



A lifetime of specialist care

Minutes of a meeting of the Board of Directors
held in the Concert Hall, Harefield Hospital, Hill End Road, UB9 6JH
at 10.30am on Wednesday 25th September 2019

Present: Baroness (Sally) Morgan of Huyton, Chair
Mr Robert Bell, Chief Executive
Mr Luc Bardin, Non-Executive Director
Mr Mark Batten, Non-Executive Director
Mr Robert Craig, Director of Development & Partnerships
Mr Simon Friend, Non-Executive Director & Deputy Chair
Ms Joy Godden, Director of Nursing & Clinical Governance
Ms Janet Hogben, Non-Executive Director
Mr Nicholas Hunt, Director of Service Development
Prof Peter Hutton, Non-Executive Director
Prof Bernard Keavney, Non-Executive Director
Dr Mark Mason, Interim Medical Director
Ms Jan McGuinness, Chief Operating Officer
Mr Richard Paterson, Associate Chief Executive - Finance

Ms Noreen Adams, Interim Trust Secretary

Apologies: Dr Javed Khan, Non-Executive Director
Mr Richard Jones, Non-Executive Director

Governors in Attendance: Cllr (Mr) John Hensley
Rt Hon Michael Mates, Public Governor – South of England

By Invitation: Dr Richard Grocott-Mason, Managing Director, KHP / RB&H Partnership
Dr Rishi Das-Gupta, Chief Innovation & Technology Officer
Mr Piers McCleery, Director of Strategy & Corporate Affairs
Ms Jo Thomas, Director of Communications
Ms Lis Allen, HR Director
Mr David Shrimpton, Private Patients – Managing Director
Ms Gill Raikes, Chief Executive Royal Brompton & Harefield Hospitals Charity
Ms Penny Agent, Director of Allied Clinical Services

In Attendance: Mr Kenneth Appel, Membership Ambassador
Mr Kelvin Walker, Finance Director, RB&HH Charity
Ms Helena Laycock, SpR, RBHT
Ms Christine Weaver, SpR, RBHT
Mr Ben Garfield, SpR, RBHT
Ms Derval Russell, Harefield site Director, RBHT
Ms Sharon Ibrahim, Head of Assurance, RBHT
Ian McGovern, Consultant, Harefield Divisional Director, RBHT

2019/79

DECLARATIONS OF INTEREST

Prof Peter Hutton declared that he was attending the University of Oxford as a mature student.

2019/80

MINUTES OF THE PREVIOUS MEETING HELD ON 24 JULY 2019

The minutes of the previous meeting were approved.

In relations to the actions arising, there were no outstanding actions on the Trust Board action tracker.

2019/81

REPORT FROM THE CHIEF EXECUTIVE

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

Visit by the Minister of State for Care

- A successful visit by the Minister of State for Care, Rt Hon Caroline Dinenage, MP, on 23 September 2019 at the Harefield Hospital. She was welcomed and was provided with an overview of the transplant service by Harefield Hospital site director Derval Russell, director of service development Nick Hunt, chief operating officer Jan McGuinness and medical director Dr Mark Mason. The visit included the Minister meeting pre and post-transplant patients, who shared their experiences. The Minister subsequently tweeted how impressed she was by the transplant service at Harefield.

Overseas Visit to Egypt

- Mr Bell, along with Mr David Shrimpton (Private Patients Managing Director) and Piers McCleery (Director of Planning & Strategy), visited two hospitals in Cairo:
 - Ain Shams University (government) Hospital, which is interested in a collaboration in complex aortic surgery.
 - Dar Al Fouad (private) Hospital, which is interested in a collaboration in lung transplant.

Ain Shams University Hospital has since sent a draft Memorandum of Understanding. The Trust will consider the feasibility of a professional collaboration, with an initial assessment visit to Aim Shams Hospital to be made by an RB&H clinical team.

Spot Inspection by the CQC

- The Trust has received the CQC draft report following a spot inspection which highlighted some areas for learning, but no significant concerns, and areas of good practice. Ms Godden was collating the Trust response. The final report would be published on the CQC website.

