

King's College Hospital NHS Foundation Trust Board of Directors

Minutes of the meeting of the Board of Directors held at 14:30 on Tuesday, 31 January 2012 in the Dulwich Committee Room, King's College Hospital

Members:

Prof. Sir George Alberti (GA)	Chair
Robert Foster (RF)	Non-Executive Director and Vice Chair
Maxine James (MJ)	Non-Executive Director
Prof. Alan McGregor (AM)	Non-Executive Director
Graham Meek (GM)	Non-Executive Director
Marc Meryon (MM1)	Non-Executive Director
Chris Stooke (CS)	Non-Executive Director (<i>Agenda item 3.1</i>)
Tim Smart (TS)	Chief Executive
Angela Huxham (AH)	Director of Workforce Development
Dr. Michael Murrinan (MM)	Medical Director
Roland Sinker (RS)	Director of Operations
Simon Taylor (ST)	Chief Financial Officer
Dr. Geraldine Walters (GW)	Director of Nursing & Midwifery
Jane Walters (JW) - <i>Non-voting Director</i>	Director of Corporate Affairs
Jacob West (JW1) - <i>Non-voting Director</i>	Director of Strategy

In attendance:

Anthony Merifield (AM)	Chair, KCH Charity
Sally Lingard (SL)	Associate Director of Communications
Tamara Cowan	Assistant Board Secretary (minutes)

Apologies:

Item	Subject	Action
	<u>Apologies</u>	
	There were no apologies for absence.	
012/1	<u>Declarations of Interest</u>	
	There were no declarations of interests raised.	
012/2	<u>Chair's Action</u>	
	As signalled at the previous Board meeting, due to the submission date for Monitor Q3 report being the same day as the Board meeting, GA took Chair's action to approve the Q3 submission, following discussion by the full Board at the Strategy Committee on 27 January. The Board endorsed the Chair's action taken. The submission was included on the agenda at item 3.1.	

Item	Subject	Action
012/3	<u>Minutes from the meeting held on 20 December 2011</u>	
	The minutes of the meeting held on 20 December 2012 were approved as a correct record.	
012/4	<u>Matters Arising/Action Tracker</u>	
	The action tracker was noted.	
	It was reported that 3 London Academic Health Sciences Centre were working in conjunction with the Mayor's Office and the Wellcome Trust to develop the Life Sciences Strategy for London. Robert Lechler has been elected to lead the initiative with support from McKinsey. This represents a very significant development for KHP.	
012/5	<u>Chairman and Non-Executive Directors' (NEDs) Report</u>	
	The report of Chairman and NED activity for the period was noted.	
012/6	<u>Update of Council of Governors Activities</u>	
	It was reported that the first meetings of the Council of Governors' sub-committees, Strategy (SC), Patient Safety and Experience (PESC) and Membership and Community Engagement (MEC) were held in January, and outlined the issues discussed. There had not been sufficient interest in membership of the Transport and Environment Committee to hold a meeting. The Council will be asked how best to take forward the proposed remit for this group at the Council meeting in February.	
012/7	<u>Chief Executive's Report</u>	
	The Board noted the Chief Executive Report.	
	TS advised that the:	
	<ul style="list-style-type: none"> • Trust was working hard to secure the mid-point financial scenario; • Trust was meeting its access targets but needed to improve its healthcare acquired infection targets; • Trust was likely to receive a visit from the Care Quality Commission in the near future; • Unit 6 in the KCH Business Park is nearing completion and the Assisted Conception unit will be placed on the top floor of the Unit. The ground floor will be used as office and training facilities. • Following a statement by Joan Ruddock MP in Parliament querying priority waiting times for cancer patients at King's, a response had been sent to Joan Ruddock's office clarifying the Trust's processes, and emphasising that all patients were prioritised according to clinical need. 	

Item	Subject	Action
012/8	<u>Finance Report – Month 9</u>	

The Board noted and discussed the financial performance for the period.

The Chair advised that the Finance and Performance Committee had conducted an extensive review and discussion around the finance report earlier.

It was reported that:

- The year-to-date figures show a £1.2m deficit position. Although the Trust obtained a financial risk rating of 3 in its Quarter 3 Monitor Submission, the financial position was extremely challenging. Extensive forecasting and planning continues with divisions and corporate departments to attain the mid case scenario of breakeven at the end of the financial year;
- The Department of Health Reference Cost Index published its 2010/11 data and the Trust's is 108. This indicates that the Trust overall costs are 8% higher than the expected cost derived from the weighted national averages. Outpatient Services had the highest index score of 129 which is 29% higher than the weighted national average. This information will feed into the Trust pathway reviews and work will continue to explore different cost effective and ways for delivering outpatients services; and
- Work has begun on developing the CIP plans for 2012/2013. Draft plans will be presented to the Finance & Performance Committee at its next meeting for comment.

The Board also noted the high level summary of initial planning for 2012/2013.

