

Trust Board Meeting in Public: Wednesday 12 September 2018

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<b>Title</b>	<b>Chief Executive's Report</b>
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<b>Status</b>	For Information
<b>History</b>	Regular report to Board

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

**Summary**

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<b>3.</b>	<b>Trust Board and Council of Governors news</b>
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## Chief Executive's Report

**This report summarises matters of current interest.**

### **1. Trust tops national research league table**

I am delighted that Oxford University Hospitals was named as the No.1 trust in England for recruitment of patients into National Institute of Health Research (NIHR) clinical trials when the annual NHS research league table was published in July.

The Trust recruited 20,937 participants to 517 studies supported by the NIHR in 2017/18.

By asking patients and healthy volunteers if they wish to take part in clinical trials which enable participants to access new treatment and care options, we are playing an important role in achieving the overall aim of improving the treatment and care provided by the NHS.

Our goal as a Trust is to take innovation 'from bench to bedside' so that research findings are quickly applied to the NHS for the benefit of patients.

World-leading research and clinical facilities are co-located across our hospital sites to foster a culture of collaboration and innovation with patient treatment and care at its heart.

As Professor Keith Channon, the Trust's Director of Research and Development, says: "By partnering with the University of Oxford, we have world-leading researchers and clinical care and research happen hand-in-hand on a day-to-day basis."

We host a number of NIHR related research organisations including the Oxford Biomedical Research Centre (BRC), Oxford Academic Health Science Network (AHSN) and Clinical Research Network

All of this makes the Trust an important hub for research and innovation in the NHS, as evidenced by publication of the annual NHS research league table in July.

### **2. Emergency Department expansion**

We have submitted a planning application to expand the Emergency Department at the John Radcliffe Hospital.

The proposed expansion will enable us to build an extension which will house an extra eight bays for the immediate care of seriously ill patients.

The new space will also include a paediatric resuscitation room and an isolation room with an adjacent CT scanner and control room, as well as a nurses' bay and improved bereavement and relatives' rooms.

A better use of space, more diagnostic equipment, and improved privacy for patients – as well as improved turnaround times for ambulances – are among the benefits of the proposed expansion of the Emergency Department.

Subject to planning approval by Oxford City Council, early enabling works will begin in Autumn 2018, major building works will start before the end of this year and are due to be completed by Spring 2020.

The proposed expansion has been publicly welcomed by our colleagues from South Central Ambulance Service (SCAS) whose Head of Operations for Oxfordshire, Ross Cornett, says: "The new facilities will speed up the safe handover of our patients to colleagues in the Emergency Department, allowing ambulances to return to active duty considerably quicker so that we can respond to the next patient sooner.

### **3. Trust Board and Council of Governors news**

The term of office of Trust Chairman, Dame Fiona Caldicott, ends in March 2019.

As set out in our Foundation Trust constitution, the Trust has an Appointment Panel to oversee the process for appointing a new Chairman. It is chaired by Geoff Salt, the Vice Chairman of the Trust, and includes five members of our Council of Governors.

The role of Chairman has been advertised publicly and the Trust has engaged search consultants in order to attract a high calibre of applicants for this important position. They are seeking the views of key stakeholders in their work.

The appointment of a new Chairman will be subject to approval at the Council of Governors meeting in Witney on 20 November.

Professor Sir John Bell, the University of Oxford's appointee on the Trust Board, stepped down on 7 August due to a potential conflict of interest after he was appointed as the Non-executive Chairman of a company which contracts with the Trust (and the University of Oxford) to develop a patient safety-related software system.

In line with the Trust's Constitution and its Policy on Declarations of Interests, Sir John declared this appointment as a 'relevant and material interest', and as one giving rise to an 'indirect pecuniary interest' in the contract which the Trust holds with the company.

Sir John's term of office was due to expire on 31 October 2018, and the Council of Governors had already approved the appointment of Professor Gavin Sreaton (Head of the University's Medical Sciences Division) to succeed him.

Professor Sreaton's appointment was brought forward to start on 1 September 2018, for a term of three years up to 31 August 2021.

Medical Director, Dr Tony Berendt, retires from the Trust and the NHS on 14 September.

Tony has given great service to the NHS in Oxford over many years. We will have an opportunity to thank him publicly for everything he has done as an outstanding medical leader at the Trust's Annual Public Meeting on 26 September. The Trust held interviews to recruit a new Medical Director on 7 September, having welcomed applications from both internal and external candidates.

