

BOARD OF DIRECTORS

Date (DD/MM/YYYY)

27/07/2021

Venue

ZOOM

Time

14:30 – 16:30

Chair	Prof Eliot Forster	EF	Chairman, LHP
Partners	Prof Louise Kenny	LK	Executive PVC, UoL & Deputy Chair, LHP
	Prof David Laloo*	DLa	Director, LSTM
	Clare Austin	CA	Pro Vice Chancellor Dean of Health, Social Care, EHU
	Jenny Crookes	JC	<i>Attending for Jane Tomkinson</i>
	Jan Ross	JRo	Interim CEO, The Walton Centre NHS FT
	Clare Morgan	CM	<i>Attending for Steve Warburton</i>
	Joe Rafferty	JR	CEO, Mersey Care NHS FT*
	Kathryn Thompson	KT	CEO, LWH NHS FT
	Dr Liz Bishop	LB	CEO, CCC NHS FT
	Louise Shepherd	LS	CEO, AHCH NHS FT*
	Dr Phil Jennings	PJ	CEO, IA*
	Prof Raphaela Kane	RK	Dean of the Faculty of Health, LJMU
	Michael Beresford*	MB	PD for Starting Well, LHP*
Colin Morgan*	CoM	Deputy Director for Starting Well, LHP	
Attendance	Dr Carrie Hunt*	CH	PM for Starting Well, LHP*
	Dr Dawn Lawson	DL	CEO, LHP
	Lindsey Nicholson	LN	Senior EA/Office Manager, LHP
	Karen Edge	KE	Director of Finance, LHCH NHS FT
	Dr Mark Jackson	MJ	Director of Delivery and Performance, LHP
	Dr Rachel Joynes	RJ	Director of Research Infrastructure and Education, LHP
	Prof Tony Marson	TM	Director of Research Programmes, LHP
	Jan Ledward*	JL	Chief Officer, NHS Liverpool CCG
Apologies	Steve Warburton	SW	CEO, LUHFT (Clare Morgan deputising)
	Prof Enitan Carroll	EC	Clinical Director of NIHR Regional Research Network
	Jane Tomkinson	JT	CEO, LHCH NHS FT (Jenny Crookes deputising)

* Denotes partial attendance

DECISIONS MADE AND ITEMS NOTED OR APPROVED BY THE LHP BOARD:

- The minutes and action log of the meeting of LHP Board meeting of 27th July 2021 were **approved** as a true and accurate record.
- The Board **noted** the Chief Executive Update.
- The Board **noted** the Starting Well Programme Update.
- The Board **noted** the presentation on The Pandemic Institute.
- The Board **noted** the report on Working with the C&M ICS.
- The Board **noted** the Partner's updates.
- The Board **noted** the Performance and Risk Report **with actions arising**.
- The Board **approved** the LHP Strategy Refresh report.
- The Board **noted** the Finance, Performance and Risk Committee Minutes (14 July 2021)
- The Board **noted** the Finance Report for the management accounts to 31st May 2021.
- The Board **noted** the Membership Agreement
- The SLG Minutes of 1 July 2021 were presented as a consent item and were **approved**.
- The LHP Grand Round Webinar report was presented as a consent item and **approved**.
- The LHP Threats to Research Preparedness Plan report was presented as a consent item and approved.

ACTIONS ARISING FOLLOWING DISCUSSIONS OF THE LHP BOARD:

- Performance and Risk Report - changes to be made to SPARK data reporting format.

v = verbal d = document p = presentation

PRELIMINARY BUSINESS		
B21-22/018 (v)	Apologies for Absence	Action
	Apologies for absence were noted from Steve Warburton (Clare Morgan attending), Prof Enitan Carroll and Jane Tomkinson (Jenny Crookes attending).	
B21-22/019 (v)	Declarations of Interest	Action
	No declarations of interest were noted.	
B21-22/020 (d)	Minutes of the Previous Meeting (27 July 2021)	Action
	The minutes and action log of the meeting of 27 July 2021 were approved as a true and accurate record.	
B21-22/021 (d)	Chief Executive Update	Action
	Before handing over to the CEO, the Chair noted he had undertaken approx. 40 discussions with partner representatives. Amongst wide-ranging discussions, the Chair noted the nature of the language and	