012/9	<u>Performance Report – Month 9</u>	
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The Board noted and discussed the Trust's performance for the period.

The Chair advised that the Finance and Performance Committee conducted an extensive review and discussion around the performance report earlier.

It was also reported that the:

- Trust was seeing year on year improvement in health care acquired infection (HCAI) and should remain vigilant; and
- The new resuscitation facility in the Emergency Department is now open following completion of the re-development. The planned re-development works were running slightly behind schedule, but this reflective of the current economic and financial climate.

012/10	<u>Proposed Annual Planning Process 2012/13</u>	
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The Board noted the report on the Annual Planning Process for 2012/2013.

**Item
012/11**

**Subject
Transformation Programme**

Action

The Board noted the report on the Transformation Programme and received an extensive verbal update from JW1:

It was noted that the programme:

- has been operational for over 12 months and is part of the Trust wider strategy in alignment with King's Health Partners activities, the local community and beyond;
- Links with delivery of the Trust's CIP and KPIs;
- Involves 3 phases with the remit of ensuring consistent quality, controlling finances and leading innovation internally and externally;
- Had achieved many successes, notably:
 - the new volunteering programme which is welcomed throughout the Trust by patients and clinicians. There is a correlation between the improvement in the 'How are we doing?' ('HRWD') scores with the start of the programme.
 - discharge planning efforts have been increased, helped by the single appointments and booking centre and initiatives to move to a paperless office; and
 - electronic job planning and rostering which was rolled out across 48 specialities.
- Projects will need to be tweaked for the year ahead to create closer links with CIPs, increase the skills of leaders and create greater integration of internal systems.

The Board commented that:

- Although a paperless outpatients department is desirable the Trust needed a 100% reliable IT system;
- Delivering seamless pathways and high quality care should embody three principles, 'right care', 'right time' and 'right place'; and
- Consistency of internal communications is a key vehicle to stimulate innovation.

It was agreed that:

- 1. TS would speak to SL about ways of stimulating innovation throughout the Trust communication vehicles; and**
- 2. A paper on Innovation would be presented at a future meeting of the Board.**

TS/SL

TS/ZL

Item	Subject	Action
012/12	<u>Quality and Safety Focus - Patient Experience Report</u>	

The Board noted the Patient Experience Report for month 9.

It was noted that:

- The overall HRWD score for December was 85, continuing the improved performance in November;
- Although environmental scores continued on an upward trajectory, there had been a slight dip in results for December;
- The Trust had been rated ‘very clean’ by patients for a second quarter on the NHS Choices website.
- The satisfaction scores for Day Surgery remained very high at 91, although response rates were low, and needed to improve;
- Satisfaction levels for outpatients remained the lowest overall at 80. Patient feedback would form an integral part of the redesign and transformation of outpatients;
- The CQC national inpatient survey results would be published soon; and
- February was ‘Dignity month’, with a wide range of initiatives aimed at improving the dignity of patients. This included a series of visits to wards by Governors and Directors as well as a series of dignity ‘master classes’ for staff.

RF commented that it would also be useful to ask the views of patients about their experience some time after they had left hospital. The National Patient Survey programme, and ‘In your Shoes events’ were some examples of this, but consideration would be given to other initiatives in this area.

Following discussion with GA, it was proposed that going forward, under the Board ‘Quality and Safety Focus’ agenda item, there should be increased focus on patient safety and outcomes, as well as patient experience.

It was agreed that with effect from the February Board meeting reports would alternate on a monthly cycle between Patient Safety, Outcomes and Experience.

**JW/
MM/GW**

The monthly Patient Experience reports would be circulated electronically to the Board for information.

JW

012/13	<u>Quarter 3 – Monitor Submission</u>	
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The Board noted the Trust’s Quarter 3 Monitor Submission.

Item	Subject	Action
012/14	<u>Equality Act 2010 – Public Duties</u>	
	<p>The Board noted the publication of King’s EDS Assessment on the Equality webpage to meet the Equality Act (2010) public duties, by 31 January 2012.</p> <p>TS, MJ, GA would be meeting to discuss the governance of EDS and the structure of the Equality & Diversity Committee.</p>	
012/15	<u>Any Other Business</u>	
	<p><u>Cancer</u> It was reported that there have been changes to the configuration of the Cancer Clinical Academic Groups (CAGs).</p>	
	<p><u>Mid Staffordshire Inquiry</u> It was reported that the results from the Mid Staffordshire Inquiry would be published soon, as a result of which there may be changes to governance and regulatory frameworks. Nationally, many lessons have already been learnt and this Trust had already implemented a wide range of measures to improve quality, including increased clinical presence on wards, greater clinical leadership on the Board, a proper informed system of governance and good interaction with stakeholders.</p>	
012/16	<u>Date of Next Meeting</u>	
	<p>Tuesday, 28 February 2012 14:30 – Dulwich Committee Room.</p>	