

AGENDA

Meeting	Council of Governors
Date	Tuesday 20 May 2023
Time	16:30 – 18:00
Location	Board Room, Hambleden Wing, King's College Hospital, Denmark Hill

No.	Item	Purpose	Format	Lead	Time
1.	Standing Items				
	1.1. Welcome and Apologies	FI	Verbal	Chair	16:30
	1.2. Declarations of Interest				
	1.3. Chair's Action				
	1.4. Minutes of Previous Meeting – 28 March 2023	FA	Enc.		
	1.5. Matters Arising / Action Tracker	FR	Enc.		
QUALITY, PERFORMANCE, FINANCE AND PEOPLE					
2.	Report from the Chief Executive	FR	Enc	CEO	16:35
3.	Update on the closure of the Nursery	FR	Verbal	Chief People Officer	
4.	Quality Assurance Framework	FR	Presentation	A/ Chief Nurse/Director of Quality Governance	
5.	Update on issues of interest to Governors <ul style="list-style-type: none"> • Improving communication with patients • Progress on learning from complaints 	FR	Verbal		
GOVERNANCE					
6.	Governor Protocol: FINAL	FD	Enc	A/Director of Corporate Affairs	
7.	Appointment of a Lead Governor	FA	Verbal	A/Dir Director of Corporate Affairs	
8.	Governor involvement and engagement				17:45
	8.1. Governor Engagement and Involvement Activities	FR	Verbal	Lead Governor	
	8.2. Observation of Board Committees	FI	Verbal	Governor Observers	
9.	FOR INFORMATION				
	9.1. Minutes of the Patient Experience and Safety Committee 15 th December 2022	FI	Enc		
10.	Any Other Business	FI	Verbal	Chair	17:55
11.	Date of the next meeting: Tuesday 30 May 2023 in the Dulwich Room, Hambleden Wing, KCH, Denmark Hill.				

Key: *FDA: For Decision/ Approval; FD: For Discussion; FA: For Assurance; FI: For Information*

Charles Alexander	Chairman
Elected: Dr Devendra Singh Banker Tony Benfiled Victoria O'Connor Katie Smith Rashmi Agrawal Emily George Daniel Kelly Ibtisam Adem Deborah Johnston Devon Masarati Billie McPartlan David Tyler Dr Adrian Winbow Fidelia Nimmons Chris Symonds Jane Allberry Lindsay Batty-Smith Angela Buckingham Hilary Entwistle Jacqueline Best-Vassell Aisling Considine Dr Akash Deep Erika Grobler Christy Oziegbe Tunde Jokosenumi	Bromley Bromley Bromley Bromley Lambeth Lambeth Lambeth Lambeth Patient Patient Patient Patient Patient Patient Southwark Southwark Southwark Southwark SEL System Staff - Allied Health Professionals, Scientific & Technical Staff - Medical and Dentistry Staff – Nurses and Midwives Staff - Medical and Dentistry Staff – Administration, Clerical & Management
Nominated/Partnership Organisations: Cllr. Jim Dickson Cllr Robert Evans Prof Dame Anne Marie Rafferty Ian Rothwell	Lambeth Council Bromley Council King's College London South London & Maudsley NHS Foundation Trust
In attendance: Dame Christine Beasley Prof Yvonne Doyle Nicholas Campbell-Watts Professor Jon Cohen Akhter Mateen Prof Richard Trembath Steve Weiner Prof Clive Kay Jonathan Lofthouse Julie Lowe Dr Leonie Penna Mark Preston Clare Williams Lorcan Woods Beverley Bryant Chris Rolfe Siobhan Coldwell Zowie Loizou	Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Chief Executive Officer Site Chief Executive, PRUH & South Sites Site Chief Executive, Denmark Hill Chief Medical Officer Chief People Officer Chief Nurse & Executive Director of Midwifery Chief Finance Officer Chief Digital Information Officer Director of Communications Acting Director of Corporate Affairs Corporate Governance Officer

Council of Governors Meeting – Public Session

Draft Minutes of the Council of Governors (Public Session) meeting held on

Tuesday 28 March at 16:30 – 18:00hrs

The meeting was held in the Boardroom, Hambleton Wing, Denmark Hill

Present:

Chair

Charles Alexander

Trust Chair

Elected Governors

Jane Allberry

Southwark (Lead Governor)

Tony Benfield

Bromley

Angela Buckingham

Southwark

Aisling Considine

Staff – Allied Health Professionals, Scientific and Technical

Emily George

Lambeth

Tunde Jokosenumi

Staff – Admin and Clerical

Devon Masarati

Patient

Fidelia Nimmons

Patient

Katie Smith

Bromley

Lindsey Batty-Smith

Southwark

Jacqueline Best-Vassell

SEL (System)

Billie McPartlan

Patient

Chris Symonds

Patient

Nominated/Partnership Organisations:

Cllr Jim Dickson

Lambeth Council

Cllr Robert Evans

Bromley Council

Phidelma Lisowska

On behalf of Staff Side Governor

In Attendance:

Prof Jon Cohen

Non-Executive Director

Nicholas Campbell Watts

Chief Executive Officer

Akhter Mateen

Non-Executive Director

Dame Christine Beasley

Professor Clive Kay

Jonathan Lofthouse

Site Chief Executive – PRUH and South Sites

Dr Leonie Penna

Chief Medical Officer

Mark Preston

Chief People Officer

Clare Williams

Chief Nurse and Director of Midwifery

Lorcan Woods

Chief Finance Officer

Chris Rolfe

Director of Communications

Siobhan Coldwell

Acting Director of Corporate Affairs

Simon O'Donoghue

Head of Equalities, Diversity and Inclusion

Zowie Loizou

Corporate Governance Officer (minutes)

Apologies:

Deborah Johnston

Patient

Erika Groblar

Staff Governor – Nursing and Midwifery

Hilary Entwistle

Southwark

Dr Devandar Singh Banker

Bromley

Victoria O'Connor

Bromley

Rashmi Agrawal

Lambeth

David Tyler

Patient

Dr Adrian Winbow

Patient

Ibtisam Adem

Lambeth

Dr Akash Deep

Staff Governor – Medical and Dental

Christy Oziegbe

Staff Governor Nursing and Midwifery

Beverley Bryant

Chief Digital Information Officer

Prof Daniel Kelly

Lambeth

Dr Dianne Aiktken	SEL CCG
Prof Dame Anne Marie Rafferty	King's College London
Ian Rothwell	SLAM
Julie Lowe	Site Chief Executive, Denmark Hill
Professor Yvonne Doyle	Non-Executive Director
Professor Richard Trembath	Non-Executive Director
Steve Weiner	Non-Executive Director

Item	Subject
	Standing Items
23/01	<p>Welcome and Apologies</p> <p>The Chair welcomed Governors/attendees. Newly appointed Governors made introductions. Apologies for absence were noted as above.</p>
23/02	<p>Declarations of Interest</p> <p>There were no declarations of interests.</p>
23/03	<p>Chair's Action</p> <p>There were no Chair's actions since the last meeting.</p>
23/04	<p>Minutes of the Previous Meeting</p> <p>The minutes of the meeting held on 8 December 2022 were agreed as an accurate record of the meeting.</p>
23/05	<p>Matters Arising/Action Tracker</p> <p>The Council noted the progress being made to implement actions from previous meetings. Items from the previous meeting were added to the action tracker.</p>
23/06	<p>Report from the Chief Executive</p> <p>The Chief Executive introduced his report and noted the last Council of Governors (CoG) meeting had commenced pre-Christmas. The Trust continued to experience pressures with on-going challenges both elective and non-elective such as operational demand and activity, additionally intensified by high levels of seasonal illnesses including COVID-19.</p> <p>Industrial action had impacted the Trust by a scale the NHS had not seen in past years and the CEO acknowledged the hard work, time and dedication of all staff involved in preparation and readiness involving industrial action. The Trust had coped well with the Royal College of Nursing (RCN) industrial action and the CEO extended gratitude toward colleagues by keeping patients safe.</p> <p>Elective Recovery and Emergency Care</p> <p>The Site CEO-PRUH briefed the Council on the annual elective recovery and emergency plan for February 2023. The Trust diagnostic position showed just above the national standard at 1.79%, versus the national standard below 1%.</p> <p>The Elective Recovery position showed a strong overall elective performance when benchmarked against England.</p> <p>The cancer two week wait at KCH continued to perform well, ahead of the national standard with an improved compliance at 95.5%. Additionally the Trust had performed well against the 28 day faster diagnosis target with 77% compliance versus the national target of 75%.</p> <p>The delivery of treatment of patients within 62 days was non-compliant. The Council noted the Trust was still the second highest performing system in England.</p>

Long list waiting patients showed a decrease in patients waiting over two years. The Trust planned reduction for 78 week patient list was not achievable because of recent industrial action, particularly the junior doctor strikes.

