



Cover Sheet

Trust Board Meeting in Public: Wednesday 14 May 2025

TB2025.48

Title: **Trust Management Executive Report**

Status: **For Information**

History: **Regular Reporting**

Board Lead: **Acting Chief Executive Officer**

Author: **Neil Scotchmer, Head of Corporate Governance**

Confidential: **No**

Key Purpose: **Assurance**

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.
- 1.2. 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.

2. Background

- 2.1. Since the preparation of its last report to the Trust Board, the Trust Management Executive has met on the following dates:
 - 13 March 2025
 - 27 March 2025
 - 10 April 2025
 - 1 May 2025

3. Key Decisions and Updates

Freedom to Speak Up Update

- 3.4. The Lead Guardian for Speaking Up presented a report updating TME on Freedom to Speak Up activity from April to December 2024 including in person roadshow events and regular online listening events.
- 3.5. The update also described the launch of the new WorkInConfidence anonymous reporting platform which had encouraged more staff to speak up. It had been introduced as an extension of the existing Freedom to Speak Up service in response to feedback from the NHS Staff Survey results and at OUH People Plan listening events.
- 3.6. The Freedom to Speak Up training modules which are available via My Learning Hub were also highlighted.

OUH People Plan

- 3.7. The Chief People Officer introduced the draft OUH People Plan 2025-28 for TME's support before presentation to the Trust Board for approval.

- 3.8. The new plan had been developed on the basis of extensive staff engagement with more than 400 staff participating in face-to-face and virtual listening events in December 2024 and January 2025 to help inform the Trust's priorities going forward.
- 3.9. The 2025-28 People Plan retains and builds upon the vision and strategic themes of the 2022-25 Plan and was supported by the TME.

Surgical Elective Centre – Nurse Recruitment

- 3.10. TME approved a recruitment plan for the nursing workforce for the new Surgical Elective Centre (SEC) which is being built on the JR site which was presented by the Chief Nursing Officer. This was based on a review of the nurse requirements by nursing leads on the SEC project along with the Safe Staffing team.
- 3.11. Recruitment was to be phased to ensure adequate training placements before staff start working in the SEC. Phase 1 of the new building, including seven operating theatres, is due to open in June 2026.
- 3.12. The timeliness of recruitment was recognised to be key to ensuring staff were adequately trained and that theatres could open on the agreed date.
- 3.13. Recruitment will be monitored centrally with regular reporting to the Surgical Elective Centre Programme Board which will present a six-monthly progress report to TME for assurance.

Surgical Elective Centre – Consultant Anaesthetist Recruitment

- 3.4. TME also approved a recruitment plan for the consultant anaesthetist workforce for the new Surgical Elective Centre (SEC) presented by the Interim Divisional Director for CSS Division.
- 3.5. This was based on a review of the anaesthetic workforce requirements to meet the theatre activity schedules within the SEC building by the Anaesthetic leads and Divisional team.
- 3.6. Recruitment would be phased and monitored via the same approach proposed for nursing.

Replacement Ophthalmology Electronic Medical Records (EMR) Outline Business Case

- 3.4. TME members approved Phase 1 of an Outline Business Case to replace the Ophthalmology electronic medical record (EMR).
- 3.5. The Trust's existing EMR was out of contract for maintenance which means that there is currently an additional monthly cost to the Trust to ensure continued maintenance and provision of the system with this provision ceasing in June.

- 3.6. TME was presented with a business case in two phases, the first a like-for-like replacement with the second phase delivering additional benefits of the system through utilisation of enhanced functionalities. The second phase is expected to be progressed and will bring about a step change by realising efficiencies and improving patient safety by increasing the visibility of Ophthalmology notes Trustwide.

