

**King's College Hospital NHS Foundation Trust Board of Directors - PUBLIC**

Minutes of the meeting of the Board of Directors held at 14:30 on Tuesday, 26 February 2013 in the Dulwich Committee Room, King's College Hospital.

**Members:**

Prof Sir George Alberti (GA)	Trust Chair
Graham Meek (GM)	Non-Executive Director, Vice Chair
Marc Meryon (MM1)	Non-Executive Director
Chris Stooke (CS)	Non-Executive Director
Faith Boardman (FB)	Non-Executive Director
Prof. Ghulam Mufti (GM1)	Non-Executive Director
Tim Smart (TS)	Chief Executive
Roland Sinker (RS)	Chief Operating Officer
Simon Taylor (ST)	Chief Financial Officer
Dr. Michael Marrinan (MM)	Medical Director
Dr. Geraldine Walters (GW)	Director of Nursing & Midwifery
Angela Huxham (AH)	Director of Workforce Development
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:**

Prof. Sir Robert Lechler (RL)	Executive Director, KHP
Anne Traynor (AT)	King's Charity Trustee
Tamara Cowan (TC)	Board Secretary (Minutes)
James Eales (JE)	NHS Graduate Management Trainee
Carolyn Campbell-Cole (CC-C)	Staff Governor

**Apologies:**

Sue Slipman (SS)	Non-Executive Director
Sally Lingard (SL)	Associate Director of Communications

