### Council of Governors Meeting: Friday 7 April 2017
CoG2017.11

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<td><strong>Purpose</strong></td>
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Council of Governors’ Patient Experience, Membership and Quality Sub-Committee

Minutes of the meeting held on Wednesday, 2 March 2017 at 15:00 to 17:00 in the Boardroom, Level 3, John Radcliffe Hospital.

Present:  
Sue Chapman SC Public Governor, West Oxfordshire [Chair]  
Sally-Jane Davidge SJD Public Governor, Buckinghamshire, Berkshire, Wiltshire & Gloucestershire  
Jill Haynes JH Public Governor, Vale of the White Horse  
Anita Higham AH Public Governor, Cherwell  
Jules Stockbridge JS Staff Governor, Clinical

In attendance:  
Geoff Salt GS Chairman of the Quality Committee and Non-Executive Director  
Professor David Mant DM Non-Executive Director  
Susan Polywka SP Head of Corporate Governance and Company Secretary  
Caroline Rouse CR Foundation Trust Governor and Membership Manager  
Neil Scotchmer NS Programme Manager, FT Programme  
Marilyn Rackstraw MR Corporate Governance Manager (Minutes)

Apologies:

CoGPEMQ/02/01 Welcome, Apologies and declarations of interest

No Apologies for absence had been received.

AH declared that she was Chairman of the North Oxfordshire Locality Patient and Public Forum.

SC declared that she was now a Community Learning Disability Nurse working in Banbury, which could link with patient experience.

CoGPEMQ02/02 Minutes of the Meeting held on 4 January 2017

The minutes of the meeting held 4 January were approved, subject to clarification that it was the Trust Chairman that would be asked to write to all Governors to invite more to consider volunteering for membership of the Sub-Committee.

SJD noted the meeting dates and asked if it could be checked that the diary invitations had been sent for 10.30 – 12.30. It was agreed that this would be checked, and corrected if required.

Action: SP

CoGPEMQ/02/03 Action Log and Matters Arising

CoGPEMQ/17/01/07 - Feedback on Governors attendance at end of life care group

SP reported that the Medical Director had confirmed that Governors could attend, but the Sub-Committee was asked to advise as to how this would be managed between the Governors, i.e. if attendance should be on a rotational basis.
CoGPEMQ/17/01/04 – Terms of Reference

It was confirmed that the Trust Chairman would be asked to write to the Governors, (including those newly elected), inviting more to volunteer for membership of the Committee.

Action: SP

CoGPEMQ/02/04 Report from Quality Committee Chairman

The Chairman of the Quality Committee reported on its last meeting held on 22 February 2017. The full Quality Report had been circulated for information to Governors, (Paper QC2017.08).

Points which were highlighted to have been specifically considered by the Quality Committee included:

- A&E and Cancer Performance remained challenging, although the Trust remained within the top 20 best performing Trusts, which demonstrated the significant work undertaken to improve the Emergency Care Pathways. The Quality Committee was assured that action plans were in place to recover operational performance.
- Quality Priorities were noted to be progressing, reflected in the CQUIN achievements. A separate paper was submitted to update the Committee on the draft Quality Account for 2016/17, in which the Trust would be required to report on progress against the quality priorities for the past year, and articulate quality priorities for the year ahead.
- The Quality Committee was advised that work was to be undertaken to improve the integration of reporting on key metrics relating to quality, operational and financial performance. It was intended that the Quality Committee may then appropriately focus on exception reporting, based on granular data generated at clinical service line level.
- The Quality Committee continued to monitor nursing and midwifery staffing levels, particularly “at risk” shifts and emphasised the need to maintain scrutiny of the extent to which difficulties could impact on the quality of care.

The Integrated Home Assessment Reablement Team [HART] service initiative and the liaison hub was discussed, and the Quality Committee Chairman suggested that he and SC liaise with the HART team to arrange a visit for the Sub-Committee.

CoGPEMQ/02/05 Review of proposed Quality Priorities for 2017/18

An update was provided on the development of the Trust’s Quality Account for 2016/17. The Quality Account was due to be formally submitted to the Secretary of State and published via the NHS Choices website by 31st May 2017. It was highlighted that a further draft would be presented for consideration of the Council of Governors at its meeting on 7 April 2017.

