<table>
<thead>
<tr>
<th><strong>Title</strong></th>
<th>Chief Executive’s Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Status</strong></td>
<td>The report summarises current points of interest locally and nationally.</td>
</tr>
<tr>
<td><strong>History</strong></td>
<td>Regular report to Board</td>
</tr>
<tr>
<td><strong>Board Lead(s)</strong></td>
<td>Sir Jonathan Michael, Chief Executive</td>
</tr>
<tr>
<td><strong>Key purpose</strong></td>
<td>Strategy</td>
</tr>
</tbody>
</table>
### Summary

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Oxford Academic Health Science Consortium launch</td>
</tr>
<tr>
<td>2</td>
<td>Patient Safety Award</td>
</tr>
<tr>
<td>3</td>
<td>Regional Trauma Centre</td>
</tr>
<tr>
<td>4</td>
<td>LETB consultation</td>
</tr>
<tr>
<td>5</td>
<td>Healthwatch Oxfordshire</td>
</tr>
<tr>
<td>6</td>
<td>Update on actions following review of Maternity Services</td>
</tr>
<tr>
<td>7</td>
<td>Local NHS Appointments</td>
</tr>
</tbody>
</table>
Chief Executive’s Report

This report summarises matters of current interest.

1. Oxford Academic Health Consortium - launch

The first meeting of the Oxford Academic Health Consortium took place on 9 July. Discussions with partner organisations were fruitful and resulted in a Statement of Intent setting out ways of working together. It is intended that by pooling resources and expertise the consortium will increase significantly the scale and quality of world class research and deliver the benefits more rapidly to patients. It will also focus on selected areas of work which will be determined by members to be significant health issues to which partners can contribute. The initial programme is to focus on the issue of dementia.

There will be a board consisting of the chairs and chief executives of the respective NHS partners, together with the Vice Chancellors and Heads of Division/Schools of Oxford Brookes University, the University of Oxford and the Leader and Chief Executive of Oxfordshire County Council.

A formal launch of the consortium is taking place at Headington Hill Hall on 17 September.

2. Patient Safety Award - barcode scanning of wristbands

Congratulations to Dr Paul Altmann, Chief Clinical Information Officer, and his team on their recent National Patient Safety award for 'Technology and IT to improve Patient Safety'. Their innovative design of the 'electronic radiology and laboratory medicine order communications system' combined, for the first time in the UK, an Electronic Patient Record (EPR) and Positive Patient Identification (PPID) technology - a system that enables clinicians to identify patients at the bedside by barcode scanning of their wristbands. The new system means that clinicians can scan a patient's wristband barcode, with a small hand held device, which then generates an instant test request label at the bedside. On the busiest days, the laboratories at the OUH can be sent up to 1,500 requests, and in January alone more than 35,000 were received from areas of the organisation using the system. The aim of this new system is to improve the process for requesting tests by swapping the paper forms and replacing them with an electronic requesting and labeling system. This can reduce the risk of samples being mislabeled, and also reduces the amount of time laboratory staff spend querying incomplete order information.

3. Regional Trauma Service - fully operational

As part of the Thames Valley Trauma Network, the Trust’s trauma unit received designation as a regional centre in April of this year. A phased expansion of capacity began in April which has now been completed. SCAS staff and OUH staff have agreed a
triage protocol so that ambulance crews can assess patients at the scene of an accident and decide whether or not their case is a major trauma. As admissions are anticipated to rise by around 30 patients per month staffing levels have been increased and three new ITU beds have been introduced. Additional staff include: eight nurses, three anaesthetists, one neuro-anaesthetist, two trauma doctors and one trauma consultant. The clinical and operational leadership of the Thames Valley Trauma Network has now been passed from the Strategic Health Authority to Oxford University Hospitals.

4. **Local Education and Training Boards consultation**

Thames Valley and Wessex Local Education and Training Boards (LETBs) are planning consultation events in the early autumn to further engage the wider stakeholder network in the development of the new education and training system. Clinicians and professional bodies, local authorities, commissioners, public health, education and innovation organisations will be invited to a workshop style conference. The dates are currently being agreed and will be published online at: 
[www.workforce.southcentral.nhs.uk/news_events/liberating_the_nhs.aspx](http://www.workforce.southcentral.nhs.uk/news_events/liberating_the_nhs.aspx)

Oxford University Hospitals is a member of the Thames Valley LETB which will be accountable to Higher Education England from April 2013.

