

Cover Sheet

Trust Board Meeting in Public: 25 May 2022

TM2022.045

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

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:

- **Note** the regular report to the Board from TME's meetings held on 10 March, 24 March, 14 April, 28 April, and 12 May 2022;
- **Note** the Trust Management Executive Annual Report of Committee Effectiveness for 2021/22 (Appendix 1); and
- **Approve** the unchanged Trust Management Executive Terms of Reference.

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:
 - 10 March 2022
 - 24 March 2022
 - 14 April 2022
 - 28 April 2022
 - 12 May 2022

3. Key committee decisions included

- 3.1. Approval of the Smoke Free Policy Update;
- 3.2. Approval of the Standards of Dress Policy;
- 3.3. Approval of the purchase of a pharmacy robot subject to prioritisation as part of the Trust's capital plan;
- 3.4. Noting the results of the NHS Staff Survey and agreeing the principles of the "Our Engagement Promise" proposal;
- 3.5. Support for the acquisition of a C-Arm and Spinal Navigation/ Robotics for the department of Spinal Surgery;
- 3.6. Approval of the Oxford University Hospitals programme for health inequalities;
- 3.7. Approval of OUHFT as the Centre for the Thames Valley Maternal Medicine Network; and
- 3.8. Approval of the lease of Douglas House to support the delivery of the Children's long COVID regional hub.

4. Updates and assurances

- 4.1. TME has been regularly updated regarding the development of the Trust's Annual Plan for 2022/23.
- 4.2. TME has been kept updated regarding the development of the Annual Report and Quality Account for 2021/22.
- 4.3. TME received a briefing on R&D activities during the COVID-19 Pandemic.
- 4.4. A report on the PFI Corporate Performance Review was shared with TME.

TME also received the following regular reports:

- 4.5. Workforce Report
- 4.6. Finance Performance Report
- 4.7. Business Planning Pipeline
- 4.8. Procurement Pipeline
- 4.9. Capital Schemes Update
- 4.10. Integrated Quality Improvement Plan
- 4.11. Clinical Governance Committee Update
- 4.12. Divisional Performance Reviews

5. Other activity undertaken by TME

- 5.1. **Capital Schemes Update:** The TME continued to receive updates on a range of capital schemes across the Trust.
- 5.2. **Financial Performance Review:** The TME continued to receive financial performance updates.
- 5.3. **Divisional Performance Reviews:** TME received a summary of Divisional Performance Reviews that documented themes and issues presented by divisions and scrutinised by members or representatives of the Executive Team.
- 5.4. **Workforce:** TME received and discussed monthly updates on the key KPIs regarding KR metrics.

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 and maintain staff wellbeing.
- 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. TME are maintaining close oversight of capital prioritisation.

7. Future Business

- 7.1. TME will receive and support the Quality Improvement Programme through Executive sponsorship of the deliverables and regular update reporting items brought back to the Committee.
- 7.2. TME will continue to be updated on the development of the **22/23 Annual Plan**.

8. Recommendations

- 8.1. The Trust Board is asked to:
 - **Note** the regular report to the Board from TME's meetings held on 10 March, 24 March, 14 April, 28 April, and 12 May 2022.
 - **Note** the Trust Management Executive Annual Report of Committee Effectiveness for 2021/22 (Appendix 1); and
 - **Approve** the unchanged Trust Management Executive Terms of Reference.

Trust Management Executive: Annual Report and Review of Committee Effectiveness for 2021/22

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 2021/22.
2. The Corporate Governance team has reviewed the activities of the Committee and has assessed that they are consistent with their Terms of Reference.

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 2021/22.

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 2021/22 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 (Appendix A) 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 22 times during 2021/22 and was quorate on all but one occasion.

- 3.3. TME was not quorate for the meeting on 24 March 2022. In this instance the decisions recommended at the meeting were ratified offline by sharing a decision summary with the Executive Directors who did not attend, including key discussion points, so that their support could be confirmed.
- 3.4. It is noted that a conscious decision was made in revising the Terms of Reference not to allow deputies to count towards quoracy. This was intended as a safeguard to prevent key decisions being taken in the absence of a sufficient number of executive team members. A revision to the Terms of Reference in this regard is not therefore recommended.
- 3.5. 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 2021/22 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. TME regularly reviewed the Corporate Risk Register (CRR) and the Board Assurance Framework (BAF), discussing proposed risks, escalating corporate risks and ensuring that identified controls provided appropriate mitigation.
- 4.3. TME's capacity to robustly review the CRR and BAF and to improve integration, connection, and liaison between teams in relation to risk management was enhanced by the development of the Risk Committee.
- 4.4. 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.
- 4.5. TME undertook iterative oversight of the production of the Annual Report and Accounts to ensure the accuracy and quality of the final documents.

- 4.6. Proactive capital planning and prioritisation was undertaken to ensure proactive management of all identified risks and opportunities and the effective use of resources.
- 4.7. TME reviewed estates compliance issues and the associated impact on services and patients, ensuring that suitable planning was undertaken to address these and that delivery was proactively monitored.
- 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 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.
- 4.10. 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.
- 4.11. Risks associated with health and safety: TME maintained oversight of areas that might need to be addressed to ensure full compliance with statutory and regulatory requirements.
- 4.12. Risks associated with an ongoing requirement to replace ageing equipment: TME have considered business cases to fund the replacement and maintenance of equipment.

Reviews of annual reports and reviews including:

- Freedom to Speak Up
- Annual Governance Statement
- Internal Audit Annual Plan
- Clinical Governance Committee
- Counter Fraud Annual Plan
- Annual Counter Fraud Plan
- Emergency Preparedness, Resilience, and Response (EPRR) annual Report
- Safeguarding Annual Report
- Infection, Prevention and Control Annual Report
- Mental Health Action in Oxford University Hospitals Foundation Trust (OUHFT) Annual Report

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

- The Policy Management Framework
- Delegation Policy
- Information Protection Policy
- Remote Working Policy
- Agile Working Policy
- Interim Home Working Policy (for COVID-19)
- Disaster Recovery and Business Continuity Policy
- Values Based Appraisal Policy (for non-medical staff)
- Counter Fraud and Bribery Policy
- Smoke Free Policy
- Declarations of Interests, Gifts, Hospitality and Sponsorship Policy
- Core Skills Policy
- Work Experience Policy
- Death In Service Policy
- Elective Access Policy
- QIA Policy
- Estates Policies on Asbestos Management, Gas Safety and Ventilation

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 monthly 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
- 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 2022/23

- 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 2021/22 and feedback has been positive that this format supports focused meetings and effective decision making alongside the need to balance other operational priorities.
- 6.3. During 2021/22 the paper submission timetable for TME has also been revised to allow papers to be circulated earlier. This change has allowed more time for TME members to review papers to support well-informed discussion at meetings.
- 6.4. TME have continued to work to improve transparency through the continued publication of a fortnightly blog, outlining key decisions and topics to all staff.
- 6.5. A priority for 2022/23 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 issues are escalated where appropriate.

7. Recommendations

- 7.1. The Trust Board is asked to
 - **Note** the report;
 - **Approve** the Terms of Reference for the 2022-23 financial year.

**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: