

TRUST BOARD OF DIRECTORS MEETING

MINUTES OF MEETING

WEDNESDAY 6 MARCH 2019 at 2.00 PM

EDUCATION ROOM, VICTORIA CENTRAL HEALTH CENTRE

Members:

Prof Chris Bentley	Non-Executive Director	(CB)
Dr Nick Cross	Medical Director	(NC)
Mr Mark Greatrex	Chief Financial Officer/Deputy Chief Executive	(MG)
Ms Jo Harvey	Director of HR & Organisational Development	(JH)
Mrs Karen Howell	Chief Executive	(KH)
Mrs Alison Hughes	Director of Corporate Affairs	(AH)
Ms Beverley Jordan	Non-Executive Director (Deputy Chair)	(BJ)
Ms Val McGee	Chief Operating Officer	(VM)
Mr Gerald Meehan	Non-Executive Director	(GM)
Mr Brian Simmons	Non-Executive Director	(BS)
Mrs Paula Simpson	Director of Nursing & Quality Improvement	(PS)
Mr Bill Wyllie	Lead Governor	(BW)

In Attendance:

Mrs Heather Stapleton	Board Support Officer	(HS)
Ms Fiona Davies	Joint Chair Staff Council (present for agenda items 1 - 9 only)	(FD)

Reference	Minute
1. WCT18/19-112	<p>Patient Story - Wirral Integrated Musculoskeletal Service</p> <p>PS presented a patient story which focussed on the Integrated Musculoskeletal Service. The patient was knocked over and attended the Accident and Emergency Department at WUTH. Although x-rays indicated there was no damage to her bones, the patient became immobile and was in considerable pain. A request for referral to the Integrated Musculoskeletal Service was made by the patient and she was triaged to physiotherapy and seen at her GP practice at Marine Lake Medical Practice. The patient also suffered from accident related anxiety.</p> <p>The patient's fears were addressed by the physiotherapist together with diagnosis of the injury and the setting of short term goals. A positive relationship was built up and at the point of discharge, she had improved mental health and was walking and cycling with no need for pain relief.</p> <p>This was a positive story and through the continuity and trusting relationship and personalised goal setting, created a good result. She was treated as an individual with patient-centred specific care rather than going through a process.</p> <p>The Board of Directors welcomed the patient story and noted the importance and</p>

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	effectiveness of the MSK Physiotherapy Department in its use of scientifically based assessments and treatment techniques in order to decrease pain, increase movement and facilitate wellbeing of patients in Wirral.
2. WCT18/19-113	<p>Apologies for Absence The board received apologies from: Prof Michael Brown, Chairman</p>
3. WCT18/19-114	<p>Declaration of Interests GM declared an interest as an employee of Cheshire & Merseyside Healthcare Partnership.</p>
4. WCT18/19-115	<p>Minutes of the previous meeting - 9 January 2019 Minute WCT18/19-091 - Patient Story - Community Outpatient Parenteral Antimicrobial Therapy (OPAT) Clinic - 'PS presented a patient story...' to read 'CW presented a patient story....'</p> <p>Following this amendment, the Board of Directors approved the minutes of the previous meeting held on 9 January 2019 as a true and accurate record.</p>
5. WCT18/19-116	<p>Matters Arising - 9 January 2019 AH provided an update on the actions from the previous Board meetings. The Board of Directors reviewed the current status and noted the outstanding actions. <i>(See separate actions/matters arising tracker.)</i></p>
6. WCT18/19-117	<p>Chair's Report BJ presented the report in the absence of MB and drew attention to the following:</p> <ul style="list-style-type: none"> • A formal welcome was extended to GM and CB as they had now commenced in their roles as Non-Executive Directors. • The Council of Governors had appointed BS as the Trust's Senior Independent Director and a welcome was extended to him in his new role. The appointment of BJ had also been supported as the Deputy Chair of the Board of Directors. • BW had been elected as the new Lead Governor of the Council of Governors. The Board of Directors looked forward to working closely with BW. <p>The Board of Directors noted the contents of the report.</p>
7. WCT18/19-118	<p>Report from the Council of Governors - Lead Governor BW presented the Lead Governor report and highlighted the following:</p> <ul style="list-style-type: none"> • Details were included of the constitutional business that had been completed at the formal meeting of the Council of Governors held in February 2019. • An informal development day would be held in early April and this would be used as an opportunity to consider the annual cycle of business and agree the key priorities for the coming year. <p>The Board of Directors welcomed the on-going work and engagement with the Council of Governors.</p>
8. WCT18/19-119	<p>Chief Executive's Report KH presented the Chief Executive's report highlighting developments of local and national interest and issues relating to the local health and social economy, particularly those that might impact on the Trust. An overview was also provided of the communications and engagement activities undertaken by KH and a summary of business conducted through the Executive Leadership Team.</p> <p>The following were highlighted:</p> <ul style="list-style-type: none"> • Following the publication of the NHS Long Term Plan, Matthew Winn, chair of the Community Network, had commented that it was encouraging to see that community and primary care services featured centrally in the plan and included a call for commissioners to demonstrate their investment in the plan.

