

Cover Sheet

Trust Board Meeting in Public: Wednesday 15 January 2025

TB2025.15

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

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:
 - 14 November 2024
 - 28 November 2024
 - 12 December 2024

3. Key Decisions and Updates

Investigation and Improvement (I&I) Review of BOB ICB

- 3.1. TME received an update on the key outcomes of the I&I external review which focussed on efficiency and financial plans, controls and governance arrangements at both system and organisational level, including at OUH.
- 3.2. The investigation process had proven to be valuable in evaluating the Trust's financial plans, delivery mechanisms, controls, and governance at a system level. The detailed analysis conducted at an organisational level had largely validated the Trust's approach to financial and efficiency planning, as well as the controls and established governance.

Capital Investment

- 3.3. TME was briefed on some significant investments that had been previously recommended to the Trust Board for approval in November. These included replacing two major pieces of diagnostic imaging

equipment: a PET-CT scanner at the Churchill Hospital, which experienced catastrophic failure, and a CT scanner at the John Radcliffe Hospital, which was irreparably damaged due to a water leak in the Emergency Department. This required adjustments to the Trust's Capital Plan for 2024/25 to accommodate the replacement of the two diagnostic imaging devices.

- 3.4. In addition, and with part-funding from NHS England, TME and the Board had agreed to install a second bi-plane in the West Wing at the John Radcliffe Hospital, which would support Neuroradiology to deliver more life-changing mechanical thrombectomy treatments to stroke patients.

Sexual Safety at OUH

- 3.5. TME received an update about the work of the Thames Valley Regional Working Group on Sexual Misconduct at both national and regional levels to understand the extent of sexual safety in surgery and to reform reporting and investigation processes to be victim-led and trauma-informed.
- 3.6. TME heard about how consultants could be engaged through human factors training, including sexual safety scenarios in interviews, and educating those unaware of the issue.

Neonatal Medical Safe Staffing

- 3.7. TME received a staffing proposal for the Neonatal Unit at the JR site. This is one of the largest and busiest in the NHS but the current medical staffing model did not meet the safety requirements set out by the British Association of Perinatal Medicine (BAPM).
- 3.8. TME approved the proposal to increase medical staffing by:
 - 6 WTE senior registrars
 - 3.5 PAs consultant time on a permanent basis.

Maximising uptake of most cost-effective medicines

- 3.9. TME approved the proposal to allow directorate to substantively recruit 7 WTE pharmacy staff with this increase in headcount to be set against substantial non-pay savings for the ICB.

JR Primary Helicopter Landing Site Compliance

- 3.10. TME approved £50k capital funding required for the final physical compliance work to the current primary helipad, and ongoing revenue funding for the maintenance and lifecycle of those works.

4. Other Activity Undertaken by TME

National Consultation Engagement

- 4.1. TME was briefed on the opportunities available for OUH staff to engage with the ongoing national consultation regarding the new 10-Year Plan for the NHS.

Capital Schemes Update

- 4.2. TME was briefed on the current progress of several capital schemes aimed at improving the environment for patients, visitors, and staff.
- 4.3. The first tenants had moved into their new homes in the Ivy Lane staff accommodation on the John Radcliffe Hospital site, and an official opening event to celebrate this achievement will be held at the end of January in the new year.

OUH Standards for Urgent and Emergency Care

- 4.4. TME was presented with a cross-divisional, Trustwide document that applies to all urgent and emergency care pathways at OUH and to all professional groups of clinical staff.
- 4.5. The document outlined the revised standards that clinical teams should follow to:
 - Reduce overcrowding and delays in the Trust's Emergency Departments.
 - Improve patient flow across all the Trust's hospital sites.

HGH Dossier Update on Action Plan

- 4.6. TME received an update on the progress made in addressing the key themes identified as part of the thematic review and analysis of the 50 cases highlighted within the Horton KTHG Maternity Report and the ongoing work to improve the quality within Maternity Services.

Integrated Quality Improvement Programme Update

- 4.7. TME received an update on the Quality Improvement programme at OUH with a summary of progress made and an outline of the strategic direction for future improvements across the four priority areas of QI work.
- 4.8. TME heard about the introduction of new QI Lunch & Learn sessions which provided a space for peer support on shared improvement priorities, linking staff across different divisions to learn from each other, and offering an opportunity for the adoption and spread of learning.

Staff Winter Vaccinations Programme

- 4.9. An update was received on the Trust's progress in vaccinating staff for flu against the challenging national target.

5. Policy

- 5.1. TME approved the Provision of Non-Audit Services by External Auditor Policy.
- 5.2. TME recommended the Modern Slavery Statement to the Trust Board for approval to be signed by the Chief Executive Officer and published on the OUH website.
- 5.3. TME noted the proposed approach to reviewing the Trust's Limits of Delegation Policy and Standing Financial Instructions as agreed by the Audit Committee.

6. Reporting from Committees

- 6.1. As part of its review of the People and Communications Committee reports, TME noted the activities undertaken by the Committee including approval of several policies and procedures and amendments to various other procedures.
- 6.2. TME reviewed the Clinical Governance Committee Report, which included summary quality reporting.
- 6.3. TME received Estates & Facilities Premises Assurance Model (PAM) Report which detailed improvement in catering, cleaning and linens since the last assessment, and would continue to be monitored by Estates Compliance Committee.

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;
 - 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;
 - Corporate Performance Reviews;

- 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.)
- 7.2. The following annual reports were reviewed by TME before their presentation to the Trust Board:
- Emergency Preparedness Resilience and Response (EPRR) Core Standards Report
 - PSIRF Annual Report
 - Mental Health in the OUHFT Annual Report
 - Responsible Officer's Annual Medical Appraisal and Revalidation Report

8. Key Risks

- 8.4. **Risks associated with the financial performance:** TME continued to recognise the risks and opportunities to deliver at pace the changes required to recover the financial position.
- 8.5. **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.
- 8.6. **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.

9. Recommendations

- 9.4. The Trust Board is asked to **note** the regular report to the Board from TME's meetings held on 14 November 2024, 28 November 2024, and 12 December 2024.