	<p>descriptors used by the partners about ourselves, which is of course founded in history and social and institutional norms. It is likely that the language we use about ourselves is in turn used by others about us. One consideration is to say that we “are doing things differently” and note the success related to the Covid-19 pandemic.</p> <p>The Chief Executive Update was presented by the CEO, LHP, for information.</p> <p>The CEO noted work taking place to build relationships with other academic health sciences partnerships. There are a number of reasons why this is important, primarily that as we are undertaking our Strategy Refresh, LHP must be clear of what the external environment is, how other systems are responding to the post-COVID environment and identifying opportunities for collaboration. All AHSC/Ss are exploring how best to work with the new ICSs. Furthermore, there will be new opportunities for genuine collaborations given the new focus on the ‘levelling up’ agenda. Early but promising conversations are in train with UCL Partners, Kings Health Partners and Bristol Health Partners.</p> <p>The Board noted the Chief Executive Update.</p>	
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STRATEGY AND PERFORMANCE

B21- 22/022 (p)	Programme Update Presentation - Starting Well	Action
	<p>Michael Beresford (MB), Programme Director for Starting Well presented the update.</p> <p>MB thanked the Board for the opportunity to provide an update, expressed gratitude to the Board for the opportunity as a system to do things differently with regards to the life-course and noted that Matt Ashton’s appointment as Programme Director for Living well is exciting. Aim of the presentation is to give update on progress and key areas of focus. MB particularly acknowledged the strategic oversight group which is established, working well and ensures information is disseminated and integrated into partner organisations.</p> <p>Carianne Hunt provided context to priorities and how they link to theory of change routed in Delphi theory of change. CH noted over the last 18mth it has been difficult to keep the agenda on Starting Well, theory be vital and helpful to show how core aims link to overall regional population health. It’s also useful at operational level at showing how partners can be involved in Starting Well and it’s projects and shows gaps in structure around the ICS. It’s important to reflect to cover all key areas and avoid duplication.</p> <p>CH also noted:</p> <ul style="list-style-type: none"> - The importance of looking at projects across the 5 Programmes 	