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	<p>Feedback was received at a national meeting that this was not the case in all place based care systems.</p> <ul style="list-style-type: none"> • A group of Chief Executives were now lobbying nationally for Local Authority contracts pay uplift to be discussed at a national level as the current way forward was not sustainable. Chief Finance Officers had requested feedback should there be any. A new contract for general practice for the next five years had been approved by NHS England and supported the new NHS Long Term Plan. Guidance was expected in the near future as this would have a significant effect as the Trust moved strategically forward as a partner organisation on Wirral. • A positive WIPPB meeting had been held where it had been agreed that this would provide the forum for providers to discuss the introduction of networks. • Since becoming a Foundation Trust, the organisation was being recognised on the national stage and being nominated for awards. This was a credit to the staff working within the Trust. Staff Council were also recognised as a credit to the organisation. • The Trust had rebranded in relation to Equality & Diversity under the name of 'Inclusion - Getting it right for everyone'. Each of the Executive Directors had confirmed they would be Inclusion Champions and FTSU Champions. <p>BJ congratulated the Trust on reaching the mandatory training compliance target of 90%.</p> <p>The Board of Directors was assured by the contents of the report.</p>
<p>9. WCT18/19-120</p>	<p>Reports from the Sub Committees of the Board - January & February 2019</p> <p>Quality & Safety Committee</p> <p>PS, on behalf of CB, provided a verbal report following the meeting held in January 2019:</p> <ul style="list-style-type: none"> • The Quality & Patient Experience report for December 2018 had been received and provided assurance on the delivery of safe, effective services. Some discussion had taken place on the use of SPC charts and the value of trend analysis data. • The pressure ulcer data was noted and acknowledged that the Trust continued to achieve the avoidable pressure ulcer quality goal. • The risk report was received and risks relating to quality were scrutinised and reviewed. There were no new high level risks. Of the existing high level risks, one related to triage times in Walk in Centres and one to the low completion level of wound care assessments identified within community nursing. Action plans were in place for both of these risks and were being monitored. • Risk ID 2080 had been archived and related to the electronic link between the lab at Wirral University Teaching Hospital and the Trust's Sexual Health Service. The service lead had confirmed there was now greater confidence in the process. • It was anticipated that the risk rating for Risk ID 2119 would reduce next month as work was ongoing with WUTH. The committee was assured that all the right mitigations and controls were in place and each of the risks were discussed in the SAFE Group meetings. • The regular CQC Assurance Report was received and highlighted the progress in the completion of the CQC improvement plan. A number of major actions were now concluded and there were eight outstanding MUST DO and 13 SHOULD DO. A demonstration of SAFE would be given to Board in a board development session. • A number of quarterly assurance reports were received for quarter 3 and included Quality Strategy, Safeguarding, Infection Prevention & Control, Complaints, Medicines Optimisation and Mortality Learning from Deaths. • The Policy Schedule for the committee was noted and included upcoming

