NHS
Oxford University Hospitals
NHS Foundation Trust

Cover Sheet

Trust Board Meeting in Public: Wednesday 12 July 2023

TB2023.75

Title:	**Trust Management Executive Report**

Status:	**For Information**
History:	**Regular Reporting**

Board Lead:	**Chief Executive Officer**
Author:	**Neil Scotchmer, Head of Corporate Governance**
Confidential:	**No**
Key Purpose:	**Assurance**

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 some of 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:

- **note** the regular report to the Board from TME's meetings held on:
    - 11 May 2023
    - 1 June 2023
    - 15 June 2023
    - 29 June 2023; and
- **note** the Trust Management Executive Annual Report of Committee Effectiveness for 2022/23 (Appendix 1).

Trust Management Executive Report

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 some of 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:

- 11 May 2023
- 1 June 2023
- 15 June 2023
- 29 June 2023

3. Key Decisions

Report from Targeted Lung Health Check Programme Business Case

3.1.   TME received a paper relating to the national programme for targeted lung screening in populations with a higher risk of lung cancer, which aims to tackle health inequalities by using mobile CT vans to take screening services into the heart of communities.

3.2.   Oxfordshire is in the next wave of areas to be covered by the national programme, and in January 2023 OUH was invited by the Thames Valley Cancer Alliance to bid for a mobile CT scanner and mobile clinical space to support the service.

3.3.   At the end of May 2023 the Trust learnt that this bid had been successful and a task and finish group has been set up to implement the total lung health check programme within Oxfordshire, with collaborative working across the CSS and MRC divisions.

3.4.   Due to the lead time for provision of the mobile units, it is proposed to launch the service in January 2024.

3.5.   TME members supported the paper and recommended it to the Trust Board via the Investment Committee.

Additional Consultant Anaesthetists to Support Delivery of National Operational Key Performance Indicators (KPIs)

3.6.   TME received a proposal to recruit three extra Consultant Anaesthetists in order to support the Trust in achieving the national requirement to have treated all patients waiting over 65 weeks by March 2024.

3.7.   This is set out in NHS England's Priorities and Operational Planning Guidance for 2023-24, and the Trust needs to be able to run three additional operating theatre lists a week at the Nuffield Orthopaedic Centre (NOC) in order to achieve this goal.

3.8.   Analysis of reasons for theatre list cancellations in 2022-23 showed that 36% of cancelled lists were due to a shortage of anaesthetists, and that the NOC was particularly affected by a lack of anaesthetic cover because anaesthetic resource sometimes has to be prioritised to other OUH hospital sites for emergency and cancer surgery lists.

3.9.   TME therefore supported a proposal to recruit three anaesthetists with a primary focus on the NOC site.

Tender for the Provision of Manned Security and Car Parking Services

3.10.   TME received a paper requesting ratification to award a contract following a tender exercise for manned security and car parking services.

3.11.   The contract included the provision of manned security and car parking control staff and administrative support across the John Radcliffe, Churchill, and Horton General hospital sites with different arrangements in place at the Nuffield Orthopaedic Centre.

3.12.   Tendering was required because the existing contract expired on 31 July 2023 and was led by stakeholders from the Estates & Facilities, Security, Travel & Transport, Finance, and Emergency Department teams.

3.13.   TME members recommended the proposal to the Investment Committee for approval by the Trust Board to award the contract to the chosen providers for a period of five years, with the option of two 12-month extensions.

Policies

3.14.   The Mobile Phone Policy, Acceptable Use Policy and Registration of Clinical Research Practitioners Policy were approved.

4. Other Activity Undertaken by TME

<u>CAR-T Therapy Update</u>

4.1.   TME heard that OUH had been formally commissioned by NHS England as a Chimeric Antigen Receptor T cell (CAR-T) Therapy Service to treat patients with haematological malignancies.

4.2.   CAR-T cells have been shown to cure patients who would otherwise have no curative option, and these treatments have been approved by NICE for use in designated CAR-T therapy centres.

4.3.   Oxford has now been formally approved by NHS England as a CAR-T therapy centre, and the first patient has now been consented to start on the pathway to CAR-T therapy. Having this facility available in Oxford means that patients will not have to travel potentially long distances to other hospitals for CAR-T treatment.