2019/82

KING'S HEALTH PARTNERS COLLABORATION

Mr Robert Craig presented his report on the King's Health Partners collaboration.

The Board noted that the Partnership would be producing a Programme Strategic Framework (PSF) document, to submit to the NHS England (NHSE) in November 2019. The PSF would be circulated to the Board for information in advance of submission to NHSE.

The Board considered the report and noted that communication continues between senior NHSE staff and Chairs/CEOs of all three Foundation Trusts in the Partnership.

The Trust was also participating in public and patient engagement events, webinars and via the website to engage with stakeholders on the Partnership's proposals. The Board noted that, at present, NHSE plans to conduct a formal public consultation on the proposals in early 2020.

The Board was also informed that progress was being made to formalise the joint lung cancer service with The Royal Marsden Hospital. There were positive steps and enthusiasm from both parties who recognise the clinical and academic opportunities for sustaining and developing the existing service.

2019/83

CLINICAL QUALITY REPORT (MONTHS 5: AUGUST 2019)

Ms Joy Godden delivered the Clinical Quality Report Month 5: August 2019, which highlighted the Trust's position against the key quality and performance measures. Ms Godden informed the Board that the two MRSA bacteraemia cases highlighted red in the report were from last year, as highlighted in the Quality Report at the time. It was noted that there was no MRSA bacteraemia case this year.

The Board was advised that there were a number of initiatives happening across the Trust to maintain high standards of clinical care, including:

- Get up, get dressed, get moving campaign
- Q1 quality priority achievements'
- Patient experience coffee morning initiative

The Board considered the Clinical Quality Report Month 5: August 2019 and **approved** the publication on the Trust's website and to external commissioning partners.

2019/84

FINANCIAL PERFORMANCE REPORT (MONTHS 5: AUGUST 2019)

Mr Richard Paterson presented the Financial Performance Report and reported that the Trust's performance year to date continues to be ahead of plan. The YTD deficit of £7.4m was £2.3m better than plan, and £1.9m better than the Control Total, driven primarily by the contribution from over-performance on Private Patient Income and the under-spend on pay. Capital expenditure of £5.3m YTD was £3.4m below plan, principally because of delays to the RBH Imaging Centre programme and to KHP Consortium expenditure currently being charged to revenue.

Mr Paterson informed the Board that for the full year the Trust could be circa £4m ahead of plan on its underlying performance. He explained that the risks against achieving the full year plan were the potential further devaluation of Chelsea Farmers Market, and the Trust exceeding the block contract with NHSE, which if they materialised would undermine the projected underlying position.

The Board **noted** the Financial Performance report for Month 5 – August 2019.

2019/85

FINANCIAL COMMITTEE REPORT – 24 SEPTEMBER 2019

Mr Simon Friend had chaired the meeting in Mark Batten's absence. Two matters discussed by the Committee, a debt write-off and the draft 5-year plan were on the Board agenda for consideration and decision.

2019/86

DEBT WRITE-OFF

Mr Richard Paterson asked the Board to approve the write-off of an irrecoverable debt to the Trust for the treatment of an overseas patient. It was noted that this matter has been considered by the Finance Committee and that the write-off would not adversely impact the Trust's financial position as it had already been fully provided against.

Following due consideration, the Board **approved** the debt write-off.

DRAFT FIVE YEAR PLAN – SUBMISSION TO NHS ENGLAND

Mr Paterson delivered a report on the draft 5-year plan submission to NHS England (NHSE). It was noted that the 'Long-Term Plan Implementation Framework' requires each Sustainability and Transformation Partnership (STP) and Integrated Care System (ICS) to produce a 5-year financial plan by autumn 2019. Every NHS provider organisation and clinical commissioning group and regional team are required to work collaboratively to agree a coherent system-level strategic plan, which would be signed off by each organisation and by the respective STP / ICS.

