

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

Minutes of the meeting of the Board of Directors held at 14:00 on Tuesday, 28 October 2014 in the Trust Headquarter, PRUH

**Members:**

Prof Sir George Alberti (GA)	Trust Chair
Graham Meek (GM)	Non-Executive Director
Ghulam Mufti (GM1)	Non-Executive Director
Sue Slipman (SS)	Non-Executive Director
Chris Stooke (CS)	Non-Executive Director
Faith Boardman (FB)	Non-Executive Director
Tim Smart (TS)	Chief Executive
Dr. Michael Marrinan (MM)	Medical Director
Roland Sinker (RS)	Chief Operating Officer
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

**In attendance:**

Non Owen (NO)	Corporate Governance Officer (Minutes)
Sarah James (SJ)	Associate Director- Education & Organisation Dev.
Prof. Stuart Carney (SC)	Dean of Medical Education, KCL
Peter Gluckman (PG)	Interim Director – KCH Charity
Penny Dale	Public Governor
Victoria Sylvester	Shadow Governor
Geoff Worley	Trust Member

**Apologies:**

Angela Huxham (AH)	Director of Workforce Development
Trudi Kemp (TK)	Director of Strategic Development
Marc Meryon (MM1)	Non-Executive Director

<u>Item</u>	<u>Subject</u>	<u>Action</u>
14/136	<b><u>Apologies</u></b>  Apologies for absence were noted.	
14/137	<b><u>Declarations of Interest</u></b>  There were no declarations of interest reported.	
14/138	<b><u>Chair's Action</u></b>  There were no Chair's actions to report.	
14/139	<b><u>Minutes of Previous Meeting</u></b>  The minutes of the meeting held on 30 September 2014 were approved.	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
14/140	<b><u>Matters Arising/Action Tracking</u></b>	
	The action tracker was noted with no outstanding actions.	
14/141	<b><u>King's Health Partners' (KHP) - Undergraduate Medical Education</u></b>	
	The Board welcomed Prof. Stuart Carney (SC), the Dean of Medical Education at King's College London (KCL) to the meeting and noted the report on Undergraduate Medical Education.	
	The following key points were noted:	
	<ul style="list-style-type: none"> <li>• Feedback from medical students has revealed dissatisfaction with education and training, in particular for the clinical phase of the programme. Students report a positive experience from years 1 and 2 however criticise the large numbers attending and movement of placements;</li> <li>• In recent years King's College London (KCL) has performed poorly in the league tables. Improvements have been made, but more work needs to be done. KCL hopes to continue working with the Trust on these improvements;</li> <li>• KCL has introduced "clusters" to break down the placements into more manageable sizes. One cluster is based at the Denmark Hill (DH) site. The Trust welcomed these more manageable clusters of circa 150 students and the review of the curriculum which would enable students to have more of a core attachment to consultants and firms;</li> <li>• It is appropriate for there to be a champion at the Princess Royal University Hospital (PRUH) site. Eventually it is hoped students can be based at the PRUH for a significant amount of time with the development of academic support, common rooms, library support etc.;</li> <li>• The location of the PRUH is a key factor and additional travel costs and the distance from 'home' sites may act as a disincentive. It is however recognised that more needs to be done to engage students with the PRUH site;</li> <li>• A re-examination and realignment of the curriculum is taking place and the Trust feels it is important to model the training review around new ways of working with students;</li> <li>• The Board noted Appendix 1. KCL produces these results in order to share data so that the Trust can also take actions to improve these areas; and</li> <li>• The Chair thanked Professor Carney for his informative and candid report.</li> </ul>	
14/142	<b><u>King's College Hospital Charity (KCHC) Update</u></b>	
	The Board welcomed Peter Gluckman (PG) to the meeting. PG gave an update on the developments and opportunities with KCHC.	
	The following key points were noted:	
	<ul style="list-style-type: none"> <li>• The Charity's accountant, Kerry Jessiman (KJ) is now based at the PRUH site two days a month on a permanent basis;</li> </ul>	



