

## Cover Sheet

Public Trust Board Meeting: Wednesday 14 July 2021

TB2021.43

---

**Title:** Chief Executive Officer's Report

---

---

**Status:** For Information

**History:** Regular report to Trust Board

---

---

**Board Lead:** Chief Executive Officer

**Author:** Matt Akid, Director of Communications & Engagement

**Confidential:** No

**Key Purpose:** Performance

---

## Executive Summary

1.	<b>Trust Board news</b>
2.	<b>Celebrating the NHS Birthday</b>
3.	<b>Oxford's COVID-19 research heroes in Queen's Birthday Honours list</b>
4.	<b>Major grant will strengthen research and benefit our patients</b>
5.	<b>New and improved wards open at the Churchill Hospital</b>
6.	<b>Dedicated service created to support the psychological needs of staff</b>
7.	<b>Flying the flag for Pride Month at OUH</b>
8.	<b>Congratulations to our award-winning #OneTeamOneOUH staff</b>
9.	<b>Oxford Biomedical Research Centre (BRC) news</b>
10.	<b>Oxford Academic Health Science Network (AHSN) and Oxford Academic Health Partners (OAHP) news</b>

## Chief Executive Officer's Report

---

### 1. Trust Board news

- 1.1. Welcome to [Joy Warmington](#) who joined the Trust Board as a Non-Executive Director on 1 June for an initial term of three years.
- 1.2. Her appointment was made at the 13 January meeting of the Trust's Council of Governors, which includes elected representatives of the public and staff.
- 1.3. Joy is the Chief Executive Officer of [brap](#), an equalities and human rights charity based in Birmingham, which has developed a national reputation for its progressive and innovative approach in 1986.
- 1.4. She was awarded the MBE in the New Year Honours List 2019 for services to healthcare and the community in the West Midlands.
- 1.5. Joy has a wealth of valuable experience in the development of equality, diversity and inclusion and staff engagement initiatives, which I am sure will be hugely beneficial to us here at OUH.
- 1.6. Congratulations to our Chair, Professor Sir Jonathan Montgomery who was [elected to the Academy of Medical Sciences Fellowship](#) in May.
- 1.7. Sir Jonathan was one of 50 prominent biomedical and health scientists elected to the respected and influential Fellowship. He was named in his capacity as Professor of Health Care Law at University College London.

### 2. Celebrating the NHS Birthday

- 2.1. Monday 5 July was the 73<sup>rd</sup> birthday of the NHS which was an opportunity for us to thank our staff, our volunteers, university partners, Oxford Hospitals Charity, all keyworkers and the wider community in Oxfordshire and beyond who have supported our #OneTeamOneOUH throughout the past 12 months.
- 2.2. It was a chance for us to all to reflect on the highs and lows of the last year, to celebrate what we have achieved together, and to look forward to the future with at least some hope and cautious optimism, thanks to the amazing COVID-19 vaccination programme here at OUH and throughout the NHS.
- 2.3. [The Trust Chair and I sent a personal NHS Birthday message to all OUH staff](#) in which we said: "On behalf of the Trust Board, we want to say a heartfelt thank you for being part of our #OneTeamOneOUH. Thank you for providing the best possible care for our patients and for your compassionate excellence in this time of unprecedented challenges for all of us, both professionally and personally."
- 2.4. We also highlighted Oxford's role at the heart of global research into COVID-19 – not only the development of the Oxford-AstraZeneca vaccine but also

groundbreaking research into new treatments – because of the close working relationship between clinicians here at OUH and university academics and researchers.

- 2.5. We said: "The COVID-19 pandemic may not be over but the vaccine and the new treatments which are now available have brought new hope – and that is definitely worth celebrating on our NHS Birthday."
- 2.6. Trust Board colleagues and our senior management teams in our divisions visited teams across our four main hospital sites and at OUH Cowley, where many Finance, HR and other colleagues are based, to say thank you in person and to deliver mini cupcakes which were made possible by the support of Oxford Hospitals Charity.
- 2.7. [Sam Foster, our Chief Nursing Officer, attended the national service of thanksgiving and commemoration at St Paul's Cathedral on the NHS Birthday](#) – Sam administered the first Oxford-AstraZeneca vaccine to a patient at our Churchill Hospital vaccination centre in early January 2021.
- 2.8. Imam Monawar Hussain, our Muslim Chaplain and the current High Sheriff of Oxfordshire, also attended the service at St Paul's – he has played a key role in promoting the positive benefits of COVID-19 vaccination and has been a trusted voice in addressing vaccine hesitancy within our local communities.

