

**WRIGHTINGTON, WIGAN AND LEIGH TEACHING HOSPITALS NHS FOUNDATION TRUST**  
**MINUTES OF A MEETING OF THE BOARD OF DIRECTORS ("the Board")**  
**HELD ON 27 MAY 2020, 1.30PM**  
**BY VIDEOCONFERENCE**

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<b>Present:</b>	Mr R Armstrong	Chair (in the Chair)
	Dr S Arya	Medical Director
	Prof C Austin	Non-Executive Director
	Mrs A Balson	Director of Workforce
	Lady R Bradley DL	Non-Executive Director
	Dr S Elliot	Non-Executive Director
	Ms M Fleming	Chief Operating Officer
	Mr M Guymer	Non-Executive Director
	Mr I Haythornthwaite	Non-Executive Director
	Mrs L Lobley	Non-Executive Director
	Mr R Mundon	Director of Strategy and Planning
	Mr G Murphy	Acting Chief Finance Officer
	Mr S Nicholls	Chief Executive
	Ms H Richardson	Chief Nurse
	Prof T Warne	Non-Executive Director
<b>In attendance:</b>	Mrs N Guymer	Deputy Company Secretary
	Mr P Howard	Company Secretary
	Mrs L Sykes	Public Governor (observer)

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**Part 1**

**57/20 Chair and quorum**

Mr R Armstrong took the chair and noted that due notice had been given to all directors and that a quorum was present. He therefore declared the meeting duly convened and constituted.

**58/20 Apologies for absence**

No apologies for absence were received.

**59/20 Declarations of interest**

No directors declared an interest in any of the items of business to be transacted.

**60/20 Minutes of the previous meeting**

The minutes of the previous meeting held on 29 April 2020 were **APPROVED** as a true and accurate record.

## **61/20 Consent agenda**

The papers having been circulated in advance and the Board having consented to them appearing on the consent agenda, the Board RESOLVED as follows:

1. THAT the terms of reference for the Pandemic Assurance Committee be **APPROVED**.
2. THAT the Scheme of Reservation and Delegation be **APPROVED**.
3. THAT the Board Diversity Policy be **APPROVED**.
4. THAT the Board's self-certification against provider licence conditions G6 and FT4 be **APPROVED**.
5. THAT the Remuneration Committee terms of reference be **APPROVED**.
6. THAT the finance report be received and noted.
7. THAT the financial governance report be received and noted.
8. THAT the register of directors' interests be received and noted.
9. THAT the summary of directors' fit and proper person checks be received and noted.
10. THAT the summary of referrals to the Clinical Ethics Group be received and noted.

With regard to the financial governance report, the Acting Chief Finance Officer drew the Board's attention to the fact that national guidance continues to be developed and released and confirmed that this would be shared with directors once published. Mr Haythornthwaite noted the importance of ensuring that the Audit Committee remains sighted on relevant national guidance.

## **62/20 Chair and Chief Executive's opening remarks**

The Chair advised that he had recently attended a briefing with the NHS England and Improvement Regional Director and noted that the Chief Executive would brief the Board on this more fully later in the agenda. He noted that the session had been very informative.

The Chief Executive commented that the initial response to COVID-19 had now been undertaken and that the focus was shifting towards recovery and preparing for any second wave of infection. He confirmed that the regional intention was to focus on stabilisation over the coming six-week period and then to look at a longer-term approach which is expected to last until the end of the current financial year. He suggested that the next phase in the response is likely to be more complex than the initial response as efforts are made to reinstate urgent care activities when possible and to address the backlog of elective cases at an appropriate point in time, taking into account the likely impact of introducing elective work on stocks of personal protective

equipment and other resources such as haemofiltration equipment and anaesthetic drugs. The requirement to run separate COVID-19 and non-COVID-19 services and to ensure an 80% bed occupancy rate across both services was also highlighted.