The Council was informed patients waiting between 65-78 weeks were patients ranging across the board of Care Groups. The Trust had achieved reduction of patients waiting above 65 weeks. The Council was assured each Care Group had worked with operational leaders in completion of their improvement trajectories.

Strike days had shown a loss of approximately 5000 episodes of care. Consultants had a process to re-book patient appointments in order of priority after delayed or cancelled treatment due to strike action.

The Council agreed to present future figures in numbers as opposed to percentage for transparency purposes.

In terms of Emergency Care, both sites experienced significant challenges due to the high volume of patient flow in the emergency department (ED). The Trust had made improvements with support from London Region on ambulance turnaround and offload delays with a number of initiatives implemented.

Finance

The Chief Finance Officer reported to the Council at the end of January the Trust had reported a deficit of £38m at the end of February 2022 with a £20m planned deficit for the end of the financial year.

The Council was informed of the national funds being made available which would help with the remaining planned £20m deficit. COVID-19 was a significant factor with 10% of the Trust bed base occupied with COVID-19 patients. The South East London (SEL) as a whole would see the Trust deliver their balanced financial position at the end of the financial year. The Trust was on track to deliver the capital investment programme of £70m.

Quality and Safety

The Chief Medical Officer provided the Council with an overview on patient safety. The Trust was making steady headway for closure of red and amber Serious Incidents (SIs). Data for January 2023 showed 12 new SIs declared, 15 SIs closed and 156 amber SIs opened with 188 amber SIs closed. A trajectory for closure of all amber SIs by autumn 2023.

The implementation of the new national Patient Safety Incident Response Framework (PSIRF), which involved patients and families in managing incidents was being progressed. The Acting Chief Nurse and Executive Director of Midwifery informed the Council on the progress made in patient experience. The Friends of King's Charity shop had recently opened at the Denmark Hill (DH) site. The PALs team had been working in reducing the backlog around complaints.

The Council noted the outcomes of the various CQC inspections that had taken place during 2022, noting that following the maternity inspection in July 2022, the Trust took immediate action in relation to the issues raised. This included establishing a Quality Assurance Programme. The Council will be provided with a fuller overview of the programme at its June meeting.

The newly appointed governors was informed of a video released at the end of last year called "Two Lives" of staff experiencing violence and aggression and now formed part of the training for staff and for the SEL. The new governors were encouraged to watch this powerful video.

Recruitment and Retention

The Chief People Officer summarised the industrial action that had affected the Trust over recent months.

The Trust vacancy rate had reduced over a 3-4 month period to 12%. Turnover rates had reduced and by end of February 2023 had reduced below 15%. Following the programme of work to deliver Bank services in-house the Trust had partnered up with Patchwork to deliver technology platforms to support staff using the Trust Bank.

The King's Ambassador Scheme had been launched in March supporting the Trust's work relating to values and culture at King's.

Active Bystander training had been undertaken with 1,500 staff attending, 472 staff members completed Skills Boosters on demand online training and there had been an overall increase in the number of staff joining our staff networks. The Trust has 271 apprentices in place and is aiming for 500 by the end of 2024.

The Chief Executive informed the Council that the Apollo launch Go-live date for Guy's and St Thomas (GSTT) would not be ready for 27 April 2023 with a joint decision reached on 10 February 2023 for an collaborative Go-Live date with both Trusts on Thursday 5 October 2023. Two operational leads had been appointed full time for both Trusts and Beverley Bryant (Chief Digital Information Officer) would support the digital and programming platform. The Council discussed the risks of a joint go-live, noting that it had been done successfully elsewhere.

The Council noted South London & the Maudesly NHSFT had confirmed that Mapother House, where the King's staff Nursery is based, will be closed by the end of December 2023, as SLAM are redeveloping their site. The Trust has explored a number of options, including working with other providers and finding a new site but none as yet have been considered viable options. Further options are being explored, but the Trust had to make a formal announcement of the closure of the Mapother House Nursery so parents/cares would have sufficient time to make alternative childcare arrangements.

The Council noted the report.

23/07 2022 Staff Survey Results

The Chief People Officer informed the Council on the significant increase in the response rate for the National Staff Survey 2022 with 46% in contrast to 38% in 2021. All Care Groups and corporate teams had received their 2022 survey results to develop their people priorities for 2023.

"We are always learning" and "We are a team" scored higher in 2022 compared to 2021. "We are compassionate and Inclusive", "We each have a voice that counts", "We are safe and healthy", Staff engagement" and "Morale" remained the same.

"We are recognised and rewarded" and "flexible working" scored lower than in 2021. A Trust wide piece of work was being undertaken on flexible working to address the issues that had been raised in the survey.

23/08 Learning from Serious Incidents and Complaints

The Chief Nurse and Director of Midwifery informed the Council that action plan meetings was held every Friday involving emerging key themes from SIs to be communicated with Clinical Governance Consultants and learning shared with individual Care Groups. A paper highlighting thematic reviews would be presented at the next Quality Committee (QC) meeting thereafter brought to the Council meeting for information.

The Trust's existing incident reporting system will be replaced with a new platform (InPhase) which provided more functionality and analytics. The new system will go live in April 2023 to support the PSIRF delivery plan.

It was highlighted a significant improvement in regard to complaints management had been implemented.

The Council noted the update and welcomed the progress being made.

23/09 Operational Plan 2024/25

The Site CEO-PRUH provided the Council with a summary of the key elements of the Trust's 2023/24 Operational Plan. The Trust activity targets reflect national targets and SEL/ICB required expectations. The Trust activity volumes have been predicated on previous years' and reflect the elective recovery achieved within the last 12 months and expectations for further improvements for 2023/2024.

Operational targets and standards for the Trust anticipate achieving 114% of 2019/20 baseline activity. Operational plans for autumn 2023 anticipate lower activity levels as the Trust prepared for readiness with the EPIC/Apollo Go-live implementation.

The Chief Finance Officer outlined the Trust's financial plan for 2023/24, noting it is expected to be a difficult financial year nationally. Over the last two years, the Trust had expanded its workforce by 10%, but productivity remains lower than it was in 2019/20. A productivity target had been set for the NHS, and the Trust's efficiency target is 4.5% reduction in total cost, equivalent to £61m. Staff sickness was 13% higher in comparison to 2020, a contributory factor in regard to operational impact at the Trust. The Council was assured no plans were in place to pause recruitment.

The current projected deficit was currently £60m for King's College Hospital (KCH). The Trust envisage finalising the operational and financial plan by end of the financial year. Pay inflation had been funded on the assumption of a 2.8% increase, but this does not include offer currently been considered by the RCN and other unions. Non-pay general inflation has been running at 10% during the first quartile of 2023..

GOVERNANCE

23/10 Election of new governors 2023

The Acting Director of Corporate Affairs updated the Council on the results for the governor elections which had taken place in December 2022. The new governors had been congratulated and an extended congratulations for governors re-elected.

The Council noted the election results in the report. All relevant checks had now been completed. All governors are appointed for an initial three year term. Internal and external communication was ongoing and additionally a feature in the next edition of Inside King's Magazine in April 2023.

It was noted the Govern well Induction Day would be taking place, online, on 2 May. Two additional governor sessions have been set up to provide an overview of King's Finance, Quality and King's Governance.

The Council noted going forward other formal meetings will take place with the governors on a regular basis.

The Council suggested photos of all governors to be displayed within King's Hospital.

Action: Charles Alexander.