	<p>whilst also mapping projects and programs across the life-course to show focus and deliver on a breadth of projects. This approach helps show potential gaps to invest resources, highlights complimentary projects and helps communities how partners services and projects relate to and can work with the Programme.</p> <ul style="list-style-type: none"> - For the last 18mths they have been looking to coordinate governance and coordination structures for Starting Well. The Strategic Well Strategic Oversight Group (SWSOG) now looking to develop and at the projects that feed into the group and looking at performance management of those groups, this work is ongoing. Has been coordinated to ensure they are focusing across the partnership. <p><i>David Laloo joined the meeting</i></p> <ul style="list-style-type: none"> - Various Groups have been established that sit under the SWSOG, some have funded research applications, some operate at a network level and are developing research ideas. These groups are crucial in bringing communities together to work collaboratively and are the mechanisms for delivering projects. - Some groups have submitted research applications. Examples include Liverpool Obesity Research Network (officially launched from University of Liverpool) are keen to develop how that links into ICS and how to work in future to bring a focus on obesity and ensure NHS and HEI collaboration across the group. Another example is the SEND working group is effective at bringing HEI together and looking at impact of Covid on children and young people and examining policies and practices. Key work to come is not just related to Covid. - Groups are not just talking shops, are about focusing on and discussing research ideas and think about submitting research applications as well as looking at service improvement projects. <p>MB noted;</p> <ul style="list-style-type: none"> - The working groups function best with engagement and true partnership of both NHS and HEI's, he encouraged all partners to foster and support engagement as much as possible. - The Programme is working with a number of partners within the system (UNICEF Child Friendly City, The ARC & IA). Trying to develop the wider conversations around response to Marmot Review as well as working collaboratively with Cheshire and Merseyside Partnership and evolution of the ICS. Exciting to see 	
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	<p>commonality in areas of focus, working groups are very closely aligned. Over the coming months this will be a particular focus to ensure there's a evaluation and research element to the interventions the ICS wants to take forward in its strategic priority areas.</p> <ul style="list-style-type: none"> - One challenge noted is importance of building community, developing and supporting that community and how to build research capacity. MB is grateful to SWSOG members for working closely on this. <p>Colin Morgan shared some initiatives in development to build a multi-professional platform to develop research capacity within the Starting Well community:</p> <ul style="list-style-type: none"> - One of key areas is within Cheshire and Merseyside region there are a number of training pathways for women and children's health; advanced clinical practice in maternity, neonatal and pediatric care, Post Graduate medical education in obstetrics and pediatrics and other healthcare pathways of mandatory training and continued professional development. They are all located on same platform so resources can be shared to generate a research culture. It's about creating culture around expectation that there will be ongoing research. Infrastructure important to developing success to new and existing trials. The platform, supported by LHP, is about developing research methodology and a repository of information to allow those not familiar with research to contact it and understand methodology. This can be applied into service improvement, audit and new models of care where ordinarily these individuals would be intimidated by prospect. Important bridge between day to day clinical practice and academic research. Platform will allow engagement with methodologies and understand grant funding application process and opportunities. - Next step is to build content of the platform then monitor usage and respond accordingly. Platform enables rapid response to customer demand, recent example is Statistical Methodology lecture series which got huge engagement. - Another area of interest is Innovation, good examples are; - Working closely with LJMU on their project to develop device for research to explore effects of touch on neurodevelopment in babies. - Industrial collaboration with a UK company in the development of body water and composition content device, good example of how a device can be used by a life-course theme. 	
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	<p>MB noted that this illustrates the wide range of opportunities in the Innovation space and Starting Well is looking with the Chair at the potential across the Starting Well age group building on the strength of innovation, research and education within the eco-system.</p> <p>To conclude, MB highlighted going forward;</p> <ul style="list-style-type: none"> - How do Starting Well continue to focus on their specific contribution to delivery of their priorities. Bringing in teams across members with clear focus and profile. Some will grow or some may change focus and move focus. There is a capacity issue, priority is to delivery across all priority areas. - Very excited by forward strategy and strategy refresh. Seek continued support across the partnership in delivering priorities. While trying to engage with the evolving eco-system and the emerging ICS, looking for guidance on how Starting Well can feed into this most constructively. <p>Kathryn Thompson noted she is glad to see the progress and a line being drawn between the ICS and what Starting Well and LHP are doing. KT offered for herself and LS to spend time with Starting Well, as they are SRO's for women and children and young people, working closely to bring those pieces together. With their programmes on behalf of Cheshire & Merseyside and wider, a conversation that links it all up might be beneficial. LS, KT, CH, MB and CoM to try to more tightly knit together programmes.</p> <p>MB thanked KT and stated they had met with Liz Crabtree and agreed that bringing KT, LS and Steve Ryan together would be welcomed with his focus on integrating it from a clinical advisory perspective. The modelling of how LHP and it's programmes and life-course dimensions can support the ICS going forward would be of interest to the Board.</p> <p>LS agreed with KT on importance of aligning agendas and welcomed a meeting to do this noting there is opportunity in ICS to regroup around this withing the City, especially in terms of aligning the research and service elements.</p> <p><i>MB, CH & CoM left the meeting</i></p> <p>The Board noted the Starting Well Programme update.</p>	
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B21- 22/023 (p)	Global Pandemic Institute	Action
	<p><i>Matthew Baylis joined the meeting.</i></p> <p>Louise Kenny introduced Matthew Baylis (MBay), Interim Director of The Pandemic Institute who gave a presentation following which there was a group discussion.</p> <p>The Chair asked if the Pandemic Institute were anticipating establishing a physical presence as well as collaborative network.</p> <p>MBay confirmed there are plans to have a space in The SPINE building in Liverpool as an operational centre and there is a desire to build a high containment CL4 research facility if appropriate funding is realised. There are currently 8 facilities in the UK with none of those outside of London and the levelling up agenda points to having one in the north of the country, this would be good for the region.</p> <p>LS asked how do they see this scaling up? It has come out of great collaboration, will there be external investment?</p> <p>MBay explained it started with concept, hoping to attract government funding. Vision is exciting enough to attract strong private sector interest, with a significant private investment already to get the Institute this far. More meetings are due to take place to move up the investment obtained. Long way to go to have sufficient funding but got off to good start.</p> <p>LS responded that it's a great example of a vision with good people around it attracting investment. It's a lesson for wider LHP on creating those shared visions that are relevant and excite people.</p> <p>LK as a follow on from The Chairs question about physical presence stated that the physical presence in The Spine is about having a front door. Infrastructure plans are around bringing infrastructure up to a level around the city to offer end-to-end capability and exploit infectious disease expertise in region. The Pandemic Institute is the front runner in health innovation in Liverpool, LCC comprehensive spending review is around health innovation so it is good news to have them behind health. Will be a bigger physical presence but now about making collective strengths are more than sum individual parts and play into this unique offer. Liverpool can walk the walk with heritage of expertise which was proven during pandemic. At the moment focused on a robust governance and structure for the organisation.</p> <p><i>Matthew Baylis left the meeting.</i></p>	

