Ashford and St. Peter's Hospitals NHS Foundation Trust

COUNCIL OF GOVERNORS			
Date of meeting	2 July 2025	**Agenda Item**	9.1
Author(s)	Eimear Jordan, Catering and Housekeeping Manager	**Confidential**	NO
Exec Sponsor	-	**Date submitted**	25 June 2025
Title of paper	PLACE (Patient Led Assessment of the Care Environment) Review		
Presented by	Rachael Westerman, Director of Estates and Facilities		

Committee(s) where paper has been discussed previously and outcome of discussion:

Strategic Objective(s)

Quality of Care	x	**People**		**Modern Healthcare**		**Digital**		**Collaborate**	

Executive Summary
A presentation is shared with Governors highlighting findings from the recent PLACE review.

Recommendation	For: Decision ☐ Discussion ☐ Information ☒

Key issues: State impact/implications and mitigation (detailed info should be in the report)	
Quality, safety & patient impact	
Employee	
Other stakeholder(s)	
Equality, diversity & inclusion	
Finance	
Legal	

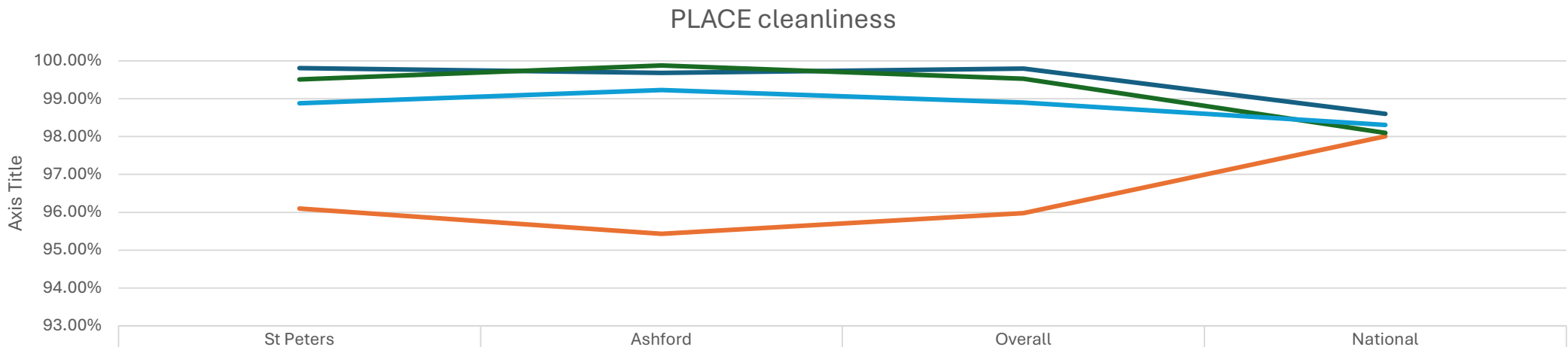
Risk(s) Identified (include link to Corporate Risk Register / Strategic (Board Assurance Framework) Risks:

