Trust Board Meeting: Wednesday 14 January 2015
TB2015.12

<table>
<thead>
<tr>
<th>Title</th>
<th>Update on Foundation Trust Application</th>
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| Status | For information. |
| History | Regular updates to the Board. |

| Board Lead(s) | Andrew Stevens, Director of Planning and Information |
| Key purpose | Strategy | Assurance | Policy | Performance |
Executive Summary

1. This paper provides an update on the Trust’s application for authorisation as an NHS Foundation Trust (FT).
2. It gives an overview of assessment by Monitor of the Trust’s quality governance, strategy, plans to achieve access and outcomes standards and of its financial plans.
3. It describes the response given by the Trust to questions in these areas and explains progress in preparing for elections to the Council of Governors.
4. The purpose and anticipated content of a review meeting with Monitor on 12 January are described.

Recommendations

5. The Board is asked to:
   5.1. **Note** progress.
   5.2. **Receive** updates on the 12 January meeting with Monitor and on nominations for election to the Council of Governors.
   5.3. **Consider** any further available information on the anticipated timetable for authorisation.

Andrew Stevens
Director of Planning and Information

January 2015
Foundation Trust update

1. Purpose

1.1. This paper provides an update on progress in the Trust’s application for authorisation as a NHS Foundation Trust (FT).

2. Assessment by Monitor

2.1. The main stage of assessment by Monitor began on 7 November. Since the update provided to the Board in November 2014, assessment of the Trust’s application by Monitor has consisted of several distinct but related elements.

Quality governance

2.2. Following their assessment of the Trust’s arrangements for quality governance between August and October, and as reported to the Board in November, Monitor proposed a number of areas for improvement in systems and processes (Box 1) in order to meet the expectations set out in Monitor’s Quality Governance Framework (QGF). After consideration and agreement of proposals by Quality Committee on 10 December, the Chief Executive wrote to Monitor with proposed changes on 11 December, subject in some cases to approval by the Board at its January meeting.

<table>
<thead>
<tr>
<th>QGF Question</th>
<th>Area of improvement (examples)</th>
<th>Action taken (examples)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A</td>
<td>Clarify quality goals and their monitoring through a ‘refresh’ of the Quality Strategy</td>
<td>Revised Quality Strategy recommended to the Board for agreement.</td>
</tr>
<tr>
<td>1B</td>
<td>Accountability for and assurance on the quality impact of Cost Improvement Programme schemes</td>
<td>Mechanism agreed by Quality Committee (QC) to test and monitor the ‘aggregate’ impact of CIP schemes. Reporting to Board of quality metrics at Divisional level.</td>
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<tr>
<td>3A</td>
<td>Roles and accountabilities in relation to quality governance</td>
<td>Revised sub-committees of Clinical Governance Committee (CGC), including a Clinical Effectiveness Committee. Improved arrangements for QC to gain assurance from work by CGC. Review by end March of effectiveness of reporting to Board by its committees.</td>
</tr>
<tr>
<td>3B</td>
<td>Processes for escalating and resolving quality issues</td>
<td>Revised policies agreed by TME and endorsed by Quality Committee. Training programme from February 2015. Rapid alert system to raise awareness of serious incidents.</td>
</tr>
<tr>
<td>QGF Question</td>
<td>Area of improvement (examples)</td>
<td>Action taken (examples)</td>
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<tr>
<td>4B</td>
<td>Control measures on the accuracy of quality data</td>
<td>Regular updates to the Board on data quality. Review from February of the effectiveness and impact of the clinical audit programme.</td>
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</tbody>
</table>

**Strategy**

2.3. Meetings with the Monitor assessment team have looked at the Trust’s clinical services strategy, associated service changes and developments, and at the planned capital programme.

2.4. The involvement of key commissioners has also been examined and interviews have been held with Oxfordshire CCG and NHS England.

2.5. Risks and opportunities in highly specialised services have been discussed, as has the approach being taken by the Trust to working with local commissioners and providers on the development of out-of-hospital services.

2.6. The nature and extent of the Trust’s working relationship with the University of Oxford has also been considered.

**Access and outcomes**

2.7. Following a re-submission of the Trust’s anticipated performance against NHS access and outcomes standards for 2014/15, a detailed discussion took place about the Trust’s plans to address A&E waits, cancer waits and Referral To Treatment (RTT) times.

