

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, 27 September 2011 in the Dulwich Committee Room, King's College Hospital.

Members	Michael Parker CBE (MP)	Non-Executive Director (Chair)
	Prof. Sir George Alberti (GA)	Non-Executive Director
	Robert Foster (RF)	Non-Executive Director
	Marc Meryon (MM1)	Non-Executive Director
	Maxine James (MJ)	Non-Executive Director
	Prof. Alan McGregor (AM)	Non-Executive Director
	Tim Smart (TS)	Chief Executive
	Angela Huxham (AH)	Executive Director of Workforce Development
	Dr. Michael Marrinan (MM)	Executive Medical Director
	Roland Sinker (RS)	Executive Director of Operations
	Simon Taylor (ST)	Chief Financial Officer
	Dr Geraldine Walters (GW)	Executive Director of Nursing & Midwifery
Non-voting Directors In attendance	Jane Walters (JW)	Director of Corporate Affairs
	Jacob West (JW1)	Director of Strategy
	Sally Lingard	Associate Director of Communications
	Judith Seddon	Associate Director of Governance
	Prof. John Moxham	Director of Clinical Strategy, KHP
	Linda Smith	KCH Charity
	Louise Morton	Named/Lead Nurse – Safeguarding Children
	Helen Young	Project Director Ward 20:20
	Tamara Cowan	Shadow Asst. Board Secretary
	Leonie Mallows	Committee Assistant (minutes)
Governors	Tom Duffy	Patient Governor
	Michelle Pearce	Public Governor
	Andy Glyn	Patient Governor
	Rowenna Hughes	Support Staff Governor
	Nanda Ratnaval	Shadow Governor
	Derek Cookson	Shadow Governor
	Michael Robinson	Shadow Governor
	Fiona Clark	Shadow Governor
	Carolyn Campbell-Cole	Shadow Governor
Members of the public	Robert Lee	King's College London
	Jenn Owen	
	Liam Greene	
	Kathryn Hodgson	
	Peter Wathen	
	Manatunga Vidyatilake	

Item	Subject	Action
011/132	Welcome and Apologies	
011/133	Declarations of Interest None.	
011/134	Chair's Action Contract for supply of Outside Dental Laboratory Services – Tender Ref: T2086 – 15 September 2011. Copies are available on request from ST.	
011/135	Minutes from the meeting held on 26 July 2011 The minutes were approved subject to the following amendments: Prof. Alan McGregor to be added to the attendance list.	
	011/125 Annual Workforce Report 2010/11 Pg. 6, final bullet point: remove 'by KCL' so that the sentence ends '...which will require investment.'	
	011/130 AOB Pg. 10, second point: amend to read 'South East London Healthcare Cluster'.	
011/136	Matters Arising/ Action Tracker <u>011/48 Food and Nutrition</u> MM reported that a review of menus had been undertaken. RS suggested that in place of Rick Wilson attending the Board in person, it would be more appropriate for an update to reach the Board as part of the Risk/Governance report considered by the Quality & Governance Committee on 03 November. This was agreed. [Remove action] <u>011/84 Complaints Annual Report</u> JW reported that the Patient Experience Committee had discussed this issue and agreed that there were sufficient mechanisms in place for obtaining patient feedback, but that there was more work to be done to coordinate use of these mechanisms. Further progress would be reported via Quality & Governance Committee. [Action complete]	

FOR REPORT/ DISCUSSION

011/137 Chair and NEDs Report

The report was noted.

011/138 Chief Executive's Report

In addition to the report, TS drew the Board's attention to the following areas:

Progress and Forecasting

With the uncertainty due to the economic climate, the Health & Social Care Bill passing through the Lords and KHP decision-making as a consequence of the McKee Review, forecasting for the second half of the year was difficult. However there was no indication to suggest that financial plan would not be achieved. CIPs are making good progress; and the progress made in reducing cases of MRSA give confidence for tackling C-diff, although this is a more prevalent and difficult infection to deal with.

Medirest Cleaning Contract

Performance has improved since discussions with the Trust took place. The cleaning provided by Medirest is a component of the PFI contract, which is not unaffordable as some recent press reports have claimed. This is because the KCH PFI contract represents only a relatively small proportion of the Trust's overall budget, unlike some other 'whole hospital' PFIs.

24 Hours in A&E

There is interest from Channel 4 in making a second series. Discussions are ongoing with regard to the format and arrangements relating to a second series.

It was noted that the programme reaching America was a tremendous achievement; also that a reduction in complaints might be in part a result of patients and relatives understanding of their experience of the ED in context.

'Transplant' featuring KCH surgeons will be screened on BBC One on 04 October.

