

We are WHH & We are
PROUD
to make a difference

NHS
Warrington and Halton
Teaching Hospitals
NHS Foundation Trust

WHH Council of Governors

Thursday 13 February 2020

3:00pm – 5:00pm

Lecture Theatre

HALTON Education Centre

COUNCIL OF GOVERNORS
THURSDAY 13 February 2020, 3.00pm-5.00pm
Lecture Theatre, HALTON Education Centre, Halton Hospital

AGENDA ITEM COG/20/02/XX	TIME PER ITEM	AGENDA ITEM	OBJECTIVE/ DESIRED OUTCOME	PROCESS	PRESENTER
			Choose an item.	Choose an item.	
COG/20/02/ PAGE 3	3.00pm	Primary Care Commissioning Strategy update Warrington CCG	<i>For info/update</i>	<i>PPT</i>	WCCG Marie Ann Hunter, Snr Comm Mngr Primary Care Melanie Alsop Service Dvpmt Mngr
FORMAL BUSINESS					
COG/20/02/ 01	3.10pm	Welcome and Opening Comments <ul style="list-style-type: none"> Apologies Declarations of Interest 			Chairman
COG/20/02/ 02 PAGE 16		Minutes of meeting held 14 November 2019	<i>For decision</i>	<i>Minutes</i>	Chairman
COG/20/02/ 03 PAGE 21		Matters arising/action log	<i>For assurance</i>	<i>Action log</i>	Chairman
GOVERNOR BUSINESS					
COG/20/02/ 04	3.15pm	Lead Governor Update	<i>For info/update</i>	<i>Verbal</i>	Lead Governor
COG/20/02/ 05 PAGE 23	3.25pm	Items requested by Governors <ul style="list-style-type: none"> Staff Incident concerns (PLJ) Primary Care direct access to test results from WHH (AK) TV service (PLJ) 	<i>For info/update</i>	<i>Briefing notes +Q&A</i>	
COG/20/02/ 06 PAGE 26	3.40pm	Reports from <ul style="list-style-type: none"> Governors QiC (7.01.2020) Governors Engagement Group (12.02.20) incl <ul style="list-style-type: none"> Engagement Dashboard (attached) PPI Q3 report (attached) <p>Governor Observers at Trust Committees – verbal updates A Robinson QAC; P Bradshaw FSC; C Jenkins SPC</p>	<i>For info/update</i>	<i>Verbal + reports</i>	Chair of QiC Chair of GEG Verbal updates AR/PB/CJ
TRUST BUSINESS					
COG/20/02/ 07 PAGE 37	4.00pm	Chief Executives Report from November 2019 + January 2020 Trust Board	<i>For info/update</i>	<i>Report</i>	Chief Executive
COG/20/02/ 08	4.05pm	Chairmans Briefing	<i>For info/update</i>	<i>Verbal</i>	Chairman
COG/20/02/ 09	4.15pm	New Hospitals update	<i>For info/update</i>	<i>PPT</i>	Chief Executive
GOVERNANCE					
COG/20/02/ 10 PAGE 57	4.30pm	Compliance Trust Provider Licence Bi-Annual Report	<i>For decision</i>	<i>Report</i>	Trust Secretary
COG/20/02/ 11 PAGE 58	4.35pm	Workforce Race Equality Standard (WRES) update	<i>For assurance</i>	<i>PPT</i>	E&D Lead
COG/20/02/ 12	4.45pm	Governor Training and Development MIAA as available	<i>For discussion</i>	<i>Verbal</i>	Trust Secretary
CLOSING					
COG/20/02/ 13	4.50pm	Any Other Business + Closing		Verbal	Chair

Schedule of 2019-21 dates attached for information

Next Meeting Date will be on Thursday 14 May 2020, 4.00pm-6.00pm

TRUST CONFERENCE ROOM, WARRINGTON

Primary Care Strategy 2020-2023

Marie-Ann Hunter, Senior Commissioning Manager for Primary Care



Background

- The current Primary Care Strategy was first developed in 2015, over recent years there have been many changes to both national and local policy.
- Timely to refresh the current strategy to reflect the changes and to ensure that primary care can work towards a sustainable future.

Development of the Strategy

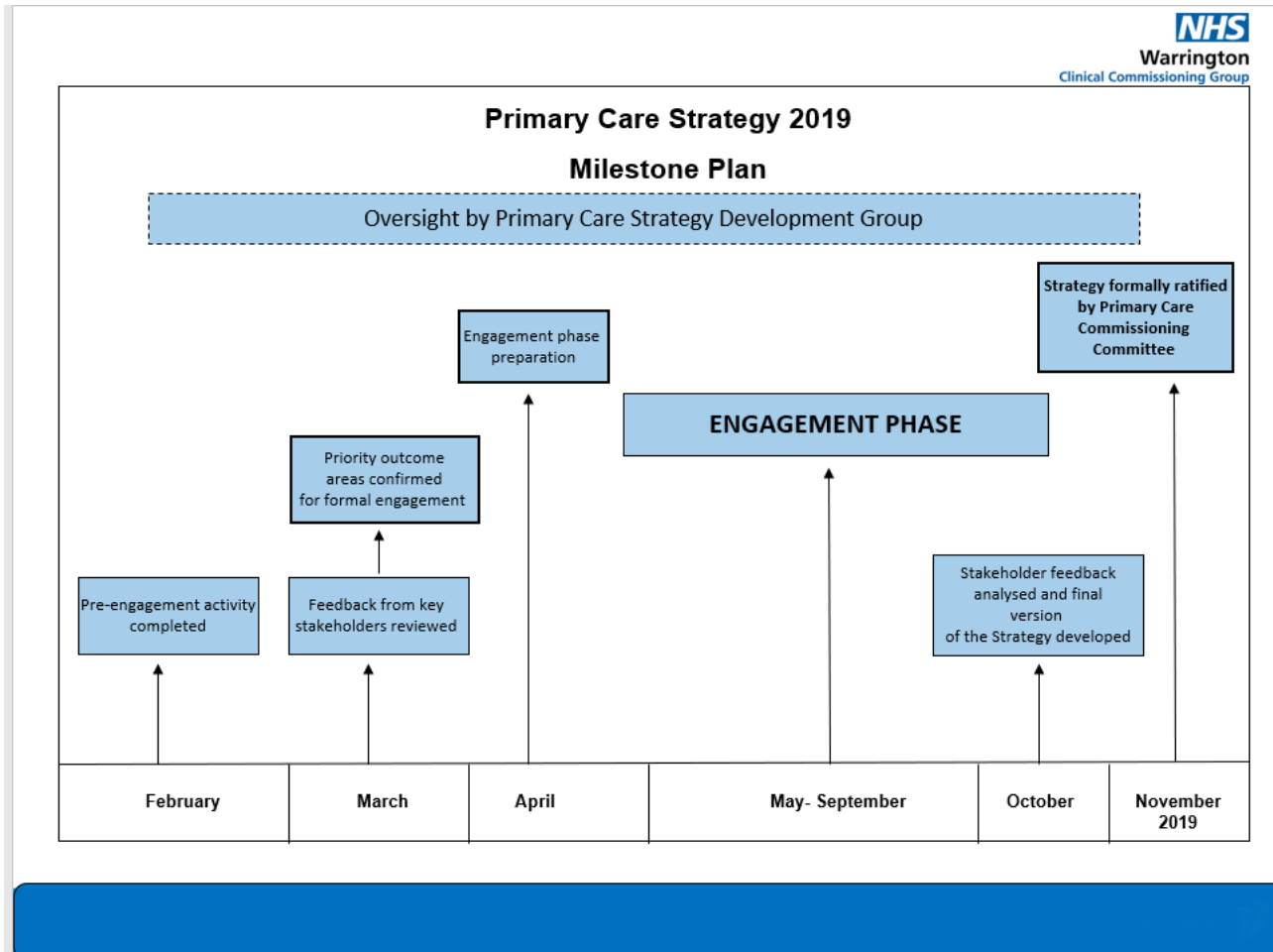
The development of this strategy has been led by the Primary Care Development Group.

- Chaired by Dr Steevart
- Representation from Primary Care Colleagues
- Developed the Vision, Priorities and Outcomes
- Pre-engagement with all GP Practices, PPG and Governing Body
- Wider key stakeholders involved with further development of the priorities and outcomes to shape the creation of the final version.

Engagement Period



Warrington
Clinical Commissioning Group



- On average over 70% of respondents agreed with the vision and priorities
- The majority of all comments received supported the vision, priorities and outcomes

The Patients Voice

Patients have said they want greater coordination of their care and “tell” their story once
Access to a wider range of services within their GP practice was another key theme

Patients were clear that they wanted to be able to access the same quality of service no matter where in Warrington they live

Improve recruitment and retention of health care staff
Patients need an understanding of the full workforce within primary care and need to recognise that it is important for patients to be seen by the right person at the right time and this might not always be a GP.
The work of primary care can be supported by the involvement of the Third Sector.

Primary Care Workforce Voice

“We want to expand the Primary Care team so our patients are seen by the appropriate clinician”

“We want to be able to give our more complex patients more dedicated time”

“That we can deliver the best service to our patients whilst maintaining a work life balance”

Stakeholder Comments

“what is the vision for the relationship between primary care and secondary care?”

“what is the next phase of the primary care strategy? Will it include hard evidence, actions, and how they will be achieved?”

“What anticipatory demand tool are being used?”

Our Vision

Health and Care system vision



Working Together for a happier and healthier Warrington

Vision for integrated Primary Care

Mutual respect, engagement and all practices working together to achieve agreed common goals

Our patients will receive the same offer of care, irrespective of their practice.

Practices could share staff, policies and good practice

Vision for Practices

A motivated and skilled workforce providing quality care achieving the best outcomes for Warrington residents

Ensure our patients have the skills, confidence and knowledge to self-manage and to become more involved in relation to their physical and mental health.

Our Agreed Priorities



How will we know we have been successful?

- Outcomes have been produced for each priority area which will measure the success of our strategy.
- Each priority area will have a delivery plan to underpin the direction of travel of years 1-3.



Next steps

- An event to be held with key stakeholders to help shape the production of a delivery plans and road map to underpin the strategy and to achieve the outcomes



Acknowledgement

Special thanks are given for vital contributions made towards making sense of complex national policy and arriving at a vision and priority outcomes for Primary Care for the benefit of Warrington.





