

Trust Board Meeting in Public: Wednesday 13 January 2016
TB2016.03

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

Board Lead(s)	Dr Bruno Holthof, Chief Executive			
Key purpose	Strategy	Assurance	Policy	Performance

Summary

1.	Update on Oxfordshire joint patient transfer action plan
2.	Oxfordshire Transformation Workshop
3.	Implementation and monitoring of National Agency rules
4.	Oxfordshire Health Inequalities Commission
5.	Oxford Biomedical Research Centre update
6.	Awards recognising exceptional OUH Staff
7.	Ronald McDonald House on-site parent accommodation
8.	The Hospital Energy Project update
9.	Charitable investment to increase palliative care provision

Chief Executive's Report

This report summarises matters of current interest.

1. Update on Oxfordshire joint patient transfer plan

Oxfordshire health and social care providers worked together in December to deliver a joint plan enabling patients no longer in need of acute medical care to move from hospital into a care home where their needs are better met while waiting for transfer home and community-based support or to a care home.

The Trust is working with other Oxfordshire health and social care providers to make the very best use of our staff resources to tackle this long-standing problem of delayed transfers of care, and to make sure that we care for people in the environment which is best suited to support their recovery and rehabilitation.

A Liaison Hub has been established with involvement from all four organisations. The Hub is acting as a key liaison point supporting patients during this transitional period. It ensures responsive and comprehensive care for patients and makes the most of our joint working and planning approach.

The joint plan involves transferring 150 patients who are medically ready to move onto the next stage of their care - 120 patients delayed in our acute hospitals are being transferred to care homes, along with a further 30 patients who delayed in Oxfordshire's community hospitals. It is in the best interest of patients to be discharged from hospital as soon as they are ready. The longer the delay to discharge, the greater the risk from hospital acquired infections and loss of independence for more vulnerable elderly patients. Care homes offer more appropriate care for patients while ongoing requirements for care are arranged.

As of 4 January, 112 patients from acute and community hospitals had been transferred to 15 of the county's care homes. Further transfers are taking place in the first weeks of January. The number of patients delayed in OUH beds fell from 130 to 64 by 24 December.

2. Oxfordshire Transformation Workshop

Senior leaders from across health, social care, local government and Oxford's universities attended a Transformation Workshop in November as part of the development of a single strategic plan to co-ordinate commissioning and delivery of services in Oxfordshire.

A Transformation Board has been set up to oversee a programme of nine work streams exploring new models of care delivered by multi-skilled, integrated teams. Feedback from this workshop will be considered as part of further development of our joint clinical strategy to treat and care for patients closer to home.

A key focus of the Oxfordshire wide transformation programme is to create most value from within the health and social care system through service redesign. These include:

- Supporting people to help themselves and prevent ill-health and hospital admissions
- Further integration of health and social care teams in the community to ensure patients can access the right treatment when they need it

- Reviewing the delivery of inpatient care and bringing care closer to home, when it is clinically appropriate
- Developing GP and associated services in the community

The Transformation Board will seek to co-ordinate and accelerate system changes in Oxfordshire over the next five years to 2020 in response to changing demographics and health needs, and to improve access to health and social care services within limited resources. The aim is to invest in more care and treatment outside hospital, with GP federations providing a broader range of services including those traditionally provided in hospital. The vision is that a joint plan for Oxfordshire will strengthen the range of services available in community-based centres supported by specialist skills from our hospital clinicians.

3. Implementation and monitoring of National Agency rules

Over the past three months, Monitor and the Trust Development Authority have introduced a number of national rules relating to the use of agency staff within the NHS. These rules are intended to support trusts in achieving reductions in overall expenditure associated with agency staff, and in ensuring that only approved supplying agencies are used.

The Trust has welcomed the introduction of the national rules, in particular the implementation (from mid-November 2015) of maximum hourly rate caps. The rate caps, which apply to all agency staff, are already having a significant and positive impact locally.

OUH is fully committed to adhering to the national rules. The success of local leadership in achieving good progress to date has been recognised by Monitor, which receives weekly performance reports.

The impact of the national rules is being closely monitored and an appropriate escalation and authorisation process has been established, which ensures that quality and safety considerations are not compromised.

4. Oxfordshire Health Inequalities Commission

In November 2015, the Oxfordshire Health Inequalities Commission was formally established to focus on what specifically needs to be done to address health inequalities in our county.

The Commission will be led by an independent Chair, Professor Sian Griffiths who will appoint other members of the Commission, not only from the statutory NHS and local authorities sector, also representatives of the voluntary and community sector.