23/11 DRAFT Governor Protocol

The Acting Director of Corporate Affairs advised the Council to differ due to time constraints. A separate session to be arranged.

23/12 Appointment of a Lead Governor

The Council thanks Jane Allberry for all her dedication, hard work and positive changes implemented during her term as the Lead Governor. The Lead Governor position was now open for applicants.

The Council noted the report and agreed the process and timeline for the election of a new Lead Governor.

23/13 Appointment of a NED

The Council noted the process and timescale to fill the vacancy left by Sue Slipman, The Lead Governor noted the Council had asked the previous Chair to give consideration to inviting applications from candidates with lived experience of disability.

23/14 Governor involvement and engagement

- Governor Engagement and Involvement Activities

Governors continued to be engaged and encouraged governors to continue Trust and patient engagement.

- Observation of Board Committees

Hilary Entwistle observed the Quality People and Performance Committee in February 2023. Board Committee.

23/15 FOR INFORMATION

- Minutes of the Governor Strategy Committee 15 December 2022 were noted.

23/16 Any Other Business

23/17 Date of the next meeting:

Tuesday 30 May 2023 in the Dulwich Room, Hambleden Wing, KCH, Denmark Hill.

CoG ACTION TRACKER - Updated 24 May 2023					
Date / Item Ref	Action	Lead	Due Date	Status	Update
ACTIONS - DUE					
28/03/23 1/5	PSIRF – Governor briefing session	Chief Medical Officer	30/05/2023	Ongoing	Ongoing. Implementation steering group created, programme being developed and a briefing session will be delivered for Governors during the summer 2023.
28/03/23 1/5	Recruitment Plan	Chief People Officer	30/05/2023	Ongoing	Ongoing. Plan being developed, will be presented at KE and Board before being shared with Governors.
28/03/23 6	Election of new governors The Committee suggested photos of all governors to be displayed within King's Hospital.	Chair	30/05/2023	Ongoing	New Action.
ACTIONS - PENDING					
09/12/21 21/44-6	Issues Raised by Governors: Patient Experience Strategy The Patient Experience Strategy has now been developed and will be going to the Executive Team for review in the near future. Once this has been finalised, it will come to the Council of Governors.	Chief Nurse	Jun-23	PENDING	The patient experience strategy is not being progressed as had been envisaged with this action was agreed. The patient experience team has a number of priorities for the year and this will be brought to PESC.
10/03/22 22/07-6	Trust Updates – The Board and NED role in championing disability The Chair would discuss the opportunities to act as champions and support disability and other protected characteristics, with the Executives and NEDs.	Chair	Jun-23	PENDING	The Chairs of the Governor PESC committee have agreed to devote their June meeting to this topic, so that governors have a better understanding of what the Trust does in this area.
18/10/22 22/19	Integrated Care Board/Integrated Care System Consideration needs to be given as to how the Governors can engage with the ICB/ICS.	Acting Director of Corporate Affairs	Jun-23	PENDING	

Meeting:	Council of Governors	Date of meeting:	30 May 2023
Report title:	Report from the Chief Executive	Item:	2.
Author:	Siobhan Coldwell, Acting Director of Corporate Affairs	Enclosure:	
Executive sponsor:	Professor Clive Kay, Chief Executive Officer		
Report history:	n/a		

Purpose of the report

This paper outlines the key developments and occurrences since the last Board meeting held on 9th March 2023 that the Chief Executive wishes to discuss with the Board of Directors.

Board/ Committee action required (please tick)

Decision/ Approval		Discussion	✓	Assurance	✓	Information	✓
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The Board is asked to note the contents of the report.

Executive summary

The paper covers quality and safety, finance and performance as well as key workforce activities.

Strategy

Link to the Trust's BOLD strategy		Link to Well-Led criteria	
✓	Brilliant People: <i>We attract, retain and develop passionate and talented people, creating an environment where they can thrive</i>	✓	Leadership, capacity and capability
✓	Outstanding Care: <i>We deliver excellent health outcomes for our patients and they always feel safe, care for and listened to</i>	✓	Vision and strategy
✓	Leaders in Research, Innovation and Education: <i>We continue to develop and deliver world-class research, innovation and education</i>	✓	Culture of high quality, sustainable care
✓	Diversity, Equality and Inclusion at the heart of everything we do: <i>We proudly champion diversity and inclusion, and act decisively to deliver more equitable experience and outcomes for patients and our people</i>	✓	Clear responsibilities, roles and accountability
		✓	Effective processes, managing risk and performance
		✓	Accurate data/ information
		✓	Engagement of public, staff, external partners
			Robust systems for learning, continuous improvement and innovation

	Person- centred	Sustainability	
	Digitally-enabled	Team King's	

Key implications	
Strategic risk - Link to Board Assurance Framework	The report outlines how the Trust is responding to a number of strategic risks in the BAF including: <ul style="list-style-type: none"> - Recruitment and retention - Culture and values - Financial sustainability - High quality care - Demand and capacity - Partnership working.
Legal/ regulatory compliance	n/a
Quality impact	The paper addresses a number of clinical issues facing the Foundation Trust.
Equality impact	The Board of Directors should note the activity in relation to promoting equality and diversity within the Foundation Trust.
Financial	The paper summarises the latest Foundation Trust financial position.
Comms & Engagement	n/a
Committee that will provide relevant oversight	
n/a	

King's College Hospital NHS Foundation Trust:

Report from the Chief Executive Officer

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3. Operational Performance
4. South East London Acute Provider Collaborative
5. Financial Performance (Month 12)
6. Workforce Update
7. Equality, Diversity and Inclusion
8. Apollo Programme
9. Board Committee Meetings
10. Good News Stories

Appendix 1 – Consultant Appointments

1 Introduction

- 1.1 This paper outlines the key developments and occurrences since the last Board meeting on 9th March 2023 that I, the Chief Executive Officer (CEO), wish to discuss with the Board of Directors.
- 1.2 The NHS continues to be challenged and King's College Hospital NHS Foundation Trust ("the Trust") is no different. There have been a number of strikes by the BMA junior doctors and members of the Royal College of Nursing since the Board of Directors last met.
- 1.3 I am supportive of people's right to strike, and I am grateful to everyone who is supporting our strike preparations, which could easily create divisions, but despite obvious challenges, I sense a real coming together of teams, which is positive to see.
- 1.4 It is unfortunate that the Trust had to cancel much of its elective activity whilst the junior doctors took strike action. Our teams are working hard to reschedule that activity, so that patients receive their treatment as quickly as possible.

2 Patient Safety, Quality Governance, Preventing Future Deaths and Patient Experience

Patient Safety

- 2.1 The Trust has stood up a Patient Safety Incident Response Framework (PSIRF) implementation steering group to oversee our transition to the new national patient safety strategy in October 2023. We successfully deployed our Learning from Patient Safety Events (LFPSE) compliant incident reporting system (InPhase) at the start of April 2023 in line with our PSIRF delivery plan. The system is currently being optimised to support improved analysis and reporting as we develop our Patient Safety Incident Response Plan (PSIRP). The first draft of this plan was presented to the steering group in April 2023 and we expect to be in a position to finalise this and share with ICB colleagues in the summer.
- 2.2 The 22 comprehensive thematic analyses commissioned in 2022 were completed in March 2023. The learning from these has been synthesised into our draft PSIRP which will enable us to prioritise key system safety actions to address this year.
- 2.3 We are making sustained progress in the reduction of late investigations and have a number of task and finish groups in place to support compassionate communication with patients and families who are due to receive significantly delayed reports.
- 2.4 In April 2023 the Trust reported two Never Events, both of which related to retained swabs in Maternity. An urgent safety plan has been put in place to ensure safety whilst the investigations are completed.

Quality Governance

- 2.5 The Trust is overseeing progress against the action plans to address the findings from the recent CQC inspections through the Quality Assurance Group.
- 2.6 The Trust has approved a new Quality Assurance Framework (QAF) which is being piloted in May ahead of a formal launch in June 2023. The QAF has three key elements: Executive Quality Reviews; Quality Audits; and *Quality at a Glance* dashboards. The QAF brings together existing elements of quality control and quality assurance and

enhances them through use of peer review and regular executive oversight. Under the new model each care group will be visited twice a year by an Executive Director and once a year by a Non-Executive Director.

