

## 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, 26 May 2015 in the Dulwich Room, Hambledon Wing, Denmark Hill site.

### Members:

Lord Kerslake (BK)	Trust Chair
Graham Meek (GM)	Non-Executive Director, Vice Chair
Chris Stooke (CS)	Non-Executive Director
Sue Slipman (SS)	Non-Executive Director
Prof. Ghulam Mufti (GM1)	Non-Executive Director
Angela Huxham (AH)	Director of Workforce Development
Dr Trudi Kemp (TK) – <i>Non-voting Director</i>	Director of Strategic Development
Dr. Michael Marrinan (MM)	Medical Director
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
Ahmad Toumadj (AT) – <i>Non-voting Director</i>	Interim Director of Capital, Estates & Facilities

### In attendance:

Tamara Cowan (TC)	Board Secretary (Minutes)
Kath Dean (KD)	Operational site Lead - PRUH
Sally Lingard	Associate Director of Communications
Linda Smith	Trust Charity Representative
Fiona Clark	Public Governor
Richard Gibbs	Stakeholder Governor
Victoria Silvester	Public Governor
Emma Roberts	PwC – Governance - Review
Gareth Craddick	PwC – Governance - Review

### Apologies:

Faith Boardman (FB)	Non-Executive Director
Jeremy Tozer (JT)	Interim Chief Operating Officer
Roland Sinker (RS)	Acting Chief Executive Officer
Steve Leivers (SL1) – <i>Non-voting Director</i>	Director of Transformation & Turnaround

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/50	<u>Apologies</u>  Apologies for absence were noted.	
15/51	<u>Declarations of Interest</u>  There were no declarations of interest reported.	
15/52	<u>Chair's Action</u>  There were no Chair's actions to report.	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/53	<b><u>Minutes of Previous Meeting</u></b>	
	The minutes of the meeting held on 28 April 2015 were approved subject to minor amendments to the attendees list and date of the meeting.	
15/54	<b><u>Matters Arising/Action Tracking</u></b>	
	There were no actions recorded on the action tracker.	
15/55	<b><u>Moving to Operational Sustainability</u></b>	
15/55.1	<b>Chief Executive's Report</b>	
	The Board noted and received the Chief Executive's report presented by JW on behalf of RS.	
15/55.2	<b>Consolidated Finance Report (Month 01)</b>	
	The Board received the month 01 finance report presented by ST which was discussed at length at the Finance & Performance Committee, held earlier.	
	The following key points were noted:	
	<ul style="list-style-type: none"> <li>• The month 01 position reflects a positive variance against plans but it should be noted that the budgets have not been finalised;</li> <li>• The trust needs to land its Cost Improvement Plans (CIPs) of £86m;</li> <li>• There is an underlying deficit adding to the significant challenges around cash;</li> <li>• Since submitting the Trust's 1-year financial recovery plan Monitor have continued to look at the Trust's cash flow to ensure it marries with the plan;</li> <li>• Monitor will conduct a deep dive on the Trust's 2-year plan;</li> <li>• The Critical Care Unit (CCU) provides support services and its budget is based on contribution hence it will get income from the emergency department; and</li> <li>• The quality impact assessment framework for approving CIPs is rigorous.</li> </ul>	
15/55.3	<b>Performance Report (Month 01)</b>	
	The Board received the month 01 performance report presented by KD which was discussed at length at the Finance & Performance Committee held earlier.	
	The following key points were noted for other Trust sites and services:	
	<ul style="list-style-type: none"> <li>• At month 01 emergency department performance at the Princess Royal University Hospital (PRUH) was 86% and 95% at the Denmark Hill (DH) site. Both sites were affected significantly by Norovirus during the month, which had an impact on bed availability;</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
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- There are recovery plans for both the acute sites at DH and PRUH based on shortfall on capacity;
- The ambition is to get the PRUH site to 95% performance by October 2015 and the DH site to 95% as soon as possible;
- Steps are being taken to reduce the backlog of long waiters. A process is also underway to validate data;
- Diagnostic waits are currently at 3.2% which is above the 1% trajectory; and
- The Trust is 10 cases above the period's trajectory for C.Difficile. A programme of deep cleans are ongoing.

**15/56**      **Update from Board Committees and Council of Governors**

Audit Committee

CS advised that the Audit Committee had met twice in May. The first meeting was to consider matters related to the normal programme of internal audit activity and counter fraud and the second focused on the annual report and accounts and the reports from external auditors.

The Committee had a discussion with external auditors Deloitte about the Trust's annual accounts and whether the trust can certify in its accounts that is a going concern given the uncertainty around funding. The results of the discussion are reflected in reports from Deloitte and the annual reports and accounts have been updated to reflect the agreed changes.

Deloitte also carried out robust testing of indicators including referral to treatment, 6-week diagnostic waits and 62-day cancer waits as part of the work on the quality report which is incorporated in the annual reports and accounts.

