

Cover Sheet

Trust Board Meeting in Public: 9 November 2022

TB2022.102

Title: Trust Management Executive Report

Status: For Information

History: Regular Reporting

Board Lead: Chief Executive Officer

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Confidential: No

Key Purpose: Assurance

Executive Summary

- 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:

- **note** the regular report to the Board from TME's meetings held on:
 - o 29 September 2022
 - o 13 October 2022
 - o 27 October 2022

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 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:
 - 29 September 2022
 - 13 October 2022
 - 27 October 2022

3. Key Decisions

- 3.1. TME approved the Quality Improvement (QI) Education three-year strategy which support the aim to provide more equitable access to QI training for all staff working at OUH with the creation of a new QI Forum to monitor progress. Embedding QI methodology more widely in the organisation is one of the Trust's Quality Priorities for 2022/23 and the Trust Board is committed to sharing learning and promoting widespread adoption of QI at OUH. TME members committed to support implementation of the strategy, including by encouraging and enabling staff to access QI training and to apply their learning to improvements rooted in the principles of QI in their areas of the Trust.
- 3.2. The appointment of a substantive full-time consultant in Paediatric Endocrinology and Diabetes was approved by the TME. The current postholder is retiring and returning only part-time, but a full-time post will be funded by the reassignment of other sessions which are currently in the budget.
- 3.3. TME approved the replacement of the NOC Radiology Interventional Fluoroscopy unit to re-instate the on-site interventional fluoroscopy service to treat a combination of admitted complex patients, same-day sarcoma patients and outpatients.
- 3.4. TME approved a new Recruitment Service Level Agreement which set a target of 49 days from receipt of advertisement to an unconditional offer. This timescale was felt to be achievable and opportunities to further

- reduce the waiting time would be taken when circumstances permitted. Monitoring would initially be through the sharing of dashboards with Divisions to identify blockages
- 3.5. A revised Overseas Visitor Policy was recommended to the Board subject to review by the Health Inequalities Steering Group.
- 3.6. Revised policies for Stress Management in the Workplace and Freedom to Speak Up were recommended to the Trust Board for approval.

4. Other activity undertaken by TME

- 4.1. Feedback was provided to the TME on the cross-divisional summer stocktake on the OUH Clinical Strategy Programme. This was set up in February 2022 to support the Trust to strategically engage with and influence its changing system landscape including the shift earlier in the year to statutory Integrated Care Systems. TME thanked all clinical directorates and Divisions for their input into the process. The next steps will be divisional prioritisation of submissions, and then a strategy workshop involving the Board and Divisional leads to agree priorities.
- 4.2. TME received an update on the Trust's plans to allocate funding secured from the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Local Maternity and Neonatal System. Following the Trust's successful bid, the funding will be used to implement 15 immediate and essential actions following publication of the final report of the Ockenden Review into maternity services at Shrewsbury and Telford Hospital NHS Trust in March 2022, which also had implications for other NHS maternity services. TME members noted the significant new funding which the Trust now has access to in order to achieve compliance with the Ockenden actions and the updated Continuity of Carer guidance, and thanked Maternity staff who are working hard to implement these requirements.
- 4.3. TME received an update on small capital schemes which had been funded. The need for a specific capital allocation to fund small schemes that would otherwise struggle to get funding approval had previously been recognised and TME was updated on what has been approved to proceed from the £1m allocation in the 2022/23 capital programme.
- 4.4. TME was updated on the work of the new Productivity Committee which has met three times since it was set up to provide a focus for our management effort to improve productivity.
- 4.5. The Committee, which reports to TME, consists of the executive directors, the divisional directors and other corporate directors whose roles directly affect productivity.

- 4.6. It has established a standing agenda to review progress each month in respect of:
 - key indicators for productivity;
 - the efficiency plan;
 - the Quality Improvement Plan;
 - · major projects; and
 - benefits realisation.
- 4.7. The Committee also considers reports by exception on important issues and has looked at the divisional efficiency programme (in August), a forensic analysis of pay costs (in September), proposals on controlling temporary staffing and the status of the quality impact assessments (QIAs) on efficiency plans (both in October).
- 4.8. TME received the Claims, Inquests and PFD Annual Report.

5. Regular Reporting

- 5.1. TME received the following regular reports:
 - Capital Schemes: The TME continues to receive updates on a range of capital schemes across the Trust.
 - Financial Performance Review: The TME continues to receive financial performance updates.
 - Divisional and Corporate Performance Reviews: TME receives a summary Performance Reviews that documents key themes and issues presented and actions agreed.
 - Workforce Performance Report: TME receives and discusses monthly updates of the key KPIs regarding HR metrics.
 - Business Planning Pipeline
 - Procurement Pipeline

6. Key Risks

- 6.1. **Risks associated with Covid-19:** TME have continued to maintain oversight of key risks related to Covid-19 recovery.
- 6.2. **Risks associated with workforce:** TME maintained continued oversight on ensuring provision of staff to ensure productivity across the Trust. The impact on staff of cost of living pressures was also recognised.

- 6.3. **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.
- 6.4. **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.
- 6.5. **Risks related to winter pressures:** TME noted winter plans for emergency and elective services and would continue to monitor their development and implementation.

7. Recommendations

- 7.1. The Trust Board is asked to:
 - **Note** the regular report to the Board from TME's meetings held on 29 September 2022, 13 October 2022 and 27 October 2022.