011/139 Finance Report – month 5

ST presented the month 5 summary which had been discussed at the Finance & Performance Committee the same morning. The following issues were highlighted:

- The Trust is currently in surplus by £918k but off plan by approx -£1.2m.
- This was due to higher than usual activity levels over the summer, and to increased usage of agency staff due to the

difficulty in recruiting specialist nurses, particularly in Critical Care and Theatres.

- The Monitor financial risk rating for Q1 is 3; this is in line with the annual plan.
- At month 5 achievement of CIPs is at 94% YTD;
- There has been a drop in income from elective surgery; this is expected to rise again in September and October.

Critical Care and Theatres

RS reported that an increase in the acuity of patients from level 1 to level 3 has resulted in higher nursing costs. Once fixed establishment plans are in place which put quality as a priority, cost improvement plans can then follow.

011/140 Performance Report month 5

RS presented the month 5 report which had been discussed at the Finance & Performance Committee the same morning. The following issues were highlighted:

Clinical Effectiveness

- All access targets/ standards were achieved in month 5.
- All 5 ED targets were achieved; they are being tracked by NHS London, but only 1 by Monitor.
- There are challenges over continued achievement of 23 weeks RTT and 62 day cancer wait targets, although current performance is good.

Safety

- There have been 54 YTD cases of C-diff; compared to a target of 33.
- However there have been no cases so far this month and actions taken are beginning to have an effect.
- There have been a high number of Red Shifts.
- Paula Townsend is undertaking a review of pressure ulcers in TEAM and Surgery.

Staffing Measures

- Appraisal and training rates remain low; introduction of a new IT system will help with tracking.

Regulatory and Contractual

- The Trust has a governance risk rating of amber-green; this is due to being off trajectory with cases of C-diff; the action plan has been sent to Monitor.
- Overall the Trust held its QRP position from the CQC;
- The Trust has achieved 100% of its CQUIN targets for Q1,

with a financial value of £945k.

- Divisional review meetings are taking place to assess performance.

Infection Control

- There are enhanced actions planned in relation to the existing C-diff action plan.
- These include: strengthening root cause analysis process, reviewing testing methodologies, use of new cleaning products, an external review of anti-microbial prescribing, rollout of e-prescribing and antibiotic stewardship.

Average Length of Stay (ALOS)

- Non-elective has improved from 6.1 days last year to 5.91 days this year.
- Elective has worsened from 5.29 days last year to 5.54 days this year.
- Adjusting the performance data to reflect the significant increase in the use of Medihome care at home services shows greater improvement.
- Use of the bed management report helps to track ALOS data
- Improvement in discharging early in the day is still required.

Discussion followed and key comments and observations from the Board included:

Pressure Ulcers

- There have been 18 cases of pressure ulcers YTD; 16 of those were Grade 2.
- There has been an increase in reporting of pressure ulcers.
- It has been over 12 months since a Grade 4 was reported.
- 150 extra special mattresses have been purchased.

Staffing levels at night

- Staffing structures have been changed to ensure sufficient coverage of consultants and surgeons at all times and a fully developed outreach team in Critical Care.
- Year on year for the last three years mortality rates have lowered.

C-Diff

- It has not been possible to clarify with Monitor the definition of a 'case' as determined by the difference between a patient carrying and a patient being infected.
- Focus remains on addressing issues on the ground.

Training

- Training scores are a matter of concern
- Factors include turnover of staff and releasing staff from the wards to attend training sessions.
- There is action in place to address this issue.

011/141 Patient Experience Report month 5

JW introduced the patient experience report for August and highlighted the following key issues:

Complaints/ PALS

- The lower trend in numbers overall continues, with 33 complaints in July and 45 in August.
- This is mirrored by a slight increase in PALS contacts.
- Performance in responding to complaints within 25 days is at 71%.

HRWD

- The HRWD score reached its benchmark of 86 for the first time; care perceptions achieved its benchmark for the 4th successive month
- Environment scores continue to improve; however, patient comments suggest further improvement is required.
- As part of the re-negotiated cleaning contract with Medirest, key performance indicators will be directly related to 3rd party perceptions arising from the results of HRWD surveys.
- Response rate was 51% in July but fell to 39% in August.

CQUINs

- Benchmark achieved for all 5 questions in August, as opposed to 3 in July.

Eliminating Mixed Sex Accommodation

- No breaches recorded so far this month.
- Scores improved in July but fell back slightly in August due to a question about sharing a sleeping area after being moved to another ward.

Discussion followed and key comments and observations included:

- The response rate for HRWD needs to remain high for the data to be meaningful.
- Hospital at Night project is a key aim within Ward 20:20; actions have been taken to address noise caused by staff and equipment; noise from other patients is more difficult to manage.