### 3. Oxford's COVID-19 research heroes in Queen's Birthday Honours list

- 3.1. Congratulations to [seven researchers based at the University of Oxford who were named in the Queen's Birthday Honours list](#) which was published on 11 June, in recognition of their key role in the fight against COVID-19.
- 3.2. Two of the seven recipients - **Professor Andrew Pollard** and **Professor Martin Landray** - are Honorary Consultants at Oxford University Hospitals (OUH). They both received Knighthoods.
- 3.3. The five other University of Oxford recipients honoured for their contribution to COVID-19 research are Professor Sarah Gilbert, Professor Adrian Hill, Professor Peter Horby, Dr Teresa Lambe and Professor Catherine Green.
- 3.4. Oxford is one of the most vibrant places in the world for healthcare research, in part because of the close working relationships between world-class University of Oxford academics and researchers and OUH clinicians.
- 3.5. The strength of this partnership has become even more apparent during the COVID-19 pandemic when Oxford has been at the heart of global research into a vaccine and new treatments.
- 3.6. In addition, **Professor Keith Willett** - who has worked for the Trust since 1992 and still holds an honorary contract with OUH - also received a Knighthood. He is Strategic Incident Director for COVID-19 and National

Director for Emergency Planning and Incident Response with NHS England & NHS Improvement (NHSE&I).

#### **4. Major grant will strengthen research and benefit our patients**

- 4.1. On 21 June we were delighted to announce that [Oxford University Hospitals \(OUH\) has made a grant of £11.5 million to the University of Oxford](#), which the University will match with other funding, to develop major clinical research facilities which will support innovative and ground-breaking treatments for patients.
- 4.2. OUH and the University are strategic partners in the largest Biomedical Research Centre (BRC) in England, which supports our strategic theme of World Class Research, Education, and Innovation.
- 4.3. The projects which are covered by the £11.5 million grant will support both the future of the Oxford BRC and clinical innovation to benefit patients.
- 4.4. These new facilities are primarily for research, but they all have the potential to support the introduction of new clinical activity in the future. OUH is a research driven organisation aiming to enrol every patient in a clinical research study.
- 4.5. The three projects are as follows:
  - OUH will contribute to the costs of an expansion of the University-owned Clinical Biomanufacturing Facility (CBF) on the Churchill Hospital site which is adjacent to the current clinical trials aseptic unit (CTASU) and a new Clinical Research Facility
  - The grant will go towards the operational costs and equipment at the new Clinical Research Facility (CRF), and in the future will also support refurbishment on hospital sites to create dedicated facilities for clinical trials and allow challenge 'first in man' trials of therapeutics and trials of future vaccines, which will provide healthcare benefits and opportunities for patients
  - OUH will contribute to the refurbishment of the Acute Vascular Imaging Centre (AVIC) at the John Radcliffe Hospital, in order to establish a multi-disciplinary, state-of-the-art CT imaging capability which will not only greatly expand the capacity for routine clinical CT scanning of patients in clinical specialties such as cardiac and stroke, but also advance new techniques through its photon-counting CT scanner, which will be the only one in the UK

#### **5. New and improved wards open at the Churchill Hospital**

- 5.1. I am delighted that work to provide new and improved inpatient wards for Renal, Transplant, and Colorectal (Lower Gastrointestinal) services at the Churchill Hospital was completed in May.

- 5.2. The new facilities provide a better connected service for transplant and renal patients in larger, modern wards with more side rooms with en suite bathrooms and quicker access to critical care, operating theatres, and radiology.
- 5.3. The overall cost of the project was approximately £1 million, with charitable donations from The Oxford Kidney Unit Trust Fund, Six Counties Kidney Patients' Association (SCKPA), and [Oxford Hospitals Charity](#).
- 5.4. [Allie Thornley, Matron for Renal Medicine, and Ana Gardete, Matron for Transplant and Urology Services, discuss the Renal Ward in this YouTube video](#)

## 6. Dedicated service created to support the psychological needs of staff

- 6.1. In June we announced the creation of a Psychological Medicine Staff Support Service to support all staff working at OUH – thanks to the support of NHS Charities Together.
- 6.2. [Oxford Hospitals Charity](#) was successful in bidding for £150,000 from NHS Charities Together to fund two clinical psychologist roles and one part time clinical psychiatrist who will proactively address the psychological needs of staff coming out of the COVID-19 pandemic.
- 6.3. This will build on the outstanding work done to support staff since the start of the pandemic, not only by OUH's Psychological Medicine and Occupational Health teams, but also by Wellbeing Leads based in teams throughout the Trust. More than 250 staff are currently in these roles on wards and in departments.
- 6.4. It forms part of our *Growing Stronger Together - Rest, Reflect, Recover* programme to support the health and wellbeing of our #OneTeamOneOUH staff.

