

## BOARD OF DIRECTORS

**Date (DD/MM/YYYY)**

**30/09/2021**

**Venue**

**ZOOM**

**Time**

**15:00 – 16:30**

<b>Chair</b>	Prof Eliot Forster	EF	Chairman, LHP
<b>Partners</b>	John Chester	JC	Director of Research and Innovation, AHCH
	Prof. Bertie Squire	BS	Prof. of Clinical Tropical Medicine., LSTM (attending for David Laloo)
	Sir David Dalton	DD	Interim CEO, LUHFT
	Clare Austin	CA	Pro Vice Chancellor Dean of Health, Social Care, EHU
	Prof. Tom Walley*	TW	Prof. of Clinical Pharmacology, UoL (attending for Louise Kenny)
	Jenny Crookes	JC	Associate Director of Research and Innovation, LHCH (attending for Jane Tomkinson)
	Mike Gibney	MG	Chief People Officer, Walton Centre
	Dr. Lynn Greenhalgh	LG	Medical Director, LWH
	Dr Liz Bishop	LB	CEO, CCC NHS FT
	Chris Smith	CS	Deputy Chief Finance Officer, LHCH
	Dr Phil Jennings	PJ	CEO, IA*
	Prof. Raphaela Kane	RK	Dean of the Faculty of Health, LJMU
<b>Attendance</b>	Dr Dawn Lawson	DL	CEO, LHP
	Lindsey Nicholson	LN	Senior EA/Office Manager, LHP
	Heather Favager	HF	Divisional Accountant for Hosted Services and Research, LHCH NHS FT
	James Bradley	JB	Deputy Chief Finance Officer, LHCH
	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
	Prof. Matt Ashton	MA	Programme Director, Living Well
	Elizabeth Collins	EC	Programme Manager, Living Well
<b>Apologies</b>	Jan Ledward	JL	Chief Officer, NHS Liverpool CCG
	Jan Ross	JRo	Interim CEO, The Walton Centre NHS FT (Mike Gibney deputising)
	Kathryn Thompson	KT	CEO, LWH NHS FT (Lynn Greenhalgh deputising)

	Prof. David Lalloo	DLa	Director, LSTM (Bertie Squire deputising)
	Louise Shepherd	LS	CEO, AHCH NHS FT (John Chester deputizing)
	Prof Louise Kenny	LK	Executive PVC, UoL & Deputy Chair, LHP (Tom Walley 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:

- No declarations of interest were made.
- The minutes and action log of the meeting of LHP Board meeting of 30th September 2021 were **approved** as a true and accurate record **with actions arising**.
- The Board **noted** the Chief Executive Update.
- The Board **noted** the Living Well Programme Update.
- The Board **noted** the Partner's updates.
- The Board **noted** the Strategy Refresh Update and **approved** two decisions presented in the paper
- The Board **noted** the Performance, Risk and Business Plan Report.
- The Board **noted** the Performance Assurance Review Feedback.
- The Board **noted** the Finance, Performance and Risk Committee Minutes (14 September 2021)
- The Board **noted** the Finance Report for the management accounts to 31st July 2021.
- The SLG Minutes of 1 July 2021 were presented as a consent item and were **approved**.

### ACTIONS ARISING FOLLOWING DISCUSSIONS OF THE LHP BOARD:

- **Minutes of the Previous Meeting (30 September 2021) [B21-22/040 (d)]**  
Minutes of 30th September 2021 LHP Board Meeting to be updated to show correction to period covered by the Financial Report presented at that meeting.