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	<p>dates when policies would be submitted to the committee for approval. Five policies were also approved by the committee in line with their review cycle.</p> <p>Education & Workforce Committee GM provided a verbal report following the meeting held in February 2019:</p> <ul style="list-style-type: none"> • The committee received the NHS National Staff Survey Results 2018 and three areas had been highlighted where focus was needed and these were Quality of Care, Health and Wellbeing and Quality of Appraisals. The focus for the committee would be the health and wellbeing of staff and to create a supportive environment. Attention would be given to discussing the culture of the organisation particularly in relation to workforce development. • A range of data was available via the Trust Information Gateway and the committee noted the sickness absence data which continued to be an area of concern. • There were two new high level risks reported. Risk ID 2160 related to factors preventing community nursing staff attending face to face training and completing e-learning on line. The 90% target compliance rate for mandatory training had now been reached but Safeguarding training was not currently reported as part of the overall compliance. Discussion had taken place in relation to this and it would be reported back to the committee in June. • Risk ID 1922 had been downgraded due to positive recruitment levels at Walk in Centres. • Statistics showed that the workforce was ageing and 50+ was the dominant age group. Discussion had taken place as to the effect this could have in terms of staff possibly having caring responsibilities for their parents and how staff could be supported with these responsibilities and remain in the workplace. Social care staff would be able to assist and provide appropriate support and signposting in order to support carers across the organisation. • The reasons for sickness were discussed and the understanding of age profiles against sickness would be helpful. • The 1-year Workforce Plan 2019-20 had been submitted to NHSI/NHSE. • The committee discussed the importance of the quality of the appraisal process and assurance was provided that appraisal training had been revised with a focus on setting objectives to provide further support and guidance. • The Pay Protection Policy and the Disciplinary Policy for Doctors and Dentists were approved. <p>KH advised that these discussions, particularly in relation to workforce and the ownership of wellness, were echoed nationally. The responsibility of carers had also been raised and attention needed to be paid to this.</p> <p>Finance & Performance Committee BJ provided a verbal report following the meeting held in February 2019:</p> <ul style="list-style-type: none"> • The key regular update reports were received as well as a Digital Strategy quarterly update, revised Standing Financial Instructions, committee self-assessment summary report and two policies for approval. • The Finance & Activity Report was received and covered contractual performance together with CIP delivery to the end of January 2019. The committee were assured of the strong performance against the updated Trust control and contractual KPI's. • The Integrated Performance Report focussed on key aspects of activity and provided assurance on the following: MSK and Podiatry activity was strong and Rehab at Home was reporting the highest level of activity so far this year. The service had been working with Alamac on efficiency improvements and the impact of this work was welcomed. The reduction in activity in community nursing was noted and activity levels were lower than seen in previous winter periods. The reduction in activity was acknowledged and continued as expected as part of the services transformation programme and the committee noted this was now a focus for

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	<p>commissioners as it had reached over 10% less than plan. As previously reported to Board, efficiencies in nursing had been identified to be reinvested in neighbourhoods and the committee recognised the importance of ensuring this activity was captured accurately in order to articulate clearly the reduction through transformation and then the reinvestment to support the Wirral strategy.</p> <ul style="list-style-type: none"> • The agency spend position was highlighted for month 10 and the Trust continued to operate in excess of the agency spend cap. The committee queried the degree to which supporting winter pressures and streaming was impacting on agency spend. Currently the coding did not allow for this analysis and it was agreed the team would work to quantify this to demonstrate the investment the Trust was making to support the system. • Risks specific to maintaining the strong financial performance were identified in the Finance & Activity report and further assurance was provided that all risks had been cited. The key internal risks ahead of the year end remained the CIP shortfall and performance against the agency cap. • Overall the committee was assured of the strong and consistent financial performance to the end of month 10. • The committee noted that there were three new high level risks. The first related to IT issues in Community Nursing during a server migration and a position statement and advice on the mitigation process was provided. The process had been paused following a number of issues to ensure these were adequately addressed. A detailed review had been completed to provide process learning. The Committee received assurance on the systems and processes in place to ensure end user acceptance prior to roll-out for future projects. The second risk related to GP contracts in GP Out of Hours service and the ability for the Trust to fill shifts over the weekend. A paper with a potential solution had been presented to the Executive Leadership Team which included a review of skill mix and potential available and a final proposal would be presented to the Remuneration & Terms of Service Committee. The third risk related to the power outage at St. Catherine's in January 2019 and the action taken to prevent a recurrence. Specific works were required to address all mitigations and the committee agreed that a report on the learning reviews findings would be presented to the Quality & Safety Committee. • A risk escalated in December relating to the delivery of Phlebotomy services continued to be reported to the committee. Although notice had been given on the contract, the risk remained in relation to staffing as those staff affected may seek alternative employment. The committee received assurance that TUPE and all other redeployment options were being explored for the staff involved. • The quarterly Estates Strategy update was received. A workstream from Wirral Strategic Estates Group would be established to review realistic options for the West Kirby hub. • The implementation plans were reviewed against the four key digital themes underpinning the Digital Strategy. The committee noted the roll-out of Smart phones which led to further discussion on staff's expectations of technology. It was recognised that an important element would be to publish to staff the Trust's Digital Strategy and how this linked to the NHS Long Term Plan. • The committee noted progress with the Wirral Care Record and a concern was raised in relation to Adult Social Care transfer. This had been discussed by the Executive Leadership Team and it had been agreed to invite representation from WUTH to the next informal board session to provide an update. • The committee approved the Lease Car and Travel & Subsistence Policy. • Slight amendments were to be made to Section 16 of the Standing Financial Instructions following a review by the Head of Procurement. <p>Audit Committee BS provided a verbal report following the meeting held in February 2019:</p> <ul style="list-style-type: none"> • The Board Assurance Framework was received and the principal risks and

