

#### **AGENDA**

#### **Public Assurance Forum**

Date: Monday 15<sup>th</sup> January

Time: 1pm – 4pm

**Location: Microsoft Teams** 

	OPENING MATTERS AND PROCEDURAL ITEMS									
Item No.	Agenda Item	Paper No / Verbal	Lead	Required Action	Time					
2024/01	Welcome and apologies	Verbal	Co-Chairs	For noting	13:00					
2024/02	Minutes of previous meeting	Paper 1	Co-Chairs	For noting	13:05					
2024/03	Matters Arising/Actions	Paper 2	Co-Chairs	For approval	13:10					
2024/04	Update on HTP:  • HTP Programme Board Engagement Report	Presentation Paper 3	HTP team  Hannah  Morris	For approval For discussion	13:15					
2024/05	Partner's updates	Paper 4	Forum Members	For approval	14:00					
2024/06	SaTH Transformation Team Update	Presentation	Matt Mellors & Mary Aubrey	For approval	14:15					
2024/07	SATH Strategy & Partnership update	Paper 5	Director of Strategy & Partnership	To discuss	14:30					
2024/08	The Patient Safety Incident Response Framework	Presentation	Peter Jeffries	For noting	14:45					
2024/09	Update on Service Developments: • Renal Dialysis	Presentation	Hannah Morris	To discuss	15:05					

2024/10	Supplementary Information Pack				15:10
	<ul> <li>i. SaTH Divisional updates on key issues.</li> <li>ii. Public Participation Plan: 2023/24 Action Plan Update</li> <li>iii. Draft Public Participation Quarterly Board Report</li> </ul>	Papers 6-8	Divisions  Hannah  Morris	For information – to address any comments /queries	
2025/11	Any Other Business	Verbal	Chair		15:15
2024/12	Dates for the Forum for 2024 and close of meeting	Paper 9	Chair	To note	15:20



# **Public Assurance Forum**

Held on Monday 9<sup>th</sup> October 2023 14:00 – 17:00hrs via MS Teams

#### **MINUTES**

#### Present:

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Kate Ballinger	Community Engagement Facilitator
Carl Bailey	Service Manager & Safeguarding Lead for Challenging
	Perceptions
Kara Blackwell	Deputy Director of Nursing
David Brown	Non-Executive Director SATH (Chair)
Michelle Cole	Divisional Director of Nursing - SAC Division
Linda Cox	VCSA Deputy
Aaron Hyslop	Public Participation Team Facilitator (HTP Engagement)
Cllr Joy Jones	County Councillor of Newtown East Ward
Tom Jones	HTP Implementation Lead
Sarah Kerr	Armed Forces Outreach Coordinator
Nigel Lee	Interim Director of Strategy
Dianne Lloyd	Acting Deputy Divisional Director of Operations – Clinical Support Services
Kevin Moore	Age Concern Deputy
Dave Morgan	Patient First, Telford
Hannah Morris	SATH Head of Public Participation
Jane Randall- Smith	Llais Representative
Graham Shepherd	Shropshire Patient Group Representative
Greg Smith	PACE Co-Chair
James Owen	Deputy Director of Education & Improvement
Rachel Webster	HTP Nursing, Midwifery and AHP Lead
Andrena Weston	Deputy Director of Operations, Surgery, Anaesthetics and Cancer Division

## In attendance:

Rachel Fitzhenry S	Senior Administrator (Minute taker	
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Item No.	Agenda Item
2023/41	Welcome and Introduction
	Joy Jones opened the meeting by welcoming the group to the MS Team meeting.
2023/42	Minutes of previous meeting (3rd July 2023)
	The Minutes of the previous meeting on 3rd July 2023 were approved as an

2222/12	
2023/43	Matters Arising/Actions Separate sheet attached.
	Ocparate sheet attached.
2023/44	Update on HTP
	Rachel Webster and Tom Jones presented the update on HTP and briefed the
	group on the key areas:
	HTP Programme Board Engagement Report:
	Where are HTP in the process:
	<ul> <li>Current phase/early 2023 – Development of Outline Business Case with:</li> <li>Pathway design</li> <li>Architect designs</li> <li>Involving our communities</li> <li>Ongoing clinical and staff workshops</li> </ul>
	Summer 2023:  • Outline Business Case to be submitted to NHS England
	<ul> <li>Autumn 2023:</li> <li>Development of full Business Case and submitted for regional and national approval</li> </ul>
	Winter 2023/24: • Start implementation phase
	Between Autum 2023 and 2026:  • Continued staff, patient and community involvement
	<ul><li>Winter 2026:</li><li>New model and ways of working in place.</li></ul>
	RSH will become the site specialising in Emergency Care:
	<ul> <li>Emergency Department</li> <li>Urgent Treatment Centre</li> <li>Critical Care Unit</li> <li>Consultant-led Maternity Care</li> <li>Childrens Impatient Services</li> <li>Emergency and Trauma Surgery with complex, planned and Childrens Surgery</li> <li>Emergency Medicine, including Cardiology, Stoke, Respiratory and Acute Medicine</li> <li>Consultant Neonatal Services</li> <li>Head and Neck Inpatient Services</li> </ul>
	<ul> <li>Radiotherapy and inpatient and day Cancer Care and treatment</li> <li>PRH will become the site specializing in 'Planned Care':</li> </ul>
	<ul> <li>Diagnostic endoscopy</li> <li>Vibrant planned care site, planned inpatient surgery with medical and surgical inpatients on a planned pathway of care</li> <li>Adult and child outpatients</li> <li>Day case surgery centre</li> </ul>
	<ul> <li>Midwife led unit</li> <li>24 hour Urgent Treatment Centre (A&amp;E local model) with co-located 12 hour medical Same Day Emergency Care</li> </ul>

- Dedicated procedure suite for local anaesthetics
- Enhanced rehab facilities and 2 new therapy led wards
- Respiratory diagnostic and treatment centre
- Cancer treatment day unit

#### PRH dedicated planned care hub - aligned with HTTP:

Work is progressing on our £24million Planned Care Hub at PRH with the first beds expected to open to patients in autumn 2023. This purpose-built facility will consist of four theatres and a dedicated recovery area for elective care.

The hub will enable us to deliver day case operations all year round which means that:

- Our patients will face fewer delays for treatment, improving outcomes.
- We are not likely to postpone procedures due to winter and bed pressures.

The hub is a key part of our long-term plans to deliver improvements in care for the population and create two thriving hospitals. We expect the first beds to open in the Autumn and it is expected to be fully complete in early 2024.

Work is also progressing on the multi-million pound transformation of the main entrance at PRH which is expected to be completed later this year.

#### Where HTP is in the process:

- We've worked with our lead clinicians to add further detail into the clinical model to start to design the "flow" of clinical services (how our clinical teams will work and connect to each other).
- Seeking planning permission for building works at the Royal Shrewsbury Hospital
- Preparations underway to be ready for the implementation phase.
- Your feedback is continuing to inform the development of our proposals.
  This involvement will continue and over the next few weeks, months and
  years there will be many opportunities for people to help us influence the
  physical environments and people's experience of our services.

#### Latest developments: approach to planning:

- We are working with Shropshire Council as part of the planning process for the Royal Shrewsbury Hospital site.
- This supports our developing plans to ensure, if approved, we have full implementation by late 2026 and can provide improved care for everyone across Shropshire, Telford & Wrekin and mid Wales.
- We are working through the design and planning to ensure our facilities will deliver the clinical model and core outcomes of the Future Fit consultation in the most effective and efficient way within the investment.
- We'll continue to work with staff, patients and communities to inform plans at every step of this improvement journey.
- Application submitted to Shropshire Council in July 2023
- Currently progressing through the statutory consultation phase which:
  - Gathers views from the public
  - Seeks professional views from statutory consultees.
- We are aiming for the application to be heard at the Planning Committee in October 2023, and therefore the application will be discussed right up until this point.

#### **Background:**

The hospital currently occupies approximately 21 hectares, with a variety of

- building types and scales from 2-storeys to 5-storeys.
- Several of the hospital buildings at the site are ageing.
- Failure to improve the configuration of the estate will only increase the risk of future disruption.

#### The RSH proposals:

The plans for RSH include approximately 30,000 sq. m of new building which will consist of:

- A new entrance, reception and hospitality offer as well as enhanced patient drop off facilities and accessible parking to cater across Shropshire, Telford and Wrekin, and mid-Wales.
- A purpose designed large Emergency Medicine department with a paediatric zone aligned with a new urgent treatment centre.
- An Acute Medicine floor.
- Consultant-led Maternity, Gynaecology and Neonatal services with Midwifery led delivery.
- A children's centre including enlarged children's assessment unit, children's inpatient, oncology and surgical services.
- An adult Oncology and Haematology ward with increased single accommodation.
- A large new Critical Care Unit.
- There will be two new front doors one to the Emergency Department and one to the New Main entrance.
- There will be large new reception and triage areas, with dedicated waiting for adults and children.
- There will be an expanded provision for 10 ambulances, with a protective canopy.
- A new drop off and accessible parking directly outside the Emergency Department.
- Relocated Helipad.
- Emergency department purpose designed with a new larger resus area.

#### Improving the hospital experience:

- There will be two new front doors one to the Emergency Department and one to the New Main entrance.
- There will be large new reception and triage areas, with dedicated waiting for adults and children.
- There will be an expanded provision for 10 ambulances, with a protective canopy.
- A new drop off and accessible parking directly outside the Emergency Department.
- Relocated Helipad.
- Emergency department purpose designed with a new larger resus area.

#### **Transport:**

- Comprehensive review of the transport facilities onsite undertaken.
- Increase in overall parking.
- The staff car parking provision reorganised.
- Vehicle access points into the site will remain unchanged.
- Relocated hospital entrance, which will now face the major public car park.
- Increase in cycle parking.

We will continue to work with service users, local communities and colleagues as

we develop our Travel and Transport plans for both hospitals.

#### **Sustainability:**

- Aim to achieve BREEAM excellent, using sustainable building solutions such as solar panels.
- The project aims to be Net Zero Ready which means the building will be capable of adapting to future sustainable technologies.
- Proposals include neutral grassland, hedgerow mixed scrub and the introduction of shrub planting around the boundary of the building.

#### **Design – appearance and materials:**

- The building also sits back from the boundaries of the site, minimising the impact on neighbours.
- The existing hospital buildings are of a panellised concrete construction providing a clean, efficient, and effective new face for a modern hospital.
- The windows are glazed between floor and ceiling to maximise daylight within the hospital building.

#### **Construction:**

- Some disruption to users and local residents in respect of noise, dust and vibrations.
- Residents will be consulted on a construction management plan, which will be agreed with the council.
- The development will be carried out in phases whilst maintaining the full operation of the hospital.

#### Other recent developments, aligned with HTTP:

# Community Diagnostic Centre has opened, delivering improved access to tests and scans:

Located at Hollinswood House in Stafford Park 1, Telford, some of the services opened on 2<sup>nd</sup> October. It means that patients who need non-urgent diagnostic tests or blood tests won't have to go to a hospital. Services are being provided by teams from SaTH and will include CT, non-obstetric ultrasound, blood tests and X-rays. There is a phase approached to opening services at Hollinswood House. MRI equipment is expected to arrive next month and cardio-respiratory tests and dermoscopy will be introduced in January.

#### **Modular Wards:**

The new modular ward will be located adjacent to Copthorne Building at the main entrance of RSH. The new Modular ward will house 64 beds over 2 stories providing additional beds on site.

#### **Questions:**

Graham Shepherd enquired about the modular units, he had heard they were being used as a discharge lounge and if this is the case is there any intention to use that as part of the community side, instead of having to stay on acute wards? Graham asked whether the new unit could start moving more people out and put them into the new modulars?

Nigel Lee responded, one of the primary intentions is to add capacity at our hospitals and one of the main objectives is to look at those sub-acute pathways for patients.

The plan for the modular ward is that it will take up half the capacity at Shrewsbury and for the other half there is a couple of different options about how best to use what we have. The general trend is how best we optimise the main hospital and ward based wards to optimise those for acute care and then how best do we use other accommodation for best effect. A discharge lounge could be one of the different options.

# Greg Smith asked how the air circulation is being planned in the new build at RSH for HTP and will the windows open for fresh air in the new building.

Rachel Webster answered, in terms of the ventilation, the internal ventilation with windows closed or open will be compliant with the building regulations and that will be where there are no windows that open i.e., storerooms and where windows don't exist, then there is mechanical ventilation and air exchange. The vast majority of all the clinical areas have quite large windows that are able to open, however will have restrictors on (as required by Health & Safety). In terms of compliance, they will be compliant with the building regulations and infection prevention control requirements, but also where there are any limits to that in terms of natural ventilation, mechanical ventilation is used to achieve this standard.

# David Brown asked the group whether there was more that can be done to engage the public and the community?

Graham Shepherd advised that at the 1:50ED Clinical Design meeting he attended had not been helpful and he would like to talk to someone outside the meeting, on how they can improve that and repeated concerns about the seating in the main entrance.

ACTION: Tom Jones agreed to have a discussion with Graham Shepherd around the seating in the main entrance and how the team gathered the numbers to make sure it would be sufficient.

Hannah Morris added this will be discussed within the focus groups that we have with the public. The 1:50 Clinical Design group meetings look at a number of specific clinical areas, but the main entrance in the new build at RSH, was now starting to be discussed at the last two main workstream focus groups and plans for this area will develop as the project moves forward.

# ACTION: CIIr Joy Jones requested an update at the next meeting, on the new main entrance at RSH in relation to the HTP programme.

Linda Cox raised the issue of acronyms and shortcuts within meetings that make it difficult for somebody coming in from outside.

David Brown informed the group that the guiding principle should be in full first and then the acronym afterwards.

ACTION: Rachel Fitzhenry to circulate with every PAF meeting a list of acronyms to the group.

Greg Smith noted the patient population of Shropshire is around half a million and these meetings have a handful of people that are involved in these discussions. One way of dealing with this is to do sample surveys. If you really did want to know what the wider public thought, a sample survey would be one way forward.

David Brown noted there is quite a broad coverage through our patient groups who actually have the Public Participation groups feeding into them.

Nigel Lee informed the group, we just need to make sure that we seek how best to get views, which is important. We are really grateful to everyone on this group for that. We are having a lot of discussions with local authorities, town and county council's and we just need to make sure that we don't fall into the potential trap of some parties thinking that's a way of reopening consultation. We just need to be careful about the language and what people think they're joining in with.

Dave Morgan noted there is a concern that the automatic assumption that GP patient participation groups are readily available with all the information to forward to more senior committees, however that's not necessarily the case. Greg Smith mentioned Shropshire population and referred to Powys, with about 132,000 residents. Representation from GP patient groups and their practice isn't always effective, as is not necessarily a good source of ready information or up to date information.

Rachel Webster informed the group, in terms of the comments around engagement, the context and assurance, it is all in relation to where we are in terms of the business planning. We do not hold anything back, it's about timing and the right opportunity in relation to where we are in the business approvals. So as soon as we've got the Outline Business Case (OBC) confirmed and when the Full Business Case is approved, we will continue with a programme of engagement and as soon as the context is ready PAF will be informed straight away.

Hannah Morris gave a brief overview of the engagement which has been carried out with the public over quarter 2 from July to September. The report has been circulated to the group.

#### 1:50 Clinical Design Meetings

Hannah Morris informed the group we now have representatives from the Public Assurance Forum for each of the clinical design group meetings and this is important as it is the bridge between the focus groups that we have with the public. They also attend the 1:50 clinical design meetings and the feedback has come from the focus groups. So, thank you to everyone that has agreed to take part with the 1:50 clinical design group meetings.

#### 2023/45 Partner's updates

#### i) Llais

Jane Randall-Smith gave a brief update on Llais:

Llais has been focussing its engagement activities in the Ystradgynlais area of Powys during the month of September.

There is nothing to report in relation to this meeting.

#### ii) Shropshire Patient Group

Graham Shepherd gave a brief update on the Shropshire Patient Group:

We now have active members on the following Focus Groups.

HTP Medicine & Emergency Care, Surgery, Anaesthetics & Cancer, Outpatients, ED 1:50 Clinical Design and Travel & Transport.

These groups are all in their infancy, therefore there is nothing significant to report at present.

We also have a member who is very active in a wide range of mental issues, particularly Autism.

Following on from a recent presentation to SPG by Julia Clarke and around the HTP, the member has now been invited to input into the design of the sensory environment, especially, when work starts in this area.

#### 2023/46 SaTH Improvement Hub and Public Involvement update

James Owen gave an update on SaTH Improvement Hub and Public Involvement update:

#### Aim:

To empower colleagues at all levels to have the confidence, capability, passion, and knowledge to test changes and make improvements at SaTH and the communities we serve.

#### Four Themes:

- Building Capability
- Clinical Patient Flow
- · Getting to Good
- Learning from incidents

Projects recently involving Public Reps:

- Hydration test of change
- Self-Administration of medication

#### Future projects:

- Diabetic Feet Project
- Neonatal Feeding Position

#### **Questions:**

David Brown informed the group, for many years we ran a whole series of Kaizen projects (improvement projects linked to our Virgina Mason work), and they involved members of the public bodies e.g., Healthwatch, Patients First, who were actually members of those improvement projects. They lasted about four days and focused on one specific problem. David found them very useful, and it brought an external set of eyes and thoughts to the problem.

James Owen agreed, they are called Rapid Process Improvement Weeks (RPIWS). When we organised those, we would get a patient representative involved. However, during COVID, we could not progress this. James advised that ED would like to do another project in the future and we need to make sure we've got a patient representative on those projects because an outside perspective is really important. The ophthalmology clinic was a particular example of where the end result was completely different because there was a patient

representative there. That input is really important and when we organise more events, we will make sure there is a patient representative present.

Graham Shepherd asked James Owen about systems to follow up events and are the team going to revisit outcomes to see if to the approach needs to change.

James Owen agreed that the culture dashboard is not just about improvement, it's about whether we are compassionate as an organisation. We have introduced civility and respect training for colleagues and there's a lot of focus on teamwork, the Trust's health and well-being offer is also greatly improved compared to what it was a few years ago. There are loads of initiatives and the trust has a really clear vision now where it wants to be. The HTP conversation is evidence of that. We've recently opened a new building for colleagues to access education and we've got a new learning management system so people can see what's on offer to them. We have also designed a new prospectus. We've done lots of work to try and make education more available to colleagues, so there is quite a lot going on.

Graham Shepherd asked about the improvement presentation day which went ahead last year and whether there are any upcoming in the near future.

James Owen informed the group there is a plan to have a presentation day each May. We have had them for the last past two Mays. The invite was put out to everybody for 26<sup>th</sup> May this year. The next one is the Friday in the last week of May 2024.

ACTION: Sarah Kerr asked if there was any public involvement that is needed from the veteran community, we would be more than happy to facilitate that and work with the group. James was very appreciative and will be in contact with Sarah.

Sarah Kerr informed the group that we probably need to look at the involvement with the bases. As a veteran the spouses and the families can be disadvantaged when they move from base to base, unit to unit and part of the new legislation with the armed forces covenant is around health and that's something that's got to be addressed. Not only SaTH but other trusts are working well with it.

Nigel Lee agreed with Sarah's point and informed the group there is a network across the organisation. In the last two or three years a message has been circulated out around Remembrance Day and families are included.

James Owen left the meeting.

### 2023/47 | SATH Strategy & Partnership update

Nigel Lee provided a summary of key actions and activities relating to both the Trust and Integrated Care System (ICS) strategy development and implementation, as well as associated work.

Integrated Care System (ICS)

**Joint Forward Plan (JFP)** 

As part of the Integrated Care Board's (ICB) statutory responsibilities, the ICB and their partner Trusts/Providers have a duty to produce a JFP. The JFP describes how services are provided to meet our populations physical and mental health needs over the next 5 years aligned to the ICS four core purposes. The main principles of the plan are to ensure that it is:

- Aligned with the wider system partnerships ambitions
- Supporting and building on existing local strategies and plans
- Delivery focused

The JFP was presented at the ICB public board at end of June 23 and is now published on the ICS website. Importantly, the top 3 objectives focus on population health and addressing inequalities, alongside 2 major programmes – Hospital Transformation Programme and the Local Care Transformation Programme.

#### **Health Inequalities**

The <u>NHS Long Term Plan</u> places preventing ill-health and reducing health inequalities at the heart of the NHS.

The <u>NHS Prevention Programme</u> commits to supporting people to keep healthier, for longer. This includes helping people make healthier lifestyle choices and treating avoidable illness early on.

Tackling health inequalities is a core priority for the NHS, as people from deprived backgrounds are more likely to develop long-term health conditions, suffer poor health and experience reduced life expectancy.

<u>The National Healthcare Inequalities Improvement Programme (HiQiP)</u> asks systems to focus on five priority areas:

- Restoring NHS services inclusively
- Mitigating against digital exclusion
- Ensuring datasets are complete and timely
- Accelerating preventative programmes (including the initiatives outlined in the <u>NHS Prevention Programme</u>, <u>Core20PLUS 5 Key Clinical Areas for Adults</u> and <u>Core20PLUS 5 Key Clinical Areas for Children & Young People</u>.
- Strengthening leadership and accountability.