The Committee have given consideration to the annual report, annual accounts and annual quality report and can commend them to the Board for approval.

Finance & Performance Committee

GM reported that the Committee met earlier today and discussed substantive reports on finance, performance and recruitment. The Committee was assured by the plans in place to recover the emergency department trajectory.

Quality & Governance Committee (QGC)

GM1 advised that the Quality & Governance Committee met on 13 May 2015. The Committee considered patient stories relating to maternity services, reports on never events, the progress on implementing changes around the seven areas flagged in initial feedback from the CQC. The committee also received an earlier draft of the quality report which it also commends to the Board.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
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Council of Governors Activities

The Board noted the following update on Council of Governors activities since the last meeting:

- The Council of Governors on 14 May in Orpington which was the first meeting chaired by BK. The Council had a good discussion about the current financial position, ratified RS in the role of acting Chief Executive Officer (CEO) and also noted the process finding a substantive CEO. The Council also agreed the recommendation from this Board and the Nominations Committee to find another non-executive director to join the Board;
- Governors continue to participate in Go See Visits, PLACE assessments and Dignity Events; and
- Governors also met with PwC colleagues as part of the Governance Review process.

Improving Quality of Care for Patients

**15/56.1 Quarterly Patient Safety Report**

The Board noted and received the quarterly safety experience report which was discussed at the Quality and Governance Committee on 13 May 2015

The following key points were raised and noted:

- The Biopatch audit of IV line care has been completed and the Trust performance was the best out of the 26 other sample Trust;
- The Trust is an outlier in numbers of medication errors reported and this has been made a priority for 2015/16. Improvements have been noted as the result of the electronic prescribing medication system;
- There have been two never events since the last report. Both required re-interventions but no harm was caused to the patients.
- The Safer Surgery Checklist (SSC) is well embedded but the Trust needs to keep reinvigorating the rigour around the culture of use following some refinements.

The Trust is taking all steps to ensure that these processes are fully implemented and when incidents come to light they are investigated robustly and followed through with clinicians; and

- Falls have decreased compared with previous year and are in line with other Shelford Group Trusts.

**15/56.2 Monthly Nursing Staff Levels Report**

The Board noted and received the monthly nurse staffing levels and agreed that the nursing staff level data should be publicised in line with guidance.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/57	<b>King's College Hospital Charity – Monthly Update</b>	
	The Board received a short update on the Charity's activities from LS.	
	The following key points were noted:	
	<ul style="list-style-type: none"> <li>• Charity has received circa £900k in legacies and donations to support services at the Trust;</li> <li>• The Charity continues to support the Trust's programme of work including the volunteers programme and nurse development programme;</li> <li>• There is work underway to clarify which major projects should be supported by KHP fundraising;</li> <li>• It is important that the Trust develops a strategy which articulates its requirements so the Charity can have clarity on the direction of travel;</li> <li>• It was agreed that the charity would provide some data on the level of investment required; and</li> <li>• Work continues to identify the best model for the entity going forward.</li> </ul>	
15/58	<b>FOR APPROVAL</b>	
15/58.1	<b><u>Draft Annual Report &amp; Accounts</u></b>	
	The Board received considered the following documents in relation to the annual reports and accounts process 2014/15:	
	<ul style="list-style-type: none"> <li>• Draft Annual Report</li> <li>• Draft Quality Report &amp; External Auditors Report</li> <li>• Draft Annual Accounts &amp; External Auditors Report</li> <li>• Draft Letter of Representation</li> </ul>	
	The following key points were raised and noted:	
	<ul style="list-style-type: none"> <li>• The level of the financial challenge facing the Trust is reflected in the year-end reports;</li> <li>• The audit of key mandated and local indicators have given rise to some issues with data quality which are being addressed;</li> <li>• The accounts have been produced based on going concern whilst reflecting the risks going forward; and</li> <li>• Auditors also reviewed the Trust's debtors position and whilst they recognise the challenges they are comfortable with the provisions made.</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<p>The Board approved the:</p> <p>1) Annual Report and Accounts 2014-2015 subject to minor editorial changes; and</p> <p>2) The letter of representation and agreed that RS should sign on behalf the Board.</p>	
15/58.2	<b><u>Board Self Certification and Schedule of Assurance</u></b>	
	The Board approved the proposed Board declaration in relation to the Trust's compliance with its licence conditions and authorised BK and RS to sign-off the final submission.	
15/59	<b><u>FOR INFORMATION</u></b>	
15/59.1	<b><u>Chair's and Non-Executive Directors' Activity Report</u></b>	
	The Board noted the Chair's and NEDs activity report for the period.	
15/59.2	<b><u>Confirmed Board Committee Minutes</u></b>	
	The Board noted the confirmed minutes of the Finance & Performance Committee (24/03/2015).	
15/60	<b><u>Any Other Business</u></b>	
	There were no matters of any other business raised for discussion.	
15/61	<b><u>Date of Next Meeting</u></b>	
	Tuesday, 30 June 2015, PRUH	