<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>• There are now 80 funds linked to the PRUH with a total value of £1.2m of integrated and transferred funds and KJ is preparing a full programme;</li> <li>• Meetings have been held with executives and leading clinicians to agree a shortlist of fundraising activities to put to the KHP Fundraising Council for approval so that the KHP Fundraising Team can go and raise money ;</li> <li>• Given the current financial and operational pressures facing the Trust and the time and resources to progress a concept, the Charity has offered to fund a full time post to work up the concepts for the Trust;</li> <li>• The Charity is holding two events in 2015 including a showcase event for leading clinicians to present work which has been funded by the Charity and highlight additional funding as a consequence;</li> <li>• There will also be a “Dragon’s Den” style event for young doctors undertaking PHDs to apply for funding for their work;</li> <li>• The Board thanked PG for the difference he has made since joining the Charity. The suggestions and ideas presented seem practical for the Trust and it is important to raise consciousness and for colleagues to support this;</li> <li>• It is important that the Charity supports the Trust’s academic research strategy;</li> <li>• The PRUH site hosts the Chartwell Cancer Trust . This is a separate charitable entity and the funds are designated to the PRUH. There is liaison between the Chartwell and KCHC entities to avoid duplication of work; and</li> <li>• An important area to progress is improving the Charity links to blood cancer and haematology. This has been flagged as a priority in terms of suggested projects and follows on from disappointing patient experience in the national cancer survey.</li> </ul>	

**14/143 Update from Board Committee Chairs**

Audit Committee

CS reported that the Audit Committee met on 02 October 2014 where the routine reports had been considered with particular emphasis on the internal audit data which detailed various quality controls and gave a satisfactory review of these controls.

Board Integration Committee (BIC)

John Hampton (JH) the Transformation and Integration Director has been developed new reports which were presented at the last meeting held on 09 October. The Committee examined the results from the recent recovery plan actions. The whole Board were invited to attend the meeting.

Finance & Performance Committee

GM reported that the Committee met earlier today and was brought up to date with the performance of the Trust. More details about the operational and financial performance of the Trust will be provided under agenda items 2.4 and 2.5.

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It was positive to hear reports which highlight performance improvements at both of the Trust's acute sites. Whilst this improvement in performance is encouraging, there is still a lot of pressure from demand and sustaining this level of performance remains a challenge.

Financial pressures continue and ST and his team have worked hard on developing scenario planning against actual position. There is progress in discussions with external stakeholders but with work still to do.

#### Quality & Governance Committee

GM1 reported that the Committee met on 22 October for an extra meeting. Amongst other things the Committee reviewed the results of the last National Cancer Survey for the Trust. It is evident that the Trust has lots more work to do to improve its results. The Committee also considered nursing productivity.

#### Strategy Committee

SS reported that the Committee is due to meet next on 04 December.

Following the release of Simon Steven's Five Year Forward View SS will meet with TK to discuss how to reflect the contents of the report in the Trust's forward plans.

#### Education & Workforce Development Committee

In MM1's absence, SJ reported that the Committee has not met since the last Board meeting.

### **14/144 Update on Council of Governors' Activities**

The Board noted the following update on the Council's activities:

- The Governors have had a small respite in their programmed activities however the end of October and November promises to be a very busy month with the following meetings/events planned:
  - 30 October – Patient Experience & Safety Committee and Governor Strategy Committee
  - 04 November – Joint KHP Governor Event
  - 12 November – New Governor Trust Induction
  - 12 November – Informal Council of Governors Meeting
  - 27 November – Governor Training (from FTN Govern Well)
  - 27 November – Extra-ordinary Council of Governors Meeting
- In December, the new Council of Governors will begin their term.

### **14/145 Chief Executive's Report**

The Board noted the Chief Executive's report presented by TS.