<u>Patient Safety Incident Response Framework (PSIRF)</u>

4.4.   An update was provided to TME regarding the planning and preparations which are now underway in advance of the new Patient Safety Incident Response Framework (PSIRF) being introduced at OUH and in all other NHS trusts in England later this year. PSIRF is due to replace the existing Serious Incident Framework in Autumn 2023.

4.5.   PSIRF aims to not only improve support for staff, patients, and families affected by a patient safety incident, but also to have a stronger focus on learning and improvement from incidents while avoiding a 'blame culture' focused on individuals or teams.

4.6.   At OUH, a new steering group has been created to support the transition to PSIRF and a PSIRF Summit held in February 2023 was well-attended by OUH staff and a range of internal and external stakeholders.

4.7.   More information about what this means for staff working at OUH will be communicated between now and the PSIRF launch date later this year and a Board seminar on PSIRF is scheduled for July.

<u>Capital Schemes Update</u>

4.8.   TME received a report highlighting the opening of a number of new facilities to improve the Trust's diagnostics which are key to many patient pathways.

4.9.   A second CT scanner has been installed at the Horton General to increase diagnostic capacity and ensure that more patients can be treated locally instead of having to travel to Oxford.

4.10. This investment will improve patient care for the people of Banbury and the surrounding area, and is part of the Trust's continuing programme of investment in the Horton.

4.11. In addition, a new Fluoroscopy Suite is now up and running in Radiology at the NOC which will provide state-of-the-art imaging and help reduce waiting times.

Annual Plan Development

4.12. TME continued to be updated in relation to the development of the Trust's Annual Plan and discussions with key commissioners and other stakeholders. TME discussed the controls and productivity improvements that would be required to successfully deliver the plan.

Annual Report Development

4.13. TME was updated on the development of the Trust's Annual Report for 2022/23 and invited to comment on the draft document.

4.14. The Trust Management Executive also reviewed the development of the Annual Governance Statement (AGS) and, in particular, considered key issues of control over the year.

Quality Account 2022/23

4.15. TME reviewed and provided feedback on the draft 2022-23 Quality Account in advance of it being presented for approval to the Trust Board.

Digital Workplan 2023-24

4.16. TME reviewed the current long list of projects and programmes with digital involvement. It was updated on the prioritisation process and the proposed workplan for 2023-24.

CQC Oxford Critical Care Action Plan

4.17. TME received a draft action plan in response to the findings of the Care Quality Commission (CQC) following their unannounced inspection of Oxford Critical Care services.

Integrated Quality Improvement Programme Update

4.18. TME received an update which summarised work since the programme reset in April 2023. It included the four new core programmes of QI Education / Community Building, Urgent and Emergency Care, Cancer Care and Harm Reduction.

Other Items

4.19. TME received the following annual reports:

- Health and Safety Annual Report

- Research & Development Governance and Performance Report

- End of Life Care Annual Report

4.20. Internal audit reports were received as part of the annual programme.

5. Regular Reporting

5.1. In addition TME received the following regular reports:

- Integrated Performance Report (this is now received by TME prior to presentation to the Trust Board and Integrated Assurance Committee);

- Capital Schemes: The TME continues to receive updates on a range of capital schemes across the Trust;

- Divisional and Corporate Performance Reviews: TME receives a summary Performance Reviews that documents key themes and issues presented and actions agreed;

- Financial Performance Report: The TME continues to receive financial performance updates;

- Workforce Performance Report: TME receives and discusses monthly updates of the key KPIs regarding HR metrics;

- Clinical Governance Committee Report;

- People and Communications Committee Report;

- Digital Oversight Committee Report;

- Business Planning Pipeline Report;

- Procurement Pipeline Report; and

- Summary Impact of TME Business (which allows TME members to more easily track the combined financial impact of decisions taken.)

6. Key Risks

6.1. **Risks associated with industrial action:** TME continued to be updated on planning to manage and mitigate the risks associated with industrial action.

6.2. **Risks associated with workforce:** TME maintained continued oversight on ensuring provision of staff to ensure that services were provided

safely and efficiently across the Trust and to maintain staff wellbeing in the light of substantial operational pressures. The impact on staff of cost-of-living pressures continued to be recognised.

