

Trust Board meeting: Thursday 1 November 2012
TB2012.97

Title	Chief Executive's Report
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Status	The report summarises current points of interest locally and nationally.
History	Regular report to Board

Board Lead(s)	Sir Jonathan Michael, Chief Executive			
Key purpose	Strategy	Assurance	Policy	Performance

Summary

1	NHS Commissioning Board - update
2	Safe and Sustainable - review
3	NHS Property Services Ltd.
4	Oxford Academic Health Science Network - bid
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Chief Executive's Report

This report summarises matters of current interest.

1. NHS Commissioning Board - update

The NHS Commissioning Board's regional and local area teams form part of the Board's operations directorate, headed up by Ian Dalton, the Chief Operating Officer and Deputy Chief Executive. The following people have so far been appointed to the senior positions in the NHS Commissioning Board's regional presence in the South of England, headed up by the Regional Director for the South, Andrea Young:

- Director of Operations and Delivery – Dominic Hardy
- Regional Chief Nurse – Liz Redfern CBE
- Regional Finance Director – Charlotte Moar
- Regional Director of HR and Organisational Development – Steven Keith

The regional office of the Commissioning Board will be based in Reading, with a presence in Taunton and Horley.

The Local Area team for Thames Valley is headed by the Director, Matthew Tait. Other members of the team include:

*Louise Watson	Director of Operations and Delivery
*Jan Fowler	Director of Nursing
*Vacancy	Director of Finance
*Geoff Payne	Medical Director
*Helen Clanchy	Director of Commissioning

While the Trust will primarily relate to the Thames Valley LAT it is important to note that different LATs will have specific lead roles in relation to certain services. Of particular importance to the Trust is the fact that it will be the Wessex LAT which will be leading on the commissioning of specialist services. Interim arrangements for the transition period are out outlined in the table below.

Summary of responsibilities – October 2012

Activity	Board Accountable	Officer Accountable	Lead in South of England	Employing Organisation of teams
2012/13 Commissioning Delivery and Performance	PCT	LAT Director	LAT Director	PCT
	SHA	Chief Executive	Chief Operating Officer/ NHS CB Regional Director/ Director of Finance	SHA
2013/14 Commissioning Design and Planning	NHS CB	NHS CB Chief Operating Officer	NHS CB Regional Director	PCT / SHA
Commissioning Development and Authorisation	NHS CB	NHS CB National Director of Commissioning Development	NHS CB Regional Director	PCT / SHA
2012/13 Provision delivery and performance	SHA	Chief Executive	Chief Operating Officer/ NTDA Delivery and Development Director/ Director of Finance	SHA
2013/14 Provision Design and Planning	NTDA	NTDA Delivery and Development Director	NTDA Delivery and Development Director	SHA
Pipeline Decisions	NTDA	NTDA Delivery and Development Director	NTDA Delivery and Development Director	SHA
Workforce planning, education and training	HEE (and shadow LETBs)	SHA Chief Executive	Director of Workforce Development / HEE Director	SHA
Public Health (until January 2013)	SHA	Chief Executive	Director of Public Health	SHA
Closedown	SHA	Chief Executive	Director of Corporate Affairs	SHA

2. Safe and Sustainable Review of Paediatric Cardiac Surgery

On 22 October the Secretary of State for Health asked the Independent Reconfiguration Panel to undertake a full review of the Safe and Sustainable recommendations for the provision of services for paediatric cardiac surgery. He has ordered a review into the decision to close three children's heart surgery units at Leeds General Infirmary, Glenfield Hospital in Leicester and the Royal Brompton in West London. The panel will decide by February whether it believes the recommendations to close the units will streamline paediatric heart services. The review comes after councillors in Lincolnshire and Leicestershire contacted Mr Hunt with concerns about the closure of the unit at Glenfield Hospital in Leicester.

Earlier this month a campaign group which is fighting to keep the Leeds unit open launched legal proceedings against NHS officials who made the decision.

Save Our Surgery (SOS) has filed a request for permission for a judicial review against the decision made by the Joint Committee of Primary Care Trusts (JCPCT) to close the unit.