The Core20PLUS5 National approach to reducing health inequalities in Adults and Young People are detailed below:

Shropshire, Telford & Wrekin Integrated Care System (ICS) <u>pledges to tackle the problems of ill health, health inequalities and access to healthcare</u> through a shared approach to ensuring health inequalities are mainstream activity that is core to, and not peripheral to, the work of the NHS.

The ICS held its first Prevention and Health Inequalities Board on 7<sup>th</sup> September 2023.

We will continue to work with our colleagues both internally and externally to support this agenda with further updates on progress to be provided.

#### SATH Workstreams

#### **Provider Collaboratives**

Collaboration activity in collaboration is taking place in a number of areas:

 Work continues to take place to strengthen and develop our current working relationship with Shropshire Community Healthcare NHS Trust, with an early focus for 2023/24 on the Local Care Transformation Programme (LCTP) priorities of the Integrated Discharge Team and expansion of the Virtual Ward. Medium term plans for LCTP are established as part of HTP OBC, ensuring alignment between the Local Care programme and our Hospital Transformation Programme. An ICB-commissioned capacity and demand analysis and report has commenced in Sep 23, which will be vital for the future system capacity, workforce and medium-term financial plan.

- We are strengthening our collaborative working with the Local Authorities and actively participating in supporting the Drug and Alcohol agenda, Care at Home, End of Life and Neighbourhood developments. The Place Partnership Boards will be a key mechanism to coordinate this work.
- The SATH/UHNM collaborative was reset in summer 2022; the joint partnership group meets monthly, with COO, MD and director of strategy representation from both Trusts. This supports our work on Urology, robotic surgery and Fetal medicine, and provides a valuable forum for ongoing dialogue for areas of mutual benefit.

### **Trust Strategies**

Nigel advised that we have developed a Trust Strategies webpage which is now live (external website and internal intranet); this will help to ensure the strategic context and longer-term ambitions are freely available.

We are currently in the process of finalising our Trust Clinical Services Strategy and a draft will be circulated to PAF members for comment. To support the implementation of the Clinical Strategy and the wider organisation's priorities, we are currently in the process of developing a framework to undertake a directorate based Clinical Services Strategic Review (CSSR). This will provide a detailed summary of metrics in performance, workforce, quality and finance at specialty level, and support teams in their short and longer term development. Further details to follow.

We are also currently in the process of reviewing the Equality, Diversity and Inclusion Strategy, and commencing a review of our End of Life Strategy. Further updates will be provided.

The Research and Innovation Strategy is currently being refined but is also expected to be published shortly.

#### 2023/48 Update on Service Developments

#### Renal Dialysis

- The Renal Unit on the 1<sup>st</sup> and 2<sup>nd</sup> floor of Hollinswood House is nearing completion, scheduled for October 23
- Ventilation commissioned
- Ceilings partially complete, TV mounts installed and RO water treatment panels installed
- RO plant installed
- External works completed
- Finishing works are now commencing
- Flooring complete

#### Fetal Medicine

#### **Background**

- Fetal medicine is a service for pregnant women provided by highly skilled, specialist doctors that offer diagnosis and treatment of complications which may arise in unborn babies.
- SaTH provides a Level 2 Fetal Medicine Service. Babies identified with potentially more significant complications are already referred to a Level 3 unit.
- To date, SaTH has been fortunate enough to have had three Obstetricians who specialise in fetal medicine. Through a combination of recent retirements and unavailability, from the end of July 2023.
- There is a national shortage of doctors who specialise in fetal medicine, we are however committed to try to fully restore the service and on this basis, we have been working to develop an attractive recruitment plan in an effort to fill our vacancies.
- Approximately 500 patients were seen as part of this service in the last financial year.
- The service covers the whole of Shropshire, Telford and Wrekin, including referrals from Powys.
- There is no waiting list due to the standards set out in the NHS Fetal Anomaly Screening Programme (FASP).
- National and local workforce challenges due to uptake in fetal medicine training.
- Due to a combination of recent retirements and unavailability, the current service needs to be closed temporarily while we look to recruit replacement consultants.

#### Service change

- As a consequence of our workforce challenges, the fetal medicine service ran by SaTH has been paused from 27<sup>th</sup> July 2023.
- Women continue to receive fetal medicine input albeit in a different provider location.
- We have put in extra resource to monitor referrals and liaise between SaTH and the different providers to ensure there is no drop in attendance or engagement of women.
- The Trust has written (email 11/08/23) to the Joint Overview and Scrutiny Committee regarding this service change, and they have not raised any questions or feedback to date.

#### 2023/49 SATH Divisional updates on Key issues:

The divisions gave a brief update on their key issues.

#### **Clinical Support Services**

David Brown mentioned on page 82 within the agenda, in terms of diagnostics and ultrasound it now seems to be turning around. It had been languishing down in the 40% but is now showing as 66%.

Dianne Lloyd informed the group the team are doing a great deal of work around non obstetric ultrasound and trying to recover that standard. It is going to take a while longer. We're anticipating 24<sup>th</sup> March 2024 will be the date when we've recovered the DMO 1 performance, which is at 99%, but really good news is that we have in the last month recovered the CT standard. CT is now at 99% and we envisage the MRI is going to join CT at 99% this month, all very good news.

Kate Ballinger informed the group she managed to get hold of, 'Did not attend appointments' by GP practices, which was shared with the Telford Patient First

group. This can be repeated if that would be helpful. The idea being that having that information might encourage the various GP practice groups to get in touch with the umbrella organisations.

Hannah Morris mentioned it would be useful to link with the Integrated Care Board (ICB), with Kate Manning, as she is linking with the Patient Participation Group (PPG) groups and that information would be useful to come from them. I'm just aware we need to focus on the hospital side of things in SaTH.

ACTION: Kate Ballinger to refer to Kate Manning at the Integrated Care Board (ICB) re oatients who DNA, as she is linking with the PPG groups and that information should come from them.

Greg Smith mentioned the Clinical Support Services report and the reference to DNAs missed appointments; it is so important that hospital resources are not wasted by missed appointments. It would be important for the group to have a report to know about how DNAs are being handled across the hospital. The idea of losing specialist resources, which is so expensive and leaving very expensive equipment unused for periods of time because people are missing appointments. It would be appreciated to have some sort of report and an opportunity to discuss DNAs.

David Brown informed the group, nationally it's hovering about 7.5% at the moment. The cost nationally is about a billion a year, unsure on the South, but it's still a significant amount and it's worth looking at in a little bit more detail.

Greg Smith wanted to pick up the point made about patient facing groups and mentioned his involvement with the Shawbirch Patient Participation Group (PPG) which had focused on DNAs and if you make it an issue, how effective it was in reducing the DNAs There is a role for the patient groups to do something about this, which it was agreed needs to be coordinated through the ICB.

Nigel Lee asked colleagues from the Clinical Support Services division to provide an update on where we are with DNAs in order to seek to understand and make sure communications are both timely and efficient. The point about linking more locally is also potentially. linked with various different health inequalities and other challenges across our population, so we need to make sure that we're making it as easy as for people to be able to take up their appointments.

#### 2023/50 Any Other Business

David Brown Looking at the trust from the outside, there's actually a lot of other things that are involved in, in terms of communicating with staff and continual surveys. We also have something called People Pulse, which is actually a national driven staff survey, and it happens on a more regular basis, this gives much better feedback, so we don't rely on the once-a-year staff survey.

#### 2023/51 Dates for the Forum for 2024

Monday 15<sup>th</sup> January 2024 Monday 15<sup>th</sup> April Monday 15<sup>th</sup> July

Monday 14th October

# **PUBLIC ASSURANCE FORUM ACTION LOG**

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
			9th Octob	per 2023		
2023/42	09/10/2023	Cllr Joy Jones requested an update at the next meeting, on the new main entrance at RSH in relation to the HTP programme.	Cllr Joy Jones	15/01/2024		IN PROGRESS
	09/10/2023	Rachel Fitzhenry to circulate with every PAF meeting a list of acronyms to the group.	Rachel Fitzhenry	09/11/2024	Recommend to close.	CLOSED
2023/46	09/10/2023	Sarah Kerr asked if there was any public involvement that is needed from the veteran community, we would be more than happy to facilitate that and work with the group.  James was very appreciative and will be in contact with Sarah.	James Owen		Recommend to close.	CLOSED
2023/49	09/10/2023	Kate Ballinger to refer to Kate Manning at the Integrated Care Board (ICB) re oatients who DNA, as she is linking with the PPG groups and that information should come from them.	Kate Ballinger	15/01/2024		IN PROGRESS

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
			3rd July	y <b>202</b> 3		
2023/29		David Brown queried if there had been involvement from Telford & Wrekin Healthwatch, now called ECS who are running the contract. Hannah Morris to chase up engagement.	Iulia Clarke	09/10/2023	David Bell to represent. Rachel F to update ToR membership	CLOSED
2023/37	03/07/2023	Julia Clarke to circulate slides to the Forum for representatives to take questions back to their groups. Teams to email Claire Dunne with views and comments on how this should progress in a way that is more meaningful.	Forum	09/10/2023	Email issued with slides 31/08/2023	CLOSED
2023/39		David Brown and Cllr Joy Jones to look at condensing the next PAF Agenda to minimise length of meeting, as it was noted the meeting is possibly too long with a lot of information to take in.	David Brown / Cllr Joy Jones	09/10/2023	Divisional updates now in information pack to condense discussion	CLOSED

# **CLOSED ACTIONS**

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
			3rd Apri	il 2023		
2023/15	03/04/2023	Julia Clarke / Rachel Fitzhenry to update and circulate Terms of Reference to Forum Members for virtual comment and bring back to the July meeting for final sign off.	Julia/Rachel		Recommend to close	CLOSED
2023/17	03/04/2023	Graham Shepherd requested details of when the HTP Radio interviews will be broadcast. As people who ring in and ask questions are not actively involved.	Jennifer Fullard			CLOSED
2023/18	03/04/2023	Julia Clarke and Jennifer Fullard to discuss contacting the Shropshire Star to cover the mobile breast screening success story.	Julia/Jennifer		Recommend to close	CLOSED
2023/19	03/04/2023	Julia Clarke asked Rachel Cox to send the link on the Complaints Survey to Hannah Morris/Kate Ballinger who would be happy to share in the Public Participation monthly update to 3500 community members to be included in the section, 'Partners News and Updates'.	Rachel Cox/Kate			CLOSED
2023/20	03/04/2023	Kate Ballinger to put Annmarie Lawrence in touch with new connections who are less often included within the communities in Telford & Wrekin who are representative of bigger communities of the county to bring women into the hospital to have a look at refurbishing the parent's rooms and to talk about their religious needs.	Kate		Specific T&F group in progress to look at inclusion of BME communities, also includes Hannah Morris, Kim Williams, Helena Hermelin, and Ashia Miah.  Recommend to close	CLOSED
2023/21	03/04/2023	Kate Ballinger to discuss with James Owen a menu or a form to specify the people who are doing the service improvement or any other particular service.	Kate		James Owen invited back to October PAF to update on progress. Recommend to close	CLOSED

	24th January 2022						
2022/06	24/01/2022	Forum members were asked to ask the above questions to their members and feedback to Shirley-Ann and confirmed that the Stakeholder Group will help inform what is important to the patients.	Mamahana	17/02/2022	Strategy now finalised and presented to Board	CLOSED	
		It was agreed that the Strategy needed to clearly articulate how the Trust is working with external organisations in order to demonstrate an open and transparent approach in involving patients in the scrutiny of services. Shirley-Ann to arrange further discussion with Lynn Cawley.	Shirley-Ann/Lynn	28/02/2022	Strategy now finalised and presented to Board	CLOSED	

			9th Janua	ary 2023		
2023/09	09/01/2023	Julia Clarke to email David Brown with any key issues that will need raising at the next Trust Board.	Julia Clarke	31/01/2023	Email sent	CLOSED
				2222		
			9th Janua	ary 2023		
2023/01	09/01/2023	Nominations for co-Chair to be sent to Julia Clarke from public members.	Members	03/04/2023		CLOSED
2023/06	09/01/2023	Julia Clarke to discuss public involvement with Rhia Boyode.	Julia Clarke	03/04/2023	James Owen will attend the meetings.	CLOSED
2023/07	09/01/2023	Julia Clarke asked Sally Hodson to ask Lisa Challinor to focus on updating on sections 2 & 3 (involvement and engagement) at the next meeting.	Lisa Challinor	03/04/2023		CLOSED
2023/07	09/01/2023	Julia Clarke asked Kate Ballinger to send the revised Public Participation website links out to the Public Assurance Forum members for comments before launch.	Kate Ballinger	10/02/2023		IN PROGRESS
2023/16	03/04/2023	David Brown to contact Cllr Joy Jones to discuss taking forward the role of Co-Chair.	David Brown			CLOSED



# **Public Assurance Forum – 9 January 2024**

Agenda item	Paper 3			
Report	Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 3 2023/24			
Executive Lead	Julia Clarke, Director of Public Pa	articip	ation	
Report Author	Hannah Morris, Head of Public P	articip	pation	
	Link to strategic pillar: Link to CQC dom		ain:	
	Our patients and community	V	Safe	
	Our people		Effective	
	Our service delivery		Caring	
	Our partners		Responsive	
	Our governance		Well Led	
	Report recommendations: Link to BAF / risk:			
	For assurance BAF 9			
	For decision / approval		Link to risk regist	er:
	For review / discussion			
	For noting			
	For information			
	For consent			
Presented to:				
Dependent upon (if applicable):	- N/A			
Executive summary:	This paper gives an update on the community engagement activities of the Public Participation Team in relation to the Hospitals Transformation Programme over the past quarter. As part of our statutory duties (under Section 242 of the Health and Social Care Act) and our ongoing commitment to engage and involve our local communities and patients, we have developed a range of regular events to support public engagement with the Hospitals Transformation Programme.  This paper outlines the engagement activities we have undertaken over the past month, any feedback and actions we have taken, as well as a forward plan for January-March 2024.			
Appendices	Appendix 1: Action Logs from Quarter 3 Focus Groups Appendix 2: Forward schedule of events			

#### 1.0 HTP Community Engagement Report (Quarter 3)

Plans to transform our hospital services in Shropshire, Telford & Wrekin and mid-Wales are now well underway. As part of our statutory duties (under Section 242 of the Health and Social Care Act) and our ongoing commitment to engage and involve our local communities and patients, we have developed a range of regular events to support public engagement with the Hospitals Transformation Programme. This report has been prepared to inform the Public Assurance Forum of the engagement activity in the Quarter 3 2023/24.

### 2.0 Engagement Approach and engagement activities for Quarter 3 2023/24.

Since January 2023, SaTH has developed existing and new methods to inform and engage with the public around HTP, this includes:

- Public Focus Groups
- About Health Events
- Public Assurance Forum (PAF)
- Attending external meetings and events
- Community Cascade
- Community and Organisational Membership
- Involvement in 1:50 design meetings

Table 1 of the paper outlines community engagement activities which took place in Quarter 3 2023/24 in relation the Hospitals Transformation Programme. External community events attended by SaTH in relation to HTP are also highlighted in the table.

Date	Event	Attendees	Outcome
3 October	Meeting with Welshpool carer's group	Welshpool Carers group	Signed up 13 members for HTP LD&A Focus Group
4 October	Volunteer Focus Group – HTP update	12 Volunteers	Update on HTP given. Positive meeting, agreed to provide another update in 6 months
4 October	Shared Lives Carers (Telford)	30 Carers	Positive meeting. Issues focused on PRH car parking -advised of upcoming focus group
9 October	Public Assurance Forum		Update on HTP given, including Q2 Engagement report. Presentation published on website and minutes will be published once approved: Public Assurance Forum - SaTH
11 October	Oswestry Town Council Meeting	5 attendees	Positive outcome, well received presentation, councillors willing to support and help with messaging
11 October	Community Cascade am & pm slot	5 attendees	Overview of the latest information from the Trust including the latest update from HTP

Date	Event	Attendees	Outcome
13 October	Llais "Scene setting session"	Attended by over 12 members of Llais.	Gave October's Community Cascade and HTP update – really positively received.
17 October	Ercall Magna Council Meeting (Waters Upton councillors also invited)	15 Councillors from different Parishes in T&W	Very supportive and keen to see HTP move forward & will direct enquiries to SaTH website
19 October	A life Outside of Caring	Former Carers	Short brief on HTP, and provided a request for HTP meeting attendance form
26 October	Home Instead Wellbeing Event and networking breakfast	13 people attended	Discussions around HTP and potential invitation to Partners in Care AGM next year
2 November	Young People's Academy	28 people attended	Presentation on HTP provided to the young people
7 November	About Health Event – HTP Update with HTP team	28 people attended	Presentation by the HTP team followed by a Q&A session. Recording of event is published on website: Hospitals Transformation Programme 'About Health' Events - SaTH
8 November	Market Drayton Patient Participation Group	15 people attended	Positive feedback about the HTP Travel and Transport focus group (attended by the Chair of the MD PPG) – issues around transport and car parking at the hospital mentioned
8 November	Community Cascade am slot	6 people attended	Overview of the latest information from the Trust including the latest update from HTP
14 November	Telford Mental Health Forum	20 people attended	Discussed HTP and the forthcoming LD&A focus group as well as the Mental Health focus group being planned – this was well received
14 November	HTP Learning Disability and Autism Focus Group	33 people attended	Very well attended by wide range of individuals/organisations, and a wide-ranging discussion and feedback on design plans and positive feedback following meeting. For Q&A please see follow the link below:  Hospitals Transformation Programme Focus Groups - SaTH
16 November	Maternity Voices Partnership HTP Briefing	14 people attended	Robust discussion with many questions and provided a great deal of feedback and useful suggestions.
17 November	Travel and Transport HTP Focus Group	16 people attended	Questions on parking at PRH, issues accessing site on foot. Q&A and action log have been produced. For Q&A please see follow the link below:Hospitals Transformation Programme Focus Groups - SaTH All focus group action logs can be found in appendix 1

20 November	PODS Telford HTP briefing	10 carers	Issues raised around patient and carer experience. Positive conversations around HTP and encouraged to join the main W&C Focus Groups.
23 November	People's Academy	3 people attended	Presentation on HTP provided to group
27, 29, 4November	Armed Forces Veteran events at Dawley and Shawbury	Various 50+ people	Promoted HTP focus group, request to attend a future meeting
4 December	Telford LGBTQIA	Various	Positive meeting and members encouraged to attend HTP focus groups
5 December	MEC & SAC Focus group	10 people attended	10 members from across region sharing feedback and expressing support for project. Strong attendance from divisions with useful input. For Q&A please see follow the link below:Hospitals Transformation Programme Focus Groups - SaTH All focus group action logs can be found in appendix 1
21 November & 6 December	3 x Community Connector Meetings (North, Southwest Shropshire &Southeast Shropshire)	Various	Promoted involvement in the HTP focus groups and About Health Events to get involved with the programme
7 December	Women's & Children's Focus Group	6 people attended	Discussion included changes made in plans via feedback already received and looked ahead to further steps in design process. For Q&A please see follow the link below: Hospitals Transformation Programme Focus Groups - SaTH All focus group action logs can be found in appendix 1
7 December	T&W Councillors Drop-in session	Various	Provided an update to T&W Councillors on HTP. Clinician's attended to respond to any queries around the clinical model
12 December	Welshpool, Montgomery & Llanfair Locality Network	25 people attended	Brief update on how to get involved with HTP
13 December	Newtown HTP drop-in session	15 people attended	Discussions with Public Health about future community engagement very positive. Finalising details in January 2024. Request for HTP presentation at Welshpool Community Haven in March '24

## 3.0 Summary of feedback received from the public

A summary of feedback received from the public and the actions relating to this is highlighted below:

You Said	We Did
Focus Groups:  • Focus group members requested the option to	From September we have held hybrid focus groups with the option to attend in person or via
attend the meeting in person.	MS Teams

Consider one main entrance for the new build at RSH, due to the high level of footfall through the entrance to the building	Following feedback AHR have redesigned the front entrance at to the new build – there will now be an entrance for Emergency care and another for the rest of the building.
Feedback providing a communal/open area for post-natal/ante-natal families where they can have a cup of tea or chat because it can be quite isolating if in hospital	AHR will look to see what can be achieved in the communal space within the maternity IP floor.
<ul> <li>For families and carers to be involved with the development of HTP, specifically around the care of children and young people with Learning Difficulties</li> </ul>	<ul> <li>A focus group on Learning Disabilities and Autism was held 14<sup>th</sup> November 2023. We also held sessions with PODS and Shared Lives.</li> </ul>
<ul> <li>Following our focus group on Learning Disabilities and Autism, a number of issues were raised around patient's experience at SaTH</li> </ul>	Ruth Smith (Lead for Patient Experience) to develop a Learning Disabilities and Autism Patient Experience Group to develop processes and support for people with LD and autism, including developing wayfinding videos
<ul> <li>Consider symbols (and not just words) for wayfinding around the new build?</li> </ul>	We are linking with the Makaton Society to get their input for symbols we can use as part of our wayfinding around the new build.
Incorporate those with neurodiverse needs into design e.g. quiet areas, low lighting etc	The Trust is looking at developing retreat areas within the new build which could provide quieter/low level lighting areas. We are looking at having a sensory map which will be able to highlight the different areas.
<ul> <li>Ensure that the designs of the new build are dementia friendly</li> </ul>	Gareth Banks (Lead Architect) to review the design guidelines for Dementia patients.
Consider introducing free parking for community transport as it is often a difficult issue to manage?	Links have been provided to communities' groups with our car parking team (within facilities) to action community vehicles being registered at our hospitals.
<ul> <li>Following the RSH Travel and Transport focus group, arrange a focus group looking at Travel and Transport at PRH?</li> </ul>	A Travel and Transport group focusing on PRH was held on the 17 November

