Kingston Hospital NHS Foundation Trust

Well-Led Governance Review: Executive Summary

Capsticks Solicitors LLP

Governance Consultancy Service

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18 December 2015
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The issues in this report are restricted to those that came to our attention during this review and are not necessarily a comprehensive statement of all the opportunities or weaknesses that may exist, nor of all the improvements that may be required.

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Capsticks Solicitors LLP
1 St George’s Road
Wimbledon SW19 4DR
18 December 2015
1. **Executive Summary**

**Background**


2. We observed the Board and Committee meetings between September and November 2015, met with the Council of Governors and observed their meetings, interviewed Board members and they completed a questionnaire, undertook patient and staff focus groups and met other staff informally, reviewed key Trust documentation alongside the Trust self-assessment against the Well-Led Framework domains from February 2015.

3. Our review findings throughout this report are grouped under the key areas of the Well-Led Framework and we make recommendations at the end.

**Key Overall Findings**

4. Our review found that Kingston Hospital NHS Foundation Trust is well led by the Board and that the governance processes and structures are sound and appear to be working well including those relating to performance management.

5. We found some areas of outstanding practice and many areas of good practice. The areas we identified for further attention are primarily developmental, all of which are set out in this report.

6. We particularly felt that patient safety and quality is the Trust’s priority. We observed it at Board and Committee level, it featured strongly during our interviews with the Board members and perhaps most importantly it was a key theme in discussions with staff.

7. The Trust ratings and our ratings for each Domain Question are set out below together with the key findings of good practice from each area:
Strategy and Planning

<table>
<thead>
<tr>
<th>Domain</th>
<th>Trust Rating</th>
<th>Our Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1. Does the Board have a credible strategy to provide quality, sustainable services to patients and is there a robust plan to deliver?</td>
<td>Amber Green</td>
<td>Amber Green</td>
</tr>
<tr>
<td>Q2. Is the Board sufficiently aware of potential risks to the quality, sustainability and delivery of current and future services?</td>
<td>Green</td>
<td>Amber Green</td>
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</table>

8. There is a clear Vision and Values which are communicated across the Trust and well understood by the staff. There are also clear Strategic Objectives and a five year Quality Strategy with priorities and goals. There is a clear structured planning process with good engagement with stakeholders and a process for involving clinicians in the development of services.

9. We have rated Question 1 Amber Green as the Trust is not able to finalise its external strategy due to the changes in the local health economy. We have rated Question 2 Amber Green as the role of the Compliance and Risk Committee needs to be reviewed.

Capability and Culture

<table>
<thead>
<tr>
<th>Domain</th>
<th>Trust Rating</th>
<th>Our Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q3. Does the Board have the skills and capability to lead the organisation?</td>
<td>Green</td>
<td>Amber Green</td>
</tr>
<tr>
<td>Q4. Does the Board shape an open, transparent and quality-focused culture?</td>
<td>Amber Green</td>
<td>Amber Green</td>
</tr>
<tr>
<td>Q5. Does the Board support continuous learning and development across the organisation?</td>
<td>Green</td>
<td>Green</td>
</tr>
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</table>
The Board has the skills and capability to lead the Trust with an excellent Chair and experienced Non-Executive Directors (NEDs) and a very good team of Executive Directors (EDs). They have led the Trust ably and have kept it stable through a period of significant change on the Board. There is an impressive Council of Governors who understand their role and very good development for Board members and Governors. There is effective selection, induction and succession planning for the Board and a good appraisal system with personal development plans.

There is a strong quality culture led by the Board and leaders throughout the organisation prioritise safe, high quality, compassionate care. The Board has good visibility in the Trust with regular walkabouts and other activities to engage with staff. They seek to learn from patient’s views and complaints and encourage continuous learning and development for staff.

We have rated Question 3 Amber Green as there are two significant interims on the Board. We have rated Question 4 Amber Green as staff morale needs to improve. We have rated Question 5 Green as this area meets expectations with many elements of good practice.

