

ANNUAL MEMBERS' MEETING 2023

**Minutes of meeting held at 1300 hours on Thursday 21 September 2023 in
virtually on Microsoft Teams**

1.	<p>Welcome and Introduction</p> <p>The Chair welcomed members, trust representatives and partners to the 2022/23 Annual Members Meeting. This was a virtual Annual Members Meeting which was recorded, and would be made available for wider access on the Trust website. The meeting would summarise the Trust's achievements during the period 01 April 2022 to 31 March 2023. The Chair provided a brief on the running order of the meeting noting that attendees would be given an opportunity to ask questions at the end of the meeting.</p> <p>The Chairman informed attendees of the impending retirement of the Chief Executive, Kathryn Thomson, who had held the position for 15 years. The Chairman noted that the Board had recognised two fundamental issues during the Chief Executive's tenure of office, a) the safety and sustainability of clinical services and b) the organisational financial viability, of which the Chief Executive had been vocal and supportive on behalf of the Trust to find sustainable solutions within the region. The Chairman thanked Kathryn Thomson on behalf of staff, patients, and the local community for her leadership over 15 years and highlighted her dedication to improving services at Liverpool Women's Hospital. He praised Kathy's advocacy for co-location and financial viability in challenging circumstances.</p> <p>The Chairman noted the agreement of NHS Cheshire & Merseyside to appoint a joint Chief Executive with the Liverpool University Hospitals NHS Foundation Trust (LUHFT). The Chairman noted the opportunities a joint accountable officer role could provide to drive forward clinical service decisions and mitigations to clinical risks within Cheshire and Merseyside.</p>
2.	<p>Minutes of meeting 2022</p> <p>The Chair asked the Governors and members to note the minutes of the previous Annual Members Meeting held on 22 September 2022 which could be found on the Trust's website.</p> <p>The minutes of the Annual Member's Meeting held on 22 September 2022 were agreed as a true and accurate record.</p>
3.	<p>Review of the Year 2022/23</p> <p>The Chief Executive noted the challenges and opportunities achieved during 2022/23, which had continued to be another challenging year.</p> <p>The Chief Executive detailed key highlights from the year with attention drawn to the following items:</p> <ul style="list-style-type: none"> • Ongoing efforts to reduce waiting times and ensure that patients receive the care they need in a timely manner. The Trust was utilising all available activity slots and recognised the impact of continued periods of industrial action.

	<ul style="list-style-type: none"> • The Trust continued to seek a sustainable solution to the risk posed by providing services from a site isolated from other adult acute services. The challenges faced by maternity services including a discrepancy between cost and the tariff received was noted. • The Trust had been working to build on its existing track record of maintaining successful partnerships to effectively deliver services. • Financially, meeting targets had become increasingly challenging due to issues such as maternity tariff limitations and high insurance premiums specific to running complex maternity services. The Trust was working with the Cheshire and Merseyside Integrated Care Board towards resolving these matters at national level. If this could not be resolved nationally the Trust would require additional income support from the region to ensure that it could achieve its regulated duties. • The Trust had been working to respond to the recommendations of the Independent Review of Maternity Services at The Shrewsbury and Telford Hospital NHS Trust (Ockenden Report). Patient safety continued to remain a top priority for the Trust even during financially difficult times and acknowledged necessary investments had been limited due to budget constraints. Collaborative work with regulators continued as they sought sustainable solutions together. The Ockenden Report identified 'culture' as a significant issue from its investigation and the Chief Executive assured attendees of an established cohesive maternity team of obstetricians, anaesthetists and midwives dedicated to quality and safe services for patients. • Ongoing collaboration with Cheshire Police in relation to the Lucy Letby trial and would continue to support the ongoing investigation as required. The Chief Executive extended thoughts to the families and those babies impacted. <p>The Chief Executive reported that the Trust had undergone an inspection of its Maternity and Gynaecology core services by the Care Quality Commission (CQC) in January 2023, followed by a well-led domain inspection in February 2023. The CQC published its final inspection report on 23 June 2023, the overall Trust rating had deteriorated from good to requires improvement. Significant progress against the recommendations identified had taken place. Further to this, the Trust had received positive assurance from NHS Resolution based on evidence submitted against the Maternity Incentive Scheme (MIS) for Year 4 demonstrating robust processes and evidence that the Trust was sighted on safe maternity care.</p> <p>The Chief Executive acknowledged that this was her last Annual Members Meeting as Chief Executive and thanked the staff and volunteers for their support over the years. She expressed pride in every member of staff and thanked her executive team, the Board of Directors, and the Governors for their support.</p>
4.	<p>Annual Report and Accounts 2022/23</p> <p>The Chairman introduced Gareth Kelly, External Audit Engagement Lead from Grant Thornton, Trust External Auditors to present the Annual Report and Accounts 2022/23.</p> <p>The External Audit Engagement Lead provided an overview of his role as an external auditor and highlighted that they were able to provide an unqualified opinion on the Trust's annual accounts. He mentioned some recommendations for improvement in financial reporting but overall praised the level of engagement from management during this first-year audit appointment.</p> <p>The External Audit Engagement Lead addressed areas related to value for money arrangements such as financial planning, governance, risk management, internal audit, performance against targets, benchmarking partnership working, clinical findings (including those mentioned in the CQC report). The External Audit Engagement Lead reported one</p>

