

## 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 July 2015 in the Dulwich Room, Hambelden Wing.

### Members:

Lord Kerslake (BK)	Trust Chair
Graham Meek (GM)	Non-Executive Director, Vice Chair
Faith Boardman (FB)	Non-Executive Director
Chris Stooke (CS)	Non-Executive Director
Roland Sinker (RS)	Acting Chief Executive Officer
Paul Jones (PJ)	Interim 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
Ahmad Toumadj (AT) – <i>Non-voting Director</i>	Interim Director of Capital, Estates & Facilities
Jeremy Tozer (JT)	Interim Chief Operating Officer
Dr. Geraldine Walters (GW)	Director of Nursing & Midwifery
Jane Walters (JW) – <i>Non-voting Director</i>	Director of Corporate Affairs

### In attendance:

Tamara Cowan (TC)	Board Secretary
Fiona Clark	Public Governor
Chris North	Public Governor
Victoria Silvester	Public Governor
Rashad Paracha	Courtne & Thorne
James De Looper	Manpower
Andy Simmons	Councillor, Chief of Staff, Helen Hospital, MP
Robert Kettell	Department of Health

### Apologies:

Sue Slipman (SS)	Non-Executive Director
Prof. Ghulam Mufti (GM1)	Non-Executive Director
Steve Leivers (SL1) – <i>Non-voting Director</i>	Director of Transformation & Turnaround

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/73	<u>Apologies</u>  Apologies for absence were noted.	
15/74	<u>Declarations of Interest</u>  There were no declarations of interest reported.	
15/75	<u>Chair's Action</u>  There were no Chair's actions to report.	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/76	<b><u>Minutes of Previous Meeting</u></b>	
	The minutes of the meeting held on 30 June 2015 were approved.	
15/77	<b><u>Matters Arising/Action Tracking</u></b>	
	There were no actions recorded on the action tracker.	
15/78	<b><u>Moving to Operational Sustainability</u></b>	
15/78.1	<b>Chief Executive's Report</b>	
	The Board noted and received the Chief Executive's report presented by RS.	
	The following key points were reported by RS:	
	<ul style="list-style-type: none"> <li>• The Trust continues to face significant challenges although it should be noted that there have been some areas of improvement;</li> <li>• The Trust is preparing its factual accuracy response to the draft Care Quality Commission's draft report. The quality summit involving stakeholders and governors is expected to take place in September;</li> <li>• The Trust is working hard to improve its financial position and work continues on development of clear savings plans with some significant choices for the system;</li> <li>• In quarter 1 we have seen some good improvements in our emergency department performance which have both attained 90-95% against the 95% target. The Trust does have concerns around the slight increase in c. difficile cases hence the Trust had embarked on a deep cleaning programme;</li> <li>• The Trust is working on development of its 5 year plan by the end-October;</li> <li>• The Trust continues to work with KHP partners to develop a plan of action to deliver the joint vision; and</li> <li>• This is also ST's last public Board meeting as he moves across from his Chief Financial Officer role to support the Trust in developing its commercial service portfolio.</li> </ul>	
	The following key points were raised and noted in discussion:	
	<ul style="list-style-type: none"> <li>• Issues have been identified on coding accuracy in a number of areas which is impacting on income. The Trust has taken action to align its coders and improve coding to get correct income and clinicians will be more involved in the processes going forward;</li> </ul>	

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- The regular reports to the Board should include more benchmarking information on peer comparisons, as although this is reviewed within services it is not regularly reviewed at the Board.

#### **15/78.2 Consolidated Finance Report (Month 03)**

The Board received the month 03 finance report presented by ST which was discussed at length at the Finance & Performance Committee, held earlier.

