

Trust Board Meeting in Public: Wednesday 10 March 2021

TB2021.24

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**Title:** Trust Management Executive Report

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**Status:** For Information

**History:** Regular reporting

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**Board Lead:** Chief Executive Officer

**Author:** Katy Whife, Corporate Governance Manager

**Confidential:** No

**Key Purpose:** Assurance

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**Executive Summary**

1. The Trust Management Executive [TME] has been constituted by the Trust Board and is the executive decision-making committee of the Trust. As such, it provides a regular report to the Board on the main issues raised and discussed at its meetings.
2. Under its terms of reference, TME is responsible for providing the Board with assurance concerning all aspects of setting and delivering the strategic direction for the Trust, including associated clinical strategies; and to assure the Board that, where there are risks and issues that may jeopardise the Trust's ability to deliver its objectives, these are being managed in a controlled way through the Trust Management Executive Committee. This regular report provided aims to contribute to the fulfilment of that purpose.

**Recommendations**

The Trust Board is asked to:

3. Note the regular report to the Board from TME's meetings held in January and February 2021.
4. Approve the revisions to the Terms of Reference at Appendix 1 as recommended by the Trust Management Executive.

## Trust Management Executive Report

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### 1. Purpose

- 1.1. The Trust Management Executive [TME] has been constituted by the Trust Board and is the executive decision-making committee of the Trust. As such, it provides a regular report to the Board on the main issues raised and discussed at its meetings.

### 2. Background

- 2.1. Since the preparation of its last report to the Trust Board, the Trust Management Executive [TME] has met on the following dates:
  - 2.1.1. 14 January 2021
  - 2.1.2. 28 January 2021
  - 2.1.3. 11 February 2021
  - 2.1.4. 25 February 2021

### 3. Issues of interest to the Board

#### **West Wing Theatres Ventilation Completion**

- 3.1. TME approved the sign off and completion of the West Wing Theatre Ventilation Programme. There was a lot of learning throughout the planning and execution of the West Wing Theatre Ventilation programme including:
  - The introduction of Clinical Theatre Floor Manager help to co-ordinate and manage the expectations of the clinical teams
  - The use of the daily theatre huddles and SOP's ensured that the patients who were most urgent were prioritised as first on the list
  - Collaboration and excellent communication between the PFI providers, the Estates team, Clinical Divisions and Corporate teams
  - Agility of the theatre teams who moved equipment so the specialties received a seamless service
  - The Governance arrangements that helped keep the programme on track
  - The principles applied for the scheduling of lists has been used subsequently in the management of the 2nd wave COVID-19 response.

#### **TME Terms of Reference:**

- 3.2. TME propose to Trust Board that the terms of reference are revised to allow the Chief Executive Officer to co-opt members of the TME as required to provide the skills and expertise needed at particular times and to focus on specific issues.

- 3.3. The Trust's experience over the past year has demonstrated the benefit of being able to respond quickly and flexibly to changing circumstances.
- 3.4. Currently its membership comprises the Trust's executive directors and divisional directors along with a small number of other relevant senior staff. The core membership of the TME will therefore be reduced to include only executive directors and divisional directors with other members whose skills and experience support the Committee to effectively discharge its duties to be co-opted by the Chief Executive in response to changing needs.
- 3.5. The updated terms of reference are attached as an Appendix 1.

#### 4. Key decisions

- 4.1. **On-line, On-demand Trust Welcoming Experience:** TME agreed the proposal for a phased implementation of improvements to deliver our aim of an 'On-line On-demand' corporate welcome experience for all new starters.
- 4.2. **South 4 Pathology Partnership, Laboratory Information Management System, Strategic Outline Case:** TME supported the case for the replacement of the current Laboratory Information Management Systems operating across the South 4 Pathology Partnership with a single fit for purpose system.
- 4.3. **Organ Transplantation:** TME approved a proposal regarding the use of organs that were not currently widely used for transplantation in support of recent recommendations by the Advisory Committee on the Safety of Blood, Tissues and Organs.
- 4.4. **Mortuary Service Provision:** TME supported a proposal to mitigate risks associated with the capacity and physical environment of the current mortuary facilities.
- 4.5. **Contract Ratifications:** TME reviewed a number of contract award recommendations as directed by the Trust's standing financial instructions.

