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Chief Executive’s Report
This report summarises matters of current interest.

1. Strategic Partnerships

Oxford Academic Health Science Network
The AHSN has submitted a progress report to NHS England highlighting its achievements so far as well as a range of planned activities planned for the first quarter of 2014.

In the last three months the AHSN has made significant progress including:

- Signing a Licence agreement with NHS England,
- Mobilising a core team and recruiting a number of key individuals,
- Agreeing the overall governance structure with the Management Board,
- Developing a set of Funding Guidelines and a Funding Agreement to formalise the support to be offered to Clinical Networks, Programmes and Themes,
- Good engagement with Clinical Networks to mobilise them,
- Continuing good stakeholder and public engagement via the sponsorship of a range of local events and a number of well attended locality events.

Plans for the next quarter include:

- Formally launching Clinical Networks
- Developing and agreeing the Business Plan for 14/15
- Completing the mobilisation of the core team
- Launching a trial of collaborative working tools and infrastructure to support the networks and programmes
- Agreeing the 5-10 innovations that the innovation adoption programme will focus on for 2014/15
- Expanding and developing the stakeholder and public engagement activity

AHSC update

Oxford was awarded Academic Health Science Centre (OxAHSC) designation on 29 November 2013. The application from a partnership of Oxford University Hospitals, Oxford University, Oxford Health and Oxford Brookes University, led by Professor Sir John Bell, received overwhelmingly positive feedback from the international panel who judged the bid. I would just like to draw your attention to a few comments of note under the following headings:

- **Volume, critical mass and world-class excellence in basic medical research, and the ability to translate findings from basic research into excellent translational, clinical and applied research across a range of interests.** The Panel agreed that these were all extremely strong and excellent. The partnership also demonstrated world-class recognised excellence in translational research and in the application of findings. The national and international collaborations were also very strong.
- **Track record of translating scientific advances into patient benefit, in order to improve patient care and healthcare delivery.** The proposal demonstrated an excellent track
record of translating scientific advances into patient benefit, in order to improve patient
care and healthcare delivery.

- **Strength of the strategy for the proposed AHSC.** The strategic plan was considered
  strong, well-structured and very convincing and clearly built on the strength and
capabilities of the partners.

- **Strength and appropriateness of strategic alignment of the NHS provider/university
  partnership’s, governance and leadership arrangements.** This was good and well
  described in the application. The Panel was particularly impressed that the team had
demonstrated a convincing functioning partnership and that the role of Oxford Brookes
in the partnership had been clearly articulated. The importance of the Advisory Board
in ensuring delivery of the aims and objectives of the AHSC was highlighted.

- **Track record of, and capacity for, contributing to growth and the economy through
  partnerships with commercial life science organisations.** The proposal demonstrated a
  very good track record. The Panel also acknowledged the wide range of potential
industry partners and particularly welcomed the ambitious goals and clear deliverables
to address weaknesses in current Life Science business models.

**Oxfordshire CCG**

OCCG have been consulting on their commissioning strategy for Oxfordshire and have
held a number of public meetings around the county. Senior staff from the OUH have
attended all of these meetings, the final of which was 7 January. Input from the public will
be considered as part of the revised commissioning strategy, a draft of which will be going
to their Board on Thursday 30 January.

In October OCCG proposed changes to the leadership model for Oxfordshire Clinical
Commissioning Group (OCCG) which would be based on a clinical chairman and a
managerial Chief Executive and Accountable Officer with a lay member as Deputy
Chairman. The Board has agreed an appointment process for a new chairman and have
appointed Ian Wilson as interim chief executive.

2. **New senior appointments**

**Chief Nurse**

I am pleased to announce the appointment of Catherine Stoddart as the Trust’s new
Chief Nurse. Catherine is currently the Chief Nurse & Midwifery Officer for the State of
Western Australia, based in Perth. She brings a wealth of experience gained from
voluntary work for the Global Health Alliance as the country manager for Tanzania and
a secondment with Children’s Hope into Action (CHIA), a Non-Governmental
Organisation providing services to disadvantaged children in Vietnam. Catherine holds
a MBA, MSc and Bachelor of Science in Nursing and is currently completing a PhD.
Catherine will be relocating from Australia and is expected to take up her appointment
in March 2014.

**Director of Organisational Development and Workforce**

I am also pleased to announce the appointment of Mark Power as the new Director of
Organisational Development and Workforce. Mark is currently Director of Workforce
and Human Resources for both the Dorset County Hospital NHS Foundation Trust and
Yeovil District Hospital NHS Foundation Trust. He comes with a wealth of people
management experience gained from the NHS, electronics industry and Royal Navy. Mark will be taking up his appointment on 19th February 2014.

