Chief Executive’s Report

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## Summary

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Chief Executive’s Report

This report summarises matters of current interest.

1. Oxfordshire joint patient transfer plan

Since the joint Oxfordshire patient transfer plan commenced, hundreds of patients waiting for rehabilitation and social care packages have moved from acute beds or community hospital beds to intermediate care beds in care homes across the county.

The total number of patients delayed in OUHFT beds has dropped from 87 on 7 April to 57 as of 23 June, 2016.

The transfer plan enabled us to release beds for a temporary period of time. Any recommendation to reduce the number of beds on a permanent basis will be discussed with the county’s Health Overview and Scrutiny Committee before decisions can be made.

To help us improve the discharge of patients waiting for reablement or domiciliary care in their own homes, we identified the need for the system to provide an additional 1,600 hours of home care each week. As a registered social care provider, OUH held a recruitment day at the John Radcliffe Hospital on 14 May. Following this successful recruitment drive, the Supported Hospital Discharge Service made conditional offers to candidates subject to dedicated checks made within the recruitment policy.

As a result, 61 candidates are now going through the recruitment process and 16 already have planned start dates. The first new member of staff from the open day joined the Trust on 4 July. If all of the successful candidates join us, we hope to have an additional 54 whole time equivalent staff to support our patients in their own homes in the community.

2. Oxfordshire Sustainability and Transformation Plan

During the summer, patients and the public are being involved in developing proposals to transform health and care services in the county. We are working with other health providers as part of the Oxfordshire Transformation Programme to develop new ways of providing care to provide more services closer to home, reducing the reliance on hospital-based care. To help us develop our joint plans and ideas for how services could be provided in the future, the Oxfordshire Clinical Commissioning Group is organising a series of engagement events.

A large event was held on 6 June involving many local people interested in healthcare in Oxfordshire as the start of this public engagement. It gathered views on ways to use resources to develop sustainable, high quality and affordable care now and in the future. During July, a series of public drop-in events entitled The Big Health and Care Conversation are being held in a number of the county’s towns. Further details of these events can be found on www.ouh.nhs.uk

As part of an Oxfordshire-wide engagement process on new models of healthcare, our staff and the public are contributing views on what services could be provided at the
Horton General Hospital in Banbury, how they could be delivered and what buildings and facilities we need to provide good patient care for the future.

This OUH strategic review of the Horton is feeding into the wider healthcare transformation programme for Oxfordshire, by looking at the opportunities and challenges facing the Horton General Hospital, as well as the potential to accommodate further services there in the future. We are working closely with the Community Partnership Network (CPN) which was set up to provide a forum for staff at the Horton, patients, elected representatives, local GPs and other interested parties from the wider Banburyshire area to come together to discuss all aspects of healthcare. At the moment, clinical groups are still discussing possible options and the challenges they face. No proposals or decisions have been made yet.

Engagement is focusing on possible new models of service provision, and the principles around potential changes. If any significant changes are proposed as part of the Oxfordshire Transformation Programme, then formal public consultation will follow later in the year.

3. OUH Executive Directors movements

On behalf of the Trust Board, I would like to thank Mark Mansfield, out-going Director of Finance and Procurement for his dedicated work and service to the Trust over past five years. Mark finished his tenure in May and we all wish him all the best in his future endeavours.

The process of recruiting a new Chief Finance Officer is well advanced, and the Trust hopes to be in a position to make a public announcement soon.

It is also my pleasure to welcome Peter Knight, who will take up his role on the board as Chief Information and Digital Officer on 22 August. Peter is joining us from the Research and Development Directorate of the Department of Health.

Our current Director of Planning and Information, Andrew Stevens, will be continuing his valuable contribution to our Trust as Director of Strategy and Planning.

4. Clinical contracts for 2016/17

The Trust and its partners in the Oxfordshire health system agreed that, as part of the 2016/17 planning and commissioning round, they would seek to agree the most effective contractual framework for delivering the system transformation that is needed to respond to the future health needs of the population and the pressures faced by the NHS and social care. The key focus of these discussions is the transformation of the urgent care pathway for the frail elderly. The agreement will also need to ensure that activity risk associated with the rest of the services provided by the Trust is managed in a robust and fair manner.

To allow time for these discussions to take place, an interim contract has been agreed covering the first three months of the year. This included agreement of key contractual terms such as CQUINS, the payment that the Trust receives for achieving specific quality goals and standards.
The Trust has signed its contract with NHS England which principally covers the Trust’s specialised services.

5. Statement from OUH on EU Referendum

All our staff bring professionalism, skills and care to our Trust and the NHS which are valued and welcome. Understandably, the recent decision of the United Kingdom in the referendum has created concern, both for our staff and for our patients, about our ability to recruit and retain staff, and we would like to reassure them.

We continue to recruit staff from other European countries; we are currently in the process of recruiting 70 more nurses from Spain and they will be arriving soon.

The Secretary of State for Health has stated the importance of the contribution of staff from across the world, including the European Union, and this has also been recognised by the Chief Medical Officer and Chief Nurse from the Department of Health.

We will update our staff and the public on any implications for them as and when we become aware of any changes that might affect them. The government has stated that there are to be no immediate changes in circumstances for international citizens living in the UK.

6. Final Report Published Re: Incident in the Oxfordshire Breast Screening Service

Following notification to the Trust Board of an incident in the Oxfordshire Breast Screening Service (OBSS), the Trust has now published the final report, available on our website, following the review of the incident.

The report provides an account of the incident in which a total of ten women were found to have had a delayed diagnosis of breast cancer after assessment by a single doctor. Since March 2014, following notification of this incident, women attending the assessment clinic now have their imaging reviewed by two radiologists. This is best practice and reduces the risk for human error which was the underlying cause of the incident.

The primary focus of the Trust’s incident investigation was patient safety and recall. A review of the individual doctor’s screening assessment practice was also completed. The doctor concerned has not undertaken assessments since the investigation began and has not returned to this element of clinical practice within the Trust.

Following the patient recall process, the Oxfordshire Breast Screening Service underwent a routine Quality Assurance review by the National Breast Screening Service. There were no concerns about outcomes for any other women who went through the breast screening service. It is monitored by external assessors who rate it as a unit which performs well and women can be confident about the service they receive.

While it has taken longer than we would have hoped to publish the Trust’s final position in respect of the care we delivered, it has always been our priority to thoroughly investigate
and to learn from this incident. Specific learning and actions have already been incorporated into standard practice.

7. **NIHR Oxford Biomedical Research Centre bid update**

The Trust, with the University, has recently submitted its full application in the bid to The National Institute for Health Research (NIHR) for a further five years of funding through the NIHR Biomedical Research Centres Competition. The application includes a detailed written proposal, and a five-minute film about our facilities and infrastructure to support translational research, for which I was interviewed along with colleagues from across the BRC. We will now attend an international interview panel on 18 July.

The results of the funding competition will be announced in September.

8. **Oxford Academic Health Science Network - The Hill Launch event**

The Hill Launch Event by Oxford AHSN took place on 22 June to introduce Oxford’s new digital healthcare ideas lab, for patients, clinicians, healthcare professionals, designers, developers, researchers, business leaders and investors. It is a forum to nurture and inspire solving healthcare challenges using digital technology.

The Hill Launch Event is the first of a series of events to be held over the summer of 2016. More information can be found on the AHSN website [http://www.oxfordahsn.org/](http://www.oxfordahsn.org/)

Dr Bruno Holthof  
Chief Executive  
July, 2016