- Experience varies across wards; Ward 20:20 aims to actively put in solutions to complex issues, then roll them out more widely.
- Some patients, particularly older people, may feel vulnerable or uncomfortable about making complaints; others may have difficulty with literacy.
- The Trust is trying to offer different avenues for feedback e.g. via volunteers, website, Twitter; HRWD remains anonymous and carries the PALS details; the PALS team visit wards and display leaflets/posters.
- Anecdotal feedback is rich; there is a process underway to post positive and negative comments on the website as part of a commitment to openness.

011/142 Safeguarding Annual Reports 2010-11

Louise Morton and GW presented the annual reports summarising safeguarding activity and progress against compliance. Key discussion points included:

- Recent government reorganisation of health services has seen significant changes in commissioning structures; local GP commissioning clusters are responsible for child safeguarding.
- Publication of the Munro Review has resulted in changes within child protection systems nationally which cut bureaucracy and rely more on professional judgement.
- Training at level 3 is a key area for on-going improvement; an action plan is in place to increase attendance at level 3 training.
- The Trust-wide interface of the electronic flagging system to identify vulnerable children and women remains outstanding; this is a key priority for the year ahead.
- Progress with the child safeguarding work plan is positive and actions soon to be in place include: information leaflets regarding child protection procedures for parents and families; launch of the safeguarding database; proforma for ensuring security, safeguarding and psychological support of adolescents presenting with major trauma.
- Significant progress has been made in relation to safeguarding adults at risk and learning disability issues; further work required in relation to training and development of required IT systems.
- The Trust participated in 5 Serious Case Reviews (SCR) and 3 multi-agency internal management reviews (IMR) relating to child safeguarding cases; to date the Trust has not been asked to participate in a SCR or IMR for adult safeguarding.
- The Safeguarding Team are working to form relationships

with different social care agencies to enable improved working and information sharing.

The following comments and observations were made by the Board:

- This is a highly sensitive area and it is suggested that new Governors and NEDs attend a seminar to go through the issues.
- Leaflets should be available in different languages to meet the needs of the patients.
- Use of the electronic patient records (EPR) could be promoted via safeguarding training as the flagging system is intended to link into EPR.

011/143

KHP Update

Prof John Moxham presented an update on the progress of King's Health Partners.

CAGs and Accreditation

Steady progress is being made with regard to CAG accreditation:

- The Medicine CAG has made significant progress and has been receptive to feedback; they have also been asked to share their learning with other CAG leaders.
- The Child Health CAG has initiated a piece of strategy work to reflect relationships with other services such as mental health.
- Only 1 CAG is yet to attend Performance Council for an initial review.
- A memo to all CAG leaders is to go out outlining next steps.

Public Health

- KHP is collectively driving Public Health; the most important driver is integrated care.
- This is to be achieved through the work of the Integrated Care Pilot and supporting meetings with community services, PCTs, social care agencies.
- In this way commissioning, care and treatment could change focus, for example, a group responsible for respiratory care might change focus from early diagnosis to smoking cessation.

Johns Hopkins Exchange

- There will be a formal process for participants in the exchange programme to report back on their experience.

Governor Involvement

- With the publication of the McKee Review this week, issues

around Governor involvement in CAG accreditation were raised. It was confirmed by TS that in his recollection, this specific point was not covered in the McKee review

The Board thanked Prof Moxham for attending and noted the KHP update.

FOR APPROVAL

011/144 Risk Management Strategy & Board Assurance Framework

JS presented the strategy and BAF which had been considered previously by the Quality & Governance and Audit Committees and, as per the Acute Risk Management Standards requirement, must be reviewed and approved by the Board on an annual basis.

Following discussion, a number of amendments were suggested:

- Reference more fully the Strategy Committee and its focus on horizon scanning and looking externally.
- Include reference to a unitary Board and the responsibility of the Chairman.
- The nine protected characteristics determined by the Equality Act 2010 should be included on the Equality Impact Assessment form going forward.

Subject to the changes outlined above, the Board approved both documents.

011/145 Audit Committee Terms of Reference

MJ presented the ToR to the Board. They were approved by the Audit Committee on 20 September and prepared according to the best practice outlined in the recommendation by KPMG.

The Board approved the Audit Committee ToR.

FOR INFORMATION

011/146 Confirmed Board Committee Minutes

The Board noted the minutes from the following committees:

- Finance & Performance 28 June 2011
- Audit 02 June 2011
- Equality & Diversity 07 June 2011

MJ reported that following the meeting of the EDC on 20 September a consultation with stakeholders would commence prior to implementation of the Equality Delivery System.

011/147 Audit Committee Annual Self-Assessment

MJ presented the Audit Committee self-assessment to the Board, as per the KPMG recommendation.

The Board noted the self-assessment.

011/148 AOB

The Chair thanked the Governor and public attendees and encouraged them to attend again.

011/149 Date of Next Meeting:

Tuesday 25 October 2011, 3.00 pm - Dulwich Room.