	The Board noted the presentation on The Pandemic Institute	
B21-22/024 (d)	Working with the C&M ICS	Action
	<p>LHP Director of Research and Innovation, Rachel Joynes (RJ), presented the report.</p> <p>RJ stated that as a follow-up to she's been having conversations on how support some of the wider research and innovation (R&I) bodies and infrastructure across Cheshire & Merseyside (C&M) to work with the ICS. Most HSC's and partnerships are developing approaches to working with their ICS's. LHP already works with the ICS, some R&I infrastructures work Northwest wide, some within C&M or locally and some with individual organisations and providers.</p> <p>At start of 2021, ICS asked for clarity as what the R&I infrastructures within C&M were offering and bringing in terms of research and evaluation. LHP, CRN, IA, ARC & RDS all work on different aspects of the research pathway and broadly have similar objectives. ICS have seen a patchwork of activities and programmes, working with core infrastructure to define consensus approach to working with the C&M ICS. Developing loose framework, building operational layers and an MoU. Framework to be inclusive and wide ranging and already supported by R&I bodies, the emerging programmes from the ICS and will be inclusive of strategic priorities and agreements between members.</p> <p>Objectives are to;</p> <ul style="list-style-type: none"> - Support better alignment of R&I bodies in interactions with the ICS, to develop shared understanding of need and opportunity - Develop clear messages to wider ICS about R&I and opportunities to engage - Provide clear and simple front door for discussion and activity across C&M <p>Next steps;</p> <ul style="list-style-type: none"> - Continue discussions - Setting-up working group to draft Memorandum of Understanding/Statement of Intent and pin down operational layers under the framework - Strat wider discussions with the rest of the system about provider and place <p>Clare Morgan (CM) noted that, having done this before, the piece to unlock was tangible examples which are important to take people on the journey. It would help ourselves to align priorities emerging from ICS with R&I as an enabler to generating high quality evidence to improve healthcare.</p> <p>RJ agreed it's very much about aligning internal language as R&I bodies before turning it into something more meaningful for clinicals colleagues in the ICS. Already had tangible examples; clinical pathway</p>	

