

BOARD OF DIRECTORS
WEDNESDAY 13 MAY 2020
Via Video Call
MINUTES

Chair	Dr Neil Goodwin	NG	Chairman, LHP
Partners	Dr Liz Bishop	LB	CEO, Clatterbridge Cancer Centre NHS FT
	Prof. Seth Crofts	CA	Associate Dean for Research & Innovation, Edge Hill University
	Prof. Raphaela Kane	RJ	Director- School of Nursing and Allied Health, Liverpool John Moores University
	Prof. Louise Kenny	LK	Executive Pro Vice Chancellor, University of Liverpool (UoL)
	Prof. David Laloo	DL	Director, Liverpool School of Tropical Medicine
	Dr Andrew Loughney	AL	Medical Director, Liverpool Women's Hospital (LWH) NHS FT
	Dr Marga Perez-Casal	MPC	Director of Research & Innovation, Liverpool Heart & Chest (LHCH) NHS FT
	Joe Rafferty	JR	CEO, MerseyCare
	Louise Shepherd	LS	CEO, Alder Hey Children's Hospital (ACH) NHS FT
	Kathryn Thompson	KT	CEO, Liverpool Women's NHS Foundation Trust
	Jane Tomkinson	JT	CEO, Liverpool Heart and Chest Hospital
	Steve Warburton		CEO, Liverpool University Hospitals (LUH) NHS FT
	Mike Burns	MB	Director of Finance, The Walton Centre
In attendance	Dr Dawn Lawson	DL	CEO, LHP
	Dr Mark Jackson	MJ	Director of Delivery and Performance, LHP
	Dr Rachel Joynes	RJ	Director of Research Infrastructure and Education, LHP
	Caroline Keating	CK	Director of Corporate Services, LHP
	Prof. Tony Marson	TM	Director of Research Programmes, LHP
	Dr Liz Mear	LM	CEO, Innovation Agency
	Frankie Morris	FM	Head of Financial Management, LHCH
	Elizabeth Taylor	ET	Corporate Business Manager, LHP
	Sarah Wright	SW	Head of Delivery and Performance, LHP
Guests	None	-	-

DECISIONS MADE AND ITEMS NOTED AND APPROVED:

- The LHP Board supported the LHP approach to reset and continue to support the STOP COVID command structure and noted the CEO’s paper.
- The LHP Board noted the risk assessment of the impact of COVID-19 to the LHP Business plan.
- The LHP Board noted the COVID-19 Rapid Research Response
- The LHP Board noted the LHP Performance Dashboard.
- The LHP Board noted learning from the Performance Assurance Reviews
- The LHP Board noted the Finance Performance and Risk Committee minutes of 04 May 2020.
- The LHP Board approved the LHP Finance Report.

Ref	Item	Action
1	Apologies for Absence	
	Apologies were received from the following members: Hayley Citrine, (CEO, The Walton Centre NHS FT) – nominated Mike Burns as deputy Jan Ledward (Chief Officer, Liverpool Clinical Commissioning Group)	
2	Declarations of Interest To receive declarations of interest in agenda items and/or any changes to the register of directors’ declarations of interest. None noted.	
3	Minutes of the Previous Meeting (27 March 2020) The Minutes of the last meeting were approved as an accurate record.	
4	Chief Executive’s Report The paper primarily focussed on the STOP COVID Command Structure with thanks being noted for partners’ help in delivery and collaboration. The ‘command’ structure is now fully operational following great input across all sites and continues to be refined. LHP have had positive feedback about the process which has allowed proactivity in setting up and delivering COVID research studies. A cohesive academic strategy sits alongside this coordinated structure maximising collaboration. LHP are thinking strategically about service evaluation and audit as important tools to help us deal with COVID-19. We are thinking proactively around learning to mobilize reset for LHP and the city. This learning will be brought back to July Board. LHP met recently with the University of Glasgow to discuss their work in health and across academia given distinct similarities between Glasgow and Liverpool. Discussion focused on community engagement work and public health indicatives with great scope for collaboration. DL will bring a proposal back to the July Board to demonstrate collaborative working. LHP and the Innovation Agency had an executive to executive meeting recently to discuss shaping the national proposal and developing the City-wide approach. LM noted the importance of the research innovation pipeline post –COVID recognising the	DL DL DL

