



A lifetime of specialist care

**Minutes of a meeting of the Board of Directors held in the Board Room,  
Royal Brompton Hospital, London SW3 6NP  
at 2.00pm on Wednesday 20<sup>th</sup> February 2019**

Present: Baroness (Sally) Morgan of Huyton, Chair  
Mr Robert Bell, Chief Executive  
Mrs Lesley-Anne Alexander, Non-Executive Director  
Mr Luc Bardin, Non-Executive Director  
Mr Mark Batten, Non-Executive Director  
Prof Kim Fox, Non-Executive Director  
Mr Simon Friend, Non-Executive Director & Deputy Chair  
Ms Janet Hogben, Non-Executive Director  
Mr Richard Jones, Non-Executive Director  
Dr Andrew Vallance-Owen, Non-Executive Director & Senior Independent Director  
Mr Robert Craig, Director of Development & Partnerships  
Ms Joy Godden, Director of Nursing & Clinical Governance  
Dr Richard Grocott-Mason, Medical Director & Senior Responsible Officer  
Mr Nicholas Hunt, Director of Service Development  
Ms Jan McGuinness, Chief Operating Officer  
Mr Richard Paterson, Associate Chief Executive - Finance

Mr Neil Netto, Trust Secretary

By Invitation: Prof Peter Hutton (observer)  
Dr Javed Khan (observer)  
Mr Piers McCleery, Director of Strategy  
Ms Jo Thomas, Director of Communications  
Ms Lis Allen, HR Director  
Ms Penny Agent, Director of Allied Clinical Services  
Dr Rishi Das-Gupta, Chief Innovation & Technology Officer  
Ms Gill Raikes, Chief Executive Royal Brompton & Harefield Hospitals Charity

In Attendance: Mr Daniel Clarke, NHS Professionals  
Mr Andy Piggott, NHS Professionals  
Mr Ross Ellis, Divisional General Manager RBHT  
Ms Joan Clark, CNWL Trust Governor  
Ms Sharon Ibrahim, Corporate Governance Manager RBHT  
Ms Rebecca Jenkins, Communications Manager RBHT

2019/1 **WELCOME**

The Chair welcomed everyone to the meeting. The meeting was quorate and proceeded to business.

2019/2 **NON-EXECUTIVE DIRECTORS**

The Chair welcomed Ms Janet Hogben (as a new Board member), and Dr Javid Khan and Professor Peter Hutton (as observers to the meeting).

It was noted that the Council of Governors on 10<sup>th</sup> October 2018 had approved the appointment of Ms Janet Hogben as a Non-Executive Director of the Trust with effect from 1<sup>st</sup> December 2018 for a three-year term. Further, on 20<sup>th</sup> January 2019 the Council of

Governors had approved the appointments of Dr Javid Khan and Professor Peter Hutton as Non-Executive Directors of the Trust with effect from 26<sup>th</sup> February 2019 for three-year terms.

Ms Hogben has extensive experience as a senior HR adviser and also has trustee experience. Dr Khan is Chief Executive of Barnardo's and has over 30 years of experience in the UK public and not-for-profit sectors. Professor Hutton is a former President of the Royal College of Anaesthesia and brings a wealth of clinical and research experience. Further details are on the Trust's website.

The Chair also noted that this was Mrs Lesley-Anne Alexander and Dr Andrew Vallance-Owen's last meeting as Non-Executive Directors of the Trust and, on behalf of the Trust, the Chair thanked them for all their sterling work.

It was further noted that the Trust had its full complement of nine Non-Executive Directors.

2019/3

### **DECLARATIONS OF INTEREST**

The Chair stated that the most recent Register of Interests had been included in the pack. Further, as a new Director of the Trust, Ms Hogben has advised the Trust of the following interests:

- Canal & River Trust (charity): Board Trustee
- Ice Wharf Company Ltd (residential flats): Board Member.

The Chair asked if there were any other new declarations of interests, and there were no other declarations.

2019/4

### **MINUTES OF THE PREVIOUS MEETING HELD ON 28<sup>th</sup> NOVEMBER 2018**

The minutes of the previous meeting were approved.

2019/5

### **ACTIONS ARISING**

In respect of the actions arising, it was noted that:

- Updates had been provided on the medical & training actions and it is envisaged that a detailed update will be provided to the Trust Board on 27<sup>th</sup> March by the Trust's Director of Medical Education
- In respect of the Health Education England review, Dr Richard Grocott-Mason (Medical Director) outlined that there were many positives and changes were being made to further enhance some areas. Mr Luc Bardin (Non-Executive Director) added that some of the care provided was innovative and brilliant, and details of such work should be further disseminated in the Trust's communications.
- In respect of the private patients' item, the matter was being reviewed by the Finance Committee and the item should be closed.
- There were no outstanding actions.