The following key points were noted:

- The improved performance at all the Trust sites and particularly of the PRUH site is encouraging;
- As the finance report details, the dedicated drive towards high quality performance continues to cause immense financial strain on the Trust;

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>• Staff are under pressure and there are many unsung heroes. Accordingly an event will be organised to acknowledge staff;</li> <li>• Recruitment remains a key challenge to replace temporary staff with permanent to reap cost savings and improve continuity of care to patients;</li> <li>• The report on the NHS written by Simon Stevens Five Year Forward View reflects some of the key themes the Trust has long expected. A desired outcome would be improved integrated care across Southwark and Lambeth;</li> <li>• The new Principal of King's Health Partners (KHP) will bring a refreshed approach for the benefit of patients and partners and the trust was delighted he was able to come to Abu Dhabi for the opening of the KCH clinic there; and</li> <li>• The Trust's Abu Dhabi clinic will feature in a forthcoming edition of the Trust's stakeholder magazine @King's. The efforts of the Trust's Commercial Services team cannot be underestimated and the profits from the venture will be used to support the Trust's NHS activities.</li> </ul>	

**14/146**      **Finance Report**

The Board received the month 06 finance report presented by ST which was discussed at length at the Finance & Performance Committee, held earlier.

The following key points were noted:

- The quality improvement investment and the resultant cost pressures have contributed to the Trust's challenged financial position;
- The month 6 report details the financial recovery scenarios, projections versus actual performance and the short, medium and long-term forecast for the Trust to provide the Board with assurance on the liquidity of the Trust;
- The cash flow forecast is challenging reflecting that the timings for receipt of additional funding streams are not within the Trust's control;
- The Trust recovery plans are beginning to take effect and agency spending is reducing. More targeted intervention is required to make more sustainable changes;
- The opportunities outlined in the business case for the acquisition are still attainable but need to be considered in the context of a post-Francis review and changing NHS environment;
- The Trust is very well focussed on the issues and there are recovery plans in place ; and
- The level of non-recurrent funding is an important factor for the Trust especially in light of the impending 2015 elections which could result in a change to future funding for the NHS.

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## 14/147 Performance Report

The Board received the month 06 performance report presented by RS which was discussed at length at the Finance & Performance Committee held earlier.

The following key points were noted:

### Princess Royal University Hospital (PRUH) site

- There is a continuing improving picture at the PRUH site which is very positive. However a key implication of this sustained performance is the pressure on the Trust's financial position;
- Areas of strong performance include patient experience reflected in the 'how are we doing' (HRWD) results and infection control;
- Maintained improvements have been seen in average length of stay with a static position in the emergency department due to the increased attendances;
- Challenges at the PRUH site remain consistent with those reported last month. There have been instances where emergency department (ED) performance has been above the targeted 95% however the main issue impacting the performance is the decrease in the number of discharges;
- Work is ongoing with Southwark Clinical Commissioning Groups (CCGs) to improve this issue and facilitate out of hospital care;
- Referral to treatment (RTT) targets remain an area of challenge;
- Cancer waiting times were achieved for the month of September with the exception of 62-day time to treatment target;
- Tessa Jowell MP and Harriet Harman MP visited the PRUH site recently. They provided some very positive feedback on the improvements to the quality of care; and
- The PRUH Summit will be an important event and support the ongoing dialogue with key stakeholders.

### Denmark Hill (DH) site

- There are numerous areas of strong performance at the DH site;
- Emergency department (ED) performance challenges are long standing with sustained increased growth in emergency admissions. Whilst there have been consistent periods of performance above the 95% target, achievement of the target remains challenging;
- It is felt that whilst the weather has been unseasonably mild this has not hugely varied the position. A particularly bad winter would however have a further adverse impact on the ED; and