#### 5. Other activity undertaken by TME

- 5.1. **Presentation - Oxford Academic Health Partners:** Prof Keith Channon and Sara Ward of Oxford Academic Health Partners (OAHP) joined TME and delivered a presentation that gave information about the partnership, some examples of contributions to the COVID-19 endeavour and impacts of the work through OUH clinical networks.
- 5.2. **Research and Development Activity during the COVID-19 Pandemic:** TME received an update on clinical research activity during the pandemic.
- 5.3. **End of EU Transition:** TME were briefed on the preparations and received an updated risk assessment following the end of transition period. Routine monitoring would now be in the People section of the Integrated Performance Report.

- 5.4. **Preparation of Annual Report and Annual Accounts:** TME supported proposals for completing the Annual Report. The approach this has been informed by learning from the 2019/20 Annual Report exercise.
- 5.5. **Internal Audit:** TME reviewed the routine Internal Audit Recommendation report and received a report on the findings, recommendations and management response to the KPMG Audit on Statutory and Mandatory Training undertaken during Quarter 2.
- 5.6. **Financial Performance and Planning:** TME received regular reporting on the Trust's financial performance, capital allocation and contingency and on the budget and operational plan. TME also received a brief on the initial planning guidance for the remainder for 2020/21 and for 2021/22 and the Trust's response to it.
- 5.7. **Procurement Project Timeline** - the new procurement project timeline report provided TME with an at a glance summary of procurement projects to help improve visibility of key dates and risks to TME members to support planning and coordination of interdependencies.
- 5.8. **Workforce Performance:** TME received the performance report on the key workforce performance indicators and metrics.
- 5.9. **Divisional Performance Reviews:** TME received the 'Summary of Divisional Performance Reviews' that documented the integrated themes and issues from the meeting Agenda presented by Divisions and scrutinised for assurance by members or representatives of the Executive Team.
- 5.10. **Integrated Quality Improvement Plan:** TME noted progress against the improvement programme, which continued to work with local managerial and clinical leaders to drive change and provide an improvement structure to build skills for sustainable results. TME heard the programme was currently being refreshed, which included the further development of the Quality Improvement team.
- 5.11. **Health and Safety:** TME received a report on the principal issues associated with the management of health and safety, including an update on a recent inspection that would be discussed at Trust Board in due course.
- 5.12. **National Cost Collection:** TME received an update on progress against the actions agreed in response to the findings of the Costing Assurance Audit 2019-20, which reviewed the 2018-19 data submissions for the National Cost Collection (formerly known as Reference Costs).
- 5.13. **Capital Projects:** TME received its regular executive summary of all schemes on the capital programme.
- 5.14. **Clinical Governance Committee:** TME received updates from the Committee meetings providing assurance on the effectiveness of the Trust's clinical governance framework.
- 5.15. **Learning from Deaths:** TME received the Trust Board paper for information that summarised the key learning identified in the mortality reviews completed for quarter 2 of 2020/21.

- 5.16. **SIRI and Never Events Report:** TME received an organisational overview of Serious Incidents Requiring Investigation (SIRI), including Never Events that have either been declared or closed in November and December 2020.

### **Key risks**

- 5.17. TME have maintained oversight of the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) and through this process have reviewed the corporate risk and its interconnectivity with risks held in division, actions taken by the Trust and Divisions and assurances of the effectiveness of our controls.
- 5.18. **Risks associated with Covid-19:** TME have continued to maintain oversight of key risks related to Covid-19 response and recovery.
- 5.19. **Risks associated with workforce:** TME have reviewed a number of proposals to ensure appropriate provision of staff to ensure productivity across the Trust, including support to a business case to support investment across the workforce and culture and leadership directorates, which would be considered further by the Trust Board.
- 5.20. **Risks associated with the financial performance:** TME continued to recognise the risks and opportunities to deliver at pace the changes required to maintain the financial position. TME are maintaining close oversight of capital prioritisation and year-end capital underspend mitigation.
- 5.21. TME are maintaining oversight of the development of the approach to develop to the assurance method in relation to Auto-reporting of classes of X-ray ordered for specific IRMER compliance topics.

