

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

**MINUTES OF A VIRTUAL MEETING OF THE TRUST BOARD – RECONFIGURATION PROGRAMME
HELD ON THURSDAY 7 JANUARY 2021 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
Mr A Furlong – Medical Director
Mr A Johnson – Non-Executive Director and Finance and Investment Committee (FIC) Non-Executive Director Chair
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
Ms N Green – Deputy Chief Nurse (deputising for Ms C Fox, Chief Nurse)
Mr J Shuter – Director of Operational Finance (deputising for Mr S Lazarus, Chief Financial Officer)
Mr D Kerr – Director of Estates and Facilities
Ms H Kotecha – Leicester and Leicestershire Healthwatch Chair (up to and including Minute 29/21)
Ms N Topham – Reconfiguration Programme Director
Mr S Ward – Director of Corporate and Legal Affairs
Mr M Wightman – Director of Strategy and Communications
Mr N Woodings – PwC (for Minute 33/21/1)
Ms H Wyton – Chief People Officer

ACTION

21/21 APOLOGIES

Apologies for absence were received from Ms C Fox, Chief Nurse, Mr S Lazarus, Chief Financial Officer and Ms D Mitchell, Acting Chief Operating Officer

Resolved – that the apologies for absence be noted.

22/21 DECLARATIONS OF INTEREST

The Director of Operational Finance and Mr A Johnson, Non-Executive Director, declared their respective interests as Finance Director / Company Secretary 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.

23/21 MINUTES

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

Chairman

24/21 MATTERS ARISING

Paper B detailed progress in respect of actions agreed at previous meetings of the Trust Board Reconfiguration Programme, the contents of which were received and noted. In respect of item number 1 (Reconfiguration Programme Governance - Minute 215/20/3 from 1 October 2020), the

Director of Estates and Facilities advised that no feedback had been received, as yet, from the other HIP1 SRO's. A HIP1 meeting was due to be convened and this matter would be pursued further at this point in time.

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

25/21 KEY ISSUES FOR DISCUSSION/DECISION

25/21/1 Chairman's Briefing Note on the Reconfiguration Programme – January 2021

The Chairman presented his briefing note (paper C refers), which made note of the specific matters for discussion on today's agenda.

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

25/21/2 Reconfiguration Programme Update (including the ICU, EMCHC and Risk Updates)

The Reconfiguration Programme Director presented paper D1, which detailed an update on progress in relation to the Reconfiguration Programme since the last meeting. It highlighted key decisions required and issues arising and also reflected recent discussions at the Reconfiguration Programme Committee and Executive Strategy Board. The January 2021 report specifically covered information relating to the public consultation, progress with approvals of the submitted business cases and Equality, Diversity and Inclusion.

The public consultation had drawn to a close on 21 December 2020, having run for three months and the Director of Estates and Facilities noted that it had been a well-conducted and engaging process, for which he expressed his thanks to everyone involved. He also made note of specific groups with whom he had been in contact in relation to the consultation, for example the Federation of Muslim women, and he made note of the richness of the questioning and also how he had been humbled by the support expressed for the Trust and the desire of different community groups to host community based events to assist the Trust's in its fundraising efforts; support for which he expressed his thanks. The Reconfiguration Programme Director noted that the consultation had reached more people than were actually resident in LLR, therefore reaching residents via multiple forums. The Commissioning Support Unit (CSU) were currently in the process of reviewing the output from the consultation, upon completion of which a feedback document would be produced and further details relating to this process were in the accompanying report (paper D1 refers).

The Reconfiguration Programme Director highlighted that the Programme Office Case had regrettably not been approved by the National Joint Investment Committee on 15 December 2020 pending some further information, which would be provided. Specific discussion took place regarding reasons for rejection of the business case, with note made that this had been an unexpected outcome on the basis of discussions held previously.

The Reconfiguration Programme Director also made reference to the extensive work being undertaken on equality, diversity and inclusion with the Trust's Head of Equality, Diversity and Inclusion and her team and of the planned scheduling of a session on EDI at a future Reconfiguration Programme Trust Board meeting.