3. NHS Property Services Ltd

The new company was set up by the Department of Health to develop and manage more than 3,500 assets covering that part of the existing Primary Care Trust estate that will not transfer to NHS community care providers under the healthcare reform plans set out in the Health and Social Care. The new organisation is a private limited company wholly owned by the Secretary of State for Health. It will own the legal title to assets worth £5 billion and will employ more than 3,000 staff across England. Core functions will include strategic estates management, property management, operational estates management, facilities management and dedicated back office support. This is not expected to affect our own estate holding either prior to or post Foundation Trust authorisation.

4. Oxford Academic Health Science Network

The Oxford University Hospitals NHS Trust has supported the preparation and submission of the Oxford Academic Health Science Network's prospectus for designation from 1 April 2013. The work has involved partners from the NHS, from universities, from local authorities, from local business networks and the life science industry within Bedfordshire, Berkshire, Buckinghamshire, Milton Keynes and Oxfordshire. This link takes you to the full prospectus. <http://www.ouh.nhs.uk/news/ouh-news/documents/ahsn-application.pdf>. The Network's vision is to: deliver best care through a sustainable population-centred system that ensures equity of access for our patients using continuous learning and the research-focused Network, which leads to new opportunities to create wealth by healthcare innovation.

5. Acute Vascular Imaging Centre (AVIC) official opening

On 15 October the Trust and the University of Oxford celebrated the official opening of AVIC, the £13m research centre which aims to improve the early treatment of heart attack and strokes by understanding more about what is happening in the patient's heart or brain tissue at the time of the attack. AVIC has both a state-of-the-art catheter lab and an MRI scanner. The cathlab offers X-ray imaging of the blood vessels causing the heart condition or stroke while treatment is targeted to the narrowed or blocked artery. The 3 Tesla MRI scanner offers newer imaging techniques that can show the blood flow in different blood vessels for better diagnosis and characterisation of the problem. Professor Robin Choudhury is the clinical director for the centre, which is based on level 2 of the John Radcliffe Hospital, within the Heart Centre and next to the Emergency Department.

6. Midwifery-led Maternity Units

On 18 October the Trust took the decision to suspend, with immediate effect, births at the Cotswold Maternity Unit based in Chipping Norton. An internal review is underway following concerns around working practices raised by staff and women using the unit. A number of actions have already been taken and the suspension of births will enable a full review of the unit to be completed. Jane Hervé, Head of Midwifery at the Trust, has been asked to lead the review into all aspects of the unit's working practices.

The unit will remain staffed and open during the day to provide women and their families with antenatal support, breast feeding advice and support, babies hearing tests and postnatal care. Women from Chipping Norton and the surrounding areas will continue to have a choice of where to give birth and these include:

- Horton General Hospital, Banbury
- Consultant-led unit at the John Radcliffe Hospital, Oxford
- Spires Midwifery-led unit at the John Radcliffe Hospital, Oxford
- Home birth
- South Warwickshire Hospital

Following completion of building works and recruitment to vacant posts, the midwifery-led unit at Wantage Community Hospital will reopen shortly. The unit, which has been closed for births since February of this year, will be reopened from 26 November, 2012.

7. Oxehealth launched

A new Oxford spin-out company, *Oxehealth*, launched by Oxford University's Institute of Biomedical Engineering, will allow a patient's health to be monitored remotely using a webcam and a software application. The software, validated in a clinical study in the Oxford Kidney Unit at the Churchill Hospital, will detect the patient's heart rate, respiratory rate and oxygen saturation even in artificial light, without the need for any physical wired connection or additional hardware. Professor Tarassenko, Director of the Institute of Biomedical Engineering, and a member of the Biomedical Research Centre's Bio-informatics theme, describes the development as transforming the ubiquitous webcam, into a non-contact sensor for monitoring the most important vital signs. This development has been made possible through a close collaboration with biomedical scientists in the University and clinicians in Oxford University Hospitals NHS Trust. This is the first spin-out company directly linked with the Trust and another example of the many innovative opportunities which the partnership between the Trust and the University is making possible.