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>• RTT backlog has been difficult to reduce in light of the growth in demand. However the Trust is making good progress on its trajectory to reduce the number of patients waiting, and will have no patients waiting over 52 weeks by the end of November.</li> </ul>	
<b>14/148</b>	<b><u>Quality &amp; Safety Focus</u></b>	
<b>14/148.1</b>	<b><u>Quarterly Patient Experience Report</u></b>	
	<p>The Board noted and considered the quarterly patient experience report.</p>	
	<p>The following key issues and points were noted:</p>	
	<ul style="list-style-type: none"> <li>• The Care Quality Commission (CQC) has advised that the Trust will have a planned inspection in January 2015</li> <li>• The report shows stability for quarter 2 at the Denmark Hill (DH) site with a steady improvement at the Princess Royal University Hospital (PRUH) and other sites;</li> <li>• 'How are we doing' (HRWD) inpatient scores have remained static at the DH site and improved at the PRUH site. HRWD outpatient scores for DH have also been positive, although response rates have fallen;</li> <li>• The Trust has been an early implementer of the Friends and Family Test (FFT) for outpatients and day case patients, which launched on 01 October 2014;</li> <li>• FFT inpatient, emergency and maternity scores for the DH and PRUH sites have been shown against national and London scores to benchmark performance;</li> <li>• The number of complaints for the quarter increased slightly, however the October numbers are down significantly, due to refocused efforts within the organisation to improve local resolution;</li> <li>• The Trust continues to face challenges in improving the response rate to complaints. This is in part due to the inherited number of complaints from the new sites and capacity to deal with complaints for a larger organisation. Improvement is a key priority, and actions have been implemented and are being monitored by the Serious Complaints Committee;</li> <li>• Volunteering at the Trust continues to grow and promotion activities at local schools, colleges and universities have been undertaken;</li> <li>• The volunteering service is also launching the "King's Home Hamper" initiative, which is receiving charitable donations from local business providers. The initiative will provide basic provisions for referred patients going home from the hospital and homeless people. The response has been very positive; and</li> <li>• It was noted that the King's volunteering programme is nationally recognised.</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
14/148.2	<b><u>National Cancer Survey</u></b>	

The Board noted and considered the summary of the results from the National Cancer Survey which were discussed in detail at the recent Quality and Governance Committee.

The following key issues and points were noted:

- The survey looks in particular at attitudes to care and not the outcome of care, which is very good for the Trust, but the survey results are poor. The survey focuses on supplementary service protocols such as for example information provided to patients by clinicians;
- The survey was sent to a random sample of patients at both the Princess Royal University Hospital (PRUH) and the Denmark Hill (DH) site. The response rate was 56%;
- The Trust is disappointed that its survey results have not been better over the past 2 years. This is a similar position for many London Trusts. Improving patient experience of cancer patients is a key area of focus for the Trust and one of the trust's quality priorities for 2014/15;
- The Macmillan Information and Advice Centre at the Cicely Saunders Institute is a wonderful resource for patients and relatives but remains somewhat underutilised. Much work has been undertaken to promote access to this service, and this continues. There are dedicated cancer charitable funds available which will be considered as part of the action planning;
- The Trust has set up a dedicated helpline for cancer patients. This was only set up a couple of months before the survey was conducted, the impact of which will not be reflected in the survey results;
- The Trust does not have a dedicated cancer ward. This may lead to the perception from a patient experience point of view of a lack of continuity of care;
- At the PRUH site the Chartwell Unit is the identified area for cancer patients with a dedicated nurse or case manager model preferred by patients; and
- At the Quality and Governance Committee, various suggestions for improvement were discussed and will be progressed.

**14/148.3 Monthly Nursing Staffing Levels**

The Board noted and received the monthly nurse staffing levels.

