

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

**MINUTES OF A VIRTUAL MEETING OF THE TRUST BOARD – RECONFIGURATION PROGRAMME
HELD ON THURSDAY 1 OCTOBER 2020 AT 2.00PM**

Voting Members Present:

Mr K Singh – Trust Chairman
Ms V Bailey – Non-Executive Director and Quality and Outcomes Committee (QOC) Non-Executive Director Chair
Professor P Baker – Non-Executive Director
Ms R Brown – Acting Chief Executive
Col (Ret'd) I Crowe – Non-Executive Director and People, Process and Performance Committee (PPPC) Non-Executive Director Chair
Ms C Fox – Chief Nurse
Mr A Furlong – Medical Director
Mr A Johnson – Non-Executive Director and Finance and Investment Committee (FIC) Non-Executive Director Chair
Mr S Lazarus – Interim Chief Financial Officer
Ms D Mitchell – Acting Chief Operating Officer
Mr B Patel – Non-Executive Director and Charitable Funds Committee (CFC) Non-Executive Director Chair
Mr M Traynor – Non-Executive Director
Mr M Williams – Non-Executive Director and Audit Committee Non-Executive Director Chair

In Attendance:

Ms G Belton – Corporate and Committee Services Officer
Mr A Carruthers – Chief Information Officer
Mr V Karavadra – Associate Non-Executive Director
Mr D Kerr – Director of Estates and Facilities
Ms H Kotecha – Leicester and Leicestershire Healthwatch Chair (up to and including Minute 218/20)
Ms N Topham – Reconfiguration Programme Director
Mr S Ward – Director of Corporate and Legal Affairs
Mr M Wightman – Director of Strategy and Communications
Ms H Wyton – Director of People and Organisational Development

ACTION

210/20 APOLOGIES

Resolved – that there were no apologies for absence.

211/20 DECLARATIONS OF INTEREST

The Interim Chief Financial Officer and Mr A Johnson, Non-Executive Director, declared their respective interests as Non-Executive Director and Non-Executive Chair of Trust Group Holdings Ltd. Mr M Traynor, Non-Executive Director, declared his interest as Small Business Crown Representative with the Cabinet Office. With the agreement of the Trust Board, they remained present.

Resolved – that the above declarations of interest be noted.

212//20 MINUTES

Resolved – that the Minutes of the public Trust Board Reconfiguration Programme meeting held on 3 September 2020 (paper A refers) be confirmed as a correct record and signed by the Chairman accordingly. Chairman

213/20 MATTERS ARISING

Paper B detailed progress in respect of actions agreed at the previous meeting of the Trust Board Reconfiguration Programme held on 3 September 2020, the contents of which were received and noted. In respect of item number 2f (Minute reference 181/20/2) relating to the provision of a briefing paper on modern construction methods and construction procurement

routes, the Director of Estates and Facilities confirmed that this work was in progress and a report would be submitted to a future Trust Board Reconfiguration Programme meeting (potentially the November 2020 meeting).

DEF

Resolved – that the contents of this report, and the verbal update provided, be received and noted.

214/20 KEY ISSUES FOR DISCUSSION/DECISION

214/20/1 Chairman's Briefing Note on the Reconfiguration Programme – October 2020

The Chairman presented his briefing note (paper C refers) explaining the reports scheduled for discussion on today's agenda and the desire of the Trust Board to conduct as much business in public as was possible, noting that there was only one report for discussion in private on today's agenda, the reason for which related to matters of commercial confidentiality.

In presenting his report, the Chairman emphasised the need not to think of the Trust's Reconfiguration Programme as a question of buildings alone, but in terms of meeting the needs of the community and employment opportunities for the workforce of the future.

Resolved – that the contents of this report be received and noted.

214/20/2 Clinical Strategy

The Medical Director presented a series of slides accompanied by a cover report (paper D refers), which described how the Trust's Clinical Strategy had evolved, how it underpinned the reconfiguration programme and how it sought to address future LLR secondary healthcare needs and challenges.