Given the reduction in activity currently, the Chief Executive noted that members of staff were likely to begin to reflect on the initial response to the pandemic and on the cases they have personally dealt with, and suggested that this could result in an increased demand for the psychological support mechanisms that have been put in place. He confirmed that he would be ensuring that he remained visible and accessible to staff and would be making a particular effort to visit areas of high acuity in the hospital to support the staff involved.

The Chief Executive commented that the time appeared right to begin to review the organisation's corporate governance arrangements in response to the pandemic. He commented that the establishment of the Pandemic Assurance Committee had served a real purpose in ensuring oversight of matters of concern but noted that the current challenges are likely to remain until the end of the financial year. Whilst a return to the pre-COVID arrangements was unlikely to be appropriate at this time, he nonetheless suggested that a hybrid approach would be beneficial to ensure a focus on safety and clinical risk as well as wider organisational matters. The Company Secretary agreed to prepare some suggestions for discussion with directors outside the meeting.

**ACTION: Company Secretary**

With regard to wider business as usual considerations, the Chief Executive described his desire to begin to set objectives for himself and the remainder of the executive team and suggested that it would be more appropriate to consider the setting of behavioural objectives for FY2020/21 rather than more traditional objectives linked to the organisational strategy.

The Chief Executive iterated the importance of reinstating performance reporting as soon as possible and committed to ensuring that a report is available to the next meeting. He noted the likely need to move away from sequential waiting lists and towards risk-based timetabling but acknowledged the importance of the Board receiving sufficient information on this matter to obtain assurance on the way in which waiting lists are being managed. The Director of Strategy and Planning confirmed that he would be taking this forward.

**ACTION: Director of Strategy and Planning**

Finally, the Chief Executive noted the significant change in decision-making at regional level in recent months. He reminded the Board that the pandemic had been declared a Level 4 incident in accordance with NHS England's National Incident Response Plan and that, as a result, NHS England's national command and control arrangements had been put in place. As a result, NHS England, in collaboration with local commissioners at the tactical level, were coordinating the NHS response. Locally, the NHS response was being coordinated on a Greater Manchester footprint and the Chief Executive noted that this would likely impact on all organisations' ability to determine their own capital expenditure and he advised that it is hoped for the Greater Manchester Provider

Federation Board to move towards operating on a regional basis in the medium term under delegated authority from individual foundation trusts. He commented that it is also likely that some services will be identified as being required on a regional basis rather than at local level, and note was made of the impact that some of these developments may have on clinical commissioning groups.

Mrs Lobley noted the regional governance arrangements and requested that any background documentation might be shared. The Director of Strategy and Planning agreed to provide this outside the meeting.

**ACTION: Director of Strategy and Planning**

Mr Guymer suggested the need to ensure that arrangements are put in place to ensure that the Board has access to decisions taken on behalf of the region under delegated authority. The Chief Executive agreed to discuss how this might best be achieved with the Director of Strategy and Planning and the Company Secretary.

**ACTION: Chief Executive/Director of Strategy and Planning/Company Secretary**

In response to a question from the Chief Operating Officer, the Chief Executive advised that the decision-making arrangements, including any ability to challenge decisions, were currently being developed.

Mr Haythornthwaite questioned whether any of the statutory responsibilities of foundation trust boards would be affected by the proposals, to which the Chief Executive responded that the detail had yet to be considered. He summarised a number of approaches but iterated that nothing had yet been agreed.

The Board received and noted the verbal update.

**63/20 Committee chair's report from the Pandemic Assurance Committee**

Prof Warne provided a verbal summary of the business transacted at the Pandemic Assurance Committee meeting held on 13 May 2020 and noted that the draft minutes of the meeting had been circulated to directors for information.

Prof Warne supported the proposed evolution of corporate governance arrangements as described earlier in the meeting and noted that much assurance had been obtained at the meeting, particularly around workforce modelling, and that the committee had welcomed the information it had received around staff health and wellbeing, both now and in the future. The work of the Clinical Ethics Group had been discussed at the meeting and the committee were pleased to see that the group was available to support clinical decision-making.

