

**Meeting:** Trust Board Meeting in Public

**Date:** 26 November 2025

### Information Report

<b>Agenda item</b>	Chief Executive's Report
<b>Board Lead</b>	Raghuv Bhasin, Chief Executive Officer (interim)
<b>Authors</b>	Raghuv Bhasin Chloe Powell, Chief of Staff to Chief Executive Naomi Radcliffe, Director, Thames Valley Acute Provider Collaborative
<b>Appendices</b>	Chief Executive's Report Appendix 1: CARE Value awards Appendix 2: Thames Valley Acute Provider Collaborative update Appendix 3: Executive Management Committee & Transformation Board
<b>Onward governance</b>	None

#### Report overview

This report provides a summary of the key areas of focus for the Trust over the past month in the framework of organisation, place and system/national updates.

The key themes that we have focused on are:

- 1) Winter: delivering our plan and how colleagues can support themselves, each other and their patients through having their flu vaccines
- 2) Mid-Year Review assessment with NHS England
- 3) Celebrating our shortlisting for the HSJ Awards in Acute Sector Innovation of the Year for our Quality AI & Learning (Quail) patient feedback analysis tool, and Trust of the Year.

A separate report on internal and external Trust communications follows this report and appended is an update from the Director of the Thames Valley Acute Provider Collaborative.

<b>Previously considered</b>	N/A		
<b>Decision</b>	The Board is requested to note the report.		
<b>Relevant strategic priority</b>			
Outstanding Care <input checked="" type="checkbox"/>	Healthy Communities <input checked="" type="checkbox"/>	Great Place to Work <input checked="" type="checkbox"/>	Net Zero <input type="checkbox"/>
<b>Relevant breakthrough objective – 2025/26</b>			
<input checked="" type="checkbox"/> Reduction in emergency admissions <input type="checkbox"/> Reduction in elective waiting times	<input checked="" type="checkbox"/> Supporting people to live healthier lives	<input type="checkbox"/> Zero tolerance to bullying	<input type="checkbox"/> Governance / Statutory Requirement
<b>Implications / Impact</b>			

<b>Quality</b>	Highlights activities in place to support high quality patient care
<b>People</b> (BHT colleagues)	Updates on key activities involving or in support of BHT colleagues
<b>Risk: link to Board Assurance Framework (BAF) and local or Corporate Risk Register</b>	Links to multiple strategic objectives of the BAF
<b>Financial</b>	Highlights any relevant financial impacts.
<b>Compliance</b> Select an item. Select CQC standard from list.	Updates on any changing or new legislation or regulation of relevance to the Board
<b>Partnership: consultation / communication</b>	Highlights partnership activities at Place and System
<b>Equality</b>	Highlights activities regarding equalities where relevant, including equality standards and health inequalities

## Chief Executive's Report

### 1.0 BHT activities

- 1.1 **Winter:** Over the last few weeks, we have been focusing on communicating and deploying our winter plan which the Board saw in July. Key to successfully managing through the winter period is colleagues taking up their opportunity to have a free influenza vaccine. I am really pleased to report to the Board that the uptake so far is higher than last year, and we received a letter recognising this from the regional Chief Nurse.
- 1.2 Our estate works in the Emergency Department have finished with work now underway in our Acute Medical Unit, which are due to be completed by Christmas. We have agreed the optimal use of this capacity to meet winter pressures with an increase of assessment capacity to help reduce admissions. We have already seen the pressures mounting in our Emergency Department and declared Opel 4 at the start of the month over two days because of the level of demand.
- 1.3 **Mid-Year Review:** Together with the Chair, CFO and COO I met with colleagues from NHS England for our 'mid-year review' at the end of October where we talked through our improvements plans against our key operational standards and our financial plan. We emphasised the challenges in reducing our expenditure run-rate as we move into winter and seek to deliver stretching waiting times targets.
- 1.4 Crucial to reducing waiting times is developing highly productive outpatients' services and I was delighted to attend the official opening of the Ophthalmology capacity in Mandeville Wing at Stoke Mandeville Hospital. Please see more details about this in the Communications report.
- 1.5 **Celebrating success:** It was an honour to represent the Trust alongside colleagues from across the organisation at the annual HSJ Awards where we were shortlisted in Acute Sector Innovation of the Year for our Quality AI & Learning (Quail) patient feedback analysis tool, and Trust of the Year. This is fantastic recognition of the positive changes we have been able to make over recent years, both for our colleagues and their wellbeing, and the care we provide our patients and service users.
- 1.6 Whilst it was disappointing we did not win in either category it was lovely to see BHT represented at the awards and share the evening with colleagues from across the organisation.
- 1.7 One of our strengths is in our research and innovation department, and following our initial successful bid to join the [NHS InSites Programme](#) a couple of years ago (we are one of just 18 organisations chosen across the country), it was exciting to join a meeting last week to see how it is progressing with the National Clinical Lead for Innovation, Tony Young. Tony was full of praise for the work in Buckinghamshire and it was very interesting to learn how other organisations are deploying their innovation teams to help address some of the real-world challenges they are faces.
- 1.8 This month is Kavan Nagi's last as Board Affiliate, and I'm sure Board members will join me in recognising Kavan's exceptional contributions in this role throughout her time. Kavan has brought a real front-line experience and knowledge to our conversations, an entrepreneurial and innovation zeal and has been a powerful advocate for issues around disability, race, gender and others at the Board table.

## **2.0 Buckinghamshire partnerships**

2.1 I met with the Ofsted and the Care Quality Commission inspectors who are conducting an inspection of the Buckinghamshire Special Educational Needs and Disabilities services, which we provide in partnership with Buckinghamshire Council, Oxford Health and the ICB. This inspection was expected and after a lot of hard work by the teams involved, we look forward to receiving their report and understanding their impression of these important services.

## **3.0 System and National context**

3.1 I attended the annual NHS Providers Conference in Manchester where I:

- was delighted to hear the Chief Executive of NHS Providers praise the neighbourhood health work he had seen in Buckinghamshire in his opening speech
- caught up with national neighbourhood health leaders to understand learning on neighbourhood health development from across the country
- attended sessions with the Secretary of State and Chief Executive of NHS England respectively where they conveyed their thanks for the hard work that is underway in Trusts across the country and re-emphasised the importance of in-year financial and operational delivery as the foundation for delivery of the NHS 10-year plan.

## **Appendices**

Appendix 1: CARE Value awards

Appendix 2: Thames Valley Acute Provider Collaborative

Appendix 3: Executive Management Committee & Transformation Board