Oxford University Hospitals
NHS Foundation Trust

Cover Sheet

Trust Board Meeting in Public: Wednesday 25 November 2026

TB2026.104

Title:	**Board Visibility/Gemba Walks**

Status:	**For Information**
History:	**TB2022.077, TB2023.104, TB2025.08**

Board Lead:	**Chief Executive Officer**
Presenter:	**Chief Executive Officer**
Author:	**Caroline Sykes Programme Manager**
	Razak Patel, Assurance Manager
Confidential:	**No**
Strategic Pillar:	**Patients, People, Performance**

Board Visibility/Gemba Walks

1. Purpose and Background

1.1. This paper provides an update on the Trust Board's visibility activities, including the arrangements for formal Board visits, ongoing Executive engagement with services and the proposed approach to strengthening the coordination, recording and follow-up of visibility activities.

1.2. A co-ordinated approach to Board visibility has been in place since December 2022, providing opportunities for Board members to engage directly with colleagues across the Trust's hospital sites. This has included scheduled visits undertaken as part of Trust Board Seminar days, alongside routine visits and engagement activities undertaken by Chief Officers.

1.3. An update to the Trust Board in January 2025 outlined the programme of visibility activities that had taken place, including service visits, staff briefings, CEO Breakfasts and staff recognition events. It also reported the introduction of a feedback process following Board walkarounds, intended to capture observations and actions requiring follow-up.

1.4. Board visibility remains an important means of maintaining direct engagement between Board members and frontline services, supporting an understanding of staff experiences, operational challenges and opportunities for improvement.

2. Current Position

2.1. A 12-month Board Development Programme was introduced in April 2025. The development sessions coincided with the days allocated to seminar and visibility visits, reducing the amount of visibility visits that could take place and making them ad-hoc.

2.2. During this period, Chief Officers continued to undertake visits to wards, departments and services as part of their routine engagement with colleagues across the organisation. These activities have taken, and continue to take, place outside formal visibility arrangements.

2.3. Whilst a method for recording Chief Officer visits was introduced, there has been inconsistent completion of recording the visits and any issues or actions arising from them. The information captured is therefore limited and does not provide a comprehensive record of Executive visibility and subsequent follow-up.

2.4. Between April 2025 and November 2026, 33 visits by Chief Officers and Non-Executive Directors to services and teams were recorded across all

sites. Areas visited included Oxford Critical Care (JR), Cardiac/Cardiology (JR), Oncology (Churchill) Ophthalmology (JR), OCE Rehabilitation (NOC), The Hill (JR), Radiology (Churchill), Urgent and Emergency Care, Emergency Department (Adult and Paediatrics), EAU (JR), Maternity Services (JR and Horton), Churchill Theatres and Renal practice areas, JR Theatres, Surgical Elective Centre (JR), Medical Illustration (JR), Endoscopy (JR), Horton Theatres, Paediatric Audiology (Horton). Feedback collected identified colleagues met, shared successes, shared challenges and, where support to resolve issues was needed, this was shared with relevant colleagues to take forward.

3. Proposed Board Visibility Programme – Gemba Walks

3.1. It is proposed that a co-ordinated programme of Board visibility visits is re-established, providing structured opportunities using Gemba principles:

- Go and see
- 3 P's (Purpose, Process and People)
- Respect, and
- Identifying waste

3.2. Executive and Non-Executive Directors will be provided with data packs in advance to support engagement with colleagues across the Trust. These visits will be called Gemba walks.

3.3. The Gemba walk programme will be coordinated by the Chief Executive's Office and Corporate Governance, with walks scheduled across hospital sites, divisions and services to support appropriate organisational coverage.

3.4. Gemba walks will build on existing visibility activities, which have included CEO breakfast meetings, monthly All Staff Briefings, quarterly Meet the Chief Officers sessions, ad-hoc walkarounds, and will provide more structured opportunities for all Board members to participate in visits.

3.5. Non-Executive Gemba walks will be arranged on a monthly basis. A schedule of monthly visit dates between December 2026 and December 2027 has been created, and this is attached as Appendix 1. Work will now take place to populate these dates with teams and services ensuring visits are rotated around hospital sites and involve all Board members.