<u>Item</u>	<u>Subject</u>	<u>Action</u>
13/16	<u>Apologies</u>  Apologies for absence were noted.	
13/17	<u>Declarations of Interest</u>  There were no declarations of interest.	
13/18	<u>Chair's Action</u>  There were no chair's actions	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
13/19	<b><u>Minutes of previous meetings – 29 January 2013</u></b>  The minutes of the meeting held on 29 January 2013 were approved as a correct record.	
13/20	<b><u>Action Tracking/Matters Arising</u></b>  The action tracker was noted.	
13/21	<b><u>KHP Update</u></b>  The Board noted the update on KHP activity provided by Prof. Sir Robert Lechler.  The following key points were noted: <ul style="list-style-type: none"> <li>• The KHP Partners' Board used the recent away day to refresh the overarching KHP vision and to reinvigorate the core aims of embarking on a fully integrated organisation;</li> <li>• The development of the KHP full business case (FBC) will test the hypothesis that a merged organisation will not only reap significant patient benefits but will also provide better opportunities to integrate research and deliver novel integrated care with South London and Maudsley and the Institute of Psychiatry;</li> <li>• In addition to exploring full integration of the organisations, the KHP FBC will examine a range of other options for closer working. The development of the KHP FBC will be undertaken in as cost effective way as possible in recognition of current challenges and priorities faced by the partner organisations;</li> <li>• Dr Richard Barker OBE has been appointed as Chair Designate of the South London Academic Health Science Network (AHSN). He will establish and lead the AHSN Board and the AHSN will have its first meeting next month; and</li> <li>• Work continues on building the blocks for the reaccreditation process for the KHP Academic Health Sciences Centre. It will not be difficult to identify the real opportunities and in the next 6-8 months, KHP will need to define the speciality areas and begin to articulate the academic dynamic as part of the process.</li> </ul> <p><b>It was agreed that RL would provide a fuller report on the reaccreditation process at the next meeting of the Board.</b></p>	RL
13/22	<b><u>Chair's and Non-Executive Directors' (NED) Report</u></b>  The report on the activities of the Chairman and non-executive directors for the period was noted.	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
13/23	<b><u>Update on Council of Governors Activities</u></b>	
	The Chair provided an update on Council of Governor activities:	
13/24	<b><u>Chief Executive's Report</u></b>	
	The Board noted the Chief Executive's report for the period.	
	TS highlighted the following key points:	
	<ul style="list-style-type: none"> <li>• The Trust has begun consideration of the recommendations included in the Francis report. Accordingly, a group consisting of non-executive directors, a governor, members of the executive team and other KCH staff has been constituted to consider the implications and the Trust's response.</li> <li>• The Trust will also produce a statement of response to the Francis report which will also be shared with the local Health Overview and Scrutiny Committees;</li> <li>• The Trust is busier than it as ever been and the high acuity of admitted patients, volume of local activity and transfer of tertiary referrals have led to real pressures which have impacted on the Trust's finances.</li> </ul>	
	The significant differences compared to the last five years, are the increase in medical takes from the local population, the growth in a number of secondary services where the Trust is not normally the tertiary referrals centre, growth driven by system-wide consolidation of services and the increase in urgent referrals in areas such as liver and vascular.	
	The trend of increasing activity levels has maintained an upward trajectory. As a consequence the Trust may need to take difficult decisions around referrals for the coming year;	
	<ul style="list-style-type: none"> <li>• As mentioned above, the Trust continues to work with KHP Partners to develop the KHP Full Business Case. However, given the current challenges in the health system and those faced by the individual organisations, costs are been monitored closely. The Board have yet to set the full budget; and</li> <li>• The Trust is also working on the production of a full business case for the proposed acquisition of the Princess Royal University Hospital (PRUH). The PRUH business case will examine the viability and the costs associated and whether or not to proceed to regulatory assessment process.</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
13/25	<b><u>Finance Report – Month 10</u></b>	
	<p>ST presented the finance report for month 10.</p> <p>It was noted that the Finance and Performance Committee had conducted an extensive review and discussion around the finance report earlier.</p> <p>The Board noted the report and the following key points:</p> <ul style="list-style-type: none"> <li>• The financial position is broadly unchanged from the month 9 position;</li> <li>• Although the Trust has been continuing to admit tertiary patients, the high-level of emergency demand continues have an impact. Accordingly it is likely that the Trust will have to restrict activity going into next year; and</li> <li>• The Trust’s capacity constraints and external and environmental factors affecting foreign markets have also contributed to private activity falling.</li> </ul>	
13/26	<b><u>Performance Report – Month 10</u></b>	
	<p>RS presented the performance report for month 10.</p> <p>It was noted that the Finance and Performance Committee had conducted an extensive review and discussion around the performance report earlier.</p> <p>The Board noted the report and the following key points:</p> <ul style="list-style-type: none"> <li>• Despite sustained pressures in A&amp;E, with the exception of admitted referral to treatment targets (RTT) the Trust achieved all its targets;</li> <li>• Following a full review which concluded patient safety was not breached the Trust is tightening its processes;</li> <li>• Work continues to treat longer waiters from the waiting lists; and</li> <li>• The Trust has implemented a number of initiatives to help meet the increasing demand and pressure on services but it is getting to the stage where the Trust may have to take direct action to address these challenges.</li> </ul>	
	<p><b>It was agreed that RS would provide a report on these capacity and demand challenges at a future meeting of the Board.</b></p>	<b>RS</b>



<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>• In addition, the Trust is screening every patient on the affected wards, retraining doctors and advising parents visiting children to ensure they wash their hands and use sterilising gels; and</li> <li>• The IV team are expanding their role and getting involved with PICC line insertions (currently undertaken by interventional radiologists) in order to relieve the pressure on PICC insertion waiting times.</li> </ul>	
13/29	<p><b><u>Quality Priorities</u></b></p> <p>The Board noted the Quality Priorities Report which was discussed at the Quality and Governance Committee on 13 February 2013.</p> <p><b>The Board approved the chosen quality priorities, which had been endorsed at a recent stakeholder event and by both the Governor Patient Experience and Safety Committee and the Board's Quality Governance Committee.</b></p>	
13/30	<p><b><u>Confirmed Minutes</u></b></p> <p>The Board noted the confirmed minutes of the Equality &amp; Diversity Committee held on 29 November 2013.</p>	
13/31	<p><b><u>Any Other Business</u></b></p> <p>There were no other items of business raised for discussion.</p>	
13/32	<p><b><u>Date of Next Meeting</u></b></p> <p>Tuesday, 26 March 2013 at 14:30 in the Dulwich Committee Room.</p>	