COUNCIL OF GOVERNORS
Minutes of the Meeting held on Thursday 14 November 2019
Halton Education Centre, Halton Hospital

Present:

Steve McGuirk (SMcG)	Chairman (Chair)
Simon Constable (SC)	Executive Medical Director/Deputy Chief Executive
Mark Ashton (MA)	Staff Governor
Terry Atherton (TA)	Non-Executive Director
Margaret Bamforth (MB)	Non-Executive Director
Keith Bland (KB)	Public Governor
Paul Bradshaw (PB)	Public Governor
Erin Dawber (ED)	Public Governor
Norman Holding (NM)	Public Governor & Lead Governor
Colin Jenkins (CJ)	Public Governor
Ian Jones (IJ)	Non-Executive Director
Alison Kinross (AK)	Public Governor
Linda Mills (LM)	Public Governor
Colin McKenzie (CMcK)	Public Governor
Peter Lloyd Jones (PLJ)	Partner Governor, Halton Borough Council
Nichola Newton (NN)	Partner Governor, Warrington + Vale Royal College
Cliff Richards (CR)	Non-Executive Director
Louise Spence (LS)	Staff Governor
Nick Stafford (NS)	Public Governor
Anita Wainwright (AW)	Non-Executive Director
Professor John Williams (JW)	Partner Governor, University of Chester

In Attendance:

Pat McLaren (PMcL)	Director of Community Engagement + Fundraising
John Culshaw (JC)	Head of Corporate Affairs
Julie Burke (JB)	Secretary to Trust Board (Minutes)
Helen Pressage (HP)	Warrington CCG
Julia Harvey (JH)	Senior Commissioning Manager, Warrington CCG
Apologies: Anne Robinson	Public Governor

<p>COG/19/11 /58</p>	<p>Warrington Referral Assistance Gateway (WRAG) update</p> <p>The Chairman welcomed colleagues from Warrington CCG who provided an update on progress and performance of the WRAG since the last CoG meeting.</p> <ul style="list-style-type: none"> - Referral process followed by GPs explained, circa 60,000 referrals through the most appropriate care pathway, acute, community and tertiary care. IT systems continually upgraded to maximise and standardise systems and referral pathways. - Patient Choice remains at the core of the Gateway with patients primarily choosing geography and waiting time for their preferred choice of care. For T&O and Ophthalmology over 90% of patients chose WHH and 85% for Gastroenterology. - JH explained that the WRAG KPIs are monitored through a range of governance processes to enable concerns to be identified and addressed, including Contractual meetings with CCG and the Trust, WRAG Performance Board, Collaborative Sustainability Board, CCG Committees including Patient Safety Committee and Commissioning Support Unit (CSU). - HP further explained that market share opportunities are being explored through the Collaborative Sustainability Board to maximise opportunities. <p>In relation to issues highlighted previously regarding delays in answering calls, HP explained all calls are answered within a set number of rings, process is monitored and improvement and consistency in time to answer calls reported.</p>
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	<p>Referring to query raised in the event of possible mis-diagnosis and Consultant appointment being taken in appropriately, HP explained that all referrals are subject to a Peer Triage within 48 hours which can be re-directed for a second clinician check before Consultant appointments are allocated, preventing a later cancellation of an appointment.</p> <p>The Chairman thanked colleagues for their comprehensive update noting the considerable progress made and the ongoing opportunities to work together to support a sustainable health and social care system. CCG colleagues were invited to provide a further update at the November 2020 meeting.</p>	
COG/19/11 /59	Welcome, Apologies & Introductions	
	Apologies – noted above. There were no declarations of interest in relation to the agenda items for the meeting.	
COG/19/11 /60	Minutes of meeting held 13 August 2019	
	The minutes of the meeting held on 13 August 2019 were approved as an accurate record.	
COG/19/11 /62	Matters arising/action log	
	Action log and updates recorded. Remaining items were covered on today's agenda.	
COG/19/11 /62	Approval of Chief Executive appointment (<i>S Constable left the room for this item</i>)	
	<p>The Chair reported that a robust recruitment process had concluded on 11 November 2019 to appoint a new Chief Executive. Long list of 10 applications were reviewed by himself and IJ and a short list of 3 selected. The Interview Panel convened on 11 November consisted of 3 WWH Non-Executives, 1 external CEO and 1 representative from NHSE/I. The selection process involved a number of Focus Groups with both Executive, Governor and Staff Side representation and feedback from each group was taken into consideration by the Interview panel. The Interview Panel unanimously agreed and recommended the appointment of SC to the post. The recommendation was made to a NARC convened on 11 November who supported the appointment with a recommendation to the Council of Governors for ratification.</p> <p>SMcG invited comments and asked the CoG to support the appointment.</p> <ul style="list-style-type: none"> • The CoG unanimously ratified the appointment of SC as Chief Executive. SC rejoined the meeting and congratulations were offered. 	
COG/19/11 /63	Lead Governor Update	
	<p>NH provided an update on pertinent matters since the last CoG:</p> <ul style="list-style-type: none"> - NH had taken part in the CEO recruitment process. - Governor Working Group in September, approved the appointment of Grant Thornton as External Auditor for 12 months. - Local Government Association Annual survey circulated for colleagues. - Patient letter workshop on 13.11.2019 had taken place to work to improve content and timeliness of all patient letters sent by the Trust. - Further guidance awaited from NHSP relating to future role of FTs and Governor roles. - Meeting had taken place with Bridgewater Governors 19 September, future meetings to be planned. - Safeguarding mandatory training booklets had been circulated, Governors asked to return their signatory sheet as confirmation that training had been completed. 	
COG/19/11 /64	Items requested by Governors	
	SC provided a verbal update in relating to the Urgent Treatment Centre. The Trust received notification from Halton CCG 21.10.2019 that the tender for Halton and Warrington had	

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	<p>closed with no decision made. The tender process was suspended and solution to be progressed with WHH, StH&KHT, Commissioners, Bridgewater and GP Federations enhancing Urgent Care specification to meet Urgent Treatment specification (27 points) as a step-up, including more appointments, consistent triage of patients, working towards a single operational model for Urgent Treatment Centre.</p> <p>In relation to observation from PLJ, recent experience of family attending UC Centre in Runcorn and services offered, JC explained that the COO had visited the UC Centre with PLJ to address concerns raised and that incorrect information had been given at the time.</p>	
COG/19/11 /65	Reports from Governor Engagement Group (GEG) and Quality In Care (QiC) + Board Assurance Sub Committees	
	<p><u>QiC 5.11.2019</u>– NH provided an update on key matters discussed:</p> <ul style="list-style-type: none"> - CQC, Quality Assurance Committee and ED+I Committee feedback received, Quality Dashboard received. <p><u>Governor Observation visits</u> – 3 visits undertaken during September, October, lots of positive feedback relating to care and staff, however nutritional issues highlighted across visits, particularly relating to communication of alternative meals and choice, with an increase in issues identified at Halton. Concerns had been reported to Chief Nurse and Deputy CN as well as Patient Experience Committee who are addressing through the PPP&I work programme.</p> <p>B10+B11 visit, positive family feedback, dedicated room for patients with MH needs. PLACE inspection at CMTC, room capacity being used for pre-op awareness classes.</p> <p>A9 visit – observed hand sanitisation issues, and delays in pain management, feedback at the time of the visit. All observations/comments are feedback to CBU's</p> <p>The Chairman asked that this feedback is triangulated and fed into Ward Accreditation programme.</p> <p><u>GEG 6.11.2019</u>- KB provided an update on key matters discussed:</p> <ul style="list-style-type: none"> - Digital Strategy, Radiology Always Events, Don't Let Me Down Campaign (DLMD) 27 missed/cancelled operations on the day in September resulting in a significant impact both on not being able to offer appointments to other patients and financially for the Trust. To reduce this, courtesy calls 7 days before due appointments are being undertaken, text reminders and option to change appointment on line. DLMD campaign to be launched in December. - Engagement dashboard reviewed, significant amount of media, social media interest. Number of FOIs received from MPs, press and private sources. - Cycle of work for 2020 agreed. <p><u>Committee feedback</u> PB from FSC reflected planning and financial challenges faced by the Trust and challenge to Execs from the NEDs.</p>	
COG/19/11 /66	Terms of Reference + Cycles of Business	
	QiC – ToR reviewed and <u>approved</u>.	
COG/19/11 /67	Elections Activity Bi-Annual report – Vacancies & Governor Terms of Office	
	<p>JC reported outcomes of the Governor elections which had run from 12.9.2019-8.11.2019 and constituencies eligible for election:</p> <ul style="list-style-type: none"> - 8 public constituencies - 4 staff constituencies - 5 constituencies were elected with unopposed candidates with C McKenzie, A Robinson and L Spence re-elected unopposed. - 2 constituencies were contested, K Bland was re-elected and L Mills elected as N&M Staff Governor. 	

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	<ul style="list-style-type: none"> - No candidates were nominated for 5 constituencies which will remain vacant until the next elections to take place between September – November 2020 	
COG/19/11/68	Chief Executives Report	
	<p>The CEO reported on pertinent matters, not discussed previously in the meeting, since the last CoG:</p> <ul style="list-style-type: none"> - Significant winter pressures being experienced locally with excess of 300+ A&E attendances at WHH whilst achieving NHS trajectory of 95% in October. Winter capacity has been opened with K25 and plans for additional assessment capacity through the Combined Assessment Unit to support patient flow. - Collaborative work continues with Bridgewater, Commissioners through Provider Alliance for system accountability and to work towards a sustainable health economy. - Positive first system review meeting held 30 September 2019 with NHSI/E and partners to collectively discuss issues. SC added he is part of a weekly discussion to review both financial challenges and where quality improvements relating to services and care could be made. - Successful Staff thank you awards event held last month. - Trust name change – proposal later in the meeting which will support the Trust being recognised as a leading Teaching Hospital in the area due to its already strong multi-professional clinical and non-clinical links and teaching opportunities provided, which will further support the Trust in its journey to achieve Outstanding. 	
COG/19/11/69	Chairmans Briefing	
	<p>The Chair's echoed sentiments relating to the recent successful Staff thank you awards which had also been the last significant event attended by M Pickup before her departure.</p> <ul style="list-style-type: none"> - K Bliss had been appointed as Substantive Chair of Bridgewater and Executive to Executive and Board to Board meetings continue to progress collaborative/joint working arrangements. Board to Board held 7.11.2019 when operational models were discussed. Executives to continue discussions and mechanisms prior to the next Board to Board on 13.12.2019 which will be supported by a PMO arrangement. Direction of travel agreed to achieve a sustainable organisation to deliver seamless community and acute services for patients. Any decisions will be through the already established Governance route through the Committee in Common and decisions ratified through both Boards and Council of Governors. 	
COG/19/11/70	Complaints Report	
	The Council of Governors noted the report and the continued improvement in this area.	
COG/19/11/71	Appointment of External Auditors	
	<p>As referred to earlier in the meeting SMCg explained that the 3 year contract for Grant Thornton was due to expire 30.09.2019, however there was an option to extend the contract for a further 12 month period. The Governors Working Group on 17.06.2019 had supported the request to explore possible alternative audit services wef 1.10.2019. Invitation to Tender was published 29.07.2019, no proposals for the provision of this service was received by the deadline of 12.08.2019. As such the Trust had the option to extend the existing contact for a further 12 months via Contract Variation for the same audit fee of £60,000 per annum. Approval had been received from members of the Audit Committee, supported by the Lead Governor. A tender exercise will be completed prior to the cessation of the contract extension on 30.09.2020. The Chairman asked the CoG to consider proposal and if they supported the proposal.</p> <ul style="list-style-type: none"> • The CoG <u>ratified</u> the extension of the Trust's contract with Grant Thornton for period 	