Prof Warne confirmed that the committee had received assurance around the provision of personal protective equipment and diagnostic testing within care homes and had received a report on COVID-19 mortality.

In response to a question from the Chair, the Medical Director iterated the importance of following the government advice on social distancing and in limiting travel in accordance with the regulations that are currently in force.

The Board received and noted the verbal update.

#### **64/20 Update from the executive team**

The Chief Executive opened this item by summarising the current operating position within the hospital. He then went on to note that the north west region has one of the highest numbers of COVID-19 in-patients across both intensive care and general medical beds and noted that the numbers in the Wigan area are slightly above the regional average.

With regard to restarting the elective programme, the Chief Executive confirmed that a risk-based approach to scheduling would be adopted. He also cautioned that the impact of any relaxation of social distancing guidance was not yet known.

The Chief Operating Officer provided an operational update and confirmed that national cohorting arrangement for patients had been adopted within the foundation trust as well as briefing the Board on the impact that this can have on patient flow. The Chief Operating Officer also confirmed that recent weeks had seen an increase in the number of patients presenting at the Accident and Emergency department, with a high level of acuity amongst non-COVID-19 cases being noted. She confirmed that the department had achieved performance in excess of 95% for the month and commented that this acts as a proxy for the resilience of the arrangements in place. The intention to introduce an appointment booking system within the department in the coming months was also acknowledged.

With regard to the elective programme, the Chief Operating Officer advised that the current focus is on scheduling patients identified as being on the Royal College of Surgeons' priority 2 patient list. She confirmed that new ways of working, including virtual pre-operative consultations, were being used and outlined the plans to reintroduce cardiology elective patients on the Royal Albert Edward Infirmary site and endoscopy elective patients on the Leigh Infirmary site in the coming fortnight, noting that, when combined, these two sets of patients account for 70% of the priority 2 patient list. She also set out the intended approach for the reintroduction of the remaining elective programme across three distinct phases.

In response to a question from Prof Warne, the Chief Operating Officer confirmed that sufficient stocks of personal protective equipment are available to allow the intended elective procedures to recommence but noted that the matter is kept under constant review and reminded the Board of the phased approach to reinstating elective activity to allow this to be taken into account. The Chief Executive summarised the mutual aid arrangements that are in place across Greater Manchester but acknowledged the increased amounts of equipment that will be required as elective activity increases across the region.

The Medical Director cautioned that the number of patients with non-COVID-19 symptoms are increasing which will reduce the amount of medical staff available for redeployment in the event of a second wave, as they will be required to remain in their own specialties and to care for the patients already in hospital. He also described how useful the virtual outpatient appointment arrangements have been and commented on how medical staff had embraced the use of remote working arrangements.

The Medical Director also noted that there had been an increase in the number of patients discharged from the hospital with COVID-19 and highlighted in particular the fact that three such patients had been discharged from the intensive care unit.

The Chief Nurse gave an overview of the development of Bryn Ward which she reminded the Board forms part of the organisational and regional surge capacity plan. She noted that the ward has the capacity to accommodate 50 patients, with 27 beds having the capability to care for ventilated patients if required as well as clarifying that the ward is used for patients who are COVID positive and is now fully operational. She confirmed that reviews of learning are currently being undertaken and examples of initial lessons learned were shared. A further learning event was scheduled to take place in the coming week, and patient feedback on the ward had been very positive to date.

The Chief Executive confirmed that the vacuum insulated evaporator on the Royal Albert Edward Infirmary site had been upgraded to increase the amount of oxygen that can be provided at any time. Note was also made of the fact that staff in high intensity and demanding posts were being rotated to allow for some respite.

