Ashford and St. Peter's Hospitals NHS Foundation Trust

Council of Governors
8th December 2021

TITLE	**Patient Experience Group Annual Report**
EXECUTIVE SUMMARY	The Annual Report from the Group is attached for information. The Group has included its initial priorities for the coming year. The Group has reviewed its Terms of Reference and these are attached for approval with one small amendment. The Group's membership is between 6 and 10 Governors. The Group currently has 8 members.
The Council of Governors is asked to:	Note the Annual Report; approve the revised Terms of Reference and on-going membership of the Committee.
Submitted by:	Chris Howorth, Chair of the Patient Experience Group and Appointed Governor from the Royal Holloway, University of London
Date:	December 2021
Decision:	For Approval

COUNCIL OF GOVERNORS
PATIENT EXPERIENCE GROUP

ANNUAL REPORT 2021

1 INTRODUCTION

The Patient Experience Group was set up by the Council of Governors in August 2011 and this report provides a review of the eighth year of its operation**.** This report covers the period 1 November 2020 to 30 November 2021.

Whilst not a statutory sub-committee of the Council of Governors, copies of the Group's minutes are presented to each Council of Governors meeting.

The Group exists to offer assurance and to give information to the Council of Governors on as many aspects of the patient experience as possible.

2 MEETINGS

The Terms of Reference state that the Group should meet at least 4 times a year but no more than 6 weekly. For the majority of the year the Group has met every two months.

3 MEMBERSHIP AND ATTENDANCE

The initial Group members were appointed by the Council and the Terms of Reference state it must have between 6 and 10 members who must all be Governors. The membership is to include at least 3 public Governors. The Group currently has 8 members.

The Group also had a number of Co-opted members including:

- Chief Nurse
- Associate Director of Quality
- Head of Patient Experience and Involvement
- Membership and Engagement Manager

The Group elected Chris Howorth, as the Chair of the Group at its meeting on 15th November 2021.

Details of attendance at the Group's meetings are given at Appendix 1.

4 TERMS OF REFERENCE

The Group has now operated for ten years and its Terms of Reference are highlighted at Appendix 2. There is one small amendment under item 2 – Membership.

5 REGULAR ITEMS

The Group has reviewed and discussed a number of regular items:

- Patient Experience Quadrant of the Balanced Scorecard
- Patient Experience section of the Board Quality report
- Friends and Family Test Results

- Feedback from the Patient Panel meetings
- Feedback from members to Governors relating to patient experience
- Communication with patients both verbal and written

6 ACHIEVEMENTS / PROGRESS

Visitors to Meetings for Specific Discussions

The Group has been pleased to have the opportunity to meet and talk with:

- Chris Ketley, Non-Executive Director
- Laura Ellis-Philip, Director of Digital (CDIO), Senior Information Risk Owner
- Christine Redmond, ICU Matron
- Sue Harris, Nurse Consultant in Harms Free Care
- Nik Shah, Consultant, Intensive Care and Anaesthetics
- Paul, Darling-Wills, Operational Lead for Resuscitation Services
- Paul Bostock, Associate Director of Operations
- Susan Holton, General Manager, Outpatients
- Angela Mongaudon, Strategic Head of Education and Knowledge Services
- Lesley Aldridge, Deputy Head of Patient Experience and Involvement
- Femi Odewale, Associate Director of Operations for Diagnostics, Therapeutics and Cancer Services (DTC)
- Rachel Strauss, Divisional Professional Lead

Visits

The Group has had to curtail visits to ward/departments due to Covid-19.

Other events and special celebratory days attended by members of the Group relating to patient experience included:

- Well North events
- NHS Providers Governor Focus Conference
- Pride In Nursing Day
- Staff Awards Ceremony
- Schwartz Rounds

Quality Workshops

Many PEG members attended the quarterly Quality Workshops.

7 SOME PRIORITIES FOR THE COMING YEAR

- Develop a further programme of visitors to attend PEG
- Communication and engagement between patients, their families, carers and clinicians
- Discussing and proposing the local indicator to the Council of Governors
- Quality accounts - priorities and actions taken
- Assisting the continued improvement in patient experience.