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	1.10.2019-31.09.2020 at a cost of £60,000 plus VAT.	
COG/19/11/72	Compliance Trust Provider Licence (Bi-annual report)	
	Full compliance reported. <ul style="list-style-type: none"> • The Council of Governors noted the report. 	
COG/19/11/73	Appointment of C Richards to the role of Chair of Charitable Funds Committee	
	The CoG had approved at its meeting in August 2019, 2% uplift of basic salaries backdated to April 2019 with the exception of CR who had commenced the Trust 10.06.2019. At the time of this uplift all but one of the NEDs had additional payments related to additional duties (eg Vice-Chair, SID or Chair of a Committee). CR has subsequently taken on responsibility as Chair of the Charitable Funds Committee wef 1.09.2019 with an additional duty payment of £750 per annum. This had been supported by the Chairman and Lead Governor. <ul style="list-style-type: none"> • The CoG noted the amendment to salary. 	
COG/19/11/74	Change of role – Head of Corporate Affairs (JC left the room for this item)	
	SC explained that under the NHS Constitution the requirement for a Trust/Company Secretary. JD had joined the Trust in December 2017 as HCA in a different structure to that which exists currently and in a developmental and aspirational role to a Co Secretary. The HCA had achieved ICSA qualification and has played a pivotal governance role since 2018 reporting directly to the CEO and Chair. As such job description and person specification had been revised and recommendation to the CoG was to support the change of role to Trust Secretary with effect November 2019. <ul style="list-style-type: none"> • The CoG <u>ratified</u> the proposal. JC returned to the meeting 	
COG/19/11/75	Change to the Trust Name and Ratification of Trust Constitution	
	As referred to in the CEO update and discussed at previous CoG meetings, the CoG were asked to ratify the change to the Trust Name and amendment to the Trust Constitution to reflect the change to the Trust's name to Warrington and Halton Teaching Hospitals NHS FT. There will be no significant external rebranding costs and internal rebranding has commenced. The Trust Board had supported the change on 27.09.201. <ul style="list-style-type: none"> • The CoG <u>approved</u> the change to the Trust Name and <u>ratified</u> the changes to the Trust Constitution. 	
COG/19/11/76	Governor Training and Development MIAA, No updates to report.	
COG/19/0857	Any Other Business - None matters raised.	
	Date and time of next meeting Thursday 13 February 2020, 3.00pm-5.00pm, Lecture Theatre, HALTON EDUCATION CENTRE	

Signed Date

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COUNCIL OF GOVERNORS ACTION LOG

AGENDA REFERENCE	CoG/20/02/03	SUBJECT:	COUNCIL OF GOVERNORS ACTION LOG	DATE OF MEETING	13 February 2020
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1. ACTIONS ON AGENDA

Minute ref	Meeting date	Item	Action	Owner	Due Date	Completed date	Progress report	RAG Status
COG/19/08/36	13.08.2019	Primary Care Refresh Strategy 2019	Warrington CCG to attend future COG to share Strategy following engagement + consultation phases.	Marie-Ann Hunter, WCCG	13.02.2020		Deferred to February due to the delay in their internal meeting to the end of November to sign off the strategy.	

2. ROLLING TRACKER OF OUTSTANDING ACTIONS

Minute ref	Meeting date	Item	Action	Owner	Due Date	Completed date	Progress report	RAG Status
COG/18/11/56	15.11.2018	Lead Governor Update	Date of visit to CoCH to be circulated	Trust Secretary			6.02.2019. Awaiting confirmation from CoCH. <u>16.05.2019</u> . Ongoing discussion to agree date. <u>28.08.2019</u> . HCA contacted counterpart at CoCH. NH contacted his counterpart to arrange. <u>02.09.2019</u> CoCH Interim Trust Secretary advised that new Dir Corporate Governance to commence Nov '19, visit to be arranged post commencement. <u>14.11.2019</u> . Anticipated visit in January 2020. <u>27.12.2019</u> JC contacted Dir Comms+Corp Affairs to confirm date for visit.	
COG/19/11/58	14.11.2019	WRAG presentation	Further update in November 2020	WCCG	CoG 12.11.2020		To CoG 12.11.2020	

3. ACTIONS CLOSED SINCE LAST MEETING

Minute ref	Meeting date	Item	Action	Owner	Due Date	Completed date	Progress report	RAG Status
COG/19/02/12	14.02.2019	Governor Effectiveness Survey	High level summary to CoG.	Head Corporate Affairs	13.02.2020		16.05.2019. Deferred to August meeting. JC to update, did not go to August CoG 07.11.2019 – HoCA to meet with SMCg ahead of next CoG. Jan 2020. to be incorporated in the next Governor Survey due May 2020.	
COG/19/02/14	14.02.2019	WRES Update	Options for FTSU BME Champion to attend CoG as a 'Partner' or 'Staff' Governor.	Trust Secretary	31.01.2020		18.07.2019 Discussions ongoing. 13.08.2019. HCA to meet with FTSU Guardian to progress. January 2020. To be considered as part of on-going and future collaboration with Bridgewater.	
COG/19/08/43	13.08.2019	Elections	Options to be explored for potential future constitutional change for a "Other Staff Group".	Trust Secretary	31.01.2020		January 2020. To be considered as part of on-going and future collaboration with Bridgewater.	

RAG Key

	Action overdue or no update provided		Update provided but action incomplete		Update provided and action complete
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2nd January 2020

SENT BY EMAIL ONLY

Cllr Dave Thompson
Halton Borough Council
Municipal Building
Kingsway
WIDNES
WA8 7QF

Dear Cllr Thompson

Firstly, may I apologise for the delay in responding to your email of 15th November 2019 which was shared with me via our Council of Governors.

I am extremely sorry that you had such an unpleasant experience in our Emergency Department and thank you for your concern for our staff. We take our duty of care to our staff extremely seriously and their safety and wellbeing is our priority. I can assure you that our senior team, our Security guards, and indeed the Police where required, are called as soon as staff feel a situation is becoming intimidating, offensive or dangerous for either themselves, their colleagues, our patients or visitors.

Following your email I asked for all of our incidents reported in the Emergency Department to be looked at going back one year, however we cannot see any incidents reported that are similar to that described by yourself so are unable to give you any specific information about that occasion. In the year we have recorded 22 reported assaults on staff and in all but one case the instigators were patients. This is a decrease from 35 the previous year.

To address your specific concerns about warnings and deterrents, we are in fact refreshing our 'zero tolerance' campaign to support our staff, adopting a best practice campaign from an outstanding Trust in the North East. In addition, we have just agreed a training plan for our staff in areas deemed to be of higher risk, to support them in de-escalation techniques. Where patients are identified as requiring an enhanced level of care we have a process to support the staff with senior nurse oversight and a clear escalation pathway to our Chief Nurse if required. In every case we offer affected staff the support of our Health and Wellbeing Service.

More widely we have an active and well supported 'Freedom to Speak Up' programme with a dedicated Guardian and many local champions.



Chairman: Steve McGuirk CBE DL Chief Executive: Simon Constable FRCP

Warrington and Halton Teaching Hospitals NHS Foundation Trust

Headquarters Kendrick Wing, Lovely Lane, Warrington WA5 1QG www.whh.nhs.uk

Email: simon.constable@nhs.net Executive Assistant: Paula Gunner 01925 662299 paula.gunner@nhs.net

/ 2 /

I do hope this provides you with some assurances and I thank you once again for your care and concern for our staff.

Yours sincerely



Simon Constable
Chief Executive

Cc: Peter Lloyd Jones
Sue Wallace-Bonner
Eileen Omeara
Tracey Coffey
Ann McIntyre
Milorad Vasic
David Parr
Steve McGuirk
John Culshaw/WHH Council of Governors



Chairman: Steve McGuirk CBE DL Chief Executive: Simon Constable FRCP
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Email: simon.constable@nhs.net Executive Assistant: Paula Gunner 01925 662299 paula.gunner@nhs.net

Council of Governors Briefing notes 13 February 2020

Primary Care direct access to test results

Some GP surgeries outside of the Halton area would like to access lab and X-Ray results from Warrington & Halton Teaching Hospitals.

In the longer term these surgeries will have access to the records of all patients across the north west via the record sharing programme of the STP.

The immediate solution is to integrate the GP Surgeries record solution with the Hospital's "ICE" solution.

The following actions have been conducted:

- *The provider of the GP records solution has been contacted to agree how the functionality can be enabled. We are now following the suppliers' process for requesting the functionality to be enabled. Once we have confirmed the costs we will explore the funding opportunities.*

TV services at Warrington + Halton Hospitals

Currently at least 3 pay stations are out of order, the pay station by the Frailty Assessment Unit has been out of use for many weeks. Many wards do not have headphones, something required after a card is purchased.

Does the Trust intend to review the contract with the provider, its effectiveness and value for patients

Mat Gardner, Deputy Chief Information Officer, will provide a verbal update in the meeting.

