

AGENDA

Public Assurance Forum

Date: Monday 15th April

Time: 1pm – 4pm

Location: Microsoft Teams

OPENING MATTERS AND PROCEDURAL ITEMS

Item No.	Agenda Item	Paper No / Verbal	Lead	Required Action	Time
2024/13	Welcome and apologies	Verbal	Co-Chairs	For noting	13:00
2024/14	Minutes of previous meeting	Paper 1	Co-Chairs	For noting	13:05
2024/15	Matters Arising/Actions	Paper 2	Co-Chairs	For approval	13:10
2024/16	Update on HTP: <ul style="list-style-type: none"> • HTP Update Presentation • HTP Programme Board Engagement Report 	Presentation Paper 3	HTP team Hannah Morris	For approval For discussion	13:15
2024/17	Partner's updates	Paper 4	Forum Members	For approval	14:00
2024/18	PALS Patient Story and Update	Presentation	Julia Palmer	For discussion	14:15
2024/19	SATH Strategy & Partnership update	Paper 5	Director of Strategy & Partnership	For discussion	14:30
2024/20	EPR Update	Presentation	Rebecca Gillimore	For discussion	14:45
2024/21	Update on Service Developments: <ul style="list-style-type: none"> • Renal Dialysis (Twilight Service) • Pain Clinic 	Verbal Presentation	Lynne Morris Hazel Hughes	For discussion For discussion	15:05 15:15

	DNA Update	Presentation	Anna Martin	For discussion	15:25
2024/22	Supplementary Information Pack i. SaTH Divisional updates on key issues. ii. Public Participation Plan: 2023/24 Action Plan Update iii. Draft Public Participation Quarterly Board Report	Papers 6-8	Divisions Hannah Morris	For information – to address any comments /queries	15:35
2025/23	Any Other Business	Verbal	Chair		15:50
2024/24	Dates for the Forum for 2024 and close of meeting	Paper 9	Chair	To note	15:55

Public Assurance Forum

Held on Monday 15th January 2024
13:00 – 16:00hrs via MS Teams

MINUTES

Present:

David Brown	Non-Executive Director SATH (co-Chair)
Cllr Joy Jones	Powys County Councillor and Chair of Newtown Health Forum (co-Chair)
Kate Ballinger	Community Engagement Facilitator
Kara Blackwell (part meeting)	Deputy Director of Nursing
Julia Clarke	Director of Public Participation
Michelle Cole	Divisional Director of Nursing - SAC Division
Linda Cox	VCSA Deputy
Claire Evans	Centre Manager
Lydia Hughes	Senior Communication Specialist (HTP)
Aaron Hyslop	Public Participation Team Facilitator (HTP Engagement)
Cllr Joy Jones	County Councillor of Newtown East Ward
Sarah Kerr	Armed Forces Outreach Coordinator
Nigel Lee (part meeting)	Director of Strategy & Partnerships
Anna Martin	Acting Divisional Director of Operations – CSS Division
Hannah Morris	SATH Head of Public Participation
Jane Randall-Smith	Llais Representative
Graham Shepherd	Shropshire Patient Group Representative
Zain Siddiqui (part meeting)	Deputy Director of Operations - W&C Division

In attendance:

Rachel Fitzhenry	Senior Administrator (Minute taker)
Tom Jones (part meeting)	HTP Implementation Lead
Mary Aubrey (part meeting)	Programme Director Getting to Good
Rachel Webster (part meeting)	HTP Nursing, Midwifery and AHP Lead
Chloe Northover (part meeting)	Designer at Art Insite
Adam Ellis- Morgan	Assistant Director & Technical Lead for HTP

Item No.	Agenda Item
2024/01	Welcome and Introduction

	Cllr Joy Jones opened the meeting by welcoming the group to the MS Team meeting.
2024/02	Minutes of previous meeting (9th Oct 2023)
	The Minutes of the previous meeting on 9 th October 2023 were approved as an accurate reading.
2024/03	Matters Arising/Actions
	<p>Separate sheet attached.</p> <p>ACTION: Greg Smith informed the group there was a discussion at the previous PAF meeting about DNAs, and it would be useful to know how the hospital is dealing with DNAs.</p> <p>PREVIOUS MEETING: 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.</p> <p>ACTION: Nigel Lee asked colleagues from the Clinical Support Services division to provide an update on where we are with DNAs 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 easy for people to be able to take up their appointments.</p>
2024/04	Update on HTP
	<p>Rachel Webster and Tom Jones presented the update on HTP and briefed the group on the key areas:</p> <p><u>Where are we in the process:</u></p> <ul style="list-style-type: none"> • The Outline Business Case for the programme has been formally approved in the latest and penultimate stage of national approval. We are now preparing our Full Business Case (FBC). • The Independent Reconfiguration Panel (IRP) report has been published following the request by Lord Markham CBE, Parliamentary Under Secretary of State, DHSC, to provide formal advice in response to concerns raised by Telford and Wrekin Council which were set out in a letter sent to the Secretary of State for health and Social Care dated 20th March 2023. <p><u>1:50 design groups:</u></p> <ul style="list-style-type: none"> • The 1:50 design process has been running from September 2023 and the room designs completed in December 2023. • Within this process requirements for each room have been carefully considered and developed with support from our architects. • Each of the sessions to review the 1:50 designs have included Divisional teams, Infection Prevention Control (IPC), Health and Safety, Catering, Portering, Medical Engineering, Employee online (EoL) and Dementia teams as well as other colleagues within SaTH, colleagues from Midlands Partnership Foundation Trust (Mental Health, Autism and Learning Disability

Teams) alongside patient group representatives including Healthwatch and Maternity and Neonatal Voices Partnership.

- All the feedback has now been gathered to review and update designs where necessary.

Enabling works:

- The funding for the enabling works has been approved by the Department of Health and Social Care (DHSC) and NHS England.
- We have started our enabling works and from January onwards you will see some changes to car parking arrangements and road logistics at the RSH site.
- Throughout the enabling works we have protected patient parking, and we are encouraging staff to use the Park and Ride service where we have secured 250 spaces.

Enabling works – from 15 January:

- Contractors setting up temporary site cabins and hoardings, which due to the location of building works need to be close to the Emergency Department. These will be located on the main patient car park, close to the entrance on Mytton Oak Road.
- Redesignating the car park opposite the Hamar Centre from staff parking to patient and visitor car parking.
- Throughout the enabling works we will be producing a regular resident's newsletter to those who live in close proximity of the Royal Shrewsbury Hospital site, so our neighbours are sighted on works.
- We are encouraging staff to use Oxon Park and Ride, which is free for NHS staff. We also are working on a number of other initiatives to improve staff and visitor parking, as we know this will require multiple solutions.

Public involvement:

We are entering an exciting phase for the programme as we design the detailed patient pathways. We will continue to ramp up engagement and communications, working closely with our local communities, patients and colleagues to ensure we improve the experience for all the communities we serve.

- Our next HTP About Health event will be held on MS Teams on 30 January at 6.30pm.
- We have two specialised focus groups coming up: Mental Health - February 22nd, 10:00-12:00pm and Dementia - March 1st, 10:00-12:00pm.
- We are also identifying opportunities to involve our wider communities and those directly identified following the EHIA process.

If you would like us to attend an existing meeting or join you at an event, please email: sath.engagement@nhs.net

Upcoming focus groups can be found here: <https://www.sath.nhs.uk/about-us/get-involved/public-participation-2/get-involved-with-us-2/http-focus-groups/>

Chloe Northover presented the update on Design concepts and briefed the group on the key areas:

Design - Retreat Spaces:

We heard a need for places within the hospital to retreat to - places of comfortable light, quiet and nature - building upon affordances already baked into the architectural design.

- Parents of autistic children stressed the need for a space where a child on the brink of a crisis can be soothed.
- Neurodivergent patients who need to prepare themselves to move from one space to another.
- Flexible furniture arrangements and seating positions for children.
- Mothers who are breastfeeding or wanting to sit, meet and talk with other mothers.
- A place of rest for the elderly and patients with dementia.
- Spaces that are inclusive of wheelchairs and buggies.

Design - Who we've consulted:

So far, we have begun consulting with:

- SaTH's Dementia Lead
- Royal National Institute of Blind People (RNIB) Lead
- Clinical leads for neurodivergent children and young people

Research taken from:

- Stirling Dementia Guidelines
- RNIB wayfinding guidance
- Design for the mind - Neurodiversity and the built environment
- Makaton society
- Healthwatch Shropshire

Cllr Joy Jones suggested to Chloe Northover to make sure the seats are not too low for the elderly and for seats to have arm rests so people can get back up and out of their seats easier.

David Brown asked Adam Ellis-Morgan about parking spaces at Community Diagnostic Centres (CDC) and whether they can cope with this. Adam informed David there is a separate car parking group that has been established and has been set up, and they're meeting at this moment in time. There's another meeting tomorrow, so everything car parking, whether it be PRH, Hollinswood House or RSH, is currently being reviewed. There have not been any reports at this moment to say there will be an issue.

Julia Clarke informed the group there is now a park and ride scheme that we're encouraging staff to use to try to relieve some of the pressure on the RSH site for patient parking.

At PRH, another 60 spaces have become available as construction buildings have now been removed. There is a lot of work that we're doing to try and alleviate the problem, but PRH parking should get slightly better in particularly with the Community Diagnostic Centres (CDC) attracting some footfall away from the site, but RSH is going to continue to be a challenge.

Julia Clarke gave a brief update on the HTP Engagement Report from Public Participation Team (Community Engagement) – Quarter 3 2023/24:

We have had and are arranging a number of bespoke focus groups which are then fed back to the quarterly focus groups. If anyone joins one of the two quarterly groups (Women & Children and Medicine, Emergency Care, Surgery, Anaesthetics & Critical Care, they will receive an overview of what has been

	<p>discussed and the actions from the bespoke focus groups. We also hold quarterly About Health events on HTP to give our communities a general update on the programme. We have over 4100 community members and organisational members who receive our regular email update and our communities can also receive a brief update via our monthly Community Cascade meetings.</p> <p>Part of our Engagement Report is a 'You Said and We Did'. It's important that we are able to demonstrate that not only have we communicated with the public, but we've listened and responded to what they've said.</p> <p>In the report there is a summary highlighting all the actions from the focus groups which show where the team are up to, so the report is very important. It also goes to the HTP Programme Board, and it is to demonstrate the engagement and feedback we are receiving from our local communities around HTP.</p>
2024/05	Partner's updates
	<p>i) Llais Jane Randall-Smith gave a brief update on Llais:</p> <p>Llais is working in the 13 localities in Powys and focussing its engagement activities on a particular locality for a month at a time. Llais worked in the Builth Wells & Llanwrtyd Wells area during the month of November.</p> <p>In November, Llais published their reports on engagement in the Welshpool and Montgomery locality which was conducted over the summer. Links to these reports are below: https://www.llaiswales.org/news-and-reports/reports/llais-powys-report-what-we-heard-welshpool-and-montgomery-locality https://www.llaiswales.org/news-and-reports/reports/llais-powys-summer-shows-2023</p> <p>The report on Llais engagement in Ystradgynlais locality will be published early in January 2024.</p> <p>Llais joined the SATH HTP Team and North Powys Wellbeing Programme Team at the HTP public drop-in engagement session in Newtown on 13th December. Not many members of the public attended but those who did were able to have individual, detailed conversations about the transformation plans.</p> <p>We are attempting to get Llais representation at each of the HTP Focus Groups, either a staff or volunteer representative.</p> <p>ii) Shropshire Patient Group Graham Shepherd gave a brief update on the Shropshire Patient Group:</p> <p>Graham represents 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.</p> <p>The follow up expanded the patient involvement, which was "face to face". Graham joined the Emergency Department (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. Graham advised that his contribution was limited but the debate was informative and</p>

	<p>impressive. There was a broad selection of senior Emergency Department (ED) clinicians inputting.</p> <p>Graham also attended all Cascades and About Health which covered HTP and found all informative. However, he felt 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 this with Graham and the HTP team and these were very helpful.</p>
2024/06	<p>SaTH Transformation Team Update</p>
	<p>Mary Aubrey gave an update on the SaTH Transformation Team:</p> <p><u>Getting to Good: Phase 3</u></p> <p>246 milestones were delivered in the first two years of the G2G Programme, with 79 currently remaining.</p> <p>G2G has now fully adopted a revised Red, Amber, Green (RAG) rating and assurance processes in line with Maternity and Emergency Care Transformation and those remaining milestones will be delivered under that methodology.</p> <p>A monthly Operational Delivery Group (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.</p> <p>All evidence and exception reports are subject to executive approval prior to coming to the Operational Delivery Group (ODG) Assurance meeting.</p> <p><u>Project Progress Status</u></p> <p>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.</p> <p>Both Expansion of Medical Examiner Officers (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.</p> <p><u>Milestone Performance</u></p> <p>The overall delivery and progress status of the remaining 79 milestones within the overall G2G programme is shown here.</p> <p>Programme Highlights:</p> <ul style="list-style-type: none"> • <u>Emergency Care Transformation</u> – The Improve well 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, Computerised Tomography (CT), non-obstetric ultrasound, phlebotomy and point of care testing. • <u>Quality Governance</u> - 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. • <u>Emergency Care Transformation</u> – The Improve well 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.

- **Diagnostic Recovery** - 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.
- **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.
- **Digital Infrastructure** - Technical workshops commenced to review the next phases of Electronic Patient Records (EPR) due to commence in June 2024, following Patient Administration System (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).
- **Training and Education** – Teams moved into the new SaTH Education, Research, Improvement Institute (SERII) building with classes commencing and the Education Support Unit service in place.

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 to do.
- The final report is expected in early 2024.

David Brown asked how recruitment is going in theatres. Mary Aubrey informed the group it is improving but it's just taking time to have the team fully established, although it is progressing well.

Michelle Cole informed the group that several staff are going through their training period as well. So, although vacancies were filled, the training aspect is having a knock-on effect, which does impact on the figures. There is a career pathway from Band 2s upwards now and also for apprenticeships, Band 4s and nursing assistants, which is a new initiative since last year. It's quite a competitive market to get staff into Workforce.

David Brown asked if there was a robust retention policy. Mary Aubrey informed the group that if a member of staff leaves the team, they carry out an exit interview with them. There has been a reduction in the number of staff that are leaving.

Mary Aubrey left the meeting.

2024/07

SATH Strategy & Partnership update

Nigel Lee provided a summary of key actions within the SATH Strategy & Partnership update paper provided.