Governors were asked to consider the initial proposed Quality Priorities for 2017/18, further development of which would be submitted to the Council of Governors at the Council of Governors meeting on Friday 7 April 2017.
Governors were also asked to select a key quality indicator, to be audited by the external auditors, and SC indicated that she would support the selection of Dementia Screening, as did AH.

It was agreed that a more informed discussion would take place with the wider group of Governors at the next meeting of the Council of Governors, following which a priority would be selected.

CoGPEMQ/02/06 End of Life Care Group
AH reported that she had attended the February meeting of the End of Life care group, following which she had posted a note on the Governors forum. She confirmed that she was happy to attend all of the EOLC meetings going forward, if this was supported by fellow Governors. It was noted that as EOLC was the quality priority adopted by Governors, attendance at the meetings to provide assurance in the delivery of the Quality Priority was helpful.

It was noted that the next meeting of the EOLC group was scheduled for 7 March 2017, and SJD noted that a symposium on End of Life Care was taking place on 8 May. It was agreed that attendance by two Governors at each meeting would be sufficient and appropriate.

DM suggested that this was something that could be shared with Governor colleagues from within other organisations.

CoGPEMQ/02/07 On-going focus on Patient Experience
SC queried whether Governors would be able to participate in Executive walkarounds, and the ongoing Peer Review programme, to gain a clearer overview of work that was currently taking place within the Trust to enhance patient experience.

Car parking on site was noted to be a significant contributory factor to stress levels for patients. SP noted that concerted efforts were being made through the development of the OUH masterplan, reflecting the issues that had been raised in relation to car parking. An update on the Masterplan would be presented to Governors at the Joint Board / Governors’ Seminar on 29 March 2017.

Discussion turned to the use of acronyms within Committee papers, and the need to improve the readability of reports. It was agreed that the Corporate Governance team would provide a list of NHS acronyms and their expanded terms, for reference. It was also agreed to encourage initial use of full terms followed by the acronym in brackets then the acronym could be used throughout a document.

Action: SP

CoGPEMQ/02/08 Membership Strategy
The report was presented, highlighting that the review of membership strategy now fell within the remit of this Committee. Governors were asked to consider how they wished to advance the strategy to encourage membership.

CR highlighted the various public events that were ongoing that she would be attending. She noted that that she would be attending an event, the Oxford Mela on
20th May, and noted that additional support would be helpful if there were any volunteers.

It was noted that the membership strategy needed to be refreshed, and would be submitted to the Council of Governors at its meeting on 20th April 2017.

**Action: SC**

**CoGPEMQ/02/09 Review of Governors’ Terms of Office and Voting System**

NS presented the report, asking the Committee to consider the recommendation it wished to make to the Council of Governors regarding the electoral system to be used in future elections.

It was noted that the Constitution of the Trust allowed for either a ‘first past the post’ (FPP) or a ‘single transferable vote’ (STV) system to be used in governor elections and by-elections. The FPP system has been used for governor elections to date. The electoral system to be used in future was discussed at the Council of Governors in October 2016 and it was subsequently agreed that the Patient Experience, Membership and Quality Committee should consider the issue and make a recommendation to the Council.

The Committee discussed the advantages and disadvantages of both systems, and unanimously proposed that the first past the post system be used. This recommendation would be made to the Council of Governors at its meeting on 7 April 2017.

**Action: SP**

**CoGPEMQ/02/10 Draft Work Programme for 2017**

Governors discussed the work programme for 2017. In addition to the items within the current cycle, the Committee agreed that the following should be incorporated onto the work plan for 2017:

- Peter Knight to be asked to attend the next meeting and present the Go Digital strategy
- Focus on Quality priorities / Quality indicators mid-year (September)
- Discussion of implementation of strategy
- Patient and Public Participation strategy (November)
- Annual review of effectiveness, terms of reference and membership

**CoGPEMQ/02/11 Any other business**

AH queried how best to engage members of her constituency - discussion regarding this focused on the membership strategy recommendations.

**CoGPEMQ/02/12 Date of the next meeting**

10:30 – 12:30 on Thursday 25 May 2017, in the Boardroom, Level 3, John Radcliffe Hospital