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	<p>organisational level risks discussed. The committee were assured of the management of risks in the organisation. Chairs of Audit Committees had been invited to attend a meeting on 25 March 2019 and the committee would receive feedback on this.</p> <ul style="list-style-type: none"> • An Audit Committee self-assessment had been undertaken to ensure the purpose of the committee was clear and the processes provided appropriate challenge. Feedback was good overall and a positive response received from members and from internal and external auditors that the committee was providing an effective role. • Two policies were approved, Managing Conflicts of Interest Policy and Policy for Policy Management. • The Internal Audit Draft Plan 2019/20 was received. The fees for the service had increased and the reasons given within the plan. The committee discussed and approved the plan. • The Internal Audit progress report was received. The Financial Systems Review received substantial assurance and Financial Reporting and Integrity received high assurance. The auditors and committee members thanked the finance team for these excellent reports. The Integrated Health and Social Care Governance Review was a supportive review and therefore not intended to provide assurance. It was welcomed by managers to enable improved governance and integration whilst building on the excellent start already made and this was acknowledged in the report. • The external auditors presented the Audit Planning Report for the year ended 31 March 2019. There was some discussion on risks and the focus for the forthcoming year end accounts audit compared to the previous year. The committee were assured by the report. • The external auditors presented the Health Audit Committee Briefing and covered issues of national and local interest. • The Anti-Fraud Plan for 2019/20 was presented and provided the basis for a risk based approach to anti-fraud work. Standards for anti-fraud work had been updated and this would take some time to be achieved. Progress would be reported to the committee. The committee approved the plan. • Tender waiver applications made since the last meeting of the committee were reviewed and the committee assured of the processes followed. • The committee were assured by the contents of the Security Update Report. <p>AH added that both Education & Workforce Committee and Finance & Performance Committee had completed their self-assessments and a report of the total feedback from all the Board committees would be submitted to Board.</p>
WCT 18/19-121	<p>Board Development Sessions</p> <p>AH presented the report following the board development session held on 6 February 2019.</p> <p>The following topics discussed were highlighted:</p> <ul style="list-style-type: none"> • The use of SPC charts had been reviewed and the value they provided. These were being seen more frequently through the use of the Trust Information Gateway and was important in the support of new governance arrangements and the work of the committees going forward. • All Board members had completed the Basic Life Support Training for adults and paediatrics ensuring full compliance. • A useful discussion had taken place in relation to board development moving forwards. A proposed development programme for 2019-20 had been developed and would be discussed at the next development session in April. • An update had been received for assurance on the Trust's new approach to delivering the equality and diversity programme across the organisation. • A demonstration was received of the Standards Assurance Framework for Excellence (SAFE) tool and supported the roll-out programme with teams and service leads to ensure compliance with all CQC fundamental standards and