#### 4.0 Forward Look

A forward plan of current known engagement activity relating to the Hospitals Transformation Programme with HTP team attendance as well as Public Participation team for August and September is outlined below. There are many other events that the Public Participation team are attending alone (see Appendix 2)

Date	Event	Required attendees
15 January	Public Assurance Forum (PAF)	PAF Members, Public Participation, HTP
		(Rachel Webster, Tom Jones)

18 January	Wrekin Area Committee (Shropshire Association of Local Councils)	Public Participation, HTP
30 January	About Health – HTP Update	Public Participation, HTP
15 February	Young People's Academy	Public Participation, HTP
5 March	W&C Focus Group	Public Participation, HTP, AHR, Art in Site, W&C
8 March	MEC & SAC	Public Participation, HTP, AHR, Art in Site, MEC & SAC
14 March	People's Academy	Public Participation, HTP
TBC	Montgomery Town Hall market day drop-in	Public Participation, HTP
TBC	NSRAF (veteran association)	Public Participation, HTP
TBC	Mental Health Focus Group	Public Participation, HTP
TBC	Dementia Focus Group	Public Participation, HTP
TBC	Children & Young People	Public Participation, HTP

### 6.0 Risks and actions

Risk	Action	Timescales
1. Fail to engage our communities around the Hospitals Transformation Programme, resulting in lack of confidence within our communities	An on going calendar of events to support public engagement in the HTP. Regular report to the HTP programme Board relating to engagement activity and any feedback and actions needing to be taken for	On going
2. Fail to deliver statutory duties (s242) to engage with the public	Continue to support our HTP team to ensure they meet their Statutory Duties.	Ongoing
Staff not having the skills or confidence to engage with our communities	The Public Participation Team are providing support to the HTP team to engage and involve our local communities and their representatives within the Programme.	Ongoing

#### 7. Recommendations

The Public Assurance Forum is asked to:

**NOTE** the current public engagement activity in relation to the Hospitals Transformation Programme in Quarter 3 2023/24 including:

- the engagement which has taken place during Quarter 3
- feedback received from our local communities and any actions taken as a result of the feedback
- The engagement activities planned for Quarter 4

Julia Clarke **Director of Public Participation**January 2024

# <u>Hospitals Transformation Programme Engagement Report from Public Participation</u> <u>Team (Community Engagement) – Quarter 3 2023/24</u>

#### 1. INTRODUCTION

Plans to transform our hospital services in Shropshire, Telford & Wrekin and mid-Wales are now well underway. As part of our statutory duties (under Section 242 of the Health and Social Care Act) and our ongoing commitment to engage and involve our local communities and patients, we have developed a range of regular events to support public engagement with the Hospitals Transformation Programme. This report has been prepared to inform the HTP Programme Board of the engagement activity in the previous quarter (October-December 2023).

As outlined in the Hospitals Transformation Programme Communications and Involvement Plan the key objectives to involving the public are:

- To build public and internal awareness of HTP, encouraging key stakeholders and staff to become ambassadors for change.
- To communicate the clinical voice and clinical need for change and how this will improve the safety and sustainability of our services across Shropshire, Telford and Wrekin and Powys
- To deliver our statutory duties and continue to engage service users and carers, interested groups, partners and staff in the design of future services to inform the Outline Business Case
- To ensure the lived experience of patients and staff are used to inform the programme by using inclusive, representative, and accessible involvement approaches.
- To work across the local health and care system to support the development of relationships and to support partners in communicating the changes that are happening and the benefits this will bring to all communities.
- To ensure communications are consistent, timely, responsive, accessible, and proactive.

Whilst SaTH is leading on the HTP communication and engagement, the objectives are supported by our partners across the sector.

#### 2. ENGAGEMENT APPROACH

Since January 2023, SaTH has developed existing and new methods to inform and engage with the public around HTP, this includes:

- **Public Focus Groups** Focus groups are held quarterly and are aligned to the clinical workstreams within the HTP programme:
  - o Medicine, emergency, surgery, anaesthetics, and cancer focus group
  - Clinical Support Services
  - Women's and Children's
  - Bespoke focus groups on specific issues e.g. RSH planning application,
     Travel and Transport

- **About Health Events** Held via MS Teams live these are quarterly events which are accessible to members of the public and staff.
- Public Assurance Forum (PAF) PAF receives a quarterly update from the HTP.
  PAF is an advisory group who bring a public and community perspective to, and
  scrutiny of processes, decision making and wider work at SaTH. The Forum meets
  quarterly, and all external members represent community organisations across our
  catchment areas and are able to identify and help us link with our wider communities.
- Attending community meetings Through our links with community organisations we offer to attend their meetings to provide an update on the HTP. This includes Parish Councils and other organisations who serve local communities.
- Community Events The Public Participation Team regularly attend external events
  to link with our local communities, this includes seldom-heard groups and
  communities. Providing information on the Hospitals Transformation Programme is
  also important, currently a leaflet and feedback card are being developed by the
  communications teams.
- Community and organisational membership SaTH have over 4100 community members and 360 organisational members, who receive a regular email newsletter update (#GetInvolved) from SaTH, which includes information on HTP and ways to get involved with the programme e.g. focus groups and About Health Events
- Community Cascade Community Cascade is held twice monthly and provides an update to our local communities on news at SaTH (including a regular update on HTP)
- 1:50 Clinical Design Groups PAF and PACE public representatives have been allocated to each of the Clinical design 1:50 meetings with the Clinical teams and architects and are being inducted as the workstreams conclude the clinical elements.

#### 3. ENGAGEMENT ACTIVITY IN QUARTER 3 2023/24

Engagement activity relating to the Hospitals Transformation Programme in Quarter 3 is outlined below:

Date	Event	Attendees	Outcome
3 October	Meeting with Welshpool	Welshpool Carers	Signed up 13 members for HTP
	carer's group	group	LD&A Focus Group
4 October	Volunteer Focus Group – HTP update	12 Volunteers	Update on HTP given. Positive meeting, agreed to provide another update in 6 months
4 October	Shared Lives Carers (Telford)	30 Carers	Positive meeting. Issues focused on PRH car parking -advised of upcoming focus group

Date	Event	Attendees	Outcome
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11 October	Community Cascade am & pm slot	5 attendees	Overview of the latest information from the Trust including the latest update from HTP
13 October	Llais "Scene setting session"	Attended by over 12 members of Llais.	Gave October's Community Cascade and HTP update – really positively received.
17 October	Ercall Magna Council Meeting (Waters Upton councillors also invited)	15 Councillors from different Parishes in T&W	Very supportive and keen to see HTP move forward & will direct enquiries to SaTH website
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26 October	Home Instead Wellbeing Event and networking breakfast	13 people attended	Discussions around HTP and potential invitation to Partners in Care AGM next year
2 November	Young People's Academy	28 people attended	Presentation on HTP provided to the young people
7 November	About Health Event – HTP Update with HTP team	28 people attended	Presentation by the HTP team followed by a Q&A session. Recording of event is published on website: Hospitals Transformation Programme 'About Health' Events - SaTH
8 November	Market Drayton Patient Participation Group	15 people attended	Positive feedback about the HTP Travel and Transport focus group (attended by the Chair of the MD PPG) – issues around transport and car parking at the hospital mentioned
8 November	Community Cascade am slot	6 people attended	Overview of the latest information from the Trust including the latest update from HTP
14 November	Telford Mental Health Forum	20 people attended	Discussed HTP and the forthcoming LD&A focus group as well as the Mental Health focus group being planned – this was well received

14 November	HTP Learning Disability and Autism	33 people attended	Very well attended by wide range of
	Focus Group	23 pospio attoridos	individuals/organisations, and a
	·		wide-ranging discussion and feedback
			on design plans and positive feedback
			following meeting. For Q&A please see
			follow the link below:
			Hospitals Transformation Programme
			Focus Groups - SaTH
16 November	Maternity Voices Partnership HTP	14 people attended	Robust discussion with many questions
	Briefing		and provided a great deal of feedback
			and useful suggestions.
17 November	Travel and Transport HTP Focus	16 people attended	Questions on parking at PRH, issues
	Group		accessing site on foot. Q&A and action
			log have been produced. For Q&A
			please see follow the link
			below: Hospitals Transformation
			Programme Focus Groups - SaTH
			All focus group action logs can be
			found in appendix 1
20 November	PODS Telford HTP briefing	10 carers	Issues raised around patient and carer
			experience. Positive conversations
			around HTP and encouraged to join the main W&C Focus Groups.
			·
23 November	People's Academy	3 people attended	Presentation on HTP provided to group
27, 29,	Armed Forces Veteran events at	Various 50+ people	Promoted HTP focus group, request to
4November	Dawley and Shawbury		attend a future meeting
4 December	Telford LGBTQIA	Various	Positive meeting and members
			encouraged to attend HTP focus
			groups
5 December	MEC & SAC Focus group	10 people attended	10 members from across region
			sharing feedback and expressing
			support for project. Strong attendance
			from divisions with useful input. For
			Q&A please see follow the link
			below: <u>Hospitals Transformation</u>
			Programme Focus Groups - SaTH All
			focus group action logs can be found in
21 November	2 v Community Connector Mastings	Various	appendix 1 Promoted involvement in the HTP
& 6 December	3 x Community Connector Meetings (North, Southwest Shropshire	various	focus groups and About Health Events
& 6 December	&Southeast Shropshire)		to get involved with the programme
	, ,		, ,
7 December	Women's & Children's Focus Group	6 people attended	Discussion included changes made in
			plans via feedback already received
			and looked ahead to further steps in
			design process. For Q&A please see
			follow the link below: Hospitals
			Transformation Programme Focus
			Groups - SaTH All focus group action
7 Docomber	TSW Councillors Drop in acceion	Various	logs can be found in appendix 1
7 December	T&W Councillors Drop-in session	Various	Provided an update to T&W Councillors on HTP. Clinician's attended to
I .			respond to any queries around the
			clinical model

12 December	Welshpool, Montgomery & Llanfair Locality Network	25 people attended	Brief update on how to get involved with HTP
13 December	Newtown HTP drop-in session	15 people attended	Discussions with Public Health about future community engagement very positive. Finalising details in January 2024. Request for HTP presentation at Welshpool Community Haven in March '24

#### 3. SUMMARY OF FEEDBACK RECEIVED AND ACTIONS TO DATE

From the event's we organise and from those we attend in relation to the hospitals Transformation Programme we receive feedback, suggestions, and questions from our communities. For every public focus group we produce a questions and answers sheet and action log. This information is available on our website: <a href="Hospitals Transformation">Hospitals Transformation</a> Programme Focus Groups - SaTH

Feedback from our communities about the Hospitals Transformation Programme is important as the project moves forward in supporting us to develop two thriving hospitals for our local communities. Appendix 2 is a diagram which outlines the Divisions/department that actions from our focus group action logs have been assigned to this Quarter, including the actions which are outside the remit of the Hospitals Transformation Programme:

#### Focus Group Actions Oct - Dec 2023 **HTP Programme Board** Quarterly Quarterly MEC & SAC Focus Women and Children's Group 05/12/2023 Maternity & Neonatal Autism & Learning **Patient Experience** Voices Partnership Disability Focus Group Austism & Learning Focus Group Disability Group 16/11/2023 Estates Travel & Transport Travel Plan Group Focus Group RSH 28/09/2023 Spring 2024 PRH 17/11/2023 Wider Actions **HTP Actions**

Following the feedback from our communities the table below outlines what we have done as a result of the feedback we have received:

You Said	We Did
<ul> <li>Focus Groups:</li> <li>Focus group members requested the option to attend the meeting in person.</li> </ul>	<ul> <li>From September we have held hybrid focus groups with the option to attend in person or via MS Teams</li> </ul>
Consider one main entrance for the new build at RSH, due to the high level of footfall through the entrance to the building	<ul> <li>Following feedback AHR have redesigned the front entrance at to the new build – there will now be an entrance for Emergency care and another for the rest of the building.</li> </ul>
Feedback providing a communal/open area for post-natal/ante-natal families where they can have a cup of tea or chat because it can be quite isolating if in hospital	AHR will look to see what can be achieved in the communal space within the maternity IP floor.
<ul> <li>For families and carers to be involved with the development of HTP, specifically around the care of children and young people with Learning Difficulties</li> </ul>	<ul> <li>A focus group on Learning Disabilities and Autism was held 14<sup>th</sup> November 2023. We also held sessions with PODS and Shared Lives.</li> </ul>
Following our focus group on Learning     Disabilities and Autism, a number of issues     were raised around patient's experience at     SaTH	Ruth Smith (Lead for Patient Experience) to develop a Learning Disabilities and Autism Patient Experience Group to develop processes and support for people with LD and autism, including developing wayfinding videos
Consider symbols (and not just words) for wayfinding around the new build?	<ul> <li>We are linking with the Makaton Society to get their input for symbols we can use as part of our wayfinding around the new build.</li> </ul>
Incorporate those with neurodiverse needs into design e.g. quiet areas, low lighting etc	<ul> <li>The Trust is looking at developing retreat areas within the new build which could provide quieter/low level lighting areas. We are looking at having a sensory map which will be able to highlight the different areas.</li> </ul>
Ensure that the designs of the new build are dementia friendly	<ul> <li>Gareth Banks (Lead Architect) to review the design guidelines for Dementia patients.</li> </ul>
Consider introducing free parking for community transport as it is often a difficult issue to manage?	<ul> <li>Links have been provided to communities' groups with our car parking team (within facilities) to action community vehicles being registered at our hospitals.</li> </ul>
<ul> <li>Following the RSH Travel and Transport focus group, arrange a focus group looking at Travel and Transport at PRH?</li> </ul>	<ul> <li>A Travel and Transport group focusing on PRH was held on the 17 November</li> </ul>

#### 4. FORWARD LOOK

A forward look of current engagement Activity in Quarter 4 (January - March 2024) relating to the Hospitals Transformation Programme with HTP team involvement as well as Public Participation Team is outlined below in **Table 3.** A full list of all known activity including events attended only by Public Participation team is in Appendix 2

Date	Event	Required attendees
15 January	Public Assurance Forum (PAF)	PAF Members, Public Participation, HTP (Rachel Webster, Tom Jones)
18 January	Wrekin Area Committee (Shropshire Association of Local Councils)	Public Participation, HTP
30 January	About Health – HTP Update	Public Participation, HTP
15 February	Young People's Academy	Public Participation, HTP
5 March	W&C Focus Group	Public Participation, HTP, AHR, Art in Site, W&C
8 March	MEC & SAC	Public Participation, HTP, AHR, Art in Site, MEC & SAC
14 March	People's Academy	Public Participation, HTP
TBC	Montgomery Town Hall market day drop-in	Public Participation, HTP
TBC	NSRAF (veteran association)	Public Participation, HTP
TBC	Mental Health Focus Group	Public Participation, HTP
TBC	Dementia Focus Group	Public Participation, HTP
TBC	Children & Young People	Public Participation, HTP

#### 5. **RECOMMENDATIONS**

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 3
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 4

### 6. APPENDIX 1

The table below is of actions from this Quarter's focus groups, to view all actions, including those that have been closed please visit our website: <u>Hospitals Transformation Programme Focus Groups - SaTH</u>

#### ACTION LOG FROM LEARNING DISABILITY AND AUTISM FOCUS GROUP

DATE	ACTION	LEAD OFFICER	TIMESCALE	COMMENT	ACTION
14/11/2023	Ruth Smith to contact Thomas V (attendee) re autism bus.	Ruth Smith	30/11/2023	Shared 5th December 2023	COMPLETED
14/11/2023	Ruth Smith to develop a Autism & Learning Disabilities (ALD) Patient Experience Group to develop processes and support for people with LD and autism, including developing wayfinding videos.	Ruth Smith Kara Blackwell - Patient Experience team	31/03/2024	An Autism & learning Disabilities Groups will be set up in 2024 and a programme of work developed and will report through to the Trust's PACE group. It is also planned to appoint a SaTH ALD nurse in 2024 who will be invited to attend these meetings. Discussion will also take place with the ICB about establishing a system-wide group	IN PROGRESS
14/11/2023	To develop non-verbal ways of communicating with Trust staff for patients with Autism & Learning Disabilities the ALD Patient Experience Group as part of the Trust's patient experience work (not as part of HTP).	Ruth Smith Kara Blackwell - Patient Experience team	31/12/2024	A small working group has previously met to explore communication tools and support that can be made available in clinical areas to support people's needs, which involved a Leardning Disabilities Nurse and discussions around the use of Mkaton resources. This work will be included and led through the ALD Patient Experience Group programme	IN PROGRESS
14/11/2023	Design team to consider retreat/safe rooms in ED that could be multipurpose i.e., for patients with mental health issues and dysregulated patients who need calm environment.	Gareth Banks	Ongoing	AHR will look at this proposal with clinicians during the design process	IN PROGRESS

#### **ACTION LOG FROM MNVP FOCUS GROUP**

DATE	ACTION	LEAD OFFICER	TIMESCALE	COMMENT	ACTION
16/11/2023	Currently there is one bereavement suite in the new build plus the ability to flex a room to provide a second room if required. Could we get	Charlotte Robertshaw (Maternity Comms & Engagement)	Ongoing	There have been two occasions in the last 18 months in which a third bereavement room may have been required. Architects, clinical team, and patient	IN PROGRESS

	information on circumstances when there have been more than two bereavement events at the same time and if that occurs frequently, consider having a double bereavement suite and one other room as additional flexibility?	to obtain data.		representatives are reviewing the deign in 1:50 meetings, this might be incorporated in quieter areas of the department.	
16/11/2023	Wrekin ante-natal is at one end of PRH, the MLU at another end of the hospital, scanning in a separate part and then the delivery suite in the W&C Centre. When the Consultant service moves to RSH it is possible there may be 4 different locations (scanning is not in the RSH new build) so appointment directions will need to be very clear.	Charlotte Robertshaw (Maternity Comms & Engagement) with HTP team	Ongoing	In the new build at RSH, the MLU will be alongside the Consultant Led Unit. The location of the antenatal services, currently in Mytton Oak House, are not yet determined. As part of our Estates strategy, we will review clinical adjustments at PRH.	IN PROGRESS
16/11/2023	It was noted that in the new RSH build the footprint could not accommodate maternity inpatients and the neonatal unit on the same floor without a loss of beds. This means that at RSH mums needing ongoing medical care will be downstairs on the post-natal ward and they would need to go upstairs to see their baby in the neo-natal unit possibly in a wheel chair requiring extra help. Is there any option for the mother and baby to be on the same floor?	Tom Jones - HTP team and architects	n/a	There will be an increase of parenting rooms on the neonates' floor (from 3 to 8).	COMPLETED
16/11/2023	Consider feasibility and costs of installing a digital map/or touch screen showing how to get to a certain place within the hospital to be used at times when there is nobody on reception in the main entrance area. Possibly with a printout (this is available in other	Gareth Banks - AHR architects	Ongoing	This can be reviewed as part of the final design proposals over the coming months.	IN PROGRESS

	hospitals). Could consider charitable funds if costs not included in project.				
16/11/2023	Consider providing a communal/open area for post-natal/ante natal families where they can have a cup of tea or chat because it can be quite isolating if in hospital for a long time.	Gareth Banks - AHR (with clinical team)	Ongoing	AHR will look to see what can be achieved in the communal space within the maternity IP floor.	IN PROGRESS
16/11/2023	Can the ante-natal sessions be re-provided now and, in the future, (paused during Covid) so mothers can meet together and build relationships?	Charlotte Robertshaw with W&C Division	Ongoing	We have recommenced tours for expectant parents under our care and we are working on our antenatal package.	IN PROGRESS

## ACTION LOG FROM TRAVEL AND TRANSPORT (PRH) FOCUS GROUP

DATE	ACTION	LEAD OFFICER	TIMESCALE	COMMENT	ACTION
17/11/2023	SaTH Travel Plan Coordinator (TPC) / Estates team to investigate and if action required raise issues with the Local Authority and with Estates as part of the wider travel plan (ie not specific to HTP).	Travel Plan Coordinator /Estates	early 2024	Raise at first available Estates- led Travel Plan Liaison Group	IN PROGRESS
17/11/2023	Mathew Neal to ask colleagues in estates about whether there are any immediate plans for extra parking to be provided at PRH	Mattew Neal with Estates	30/11/2023	It has been confirmed that there are currently no plans for extra parking at PRH, although this will be kept under review. There should be an improvement when the main entrance construction offices etc are removed and with the opening of the CDC to reduce footfall at PRH	COMPLETED
17/11/2023	Ed Rysdale to discuss with surgery the planned arrangements for preop clinics and whether clinics will be provided on both sites	Ed Rysdale	30/11/2023	It has been confirmed that pre- op clinics will be provided on both sites	COMPLETED
17/11/2023	Ed Rysdale to raise the development of POPS clinics with colleagues in Surgery (working	Ed Rysdale	n/a	This is wider that HTP. It has been confirmed that as a service development the proposal would need to be	COMPLETED

	between the surgeons and the geriatricians)			considered clinically in the first instance. The division has a number of high-priority clinical areas of focus and development, and this development would need to be considered as part of our very clear process for any additional cases of need and would also involve our ICB colleagues as commissioners	
17/11/2023	TPC to consider a travel survey of patient / visitor transport mode of arrival at both the PRH and RSH hospital sites (as part of Travel Plan – issue wider than HTP).	Travel Plan Coordinator/ Estates	early 2024	Raise at first available Estates- led Travel Plan Liaison Group	IN PROGRESS