Council of Governors

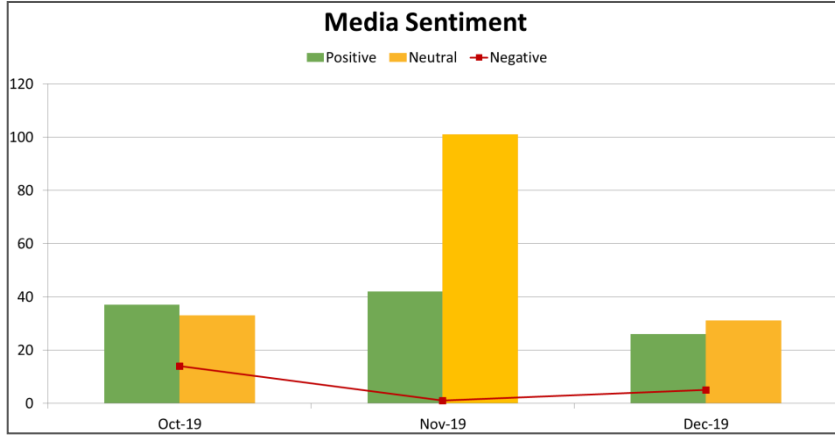
AGENDA REFERENCE:	COG/20/02/06
SUBJECT:	Trust Engagement Dashboard
DATE OF MEETING:	13 February 2020
ACTION REQUIRED	Pat McLaren, Director of Community Engagement + Fundraising
AUTHOR(S):	Pat McLaren, Director of Community Engagement + Fundraising
EXECUTIVE SPONSOR	Choose an item.
LINK TO STRATEGIC OBJECTIVES:	<p>SO1 We will.. Always put our patients first through high quality, safe care and an excellent patient experience.</p> <p>SO2 We will.. Be the best place to work with a diverse, engaged workforce that is fit for the future.</p> <p>SO3 We will ..Work in partnership to design and provide high quality, financially sustainable services.</p>
EXECUTIVE SUMMARY	<p>The Trust has launched its first patient and public participation and involvement strategy in March 2019, a measure of the progress of the deployment of this strategy, which is one of the Trust’s Quality Priorities for 2019-20, is the attached Engagement Dashboard.</p> <p>The Dashboard addresses:</p> <ul style="list-style-type: none"> - Level of success in managing the Trust’s reputation in the media and across digital and social platforms - Our engagement with patients, staff and public via our social media channels - The Trust’s website and levels engagement with this key platform - Patient enquiries via our website - Patient/public feedback on the independent platforms - Engagement with the Trust through the Freedom of Information process. <p>Key items to note in Q3</p> <ul style="list-style-type: none"> ● Media – Predominately neutral or positive in the quarter. Key media includes: <ul style="list-style-type: none"> ➤ October: Positive - cancer scanner, mouth cancer screening, CEO departure Negative – vermin in kitchen ➤ November (pre-election period): Positive – New CEO, new 1.5m birth centre, political candidates champion new hospital for Warrington, WG Inspiration Awards – 2 winners. Negative – income from parking charges ➤ December: SOS health visit, Santas on Scooters, Warrington Wolves community blitz, many festive stories. Negative: Car parking, re-run of ‘top stories of

	2019' – cake incident.			
	<ul style="list-style-type: none"> • Twitter we continue to build our following and have reached 11.1K • Facebook likes were circa 15K in the quarter with reach exceeding 17K. We took part in the system 'Help Us to Help You' winter campaign just prior to Xmas and did a social media takeover in ED and UCC which saw very high engagement around the <i>Choose Well</i> agenda. Our Mental'elf day saw huge engagement by our community, celebrating our healthcare professionals shining the light on good mental health • Website visitors peaked at 29K in October before falling back as is usual during December. • Website accessibility – mobile phone devices remain the most commonly used platform • Website enquiries – we dealt with 343 patient enquiries through our website • FOI We have received, processed and returned 114 Freedom of Information requests of varying degrees of complexity <p>Patient Feedback: We continue to be highly rated on independent feedback platforms, despite low numbers of ratings in the quarter the Trust retained its 4.5* rating on NHS Choices. <i>To note that NHS Choices has since ceased the publication of ratings for individual sites and are now only reporting on Trusts</i></p>			
PURPOSE: <i>(please select as appropriate)</i>	Information X	Approval	To note X	Decision
RECOMMENDATIONS	The Council of Governors is requested to receive and note the Trust's engagement dashboard for Q3.			
PREVIOUSLY CONSIDERED BY	Committee Trust Board			
	Agenda Ref.	BM/20/01/11		
	Date of meeting	29 January 2020		
	Summary of Outcome	Noted		
NEXT STEPS: <i>State whether this report needs to be referred to at another meeting or requires additional monitoring</i>	None			
FREEDOM OF INFORMATION STATUS (FOIA):	Release Document in Full			
FOIA EXEMPTIONS APPLIED: (if relevant)	Choose an item.			

WHH Engagement Dashboard

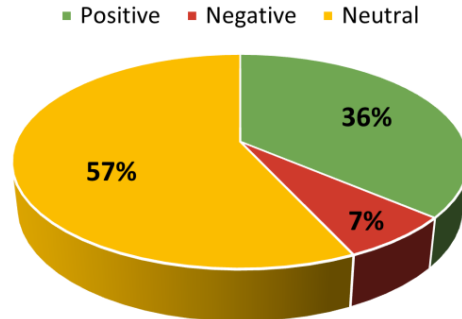
Q3: October – December 2019

We are WHH & We are
PROUD
to make a difference

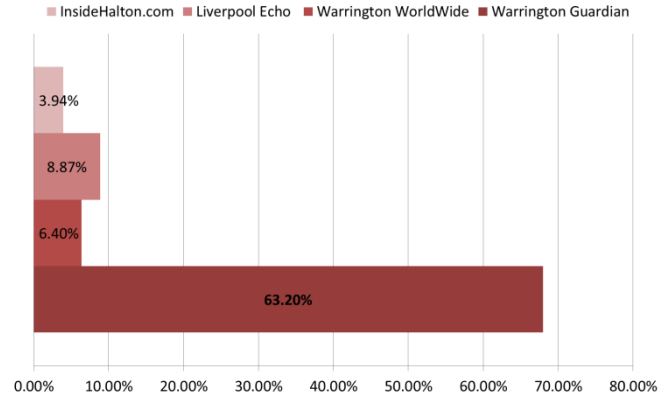


Total Media Coverage in 2019: 1,539

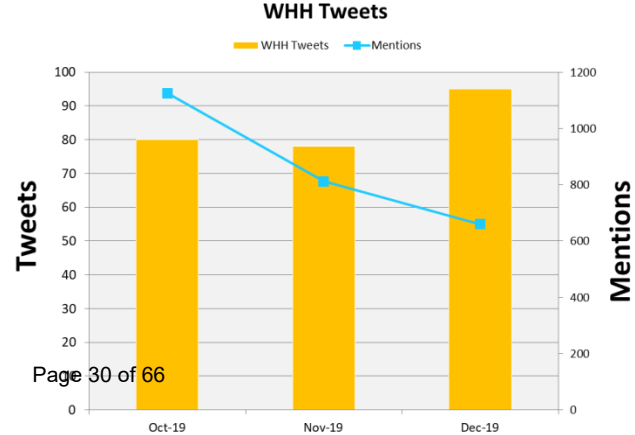
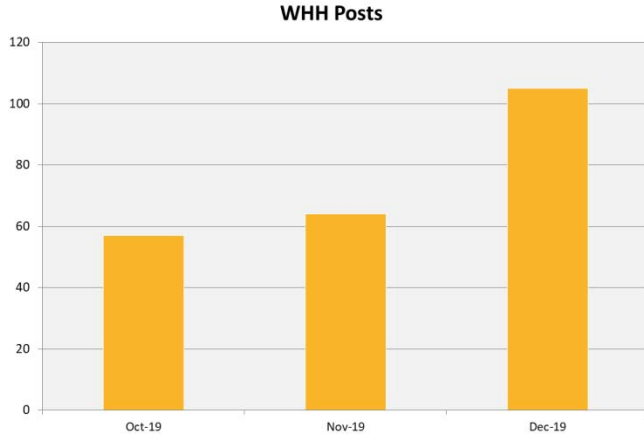
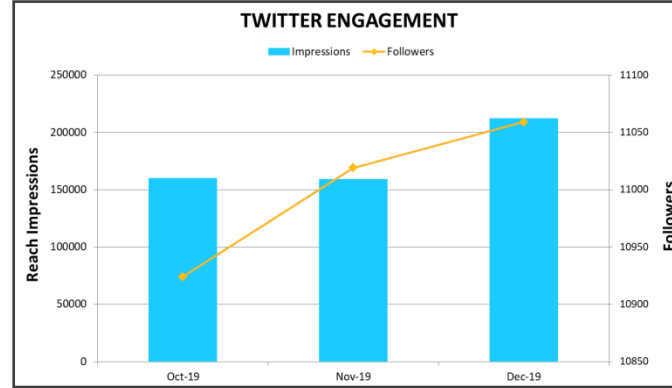
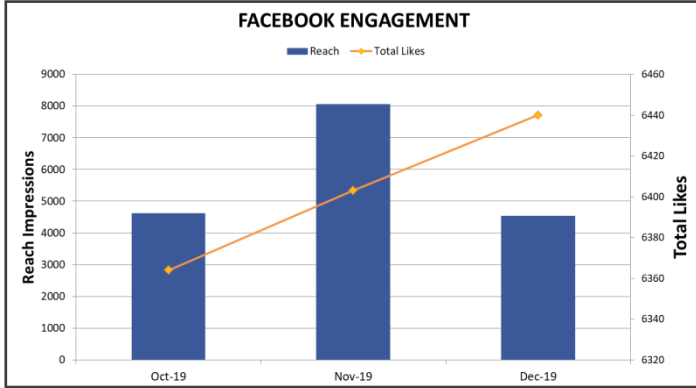
Total Media Coverage October - December 2019



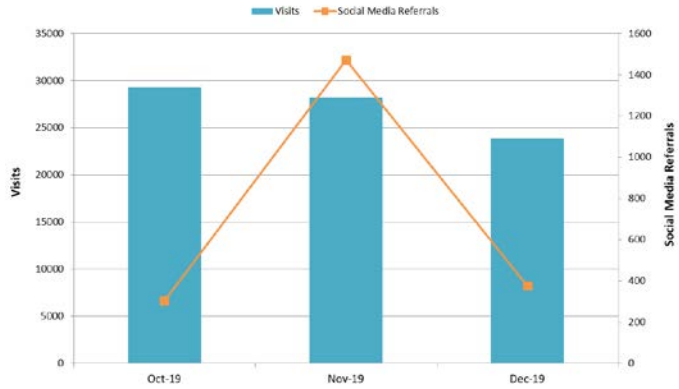
Top Sources October - December 2019



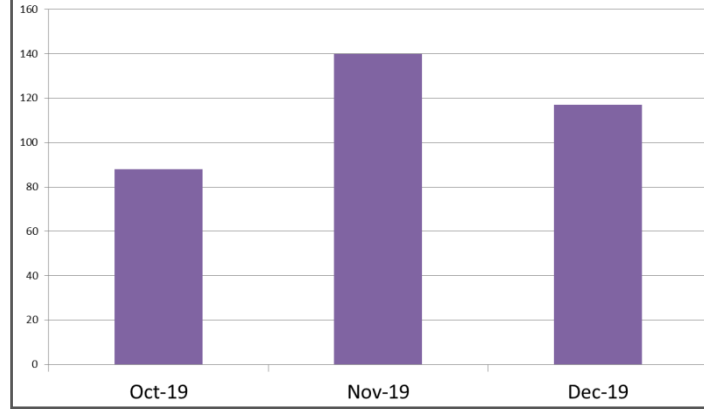
Social Media: Q3



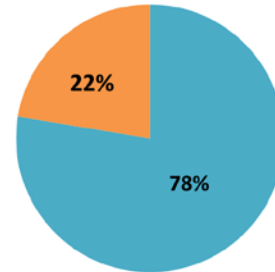
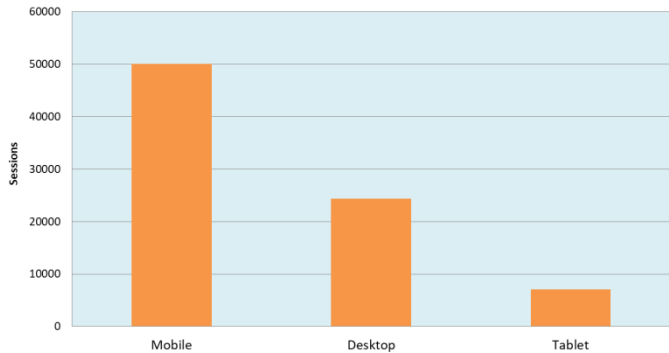
WEBSITE ENGAGEMENT