3. CQC inspection

As you will know the date for the CQC inspection has been announced for 24 February. A number of practical preparations will take place over the coming weeks to ensure that all staff who meets the inspectors will be able to make the most of the opportunity to demonstrate the work they do. All departments and clinical teams are engaged with the preparations. More information will be made available on the intranet and Trust website.

4. NHS Safer Hospitals Technology Fund

Two pioneering technology projects developed at the OUH have been awarded £750,000. An iPad-based early-warning system for patient monitoring and an “electronic prescription” service that will allow patients to leave hospital sooner, both won funding from the Department of Health Safer Hospitals, Safer Wards NHS Technology Fund.

The System for Electronic Notes Documentation (SEND) project will allow the iPad-based patient record system to be rolled out across all adult wards at the Trust. The project replaces paper charts and means medical staff use computer tablet technology to record and evaluate patients' vital signs. The system alerts staff to early signs of patient deterioration instantly and reliably, and allows patient data to be shared with specialists across the hospitals.

The “end to end electronic prescribing” project will speed up the preparation of prescriptions for those ready to leave hospital. The system will link electronic patient records directly to the hospitals’ pharmacy robot. This means that when a doctor on the ward, or in outpatient clinics, prescribes medicine for a patient to take home, it will be prepared, packed and dispatched automatically by the robot. The system, the first of its type in the UK, will enhance safety and cut prescription turnaround time by an hour, meaning patients can leave earlier and beds become available sooner.

5. Staff recognition awards

The annual OUH Staff Recognition Awards took place at Blenheim Palace in November to mark the outstanding achievements and dedication shown by our staff from across the Trust. Almost 500 nominations were received from staff on the four hospital sites and were carefully considered by a panel for their outstanding achievements in seven categories. In addition, this year the Oxford Mail invited the public to nominate staff for "Hospital Heroes" awards in team and individual categories.

6. Urgent care review

In November the National Medical Director of NHS England, Sir Bruce Keogh proposed a fundamental shift in provision of urgent care, with more extensive services outside hospital and patients with more serious or life threatening conditions receiving treatment in centres with the best clinical teams, expertise and equipment. The end of Phase 1 report can be found here. Phase two of the review is now under way.
7. Healthcare UK

Professor Rory Shaw has been appointed as Medical Director of Healthcare UK, leading the newly established NHS International Development Team. Healthcare UK is a joint initiative of the Department of Health (DH), UK Trade and Investment (UKTI) and NHS England. The aim is to strengthen ties between the NHS and foreign governments and healthcare providers, supporting NHS organisations to capitalise on overseas opportunities.

8. New GP contract agreed for 2014/15

Under the new contract GPs’ new responsibilities will include:
- offering patients same-day telephone consultations;
- offering paramedics, A&E doctors and care homes a dedicated telephone line so they can advise on treatment;
- coordinating care for elderly patients discharged from A&E;
- regularly reviewing emergency admissions from care homes to avoid unnecessary call-outs in future; and,
- monitoring and reporting on the quality of out-of-hours care.

More details of the contract are available here.

9. First UK rare diseases strategy launched

The UK’s first strategy to help build understanding of rare diseases and boost research to find effective treatments and therapies was launched at the end of November. Details of the strategy can be found here.

10. New Year’s honours

The Trust Board will wish to offer its congratulations to Professor Peter Ratcliffe, FRS, Nuffield Professor of Clinical Medicine, Head of the Nuffield Department of Clinical Medicine, and Fellow of Magdalen College, who was knighted for services to clinical medicine. Professor Ratcliffe’s research focuses on understanding the mechanisms by which cells monitor and respond to hypoxia (low oxygen levels). Hypoxia is an important component of many human diseases including cancer, heart disease, stroke, vascular disease, and anaemia. He is also the director of the Target Discovery Institute at Oxford University, a major new collaborative research initiative which aims to link recent advances in genetics, genomics and cell and chemical biology for improved drug target discovery.

11. Professor Ted Baker

I would like to congratulate Professor Baker on his appointment, by the Care Quality Commission, to the position of Deputy Chief Inspector of Hospitals, with specific responsibility for the inspection of acute hospital services across England. Three other Deputy Chief Inspectors have been appointed with responsibility for Mental Health services, Community Health services and Ambulance services. Professor Baker will be joining the CQC on 1st April 2014.

Sir Jonathan Michael, Chief Executive
January 2014