The following key points were reported by ST:

- At the end of month 3, the Trust is broadly on plan ;
- The Trust has achieved £2.3m of a target of £2.7m for quarter 1;
- Income has gone slightly up and the Trust is £1.6m ahead of income projection;
- The actual run rate has reduced as a result of pay spend controls but not as much as needed;

The following key points were raised and noted in discussion:

- The impact of CIPs are not yet showing in Month 3 in any significant way, as they will be phased in from Month 4. The Board is anticipating a steady improvement from Month 4, with a step change in the position from October;
- The Board is also mindful of the likely impact of winter pressures on the financial position; and
- The Trust has implemented robust processes and systems as a result of which capacity reductions have been achieved at the Princess Royal University Hospital (PRUH) site ahead of winter, which offers the trust flexibility going into the winter period.

#### **15/78.3 Performance Report (Month 03)**

The Board received the month 03 performance report presented by JT which was discussed at length at the Finance & Performance Committee held earlier.

The following key points were reported by JT:

- The Trust is on track against all the performance targets it declared to Monitor for quarter 1;
- Access at the PRUH site emergency department is up 5% in June with 93% being the highest performance across all site, still below the 95% national target but a significant improvement nonetheless; and
- Delivering capacity and the emergency surgical pathway remain key milestones and these will include looking at the medical workforce.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<p>The following key points were raised and noted in discussion:</p> <ul style="list-style-type: none"> <li>• The contents of the <i>'McKinsey's One Version of the Truth'</i> has been agreed by all relevant partners in the system and some elements will be implemented in the next two weeks;</li> <li>• The validation exercise to ensure referral to treatment (RTT) data in the patient tracking list is correct and on track is underway with a report expected to be presented in October;</li> <li>• There are 36 patients waiting over 62 weeks for neurosurgery and there is ongoing work to ensure these patients are treated as soon as possible;</li> <li>• The staff vacancy rate has increased as the result of a high number of vacant posts; and</li> <li>• The Trust has 9 cases over target on c.difficile for the quarter. A deep cleaning programme has been implemented.</li> </ul>	
<b>15/79</b>	<b><u>Updates from Board and Council</u></b>	
<b>15/79.1</b>	<b>Education &amp; Workforce Development Committee</b>	
	There had been no further update since the last meeting of the Education & Workforce Development Committee.	
<b>15/79.2</b>	<b>Finance &amp; Performance Committee</b>	
	GM reported that the Committee met earlier today and discussed substantive reports on finance, performance and recruitment.	
<b>15/79.3</b>	<b>Strategy Committee</b>	
	In the absence of SS, TK advised that the Strategy Committee had had some good discussion about the external factors driving the strategic change following the elections, the Vanguard bids and received an informative presentation on 'Our Healthier South East London' about the strategy for delivery of care in South East London.	
<b>15/79.4</b>	<b>Council of Governors Activities Report</b>	
	The Board noted the governors' activity report.	
<b>15/80</b>	<b>Improving Quality of Care for Patients</b>	
<b>15/80.1</b>	<b>Quarterly Patient Experience Report</b>	
	The Board received and noted the quarterly patient experience report which was also discussed at the recent Quality and Governance Committee.	
	The following key points were reported by JW:	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> <li>• There have been good patient satisfaction levels across the majority of services with significant improvement in patient satisfaction for emergency patients at the PRUH. This has been accompanied by a reduction in patient complaints across services on both sites;</li> <li>• A new '<i>How are we doing? (HRWD)</i>' patient survey was launched in April, with good levels of inpatient satisfaction being reported. Denmark Hill (DH), PRUH and Orpington met or exceeded the new target satisfaction score of 89 for each month of the quarter. Outpatient experience is more variable with the DH services trending below target;</li> <li>• New reporting of patient comments was launched this quarter measuring themes linked to positive emotions, staff attitude, communication and compassion and showing trends over time;</li> <li>• The national inpatient survey result for the Trust was received recently. The survey was taken from a sample of patients who were at the Trust last July;</li> <li>• The Trust received a red rating for the section on operations and procedures, an area in which the Trust has performed poorly in previous surveys. This was discussed at the clinical directors meetings and one of the senior consultants is leading a piece of work to understand the key issues of concern for patients and develop an improvement plan;</li> <li>• This is the first national inpatient survey as a combined Trust; and</li> <li>• The Patient Advice and Liaison Service (PALS) remains extremely busy at both the acute sites.</li> </ul>	

The following key points were raised in discussion:

- The changes to the HRWD survey allows the Trust to better identify themes; and
- Some of the key issues in the inpatient survey relate to waiting times and communication.