## 7. Flying the Flag for Pride Month at OUH

- 7.1. [We flew the Progress Pride Flag at the John Radcliffe Hospital in Oxford and at the Horton General Hospital in Banbury to celebrate Pride Month in June.](#)
- 7.2. Every member of our #OneTeamOneOUH staff – as well as all our patients and visitors to our hospitals – has the right to be their true self without fear of discrimination.
- 7.3. Our LGBT+ Staff Network – whose Executive Director sponsor is Jason Dorsett, our Chief Finance Officer – marked Pride Month in a number of other ways including making LGBT+ Pride Lanyards available for all staff and holding a special Pride Month LGBT+ Staff Network virtual Coffee Morning to

involve our staff in the development of the Trust's new equality, diversity and inclusion (EDI) objectives.

7.4. The development of vibrant Staff Networks is a key part of our commitment to equality, diversity and inclusion at OUH – each network has an Executive Director sponsor.

## 8. Congratulations to our award-winning #OneTeamOneOUH staff

8.1. The **Early Phase Clinical Trials Team** based at the Churchill Hospital are shortlisted in the ['Excellence in Cancer Research Nursing' category of the RCN Nursing Awards](#) – winners will be announced on 12 October.

8.2. **Professor Peter Scanlon**, a Medical Ophthalmologist at OUH who has been Clinical Director of the English NHS Diabetic Eye Screening Programme since 2003, won the ['Contribution to the Profession' category at the Royal College of Physicians' Excellence in Patient Care Awards](#) on 26 May.

8.3. Three outstanding teams and individuals from OUH won categories at the inaugural [Oxfordshire Health & Social Care Awards](#) – run by the Oxford Mail and Oxford Times – which took place on 21 May:

- **Tamara Davidson**, Specialist Palliative Care Nurse – Good Nurse Award
- **Courtney Hughes**, Trainee Nursing Associate – Unsung Hero Award and Care Hero Award
- **Linen Team** – Health Care Team Award

8.4. **Ariel Lanada**, who chairs the Black, Asian and Minority Ethnic (BAME) Staff Network at OUH, was named as [joint BAME Nurse of the Year at the National BAME Health & Care Awards](#) on 6 May.

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

### 9.1. COVID-19 research news

The **RECOVERY Trial**, the world's largest randomised trial of potential COVID-19 treatments, has found that an antiviral drug 'cocktail' developed by the US company Regeneron reduces deaths for hospitalised COVID-19 patients who have not mounted their own immune response. The treatment uses a combination of two monoclonal antibodies that bind to two different sites on the coronavirus spike protein, neutralising the virus's ability to infect cells. The trial found that this treatment reduced 28-day mortality by one-fifth for seronegative patients, and reduced hospital stays by around four days. These patients were also less likely to progress to invasive mechanical ventilation. The trial had previously found that the drugs [aspirin](#) and [colchicine](#) were not effective in patients hospitalised with COVID-19. The RECOVERY trial, which is supported by the NIHR Oxford BRC, has recruited more than 40,000 patients across 181 sites.

A national study led by the University of Oxford has found that previous infection, whether symptomatic or asymptomatic, does not necessarily protect people long term from COVID-19, particularly against new variants of concern. [The PITCH Study](#), one of the world's most in-depth studies of immune memory, is funded by the Department of Health and Social Care and includes several NIHR Oxford BRC investigators. It examined how the immune system responds to COVID-19 in 78 healthcare workers who had experienced either symptomatic or asymptomatic disease. Its key findings were:

- Immune memory following COVID-19 infection is measurable at six months but is highly variable between people
- Previous infection does not necessarily protect you long term from SARS-CoV-2, particularly variants of concern Alpha and Beta. Individuals who show little or no evidence of immune memory to COVID at six months post-infection are not able to neutralise the variants of concerns
- Immune response characteristics at one month post-infection can be used to predict which people will have durable immune responses at six months
- People with COVID-19 symptoms have variable immune responses that may decline over time and are not necessarily protected from SARS-CoV-2 variants
- People who experienced asymptomatic infection tend to have lower immune responses across the many immune parameters measured
- COVID-19 vaccines generate higher immune responses than natural infection, underlining the need for everyone to get vaccinated for maximum protection against this disease

A study by Oxford and Sheffield researchers using **cutting-edge hyperpolarised xenon MRI (XeMRI) scans** has identified [persistent damage to the lungs](#) of COVID-19 patients at least three months after they were discharged from hospital, and for some patients even longer. This damage was not detected by routine CT scans and clinical tests. Further early research by the team has shown that patients who have not been hospitalised with COVID-19 but who are experiencing long-term breathlessness may have similar damage in their lungs. The study, led by Professor Fergus Gleeson, is supported by the NIHR Oxford BRC and feeds into the national PHOSP-COVID platform, looking at long-term effects of COVID-19.

