

## ANNUAL PUBLIC MEETING

Wednesday 24<sup>th</sup> September 2014  
Shepherd Hall, South Wing, St Thomas' Hospital

### MINUTES

#### 1. Introduction

The Chairman of the Trust, Sir Hugh Taylor, welcomed around 300 members of the Trust to the 2014 Annual Public Meeting.

#### 2. Review of 2013-14

The Chief Executive, Sir Ron Kerr, reviewed the work and achievements of the Trust over the past year during from which, despite feeling the stresses and strains common to the NHS, the Trust had emerged well.

Again, the Trust had treated well over 2 million people and the numbers continued to increase in both the hospitals and the local communities. The Trust had achieved many of the national targets including for referral to treatment and A&E where others had struggled.

The Fit for the Future programme, working with staff across the organisation, continued to bring quality and safety together to produce improvements and economies; projects were led by the executive directors and enjoyed significant involvement with clinical and medical staff. The quality of the Trust's food and environment had been recognised in PLACE inspections and the Trust remained stable financially with a surplus of £15.4mn (before accounting adjustments) available for reinvestment.

The Trust continued to make significant capital investments in one of the largest programmes in the NHS. The Cancer Centre at Guy's has begun construction and was expected to open on time in 2016. Of the £160mn required, £10mn remained to be raised. The Guy's Tower had been reclassified. Major projects at St Thomas' included the complete overhaul of emergency care services and the refurbishment of East Wing. In the community a new Lane Fox Unit was due to open shortly in Redhill, a satellite cancer centre at Sidcup and services provided in a new leisure centre in Redhill.

The Trust was working effectively with its many stakeholders and partners to develop effective local healthcare systems. The Southwark and Lambeth Integrated Care programme, funded by the Guy's and St Thomas' Charity and the new 5 year plan published by King's Health Partners to be co-ordinated across all care settings.

Co-ordination of care is an ambition across a number of services and this year both children's hospital and community services have been brought together in the Evelina. The Trust's strategic plan is to continue to be a leading provider of local, emergency, elective and specialist health services as well as developing teaching, academic and research portfolios of the highest quality.

### **3. Council of Governors Report**

The Lead Governor John Porter, described to the meeting the work undertaken by the governors on behalf of the membership and public in holding the directors individually and collectively to account for the performance of the Board.

The Board and Council of Governors meet in public every quarter with the governors having the opportunity to discuss with the Board what has happened during its meeting. Both groups undertake much of their detailed work in committees or working groups – the governors hold Service Strategy, Patient experience and quality and membership development group meetings and send representatives to all Board committees apart from audit and remuneration. Those attending receive papers, are encouraged to contribute and then report back to one of the working groups.

Governors meet informally and then are joined by the Chairman and for the first time have held an accountability session with the Board to raise questions and concerns. The first meeting ranged across integrated care, King's Health Partners, directorate reporting, post Francis actions and the Trust's IT strategy.

The governors of the three trusts involve in King's Health Partners have met from time to time. Governors have also taken part in PLACE inspections, sat on reference groups for the cancer centre, emergency care pathway changes, patient groups and are becoming involved in the local Healthwatch committees.

He said how proud the governors were to be associated with the Trust and were pleased to see the success of Barbara's Story. He acknowledged the support given by the Charity.

### **4. Nursing care in hospital and in the community**

#### **4.1. The WoW Project to improve care on our wards**

The first project's aim was to enable nurses to spend more time with patients through basing nursing on bays, using the Hospedia technology for updating patient notes and records, using portable phones, writing up notes at the bedside and improving discharge practices on the ward. Early results showed an increase of nurse to patient time from 40% to 70% with a matched improvement in results from the Friends and Family test scores in the participating wards.

#### **4.2. Zero Pressure campaign to prevent pressure ulcers in Lambeth and Southwark**

This project was being led by the community based tissue viability team. In emphasising that anybody could acquire pressure sores it was believed that over 5,500 people in Lambeth and Southwark could avoid the pain and discomfort of having sores. In particular the project had been working with care homes by increasing their knowledge about prevention and pre-emptive care. Several homes had now had 100 days without a pressure sore and there was competition between homes to outperform one another. The next phase of the project was to be directed at self carers, and information was being distributed via GPs, pharmacies, school nurses (for children who care for others) and carers' groups.

Support material was available for community nurses and for other outreach work where material could be appropriately tailored. A new web site and a mobile phone app were about to be launched as part of the next stage of the campaign aimed at prevention and early intervention.

## **5. New Emergency Floor at St Thomas'**

Dr Katherine Henderson, Lead Consultant A&E and Dr John Criddle, Consultant Paediatrician and Clinical Lead Emergency Floor Development gave background about the department and then described the project and the work under way to change the way services will be delivered.

Dr Henderson introduced the very large A&E department which saw over 130,000 patients a year with a further 1,500 a day visiting the Urgent Care Centre at Guy's. The four hour access target was designed to cover arrival to departure with a diagnosis and a plan. The target expected 95% compliance with the remaining 5% expected to cover more complex patients. Being able to meet this revealed much about the hospital and its efficiency in its ability to move people through its systems and processes to provide the right care where it is needed. The Trust had improved over the last few years with much greater availability of senior clinicians. Its services were also tailored to particular local needs such as the drug and party environment prevalent in Vauxhall and that it was the London A&E where homeless people were brought. By next year it was hoped to have reached international standards and acknowledge the challenges for staff of working in this environment by making sure they had fulfilling and balanced careers.

The rebuild of the department was taking place at the same time as the department having to maintain 24/7 services throughout the project.

Dr Criddle described a £20mn, two year rebuild project working hand in hand with a major transformation of the way services would be provided.. Patients were involved in the work and it was hoped that the new department would take account of many of their concerns.

By the end, all key services would be co-located on the ground floor including a 68 bed emergency admissions ward. As clinicians would no longer have to get to different parts of the hospital more time would be released to be spent with patients. The proposals also responded to patients' concerns about booking in and triage by providing open and accessible spaces with senior members of the nursing team being the first point of contact. The treatment cubicles would be bigger and better equipped particularly to cope more effectively with patients with mental health crises. Work continued with the designers on the environment and with the Charity. The design would involve art, including newly designed interactive software.

The new floor was due to open next spring.

## **6. Question Time**

The Chairman invited questions from the floor.

Topics raised included questions about tailoring dementia services to Asian patients, help needed for carers on the complex but regular support they needed to be able to give, the consultation of Viapath staff about transferring from the Trust's employment to Viapath itself. Other areas included the provision of rehabilitation or redundant gym equipment as a preventative measure, whether performance on the 62 day cancer wait target could be improved (though it was pointed out that at least part of the problem related to late referrals from other trusts) and the provision of transport for those being discharged.

Finally, the Chairman thanked the speakers and the audience for their support, attendance and enthusiasm.