#### **15/80.2 Monthly Nursing Staff Levels**

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

#### **FOR APPROVAL**

#### **15/81 Quarterly Monitor Submission – Quarter 1 2015/16**

The Board noted the contents of the report and agreed to self-certify against the three Board declarations in line with following:

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- **For finance, that:** The board anticipates that the trust will continue to maintain a Continuity of Service risk rating of at least 3 over the next 12 months.

Rationale for signing not confirmed

- The Trust is still reliant on the working capital facility from Monitor.
- The Trust Continuity of Service Risk Rating of 1 at the end of Quarter 1.

- **For governance, that:** The board is satisfied that plans in place are sufficient to ensure ongoing compliance with all existing targets (after the application of thresholds) as set out in Appendix A of the Risk Assessment Framework; and a commitment to comply with all known targets going forwards.

Rationale for signing not confirmed

- The Trust self-certified that there was a risk it would not meet the following targets in its Annual Plan:
  - Referral to treatment targets – 18 weeks for admitted/nonadmitted/incomplete; and
  - A&E 4-hour target Trust is still reliant on the working capital facility from Monitor of which is has drawn down £30m to date; and
  - 62-day cancer waits; and
  - C.Diff – Quarters 1-4
- The Trust has also self-certified that the following targets represent a risk in Quarter 2:
  - Referral to treatment targets – 18 weeks for admitted/nonadmitted/incomplete; and
  - A&E 4-hour target Trust is still reliant on the working capital facility from Monitor of which is has drawn down £30m to date; and
  - C.Diff – Quarters 1-4

- **Otherwise:** The board confirms that there are no matters arising in the quarter requiring an exception report to Monitor (per the Risk Assessment Framework, Diagram 6) which have not already been reported.

Rationale for signing Confirmed

- The Trust is not aware of any other matters arising that Monitor is not already aware.

The following key points were also raised and noted:

- Monitor is currently conducting field work to ensure the Trust's Financial Recovery Plans are robust and their delivery therefore they are attending the Savings Board and meeting with many of key individuals on the Board; and
- Monitor has requested that the Trust develops a detailed workforce plan.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<b>FOR INFORMATION</b>	
<b>15/82</b>	<b>Chair's and Non-Executive Directors' Activity Report</b>	
	The Board noted the Chair's and NEDs activity report for the period.	
<b>15/83</b>	<b>Confirmed Board Committee Minutes</b>	
	The Board noted the confirmed minutes of the Finance & Performance Committee (26/05/2015).	
<b>15/84</b>	<b>ANY OTHER BUSINESS</b>	
	The following other matters on any other business were raised:	
	<ul style="list-style-type: none"> <li>• <b>Staff Flu Immunisation</b> The Trust runs a free flu vaccination for staff and additional focus will be given to encourage staff to be immunised ahead of the winter period. Historically, it has been challenging to get staff to take this up. It was agreed that the position would be reviewed in September.</li> <li>• <b>Monthly Dashboard</b> <ul style="list-style-type: none"> <li>– The Dashboard is a snapshot of the progress the Trust has made against its target and it does not include non-recurring costs or income;</li> <li>– Activity has increased across all areas but it is evident that productivity is improving;</li> <li>– There is a downward trend in the use of bank and agency staff; and</li> <li>– Key KPIs are moving in the right direction.</li> </ul> </li> </ul>	
<b>15/85</b>	<b>DATE OF NEXT MEETING</b>	
	Tuesday, 29 September 2015, Dulwich Room, Denmark Hill site.	