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)

The ICB STW Suicide Bereavement info page at:

- Suicide bereavement - NHS Shropshire, Telford and 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:

- www.thinkwhichservice.co.uk

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:

- NHS 111 '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.

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.

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.

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. 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.

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.

The Trust's Research and Development Strategy has been finalised and approved, and the Trust's End of Life Strategy has been finalised.

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>

David Brown mentioned place-based partnerships is an area that people will be focused on, and he wanted to know when it will be clear how funding will be devolved to those place-based partnerships. Nigel Lee informed the group it will continue to be a joint piece of work between the NHS and local authorities and working with partners such as the voluntary and charity sector to ensure that there are a set of joint objectives and working with the Post-Acute Care Enablement (PACE) Partnership, to understand how those objectives can be delivered and how that then translates in how they're commissioned and how the funding streams work. The outcomes will be driven by the Health & Wellbeing Boards and strategies and working with the PLACE partners.

The Integrated Care Board (ICB) has been working over the past three or four months, looking at strategic commissioning intentions (with local authorities as well as other partners), and looking at how other systems have done this. It's important we are clear about what our aims are together and looking at the best opportunities for doing that.

Jane Randall-Smith asked about the contact the Trust has with Powys Teaching Health Board and collaborative working with Mid Wales. Nigel Lee mentioned that he talks regularly with Betsi-Cadwaldr. It is an important strategic alignment, from the Shropshire system, more importantly from SaTH, particularly around all the developments in Newtown with the Health Park which is an important initiative. There are also communities within Powys that we are maintaining involvement dialogue with on HTP as well as other developments.

Kate Balinger assured Jane Randal-Smith, , the team are working with public health across Shropshire, Telford and Mid Wales.

Julia Clarke congratulated Nigel Lee on his new appointment as the substantive Director of Strategy and Partnership role.

Nigel Lee left the meeting.

2024/08

The Patient Safety Incident Response Framework

Peter Jeffries presented the Patient Safety Incident Response Framework update on the key areas:

- 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.

Progress

- Went live on 1st 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 it's 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).

David Brown asked how the team are handling near misses. Peter Jeffries informed the group that when staff report incidents on to Datix there is now a daily triage system involving members of the patient safety team. The process has now changed, daily, and all the day's Datix's are triaged. The team are starting to find they're taking some of the low, no harm Datix's forward into further review as it doesn't matter whether they're low or no harm as there could be some significant learning here as the team are starting to spot themes and patterns earlier and they can then liaise with divisions to keep them informed.

David Brown informed the group over the last 18 months; the backlog of Datix entries has come down from over 4000 to less than 1000. So, there has been a considerable amount of effort that's gone into clearing that backlog and that brings confidence back to the system.

Greg Smith enquired about patient safety partners and how long it will be before this post will be recruited too? Peter Jeffries informed the group roles should be advertised this week. We've liaised with colleagues nationally and had quite a lot

	<p>of conversations based on what we've learned already and how to maximise the roles which will be embedded into some of our key patient safety committees. In the first year these roles will be used to get the compassionate engagement of patients and families> The plan is to align these roles with our safety priorities, so they become involved in the safety priority programs and help us to make sure that the patient voices are at the heart of those programs.</p> <p>Jane Randall-Smith asked if there is opportunity for sharing learning across the hospital from this new system. Peter Jeffries informed the group that learning does get shared at the moment, but it doesn't always get shared as effectively as it could be. This piece work gives us an opportunity to improve how we share that learning, particularly around the improvement priorities. As part of that wider patient safety strategy, there will be work to define how we share learning. The team are setting up a monthly safety triangulation group that will help bring all our different intelligence together. It's a lever to help us get better at sharing learning which is part of the ethos of Patient Safety Incident Response Framework (PSIRF).</p>
2024/09	<p>Update on Service Developments</p>
	<p>Renal Dialysis</p> <p><u>Hollinswood House Telford</u></p> <ul style="list-style-type: none"> • On Tuesday 28th 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 of renal services has allowed the area to be converted back to an inpatient ward. <p>David Brown asked how Workforce are staffing the CDC in terms of the Renal unit as it moved from PRH. Kara Blackwell informed the group there has been previous investment, recruitment has not been an issue from a vacancy point of view.</p> <p>Julia Clarke informed the group that Renal are working more efficiently, previously due to COVID they had an issue around space but now they're able to accommodate more patients during the daytime. During COVID, they had to put on a twilight shift and now the plan is not to run that anymore. Patients that want a twilight session will be accommodated at Shrewsbury.</p>
2024/10	<p>Any Other Business</p>
	<p>David Brown mentioned one of the things that came up at the previous Board meeting was a Patient Advice and Liaison Service (PALS) presentation, will PALS be updating at the next PAF.</p>

ACTION: Rachel Fitzhenry to contact Ruth Smith to arrange a presentation on PALS in April PAF meeting.

Kate Ballinger informed the group there is an About Health event focusing on PALS on 19th March 2024 at 6.30pm, invites will be circulated.

Julia Clarke informed the group there are some papers in the information pack:

- Public Participation Strategy, on page 87 onwards, a plan on a page. These go to different committees; it highlights what has been achieved by the Public Participation team each quarter and what we're planning to do in the following quarter. The update is for information and for the Forum to raise issues regarding progress or assurance if they have any.
- Trust Board Report, on page 90 onwards, this will go to our Public Trust Board meeting in February. It's a summary of all the activity across the teams in the Public Participation Department of Community Engagement, Volunteers and SATH Charity. On page 98 of the pack there is a section on the Public Assurance Forum. We will pull together the main points that forum members have made today and put that into the Board report, it will then go to the public session of the board, so there is a direct route from the Forum to the Trust Board. Members were asked to contact Julia if they had any comments or issues, they wanted highlighting.

Julia advised that there had been many exciting things happening in the last quarter, with the Volunteers Award Recognition Event, some of the Charities activities, a lot of work by the Community Engagement team including work around HTP. Community Engagement are an important team and there is a slide on social inclusion which is another important part of the work that they do.

Hannah Morris informed the group in December we also had NHSE come to visit the department to look at our Volunteer to Career Programme, which has been successful. We've had one cohort go through focusing on maternity and we have had two individuals that are now at university studying Midwifery requesting that their placements are at SaTH. We also have a second Maternity cohort going through and we're looking at now the next cohort 3 focusing on Radiotherapy.

The group discussed the many success stories from past and present volunteers. **Cllr Joy Jones** thanked the team and mentioned that it would be good raise the profile of the Young People's Academy and the Volunteers

2024/11 Supplementary Information Pack

The divisions gave a brief update on their key issues:

i) Women & Children's
Zain Siddiqui gave the key updates from the Division.

Maternity
Workforce planning continues with no vacancies for midwives and Women Services Assistant's (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, Equality, Diversity & Inclusion (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.
- Up to date demand capacity modelling.

Paediatrics

- Continued to reduce agency gap and dependency on agency.
- Paediatric Transformation Assurance Programme – 9 Actions evidence & assured & 15 actions delivered not yet evidence – 21 % actions implemented.

Current or future service developments/changes and how the community is involved 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 Smoking Status at Time of Delivery (SATOD) figures in line with seasonal variation.

15 Steps with Maternity and Neonatal Voices Partnership (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

- Currently looking at 7-day service for Gynaecology Assessment Treatment Unit.
- Working with MNVP for Early Pregnancy Assessment Service (EPAS).

Paediatrics

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

ii) Clinical Support Services

Anna Martin gave the key updates from the 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.
- 3rd 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:

Current Diagnostic Management Standard 1 (DM01) performance (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 30th October and is currently located in Whitchurch.

Therapy outpatient waiting lists

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.
- Parental Initiated Follow-Up (PIFU) performance consistently above National and Trust target

Cellular Pathology

Within the regional network (N8) SaTH continues to achieve the best 7-day turnaround times.

Current or future service developments/changes and how the community is involved 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 outpatient 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 3rd 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

This programme involves the 3 local NHS Trusts (SaTH, RJAH and SCHAT) in developing an integrated pathway from GP referral to surgery if required, including post-operative care. The new service went live on 9th 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 27th 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.

iii) Medicine & Emergency

Key updates from the Division within the pack.

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.

iv) Surgery, Anaesthetics Critical Care & Cancer

Claire Evans gave the Key updates from the 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 relative's 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.

Implementation of Careflow

- 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 12th January 2024.

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 Otolaryngology, 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

Current or future service developments/changes and how the community is involved 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 patient's 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

Action update from previous meeting

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.

Michelle Cole mentioned the Elective Hub meeting, the team have asked for patient representation to attend, and we are waiting for confirmation with the lead for the PACE meeting on whether that's happened so far. It was a comment previously that we needed more patient representation on that meeting.

Julia Clarke advised if the team are not able to get patient representative for the Elective Hub, there is the Public Assurance Forum members, who all represent organisations.

ACTION: Hannah Morris to liaise with Claire Evans regarding representation for the Elective Hub.

Sarah Kerr asked is SaTH actively advertising recruitment opportunities to the military service leavers and spouses. **Julia Clarke** informed the group, everything that the Trust do is through the NHS job scheme.

ACTION: Julia Clarke to contact Louise Graham (Recruitment Manager) to have a conversation about actively advertising recruitment opportunities to the military service leavers and spouses. It would be something the Trust would be very keen to do if not doing already.

Julia Clarke thanked Claire Evans (who gave the update for Surgery, Anaesthetics & Critical Care) for her family's fundraising for the RSH Intensive Therapy Unit (ITU) Garden. Claire and her sister Lisa Marsden, who both work at the Trust, raised the money with their family in memory of their father, William Dodd. Julia expressed her thanks to the whole family who have raised over £6,000 which is an amazing contribution,

v) Patient Experience

Key updates from the Division within the pack.

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 1st October for 6 months initially. This is going well, and we have seen an increase in responses received.

Patient Safety

	<ul style="list-style-type: none"> • PSIRF was launched in December 2023. Work is ongoing to embed this across the Trust and the new processes and ways of working. <p>Current or future service developments/changes and how the community is involved in these changes:</p> <p><u>Patient Experience</u></p> <ul style="list-style-type: none"> • 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. <p><u>Patient Safety</u></p> <ul style="list-style-type: none"> • 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. <p>Action update from previous meeting</p> <ul style="list-style-type: none"> • EDS 2022 completed in November 2023 • PSIRF launched
2024/12	Dates for the Forum
	<p style="text-align: center;">Monday 15th April Monday 15th July Monday 14th October</p>

PUBLIC ASSURANCE FORUM ACTION LOG

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
15th January 2024						
2024/03	15/01/2024	Nigel Lee asked colleagues from the Clinical Support Services division to provide an update on where we are with DNAs 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 easy for people to be able to take up their appointments.	Anna Martin	15/04/2024	Anna has been emailed a reminder.Awaiting response.	IN PROGRESS
2024/10	15/01/2024	Rachel Fitzhenry to contact Ruth Smith to arrange a presentation on PALS in April PAF meeting.	Rachel Fitzhenry	15/04/2024	Julia Palmer will be giving the presentation on PALS in April.	CLOSED
2024/11	15/01/2024	Hannah Morris to liaise with Claire Evans regarding representation for the Elective Hub.	Hannah Morris	15/04/2024		OPEN
2024/11	15/01/2024	Julia to contact Louise Graham (Recruitment Manager) to have a conversation about actively advertising recruitment opportunities to the military service leavers and spouses. It	Julia Clarke	15/04/2024	Contacted Louise Graham who has made contact with Sarah Kerr re Veteran recruitment. Recommend to close	CLOSED
9th October 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
9th January 2023						
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	There is currently a digital working group reviewing the PP website. There will be an update once a plan is in place before the end of March '24.	IN PROGRESS

PUBLIC ASSURANCE FORUM ACTION LOG

CLOSED ACTIONS

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
9th October 2023						
	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 oatiens who DNA, as she is linking with the PPG groups and that information should come from them.	Kate Ballinger	15/01/2024		CLOSED
3rd July 2023						
2023/29	03/07/2023	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.	Julia 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	03/07/2023	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

PUBLIC ASSURANCE FORUM ACTION LOG

3rd April 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.	Members	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 Cawley	28/02/2022	Strategy now finalised and presented to Board	CLOSED
9th January 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

PUBLIC ASSURANCE FORUM ACTION LOG

9th January 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
2023/16	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 – 15 April 2024

Agenda item	2024/16		
Report Title	Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 4 2023/24		
Executive Lead	Julia Clarke, Director of Public Participation		
Report Author	Hannah Morris, Head of Public Participation		
CQC Domain:	Link to Strategic Goal:		Link to BAF / risk:
Safe	Our patients and community	√	BAF9
Effective	Our people		
Caring	Our service delivery		Trust Risk Register id:
Responsive	Our governance		
Well Led	Our partners	√	
Consultation Communication			
Executive summary:	<p>1. The Public Assurance Forum’s attention is drawn to the following sections:</p> <ul style="list-style-type: none"> • Engagement approach and engagement activities for Quarter 4 (page 1-5) • Summary of feedback received and actions to date (page 5 – 7) • A forward look of engagement activities planned for Quarter 1 2024/25 <p>2. The risks are:</p> <ul style="list-style-type: none"> • Fail to engage our communities around the Hospitals Transformation Programme, resulting in lack of confidence within our communities. • Fail to deliver statutory duties (s242) to engage with the public. • Staff not having the skills or confidence to engage with our communities. <p>3. We are have the following actions:</p> <ul style="list-style-type: none"> • An ongoing 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 • Continue to support our HTP team to ensure they meet their Statutory Duties. • The Public Participation Team are providing support to the HTP team to engage and involve our local communities and their representatives within the Programme. 		

<p>Recommendations for the Board:</p>	<p>The Public Assurance Forum is asked to:</p> <p>NOTE the current public engagement activity in relation to the Hospitals Transformation Programme in Quarter 4 2023/24 including:</p> <ul style="list-style-type: none"> • the engagement which has taken place during Quarter 4 • feedback received from our local communities and any actions taken as a result of the feedback • The engagement activities planned for Quarter 1 2024/25 <p>This report is provided for information only.</p>
<p>Appendices:</p>	<p>Appendix 1: Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 4 2023/24</p>

1.0 HTP Community Engagement Report (Quarter 4)

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 4 2023/24.