### **Future Business**

- 5.22. The embedding of the Trust Strategy, including further discussion on the development of the Commercial Strategy, the Clinical Strategy and proposals related to the Digital Strategy.
- 5.23. To maintain continued oversight of internal audit recommendations and to review any partial assurance reports prior to Audit Committee.
- 5.24. To maintain oversight of arrangements for 2020/21 end of year annual reporting.

## **6. Recommendations**

- 6.1. The Trust Board is asked to note the regular report to the Board from TME's meetings held in January and February 2021.

**Trust Management Executive  
Terms of Reference**

**1. Authority**

- 1.1 The Trust Management Executive (TME) has been constituted by the Trust Board and is the executive decision making committee of the Trust, chaired by the Chief Executive.
- 1.2 The Committee is authorised by the Board to investigate any activities within its terms of reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Committee.
- 1.3 The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experiences and expertise if it considers this necessary.

**2. Purpose**

- 2.1 The purpose of the Committee is to provide the Board with assurance concerning all aspects of setting and delivering the strategic direction for the Trust, and its associated clinical strategies;
- 2.2. To ensure that there is appropriate integration, connection and liaison between individual clinical services, between clinical and corporate functions and between strategic and operational matters: within the Trust and between the Trust's academic partners;
- 2.3. To support individual directors to deliver their delegated responsibilities by providing a forum for briefing, exchange of information, mutual support, resolution of issues and achievement of agreement;
- 2.4. To make management decisions on issues within the remit of the Trust Management Executive.
- 2.2 To assure the Board through consultation with appropriate other subcommittees as necessary that the structures, systems and processes are in place and functioning to support the Committee's work as set out above.
- 2.3 To assure the Board that, where there are risks and issues related to the role of the Committee that may jeopardise the Trust's ability to deliver its objectives, these are being managed in a controlled way through the Trust Management Executive Committee.

**3. Membership**

- 3.1 The Committee will be appointed by the Board and its membership shall consist the following:
  - Chief Executive (Chair)
  - Chief Nursing Officer
  - Chief Medical Officer
  - Chief Finance Officer

- Chief Operating Officer
- Chief-Assurance Officer
- Chief People Officer
- Chief Digital and Partnership Officer
- Divisional Directors (x 4)

3.2 The Committee Chair is authorised to co-opt members whose skills and experience support the Committee to effectively discharge its duties. The co-opted membership of the Committee will be reviewed on an annual basis as a minimum.

3.3 The Chair of the Committee has the overall responsibility for the performance of the Committee and also has the final decision on actions required in order complying with the Terms of Reference.

#### **4. Attendance and Quorum**

4.1. The quorum for any meeting of the Committee shall be attendance by the Chair (or nominated deputy) and

- Three Executive Directors (not including deputies)
- Two Divisional Directors (not including deputies)

4.2 Members are expected to attend at least three quarters of all meetings each financial year. An annual register of attendance of members will be published by the committee.

4.3 If members are unable to attend, a deputy may attend with the agreement of the Chair. The nominated deputies for each Executive Director or Divisional Director should be specifically identified and should not be different for each meeting of the Committee that they attend. TME members shall not routinely allocate attendance at the Committee to their nominated deputy. This should only happen as a result of unforeseen absence or by special arrangement agreed in advance with the Chief Executive. Deputies will be counted for the purpose of the attendance record.

4.4 The Committee Chair may request attendance by relevant staff at any meeting.

#### **5. Frequency of meetings**

5.1. Meetings of the Trust Management Executive shall be held twice each month. The Chief Executive, as Chair of TME, is authorised to alter the timing and frequency of the meeting if required to ensure effective operation of the trust activities, and will notify the Trust Board if any changes are required on a permanent basis.

