

**Minutes of the Board of Directors meeting, held in public,
via teleconference on Tuesday 26 January 2021**

Present: Baroness Morgan of Huyton, Chair
Dr Luc Bardin, Non-Executive Director & Senior Independent Director
Mr Mark Batten, Non-Executive Director
Mr Robert Craig, Director of Development & Partnerships
Mr Simon Friend, Non-Executive Director & Deputy Chair
Dr Richard Grocott-Mason, Interim CEO
Professor Bernard Keavney, Non-Executive Director
Ms Joy Godden, Director of Nursing & Clinical Governance
Mr Richard Guest, Chief Financial Officer
Ms Janet Hogben, Non-Executive Director
Mr Nicholas Hunt, Director of Service Development
Professor Peter Hutton, Non-Executive Director
Dr Mark Mason, Medical Director
Ms Jan McGuinness, Chief Operating Officer
Mr Ian Playford, Non-Executive Director

In Attendance: Mr Sam Armstrong, Trust Secretary (minutes)
Ms Lis Allen, Director of Human Resources
Mr Robert Bell, Chief Executive (on leave)
Dr Rishi Das-Gupta, Chief Innovation & Technology Officer
Mr Piers McCleery, Director of Strategy & Corporate Affairs
Mr David Shrimpton, Private Patients – Managing Director
Ms Jo Thomas, Director of Communications & Public Affairs

Observing: Ms Penny Agent, Director of Allied Clinical Sciences
Mr Aydan Bilal, Associate Director of Service Development
Mr Ross Ellis, Hospital Director RBH
Ms Julia Gregory, member of the public
Ms Sharon Ibrahim, Head of Assurance
Ms Katherine Kamola, CQC Inspector
Rt Hon Michael Mates, Lead Governor
Mr Chris Robbins, member of the public
Ms Derval Russell, Hospital Director HH
Ms Truda Scriven, incoming interim Board Secretary

1. **Notice of meeting, quorum and apologies**

Notice of the meeting was confirmed, and the meeting was quorate.

There was an apology received from Dr Javed Khan, Non-Executive Director.

2. **Welcome**

The Chair opened the meeting at 11.30am and welcomed all present and in attendance.

3. **Declarations of interest**

There were no declarations made.

4. **Minutes of the previous meeting held on 9 December 2020, and Action Tracker**

The minutes of the previous meeting were approved as a correct record.

4.1 **Action Tracker**

The Board agreed that there were no outstanding actions or matters arising.

5. **Chief Executive's Report**

In turning to the item, the Chair congratulated Dr Richard Grocott-Mason on his appointment as the Managing Director of the RBH Clinical Group, with effect from 1st February 2021.

The interim Chief Executive provided a verbal update.

Covid-19 pandemic update

It was noted that the community infection rate had started to decrease, as had Covid-19 related admissions, however there was still a large number of Covid-19 positive inpatients across London. The Trust was close to its "super-surge" critical care limit, which was not expected to decrease soon, and was putting staff at both hospitals under unrelenting pressure.

Since 20th December the Trust had received circa 120 of the sickest Covid-19 patients needing critical care and/or ECMO. At any one time, the Trust had up to 96 critical care beds available, with 93 being opened and staffed. Trust staff were being redeployed to achieve this. There were currently 82 ICU beds occupied and circa two-thirds were Covid-19 positive patients, and there were currently 28 patients receiving ECMO care, which was the highest number of ECMO patients at the Trust at any time during the pandemic.

The Trust had been able to divide hospital sections between patients with Covid-19, those that may have it and those – as best as can be determined – who were without Covid-19, thus enabling both Trust hospital sites to continue to deliver urgent cardiac and non-Covid-19 respiratory care for both adults and children. The Trust also continued to deliver urgent cancer surgery at HH and RBH with the Royal Marsden NHS Foundation Trust.

The Trust had supported other NHS organisations and colleagues. Trust respiratory consultants had helped people in their homes and at Hillingdon Hospitals NHS Foundation Trust (HHFT). Trust physiotherapists had also assisted HHFT. Trust pharmacists had assisted colleagues at King's College Hospital NHS Foundation Trust. RBHT was providing a West London cardiology hub service as it had done in the first wave of the pandemic. It acted as a cardiology hub for non-Covid-19 paediatric, cardiology and respiratory activities. It was expected that cardiac surgery activity would increase in the coming weeks.

It was acknowledged that Trust staff had been under great pressure, however they had responded with extraordinary determination to the challenges of the pandemic, including to requests to defer leave or work in unfamiliar areas of the

Trust, where they were most needed. The Trust was providing a variety of well-being support for its staff. Staff absence levels during the pandemic had fluctuated between 5% - 7%, some of which was compounded with related issues, such as home-schooling needs for children. The Board was advised that staff would need to recuperate both physically and emotionally before the Trust could return to normal, with increased demand from the backlog caused by the pandemic. In response to a question, it was reported that resignation rates were not necessarily higher than normal, although some had cited the Covid-19 experience as a reason for leaving. It was thought that the attrition rate on staff from the pandemic would not be evident until some months from now.

Vaccinations update

Covid-19 vaccinations had been rolled out to staff since early January 2021 and to date over 3000 members of Trust staff had received the Pfizer vaccine. The Trust was aware of some anxiety over the timing of the second dose of the vaccine. The Board noted that the decision to delay the second dose was a national one made on advice from the Joint Committee on Vaccination and Immunisation in the interests of helping a greater number of people sooner, and all of the NHS was bound by this decision. In response to a question, it was reported that the Trust did not yet have data on staff who had refused the vaccine, however this was being collected; the Trust had asked staff to 'opt in' by registering to receive the vaccine. In response to a question, it was clarified that the Trust cannot force staff to take any vaccinations. It was added that lateral flow tests for frontline Trust staff were still being conducted twice a week.