6.3.   **Risks to operational performance:** TME continued to monitor the risks to operational performance and the delivery of key performance indicators and the mitigations that were being put in place.

6.4.   **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.

7. Recommendations

7.1.   The Trust Board is asked to:

- **note** the regular report to the Board from TME's meetings held on 11 May 2023, 1 June 2023, 15 June 2023 and 29 June 2023; and

- **note** the Trust Management Executive Annual Report of Committee Effectiveness for 2022/23 (Appendix 1).

Cover Sheet

Trust Management Executive Meeting: Thursday 29 June 2023

TME2023.231

Title:	**Annual Report and Review of Committee Effectiveness for 2022/23**

Status:	**For Decision**
History:	This is an Annual Report summarising the activities of the Committee during the 2022/23 financial year and setting out how it has met its Terms of Reference.

Board Lead:	**Chief Executive Officer**
Author:	**Neil Scotchmer, Head of Corporate Governance**
Confidential:	**No**
Key Purpose:	**Assurance**

Executive Summary

1. The purpose of this Annual Report is to demonstrate to the Board the extent to which the Trust Management Executive has met its Terms of Reference during the financial year 2022/23.

2. The Corporate Governance team has reviewed the activities of the Committee and has assessed that they are consistent with their Terms of Reference.

Recommendations

3. The Trust Management Executive is asked to review and approve the report for presentation to the Trust Board.

Annual Report and Review of Committee Effectiveness for 2022/23

1. Purpose

1.1. The purpose of this Annual Report is to demonstrate to the Board the extent to which the Trust Management Executive (TME) has met its Terms of Reference during the financial year 2022/23.

2. Background

2.1. Good practice states that the Trust Board should review the performance of the Trust Management Executive annually to determine if it has been effective, and whether further development work is required.

2.2. This Annual Report summarises the activities of the Trust Management Executive for the financial year 2022/23 setting out how it has met its Terms of Reference and key priorities.

2.3. The Report had been informed by a review of the papers presented to TME against the responsibilities set out in the Terms of Reference.

3. Terms of Reference

3.1. The purpose of TME as outlined in the Terms of Reference is to provide assurance to the Trust Board concerning all aspects of setting and delivering the strategic direction for the Trust, and its associated clinical strategies and 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.

3.2. TME met 23 times during 2022/23 and was quorate on all but one occasion.

3.3. TME has a process for ratifying decisions taken at such meetings. A summary of decisions recommended at the meeting and key discussion points is shared with individuals in the relevant membership category who did not attend so their support could be confirmed.

3.4. Whenever the Chair was absent, a nominated deputy chaired the meeting. All members of the Committee in role for the whole year attended or were represented by their nominated deputy for the meetings scheduled. As per the Terms of Reference, the nominated deputy could only attend due to unforeseen absence or special arrangements agreed in advance.

4. Responsibilities

4.1.   During 2022/23 TME has delivered the key responsibilities as set out in the Terms of Reference which are demonstrated by the following sections of the report.

The Committee has monitored and ensured the delivery of specific responsibilities and actions agreed by the Trust Board as outlined below.

4.2.   A new TME subcommittee, Productivity Committee, was established to monitor:

- overall clinical and non-clinical key performance indicators

- the planning and implementation of annual efficiency plans by clinical divisions and corporate directorates

- the impact on productivity of the Quality Improvement programme, following TME approval of a Quality Improvement Education Strategy

- productivity improvement following the Trust's Quality Impact Assessment policy;

- the delivery of key projects and the realisation of productivity benefits from business cases.

4.3.   Business cases, including proposals to improve efficiency, effectiveness, and quality of the Trust's services whilst ensuring alignment to the Trust's strategic priorities and values were reviewed at each meeting. In assessing cases TME gave consideration to the prioritisation of resources, an assessment of benefits and risks and consistency with the Trust's wider strategy. The process was supported by the work of the Business Planning Group before cases were referred to the Trust Management Executive, as well as by Quality Impact Assessments of proposals.

4.4.   A summary impact report has been introduced to enable TME to more easily track the combined financial impact of decisions taken.

4.5.   The development of partnerships and system working opportunities, including those relating to health inequalities, was considered.

4.6.   TME undertook iterative oversight of the production of the Annual Report and Accounts to ensure the accuracy and quality of the final documents.