	<p>work in Infection and System P Programme – research is a key part of those.</p> <p>The Board noted the report on Working with the C&M ICS.</p>	
B21-22/025 (v)	Partner's updates	Action
	<p>The Chair asked each of the partners to give a short verbal update about their organisations following which, he thanked them for their input and asked if they would give feedback on their thoughts about this agenda item.</p> <p>The Board noted the Partner's updates.</p> <p><i>Jan Leward left the meeting.</i></p>	
B21-22/026 (d)	Performance and Risk Report	Action
	<p>LHP Director of Delivery and Performance, Mark Jackson, gave a brief overview of the report.</p> <p>He highlighted;</p> <ul style="list-style-type: none"> - Study setup times continue to be delivered at historical levels of last 12mths. - Early in year so no exceptions to dashboard and risks are well managed. Refashioning of business plan and financial outlook with refashioning of membership structure has mitigated risks. Two amber (12 rated) risk have been fully discussed at the Finance, Performance and Risk Committee (FPRC), more details can be provided if required. - Changes made to the Board dashboard following focus on Organisational Development to keep board apprised including staff feedback. Covid activities continue (309 participants), awaiting CRN to provide recruitment targets and the dashboard will be updated. - Comms work continues and is now bearing fruit - Continuing stakeholder engagement work with awareness campaigns. - Risk appetite work being pushed towards end of year after strategy refresh. <p>A short discussion followed in which the following was noted;</p> <ul style="list-style-type: none"> - SPARK report data is the current month and the statistical process control chart goes back a long way. CM has challenged the presentation of this and has given pointers for improvement. LK noted it would be useful to have running tally showing cumulative grant total and that University of Liverpool TRAP funding shouldn't be included in the figures as it's internal funding that has been repurposed. This will be updated for next time. - R&D teams have been alerted that some of their data will be 	

	<p>brought up through to board so this will be done collaboratively with R&D leads.</p> <p>CM noted that FRPC and Board are seeking assurance that LHP systems and process have control and are meeting the partners needs. This is fundamental in promoting the success of system working and demonstrates reliability. The current presentation doesn't reflect story we want to tell.</p> <p>LK added that members want assurance via metrics to show successes including showing a) new grant income being brought in b) success rates, these would be two critical metrics.</p> <p>MJ noted the input from the Board and that the following would be actioned for the next meeting;</p> <p>The Board noted the Performance and Risk Report with actions arising</p>	MJ
GOVERNANCE AND ORGANISATIONAL DEVELOPMENT		
B21-22/027 (d)	LHP Strategy Refresh	Action
	<p>LHP Director of Delivery & Performance, Mark Jackson presented the report noting;</p> <ul style="list-style-type: none"> - Approaching end of current strategy refresh – want to refresh to ensure its aligned and in tune with plans of partners and in tune with system. - Mike Farrar (MF) is leading the engagement. He is trying to set-up workshop across summer but not ideal timing so being pushed back into September. MF starting with calls to individual Board members and will bring feedback into workshop in Sept. Will be additional workshops with R&D community, Heads of Infrastructure and other services from Liverpool and beyond. Also an internal workshop for Programme Directors & Managers and SPARK leaders in LHP and finally an additional truly external perspective from an Industry workshop. <p>The Chair noted this is an important piece of work to build a cohesive, binding and ambitious purpose, to launch first quarter of 2022.</p> <p>The Board approved the LHP Strategy Refresh report.</p>	
B21-22/028 (d)	Finance, Performance and Risk Committee Minutes (14 July 2021)	Action
	<p>LHP Director of Delivery & Performance, Mark Jackson presented the report noting;</p> <ul style="list-style-type: none"> - The committee received the finance report and accounts and risk report - The membership agreement was reviewed and approved to go through to individual organisations for signing. - FPRC attendance issues rectified by expanded membership, all 	

