

KING'S HEALTH PARTNERS JOINT BOARDS MEETING

MINUTES OF THE KING'S HEALTH PARTNERS JOINT BOARDS HELD ON THURSDAY 9TH MARCH 2017 IN THE KHP MEETING ROOM, COUNTING HOUSE

PRESENT

Prof Ed Byrne Prof Sir Robert Lechler Ian Creagh Sir Hugh Taylor Amanda Pritchard Lord Kerslake Nick Moberly Roger Paffard Dr Matthew Patrick Lord Butler Dr Pamela Kirby Rt Hon Stephen Dorrell Prof Garret FitzGerald	President and Principal, KCL Executive Director, KHP Head of Administration, KCL Chair, GSSt NHS FT Chief Executive, GSSt NHS FT Chair, KCH NHS FT Chief Executive, KCH NHS FT Chair, SLaM NHS FT Chief Executive, SLaM NHS FT Non-Executive Director, KHP Non-Executive Director, KHP Non-Executive Director, KHP Non-Executive Director, KHP
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APOLOGIES
IN ATTENDANCE

Jill Lockett Prof John Moxham (Item 2) Joseph Casey (Item 2) Prof Anne Greenough (Item 3)	KHP Director, Performance & Delivery KHP Director of Clinical Strategy 2020 Delivery KHP Director of Education and Training
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1. Introductions and welcome

The minutes of the previous meeting was agreed as a true record.

2. KHP Value Based Healthcare

Ed Byrne welcomed Prof John Moxham and Joseph Casey to the meeting. John presented the progress and current thinking in the KHP Value Based Healthcare (VBHC) Programme. The main messages back were very positive: "I get it and I like it" was one of the comments. Overall, the KHP Joint Boards agreed with the team's assertion that the development of value based healthcare was core to what an academic health sciences centre should be doing. They also agreed that the proposed development of a 'value calculator' could be unique – lots of people are talking about VBHC, but no-one was aware of anyone who had achieved the stated ambition for the calculator. It was noted that this was a big undertaking and would require regular progress updates to the Joint Boards.

The Joint Boards agreed to the two requests to (a) hold a workshop in mid to late-April, and (b) that we could engage with potential funders throughout April and May.

The following specific points were raised:

- Local Authorities are potentially very important, but the main messages are health focussed. We need to be clear on how we are intending to involve Local Authorities. This might also widen the pool of wider potential funders.
- The focus on conditions could present a challenge – our focus appears to be defined by illness rather than defined by wellness. (Note – John provided a heart failure example to respond to this question.)
- We will need to demonstrate that we can and are using meaningful and comparable data, and that the IT is good enough to support this initiative.
- We will need to be clear on who the ‘value calculator’ is for and why, any potential conflicts between the different user groups, and how this dynamic tension would be overcome.
- We will need to demonstrate that our approach takes account of the reliability / unreliability of costing information. For example, how will we overcome the challenges that have been faced by the Carter Review.
- A calculator sounds quite precise, and we were asked whether this was in fact a “Value Estimator”.
- Mind and body is the biggest value opportunity, and we need to be really clear on how we are building this in to our approach. (Note – John replied that a quarter of people with heart failure are also depressed, and that IMPARTS would be involved with each of the pathways.)
- The world is moving from institution-based data to person-based data – we need to be clear how the approach that we take is mindful not only of what is possible now but also in the future.
- The Value Calculator could be a hugely useful management tool, but we will need to demonstrate how it is both learning from others but also distinctive (e.g., Intermountain have a very strong costing methodology, but the approach to outcomes is more limited).

Action: The KHP team to build the programme plan, calculator development tool and seek funding from a range of internal and external sources in order to establish a 5-year programme of work.

3. KHP Education Academy

Ed Byrne welcomed Prof Anne Greenough to the meeting. Anne presented the highlights from the past year of activities across the KHP Education Academy and Learning Hub. As ever, Clinical Academic Group (CAG) Education and Training leads had delivered considerable successes in delivering education across their teams, including:

Cancer CAG – Global exchange programme is now running across the KHP Comprehensive Cancer Centre with funding secured from partners in India for a joint summer exchange course.

CAMHs CAG – the Centre for Parent and Child Support has been commissioned in 2016/17 by over thirty NHS Local Authority, Higher Education institutions and non-governmental organisations to provide direct and licenses training to more than 1000 practitioners this year.

Psychosis – successful HESL bid for an early intervention in Psychosis workforce development programme with a certificate in CBT psychosis.

Liver, Renal, Urology, Gastro/GI Surgery CAG – successful award from the British Urology Foundation for training in robotic surgery across the UK. Fellowship award for survivorship pathway training and education in mind and body and pastoral support.

It was noted that the KHP Education Council under the chairmanship of Sir Hugh Taylor continues to place education and training centre stage in the partners' agenda. In discussion it was confirmed that the international offer, including the expansion of the KHP Learning Hub, is under development and will provide the platform for extending the KHP education offer worldwide.

It was noted that the Education Academy team are supporting some aspects of the Institutes education strategy developments, particularly in Haematology with a "case of the week" and e-learning webinars. It was noted that a number of the other Institutes still had much to do on developing their education strategies and further support to them would be welcomed.

Action: Prof Greenough and team to liaise with the KHP Institutes' teams on developing stronger education strategies.

4. KHP Institutes Update

Jill Lockett presented the progress and thinking across the KHP Institutes programme, noting the draft scope of investment required for 2017/18. It was confirmed that the original scope had been considered too high for the KHP CEOs' Action group and teams had been asked to make reductions to their programme plans for the year ahead. Both the Cardiovascular and Haematology teams plan to complete their Strategic Outlines Cases by end of the spring to share with partner Boards for gateway approval in May and June.

The Joint Boards noted the report and looked forward to hearing about the next stage of developments following SOC approvals and investment fund agreement in the Spring 2017.

Action: Jill Lockett to bring an update on progress and agreements to the next meeting of the KHP Joint Boards.

5. Director's Report

Robert Lechler presented his report for the previous month, highlighting the following:

- **Joint Boards away time:** the notes of the very productive away time were included in the board papers and included an updated communications strategy to support the next phase of partnership delivery.
- **KHP Research:** it was confirmed that the KCL health faculties had been awarded £62m in Q1&2 in 2016/17, a 20% increase on the previous year.
- **KHP Finance:** it was noted that the KHP budget is forecast to underspend by £170k in 2016/17 and it was agreed that this sum be carried forward into the following year. On this basis, the partner contributions would be £531k per partner for 2017/18. This was agreed subject to Director of Finance approvals.

Action: Jill Lockett to finalise the KHP Budget for 2017/18 and agree with Directors of Finance for approval.

6. AOB

None

7. Date of next meeting:

**KHP Joint Boards
Wednesday 31st May 2017
1.00pm to 3.00pm
KHP Meeting Room, Ground Floor, Counting House, Guy's**