## DRAFT ACTION LOG FROM MEC & SAC ACTION LOG

DATE	ACTION	LEAD OFFICER	TIMESCALE	COMMENT	ACTION
05/12/2023	Invite groups representing the visually impaired to the next round of focus groups.	Kate Ballinger	31/01/24		IN PROGRESS
05/12/2023	AHR will agree signage with clinicians first and the circulate to focus group members to ensure the meaning is clear from the name.  Members can take back to their groups or organisation for their perspective so that we can end up with the most universally acceptable one.	Julia Clarke	31/01/24		IN PROGRESS
07/09/2023	Gareth Banks (Lead Architect) to review the design guidelines for Dementia patients.	Gareth Banks	30/11/2023	Guidelines reviewed and considered in future designs	COMPLETED
06/06/2023	Jenny Fullard/ Comms to develop flyers that simply update on latest developments for both sites and distribution and public events	Jenny Fullard	30/11/2023	8 page booklet now finalised and with HTP SRO for sign-off. Boards and posters in place on both sites.	IN PROGRESS

## DRAFT ACTION LOG FROM W&C'S ACTION LOG

DATE	ACTION	LEAD OFFICER	TIMESCALE	COMMENT	ACTION
07/12/2023	(JC) to email (CN) Dianne Lloyd (Acting Deputy Divisional Director of Operations – Clinical Support Services) details, Dianne can	Julia Clarke		Email sent to Dianne Lloyd 7/12/23 and Mandy Taylor (Acting Therapy Centre Manager) introduced to AHR (Chloe and Gareth)	COMPLETED

	liaise with all therapies - Occupational Therapists and include them within the focus groups.			
14/09/2023	The Trust will link with MNVP to arrange a focus group with service users that they link with to gain their feedback.	Hannah Morris	A meeting was held on 16 November 2023	COMPLETED

#### Appendix 2

DATE	EVENT	VENUE	TIME
15 January '24	Public Assurance Forum	MS Teams - live	1.00pm – 4.00pm
16 January	Volunteer Talk at Shrewsbury College	Shrewsbury College	15:10 – 16:10
18 January 2024	Wrekin Area Committee (Shropshire Association of Local Councils)	Zoom (TBC)	19:00-TBC
25 January	VTC Session 4 Career Support	Education Centre	1800
30 January 24	About Health – HTP Update	MS Teams	18:30 – 19:30
12 February	League of Friends – HTP Update	Hamar Centre meeting room	14:30
15 February	Young People's Academy	PRH Education Centre	09.00 – 16.30
22 February	About Health – Electronic Patient Records	MS Teams	18:30 – 19:30
5 March 2024	W&C Focus Group	SECC/MS Teams – Hybrid	10:00-12:00
8 March 2024	MEC & SAC Focus Group	SECC/MS Teams – Hybrid	10:00-12:00
14 March 2024	People's Academy	PRH	9:00-16:30



#### **Public Assurance Forum Member Update** Name of Organisation: Llais Name of Member: Jane Randall-Smith Date: Monday 15th January 2024 Time: 1.00-4.00pm **Location: Microsoft Teams** Key updates from member organisation Llais is working in the 13 localities in Powys and focussing its engagement activities in a particular locality for a month at a time. We worked in the Builth Wells & Llanwrtyd Wells area during the month of November. In November, we published our reports on our engagement in Welshpool and Montgomery Locality and also on the engagement we conducted over the summer. Links to these reports are below: https://www.llaiswales.org/news-and-reports/reports/llais-powys-report-what-weheard-welshpool-and-montgomery-locality https://www.llaiswales.org/news-and-reports/reports/llais-powys-summer-shows-2023 Our report on our engagement in Ystradgynlais locality will be published early in January. We joined the SATH HTP Team and North Powys Wellbeing Programme Team at the HTP public drop-in engagement session in Newtown on 13<sup>th</sup> December. Not many members of the public attended but those who did were able to have individual, detailed conversations about the transformation plans. We are attempting to get Llais representation at each of the HTP Focus Groups, either a staff or volunteer representative. 2. Any items for discussion at the Public Assurance Forum from member organisation None.



3.	Action update from previous meet	ting (if applicable)
Report	by:	Andrea Blayney, Deputy Regional Director
Date		3 <sup>rd</sup> January 2024



#### **Public Assurance Forum Member Update** Name of Organisation: SaTH PaCE Name of Member: Greg Smith Date: Monday 15th January 2024 Time: 1.00-4.00pm **Location: Microsoft Teams** 1. Key updates from member organisation PaCE is an internal group, of which I am the co-chair. Any items for discussion at the Public Assurance Forum from member 2. organisation Nothing formally to be referred 3. Action update from previous meeting (if applicable) Not applicable Report by: Greg Smith

**Date** 

28 December 2023



#### **Public Assurance Forum**

#### **Member Update**

Name of Organisation: Shropshire Patent Group

Name of Member: Graham Shepherd Date: Monday 15<sup>th</sup> January 2024

Time: 1.00-4.00pm

**Location: Microsoft Teams** 

#### 1. Key updates from member organisation

I represent PAF on the HTP Medicine, Emergency Care, Surgery, Anaesthetics, and Cancer Focus Groups. This activity has been the first for the public to be updated on the overall objectives of HTP allowing them to question the HTP team. However, within the time limit the enormity of the project left more questions unanswered than answered.

The follow up expanded the patient involvement, which was "face to face". I joined the ED 1:50 Clinical Design Group. The task of this group was to check the content/placement of all the equipment installed in all the rooms was exactly what the clinical staff required – looking for the "needle in the haystack"- although my contribution was limited the debate was informative and impressive. There was a broad selection of senior ED clinicians inputting.

I also attended all Cascades and About Health debated which covered HTP, all were informative. However, there was limited time which did not allow getting into detail, but members were willing to meet up outside of the meetings to discuss in the level of data which was pertinent. Julia arranged with the HTP team and a number of get together have taken place.

There are only four Medicine, Emergency Care and Surgery Focus Groups planed this year – a total of eight hours which does not enable much involvement as the programme accelerates.

2.	Any items for discussion at the Public Assurance Forum from member
	organisation

#### 3. Action update from previous meeting (if applicable)

Report by:	Graham Shepherd
Date	08/01/24



#### **Public Assurance Forum**

#### **Member Update**

Name of Organisation: Shropshire Patient Group

Name of Member: Marilyn Jones

Date: Monday 15<sup>th</sup> January 2024

Time: 1.00-4.00pm

**Location: Microsoft Teams** 

#### Key updates from member organisation

#### Open action points

• T&F groups to be set up in 2024.

- Earlier meetings have looked at communication tools.
- Others are yet to be decided on but? one to look at a navigation around the hospital video.
- I will join one looking at the sensory environment using insight gained from a current project at Redwoods.
- An LD&A nurse is to be appointed in 2024.
- Staff and designers seemed keen to recognise the validity of the public questions and seemed to have already considered some points, but more thinking probably required to implement suggestions appropriately.

All in all a very positive first step.

#### STW LD & A

In the last few months, the workstream has been reconfigured. There is determined input from almost all participants – Shropshire LA's attendance has been poor but is improving. There is no buy-in from either of Telford Autism Hubs.

**S75 Funding Group** – is tracking the projects funded into the voluntary sector more locally and assessing new applications.

Can only report as below because of my personal involvement. Others largely CYP (not my area): a) The "Passport that is not a Passport" (because a passport is something you need to go on holiday!) project facilitated by Shropshire Autism Hub. Has attracted national interest for innovation. It is aimed at:

- Supporting the 800+ adults on Shropshire's adult autism assessment waiting list to create a modular person-centred document outlining their strengths and challenges focusing on specific places e.g. DWP, hospital, university. Very different to hospital passport (excellent feedback)
- 2. Improving the pre-assessment triage process to support Cheshire & Wirral Partnership who provide the assessment service & sorting out the historical mess created by Shropshire CCG MH commissioners (not Frances Sutherland who was excellent)
- b) I have been project managing a Sensory Improvement project on the acute wards at The Redwoods on behalf of NHSE LD & A Midlands Region workstream. Hugely successful. The ICB Comms team will be making a video to showcase it. Hope to use learning with SaTH LD&A Group LD & A Operational Planning Group was the board. Checks progress of all elements against the 3-year roadmap which is approaching its end. Review meeting in Feb.

The lived experience members of both groups are dedicated and well-informed.

<u>LeDeR</u> – (NHSE initiative - Learning from the **De**aths **R**eview of individuals with a Learning Disability and/or Autism) by looking at life history, support and decisions made while alive to note where improvements could be made and good practice examples.



<u>LeDeR Governance Panel</u> meets monthly and reviews the case manager's report for each person. <u>LeDeR Steering Group</u> has been meeting monthly, but frequency may increase to resolve some issues with Action Points not being completed in a timely manner. The group checks progress on the platform and any matters that require escalation.

A "One Minute Brief" just inaugurated for wider circulation. This will be a regular update. The lived experience panel/group members clearly hold all others to account and are listened to.

#### **Community Mental Health Transformation**

Now in Year 3. Driven by MPFT as the MH service provider, a huge amount of internal reorganisation and recruitment of MH staff into PCNs and GP practices. PPI always been very poor and fallen away — usually only me and sometimes not even that. Earlier this year NHSE required a reset as progress not clear as it should have been. Personally, often felt the approach was oversystematised paying little heed to people (staff, service users, carers or volunteer attendees) and the involvement aspect tokenistic.

Appointment numbers seem good. New psychology groups being set up.

Agenda items for 2/1/24 - Perinatal update, '111 option 2' update, Eating Disorder Engagement Event feedback, VCSE grant scheme update, Financial Wellbeing and Housing Contracts, Key Priorities/ agree objectives ahead of next meeting, Escalations/Good news stories for Steering Group. (Couldn't summon up interest to attend)

Next meeting and focus Tuesday 6th February – Roadmap, VCSE/LA update, Mental Health Care Planning Forum update, Tailored offer for younger/ older adults, SMI/Physical Health update, Feedback on the PFA Navigator project. (May attend if I get the link).

2.	Any items for discussion at the Pu organisation	ıblic Assurance Forum from member
3.	Action update from previous meet	ing (if applicable)
Report	bv:	Marilyn Jones
Date	- /	08/01/24



#### **Public Assurance Forum**

#### **Member Update**

Name of Organisation: Shropshire Patient Group

Name of Member: Julian Birch Date: Monday 15<sup>th</sup> January 2024

Time: 1.00- 4.00pm

**Location: Microsoft Teams** 

#### 1. Key updates from member organisation

- 1. HTP Outpatient Reference Group it meets online once a mouth to discuss reduction in OP waiting list and the introduction of the national initiative to increase Patient Initiated Follow up, remote consultations and Advice and Guidance. I do feel my opinion is listened to especially in how to 'sell' these services to patients, and how to assess patient satisfaction with the changes. I feel the Group does not run as efficiently as it could because of a very large number of participants many of which do not attend even if the addenda needs their input. The new Chairperson for the Group is at present trying to rationalise who attends which is good
- 2. Shropshire Integrated Place Partnership. (ShiPP) I share attendance with Sylvia Pledger. Various Health Strategies and initiative are discussed, many longer term and applying across the whole gamete of health related matter in the county. Interesting but I do not feel in a position to contribute much. We are there because the rules say they need a patient.
- 3. HTP focus groups I have been to the Medicine, Emergency Care and surgery Group, the Clinical Support Services Group, and the Transport and parking Group. All appeared to be ways of imparting information to the public rather than true involvement and were very poorly attended. There was time for discussion but the only time this was possibly productive was in the Transport and Parking Group. I think SATH is genuinely trying to involve patients, but the public do not seem to be that interested and most plana are all ready in place before the public is involved
- 4. I have also attended a couple of Online Health Events and several monthly Cascades. The former were well done but poorly attended. The latter tries to give positive picture of SATH's activities but does not mention the ongoing concerns such as Accident and Emergency waits SATH's workforce problems, staff morale, the huge Agency staff bill, number of complaints or PALS contacts, to mention but a few. The attendance at these events must be very depressing for the staff involve in putting them on.
- 5. SATH AGM. This was a good opportunity to talk to the Board Members and senior SATH Staff. It gave me a distinct impression that some of those present did not seem to know much of what went on at the hospital 'coalface'.



2.	Any items for discussion at the organisation	e Public Assurance Forum from member
3.	Action update from previous n	neeting (if applicable)
Report	t by:	Julian Birch (Chairman of SPG)
Date		08/01/24







# Getting to Good

Public Assurance Forum 15<sup>th</sup> January 2024

Mary Aubrey – G2G Programme Director
Matt Mellors – Head of PMO

Getting
GOOD



# **Getting to Good: Phase 3**

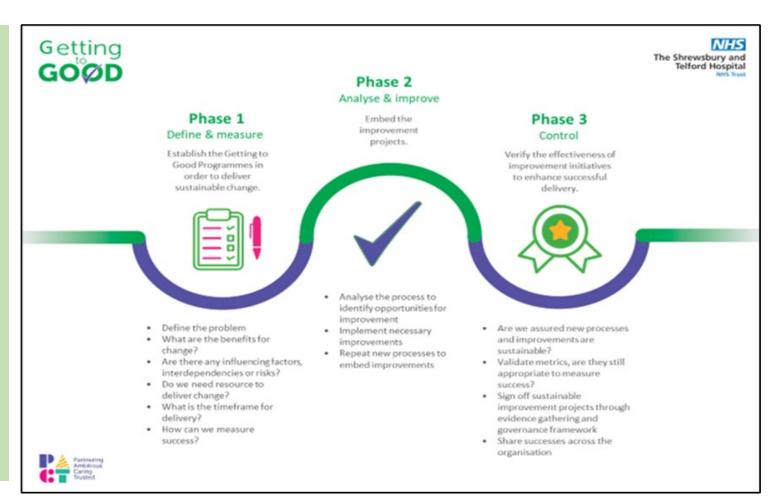


246 milestones were delivered in the first two years of the G2G Programme, with 79 currently remaining.

G2G has now fully adopted a revised RAG rating and assurance processes in line with Maternity and Emergency Care Transformation and those remaining milestones will be delivered under that methodology.

A monthly ODG Assurance meeting has been established where milestones are submitted for approval to turn Amber - "delivered not yet evidenced" or Green – "evidenced and assured". Any milestone not meeting its delivery date is subject to exception reporting.

All evidence and exception reports are subject to executive approval prior to coming to the ODG Assurance meeting.





# **Getting to Good: Project Progress Status**



Theatre	Performance &	Communications	Maternity
Productivity	Business	& Engagement	Transformation
	Intelligence		
Outpatient	Diagnostics	Levelling Up	Flow
Transformation	Recovery	Clinical Standards	Improvement
Medical Staffing	Digital	Recruitment &	Quality and
	Infrastructure	Retention	Regulatory
			Compliance
Delivery of the	Expansion of	Culture &	Equality,
Quality Strategy	Medical	Behaviours	Diversity &
	Examiners Office		Inclusion

- Three projects are off track and rated Red
- Thirteen projects are at risk and rated Amber.
- Nine projects are on track and are rated Green.

Progress status for Theatre Productivity; Outpatient Transformation and Medical Staffing projects all remain off track and RAG rated Red in the period. Work is ongoing to development new project plans for these areas.

Both Expansion of MEO and the Culture and Behaviours have moved from Green to Amber in the period, due to delays in the delivery of the remaining milestones.



# **Getting to Good: Project Performance Trend**



Programme	Name	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23
Corporate Governance	Communications & Engagement												
	Risk Management												
Digital Transformation	Digital Infrastructure												
Elective Recovery	Cancer Performance												
	Diagnostics Recovery												
	Outpatient Transform ation												
	Theatre Productivity												
	Performance & BI												
Maternity Transform ation	Maternity Transformation												
Quality & Safety	Expansion of Medical Examiners Office												
	Delivery of the Quality Strategy												
	Fundamentals in Care												
	Learning from Deaths												
	Levelling-up Clinical Standards												
	Quality & Regulatory Compliance												
	Quality Governance												
Urgent Care Improvement Programme	Flow Improvement Programme												
	Emergency Care Transformation												
Workforce Transformation	Culture and Behaviours												
	Equality, Diversity & Inclusion												
	Medical Staffing												
	Future Workforce Design												
	Leadership Development Framework												
	Recruitment & Retention												
	Training and Education												



# **Getting to Good: Milestone Performance**

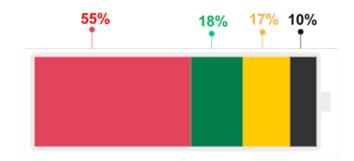


**Delivery and Progress** 



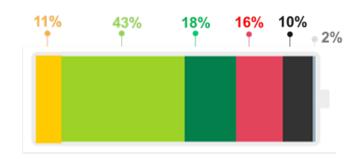
The overall delivery and progress status of the remaining 79 milestones within the overall G2G programme is shown here.

#### **Overall Delivery Status**



- 55% Not yet delivered
- 17% Delivered not yet evidenced
- 18% Evidenced and assured
- · 10% Closed

#### **Overall Progress Status**



- 16% Off Track
- 11% At Risk
- 43% OnTrack
- 18% Complete
- 10% Closed
- 2% Not Started





# **Getting to Good: Programme Highlights**



- <u>Emergency Care Transformation</u> The Improvewell team visited both Emergency Departments to promote engagement with the platform. Approximately 60 new members of staff signed up to the platform and submitted 20 new ideas for improvement to the department and patient care were submitted for consideration.
- <u>Diagnostic Recovery</u> Phase 1 of the Community Diagnostic Centre opened to patients providing X-ray, CT, non-obstetric ultrasound, phlebotomy and point of care testing.
- Quality Governance Two Patient Safety Specialist Investigators have been appointed and will be part of a centralised Safety Investigation Team but will be linked to specific divisions. Final preparations were concluded ahead of the launch of the Patient Safety Incident Response Framework (PSIRF) on the 1st December 2023.





# **Getting to Good: Programme Highlights**



- <u>Emergency Care Transformation</u> A "Perfect Week" has been undertaken at PRH for initial assessment. The results have brought overall SaTH initial assessment metrics to above the England mean.
- <u>Leadership and Development National Staff Survey 2022 results showed we are one of the Trusts that has shown improvement in all 7 elements of the People Promise and this has been recognised by NHSE National Director for People
  </u>
- Expansion of the Medical Examiners Office Positive engagement with several GP Practices across Shropshire, Telford and Wrekin has been received and eight practices are currently engaging in discussions to go live in early 2024





# **Getting to Good: Programme Highlights**



- Recruitment and Retention A further 27 nurses joined the Trust as part of the international nurse project for the 2022/23 business case, bringing the total number recruited since April 2023 to 151.
- <u>Digital Infrastructure</u> Technical workshops commenced to review the next phases of EPR due to commence in June 2024, following PAS and ED go live. This includes a replacement order communication and results reporting solution (OCRR), electronic prescribing and medicines administration (EPMA) and laboratory information management system (LIMS).
- <u>Training and Education</u> Teams moved into the new SaTH Education, Research, Improvement Institute (SERII) building with classes commencing and the Education Support Unit service in place.



# Getting to Good: Our CQC inspection



# A CQC (Care Quality Commission) inspection of our core services took place in October 2024

- Inspection included on-site visits, well-led and focus groups
- Throughout, improvements SaTH have made were demonstrated and staff were honest and open about the challenges they face.
- Inspectors praised commitment to improving care, but there is more do.
- The final report is expected in early 2024











# Thank you for listening Any Questions?







#### **Public Assurance Forum Meeting: 15 January 2024**

Agenda item		2024/07					
Report Title		Strategy & Partnership Update					
Executive Lead		Nigel Lee, Interim Director of Strategy & Partnership					
Report Author		Carla Bickley, Associate Direc	tor o	f Strategy & Partnership			
CQC Domain:		Link to Strategic Goal:		Link to BAF / risk:			
Safe	√	Our patients and community	$\sqrt{}$	BAF1, BAF2, BAF3, BAF4,			
Effective	√	Our people	√	BAF6, BAF7, BAF8, BAF9, BAF10, BAF11, BAF12, BAF13, BAF14, BAF15			
Caring	√	Our service delivery	√	Trust Risk Register id:			
Responsive	√ ,	Our governance	√				
Well Led	√	Our partners	√				
Consultation Communicatio	n						
Executive summary:		Significant work is in progress both in SATH and across the Integrated Care System on the continued development of the operational and strategic delivery of ICS and Trust priorities and duties.  This paper provides a summary of key areas.					
Recommendations for Public Assurance Forum		The Public Assurance Forum is asked to NOTE the report					
Appendices:		NONE					

#### 1. Introduction

This paper provides a summary of key actions and activities relating to both Trust and Integrated Care System (ICS) strategy development and implementation, as well as associated work.