The UHL Clinical Strategy had been developed, sense checked and refined over the last ten years through a process of on-going multi-professional discussions with clinicians across primary and secondary care linked to the wider LLR Better Care Together programme of work. The UHL Clinical Strategy had been endorsed by the East Midlands Clinical Senate in 2018 and underpinned the LLR Acute and Maternity reconfiguration plans that were now being publicly consulted on, as led by the commissioning sector (CCGs). The UHL Clinical Strategy and the LLR Acute and Maternity reconfiguration plans mitigated and sought to address 'known and likely' future secondary healthcare challenges recognising the need for ongoing review of the Clinical Strategy as healthcare and population needs changed (with the Medical Director specifically highlighting the need for the Clinical Strategy to take account of potential future pandemics, issues relating to antibiotic resistance, use of siderooms etc.). Also highlighted by the Medical Director was how the Trust's reconfiguration plans, if in place before the Covid-19 pandemic, would have stood up to the challenges posed - during the peak of the first wave of Covid-19, 69 patients had been ventilated or on ITU within the Trust. The Trust's current reconfiguration plan would double the ITU beds available, meaning that the Trust could have coped with the demands of Covid-19 and continued to undertake its other work alongside this.

In discussion on the UHL Clinical Strategy:-

- (i) the Director of Strategy and Communications emphasised the need for UHL to exist within a strong and sustainable network of local DGH's (as also referenced within the slides presented), and needed to be large enough to cope with the demands placed upon it, but no larger than necessary;
- (ii) at the request of Mr Johnson, Non-Executive Director, the Medical Director re-capped the process that had led to the selection of the Leicester Royal Infirmary and the Glenfield Hospital as the two nominated sites on which to base the main (acute) facilities. The Medical Director confirmed that, after undergoing a process from a 'long-list' stage onwards, this decision had ultimately been based upon the need for realism and pragmatism with regard to required clinical adjacencies and cost implications for the public purse. Ms Bailey, Non-Executive Director, commented that the Trust was fortunate to have had the same staff members committed to this work for so long a period of time, such that they could provide a clear narrative around the decisions taken previously and provide a consistency in approach. Mr Johnson, Non-Executive Director, echoed this, commenting on the fact that such continuity reinforced the strength of the plans which had been well thought through and challenged several times;

- (iii) note was made that the Strategy presented should prove to be an effective clinical model to which to recruit and retain staff, with specific note made of how agile the workforce had proven themselves to be in dealing with the Covid-19 pandemic, and
- (iv) in concluding discussion on this item, the Chairman made note of the advantage of a real-time perspective and the ability to update the Clinical Strategy as required, which added to its strength. He emphasised that the Trust was part of a wider system and needed to consider the changes and how it fitted into these. He also expressed his hope that at future meetings, other Executive Director colleagues would submit reports showing their thinking in the context of reconfiguration.

Resolved – that the contents of this report, and the additional verbal information provided, be received and noted.

214/20/3 Reconfiguration Programme Governance

The Director of Corporate and Legal Affairs presented paper E, which described the Reconfiguration Programme governance arrangements, as requested by the Trust Board at its meeting on 3 September 2020 (Minute 181/20/1 refers). The Reconfiguration Programme governance arrangements were set out at section 9.5.2 of the Acute Reconfiguration Pre-Consultation Business Case and the diagram attached as appendix 1 to paper E illustrated these arrangements in diagrammatic form. In presenting this report, the Director of Corporate and Legal Affairs noted that, by way of complementing the roles and responsibilities described within the report, there would be times when the Trust would look to capitalise on the experiences of its Non-Executive Directors by seeking their participation in discrete areas of work, with NED involvement on the basis of a Task and Finish Group arrangement, given the need to preserve the independent and scrutinising role of Non-Executive Directors. The Director of Estates and Facilities confirmed that the Trust would be following Department of Health guidance regarding structuring the delivery of this work, alongside the output of lessons learned work, thereby facilitating the right 'checks and balances' and gateways throughout the process.