#### **6. Specific Duties**

6.1 Develop and agree objectives for submission to the Trust Board, in the form of the annual business plan, to deliver the agreed strategy and agree detailed capital and revenue business plans to deliver the objectives.



- 6.2. To ensure, where appropriate, the alignment of the Trust's strategy with the strategy of the University of Oxford and other key partners.
- 6.3. To develop the Trust's clinical service strategies, ensuring co-ordinating and alignment across the clinical divisions,
- 6.4. Closely monitor standards of care, quality and safety by ensuring appropriate actions are taken.
- 6.5. Identify and mitigate risk by monitoring the corporate risk register and board assurance framework, agreeing resourced action plans and ensuring their delivery and ensure compliance and appropriate escalation in accordance with the Trust's risk management systems and processes.
- 6.6. Develop, agree and monitor implementation of plans to improve the efficiency, effectiveness and quality of the Trust's services.
- 6.7. Monitor the delivery of the Trust's service activity and financial objectives and agree actions, allocate responsibilities, and ensure delivery where necessary to deliver the Trust's objectives or other obligations.
- 6.8. Monitor and ensure the delivery of all specific actions agreed by the Trust Board, by the Trust Management Executive and by committees of both.
- 6.9. Monitor the delivery of the Trust's enabling strategies as advised by the Trust Management Executive's subcommittees.
- 6.10. To devise the Trust's annual and longer term capital programme and monitor its delivery.
- 6.11. Agree all relevant policies – other than those retained by the Trust Board - to ensure the delivery of external and internal governance and best practice requirements and compliance.
- 6.12. Approve the Terms of Reference for all the sub-committees and groups of the Committee, delegate work as appropriate and hold the respective Chairs to account for compliance with their responsibilities.

### **7. Sub-Committees**

- 7.1 The Trust Management Executive is supported by a number of subcommittees/groups, including:
  - Business Planning Group
  - Capital Programme Board
  - Clinical Governance Committee
  - Digital Oversight Group
  - Education and Training Committee
  - Health and Safety Committee
  - Operational Forum
  - Performance Review
  - Research and Development Committee
  - Risk Committee
  - Workforce Committee

7.2 The Committee Chair is authorised to establish such additional subcommittees as they determine necessary to support TME in discharging its duties.

7.3 The Committee Chair will determine the reporting frequency and format from these subcommittees and groups in conjunction with TME.

### **8. Administrative Support**

8.1 The Head of Corporate Governance is responsible for ensuring appropriate administrative support is in place to support the work of the Committee, including:

- Agreement of the agenda with the Committee Chair, collation and distribution of papers at least two working days before each meeting.
- Taking the minutes and keeping a record of matters arising and issues to be carried forward.
- Providing support to the Chair and members as required.

### **9. Accountability and Reporting arrangements**

9.1 The Committee shall be directly accountable to the Trust Board.

9.2 The Chair of the Committee shall prepare a summary report to the Trust Board detailing items discussed, actions agreed and issues to be referred to the Trust Board.

9.3 The minutes of the Committee meetings shall be formally recorded and will be available to the Board on request.

9.4 The Committee shall refer to the Trust Board any issues of concern it has with regard to any lack of assurance in respect of any aspect of the running of the Committee.

9.2 Where the Chair of the Committee considers appropriate, they will escalate immediately any significant issue to the Trust Board.

### **10. Monitoring Effectiveness and Compliance with Terms of Reference**

10.1 The Committee will carry out an annual review of its effectiveness and provide an annual report to the Board on its work in discharging its responsibilities, delivering its objectives and complying with its terms of reference, specifically commenting on relevant aspects of the Board Assurance Framework and relevant regulatory frameworks.

### **11. Review**

11.1 The Terms of Reference of the committee shall be reviewed at least annually by the Committee and approved by the Board.

**Date approved:**

**Approved by: Trust Board**

**Next review date:**