#### 2. Integrated Care System (ICS)

Simon Whitehouse has been appointed as the substantive Chief Executive for NHS Shropshire, Telford and Wrekin Integrated Care Board (ICB). In addition Dr Julian Povey has now formally been appointed as the General Practice Board's new Chair, Vanessa Whatley, has been appointed as interim Chief Nursing Officer for NHS Shropshire, Telford and Wrekin Integrated Care Board (ICB) following the retirement of Alison Bussey and Nigel Lee, continues in his dual role, as Director of Strategy for the ICB alongside his Director of Strategy and Partnership role at SaTH.

Work continues to progress in relation to the ICB Governance Framework, developing the system operating model including place based commissioning and provider collaboratives.

The system continues with the implementation of the Joint Forward Plan focussing on prevention, health inequalities, neighbourhood working, mental health, primary care access, the local care transformation programme and the hospital transformation programme alongside other established programmes of work such as urgent and emergency care, planned care etc.

A systemwide Suicide Prevention Strategy has been launched across the system, additional information is available via the following links Mental health and wellbeing | Shropshire Council which has information on bereavement support, concerns about suicide and the recently published first point of contact support reference document for concerns about Mental Health and related risks. The ICB STW Suicide Prevention Resources webpage can be found at: Suicide and suicidal thoughts NHS Shropshire, Telford and Wrekin (shropshiretelfordandwrekin.nhs.uk) and the ICB STW Suicide Bereavement info page at: NHS Shropshire. Telford Suicide bereavement Wrekin (shropshiretelfordandwrekin.nhs.uk)

A Healthier Weight Strategy has been launched by Shropshire Council, with a similar strategy due to be published by Telford & Wrekin Council shortly. This is a vital workstream for driving improvements in health inequalities.

The ICB has launched a "Think which service" campaign. The campaign empowers residents living in Shropshire, Telford and Wrekin to stay well and use services appropriately this winter, with the aim of reducing demand on General Practice, reducing the pressure on A&Es and reducing ambulance handover delays. For more information, please visit: <a href="https://www.thinkwhichservice.co.uk">www.thinkwhichservice.co.uk</a>

From 1 December, the ICS has published the NHS 111 Mental Health Option to the general public. The NHS 111 select mental health toolkit is available at: <a href="NHS 111">NHS 111</a> 'select mental health' toolkit - NHS Shropshire, Telford and Wrekin (shropshiretelfordandwrekin.nhs.uk). All partners are requested to drive awareness and ensuring your websites are up-to-date.

Telford & Wrekin Council and the Young People's Forum (a council-driven consultation action group for 11 - 18 year olds) have recently launched the Young Person's Year of Wellbeing campaign. The campaign gives young people across Telford and Wrekin practical tips and advice they can relate to and use in their day-to-day life to enhance their wellbeing. This can include taking regular walks, improving sleep, limiting social media use, and connecting with friends and family more often. These may all seem like small things but can make a noticeable difference for young people. Find out more.

Telford and Wrekin residents who need information, advice and support on adult social care services to help them live well and independently can now access the "Knowing where to go" flyer – by visiting the council's website or by calling 01952 381250 (Monday-Friday, 9am-5pm) for a paper copy. The council's "Adult Social Care – Knowing Where to Go" flyer has been co-produced with "Making It Real Board", a group of people with lived experience of social care services that regularly meet with council leaders to help improve and develop services in the borough. Shropshire Councils 'Five ways to winter wellness' campaign has been launched and aims to help Shropshire people keep well during the winter months not just physically but mentally too. Find out more.

Shropshire Council's budget consultation has now launched. This is an opportunity for you to share your thoughts on how the council can achieve the £50m spending reductions that it must make before 2025. Further information can be found here: Budget consultation 2024/25 | Shropshire Council. The survey is open until 28 January 2024.

Additional information in relation to the Integrated Care Board and the Health & Wellbeing boards can be found on the ICB website.

#### 3. SATH Workstreams

#### 3.1 Provider Collaboratives

Activity in collaboration is taking place in a number of areas:

Work continues to take place to strengthen and develop our current working relationship with Shropshire Community Healthcare NHS Trust, Local Authorities, MPUFT, RJAH and voluntary organisations in a number of areas with the focus primarily on areas included in the joint forward plan (as detailed above). A more formal arrangement with the 4 NHS Trusts is being progressed, to harness optimum benefit of working together in key workstreams.

The SaTH and UHNM collaborative working continues with significant joint working in Urology, robotic surgery and pathology. The N8 Pathology Network development (SATH, UHNM, RJAH and both East Cheshire and Mid Cheshire Trusts) continues to progress.

We are supporting the National Health Inequalities Ambassador Programme which commenced last month.

#### 3.2 Internal Strategies

The Trust's Clinical Services Strategy has been approved and is available on our trust website. We are currently in the process of developing a user friendly information leaflet.

We are currently in the process of reviewing the Equality, Diversity and Inclusion Strategy, and a review of the Trust's People Strategy has commenced. Further updates to be provided.

The Trust's Research and Development Strategy has been finalised and approved, and the Trust's End of Life Strategy has been finalised. Further updates to be provided.

The Trusts Communications Strategy is currently under review, and we are also commencing work to develop a data strategy.

Work has commenced to align and embed our Trust Strategy into the operational planning rounds for 24/25. In addition National guidance in relation to the joint forward plan has also been launched, this will run alongside the operational planning rounds, and SATH will contribute to the system refresh. NHS England » Guidance on developing the joint forward plan

The ICB is currently producing a Draft Long Term Conditions Strategy. Details of the National Major Conditions Strategy can be found here:

https://www.gov.uk/government/publications/major-conditions-strategy-case-for-change-and-our-strategic-framework/major-conditions-strategy-case-for-change-and-our-strategic-framework--2

#### 4. Recommendation

The Forum is asked to note the report.



# Patient Safety Incident Response Framework (PSIRF)

Pete Jeffries – Patient Safety Specialist



# **Patient Safety Strategy:**





# The NHS Patient Safety Strategy

Safer culture, safer systems, safer patients

July 2019

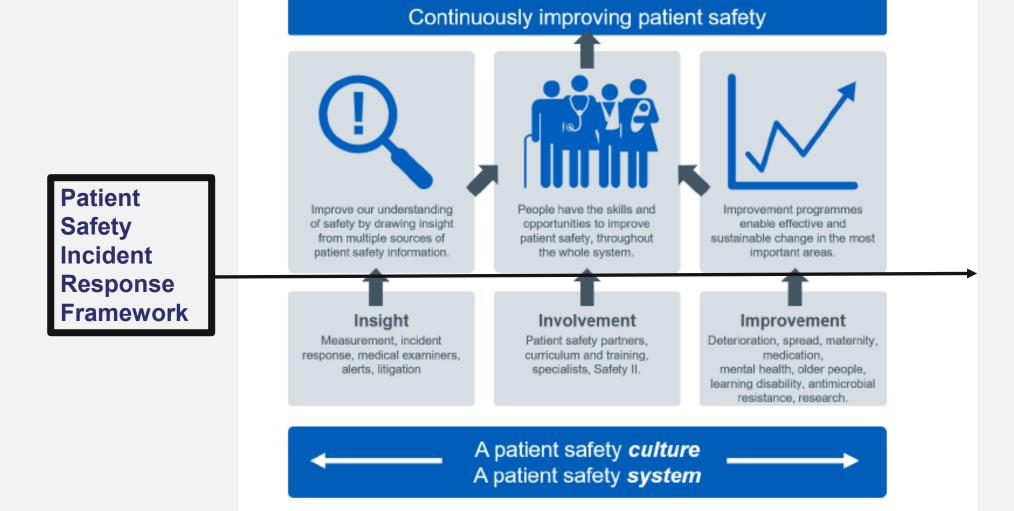
NHS England and NHS Improvement





# **Three Themes:**











- Many NHS organisations are trying to investigate too many incidents
- Insufficient resource & expertise
- Capacity focussed on repeatedly investigating similar incidents
- Not finding the true causal factors
- Insufficient focus on the common causal factors and implementing systematic change

Wider and sustained focus on common underlying causes could provide the greatest potential for improvement across the system

# Four key aims:



- 1. Compassionate engagement and involvement of those affected by patient safety incidents
- 2. Application of a range of system-based approaches to learning from patient safety incidents
- 3. Considered and proportionate responses to patient safety incidents
- 4. Supportive oversight focused on strengthening response system functioning and improvement

## **Overview:**

Incident:

moderate or

severe harm



Incident: No/low level harm

Near miss opportunity?

Trust Priorities

#### **Priorities:**

Adult Deterioration
Falls with significant harm
Missed radiology results
Omitted doses of time critical
medication

**National Priorities** 

- Never Event
- Incident resulting in patient death (clear acts and omissions)
- Each baby counts criteria
- Death of a person with learning disabilities
- Incidents in screening programmes

Compassionate engagement of patients and staff

Organisational learning responses

Patient Safety Incident Investigations

Recommendations into improvement projects



# **Progress:**



- Went live on 1<sup>st</sup> December 2023
- Initial processes in place
- We have commissioned our first Patient Safety Incident Investigation (PSII)
- We are undertaking Systems After Action Reviews as a learning response
- Early days and its all very new. Seeing some gains already in terms of identifying incident themes and trends

# **Next steps:**



- Continue to embed as 'business as usual'
- Further work on compassionate engagement of patient/family and staff
- Focus on improvement priorities and programmes
- Other elements of patient safety strategy:
  - Recruit Patient Safety Partners
  - Develop education programme (based around National Patient Safety Syllabus)
  - Publish SaTH Patient Safety Strategy (PSIRF as one element)



# PRH Renal Service Hollinswood House Update

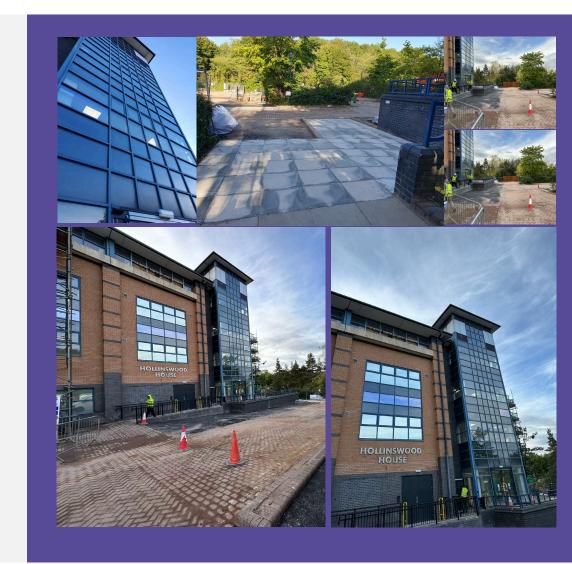
Hollinswood House, Stafford Park 1, Stafford Park, Telford, TF3 3BD



## **Hollinswood House Telford**



- On Tuesday 28<sup>th</sup> November Renal Dialysis Services moved from PRH to the new Community Diagnostic Centre (CDC)
- The Unit provides care for lower risk dialysis patients (with acute services remaining at RSH)
- The new unit at Hollinswood House is more than double the size of the existing unit and creates more clinical space for both patients and staff.
- The new unit provides fit for purpose Dialysis unit which meets modern building standards
- The new unit future-proof the provision of dialysis to meet patient needs for the next 10 years in Telford (based on current modelling) as there is room for expansion built into the development.
- Renal dialysis services were previously delivered on a former ward at PRH, and the move or renal services has allowed the area to be converted back to an inpatient ward.



# The Renal Unit Opens!





#### **Supplementary Information Pack**

#### Agenda item

2024/10	i. SaTH Divisional updates on key issues	Page 50-60
2024/10	ii. Public Participation Plan: 2023/24 Action Plan Upda	te <b>Page 61-65</b>
2024/10	iii. Draft Public Participation Quarterly Board Report	Page 66-95

#### **Public Assurance Forum**

#### **Clinical Support Services Divisional Update**

Name of Division: Clinical Support Services (Radiology, Pathology, Pharmacy and Therapies)

Name of Divisional Lead: Anna Martin, Divisional Director of Operations, CSS

Date: Monday 15th January 2024

1. Key updates from Division

#### Workforce:

We have seen a significant improvement in our recruitment position following successful international recruitment, apprenticeships, "golden tickets" for final year students, recruitment events and introducing new roles and ways of working.

In this way we have been successful in recruiting into some notably hard to fill vacancies such as radiographers and physiotherapists. However, we continue to have less success in the nationally recognised shortage professions of Sonographers, Pharmacists, Speech & Language Therapists and Occupational Therapists and we continue with every effort possible to fill these vacancies including working collaboratively with our system partners e.g. Pharmacy and Therapy rotations.

Some examples of where we have made progress include:

- We have recruited a Pharmacy Technician to support the Acute Medical Unit at PRH to provide PRH with the same level of service as RSH - a dedicated Pharmacist with a Pharmacy Technician to support.
- Successfully recruited to Pharmacy Technician to the Sub Acute Wards for both sites.
- A further 10 internationally recruited Radiographers started working with us from September onwards.
- An additional 8 newly qualified staff started with us in the summer of 2023.
- 3<sup>rd</sup> year Radiographer student recruitment event took place in November 2023, 7 offers made to commence after successful qualification late spring 2024.

#### Service performance against notable standards:

<u>Current Diagnostic Management Standard 1 (DM01) performance</u> (November 2023): The DM01 standard requires that only 1% of patients should wait over 6 weeks for a diagnostic test. Our imaging performance is on an overall improvement trend:

- MRI 96 %
- CT 98%
- Non-obstetric US 79%

We are making steady progress in reducing our backlogs created during the pandemic through a wide variety of ways. Our turnaround times for reporting also continue to improve.

#### **Breast Screening:**

- Recovery of breast screening round-length (defined as the time between the previous screening test and being offered another examination should not be longer than 3 years) and time to results (target of 2 weeks) is now consistently at pre-pandemic levels: both at 97% against a target of 95%.
- A new twin breast screening unit became operational on the 30<sup>th</sup> October and is currently located in Whitchurch.

<u>Therapy outpatient waiting lists</u> are still to recover to pre-pandemic levels although progress is gradually being made:

- Sustained improvement in the Occupational Therapy Outpatient routine waiting list over 6 months.
- PIFU performance consistently above National and Trust target

<u>Cellular Pathology</u> – Within the regional network (N8) SaTH continues to achieve the best 7-day turnaround times.

2. Update on any current or future service developments or changes and how are you involving the community in these changes?

#### Patient engagement and involvement

The Clinical Support Services Division Patient Experience Group continues to focus on 2 areas from our patient engagement and involvement strategy:

- Restoring patient feedback to at least pre-pandemic levels for example out-patient questionnaires, talking to our patients to gain feedback and starting to run focus groups again. This work is picking up pace especially with our new Community Diagnostic Centre.
- "The First 15 Steps" assessment visits have commenced and are taking place across all of our patient facing areas during September and October.

We are also involving our patient engagement representatives in some of our service changes and improvements such as:

#### **Community Diagnostics Centre (CDC) in Telford:**

It forms part of a national programme of work to increase access to diagnostic tests in the community. The CDC welcomed their first patient on the 3<sup>rd</sup> October and is now operational with Phase 1 and 2 of the programme. Phase 1 and 2 consists of CT scanning, Non-obstetric US, X-ray, MRI scanner and a Phlebotomy service.

A patient engagement focus group has been meeting virtually and also attended the site once it was safe to do so to advise on patient pathways and the environment.

#### **New Therapy Service for Neonates:**

We have been successful in a bid for Ockenden funding to introduce Dietitians, Occupational Therapists, Physiotherapists and Speech & Language Therapists into the Neonatal Unit at PRH and recruitment is currently underway. They will provide a critical role in supporting the developmental stages of these very premature babies.

#### **Musculo-skeletal (MSK) Transformation Programme:**

**Date** 

This programme involves the 3 local NHS Trusts (SaTH, RJAH and SCHT) in developing an integrated pathway from GP referral to surgery if required, including post-operative care. The new service went live on 9<sup>th</sup> August. The programme is led centrally by the Integrated Care System (ICS) who have an engagement strategy encompassing staff and patients.

**Replacement Nuclear Medicine\* Gamma camera at RSH**: funding has been approved for a replacement camera at RSH and the necessary building work started in August 2023 with completion estimated in February 2024. We are involving our patient engagement representatives to make sure the new facility is patient friendly.

**Outpatient Parenteral Antibiotic Therapy Service (OPAT)** commenced on the 27<sup>th</sup> November 2023 and are still in the early stages of the implementation. There is a task & finish group that are meeting regularly and will ensure to be seeking patient feedback on its service.

# 3. Action update from previous meeting (if applicable) All covered in updates above. Report by: Anna Martin

05.01.24

#### **Public Assurance Forum**

#### **Divisional Update**

Name of Division: Surgery Anaesthetics Critical Care Cancer

Name of Divisional Lead: Michelle Cole

Date: Monday 15th January 2024

Time: 1.00 - 4.00pm Location: Microsoft Teams

1. Key updates from Division

Divisional PACE Update:

Julia Palmer to provide monthly presentation re numbers of complaints and learning will be shared with teams

Monthly tracker updated and feedback to matrons

Patient stories now a standard item on the monthly divisional agenda. To date presentations have been made by Theatres PRH, SAU, MSK

2022 Inpatient survey recently released. Matrons formulating actions plans in response, to be presented for each area in the coming months and progress monitored

Bi-monthly updates on the Elective Hub at PRH

Patient representative to attend the Elective Hub Steering Group – to be confirmed

New patient representative joining the Surgery Division – Lynn Pickavance; her experience will be very valuable in developing this group

Update on Hospital Transformation Programme given by HTP team

Instigated a series of familiarisation visits by Patient Representatives. To date visits have been made to Day Surgery RSH, Outpatients RSH, Theatres RSH, Pre-operative assessment RSH, Day Surgery PRH. Further visits planned to MSK, Head & Neck, ENT, Maxillofacial, General Outpatients

Elective Hub presentation bi-monthly for update and discussion on progress

Presentation re Chaplaincy and Patient Experience shared with staff

Health Literacy presentation shared with staff

Equality Diversity and Inclusion presentation for Theatres shared with staff

Theatres to present on the issues encountered when collecting patients from wards before arriving in the Operating Theatre – scheduled for December 2022 meeting

Specialty Updates:

#### Oncology

Talks with Clatterbridge re support with OPA for oncology urology and colorectal patients

#### Critical Care

Plans for the new unit being built as part of HTP have been discussed with a patient representative and are close to being signed off. Furniture has been ordered to improve the relatives waiting area and relatives room at PRH

#### Sterile Services

- The replacement of washers and Autoclaves remains on-going, five washers and the trolley washer have been replaced and are now validated for use
- One new steriliser has been installed and is waiting for final validation report prior to use
- > The plan for the final washer is due to be undertaken around the 9 January, once completed the four Sterilisers will be replaced from mid-February

#### Patient Access - 'Patient Access Supporting The Organisation'

- The Patient Access Centre incorporates the Central Booking and Scheduling Team, Medical Records and Clinic Prep, Outpatient Clinic Receptions and Outpatient Nursing, Admissions, Private Practice and Overseas Visitors
- Below are several projects and initiatives that we are currently working on to support the Trust

#### <u>Implementation of Careflow:</u>

- Letter Rationalisation Project Ensuring our communication with patients is clear and concise
- Clinic Optimisation Changes to improve the outpatient experience with an aim to reduce the number of re-booked appointments
- Referral To Treatment (RTT) Awareness Providing RTT contextual training to our organisation, to date 164 staff have received training

#### Validation:

Patient Access Team are supporting the Trust to maintain an accurate and validated waiting list of patients who have been waiting over 12 weeks for appointments or procedures. The aim to achieve the target of 90% of patients contacted is now an ongoing target

#### Mutual Aid:

Patient Access Team have also supported the Clinical Centres with the Mutual Aid process, Patient Initiated Digital Mutual Aid Service (PIDMAS). This process involves contacting patients to ask if they would like to be seen and treated at other organisations due to current waiting times for some of our specialties. If the patient agrees then details are sent to The Integrated Care Board (ICB) team who will endeavour to find alternative organisations to provide the patients treatment. The outcome of this is then shared with the Patient Access Centre team who updated the national system and add patient to Digital Mutual Aid Service (DMAS) if required

#### 78 and 65 Week Waits:

The Booking and Scheduling Team continue to assist the Trust to achieve NHS targets by ensuring that patients are booked for appointments and procedures within the specified timeframes. This has included invaluable support from a knowledgeable Booking Team

#### **Outpatient Transformation:**

The Patient Access Team are working hard in conjunction with The Centres to support the Operational Teams in the redesign, development, and delivery of their

outpatient care. Outpatient Transformation includes the delivery of Patient Initiated Follow Up (PIFU), Virtual, using virtual appointments instead of face to face, reducing DNAs and increasing Advice & Guidance throughout all Centres. We continually work with The Business Intelligence Team to improve and enhance report information for use within the Centre and throughout the Trust

#### Move to William Farr House:

The outpatient scheduling team along with managers have now moved off site, the inpatient scheduling team are planned to move on 12<sup>th</sup> January 24

#### Bookwise:

The Patient Access team have implemented an automated clinic room booking system to help support the clinical teams to ensure that the right clinic rooms are booked for their specialties and patients

#### Receptions:

Our Receptions Services continue to provide a meet and greet service to patients throughout the hospital, ensuring that patient information is correct on our Patient Admission System. Following each patient attendance, the reception staff will 'cash up' action the patients clinical outcome form ensuring that patients are moved to the next step of their care pathway in a timely manner

#### Admissions:

Our Admissions service continues to provide out of hours support for patients and relatives and ensures that all medical records are available for the medical staff on wards

#### ENT/Max Fax/Ophthalmology

- Vacancy posts in Ear Nose Throat (ENT) & Maxillofacial (Max Fax) now appointed into with start dates in January & February arranged
- Consultant triage of referrals now in place for ENT Otology, with a view to extend to the whole service
- Cancer pathway improvement work being undertaken across the pathway (see below)
- Ophthalmology department is an early adopter for Cinapsis which is an Electronic Eyecare Referral System (EeRS)

#### MSK (Musculoskeletal)

- > Due to Winter pressures the Arthroplasty lists at PRH will be taking place at RJAH for the month of January 2024
- 2. Update on any current or future service developments or changes and how are you involving the community in these changes?