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	<p>Key Lines of Enquiry.</p> <p>Staff Council FD highlighted the following range of issues that had been discussed at the meeting held on 24 January 2019:</p> <ul style="list-style-type: none"> • Staff were anxious in relation to the new car parking arrangements at St. Catherine’s Health Centre. The Head of Capital Projects & Estates had been in attendance and provided an update which had addressed any concerns. • An update had been provided on the refurbishment plans for Prenton Clinic. • Membership of the Staff Council had been discussed as there were six staff members who had recently volunteered an interest in joining. They had been invited to attend the next meeting of the Staff Council as guests and it was anticipated they would become members. • A staff member had suggested looking into bringing the January pay date forward one week in order to offset the early pay day in December. It was reported that there had already been discussions in relation to this. • Access to key documents on the new StaffZone had been raised with the suggestion that the staff bulletin be circulated at the start of the week instead of the end as it was thought more staff would read it. • Staff Council members were encouraged to bring good news stories to the next meeting. <p>BJ was encouraged that six members of staff were interested in joining Staff Council and asked whether they were from a cross section of the organisation, for example from adult social care, community nursing and urgent care. FD stated that a more targeted approach may be useful in order to have more of a cross section of staff at meetings. Staff Council members would be attending staff meetings with this message and it was thought that if it could be demonstrated staff were listened to by feeding back any discussion and responding to tweets, this may create more interest.</p> <p>KH offered to attend a Staff Council meeting to provide an update on the national changes taking place if this would be helpful to members.</p>
<p>10. WCT18/19-122</p>	<p>Integrated Performance Report - December 2018</p> <p>The Integrated Performance Report provided assurance on the safe, effective quality services and performance against the Board approved strategic objectives.</p> <p>The report was in a new format with a visual presentation that was more understandable and was supported by the Executive Team. The Council of Governors attention was to be drawn to the new integrated information report and their views sought on meeting their needs and whether any training would be required.</p> <p>PS referred to Our Populations and advised performance against the quality metrics was positive. The Friends & Family Test was highlighted and this continued to perform positively as the year to date performance was 95%. The indicator for avoidable grade 3 and 4 pressure ulcers had significantly improved and was a direct result of the improvement plan which was being tracked through the Quality & Safety Committee. The missed medication in month was amber and related to two incidents. Both of these were low harm and resulted in no known patient harm. Work continued to understand where the process issues existed and where the incidents were happening.</p> <p>JH referred to Our People and highlighted mandatory training as this had now achieved the target of 90% and would be green. Thanks were expressed to all who had contributed to the achievement of this target. The newly appointed Head of Learning and Organisational Development was working to ensure access was as straight forward as possible with the possibility of taking mandatory training out</p>