2019/6

### **REPORT FROM THE CHIEF EXECUTIVE**

The Chief Executive, Mr Robert Bell, provided an oral report to the meeting and outlined various matters which included:

#### **Care Quality Commission**

The CQC would imminently publish its Inspection Report on the Trust. The Report is very positive about the patient care provided by the Trust:

- The Trust had been rated as good for three of the four core services that were inspected by the CQC (Critical Care, Paediatrics and Surgery at Royal Brompton). The fourth service inspected (surgery at Harefield) received an outstanding rating.
- Many areas of outstanding practice were identified across the services including recognition of excellent multidisciplinary team working, innovative practice, and outstanding person and family centred care.

Overall there is much which everyone at the Trust can be proud of.

Dr Andrew Vallance-Owen (Non-Executive Director) said that everyone at the Trust should be congratulated on their outstanding work. This had contributed to the overall success of the Trust, and further enhanced the Trust's world-famous reputation for its expertise in the treatment of heart and lung disease.

### **King's Health Partners Collaboration**

In relation to the King's Health Partners Collaboration, Mr Bell outlined that:

- The main 'input' document to NHS England's Pre-Consultation Business Case had been submitted. The document included joint statements about how it was envisaged that the new collaboration with Guy's & St Thomas' Hospital, King's College London and King's College Hospital would work.
- NHS England had invited NHS bodies, patient groups, members of the public, etc to participate in a "Hurdle & Evaluation Criteria" event designed to help them assess proposals, on 25<sup>th</sup> February 2019. Some of the Trust's Directors, Governors and other interested parties would be attending.
- Cognisant of the alternative proposal from Imperial College Healthcare NHS Trust and Chelsea & Westminster NHS Foundation Trust (in conjunction with Imperial College London) for specialist respiratory and cardiovascular care in north west London, NHS England had not advised (and the Trust did not see) any "showstoppers" to the King's Health Partners Collaboration.
- NHS England's consultation timeline had again been pushed back and it seemed that there may be no outcomes until late 2019. This may be too far into 2019 and the Trust did not want to lose momentum.
- Moorfields Eye Hospital NHSFT had recently announced a development which was similar to that envisaged by the Trust, the release of funds by the sale of a site and development at a new site. Further, the Moorfields proposal had not previously gone through a lengthy NHS England consultation process, and yet Government funding of £200m for its project had been announced.
- Senior management at the Trust were in discussions to try to expedite the overall KHP collaboration process.
- The Trust remained of the view that its plans for a joint heart and lung network around a centre of excellence based on the St Thomas' site would potentially transform heart and lung disease treatment and research in the UK, and reap the benefits of collaboration by working together across all cardiac and respiratory specialist services for adults and children. It would take the strong clinical and academic work of the Trust forward. The alternative proposal decimated the work of the Trust.

2019/7

### **CLINICAL QUALITY REPORT FOR MONTHS 8, 9 AND 10**

The Director of Strategy, Mr Piers McCleery, presented the Clinical Quality Report and outlined and noted matters which included:

- **Nurse Staffing** – Nurse safe staffing levels had been maintained for M8, M9 and M10 2018/19.
- **Cancer Targets, 62 Days to First Treatment** – There had been seven patients who had not been treated within the 62-day target. The reasons included patient choice, preceding clinical procedures being needed, and operational issues. This would be further reviewed.
- **NHS Safety Thermometer** – The care of 340 patients was audited in M8, the care of 303 patients was audited during M9, and the care of 327 patients was audited in M10. This snapshot audit indicated that on average for the period patients had received harm free care as defined by the audit tool (national average 94.1%).
- **Eighteen Week Referral To Treatment Time** – The M10 provisional performance was 93.53%. This exceeded the national threshold of 92% and the Trust's threshold of 91.5%, which agreed with NHS Improvement during the annual activity planning exercise.
- **Duty of Candour** – To further enhance the corporate governance aspect of the Trust's duty of candour, the divisional quality teams had developed a dashboard to aid reporting, based around the prescribed two-stage process for communicating with patients (or carers / families) when an identifiable patient safety incident has occurred.
- **Venous Thromboembolism** – It was noted that the number of VTE events considered preventable remained small and of a similar proportion of the total events compared with previous years. The reporting of VTE is a new NHS England contractual requirement, whereby greater than 95% of all admitted patients should have had a documented VTE assessment within 24 hours of admission. Dr Richard Grocott-Mason (Medical Director) said that further data is required on VTE events such that the Trust would have comparators against national figures for different types of hospital.

The M8, M9 and M10 Clinical Quality Report was approved by the Trust Board for publication on the Trust's web site.