Ashford and St. Peter's Hospitals
NHS Foundation Trust

PLACE review

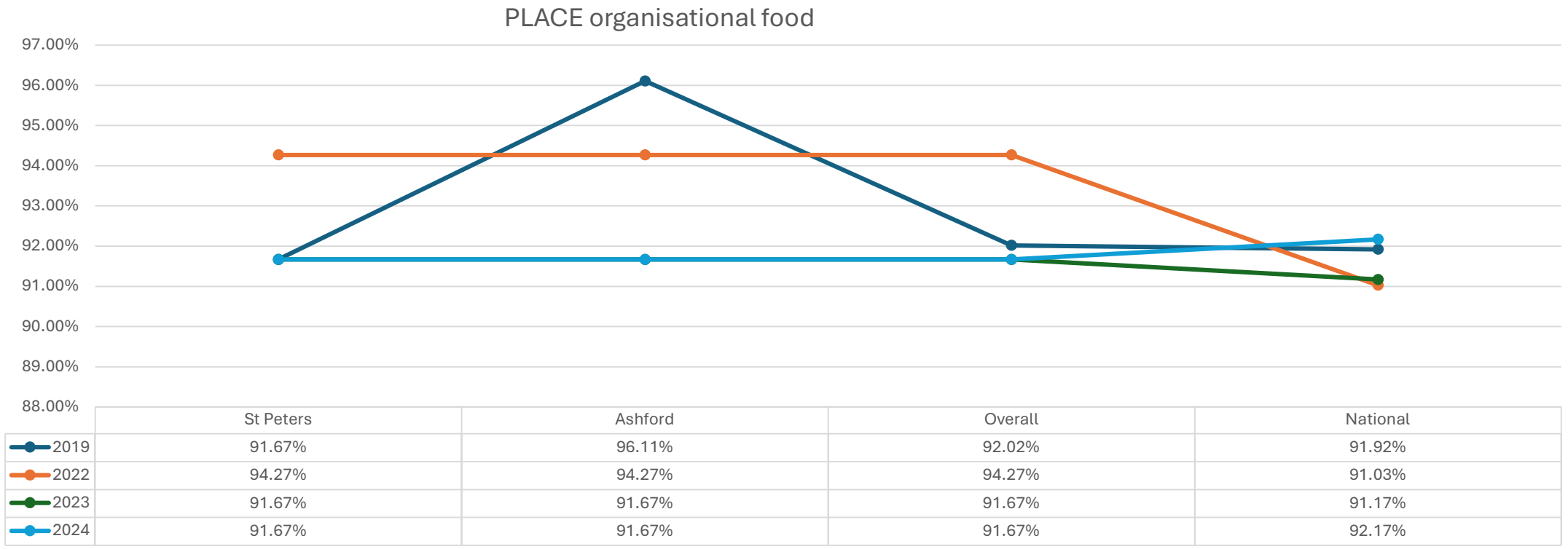
Patient Led Assessment of the Care Environment

Presentation Compiled by Eimear Jordan – Catering and Housekeeping Manager



	St Peters	Ashford	Overall	National
2019	99.81%	99.68%	99.80%	98.60%
2022	96.10%	95.43%	95.98%	98.01%
2023	99.51%	99.88%	99.53%	98.10%
2024	98.88%	99.23%	98.90%	98.31%

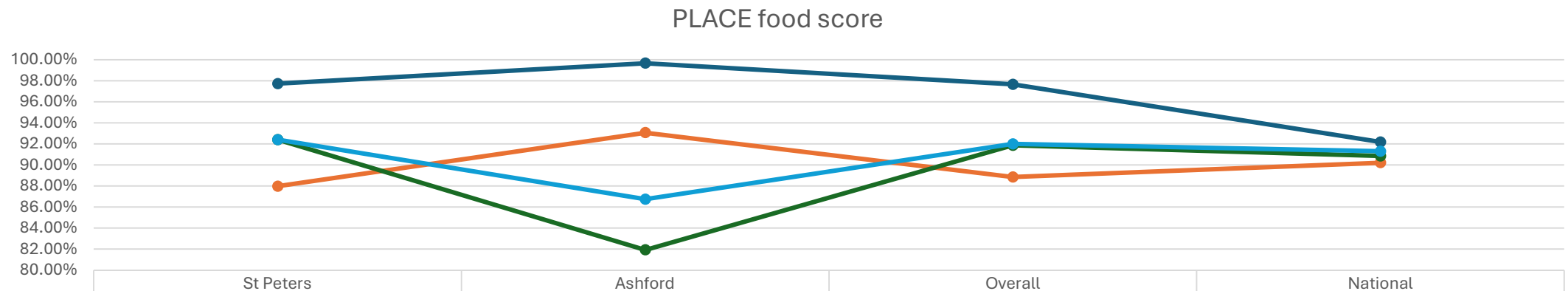
- Slight decrease in score from last year, still above national average
- Ashford hospital
  - Only 7 cleaning points lost through out site
  - Majority of points lost are due to dust, this is due to the building work and increased dust in environment
  - *Solutions – increased cleaning during the building work and continued monitoring*
- St Peter's hospital
  - Underlying theme is Bed Frames are dusty
  - Windows need a clean
  - *Solutions - Increased attention to dusting and bed frames – Window cleaning equipment due in January to enable the housekeeping team to clean majority of windows regularly and as required*