Elective Delivery

- 3.1 As part of the national programme to restore elective waiting times to pre Covid positions all Trusts had been set the target to eliminate waits of more than 78 weeks from referral to treatment (RTT). Regrettably, disruption to elective activity resulting from both Nursing and Junior Doctor industrial action prevented achievement of full elimination by 31st of March 2023, but the Trust did achieve an outturn position of just 13 patients who were waiting more than 78 weeks. This places the Trust among the best performing organisations nationally for this metric, particularly when comparing organisations of equal size and complexity of clinical case load to King's.
- 3.2 Subject to the impact of long term continuation of industrial action the Trust has robust plans in place to both eliminate the remaining 78 week waits and improve further to a maximum of 65 week waits by the end of the 2023/24 financial year.
- 3.3 Industrial action also disrupted diagnostic services and resulted in a small increase in the percentage of patients waiting more than 6 weeks to 2.27% in March compared to 1.79% at the end of the previous month. Despite this small deterioration the Trust remains within the top ten providers nationally, and has the best access times for Trusts of similar size and complexity.
- 3.4 As above, the reduction of elective capacity also impacted on cancer services. The national target to ensure patients wait less than 2 weeks to be seen following a referral from a GP with suspected malignancy was missed for the first time in the preceding 12 months in March with compliance of 90.8% versus target of 95%. Derogation to support cancer admissions did however allow the Trust to maintain treatment within 62 days of referral at pre industrial action levels with 69.8% of patients meeting the standard in March.

Urgent & Emergency Care

- 3.5 Strike action has also impacted on front door emergency care, generating capacity gaps and variation in demand. Despite these disruptions our performance against the 4-hour Emergency Care Standard for patients to be admitted, transferred or discharged within 4 hours of arrival at an Emergency Department (ED) did not deteriorate in month. The March position of 60.77% remained almost unchanged on the February position of 60.75%.
- 3.6 A number of critical work streams are in place to drive improvement, including the launch at Denmark Hill of multi-specialty Same Day Emergency Care (SDEC) to reduce zero length of stay emergency admissions and deliver improvements in time to clinician assessment across Ambulatory Majors Assessment (AMA) and SDEC for non-overnight patient cohorts. A continuous flow model was also implemented to support enhanced ambulance handovers and admitted patient pathway management.
- 3.7 On the PRUH site we have launched a 'Star Chamber' approach to provide continuous review of improvement workstreams relating to use of the Summary Department Indicator Table (SEDIT) dashboard information to complement diagnosis; use of 'Criteria to Reside' data within daily board round processes; and long length of stay reviews with Transformation support. In addition, ED continues its collaboration

between the Trust and One Bromley partners to establish a synchronised discharge process. The SDEC footprint continues to drive down the unplanned care conversion rate.

4. Acute Provider Collaborative (APC)

- 4.1. The APC Committee in Common met on 17 March, chaired by Mike Bell, the chair of Lewisham & Greenwich NHS Trust. Much of the discussion focused on the projected out-turn financial and operational performance for 2022/23 and operational planning for 2023/24, including confirming the commitment to adopt an aligned approach as far as possible to Trust submissions to the ICB plan, as well as to discussions with the ICB particularly on financial plans, given the very challenging financial position for this year and next year. The Committee noted the significant progress made towards meeting the target to have zero patients waiting more than 78 weeks (78+ww) for treatment by the of March 2023 and the plans for mutual aid to ensure that all patients waiting more than 65 weeks have been treated the end of March 2024.
- 4.2. The differential activity targets for each trust compared to 2019/2020 activity levels were noted and the Committee further noted the considerable level of ambition represented by the 2023/24 draft plans, across activity, finance and workforce, as well as the risks to achievement of these plans that will need to be managed and mitigated. The Committee also received an update on the Community Diagnostic Centre (CDC) programme, and approved the APC Conflict of Interests policy in principle subject to some minor amendments.
- 4.3. Following the Committee meeting, the final out-turn for 78+ww breaches at end March 2023 was 209 across the APC, representing a very significant achievement by Trust operational and clinical teams working closely with APC colleagues, from a starting point in April 2022 of having over 46,000 patients at risk of breaching the 78+ww standard – particularly in the context of the challenges of ongoing industrial action, significant pressure on urgent and emergency care pathways, with knock-on impacts on planned care, and staffing challenges.
- 4.4. The previous board report noted that the governance structure for the APC adopted in May 2022 was being reviewed in order to identify what is working well and what can be improved. As a result, there have been some changes to senior APC governance meetings, which have been put in place with effect from 1 April. This includes the establishment of a new Strategy & Operations Executive Advisory Group, and an enhanced role for the APC Project Management Office in co-ordinating and communicating across the different groups.
- 4.5. The APC is making progress in strengthening the programme management approach, establishing work plans with milestones and KPIs, and associated reporting arrangements, across the APC's clinical networks, cross-cutting programmes and the Executive Advisory Groups – with the approach tailored to the specific needs of the different groups and programmes.
- 4.6. In September 2022, the APC secured over £2m funding for KCH and the SEL system from the NHSE National Intensive Support team, as part of their support to KCH to exit SOF4. Separate tranches of funding have been provided for Urgent and Emergency Care (UEC) (KCH and system) and for elective and surgical care. The majority of the workstreams have been overseen by the Acute Provider Collaborative and have been established in support of key priorities, including non-admitted care, theatres improvement and investment in the establishment and operation of system hubs. This includes recruiting a hub manager for the Queen Mary Sidcup (QMS) hub;

and a senior hub manager to support the development of the planned high volume surgical hub at University Hospital Lewisham (UHL) (discussed in the next section)

- 4.7. The biggest single tranche of funding has supported an increase in pre-operative assessment capacity at all three trusts, using a variety of approaches. Around 1,000 patients have already benefited from this capacity increase.
- 4.8. The APC secured Targeted Investment Funding ('TIF') in July 2022 for three prioritised capital schemes (KCH Critical Care Unit completion, completion of the Evelina Children's Day Surgery Centre, and creation of a high volume surgical hub at UHL providing system capacity for Urology and ENT. Supporting effective system planning for the Lewisham hub is a key priority for the APC as a whole. An additional funding opportunity from Health Education England (HEE) was used to fund a ten week piece of consultancy by theatre specialists Four Eyes Insight. This work is now nearing completion, and has significantly advanced clinical and operational engagement with the hub plans across South East London. The focus has been on developing integrated activity, finance and workforce plans, supporting teams to work through the various options for operational performance, patient flows, associated costs and financial flows, and innovative workforce models to support system working.
- 4.9. Following discussions with anaesthetic clinical leaders across SEL, a South East London Anaesthetic Network is going to be set up by the APC to provide a forum for collective discussion and action on a number of key areas, e.g. improving pre-operative assessment.
- 4.10. The third APC bulletin is currently in press, with an audience of over 400 operational, clinical and executive colleagues across the three Trusts and beyond. The APC Executive have also recently approved the adoption of a new visual identity for the APC, mirroring the SEL ICB identity.

5. Financial Performance (Month 12)

- 5.1. The Trust has recorded a deficit for of 2022-23 of £19.9m in line with the mid-year forecast position at SOF 4 exit, after excluding allowable transactions. During the year the Trust has also achieved a close to break-even position on its capital expenditure, delivering a capital programme of £76.7m. The external audit of the 2022-23 has commenced and is due to report before the end of June.
- 5.2. The Trust has agreed a planned deficit of £49m for 2023/24, which includes a Cost Improvement Target of £72m (c.5% of income). There is no doubt this will be challenging and in order to provide the Board with assurance, I have established a revised Efficiency Board that will meet monthly to monitor delivery of the cost improvement programme.

6. Workforce Update

Industrial Action

- 6.1. The British Medical Association (BMA) junior doctor strikes were held from 13-15 March and 11-15 April. These have had significant impact on the delivery of service with elective work and outpatient appointments being cancelled. The BMA, as yet, have not yet announced further strike dates for the junior doctors.
- 6.2. Picket lines for the BMA strikes were in place at both Denmark Hill and the PRUH.