In discussing this report:-

- (i) the Acting Chief Executive expressed her support for the arrangements described, and specifically commented on the wealth of experience and expertise being brought to this project by the staff involved (section 4 of the report refers);
- (ii) Ms Bailey, Non-Executive Director, queried whether the Trust would undergo DoH / Treasury Gateway reviews, or would instigate its own – in response, the Director of Estates and Facilities confirmed that the six gateways introduced a number of years ago whereby external validation was undertaken at specific points in the project was no longer in use, however the Trust intended to continue to follow this approach, by request, on a voluntary basis, and
- (iii) Mr Johnson, Non-Executive Director, advised that he had expected to see wider representation from Non-Executive Directors within the process and expressed his unease that, as a Trust Board undertaking a £450m project, there was not a Non-Executive Director sitting on the Reconfiguration Programme Committee, which he considered was not sufficient in governance terms. In response, the Director of Corporate and Legal Affairs noted that this matter had been discussed previously regarding where the line should be drawn in terms of the role of Non-Executive Directors. At that particular time, in contrast to now, the Reconfiguration Programme Trust Board had not been convened. Furthermore, work was underway on a portal which would give Non-Executive Directors access to a range of information currently not available to them, which would offer a further form of assurance. The Director of Corporate and Legal Affairs noted that it would be an option for the Board to appoint a Non-Executive Director to the Reconfiguration Programme Committee, however that risked the individual appointed being viewed as a form of assurance, rather than all Non-Executive Directors partaking in the process equally, and seeking the assurance each required, as part of the Reconfiguration Programme Trust Board. The latter was the approach favoured by the Director of Corporate and Legal Affairs. The Chairman noted the need to reflect and come back to this issue in future once the portal was operational and an assessment could be made of whether the portal, in combination with the establishment of the Reconfiguration Programme Trust Board, offered sufficient scrutiny. Mr Johnson, Non-Executive Director, reiterated his concern in this respect and his view that it had not previously been agreed by the Trust Board, that the formation of the Reconfiguration Programme Trust Board would be the sole area for discussion. His personal view was that the Reconfiguration Programme Trust Board discussion was 'distanced' and he did not feel

able to probe in the way he would wish to if he was closer to the detail. The Chairman reiterated the need for further reflection on this point, highlighting the need to avoid Non-Executive Directors becoming 'crypto-Executives'. Mr Williams, Non-Executive Director, acknowledged the delicate balance to be achieved in providing Non-Executive Directors with sufficient detail and assurance but avoid them becoming part of the project, such that they could not stand aside with objective challenges. In concluding discussion on this particular aspect, the Chairman requested that the Director of Estates and Facilities reviewed the proposals of levels of involvement (at different levels of the governance structure) of Non-Executive Directors within other NHS Trusts with schemes comparable to UHL, in order to further inform the thinking regarding reconfiguration programme governance.

DEF

Resolved – that (A) the contents of this report be received and noted and

(B) the Director of Estates and Facilities be requested to review the proposals of levels of involvement (at different levels of the governance structure) of Non-Executive Directors within other NHS Trusts with schemes comparable to UHL, in order to further inform the thinking regarding reconfiguration programme governance.

DEF

214/20/4 Reconfiguration Programme – Update

The Director of Estates and Facilities and the Reconfiguration Programme Director presented paper F, which provided an update of progress since the last meeting in addition to key decisions required / issues arising including: Pre Consultation Business Case (PCBC) Assurance Panel and Consultation, Social Values, Programme Resources, East Midlands Congenital Heart Centre (EMCHC) Project Update and an Intensive Care Unit (ICU) Project Update.

In presenting this report, the Director of Estates and Facilities particularly highlighted the on-going CCG-led consultation which went live on 28 September 2020 and also the development of a Social Values Strategy, noting the mandatory requirement from 1 January 2021 for central government contracts to be cognisant of social value. The Trust was currently in the process of procuring a Social Values Specialist to demonstrate the societal value in the project and a report relating to social value would be developed and submitted to a future Reconfiguration Programme Trust Board meeting for consideration thereon. The Reconfiguration Programme Director reported further regarding the current consultation and urged members to watch the video on the website which provided a visible view of the proposals. Virtual staff briefings were taking place and many virtual events were planned. The Reconfiguration Programme Director noted her intention to submit a report to the November 2020 Reconfiguration Programme Trust Board meeting regarding patient-facing processes related to the continued progression of the East Midlands Congenital Heart Centre (EMCHC) Project. Also highlighted was progress with the ICU Project, with the move scheduled for July 2021.