4. Strengthened Recording, Follow-up and Assurance Arrangements

Central Board Visibility Log

4.1. To strengthen the consistency of recording and monitoring Board visibility activities, a central Board Visibility Log has been developed.

4.2. The log will provide a standardised record of visits undertaken by Chief Officers and Non-Executive Directors, including the date and location of visits, staff groups engaged, concerns or issues identified, and any immediate actions or escalation required.

4.3. Executive Assistants will be responsible for maintaining the relevant visit records, with the Assurance Manager providing central oversight of the log. A consolidated overview will support monitoring of visibility activities across the organisation.

4.4. The arrangements are intended to provide a proportionate and consistent means of capturing activity without introducing additional reporting requirements for individual visits.

Follow-up of concerns and actions

4.5. The Chief Executive's Office will coordinate the follow-up of concerns and actions arising from visits, supported by the Assurance team. Responsibility for addressing individual concerns will remain with the relevant operational or Divisional leads.

4.6. Where significant concerns are identified, these will continue to be escalated through the Trust's established operational and governance arrangements.

4.7. Follow-up arrangements will include seeking confirmation of actions taken and, where appropriate, ensuring that feedback is provided to the services or colleagues who raised the concerns.

Demonstrating impact and supporting Well-Led assurance

4.8. In addition to providing a consolidated record of Board visibility, the strengthened arrangements will support the Trust in demonstrating how engagement with frontline services informs organisational understanding, decision-making and improvement.

4.9. The Assurance team will review information arising from visits to identify examples where concerns raised by colleagues have resulted in actions and demonstrable improvements.

4.10. Selected examples will be developed into short narratives or case studies, supported by relevant evidence of the actions taken and outcomes

achieved. These will contribute to the Trust's wider CQC Well-Led evidence base.

4.11. The approach will place emphasis on demonstrating the impact of Board engagement, rather than solely reporting the number or frequency of visits undertaken.

Governance and Responsibilities

4.12. The proposed arrangements will be co-ordinated through the Chief Executive's Office and Corporate Governance and they will oversee the scheduling and co-ordination of visits, including arrangements for Executive and Non-Executive Director participation.

4.13. Executive Assistants will maintain the visit records, while the Assurance Manager will centrally manage the Board Visibility Log and support the identification of emerging themes and evidence gaps.

4.14. The Chief Executive's Office will co-ordinate follow-up on concerns and actions arising from visits, with operational and divisional leads retaining responsibility for their resolution.

4.15. The Assurance team will support the development of evidence-based narratives and case studies demonstrating the outcomes of Board visibility activities.

4.16. Data collected will be reviewed by the Chief Executive's Office and Assurance Office and a report covering the previous 6 months' activity will be submitted to the Trust Board meetings held in January and July.

5. Next Steps

5.1. The immediate priorities are to:

- Confirm the proposed programme of Gemba walks, including dates, locations and participating Board members.
- Agree the operational arrangements for coordinating walks and recording activity.
- Introduce the central Board Visibility Log, with relevant Executive Assistants responsible for maintaining records.
- Ensure pre-Gemba walk packs containing information on successes, metrics and risks are produced and shared with Board Members in advance
- Establish arrangements for coordinating follow-up on concerns and actions arising from visits.

- Identify opportunities to demonstrate the outcomes and impact of Board engagement through the Trust's Well-Led assurance arrangements.

6. Recommendations

6.1. The Trust Board is asked to:

- Note the update on Board visibility activities
- Note the proposed arrangements for re-establishing a coordinated programme of Board visibility visits which will follow Gemba principles
- Note the strengthened approach to recording Gemba walks, following up concerns and demonstrating the impact of Board engagement.

Appendix 1 – 27 Board Visibility Visits December 2026 – December 2027

9 December 2026
27 January 2027
24 February 2027
2 March 2027
28 April 2027
26 May 2027
30 June 2027
28 July 2027
25 August 2027
29 September 2027
27 October 2027
24 November 2027
8 December 2027