- 6.3. The BMA are balloting consultant members about industrial action and this ballot opens on 15 May 2023.
- 6.4. The Royal College of Nursing, (RCN), announced further strike dates as their members voted not to accept the government's pay offer. The RCN strike took place from 8.00pm on Sunday 30 April and finish at 8.00pm on Monday 1st May.
- 6.5. UNISON members have accepted the government pay offer, as have the Chartered Society of Physiotherapists, (CSP), and GMB members. Unite members rejected the offer.
- 6.6. The Trust has mobilised our Emergency Planning response to ensure that the impact on patients are minimised.

Recruitment and Retention

- 6.7. The Trust's vacancy rate has reduced to 12.48% in March 2023 from 14.47% in March 2022. The Trust headcount has increased by 671 over the same period. The Trust has seen reductions in vacancies across most professional groups over the past year; nursing and midwifery (decreased from 13.89% to 12.36%); medical & dental (decreased from 11.36% to 10.09%); allied health professionals (decreased from 15.08% to 11.64%); admin and clerical (decreased from 17.55% to 16.7%). King's continues to undertake extensive local, national and international recruitment.
- 6.8. The Trust has seen a reduction in the turnover rate which is now at 14.61%. This is a significant improvement from July 2022, when the turnover rate was 15.27%.
- 6.9. A new campaign has been launched to support recruitment at PRUH and South Sites, given the different challenges faced in recruiting staff there as opposed to Denmark Hill. The campaign recognises the appeal of living and working in Bromley but also taps into the King's College Hospital NHS Foundation Trust branding. The PRUH is launching a careers internet page that will exist as a subset of the King's recruitment site for healthcare workers and young people specifically looking to work in Bromley. The launch of this specific site will also include a social media video, careers video and life stories of PRUH staff. In addition, the PRUH is working with the local care partnership, One Bromley, to actively launch a similar recruitment venture as a healthcare system and is one of the first to do so in the NHS.

Board Changes

- 6.10. Bernadette Thompson OBE has been appointed as King's new Director of Equality, Diversity and Inclusion. Bernadette brings a wealth of experience to this role, having spent over 20 years working in a number of Government departments and agencies, before joining Barts in 2021. For five years, Bernadette co-chaired the Race to the Top G6/7 Network, which helps Black, Asian and Minority Ethnic (BAME) Civil Service colleagues thrive and progress, and address BAME under-representation in Government. Bernadette is also a Different Woman Ambassador, advocating for a more inclusive gender agenda, and amplifying the voices for women of colour. Most recently, Bernadette received an OBE for services to diversity and inclusion. Bernadette is due to start at King's towards the end of the summer.

Mapother House Staff Nursery

- 6.11. King's has given formal notification to parents/carers and staff of the closure of the Mapother House staff nursery. The nursery is being closed as South London and the Maudsley NHSFT are redeveloping their site at which both the King's and SLAM nurseries are located.
- 6.12 The Trust is continuing to explore all opportunities available to support childcare provision including options for a new site. We are working with parents/carers in this regard and we are in contact with our local MPs and potential commercial partners to review what alternatives are possible.
- 6.13 The Mapother House nursery is due to close on 29 December 2023.

Temporary Staffing

- 6.14 The in-house Temporary Staffing team has been located in new premises at Denmark Hill with staff also working at PRUH and South Sites. The Trust's joint working with Patchwork is currently focussed on medical and dental staff whilst development for other staff groups continues. A benefits realisation review will take place during the summer in relation to the technology platform provided by Patchwork.

National Staff Survey 2022

- 6.15 All Care Groups and Corporate teams have received their 2022 staff survey results for them to develop their people priorities for 2023. This process is underway and will conclude in early May 2023.

Learning and Organisational Development

- 6.16 The Trust continues to embed its King's Leaders programmes. The third cohort of our new 'Essentials' programme has commenced and cohort two of our 'Inspire' programme starts in May 2023. We have also delivered three cohorts of our coaching skills programme with a fourth cohort planned for June 2023.
- 6.17 In April we started a programme of work to ensure our core skills training is aligned to the National Core Skills Training Framework. The first phase includes aligning refresher periods with a second phase taking place in July 2023 to ensure audiences are reviewed for each topic.
- 6.18 We launched our new King's Work Experience Scheme with a pilot of 10 students placed at DH and the PRUH. This is the start of an ambitious new scheme which has been established to continue to promote King's as a local employer and to increase engagement with local schools and colleges. The next cohort of the scheme takes place in the summer.
- 6.19 The King's Ambassadors programme, our new staff advocacy scheme, was launched in March. The Ambassadors support our work relating to values and culture at King's.
- 6.20 The 2023 Appraisal season for all non-medical/dental staff opened on 1 April. We are providing weekly manager training and have published a number of resources to support staff to have high quality appraisal conversations. The season concludes at the end of July 2023.
- 6.21 The first King's 'Love Admin' week was held in April aimed at supporting and developing our administrative professional's network. The week included a number of

CPD training sessions as well as networking opportunities for administrative and clerical staff across the Trust.

- 6.22 In May 2023 we are holding our next Brilliant People Week which will see the launch of a range of initiatives identified in our People and Culture Plan. These include our manager fundamentals programme, a new 360 feedback tool and our values and engagement toolkits.

7. Equality, Diversity and Inclusion

- 7.1. We published our first [Annual Report](#), marking one year on from the publication of the *Roadmap to Inclusion*. The report sets out our successes over the past twelve months and our progress against the EDI projects we have committed to across our BOLD ambitions. Additionally, during this period, we were shortlisted for awards in several categories at the *Inspiring Workplaces Awards* and for a *Commitment to the Local Community* award at the *Better Society Awards*, the outcome for both will be confirmed in May.
- 7.2. **We have delivered several well attended events for our staff during this period that celebrated the diversity of King's workforce, including:**
- International Women's Day celebration event and stalls at both PRUH and DH had 190 staff in attendance, alongside a co-facilitated 'Gender Pay Gap' webinar - attended by forty staff.
 - In celebration of the Sikh holiday Vaisakhi, over 200 fruit bowls were distributed to teams across the Denmark Hill, PRUH and Orpington sites.
 - To mark LGBT+ History Month, we held a series of webinars with an array of special guests who spoke about a variety of subjects, from HIV History to LGBT rights in schools. Over 130 attendees came to at least one of these webinars.
- 7.3. **We continued to deliver and introduce a range of training and mentoring programmes to build understanding of EDI concepts among King's staff, including:**
- Cultural Intelligence (CQ) training to Liver and Critical Care staff, with 56 and 23 attending respectively.
 - Eight Active Bystander Training sessions with >170 staff in attendance. We also launched 'Active Bystander Extra', which is fully booked until October 2023.
 - Seven *'Inclusive Recruitment'* training sessions, which were attended by >150 staff.
 - *'Transgender Complaint Awareness'* training delivered to thirty outpatient staff at PRUH and South Sites.
- 7.4. **We continued to strengthen and grow our staff diversity networks**
- Total staff diversity network membership is now 2,394 (an increase of 120 since March).
 - Introduced remuneration via King's Bank for our Network Chairs and Co-Chairs which was well received.
 - Chair elections for both Inter Faith & Belief Network and the Women's Network were completed.
 - We supported the BAME Network's Re-branding Launch – as they move to the name REACH Network – hosted at Denmark Hill by the current Chairs and Steering Group members and supported by members of the EDI Team.
- 7.5. **We launched our Reasonable Adjustments Programme, which will ensure that staff with disabilities are fully supported to carry out their roles**

- We launched our Reasonable Adjustments Plan Framework at an event attended by 127 staff and received 100% positive feedback.
- Consultation commenced on the development of a Reasonable Adjustments Policy, which we will publish in July.
- We also commenced work on the creation of a reasonable adjustments training package to be launched in Q3.

7.6. We continued our work to ensure equity in access, experience and outcome through our trust wide programme to tackle health inequalities.