	St Peters	Ashford	Overall	National
2019	91.67%	96.11%	92.02%	91.92%
2022	94.27%	94.27%	94.27%	91.03%
2023	91.67%	91.67%	91.67%	91.17%
2024	91.67%	91.67%	91.67%	92.17%

- 91.67% - No change from last year, we have come out 0.5% under national average
- Exemption report
  - MUST SCORE – for full points should be over 90%
  - Not using digital ordering – 2 point loss
  - Only offering sandwiches for finger food – 1 point loss
  - No soup available at lunch – loss of 2 points
  - Number of hot options at lunch (3) and supper (2)

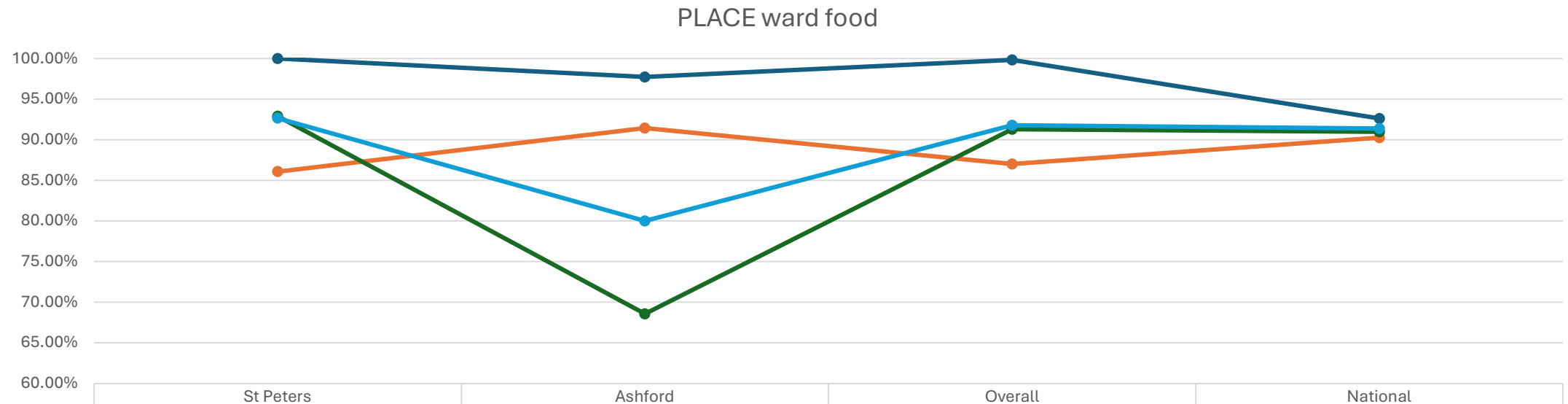
  - *Solution – with the introduction of the new patient suppliers we will be building a finger food menu and looking at a digital ordering solution. This will solve all issues except the MUST scores. Dieticians are working on a MUST solution with Cerner.*



	St Peters	Ashford	Overall	National
2019	97.73%	99.68%	97.66%	92.19%
2022	87.99%	93.07%	88.86%	90.22%
2023	92.41%	81.93%	91.87%	90.86%
2024	92.41%	86.75%	92.01%	91.31%

- This section looks at the ward service of food
- Score of 92% for the trust, this is above the national average
- St Peters – 92% (Aspen, heron, holly, falcon)
  - All areas lost a point for no separate dining area for patient
  - 2 wards (heron and falcon) lost points for patients not being offered to wash their hands prior to eating
- Ashford - 86%
  - Patients were not helped opening packaging e.g. Sandwiches
  - No separate area away from bedside
  - Patients not readied for meal service (helped to sit up)
  - Patients not offered to wash their hands
  - Patient areas not readied – tray tables not cleared of unnecessary items
  - All courses served at same time
  - Patients not aware of alternative menus