2.0 Engagement Approach and engagement activities for Quarter 4 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 4 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
15 January	Public Assurance Forum	Public and divisional representation attended	Update on HTP given, including Q3 Engagement report. Presentation published on website and minutes will be published once approved: Public Assurance Forum - SaTH

16 January	Telford Mental Health Forum	24 attendees (18 organisations represented)	Promoted forthcoming focus groups (specifically the mental health group)- strong interest from the group
18 January	Wrekin Area Committee (Shropshire Association of Local Councils)	20 Councillors from T&W parish councils	Overview of the latest information from the Trust including the latest update from HTP
30 January	About Health Event – HTP Update with HTP team	27 members of the public 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
2 February	Public Health Outreach, Brookside, Telford	Members of the public and community champions	Conversation with team members at Brookside Big Local - interested in HTP session for their community champions ~20 – arranged for April 2024
6 February	Connecting Communities, Telford Gurdwara	50 members of the public	Interest in HTP focus groups and potential for HTP session with >100 members of the Gurdwara. – Session arranged for April 2024
7 February	In Touch Telford	Members of Sightloss Shropshire	Discussions around a HTP focus group for individuals with Sightloss – Session being arranged for May 2024
7 February	T&W Chief Officers Group (Voluntary sector organisations)	20 organisations	Update on HTP was given and details of focus groups provided
12 February	League of Friends – HTP Update	Full Committee attendance	Presentation well received and useful questions and discussion
15 February	Young People's Academy	16 attendees	Presentation delivered by HTP
22 February	HTP Mental Health Focus Group	8 attendees (mostly from health-related organisations)	HTP presentation was given. Questions about s136 opportunities and positive feedback on design proposals. 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
27 February	HTP drop-in session, Hub on the Hill, Telford	Attended by 12 members of the public and local councillor.	Very lengthy chats about the project with largely positive outcomes, numerous misconceptions were addressed. Travel was the main concern; extra time in ambulance and getting home afterwards, or having visitors. Need for printed materials was emphasised by attendees.
1 March	HTP Dementia Focus Group	33 people attended	HTP presentation delivered. Good discussion and some really pertinent comments/feedback
5 March	Women's & Children's Focus Group	24 people attended	Very good engagement & feedback. Acknowledged the inclusion of previous feedback given into current design

8 March	MEC & SAC Focus Group	20 people attended	Numerous useful questions and comments, very productive meeting with a lot of thought about the new build as well as the repurposing of the existing W&C in PRH. 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
13 March	Market Drayton Patient Participation Group (presentation on HTP)	15 people attended	A presentation on HTP was given to participants, which was well received and very positive feedback about the changes.
14 March	HTP drop-in session, Montgomery Town Hall	37 members of the public	Good turnout, with meaningful conversations. Transport and parking were of great concern and there was some scepticism of the project going ahead and the timescale, but the plans were generally viewed favourably.
15 March	Joint Strategic Needs Assessment meeting, Ludlow	30 stakeholders	HTP discussed, local concern was regarding travel to the hospital, community transport options are limited and public transport is expensive.
20 March	RSH Main Entrance Focus Group	15 members of the public	Focus group held following feedback from the public. Positive discussions and feedback provided on the plans
21 March	SALC – HTP presentation to South Shropshire	9 Councillors attended	1 query relating to transport which is being followed up separately

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
Currently there is one bereavement suite in the new build plus the ability to flex a room to provide a second room if required. Is it possible to have two Bereavements suites with the flexibility of a third when required?	We have looked at our plans and following your feedback we have incorporated a second Bereavement suite with the flexibility to have a third if required. The Bereavement suites will have their own entrance and will have a lounge area attached
Losing a baby is very difficult, and it can be really challenging if the sound from the post-natal ward can be heard in the bereavement suite – will you soundproof these rooms?	Yes definitely, we will ensure these rooms are well soundproof, as well as the areas around them. We can separate the corridor by the suites from the main ward to ensure that other patients are not using it as a thoroughway.
Hospital can be really challenging for people with neurodiverse needs, particularly the noise and sound. How will the new build accommodate for our patients who have additional needs	We have worked with our focus groups to look at the designs, we are looking to identify Calm spaces within the new build (areas that have retreat areas, which will reduce acoustic levels and have softer lighting). We will look at having sensory maps throughout the building, which will identify calm spaces, areas which may be busy or quieter areas – this will support our patients and carers navigate the building.

Would it be possible to have fold down seating in the corridors – if you are pregnant or have mobility issues the corridors can be quite a challenge and it would be really helpful to have some seating in these areas?	Yes, we are looking at putting permanent seating and calm areas along our corridors. Hospital corridors can often look quite bland and uninviting spaces – we are planning to put seating along our corridors to make some of them social areas, and other calm areas. It's important that all areas of the new build is designed to support our patients visiting the areas – not just the clinical space.
Can the public be involved in wording and wayfinding – some of the terms such as “crisis rooms” and “SDEC” can be stigmatising or too clinical for patients to know what they mean?	We agree, it is important that both our staff and patients understand the names of different areas. We are working with our clinicians to look at the wording, but we will also be asking our focus groups to get involved and support this piece of work.
Consider one more than 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 of the new build – there will now be an entrance for emergency care and another for the rest of the building
Consider introducing free parking for community transport as it is often a difficult issue to manage	Links have been provided to community groups with our car parking team (within facilities) to action community vehicles being registered at our hospitals
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 quite isolating if in hospital	AHR will look to see what can be achieved in communal spaces with the maternity inpatient floor

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 Quarter 1 2024/25 is outlined below. There are many other events that the Public Participation team are attending alone (see Appendix 2)

Date	Event	Required attendees
4 April 2024	HTP drop-in event, Wem Town Hall	HTP, Public Participation
11 April 2024	SALC- HTP presentation to Central Shropshire	HTP, Public Participation
15 April 2024	Public Assurance Forum	HTP, Public Participation, PAF members
16 April 2024	SALC- HTP presentation to North Shropshire	HTP, Public Participation
17 April 2024	Market Drayton Health and Wellbeing Festival	HTP, Public Participation
18 April 2024	Brookside Big Local Resident Meeting	HTP, Public Participation
23 April 2024	Telford HOSC presentation	HTP, Public Participation
26 April 2024	One Voice Telford	HTP, Public Participation
30 April 2024	About Health Event – HTP	HTP, Public Participation
15 May 2024	Age UK, HTP drop in event	HTP, Public Participation
15 May 2024	Whittington Parish Council Annual Public meeting	HTP, Public Participation
18 May 2024	Children’s and Young People’s HTP Focus groups	HTP, Public Participation
20 May 2024	NSRAF (Vetrans) HTP presentation	HTP, Public Participation
23 May 2024	Young People’s Academy	HTP, Public Participation
26 May 2024	People’s Academy	HTP, Public Participation
3 June 2024	MEC & SAC Focus Group	HTP, Public Participation

7 June 2024	W&C Focus Group	HTP, Public Participation
13 June 2024	HTP drop in – Church Stretton	HTP, Public Participation
TBC	Sight Loss Shropshire – HTP presentation	HTP, Public Participation

5.0 Recommendations

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 4 (2023/2024)
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 1 (2024/25)

Julia Clarke
Director of Public Participation
April 2024

Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 4 2023/24

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 Public Assurance Forum of the engagement activity in the previous quarter (January – March 2024).

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:
 - 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, Mental Health, Dementia, Learning Disabilities and Autism

- **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 4200 community members and 400 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 4 2023/24

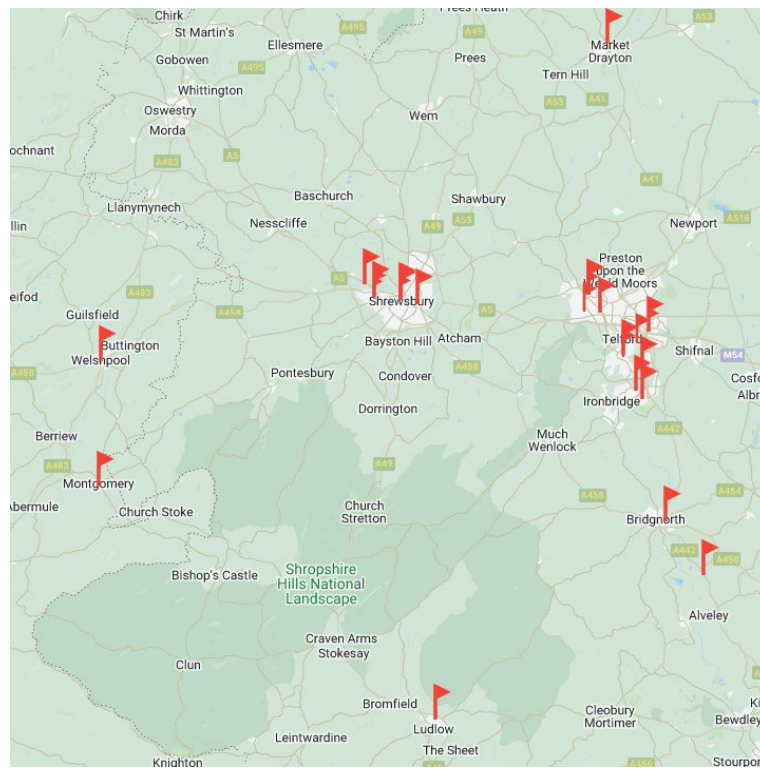
Engagement activity relating to the Hospitals Transformation Programme in Quarter 4 is outlined below:

Date	Event	Attendees	Outcome
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21 March	SALC – HTP presentation to South Shropshire	9 Councillors attended	1 query relating to transport which is being followed up separately

Please see the map below which highlights the areas of the Shropshire, T&W and Powys which were visited in Quarter 4:

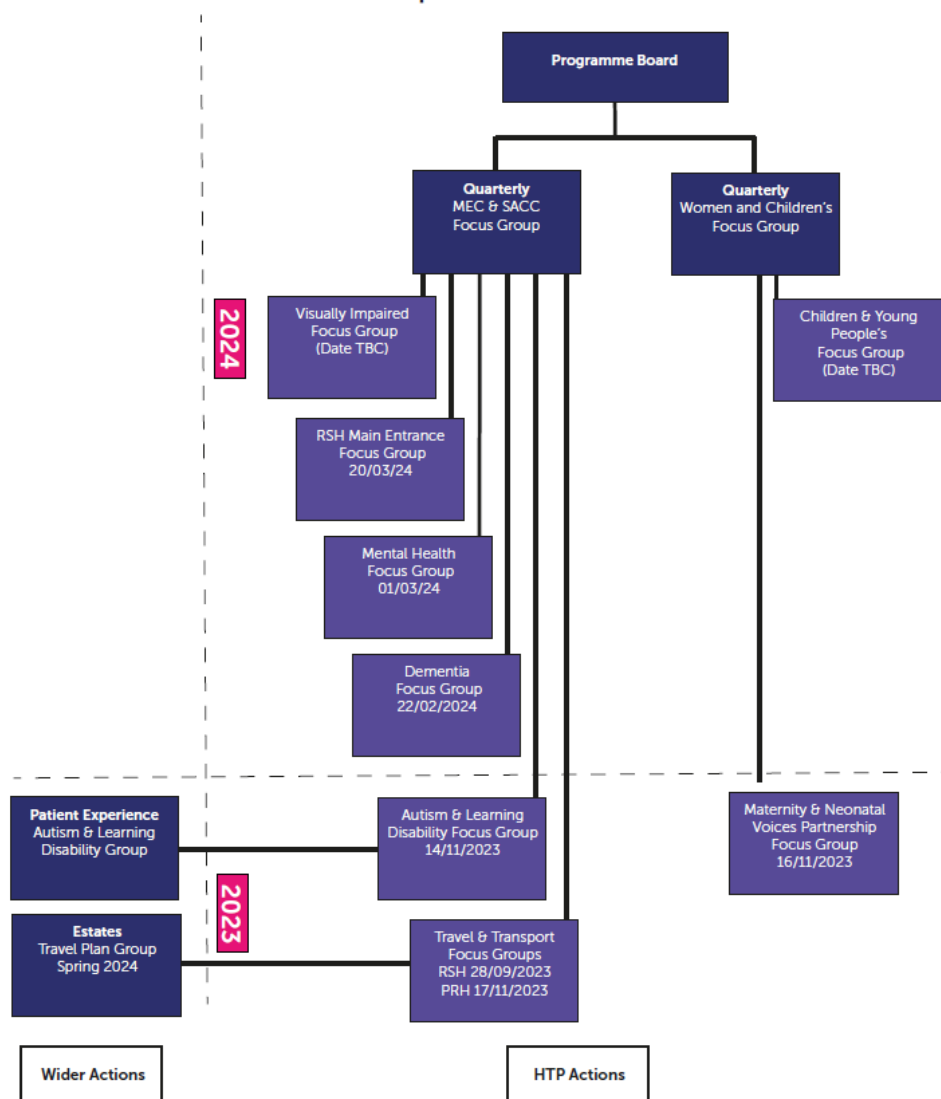


3. SUMMARY OF FEEDBACK RECEIVED AND ACTIONS TO DATE

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: [Hospitals Transformation 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. The diagram below 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 2023/2024



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
Currently there is one bereavement suite in the new build plus the ability to flex a room to provide a second room if required. Is it possible to have two Bereavements suites with the flexibility of a third when required?	We have looked at our plans and following your feedback we have incorporated a second Bereavement suite with the flexibility to have a third if required. The Bereavement suites will have their own entrance and will have a lounge area attached

You Said	We Did
Losing a baby is very difficult, and it can be really challenging if the sound from the post-natal ward can be heard in the bereavement suite – will you soundproof these rooms?	Yes definitely, we will ensure these rooms are well soundproof, as well as the areas around them. We can separate the corridor by the suites from the main ward to ensure that other patients are not using it as a throughway.
Hospital can be really challenging for people with neurodiverse needs, particularly the noise and sound. How will the new build accommodate for our patients who have additional needs	We have worked with our focus groups to look at the designs, we are looking to identify Calm spaces within the new build (areas that have retreat areas, which will reduce acoustic levels and have softer lighting). We will look at having sensory maps throughout the building, which will identify calm spaces, areas which may be busy or quieter areas – this will support our patients and carers navigate the building.
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Consider one more than 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 of the new build – there will now be an entrance for emergency care and another for the rest of the building
Consider introducing free parking for community transport as it is often a difficult issue to manage	Links have been provided to community groups with our car parking team (within facilities) to action community vehicles being registered at our hospitals
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 quite isolating if in hospital	AHR will look to see what can be achieved in communal spaces with the maternity inpatient floor

