

WRIGHTINGTON, WIGAN AND LEIGH TEACHING HOSPITALS NHS FOUNDATION TRUST
MINUTES OF A MEETING OF THE BOARD OF DIRECTORS ("the Board")
HELD ON 29 APRIL 2020, 1.30PM
BY VIDEOCONFERENCE

Present:	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
	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
In attendance:	Mrs N Guymer	Deputy Company Secretary
	Mr P Howard	Company Secretary
	Mrs L Sykes	Public Governor (observer)

*Consecutive minute numbering has continued despite the change in organisational name from
Wrightington, Wigan and Leigh NHS Foundation Trust on 1 April 2020*

46/20 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.

47/20 Apologies for absence

Apologies for absence were received from Mr I Haythornthwaite (Non-Executive Director).

48/20 Declarations of interest

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

49/20 Minutes of the previous meeting

The minutes of the previous meeting held on 25 March 2020 were **APPROVED** as a true and accurate record.

50/20 Overview from Chief Executive

The Chief Executive gave a verbal update on the current situation and advised that it was generally considered that the region was coming towards the end of the first phase of the NHS response to the COVID-19 pandemic. As a result, the Greater Manchester system had recently moved to Operational Pressure Escalation Level (OPEL) 2 from the previous OPEL 3. The next phase of the NHS response would focus on stabilisation and the need to consider different ways of working for an extended period of time had been acknowledged.

The Chief Executive advised that the number of patients in the hospital with COVID-19 remained relatively stable although the demand for critical care services had recently reduced. Note was made of the fact, however, that there had been an increase in the number of COVID-19 patients in local care and nursing homes.

The Chief Executive commented that concern had been expressed nationally around the reduced number of attendances at A&E and highlighted the communication campaign that had begun as a result. The intention to work closely with primary care colleagues to ensure proactive liaison with patients was also confirmed. The Chief Executive advised of the plan to resume the screening programme in the near future but highlighted the need to ensure that laboratory capacity is not overwhelmed as a result of reintroducing services at the same time as processing COVID-related samples. He also cautioned that the potential effects of any future relaxing of legal restrictions on movement were not yet known.

With regard to future planning, note was made of the fact that the recovery phase of the NHS response would be coordinated on a regional basis with individual organisations having little flexibility to deviate from the agreed approach. Confirmation had also been provided that the current command and control arrangements in place across the region would remain extant for a considerable period of time; most likely until 31 March 2021.

The Chair reminded the Board that efforts had been made to streamline the organisation's corporate governance arrangements to ensure the best use of directors' time. The Chief Executive commented that the next phase of the NHS response would be both clinically and managerially more complex and would require even more executive oversight.

In response to a question from Dr Elliot, the Chief Executive confirmed that the use of the newly created Bryn Ward would be flexible, in line with the prevailing situation. He also reminded the Board that the ward formed part of the national super-surge capacity plan and could potentially operate as a regional facility in the future.

Dr Elliot commented that he had recently circulated an article from the Health Service Journal which summarised a number of lessons learned from Italy around staff contamination, and in particular the fact that research had shown higher levels of sickness amongst staff on non-COVID wards in Italy than amongst those caring for patients in dedicated COVID areas. He therefore queried whether the foundation trust had considered this and the Chief Executive confirmed that staff across all non-COVID

areas had been advised to wear surgical masks and that other options around personal protective equipment would be considered once supply arrangements are more stable.

The Board received and noted the verbal update.

51/20 Update from Pandemic Assurance Committee

Prof Warne confirmed that the inaugural meeting of the Pandemic Assurance Committee had been held on 22 April 2020 and noted that the draft minutes of the meeting had been circulated to directors for information.

Prof Warne advised that the committee had received an overview of the processes that have been put in place to deal with the many changes that had become necessary as a result of COVID-19 to ensure staff and patient safety and to maintain oversight of the organisation. He acknowledged an absence of data being presented at the first meeting but confirmed that this was being reviewed outside the meeting with a view to ensuring that appropriate metrics are reported when the committee next meets. Mrs Lobley noted the usefulness of being able to compare the foundation trust's performance with other providers in the local area and confirmation was provided that this would be taken into account as part of the metrics. The Chief Executive assured the Board that key metrics are considered on a daily basis at local and regional level and commented that it could be useful to incorporate some regional information for further assurance. Prof Warne confirmed that the committee would be considering a draft performance report at its next meeting.

Lady Bradley commended the organisation on the flow of information to non-executive directors and also requested that some consideration be given to community matters by the committee. Prof Warne requested that any particular issues that directors would like the committee to cover are advised to him or the Company Secretary in advance to ensure that the committee is able to consider the suggestions.

The Medical Director confirmed that the foundation trust was participating in a national randomised evaluation of COVID-19 therapy trial and had performed well in comparison with others in recruiting patients to the trial.