Patient enquiries handled via the website

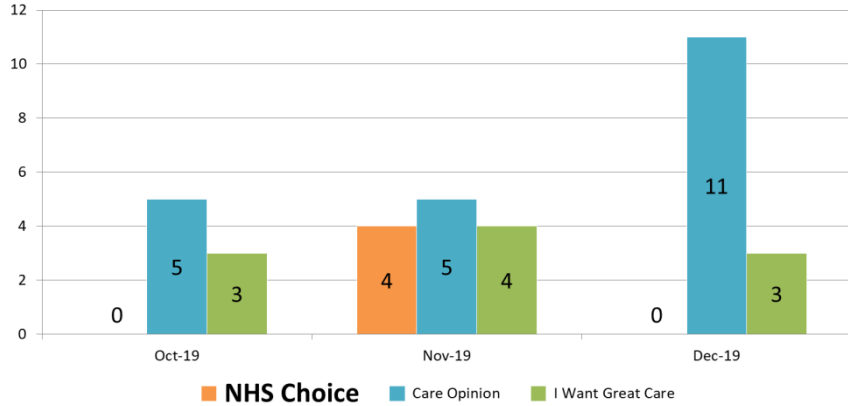


DEVICE USAGE



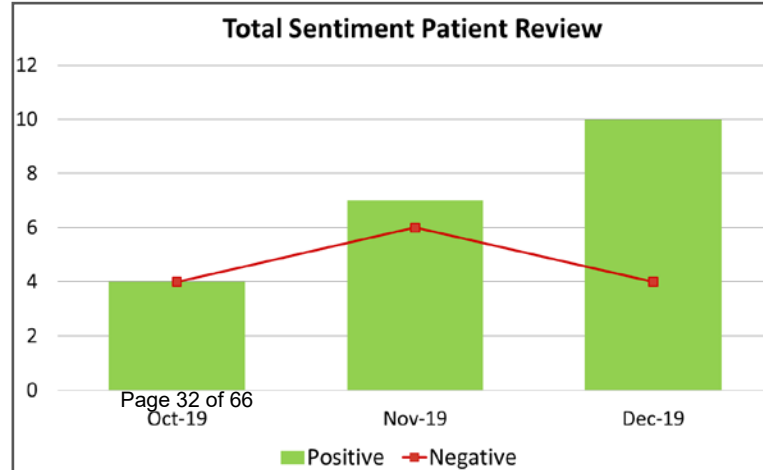
Patient Experience: Q3

Total Patient Reviews



**Total online
Patient Feedback
in 2019: 207**

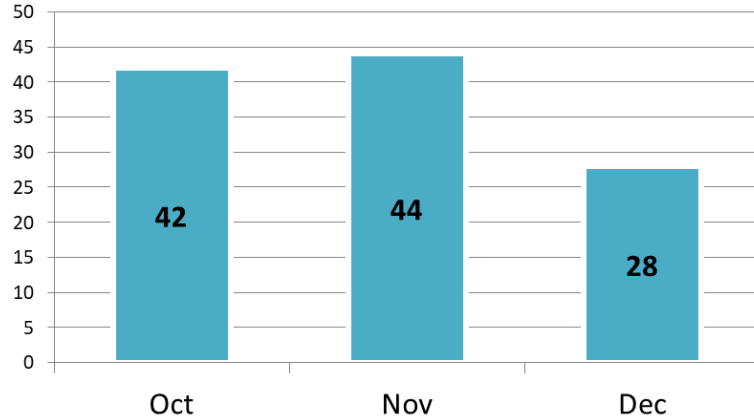
Total Sentiment Patient Review



Freedom of Information: Q3

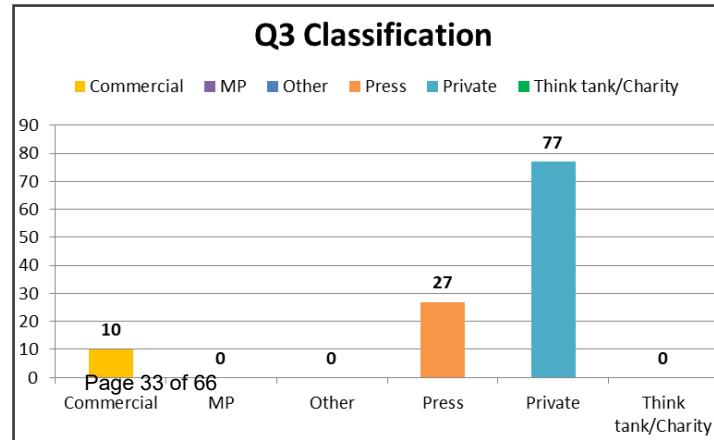
Page 33 of 66

Total FOI's



Total number of documented
FOI requests
in 2019: **569**

Q3 Classification



Page 33 of 66



Patient and Public Participation and Involvement 2019-20 – Q3 Report
 Report to the Patient Experience Committee and Governors Engagement Group January 2020
 Lead: Pat McLaren, Director Community Engagement

Quality Priority Patient Experience Priorities	
Development of the Trust Patient and Public Participation and Involvement Strategy with a number of agreed measures for delivery.	
Why we chose this priority	What success will look like
We wanted to make a formal commitment to creating opportunities for the participation and involvement of all groups (patients, families, carers, staff, communities, advocates, partners and other stakeholder groups). We want to ensure that ways and means to engage are accessible to all and that all voices are heard and views considered and incorporated wherever possible in service delivery, design and transformation through the championing of co-production.	<ol style="list-style-type: none"> 1. Successful deployment of our work plan as described: Achieved/representation 2. Engagement by services – recorded and reported, evidenced in outcome reporting 3. Increased engagement with and participation and involvement of our wider public and advocacy partners – measured through recruitment in numbers and representation 4. Attendance at training/coaching events 5. Delivery of celebration event(s) 6. Reported evidence of patient and public involvement and participation and their views in all service change programmes. 7. Monitoring of involvement of hard to reach individuals and groups and those with protected characteristics.
Implementation Plan	How progress will be monitored and reported
<p>The PPP&I workplan will be deployed across the year</p> <p><i>To note: Programme subject to change dependant on availability. Further events to be added including specific community events and festivals.</i></p>	<ul style="list-style-type: none"> • The deployment of the annual work plan will be reported through the Patient Experience Committee and the Governor’s Engagement Group with a GEG report to the Council of Governors • A quarterly Quality Report will track milestones for the Quality Account priorities.
Progress Report – Q3 Oct – Dec 2019 Inclusive	
Work plan	Item
1. Your Health Matters – winter (Sepsis, Flu and Choose Well)	<p>1. Your Health Matters</p> <p>The Trust is part of a system-wide <i>Choose Well</i> winter campaign (Halton, Knowsley, St Helen’s and Warrington) and commenced deployment of the system plan (commissioner-led) ‘<i>Help us to Help You</i>’ through our digital platforms (social media, website) This joined up campaigning has seen significant engagement especially in December. Further communications was supported by Press Release</p>

<p>4. Planned for Quarter 4</p>	<p>appointments.</p> <p>3c. Black History Month raising ED&I in the Trust with stand in main entrances</p> <p>This again was well received by patients and visitors - Catering team supported by making Halal/ Vegetarian nibble boxes for sampling.</p> <p>3d. Accessible Information Standards Group</p> <p>The independently-chaired AIS Group met on 4th November 2019 (next meeting 13 Jan 2020)</p> <p>Key items for the period included:</p> <ul style="list-style-type: none"> • Patient Letters – an excellent, highly attended engagement and involvement workshop ‘<i>Be the Change</i>’ event was held in November at Whitecross Centre comprising staff, volunteers, advocates and Governors. Considerable feedback was provided with the aim of improving letters – including accessibility factors, directions and maps. This project ‘Letters Be the Best’ is subject to an action plan which will be monitored through the AIS group • Informatics – flagging and alerts • Reasonable Adjustments – patient story hearing impairment support to access care • FFT – alternative formats and languages <p>4, Plans for next Quarter</p> <p>4a Nutrition Strategy</p> <p>Continue with nutrition strategy deployment, staff awareness and education plus engagement and involvement of patients in tastings, menu development.</p> <p>4b Maternity Voices</p> <p>Meeting with Maternity Voices service user group to inform development of new Birth Centre. Deploy communications and fundraising campaign to support Birth Centre engagement and involvement.</p> <p>4c. Heart Health Month - February</p> <p>Comprehensive integrated awareness, education and involvement programme throughout February inclusive of all stakeholder groups. Support for Staff also confirmed through OH and Wellbeing Service.</p>
Enclosure	Trust Engagement Dashboard Oct – Dec 2019

REPORT TO BOARD OF DIRECTORS

AGENDA REFERENCE:	BM/19/11/106			
SUBJECT:	Chief Executive's Briefing			
DATE OF MEETING:	27 th November 2019			
AUTHOR(S):	Simon Constable, Chief Executive			
EXECUTIVE DIRECTOR SPONSOR:	Simon Constable, Chief Executive			
LINK TO STRATEGIC OBJECTIVE: <i>(Please select as appropriate)</i>	SO1 We will...Always put our patients first through high quality, safe care and an excellent patient experience.			✓
	SO2 We will...Be the best place to work with a diverse, engaged workforce that is fit for the future.			✓
	SO3 We will...Work in partnership to design and provide high quality, financially sustainable services.			✓
LINK TO BAF RISK:	All			
EXECUTIVE SUMMARY (KEY ISSUES):	This report provides the Trust Board with an overview of matters on a range of strategic and operational issues, some of which are not covered elsewhere on the agenda for this meeting.			
PURPOSE: (please select as appropriate)	Information ✓	Approval	To note	Decision
RECOMMENDATION:	The Board is asked to note the content of this report.			
PREVIOUSLY CONSIDERED BY:	Committee	Not Applicable		
	Agenda Ref.			
	Date of meeting			
	Summary of Outcome			
FREEDOM OF INFORMATION STATUS (FOIA):	Release Document in Full			
FOIA EXEMPTIONS APPLIED: (if relevant)	None			

SUBJECT	Chief Executive's Briefing	AGENDA REF:	BM/19/11/106
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1. BACKGROUND/CONTEXT

This report provides the Trust Board with an overview of matters on a range of strategic and operational issues, some of which are not covered elsewhere on the agenda for this meeting.