v = verbal d = document p = presentation

<b>PRELIMINARY BUSINESS</b>		
<b>B21-22/038 (v)</b>	<b>Apologies for Absence</b>	<b>Action</b>
	<p>The Chair noted apologies for absence from;</p> <p>Jan Ledward Margaret Thompson – represented by Heather Favager Louise Shepherd - represented by John Chester Enitan Carrol – represented by Chris Smith Jane Tomkinson – represented by Jennifer Crooks Louise Kenny – represented by Tom Walley Jan Ross – represented by Mike Gibney David Laloo – represented by Bertie Squire Kathryn Thomson – represented by Lynn Greenhalgh Karen Edge – represented by James Bradley</p> <p>The Chair welcomed David Dalton who represented Liverpool University Hospital Foundation Trust at LHP Board for the first time.</p>	
<b>B21-22/039 (v)</b>	<b>Declarations of Interest</b>	<b>Action</b>
	No declarations of interest were declared.	
<b>B21-22/040 (d)</b>	<b>Minutes of the Previous Meeting (30 September 2021)</b>	<b>Action</b>
	<p>The Chair asked the meeting if there were any inaccuracies in the minutes from the LHP Board meeting of 30<sup>th</sup> September 2021. James Bradley raised that in the Papers which accompanied the 27<sup>th</sup> July 2021 meeting agenda, two financial reports were circulated. One report stated that it related to year end and the other report stated that it related to up to month two. The latter report actual related to financial year end and the dates on that report should be amended from 31<sup>st</sup> May to 31<sup>st</sup> March.</p> <p>The minutes of the 30<sup>th</sup> September 2021 LHP Board meeting were <b>approved with the following actions arising</b>;</p> <ul style="list-style-type: none"> <li>- Minutes of 30<sup>th</sup> September 2021 LHP Board Meeting to be updated to show correction to period covered by the Financial Report presented at that meeting.</li> </ul>	LN
<b>B21-22/041 (d)</b>	<b>Chief Executive Update</b>	<b>Action</b>
	Prior to the CEO Update, the Chair noted there would be a session following the main Board agenda, within the time allocated for this meeting to discuss a	

	<p>private matter for the Board.</p> <p>The Chair expressed thanks for the partners efforts in relation to the LHP Strategy Refresh and noted that this is key to the partnership finding a single common shared purpose which will enable the improvement of health outcomes for the region and drive the economy through health research and innovation on an international basis. This is an ongoing process, and the developing Strategy will be fed back into the Board on a continual basis, with a view to launching the renewed Strategy and the accompanying renewed Business Plan in the early part of 2022, the intent of which will be to support Partners delivery of that shared purpose.</p> <p>The Chair expressed his gratitude for open and constructive dialogue had with the Partners in his 5 months as Chair and stated that he looks forward to accepting invitations extended by Partners to visit and offered his prior experiences to the Partners should they wish to draw upon them.</p> <p>The Chair reflected that in previous Partnerships he has been a part of, there was often tensions between what is to be achieved and how to achieve. The process of the Strategy Refresh will bring to the fore challenges, questions and opportunities before a shared purpose is established. The debates around this are useful and healthy and so long as they are made in a constructive way, will lead to LHP making a genuine difference. The Chair asked Partners to continue to engage with the Strategy process and the outcomes of this engagement will be proposed back to the Board for challenge.</p> <p>The Chair handed over to the CEO to present the CEO Update.</p> <p>The CEO reflected on how far LHP has come starting there is a need to rethink, re-energise and refocus. Thinking back to the beginning of the CEO's tenure in 2018, the conversations had as part of the Strategy Refresh would not have taken place and it is important to have the opportunity in place for these conversations to happen. LHP has developed a lot since 2018 with the introduction of SPARK, Programmes and Themes and the existing Strategy. Recent conversations highlight there is a long way to go but LHP has also achieved much in the last few years which positions the Partnership well going forward.</p> <p>The Board <b>noted</b> the Chief Executive Update.</p>	
<b>STRATEGY AND PERFORMANCE</b>		
<b>B21-22/042 (p)</b>	<b>Programme Update Presentation – Living Well</b>	<b>Action</b>
	<p>The Programme Director for Living Well (LW), Matt Ashton, gave a brief introduction of himself and presented the Programme Update for Living Well, he concluded by asking the Board to comment on;</p> <ul style="list-style-type: none"> <li>- Does the approach outlined makes sense?</li> <li>- Is it of added value?</li> <li>- Has anything obvious been excluded?</li> </ul>	