Researchers from the University of Oxford's MRC-Weatherall Institute of Molecular Medicine (MRC-WIMM) Molecular Haematology Unit have found that antibody responses to the first doses of COVID-19 vaccine in [people with chronic myeloid blood cancers](#) are not as strong as those among the general population. While this is expected to improve with the second dose, this important finding may help influence the design of future vaccination strategies, with further work needed to determine the optimal interval between vaccine doses in certain groups. The study, which included 60 patients with chronic myeloid blood cancers at the Churchill Hospital, was supported by the Oxford BRC.

Oxford University and the multinational computer technology corporation Oracle have joined forces to create a [Global Pathogen Analysis System](#) (GPAS) to help



governments and medical communities identify and act on variants of the COVID-19 virus faster. The platform combines Oxford's Scalable Pathogen Pipeline Platform (SP3), developed with support from the Oxford BRC, with Oracle's Cloud Infrastructure (OCI).

**New artificial intelligence (AI) technology to scan for heightened blood vessel inflammation** can [calculate a person's risk](#) of death from COVID-19 and COVID-19 variants. Using routine chest CT scans, researchers at the University of Oxford have developed a COVID-19 'signature' using machine learning. This 'signature' detects biological red flags in the fat surrounding the blood vessels in the chest to measure the level of cytokine-driven vascular inflammation in people infected with the virus. The research, led by Oxford BRC researcher Professor Charalambos Antoniades, was funded by the British Heart Foundation.

A study by University of Oxford researchers has found that the **risk of admission to hospital, admission to ICU or death from COVID-19 increases progressively above a 'normal' BMI of 23**, even without other comorbidities. The research team, who are supported by the Oxford BRC, found that BMI is a [greater risk factor](#) for people aged 20 to 39 years than for older people, and for black people than for white people. The study looked at the anonymous health records from almost 7 million people in England.

The largest ever study of **COVID-19 vaccine messaging** shows that emphasising the personal benefits of vaccination may be the most [effective way to persuade](#) people who are sceptical about receiving the jab. The Oxford Coronavirus Explanations, Attitudes, and Narratives Survey (OCEANS III) is funded by both the Oxford BRC and the Oxford Health BRC. This group also published research which found that a quarter of the UK adult population has a potential injection phobia, and these individuals are twice as likely to be put off getting a COVID-19 vaccine. It said that if all injection anxiety in the population was removed, just over 10% of instances of vaccine hesitancy might also disappear.

## 9.2. Other Oxford BRC news

**Professor Susan Jebb**, the Oxford BRC's Theme Lead for Obesity, Diet and Lifestyle, has been [appointed as the new Chair](#) of the Food Standards Agency.

Oxford BRC Senior Fellow **Dr David Eyre**, who has played a leading role in OUH's COVID-19 staff testing programme has been named as the recipient of the [Healthcare Infection Society's](#) (HIS) 2021 Early Career Award in recognition of his outstanding innovative contributions to the prevention and control of healthcare-associated infections.

A multi-disciplinary team comprising University of Oxford academics and OUH pathologists has [developed an algorithm](#) that automates requests for additional investigation of diagnostically uncertain prostate biopsies. The team, supported by the Oxford BRC through its Molecular Diagnostics and Imaging themes, used biopsies annotated by the pathologists to train an AI tool to detect tissue regions with ambiguous morphology and decide which cases needed the additional process of

immunohistochemistry. It is anticipated this tool will save a considerable amount of pathologists' time.

OUH clinicians and University of Oxford engineers have begun using artificial intelligence alongside endoscopy to get [more accurate readings](#) of the pre-cancerous condition Barrett's oesophagus and so determine patients most at risk of developing cancer. The researchers, who are supported by the Oxford BRC, said the new AI-driven 3D reconstruction of Barrett's oesophagus achieved 97.2% accuracy in measuring the extent of this condition in real time. This would enable clinicians to assess the risk, the best surveillance interval and the response to treatment more quickly and confidently.

A new clinical trial has been launched to offer a [novel treatment](#) option for patients with the blood cancer myelofibrosis (MF). The PROMise trial, launched by the Cure Leukaemia-funded Trials Acceleration Programme, will involve patients aged 16 or over at 15 NHS centres, including Oxford's Churchill Hospital. Its Chief Investigator is Professor Adam Mead, the Oxford BRC's Co-theme Lead for Haematology. The study is trialling a new treatment called PLX2853, in combination with the drug ruxolitinib, which is the standard NHS treatment for those for whom stem cell transplants are not suitable, but which is not successful for all patients.