	<p>significant weakness related to projected deficits for 2023/24 and cash support requirements during 2022/23 and projected cash support required in 2023/24 but emphasised that it did not impact the overall revenue financial position. A key recommendation from the audit was for the Trust to engage with partners in creating a realistic plan without requiring cash support. In addition to this recommendation, there were minor improvement suggestions regarding service level agreements and sickness absence management arrangements.</p> <p>The External Audit Engagement Lead concluded that it had been a good first year as the appointed external auditors with positive engagement with the Trust which facilitated a smooth audit process.</p> <p>It was noted that the Annual Report and Accounts and a summary video were available on the Trust website.</p>
5.	<p>Financial Overview 2022/23 and Outlook 2023/24</p> <p>The members received an overview of the financial position during 2022/23 and an outlook for 2023/24.</p> <p>The Chief Finance Officer detailed key financial highlights during 2022/23 noting that the Trust had ended with a deficit of £2.7m. This was a variance of £3.3m from the planned budget and the first time the Trust had not achieved against its planned budget, reflecting the difficult financial circumstances the Trust is working in.</p> <p>The Chief Finance Officer reported that the Trust received income of approximately £147 million for patient care and £9 million for other types of income, with operating expenditure over £155 million. Staffing costs accounted for over £95 million, followed by litigation premiums at approximately £22 million. Despite these challenges, the Trust had continued to invest in clinical safety, including staffing to Birthrate plus levels, responding to Ockenden recommendations, and investments in theatres. It was noted that the 2022/23 position was supported by £12.3m of non-recurrent items and additional 'top-up' income of £14.6m. The Trust had an underlying structural deficit of approximately £30 million due to factors such as tariffs for maternity services, expenses related to clinical safety on-site and economies of scale. The Trust had declared in 2014/15 of the financial sustainability and financial viability of the Trust and the drivers of the deficit were clear and understood.</p> <p>The Chief Finance Officer noted for the upcoming financial year 2023/24, a planned deficit of £15.5 million had been projected, which included a required 5% ongoing cost improvement program and cash support to deliver services. The reduction in top-up income received in the past contributes to this challenge and the Trust was working with colleagues at Cheshire and Merseyside ICB to address.</p> <p>The Chief Finance Officer referred to a focus on long-term sustainability by addressing drivers of deficits such as tariffs, making efficiencies through partnerships with larger organisations, and improve quality and efficiency through collaboration and prioritising women's services in the region. The Trust had produced and submitted a recovery plan to the Integrated Care System towards a financially sustainable and break-even position. The Trust would remain focussed on maintaining financial grip and control, recovery and ensure efficient and best use of resources throughout the year.</p>
6.	<p>Quality Performance 2022/23</p> <p>The members were provided with an overview of activity during 2022/23.</p>