4. FORWARD LOOK

A forward look of current engagement Activity in Quarter 1 (April - June 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
4 April 2024	HTP drop-in event, Wem Town Hall	HTP, Public Participation
11 April 2024	SALC- HTP presentation to Central Shropshire	HTP, Public Participation
15 April 2024	Public Assurance Forum	HTP, Public Participation, PAF members

16 April 2024	SALC- HTP presentation to North Shropshire	HTP, Public Participation
17 April 2024	Market Drayton Health and Wellbeing Festival	HTP, Public Participation
18 April 2024	Brookside Big Local Resident Meeting	HTP, Public Participation
23 April 2024	Telford HOSC presentation	HTP, Public Participation
26 April 2024	One Voice Telford	HTP, Public Participation
30 April 2024	About Health Event – HTP	HTP, Public Participation
15 May 2024	Age UK, HTP drop in event	HTP, Public Participation
15 May 2024	Whittington Parish Council Annual Public meeting	HTP, Public Participation
18 May 2024	Children’s and Young People’s HTP Focus groups	HTP, Public Participation
20 May 2024	NSRAF (Vetrans) HTP presentation	HTP, Public Participation
23 May 2024	Young People’s Academy	HTP, Public Participation
26 May 2024	People’s Academy	HTP, Public Participation
3 June 2024	MEC & SAC Focus Group	HTP, Public Participation
7 June 2024	W&C Focus Group	HTP, Public Participation
13 June 2024	HTP drop in – Church Stretton	HTP, Public Participation
TBC	Sight Loss Shropshire – HTP presentation	HTP, Public Participation

5. **RECOMMENDATIONS**

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 4 (2023/2024)
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 1 (2024/25)

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: [Hospitals Transformation Programme Focus Groups - SaTH](#)

ACTION LOG FROM DEMENTIA FOCUS GROUP

Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
1st March 2024					
01/03/2024	Ensure that future presentations reflect the guidelines for contrast requirements for walls/floors etc.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to incorporate eye-level signage into wayfinding designs as well as signs higher up.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to investigate the use of colour to support wayfinding.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to review proposed (tree) artwork accompanying current signage and the use of colour-coded floors/lifts.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to plan in "named" clocks with location as well as time throughout.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to consider range of seating available (heights/support etc) at a later stage.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to review signage and colour scheme for toilet doors.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to review RJAH (Oswestry) hospital number methodology.	AHR/ArtInsight			Ongoing
01/03/2024	Gareth Bank to produce 3D designs of each department for the June focus groups for Women & Children's and MEC & SACC.	Gareth Banks			Ongoing

DRAFT ACTION LOG FROM MEC & SAC ACTION LOG

Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
1st March 2024					
01/03/2024	Ensure that future presentations reflect the guidelines for contrast requirements for walls/floors etc.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to incorporate eye-level signage into wayfinding designs as well as signs higher up.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to investigate the use of colour to support wayfinding.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to review proposed (tree) artwork accompanying current signage and the use of colour-coded floors/lifts.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to plan in "named" clocks with location as well as time throughout.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to consider range of seating available (heights/support etc) at a later stage.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to review signage and colour scheme for toilet doors.	AHR/ArtInsight			Ongoing
01/03/2024	AHR/ArtInsight to review RJAH (Oswestry) hospital number methodology.	AHR/ArtInsight			Ongoing
01/03/2024	Gareth Bank to produce 3D designs of each department for the June focus groups for Women & Children's and MEC & SACC.	Gareth Banks			Ongoing

DRAFT ACTION LOG FROM W&C'S ACTION LOG

Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
W&C 5th March 2024					
05/03/2024	Chloe Northover to provide images of the new plans from the presentations by the end of April to be placed on a board within the paediatric unit and the atrium.	Chloe Northover	07/06/2024		ONGOING

ACTION LOG FROM MENTAL HEALTH FOCUS GROUP

Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
22nd February 2024					
22/02/2024	Expand action 14 from MEC & SACC meeting 5/12/23 to include consideration of condition-sensitive language.	Gareth Banks AHR	31/05/2024	Update at MEC & SACC focus group on 3/6/24 10am-12noon	Ongoing
22/02/2024	Ensure there is age-appropriate accommodation for young people (older children) in ED paediatric waiting areas and treatment rooms.	AHR/ArtinSite	31/05/2024	Update at MEC & SACC focus group on 3/6/24 10am-12noon	Ongoing

Appendix 2

Wider engagement events which the Public Participation Team are attending next quarter includes:

DATE	EVENT	VENUE	TIME
3 April	Telford Patients First	Face to Face	2pm-4pm
15 April	Public Assurance Forum	MS Teams - live	1.00pm – 4.00pm
17 April	<i>Market Drayton Health and Wellbeing Festival</i>	<i>Face to Face</i>	<i>10am-2pm</i>
1 May	Telford Patients First	Face to Face	2pm-4pm
9 May	T&W Chief Officer's Group (Voluntary sector organisations)	Face to face	2pm-4pm
22 May	Young People's Academy	Face to Face	9am-4.30pm
29 May	Volunteer Week – Volunteer Thank you event	Face to Face	1pm-3pm
18 June	About Health Event – CQC Inspection	MS Teams	6.30pm-7.30pm
26 June	Peoples Academy	Face to Face	9am-4.30pm
29 June	Armed Forces Day (Shrewsbury)	Face to Face	TBC
30 June	Armed Forces Day (Telford)	Face to Face	11am-4pm

Public Assurance Forum	
Member Update	
Name of Organisation: Name of Member: Date: Monday 15th April 2024 Time: 1.00- 4.00pm Location: Microsoft Teams	
1.	Key updates from member organisation <p>The reports referred in our last update have been published and can be found at the links below:</p> <p>What We Heard in Ystradgynlais: https://www.llaiswales.org/news-and-reports/reports/llais-powys-report-what-we-heard-ystradgynlais-september-2023</p> <p>What We Heard in Built Wells & Llanwrtyd Wells: https://www.llaiswales.org/news-and-reports/reports/report-what-we-heard-built-wells-engagement</p> <p>Throughout the month of February, we carried out our locality focused engagement in Llanidloes area. We will be holding a workshop with Powys Teaching Health Board and Powys County Council to share with them the main themes of what we heard from the public, discuss areas of work which are already underway, and identify some actions which will be taken forward. This will provide us with outcomes which we can report back to the public and we will be able to monitor the progress of the planned actions.</p> <p>We were pleased to be able to join the SATH HTP Team at the public drop-in engagement session which was held in Montgomery on 14th March. Some of the comments we heard from public about SATH related to poor communication between hospital and GP, difficulties parking at RSH, lengthy and uncomfortable wait in A&E (some people reported that they are choosing to attend Bronllais Hospital in Aberystwyth instead of Shrewsbury).</p> <p>Llais will be holding its first national conference in Cardiff on 24th April. An invitation is open to members of the public, stakeholders in the NHS, Local Authorities, Regional Partnership Boards and third sector organisations.</p> <p>Places can be booked via the link below:</p> <p>book your space now</p>



**SHAPE THE FUTURE OF SERVICES:
 JOIN A NATIONAL CONVERSATION WITH LLAIS**

Connect, contribute and share as we reflect on our goals and priorities for the next phase of our work.

Wednesday 24 April 2024, 10am – 3pm
Principality Stadium, Cardiff

With guest speakers, discussion and a chance to change the way we work for the people of Wales.

To join the conversation, book your place here.

FOLLOW US ON SOCIAL MEDIA FOR FURTHER UPDATES:

LLAIS 
 Eich llaï mewn iechyd | Your voice in health
 a gafal cymdeithasol | and social care

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

None

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

Report by: Andrea Blayney, Deputy Regional Director
Date: 9 April 2024



PALS and Complaints

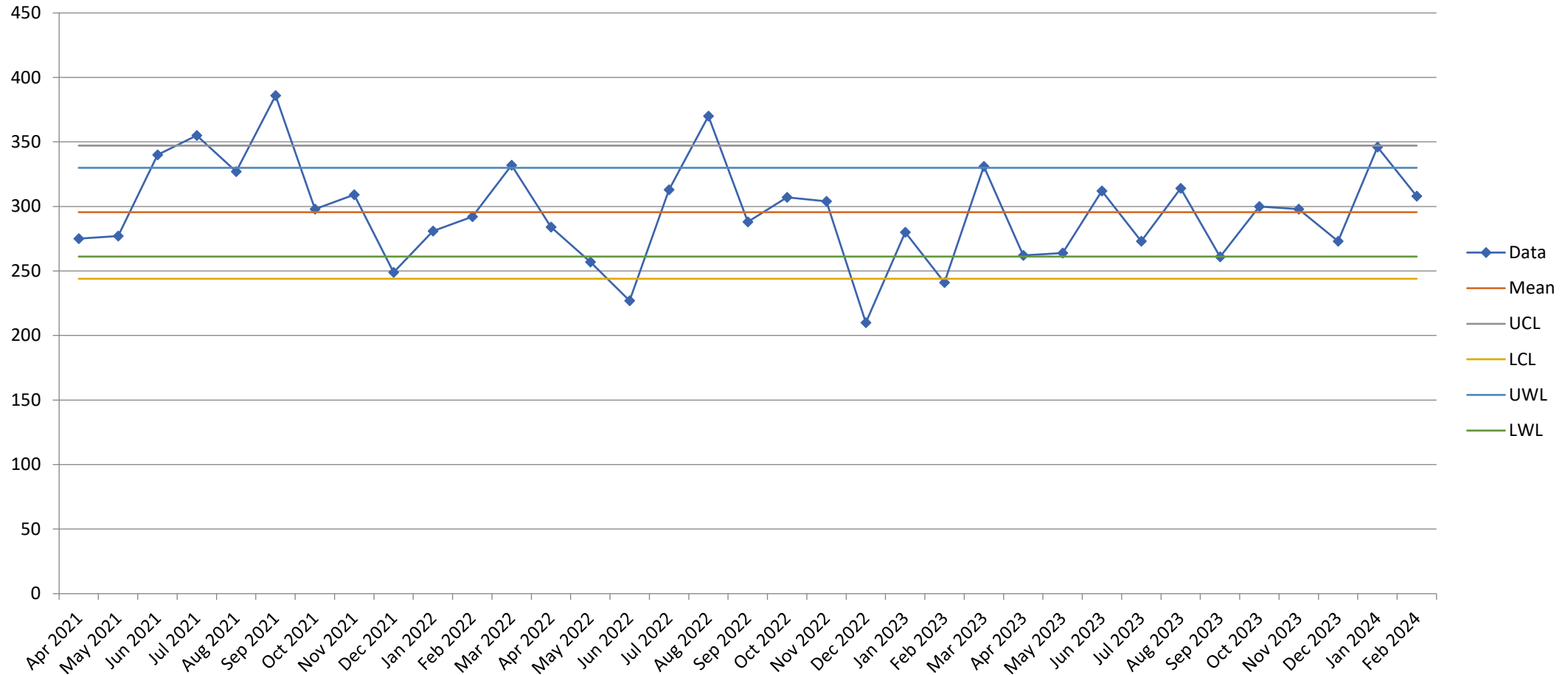
Julia Palmer
Head of PALS and Complaints

PALS



- **Patient Advice and Liaison Service**
- Informal on the spot resolution
- Signposting and support
- Contactable by phone or email
- Located centrally on both sites
- Can come to ward/clinical area to speak to patient / relative, or make appointment to see them

PALS Contacts



Main Themes



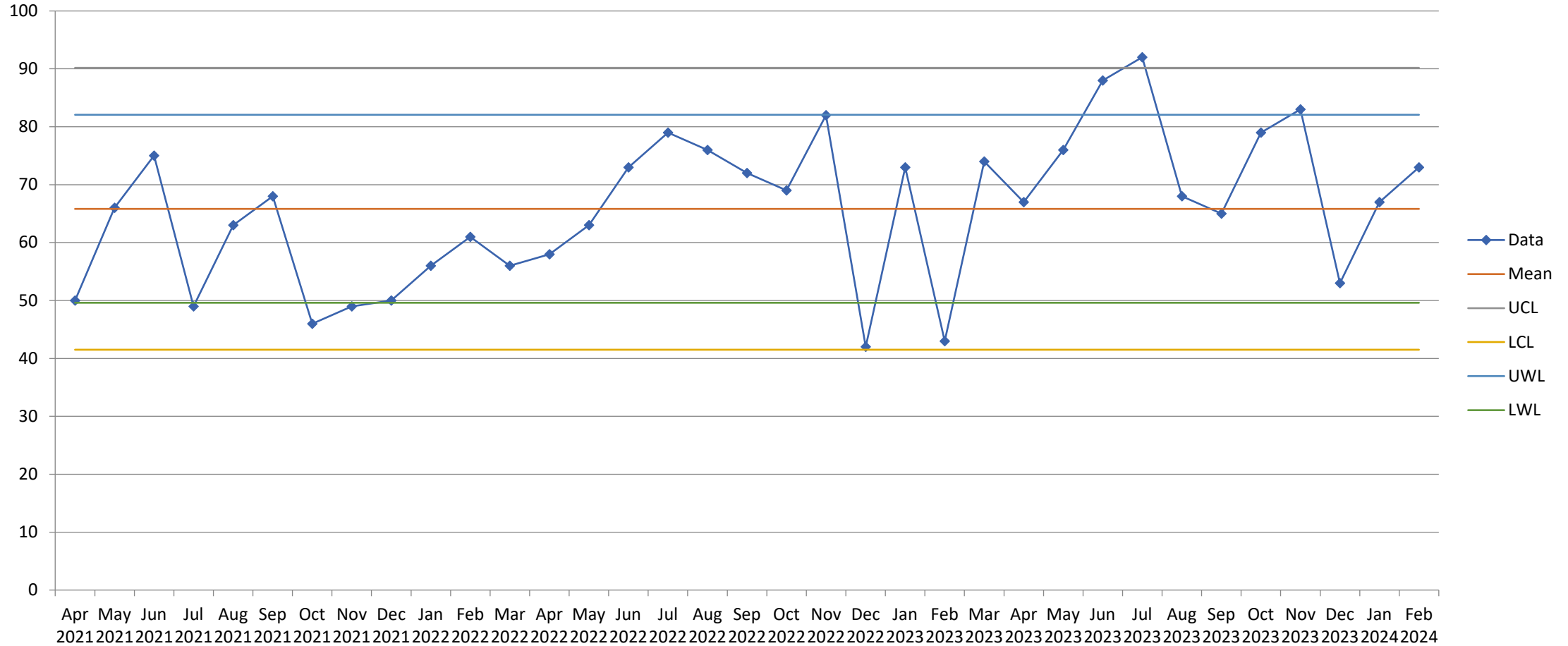
- Communication – not knowing what's happening, conflicting information, not called back
- Immediate issues re: environment, pain relief, delays with discharge etc.
- Appointments – waiting times and cancellations, reinstatement of services
- Car parking
- Waiting times in Emergency Department

Complaints



- A **complaint** or concern is an expression of dissatisfaction about an act, omission or decision, either verbal or written, and whether justified or not, which requires a response.
- An opportunity to learn

Complaints



Process



- Written acknowledgement
- Investigation
- Meeting where appropriate
- Response from CEO
- Ongoing learning and changes in practice
- Parliamentary & Health Services Ombudsman

Main themes of complaints



- Treatment – delays in diagnosis and treatment
- Communication
- Discharge
- Waiting times

Learning from PALS and Complaints

- Change in letter wording
- **Change in daily ward rounds to include discharge assessor and structured discussion about any palliative care referrals**
- Updating of patient information leaflets (e.g. contact lenses)
- **Posters explaining process in SAU**
- Information leaflet about SDEC
- **Quality audits**

Learning from PALS and Complaints

- Introduction of the Tissue Viability trolley in ward, which allows nursing staff quick access to correct pathway and correct dressing as advised by Tissue Viability Nurse specialist
- **Introduction of system where the doctors can leave a card in the notes to indicate that treatments have been requested for patients in the Fit to Sit area. Team to look at introducing this in the Majors area**
- New visual indicators being developed to ensure staff are aware of those patients who need extra support with hydration.