#### Divisional PACE Update:

2022 Inpatient survey results recently released. All areas are formulating actions plans in responses. These will be presented for each area in the coming months and progress monitored. Developing patient experience improvement plans alongside the survey

Work continues in theatres with the surgical ward involvement to improve processes before patients attend theatres for surgery

Potential Surgical Admission Lounge and ward 5 development – Matron to present update

#### at next meeting

#### **Specialty Updates:**

#### Oncology

- ➤ Following patient comments regarding the wooden bench outside of the Lingen Davies Centre, the centre manager approached Lingen Davies Charity to see if they would be able to raise money for a wooden Arbor bench. Update; the parents of a young man who recently passed away have agreed to fund raise for this Arbor bench in memory of their son. The order has been placed and we are awaiting delivery
- > Friends and family surveys are completed
- Patients were involved in the design of the flowchart for anti-sickness drugs that our patients take

#### Haematology

➤ Lingen Davies will be installing some frosted glass in the haematology day unit following comments from patients that they feel unsteady when looking down through the glass wall

#### Critical Care

- ➤ Improvements to the patient garden at RSH have been agreed and signed off and work is due to start in the Spring using donations from a patients family who requested the funds were used for this purpose. Following patients and relative feedback, the team continue to work on improving the Patient Diaries and will be trialling the inclusion of polaroid photographs
- > Sky light improvements for end of life patients installed in ITU at PRH

#### Theatre

Stores upgrade almost completed. Elective Hub equipment currently being discussed/ordered. Business Case for any financial shortfall for equipment required

#### ENT/Max Fax/Ophthalmology

➤ Improvement work on going on the ENT Cancer Pathway to implement new pathways for urgent patients. Clinician Triaging, straight to test pathways and one stop clinics all being implemented. ICB Team will support in liaising with primary care

#### MSK

- Reintroduction of Virtual Fracture Clinic at PRH in January 2024 as part of the wider outpatient transformation programme. If pilot successful, this will be rolled out across both sites
- ➤ Due to the reconfiguration work on Ward 32/31 at RSH and the associated financial cost, the trauma move from PRH to RSH has been put back to October 2024

#### 3. Action update from previous meeting (if applicable)

Divisional PACE Update:

Feedback from the visits to the meeting and cascading of these to nursing teams by matrons/ward managers

Review of the ongoing action plan for the Division

Invite member of operational teams to the meeting to update on capacity issues and theatre cancellations

Creation of working group – initially to review complaint themes and create action plans

To identify a Deputy Chair for the Divisional meetings

Specialty Updates:

#### Oncology/radiotherapy

In oncology patients are invited in to watch a video before they start treatment; this needs to be updated and we have a filming company coming in in the new year to produce a new video. Patients will ask if they wish to participate in this filming and will also be asked for ideas on the content. Patients will be asked if they wish to share their personal patient journey too

Report by:	Michelle Cole
Date	02/01/2024

#### **Public Assurance Forum**

#### **Divisional Update**

Name of Division: Emergency Medicine Name of Divisional Lead: Laura Graham

Date: Monday 15th January 2024

Time: 1.00-4.00pm Location: Microsoft Teams

#### 1. Key updates from Division

Demand on our Emergency Departments remains high with added pressures as a result of the recent junior doctor strikes.

Renal dialysis services provided from the Princess Royal Hospital (PRH) in Telford moved in November to a new purpose-built state of the art facility in the town. Renal dialysis services are now located in the same building as the new Community Diagnostic Centre which opened its doors in October.

The facility in Hollinswood House, Stafford Park, Telford, provides care for lower risk dialysis patients, with acute services remaining at Royal Shrewsbury Hospital.

At more than double the size of the existing unit, the new off-site location has created more clinical space for both patients and staff, as well as being more accessible.

2. Update on any current or future service developments or changes and how are you involving the community in these changes?

None to update on at present.

3. Action update from previous meeting (if applicable)

Not applicable

Report by:	Laura Graham
Date	02/01/2024

#### **Public Assurance Forum**

#### **Divisional Update**

Name of Division: Maternity Services

Name of Divisional Lead: Carol McInnes

Date: Monday 15th January 2024

Time: 1.00-4.00pm Location: Microsoft Teams

1. Key updates from Division

#### Maternity

Workforce planning continues with no vacancies for midwives and WSA's.

In October we welcomed 7 new midwives to the organisation and continue to support 10 International midwives who have passed their OSCEs and working supernumerary clinically.

Successful recruitment to Deputy Head of Midwifery, Transformation Matron, EDI Midwife, Continuity Midwife and Band 7 coordinator roles.

3 Band 2/3s have commenced the midwifery apprenticeship programme, this is a new initiative with plans to recruit 3 Band 2/3 staff each year to the programme.

The governance team re-structure welcomes 2 Incident Leads and a new Quality Governance Lead.

The Midwifery Preceptorship programme has commenced for 2023, supporting newly qualified midwives and welcoming them into the service. You will recall that the service has successfully retained our entire cohort of 2021 and 2022 newly qualified midwives, evidencing excellent retention.

The Maternity Services rotation plan commenced in October supporting midwives to enhance their skills in all clinical areas.

#### Gynaecology

- Continued to improve Faster Diagnosis Performance and on track with our cancer trajectory
- 2. Up to date demand capacity modelling

#### **Paediatrics**

- 1. Continued to reduce agency gap and dependency on agency
- 2. Paediatric Transformation Assurance Programme –9 Actions evidence & assured & 15 actions delivered not yet evidence 21 % actions implemented.
- 2. Update on any current or future service developments or changes and how are you involving the community in these changes?

#### Maternity

Further to the publication of research regarding poor maternal health outcomes for black women, a specialist EDI midwife commenced in post to lead on ensuring best practice has been introduced. Plans remain in development stage for outreach maternity services to target the most deprived areas of our communities.

Establishment of a healthy pregnancy support team to focus upon prevention – smoking, obesity and vaccination. The team will start to deliver the new flu programme this month to pregnant women, building upon the very successful pertussis campaign which returns some of the highest rates in region. Smoking remains an area of concern although we are starting to see some reduction in SATOD figures in line with seasonal variation.

15 Steps with MNVP continues with a recent visit in December 2023 to share learning and improve clinical care and facilities for service users accessing care.

UX workshops engaging service users and MNVP to encourage service user voices and promoting innovations.

Senior Leadership team visit to Telford college to speak to young people about careers in health.

Midwifery Unit tours re-commenced in September with positive feedback received.

A second Open Day is due to take place in February 2024 following positive feedback from service users and members of the public.

#### **Gynaecology**

- 1. Currently looking at 7 day service for Gynaecology Assessment Treatment Unit.
- 2. Working with MNVP for EPAS service.

#### **Paediatrics**

- 1. In process of reviewing Direct Access Pathway for paramedics accessing Children Assessment Unit for children aged under 6 months.
- 2. Paeds Vital on track to be implemented in June 2024.

3.	Action update from previous meeting (if a	pplicable)
NA	Action apacto from provious meeting (if a	рпоимо
Report	rt by: W & C	Operational Team
Date	08.01.2	•

#### **Public Assurance Forum**

#### **Divisional Update**

Name of Speciality: Patient Experience

Name of Speciality Lead: Kara Blackwell

Date: 15th January 2024

Time: 14.00-17.00 Location: Microsoft Teams

1. Key updates from Division

#### **Patient Experience**

- The Equality Delivery System 2022 (EDS 2022) is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments free of discrimination and meet the requirements of the Equality Act 2010. As part of the EDS 2022 submission the Trust reviewed 3 services: Patient Advice and Liaison Service, Maternity Service, and Alcohol Care Team. During December 2023, three stakeholder events were held providing service users, patients, staff, community groups, public and stakeholders an opportunity to review actions being taken to address inequalities in accessing healthcare services. As part of this review, evidence incorporating people's experiences, impact and outcomes was shared and feedback captured through facilitated table discussions, providing insight into areas being delivered well, opportunities to improve the service, and an overarching rating for each category.
- The Patient Advocate Group has been re-established with the first meeting taking place in January 2024, further recruitment to the Group is planned
- Patient Led Assessment of the Care Environment (PLACE) was completed in November 2023, the formal results are awaited and should be received in February 2024, a full action plan following receipt of the results will be developed which will include outstanding actions from 2022 PLACE audit. This will be used for the PLACE Group to agree the key priority actions from this for allocation of resources.
- The working Group set up for the PHSO standards for complaints, including three patient representatives has commenced.
- Complaints improvement work has commenced with the Divisions to ensure processes facilitate more timely responses to our patients and their loved ones, new processes to be rolled out in January 2024.
- The introduction of text (SMS) Friends and Family Tests (FFT) to provide patients accessing the Emergency Department to feedback commenced the 1<sup>st</sup> October for 6 months initially. This is going well and we have seen an increase in responses received.

#### **Patient Safety**

- PSIRF was launched in December 2023. Work is ongoing to embed this across the Trust and the new processes and ways of working.
- 2. Update on any current or future service developments or changes and how are you involving the community in these changes?

#### **Patient Experience**

- The Trust is continuing to recruit patient representatives to support Specialty Patient Experience Groups
- Involvement of patient and carer representatives continues through involvement the Patient and Carer Experience (PaCE) Panel, Speciality Patient Experience Groups, Patient Information Panel, Independent Complaints Review Group, Trust Food Group, Letter's Task and Finish Group, as well as the new Groups established for PLACE and PHSO standards.
- EDI Champion Study days taking place in January 2024 to ensure our staff have the skills to care for our patients and to champion care across the Trust.
- Following submission of EDS 2022, develop service action plans with the support of our patients, community groups, public and stakeholders in March 2024.

#### **Patient Safety**

- In relation to PSIRF, a patient and family liaison role is currently going through the approval process and we plan to have a stakeholder panel including public/patient representative.

#### 3. Action update from previous meeting (if applicable)

- -EDS 2022 completed in November 2023
- -PSIRF launched

Report by:	Kara Blackwell
Date	9 <sup>th</sup> January 2024



### Public Assurance Forum: 15 January 2024

Agenda item		2024/10						
Report Title		Public Participation Department Priorities 2023/24						
Executive Lead	t	Julia Clarke, Director of Public	irector of Public Participation					
Report Author		Hannah Morris, Head of Publi	c Par	ticipation				
CQC Domain:		Link to Strategic Goal:		Link to BAF / risk:				
Safe		Our patients and community	$\sqrt{}$	BAF 9				
Effective		Our people		BAI 9				
Caring		Our service delivery		Trust Risk Register id:				
Responsive		Our governance						
Well Led		Our partners						
Consultation Communicatio	n	Public Engagement throughout 2021 Approved by Trust Board October 2021 Regularly presented to PAF at quarterly meetings and SaTH Charity to Charitable Funds Committee meetings						
Executive summary:		the Yearly 'Plan on the Page' Volunteers and SaTH Charity The plan for community Enga our Public Participation Plan v our local communities over the by the Trust Board in October	geme which e nex	ent and Social Inclusion link to outlines how we will work with t five years and was approved				
Recommendations for the Public Assurance Forum:		The Public Assurance Forum is asked to:  NOTE The Activity completed by each of the areas during Quarter 3  This report is provided for information only.						
Appendices:		Appendix 1: Plan of a Page for Community Engagement, SaTH Charity and Volunteers						

#### 1.0 <u>Introduction</u>

- 1.1 The Public Participation Plan was developed in partnership with our local communities. The Plan outlines how we will work with our communities over the next five years and was approved by the Trust Board in October 2021. Follow approval of the Plan, an action plan was developed. This paper provides an update on the implementation of the Action Plan.
- 1.2 We then asked members of PAF and SaTH community members to prioritise the agreed actions to form an annual plan for the next five years. The results are shown in the overarching plan which has been developed into the prioritised Community Engagement 2022/23 plan on a page (Appendix 1). This also contains the full suite of Public Participation annual plans (i.e., Volunteers and SaTH charity) and these will also be presented at the next Trust Board.

#### 2.0 Risks to the project

Risk	Action	Timescales
Fail to deliver the Public     Participation Plan, resulting lack of	A detailed action plan will be drawn up and reviewed regularly with the	On going
confidence of our communities	implementation of the Public Assurance Forum	
2. Fail to deliver statutory duties (s242) to engage with the public	Continue to support our Divisions to ensure they meet their Statutory Duties.	Ongoing

#### **Areas of Focus**

- Individuals from the communities we serve in Shropshire, T&W and Powys)
- The wider public individuals who have an interest in a specific area or condition e.g. maternity.
- Patients and Carers whose interest may be specific to a service or may have a wider remit.
- Statutory Bodies e.g.
   Healthwatches, CHC, H&WB, Joint Health Overview and Scrutiny Committee.
- Staff Our Trust workforce.
- Voluntary Organisations the VCSA sector has a deep reach into our communities.
- Patient groups of all interests.
- Other Health and Social Care
   Organisations e.g. ICS, Shrop
   Comm, RJAH, primary care, social
   care etc.
- Seldom Heard Groups and their advocates. Young People; LGBT+; BAME; Gypsy & Travellers; Faith Groups; Carers; Addictions; Learning Disability; Refugees/asylum seekers; Homeless; Armed Forces Veterans; Disability.

#### Methods of Engagement

- partnership working with VCSA groups, representatives and forums. Contact community leaders, establish ongoing relationships through building trust. Articles for relevant newsletters. Liaison work with advocates, engage with local authorities and other statutory bodies.
- Attending events, conferences and other significant meetings, festivals, celebrations and activities relevant to the communities we serve, and where we can increase inclusion by offering a range of involvement opportunities.

### SaTH Community Engagement Action Plan 2023/2024



Our Vision: To provide excellent care for the communities we serve



#### **Strategic Aims**

#### To contribute to delivery of the Public Participation Plan, namely:

- **1. INCLUSION:** To increase the number and diversity of people involved with SaTH, ensuring that they are provided with meaningful and timely involvement opportunities
- 2. RESPONSIVE: Build greater public confidence, trust and understanding by listening and being responsive to our local communities
- 3 DECISION-MAKING: To introduce a public and community perspective to decision making and wider work at SaTH, including, recruitment, strategic planning, training and service development and delivery
- **4 GET INVOLVED:** Ensure our communities feel better informed and able to Get Involved if they choose too. Develop a range of involvement opportunities that are rewarding, meaningful and enable individuals from a diverse range of backgrounds to get involved.
- **5 COMMUNICATION:** SaTH will communicate with our communities directly to ensure they are kept informed and update about what is going on at the hospitals (making use of digital communications)
- 6 **OUR STAFF:** Enabled our staff to have the skills and confidence to engage with our communities

#### **Desired Outcomes**

- Strategic Engagement through Social Inclusion actions which make every contact count
- Key barriers to engagement identified & mitigation in place
- Regular meetings/networks in place to keep in contact with stakeholders
- Increase in incoming enquires/engagement from stakeholders
- Increase in both group & individual membership (Target 10% over the year)
- Our communities feel better informed and able to Get Involved if they choose to.

Key Risks / Benefits	L	С	LxC	Mitigation
Fail to deliver the Public Participation Plan, resulting lack of confidence of our communities	3	4	12	A detailed Action Plan and yearly plan on a page will be drawn up and submitted quarterly to the Public Assurance Forum (PAF)
Fail to deliver our statutory duties (S242) to engage with the public		4	12	Continue to support our Divisions to ensure they meet their statutory duties. Update PAF on engagement relating to service changes
Staff not having the skills or confidence to engage with our communities	3	3	9	Development of online website with toolkit that is accessible to staff

Q1	Q2	Q3	Q4	General Notes
April—May—June 2023	Jul-Aug-Sep-2023	Oct—Nov—Dec-2023	Jan—Feb—March-2024	Quarter 3 Update
Outreach Work in areas of health inequalities	Recruitment of new Community & Group members through NHS 75	Refresh organisational database information	Planning and consolidation	The team continue to attend     Telford Mental Health Forum     and the VCSA Mental Health
<ol> <li>Further develop links with Public Health in local councils to identify community groups in areas of focus</li> <li>Network with community groups and organisations and identify additional networking opportunities</li> <li>Attend community events in identified areas, provide clear purpose of attendance (working with Town &amp; Parish Councils)</li> <li>Attend events during Pride month (June) to raise profile of SaTH Involvement with LGBT+ communities</li> <li>Review and develop People's Academy for 2024</li> <li>Deliver People's Academy course, and bespoke People's Academy day in Woodside Telford</li> <li>Provide support for Hospitals Transformation Programme</li> <li>Deliver About Health events</li> <li>Work with the divisions to ensure they meet their Section 242 duties.</li> </ol>	<ol> <li>Promote NHS75 through outreach work across Shrops, T&amp;W, mid Wales, particularly focussing on areas of social deprivation and health inequalities</li> <li>Attend community events to engage local population and recruit community members—focus on areas identified in Q1</li> <li>Outreach with addiction and homelessness support organisations</li> <li>Deliver hybrid People's Academy course</li> <li>Attend Freshers' events at colleges/universities across Shrops, T&amp;W and mid-Wales (supported by SaTH Volunteer team)</li> <li>Provide support for Hospitals Transformation Programme</li> <li>Deliver About Health events</li> <li>Work with the divisions to ensure they meet their Section 242 duties.</li> </ol>	<ol> <li>Thematic outreach with system partners for World Mental Health Day in October</li> <li>Restart engagement with Gypsy and Traveller communities across Shrops, T&amp;W, mid-Wales after summer break.</li> <li>Outreach with refugees/asylum seekers to promote membership, volunteer and employment opportunities</li> <li>Deliver Online People's Academy course</li> <li>Expand rural network through existing contacts (Powys and Shrops)</li> <li>Identify additional networking opportunities.</li> <li>Provide support for Hospitals Transformation Programme</li> <li>Deliver About Health events</li> <li>Work with the divisions to ensure they meet their Section 242 duties.</li> </ol>	<ol> <li>Develop spring/summer engagement calendar of external events</li> <li>Confirm annual About Health plan and create publicity for distribution</li> <li>Review and develop the People's Academy for 2024</li> <li>Deliver People's Academy course.</li> <li>Provide support for Hospitals Transformation Programme</li> <li>Deliver About Health events</li> <li>Work with the divisions to ensure they meet their Section 242 duties.</li> </ol>	forum regularly, and attended the We Are With You Recovery Conference in Shrewsbury on 28 September.  Plans in place for visits to Gypsy and Traveller sites in 2024 in collaboration with Public Health across Shropshire, Telford & Wrekin and mid-Wales  Visits took place to Shropshire Supports Refugees, Maninplace and Stay, Shrewsbury Ark suspended drop in activity.  Face to face People's Academy and Young People's Academy courses held at RSH in November.  Liaising with SaTH Chaplaincy to engage with rural faith communities  A number of HTP focus groups have been held this quarter as well as attending external meetings to discuss the programme  We hosted 2 well attended About Health events this quarter and have a full schedule of events planned for 2024  We continue to increase awareness of support available to divisions in relation to

## SaTH Volunteer Development & Action Plan April 2023 to March 2024

V3 20/12/2023

Q2

July — August — Sep



#### A. Volunteers

Volunteers provide additional capacity to support staff, patients and visitors through a combination of tasks that would not otherwise be fulfilled. Improving the patient journey, outcomes and staff wellbeing.

#### B. Staff

This is a key group that should be aware of SaTH Volunteers to help and support the Trust to achieve the agreed desired outcomes.

#### C. Public

Engagement with the public is key to ensure the number of Volunteers is maintained to meet the needs of the Trust. Volunteering provides a step into engaging with the Trust and supporting SaTH Charity

### D. Schools, Organisations and Local Business.

Provides candidates for our young Volunteers Schemes. Groups and Organisations support with corporate volunteer days.