DEF / RPD

RPD

In discussion on this item:-

- (i) Mr Patel, Non-Executive Director, noted his wish for the Trust to be challenging around the issue of social values, noting the requirement for a real concept change in people's minds and the desire to make a difference to people's lives. He also referenced the local economic impact, tracking the pound locally and ways of ensuring that it was recycled through the local economy first. The Director of Estates and Facilities noted the intention to utilise the Social Values calculator, which would provide hard KPIs against which to measure. Mr Traynor, Non-Executive Director, undertook to share with Reconfiguration Programme Trust Board members, the Government's Procurement Policy Note (PPN) specifically relating to social value. He also commented on the value of targeting some of the social value output to addressing health inequalities;
- (ii) members noted the on-going consultation events, which were being led by Commissioners, and the Chairman noted the value in members listening to these events;
- (iii) Ms Bailey, Non-Executive Director, welcomed the planned submission of a report relating to patient-facing processes in relation to the EMCHC Project, noting that many patients were already in the Trust's services and required guidance as to how to continue to access the service as the changes occurred. She emphasised the importance of the Reconfiguration Programme Trust Board continuing to monitor this, and
- (iv) Col (Ret'd) Crowe, Non-Executive Director, emphasised the need for continued staff involvement in the process and the importance of keeping staff informed.

MT(NED)

Resolved – that (A) the contents of this report be received and noted,

(B) the Director of Estates and Facilities and Reconfiguration Programme Director be requested to submit a report to a future Reconfiguration Programme Trust Board meeting regarding the procurement of a Social Values Specialist and associated information relating to social value, DEF/RPD

(C) the Government’s Procurement Policy Note (PPN) relating to social value be shared with members of the Reconfiguration Programme Trust Board, and MT(NED)

(D) the Reconfiguration Programme Director be requested to submit a report to the November 2020 meeting of the Reconfiguration Programme Trust Board regarding patient-facing processes relating to the continued progression of the East Midlands Congenital Heart Centre (EMCHC) Project. RPD

214/20/5 Reconfiguration Programme Strategic Risks

Paper G identified the strategic risks to the Reconfiguration Programme and was presented for review by the Reconfiguration Programme Trust Board. Specific note was made that any risks scoring over 16 would be presented to the Board. Specific strategic risks currently were noted as a lack of decant space, the impact of Covid-19 and infection control issues and cost escalation prior to contract award due to external factors .

In discussion on this item:-

- (i) members agreed the need to hold a discussion at a future Audit Committee regarding the role of the Audit Committee in overseeing the Reconfiguration Programme Strategic risks; **Audit Chair / DCLA**
- (ii) the Medical Director noted the need to keep risks at a strategic level, however suggested considering the risks sitting below these to determine which strategic risk they matched to, thereby enabling a means of determining if there were any further strategic risks currently not listed. The Director of Estates and Facilities confirmed the existence of a very detailed risk register at the level of each individual programme which should allow ‘read up’ all the way through to strategic risk level;
- (iii) the Director of Strategy and Communications confirmed his agreement with the three strategic risks listed, however suggested a fourth – namely the risk of undertaking reconfiguration without the transformation, with which the Director of Estates and Facilities concurred. Acknowledging the importance of transformation, Mr Johnson, Non-Executive Director, suggested that the Committee’s name should incorporate the word ‘Transformation’ in its title (Reconfiguration and Transformation Trust Board); a proposal which the Chairman undertook to consider further outwith the meeting, and **Trust Chairman**
- (iv) Mr Williams, Non-Executive Director, commented that the strategic risks currently listed within the report were not what he would view as ‘strategic’ risks – accordingly, in view of discussion on this matter, it was agreed that all Reconfiguration Programme Trust Board members would contact the Trust Chairman and / or Director of Corporate and Legal Affairs outside the meeting, regarding any further thoughts they had on the Reconfiguration Programme Strategic Risks (in addition to those expressed above) and that, further to this, the Executive Directors reviewed and refined, as required, the strategic risks and presented these for agreement at a future Reconfiguration Programme Trust Board meeting. **All RPTB members**
EDs

Resolved – that (A) the contents of this report be received and noted,

(B) a discussion be held at a future Audit Committee meeting regarding the role of the Audit Committee in overseeing the Reconfiguration Programme Strategic Risks, **Audit Chair / DCLA**

(C) all Reconfiguration Programme Trust Board members be requested to contact the Trust Chairman and / or Director of Corporate and Legal Affairs, outwith the meeting, regarding any further thoughts on the Reconfiguration Programme Strategic Risks (in addition to those expressed at today’s meeting), **All RPTB members**

(D) further to the action described in resolution (C) above, the Executive Directors be requested to review and refine, as required, the strategic risks and present these for agreement at a future Reconfiguration Programme Trust Board meeting, and **EDs**

(E) the Trust Chairman be requested to give consideration, at an appropriate future point, as to the inclusion of the word ‘Transformation’ within this Committee’s title given the **Trust**

importance of transformational change alongside reconfiguration.