Learning from PALS and Complaints

- Introduction of champions for dignity and inclusion
- Training from specialist teams

Governance



- **Staff are employed by the Trust**
 - Pros – Clear understanding of Trust workings, can quickly resolve queries
 - Cons – questions around independence
- Use of Healthwatch, ICB, independent view from senior staff in Trust, external independent review where appropriate
- **Approval process for complaints responses**
- PACE
- **PHSO process**

Plans for the future



- Ongoing improvements in response rates
- Follow-up of learning / actions
- Increase in PALS staff
- Increased visibility
- Weekend working
- Improved system for recording thank yous

ANY QUESTIONS?

Public Assurance Forum Meeting: 15 April 2024

Agenda item		2024/19		
Report Title		Strategy & Partnerships Update		
Executive Lead		Nigel Lee, Director of Strategy & Partnerships		
Report Author		Carla Bickley, Associate Director of Strategy & Partnerships		
CQC Domain:		Link to Strategic Goal:		Link to BAF / risk:
Safe	√	Our patients and community	√	BAF1, BAF2, BAF3, BAF4, BAF6, BAF7, BAF8, BAF9, BAF10, BAF11, BAF12, BAF13, BAF14, BAF15
Effective	√	Our people	√	
Caring	√	Our service delivery	√	Trust Risk Register id:
Responsive	√	Our governance	√	
Well Led	√	Our partners	√	
Consultation Communication				
Executive summary:		<p>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.</p> <p>This paper provides a summary of key areas.</p>		
Recommendations for the Forum:		The 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)

2.1 Health and Wellbeing Boards and Place Partnership Boards

February primarily focussed on Children and Young People, some highlights included:

- Across Shropshire, Telford and Wrekin (STW) there is a variety of services and support available to help support mental health problems in children and young people. To find out more about these services and support, [click here](#).
- The refreshed 2023/2024 Children and Young People's Mental Health Services Transformation Plan for Shropshire, Telford and Wrekin has now been published.
- A dedicated service provided by With You is available for young people aged under 18 years old who live in Shropshire and are worried about their drug, alcohol and substance use or someone else's. Access is via an online chat, or via 01743 294700.
- Telford & Wrekin Council has opened its third Family Hub. The Oak Family Hub, which is located at The Wakes in Oakengates, officially opened its doors on Saturday 27 January. Family Hubs offer a single location for families to visit to get information, guidance, and support on a range of services, including infant feeding, mental health, healthy lifestyles and parenting classes.
- Shropshire Council has launched a new Early Help strategy to make sure that all children, young people and families in Shropshire are able to access the support they need, when they need it. The new plan has been developed following engagement with young people, families, early help workers, schools and partner agencies, to find out what early help means to our communities and how the existing services in the county could be improved.
- On 24 February 2024 Shropshire Women's and Children's Centre at the Princess Royal Hospital held a maternity services open day to meet the team, join a guided tour of the unit, watch simulation training visit information stalls.

In Telford & 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, 9:00am-5:00pm) 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.

Telford & Wrekin held a parent and carer summit for children with Special Education Needs and Disabilities (SEND) as part of an ongoing commitment from Telford & Wrekin Council and NHS Shropshire, to strengthen links across the SEND community to improve the experiences and lives of children, young people and their families. The aim is to raise awareness of the support available and improve two-way communication between the SEND community and partners working in the local health, education and care system.

Shropshire Council's 'Five ways to winter wellness' campaign was launched which aims to help Shropshire residents keep well during the winter months not just physically but mentally too.

Some highlights of work in March included:

- “Think Pharmacy First” campaign was launched whereby patients in Shropshire, Telford and Wrekin can now get treatment for seven common conditions at their community pharmacy without needing to see a GP. The seven common health conditions, which will now be supported by highly trained pharmacy teams and part of the Pharmacy First offer, include sinusitis, sore throat, earache, infected insect bites, impetigo, shingles, and uncomplicated urinary tract infections in women.
- Two Rehabilitation and Recovery Units have opened on our SATH sites for people who no longer need to be in an acute hospital bed but can't be supported safely at home. The care at the units will be delivered by Shropshire Community Health NHS Trust.
- Our Local Maternity & Neonatal System (LMNS) team in Shropshire, Telford and Wrekin, a partnership of organisations, women and their families working together, has launched a new website full of information to support people through pregnancy, labour and beyond. To access the new website, visit www.stw-lmns.com.
- Shropshire, Telford and Wrekin's NHS Talking Therapies, delivered by Midlands Partnership University NHS Foundation Trust, is launching a new marketing campaign. The campaign aims to raise awareness of NHS Talking Therapies which provides free help to people aged 16 and over who are experiencing common mental health problems such as low self-esteem issues, depression and anxiety disorders. People can access NHS Talking Therapies by self-referring themselves (as long as they are registered with a GP Practice), or via a GP referral.

2.2 Integrated Care Board

Work continues to progress in relation to the implementation of a revised ICB Governance Framework, developing the system operating model including strategic commissioning intentions, and building momentum and plans with place-based partnerships and provider collaboratives.

The system continues with the implementation of the Joint Forward Plan focussing on public health management, 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, cancer and planned care. The Joint Forward Plan was first published in June 23 and will be refreshed for June 24.

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 the areas included in the joint forward plan (as detailed above). A formal arrangement with the 4 NHS Trusts in STW has been developed with the establishment of a Committees in Common framework, to harness optimum benefit of working together in key workstreams. Updates on the workstreams and the function of the Committees in Common has been discussed with the ICB and NHSE, and forms part of future developments and planning for 2024/25. A report on the provider collaborative was presented to the Integrated Care Board at the end of January 24.

Alongside the work in STW, collaborative working with University Hospitals North Midlands continues to be positive. Opportunities in Cardiology, Microbiology and Maxillo-facial are being explored; joint work in robotic surgery continues, working to optimally use robotic theatre capacity across both Trusts. N8 Pathology Network development also continues, with a review of plans for 24/25 planned in mid-March.

3.2 Health Inequalities

A paper outlining the Trust's actions on health inequalities was presented to our Trust Board of Directors Meeting held in March 2024. Whilst SATH works closely with all system partners in this area, the Trust does lead in some workstreams. Work continues in supporting the National Health Inequalities Ambassador Programme and our systemwide public health, prevention and health inequalities agenda.

3.3 Internal Strategies

We are currently in the process of developing an NHS Impact (Improving Patient Care Together) programme of work. NHS Impact was launched by NHS England to support all NHS organisations, systems and providers at every level, including NHS England, to have the skills and techniques to deliver continuous improvement. NHS Impact is a single improvement approach to support organisations, systems and providers to shape their strategy underpinning this with continuous improvement, and to share best practice and learn from one another with a focus on the following five components:

1. Building a shared purpose and vision
2. Investing in people and culture
3. Developing leadership behaviours
4. Building improvement capability and capacity
5. Embedding improvement into management systems and processes

Trust representatives attended an NHS England Midlands Regional event whereby further work is progressing internally. It will be important to cross reference streams of work with existing projects (at Trust and system level), to avoid duplication.

Work continues to align and embed our Trust Strategy into the operational planning development for 2024/25. In addition, National guidance in relation to the Joint Forward Plan has also been launched, this will run alongside the operational planning rounds.

In parallel, preparations are underway in relation to the Trust annual report, including new sections such as our legal responsibilities pertaining to health inequalities.

Our Digital Strategy is progressing with the planned go-live date for our Patient Admin System replacement and introduction of an Emergency Department IT system commencing on 19 April 2024.

4. Recommendation

The Public Assurance Forum is asked to NOTE the report.

Chronic Pain Service SaTH

Graeme Kendall - Centre Manager

Mr Rob Turner - Clinical Lead

15 April 2024

Please note this presentation is to engage with the public and our local communities



Background

BACKGROUND

For most patients, after discussions with their GP, self-management of their pain is often effective and the most convenient option.

If this is unsuccessful, GP's / Consultants can directly refer patients to the specialist community pain management service. In Shropshire, this will always be **Connect Health** in the first instance. This service offers individualised advice, care, and support for patients with long term or chronic pain, including with management of medicines.

For a small proportion of patients, **Connect Health** may decide to refer to the Chronic Pain consultant at Shrewsbury and Telford NHS Trust. The hospital-based service has access to specialist interventions which may be offered after an initial assessment. These may include medication management and interventions such as injections, radiofrequency lesioning and spinal cord stimulation. Unfortunately, we do not take direct referrals into the service

Current Position

- How many patients are currently being treated and or accessing the service?
 - In the last 12 months 122 patients had access to the service
- Are the patients from a specific geographical area?
 - Shropshire / Telford and Wrekin / Powys
- Is there a waiting list for the service and if so how many patients?
 - Previous waiting list peaked at 48 patients. All patients have now been treated and referred back to their GP
- What are the issues with the current service provision?
 - The service was provided as a single Consultant Led Pain service and unfortunately the Consultant is leaving SaTH Trust – the Trust

Proposal

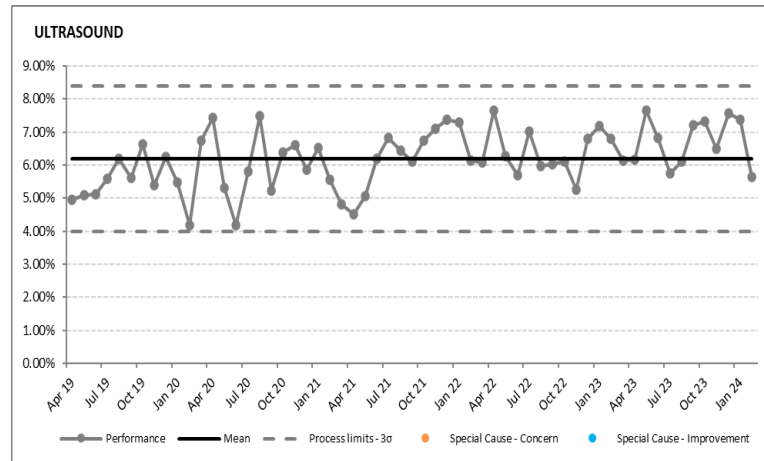
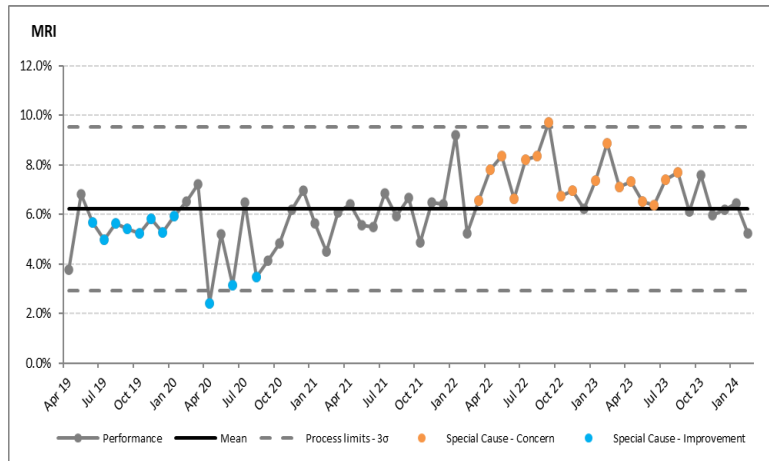
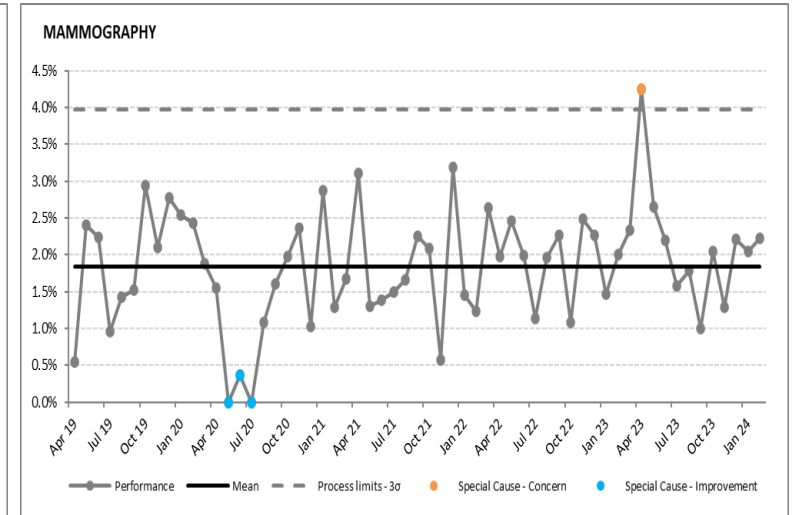
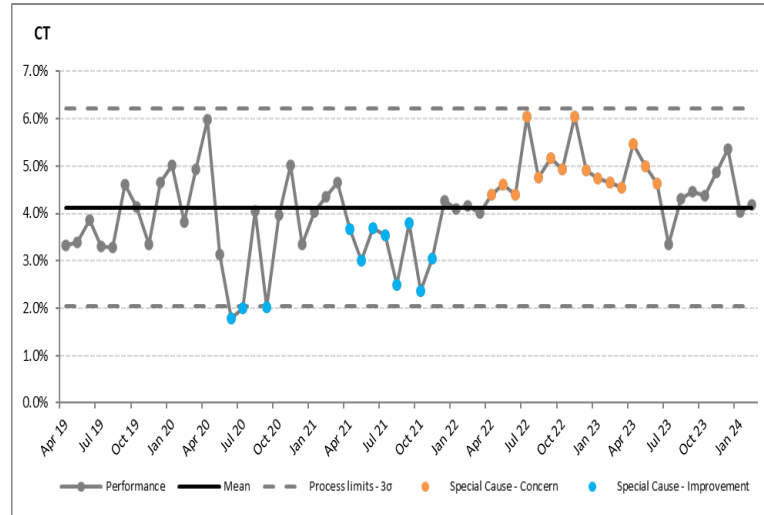
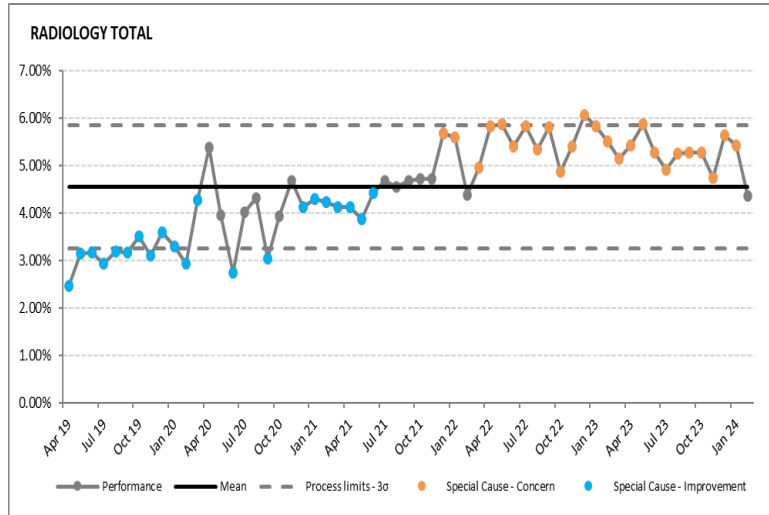
This section will look at the proposed service change, it is important that you address the questions below.

