Ashford and St. Peter's Hospitals
NHS Foundation Trust

Report title:	Patient Experience Group Annual Report and Terms of Reference		
Report to:	**Public Council of Governors**		
Date of meeting:	**Tuesday, 03 March 2026**	**Agenda item:**	7.3
Report 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 noting. The Group's membership is between 6 and 10 Governors. The Group currently has 10 members.		
Recommendation:	Note the Annual Report and approve the revised Terms of Reference and on-going membership of the Committee.		
Report lead:	Michael Smith, Lead Governor		
Report author:	Anu Sehdev, Membership and Engagement Manager		

Purpose of report:	**For Noting** ☒	**For Decision** ☒	**For Assurance** ☐

Assurance level:	**Significant** ☐ High level of confidence / evidence in delivery	**Acceptable** ☒ General confidence / evidence in delivery	**Partial** ☐ Some confidence / evidence in delivery	**No Assurance** ☐ No confidence / evidence in delivery

Link to Strategic Objectives:	Quality of Care -
Link to CQC Domains:	Not applicable
Link to BAF risk:	Not applicable
Potential impact on stakeholders:	None
Next steps	N/A
Appendices:	None

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PATIENT EXPERIENCE GROUP
ANNUAL REPORT 2025

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 twelfth year of its operation. This report covers the period 1 December 2024 to 28 February 2026.

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 10 members.

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

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

The Group re-elected Shirley Holmes as the Chair of the Group at its meeting on 16th February 2026.

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

4 TERMS OF REFERENCE

The Group has now operated for 14 years and its Terms of Reference are highlighted at Appendix 2.

5 REGULAR ITEMS

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

- Patient Experience section of the Board Quality report
- Friends and Family Test Results
- Feedback from the Patient Panel meetings
- Feedback from the Patient Portal meetings
- Feedback from Learning from Patient Experience 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:

- Toks Ogunbanjo, Chief Pharmacist, Ashford & St Peters and North West Surrey Alliance, Divisional Director, Diagnostics Therapeutics and Cancer Services and Borough Director, North West Surrey Alliance, who conducted a tour of Pharmacy.
- Jenni Davidson, Mortality Improvement Lead and Interim Head of Patient Safety.
- Diane Dodsworth, Patient Safety Partner.
- Declan Slattery, Patient Safety Partner.
- Cherry Jordan, Head of Patient Flow and Discharge.
- Dorothy Adjorlolo, Matron for Specialist Surgery, who conducted a tour of the Eye Unit at Ashford Hospital.

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

- Pride In Nursing Day
- Staff Awards Ceremony
- Schwartz Rounds
- Annual Members' Meeting
- QI Event

Quality Workshops

A few PEG members also 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
- Quality accounts - priorities and actions taken
- Assisting the continued improvement in patient experience.

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Appendix 1

Attendance at Patient Experience Group meetings

Attendance at meetings: 26 February 2025 to 16 February 2026

	Total	
Edwin Addis	0/1	New member
Andy Brown	6/6	
Sue Bryer	1/1	New member
Sue Doran	1/3	No longer a member
Heather Hall	3/5	No longer a member
Shirley Holmes	5/6	
Karen Howkins	4/5	No longer a member
Chad Lake	5/6	
Ellen Nicholson	2/2	
Ann Ooms	3/6	
Michael Smith	3/6	
Nigel Stapleton	1/1	New member
Anthony Tweh	0/5	No longer a member
Denis Wright	4/6	

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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 Group 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 meetings 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 Group 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 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 Patient 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: March 2026
Review one year i.e. February 2027