- Two Health Inequalities Showcase events took place in the Boardrooms of PRUH and Denmark Hill. [An accompanying brochure](#) was developed for the events, which details thirteen projects being delivered by Care Groups, aimed at reducing disparities in access, experience and outcome. Both events were introduced by the respective Site CEOs. Both Boardrooms were at capacity with over 25 attending the PRUH event and more than 55 attending the DH event.
- The 'Supporting Trans and Non-Binary Patients' guidance was submitted to and approved by King's Executive. The guidance follows the staff policy that was published in 2022 and is the product of eighteen months of consultation with staff, patients, charities and a range of other internal and external stakeholders. This is the first such guidance published by the Trust and we are currently working with ICS colleagues to share the document as an example of best practice with other local providers.

7.7. We continued to develop and deliver our new approach to community engagement

- We continued to pilot our new model for community engagement through our health inequalities programme. Our local partners, Centric Community Research, delivered joint training between our staff and community researchers who are participating in the programme. We also recruited two 'Community Champions' to each of our three programme working groups, where they will now provide a community perspective in meeting discussions.

7.8. Next Steps

- Publication of the new Reasonable Adjustment policy
- Launch of the 'Supporting Trans and Non-Binary' patient guidance
- Development of 'phase 2' of the Trust Diversity Dashboard
- Publication of Equality Delivery System (EDS) 2 mandatory report and introduction of new reporting structure, EDS2022
- Introduction of 'Calibre' positive action programme for staff with disabilities

8. Apollo Programme

- 8.1. As previously reported in the March 2023 Chief Executive report to this Board, the Apollo Joint Oversight Committee took the decision, in February, to delay the GSTT go-live which was scheduled to launch on 27th April 2023. As a result, King's and GSTT will now both go-live, and at the same time, on the 5th October, together with our Pathology partners Synnovis. Detailed planning towards this new go-live date and a revised governance framework is being established to ensure that both Trusts continue to work closely together to achieve a successful joint go-live later this year.
- 8.2. Despite the delay and work involved in resetting the programme, the Apollo team continues to make steady progress towards the new go-live date. As summary of key achievements since the last trust Board is as follows:

- **Programme management:** Additional support (Deloitte) has been on-boarded to provide programme management support to the programme and across a number of workstreams. Embedding within existing teams, they have focused on resetting the programme's governance, aligning reporting processes with Epic's (Apollo) reporting, developing a new status report and defining a clear critical path.
 - **Programme Governance:** A review of programme governance has been undertaken and approved by the Apollo Joint Oversight Committee.
 - **System build:** The Workflow and Content Build status is currently 98% complete.
 - **Training:** In response to the Joint Go-Live approach, a new training strategy has been developed where staff will receive basic training via a series of eLearning courses, reinforced through self-directed exercises in the playground environment and followed up by mandatory face to face sessions. Every member of staff will still need to complete their proficiency assessment and login lab before gaining system access.
 - **Go-Live Logistics:** The command centre operating model for both GSTT and KCH has been agreed.
 - **Technical Readiness:** The Technical Dress Rehearsal (TDR) pilot on 03 Feb 23 at GSTT was successfully completed. The team are working towards starting full TDR at GSTT on 15 May 23 and KCH on 01 Jul 23, which is in line with the programme's critical path.
 - **Interfaces:** The final scope of interfaces (joining IT systems together) was approved by the Apollo Joint Programme Board on the 18th April 2023 and build is progressing.
 - **Testing:** Application Testing and Integrated End User Testing were both completed on 7th April and 20th April respectively. Integrated testing is 100% complete for pass 1 and 97% complete for pass 2 with only 3 scripts outstanding.
 - **Reporting:** A revised programme plan for the reporting stream of work has been agreed and additional Project Management support and technical support has been added to the team to support delivery of this significant area of risk for the programme.
- 8.3. The Apollo programme, working closely with our partner, Epic, has a significant amount of work to do between now and the 5th October 2023. There are a number of actions programmed for completion in May 2023 which will give the joint programme a very good overview of progress to go-live.

9. **Board Committee Meetings since the last Board of Directors Meeting (8th Dec 2023)**

Quality Committee	20 th Apr 2023
Finance and Commercial Committee	20 th Apr 2023
Audit Committee	27 th Apr 2023
Strategy, Research and Partnerships Committee	27 th Apr 2023
Council of Governors	28 th Mar 2023
Governor Patient Safety and Experience Committee	28 th Mar 2022
Governor Strategy Committee	16 th Mar 2023

10. **Good News Stories**

- 10.1. **Spring edition of Inside King's published:** The latest edition of Inside King's features the emotional story of Tulip, who shares her experience of pregnancy loss, and the support she received from bereavement midwives at King's. There is also an update about Epic, our new electronic health record system, and what it means for staff and patients, as well as an article about the Hospital@Home service at the PRUH, which is enabling young people across Bromley to be treated in their homes rather than at hospital.
- 10.2. **Senior Nurse at King's receives Senior Research Leadership Programme Award:** John Smith, Lead Nurse for Anaesthetics, Critical Care, Emergency Medicine and Trauma at the Trust, has been awarded a fully-funded scholarship from the National Institute of Health and Care Research to join their senior research leadership programme
- 10.3. **King's Preceptorship programme awarded Quality Mark:** The Trust has become the first Trust in England to be awarded the National Preceptorship Interim Quality Mark. The Quality Mark is the national gold standard for preceptorships, and was created in October 2022 when NHS England introduced the new national Preceptorship framework for Nursing, which NHS Trusts now use to benchmark themselves against.
- 10.4. **ITV News: ITV's Jason and Clara: In Memory of Maudie 'The reason I made a programme about sepsis':** In a documentary focusing on the tragic death of his two-year-old daughter from sepsis, the actor Jason Watkins visited King's to meet with Professor Akash Deep, who runs training programmes to teach health professionals at all levels how to identify the condition. The film also featured King's consultants Dr Trisha Radia and Dr Nia Williams as they ran simulation training at King's for staff to help upskill colleagues in spotting the signs of sepsis.
- 10.5. **Lambeth GP Food Co-op celebrates 10-year anniversary:** On Thursday 30 March, the Lambeth GP Food Co-op celebrated its 10-year anniversary, and seventh at Jennie Lee House at King's College Hospital. The garden at Jennie Lee House, which opened in 2016, is designed to support local patients with long-term health conditions, by teaching them how to grow food and, by doing so, improve their health and wellbeing.
- 10.6. **BBC News: How the World Transplant Games gave Watford man a post-op goal:** Seven years after a kidney and liver transplant at King's, Andy Taylor is heading to the World Transplant Games. Andy praised the care he received at King's back in 2016, and encouraged others to join the organ donor register.
- 10.7. **Health Service Journal – King's recognised as one of best performing Trusts for elective care:** In a HSJ article about elective recovery and performance targets for 2023/24, King's was referenced as one of the best performing Trusts during the past year. The article included a statement from Clive Kay, Chief Executive, in which he attributed the strong performance last year to the extraordinary efforts of staff, plus 'new co-ordinated ways of working, more effective use of pre-operative and theatre capacity, and a real focus on maximising day-case and inpatient theatre segregation'.