The STP was to submit a 5-year interim plan on 27 September. Mr Paterson reported that the Trust had submitted to NWL STP on 18 September its draft 5-year interim plan based on NHSE centrally defined assumptions and values. The Trust's 5-year interim plan was based on the achievement of a 2.3% annual efficiency savings' target, a demanding but achievable plan. Following submission Mr Paterson was informed by the STP Chief Financial Officer that a 3.3% annual efficiency savings was required. This had been considered by the Finance Committee which was opposed to supporting an efficiency savings forecast that was not achievable and that could adversely impact the Trust financially.

The Board deliberated at length and concluded that the Trust as a Public Benefit Foundation has statutory responsibilities which it must uphold. The Board was accountable for ensuring that an achievable efficiency savings plan was delivered, to safeguard the welfare of patients and to uphold the financial integrity of the Trust.

Following due consideration, the Board **agreed** that the Trust's 5-year initial interim plan submitted to the NWL STP, based on the 2.3% efficiency savings' target, should remain as specified and this should be confirmed with the STP.

EU EXIT - NO DEAL PREPARATION

The report on RBHT No Deal – EU Exit Risk Assessment and Business Continuity Plan (the Plan) was delivered by Ms Jan McGuinness. She reported that the Trust has been planning for a No Deal scenario since August 2018, and an EU Exit Planning Group was established as a sub-committee of the Operational Management team. The actions undertaken to date to prepare for a No Deal EU Exit were also summarised in this report.

The Board was informed that members of the EU Exit Planning Group attended a London Region EU Exit workshop on the 19 September 2019, with the remaining actions, highlighted below, to be undertaken by the Trust prior to 31 October 2019:

- Winter pressures – to review resources and surge capacity to be able to manage emergency incidents, winter pressures, and any disruption related to a No Deal exit all occurring in the same time period;
- Identifying and charging EU Visitors - a process for identifying and charging EU visitors to be determined and communicated to relevant staff in advance of 31 October 2019; and
- Communication Plan - a communication plan for frontline staff to be developed, detailing the work done to prepare for an EU Exit and the processes to escalate and manage any shortages.

The Board discussed the Plan and enquired about the possible disruption in the supply chain and who was responsible for the transportation and delivery of products. Ms McGuinness responded that Department of Transport was responsible for transportation and the DHSC (Department of Health and Social Care) would be responsible for all contingency supply arrangements centrally (i.e. a six-week replenishing stockpile).

The Board commended the work of the EU Exit Planning Group in preparation for a No Deal EU Exit.

ACTION: The Board to be kept informed of any changes over the next month, as the 31 October 2019 EU Exit deadline approaches.

2019/89

EXTERNAL AUDIT TENDER RECOMMENDATION

Mr Simon Friend, Chair of the Audit Committee, provided an oral report on the external audit tender recommendation. The Board was informed that following a robust procurement exercise the recommendation of the audit procurement panel would be presented to the Council of Governors on 15th October 2019.

2019/90

BI-ANNUAL RISK REPORT

Ms Godden provided an oral report on risk, informing the Board that four risks had been downgraded. Furthermore, there have been no new serious incidents reported across the Trust since July.

2019/91

RISK & SAFETY COMMITTEE – REPORT FROM THE MEETING ON 17/09/19

The Chair of the Risk & Safety Committee, Prof Hutton, provided an oral report from the Committee meeting on 19 September 2019, including:

- The relationship of IT in relation to Clinical risks was to be added to the Committee's scrutiny;
- The adopting of the Trust Insurance arrangements within its workstream;
- One risk was upgraded – following the June 2019 Risk Review meeting;
- A Trust-wide audit relating to patient consents was progressing; and
- A nurse led consent for simple procedures was being developed.

There had been two presentations to the Committee:

- Interstitial Lung disease by Anja Hudson (Physiotherapist); and
- Young Patients' self-empowerment by Karen Taylor (Interim Patient Public Engagement Programme Manager)

Three annual reports were presented to the Committee:

- Pharmacy
- Older People and Falls
- End of Life Care

The End of Life report has highlighted some weakness in the current mortuary service. Action was being taken to address these issues, including the introduction of a Medical Examiner, and a follow up report would be presented to the next Committee meeting.