	<p>A discussion following which encompassed the following;</p> <ul style="list-style-type: none"> <li>- How LW will link into other Applied Research organisations when bidding into the NIHR, such as the ARC and The School of Public Health Research, to show synergies with other NIHR funding locally. MA confirmed LW is looking to be part of the ARC Steering Group to assist with this but that the Programme is still in the early stages of collaboration and so although it is clear the ARC needs to be part of the approach and LW needs to align, at this stage the focus is on the Partnership with other organisations and that detail will develop. MA added that it needs to be of value to the nine authority areas in the Cheshire and Merseyside region. Bertie Squire noted that LSTM has Global Health Research NIHR funding in various units, groups and the Global Health Professorship and asked if this be relevant when looking at links into other applied research in the region. TW stated that the more evidence that can be produced to show a coherent system, the stronger a bid would be and the NIHR would be interested in expertise applied to UK deprived areas as well as international.</li> <li>- How LW links into the research activity that is currently underway and supported by LHP and where it is pulling from activity of partners and applying this within the region. MA reiterated that it is still early in LW development and there is a need not to pre-judge the Programme strategy without the input of Partners as this could impact the engagement of the system. There is a need and a focus within the city on complexity and how to help and enable those with complex lives to have better lives – this is where some of the early work is focussed e.g. children taken into care as a result of guardian alcohol and substance abuse and the research capacity and evidence needed around these areas which could lead to prevention and improvement in those individuals lives. MA added this further links into mental health and the work being done in conjunction the LHP Mental Health and Neuroscience Programme, with the latter providing the clinical focus and LW providing the community focus. Both Programme's need to be mutually supportive within that space. This illustrates the need to have a clear understanding of the pull-through of the system. DD commented that there is already research activity within the Partners and LW should start to see the outcome of this being applied and that should be worked with rather than initiating something new. MA explained that the LW Strategy Writing Group is the route through which academic's and others from each of the Partners contribute and bring forward their programmes of research to help establish a full understanding of activity already taking place within the system. EC confirmed that there is input from LSTM and that this has been invaluable in the Programme's mapping exercise by explaining how LSTM work globally and how this might be applied locally. EF commented that where there is good work, LW should look for synergies within the system a noted how the Grand Round Webinar is a great link for the system which enables learning for LHP and other systems</li> </ul>	
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	<p>across the country, concluding clarity of connectivity will be key.</p> <p>The Board <b>noted</b> the Living Well Programme update.</p>	
<b>B21-22/043 (v)</b>	<b>Partner Updates</b>	<b>Action</b>
	<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.</p> <p>The Board <b>noted</b> the Partner's updates</p>	
<b>B21-22/044 (d)</b>	<b>Strategy Refresh Update</b>	<b>Action</b>
	<p>The DoDP introduced the Strategy Refresh Update Report outlining the timeline of the Strategy Refresh.</p> <p>TW asked if there would be a resource implication to the transfer of Programme oversight to DoRP. MJ stated that there would not as the DDoDP would transfer to support the DoRP. Due to the DoRP only being a part time appointment and DoDP being full time, this may result in strain on the DoRP's time. To manage the DoRP's workload LHP, subject to financial affordability, would look to appoint a DDoRP. This would provide ideal structure going forward and would be included in post Strategy Refresh Business Planning but does not impact current Business Plans.</p> <p>The Board <b>noted</b> the Strategy Refresh Update and <b>approved</b> two decisions presented in the paper;</p> <ol style="list-style-type: none"> <li>1) Transfer executive responsibility for LHP Programmes from the Director of Delivery &amp; Performance to the Director of Research Programmes to will strengthen the "clinically led" direction of this component of LHP strategy.</li> <li>2) Strengthen the formal reporting relationship of the Strategic Leadership Group (SLG) to the Board.</li> </ol>	
<b>B21-22/045 (d)</b>	<b>Performance, Risk and Business Plan Report</b>	<b>Action</b>
	<p>The DoDP introduced the Performance, Risk and Business Plan Report, summarising;</p> <ul style="list-style-type: none"> <li>- There is one exception in the Board dashboard from the AHSC - BRC bid failure to proceed past the PQQ stage -which is being monitored.</li> <li>- Developing metrics, particularly around study set-up times, to provide assurance around key issues raised by the LHP Finance, Performance and Risk Committee.</li> <li>- The Report has been improved and LHP are developing an interactive Board Dashboard around key measures of performance – which it is hoped will be delivered before the end of 2021.</li> </ul>	