5. **Healthwatch Oxfordshire**

From April 2013 the duties of the Oxfordshire LINk will pass to a new organisation - Healthwatch Oxfordshire, which will have further statutory duties:

- To provide information about services to patients and service users and to support them to make choices.
- Monitor how people experience the quality of health care and social care in the county.

There will be at least one Healthwatch Oxfordshire representative on the Oxfordshire Health & Wellbeing Board. This Board will include local councillors, the directors of public health, children’s and adult services and NHS Clinical Commissioners. They will be responsible for joining up all the Health and Social Care work of the County Council with the local NHS. A lead representative of Oxfordshire’s Local Healthwatch will be a member of this Board, representing the views of Oxfordshire people, ensuring people’s views and experiences are at the heart of decision making and planning.

From April 2013 Oxfordshire County Council will have contracted with a new organisation, which will support and speak for people who want to complain about the NHS. The Council has decided that initially this will be a separate contract from that for Healthwatch Oxfordshire. Complaints about social care will continue to be managed through the Local Authority Government Ombudsman process.
Healthwatch Oxfordshire will keep the involvement and monitoring functions of the current LINk, these are:

- promoting involvement in decision-making
- obtaining view
- monitoring health and care services
- making reports and recommendations
- carrying out Enter & View Visits.

The recent consultation on membership for Healthwatch England has been published at: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_132433.pdf. The Healthwatch England website is www.healthwatch.co.uk

6. **Update on actions following review of Maternity Services**

In February 2012, following a review of maternity services, the Trust Board requested that a progress report on actions completed be provided in September 2012 (TBC16/12). Over the past six months a significant number of improvements and developments have been implemented in Maternity including:

- Annual Workforce plans have been developed and reviewed for all key clinical staff groups.
- Appointment of a new Head of Midwifery: Ms Jane Herve will join the Trust on 10 September 2012.
- Appointment of a new Consultant Midwife: Ms Helen White joined the Trust in May 2012
- Improvements to the Horton Maternity Service: Appointment of 5th Consultant; expansion of Ultrasound services; Upgrade of Delivery Suite theatre and establishment of a Horton Obstetrics & Gynaecology Group.
- Improvements at the John Radcliffe Hospital: Appointment of replacement consultants resulting in improved level consultant presence on Labour Ward to 72 hours, with a further two appointments planned for later in the year; improvements in patient flows through relocation of ultrasound services and establishment of a maternity Assessment Unit.
- EPR Implementation: Following initial implementation challenges, a new Maternity EPR Project Group has been established with strong clinical membership to address the on-going implementation and to make improvements to the design/build issues.

In May 2012, SHA South Central Maternity & Newborn Programme’s Obstetric Group published a review entitled ‘Securing Safe & Sustainable Obstetric Services in South of England’. Specifically for this Trust, the review identified that the Trust was meeting the recommendation for consultant labour ward cover at the Horton Hospital but that the John Radcliffe Hospital needed to continue to improve its level of cover (as described in the bullet point summary above). The review offered a number of potential solutions for consideration.
The Quality Committee will receive a more detailed paper on all of the issues described in this summary at its meeting on 25 September 2012.

7. **Local NHS Appointments**

Matthew Tait has been appointed as the Local Area Team (LAT) Director for the Thames Valley area by the NHS Commissioning Board. Matthew will continue in his role as Chief Executive of the NHS Buckinghamshire and Oxfordshire Cluster until it is disbanded in March 2013. However he will take up his role as LAT Director in October 2012 and for a short time he will undertake this dual role.

The Oxfordshire Clinical Commissioning Group has announced the appointments of:

- Mr Ian Busby - Chairman
- Professor Louise Wallace – Lay Member
- Mrs Ros Avery – Lay Member.

**Sir Jonathan Michael, Chief Executive**

**September 2012**