

King's College Hospital

NHS Foundation Trust

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

Minutes of the Meeting of the Board of Directors held at 9:00, 07June 2017 in the Dulwich Meeting Room, Hambleton Wing, Denmark Hill

Members:

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| Lord Kerslake | Trust Chair |
| Sue Slipman | Non-Executive Director, Vice Chair |
| Christopher Stooke | Non-Executive Director |
| Prof. Richard Trembath | Non-Executive Director |
| Prof. Jonathon Cohen | Non-Executive Director |
| Dr Alix Pryde | Non-Executive Director |
| Faith Boardman | Non-Executive Director |
| Nick Moberly | Chief Executive Officer |
| Prof. Julia Wendon | Medical Director |
| Dawn Brodrick | Director of Workforce Development |
| Dr Shelley Dolan | Chief Nurse |
| Jane Farrell | Chief Operating Officer |
| Colin Gentile | Chief Financial Officer |
| Jane Bond - <i>Non-voting Director</i> | Director of Capital Estates & Facilities |
| Alan Goldsman - <i>Non-voting Director</i> | Interim Director of Strategic Development |
| Lisa Hollins - <i>Non-voting Director</i> | Director of Transformation & ICT |

In Attendance:

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| Sao Bui-Van | Director of Communications |
| Heather Morley | Trust Secretary and Head of Corporate Governance |
| Pat Ono | Corporate Governance Officer (Minutes) |
| Jessica Bush | Head of Engagement and Patient Experience |
| Dr Simon Chapman | Joint Lead For Adolescent Medicine |
| Dr Hannah Baynes | Consultant Paediatrician in Paediatrics |
| Anne Hinds – Murray | CQC Relationship Holder |
| Penny Dale | Governor |
| Fiona Clark | Governor |
| Chris North | Lead Governor |
| Craig Jacob | Governor |
| Victoria Silvester | Governor |
| Alan Golosann | KCH |
| Anju Dooralee | Astelias Pharma Limited |
| Tim Killen | Astelias Pharma Limited |
| Jason Roberts | Cymbio Limited |
| Mark Cohen | Cymbio Limited |

Apologies:

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|-------------------|------------------------|
| Prof Ghulam Mufti | Non-Executive Director |
| Erik Nordkamp | Non-Executive Director |

| <u>Item</u> | <u>Subject</u> | <u>Action</u> |
|-------------|--------------------------------|---------------|
| 017/57 | <u>Welcome & Apologies</u> | |

| Item | Subject | Action |
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| | <p>The Trust Chair thanked everyone for attending and especially welcomed Anne Hinds-Murray, Care Quality Commission (CQC) Inspector and Parissa Robinson, La Retraite Catholic Schools for Girls student providing the Patient experience story. She was accompanied by Dr Simon Chapman and Dr Hannah Baynes both Consultants Paediatricians in Kings. The Trust Chair reminded everyone that we remained in a period of Purdah as the election holds tomorrow.</p> <p>The Trust Chair commented on the terrorist incidence at London Bridge and Borough Market. He reported that the Trust was caring for some of the casualties and applauded the work of all clinical and non-clinical staff over the weekend.</p> <p>The Trust Chair reported that the Trust featured on the Today's programme on BBC Radio 4 broadcast last week. The programme highlighted the issues for King's in a very positive way.</p> <p>Apologies for absence were noted for Erik Nordkamp and Professor Ghulam Mufti.</p> | |
| 017/58 | <p><u>Declarations of Interest</u></p> <p>There were no Declarations of Interest made at the meeting.</p> | |
| 017/59 | <p><u>Chair's Action</u></p> <p>The Trust Chair drew members' attention to changes to the Executive Directors. He reported that Trudi Kemp was retiring after several years working for the Trust. The Trust Chair expressed appreciation on behalf of the Trust for her dedication and wished her the very best for the future.</p> <p>The Trust Chair noted that Alan Goldsman was moving from Director of Strategy to Director of Financial Recovery and a vacancy as thus arisen. The Trust Chair confirmed that the Annual Report and Accounts for 2016/2017 were submitted on 31 May 2017.</p> | |
| 017/60 | <p><u>Minutes of the Previous Meeting</u></p> <p>The minutes of the Board Meeting held on 03 May 2017, were approved as a correct record.</p> | |
| 017/61 | <p><u>Matters Arising/Action Tracking</u></p> <p>The Action Tracker was noted and the following update was received:</p> <p>03/05/2017 17/67 Quarterly Patient Safety Report The Chief Nurse reported that this was work in progress and it was important the Trust continues to do an analysis to examine if there was anything that can be done to reduce the pressure ulcers.</p> <p>03/05/2017 17/67 Quarterly Patient Safety Report The Executive Medical Director stated that the Emergency Department (ED) time has dipped and the result for Quarter 4 has increased. It was AGREED to progress this at Quality Assurance and Research Committee</p> | |

| Item | <u>Subject</u> | Action |
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| 017/62 | <u>Chief Executive's Report</u> | |
| | <p>The Board received the Chief Executive's report from Nick Moberly.</p> <p>The following key points were reported and discussed: The Chief Executive Officer reported that the Trust was making progress and ensuring that quality, safety and clinical services are of the highest level. The Trust is preparing for a Care Quality Commission (CQC) visit in the Autumn; a substantial preparation action plan to prepare the organisation is in effect.</p> <p>The Chief Executive advised that the Trust has prepared detailed plans to improve the Emergency Department compliance, underpinning then plan is a lot of work to change the way the Trust operates. The Trust is in the process of bedding down the new organisational structure but there was still a lot to do to make it a fully functional management system.</p> <p>He noted that Staff engagement was a huge priority for the organisation, there is need for effective communication to facilitate a constructive workplace.</p> <p>Financial sustainability is the Trust's goal, to reach this target the Trust prepared a three year financial recovery plan agreed with regulator to transform the Trust into an outstanding and sustainable organisation.</p> <p>There was a query on how the move to join the Brompton might affect other services in the capital. The Chief Executive Officer noted that there was ongoing dialogue with the Brompton on Cardiovascular services in the capital. It was noted that there are great clinical benefit in working together and pooling resources to create a research that works for all.</p> <p>The Director of Transformation and ICT noted the role the IT team had played in addressing the recent Malware attack. The Trust was not affected due to an installed patch that provided enhance anti-virus protection; the team would continue to be vigilant for any future cyber-attacks.</p> <p>The Chief Executive Officer commended the IT team and stated that a longer term IT strategy would be developed. It was AGREED that IT Strategy should be included as a future agenda item for discussion.</p> | |
| | BEST QUALITY OF CARE | |
| 017/63 | <u>Patient Story – Parissa Robinson</u> | |
| | <p>The Board welcomed Parissa Robinson a student at La Retraite Catholic School for Girls.</p> <p>The Chief Nurse advised that this was a joint project between La Retraite School, Health Watch Lambeth and King's focusing on youth-friendly services.</p> <p>reported that she undertook the visit with two other students but they were unable to attend today's meeting due to exams commitments. She delivered feedback on behalf of all.</p> | |

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| | <p>The following points were reported: They had a wonderful experience and all their findings are in the Enter and View documents presented and published on the healthwatch website.</p> <p>They reported that a key positive was the Trust provision of in house school for patient who required long term stay. It was not clear if the support goes beyond GCSE and covers A-Level. They loved the quotes on the walls of the adolescent rooms and felt it had a big impact especially in this challenging time.</p> <p>They reported on areas that could be addressed such as the lack of displayed information relevant to young people in the Teen room. It was suggested that said displays should have more information on Immunisation jabs and sexual health.</p> <p>They noted that the Adolescent room had limited opening hours which was too short, the room décor was full of bright and bold colours that would benefit from a tone down. They suggested the provision of comfortable chairs or sofas which would give young people a homely feel.</p> <p>They commented on the fact that they were shown responses from young people from a survey but the questions were not included in the responses. They suggested that a better way of responding to feedback would be to state “You Said” and “we have done”. This will demonstrate that the feedback was taken seriously, the use of colour coding to highlights project status would be useful.</p> <p>They remarked on the need for better signage towards outpatient services, better food menu signposting.</p> <p>Parissa concluded that it was important for the Trust to write back on receipt of negative feedback so the individual know their opinions are valued. They stated the need to make the quality of care consistent to facilitate positive patient experience.</p> <p>Dr Simon Chapman (King’s Consultant Paediatrician) reported that adolescent health had not been given great support nationally not just in the Trust. He highlighted the difficulties with the rigid cuts off between age groups which made it difficult to decide if the young person should be seen by the Paediatric or by adult services.</p> <p>Dr Chapman explained that they need more focused care, adolescent outreach service and the Trust needs close links with young people via walk in service.</p> <p>The Trust requires a transitional service and provision of good support for young patients as they move from children to adult service. He noted that the Trust has a very good Liver transition service.</p> <p>The Chair thanked Parissa and her team for the recommendations and useful feedback. The Board noted that there were so many positive measures that could be implemented immediately. The Board extended an invitation to Parissa and her team to revisit in a few months to see how the Trust has taken on their recommendation.</p> | |

| <u>Item</u> | <u>Subject</u> | <u>Action</u> |
|-------------|---|---------------|
| 017/64 | CQC Update | S Dolan |
| | <p>The Board urged Parissa and her colleagues to join King's as members and stand for election to become governors. The Board was interested in getting young people to come to work or have a career in Kings. There was suggestion that schools could be approached directly.</p> | |
| | <p>The Board received CQC update from the Chief Nurse.</p> | |
| | <p>The following key points were reported and discussed: The Chief Nurse advised that due to election PURDAH period the Care Quality Commission (CQC) are yet to publish their findings. The Trust was invited to comment on the draft report in December 2016. There are five domains and there needs to be evidence of how services are delivered in all areas.</p> | |
| | <p>The Chief Nurse reported that Well-Led domain has been amended and it now reflects how a Hospital oversees its other sites and subsidiaries.. Thus recognising the link between leadership, culture and good governance. The inspection will cover areas such as Information Governance, Data Security, Technology and End of Life Care.</p> | |
| | <p>There will be further changes to monitoring and inspection cycles, with proposals for a regular scheduled service inspection with one core service inspected from all five domains.</p> | |
| | <p>The Chief Nurse advised that one of the reasons Anne Hinds-Murray was attending today's meeting was to enhance closer working relation between the Trust and the CQC. The review will examine how the Trust is led and the freedom to speak guardian. The Executive Medical Director and the Corporate Medical Director are leading on this.</p> | |
| | <p>The Chief Nurse explained that for those Trust who are improving they had reviews every 2years. While those Trusts with good rating got reviewed every 5 years. The Trust was expecting focused inspection on the five domains. It was suggested and AGREED that every domain should be mapped with individual Leads by the Chief Nurse. It was AGREED that the Chief Nurse would provide an update for every meeting.</p> | S Dolan |
| | <p>It was noted that the vacancy report was not particularly useful in the appendices and the preference was for it to continue to be reported to the Board. It was noted that there are particular areas they appear to have difficulty staffing.</p> | |
| | <p>The Executive Director of Workforce Development explained that they have a hundred hard to fill posts. A resource approach might mean that they act proactively by meeting with their Kent counterpart.</p> | |
| | <p>They are offering more money (salary package) which is making it difficult to recruit to our Trust post and this puts a lot of pressure on the system. The Executive Director explained that once the first hundred posts are filed I then they will look at the next set of posts. They are planning to do two things which are to lobby and to reassure and value the people by building relationships.</p> | |

| <u>Item</u> | <u>Subject</u> | <u>Action</u> |
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| | It was AGREED that this recruitment risk should be included in the Register | D Brodrick |

TOP PRODUCTIVITY

017/65 Performance Report (Month 1)

The Board received the new style Trust's Performance Report for M1 from the Chief Operating Officer. The following key points were reported and discussed.

Accident and Emergency (A&E)

The Chief Operating Officer reported that there were no main changes in terms of admissions but in comparison to the same period, there is a year on year increase. In terms of ED the Trust have seen steady improvement in performance from both the PRUH and Denmark Hill site and the aggregate was 86%. By the end of the month both sites were delivering their site specific targets.

The Chief Operating Officer reported that the PRUH team are embracing new ways of improvement despite ongoing constraint with capacity. The PRUH has developed the ability to effectively manage the discharge of inpatients at the weekend with good recovery on Monday. The positive result was testament to how they were embracing new ways of working. Denmark Hill has made marginal improvement but what would make material difference was more beds and expanding ED equipment and these plans are progressing.

Cancer

The Trust was seeing more performance in terms of cancer it hit 86.1% for the target 62days for first treatment from urgent GP referral. For the Cancer target 62days for first treatment national screening service referral the Trust hit 91.5%. There is indication that the Trust may miss the May target deadline but recovery is expected in June and onwards

Diagnostics

It was reported that there was a slight deterioration in May due to technical hitches with diagnostic equipment but the Trust is looking at a recovery position. In terms of Diagnostics it is running at 1.1 and the Trust was very close to hitting the target.

Referral to Treatment (RTT)

The Trust has increased its level of activity due to the insourcing contract, it is anticipated that there will be continuous improvement over the coming months. The Chief Operations Officer stated there would be a detailed presentation at the Finance and Performance Committee in August and it was **AGREED** a report would be provided in September

J Farrell

SKILLED, CAN DO TEAMS

017/66 Monthly Nurse Staffing Levels Report

The Board received the Monthly Staffing Report from the Chief Nurse (Enc. 5.1). The Chief Nurse reported that there was only slight change but lots of ongoing action.

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| 017/67 | <p>It was noted that there appeared to be too much subjectivity in what people determined was a red flag for example when you have fewer nurses on the ward it could attract a red flag if that was the interpretation rather than taking into account the actual number of patients on the ward.</p> <p>The Chief Nurse reported that they had two successful recruitment campaigns to fill the Frailty ward and the Neurosciences ward. The Director of Communications was instrumental to the success. The Chief Nurse reported a Neuroscience course has been devised to encourage more applicants into nursing training. She commended the Executive Director of Workforce and the Director of Communications for their support and input in the success of the campaign.</p> <p>The Chief Nurse reported they are using a Perfect ward App to undertake audit. She noted how it had increased competition between wards positively as the nurses compete on which ward is doing best as part of audit.</p> <p>It was noted that the Nurses complete the process and within a few hours receive the feedback. This was an example of King's way forward and led by the Director of Transformation of ICT.</p> | |
| | FIRM FOUNDATIONS | |
| 017/ 68 | <p>Sound Finances</p> <p><u>Finance Report (M1)</u></p> | |
| | <p>The Board received Month 1 Finance Report from the Chief Financial Officer.</p> | |
| | <p>The following key points were reported and discussed:</p> | |
| | <p>The Chief Financial Officer reported that there was a pay underspend of £955,000 in month 1. He confirmed there was some detailed ongoing work this week to ascertain why we had a favourable variance. The Trust has devised a three years plans put forward to the regulator.</p> | |
| | <p>The Trust remains on monthly cash draw down from NHSI, a capital funding request for £65m according to plan has been submitted to regulators for their review</p> | |
| | <p>The Chief Financial Officer reported that NHS England has paid the arrears outstanding. The Trust is progressing with budget setting activity for the year.</p> | |
| | <i>Rigorous Governance</i> | |
| | <p>The Board received an update from the Lead Governor and the following points were raised.</p> | |
| | <p>The Lead Governor requested that the Foundation Trust Officer should be adequately resourced to support the work of the governors.</p> | |

| <u>Item</u> | <u>Subject</u> | <u>Action</u> |
|-------------|---|---------------|
| 017/68 | <p>The Lead Governor reported on his attendance at the Kings Health Partnership meeting. He especially highlighted the presentation on Transforming Outcomes and Health Economics Through Imaging (TOHETI) that demonstrated how a simplified pathway can reduce cost as well as creating reassurance for patients. The Lead Governor urged that such best practise is shared as much as possible. The Director of Transformation and ICT reported that she chairs the London Transformation Board and they are exploring how information is shared and plans to take TOHETI forward.</p> <p>The Lead Governor reported an article in the Health Service Journal stating the pressure that is been put on the Trust and the control totals. The suggestion from the article is that the Trust would be put under more pressure following the election. He queried if the Board will challenge this. The Trust Chair responded that they have ideas how this would be addressed.</p> | |
| | FOR INFORMATION | |
| 017/69 | <p>Risk Management Strategy</p> <p>There were no issues raised.</p> | |
| 017/70 | <p>Corporate Risk Register (Q4)</p> <p>There were no issues raised.</p> | |
| 017/71 | <p>Chair & Non-Executive Directors Activities</p> <p>The Board noted the Chair and Non-Executive Directors' Activities report.</p> | |
| 017/72 | <p>Board Committee Minutes</p> <p>The Board noted the Finance and Performance Committee minutes from 25 April 2017.</p> | |
| 017/73 | <p><u>ANY OTHER BUSINESS</u></p> <p>There were no items of any other business raised for discussion.</p> | |
| 017/74 | <p><u>DATE OF NEXT MEETING</u></p> <p>Wednesday 05 July 2017, 09:00-11:30, Dulwich Room, Denmark Hill</p> | |