The Board is asked to note the content of this report.

2. KEY ELEMENTS

2.1 Briefings shared with the Board since the last meeting

- DH Health Infrastructure Plan
- Briefing on the 2019 political party conferences
- The Queen's Speech 2019
- NHS Provider letter to the Prime Minister in relation to Annual Pension Tax Allowance
- WHH Safety Summit Programme November 2019
- Winter Letter from Pauline Philip DBE, National Director of Emergency and Elective Care NHSE/I and Bill McCarthy, Executive Regional Director (North West)

2.2 Key issues

2.2.1 Introduction

I am honoured to accept the appointment as Chief Executive of WHH, announced 14th November 2019 following ratification by our Council of Governors.

This is my first Trust Board briefing as Chief Executive and I will be submitting a written report henceforth. My report will highlight some key issues at the time of writing that may or may not be covered in other standing items or the cycle of business.

2.2.2 New radiology equipment

We are delighted to be one of 70 trusts earmarked to receive new cancer screening equipment. This is a major investment which will support detecting cancers much earlier when they are easier to treat. This is a key pillar of the NHS Long Term Plan, and sits well with our involvement as a Rapid Diagnostic Centre as well as the development of a new cancer diagnostic standard. It also is beneficial to the non-elective pathway in terms of modern and efficient scanning. The exact amount of funding is yet to be determined. Replacement of our aging CT and MR equipment was already part of our capital programme.

2.2.3 Change to the Trust Name

The work on 'Teaching' status has been progressing over the past two years and in that time we have received both regional and national recognition for the work we have done in diversifying our workforce. We have considerable university and college affiliations with formal teaching programmes in place for a wide range of staff groups beyond traditional medical education, including nursing, allied health professionals, health scientists, nurse associates and many more. In addition, we have an enviable apprenticeship and work experience programme which is helping provide learning and development for our own staff as well as providing that vital first step to young people wanting to get on the NHS career ladder.

The Trust's Council of Governors ratified the amendment to the Foundation Trust Constitution to reflect the change to the Trust's name to reflect the achievement of 'Teaching' status. Henceforth, the Trust will be known as: *"Warrington and Halton Teaching Hospitals NHS Foundation Trust."*

2.2.4 Governor Elections

The Trust held Public and Staff Governor Elections between 12th September and 8th November 2019.

Five constituencies were elected to with unopposed candidates:

- a. Public - Appleton, Farnworth, Hough Green, Halton View, Birchfield – Coin McKenzie (Re-elected)
- b. Public - Birchwood, Rixton and Woolston – Anne Robinson (re-elected)
- c. Public - Lymm, Grappenhall, Thelwall – Janice Hall
- d. Public - Norton South, Halton Brook, Halton Lea – Dave Marshall
- e. Staff - Clinical Scientist or Allied Health Professional – Louise Spence (re-elected)

Two constituencies were contested:

- a. Public - Culcheth, Glazebury and Croft, Poulton North – Keith Bland MBE (re-elected)
- b. Staff - Nursing & Midwifery – Lesley S Mills

No candidates were nominated for five Constituencies and remain vacant:

- a. Public - Bewsey and Whitecross, Fairfield and Howley
- b. Public - Broadheath, Ditton, Hale, Kingsway, Riverside
- c. Public - Rest of England and Wales
- d. Staff - Medical & Dental
- e. Staff – Support

2.2.5 Strategic Alliance with Bridgewater Community Healthcare NHS Foundation Trust

We continue to work closely with our Bridgewater colleagues to further develop an integrated care offer for acute and community services in the boroughs of Warrington and Halton consistent with the NHS Long Term Plan. Both trusts have been part of an NHS

Improvement transformational change leadership programme with the final session in York in November.

2.2.6 System Working

We had our first System Assurance Meeting with NHSE/I on 30th September 2019 where we were held to account as a system for performance across all domains. For the purposes of this forum, the system constitutes ourselves, Bridgewater and NHS Warrington and NHS Halton CCGs. The first meeting was very positive, with a focus on care quality and service delivery. We have together submitted a system financial recovery plan up to 2023/2024, with a weekly CEO oversight meeting and a Programme Management Office established to oversee the key programmes of improvement work that traditionally would have sat in the organisational silos of CIP/QIPP.

2.2.7 Emergency Access Performance

NHSE/I has undertaken a round of “Winter Stocktake” calls with all North West trusts to understand common challenges and the overall position. Winter appears to have started early for all of us across the North West. We are deploying winter capacity in the shape of Ward K25, being a large brand new facility with up to 18 beds. Our strategy for winter is prioritising assessment capacity for Same Day Emergency Care, though a 24/7 Combined Assessment Unit in the existing GPAU footprint, as we develop plans for a new assessment plaza in Appleton Wing adjacent to ED.

2.2.8 Innovation and Improvement

On 20th November 2019 I attended the launch day of the NIHR Applied Research Collaboration for the North West Coast (ARC NWC). The themes are a) improving population health, b) person centred complex care, c) equitable place based health and care and d) health and care across the life course. All of this is very consistent with the NHS Long Term Plan and our priorities locally and we need to make sure we are fully engaging with this programme of work through our Quality Academy, and linking in with other resources such as the Innovation Agency and the universities.

We have our second Patient Safety Summit on 26th November 2019 bringing learning from incidents, claims and complaints across the Trust. The improvement themes for this year are caring for patients with learning disability, end-of-life care and the role of human factors in Never Events.

2.2.9 EPMA

Electronic Prescribing and Medicines Administration through our Lorenzo EPR has commenced deployment across Warrington Hospital in November, having successfully being trialled in Halton Hospital. After significant planning, this is in a series of stages with appropriate clinical, pharmacy and IT support to ensure safety and effectiveness. It has started in the Burtonwood Wing wards. The early feedback is positive with reports that administration of oral medication is more efficient. We also expect to see efficiencies in TTO medications as well as there being no need to rewrite prescriptions for long-stay patients. EPMA has always been regarded as the important missing link in our Lorenzo EPR implementation.

2.2.10 Award Ceremonies

The last couple of months has seen several successful award ceremonies. We had our *Thank You Awards* on 4th October 2019 which has been described as our best yet. The ambition is to progress this even further next year to be even more inclusive. Event planning has already started. We will however have a challenge to find a suitably sized venue within the boroughs.

The Chairman and I also attended the *Warrington Guardian Inspiration Awards* on 14th November 2019 with the whole community of Warrington celebrating some extraordinary things in all walks of life, including sports, education and neighbourhood heroes. The Trust was well represented with our Emergency Department winning the Hospital Heroes award with Micke Hearne from the security team and our Breast Screening Team worthy runners up. Our hospital charity was delighted to receive Charity of the Year and our youngest Charity ambassadors Ruben and Elena won Junior Charity Champions.

There was also a fantastic win for WHH at the Burdett Trust National Nursing Retention Awards in London on 19th November 2019. We were one of just eight trusts recognised in these prestigious awards, winning the 'Best Career Planning and Development Offer' award and was also highly commended for 'Best Use of Data (to inform nurse recruitment and retention initiatives). The Burdett Trust recognised the progress in reducing nurse turnover rates which is down by 3.22% since November 2018 and the increasing number of internal promotions. This was also recognised by the CQC in its July report: "The Trust has introduced a number of alternative nursing roles including 28 advanced care practitioners and 4 nurse consultants. This ensures the workforce is adaptable and assists in covering hard to fill roles, as well as providing innovative career pathways".

Finally, our Forget-Me-Not unit garden was visited by Royal Horticultural Society judges visited in the summer and have awarded it 'Outstanding' Garden in the Community. This has been made possible by work from volunteer Pete, Jane Bradbury, Governor Alison Kinross as well as Keith our Gardener.

2.2.11 Staff Recognition

Team of the Month 1 (August): RTT Team

The RTT Team worked additionally for two months to ensure that the vital RTT national standard was met, meaning patients received their treatment in a timely manner. The RTT team provided the CBUs with appropriate information to comply with the patient access policy for patients with multiple cancellations. The RTT Team have tracked patients to make sure clinical decisions were made pushing for diagnostic tests to be done and chasing clinical notes so that the patient was progressed quickly to their next required encounter.

Team of the Month 2 (August): Catering Department

The team developed a dementia friendly snack box to include a range of finger foods. The team ensured that 5 out of 5 food hygiene scores were achieved from the local authority

assessment. Also, during the recent national concerns about listeria the team made over 600 sandwiches a day in house and at short notice.

Team of the Month (September): Discharge Unit Team

The Discharge Unit Team have raffles to raise money for newspapers and activities for the patients while they wait in the Discharge Unit. They support each other by changing shift patterns at short notice always putting the patients first in challenging situations.

Employee of the Month (September): William Brunt, GPAU Porter

Billy is one of the first and last people patients see on the unit as he always greets them with a smile and talks to them to reduce stress and fear levels. Billy read the newspaper everyday to a blind lady who was on the unit and took the time to help her with her meals. Billy makes everyone's day brighter and is always looking to help and improve patients experience.

3. RECOMMENDATIONS

The Board is asked to note the content of this report.