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	<p>to staff wherever possible. Sickness absence remained the main concern for the Trust and this had increased to 6.7%, which was the highest recorded. This reflected a significant increase in short term absence which could be seasonal and a decrease was expected in the next report. Mitigation action was being taken in order to improve the absence rate and the HR team had held a sickness summit which had included actions identified to assist managers to manage sickness absence. There was also to be a focus on stress and anxiety and actions arising from this. Turnover of staff had reduced but remained above target and this was being monitored through the Oversight & Management Board who were working with all divisions and producing retention plans.</p> <p>VM referred to Our Performance and advised that all staff were working hard on the KPI performance and the Trust was in a good position. The Rehab at Home service had moved from red to amber and was due to the improved administrative processes and productivity as defined in the improvement plan. More people were being accessed within four weeks of referral and were not having to wait on the waiting list for a period of time. The Integrated Discharge Team, Community Nursing and Transfer to Assess Therapies had moved from amber to green, demonstrating more people were being seen quickly. The social care safeguarding contacts within 24 hours was improving and this would continue to be monitored.</p> <p>MG advised that at the end January 2019, the Trust were slightly ahead of plan and achieved a year to date surplus of £1.7 million. The overall Use of Resources rating was 1, which was the highest score achievable. The CIP programme YTD was £275k behind plan and approximately £0.5 million non-recurrent savings would assist the Trust to meet the year-end target. The Community Nursing Transformation programme had performed well with savings of £337k since September.</p> <p>Activity was slightly below plan and this was due to the Community Nursing transformation programme. There was however, a growth in activity for MSK and podiatry. The cumulative Agency Cap was exceeded by filling shifts in GP Out of Hours and the Trust was forecasting an overspend at the year-end of 12.5%.</p> <p>KH advised that the agency cap had been brought to the attention of the regulators who understood the Trust's position particularly in relation to Out of Hours supporting the system.</p> <p>The Board of Directors approved the report for the reporting period 1 December 2018 - 31 January 2019 and was assured of the actions being taken to address any concerns that had been identified.</p>
<p>11. WCT18/19-123</p>	<p>Board Assurance Framework (BAF) - January 2019</p> <p>AH presented the BAF which identified any major risks in relation to each strategic objective, together with controls in place and assurances on their operation. This would be the final BAF this financial year.</p> <p>AH reported that there were three principal risks with a current risk rating of 15 or more. The Education & Workforce Committee (EWC) remained focussed on staff morale (principal risk 2) and had discussed the results of the staff survey 2018. EWC would be receiving action plans aligned to the three areas of focus from within the staff survey.</p> <p>Principal risk 3 related to the social care market and the ability of the Trust to mitigate would be reviewed as part of the revision of principal risks for 2019-2020.</p>

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	<p>Principal risk 4 was the final remaining high level risk and related to the Urgent Care Review. The consultation had concluded and the final outcome of the consultation responses was awaited.</p> <p>Two principal risks had been reduced and four principal risks had been identified as achieving the target risk rating and eight had not achieved their target risk rating. This either related to the risk remaining high level or the limited ability of the Trust to fully mitigate the risk without the support and full collaboration of all system partners.</p> <p>AH advised that the BAF would be reviewed for the new financial year and consideration given to the high level risks at the informal board session in April.</p> <p>The Board of Directors noted the detail included against the principal risks, in particular the high level risks, and provide comment on any new or emerging controls and assurances in place. The Board of Directors supported the review of principal risks for the new financial year.</p>
<p>12. WCT18/19-124</p>	<p>Managing Conflicts of Interest Policy (GP7)</p> <p>AH presented the revised Managing Conflicts of Interest Policy which had been previously received by the Audit Committee. Subject to some minor amends and formatting, the Audit Committee had approved the policy for final ratification by the Board of Directors.</p> <p>The policy was now in line with the new NHS England guidance that was issued on managing conflicts of interest and included supporting statements about safeguarding and equality and human rights and new narrative on the consultation process as well as training and support relating to the policy.</p> <p>AH advised that the Board of Directors would be asked to complete declarations of interest forms for the new financial year.</p> <p>The Board of Directors approved the Trust-wide Managing Conflicts of Interest Policy.</p>
<p>13. WCT18/19-125</p>	<p>Mortality Report - Learning from Deaths Framework (Quarter 3)</p> <p>NC presented the report in relation to the implementation of the Learning from Deaths framework. This had previously been submitted to the Quality & Safety Committee in January 2019.</p> <p>NC advised that the Mortality Review Group had met on a quarterly basis. Having reviewed the frequency of meetings, it had been agreed to meet monthly in order to ensure appropriate reporting. There had also been a slight change in the governance to make the reporting more robust and the minutes from the Mortality Review Group would be submitted to the Standard Assurance Framework for Excellence (SAFE) and to the Quality & Safety Committee.</p> <p>NC reported that the number of deaths was small and a brief summary was provided on each. None of the deaths was attributable to the Trust's care. A brief summary of the learning was included together with an update of any outstanding cases.</p> <p>The appendix highlighting the learning from deaths for the quarter, was attached to the report and would be published on the Trust website subject to the report being approved by the Board of Directors.</p> <p>The Board of Directors was assured that the quality governance systems were in place to ensure the continuous monitoring and learning from deaths in accordance</p>