2.8. In all cases, Monitor have requested the plans agreed by the Board and sought to understand the Board’s involvement in agreeing plans and monitoring progress.

**Financial model**

2.9. The Long Term Financial Model agreed by the Board most recently in October and November 2014 has been assessed by Monitor’s assessment team in some detail. 159 related information requests had been responded to by Christmas.

2.10. During November, the Monitor team agreed to ‘lock down’ the financial model, having tested the assumptions underpinning it and its internal consistency.

2.11. Meetings focused on cost improvements, the workforce plan, contracting and estates, capital expenditure and IT have sought to clarify the Trust’s approach to managing these areas of risk to its future financial plans.

2.12. A specific discussion was held following the publication of proposals for the NHS tariff in 2015/16 to understand the anticipated impact on OUH’s plans. The Trust was able to explain that the anticipated impact on its income in 2015/16 was not material for that year, that the impact in future years would be more significant and that it had addressed tariff changes in its financial ‘downside’ modelling for subsequent years.
3. **Executive Challenge**

3.1. A meeting takes place on 12 January with Monitor's Executive Director of Provider Appraisal. This involves OUH’s Vice Chairman, Chief Executive, Chief Nurse, Director of Clinical Services, Director of Finance and Procurement, Medical Director and Director of Assurance.

3.2. This ‘Executive Challenge’ meeting has been anticipated since November. It is intended to test a number of issues to enable Monitor to determine a timetable for authorisation of OUH as a foundation trust. This meeting is expected to focus on three main areas:

3.2.1. Progress made following the Quality Governance Framework assessment.
3.2.2. Delivery of access and outcomes standards by the Trust.
3.2.3. Findings from the assessment to date and any further action needed before authorisation.

3.3. Information will be provided for the Board on any available conclusions from this meeting.

4. **Forming a Council of Governors**

4.1. OUH is working to establish the Council of Governors that it will need in order to function as a foundation trust.

4.2. A timetable for elections was publicised in November, with key dates as below.

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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<tbody>
<tr>
<td>Notice of Election</td>
<td>Monday 1 December 2014</td>
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<tr>
<td>Deadline for Receipt of Nominations</td>
<td>Monday 12 January 2015</td>
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<tr>
<td>Publication of Statement of Nominations</td>
<td>Tuesday 13 January 2015</td>
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<tr>
<td>Deadline for Candidate Withdrawals</td>
<td>Thursday 15 January 2015</td>
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<tr>
<td>Notice of Poll/Issue of Ballot Packs</td>
<td>Tuesday 27 January 2015</td>
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<tr>
<td>Close of Poll – 5pm</td>
<td>Thursday 19 February 2015</td>
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<tr>
<td>Declaration of Result</td>
<td>Friday 20 February 2015</td>
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</tbody>
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4.3. Notice of election was sent to the Trust’s 8,300 public and 11,500 staff members in early December, with a roughly even number receiving this by email or by post.

4.4. The timetable and information about how to apply for election were sent to public members with copies of *OUH News* and by email to those members for whom email addresses are held. It was included with briefings for staff and OUH-employed staff received information about how to apply with November payslips.

4.5. Invitations to nominate governors by 20 February were sent to relevant organisations and four (of eight) had provided nominations by Christmas 2014.
4.6. The names of those who will form the Trust’s Council of Governors will be known on 20 February 2015.

4.7. A governor induction programme will follow, with content drawn from the national programme for FT governors with some local elements. The Foundation Trust Programme Board considered proposals for this at its November meeting and a timetable for induction is to be agreed by the Programme Board in January in order that those standing for election can be advised of it.

5. **Recommendations**

   The Board is asked to:

   5.1. **Note** progress.

   5.2. **Receive** updates on the Executive Challenge meeting and on nominations for election to the Council of Governors.

   5.3. **Consider** any further available information on the anticipated timetable for authorisation.

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**Andrew Stevens**  
**Director of Planning and Information**

Report prepared by:

**Jonathan Horbury**  
**Foundation Trust Programme Director**

**January 2015**