REPORT TO BOARD OF DIRECTORS

AGENDA REFERENCE:	BM/20/01/05			
SUBJECT:	Chief Executive's Briefing			
DATE OF MEETING:	29 th January 2020			
AUTHOR(S):	Simon Constable, Chief Executive			
EXECUTIVE DIRECTOR SPONSOR:	Simon Constable, Chief Executive			
LINK TO STRATEGIC OBJECTIVE: <i>(Please select as appropriate)</i>	SO1 We will...Always put our patients first through high quality, safe care and an excellent patient experience.			✓
	SO2 We will...Be the best place to work with a diverse, engaged workforce that is fit for the future.			✓
	SO3 We will...Work in partnership to design and provide high quality, financially sustainable services.			✓
LINK TO BAF RISK:	All			
EXECUTIVE SUMMARY (KEY ISSUES):	This report provides the Trust Board with an overview of matters on a range of strategic and operational issues, some of which are not covered elsewhere on the agenda for this meeting.			
PURPOSE: (please select as appropriate)	Information ✓	Approval	To note	Decision
RECOMMENDATION:	The Board is asked to note the content of this report.			
PREVIOUSLY CONSIDERED BY:	Committee	Not Applicable		
	Agenda Ref.			
	Date of meeting			
	Summary of Outcome			
FREEDOM OF INFORMATION STATUS (FOIA):	Release Document in Full			
FOIA EXEMPTIONS APPLIED: (if relevant)	None			

SUBJECT	Chief Executive's Briefing	AGENDA REF:	BM/20/01/XX
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1) BACKGROUND/CONTEXT

This report provides the Trust Board with an overview of matters on a range of strategic and operational issues, some of which are not covered elsewhere on the agenda for this meeting.

2) KEY ELEMENTS

2.1 Briefings shared with the Board since the last meeting

- Developing Genomics in the North West
- October 2019 Healthcare Evaluation Data Trust Mortality Report
- Cheshire & Merseyside Health & Care Partnership Chair's Communication
- Briefing on the Queen's Speech December 2019
- Letter to partners in relation to winter pressures
- Thank you letter to Urgent & Emergency Care staff

2.2 Key issues

2.2.1 Introduction

My report will highlight some key issues at the time of writing that may or may not be covered in other standing items or the cycle of business.

2.2.2 Visit by Secretary of State and Briefings of Prospective Parliamentary Candidates

The Chairman and I were delighted to host a visit by the Secretary of State for Health and Social Care, Rt Hon Matt Hancock MP, on 5th December 2019. We were able to brief him on the assessment capacity issues within our Emergency Department, showcase our successful roll out of Electronic Prescribing and Medicines Administration (EPMA) as well as discuss developing the strategic case for a new hospital.

The Chairman and I also hosted two briefing sessions for prospective parliamentary candidates for our four local constituencies on 27th November 2019 and 2nd December 2019 ahead of the General Election and in accordance with NHS Pre-election Period guidance. I delivered an overview presentation about our Trust, performance and key issues (such as improving access times in A&E, system financial recovery, our continuous improvement in quality and how we intend to invest, wisely, in our estate). We also provided a brief tour of our Emergency Department and two of our acute wards to demonstrate some of the challenges within our current buildings as well as what we have done to make things as good as possible (for example, the redevelopment of our Acute Cardiac Care Unit on A3).

2.2.3 New Warrington Hospital

I was pleased to attend a meeting convened by Professor Steven Broomhead, Chief Executive, Warrington Borough Council to discuss how we can further progress the case for a new hospital for Warrington. Andy Carter MP (Warrington South) and Charlotte Nichols MP (Warrington North) met with Councillor Russ Bowden, Leader of Warrington Borough Council and Councillor Rebecca Knowles, Cabinet Member, Statutory Health and Adult Social Care, to develop our shared approach. All agreed that the current facilities for an expanding town with an increasingly senior population were not fit for purpose despite the dedicated efforts of staff and other health and social care professionals.

We agreed that we would progress the case for a new, future-proofed and technologically-driven hospital that reflects the wider health needs of both Warrington and Halton populations. This would be made possible via a single estates strategy enabling the provision of a comprehensive and seamless range of acute and community clinical services alongside support services to maximise well-being and prevention, clear links to wider social care support and an opportunity for the establishment of a university-led medical school. While the size and scope of the new hospital will be clinically driven, and nothing has been decided yet, it was agreed that a Town Centre site would be most desirable to support easy patient access. Both MPs and the Council agreed to work together co-operatively in order for the new hospital to become a national priority for investment.

It is important for us to link developments in Warrington to those planned improvements in Halton as part of a single estates strategy. The two are complementary proposals.

2.2.4 Trust Mortality Rates

Under the leadership of Dr Phil Cantrell, Consultant Radiologist and the Lead Clinician for Mortality, the work of the Trust Mortality Review Group continues to make progress in understanding our mortality data both quantitatively and qualitatively to drive improvements. This work triangulates with independent feedback we get from our monthly Healthcare Evaluation Data reports which have shown marked improvements in recent months (although data reporting periods are always by necessity “in arrears”). HSMR has a green (“as expected”) rating for the period September 2018 to August 2019). Similarly, SHMI has a green (“as expected”) rating for the period August 2018 to July 2019. Continued improvements in data quality, ostensibly clinical documentation and then the resultant clinical coding, gives greater confidence so that the Structured Judgement Reviews can concentrate on learning and driving improvements in care.

Developing and implementing the Medical Examiner role at WHH by April 2020 as part of the national roll-out is the next phase in this improvement work.

2.2.5 Organisational Change

Since Project Springboard and the launch of our Clinical Business Unit operational structure in April 2016 we have seen a number of organisational developments and improvements as we need to evolve and adapt in the wider operating environment. On 1st January 2020 we launched a merged Clinical Business Unit of Surgical Specialties, comprising Musculoskeletal Care and Specialist Surgery as well as the development of the Clinical Support Services Unit, comprising Diagnostics, Outpatients and Therapies.

2.2.6 2020 – The Year of The Nurse & Midwife

2020 is Florence Nightingale's bicentennial year, designated by the World Health Organisation as the first ever global Year of the Nurse and Midwife. Nurses and midwives make up the largest numbers of the NHS workforce, as highly skilled, multi-faceted professionals from a host of backgrounds. 2020 is a time to reflect upon these skills, the commitment and expert clinical care they bring, and the impact they make on the lives of so many. It is also an opportunity to say thank you to the professions, to showcase their diverse talents and expertise, and to promote nursing and midwifery as careers with a great deal to offer. The NHS is planning a series of activities to celebrate and WHH will participate fully in this programme. This will include the Florence Nightingale 200th birthday celebrations in May. WHH will have an event calendar to support both the national and more local events.

2.2.7 Joint Executive Team Meetings with Bridgewater Community Healthcare NHSFT

We continue to have fortnightly meetings with our executive colleagues at BCHFT in addition to other system meetings. We are working on developing a shared agenda for a programme of work that covers clinical/operational/quality delivery and improvement, system financial recovery as well as the wider integration agenda so welcomed by all of our partners.

2.2.8 Winter Pressures

Earlier this month, I was very fortunate to be in the position of being able to thank staff for their individual and collective contribution to the achievement of the 95% 4 hour emergency access standard on Saturday 11th and Sunday 12th January 2020. This key NHS constitutional standard is a key quality standard that is easily measurable and yet a surrogate for so many domains of care quality, including patient safety, clinical effectiveness and patient experience.

This is historically one of the most difficult times of year, especially when I reflect upon previous years when we have been in a very different situation. It is of course as multifactorial as when things are not going quite so well, and the weather has, for instance, been relatively kind to us thus far. However, it is a testament to the hard work of many (including system partners who I have also been able to thank) and how much importance we have given to improvement over the last few months, including the actions around so called 'super-stranded' long length-of-stay patients to help patient flow. Our 'new' Combined Assessment Unit only opened 24/7 on 6th January 2020 to deliver the assessment capacity we need to make good clinical decisions about the right patients in the right place at the right time.

It is still the very early days of winter and the marked improvement has not, unfortunately, been sustained to that level; we are certainly not celebrating. However, our resilience is much improved and I do consider it important to recognise the things that have had a positive impact so that we can do more.

Clearly this is very much a team approach but I would like to take this opportunity to specifically thank my colleagues, Kimberley Salmon-Jamieson (Chief Nurse), Chris Evans (Chief Operating Officer) and Dr Alex Crowe (Acting Medical Director), for their continued, responsive and very visible executive leadership throughout. I know that staff under pressure really do appreciate this level of support.

2.2.9 Development of Non-NHS Income Activity

For the avoidance of doubt this Trust does not, nor has it ever, charged NHS patients for NHS treatment - neither have we ever intended to do so. Hence, I am able to confirm that following discussions over the summer and culminating in a report to the Board's Part 2 session in September 2019 (item PBM/19/09/59) we have formally removed the fee-paying *My Choice* offer to remove any possibility of misunderstanding by patients or other interested parties in this regard. No patients were ever treated under the *My Choice* scheme in any case.

NHS organisations are permitted to carry out and receive income via private patient work provided it does not impact upon NHS time or patient care. Private patient income is recognised as a legitimate income stream to support a Trust's sustainability. Like almost all other NHS acute Trusts, WHH carries out a very small amount of chargeable patient activity, including private and overseas patients. This is established and well within the limits described in the Health and Social Care Act 2012 which states that Foundation Trusts' private patient income cannot exceed the amount of income received from their primary focus of NHS health care.

The Trust carried out a benchmarking exercise in the summer of last year looking at trusts in Cheshire and Merseyside and the surrounding area. The outcome of the exercise highlighted that compared to other trusts, WHH generates the least income from private patients. While there is potential to develop our private patient activity within certain specialties, it should be noted that this activity will be clearly identified as fee-paying private activity, ie non-NHS.

2.2.10 NHS England Responsible Officer Compliance

Further to the Trust Board receiving the GMC Revalidation Annual Report in November 2019, the statement of compliance is included as Appendix 1 for noting by the Board.

2.2.11 Notification of Change of Status Update

The CQC have provided the Trust with a new Certificate of Registration (attached as Appendix 2) to reflect the change in registration relating to the name of the Trust.

2.2.12 Volunteer Celebration Event

The Chairman, myself and Kimberley Salmon-Jamieson, Chief Nurse, were delighted to host our first Volunteer Celebration Event at the Village Hotel in Warrington on 10th December 2019. This was a great way to officially recognise and celebrate the diverse work done by our volunteers and we hope it will be the first of many.

2.2.13 Employee Recognition

Team of the Month (October 2019): Audiology

Audiology work closely with paediatric hearing aid staff (teaching of the deaf) . When a child's hearing aid is identified as being faulty by their teacher these staff members meet the team - usually in the carpark during the school day - to deliver the hearing aid without any detriment to the child's listening and learning environments. Audiology Ambulance patients appointments are always accommodated for regardless of arrival time and the team purchase lunch for the patients if there is any delay in transport to take them home. A staff member is always on hand sit with them and reassure them while they wait.

The team has also established a service at HMP Risley to ensure inmates have access to audiology services without the need of a prison service providing escort for hospital appointments.