- *Solution – work with the nursing teams to ensure patient readiness and assistance during service times*

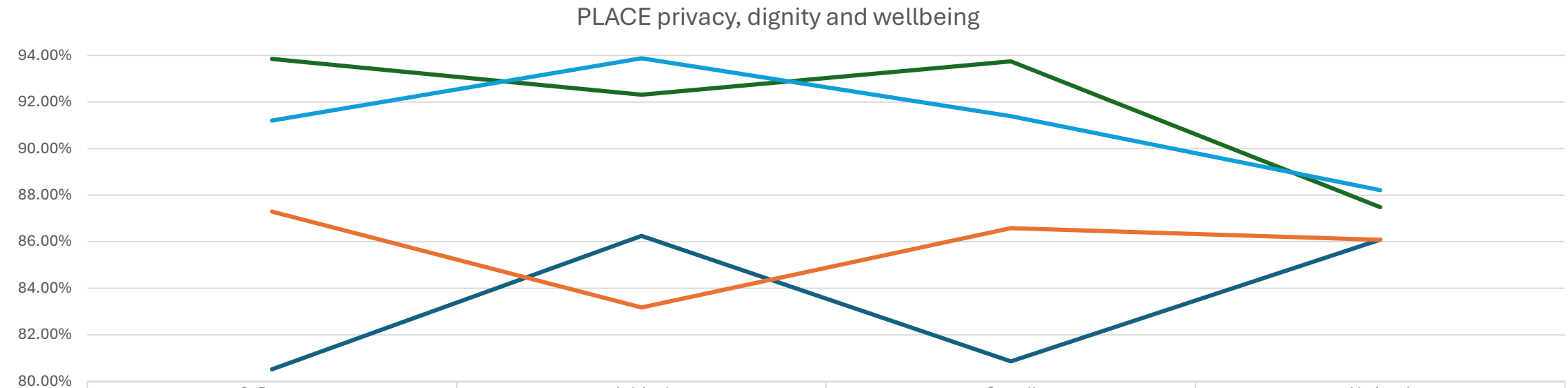


	St Peters	Ashford	Overall	National
2019	100.00%	97.73%	99.82%	92.62%
2022	86.08%	91.43%	87.00%	90.25%
2023	92.90%	68.57%	91.28%	90.98%
2024	92.66%	80.00%	91.78%	91.38%

- This section looks at the actual food tasting aspect of the inspection
- Overall score 91.78%, this is above the national average of 91.38%
- St Peters scored 92.6%
- Huge improvement in Ashford from 68% to 80% - Points lost due to temperature – long service time
- Both sites lost a couple points on taste of food – predominantly vegetables

- Please note due to only 1 trolley being served in Ashford only 7 dishes were tasted compared to 30 at St Peters