	<p>The Chief Nurse highlighted significant activity levels over the past year including delivering over 7,000 babies and more than 30,000 gynaecological procedures while facing increasing levels of complexity among the patients and serving a local population with significant deprivation, for example 46% of women booking at the Trust were from the first decile on the deprivation index, compared to a national average of 13%.</p> <p>The Chief Nurse detailed key highlights from the year with attention drawn to the following items:</p> <ul style="list-style-type: none"> • compliance audits with the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards demonstrating full compliance. • evidence of positive application of quality improvement methodology, for example improvements made of unplanned extubations in the neonatal intensive care unit resulting in appropriate care for small babies with low birth weights. • ongoing monitoring and benchmarking of mortality rates overseen by the Board of Directors. During 2022/23 one maternal death, two expected oncology deaths, and two unexpected gynaecology deaths had been recorded. The Trust was in line with comparator trusts in relation to neonatal and stillbirth deaths. • unannounced inspections of maternity and gynaecology services by the Care Quality Commission took place during 2022/23. A Section 29A Warning Notice was served in relation to concerns arising from the CQC's inspection of the Maternity Assessment Unit (MAU) regarding triage times and staffing. Immediate actions were taken in relation to the concerns and had been maintained. • a Maternity Transformation Board had been established with a three-year delivery plan to improve maternity and neonatal services based on recommendations from the Better Births, Ockenden, and East Kent reports and the three-year delivery plan for maternity and neonatal services (NHSE 2023). Significant improvements had been demonstrated. • progression against the 92 essential actions from the Ockenden report. • The need for co-location remained an issue as services ran on a single-isolated site posed risks to safety and sustainability of services. Collaboration with partner organisations was ongoing to reduce risk where possible. • investments had been made to the Crown Street site including CT scan facilities and a new neonatal unit to improve accessibility for patients. Plans were also underway for a Transfusion Lab on-site with a partner organisation. • the crucial role of Volunteers who had contributed a significant number of hours across various care elements to support the Trust. <p>Looking forward to 2023/24 the Chief Nurse noted continued challenges to maintain safe staffing levels amidst national staff shortages, increasing complexity of patient acuity while achieving world-class outcomes aligned with national standards.</p>
7.	<p>People Update</p> <p>The members were provided with an overview of workforce matters during 2022/23.</p> <p>The Chief People Officer informed members of a review of 'traditional' methods of managing sickness absence which had been replaced with investment in psychological support and wellbeing coaches resulting in a significant reduction in sickness absence levels.</p> <p>Members were informed of a preceptorship model which had been successfully implemented to support newly qualified midwives leading to higher retention rates at the Trust. Positive feedback from midwives on the scheme had been received and the initiative had been shortlisted for a national award.</p>

	<p>The Trust was focussed on innovating roles to support services, including advanced neonatal nurse practitioners, advanced midwifery practitioners and physician associates to address difficulties posed by national staff shortages.</p> <p>The Chief People Officer highlighted the importance of staff engagement and reported that the Trust had been recognised as one of the most improved organisations in terms of staff engagement levels. The Trust had worked with Freedom to Speak Up Guardians to promote raising concerns as a positive action. The Trust had also commenced an Actively anti-racist programme of work to become more inclusive and provide opportunities for marginalised groups. It was noted that the Supported Intern Programme had supported interns who are neurodiverse young people, some with physical disabilities, providing them with training and employment opportunities. This had been recognised as 'outstanding' by the Care Quality Commission.</p> <p>Looking ahead, the Chief People Officer reflected on the capability demonstrated by the workforce and noted confidence that this would continue whilst acknowledging that 2023/24 would remain challenging due to ongoing industrial action and navigating post-Covid19 recovery.</p>
8.	<p>Operational Performance</p> <p>The members were provided with an overview of operational performance during 2022/23.</p> <p>The Chief Operating Officer informed the members of a strengthened approach to performance reporting and monitoring against national priorities utilising statistical process chart methodology and integrated performance reports against the Trust's strategic aims.</p> <p>2022/23 had been the first full year of pandemic recovery, which had started with Covid-19 restrictions still in place, these restrictions had been lifted during the year and industrial action commenced. The Chief Operating Officer noted the challenge and strain caused by industrial action and thanked the workforce who had worked diligently to continue to support patients to maintain safe services.</p> <p>The Chief Operating Officer identified the following from the operational performance measures during 2022/23:</p> <ul style="list-style-type: none"> • Urgent care metrics sustained, and performance was in line with national standards. The Chief Operating Officer had been appointed as Chair of C&M Maternity Escalation Cell supporting system pressures • Elective care: eliminated longest waits in line with national standards and diagnostic performance remained strong. Systems and processes had been externally validated during 2022/23 and provided assurance in relation to how the Trust was monitoring and keeping in touch with long waiting patients. • The Community Diagnostic Centre (CDC) had been established which supported delivery of recovery across the region and supported a cohort of Trust patients that would have required a transfer for a scan. • Had established regular surgical sessions at the Liverpool University Hospital Foundation Trust for complex patients requiring access to surgical specialties and critical care. • Cancer care: work was underway to improve access to cancer services. Cancer care had been challenged due to a significant increase of referrals at the end of 2022/23, leading to the need for improved diagnostic capacity.