Director of Clinical Services, Paul Brennan, left the Trust on 31 July 2018 to undertake work within the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Sustainability and Transformation Partnership (STP). We thank Paul for his extensive contributions to the Trust and wish him well for the future. Sara Randall continues to act as Interim Director of Clinical Services.

Public and staff members of our Foundation Trust were invited to nominate themselves to stand for election to our Council of Governors. Voting opened on 20 August and will close on 13 September. The results will be published on 14 September.

#### **4. Major Trauma Centres save lives – new research published**

New research published on Monday 20 August shows that more than 1,600 extra patients are alive today thanks to the setting up of designated major trauma centres six years ago.

As Medical Director, Dr Tony Berendt, told the *Oxford Mail*: “The designation of a network of major trauma centres in 2012 – including here in Oxford at the John Radcliffe Hospital – has transformed the care of trauma patients.

“We are able to provide the clinical expertise here in Oxford which saves lives. The publication of this new research is welcome confirmation of the huge difference which trauma centres have made.”

#### **5. Open visiting and Visitors’ Charter to be launched this month**

Our Chief Nurse, Sam Foster, is leading the implementation of open visiting in our hospitals, which will be officially launched at our Annual Public Meeting on 26 September.

Sam has championed the benefits to patients of extending visiting hours so that family and friends find it easier to see their loved ones and can play a more active role in their care while they are in hospital.

A new Visitors’ Charter will also be launched at the Annual Public Meeting to establish the parameters for open visiting and to help family and friends to understand their rights and responsibilities while visiting our hospitals.

The implementation of open visiting follows a survey earlier this year to ensure that we heard the views of patients, members of the public and staff about its introduction.

#### **6. New partnerships to improve patient care**

The Trust is creating an advanced diagnostic network to help improve patient care across Wiltshire, Buckinghamshire and Oxfordshire.

On 24 July we announced plans to create a digital pathology network to help drive faster and more efficient diagnoses for patients, in partnership with Philips which is a global leader in health technology.

We will deploy the Philips IntelliSite Pathology Solution at the John Radcliffe Hospital in Oxford, which will serve as a central laboratory service for partner sites at Milton Keynes University Hospital NHS Foundation Trust and Great Western Hospital NHS Foundation Trust in Swindon.

Initially starting with some specialist areas, over time we hope to make our pathology services fully digital, meaning that our laboratory teams can focus on analysing samples rather than spending time on manually transporting slides between hospital sites.

On 8 August we announced that a software product that underpins a remote management service for patients with heart failure has been licensed by the digital health company Sensyne Health as part of a strategic research agreement with the Trust and the University of Oxford.

Support-HF is the fourth digital health product to be commercialised by Sensyne Health, formerly Drayson Health, as part of the five-year agreement which was established in July 2017.

The software product enables heart failure patients to understand and monitor their condition and take control of their treatment in their own homes. It is an affordable and sustainable system which has the potential to empower patients.

## **7. Winter planning starts early**

We are working closely with our partners in the Oxfordshire health and social care system to plan for the winter pressures which we can expect again this year.

A system-wide Winter Plan will be presented at the Health Overview and Scrutiny Committee meeting on 20 September.

For the first time this year a Winter team – including staff from not only the Trust but also Oxfordshire CCG, Oxford Health NHS Foundation Trust and Oxfordshire County Council – will be created, based at the John Radcliffe Hospital.

The team will be led by a dedicated Winter Director.

Our annual staff flu vaccination campaign will be launched on 1 October. We will be encouraging all staff to protect themselves, their loved ones and our patients by having their flu jab.

## **8. Listening events to change things for the better**

Following the success of our *Changing things for the better* listening events in March – when the Executive team discussed the findings of last year's NHS Staff Survey with staff – we are holding more listening events in late September and early October. We will be inviting staff to find out how our new People Strategy will make the Trust a great place to work and to hear about progress against our four key priorities for 2018/19.

The listening events are being held in advance of the launch of this year's NHS Staff Survey on 8 October.

## 9. Oxford Biomedical Research Centre (BRC) news

**Professor Helen McShane** has been appointed as the new Director of the Oxford Biomedical Research Centre (Oxford BRC). She is Professor of Vaccinology in the University of Oxford Nuffield Department of Medicine, based at the Jenner Institute, and is an Honorary Consultant Physician in HIV and genitourinary medicine in the Trust.

Prof McShane is a previous Wellcome Trust Senior Research Fellow with an international reputation in clinical research and clinical trials in TB infection and vaccines. She has been an important contributor to the BRC Vaccines Theme, and was a BRC Principal Fellow awardee in 2016.

