

## 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, 30 June 2015 in the Boardroom, Princess Royal University Hospital.

### Members:

Graham Meek (GM)	Non-Executive Director, Vice Chair
Chris Stooke (CS)	Non-Executive Director
Sue Slipman (SS)	Non-Executive Director
Roland Sinker (RS)	Acting Chief Executive Officer
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
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:

Tooba Ahmadi (TA)	Corporate Governance Officer (Minutes)
Chris Goulding (CG)	Deputy Director of Workforce
Robert Kettell (RK)	Department of Health
Craig Gibbons (CG1)	Vodafone
Penny Dale (PD)	Public Governor
Eniko Benfield (EB)	Public Governor
Jane Badejoko (JB1)	Corporate Governance Officer

### Apologies:

Lord Kerslake (BK)	Trust Chair
Prof. Ghulam Mufti (GM1)	Non-Executive Director
Faith Boardman (FB)	Non-Executive Director
Steve Leivers (SL1) – <i>Non-voting Director</i>	Director of Transformation & Turnaround

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/62	<u>Apologies</u>  Apologies for absence were noted.	
15/63	<u>Declarations of Interest</u>  There were no declarations of interest reported.	
15/64	<u>Chair's Action</u>  There were no Chair's actions to report.	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/65	<b><u>Minutes of Previous Meeting</u></b>	
	The minutes of the meeting held on 26 May 2015 were approved.	
15/66	<b><u>Matters Arising/Action Tracking</u></b>	
	There were no actions recorded on the action tracker.	
15/67	<b><u>Moving to Operational Sustainability</u></b>	
15/67.1	<b>Chief Executive's Report</b>	
	The Board noted and received the Chief Executive's report presented by RS.	
	The following key points were noted:	
	<ul style="list-style-type: none"> <li>• The Trust is pushing on quality improvement through various forums including the Performance meetings, the Nursing Board meetings and the Clinical Directors meetings;</li> <li>• Preparing for the receipt of the CQC inspection report is currently a key focus. A process to respond to CQC report has been agreed by the CQC Steering Group;</li> <li>• The delivery of immediate financial plans is tracked by the Savings Board, which meets fortnightly. The weekly meetings with Divisions is attended by CS on fortnightly basis;</li> <li>• A number of executives including MM and GW attends the Quality Impact Assessment Group to ensure the CIPs that are being signed off are those that the Trust is comfortable with from a quality point of view;</li> <li>• The Trust submitted its Financial Recovery Plans for year 1 and 2 at the end of April and May 2015. The Trust is on track to firm up CIP ideas into real plans with the aim to achieve 100% of the milestones by the end of July;</li> <li>• The leading Key Performance Indicators (KPIs) that would track vacancy reduction, cost savings and financial 'run rate' have also been developed;</li> <li>• The Trust has achieved circa 50% of CIPs for in year target, leaving circa £36m gap. The Trust has remained at this plateau for the last three weeks and as a result additional controls have been put in place to ensure the challenging 2015/16 target of £86m is delivered;</li> <li>• The Trust has developed a number of operational performance indicators to track operational sustainability. The three key deliverables are the Emergency Department (ED) performance at both DH and PRUH site, and the referral to treatment times (RTT) backlog reductions;</li> <li>• The Trust remains a strong performer in all cancer waiting time target but</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
-------------	----------------	---------------

achieving the 62-day target may be at risk in Q1;

- As part of investing in organisation development and leadership a new Organisational Development (OD) Steering Group has been established and will be meeting on monthly basis;
- Work on the five-year plan is well advanced and a coherent report on choices and options for integrated care workings was discussed in depth at the Board seminar on 17 June 2015;
- The recruitment process for the Chief Executive Office, Executive Director of Workforce, Director of Capital, Estates and Facilities, Medical Director and Director of Corporate Affairs continues;
- Angela Huxham, Director of Workforce & Development retires on 09 July, after six years of service at King's. The Trust welcomes the appointment of Paul Jones as Interim Director of Workforce & Development, effective from 13 July 2015; and
- The Communications and Engagement Steering Group met for the first time in June. The key aim of the group is to develop new strong relationships with the community to tackle health and care challenges.

The Board noted the report highlighted the following points:

- To move off the CIP plateau, the Trust needs to identify key actions areas and develop a plan with good level of prioritisation;
- The key domain that the Trust should look at to get over the plateau are the doctors and nurses numbers, commissioner choices, some transformational activity such as reduction of length of stay;
- The Trust does not need to wait for the 5-year plan to take some of the approaches to improve the health economy;
- To move from transactional stage to transformation phase, the Trust need to scrutinise key issues such as long-term sustainability, configuration of electives and engaging with staff; and
- It was highlighted that as part of cost saving initiative the Trust has chosen the secondment of the breast feeding clinic to the community. This will be discussed with the Commissioners in terms of funding.

The Board thanked Angela Huxham for her enormous contribution to King's and wished her well in her retirement.

## **15/67.2 Consolidated Finance Report (Month 02)**

The Board received the month 02 finance report presented by ST which was discussed at length at the Finance & Performance Committee, held earlier.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
-------------	----------------	---------------

The following key points were noted:

- At the end of month 2, the Trust was on track in terms of year to date budgeted forecast except for an over-spend on certain pay and non-pay budgets;
- The over-spend has been balanced by additional income generated by delivery of some CIPs earlier than expected;
- It has been suggested to produce a monthly financial forecast against the budget to project the CIPs and predict the likely outturn positions at the end of the year;
- Getting the balance right in relation to substantive and agency staff and driving down the vacancy rate as well as reducing the bank and agency usage is another area of key focus for the Trust;
- The number of substantive staff has increased in the past few months but the cost of bank and agency has not reduced as expected. This is as a result of overseas nurses waiting to receive full accreditation prior to starting into their substantive posts. Discussions are ongoing with the Divisions to ensure controls are in place to reduce the bank and agency spend as quickly as possible;
- The Trust was issued a £60m working capital facility earlier this year to maintain its cash position. The Trust is on track on drawing down on its working capital facility;
- The Trust will be working with Monitor in the next two months to refresh the cash position and forecast the drawdowns for the remainder of the year, which is dependent on the Trust's ability to achieve its CIP target;
- Given the current financial pressures, the Trust is currently undertaking a full review of the Critical Care Unit renovation plan to ascertain the right balance between the time of delivery and the ability of the Trust to afford a cash flow if the scheme goes ahead. The outcome of the review will be presented to the Board at its next meeting; and
- It was highlighted that Monitor's restriction on capital expenditure is on those schemes that are contractually committed, essential for health and safety, and any capital scheme of over £250k. Critical Care Unit and Helipad are two major schemes that are already in progress and contractually committed but there are options for the Trust to consider.

### **15/67.3 Performance Report (Month 02)**

The Board received the month 02 performance report presented by JT which was discussed at length at the Finance & Performance Committee held earlier.

The following key points were noted:

- At month 02, the Emergency Department (ED) performance at the Princess Royal University Hospital (PRUH) was 88.3% and 87.6% at the Denmark Hill

