

#### **Cover Sheet**

# **Council of Governors Meeting: Monday 3 April 2023**

CoG2023.07

Title: Patient Experience, Membership and Quality Committee Report

Status: For Information

History: Report from PEMQ to Council

Lead: Committee Chair

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Confidential: No

**Key Purpose: Strategy** 

#### Patient Experience, Membership and Quality Committee Report

#### 1. Purpose

1.1. This paper forms part of the Patient Experience, Membership and Quality Committee's regular reporting to Council of Governors, providing Council with a summarised report highlighting key Committee business and issues arising from its meetings.

# 2. Background

- 2.1. The remit of the Committee is to consider matters concerning the development and maintenance of an active membership; the experience of patients using OUH services; and measures of the quality of services provided by the Trust. It also considers for the Council of Governors how the Trust Board obtains assurance regarding these matters.
- 2.2. Since the last meeting of the Council of Governors the Committee held one meeting on 22 February 2023. The main issues considered and discussed at this meeting are set out below.

## 3. Quality Priorities

3.1. Dr Brent attended to present this item on the proposal for the 2023-24 Quality Priorities, which are commitments to areas of work that are included within the Quality Account.

## **Patient Safety**

- Medication Safety Opiates & Insulin\*
- Care of the Frail Elderly focussing on the urgent care pathway
- Reducing Inpatient Falls

#### Clinical Effectiveness

- · Reducing unwarranted hospital outpatient cancellations
- Rolling out and embedding the Surgical Morbidity Dashboard\*
- Helping more patients through Tissue Donation for Transplant

#### Patient Experience

- Health Inequalities Improving data capture including ethnicity
- Empowering Patients building partnerships and inclusion
- Kindness into Action improving patient and staff experience

- 3.2. The priorities outlined above had been developed following the Quality Conversation event at which a number of governors had been present, taking into account feedback from executive directors and other key staff. Dr Brent expressed thanks to all involved in the process of developing them.
- 3.3. This was an important stage in the process of the development of the Quality Priorities, providing governors with opportunity to input prior to submission to the Trust Board on 8 March for final approval. The 2023-24 Quality Priorities were subsequently approved at this meeting of the Trust Board.
- 3.4. Ms Watts commended the emphasis on data capture relating to health inequalities, noting that her experience was that it was hard to make the correct decisions when there was a lack of data.
- 3.5. Prof Schapira commented that ideally priorities should be linked to clear targets rather than less specific aspirations and to performance on outcomes rather than changes to processes. He noted that these were best agreed with the relevant teams who were best informed to judge appropriate standards. Dr Brent agreed to review the priorities on this basis, highlighting that this was an aspect of the priorities which was being strengthened in comparison with those from the previous year.
- 3.6. Ms Stockbridge asked what could be done to broaden the range of people involved in the Quality Conversation discussions and to ensure that the Priorities were meaningful to front line staff. Ms Davidge commented that the event had been well-organised but that stronger attendance from the Board and public in future years would be welcome. She also suggested that effort be made to involve seldom heard groups and noted that clarity about covering travel costs for the event might encourage attendance.
- 3.7. Dr Brent recognised that it was a challenge for busy staff to make themselves available for events of this type and that it was hoped that a longer engagement period in future years would allow more people to be involved. It was anticipated that this would include earlier engagement with the PEMQ Committee.
- 3.8. It was agreed that work needed to be driven by subject matter experts but the importance of senior support to progress priorities was noted and Dr Brent explained that each one had an executive sponsor to assist with challenges in planning and implementation. The Committee noted that it would be interested to know the Board leads when these were confirmed.
- 3.9. In relation to the Medicines Safety priority Dr Brent confirmed that plans related to opiate prescribing would be strengthened with assurance that these were well communicated to GPs.

- 3.10. Ms Davidge noted that the Committee would be interested in having sight of any patient leaflets that were developed in relation to the priorities, particularly those regarding tissue donation. It was also said that it would be helpful to understand more about why some people chose not to disclose demographic information, particularly in relation to ethnicity.
- 3.11. Dr Brent confirmed that the discharge process included a holistic multidisciplinary review of care needs which included mobility and falls risk assessments.
- 3.12. The benefits of strengthening Patient Participation Groups as a route to linking with patients was emphasised and it was noted that governors could have a role in chairing these.
- 3.13. The Committee noted and supported the proposed Quality Priorities and thanked Dr Brent for attending to discuss these.