Extension of Park & Ride Incentives for Staff

- 3.4. A proposal to extend the Park & Ride incentives for all OUH staff which were launched in April 2024 was approved by the TME.
- 3.5. OUH staff who use the Park & Ride facilities at Thornhill, Redbridge and Oxford Parkway can use free Park & Ride bus travel for work journeys and the scheme has recently been improve the scheme by introducing additional stops and services. Since this free Park & Ride bus travel scheme was launched in April 2024, more than 30,000 work journeys by OUH staff have been made for free.
- 3.6. In addition staff with a staff parking permit at the JR, Churchill or NOC can surrender it in order to receive a one-off £200 payment plus, for at least an initial six months, free parking at the Thornhill, Redbridge, and Oxford Parkway Park & Rides, and free bus travel between the hospitals and Park & Rides.
- 3.7. The extension of the two schemes was approved and TME requested that a review of their impact be brought back to a TME meeting in six months' time.

4. Other Activity Undertaken by TME

Annual Planning Process

- 4.4. TME has been regularly updated on planning guidance and the development of the annual plan setting out the Trust's position against the core standards in national planning guidance including finances prior to approval by the Trust Board and submission.

2025/26 Budget Setting

- 4.5. TME approved the 2025/26 budget setting approach, timeline, and control protocol.
- 4.6. Baseline budgets had been formulated in accordance with established budget setting principles, accounting for efficiency targets with subsequent budget adjustments were to be processed on a quarterly basis throughout the year.

- 4.7. Work had been undertaken to ensure alignment with the workforce plan and a number of risks had been flagged in relation to non-pay costs. Income reporting was being developed to give Divisions improved detail to enable them to triangulate activity and income assumptions.
- 4.8. Clear communication was identified as key to implementing new budget management and robust governance was in place with a quarterly reporting process agreed.
- 4.9. It was recognised that TME would need to carefully review situations when off plan and make difficult decisions where necessary.

PLACE (Patient-Led Assessment of the Care Environment) 2024 results

- 4.4. TME received the Trust's latest PLACE results which are annual appraisals of the non-clinical aspects of healthcare settings, involving teams made up of staff and members of the public (patient assessors). These assessments evaluate cleanliness, food and hydration provision, privacy and dignity, and suitability for dementia or disability needs.
- 4.5. TME heard that there had been significant improvements year-on-year both at Trustwide level and on each of the four main hospital sites in Oxford and Banbury.
- 4.6. Action plans for each domain were to be developed in partnership with patient assessors and key staff from across the Trust and were to be overseen by the PLACE Delivery Group.

No Excuses for Bullying & Harassment Programme Update

- 4.4. TME members received a six-monthly update about the development and implementation of the Trust's No Excuses for Bullying and Harassment programme.
- 4.5. Divisional Bullying and Harassment groups were using the recently published NHS Staff Survey 2024 data to help inform priorities for the year ahead, including focusing on priority areas for support and enabling staff to feel more confident about speaking up.
- 4.6. The second phase of the No Excuses for Bullying and Harassment campaign, focusing on sexual harassment, had been launched in March. The Trust has signed the national Sexual Safety in Healthcare Charter and is committed to working with colleagues to address any unwanted, inappropriate, and harmful sexual behaviours in the workplace.
- 4.7. TME was updated on key elements of this campaign including training via My Learning Hub, a poster campaign and a comprehensive toolkit which provides guidance on recognising and reporting sexual misconduct and the approach to taking action and supporting staff.

Annual Governance Statement (Areas of Significant Control)

- 4.4. The TME reviewed the first draft of the Annual Governance Statement and supported the assessment that had been made regarding potential gaps in control.
- 4.5. As part of the Annual Accounts the Trust is required to include an Annual Governance Statement (AGS) from the Accounting Officer, the Chief Executive and one component of this is to check for significant control gaps during the year.
- 4.6. A number of areas were considered and TME supported the view that none of these represented a significant control gap due to their identification and management through routine reporting and appropriate and robust responses throughout the year.