Appendix 1 – Consultant Appointments

AAC Date	Name of Post	Appointee	Post Type New / Replacement	Start Date
02/03/2023	Consultant in Restorative Dentistry	Dr Shirin Shahr Baf	New	TBC
08/03/2023	Consultant Gastroenterology, Interest in IBD	Dr Polychronis Pavlidis	New	TBC
13/03/2023	Consultant Medical Microbiology	Dr Jonathan Youngs	New	TBC
16/03/2023	Consultant Diagnostic Neuroradiologist	Dr Jay Patel	New	TBC
22/03/2023	Consultant In Radiology with a Special Interest In Musculoskeletal And Trauma Imaging	Dr Frederick Charles L Barber Dr Jugal Narendra Patel	Replacement	TBC TBC
23/03/2023	Consultant in Genito-Urinary & HIV Medicine	Dr Harriet Anne Le Voir	Replacement	TBC
	Consultant in Sexual Health & HIV Medicine	Dr Larissa Victoria Mulka	Replacement	TBC
31/03/2023	Consultant Haematologist, Interest in Thrombosis & Haemostatis	Dr Micky Tsui	Replacement	TBC
15/09/2022	Consultant Radiologist (Hepatobiliary Imaging & Intervention)	Dr Matthew John Seager	New	06/03/2023
25/08/2022	Consultant Haematologist with an Interest in Lymphoid Malignancies	Dr Emil Arjun Kumar	New	06/03/2023
28/11/2022	Consultant Gastroenterologist - Interest in Nutri & Video Capsule	Ms Dominique Clement	New	27/03/2023
Locum Consultant	Locum Consultant in Acute Care Radiology with Special Interest	Dr Pooja Subrahmanya Hegde	Replacement	06/03/2023

Locum Consultant	Locum Acute Medicine Consultant	Mr Shams ur Rehman	Replacement	06/03/2023
Locum Consultant	Locum Consultant Neurologist	Dr Rhia Ghosh	Replacement	13/03/2023
Locum Consultant	Locum Consultant in Nuclear Medicine	Dr Richard Halsey	New	24/03/2023
Locum Consultant	Locum Consultant Neonatologist	Dr Fahad Muhamed Shareef Arattu Thodika	Replacement	27/03/2023
Locum Consultant	Locum Consultant Paediatrician with an interest in Haematology/ Oncology	Dr Katherine Helen Quinan	Replacement	06/03/2023
Locum Consultant	Locum Consultant in Palliative Care	Dr Rebecca Grace Darge	New	06/03/2023

PROTOCOL FOR GOVERNORS WHO WISH TO RAISE ISSUES WITH THE TRUST

ISSUE	ROUTE
<p>Seek advice about individual complaints/requests from individuals about individual patient care</p> <p><i>* See explainer at the end of this document for the difference between PALS and complaints</i></p>	<p>Issue to be referred to the relevant ward or department (details available on the Trust website).</p> <p>Or:</p> <p>Issue to be referred to Patient Advice and Liaison Service (PALS) or Complaints:</p> <p>PALS Denmark Hill kch-tr.palsdh@nhs.net 020 3299 3601</p> <p>PRUH Kch-tr.palspruh@nhs.net 01689 863252</p> <p>Complaints: 020 3299 3209 Kch-tr.complaints@nhs.net</p>
Membership queries	<p>Email kch-tr.members@nhs.net</p>
General issues	<p>Email the Foundation Trust Office: Kch-tr.fto@nhs.net</p> <p>The FTO will:</p> <ul style="list-style-type: none"> - Acknowledge response within 2 working days and outline what steps will be taken to address the issue. - Endeavour to provide a full response within 10 working days. If this is not possible, an explanation will be provided, with a new deadline.

ISSUE	ROUTE
<p>Questions for the Board of Directors (or individual Board Members)</p>	<p>Option 1: Email the Foundation Trust Office: Kch-tr.fto@nhs.net</p> <p>The FTO will:</p> <ul style="list-style-type: none"> - Acknowledge response within 2 working days and outline what steps will be taken to address the issue. - Endeavour to provide a full response within 10 working days. If this is not possible, an explanation will be provided, with a new deadline. - If the issue is for an individual board member, the FTO will forward the question to them, cc'ing the governor that has raised the concern. <p>Option 2: Email the Chair of the Trust or relevant Committee Chair (cc the Foundation Trust Office)</p> <p>Option 3: Use the "Meet the NED/COG" sessions to raise issues of interest to the Governors with the NEDs.</p> <p>Option 4: If the Governors wish to submit a question to a formal Board meeting Email the Trust Secretary (cc the FTO) Siobhan.coldwell@nhs.net</p>
<p>Questions from staff</p> <p>NB: This likely to be most relevant to staff governors:</p>	<p>If there are specific issues relating to an individuals, options include:</p> <ul style="list-style-type: none"> - Staff Side - Freedom to Speak Up Guardian - Guardian of Safe Working - Seek advice from the Health and Safety Team - Log issues via InPhase (previously DATIX) - Talk to a relevant senior manager <p>If there are general issues to raise:</p> <ul style="list-style-type: none"> - Discuss with the Chair of the Council of Governors - Raise a question with the Board of Directors (via the FTO).

Patient Advice and Liaison Service (PALS)

PALS offers support, information and assistance to patients, relatives and visitors.

They provide help with accessing information about the hospital's services or more general health information. They will help resolve problems that patients/visitors/relatives have not been able to sort out staff on a ward or in a clinic. They listen to views on how we can improve our services, and offer opportunities for people to get involved in how they develop. They can help finding interpreters, signers, and other support for patients who need extra help using our services. For example, our Safeguarding Adults team helps patients who have a learning disability. They can also support patients/carers/relatives/visitors in making a complaint either directly to the Trust or they provide information about independent organisations that can help support complainants with a complaint.

Complaints

Whilst the Trust aspires to provide treatment of the highest standard, there may be circumstances where patients or their relatives are unhappy with the treatment and want to let us know. Any complaint will be investigated in line with the Trust's complaints policy.

Patient Experience & Safety Governor Committee

Minutes of the meeting held on Thursday 15 December 2022 at 09:30 - 11:00
Virtual meeting via MS Teams

Present:

Billie McPartlan	Patient Governor (Committee Chair)
Jane Allberry	Public Southwark Governor
Lindsay Batty-Smith	Public Southwark Governor
Devendar Singh Banker	Public Bromley Southwark
Nicholas Campbell-Watts	Non-Executive Director
Jane Clark	Public Bromley Governor
Hilary Entwistle	Public Southwark Governor
Ericka Grobler	Staff Governor, Nursing
Deborah Johnston	Patient Governor
Tunde Jokosenumi	Staff Governor, Admin, Clerical & Management
Rashmi Kumar	Public Lambeth
Devon Masarati	Patient Governor
Tony McPartlan	Public Bromley Governor
David Tyler	Patient Governor (part meeting)

In Attendance:

Sara Harris	Head of Corporate Governance (Minutes)
Patricia Mecinska	Assistant Director of Patient Experience
Kudzai Mika	Head of Quality Governance
Roisin Mulvaney	Director of Quality Governance

Apologies:

Angela Buckingham	Public Southwark Governor
Jane Clark	Public Bromley Governor
Prof Jon Cohen	Non-Executive Director
Siobhan Coldwell	Acting Director of Corporate Affairs

Item Subject

21/79 Welcome, Introductions and Apologies

The Chair welcomed all in attendance and noted the above apologies.

21/80 Declarations of Interest

No interests were declared.

21/81 Minutes of the previous meeting held on 13 October 2022

The minutes of the previous meeting were approved as an accurate reflection of the meeting.

The Committee commented on the late circulation and insufficient time to read the bundle, which was due to the shortage of staff in the Corporate Governance Office. Temporary additional support would be in place by the New Year to provide secretariat support.

21/82 Matters Arising / Action Tracker

The Committee reviewed the action tracker noting the following verbal updates:

20/10 - CQC Mock Inspections: This action was pending due to a wider review of the quality assurance framework, as noted on the tracker. **On-going action.**

21/21 - Nutrition and Hydration: Erica Grobler confirmed she would be chairing the group in the New Year. The Committee noted that the governance framework had been under review, hence the delayed progression. **The Nutrition strategy document to be circulated and itemised for the next meeting. Propose to close this action.**

21/62 - Joint Programme for Patient, Carer, and Public Involvement in Covid-19 Recovery: Patricia Mecinska informed the Committee the findings of the programme had been launched at an event led by colleagues at GSTT and with a number of stakeholders involved in the presentations. The presentation would be circulated by Patricia Mecinska. **Propose to close this action.**

21/63 - Outpatient Pharmacy: Patricia Mecinska updated the Committee that patients continued to report very poor experiences. Estates were considering relocating the outpatient pharmacy closer to the site and if there was patient involvement the Committee would be informed to ensure patients were shaping the service to ensure it worked for all. **On-going action.**

QUALITY, SAFETY AND RISK

21/83 Integrated Quality Report

The Committee was provided with key highlights of the Integrated Quality Report by the Director of Quality Governance:

- **KLOE:** Identifying a number of metrics using the CQC Key Lines Of Enquiry (KLOE) to identifying areas for improvement. The Trust's position was stable and the harm caused by incidents remained below 2%, which whilst still a concern, was in keeping with the national benchmarks.
 - Thematic review have been completed on a large number of the overdue incidents and the challenge now is to ensure that this is feedback to patients in a meaningful way.
 - Capturing the learning from excellence and King's stars and utilising it as a system for reporting incidents and capturing good practise.
- **Never Events:** There were two never events declared in October 2022. There was an incident of feeding through a misplaced nasogastric tube in one of the neuro wards. The tube itself was misplaced into the lungs. The testing of the tube had been done and the pH was correct for people to start using the tube.
- Work was underway with other comparable organisations to see if for certain groups of patients there was a need to change the threshold whereby a patient needs to have an X-ray, to ensure the pathway was correct for those patients.

