Oxford University Hospitals
NHS Foundation Trust

Cover Sheet

Council of Governors Meeting: Wednesday 12 November 2025

CoG2025.14

Title:	**Patient Experience, Membership and Quality Committee Report**

Status:	**For Information**
History:	**Report from PEMQ to Council**

Lead:	**Committee Chair**
Author:	**Ms Joan Adegoke, Corporate Governance Officer**
Confidential:	**No**
Key Purpose:	**Strategy**

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 meeting on 31 October. The main issues considered and discussed at the meetings are set out below.

3. Patient Experience and Engagement Strategy Update

3.1. The Chief Nursing Officer presented an update on the development of the Trust's first Patient Experience and Engagement Strategy, co-designed with patients and communities. The strategy aligned with the OUH Trust Strategy and NHS 10-Year Plan, aiming to embed patient feedback into service design and delivery.

3.2. Key priorities included improving feedback accessibility, using complaints to drive change, expanding the role of Patient Safety Partners, and embedding lived experience into governance. The strategy also focused on tackling health inequalities and strengthening Equality, Diversity, and Inclusion (EDI).

3.3. Concerns were raised about resource limitations and the need for defined targets and funding. The CNO acknowledged these and confirmed that resource planning was ongoing. A new innovation programme, in partnership with the Institute for Healthcare Improvement (IHI) and King's Improvement Programme, would support quality improvement.

3.4. The Committee also discussed gaps in volunteer engagement across specialties. The CNO confirmed plans to expand successful models like OMNVP to other areas.

3.5. The Committee welcomed the strategy's direction and emphasised the importance of sustained investment and inclusive engagement.

4. Relating with the NEDs

4.1. The Chair expressed sincere thanks to Prof Tony Schapira for his contributions as a Non-Executive Director (NED), acknowledging his impact and wishing him well. Prof Schapira reflected on the importance of accountability between governors and NEDs, and the need for constructive challenge of executives. He encouraged greater focus on patient outcomes and experience beyond safety, and advocated for high-quality, triangulated data to inform improvement. He emphasised staff-led quality improvement and proposed a dedicated innovation programme.

4.2. Committee members discussed the need for better data interpretation, international benchmarking, and consistent outcome measurement across specialties. Prof Schapira noted the complexity of standardising patient-reported outcomes and the dominance of financial metrics in current assessments.

4.3. Ms Joy Warmington reminded governors of her background in health equity, innovation, and leadership. She highlighted the complexity of the NED role, the need for clearer engagement with governors, and the need to review governance structures. She advocated for more meaningful NED-governor interaction, less reliance on metrics alone, and better integration of staff and patient experience.

4.4. Members raised concerns about NED capacity and engagement. Suggestions included assigning NEDs to specific areas, smaller group discussions, and more regular interaction. Examples from other trusts were shared to illustrate successful models. The Chair acknowledged the value of these insights and encouraged further exploration of structural improvements.

4.5. The Committee thanked Prof Schapira and Ms Warmington for their valuable contributions and reflections.

5. Maternity Involvement and Engagement Work

5.1. The Committee received an update from the Head of Midwifery on ongoing work to improve inclusion and engagement within maternity services. A major stakeholder event was planned to gather input from families, with accessibility and emotional support measures in place.

5.2. A new Maternity Services Partnership Committee was being formed to support co-design, transparency, and broader community involvement. Feedback mechanisms had been enhanced, including translation tools and multi-format options, leading to a rise in Friends and Family Test responses from 11% to 47%, with over 90% positive.

5.3. The Triangulation and Learning Committee (TALC) integrated feedback from various sources to drive improvements such as 24-hour visiting and better pain relief access. Financial efficiency and return on investment were discussed, with examples of targeted spending and efforts to streamline processes.

6. Update on Membership Events

6.1. The Foundation Trust Governor and Membership Manager reported on Membership and Engagement events attended during September/October and details of upcoming events.

7. Other Issues

7.1. The Committee discussed the use of surveys and bulletins to gather feedback from members regarding their experiences with hospital services with emphasis on the importance of collecting statistically significant data rather than relying solely on personal contacts.

8. Recommendations

8.1. The Council is asked to note this update.