4.7.   Proactive capital planning and prioritisation was undertaken to ensure proactive management of all identified risks and opportunities and the effective use of resources.

4.8.   TME provided oversight of the implementation of Internal Audit recommendations and reviewed all partial assurance reports to drive improvements throughout the Trust's services.

Key risks discussed by the Committee and reporting to the Trust Board for information, including:

4.9.   Risks associated with finance performance: TME continued to recognise the risks and opportunities to deliver at pace the changes required to maintain a strong financial position.

4.10.   Risks associated with workforce: TME maintained continued oversight on ensuring provision of staff to ensure that services were provided safely and efficiently across the Trust and to maintain staff wellbeing in the light of substantial operational pressures. The impact on staff of cost of living pressures was also recognised.

4.11.   Risks associated with industrial action: TME noted planning to manage and mitigate the risks associated with planned industrial action.

4.12.   Risks to operational performance: TME continued to monitor the risks to operational performance and the delivery of key performance indicators and the mitigations that were being put in place.

4.13.   Risks related to winter pressures: TME noted winter plans for emergency and elective services and would continue to monitor their development and implementation.

4.14.   Risks associated with COVID-19: TME have continued to maintain oversight of key risks related to COVID-19 response and recovery across the later waves of the pandemic, along with oversight of other seasonal respiratory disease.

Reviews of annual reports and reviews including:

- Freedom to Speak Up
- Combined Equality Standards
- Claims, Inquests and PFD
- Postgraduate Medical Education
- Annual Governance Statement
- Internal Audit Annual Plan
- Clinical Governance Committee
- Counter Fraud Annual Plan
- Emergency Preparedness, Resilience, and Response (EPRR)

- Health and Safety

- R&D Governance

- NIHR Research and Development Metrics

- Mental Health Act

Reviewing and approving policy updates and amendments before circulation across the Trust and providing recommendations to the Trust Board, including:

- Risk Management Policy

- Overseas Visitor Policy

- Stress Management in the Workplace

- Freedom to Speak Up

- Media Policy

- Social Media Policy

- Estates Policies on: Medical Gas Systems Safety, Pressure Systems, Lift Management and Electrical Safety

5. Regular Reporting

5.1. TME reported to the Trust Board, providing a summary of each meeting during the year. Reports included a description of the business conducted, highlighted significant issues of interest to the Trust Board, risks identified, actions agreed, and decisions taken.

5.2. TME considered areas to be raised to the Trust Board during the scheduled meetings and through items to be referred to its subcommittees.

5.3. TME has received regular consolidated summaries of the integrated themes and issues from Divisional Performance Reviews. Divisional Directors have highlighted the value of this increase transparency of performance information across the divisions.

5.4. TME reviews a range of regular reporting, including reports from subcommittees, and this includes:

- Clinical Governance Committee Reports

- Health and Safety Reports

- Divisional Performance Reports

- Corporate Performance Reports

- Financial Performance Reports

- Workforce Performance Reports

- Integrated Improvement Plan Reports

- Capital Project Update Reports

- Business Planning Pipeline Reports

- Procurement Pipeline Reports

6.   Conclusion and Actions for 2023/24

6.1.   TME has continued to explore improvements to effectiveness and efficiency to ensure that meetings are productive and TME members' time is effectively utilised.

6.2.   Virtual meetings have been held throughout 2022/23 and feedback has been positive that this format supports focused meetings and effective decision making alongside the need to balance other operational prioritises.

6.3.   TME members have continued to work to improve transparency through the continued publication of a fortnightly blog, outlining key decisions and topics to all staff.

6.4.   TME will now receive and review all internal audit reports regardless of rating.

6.5.   A priority for 2023/24 will be to enhance TME's connectivity with its subcommittees through the development of a standard, concise reporting format to ensure that key decisions are highlighted to TME and that risks and other issues are escalated where appropriate.

6.6.   In addition, arrangements will be developed to provide greater assurance and oversight in relation to the monitoring of the delivery of key objectives through the formation of a Delivery Unit. It is anticipated that further proposals in relation to this will be presented to a future meeting of the TME.

7.   Recommendations

7.1.   The Trust Management Executive is asked to review and approve the Trust Management Executive Annual Report 2022/23 for presentation to the Board.