Chairman

215/20 QUESTIONS AND COMMENTS FROM THE PRESS AND PUBLIC RELATING TO BUSINESS TRANSACTED AT THIS MEETING

Resolved – that no comments or questions were raised by members of the press and public at this meeting.

216/20 ANY OTHER BUSINESS

Resolved – that there were no further items of business.

217/20 DATE OF NEXT MEETING

Resolved – that the next public Trust Board Reconfiguration Programme meeting be held virtually on Thursday 5 November 2020 from 2pm.

218/20 EXCLUSION OF THE PRESS AND PUBLIC

Resolved – that, pursuant to the Public Bodies (Admission to Meetings) Act 1960, the press and members of the public be excluded during consideration of the following items of business (Minutes 220/20 to 225/20) having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.

219/20 DECLARATIONS OF INTEREST IN THE CONFIDENTIAL BUSINESS

The Interim Chief Financial Officer and Mr A Johnson, Non-Executive Director declared their respective interests as Non-Executive Director and Non-Executive Chair of Trust Group Holdings Ltd. Mr M Traynor declared his interest as Small Business Crown Representative with the Cabinet Office. With the agreement of the Trust Board, they remained present.

Resolved – that the above declarations of interest be noted.

220/20 CONFIDENTIAL MINUTES

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds that public consideration at this stage could be prejudicial to the effective conduct of public affairs.

221/20 CONFIDENTIAL MATTERS ARISING REPORT

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds that public consideration at this stage could be prejudicial to the effective conduct of public affairs.

222/20 KEY ISSUES FOR DISCUSSION/DECISION

222/20/1 Confidential report by the Director of Estates and Facilities and the Reconfiguration Programme Director

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds that public consideration at this stage could be prejudicial to the effective conduct of public affairs.

223/20 ANY OTHER BUSINESS

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds that public consideration at this stage could be prejudicial to the effective conduct of public affairs.

224/20 DATE OF NEXT MEETING

Resolved – that the next private Trust Board Reconfiguration Programme meeting be held on Thursday 12 November 2020 from 1.00pm.

The meeting closed at 4.24pm

Gill Belton
Corporate and Committee Services Officer

Cumulative Record of Attendance (2020/21 to date):

Voting Members:

| Name | Possible | Actual | % attendance | Name | Possible | Actual | % attendance |
|-------------------------|----------|--------|--------------|---------------------------|----------|--------|--------------|
| K Singh | 9 | 9 | 100 | K Jenkins (until 27.7.20) | 3 | 2 | 67 |
| J Adler (until 18.9.20) | 7 | 0 | 0 | A Johnson | 9 | 9 | 100 |
| V Bailey | 9 | 9 | 100 | S Lazarus | 9 | 8 | 89 |
| P Baker | 9 | 9 | 100 | D Mitchell | 9 | 7 | 78 |
| R Brown | 9 | 9 | 100 | B Patel | 9 | 9 | 100 |
| I Crowe | 9 | 9 | 100 | M Traynor | 9 | 8 | 89 |
| C Fox | 9 | 7 | 78 | M Williams (from 2.9.20) | 4 | 4 | 100 |
| A Furlong | 9 | 8 | 89 | | | | |

Non-Voting Members:

| Name | Possible | Actual | % attendance | Name | Possible | Actual | % attendance |
|--------------|----------|--------|--------------|------------|----------|--------|--------------|
| A Carruthers | 9 | 9 | 100 | S Ward | 9 | 9 | 100 |
| D Kerr | 9 | 9 | 100 | M Wightman | 9 | 9 | 100 |
| H Kotecha | 8 | 8 | 100 | H Wyton | 9 | 8 | 89 |
| V Karavadra | 9 | 7 | 78 | | | | |