Initially the Commission will:

- Review current Government policy on health inequalities
- Review evidence from Public Health England and other relevant organisations such as the UCL Institute of Health Equity
- Research other current best practice in addressing health inequalities
- Provide an opportunity for voluntary, charity, community and faith sector organisations as well as the business/ corporate sector and patients and public to present their evidence, views and ideas to the Commission
- Engage with all health care providers in Oxfordshire to seek their views

The evidence, findings and recommendations will be presented in a final report to the Oxfordshire Health & Well Being Board in July 2016. The report will then be available for use as a basis for ongoing actions.

If you have any queries about the Commission, please contact 01865 334652 or email cscsu.talkinghealth@nhs.net

More information on health inequalities can be found via the following link to Sir Michael Marmot's review 'Fair Society, Healthy Lives': <http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-marmot-review>

5. Biomedical Research Centre update

- Minister for Life Sciences George Freeman MP visited the John Radcliffe on 18 December where he discussed our partnership work to stimulate economic growth, projects supported by the NIHR Oxford Biomedical Research Centre, the Oxford NHS Genomic Medicine Centre and our new approaches to delivery of integrated care. Mr Freeman also visited University of Oxford facilities at the Churchill Hospital site including the under-development Big Data Institute and Bioescalator.
- The National Institute for Health Research (NIHR) announced the invitation for entries to the NIHR Biomedical Research Centre competition on 15 December 2015. This is the third such competition since the creation of the NIHR in 2006. The Chancellor and Health Secretary announced £800m to support early translational research through BRCs over five years from April 2017. A bid by our NIHR Oxford Biomedical Research Centre is being put together and will be submitted by summer 2016.

6. Awards recognising exceptional OUH Staff

- It was my pleasure to host, along with fellow Trust Board members, the 2015 OUH Annual Staff Recognition Awards on the evening of Wednesday 9 December 2015 at the Oxford Town Hall. This important celebratory event marked the outstanding achievements of our staff and highlighted the dedication and compassionate care demonstrated throughout the Trust, every day of the year.

Over 700 award nominations were received and my congratulations to all of the finalists on their well-deserved recognition. Thanks to all members of staff who took the time to submit their nominations of the good work of their colleagues.

Further details of our deserving finalists are provided in a special Awards supplement of the January edition of OUH News and our website ouh.nhs.uk

- In November 2015, the Neurosciences Nursing Team won the Emergency and Critical Care Award at the Nursing Times Awards. These awards are the largest and most prestigious Nursing Awards programme in the UK and the team won from 830 entries. This award recognises their outstanding patient experience programme. The programme on "supporting sub arachnoid patients after discharge" involves all of the team from NITU, wards and into the community embedding learnings from patients experience into significant practice changes.

7. Ronald McDonald House on-site parent accommodation

Outline designs and plans for a new development to provide on-site accommodation for the parents of sick babies and children who are patients in our Children's Hospital are now in the pre-planning application stage.

The Trust is working with independent charity Ronald McDonald House Charities, to develop a new Ronald McDonald House with around 60 bedrooms within the grounds of the John Radcliffe Hospital. The charity already provides 17 bedrooms in the Oxford Children's Hospital.

These outline designs for the new stand-alone facility will be on display, open to all staff and the public, at an event on 16 January in the existing 17-bed Ronald McDonald House at the Children's Hospital. The date also marks the 9th anniversary of the current parent accommodation provided by Ronald McDonald House Charities. Members of the project team will be on hand to gather views and specific queries can be directed by email to edel.wyse@ouh.nhs.uk

8. The Hospital Energy Project update

The Trust's project to improve and upgrade heating and hot water systems at both the John Radcliffe and Churchill hospitals is now underway. The important work to upgrade the infrastructure which currently supplies both hospitals, requires the laying of pipework to connect both sites, transferring surplus by-product heat harnessed from the new Combined Heat and Power Plant at the JR to service all heating and hot water demands at the Churchill Hospital.

A joint-liaison group has been established involving the Trust's project team, partners Vital Energi, local councillors and residents' representatives, to respond to on-going matters as the work proceeds.

9. Charitable investment to increase palliative care provision

Sobell House Charity has announced the first phase of a four-year £4million investment plan that will expand specialist palliative care at all OUH hospitals and increase palliative service hours. In 2016, the first phase of the plan designates funds to allow the recruitment of additional staff to a specialist palliative care team to provide advice and support to ward staff and clinical teams caring for hospital inpatients. Central to this initiative is increasing medical expertise to support end of life care across all four hospital sites.

The second phase of the plan will see a new state-of-art hospice space being built at the Churchill Hospital to expand clinical facilities. This new bespoke designed facility will meet the needs of patients requiring specialist environments in which to receive end of life care.

This new provision will enable the services of the Sobell House hospice care team to reach significantly more people in a more flexible way.

Dr Bruno Holthof
Chief Executive

January, 2016