She succeeds Prof Keith Channon as the Oxford BRC Director, following his appointment as Deputy Head of the University's Medical Sciences Division for Research, and his continued role as the Trust's Director of Research & Development.

Researchers led by the Oxford BRC's Stroke Theme Lead, **Professor Peter Rothwell**, have shown that a 'one-dose-fits-all' use of aspirin to prevent heart attacks, stroke or cancer, is ineffective or harmful in most people, and that a more tailored strategy is required. Writing in *The Lancet*, [Prof Rothwell said](#) that the dosage of aspirin needed to take account of the patient's weight to be effective.

In a separate paper published in *JAMA Neurology*, he said more needed to be done to raise awareness of the need to take **rapid action after a mini-stroke** to reduce the number of major strokes. [His study of more than 2,200 patients across Oxfordshire](#) looked at the association of the FAST public education campaign with delays and failure to seek medical attention after a transient ischemic attack (TIA).

In a [breakthrough that allows more precise targeting](#) of drugs at cancers, a University of Oxford team, supported by the Oxford BRC, has used ultrasound and lipid drug carriers to remotely trigger and **enhance the delivery of a cancer drug** in humans for the first time. The study, published in [Lancet Oncology](#) journal, was conducted by a multi-disciplinary team of biomedical engineers, oncologists, radiologists and anaesthetists at the Churchill Hospital. It used focused ultrasound from outside the body to selectively heat liver tumours and trigger drug release from heat-sensitive carriers, known as thermosensitive liposomes.

Pregnant women are being invited by the University of Oxford and the NHS to take part in the [world's first clinical trial to prevent type 1 diabetes](#) in babies and infants. The **INGR1D study**, supported by the Oxford BRC, is asking women for consent to analyse a blood sample routinely taken from their babies for genetic risk of type 1 diabetes. About 1% of children will have higher risk genes for type 1 diabetes and 10% of those would be expected to develop the condition. The parents of infants with a higher risk of type 1 diabetes will then be offered an opportunity to take part in the Primary Oral Insulin Trial (POInT) to see if spoonfeeding high-risk children small doses of insulin powder each day can prevent them from developing the condition.

In June, the NIHR Oxford BRC and the UK Cochrane Collaboration organised the Oxford Impact 2018 workshop to “think differently about research impact”. [In a blog](#), Professor Trish Greenhalgh, the Oxford BRC Theme Lead for Partnerships for Health, Wealth and Innovation, outlined what was discussed and the next steps.

Oxford University Hospitals is one of the centres for a new NIHR-supported [clinical trial](#) that uses stem cell transplants to grow a new immune system for people with untreatable Crohn’s disease.

With BRC support, a group of A-level students from schools across Oxfordshire spent time getting valuable work experience at the Oxford Centre for Diabetes, Endocrinology and Metabolism ([OCDEM](#)) at the Churchill Hospital as part of the in2science scheme, which aims to help students from disadvantaged backgrounds to progress to careers in science and research careers through high quality work placements

## 10. Oxford Academic Health Science Network (AHSN) news

More than 90 staff – including many from Oxford University Hospitals – have benefited from the **Oxford AHSN Adopting Innovation and Managing Change** programme since it began in 2016. The next course starts in September when an [education and sharing event](#) brings together all cohorts, past and current, to share their experiences and learning.

The Oxford AHSN will be exhibiting at the **Oxford University Hospitals Annual Public Meeting** on 26 September to highlight partnership working with the Trust and other research organisations to improve health.

The first meeting of a new **Oxfordshire and Berkshire patient-led sepsis support group** takes place in Barton on 10 September. The group was established following an Oxford Patient Safety Collaborative sepsis shared learning event in May.

**Professor Gary Ford**, Chief Executive of the Oxford AHSN and a consultant stroke physician at the OUH, has been identified as [one of seven NHS ‘research legends’](#). His work to develop stroke pathways and establish the [FAST](#) public awareness campaign earned him a place alongside such research luminaries as Sir Richard Doll and Sir Magdi Yacoub in the National Institute for Health Research (NIHR) [‘I Am Research’](#) campaign.

Professor Ford was an expert witness to the tragic events at the **Gosport War Memorial Hospital**. Following publication of the Gosport Independent Panel Report, he [identified key learning points](#) for the NHS.

**Dr Bruno Holthof**  
Chief Executive

**September 2018**