

King's College Hospital NHS Foundation Trust Board of Directors

Minutes of the meeting of the Board of Directors

Held at 15.00 hrs on Tuesday, 24 June 2008 in the Dulwich Committee Room, King's College Hospital

Present:	Michael Parker (MP) Robert Foster (RF) Rita Donaghy (RD) Prof Alan McGregor (AM) Dr Martin West (MW) Dame Jacqueline Docherty (JD) Michael Griffin (MG) John Moxham (JM) Simon Taylor (ST)	Chair Non-Executive Director (Vice Chair) Non-Executive Director Non-Executive Director Non-Executive Director Acting Chief Executive Executive Director of Human Resources Executive Medical Director Executive Director of Finance & Information Services
Non-voting Directors:	Ahmad Toumadj (AT) Jane Walters (JW) Roland Sinker (RS)	Director of Capital, Estates & Facilities Director of Corporate Affairs Director of Strategic Development
In attendance:	Jessica Bush (JB) Peter Fry (PF) Rita Chakraborty (RC)	Head of Public and Patient Involvement Asst Director of Performance and Contracts Assistant Board Secretary (minutes)
Observers:	Ann Mullins	Public Governor

Item	Subject	Action
08/90	Apologies None.	
08/91	Declarations of Interest None.	
08/92	Chair's Action None.	

08/93 Minutes of the meeting held on 20 May 2008

The minutes of the meeting held on 20 May 2008 were APPROVED subject to the following changes:

08/68 – Chair’s Action

Amend to: *“In the absence of the Executive Director of Finance, the Executive Medical Director and the Deputy Medical Director, the Chairman had recently signed a Memorandum of Understanding with an educational institution in Zimbabwe at a signing ceremony. The Chairman and the Trust Executive had not been made aware previously of the ceremony. It was signed on behalf of the International Development Unit (IDU) and the Chairman was not aware of any financial obligations resulting from the MoU.”*

08/69 – Minutes of the meeting held on 22 April 2008

[08/62 Workforce Strategy] Change amendment to: *“Subject to approval of HR objectives in July.”*

08/79 – Information Items

Para 3 – change “BMA panel member” to “BMA regional officer”

08/94 Matters Arising/Action Tracking

08/51- a report showing AHSC website hits was tabled.

08/68 – a Memorandum of Understanding was tabled. Mike Griffin had written to the Department of Health to clarify whether they had any objection to the Trust signing the document. The Board noted that the circumstances surrounding the MoU had arisen due to a lack of discussion at the Board of the International Development Unit. The IDU would ensure that, in future, a formal process was followed. A report outlining a suggested process for approval of MoUs would be considered later in the meeting.

08//74 – analysis of the Commendation Awards by occupation was tabled.

08/95 Chair & Non-Executive’s Report

On 5 June, Robert Foster had also attended an appointment panel for a nurse consultant. At the meeting on 17 June at the Department of Health, Institute of Healthcare Leadership, RF had advocated an emphasis on education and guidance.

The Board NOTED the Chair and Non-Executive’s Report.

08/96 Chief Executive’s Report

Before introducing the report, Jacqueline Docherty informed the Board with regret of the sudden death of Abdul McCauley, formerly Accountant to the KCH Charity. He had retired recently having worked for the KCH Charitable Trust for many years. JD would be writing to his family to express the Board’s and the Trust’s condolences.

JD went on to summarise the key updates from the past month.

Although the Trust had not met its financial target for month 1, the month 2 position was much improved.

Work on meeting the 18-weeks target continues with high levels of activity in both elective and non-elective work.

The Trust was marginally off trajectory for MRSA and C-Dif targets and all divisions were reviewing their action plans. The local target for C-Dif agreed with Southwark PCT was also under review.

JD outlined personnel changes in some key positions including the departure of Cathy Warwick, Divisional Manager for Women's and Children's Services/Director of Midwifery.

The recent Staff Long Service Awards ceremony had been very enjoyable and had seen staff from across all groups receiving awards.

The Board NOTED the Chief Executive's Report and CE Brief.

08/97 Finance Report – Month 1

Simon Taylor presented the item. Although the month 1 report showed a deficit, the latest results for month 2 indicated a surplus above target.

Martin West queried the use of the word "marginal" to describe the difference between the forecast surplus and actual deficit in month 1.

Both cashflow and the balance sheet position were strong and the outstanding PCT income from over-payments was considerably smaller than in previous years.

The renewed overdraft facility, which was approved by the Board at the 03 June meeting, would provide the Trust with some leeway, if required.

ST and JD had met with representatives from Monitor the previous day. There were no outstanding issues to report.

The Board NOTED the Finance Report Month 1.

[Roland Sinker left the meeting]

08/98 Performance Report - Month 1

Peter Fry introduced the item. The following issues were highlighted:

- The Trust continues to achieve the A&E 4 hour limit in spite of treating more patients every year.
- Activity is increasing year on year with more work scheduled for evenings and weekends. Areas that have seen a noticeable increase are Neurology, Dermatology and Day Surgery.

- Some areas are not meeting all internal benchmarks on patient experience; therefore these divisions have been tasked with addressing the issues identified.
- The Trust had been set a national target for reducing MRSA to 53 cases. A second local target is under negotiation and proposes a 10% reduction on 2007/08 performance.
- The reduction in C-Difficile has been set at 12%. Although the Trust was off target in April, there was a reduction in May. Monitor will now be monitoring this target on a quarterly basis.