The Chair noted the establishment of a Clinical Ethics Group by the foundation trust to provide an independent recommendation around clinical decision-making on occasions where there is no consensus amongst the clinical team caring for the patient or where concerns are raised around the proposed approach. Confirmation was provided that the group is available 24 hours a day. Mrs Lobley confirmed that she had recently reviewed the terms of reference and other background information on the group at the request of the Chair and noted that an assurance report would be presented to the next meeting of the committee.

The Chair also advised that he had requested a review of a recent piece of advice from NHS Providers by the Chief Finance Officer and Mr M Guymer to ensure that the

foundation trust continues to follow all best practice financial guidelines. A summary would be presented to the next meeting.

ACTION: Chief Finance Officer/Mr Guymer

The Board received and noted the verbal update.

52/20 Update from executive team

The Chair opened by commending the executive team on its management of the organisation during the pandemic to date and cited in particular the work involved in delivering the new Bryn Ward in such short timescales. He advised that he had undertaken a site visit earlier in the day and had been impressed with the standard of work. Particular note was made of the work of Mr Chris Knights, Deputy Director of Strategy and Planning, in coordinating the works.

The Director of Strategy and Planning provided an overview of the new 50-bed ward and thanked all contractors and subcontractors for their efforts in moving from concept to handover in just six weeks. He noted that the phasing and distribution of COVID-19 cases had not followed the original forecasts and that a change to the intended approach to using the facility had been agreed as a result. Once in use, the ward will be used to cohort COVID-19 positive patients, including those being treated with continuous positive airway pressure (CPAP). He summarised the processes of deep cleaning the ward and equipment testing and confirmed that planning was underway to decant the relevant patients into the ward once operational. The Medical Director confirmed that he and the Chief Nurse had approved the intended use of the ward.

The Chief Executive confirmed that robust support arrangements had been put in place for members of staff to support wellbeing, including the provision of psychological support and the procurement of an employee assistance programme. The need to continue this support for a considerable period of time was acknowledged. In response to a question from Prof Austin, the Chief Executive confirmed that staff continue to be supported to raise any concerns they may have and the Director of Workforce summarised the various ways in which this can be undertaken.

In response to a question from Mrs Lobley around the capacity of the infection control team to respond to the additional demands of Bryn Ward, the Chief Nurse confirmed that additional staffing had been secured and that there was sufficient capacity within the team as a result.

The Board received the report and noted the content.

53/20 Personal protective equipment and related matters

The Chief Operating Officer presented a report which had been circulated in advance of the meeting to provide assurance around the foundation trust's ability to provide personal protective equipment (PPE) for staff. She confirmed that a dedicated COVID-19 risk register had been developed and summarised the PPE-related risks that had been identified.

The Chief Operating Officer confirmed that the foundation trust monitors PPE stock levels on a daily basis through a dedicated central store and that on average a minimum of 4 days' stock is available, with additional deliveries being received on a daily basis and additional escalation methods being in place across Greater Manchester.

The Chief Operating Officer drew directors' particular attention to the fact that the foundation trust had taken the decision to provide personal issue reusable face masks to those staff who are required to wear FFP3 masks on a regular basis and the rationale for that decision was included within the report.

Confirmation was also provided that the foundation trust operates a robust mask fit testing programme and that staff are taught the correct way to don and doff the masks, as well as how to clean and store the reusable masks where relevant. Confirmation was also provided that no member of staff had been or would be asked to provide care for a patient who is suspected or confirmed as having COVID-19, or to work in areas where such patients are accommodated, without the appropriate personal protective equipment.

In response to a question from Mrs Lobley, the Chief Operating Officer confirmed that the centralised storage arrangements were working well and were allowing acute and community staff to access PPE in a straightforward way. In response to a supplementary question from Mrs Lobley, the Chief Executive noted that there had been some initial challenges around the availability of medication but that these had not had a detrimental impact on any patients. He noted that the key supply issue at the present time related to haemofiltration equipment but confirmed that arrangements were in place to transfer patients to other providers where necessary.

The Board received the report and noted the content.

54/20 Review of COVID-19 risk appetite statement

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

55/20 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 a new common seal of the foundation trust, an image of which is included in the margin, be **ADOPTED** for use with effect from 1 April 2020.
2. THAT the finance report as at 31 March 2020 be received and noted.



56/20 Date time and venue of the next meeting

The next meeting of the Board of Directors will be held on 27 May 2020, 1.30pm by videoconference.

Action log

Date of meeting	Minute ref.	Item	Action required	Assigned to	Target date	Update
29 Apr 2020	51/20	Update from Pandemic Assurance Committee	Review recent guidance from NHS Provider and provide summary update to next meeting of the Board	Chief Finance Officer/Mr Guymer	27 May 2020	-----