	<p>The Chief Operating Officer noted key recovery plans in place into 2023/24 including, maternity transformation programme, theatre improvement programme, and an outpatient improvement programme to continue to improve services and processes.</p>
9.	<p>Membership & the Council of Governors</p> <p>The Lead Governor, Kate Hindle, provided a video message outlining the responsibilities and activities of the Council of Governors during 2022/23.</p> <p>The Lead Governor noted the two areas of responsibility of the Council of Governors was to engage with the membership and represent their interests, and to seek assurance from the Board on quality of care for patients and Trust performance. She noted that membership engagement had been integrated into broader patient/public engagement efforts, emphasising community involvement. Ongoing annual actions support the strategy's goals, including establishing mechanisms, relationships, partnerships, and intelligence gathering. Additionally, a Pan-Liverpool Membership Group has been formed to offer wider NHS activities to members.</p> <p>The Lead Governor advised that Governor Elections had been deferred until after the Annual Member's Meeting owing to potential changes to constituency boundaries (see next item).</p> <p>The Lead Governor thanked those Governors who had left their posts, in year, for their service and support to the Trust:</p> <ul style="list-style-type: none"> • Cllr Lena Simic, • Cllr Lucille Harvey, • Cllr Patricia Hardy, • Cllr Marie Stuart • Rev Dr Miranda Threfall-Holmes
10.	<p>Proposed Constitution Amendments</p> <p>The Trust Secretary informed the Annual Members of proposed amendments to the Trust Constitution which required formal approval. The amendments related to the public and appointed constituencies as follows:</p> <ul style="list-style-type: none"> • Public Constituency: Liverpool City Council updated the electoral wards following a boundary review – which presented implications on the current public constituencies. It was recommended by the Council of Governors and the Board that the Constitutional boundaries should align to the local authority boundaries. • Appointed Constituency: it was recommended that improved clarity and guidance was required in relation to the range and method of selection of appointed seats. The current local authority cohort did not fully reflect the wider region and system that the Trust interacts with since the constitution was initially written. <p>The Council of Governors approved the amendments to the Trust Constitution.</p> <p>Following approval of the Constitution the Trust would commence the election process to appoint governors to the vacant seats.</p>

11.	<p>Honeysuckle FC Marie Kelleher, Specialist Bereavement Midwife presented information on the Honeysuckle Bereavement Service and the support provided to families who have experienced the loss of a baby.</p> <p>The members were provided with a video presentation which displayed the impact of the introduction of Honeysuckle FC. This was a collaborative project between the hospital, Liverpool FC Foundation and SANDs, initiated to support bereaved fathers using sport as a method to meet and talk. Specialist Bereavement Midwife noted that utilisation of peer support of volunteers had been integral to the success of the project. The project had also received donations from large companies to support the project financially.</p> <p>The Chief Executive noted the growth of the Bereavement Service and thanked the Bereavement Team for all their efforts to develop the service with compassion on behalf of the Trust and all bereaved families.</p>
12.	<p>Annual Members' Meeting Q&A A question and answer session took place.</p> <ol style="list-style-type: none"> 1. Are litigation costs covered by insurance? (Angela Ranson) <i>Answered by Jenny Hannon, Chief Finance Officer</i> Litigation costs were managed through the Clinical Negligence Scheme for Trusts (CNST), run by NHS Resolution (NHSR). This was a voluntary scheme that all NHS Trusts in England belonged to and handled claims on behalf of the Trust. Payment was made to NHSR as a premium for the insurance product covering claims against clinical negligence. The amount paid in reflected the costs paid out. Payment was also significantly higher for the Trust due to the value of claims linked to maternity cases. It functioned as a risk pooling mechanism more than a conventional insurance policy. 2. The timing and involvement of the Integrated Care Board (ICB) in the decision to appoint a joint interim Chief Executive? (Lesley Mahmood) <i>Answered by Robert Clarke, Chairman</i> The pursuit of a joint chief executive had long been an established option in support of the Trusts strategic direction in resolving clinical isolation and ensuring financial sustainability. A Trust led options appraisal was conducted, leading to the decision to pursue a joint appointment sooner than initially planned. This strategic shift was undertaken after engaging with partners across the NHS and was explained when announcing the joint CEO appointment. 3. Any financial implications with the Joint Chief Executive appointment and partnership with Liverpool University Hospital (LUHFT). (Lesley Mahmood) <i>Answered by Jenny Hannon, Chief Finance Officer</i> The Trust financial recovery plan would remain independent and would not be adjoined to LUHFT's financial recovery plan. There would be opportunities across partnership organisations within Cheshire and Merseyside in terms of efficiencies which could generate savings. 4. In relation to the engagement, inclusion and diversity of supported interns, how many interns were in place, how long does the placement last, and were they offered employment following the placement? (Jackie Sudworth)