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	<p>Agency's support to the LHP approach as a conduit to help patients and the country as a whole. LS noted an enthusiastic response from clinicians to a more streamlined way of working which should continue post-COVID. DL will return to July Board with a stakeholder-led proposal to facilitate this.</p> <p>The Board supported the LHP approach to reset and continue to support the STOP COVID command structure. The CEO paper was noted.</p>	
5	<p>Strategy and Operations:</p> <p>Risk Assessment of the impact of COVID-19 on the LHP business plan</p> <p>The Board reviewed the risk assessment on the impact of COVID-19 to the LHP Business plan. This is a companion paper to support a previous iteration at the March Board and is a risk analysis of the potential impact of COVID. The main tenant is that the principle impact is one of engagement, both with existing member organisations and potential new members.</p> <p>With this in mind MJ developed a RAG-rated structure, the methodology of which was previously approved at the Finance Performance and Risk Committee as follows:</p> <p style="padding-left: 40px;">If a deliverable is rated green it is believed that it can be delivered without any impact; if rated amber, it has been assessed that the level of engagement required may be more problematic but that this is still achievable on an ad hoc basis; and if rated red, the conclusion is that wholesale sustained engagement is required at the same point and bringing the whole community together as a system, and therefore the deliverable will need to go into next year's business plan.</p> <p>There are two red rated items: 'Supporting a culture of research and innovation' and, 'Attraction of new members and improving coverage across the region'. LS suggested that current STOPCOVID activity will mitigate both within the assessment as current and potential members will note the difference LHP are making; suggesting that an organic move towards increased membership might take place.</p> <p>SPARK and programmes offer a high level of support to STOP COVID and the development of COVID related work streams. Programmes are engaged in the development of COVID specific deliverables which will be incorporated into future revisions of the business plan.</p> <p>The impact on engagement introduces a significant risk to the financial plan supporting the LHP business plan. Risk mitigation factors have been pulled together at the Finance sub-group which may be drawn upon over the next 12-24 months. MJ will detail this in the Corporate Risk Register at July Board and will update progress against the business plan on an ongoing basis.</p> <p>NG and DL are meeting with Alan Yates and Jackie Benet to discuss a relationship between the Cheshire and Mersey Partnership to raise the profile of research and will</p>	<p>MJ</p> <p>NG DL</p>

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	<p>report back to the July Board meeting.</p> <p>The Board noted the risk assessment of the impact of COVID-19 to the LHP Business plan.</p> <p>COVID-19 Rapid Research Response</p> <p>The Board reviewed the COVID-19 Rapid Research Response which has been a great opportunity to act at pace across the region and demonstrates being as agile as possible. All partners are now pivoted to respond to the national and regional need around COVID. Prior to the implementation of this, SPARK had already started to drive down set-up times which was advantageous. The structure links into programmatic activity at LHP as we try to provide the intelligence collator function to develop research projects and to feed into projects around grant applications with ratification at Silver and Gold level. This works in parallel with the Clinical Research Network to ensure we are aligned and making best use of the workforce.</p> <p>The Research Response objectives are:</p> <p>Research studies</p> <ul style="list-style-type: none"> • Effectively prioritise studies to deliver in LCR aligned to collective strategic priorities • Create a balanced portfolio to include national (Urgent Public Health classified and potentially others) and local strategically important research studies to deliver maximum system benefit. • Set up and deliver studies quickly and efficiently <p>Workforce and infrastructure</p> <ul style="list-style-type: none"> • Prioritise & mobilise the workforce with appropriate skills and expertise and infrastructure • Integrate the coordination of research delivery across the City drawing CRN and Trust funded research delivery staff into one research delivery workforce for Liverpool <p>Other activity</p> <ul style="list-style-type: none"> • Enhanced support for trusts with capacity reporting and planning • Clear and streamlined COVID specific operational work programmes (e.g. new processes to enable research) • Coordinated foresight and resolution of strategic and operational challenges <p>The Command Structure is chaired as follows:</p> <ul style="list-style-type: none"> • Liverpool Executive Leadership Group (Gold) Chaired by LK, UoL and meeting every Friday. JR and Tony Reeves now attend. • COVID Rapid Response Group (Silver) Chaired by William Hope, UoL meeting Mondays, Wednesdays and Fridays. • Operational Leaders Executive Group (Bronze) meet on Mondays and Thursdays with data submissions on Fridays. <p>Whilst work continues on denominator data, current statistics show:</p>	

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	<ul style="list-style-type: none"> • 6.5 day median for setup of COVID studies. • 40 grants in the pipeline – 2 to 3 times more than usual • 2261 recruited as of 12th May <p>As the structure evolves ways of sustaining support are constantly reviewed. A call out for volunteers has proven successful drawing a good mix of candidates including senior clinicians. There is a focus on working with primary care to create better integration across the system.</p> <p>The Healthcare Worker Platform will allow a delivery of research clinics across all member sites and demonstrates that we are a city working together.</p> <p>Through necessity, our initial response has been NHS research based and as the approach shifts we need to reflect this with the wider impact the pandemic has had across systems and platforms. A recent LHP HEI meeting took place where academic leads across the system discussed a more cohesive approach to promote collaboration, reduce duplication of effort and create the strongest proposals and protocols to aid reset which are fit for purpose, linking to the right system.</p> <p>The CDC will be important as an opportunity to formulate an innovation marketplace and better utilise civic data.</p> <p>LB asked where this benchmarks against other HSCs. LK explained that our city-wide approach might not be unique but that we have had no BRC or science research centre support. In terms of contribution to UPH studies we are doing well in relation to our normal CRN activity and we are (reassuringly) mid-table for recruitment on large UPH trials. We have circa £2m funding (largely repurposed from UoL with £300k generously donated from AHC) funding 22 projects, half of which have UKRI support. The UoL is establishing a GCP laboratory in collaboration with LCL to allow LCL to pivot back with non-COVID work but also to enable the UoL to do background COVID work until the next peak arrives.</p> <p>JR noted the requirement to consider local innovation and review how best to scale this up. LK asked that capacity is shared on a daily basis to best support this and allow planning. Mirem Iturriza-Gomara is currently looking at 7.5k fast platforms and developing workflows to scale up local capacity to 5k tests per day. This will provide community based testing outside the official guidelines. JR will advise LK on required capacity on a daily basis. LK hopes for a 24 hour turnaround for this and will advise July Board on findings.</p> <p>Our approach has been recognised nationally and has generated positive feedback. We are also set up to improve as we scale out to community and wider recruitment. Wider communications are required to highlight activity.</p> <p>MPC noted a requirement to use learnings to react within the system in future to consider where support and resource goes before it is outsourced. This is a time where we can look at system-wide solutions.</p>	<p>JR LK</p>