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	with the Trust policy. The Board of Directors was also assured that the Trust was actively involved in supporting the system-wide development of processes reporting and learning from deaths.
<p>14. WCT18/19-126</p>	<p>Healthy Wirral - Whole System Integration Update</p> <p>VM presented the paper which described the activities across the health and social care system which the Trust was leading on and supporting, to ensure a strong out of hospital focus and clear leadership as work progressed in the development of Place Based Care, in particular the neighbourhood developments.</p> <p>The following key points were highlighted:</p> <ul style="list-style-type: none"> <p>• Wirral Partners Board - Wirral Acting as One</p> <p>The Healthy Wirral Executive Directors Group (HWEDGE) and the Healthy Wirral Operational Group (HWODG) both met during January and February 2019 and concentrated on the Operational Plan submission which featured sections on planned and unplanned care, neighbourhood development, mental health and learning disabilities. Planned care featured respiratory, cardio vascular disease, gastro and outpatient redesign. Healthy Wirral Partner Board had met and reviewed the governance arrangements for Healthy Wirral. There was to be a leadership programme for neighbourhoods which would provide organisational development and leadership support to transform services. The Healthy Wirral Workforce Programme Board had met in February and was chaired by KH. Positive discussions had taken place as to new ways of delivering a workforce in Wirral.</p> <p>• Technology and Informatics Update</p> <p>Wirral Care Records - The Programme Lead for Information for Wirral would be attending a board development session to answer questions on how the Wirral care record was being advanced.</p> <p>• Healthy Wirral - Senior Change Team (SCT) Neighbourhood development</p> <p>The SCT had been working to develop the neighbourhood model and staff were linked in and reviewing pathways, developing relationships and ensuring the neighbourhood model supported Wirral residents. Jenny Dodd had been working on a high level model and had engaged people across the Wirral system, in particular GP's in relation to developing neighbourhoods. A 'third sector directory' had been developed which included the community and voluntary sector organisations that Trust matrons and social care staff regularly referred to. In order to assist GP's and practice staff to know more about the services offered by the Trust, more 'service on a page' was to be developed. A relationship management at practice level had also been introduced which would enable practices to receive quick answers to queries about the Trust's services.</p> <p>• Peer Review</p> <p>The Adult Social Care Peer Review had been confirmed and would be taking place on 7, 8 and 9 May 2019. It was being arranged as part of the Sector Led Improvement Programme and the Associate Director for Social Care had been instrumental in arranging this. A Working Group had been set up and this was being seen as an opportunity to highlight areas requiring development.</p> <p>• Winter Plan</p> <p>Weekly calls were taking place with NHSE and NHSI to ensure services were well prepared for the winter period. There were additional acute winter beds available to assist with the flow through and it was recognised that further work needed to be undertaken on funding and/or redesign. A point prevalence study was nearing completion which had looked at the discharge process across the Transfer to Access beds based on the Clatterbridge site and the Stroke Rehabilitation Unit. An action plan would be produced on completion of this study.</p>

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	<ul style="list-style-type: none"> • Transfer and Assessment There was a focus on whether the Transfer to Access beds were being used efficiently and to understand the cause of any delays in transfer and discharge. This was being commissioned and funded through the joint commissioning arrangements. • Teletriage The work of the teletriage team had been praised and acknowledged as contributing to patient care and had been nominated and shortlisted for an innovation Agency Award in the Transformation category. The team had also been asked to present at the Kings Fund Digital Health and Care Congress 2019 in London. • Collaborative working regarding Children's Services Hot desks had been set up at four 0 -19 bases for Health Visitors and Midwives to work alongside each other. The co-location of some Trust staff had taken place and the Trust's Looked After Children (LAC) nurses had co-located into the Local Authority LAC team. This was a positive move and shared outcomes were to be developed. A discharge pathway had also been developed from the children's ward at WUTH to the Trust's teen team. These were all helping families and parents to experience a better streamlined journey. • Integrated Therapy's work programme Work continued to review community and WUTH Dietetic and Speech and Language Therapies. The Trust and WUTH were to work together building on the partnership work. It was going to be crucial the way the Trust positioned itself in terms of the work to be done, particularly as primary care developed Primary Care Networks. <p>BS expressed thanks to all staff who were working hard to maintain finances and service performance. BJ stated this was a clear report and there was the need to be mindful of the strain on the organisation to provide excellent care within the financial budget.</p> <p>The Board of Directors was assured that the Trust was instrumental in Healthy Wirral and was the 'place' in Place Based care, especially in relation to integration, urgent care and influencing commissioning and primary care agenda, ensuring the delivery of a high quality service which enhanced patient care and patient experience.</p>
<p>15. WCT18/19-127</p>	<p>Communications, Marketing & Engagement Strategy Update (Quarter 3)</p> <p>AH presented an update on the Communications, Marketing and Engagement Activity report which recorded activity for the period October - December 2018 (Quarter 3).</p> <p>AH advised that the report was structured according to the five key communication, marketing and engagement themes as outlined in the Communications, Marketing and Engagement Strategy. The following were highlighted:</p> <p>Internal Communications - The 2019 Heart Awards had been successfully launched and were the biggest the Trust had hosted with 270 staff attending. The Communications team had provided significant support, event management and leadership to bring the Heart Awards to fruition.</p> <p>External Communications - The Trust's annual Art Exhibition and the Christmas Carol Concert had been a great success. These events were growing year on year with links being made into local schools and the Wirral Art Society. The Carol Concert had been partnered with St. Catherine's Church and had been well</p>