The following key points were raised:

- Where there are fewer nurses on duty than the planned level the report should detail why the gap is acceptable and how it is managed to provide the Board with further assurance; and

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>A benchmarking exercise is being undertaken with the Shelford Group which will enable the Trust to compare its results with other trusts. This is expected to be published in the next Board report.</li> </ul>	
	<p>The Board agreed that the nursing staff level data should be publicised in line with guidance.</p>	
<b>14/148.4</b>	<b><u>Quarterly DIPC Report</u></b>	
	<p>The Board noted and received the quarterly DIPC report.</p>	
	<p>The following key points were noted:</p>	
	<ul style="list-style-type: none"> <li>The incidence of Carbapenemase Resistant Enterobacteriaceae (CRE) in adult liver and child health has reduced significantly;</li> <li>There have been some spikes in the case of Clostridium Difficile (c.diff) at the Denmark Hill (DH) site. These relate to Surgical Critical Care but the Trust conducted deep cleaning programmes and improved local cleaning initiatives which has helped;</li> <li>It is not possible to prevent cases of c.diff which relate to a patient's antibiotic history. The Trust is taking action to reduce inter hospital transmission;</li> <li>There have been Pseudomonas control issues at both the PRUH and DH sites. This has been addressed with tested filters on taps and continued monitoring by water management groups on each site;</li> <li>There has been a lot of activity and developments nationally regarding Ebola over the last month. There is now more system wide clarity on anticipated numbers, contraction and symptoms;</li> <li>There were concerns from staff about the adequacy of Personal Protective Equipment (PPE) however following an exercise by NHS London these have eased;</li> <li>The Trust continue to provide training and practice for "donning" and "doffing" the PPE to staff;</li> <li>In the case of a confirmed case, Public Health England prescribed that the patient be transferred to the Royal Free;</li> <li>Guidance is due to be released with regard to the procedure for those staff wishing to travel to affected countries to assist. It is likely that these members of staff would be quarantined on their return to the UK;</li> <li>Testing suspected cases of Ebola can take circa 15 hours to return a result. This is due to the patient requiring a negative malaria test before the sample is sent to Wiltshire; and</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>The Board noted that there has been a lot of work put into the Ebola preparedness and the emergency department performed very strongly with a suspected case. Erica Grobler, Deputy Director of Infection Prevention and Control has done an enormous amount of work as well as volunteering to be on call for any suspected cases.</li> </ul>	
<b>14/149</b>	<b><u>FOR APPROVAL</u></b>	
<b>14/149.1</b>	<b><u>Quarterly Monitor Submission</u></b>	
	<p>TS commended the Quarter 2 Monitor submission for the Board's approval. The report was recommended for approval and TS or GA would sign off accordingly.</p> <p>The Board approved the submission of the Monitor.</p>	
<b>14/149.2</b>	<b><u>Hillsborough Report Assurance</u></b>	
	<p>RS commended the Hillsborough Report Assurance recommendations.</p> <p>The Board approved the recommendations.</p>	
<b>14/150</b>	<b><u>FOR INFORMATION</u></b>	
<b>14/150.1</b>	<b><u>Chair's and Non-Executive Directors' (NED) Activity Report</u></b>	
	<p>The Board noted the Chair's and NEDs activity report for the period.</p>	
<b>14/150.2</b>	<b><u>Annual Patient Complaints Report</u></b>	
	<p>The Board noted the annual patient complaints report which shows the work which has been done behind the scenes to improve complaints handling.</p> <p>The Board thanked JW and her team for the work and commitment to improve complaints management at the Trust.</p>	
<b>14/150.3</b>	<b><u>Confirmed Board Committee Minutes</u></b>	
	<p>The Board noted the confirmed minutes of the Finance &amp; Performance Committee (27/06/2014).</p>	
<b>14/150.4</b>	<b><u>Annual Energy and Carbon Report</u></b>	
	<p>The Board noted the annual energy and carbon report.</p>	
<b>14/151</b>	<b><u>Any Other Business</u></b>	
	<p>There were no matters of any other business raised for discussion.</p>	
<b>14/152</b>	<b><u>Date of Next Meeting:</u></b>	
	<p>Tuesday, 25 November 2014, Dulwich Room, Denmark Hill site.</p>	