8. Chief Scientific Officer's visit

I have received a letter from Professor Sue Hill, Chief Scientific Officer Department of Health warmly thanking us for hosting her visit to the Trust in October. She was pleased to meet so many healthcare scientists and particularly pleased with her tour of the radiotherapy unit at the Churchill, organised by Dr Claire Blessing. She was impressed with the way in which the unit was designed, the operating model, and the truly multi-professional way of working.

On the day more than 300 staff attended Professor Hill's lecture on *Modernising Scientific Careers in the NHS*. The aim of her visit was partly for us to showcase the activity of the 700 healthcare scientists in this Trust as well as to celebrate their contribution and achievements. As a group of professionals representing medical physicists, clinical engineers to laboratory medicine and others, they account for @5% of the workforce but contribute to over 80 per cent of all patient diagnoses.

9. Cancer Radiotherapy Innovation Fund

Almost 8,000 more cancer patients a year could benefit from the roll-out of an advanced radiotherapy technique with fewer side effects, thanks to a £15 million investment announced by the Department of Health. The Cancer Radiotherapy Innovation Fund will expand NHS capacity to deliver life-saving advanced radiotherapy techniques by April 2013.

The money will be used to speed up the use of Intensity Modulated Radiotherapy (IMRT), building on the success of the Cancer Drugs Fund which has already benefited over 21,000 patients.

The fund will allocate £150,000 revenue to each major tertiary centre to support the national standard to treat 25% of patients with IMRF. In addition, trusts will be invited to bid individually for equipment or IT purchases to support the achievement of the national standard. The Trust is preparing a bid for rapid arc technology which would enable the Trust to deliver against the 25% standard in 2013.

10. Research Partnership Investment Fund

The University of Oxford was successful in its two bids to the Research Partnership Investment Fund established by the Higher Education Funding Council [HEFCE], with support from the government. Both projects are at their very early stages and there is much work to be done to bring them to fruition.

The first project will support the establishment of a new centre for targeted cancer research on the Churchill Hospital site, to develop, test and implement personalised treatments, diagnosis, imaging and therapy. The project will be a partnership with the Oxford University Hospitals NHS Trust, Cancer Research UK, Synergy Health, Cancer Research UK, Roche Diagnostics and GE Healthcare and will involve patients with early-stage cancer. An initial business case is now to be developed, involving key stakeholders, to agree the shape of the partnership agreement and to precisely define the types of research based treatments that may be delivered from the new facility. This is expected to take several months and will be reported back to Board in due course.

The second project is a £32m million partnership of the University of Oxford and a consortium including the Oxford University Hospitals NHS Trust, UCB Pharma, the Ludwig Institute for Cancer Research, Janssen Pharmaceutica NV, Boehringer Ingelheim and Takeda for a new centre for drug target discovery and for research based on medical data sets. Bringing together academia, industry and the Oxford University Hospitals NHS Trust, with capability to analyse massive medical datasets, it will help deliver improved medicines, better health care, and economic growth from UK's life sciences.

The University has secured, in principle financial support from partners in the consortium. Exact details of the financial contributions of each partner, and of the amount to be awarded from the Research Partnership Investment Fund, are to be confirmed.

11. Acute Medicine Review

The Medical Director chaired a review of the Trust's service delivery model for acute Medical services and the review set out ten recommendations for the future organisation and direction of the service. The Divisional and Clinical Directors for Acute Medicine have considered the recommendations in collaboration with colleagues within the division and the medical specialties. They have set out a series of proposals to develop and integrate services across the acute medical specialties together with changes to patient pathways and the management of patients with multiple co-morbidity. These proposals were considered by TME in September and approved. A detailed implementation plan is being developed and will be reported to the Board at a future meeting. The Director of Clinical Services will oversee the introduction of the agreed plan.

12. HSJ awards shortlist

The Trust has been shortlisted in three categories for the annual HSJ awards. The *Home for lunch* service improvement project has been shortlisted in the Quality and Productivity category and Secondary Care Service redesign category. The EPR project – *Positive Patient Identification (PPID)* has also been shortlisted in the Improving Care with Technology category.

13. Chief Nurse's appointment to Board of South Warwickshire Clinical Commissioning Group

Elaine Strachan-Hall has been appointed to the governing body of South Warwickshire Clinical Commissioning Group as the part-time registered nurse.

Sir Jonathan Michael, Chief Executive

November 2012