Reference	Minute
	<p>received. There had been a number of awards regionally and nationally that the Trust had been shortlisted for. An awards schedule had been produced for external awards opportunities and work was starting on NHS parliamentary awards that were due to take place in June. A number of visual materials had been produced and the Trust's social media channels and Twitter feed continued to grow.</p> <p>The priorities for the next quarter were listed, the main priority being the launch of a new StaffZone.</p> <p>KH reflected on how the Communications Team had progressed over the last three years and had focussed the organisation in terms of the external environment, marketing and social media. Thanks were expressed on behalf of the Board for their hard work in organising the Hearts Awards.</p> <p>The Board of Directors noted the content of the report and was assured of the progress made to date regarding the implementation of the Communications and Marketing Strategy.</p>
<p>16. WCT18/19-128</p>	<p>Medicines Optimisation Annual Report 2017-2018</p> <p>NC presented the annual report which detailed the work undertaken by the Medicines Management Team and remained in line with the four principles in the strategy. A significant amount of work had been done to address the strategic principles and one of the outcomes was that the Medicines Management Team had become more visible in demonstrating their work. The report had been ratified by the Medicines Management Group and Quality & Safety Committee.</p> <p>KH thanked NC for his leadership and for the assurance provided through his position as Medical Director.</p> <p>The Board of Directors were assured that medicines within the Trust were being managed appropriately.</p>
<p>17. WCT18/19-129</p>	<p>Staff Council - 22 November 2018</p> <p>The minutes of the Staff Council held on 22 November 2018 were noted.</p>
<p>18. WCT18/19-130</p>	<p>Any Other Business</p> <p>There was no Any Other Business.</p>
<p>19. WCT18/19-131</p>	<p>Invitation for Public Comments</p> <p>There were no comments from members of the public.</p>
<p>20. WCT18/19-132</p>	<p>Items for Risk Register</p> <p>There were no items for the risk register identified.</p>
<p>21. WCT18/19-133</p>	<p>Staff Story - Graduate Management Trainee</p> <p>JH presented an audio recording and storyboard from the Graduate Management Trainee providing her personal experiences of the scheme and her first year placement at the Trust. Overall the reflections were such that the trainee felt empowered and trusted to deliver. Her experience working within the Integrated Children's Division were reported as very positive with colleagues taking the time to share knowledge and best practice to support the trainees development.</p> <p>The Board of Directors welcomed the story and her enthusiasm and commitment to her own development was recognised.</p>
<p>22. WCT18/19-134</p>	<p>Summary of actions and decisions</p> <p>AH provided a brief summary of actions and decisions taken during the Board of Directors meeting.</p>

Reference	Minute
Date and Time of Next Meeting: The next formal Trust Board meeting will take place on Wednesday 1 May 2019 at 2.00pm in the Oakenclough Room, Cheshire East.	

Board - Chair Approval			
Name:		Date:	
Signature:			

The Board of Directors Meeting closed at 16:00.