Blood pressure-lowering medication can prevent serious cardiovascular conditions such as strokes, heart failure and heart attacks, even in adults with normal blood pressure, according to new research supported by the Oxford BRC. The researchers found the [beneficial effects of treatment](#) were similar, regardless of the starting blood pressure level, in people who had previously had a heart attack or stroke and in those who had never had heart disease. The findings have important implications for clinical guidelines that typically limit blood pressure-lowering treatment to individuals with high blood pressure.

An international study involving Oxford BRC researchers has shown where normal [blood pressure in pregnancy](#) should be across the world and when clinicians should react because it is abnormal. The study's findings provide international, gestational age-specific centiles and limits of acceptable change to facilitate earlier recognition of deteriorating health in pregnant women. The study was part of the INTRGROWTH-21<sup>st</sup> project.

Older patients with hip fractures recover better if they receive treatment under the supervision of both a surgeon and a specialist in elderly care, are checked to avoid future falls, and are assessed for memory problems. These are the findings of the [World Hip Trauma Evaluation](#) (WHiTE) study, supported by the Oxford BRC.

## **10. Oxford Academic Health Science Network (AHSN) and Oxford Academic Health Partners (OAHP) news**

### **10.1. Oxford Academic Health Science Network (AHSN) news**

Oxford University Hospitals (OUH) is among trusts which successfully bid for a share of Pathway Transformation Funds, supporting rapid uptake into everyday practice of proven innovations approved by NICE which target clinical priorities set out in the NHS Long Term Plan. [The OUH received funding for asthma biologics – this element is being led by the Oxford AHSN.](#)

[The Oxford AHSN has published its latest quarterly review.](#) It covers the first three months of 2021 and an overview of activities across 2020/21 as a whole. The report includes case studies which focus on projects initiated locally and successfully rolled out nationally including remote monitoring at home for thousands of people with COVID-19 and a blood test to rule out pre-eclampsia in pregnant women.

The AHSN Network, the collective voice of England's 15 AHSNs, has released an [Impact Report for 2020/21](#). It highlights how AHSNs are supporting adoption and spread in healthcare innovation, transforming patient outcomes, saving the NHS money, generating economic growth and attracting investment. [The national network has also published a report capturing lessons and insights from innovation during the COVID-19 pandemic.](#)

Professor Gary Ford, Chief Executive of the Oxford AHSN, discussed how AHSNs have been supporting the NHS COVID-19 effort through technology and innovation on the BBC News channel in May – [you can watch it on YouTube.](#)

## 10.2. Oxford Academic Health Partners (OAHP) news

The Board of the OAHP met on 25 March and 30 April. Key areas for discussion and action included:

- A current strong area of focus is to support the bids to renew both the Oxford Health and Oxford BRCs with the NIHR. A key stage is the submission of pre-qualification questionnaires (PQQs) at the end of May.
- Professor John Bell updated the Board on the next phase of the Life Sciences Strategy. Additional funding is expected for this and all were agreed that OAHP should engage actively in this work and strongly support. Key areas could be data and clinical trials, particularly on ageing.
- Work continues on the development of the Joint Research Office, which is already an exemplar flagged up with other AHSCs who are looking to Oxford on how to move their joint research management, delivery, and governance arrangements forward. This demonstrates the role of the Oxford AHSC nationally which was welcomed.
- Several case studies are being planned to highlight the work of life sciences partners and other initiatives across the OAHP. These include Brainomix, Perspectum, MetaGuideX and the Oxford Immunology Network. These studies will be featured on the OAHP website and elsewhere.

Financial support from the Oxford Academic Health Partners' Charity, which aims to "advance health by research, clinical care, education and training to provide solutions so that clinical research breakthroughs lead to direct clinical benefits", is available to help turn the benefits of career development and learning into better outcomes for patients.

The Board of the OAHP and the Charity is therefore offering awards to any member of staff or student associated with the Partners. The awards will be for a maximum of £1,500 for any of the following:

- An appropriate conference (virtual or actual)
- An appropriate study course or programme
- A visit to another organisation

Any application must demonstrate that the activity will support career development and enable the participant to benefit the wider organisations and ultimately have an impact on patients and the wider NHS. The deadline for applications is 15 July. A panel made up from the Partners will review applications and make the awards.

Regular updates about the OAHP are available at [www.oxfordahsc.org.uk](http://www.oxfordahsc.org.uk).