	<p>new members attended last meeting.</p> <ul style="list-style-type: none"> - Terms of Reference for the committee were augmented to take on formal responsibility for oversight of Operational Development plan and Information Governance arrangements – the committee approved this. <p>The Board noted the Finance, Performance and Risk Committee Minutes (14 July 2021)</p>	
B21-22/029 (d) B21-22/030 (d)	Finance Report	Action
	<p>The Director of Finance, LHCH, presented the Finance Report which covered the 1st April to 31st May 2021 reporting period.</p> <p>The report confirmed LHP reported a breakeven position with an increase in reserves of £213k which was higher than the planned £103k due to continued vacant posts and non-pay costs. Stable position considering Covid risks. All billed orgs have paid. Very positive considering risks exposed to.</p> <p>The Board noted the Finance Report for the management accounts to 31st May 2021.</p>	
B21-22/031 (d)	Membership Agreement	Action
	<p>The Chair presented the partnership Member Agreements, which have been through committee and legal review, were approved to go to members for signature. The updated agreements reflect LHP's switch from the previous Ltd company to one hosted by Liverpool Heart & Chest Hospital.</p> <p>The Chair requested a quick turnaround of the agreements.</p> <p>The Board noted the Membership Agreement</p>	
B21-22/032 (d)	© SLG Minutes (1 July 2021)	Action
	<p>The SLG Minutes of 1st July 2021 were presented as a consent item and were approved.</p>	
B21-22/033 (d)	© LHP Grand Round	Action
	<p>The LHP Grand Round Webinar report was presented as a consent item and approved.</p>	
B21-22/034 (d)	© LHP Threats to Research Preparedness Plan	Action
	<p>The LHP Threats to Research Preparedness Plan report was presented as a consent item and approved.</p>	

CONCLUDING BUSINESS		
B21-22/ 035 (v)	Any Other Business	Action
	No additional items of business were raised.	
B21-22/ 036 (v)	Items for the Corporate Risk Register	Action
	No items were to be added to, or amended on, the Corporate Risk Register as a consequence of meeting discussions.	
B21-22/ 037 (v)	Key Messages from the meeting	Action
	<p>The Chair gave a summary of the key messages from the meeting;</p> <ul style="list-style-type: none"> - Thanks to members for their participation in partner updates - please feedback - Work to anticipate ICS and work with The Pandemic Institute reflective of the power of collaboration. Collective participation by input or support is positive. - Many shared issues, though the scope and tone may be different. Suggests there can be collaborative working to improve these - Opportunity is obvious for LHP to work on partners behalf 	
	Date & Time of Next Meeting	
	Thursday 30 September 2021 between 3.00pm and 5.00pm, TBC	

There were no Part II items on today's agenda.

Abbreviations			
AHCH	Alder Hey Children's Hospital	ICS	Integrated Care System
BRC	Biomedical Research Centre	LHP	Liverpool Health Partners
C&M	Cheshire and Merseyside	LHCH	Liverpool Heart and Chest
C-GULL	Children Growing up in Liverpool	LJMU	Liverpool John Moores University
CCC	The Clatterbridge Cancer Centre	LUHFT	Liverpool University Hospitals NHS FT
CCG	Clinical Commissioning Group	LWH	Liverpool Women's Hospital
CEIDR	Centre of Excellence in Infectious Diseases Research	LSTM	Liverpool School of Tropical Medicine
CEO	Chief Executive Officer	NHS	National Health Service
CRN	Cancer Research Network	NIHR	National Institute for Health Research
DoDP	Director of Delivery and Performance	PD	Programme Director
DoRIE	Director of Research Infrastructure and Education	PM	Programme Manager
EA	Executive Assistant	PQQ	Pre-Qualification Questionnaire
EHU	Edge Hill University	PVC	Pro-Vice-Chancellor
FPRC	Finance, Performance and Risk Committee	R&D	Research and Development
FT	Foundation Trust	SLG	Strategic Leadership Group
HEI	Higher Education Institute	UoL	University of Liverpool
IA	Innovation Agency		