The Chief Nurse also paid tribute to the work of the community nursing teams and the way in which they have changed the way they work for the benefit of patients. Examples of such changes include the use of technology to see patients and to engage with digital ward rounds, working with the care home sector around swabbing and providing training to care home staff, as well as improving the end of life care pathway.

The Director of Workforce summarised the psychological support work that had been undertaken to date, which included 24/7 access to an employee assistance programme, completion of manager training around debriefing and the sharing of wellbeing and resilience applications. Over 250 staff had visited the SOS rooms since the beginning of April 2020, with over 85% of people surveyed highlighting the need for this provision to continue. The Director of Workforce reminded the Board that the foundation trust's approach to psychological support had been designed by occupational psychologists which she noted had been extremely beneficial in ensuring the appropriateness of interventions as well as ensuring appropriate training and supervision.

Confirmation was provided that a 12-month proof of concept investment had been agreed to ensure that it is possible to continue to provide services without relying on redeployed staff into the longer-term. The intention to consider extending the offer available across the Wigan borough was also highlighted. At the suggestion of the Chair, the Director of Workforce agreed to liaise with Lady Bradley around her experiences within the third sector.

**ACTION: Director of Workforce**

In response to a question from Mrs Lobley, the Director of Workforce noted that discussions were taking place across numerous forums to ensure that those who have volunteered to support the NHS are able to continue to do so. The Chief Nurse advised that a proactive approach had been taken within the foundation trust to offer permanent contracts of employment to all student nurses who had opted to enter the temporary nursing register prior to formal completion of their studies.

With regard to communications, the Director of Workforce noted that the pandemic had created an impetus for the organisation to communicate in different ways and staff feedback had been positive, particularly around the online leadership briefings that have been offered. Over 1,500 members of staff had elected to join a closed Facebook group which helps to share information and “communications cascaders” had been identified in local areas to ensure reliable sharing of information.

The Board received the report and noted the content.

**65/20      Looking to the future**

The Director of Strategy and Planning provided a verbal update on the planning work that has been undertaken in relation to the remainder of the financial year. He noted that much of the work had already been shared with staff as part of the online briefing sessions.

Note was made of the development of a recovery plan for the organisation and in particular the fact that recovering is often more complicated than responding to an incident, particularly around demand modelling in the recovery phases. He confirmed that the organisation’s planning is based on a reasonable worst-case scenario which is considered to be a prudent approach and is not necessarily a forecast of the actual levels of demand that will be experienced.

The Board received the report and noted the content.

**66/20      Review of COVID-19 risk appetite statement**

The Board confirmed that the COVID-19 risk appetite statement remains appropriate.

**67/20      Resolution to exclude members of the press and the public**

The Board RESOLVED that representatives of the press and other members of the public be excluded from the remainder of the meeting, having regard to the confidential nature of the business to be transacted.

**68/20      Date time and venue of the next meeting**

The next meeting of the Board of Directors will be held on 24 June 2020, 1.30pm by videoconference.

## Action log

Date of meeting	Minute ref.	Item	Action required	Assigned to	Target date	Update
27 May 2020	62/20	Chair and Chief Executive's opening remarks	Prepare suggestions as to revised corporate governance arrangements	Company Secretary	24 Jun 2020	On the agenda.
27 May 2020	62/20	Chair and Chief Executive's opening remarks	Ensure performance report presented to next meeting	Director of Strategy and Planning	24 Jun 2020	On the agenda.
27 May 2020	62/20	Chair and Chief Executive's opening remarks	Provide Mrs Lobley with supporting documentation around regional governance	Director of Strategy and Planning	ASAP	
27 May 2020	62/20	Chair and Chief Executive's opening remarks	Consider how best to share information on decisions taken at regional level	Chief Executive/Director of Strategy and Planning/Company Secretary	24 Jun 2020	
27 May 2020	64/20	Update from the executive team	Liaise with Lady Bradley around her experiences within the third sector (relating to psychological support)	Director of Workforce	24 Jun 2020	