2017/8

#### **REPORT FROM THE RISK & SAFETY COMMITTEE**

The Chair of the Risk & Safety Committee, Dr Andrew Vallance-Owen, provided an oral report of the Committee meeting on 5<sup>th</sup> February 2019 which included:

- **Yellow Wristbands** – The Committee had received an update on the yellow wristband project to identify patients with additional needs. A trial had been conducted which had been successful. The majority of patients had reported that they had understood what the (optional) yellow wristband was for and it had enhanced the care they received. The trial would be widened to other areas of the Trust.
- **Quality Impact Assessment (QIA) of a Darwin Project** – A presentation had been made to the Committee on a Darwin project, which had the aim of reducing the length of stay in surgery. It was noted that the QIA process is closely linked to the governance process in the division and is clinically led. The feedback that had been received from patients surveyed showed an improvement in satisfaction, with the majority of patients going home on the day and time they expected.
- **Risk Register** – The Committee had received an update on the Risk Register. This included consideration of what would happen in the event of a No Deal Exit from the European Union.

It was noted that the advice that had been received from the Department of Health is as follows:

- The disruption to the supply chain could last six months
- Hospitals should not stockpile or change prescribing practices at present.

The Trust:

- Has advice on its website for patients and carers
- Has provided a dedicated phone helpline to respond to queries
- Is encouraging patients to be sure that they have 2-4 weeks supply at all times.

It was noted that it is impossible to be fully ready at this stage, however the Trust had done what it could do in accordance with national guidance.

- **Serious Incidents** – The Committee had reviewed details of the new serious incidents that had occurred since the last meeting. Further details are in the Committee minutes of 5<sup>th</sup> February 2019.
- **Learning from Deaths** – Dr Richard Grocott-Mason (Medical Director & Senior Responsible Officer) would make a presentation on a new style report on Learning From Deaths later in the meeting.
- **Seven Day Service 7DS** – The Committee had received an update on the Trust's position in respect of developing a 7DS. 10 national standards had been introduced in 2013. From April 2019, the Trust would be required to publish its results against all 10 national standards (to NHS England and NHS Improvement). The Trust was largely already consistently meeting the standards. There had been significant improvements over the last few years, including in respect of Consultant review at weekends. The full report is available to all Directors.

2019/9

#### **LEARNING FROM DEATHS REPORT**

Dr Richard Grocott-Mason (Medical Director) referred to the paper in the pack and outlined that:

- The Trust had been reviewing all in-patient deaths on a monthly basis for many years. The aim of mortality review is to consider the care management of each patient, ascertain if there are any lessons to be learned, and whether any changes to practice should be considered.
- The purpose of the Report is to provide a summary of progress against the National Quality Board guidance (2017) on Learning from Deaths at the Trust, which is informed by engagement with the London Learning From Deaths group along with data for Q1 and Q2 2018/19 in accordance with national requirements.

2019/10

#### **FINANCIAL PERFORMANCE REPORT FOR MONTH 10**

The Associate Chief Executive - Finance, Mr Richard Paterson, presented the Financial Performance Report and outlined various matters which included:

- The Trust remained ahead of plan YTD by £1.8m (£1.7m better than the Control Total, supported by a £3.25m one-off gain released from the Balance Sheet in M8).
- Cash had reduced in-month by £3.95m to £21.05m. This reflected a month with five, rather than the usual four, payment runs (£2.8m), and payments having been received for Embassy Private Patient debt being lower than usual.
- Pay had delivered on plan. However, agency expenditure was £950k in month which was £300k above the ceiling set by NHS Improvement. This was being further reviewed.
- The Trust remained £1.05m behind plan in respect of the CIPs YTD.

- The EBITDA position for the month of January 2019 was positive £0.7m, although (£1.4m) worse than plan. This compared to a negative EBITDA of £1.3m for January 2018, with the same number of working days.
- Performance against the control total was ahead of plan by £1.7m, with a (£18.7m) deficit.
- It was anticipated that the Trust would achieve both its underlying forecast deficit, but its control total, and therefore its full £11.5m allocation of base PSF (formerly STF), remained subject to an additional £20m revaluation of Chelsea Farmers Market (CFM), the timing and extent of which are both outside the Trust's control.

There followed some discussion about the envisaged sale of CFM. It was noted that as:

- Crossrail 2 safeguarding remained in place and
- The situation in respect of Brexit remained open

the Trust had received specialist advice that it should not seek to sell CFM at this juncture, as there would be a limited market for the site and the expected sale price would almost certainly be subject to a substantial discount.