- The second never event was a retained swab in maternity. It was an accounting issue between two different sets of checklists. An external review was underway to ensure there are no gaps in the pathway.
- A trajectory to get all duty of candour phase 3 letters completed by June 2023 had been set.
- **Maternity:** There was a death in maternity in October. HSIB, the external safety body for the maternity incidents are investigating and the case had been referred to the Coroner with no particular care issues identified currently.
- **Serious Incidents (SIs):** Emerging themes and insights coming through SIs would shape the focus and the improvement required. Themes being reviewed are mental health, safety, medication, and safe procedures.
- **MEG Audits:** There are nine quality audit systems each clinical division needs to complete monthly. The results help us to understand risks in individuals wards, care groups and sites
- **Communication:** A quality governance team for each site would be briefed on key Trust wide issues to then brief their teams so that information is cascaded to all relevant staff.

The Committee **noted** the report and due to time constraints were unable to discuss in depth any specific items from the report.

21/84 **Quality Account Priorities Update**

The Committee was provided with an update of the Quality Account Priorities by the Head of Quality Governance:

- **The deteriorating patients' quality account priority:** The Trust would not be able to achieve one of the objectives, which was the Code 10 pathway for mental health response. This is due to resource provision. However, this is being reviewed and we hope to re-commence next year.
- The Committee were advised that the remaining priorities were on track.
- The Committee discussed having a Patient Governor representative on the Quality Priority Group.

The Committee agreed for the quality priorities to be discussed at a separate meeting at the Quality Priority Group and not at the next Patient Experience & Safety Governor Committee.

Action: Roisin Mulvaney / Kudzai Mika

The Committee **noted** the report and due to time constraints were unable to discuss in depth any specific items from the report.

PATIENT EXPERIENCE

21/85 **Patient Experience – BOLD**

The Committee was provided with key highlights from the presentation by the Assistant Director of Patient Experience:

Following the meeting of the Patient Experience Committee and subsequent conversation with the strategy team, a decision was made for the Trust not to develop a separate patient experience strategy, but rather to articulate the objectives and deliverables to support the implementation of King's College Hospital's strategy 'to be BOLD'.

The report presented to the Committee outlined proposed vision statements and key performance indicators against strategic objective assigned to the patient experience function. These have been developed through engagement with Heads of Services and the Acting Chief Nurse & Director of

Midwifery. The proposed long-term deliverables had been considered by the Patient Experience Committee.

In line with the BOLD strategy, key thematic areas identified and being led on:

1. Co-production.
2. Hydration and nutrition.
3. Delivery of the patient entertainment portal.
4. Improving our sources of feedback.
5. Accessibility and volunteering.

The KPIs for the 2026 have been identified and aligned with the existing Trust strategy.

1. Co-production

- Co-production at the Trust would become the way things are accomplished at the Trust and to have a meaningful partnership with our patients and communities at every stage of the service delivery. By working together to transform performance and in terms of measurement of success.
- The Committee noted that a number of the identified KPIs had baseline information and the others were still being worked through to ensure the Trust was being ambitious in its achievements.

The Committee agreed that the purpose of the indicator for the first year would be established to provide a form of measurement and share the findings with the Committee.

Action: Patricia Mecinska

2. Hydration and Nutrition

- The Committee noted that from the patient feedback, patient experience, and the friends and family test, many patients are unaware of the food choices available to them. The Trust had been partnering with Medeiros and Compass Group (the providers) who have an extensive range of menu options (gluten free, soft pureed foods and other cultural foods).
- Apollo is the name for an ambitious programme to introduce Epic (a leading electronic patient records system) across the community and at the Trust. Epic is due to be launched in April 2023 and will transform the way that the Trust works by replacing historic IT systems and paper records.
- A cohort of 60 volunteers had been trained and were supporting patients with feeding. The Committee noted that the catering contract was not due to be renewed until 2027, however, the Trust would begin a tendering exercise in 2026. Other areas being reviewed was the water cooler, food vending machines in the End of Life Care (EOLC) wards in line with the Vital 5, Healthy eating classes cooking classes, and some other innovative projects that we are considering.
- The food provision people would initially start EOLC and then extend to carers or people who have complex needs and proceed to make it equitable to all population groups.
- A penalty for contractors for underperformance and the proposition of a Ward manual would be made clear to patients and staff.

3. Patient Entertainment Portal

- The Committee were informed about the successful implementation of stage one of the patient entertainment portal with the launch of the app and various devices (for those patients who did not have access to a smartphone or tablet).

- The next stage was delivering reliable ultra-fibre Wi-Fi which would result in extensive estate renovations and installing fast charging USB points. The Committee noted that 300,000 hours of patient entertainment was used since launch in March 2022. This data was based on information provided by Wi-Fi Spark (who own the system) and the Volunteering team who supported the roll out of devices.
- 4. We ask, we listen and we do**
- The Trust was endorsing their commitment to not only listening, but asking and doing. The ambition was to be one of the top five performing Trusts nationally.
 - Re-branding the whole delivery of Complaints, Patient Advice and Liaison Service (PALs) and Friend and Family Test (FFTs). The number of FFT responses, although improved in certain areas, was not at the level where it ought to be. The objective is to reach out to patient groups and communities to encourage them to share feedback, in confidence without any adverse concerns in relation to their pathways.
 - The Committee noted in terms of patient survey feedback the Trust was at 35% in the Quality Commission survey. Equality and diversity data from the CQC service confirmed that the majority of respondents were white British.
 - A framework in the NHS specifically designed for people with learning disabilities is in the pipeline.
 - The Trust's commitment to becoming a learning organisation with a band from staff to participate in quality improvement.
 - A new complaints standards and a patient safety incident response framework had been implemented.

The Committee agreed that a detailed plan with step by step guidance and focus on the involvement of patients, how that data is effectively utilised; not just within safety incidents, but across the broad range of data sources for the Committee to feedback at the next meeting.

Action: Patricia Mecinska

5. Improve accessibility for all

- All information is co-produced with patients, staff and communities and be available in formats that patients can engage with and understand.
- To include not only physical accessibility to services but communicate with patients, in other formats such as Braille on hospital signage.
- Patient Led Assessment of Care Environment (PLACE) and use PLACE as a driver for improvement to the care environment. The Committee noted the Trust currently did not have a governance framework around PLACE and one would be developed and presented to the Patient Experience Committee in due course.
- Training staff how to operate the induction loop system for patients and in addition ensuring 80% of patient-facing-staff completed the disability awareness training and were able to use tools to communicate such as the British Sign Language (BSL) and Makaton (common vocabulary and words that are used in everyday language).
- Better at understanding equality and diversity of patients to ensure the service is delivered in a way that works for the patient and their needs.
- Improved communication and eliminating unconscious bias. The Committee noted there had been an excellent up-take of this course by staff.
- The Trust had trained 60 Volunteers and offered employment. The ambition was for the Trust to be a place of their choosing. The Trust to develop the first authorised qualification

in preparation for its Volunteers and evaluate the impact the Volunteers had on patients and staff.

The Committee was requested to provide feedback to Patricia Mecinska by the 13 January 2023.

Action: All Committee Members

The Committee **noted** the report.

GOVERNOR FEEDBACK

21/86 Feedback from Governors on Activities - All

Due to time constraints this item was not discussed.

21/87 Quality, People & Performance Committee – Governor Observer Summary

Due to time constraints this item was not discussed.

21/88 Any Other Business

There were no other business discussed.

21/89 Date of next meeting

TBC