**Process and Structure**

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<tr>
<th>Domain</th>
<th>Trust Rating</th>
<th>Our Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q6. Are there clear roles and accountabilities in relation to Board governance (including quality governance)?</td>
<td>Green</td>
<td>Green</td>
</tr>
<tr>
<td>Q7. Are there clearly defined, well-understood processes for escalating and resolving issues and managing performance?</td>
<td>Amber Green</td>
<td>Green</td>
</tr>
<tr>
<td>Q8. Does the Board actively engage patients, staff, governors and other key stakeholders on quality, operational and financial performance?</td>
<td>Green</td>
<td>Amber Green</td>
</tr>
</tbody>
</table>

It is an effective unitary Board with a clear Committee structure and the Audit Committee is one of the best that we have seen. Board business is well balanced between strategic and operational matters and quality issues have good coverage. The Council of Governors is excellent and operates very effectively and the Board engages well with them and values their contribution.
14. There is a strong performance management culture across the Trust based on three Divisions. There is an effective incident reporting system with good feedback and learning built in to it. There is a good risk management strategy and a Board Assurance Framework which is a dynamic document and is regularly reviewed by the Board.

15. Patient experience is taken seriously by the Board and there was good engagement with the current Patient and Public Involvement Strategy which is due to be refreshed soon. There are comprehensive internal communications and a lot of effort has been put in to staff engagement. There are positive relationships with external stakeholders and the Trust is a key player in collaborative projects in the local health economy.

16. We have rated Question 6 and Question 7 Green as both areas meet expectations with many elements of good practice. We have rated Question 8 as Amber Green because of the further work needed to address staff morale.

**Measurement**

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<tr>
<td>Q9. Is appropriate information on organisational and operational performance being analysed and challenged?</td>
<td>Green</td>
<td>Green</td>
</tr>
<tr>
<td>Q10. Is the Board assured of the robustness of information?</td>
<td>Green</td>
<td>Amber Green</td>
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17. The Board receives comprehensive performance reports and scrutinises the information by delving deeper in to the information. Financial reporting is detailed and transparent and performance information is used to hold services to account where necessary. Accountability is clear from Board to Service Lines and Service Line accreditation is effective.

18. The importance of data quality is recognised and audits carried out. Clinical coding appears to be very good. Both the internal audit programme and the clinical audit programme are robust.

19. We have rated Question 9 as Green because it meets expectations with many elements of good practice. We have rated Question 10 as Amber Green because of the need to improve Information Technology and ensure that all the Service Line Scorecards are up to date.
Areas for Further Attention

20. The Trust has experienced challenges in the past year particularly in A&E and with financial performance which were the subject of Monitor investigations. However, we were pleased to note that these have been completed and that Monitor are satisfied that the correct action is being taken to improve these areas. In our view the financial situation is now being very well managed and progress is being made with A&E with new leadership in that area.

21. There are a number of small areas that could be looked at and we include our comments and recommendations on these throughout the report. However, there are also two important challenges that the Trust is facing, in addition to A&E, which are both to do with relationships. The Trust is aware of both of them and is actively addressing them.

22. The first challenge relates to the staff morale which is low and it is important to improve this to ensure high quality patient care and the sustainability of the Trust. Low staff morale has resulted partly because the Trust has had difficulty in recruiting and retaining staff due to its close proximity to central London where people can earn higher salaries. This has led to high use of agency staff and permanent staff needing to constantly go that ‘extra mile’ to preserve the quality of the services. A further problem is the lack of resources because of the financial challenges faced by the Trust so that everyone has to do ‘more with less’. Action is being taken to address this and there has been some success with recruitment. The initial data from a recent national staff survey shows improvement in a number of areas including staff morale. This is encouraging and indicates that attention being given to this area is making a difference.

23. The second challenge relates to relationships with external stakeholders. These have improved over the past few months but we were told that historically the Trust was considered somewhat parochial and inward looking. This may have been a consequence of the drive for Foundation Trust status. The context for NHS providers has changed so much in the past few months that this external stakeholder engagement is now a fundamental requirement for all Trusts. This is being addressed successfully and the Trust is fully engaged with the local health economy and influencing developments. The challenge is to continue to develop these relationships positively and the Trust is well placed to do this.

24. In summary, our review found many areas of good practice and a few needing further consideration about which we have made recommendations. We set out the main points in the Executive Summary with more details in the sections covering each area of the Well-Led Governance Review Framework.