2019/92

ALLIED CLINICAL SCIENCES STRATEGY

The Allied Clinical Sciences Strategy was presented by Ms Penny Agent. The Board was informed that the strategy was co-developed with ACS staff in three directorates, Rehabilitation & Therapies, Laboratory Medicine and Pharmacy. The vision was to 'empower people for excellence'. The strategy was established to provide a framework for all staff to recognise their importance and value, and realise their full potential, by utilising the framework strategic aims to 'Develop, Lead and Thrive'.

The Board **approved** the Allied Clinical Sciences strategy and noted that it is in complete alignment to the Trusts own workforce strategy design.

2019/93

PATIENT AND PUBLIC ENGAGEMENT STRATEGY

Ms Agent introduced the first Patient and Public Engagement Strategy. The Board was informed that the strategy was developed with patients, families, carers and staff throughout the Trust. The strategy was developed to ensure that there was a joined-up approach to recording patients' experience and engagement by establishing a feedback process, which would influence and inform decision-making and which would aim to:

- i) improve the patient experience
- ii) deliver excellent care
- iii) embed the patient experience in the leadership, culture and operational process of the Trust

This strategy would also embrace the development of new services or the improvement of existing services by ensuring that the principle of patient-centred care was always included. Ms Agent explained the next step was for the strategy to be launched Trust-wide and to deliver on the detailed action plan. The launch and delivery of the strategy would be helped by having a Non-Executive Director (NED) and a Governor champion as representatives on the Patient and Public Engagement Group (PPEG).

The Board welcomed the strategy. It was noted that communication was a two-way process and therefore a way to feedback to those who engage and provide comments should be included in the process. Ms Agent responded that a process to feedback to those who participate, including how to measure the success of this project, was being developed by the PPEG. The Chair nominated Ms Janet Hogben to be the representative for the NEDs on the PPEG.

The Board noted and **approved** the Patient and Public Engagement Strategy.

Post minutes notes: Rt Hon Michael Mates, a member of the Council of Governors subsequently volunteered to be the governor representative on PPEG.

2019/94

APPRAISALS AND REVALIDATION ANNUAL REPORT

The Quality Assurance Audit of Appraisal and Revalidation Annual Report was presented by Dr Mark Mason.

The Board considered the report and **approved** the appointment of Dr Mark Mason as Responsible Officer.

2019/95

RECOMMENDATIONS OF THE ADVISORY APPOINTMENTS COMMITTEE

Following the Advisory Appointment Committee Panel meeting, the Board **ratified** the appointments of:

- Dr Ricardo Jose - Consultant in Respiratory Medicine with Expertise in Chronic Lung Infection
- Dr Nicoletta Zimble - Consultant in Adult Cardiothoracic Anaesthesia and High Dependency Care
- Dr Katarina Lenartova - Consultant in Anaesthesia

2019/96

SLAVERY AND HUMAN TRAFFICKING STATEMENT

The Board noted and **approved** the revised Slavery and Human Trafficking Statement for 2018/19 sign off by the Trust Chair and Chief Executive.

2019/97

QUESTIONS FOR THE BOARD

Mr Appel enquired if the Trust was in any way held responsible for the bad debt (discussed earlier in meeting agenda) being written off. Mr Paterson responded that the Trust was not held responsible for the debt and that there would be no adverse financial impact to the Trust.

Cllr Hensley raised issue of slow payments from hospitals and health boards in the Middle East. It was agreed that it would be helpful to explain the slow payments in future documentation. It was emphasised that the Trust utilised every channel at its disposal to collect outstanding receivables.

Cllr Hensley enquired if bad debt would affect the insurance premium and was advised that it would not.

2019/98

NEXT MEETING

The next Board meeting is scheduled for Tuesday 26 November from 11.00 to 13.00, in the Boardroom at Royal Brompton Hospital.

2019/99

CLOSE

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