### E. Other Volunteer Organisations.

Maintain relationships with other volunteer organisations such as LoF, Lingen Davies,

#### **Programme Arrangements**

The Volunteer Team is based in Stretton House at RSH and provides support across both hospital sites.

#### **Strategic Aims**

Q1

April - May - June

To improve the patient journey through a vibrant and effective volunteer programme. To ease pressures on staff and support their wellbeing.

To work towards maintaining the required number of volunteers to meet the demand from the areas supported by the volunteer service.

To hold quarterly volunteer focus groups to engage with our volunteer cohorts

Review requests for new areas within the Trust for support that would receive a positive benefit from a volunteer programme and provide meaningful opportunities.

To raise awareness of the Trust's volunteering activities with our patients, their families and stakeholders to encourage their engagement with us.

To provide experience of working in a hospital setting for young volunteers or those looking for a career in the NHS, for example, the NHS Cadets and Young Volunteer Scheme.

Deliver a successful Volunteers to Careers project in support of growing our own workforce

Support our staff to effectively manage and support our volunteers while on placement.





**General Notes** 

Progress against plan Q3

Social media remains active with lots of

positive stories

#### **Desired Outcomes**

To maintain the number of active volunteers at around 270 during the year

Q4

Jan — Feb – March

- Ensure those who have completed the recruitment process have meaningful and regular placements.
- To support areas that would benefit from volunteer's support and deliver that benefit.
- To provide 24 positive news stories to support Public Participation

Key Risks / Benefits	L	С	LxC	Mitigation
Number of volunteers does not meet demand	4	1	4	Volunteering is promoted through Social Media and on the Trust's website. It also features on the Trust's recruitment website Belong To Something
Volunteers are at risk of working in unsuitable areas and are at risk themselves in clinical areas	2	3	6	Strict on-boarding process to ensure that volunteers understand where they can work and how to mitigate risk through their training
Sufficient resources within the Volunteer Team to manage the volunteer programme	2	3	6	Defined roles and processes to ensure all members of the team are capable of supporting the volunteer function. Bank shifts can be utilised.

•	Establish a calendar of engagement events with local schools and colleges	•	Contact local colleges with information on the Volunteer to Career's (VTC) scheme	•	Promote volunteering through the Trust's Peoples Academy	•	Volunteer annual survey on the views of our volunteers	•	There is a regular talk booked in to promote volunteering at all People's Academies.  Better Impact is constantly being reviewed for
•	Develop a communications plan		Engage with fresher's events at	•	Ongoing development of Better Impact	•	Develop a plan for 2024/25		it's efficiency
	for volunteering to encourage applications.		local schools or colleges		Review inactive volunteers	•	Plan for Volunteers' Week 2024	•	Volunteers are regularly being reviewed for active placements.
•	Promote roles in A&E and	•	Recruit gardening volunteers to meet any identified need.	•	Consider lead volunteer roles	•	Review Better Impact as our management platform and	•	Whilst there is no lead volunteer role we are
	Discharge		Plan the next Young person's		and how they could be developed to support the		implement updates		developing some of our volunteers to support new volunteers e.g. helping with the induction
•	Develop a volunteer to career pathway		Academy		volunteer programme	•	Promote roles in A&E and Discharge		of new volunteers.  With thanks to the VTC and the Volunteer
•	Review and update website	•	Review Better Impact content (files, templates etc.) to ensure	•	Raise awareness to Trust areas the benefit of having Volunteer	•	Focus Group on selected area		Recognition event, there has been a number of good news stories. Furthermore, volunteers
	content and social media exposure		it is current.  Review IPC training in light of		support and encourage engagement with placing	•	Second in take for Youth Volunteers to open in February		are being asked to support special events such as the opening of new buildings/services,
•	Deliver Volunteers' Week 2023	ľ	hospital guidance changes and update as required		volunteers.  Support volunteer recognition	•	Work on project brief for NHS		and being involved in upcoming NED interviews. This highlights how vital the Trust
•	Review Better Impact as our management platform and	•	Active database review	ľ	event		CT grant  Plans to embed the volunteer to		sees our volunteers  For the Christmas Campaign this year,
	implement updates	•	Focus Group on selected area	•	Volunteer Christmas campaign		career programme are moving		volunteers will be given the same £4 vouchers
•	Young People's Academy	•	Launch Youth Volunteer	•	Focus Group on selected area		forwards making it business as usual.	•	3 focus groups have been held over the quarter. The focus group for FTSU was
			Programme	•	Review Social Media activity				particularly well-received and talks are in progress regarding volunteer ambassadors for FTSU

Q3

Oct — Nov — Dec

## SaTH Charity Development & Action Plan April 2023 March 2024

V3 18/12/2023





#### **Stakeholder Groups**

#### A. Public

Public appeal is important to achieve our core objectives of community engagement and raising funds.

### B. Local Business and Organisations

SaTH cares for the workers of local businesses, many will have employees cared for by SaTH. Supporting SaTH Charity is likely to be popular with employees. SaTH Charity can work with organisations on their corporate good citizen projects.

#### C. Staff

An engaged and supported workforce is key to achieving our performance targets. The Charity recognises our staff as a key asset to the Trust and is focussed on supporting their wellbeing to aid retention

### D. Existing organisations providing charitable support

SaTH Charity must not be seen as a threat but as a complimentary partner to other charities. Engagement with our ICS partners is an opportunity.

#### E. Volunteers

They might develop into active fundraisers. Volunteers give time which is comparable to giving money and aligns to supporting SaTH.

#### **Charity Team**

The SaTH Charity Team sits within the Public Participation Team and is based within Stretton House at RSH.

The Finance Team are based at The Shrewsbury Business Park under the management of Vicky Hall, Senior Accountant Charitable Funds.

#### **Strategic Aims**

To raise funds that provide equipment and workforce training not funded through normal NHS channels.

To provide engagement opportunities for local people, business's and organisations.

To work alongside the Volunteer Team to encourage support and giving whether its money or time—both are valuable to the Trust.

To explore corporate and organisation fundraising priorities which are aligned to the Trust's strategic objectives.

To encourage utilisation of funds to support identified need

To raise awareness of the Trust's activities with our staff, patients, their families and stakeholders to encourage their engagement, to build and develop SaTH and the SaTH Charity brand.

To work with and support existing charitable partners which include but not limited to; NHS Charities Together, League of Friends of RSH, Friends of PRH and Lingen Davis.

#### **Desired Outcomes**

- To increase charitable income, raised or left by legacy to SaTH Charity year on year
- Increase the visibility of SaTH Charity as the Trust's Hospital Charity locally, measured by increased income and engagement.
- Community Engagement through positive media opportunities to promote SaTH to the population it serves through engagement and fundraising activity— 4 stories a month
- Enhance the reputation of SaTH locally relating to clinical outcomes, quality, kindness and as a caring organisation

Key Risks / Benefits	L	С	LxC	Mitigation
Funds are not spent to meet the expectation of donors and fundraisers	1	4	4	Expenditure is reviewed to ensure it complies to policy. With more support being made available to achieve effective spend.
SaTH Charity does not comply with charity commission requirements	1	4	4	The Charity Policy was again updated in February 2022 to provide the framework for compliance. Monitoring of activity and actions against the Policy.
Not spending charitable funds in a timely way	3	2	6	Briefing sessions held to explain the importance of spend aligned to operational planning objectives.

Q1 2023	Q2 2023	Q3 2023	Q4 2024	General Notes
April – May – June	July — August — Sep	Oct — Nov — Dec	Jan — Feb – March	Update on Q3 activity:
<ul> <li>British Ironworks NHS75 birthday Daisies to go on sale</li> <li>Implement first stage of legacy campaign and link to retirement sessions provided to staff</li> <li>Staff NHS Birthday Thank You Campaign go-live</li> <li>Quarterly Charity Supporters email to be sent</li> <li>Commence gathering information for the Annual report highlighting achievements over the last 12 months</li> <li>NHS Charities Together National Conference</li> <li>Corporate Partnership Planning</li> <li>Development of positive news and engagement stories 12</li> <li>Complete Stage 3 NHS CT final reports</li> </ul>	<ul> <li>NHS 75 Birthday</li> <li>Review initial plans for Christmas</li> <li>Quarterly Supporters email to be sent</li> <li>Submit draft copy of the Annual Report for review</li> <li>Promote our Lake Vyrnwy Half Marathon Runners</li> <li>Development of positive news and engagement stories 12</li> <li>Awareness campaign on Staff Lottery Sign Ups</li> <li>Summer promotion of Small Things Fund</li> <li>Recruit marketing role supported by NHS CT Development grant</li> </ul>	<ul> <li>Potential go-live of NHS CT Legacy Campaign</li> <li>Christmas Campaign with Christmas IPC approved decorations.</li> <li>Quarterly Supporters email to be sent</li> <li>Development of 12 positive news and engagement stories</li> <li>Winter promotion of small things fund</li> <li>Finalise the annual report with accounts</li> <li>Hold workshops for fund advisors, divisional directors and finance leads as required (Operations is now leading on this)</li> <li>Review the NHS CT Development Grant funded communications role to assess impact.</li> <li>Corporate Partnership progress report</li> </ul>	<ul> <li>Quarterly Supporters email to be sent</li> <li>Development of positive news and engagement stories 12</li> <li>Raise awareness of the Staff Lottery highlighting the impact it has made to staff</li> <li>Highlight key fundraising activity and planned spend</li> <li>To support staff through the Small Things make a Big Difference Fund. Make sure charity has a strong presence in all areas of the Trust to raise awareness and understanding of the charity.</li> <li>Raise profile of charity through actions on the Public Participation Plan</li> <li>Prepare NHS CT Development Plan 6 month review.</li> <li>Support the development of expenditure and fundraising plans as needed.</li> </ul>	<ul> <li>Legacy campaign was initially held back but was launched with a national TV advert campaign</li> <li>Christmas campaign very successful with 5,000 IPC compliant Christmas decorations made available to support the Trust—each with a Christmas greeting from SaTH Charity.</li> <li>Exposure through social media, press and internal channels continues to grow steadily. Fundraisers were asked and appeared on radio Shropshire. High media profile gained of various visits by Santa including by helicopter.</li> <li>Small Things Fund additional draw for big boxes of chocolates. Prizes to increase in January with the addition of 4 extra £50 prizes.</li> <li>The NHS CT Development Grant funded communications role has developed and is meeting plan.</li> </ul>



### Public Assurance Forum – 15 January 2024

Agenda item	2024/10			
Report	Quarter 3 Public Participation Report			
Executive Lead	Julia Clarke, Director of Public Participation			
	Link to strategic pillar: Link to CQC domain:			ain:
	Our patients and community	√	Safe	
	Our people		Effective	
	Our service delivery		Caring	
	Our partners		Responsive	
	Our governance		Well Led	$\checkmark$
	Report recommendations: Link to BAF / risk			
	For assurance		BAF 9	
	For decision / approval		Link to risk regist	er:
	For review / discussion			
	For noting			
	For information	$\sqrt{}$		
	For consent			
Presented to:				
Dependent upon (if applicable):	- N/A			
Executive summary:	This paper gives an update on the work of Public Participation (Community engagement, volunteering and SaTH Charity) for Quarter 3 2023/24  It is important that the Trust continues to engage and involve our local populations in a meaningful and inclusive way. COVID-19 has impacted on the ways we engage with our local communities; however, it is essential that we continue to have an ongoing dialogue with our communities, and ensure they have opportunities to be involved. This paper outlines how we have engaged with our local communities, an update on our volunteers and SaTH charity and where funding has been allocated across the Trust.			
Appendices	Appendix 1: Quarterly Public Participation Trust Board Report			

#### 1.0 Public Participation Team

The Public Participation Team consists of three main inter-related public-facing services

- Community Engagement
- Volunteering
- Charity management

Under the banner of Get Involved – Make a Difference the team <a href="https://www.sath.nhs.uk/about-us/get-involved/get-involved-public-participation/">https://www.sath.nhs.uk/about-us/get-involved/get-involved-public-participation/</a> there are lots of different ways to Get Involved and we've listened to feedback from our communities and made it easier to do. We reach out to engage with the public and the emphasis is on everything we do directly linking to our local communities.

#### 2.0 Community Engagement (slides 5-13 in accompanying presentation)

The accompanying slides contain more information

- 2.1 The Public Participation Team continues to engage with the public with a regular series of virtual and face to face meetings, About Health events and email updates. Our community members (4266) and organisations (466) continue to increase. (Slide 8 details)
- 2.2 The Public Participation Department has also been supporting our Trust to engage with our local communities around the Hospital Transformation Programme (HTP). The team has organised a number of events including public focus groups (aligned to the clinical workstreams) and About Health Events. (See slides 9-11) For more information please see our website: HTP Focus Groups SaTH
  - 2.3 Our Social Inclusion Facilitator has been making stronger links with a number of Seldom Heard Groups this Quarter focusing on rural communities, carers, BAME groups, veterans, looked after children, refugees as well as making links with other statutory organisation (such as Public Health) (Slide 12). The annual report on our equality work is available on our website and a recently published report on our social inclusion work <u>Our Equality Work - SaTH</u>
- 2.4 There were no questions following the Trust Board meetings this quarter

#### 3.0 Volunteers (Slides 13-16)

- 3.1 We currently have 278 volunteers, who have given over 5804 hours of volunteer time in Quarter 2 across a wide range of activities (see Slide 14). There are over 30 different role descriptions across all areas on the Trust including non-clinical support roles
- 3.2 We have held several volunteer focus groups in Quarter 3 including sessions on Hospitals Transformation Programme, Freedom to Speak Up and the Trust's draft communications strategy.
- 3.3 The volunteer team have successfully been awarded a £25K grant to develop a Volunteers to Careers Programme. The programme is focusing on careers within Midwifery. NHS England has provided funding to implement a Volunteer to Career project. The Deputy Director Experience & Partnership visited the Trust on the 14<sup>th</sup>

December to find out more about our Volunteer to Career programme. We received really positive feedback around the scheme and our volunteering services.

#### 4.0 SaTH Charity (Slides 20-23)

- 4.1 Income for the 3 months of Q3 2023 was £159,304 and expenditure for this period was £73,588. (Slide 20)
- 4.2 To date we have 1641 SaTH Charity Supporters and 923 members of staff are now playing the staff lottery (from zero when it was started four years ago) and half the funding is paid our in winnings to staff and half re-invested in the staff Small Things Big Difference Trust Fund.
- 4.3 The Trust has had a successful bid application approved by NHS Charities Together for £30K. The grant is to support the development of SaTH Charity by raising awareness around fundraising and improving the visibility of the charity. With funding from the grant, a Charity Marketing and Communications Officer has been appointed and are on track in delivering a project to increase awareness and promote SaTH Charity (Slide 21).
- 4.4 In Quarter 3 the charity approved 94 charitable fund requests across 14 different funds. Some of the items of expenditure in Quarter 3 are shown on Slide 22 along with the impact statements from staff showing the benefit for patients and hospital staff alike. It illustrates the benefit that can be created through fundraising and donations made to SaTH Charity.

#### 5.0 Q4 Forward Plan (summarised slides 24-26)

#### 5.1 General activity

- The Public Assurance Forum to meet on 15 April (last met 15<sup>th</sup> January 2024)
- Supporting staff with any future service changes engagement
- Supporting the HTP Communications and Engagement programme, including quarterly focus groups for the public and patients. There will be a focus on supporting engagement around specific interest groups (Learning disabilities, Young people and children, Mental Health)
- A Young People's Academy and a People's Academy to start in Q4
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public

5.2 Dates for your diary – please contact sath.enagagement@nhs.net or visit our website for more information Public Participation - SaTH

#### **COMMUNITY ENGAGEMENT MEETINGS**

Date	Time	Event	Booking
Tuesday 30 January 2024	18:30 - 19:30	About Health Event - Hospitals Transformation Programme	同的多年间
Wednesday 14 February	11am-12pm	Community Cascade	
Thursday 22 February	18:30 – 19:30	About Health Event - Electronic Patient Records	1333
Wednesday 12 March	11am-12pm	Community Cascade	
Tuesday 19 March	18:30 – 19:30	About Health Event – PALs and Complaints	回路经路
Wednesday 10 April	11am-12pm	Community Cascade	

#### **HOSPITAL TRANSFORMATION PROGRAMME FOCUS GROUPS**

Hospitals Transformation Focus Group			
Date	Time	Event	Booking
Tuesday 30 January 2024	18:30 – 19:30	About Health Event - Hospitals Transformation Programme	Website
Friday 8 March	10:00 – 12:00	Medicine and Emergency Care/Surgery, Anaesthetics and Cancer	Via email
Tuesday 5 <sup>th</sup> March	10:00 – 12:00	Women's and Children's	Via email

#### 6.0 Risks and actions

Risk	Action	Timescales
Fail to deliver the Public     Participation Plan, resulting     lack of confidence of our     communities	A detailed five-year action plan has been drawn up and progress is reviewed at each meeting by the Public Assurance Forum	On going
2. Fail to deliver statutory duties (s242) to engage with the public	Continue to support our Divisions to ensure they meet their Statutory Duties.	Ongoing
3. Staff not having the skills or confidence to engage with our communities	The development of an online training module, and resource pack for managers is available. This is the link to the online support SaTH Intranet - Public Engagement Our Legal Duties. It includes explanatory flowchart, various templates and the advice to contact the Public Participation Team for advice/support BEFORE engaging in any changes to current services. Meetings held with all the Divisions and many operational teams	In place
4. Public support through donations for SaTH Charity could start to recede as the levels of lockdown are reduced and the country returns to the new normal	Plan developed to build on awareness of SATH charity to link to local fundraising from individuals groups and corporate organisations. This also includes a Corporate and Legacy strategy for 2023/24	Ongoing
5. The risks of not having a joined-up approach to fundraising and volunteering would be a potential decline in income and hours donated, impacting on staff workload.	Stronger links have been built between the Charity and Volunteering team to align them as areas that are supported by the population. Both are supported by giving; time, money or both.	In place

#### 7. Recommendations

The meeting is asked to:

NOTE the current activity in Quarter 3 across the Public Participation Team

Julia Clarke

Director of Public Participation

January 2023



**NHS Trust** 

**Telford Hospital** 

### The Shrewsbury and **Public Participation Report Quarter 3 (October - December 2023)**

Julia Clarke – Director of Public Participation











Volunteering

Engagement

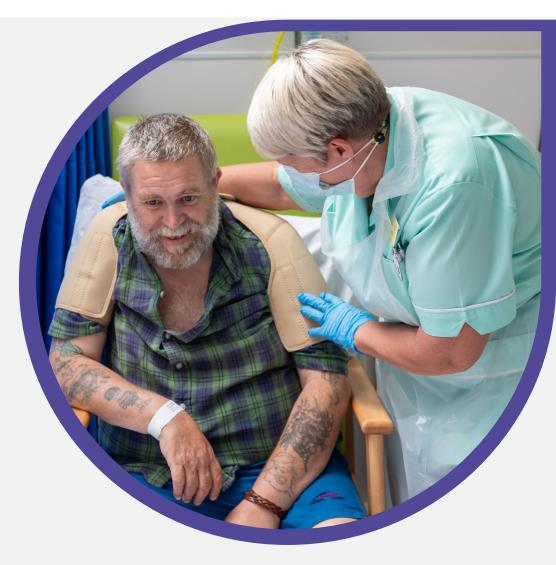
SaTH Charity

## **Highlights of Public Participation – Q3**



#### **COMMUNITY ENGAGEMENT** (for details see slides 5 – 13)

- The Public Assurance Forum met on the 15 January 2024 and the highlights of this meeting are outlined in slides 5-7
- The Public Participation Team continues to engage with the public with a regular series of virtual and face to face meetings, health lectures and email updates. Our community members (4266) and organisations (401) continue to increase
- Over the past Quarter, the Public Participation team have supported a number of HTP events with the public. These include a PRH Travel and Transport focus group (RSH was held in September) and an Autism and Learning Disability focus group. We have also attended a number of external groups including Parents Opening Doors (PODs) and Maternity and Neonatal Voices Partnership (MNVP)
- Our Social Inclusion Facilitator has been making stronger links with a number of seldom heard groups this quarter including focusing on rural communities, carers, BAME groups, veterans, looked after children, refugees as well as making links with other statutory organisation (such as Public Health). This work aligns with with our Trust and system focus on Health Inequalities (CORE20PLUS5) and EDI
- There were no questions following the public Trust Board meetings this quarter



# **Highlights of Public Participation – Q3**



#### **VOLUNTEERS** (for details see slides 14 – 19)

- We have 278 active volunteers within the Trust who have provided 5,804 hours of their time this quarter across 30+ clinical and nonclinical roles.
- The Deputy Director Experience & Partnership from NHSE (national level) visited the Trust on the 14<sup>th</sup> December to find out more about our Volunteer to Career programme. We received really positive feedback around the scheme and our volunteering services.
- After a successful pilot of our volunteer role on the children's ward, we have opened this opportunity to our wider volunteer workforce
- We have held several volunteer focus groups in Quarter 3 including sessions on Hospitals Transformation Programme, Freedom to Speak Up and the Trust's draft communications strategy.
- Volunteers Helen Shakespeare and Alison Westley took part in the official opening of the new front entrance at PRH by cutting the ribbon to this new development.