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	<p>LHP are keen to look to the future and think constantly about restart, recovery and reset. A more cohesive report demonstrating this will be brought to July Board for consideration.</p>	<p>RJ</p>
<p>6</p>	<ul style="list-style-type: none"> <p>• LHP Performance Dashboard</p> <p>It was noted that:</p> <ul style="list-style-type: none"> (i) Data is restricted because of COVID – LHP continues to work sensitively with Partners to obtain this. (ii) Study set up times are significantly improved compared to historical performance. (iii) Next year’s dashboard shows amendments to measures reported on previously to give partners insight. This includes new programmes in neurosciences and mental and social wellbeing. Recruitment is aligned to CRN health needs. A COVID-19 section has been added and will act as a performance management model. More granularity has been added to SPARK data together with reporting on development of CDC and the Innovation Model. (iv) Membership growth remains a risk and the short term plan will be monitored. There is the inclusion of an income generation strategy to close this gap. (v) Alcohol admissions have risen and according to health centre metrics more people nationally are impacting on the health system because of this. (vi) Awards – numbers cannot be reported completely due to COVID and also a number of projects are due to be activated that have not yet been reported. <p>The Board noted the LHP Performance Dashboard.</p> <ul style="list-style-type: none"> <p>• Learning from the Performance Assurance Reviews</p> <p>There is an excellent level of engagement with LHP stakeholders. Priority setting is supported, strong partnerships are demonstrated and the first shoots of capacity building activity have begun.</p> <p>Clearer deliverables were needed and these have been built into the business plan. Better engagement was needed with LCTC and the NIHR infrastructure but this has been improved by the STOPCOVID structure. RJ and TM are meeting with Paul May re ICAT to help with training.</p> <p>Overall, there is a better engagement with a critical infrastructure in place. We need to be more active around building research capacity and academic capacity building and will continue to work closely with programmes and UoL to take the work forward. TM noted that tangible deliverables would be welcomed by academics.</p> <p>The Board noted learning from the Performance Assurance Reviews</p> 	

GOVERNANCE AND FINANCE		
7	<p>Finance Performance & Risk Committee – Minutes 04 May 2020</p> <p>MB confirmed that the Finance and Performance Committee confirmed the ToR of the sub-business group.</p> <p>MB noted a discussion around SPINE with required social distancing measures to be factored into the design of the workspace.</p> <p>MB asked that the good progress with SPARK studies were noted.</p> <p>The LHP Board noted the Finance Performance and Risk Committee minutes of 04 May 2020.</p>	
8	<p>LHP Finance Report</p> <p>The Chair welcomed Frankie Morris, Head of Finance Management at LHCH.</p> <p>FM presented the February and March 2020 accounts noting that a transfer of £73k had increased the reserve to the next financial year of £1.135m. Following some teething problems with transfer and some expenditure the final cash position form UoL will be transferred by 31.08.20 with the initial cash balance being £1.24m.</p> <p>The Board approved the LHP Finance Report.</p>	
9	<p>Items for the Strategic Risk Register</p> <p>The Board did not identify risks to the membership engagement and subsequent impact on the LHP financial plan nor additional items for the Strategic Risk Register arising from discussions at the meeting.</p>	

CONSENT MINUTES *(all items 'to approve' unless stated otherwise)*

The following items have been read by Board members and no comments or questions received from members.

©	LHP Board Declaration of Interests	
	This was noted with the Chair requesting null returns from Members if not yet submitted.	ALL

CONCLUDING BUSINESS		
10	<p>Any Other Business</p> <p>LHP have appointed a new communications agency, the J&R Agency, who will start with us on 01.06.20.</p>	
	<p>Date of Next Meeting:</p> <p>Wednesday 20 July 2020 11am – 1pm (format tbc)</p>	

The LHP Board is committed to being open and transparent but there are times when the Board will need to consider agenda items that are confidential. These items will be identified in advance of the board meeting and discussed under a Part II Board agenda. The minutes recording the discussion on these items will not be made available on the website.

e: info@liverpoolhealthpartners.org.uk

t: +44 (0)151 482 9388

w: www.liverpoolhealthpartners.org.uk

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