Appendix 1

Attendance at Patient Experience Group meetings

Attendance at meetings:

	Total
Neal Adolphus	2/4
Tom Allan	3/3
Derek Barnes	5/6
Tracey Bradshaw	2/2
Lilly Evans	4/6
Shirley Holmes	6/6
Chris Howorth	6/6
Chris Marks	6/6
Michael Smith	6/6
Danny Sparkes	6/6

Appendix 2

Terms of Reference
Patient Experience Group of the Council of Governors

1. Authority

The Group is authorised by the Council of Governors to undertake any activity within its terms of reference and report back to the Council of Governors.

2. Membership

The Committee will be appointed by the Council and shall consist of no less than 6 members and no more than 10 members who must all be Governors. At least three of whom must be public Governors.

Where specific areas have been identified for scrutiny or as a project the Group may co-opt other Governors with a special interest in that topic.

Co-opted members may include:

Chief Nurse or Deputy Chief Nurse
Associate Director of Quality
Assistant Director of Patient Safety
Head of Patient Experience and Involvement
Membership and Engagement Manager
Other Executive and Non-Executive Directors will attend as required.

3. Chair

The meeting will be chaired by an Appointed or Public Governor.

4. Attendance

Members of the Group should attend a minimum of 50% of the meetings. Other managers may be invited to attend meetings for specific items.

5. Quorum

The quorum will be 4 members, 2 of whom must be public governors.

6. Frequency and Conduct

The Group should meet at least 4 times a year but not more frequently than 6 weekly.

7. Secretary

The Membership and Engagement Manager will act as Group secretary. Papers will be circulated one week in advance of meetings.

8. Duties

The Group has no executive powers and exists to advise and assist the Council in achieving its functions in relation to patient experience in the Trust.

The Group will seek to update regularly the Council of Governors on all aspects of the patient experience.

On behalf of the Council of Governors, the Committee will consider and make recommendations to the Governors on improving the patient experience in the Trust. In carrying out these tasks, the Group will ensure that the principles of equality and diversity are applied.

9. Specifically the Group will:

9.1 Consider and make recommendations to the Council on appropriate projects for Governor involvement in improving the patient experience, possibly undertaking 'deep dives' into areas identified from sources such as members' feedback or complaints.

9.2 Recommend to the Council ways in which Governors can support the patient experience programme. This could include setting up first impressions projects.

9.3 Assist in ensuring that examples of good practice in relation to obtaining patients, carers and members' views on the patient experience are spread across the Trust.

9.4 Offer input to developing action plans aimed at improving the outcome of national and local patient surveys.

9.5 Offer advice to the Council on the Trust's Quality Accounts and priorities relating to the patient experience.

9.6 Develop approaches to gather and harness feedback received from individual Governors in respect of the patient experience.

9.7 Review reports from bodies such as Health Watch in respect of the patient experience.

9.8 Offer advice to the Council on formal input to the CQC Registration process and specifically be involved in working with the Trust on essential standards relating to the patient experience, specifically the outcomes related to Personalised Care, Treatment and Support.

9.9 Receive and consider feedback from the Patients' Panel.

9.10 The Group will produce an annual work plan and annual report for agreement by the Council.

10. Patient panel

10.1 The Group will provide an umbrella for the Patient Panel, working with Panel members to provide input into Trust groups related to monitoring the patient experience e.g. PLACE, safety walkabouts.

11. Reporting lines

The Group will, at least once a year, review its own performance and Terms of Reference to ensure it is operating at maximum effectiveness and recommend any changes it considers

necessary to the Council of Governors for approval.

The minutes of meetings will be formally recorded and submitted to the Council of Governors.

The Group will make whatever recommendations to the Council of Governors it deems appropriate on any area within its remit where action or improvement is needed.

12. Monitoring

The effectiveness of the Group will be monitored by the Council of Governors via the receipt and discussion of minutes.

Approved by Council

Date: December 2021
Review one year i.e. November 2022