	<ul style="list-style-type: none"> <li>- No red rated risks, 3 amber rated risks</li> <li>- Business Plan has 1 related red rated objective: appointment of Living Well Director. Recruitment was paused due to pandemic as wanted to attract best candidates.</li> </ul> <p>The Board <b>noted</b> the Performance, Risk and Business Plan Report.</p>	
<b>B21-22/046 (d)</b>	<b>Performance Assurance Review Feedback</b>	<b>Action</b>
	<p>DoDP introduced the Performance Assurance Review Feedback explaining;</p> <ul style="list-style-type: none"> <li>- Internal LHP governance requires the LHP Programmes to go through a Performance Assurance Review (PAR) every 6mths.</li> <li>- The process works through the Programme strategy and plans using a framework to identify positives and areas for development.</li> <li>- Second round of PARs now completed, the paper highlights across Programmes; positives, levels of collaboration, research capacity development, communications improvements and Grand Round Webinar successes in showcasing the work LHP does in the AHSC.</li> <li>- Cross Programme work is developing which is important in supporting work across different areas.</li> <li>- Identified future areas for development – CRF’s being of note as a way in which the Programmes are meaningfully engaging with full range of infrastructure.</li> <li>- Programmes of work maturing in complexity and diversity, advice was given on concerns there may not be appropriate prioritisation or focus on key deliverables.</li> <li>- Work on cross-cutting themes identified after Covid being established and Programmes being encouraged to be active in the following spaces; <ul style="list-style-type: none"> <li>- Promotion and Prevention</li> <li>- Complexity and Unmet Need</li> <li>- Inequity and New Models of Care</li> </ul> </li> </ul> <p>The Board <b>noted</b> the Performance Assurance Review Feedback.</p>	
<b>GOVERNANCE AND ORGANISATIONAL DEVELOPMENT</b>		
<b>B21-22/047 (d)</b>	<b>Finance, Performance &amp; Risk Committee - Minutes (14 September 2021)</b>	<b>Action</b>
	<p>The Vice Chair of the Finance, Performance &amp; Risk Committee, Prof. Raphaela Kane, presented the Minutes from the most recent meeting confirming all information is contained within the summary at the end of the minutes. RK added that there had been good debate at the meeting around dashboards and the need for partners to have better information, not just LHP information but information relating to Partners to assist in identifying any areas to be improved.</p> <p>The Board <b>noted</b> the Finance, Performance and Risk Committee Minutes of 14</p>	

	September 2021 meeting.	
<b>B21-22/048 (d)</b>	<b>Finance Report (period ending 31<sup>st</sup> July 2021)</b>	<b>Action</b>
	<p>James Bradley, LHCH Deputy Chief Finance Officer, presented the Finance Report - highlighting the following;</p> <ul style="list-style-type: none"> <li>- The report represents the first 4 month of the 2021/22 financial year, and shows a breakeven position with an increase to reserves of just over £50k in that period</li> <li>- Reserves now stand at £1.4m</li> <li>- Forecast is that reserves will grow by £127k for full financial year as income currently slightly exceed expenditure due to pay underspend and timings on spending result</li> <li>- There are no aged Creditors</li> </ul> <p>DoDP noted that delayed plans have led to a slight increase in reserves as it wasn't deemed prudent to invest into the current strategy when there could be a change of direction as a result of the ongoing Strategy Refresh process.</p> <p>The Chair noted that once the Strategy Refresh process is completed, assessment of financial management to look at offsetting surpluses will be needed to ensure LHP is being cost effective as the wider sector becomes more stringent following Covid.</p> <p>The Board <b>noted</b> the Finance Report for the management accounts to 31st July 2021.</p>	
<b>CONSENT AGENDA</b>		
<b>B21-22/049 (d)</b>	<b>© SLG Minutes (8 September 2021)</b>	<b>Action</b>
	The SLG Minutes of 1 <sup>st</sup> July 2021 were presented as a consent item and were <b>approved</b> .	
<b>CONCLUDING BUSINESS</b>		
<b>B21-22/050 (v)</b>	<b>Any Other Business</b>	<b>Action</b>
	No additional items of business were raised.	
<b>B21-22/051 (v)</b>	<b>Items for the Corporate Risk Register</b>	<b>Action</b>
	No items were to be added to, or amended on, the Corporate Risk Register as a consequence of meeting discussions.	
<b>B21-22/052 (v)</b>	<b>Key Messages from the meeting</b>	<b>Action</b>
	No Key Messages were recorded	
<b>Date &amp; Time of Next Meeting</b>		



	Tuesday 30 <sup>th</sup> November, 14.00 – 16.00. Format TBC.	
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Chair Approved

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		