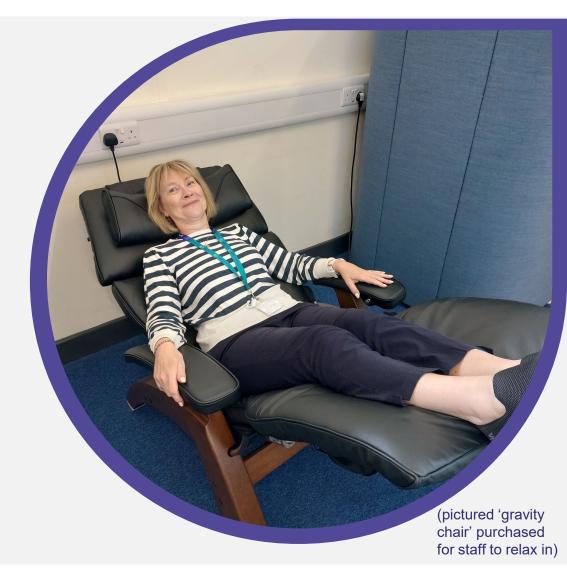


## **Highlights of Public Participation – Q3**



#### SATH CHARITY (for details see slides 20 – 23)

- Income for the 3 months September November 2023 was £159,304 compared to £87,848 in the same period last year. Expenditure for the same period was £73,588 compared to £114,184 in 2022.
- In Quarter 3 the charity approved 94 charitable fund requests across 14 different funds
- 1641 people are registered as SaTH Charity supporters (this includes staff and members of the public)
- Following a successful £30K grant from NHS Charities
   Together, we have appointed a marketing and
   communications officer and are on track in delivering a
   project to increase awareness and promote SaTH Charity
- Our supporters continue to fundraise for SaTH Charity in Quarter 3 some of which are highlighted within this report.



# COMMUNITY ENGAGEMENT (1): Public Assurance Forum 15 January 2024





# COMMUNITY ENGAGEMENT (2): Public Assurance Forum 15 January 2024







# COMMUNITY ENGAGEMENT (3): Public Assurance Forum 15 January 2024





### **COMMUNITY ENGAGEMENT**



The Community Engagement team hold a series of community events where the public across Shropshire, Telford & Wrekin and Powys are invited to join us virtually to find out more about their hospitals, which includes:

- Monthly email update An email update to our 4200+ members and organisations
- Community Cascade this is delivered twice a month following feedback from the public requesting an additional session in the evening
- About Health Events— There is an ongoing series of virtual health events for staff and the public.
- Over the past Quarter, the Public Participation team have supported a significant number of HTP events with the public. These include a Travel and Transport focus group at PRH to complement the RSH group held in September and an Autism and Learning Disability focus group. We have also attended a number of external groups including Parents Opening Doors (PODs) and Maternity and Neonatal Voices Partnership (MNVP)
- The community engagement team continue to attend a number of external events, listening to our local communities and sharing opportunities for them to get involved.



**Community Members** 

Total at 19/12/23 4266 1

Joined in Q3

241



**Organisations** 

Total at 19/12/23 401 🕆

Joined in Q3 6



**Community Events** 

Held in Q3

14

Attended in Q3

31

# **Getting involved with HTP**



The Public Participation Team has been supporting our Trust to engage with our local communities around the Hospital Transformation Programme (HTP). The team has organised a number of events including:

- Quarterly focus groups which are aligned to our clinical workstreams. Workstream focus groups have been planned over the next two years which will inform the plans as they develop towards implementation. We hold the focus groups every 3 months, and members can attend in person or via MS Teams. Two focus groups were held in early December for Medicine and Emergency Care with Surgery, Anaesthetics and Cancer and another focus group for Women & Children's services
- We are holding a series of specialised focus groups for example children and adolescents, mental health, dementia, RSH front entrance etc
- In November we also held our second **Travel and Transport Focus Group (PRH)**, which enabled the Trust and our partners to hear the concerns of the public, many of which are wider than HTP and will be taken forward by colleagues in Estates.
- Q&As and action logs from our focus groups are published in the public domain and can be found here with the Q&As from the focus groups held in March: <u>HTP Focus Groups – SaTH</u>
- PAF members are now allocated as public representatives on the 1:50 Clinical Design workstream meetings with the Architects and clinical teams
- Quarterly About Health HTP events have been delivered The next About Health event is on the
  evening of 30 January 2024 at 6.30pm



# Additional engagement routes



Event & Date	Subject
Community Cascade	Monthly Trust News Update including update on HTP
Monthly newsletter email update - sent to our 4000+ community members	Update from Public Participation team including HTP update and details on how to get involved
Three weekly 1:50 HTP Clinical design meetings in ED, acute medicine, critical care, maternity & children's services – Public Assurance Forum member representatives on each group	Detailed design discussions with architects and clinical teams
Quarterly Public Assurance Forum (next one January 2024) with representatives from organisations across health & social care in Shropshire, Telford & Wrekin & Mid-Wales	Presentation from HTP team with Q&As
SaTH Academies (Different academies offered to adults, young people, adults with learning disabilities and long-term unemployed in conjunction with employment agencies)	Presentation from HTP team with Q&As The People's Academy at SaTH
SaTH website and intranet	Webpages which support public engagement and Latest HTP meetings/feedback Public Participation - SaTH



# HTP Engagement in Quarter 3 & planned engagement in Quarter 4



#### **Engagement in Quarter 3 (October – December)**

- 4<sup>th</sup> October Shared Lives Carers
- 4<sup>th</sup> October Volunteer Focus Group HTP
- 9<sup>th</sup> October Public Assurance Forum
- 11<sup>th</sup> October Oswestry Town Council
- 13<sup>th</sup> October Llais Scene setting
- 17<sup>th</sup> October Ercall Magna & Waters Upton Parish Councils
- 2<sup>nd</sup> November Young People's Academy
- 7<sup>th</sup> November About Health Event HTP
- 14<sup>th</sup> November Learning Disability and Autism Focus Group
- 16<sup>th</sup> November MNVP focus group session for W&C's
- 17<sup>th</sup> November PRH Travel & Transport Focus Group
- 20<sup>th</sup> November Parents Opening Doors
- 23<sup>rd</sup> November People's Academy
- 5<sup>th</sup> December MEC & SAC Focus Group
- 7<sup>th</sup> December Women & Children's Focus Group
- 7<sup>th</sup> December Telford & Wrekin Council
- 13<sup>th</sup> December Newtown HTP Drop-in
- Monthly Community Cascade AM & PM

#### **Engagement Planned for Quarter 4 (January-March)**

- 15<sup>th</sup> January Public Assurance Forum
- 18<sup>th</sup> January Wrekin Area Committee (Shropshire Association of Local Councils)
- 30<sup>th</sup> January About Health HTP Update
- 15<sup>th</sup> February Young People's Academy (PRH)
- 5<sup>th</sup> March Women & Children's Focus Group
- 8<sup>th</sup> March MEC & SAC Focus Group
- Date TBC Montgomery Town Hall drop-in, invite from Montgomery Medical Practice Patients Association
- Date TBC NSRAF (Veterans Association), Wellington
- Date TBC Specialist focus groups (Children and Young People, Mental Health, Dementia)



# Community engagement - Social inclusion



- The bi-annual Market Drayton Health & Wellbeing Festival was held in 4
  October. Offering information on health and fitness this event is always well
  attended by the public and a wide range of organisations. This gives us a really
  good opportunity to talk to our local communities about things important to
  them.
- We attended the "Meet Your Health Providers" event in Whitchurch where we gave information to the public and other organisations about how they could get involved with their local hospitals.
- We attended a meeting of the Credu Carer's Support group in Welshpool, Powys on the 21 November. They were very interested in getting involved in the HTP, particularly the Learning Disability and Autism focus group planned in November.
- We were present at the Shropshire Council Public Health Department Community Engagement event in Ludlow 24 November. This is part of the partnership working we have developed with Public Health in Shropshire.
- We are visited Telford After Care Team (TACT) Women's Group on 1 December to listen to their view and talk about ways they can get involved at SaTH.
- We are exploring ways of developing partnership working with Ethnic Minorities & Youth Support (EYST) the Wales based minority ethnic support service.
- A visit was made to Shropshire Supports Refugees to discuss potential volunteering opportunities and wider involvement opportunities at SaTH as well as dealing with any concerns or access issues.
- We accepted an invitation to attend an Armed Forces Veterans event in Wellington (27 November) and another at RAF Shawbury (29 November), where we discussed a variety of relevant issues with the attendees.



### **COMMUNITY ENGAGEMENT:**

# The Shrewsbury and Telford Hospital

### **Questions from Trust Board meetings**

We look to identify any trends in questions to the Trust Board so that we can be responsive in planning future engagement events with our local communities. All eligible questions submitted to the Trust Board from the public are published on our website - Public Questions Log - SaTH

- During Quarter 3 no eligible\* questions were submitted to the Trust Board
- All eligible questions submitted to the Trust Board from the public are published on our website - <u>Public Questions</u> <u>Log - SaTH</u>



<sup>\*</sup> i.e. relevant to an agenda item and within 10 days of the meeting

## **VOLUNTEERS - Volunteers' Highlights**



#### We currently have 278 active volunteers at the Trust.

 The Deputy Director Experience & Partnership from NHSE (national level) visited the Trust on the 14<sup>th</sup> December to find out more about our Volunteer to Career programme, which we have developed following a successful grant from Health Education England. Feedback included:

"thank you again for organising such a fantastic day today. I was so impressed by all of the volunteers that I met today. They are clearly all so passionate about what they do and I learned so much from them all.

It's clear from the staff I spoke to just how much the volunteers are all valued by them as well."

- After a successful pilot of our new volunteer role on the children's ward we have now made this volunteer available to our wider volunteer workforce
- We have held several volunteer focus groups in Quarter 3 including sessions on Hospitals Transformation Programme, Freedom to Speak Up and our draft Trust communications strategy



# **Volunteer Highlights**



- Volunteers Helen Shakespeare and Alison Westley took part in the official opening of the new front entrance at PRH in November by cutting the ribbon to this new development.
- In November a volunteer Focus Group was held on our draft Communication Strat with Jenny Fullard, Head of Communications. Volunteers were able to provide feedback and suggestions to support the development of this strategy
- The volunteer team went to Condover College on 29 November, to promote the Youth Volunteer scheme and received 21 new applications.
- Volunteers helped support the William Farr Academy (for students hoping to pursue a career in medicine) with their work experience day. Volunteers helped students with a number of different tasks including mini-interviews. There was lots of positive feedback from the day including:

"Thank-you and the volunteers for making the mock interview session on the 30th of November such a success. I know that the students gained a great deal from the experience and that this wouldn't have been made possible without you and your volunteers." (Kevin Eardley, Consultant and Lead for the William Farr Academy)



### **Volunteer Highlights – Trust Awards**



In November we held our annual Volunteers Celebration event as part of the Trust Awards. We celebrated with our volunteers at a Volunteer Recognition Lunch Event which was held at the Albrighton Hussey Hotel. At the event we heard from four volunteers who spoke about their volunteering experience. Messages of thanks were given by Louise Barnett (CEO), Nigel Lee and Julia Clarke (Directors).











### **Volunteer Highlights – Trust Awards**



- The amazing work of our staff and volunteers were recognised through our Trust Awards.
- Judi and John Anderson were winners in the Volunteer of the Year Category, with Mel Amore and Peter Hicking as runners up.
- Patient Experience Volunteer, Lynn Pickervance, was runner up in the Partner of the Year Category.
- Volunteers Paul Baskerville and Rebecca Barker were runners up in the Sustainability/Green Awards for their work as Response Volunteers recycling walking aids (crutches etc).
- The work of Public Participation Team was also recognised in the Trust Awards as Poppy Horrocks, Public Participation Facilitator, took the prize as winner of the 'Ambitious' category for her work on the NHS Charities Together, Volunteers Future Fund project (developing our youth volunteering scheme)



#### Winner

#### John and Judi Anderson

When it comes to double acts they don't get better than the Andersons! John and Judi have contributed a combined total of over 1,000 hours of volunteering to PRH over their time with us. They truly demonstrate our Trust values in the roles they play. John and Judi are regular volunteers in Phlebotomy and the Discharge Lounge, as well as helping out in the Plaster Room and the Response Desk. John and Judi are often seen around the hospital together and their smiles and positivity radiate wherever they are.



Lynne Pickavance, Patient Representative



RSH Volunteers



Poppy Horrocks, Public Participation Facilitator

# Volunteer to Career (VtC Programme)



The aim of the clinically-led pathway is to provide volunteers with career support and interventions including career conversations, mentoring, guidance on career pathways, employability support and mock interviews and skills. Alongside this the volunteers also get the chance to volunteer for 50+ hours in a department or clinical area – currently the opportunity is on a postnatal/antenatal ward over a 6 month period.

The programme is focussed on building a skilled potential workforce for The Shrewsbury and Telford Hospital Trust.

#### **Feedback**

"I look forward to my shift every week, and only wish I could do more; however I cannot fit any more shifts in at present, but if this changes in the future, I'll definitely be putting my name down for more shifts. The staff are lovely, really pleasant, and accommodating, and some are even beginning to recognise me now, and I feel like a member of the team."

"I'm loving the shifts on postnatal, everyone is really helpful and friendly. They all seem to look out for each other, offering help. I've been shadowing both maternity support workers and women's services. It's amazing the range of roles on maternity!"

"Really enjoying postnatal at the moment, feeling like I'm learning a lot being there"

- NHSE visited the Trust on 14<sup>th</sup> December to find out more about the VTC programme and met with volunteers and staff.
- In October 17 volunteers from Cohort 2 joined us for the first of the pre-employability/ pre-education support session at PRH this session was delivered by the maternity educator facilitators and covered home births, birth preferences and a simulated birth, with (simulated) baby being safely delivered by Bailey!
- The volunteers have also been accessing their mentor, Rachel Armstrong (Clinical Lead) for career coaching calls throughout November & December.



### **Volunteer to Career (VtC)**





It has been great to meet all our volunteers in Maternity and see the enthusiasm for Midwifery. I hope this experience has been valuable for them and given them a taste of the rewarding and privileged job we get to do as Midwives and Maternity Support Workers. - Maternity Educator Facilitator



It has been a pleasure and privilege to be part of the pilot project for this initiative and support and guide our healthcare workforce of the future.-

**Clinical Lead** 





The team have all been honest and passionate about there roles which just makes me incredibly excited to hopefully get a place next year. You have been amazing to work with and it has provided us all with many opportunities for learning and developing our skills. Thank you, I'm really glad I signed up.- VTC Volunteer



### SaTH CHARITY - Highlights



Income for the 3 months September – November 2023 was £159,304 compared to £87,848 in the same period last year.
 Expenditure for the same period was is £73,588 compared to £114,184 in 2022. Income was boosted by the receipt of a Legacy of £45,000 but encouragingly remains higher than the previous year at a time when charitable donations are being reported nationally of being below that of 2022.

#### **During this period SaTH Charity had:**

- 362 monetary donation entries registered on the charity database across 26 different funds
- 31 donations were marked as 'In Memory' donations
- 923 members of staff are now playing the staff lottery
- 1641 people are registered as a supporter/donor/fundraiser (this includes staff and members of the public)
- The Staff Fund (The Small Things Make a Big Difference) had 58 requests for support to enhance the experience of staff at work, which also promotes the work of thee Charity.



## **NHS CT Development Grant**



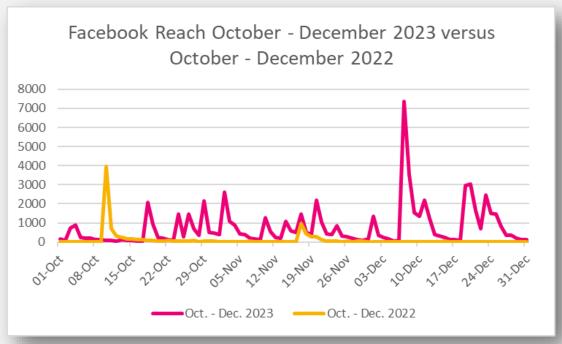
NHS CT have provided £30,000 of funding to support a Charity Marketing/Communications Officer with the aims of building the Charity brand, developing Social Media content and engaging with potential supporters and fundraisers.

The project is on track to deliver and all the pre-launch and planned Quarter 3 activities have been achieved. The delivery plan was updated in December to build on the learnings of the first 3 months to maximise opportunities through the areas of most success.

The Charity's Marketing/Communications officer continues to build relationships with the fundholders and other stakeholders, including actively engaging with fundraisers to make their activities even more successful and ensure exposure is gained to build the SaTH Charity brand.

Facebook and Instagram continue to see increased levels of reach\*, the graph opposite shows Facebooks reach from 01 October to 31 December 2022 versus the same period in 2023. Anecdotally staff are also commenting on the increased levels of activity and have stated they have enjoyed the recent posts.

The graph shows a more consistent posting schedule for the charity. Facebook and Instagram both reward accounts that post on a regular schedule.



\*Hootsuite defines reach as the following: "On Facebook, Reach defines how many people saw content from your Facebook Page, or about your Facebook Page (for example, a post you were tagged in)... Instagram defines Accounts Reached as the number of unique accounts who have seen your content on-screen at least once"



### SaTH CHARITY - Expenditure



In the three months to and including November there were **94** approved requests for charitable funds across **14** different funds. Examples of approved funding included:

- Endoscopy equipment to support the early diagnosis of cancer, funded from the Shropshire Blood Trust Fund.
- Wheelchair friendly picnic benches to support Ward 15 and their rehab work with patients.
- Ultrasound equipment in support of the Trust's Breast cancer activity
- Medical compliant gaming cart to support children during long stays in the Children's unit at PRH.
- Renal treatment chairs that provide a more comfortable experience for patients whilst they are undergoing treatment within Renal services.
- Plants to enhance outdoor areas for both patients and staff.

#### **Impact Statements:**

"Just to confirm the TV has arrived and is now fitted on the wall. The children are just watching Elf

### **SaTH Charity Support**



Our supporters continue to fundraise on behalf of SaTH Charity, in this quarter some of the highlights included:

- Family of the much-loved, local butcher, William Dodd, have raised over £6287 in his memory for the ITU garden at RSH. After they completed the swim the length of the channel on the 29th October at Bannatyne's Shrewsbury. They undertook a second challenge on 26 November where the family climbed Snowdon in memory of their dad and grandad.
- £2329 has been raised by family and friends of Michael Phillppou, who sadly passed away in June raised money for the Chemo Day Care Unit in his memory.
- The neonatal ward at PRH marked World Prematurity day by raising funds for SaTH Charity to fund memory boxes for parents. Making memories on the neonatal until helps parent's bond with their babies, which has a positive effect on the whole family's physical health and wellbeing. The neonatal team raised over £800 at the raffle.



#### **PUBLIC PARTICIPATION - Forward Plan**



- The Public Assurance Forum to meet on 15 April (last met 15<sup>th</sup> January 2024)
- Supporting staff with any future service changes engagement
- Supporting the HTP Communications and Engagement programme, including quarterly focus groups for the public and patients. There will be a focus on supporting engagement around specific interest groups (Learning disabilities, Young people and children, Mental Health)
- A Young People's Academy and a People's Academy to start in Q4
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public



### **Dates for your diary**



Date	Time	Event	Booking
Tuesday 30 January 2024	18:30 – 19:30	About Health Event - Hospitals Transformation Programme	同的公共同
Wednesday 14 February	11am-12pm	Community Cascade	
Thursday 22 February	18:30 – 19:30	About Health Event - Electronic Patient Records	133 (2)
Wednesday 12 March	11am-12pm	Community Cascade	
Tuesday 19 March	18:30 – 19:30	About Health Event – PALs and Complaints	
Wednesday 10 April	11am-12pm	Community Cascade	

**About Health** events are held on Microsoft Teams and take place 18:30 – 19:30. Further details and booking information can be found on our web pages here: <a href="https://bit.ly/SaTHEvents">https://bit.ly/SaTHEvents</a>

Hospitals Transformation Focus Group						
Date	Time	Event	Booking			
Tuesday 30 January 2024	18:30 – 19:30	About Health Event - Hospitals Transformation Programme	Website			
Friday 8 March	10:00 – 12:00	Medicine and Emergency Care/Surgery, Anaesthetics and Cancer	Via email			
Tuesday 5 <sup>th</sup> March	10:00 – 12:00	Women's and Children's	Via email			

If you are interested in joining a Focus Group please email sath.engagement@nhs.net



# People's Academy Dates for 2024







Thursday 15 February	PRH Education Centre
Wednesday 22 May	SECC
Wednesday 24 July	PRH Education Centre
Wednesday 30 October	SECC

Thursday 14 March	PRH Education Centre
Wednesday 26 June	SECC
Wednesday 25 September	PRH Education Centre
Wednesday 27 November	SECC

#### **Public Assurance Forum meetings 2024**

Monday 15<sup>th</sup> April 13.00-16.00

Monday 15<sup>th</sup> July 13.00-16.00

Monday 14th October 13.00-16.00