	<p><i>Answered by Michelle Turner, Chief People Officer</i></p> <p>Typically, 5 to 6 interns joined the Trust and were placed in areas of their interest. Unfortunately, job offers following placement could not be guaranteed however the Trust had supported interns to progress further onto apprenticeship courses, further education and training. It was noted that the scheme had supported young people to gain confidence and self-belief that they could add value in the workplace and each had contributed significantly to the Trust during their tenure.</p>
13.	<p>Closing Remarks</p> <p>Overall, the meeting highlighted both achievements and ongoing challenges as Liverpool Women's Hospital continued to provide exceptional care while navigating various issues in the healthcare industry.</p> <p>The Chairman thanked all those who had attended the meeting and for their continued support.</p>

Attendance Register

GOVERNORS		
Peter Norris	Public Governor – Central	✓
Pat Denny	Public Governor – Central	✓
Ruth Nicol (nee Parkinson)	Public Governor – Central	
Irene Teare	Public Governor – Central	
Carol Didlick	Public Governor – South	
Angela Ranson	Public Governor – South	✓
Yaroslav Zhukovskyy	Public Governor – Sefton	
Annie Gorski	Public Governor – Sefton	✓
Jackie Sudworth	Public Governor – Knowsley	✓
Iris Cooper	Public Governor – Rest of England & Wales	Apologies
Olawande Salam	Public Governor - Rest of England & Wales	✓
Kiran Jilani	Staff Governor - Doctors	
Rebecca Holland	Staff Governor - Nurses	✓
Alison Franklin	Staff Governor – Midwives	Apologies
Rebecca Lunt	Staff Governor – Scientists, technicians & AHPs	✓
Kate Hindle	Staff Governor - Administrative, clerical, managers, ancillary and other support staff	Apologies
Cllr Julie Fadden	Appointed Governor - Liverpool City Council	
Cllr Carla Thomas	Appointed Governor - Sefton Borough Council	Apologies
Cllr Marie Stuart	Appointed Governor - Knowsley Borough Council	
Niki Sandman	Appointed Governor - University of Liverpool	✓
Jane Rooney	Appointed Governor - Education Institutions	Apologies
BOARD OF DIRECTORS		
Robert Clarke	Chair	✓
Louise Kenny	NED	Apologies
Tracy Ellery	NED	✓
Louise Martin	NED	✓
Gloria Hyatt	NED	
Zia Chaudhry	NED	
Sarah Walker	NED	✓
Jackie Bird	NED	Apologies
Kathryn Thomson	Chief Executive	✓
Lynn Greenhalgh	Medical Director	Apologies
Jenny Hannon	Chief Finance Officer	✓
Gary Price	Chief Operations Officer	✓
Michelle Turner	Chief People Officer	✓
Dianne Brown	Chief Nurse	✓
Matt Connor	Chief Information Officer	✓
STAFF / PUBLIC		
Mark Grimshaw	Trust Secretary	✓
Louise Hope	Staff (minute taker)	✓
Gareth Kelly	External Audit Engagement Lead, Grant Thornton	✓



Lesley Mahmood	Public	✓
Chris Dewhurst	Staff	✓
Joshua Ingham	Staff	✓
Jane Calveley	Staff	✓
Lesleyanne Saville	Staff	✓
Jayne Parr	Staff	✓
Andrew Duggan	Staff	✓
Alison Carroll	Staff	✓
Alice Friday	Staff	✓
Claire Deegan	Staff	✓
Clare Murray	Staff	✓
Delima Khairudin	Staff	✓
Kate Davis	Staff	✓
Mark Friedman	Staff	✓
Paula Best	Staff	✓
Samantha Wright	Staff	✓
Sophie Lace	Staff	✓
Lisa Shoko	Staff	✓
Anne Bridson	Staff	✓
Saad Alshukri	Public	✓
Dez Chow	Staff	✓
Marie Kelleher	Staff	✓
Andrew Sefton	Staff	✓
Louise McMillan	Staff	✓