to create a step down facility from hospital to community and they have chosen the Crewe MMU Campus that has the potential to take 700 patients. The Regional team are looking for an organisation to host it and have suggested MCHFT. Mr Sumner explained he would be putting questions back to the team for further clarity on what they mean by a step down from hospital; if the patients still need some form of care, the MMU facility would not be suitable. Mrs Frodsham is involved in the discussions that will be taking place today and tomorrow.

**Resolved:** The Board noted the update provided.

**20.2** **Former South Cheshire Private Hospital (SCPH) update**  
12:40 Chief Executive

- 20.2.1 Mrs Tunney advised that the risk assessment had been completed by the Fire Safety Management Group and the Fire Officer. It had originally been scored at 15, with a consequence at 5 and likelihood of 3. The score had now been reduced to 10 with a likelihood of 2.
- 20.2.2 Mrs Tunney explained that the mitigation had been achieved by installing a new fire alarm system to cover the risk; staff evacuation training has also been completed. Mrs Tunney advised the evacuation test took eight minutes which is sufficient given the fire safety compartments on the wards.
- 20.2.3 Mrs Tunney added that low risk patients will be admitted to the former SCPH building and the Fire Officer will be redoing fire assessments every

week. Any exceptions will be escalated to Covid-19 Silver Command and Executive Quality Governance Group as required.

- 20.2.4 Mrs Tunney advised that mitigations as a result of using more oxygen in SCPH is being worked through with Mr Martin Foster, Director of Estates & Facilities and his team. Mrs Tunney noted that this issue will be reported through the daily Silver Command meetings.

## **20.3 Pre-Mortem Exercise**

Deputy Chief Executive & Director of Finance

- 20.3.1 Mr Favager advised that the rationale for the paper being discussed at Part 2 was due to the assumptions contained therein to allow for free and frank discussion.

- 20.3.2 Mr Favager explained that Mr Oliver is leading the operational aspect of the Covid-19 response and there is a conscious need to continue forward planning for the future beyond Covid-19.

- 20.3.3 Mr Favager explained that he was working backwards from 1 April 2021 and assessing what would need to be addressed in the lead-up to that date due to the implications of Covid-19 on business as usual. Mr Favager added that he considered that this work would also inform the Board Assurance Framework. Mr Favager added that the Executive Team had undertaken a brainstorming session which has identified several key risks. Mr Favager noted that this was not an exhaustive list and invited views, feedback and observations from the Non-Executive Directors using their experience from other sectors.

- 20.3.4 Mr Favager explained that once the exercise has been completed, each of the risks will be given a risk score in order to prioritise assignment of tasks. Small groups will be established with the objective of finding a proactive solution to prevent the risk from happening and/or mitigation should that risk already exist. It was important to recognise the parameters of the group are to identify the risks and seek solutions, not to be responsible for delivering those solutions.

**Resolved:** To note the Chief Executive's Update.

## **21 Any Other Business**

12:45

Deputy Chair

### **21.1 Clinical Incident Reporting**

- 21.1.1 Mr Luckas reminded the Board that prior to the Covid-19 crisis, there had been a clinical incident reported as three patients on the colorectal cancer follow-up pathway had not received appointments. The team within the Colorectal Tumour Group had been requested to check all patients diagnosed of colorectal cancer in the last five years and ensure they had all received the correct backlog appointments.

- 21.1.2



Mr Luckas was pleased to report that the exercise was now complete and there were no further outstanding cases. The other tumour groups had undertaken a similar exercise and to date no issues of patient harm have been identified. Although the exercise was not complete and has now been paused due to Covid-19 crisis, he was assured there had been no further episodes identified so far.

21.1.3

Mr Church thanked Mr Luckas for the positive update.

21.2

### **Board of Director Governance**

21.2.1

Mr Philpott raised a concern that during the current circumstances, he was conscious that the normal governance relating to the Board subcommittees' Terms of Reference would be missed. Mr Philpott requested that Ms Keating ensure that the Board formally adopts those Terms of Reference.

21.2.2

Ms Keating agreed to take this forward.

21.2.3

**ACTION: To ensure the Board adopts the revised Board subcommittee Terms of Reference – (Ms Keating)**

21.3

### **Work of the Executive Team**

21.3.1

Mr Church thanked the Executive Team for all their hard work in relation to the current circumstances around Covid-19 noting that he was impressed at the way they are working as a team to ensure that MCHFT is always on the front foot.

21.3.2

Mr Church thanked the Board for the way they have conducted the first meeting on Microsoft Teams and was pleased to note it kept to time with no significant issues.

21.4

### **The Chairman**

21.4.1

Mr Church agreed to pass the good wishes of the Board to the Chairman.

21.4.2

Mr Sumner thanked Mr Church for stepping in at short notice to Chair the Board of Directors meeting.

**22**

### **Review of the Meeting - to note a verbal review from Mrs Lesley Massey**

22.1

Mrs Massey commented that this was the first virtual Board meeting and felt it was a very effective way of doing business working with iBabs and Microsoft Teams and thanked the Deputy Chair for keeping the matters in hand and tight.

22.2

Mrs Massey extended a warm welcome to Ms Keating to her first Board of Directors meeting today and welcomed the work she will do to inform governance.

22.3

Mrs Massey also noted the tremendous contribution made around the Trust by staff with a particular mention for the Estates and Support services who have transformed the site in a very short time.

22.4

Mrs Massey observed that the focus of the meeting was in relation to Covid-19 responses and the Board had received constant assurances that the Executive Team have the situation well in hand. The suspension of operational processes and some financial processes were agreed, and Mrs Massey was also pleased to note that the Trust would have ended the financial year within its Control Total in any event.

22.5

**Paragraph removed under Section 40 of the Freedom of Information Act.**

Meeting Closed at 11.35am

**23**

11.35

**Time, Date and Place of Next Meeting**

To confirm that the next meeting of the Board of Directors will take place on Monday, 4 May 2020 via Microsoft Teams



Signed: John Church, Deputy Chair  
Date: 05 May 2020