The Board noted the Performance Report for month 1.

08/99 PEAT Results 2008

AT tabled the 2008 results from the Patient Environment Action Teams.

The Trust had received the following scores:

Environment – *Good*
 Food – *Excellent*
 Privacy and Dignity - *Good*

The Board noted the PEAT Results 2008.

08/100 Process for approval of Memoranda of Understanding between KCH and other organisations

Jane Walters introduced the report. The proposed process was in response to the growing number of discussions with other organisations about possible arrangements for working collaboratively.

The intention was to develop a policy on Agreements or Memoranda of Understanding for dissemination throughout the organisation. The three broad principles of the policy were as follows:

- To set out an approval process to ensure that any proposal will be passed to the Trust Executive for initial consideration. This will include both formal agreements to exchange services through an SLA, as well as other informal collaborations, such as teaching exchanges.
- To seek legal advice through the Trust's Legal Department to ensure that the Trust's interests in any collaboration are safeguarded.
- To formally present any proposed agreement or Memorandum of Understanding to the Board of Directors for approval.

The Board commented on the importance of evaluating the effectiveness of any such arrangements; of identifying in advance how to disengage from an ineffective collaboration; of the need to distinguish between commercial and educational ventures, and to consider the wider political situation. It was also noted that proposals to enter into MoUs could equally be generated from Board level as well as Divisional level, and so the policy would need to reflect that.

The Board APPROVED the proposed process and NOTED that a policy will be developed for approval.

08/101 2007 National Inpatient Survey Results – Healthcare Commission

Jessica Bush, Head of Patient and Public Involvement, gave a presentation on the full results from the National Inpatient Survey. The Board had received summary results at its 20 May meeting.

The overall picture was positive with the Trust's profile shifting in a number of areas from "red" to "amber". In 2007, only 4 questions placed the Trust in the bottom 20% nationally compared with 13 questions in 2004. However, there was a need to further move up the ranking to achieve more "green" scores.

Areas where the Trust had scored well were:

- giving and receiving information
- information given to patients, for example in the emergency department, about conditions and treatment and the purpose of medicines
- giving patients the opportunity to give their views on the quality of care they receive through the 'How are we doing?' survey, where the Trust was the top scorer nationally.

Areas where the Trust needs to improve were:

- Feeling threatened - overall most Trusts within London scored in the bottom 20% on this question
- Adequate help from staff to eat meals – none of the London Acute Teaching Hospitals came in the top 20% of Trusts
- Getting answers to important questions from nurses – this result was on the cusp of amber. More recent scores from 'How are we doing?' reflect further improvement.
- Delays in answering call button – the Trust's score dropped by 2% between 2006 and 2007.

The Trust would be contacting UCLH following their impressive results, as well as other high improvement Trusts.

There was a clear correlation between results from the Trust's 'How are we doing?' survey and the national survey results with steady improvement in both over the last 4 years. The benefit of the in-house survey is that it reflects a far higher number of patient responses and data can be identified at Division and Ward level.

The existing benchmarks and the question areas featured in the 'How are we doing?' survey will be reviewed in the coming months. It was likely that a question on help with patients' meals and patients' perception of safety would be included following the review. The perception of patient safety also needed more attention.

As the next national survey would be undertaken in July 2008, a positive message should be relayed to staff to recognise areas of success and areas where further improvement was still required.

The Board NOTED the 2007 National Inpatient Survey Results and the plan for dissemination of results and action planning.

[JM left the meeting]

A positive message should be relayed to staff to recognise areas of success and areas where further improvement was still required.	JD
--	-----------

08/102 Future Registration Framework for Health and Social Care

JW introduced the report. The DoH had consulted recently on changes to the regulatory framework arising from the integration of health and social care the new Care Quality Commission.

Attached to the report were a briefing produced by the NHS Confederation and a response to the consultation from the Foundation Trust Network. The Trust Executive and General Managers had considered the consultation document and were supportive of the FTN's observations.

Overall, the FTN agree with the Government's proposals but, as on previous occasions, it warns of the risk of 'regulatory creep' and the need for a balance of responsibilities and duties between Monitor and the Healthcare Commission/CQC.

As the deadline for consultation responses was 17 June, a Trust response in these terms had been submitted before the deadline.

From 2010, the qualification requirements being developed by the CQC will supersede the Standards for Better Health.

The Board NOTED the content of the DoH consultation and the Trust's response.

08/103 AOB

PPI Cap Consultation

Monitor had recently issued a consultation on the future of the Private Patient Income Cap. Simon Taylor was involved in the Finance Directors' Group of the Foundation Trust Network, and would be updating the Board on the group's discussions.

Circulate PPI Cap Consultation document to Board members.	RC
--	-----------

Update on KCL Medical School

The Trust had learnt of an update produced by Robert Lechler for the GST Board of Directors concerning developments at KCL Medical School. Robert Lechler had agreed to circulate the report to the KCH Board also and this would be included as an agenda item on future Board agendas.

KCL Developments paper to be circulated to Board members and included as an information item on KCH Board agendas.	AM/JW
---	--------------

15 July Board Away Day

It was suggested that the following topics should be discussed at the next Board Away Day:

- Team working
- Trauma capacity

08/104 Date of Next Meeting:

Tuesday 29 July 2008 at 3.00 pm in the Dulwich Committee Room.