If there is no positive development by 31<sup>st</sup> March 2019 in respect of CFM's safeguarding, the Trust would not meet its 2018/19 financial target which assumed a revaluation surplus for CFM of £20m. This would be a force majeure situation which was outside of the control of the Trust.

- Dr Andrew Vallance-Owen, supported by Mr Luc Bardin, noted that the Trust's financial results continued to reflect a structural deficit. He asked what was being done to rectify this. Mr Paterson responded that the NHS as a whole was suffering from a structural financial deficit and this was reflected in the Trust's results. That said, the planned 2019/20 deficit was £8.2m without any benefit from one off items such as property revaluations, which represented a further improvement over the position two years ago when the Darwin programme was launched. Mr Bell added that we could indeed save more costs through reducing headcount but that patient care would suffer so this was not an acceptable option.
- Additional risks associated with achievement of the Trust's forecast plan and control total included a shortfall against the CIP plan and non-payment in full for all NHS activity.

The Finance Committee minutes of 22<sup>nd</sup> December 2018 and 23<sup>rd</sup> January 2019 in the Board pack were noted.

2019/11

### **REPORT FROM THE AUDIT COMMITTEE**

The Audit Committee Chair (Mr Simon Friend, Non-Executive Director) outlined that there had been a Committee meeting on 5<sup>th</sup> February 2019 (and the minutes would be included in the next Board pack).

As an indication of some of the work undertaken by the Audit Committee, Mr Friend mentioned that (among other areas) work was on-going in respect of business continuity, general data protection regulation issues, library strategy and audit planning.

2019/12

### **UPDATE ON STAFF SURVEY**

Ms Lis Allen (HR Director) outlined that in respect of the recently completed 2018 NHS Staff Survey:

- The Trust had the highest response percentage of any acute specialist trust

- 59% of staff members had responded (an improvement from 54% and 34% in previous surveys)
- Areas covered by the survey included Morale, Health and Wellbeing, Leadership and Trust Culture.

Ms Janet Hogben (Non-Executive Director) said that, from her perspective, such a large increase in response rate to 59% in only two years was impressive and meant that the results were both credible and actionable.

It was agreed that a Board seminar would be held to review the results in detail.

2019/13

#### **RECOMMENDATION OF THE ADVISORY APPOINTMENTS COMMITTEE**

Following a formal appointment panel, the Board after due consideration ratified the appointment of Dr Vasileios Kouranos as a Consultant Respiratory Physician with Expertise in Cardiac Sarcoidosis.

2019/14

#### **RATIFICATION OF COMMITTEE APPOINTMENTS**

Following the end of term of Ms Kate Owen, coming end of term of Dr Andrew Vallance-Owen, and previous consultation with the Directors, it was agreed that:

- Ms Janet Hogben be appointed as Chair of the Trust Board's Nominations & Remuneration Committee and a member of the Audit Committee with effect from 1<sup>st</sup> December 2018
- Professor Peter Hutton be appointed as Chair of the Risk & Safety Committee and a member of the Audit Committee with effect from 26<sup>th</sup> February 2019.

2019/15

#### **REGISTER OF INTERESTS**

As referenced by the Chair at the beginning of the meeting, the Register of Interests was noted.

2019/16

#### **NEW GOVERNOR APPOINTMENTS**

The Chair referred to the paper in the pack on new and incoming Governors. It was noted that:

- Academic Governor appointment – Imperial College had recommended that Professor Wisia Wedzicha be its Academic Governor to the Trust and the recommendation was approved by the full Council of Governors on 30th January 2019. Professor Wedzicha has an excellent record of research and is a Professor of Respiratory Medicine at the National Heart & Lung Institute.
- Local Council Appointed Governor – The Trust has received notification from the Royal Borough of Kensington & Chelsea of a change in its Appointed Governor to former Cllr Tim Ahern.
- Following uncontested elections in January 2019, two Governors had been appointed:
  - Patient, North West London – Lady Victoria Borwick
  - Public, Bedfordshire & Hertfordshire – Mr Pravin Shah.



- There were ongoing elections in two public constituencies (South of England and Rest of England & Wales) and it was envisaged that there would be declarations of result on Thursday 7th March 2019.

2019/17 **YEAR PLANNER**

The Trust Board Year Planner in the pack was noted.

2019/20 **QUESTIONS FOR THE DIRECTORS**

The Chair asked if there were any questions for the Directors and there were no questions for the Directors.

2019/21 **NEXT MEETING**

The next Trust Board meeting had been scheduled for 10.30am on Wednesday 27<sup>th</sup> March 2019 in the Concert Hall, Harefield Hospital, Hill End Road, UB8 6JH.

2019/22 **CLOSE**

There being no further business, the Chair thanked everyone for coming and declared the meeting closed.

**CHAIR**