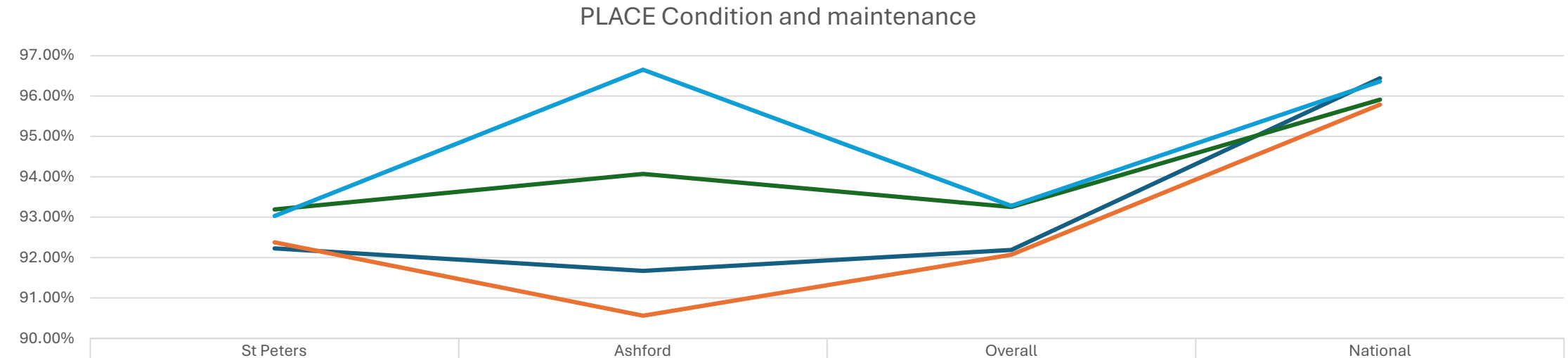
- *Solutions – Introduction of new patient suppliers will increase the quality of the meals served. Ashford trolleys have been adjusted to increase holding temperature and increased involvement from ward staff will speed up service.*



	St Peters	Ashford	Overall	National
2019	80.52%	86.25%	80.87%	86.09%
2022	87.30%	83.18%	86.58%	86.08%
2023	93.85%	92.31%	93.74%	87.49%
2024	91.20%	93.88%	91.39%	88.22%

- We have seen a 2% drop overall this year which has come from St Peter's as there was a slight increase in Ashford
- The lowest scoring areas were Cherry, Holly, X-ray and Paediatric A&E
- Cherry – No entertainment, no private rooms for conversations or treatment
- Holly – Space between beds and clinical/medical patient data left on show
- X-Ray and Paediatric A&E – no system to support hearing or visual impairment

- *Every year same problems in different areas – Hearing loops should be reported, difficult to solve the separate treatment rooms without a full refurbishment*

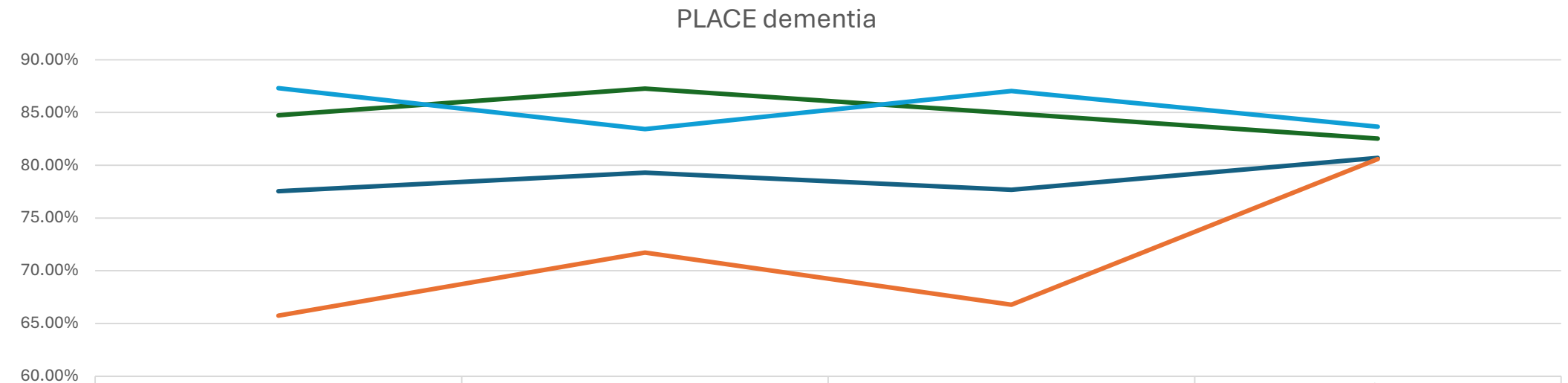


	St Peters	Ashford	Overall	National
2019	92.23%	91.67%	92.19%	96.44%
2022	92.38%	90.56%	92.07%	95.79%
2023	93.19%	94.07%	93.25%	95.91%
2024	93.03%	96.65%	93.28%	96.36%