External Communications SLA and Social Media Review

- 4.7. TME approved an External Communications SLA which covered reactive media inquiries, proactive media work, social media, the Trust website, and high-profile visits. The SLA aimed to provide a framework for collaboration and accountability in these areas.
- 4.8. A social media review was also received. This noted the fast-changing nature of social media and noted that the Trust's use of Twitter (now X) had decreased due to low engagement. New accounts on platforms like Threads and Nextdoor had been established, and their impact was to be reviewed over the coming months.

Diagnostic Pathway Management Tool

- 4.4. TME members approved a proposal to proceed with development of a new Diagnostic PTL (Patient Tracking List) validation and reporting system, extending the Elective Pathway Manager system already being used for RTT (Referral to Treatment).
- 4.5. This was expected to result in a vastly improved user experience for staff with improved ability to manage diagnostic pathways.

5. Policy

Artificial Intelligence Policy

- 5.4. This new Trust policy for the use and approval for use of AI technologies was presented to TME by the Chief Digital & Information Officer.
- 5.5. It was recognised that AI is a rapidly growing field of technology, with extensive opportunities for efficiency savings and quality improvements, but it also comes with some risks, most of which are not currently well

covered by national guidance or specific regulatory requirements as the field is new and subject to rapid change.

- 5.6. TME approved the policy for immediate use in order to provide guidance to staff and signpost to training to mitigate against the misuse or misunderstanding of AI tools.
- 5.7. It was noted, however, that the policy was an interim one, with the intention to revise and update it over the next six months prior to seeking final approval from the Board.

Updated External Reviews Policy

- 5.4. TME members approved this updated policy which was introduced by the Director of Regulatory Compliance and Assurance.
- 5.5. The External Reviews Policy outlines the processes for managing external reviews, inspections, and accreditations and aims to ensure that reviews are conducted effectively, recommendations are implemented and monitored, and that any relevant Trustwide learning is effectively identified and communicated.

Ratification of Violence Aggression and Abuse Reduction Procedure

- 5.6. TME ratified this updated procedure which was renamed to enhance its visibility and better reflect its goal of reducing incidents of violence and aggression.

6. Reporting from Sub-Committees

- 6.1. TME reviewed the Clinical Governance Committee Report, which noted the smooth rollout of ReSPECT (Recommended Summary Plan for Emergency Care and Treatment). The results of the National Respiratory Audit: Paediatric Asthma and National Early Inflammatory Arthritis Audit and the resulting action plans were also highlighted.

7. Regular Reporting

- 7.1. In addition, TME reviewed the following regular reports:
 - Integrated Performance Report (this is received by TME prior to presentation to the Trust Board and Integrated Assurance Committee);
 - Capital Schemes: TME continues to receive updates on a range of capital schemes across the Trust;
 - Integrated Quality Improvement Programme Update;
 - Finance Report: TME continues to monitor financial performance;

- People Performance Report: TME receives and discusses monthly updates of the key KPIs regarding HR metrics;
- Divisional Performance Reviews;
- Health and Safety 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.)

8. Key Risks

- 8.1. **Risks associated with the financial performance:** TME recognised the risks in relation to the delivery of the financial plan for 2025/26. **(BAF Strategic Risk 3.1 & 3.2)**
- 8.2. **Risks associated with workforce:** TME maintained continued oversight on ensuring the provision of staff to ensure that services were provided safely and efficiently across the Trust and to maintain staff wellbeing in the light of operational pressures. **(BAF Strategic Risk 1)**
- 8.3. **Risks to operational performance:** TME noted the risks to operational performance and the delivery of key performance indicators that were included in its plan for 2025/26. **(BAF Strategic Risk 2)**

9. Recommendations

- 9.1. The Trust Board is asked to
 - **note** the regular report to the Board from TME's meetings held on 13 March 2025, 27 March 2025, 10 April 2025, and 1 May 2025; and
 - **note** the approval by TME of an interim Artificial Intelligence Policy with a revised and updated version to be brought for Board approval.