Employee of the Month (October 2019): Leah Ward

Leah was tasked with the *Thank You Award* nomination videos working around staff members' shifts and re-filming when they have requested or thought of something else they would like to add to their nomination, often at short notice. Leah has excelled by only just starting her course to learn film so her skills are self-taught. Leah also made a leaving video for Mel Pickup going out to interview staff to pull together a lovely send off for Mel. Leah joined the team four years ago as an apprentice and has flourished; she has also taken Ruby on work experience under her wing showing her film and editing skills.

Team of the Month (November 2019): Combined Assessment Unit

The CAU is a new unit comprising GPAU and SAU, combining assessment capacity in one facility – surgical and medical assessment areas. The team have embraced this change wholeheartedly following a successful test of change in September 2019 and have done so at short notice and despite the fact that the area has frequently been an escalation area for inpatients. The staff have worked together for an outstanding service. It has been commented upon that regardless of the fast paced turnaround of patients within the area, patients were never hurried or felt like they were being rushed. The team are very flexible and adapt to changing circumstances frequently.

Employee of the Month (November 2019): yet to be announced.

December 2019 and January 2020 awards have also yet to be announced.

This month I also launch my own Chief Executive's Award, in addition to the existing awards and nomination process for the above. In my future CEO briefings I look forward to being able to report on these as well.

3) MEETINGS ATTENDED/ATTENDING

The following is a summary of key external stakeholder meetings I have attended since the last Trust Board Meeting. It is not intended to be an exhaustive list.

November/December 2019

- Visit by Secretary of State for Health and Social Care, Rt Hon Matt Hancock MP
- Meetings with Prospective Parliamentary Candidates for Warrington, Halton and Weaver Vale
- Royal College of Physicians and Innovation Agency Research and Innovation in the NHS Event
- Mersey North West Leadership Society
- Warrington and Halton Palliative and End of Life Care Clinical Summit
- NHS Leadership Meeting, London
- Halton Provider Alliance

January 2020

- Meeting with Steve Broomhead, Chief Executive, and Russ Bowden, Leader, Warrington Borough Council, Andy Carter MP and Charlotte Nichols MP regarding New Warrington Hospital
- Gary Skentelbury, Director, Warrington Chamber of Commerce
- Official Reception with Commodore Phillip Waterhouse, HMS Eaglet, Liverpool
- Inaugural meeting – C&M Spinal Services Provider Board
- Interview with Sara Dumbell, BBC Radio Manchester re: Warrington New Hospital
- Warrington & Halton and Bridgewater System Finance Meeting with NHSE/I
- Warrington Health and Wellbeing Board
- Warrington Health Scrutiny Committee
- Warrington Provider Alliance
- Halton Provider Alliance

4) RECOMMENDATIONS

The Board is asked to note the content of this report.

Redevelopment of our hospitals (Update)

Simon Constable, Council of Governors

13th February 2020

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to make a difference

A Single Estates Strategy

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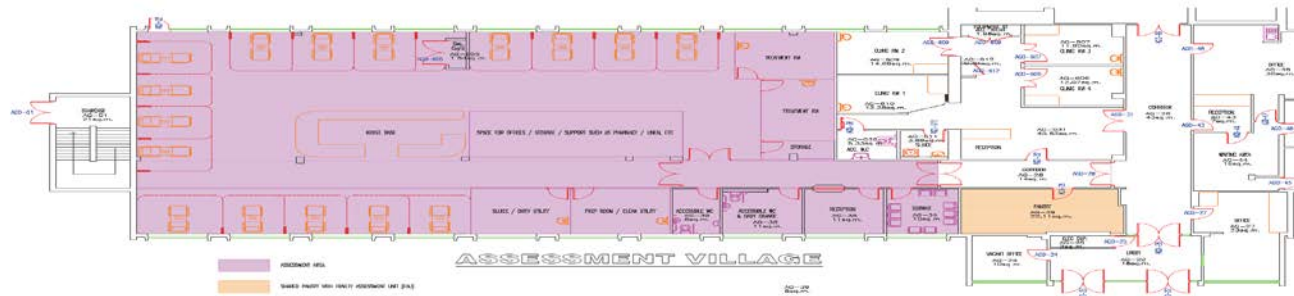
- Increase activity at Halton Hospital
- Address ED capacity constraints
- Deploy new MRI/CT scanners
- Open new midwife-led birth centre at Warrington
- Press ahead with joined-up business case for “new” hospitals
- Conclude restoration works linked to Kendrick Wing Fire (and re-examine clinical activity)
- Ease car parking issues at Warrington
- Single view of NHS estate across H&W



ED Assessment Plaza

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- Capital projects team have put together a high level drawing based on feedback from ED team and the space identified (Medical records, Appleton Wing)
- Purely indicative review to utilise the existing medical records footprint without any clinical sign off





Warrington's Maternity Service was named Maternity Service of the Year

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Plans for Halton Hospital and Wellbeing campus



A health & care (and education) asset for the community

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Some of our Estate now >100 years old. Essential maintenance costs £2m each year



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What have we done so far?

- Agreed locally the need for a “new” hospital (Warrington) and a hospital & wellbeing campus (Halton)
- Submitted bids to STP (next opportunity to bid likely to be 2021-22)
- Established governance arrangements for the projects
- Secured support from local politicians
- Received strong local press coverage on the future of the hospitals
- Met and consulted with staff and public at various events to capture feedback and views
- Developed draft SOCs
- Starting to explore funding options
- Secured funding to move some services into the community in Halton



Council of Governors

AGENDA REFERENCE:	COG/20/02/10			
SUBJECT:	Review the Trust's Compliance with its Licence 2019-20			
DATE OF MEETING:	13 February 2020			
ACTION REQUIRED	For assurance			
AUTHOR(S):	John Culshaw, Trust Secretary			
EXECUTIVE SPONSOR	Simon Constable, Chief Executive			
LINK TO STRATEGIC OBJECTIVES:	All			
	Choose an item.			
	Choose an item.			
EXECUTIVE SUMMARY	<p>This update details any changes to the various declarations of compliance with the Trust's Provider License.</p> <p>Following review of the Trust's compliance with its License, the Trust continues to declare full compliance with all conditions.</p>			
PURPOSE: <i>(please select as appropriate)</i>	Information	Approval	To note ✓	Decision
RECOMMENDATIONS	The Council of Governors is asked to note full compliance with all license conditions.			
PREVIOUSLY CONSIDERED BY	Committee	Choose an item.		
	Agenda Ref.			
	Date of meeting			
	Summary of Outcome			
NEXT STEPS: <i>State whether this report needs to be referred to at another meeting or requires additional monitoring</i>	None			
FREEDOM OF INFORMATION STATUS (FOIA):	Release Document in Full			
FOIA EXEMPTIONS APPLIED: (if relevant)	None			



Workforce Race Equality Standard Update February 2020

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What is the Workforce Race Equality Standard?

A standard implemented to ensure employees from black and minority ethnic (BAME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

It is mandated through the NHS Standard Contract, with annual reporting required.

The standard requests data across 9 indicators, comparing outcomes for White and BME Staff.



Workforce Race Equality Standard 2019

Workforce Race Equality Standard (WRES) report and action plan was produced for 2019 (1 April 2018 – 31 March 2019 data set).

WRES report and action plan is published on our Trust website.

The submission is a retrospective look at the previous year's data.

The next report will cover the period 1 April 2019 to 31 March 2020 and is due to be published in August 2020.



Workforce Race Equality Standard 2019: Key Learning

- Low numbers of BAME staff represented in senior roles.
- White staff are more likely to be appointed from short listing however the difference in likelihood has reduced since last year.
- BAME staff are slightly more likely to enter into formal disciplinary processes than White staff.
- The likelihood of BME staff accessing non-mandatory training and CPD is almost identical to the level of White staff.
- There has been a significant increase in the percentage of BME staff reporting bullying, harassment and abuse from patients, relatives and public in the last year.



Workforce Race Equality Standard 2019: Key Learning

- There has been a decrease in the number of staff experiencing harassment, bullying and abuse from both BAME and white staff in the last 12 months however there are still higher numbers of BAME staff experiencing this.
- Fewer BAME staff report that the Trust provides equal opportunities in career progression than White staff.
- The number of BME staff reporting experiencing discrimination in the last year from managers has increased since last year.
- The current Board of Voting members and the Board Executive membership all identify as White.



Workforce Race Equality Standard 2019: Model Employer

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- Published by National WRES Team
- Aim: to ensure BAME representation at all levels of the workforce, including leadership
- Aspirational goals set for the Trust
- Action plan drafted and approved by Strategic People Committee

	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028
Band 8a	2	3	4	5	6	6	7	8	9	10	11
Band 8b	1	1	2	2	2	3	3	3	4	4	4
Band 8c	0	0	0	1	1	1	1	1	2	2	2
Band 8d	0	0	0	0	0	0	0	0	0	0	0
Band 9	0	0	0	0	0	0	0	0	0	0	0
VSM	0	0	0	1	1	1	1	1	1	2	2



Workforce Race Equality Standard 2019: What we have achieved so far....

- Launch of Equality, Diversity and Inclusion Strategy
- Executive Listening Events
- Launch of BAME Staff Network December 2019
- Promotion of Targeted Leadership Development Opportunities.....
- And support with application
- Reviewed Growing as a Leader application process
- Launch of Equality in Employment Policy
- Amendments to Job Descriptions and Adverts



Workforce Race Equality Standard 2019: Next Steps

- Delivery of Model Employer action plan
- Review of recruitment cycle
- Civility and Respect Campaign
- Implementation of Equality Impact Assessment Training
- Targeted Career Management Workshops
- Reverse Mentoring
- Focus on Visible Diversity



Council of Governors

DATES 2020-2021

Meetings in the TCR, Warrington to be held 4.00pm-6.00pm

Meetings at Halton Hospital, Lecture Theatre to be held
 3.00pm-5.00pm

Date of Meeting	Agenda Settings	Deadline For Receipt of Papers	Papers Due Out
2020			
Thursday 13 February 3.00pm-5.00pm Lecture Theatre, HALTON EDUCATION CENTRE	w/c 20 January	Tuesday 4 February	Thursday 6 February
Thursday 14 May 2020 TCR Warrington 4.00pm-6.00pm	w/c 20 April	Tuesday 5 May	Thursday 7 May
Thursday 13 August 2020 3.00pm-5.00pm Lecture Theatre, HALTON EDUCATION CENTRE	w/c 20 July	Tuesday 4 August	Thursday 6 August
Thursday 12 November 2020 TCR Warrington 4.00pm-6.00pm	w/c 19 October	Tuesday 3 November	Thursday 5 November
2021			
Thursday 18 February 2021 3.00pm-5.00pm Lecture Theatre, HALTON EDUCATION CENTRE	w/c 25 January	Tuesday 9 February	Thursday 11 February