- Is there several options being consider or is there a preferred option?
 - **Service is closing**
- Describe the proposed preferred option – why is it being considered and what **difference** will it make?
 - **Referrals to be redirected to other Pain providers**
- How many patients will be impacted by this proposed service change?
 - **Nil as all patients will be treated prior to closure of service**
- How will it improve patient care?
 - **Patient care will not be affected as the new preferred options will continue with current standard of care**
- If the change were to go ahead what are the timescales?
 - **Service ceased from 31 March 2024**

Action Taken

- Notice has been given to all relevant ICB Boards in January 2024
- The Service closed on the 31st March 2024 and no new referrals will be taken
- Reassurance was provided that all patients on the waiting list were to be treated by the end of March 2024
- It was further agreed that all patients seen by Connect Health who required onward referral would be sent to other secondary care providers
- Contact details to find out further information – to email the centre manager at graeme.kendall1@nhs.net

Radiology DNA rates April 2019 – January 2024



Key

- Performance
- Mean
- - - Process limits - 3σ
- Special Cause - Concern
- Special Cause - Improvement

Radiology DNA rates

Actions to date

- Increased capacity through opening of the CDC, this also allows easier access to our community who use public transport, as the diagnostic centre is close to both rail and bus routes.
- Letters are being issued 2 weeks in advance for appointments where possible allowing patients time to plan for appointments or contact to the department to rearrange.
- For appointments being made less than 2 weeks in advance telephone calls are made to ensure patients have appointments and are available to attend.
- Where capacity allows reminder calls are made in respect of Cancer diagnosis appointments to ensure patients are still attending, or rebooked if required.
- In our modalities which have the highest DNA rates we have seen MRI reduce by 1.9% in the last 12 months and NOUS reduce by 0.5% in the last 12 months.

Future actions

- Deployment of Netcalls text messaging/voice messaging reminder system is underway in Mammography with go live anticipated to be in Q2 2024.
- A business case is being written to support deployment of Netcall across the rest of Radiology, once the system has been successfully implemented in Mammography.

Public Assurance Forum

Clinical Support Services Divisional Update

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

Name of Divisional Lead: Dianne Lloyd, Acting Deputy Divisional Director of Operations, CSS

Date: Monday 15th April 2024

1. Key updates from Division

Workforce:

We continue to have challenges in recruitment within the nationally recognised shortage professions of Sonographers, Pharmacists, Speech & Language Therapists and Occupational Therapists. We continue to make every effort possible to fill these vacancies including working collaboratively with our system partners, but there continue to be times when our services to patients are affected by our staffing levels.

Our staff survey results have shown an improvement in most of our scores for 2023 and we are now working on action plans for further improvement within each Centre. At the end of this paper there is a chart showing the Division's performance compared to the Trust's average.

Service performance against notable standards:

Current Diagnostic Management Standard 1 (DM01) performance

The DM01 standard aims to ensure the majority of patients do not wait longer than 6 weeks for an appointment in one of our Radiology Departments.

We have recently fully recovered this standard after the pandemic and now all modalities are meeting the phased DM01 target of 85% by end March 2024, rising to 95% by the end of March 2025.

Overall, our DM01 performance reached 95% in March 2024. The table below outlines the improvement in performance between April 2023 and February 2024:

Modality	April 2023	February 2024
CT	91%	99%
MRI	89%	91%
NOUS	64%	98%

Our turnaround times for reporting also continue to improve (range now 1 to 3 weeks) particularly for non-obstetric ultrasound which is now being reported on the same day.

We have therefore been able to return 1 of our mobile CT units already, with plans to return phase out the use of the mobile MRI unit by the end of May.

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 the time to results (target of 2 weeks) is now consistently at pre-pandemic levels: both at 97% against a target of 95%.

Cellular Pathology – Within the regional network (N8) SaTH continues to achieve one of the best 7-day turnaround times for urgent cancer referrals – approx. 80% within 10 days. This is a national picture and we continue to work to improve our performance.

Pharmacy has been successful in accessing capital funding for 4 automated devices to dispense medicines and their installation is underway in April 2024. This will improve the discharge process and access to medicines out of normal working hours.

Therapy outpatient waiting lists have mostly recovered to pre-pandemic levels and are now meeting our waiting time standards for the majority of urgent and routine referrals. Our most challenged service is still the Speech & Language Therapy Videofluoroscopy Clinic (swallowing assessment) as we are still trying to recruit a Lead Instrumental Assessment Speech & Language Therapist. We are also training other Speech & Language Therapists to carry out these assessments.

The patient-initiated follow-up (PIFU) performance in Therapy Outpatients is consistently above National and Trust target (5%) at 15% and we are also exploring how we can refresh our use of Attend Anywhere for virtual consultations. Therapy DNA (Did Not Attend) rates are within national benchmarking averages except for Speech & Language Therapy where they are higher and we are currently exploring the reasons for this and whether offering more virtual appointments could help.

Sentinel Stroke National Audit Standards (SSNAPP) – the therapy SSNAP standards were amended during 2023 to increase the amount of rehabilitation every patient should have to a minimum of 3 hours per patient per day. This is currently unachievable with the staffing levels on the Stroke Unit. We are working in closely with the Medical and Emergency Care Division to review the Stroke Improvement action plan.

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

The Clinical Support Services Division Patient Experience Group continues to meet every month and has recently completed a new information booklet for patients, visitors and new staff showcasing the work of each Centre. We are going to pin this onto notice boards in all of our patient areas to encourage more people to think about becoming a Patient Engagement Representative in our Division. The group continues to focus on 2 areas from our patient engagement and involvement strategy, although we slowed down the pace of this work during the winter months due to the pressures on our hospitals and our staff:

- 1. 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:
 - Friends and Family Test (FFT):
 - Reinstated in Phlebotomy, Radiology and Therapy Outpatient and Community services with excellent scores and constructive feedback.

- The new CDC has had the FFT in place since opening, again with excellent feedback, and is exploring use of iPads for the completion of feedback when patient's leave the building.
- Increase feedback that seeks more in-depth information than the FFT such as:
 - Radiology patient survey completed in October 2023: 39 patients who attended the main departments at both sites responded with overwhelmingly positive feedback about the staff and the services provided. The next steps are to carry out the survey in the RSH Treatment Centre and Evolution Suite and to repeat the survey in the main departments during 2024.
 - A Survey Monkey questionnaire has been developed to gain feedback from patients using the Anti-Coagulation Service which is delivered through telephone and virtual consultations.
 - Phlebotomy on both sites have carried out extensive patient surveys during 2023 with extremely positive feedback. The plan is to repeat this following the move at RSH into Elizabeth House.
 - Therapies will be restoring the use of questionnaires in Spring 2024 with inpatients hopefully led by our patient representatives who will spend time with patients on the wards supporting them to provide their feedback. The aim is to use Gather to review the results.

2. **“The First 15 Steps” assessment visits** have been taking place:

Patient representatives have joined staff representatives in carrying out the 15 steps assessments and have given a different perspective on our services. The following areas have been assessed so far and each area has developed an action plan based on the feedback received:

- Phlebotomy across both sites
- RSH Radiology Department
- PRH X-ray 1
- PRH X-ray 2
- PRH Therapy Department

The plan is to re-start the 15 steps assessments in the spring, beginning with the remainder of our patient facing areas.

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

Community Diagnostics Centre (CDC) in Telford:

Our CDC is part of a national programme of work to increase access to diagnostic tests in the community. The CDC welcomed their first patient on the 3rd October 2023 and is now offering CT scanning, Non-obstetric Ultra-sound, plain X-rays, MRI scanning and a Phlebotomy service. During this year we plan to increase the CDC's opening hours to provide a 7-day service, increase capacity across all modalities and explore point of care testing which could help us to provide more combined appointments.

By mid-2024 the CDC will also provide ECG, Echocardiograms, lung functioning tests and basic sleep studies.

Once fully operational, the Centre will have capacity to see around 183,000 patients per year.

Prior to the opening of the CDC focus groups were held with patients to co-design the new building and service. During January 2024 the NHSE "Experienced Based Design" patient survey was carried out involving 139 patients and 15 staff over a consecutive 4-day period. An updated action plan has been developed following analysis of this feedback which includes improving the road signs to the CDC from the main road, improving parking signs to ensure patients are directed to the closest parking area to the CDC and wheelchair access both to the main door and within the reception area. The report is attached as an Appendix.

Replacement Nuclear Medicine* Gamma camera at RSH:

Building work started in August 2023 with completion estimated in May 2024. The new service should be available by the end of August 2024.

Patient engagement is ongoing in the design of the new Nuclear Medicine service at RSH and it is planned to carry out an Experienced Based Design survey later this year.

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 to the final posts in the team continues. They will provide a critical role in supporting the developmental stages of these very premature babies and will work with families to shape the service and gather feedback.

Outpatient Parenteral Antibiotic Therapy Service (OPAT)

The service started on the 27th November 2023 and enables patients to be discharged and continue their IV antibiotic therapy either at their own home or as an outpatient (currently in DAART, RSH). We will use patient feedback to help to develop this service across other locations in the county.

Discharge Medicines Service:

Pharmacy have set up a Discharge Medicines Service which transfers patients who need follow-up support to the care of a community Pharmacist after discharge. This new service averages around 450 referrals / month and has been recognised nationally as leading the way in developing seamless transfer of care between acute and community Pharmacy services.

There is a task & finish group that are meeting regularly and will be seeking patient feedback on the service.

The Pharmacy Team who set up the service have been invited to attend the Clinical Pharmacy Congress in London on 10th May to give a 30-minute presentation to showcase their achievements and this will include patient feedback.

The CSS Patient Engagement group have reviewed their action plan for 2024/25 and will be focusing on the following:

- Exploring whether patient representatives and / or Trust volunteers could carry out short surveys on our behalf and gather feedback from patients in waiting areas across our services.

- Exploring how to elicit feedback from end-of-life patients and feedback on the services provided by our Mortuaries
- Engaging patient representatives in helping the Division to learn from PALS, incidents, complaints and compliments in line with the new PSIRF principles and potentially in conjunction with the new Patient Safety Partners roles.
- Reviewing reasons for DNA's and investigating whether the introduction of Netcall (text reminders) in Breast Screening, Radiology and Therapies improves DNA rates.
- Inviting patient representatives from each Centre to attend appropriate Centre Governance Meetings or separately held meetings to review patterns of incidents / complaints / risks in line with the new PSIRF principles.
- Increasing the use of patient / staff stories in Centre and Divisional meetings.
- Continuing to involve patients in service reviews, changes or developments via focus groups e.g. more detailed engagement around our HTP plans and the introduction of e-job planning in Therapies that is designed to release more time for direct patient contact.
- Sharing information coming from External Quality Reviews, CQC, GIRFT, NICE etc to involve patient representatives / patients in developing action plans
- Involving Patient Representatives to update the CSS Quality Priorities for 2024/25 and the new Trust Patient Safety Strategy

3. Action update from previous meeting (if applicable)

At the last meeting we were asked to provide an update on Radiology DNA rates.

DNA paper included in agenda.