## 4. OUH Clinical Strategy

- 4.1. The Deputy Head of Strategy and Partnerships joined the meeting for this item. Governors were reminded that the draft Strategy had also been presented to the full Council at its January meeting and was due to go to the Board for final approval in March.
- 4.2. The Committee discussed the need to ensure that the Strategy and the Quality Priorities were aligned with each other and Ms Cullen agreed to pick this up with Dr Brent.
- 4.3. Prof Schapira commented that there was a need to articulate the destination to which the Strategy would take the Trust and how to judge when this had been achieved. Ms Cullen explained that the next step would be to develop implementation plans that would include metrics for success, bearing in mind the need to be clear about what changes would be within the gift of the Trust within a five year timeframe and that some might require complex preparation work and consultation with partners and patients.
- 4.4. Ms Watts commended the document as being an easy one to read and asked how it could adapt and change given the uncertainties about the context over a five year period. Ms Cullen noted that it would need to adapt as required, for example to respond to the development of the Integrated Care System's strategy and that there were developments for which five years was too short a timeframe.
- 4.5. The Committee discussed suitable approaches for engagement with patients regarding strategy development. Ms Warmington commented that it was often easier to trigger engagement with a single very specific question via social media. She also noted that it was important to make

efforts at outreach rather than expecting participants to attend opportunities arranged at the Trust. PPGs were noted to be a good opportunity as they provided pre-existing opportunities in a forum where participants were likely to feel confident in expressing their views. These were also likely to involve people with a longer-term connection with the organisation and the need to capture the views of those whose interactions were short term was noted.

- 4.6. The Committee noted and supported the Strategy and thanked Ms Cullen for attending to discuss it.
- 4.7. Following this meeting the final Strategy was considered and approved by the Board at its meeting in March.

## 5. Patient Experience Strategy

- 5.1. Ms Heason and Ms Rackstraw attended for this item.
- 5.2. The Committee heard that the Patient Experience Engagement and Delivery Plan had been presented to the Board in January. Ms Rackstraw highlighted three key strands of current work: a refresh of Patient Participation Groups; improvements to Interpreting and Translation services; and developing a more accessible Friends and Family Test.
- 5.3. Reporting on the Equality Delivery System 2022 would also be presented shortly and the Committee noted that most of the key actions were already built into existing programmes which put the Trust in a strong position to make improvements.
- 5.4. The Committee heard that a new Young People's Governor and YPE Chair had been selected and that the Committee would be further updated at a future meeting.
- 5.5. The Committee welcomed this update and asked the Patient Experience Team to continue to keep it informed on progress and to involve it and its members where they could support particular programmes of work.

### 6. Membership Update

- 6.1. The Committee received its routine membership update. The Committee were informed that a successful Vale of White Horse constituency meeting had been held in Abingdon, chaired by David Matthews. This had included talks about the Oxford Hospitals Charity, cancer services and on acting as a peer reviewer.
- 6.2. Further events were being planned for the West Oxfordshire and Oxford constituencies with others later in the year. It was anticipated that there would be opportunities to have governor stalls on site.

- 6.3. The Committee heard about plans to produce a short video on being a governor and Ms Rouse was seeking volunteers to participate in this.
- 6.4. Options for staff governor engagement were discussed.

#### 7. Annual Plan

- 7.1. A draft schedule of business is outlined below.
- 7.2. The Council are asked to comment on the plan and to consider whether to commission work from the Committee within its scope.

Meeting	Item	Detail
4 April 2023	Quality Account 2023-24	Governor consultation on behalf of Council
		Letter from governors
	Patient Experience Strategy	To discuss governor's role in implementation
	Membership update	Routine update
14 June 2023	Young People's Executive PEMQ Report by Yippee Team	TBC – may require special meetings in August
	Health screening programmes provided for the public	To further understand provision
	Annual review of committee effectiveness and Terms of Reference	To review the extent to which the committee has met its Terms of Reference, determining if they have been effective, and whether further work or changes to the Terms of Reference are required.
	Membership update	Routine update
30 August 2023	Pharmacy [subject to Prof Soni availability]	To explore issues related to pharmacy and peoples experience. Scope to be defined.
	Membership update	Routine update
November 2023 (TBC)	Governor Elections 2024	

	Patient Experience Update	
28 February 2024	Quality Priorities	
	Update on Quality Conversation	Feedback from event
	Patient Experience Update	
	Membership update	Routine update
Future items	Review of Trust's Membership Strategy	Under its Terms of Reference, the strategy is to be reviewed by the Patient Experience, Membership and Quality Committee

# 8. Recommendations

8.1. The Council is asked to **note** and **comment on** this update.