RPD/HEDI

In the absence of the Acting Chief Operating Officer, the Reconfiguration Programme Director presented paper D2, which provided an update on the ICU Interim Reconfiguration Programme. The Programme was on track for completion in July 2021 with work ongoing to prepare for a successful transition across sites. However, there was a potential delay of 6 weeks as raised at the Interim Reconfiguration Oversight Committee on 18 December 2020; this was currently being worked through in terms of clinical and financial impact and a detailed update would be provided at the next meeting. All construction work had been completed and all areas were now occupied, although most as temporary occupation. The engagement exercise with staff affected by the service moves had been completed and all staff would be informed of their new working arrangement by the end of January 2021. Note was made of four specific risks as follows: (1) a possible delay to completion of the project following escalation of a delay to Interventional Radiology room builds and associated impacts (2) inability to successfully recruit to the workforce plan to support the service moves (3) lack of identified Deteriorating Adult Response Team (DART) support at LGH. Work was ongoing with ITAPS and the Emergency and Specialist

Medicine CMG to resolve this and (4) reduced ability of Clinical Management Groups (CMGs) to participate in the work required during the winter and Covid-19 pressures which could affect the speed of progress. Risks were currently being considered and assurance had been given that, where possible, actions were being taken to ensure mitigation in readiness for the transition. Forecast outturn for the ICU programme was £31,123m against a budget of £32.010m, revised from the Full Business Case budget of £30.8m to include backlog and Covid-19 funding totalling £1.211m. This gave a projected underspend of £888k, but this included Risk Allowance overspent by £60k and Optimism Bias of £599k. There were four CMGs directly affected by the interim reconfiguration project (CHUGGS, CSI, ITAPS and RRCV) and the report outlined the governance structures in place with specific regard to the management and implementation of this programme. Whilst note was made that UHL was one Trust, it comprised three different sites and emphasis was made of the need for staff to be embedded into the new site prior to the move; with every aspect of the move being planned in detail. In response to a question raised by Ms V Bailey, Non-Executive Director, as to what point in time it would be useful to trigger the first 'gateway' in light of the inevitable Covid-19 related slippage, the Director of Estates and Facilities noted that this would be looked at in the Summer of 2021.

The Director of Strategy and Communications presented paper D3, which provided an update on the re-location of the East Midlands Congenital Heart Centre and reflected on the fact that after receiving the welcome announcement three years ago that the service had been saved, it was now only 12 weeks away from moving to its new home (with the move scheduled for April 2021). Whilst there had been some delays with the refurbishment of Level 5 PICU due to Covid-19, the delays to-date had been mitigated within the programme. The Director of Strategy and Communications reported that, whilst formal gateway reviews no longer existed, one such review had been undertaken as a mechanism of good governance and had proven to be a useful process. The Acting Chief Executive made note of the challenging times being experienced within the Trust due to Covid-19, despite which a group of dedicated staff had driven and enabled this programme; this was a fantastic achievement and deserved celebrating, even if only virtually.

The Director of Estates and Facilities presented paper D4, which detailed a risk update on the Reconfiguration Programme; noting that there were no new principal risks. He noted the need to focus at each meeting on any updates to risks considered at prior meetings and advised of the intention to present this information differently in future iterations of the report to the Board in order to facilitate this process. In presenting the risk report, the Director of Estates and Facilities particularly highlighted the challenges currently being faced in terms of the lack of availability of Trust staff to support the delivery of the Reconfiguration Programme due to the re-deployment of staff, where appropriate, to assist in the Covid-19 response.

DEF/
RPD

Resolved – that (A) the contents of papers D1 – D4 be received and noted and

(B) the Head of Equality, Diversity and Inclusion be requested to attend a future Reconfiguration Programme Trust Board meeting to present on the EDI elements of the Reconfiguration Programme, and

RPD/
HEDI

(C) the Director of Estates and Facilities and the Reconfiguration Programme Director be requested to update the presentation of the Risk Report for future Reconfiguration Programme Trust Board meetings.

DEF/
RPD

25/21/3

Travel Action Plan

The Director of Estates and Facilities presented paper E, which provided an update in terms of travel planning support and development for the Reconfiguration Programme.

On 14 September 2020, Go Travel Solutions had been commissioned to work alongside the Trust's Travelwise Manager to provide Travel Planning Support and Development for the Trust covering the consultation phase of Building Better Hospitals for the Future and help develop long-term investment in sustainable travel for the Trust. The Travel Action Plan from Phase 1 had now been completed and work was progressing on Phase 2 of the project; which involved further development of the Plan. Go Travel Solutions and the Travelwise Manager had met with various council representatives (Leicester City Council, Rutland County Council, Leicestershire County Council). In addition to overarching meetings, specific meetings had been held around bus and cycle developments in the City. The basis of a partnership was now in place with Leicester City Council that would help to deliver a multi-million pound investment in cycling and buses, offering a step-change in sustainable transport provision for the UHL sites, particularly LRI and Glenfield

Hospital. The Trust needed to provide senior level support to prioritising sustainable travel for staff, visitors and patients (where appropriate) and a clear route for submission of proposals (both policy and monetary) to ensure that partnerships could be given the clear message that the Trust was in support of sustainable travel options. In addition to support, the report highlighted that the Trust was likely to have to consider providing finance to facilitate changes in travel options.

In presenting this report, the Director of Estates and Facilities noted that this represented a key piece of work in which there was significant public interest. There was a need to recognise the pressure in terms of access for cars onto the Trust's sites, so it was vital to progress services and facilities in terms of other transport systems.

Specific discussion took place regarding the following:-

- (i) Professor Baker, Non-Executive Director, noted that it was sensible to minimise the volume of cars on site and queried, where car parking was located, whether electric charging points would be provided – the Director of Estates and Facilities confirmed that electric charging points would be provided with the national recommendation the minimum that would be provided;
- (ii) Mr B Patel, Non-Executive Director, noted that he was encouraged by the plan, and made reference to the fact that the key issue in terms of Park and Ride and Hopper Services was the frequency at which they operated – in response, the Director of Estates and Facilities noted that this was one of the narrative themes and that a very comprehensive analysis had been undertaken by GoTravel and shared with Leicester City Council;
- (iii) Mr A Johnson, Non-Executive Director, advised members of his involvement in the NHS Disabled Directors' group which had now been formed, noting that some other Trusts seemed to be ahead of UHL in terms of their provision for disabled patients and staff (e.g. operating self-drive scooter schemes) and noted the need to ascertain what other Trusts offered – the Director of Estates and Facilities requested that Mr Johnson shared the work of the group with the Reconfiguration Team as appropriate;
- (iv) Col (Ret'd) I Crowe, Non-Executive Director, expressed concern at the potential exclusion of or the lack of consideration of the needs of those people living in rural areas who needed to utilise public transport to access UHL's services, and he queried why Rutland County Council did not sit on the Steering Group referenced within the report – the Director of Estates and Facilities undertook to ascertain why;
- (v) the Chairman emphasised the need to reflect on the change in working practices brought about by the Covid-19 pandemic and the likely balancing, in future, of undertaking work both virtually and physically which was likely to affect the demand for car parking spaces on site, and ought to be taken into account when planning;
- (vi) Col (Ret'd) I Crowe, Non-Executive Director, noted that he had made use of Facetime Visiting in a personal capacity over the past few days and had found it extremely beneficial for his family and in terms of infection prevention. He considered that this should continue to be taken forward in future and was of particular benefit in Winter, and
- (vii) in terms of sustainability issues, the Chairman made note of an email he had received from a Consultant working at the Trust detailing the actions being undertaken in one of the Trust's services to be as 'green' and sustainable as possible – he undertook to send a copy onto the Director of Estates and Facilities, the Reconfiguration Programme Director and the Chief People Officer for their information.

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Trust
Chairman

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

(B) (in response to a query posed) the Director of Estates and Facilities be requested to ascertain why Rutland County Council was not currently represented on the Steering Group, and

DEF

(C) the Chairman be requested to send to the Director of Estates and Facilities, the Reconfiguration Programme Director and the Chief People Officer, a copy of an email received from a Consultant detailing the actions being undertaken in one of the Trust's services to be as 'green' and sustainable as possible.