Clinical quality update

It was noted that the Trust had continued to maintain safe staffing levels, despite the challenges of the pandemic, and in the context of the unprecedented demand. The Trust was ensuring infection prevention and control protocols were in place and maintained pathways relative to the risks involved.

Hospital acquired Covid-19 infection remained relatively low and the Trust was actively monitoring this and responded swiftly to mitigate any risks. The internal track and trace process was working well, and supporting swift and thorough outbreak management when required.

Supporting ethical decision-making group

Professor Bernard Keavney provided an update. It was noted that the Group had been meeting monthly over the summer. It was now meeting weekly and would also meet urgently in response to any need.

Since its inception, the Group had developed; the membership now included more non-clinical staff, and the terms of reference had been updated. The Group did not instruct clinicians how to act, but worked to support their deliberations, and decisions were made by consensus. It was sensitive to cultural and religious aspects in its discussions.

Merger update

It was reported that the corporate transaction for the merger between the Trust and GSTT was in order and ready to be executed on 1st February 2021, as planned. The Trust had been informed that its membership of the Imperial AHSC would lapse, however the Trust was working to develop an MoU to maintain involvement in the Imperial AHSC in the future. The Board was reminded that, as part of GSTT, RB&H would be part of King's Health Partners, which was also an AHSC.

The Board noted the report.

6. **Financial Performance Report**

The Chief Financial Officer presented the finance report.

It was noted that the in-month deficit was £100k against a planned deficit of £2.3m. The in-month favourable variance was driven by the release of a non-recurrent gain on the Trust's H1 drug accrual and by a further reduction in the Trust's private patient services bad debt provision.

The year-to-date deficit was £3m against a planned deficit of £7.3m, however, there remained a risk that some Top-Up funding would be reclaimed; this would result in the Trust's month-nine position being broadly on plan. The Board noted the financial risks and that the Trust's cash position remained healthy.

The Board noted the report.

6.1 **Finance Committee Report**

Mr Mark Batten, Chair of the Finance Committee, provided a verbal report.

It was noted that at the recent meeting on 25th January 2021, the Finance Committee discussed the post-merged governance arrangements and it had been agreed that the Committee would continue in its current form. The 2021/22 financial plan for RBH Clinical Group was uncertain for now, as was the amount of future private patient work and related income. The GSTT Epic rollout would be considered in greater detail at a future meeting.

The Trust had responded to the RBKC consultation on the use of the RBH site. The Committee considered a proposal to amend the Chelsea Farmers Market loan agreement.

The Board noted the report.

6.2 **Approval of write-offs**

The paper was taken as read and noted.

The Board agreed to the proposed writ-offs as presented in the paper.

7. **Risk & Safety Committee Report**

Professor Peter Hutton, Chair of the Risk & Safety Committee, provided a verbal report.

It was noted that the Committee was not meeting formally during the second wave of the pandemic, which was the same approach taken in the first wave. The Committee Chair, the Medical Director and Director of Nursing & Clinical Governance would consider any urgent matters as a small group and respond accordingly.

The Board noted the report.

8. **Audit Committee Report**

Mr Simon Friend, Chair of the Audit Committee, provided a verbal report.

It was noted that on 18th January 2021, the Committee held its last meeting and would not continue post-merger. The GSTT Audit Committee would oversee internal control and risk assurances across the enlarged trust for the GSTT Trust Board.

It was noted that the outstanding issues being dealt with by counter fraud and any outstanding internal audit reviews would be completed and reported to the GSTT

Audit Committee. The Trust was required to complete an annual report and accounts for the ten-month period to 31st January and Grant Thornton would pick up the audit of this as part of their work with GSTT.

The Committee discussed the proposed SFIs in relation to how the RBH Clinical Group would operate, and these would be approved in due course through the GSTT governance structure. The Committee also reviewed a draft Annual Governance Statement as part of the ten-month annual report drafting process.

9. **Draft Annual Governance Statement**

The paper was taken as read and noted.

The Board noted and endorsed the draft Annual Governance Statement.

10. **Trust Anti-Slavery Statement**

The paper was taken as read and noted.

The Board approved the statement subject to any further updates needing to be made.

11. **Any Other Business**

The Board agreed to consider seven consultant appointments, which were added as a late item. The related documentation was circulated to Board members on Monday 25th January 2021.

The Board approved the following appointments:

Dr Jo Han Gan; Dr Amira Elkhatteb; Dr Jonathan Weale; Dr Cemil Izgi; Dr Chiara Bucciarelli-Ducci; Dr Christopher Skeoch; and Dr Alessandra Verzelloni Sef.

The Chair noted that Mr Bob Bell was retiring and led the Board in thanking him for his long and significant service to the Trust. She added that he had always put the patient first and the Trust would not be in the strong position it was without his efforts.

In response, Mr Bell noted that it was an emotional day for him. He thanked everyone for their hard work and support. He noted the bright future ahead for RBH hospitals, and he urged all to capture the moment and make the most of the opportunity.

12. **Questions from Members of the Public**

In response to a question it was confirmed that the Trust provided care for people from South of England. It was added that many Trust patients with Covid-19 were recovering and returning home either directly or via their local hospitals. ECMO care was delivered to the sickest of patients and the Trust was experiencing more success than failure with these patients.

13. **Close - next meeting**

In closing the meeting, the Chair noted that this was the last meeting of the Board as a stand-alone Trust. She thanked the Board for their support and led the Board in thanking all Trust staff for their dedication and hard work over a very challenging period.

The Board resolved to meet in private and part one of the meeting was closed at 12.35pm.