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<p>(DH) site;</p> <ul style="list-style-type: none"> <li>• Key issues at the PRUH has improved in the past three months and this has resulted in continued improvement in performance into June and the national target of 95% was achieved for the week-ending 21 June at the PRUH (96.2%) and DH (95.9%);</li> <li>• The ‘One Version of the Truth’ work that McKinsey were commissioned to undertake and look at a whole system review of the emergency pathway in the Bromley Health Economy was completed;</li> <li>• The analysis identifies five areas of key focus to improve the performance of the emergency pathway. This includes redefining PRUH emergency processes;</li> <li>• The analysis also identified that one of the key reason the PRUH struggled to improve ED performance quickly was due to bed occupancy by medically stable for discharge patients;</li> <li>• 14% of patients who stayed over 7 days take up 70% of non-elective beddays. This indicates that the PRUH is being used as a non-emergency hospital with key issues relating to external factors;</li> <li>• The Board noted that reporting of older people is higher in the South East London and there are difficulties in moving patients out into the community;</li> <li>• It was highlighted that recommendations of the “one version of truth” is in its third week of implementation with one of the key improvements being the introduction of a performance matrix across the health providers;</li> <li>• It was suggested that a similar exercises to “one version of truth” could be undertaken by the Trust for the DH site to identify some analysis to inform discussions with the Commissioners in Lambeth and Southwark. However, this may be complex given the population and acuteness of the site;</li> <li>• There has been an increase in the productivity levels at the DH site but mental health and neurosurgery capacity is still a significant issue at DH. The Trust need to work with partners to repatriate patients effectively and relief capacity;</li> <li>• At the end of May, the number of admitted incomplete patients waiting 18+ weeks was 7 over plan but 66 less than the end of April position. The backlog trajectory at the end of June will not be met with the waiting list remaining static during June; and</li> <li>• It was noted that the 52 weeks long wait breaches are mainly due to capacity pressures, pathway delays, emergency consultant leave and an increase in the number of patients needing complex procedures in Neurosurgery.</li> </ul>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
<b>15/67.4</b>	<b>Pay Awards</b>	
	<p>The Board received the 2015/16 pay award report for Trust staff paid on Agenda for Change (AfC), and the Medical &amp; Dental Terms and Conditions of Service.</p> <p>The following key points were noted:</p> <ul style="list-style-type: none"> <li>• The 2015/16 Pay Awards were announced by NHS Employers and became effective from 1st April 2015;</li> <li>• The new redundancy arrangement introduced limits to redundancy schemes with a maximum ceiling depending on length of service. These changes currently apply only to Agenda for Change staff and not to medical staff;</li> <li>• There is an increment freeze for staff on pay point 34 and above for one year only. This may lead to difficulties in retaining senior staff and may lead to an increase in Bank and Agency spend to cover vacancies; and</li> <li>• A new NHS Pension scheme was introduced from 1 April 2015. All new starters will commence on the new scheme and staff in the existing schemes will also be transferred to the new scheme unless they are in the “protected” group.</li> </ul>	
<b>15/68</b>	<b><u>Updates from Board and Council</u></b>	
<b>15/68.1</b>	<b>Education &amp; Workforce Development Committee</b>	
	<p>Apology was received from FB but the Board noted that Education and Workforce Development Committee had met on 05 June 2015.</p>	
<b>15/68.2</b>	<b>Finance &amp; Performance Committee</b>	
	<p>GM reported that the Committee met earlier today and discussed substantive reports on finance, performance and recruitment.</p>	
<b>15/68.3</b>	<b>Strategy Committee</b>	
	<p>SS reported that the Strategy Committee met on 17 July 2015 and had a very useful debate with representatives from the Southwark Clinical Commission Group (CCG) on Healthier South East London. The Key Performance Indicators which may help resolve some of the problems faced by the Trust and the Commissioners were also considered.</p> <p>There was also a Board Seminar following the Strategy Committee, where the Trust’s long term sustainability plans were discussed.</p>	
<b>15/68.4</b>	<b>Council of Governors Activities</b>	
	<p>The Board noted the governors’ activity report where the Nomination Committee met on numerous occasions to discuss the Non-Executive Director’s (NED) appointment.</p>	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	It was highlighted that the Council of Governors will meet on 09 July to approve the recommendation of the Nominations Committee in relation to the appointment of the NED. The Governor's individual activity report was also well received by the Board.	
<b>15/69</b>	<b><u>Improving Quality of Care for Patients</u></b>	
<b>15/69.1</b>	<b>Quarterly Patient Outcomes Report</b>	
	The Board noted and received the quarterly patient outcomes report which was discussed at the Quality and Governance Committee on 13 May 2015	
	<p>The following key points were raised and noted:</p> <ul style="list-style-type: none"> <li>• The Trust is above the national performance level against 19 areas, as its peers in 22 areas and the key area of concern is the hip fracture at the PRUH with higher death rates than expected;</li> <li>• An internal outlier analysis of deaths following fractured neck femur was undertaken. The analysis highlighted concerns in relation to the quality of clinical care;</li> <li>• It was highlighted that the past case note reviews have always indicated issues with miscoding. However, at the PRUH this is not the case and the fracture neck femur is certainly above the expected levels;</li> <li>• The Trust initiated a case note review of the full pathway of care. A review by the Royal College of Orthopedic was also undertaken. The result of this review will be discussed at the next Quality and Governance Committee;</li> <li>• The Royal College of Orthopedic review has been received by the Trust and its recommendations are being implemented. The Trust is also refreshing the consulting staff, increasing the cohort of geriatrician and setting up cohort areas to admit patients directly to the orthopedic ward;</li> <li>• There is some initial evidence that the implementation of these actions have been very successful with only one mortality case of fracture neck femur reported last month;</li> <li>• However, for the period of 12 months until the end of January 2015, the mortality index is still at 139 cases above the expected of 100;</li> <li>• Mortality for the whole Trust is generally beyond the two standard deviation for the fracture neck femur domain and actions have been put in place to improve performance across the Trust;</li> <li>• The Board was reassured that the standardised mortality rate is below the expected level at DH and within the expected range at the PRUH;</li> <li>• The case note review also highlighted in hospital patient fall to be a key issue</li> </ul>	

<b><u>Item</u></b>	<b><u>Subject</u></b>	<b><u>Action</u></b>
	<p>and actions are being implemented to reduce the number of in hospital falls across all the Trust sites; and</p> <ul style="list-style-type: none"> <li>• The Board noted that participation in national audits have improved significantly at the PRUH. This is a positive performance and will provide comparative quality data against peers.</li> </ul> <p>The Board noted the report and highlighted that going forward the Trust would need to discuss with the Commissioners expectations and availability of funding against the outcomes results.</p>	
<b>15/69.2</b>	<b>Monthly Nursing Staff Levels</b>	
	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.	
<b>15/69.3</b>	<b>Nurses Revalidation Reports – Update on Consultation and Trust Plans</b>	
	<p>The Board noted that like medical revalidation, the nursing and midwifery validations is being introduced to maintain standards of practice and identify registrants who are failing to meet professional standards.</p> <p>The Trust has put in place a number of processes such as adjusting the KAD appraisal system to reflect on the requirements and ensure nurses are re-validated.</p> <p>There is also a dissemination task to ensure all nursing staff understand the requirement and collect evidence of their practice on regular basis.</p> <p>The key issue is that group of nursing staff who are in managerial position who may find it difficult to demonstrate against some of the criteria to maintain their registration.</p>	
<b>15/70</b>	<b>FOR INFORMATION</b>	
<b>15/70.1</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>15/70.2</b>	<b>Confirmed Board Committee Minutes</b>	
	The Board noted the confirmed minutes of the Finance & Performance Committee (28/04/2015).	
<b>15/71</b>	<b>ANY OTHER BUSINESS</b>	
	There were no matters of any other business raised for discussion.	
<b>15/72</b>	<b>DATE OF NEXT MEETING</b>	
	Tuesday, 28 July 2015, Dulwich Room, Denmark Hill site.	