- Consistently below national standard – however an improvement in Ashford this year
- Damage to walls and floors throughout the site
- Holly ward deemed as needing a full refurbishment
- Ceiling tiles – missing or damaged

- This area caused the highest distain from volunteers as same issues seen as last year with no sign of repairs

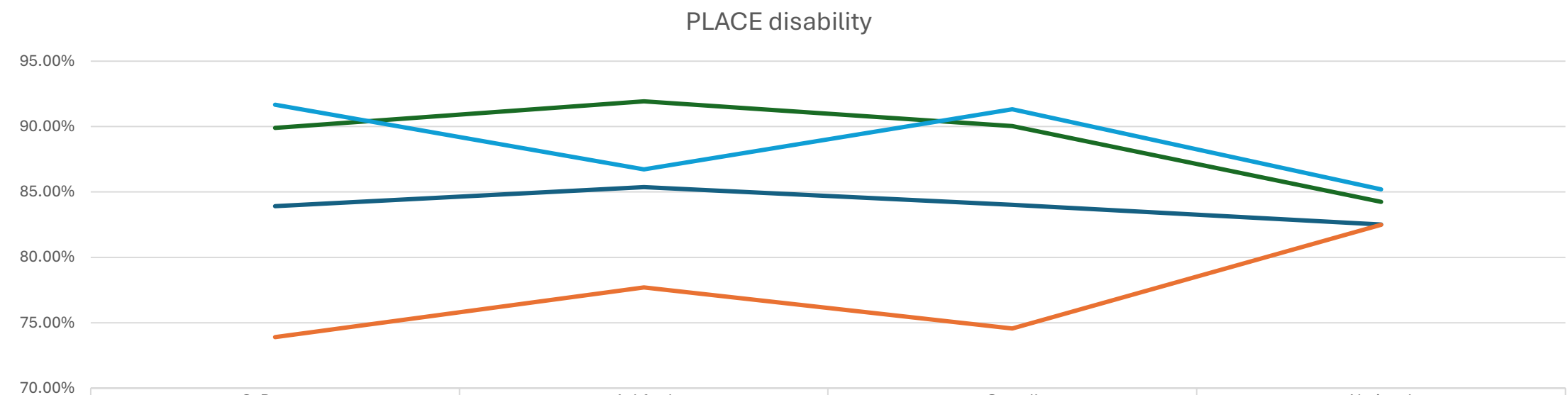
- A full report of comments has been shared however budgetary restrictions and high priority statutory compliance prevents works being completed



	St Peters	Ashford	Overall	National
2019	77.54%	79.29%	77.68%	80.70%
2022	65.75%	71.73%	66.79%	80.60%
2023	84.73%	87.26%	84.91%	82.54%
2024	87.31%	83.44%	87.04%	83.66%

- Massive improvement in dementia care since 2022
- This year saw a drop in Ashford – Dickens specifically
- Dickens food came at 60% for dementia – No finger food menu and food packaging not being opened for patients e.g. sandwiches
- Dickens Ward – Not a specific dementia unit so isn't decorated with different colours or artwork
- Many points this year were failed last year with no actual changes to the ward – different volunteers with different perceptions

- In St Peter's a big increase was seen in X-Ray assessment from 78% to 95%. The department now displays date, time and has more contrasting colours



	St Peters	Ashford	Overall	National
2019	83.91%	85.37%	84.02%	82.52%
2022	73.91%	77.70%	74.56%	82.49%
2023	89.89%	91.94%	90.03%	84.25%
2024	91.67%	86.72%	91.32%	85.20%

- Similar to dementia we have seen an overall improvement continuously since 2022 with a drop in Ashford this year
- Significant cross over between dementia and disability so same questions lost Dickens points in both categories bringing down the results.

- The disability score will go up across the whole trust as other areas are improved upon as all points lost link with other sections