Chairman

25/21/4

Reconfiguration Programme Expenditure

The Director of Estates and Facilities presented paper F, which updated the Trust Board on the financial position in relation to the Reconfiguration Programme together with an update on the

2020/21 Reconfiguration Capital Spend against the Trust's annual Capital Plan, and noted the intention to simplify the information presented at future meetings. All schemes (the Reconfiguration Programme, EMCHC and ICU schemes) were all currently underspent.

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

26/21 QUESTIONS AND COMMENTS FROM THE PRESS AND PUBLIC RELATING TO BUSINESS TRANSACTED AT THIS MEETING

There was one question raised by a member of the public. The specific question posed and the response provided are as detailed below:-

Question from Ms G Foster: -

The response given to my question last month, as recorded in the Minutes (*Minute reference 291/20 of 3 December 2020*) fails to mention that the emergency identified in 2015 and upon which one or two of the scrutiny committees, at that point in time, agreed to UHL proceeding with ICU reconfiguration without consultation could not be said to have persisted as an emergency for the following 3 years. My recollection is that the matter had not gone to joint scrutiny all before 2018 as required. Can you confirm? In the different circumstances of 2018, would you agree with me that the Joint Scrutiny Committee was right to hold the Trust to account since the Trust had neither approached the JHOSC to table the issue itself nor had it taken steps towards a formal public consultation? And would you agree with me that the problem of lack of consultation, raised in the document you refer to, had already been raised with UHL on several previous occasions? Additionally, if the consultation had taken place as indicated on page 2 and 27 of the PCBC, can you point me to the consultation documents?

In response, the Director of Strategy and Communications confirmed that the Intensive Care Unit at the LGH had been on a 'knife edge' and this issue had represented the greatest clinical risk for the Trust. This emergency had lasted for three years as there had been no money available to provide a resolution within this timeframe and the Trust had only been able to manage the situation due to its clinicians going 'above and beyond' during this time period and trusting that the Trust would address this issue as soon as it was in a position to do so financially. In terms of communication with the HOSCs, the Trust had consulted with the City HOSC, the County HOSC and latterly with Rutland HOSC who gave similar advice in slightly different ways (noting that the Joint HOSC was not functioning at that time). The delay had cost the Trust dearly (Covid-19 having clearly demonstrated, now more than ever, the importance of ICU care) and the Director of Strategy and Communications expressed some frustration on behalf of staff at continued questioning of this decision when the media was currently showing the 'living hell of intensivists' during the Covid-19 pandemic.

The Chairman thanked the Director of Strategy and Communications for his response, albeit highlighted that the Trust was operating in a democratic context and, as such, noted the freedom of the public therefore to ask questions.

Resolved - that the above-referenced question and response be noted.

27/21 ANY OTHER BUSINESS

Resolved – that there were no further items of business.

28/21 DATE OF NEXT MEETING

Resolved – that the next public Trust Board Reconfiguration Programme meeting be held virtually on Thursday 4 February 2021 from 2pm.

29/21 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 30/21 – 35/21) having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.

30/21 DECLARATIONS OF INTEREST IN THE CONFIDENTIAL BUSINESS

The Director of Operational Finance and Mr A Johnson, Non-Executive Director declared their respective interests as Finance Director / Company Secretary 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.

31/21 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.

32/21 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.

33/21 KEY ISSUES FOR DISCUSSION/DECISION

33/21/1 Confidential Reports 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.

34/21 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.

35/21 DATE OF NEXT MEETING

Resolved – that the next private Trust Board Reconfiguration Programme meeting be held on Thursday 4 February 2021 from 2pm.

The meeting closed at 3.58pm

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	17	17	100	K Jenkins (until 27.7.20)	3	2	67
J Adler (until 18.9.20)	7	0	0	A Johnson	17	17	100
V Bailey	17	16	94	S Lazarus	17	13	76
P Baker	17	17	100	D Mitchell	17	13	76
R Brown	17	16	94	B Patel	17	17	100
I Crowe	17	17	100	M Traynor	17	15	82
C Fox	17	11	65	M Williams (from 2.9.20)	12	12	100
A Furlong	17	16	94				

Non-Voting Members:

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance
A Carruthers	17	16	94	S Ward	17	17	100
D Kerr	17	17	100	M Wightman	17	17	100

H Kotecha	14	13	93	H Wyton	17	16	94
V Karavadra (until 31.12.20)	15	11	73				