

Trust Board Meeting: Wednesday 12 March 2014

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Title	Chief Executive's Report
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Status	For Information
History	Regular report to Board

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

Summary

1	Strategic Partnerships
2	Oxfordshire CCG leadership change
3	Horton General Hospital update
4	Consultation on changes to CQC standards
5	CQC inspection
6	Trust-wide developments
7	Trust-wide appointments

Chief Executive's Report

This report summarises matters of current interest.

1. Strategic Partnerships

There are a number of areas of activity where joint working will be critically important. These include Informatics and Big Data, Wealth Creation and PPIEE (patient/public involvement/engagement/experience). In addition, the activities of the AHSN clinical networks will provide the means for wider translation of research from the AHSC into the wider community.

AHSC update

The Board of the AHSC, chaired by Professor Sir John Bell, met for the first time on 30 January and a series of meetings has been planned to take forward the work of the AHSC including the six themes. Directors of R & D (or equivalents) will be joining the meetings as will the Chief Executive Officer of the Oxford AHSN, ensuring close working between the AHSC and the AHSN.

The six themes and the leads are as follows:

1. Big Data: delivering the digital medicine revolution – Professor Lionel Tarassenko
2. Building novel NHS, university and industry relationships – Dr Chas Bountra
3. Modulating the immune response for patient benefit – Professor Fiona Powrie
4. Managing the epidemic of chronic disease – Professor Stephen MacMahon
5. Emerging infections and antimicrobial resistance – Dr Peter Horby
6. Cognitive health: maintaining cognitive function in health and disease – Professor John Geddes

2. Oxfordshire CCG leadership change

GPs in Oxfordshire Clinical Commissioning Group (OCCG) have elected Dr Joe McManners as the organisation's new Clinical Chair, following an election on 30 January 2014.

In November 2013 the Oxfordshire Clinical Commissioning Governing Body agreed constitutional changes to the senior management structure. The changes allowed for the appointment of a Chief Executive with managerial experience in the Accountable Officer role and the election of a clinical chair. Ian Wilson was appointed as the interim Chief Executive of the OCCG. Recruitment of a substantive CEO is underway. The current vacancy on the Governing Body (GB) is the Lay Vice-Chairman role and one replacement lay member. Ian Busby (formally the chairman) has agreed to act as lay vice-chairman for three months in order to facilitate a handover.

3. Horton General Hospital - update

On Wednesday 5 February Oxfordshire Clinical Commissioning Group and Oxford University Hospitals NHS Trust held a **public meeting** near Banbury to give local people an opportunity to hear the latest on Oxfordshire Clinical Commissioning Group's strategy

for Oxfordshire and the vision for the Horton General Hospital from Oxford University Hospitals NHS Trust.

It was also an opportunity to talk about the suspension of emergency abdominal surgery at the Horton General Hospital. Local people were given an opportunity to ask questions and air their views on the transfer of emergency surgery and also the general vision for the hospital, which includes moving more outpatient clinics and day surgery to the Horton from the hospitals in Oxford. More than 200 people attended the event and heard from Ian Wilson, Interim Chief Executive of the Oxfordshire Clinical Commissioning Group, on their Commissioning Strategy for Oxfordshire and Dr Paul Park, a GP at Banbury Health Centre and the Clinical Director for the north locality. Professor Ted Baker spoke about the OUH vision for the Horton and Mr Nick Maynard gave the reasons for the suspension of emergency abdominal surgery at the Horton. The public were invited to give their views and pose questions to the panel.

Emergency Abdominal Surgery at the Horton

The Oxfordshire Health Overview and Scrutiny and Scrutiny Committee (HOSC) have supported the recommendation that the suspension of emergency abdominal surgery at the Horton and its transfer to the John Radcliffe Hospital in Oxford should be made permanent. On Thursday 27 February the CCG presented a report to HOSC recommending that this was the best option for clinical and patient safety reasons. The report contained details of the public engagement carried out by the CCG and OUH on the issue as well as surveys of patients and GPs. The HOSC agreed that there was no need for a formal consultation on the issue and so the move has become permanent. The HOSC also observed that the Trust and the CCG needed to strengthen their public engagement in relation to service changes.

The HOSC report can be found [here](#):

4. Consultation on changes to CQC standards

The Department of Health is seeking views on changes to CQC registration requirements, in order to introduce fundamental standards of safety and quality for care. Comments need to be submitted by 4 April 2014.

<https://www.gov.uk/government/consultations/fundamental-standards-for-health-and-social-care-providers>

5. CQC inspection

The CQC inspection team have now completed their on-site review of the Trust. Later in the month the Trust will receive a draft report for factual accuracy checking. A Quality Summit with the CQC and hosted by the TDA will consider the report in due course. The CQC is still developing its methodology for reporting the outcomes of their new inspection programme and legislation will need to be amended before ratings of hospitals can be made public. It is likely that the OUH will be given a rating for each hospital and then an overall rating for the Trust. .

6. Trust-wide developments

Maternity services have received capital funding from the Department of Health - Improving Maternity Care Settings Fund 2013-14 to make improvements to the

environment of the Spires Midwifery-led unit at the John Radcliffe Hospital. The grant of around £300k will be used to upgrade the unit and provide two family rooms on Level 5 for women with particular needs so that their partner/carer can stay with them.

At the beginning of March work began to refurbish the Ultrasound Department at the **Horton General Hospital**, which will take around six months to complete.

The benefits of the scheme will include:

- Dedicated waiting facilities for ultrasound outpatients and inpatients
- Relocation of existing ultrasound rooms closer to new waiting areas
- Increased size of ultrasound rooms, enabling inpatient access to both rooms
- Improved patient ultrasound facilities, piped oxygen, suction, ventilation
- Improved reception area, meeting the requirements for receiving disabled patients

The **first clinical trial of a gene therapy** for an inherited cause of progressive blindness has shown very promising results, surpassing expectations of the Oxford researchers leading the study. Professor Robert MacLaren of the Nuffield Laboratory of Ophthalmology at the University of Oxford, and a consultant surgeon at the Oxford Eye Hospital, led the development of the retinal gene therapy and the first clinical trial.

Wallingford birthing centre re-opened in January after a £350k investment to upgrade facilities to include: two new birthing pools, additional birthing room, ensuite facilities in two of the birthing rooms, ensuite facility in the postnatal ward and a refurbished family room.

7. Trust appointments

I'm pleased to announce the following appointments to clinical director posts: Dr Ian Reckless for Neurosciences, Dr Veronica Miller for Women's Services and Dr Mark Sullivan for Transplant, Renal & Urology (who will take up this post from 7th April).

Sir Jonathan Michael
Chief Executive

March 2014