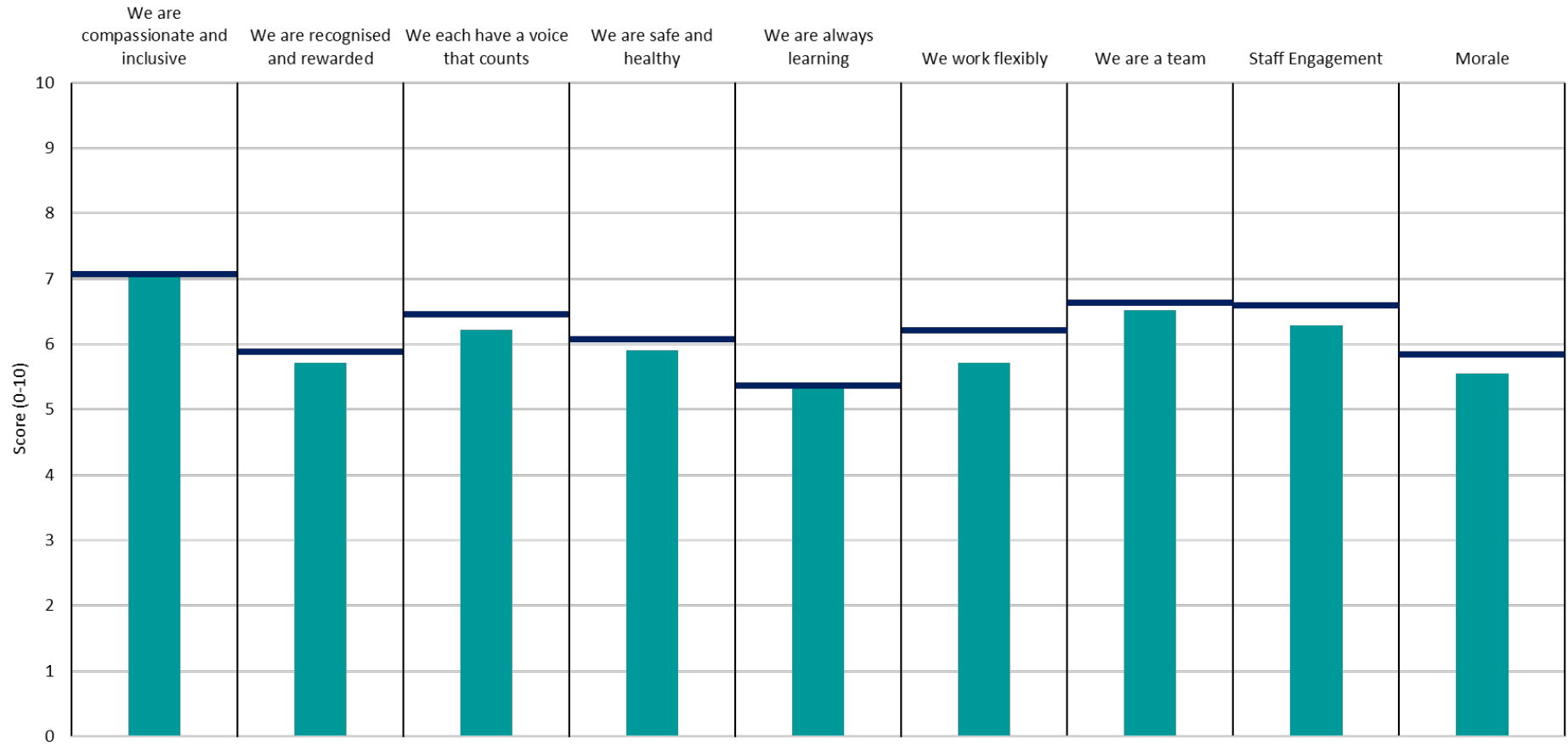
Appendices:

Experienced based Design Survey paper included in agenda.

Report by:	Dianne Lloyd
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Date	05.04.24
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Clinical Support Services Staff Survey Results 2203:



Breakdown	7.02	5.72	6.21	5.90	5.33	5.71	6.52	6.28	5.54
Your org	7.07	5.88	6.46	6.08	5.37	6.21	6.63	6.59	5.84
Responses	562	563	558	557	547	561	562	563	563

Experience Based Design (EBD) Survey: Community Diagnostic Centre

STW CDC Telford

W/c 22nd January 2024

Patient EBD Background

This approach aims to;

- understand how patients 'felt' at each stage of their journey
- understand how staff 'felt' as they delivered/contributed to each domain of the patient journey
- identify areas for improvement to improve the patient experience.

Experience questionnaires were completed by

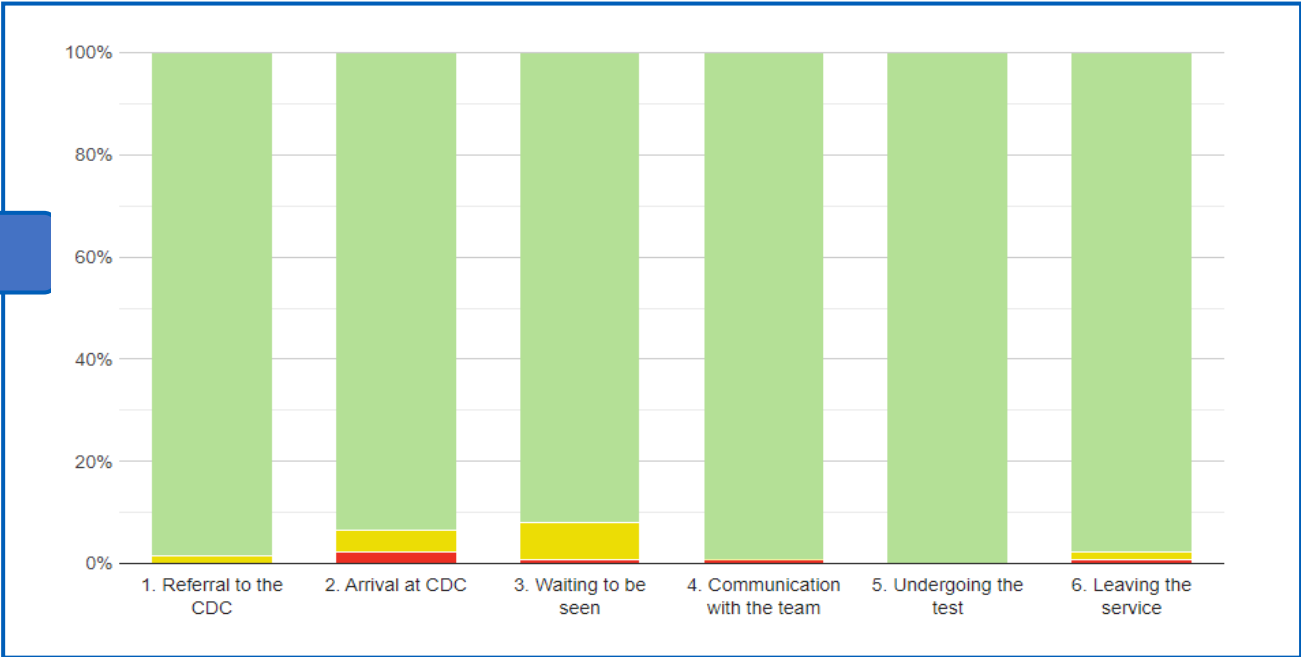
- **139** users of the Community Diagnostic Centre (**phlebotomy and radiology pathways**),
- **15** members of the phlebotomy and radiology teams

Patients express their feelings at each stage of the journey

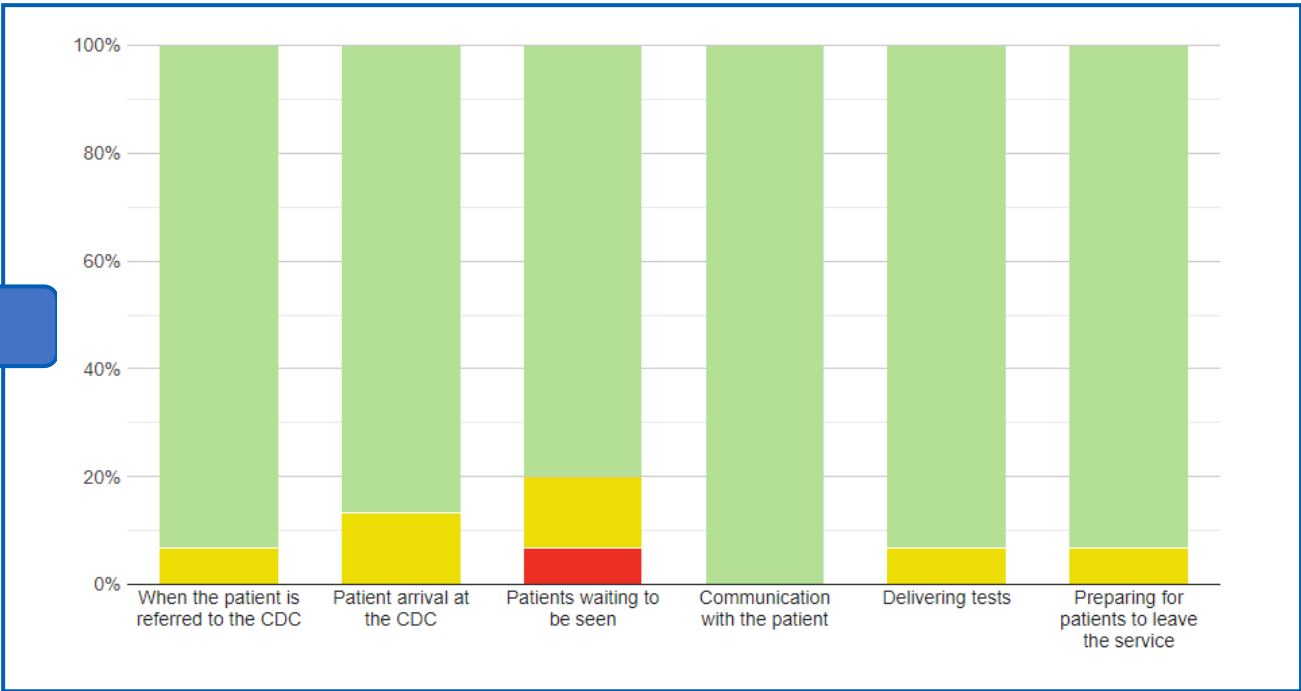
Emotional Map:

Patient vs Staff

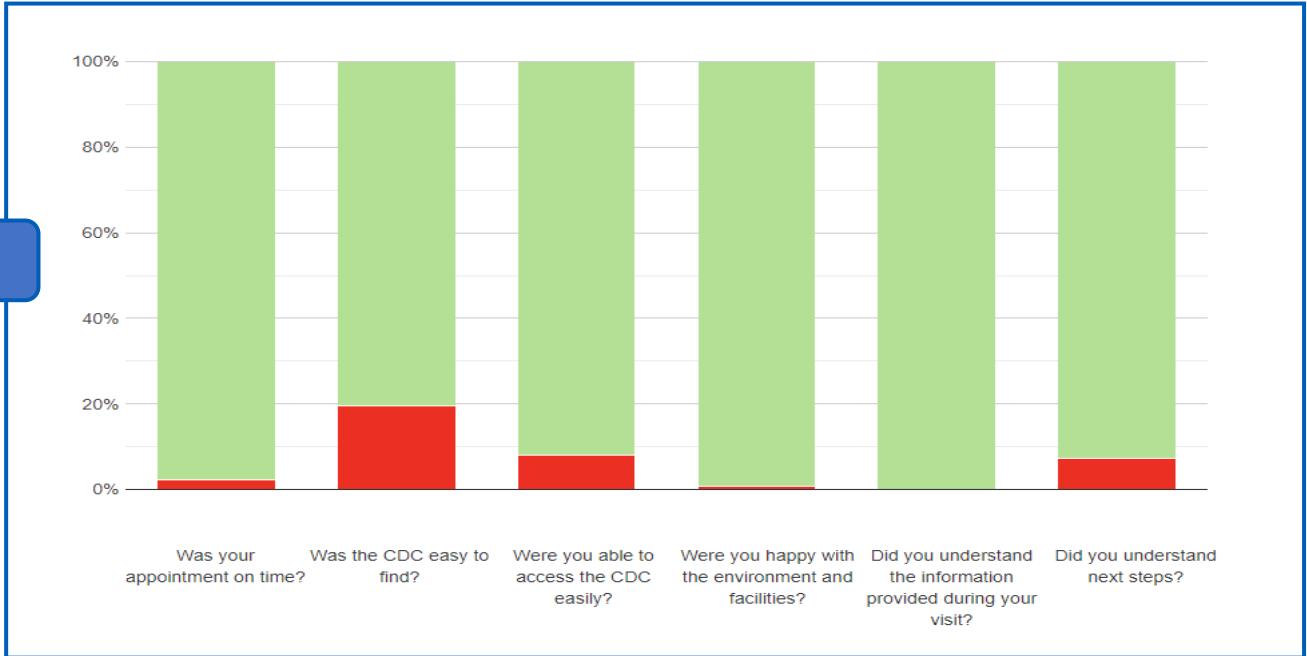
Patient



Staff



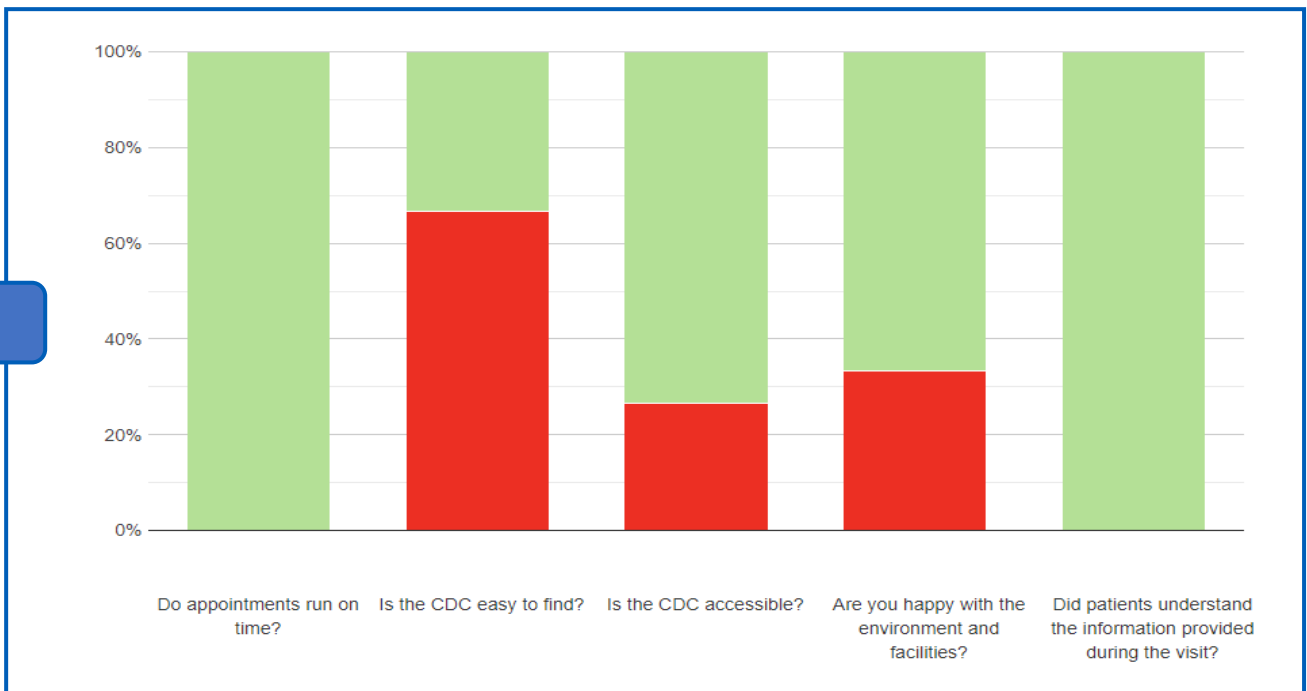
Patient



Thumbs up/down:

Patient vs Staff

Staff



Patients' comments on ideas for improvement

External signage on the road is not clear (<i>Road signage, was a recurring issue for majority on their first visit</i>)
Not clear how to access the site by using public transport or on foot
Needs clearer signage to the correct/permissible parking section for patients of the CDC
Clearer directions needed. Sat Nav post code does not work and sent us to the wrong area. Did not bring us in off the train station roundabout
Sat Nav took us to Nissan garage opposite, building was not obvious
More details in the map included with the directions e.g. location of the Nissan garage and an indication that you turn left opposite the garage
The parking seems awkward at times but hope that this will improve when works finish
Car park is not easy to navigate as you cannot go round so may need to reverse out of parking section/area
Wheelchair parking is not available so difficult to get family member out of car and into CDC
The parking seems awkward at times but hope that this will improve when works finish
Car park is not easy to navigate as you cannot go round so may need to reverse out of parking section/area
The parking seems awkward at times but hope that this will improve when works finish
Wheelchair parking is not available so difficult to get family member out of car and into CDC
Clearer marking on parking bays, some cars parked across two bays and this limits the parking

Clear sign to Reception at the front door, with arrow indicating direction would be clearer
A sign indicating that it is a 'Waiting room for all services' would be useful for all patients
Internal signage at eye-level would be useful. Difficult to see/notice the signs hung from ceiling
Self-check-in boards are not obvious when you walk in, can they be moved?
Access to a tea/coffee facility would be nice (2 comments)
Nice to have the unit and need more awareness of this resource
GPs need greater awareness of this facility as some did not seem to know about it
Make the waiting room more visually appealing so that there is something to occupy your mind while waiting e.g. reading materials? Activity e.g. colouring for adults and children? Radio?
A telly in the waiting room would be good as it is something to look at. At the moment, you just have to sit facing a stranger and you can hear all of their conversations with Reception
Brighten up the waiting room
Chairs are too low. Family member struggled to get in and out of them and also saw others having the same struggle
Waiting room needs higher chairs that are easier to get in and out of
It was difficult to move my grandmother's wheelchair in the waiting room as there is very little space between the Reception desk and the chairs. She is wheelchair bound and cannot walk into the Unit and needs a little more space to turn her chair. Her chair is a narrow size
An intercom (e.g. ones in Doctor's surgery) so that the lady does not need to come out each time. It might be clearer when names are called

Things to consider for improvements

External signage:

- Site is difficult to find for first time visitors. Sat nav goes to general area. Map would benefit from more reference points.
- Some provided feedback about the need for signage, particularly from the Hollinswood Interchange roundabout and Bridgenorth.

Car parking:

- Patients highlighted that designated parking spaces/zones, specifically for the CDC were unclear.
- Clear signage, with NHS logo, would provide reassurance of where patients can park. Due to the lack of clear signage, many patients parked in spaces associated with other local businesses.

Wheelchair accessibility:

- wheelchair accessible parking spaces were not available/obvious and
- pushing a wheelchair over the permanent speed bumps was very difficult – both for the patient and the carer
- These patients also noted that there was limited space in the waiting room for a wheelchair to move around, particularly at the Reception desk
- Automatic doors would be easier to open for entering and exiting the clinical area

Things to think about to improve the CDC

Waiting room: Patients noted that signage for Reception was not clear as they did not look up for a sign.

- Signs at eye level and include a direction arrow where possible
- Many noted they found the waiting room without too much difficulty, but they had asked someone or followed another person into the building
- A TV/radio would help to distract from other peoples' conversations, including within Reception
- Add interest, TV/radio/puzzles/magazines would provide a distraction for patients and anyone waiting for them
- For some patients, chairs were difficult to get into and get back up. Consider higher chairs or add chair risers
- Tea/coffee making facility would be nice (although many acknowledged the brief period of time spent in the waiting area)

Clinical rooms: Staff noted specific facilities that would improve the patient and staff experience.

- Radio in the blood rooms would help to relax the patient, particularly anxious patients
- Water dispenser within internal corridor or blood rooms would be useful for patients, especially anxious patients
- Stools within the blood rooms are not comfortable
- Desk chairs would be more useful for work at the desk as the desks are at a low height
- Better hooks for the patient's belongings in the blood rooms
- Tea/coffee facility for the patient and family/friend/carer that attends CDC with the patient
- TV or radio in the staff room and
- Secure the fridges in the staff room



- Focus Group held 19th Feb 2024
- Representatives of staff and patients

Public Assurance Forum

Divisional Update

Name of Division: Surgery Anaesthetics Critical Care Cancer

Name of Divisional Lead: Michelle Cole / Sally Hodson to represent Division

Date: Monday 15th April 2024

Time: 1.00 - 4.00pm Location: Microsoft Teams

1. Key updates from Division

Divisional Update

PACE: Ward Manager to present new JAG national results for May/June PACE meeting

Specialty Updates

Oncology: Talks continue with Clatterbridge re support for oncology patients

Patient Access:

Overseas management team: To qualify for NHS treatment without charge, a patient needs to be 'ordinarily resident' in this country or anyone who is not 'ordinarily resident' falls within the definition of an Overseas Visitor and may incur a charge for NHS treatment. The Department of Health places a legal obligation on NHS Trusts to establish whether a person is an Overseas Visitor to whom charges apply and to recover any charges, in accordance with statutory regulations

Outpatient Appointments: all patients who have a booked appointment in the following 3 weeks will have their eligibility checked using the National Health Service Spine Portal

Health Service Spine Portal. If a patient is identified as potentially chargeable a further verification check will be undertaken with the Home Office before making contact with the patient to determine whether the patient is ordinarily resident in the UK this involves requesting the following evidence: valid visa, utility bills, proof of a qualifying course of study, contract of employment, rent agreements. If the patient provides enough evidence, then they will be informed that they will be chargeable for any outpatient attendance

Inpatients: More recently we have started to check the patient who have planned admissions in the upcoming three weeks. The above processes will be followed to confirm eligibility

Implementation of Careflow:

- Letter Rationalisation Project – Our appointment letters have been revised to meet the health literacy standards advised by NHSE
- Clinic Optimisation – Changes have now taken place to improve the outpatient experience with an aim to reduce the number of re-booked appointments. The majority of patients appointments will now only be booked 6 weeks in advance
- Referral To Treatment (RTT) Awareness – Providing RTT contextual training to our organisation, this training is now available on LMS for staff to complete electronically

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. We have achieved this target for the last several weeks with our last recorded performance at 96%

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

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

Emergency Admissions into the Trust are also being checked daily

MSK (Musculoskeletal): Due to Winter pressures and the more recent ventilation issues on Ward 5, elective arthroplasty at PRH remains on hold, posing a significant risk of 78-week breaches. Options to provide an interim solution have been put forward to Execs for consideration

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

PACE

- Complaints working group commenced. Common themes identified. Plans being formulated for improvement in communication
- Include Pre-Operative Assessment and Ophthalmology Cataract Suite audit onto Gather
- Reception area signposting: HTP team contacted for an update, awaiting response
- In patient survey report distributed; Divisional action plan formulated - will be circulated to Matrons and Ward Managers

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 benched area in memory of their son. The order has been placed and the Lingen Davies volunteers will be putting this together when it arrives
- Friends and family surveys are completed

- Radiotherapy: Following patient feedback we have set up with Lingen Davies Volunteers a tea/coffee trolley for the patients waiting for their treatment this will start on the 1st April and will be three days a week and will increase to 5 days a week if popular with this cohort of patients

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 to the below floor

ENT/Max Fax/Ophthalmology

- ENT now fully staffed but sickness within middle grade
- Max Fax continues to have vacancies and struggling to recruit but efforts ongoing
- Consultant triage of referrals now in place for the whole of ENT
- Cancer pathway improvement work being undertaken across the pathway (*see below section 3.*)
- Ophthalmology department successful early adoption of Eye ERS Cinapsis
- Positive GIRFT feedback on service
- Migration to Medisight work has commenced with estimated go live date in June 2024
- Review of ward 8 facilities to support ED flow

MSK (Musculoskeletal)

- Closure of SATH Pain Service due to resignation of lone consultant. Patients on waiting list have been treated and referred to the care of their GP. ICB informed and public comms forum arranged for April
- Recruitment of Fragility Nurse will enable increased capacity within the Fracture Liaison Service, enabling triage of patients waiting for bone density scans

Critical Care: Staff 'away days' have been organised to take place in November 2024 and patients and their families are being asked to attend and take part in order to support the learning and development of staff

Ward 32 and Ward 37 have been awarded the Silver Award for reconditioning games from NHS England

- To improve patient outcomes and reduce the length of hospital stay
- Prevent deconditioning of long stay patients and to improve their physical wellbeing and strength
- Felt it was important to try and improve psychological wellbeing for our patients
- Benefit staff morale and wellbeing and hopefully improve satisfaction in their work
- Create a more social environment and importantly bring a smile and a little bit of laughter to the patients on a ward

ITU patient and relatives garden at RSH has been completed and opened for use by all following fundraising by a patients family

Elective Hub – plan to open from 10th June 2024

3.	Action update from previous meeting (if applicable)
<p>Divisional Specialty Updates:</p> <p>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. Update – meeting filming company set up for early April 24</p> <p>ENT: 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. Multiple meetings taken place with ICB to support implementation of new pathway</p>	
Report by: Michelle Cole	Divisional Director of Nursing
Date: 08/04/20204	

Public Assurance Forum	
Divisional Update	
Name of Speciality: Patient Experience Name of Speciality Lead: Kara Blackwell Date: 10th April 2024 Time: 14.00-17.00 Location: Microsoft Teams	
1.	Key updates from Division Patient Experience (Patient Representatives are included in all these Groups and Improvement Work) <ul style="list-style-type: none"> - Work is underway in the development of a Patient Experience Strategy, a survey of over 2000 responses for stakeholders including staff, patients via ED and OPD SMS text and inpatients and community members has been undertaken - The Equality Delivery System 2022 (EDS 2022) which 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 took place in November 2023. A follow up meeting with key stakeholders who attended the initial assessment meetings in November for the 3 Trust services: Patient Advice and Liaison Service, Maternity Service, and Alcohol Care Team was held in March 2024, the draft action plans in response to the EDS assessments were presented and approved. These will be monitored for progress as part of the patient experience improvement work throughout 2024/25. - The Patient Advocate Group has been re-launched with the first meeting having taken place in April 2024. New members have been recruited, there are new Terms of Reference and agenda. The plans are for the Group to meet monthly and continue with the recruitment of more members through various routes. - Patient Led Assessment of the Care Environment (PLACE) were completed in November 2023. The formal results and action plan have been discussed at the PLACE Group meeting in April. The action plan is being reviewed to RAG rate and identify the key priorities for addressing in 2024/25 and to enable the allocation of resources before finalizing this at the next Corporate Patient Experience Panel - Ongoing Complaints improvement work continues with the Divisions to ensure processes facilitate more timely responses to our patients and their loved ones. Improvements are being supported by the matrons in the specialty areas - The pilot of text (SMS) Friends and Family Tests (FFT) within the Emergency Department which commenced for 6 months in October 2023 has shown an increase in the number of patients providing feedback. We are now looking at the ongoing funding of this.
2.	Update on any current or future service developments or changes and how are you involving the community in these changes? -We are currently in the process of establishing a Learning Disability and Autism Patient Experience Group

	<p>-Following the Patient Experience Strategy Survey, focus groups are taking place throughout April to co-develop the Strategy</p> <p>-Patient partners are meeting with the Head of Facilities to look at new proposed car parking ticket machines and where these will be located across the 2 hospital sites</p>
3.	Action update from previous meeting (if applicable)
<p>-EDS 2022 action plan feedback to patient and key stakeholders completed</p>	
Report by:	Kara Blackwell
Date	10 th April 2024

Public Assurance Forum: 15 April 2024

Agenda item	2024/22		
Report Title	Public Participation Department Priorities 2023/24		
Executive Lead	Julia Clarke, Director of Public Participation		
Report Author	Hannah Morris, Head of Public Participation		
CQC Domain:	Link to Strategic Goal:		Link to BAF / risk:
Safe	Our patients and community	√	BAF 9
Effective	Our people		
Caring	Our service delivery		Trust Risk Register id:
Responsive	Our governance		
Well Led	Our partners	√	
Consultation Communication	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:	<p>1. The Forum's attention is drawn to Appendix 1 – Plan on a Page for:</p> <ul style="list-style-type: none"> • Community Engagement • Volunteers • SaTH Charity <p>2. The key risks are:</p> <ul style="list-style-type: none"> • Fail to deliver the Public Participation Plan, resulting in a lack of confidence for our communities • Fail to deliver statutory duties (s242) to engage with the public, resulting in possible judicial challenge <p>3. We are have the following actions:</p> <ul style="list-style-type: none"> • A detailed five-year action plan with progress being reviewed at each meeting by the Public Assurance Forum • Continue to support our Divisions to ensure they meet their Statutory Duties. 		
Recommendations for the Public Assurance Forum:	<p>The Public Assurance Forum is asked to:</p> <p>NOTE The Activity completed by each of the areas during Quarter 4</p> <p>This report is provided for information only.</p>		

Appendices:	Appendix 1: Plan of a Page for Community Engagement, SaTH Charity and Volunteers
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1.0 Introduction

- 1.1 The Public Participation Plan was developed in partnership with our local communities with over 1000 contributions to identify the main theme. 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. Following 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. Community Engagement Volunteers and SaTH Charity) and these will also be presented at the next Trust Board.
- 1.3 Highlights of key achievements from Quarter 4 from each of the areas includes:

Volunteers:

- Volunteer annual survey on the views of our volunteers – Annual survey has been completed and shared with the team and volunteers. Action plan has been developed as a result of the survey.
- Develop a plan for 2024/25 – Draft plan has been submitted and is currently being reviewed in line with 2024/25 department objectives.
- Plan for Volunteers' Week 2024 - Venue has been booked for volunteer's week celebration on 28 May at Wroxeter Hotel, plan for the week is to visit wards and departments to meet teams and update ward information.
- Review Better Impact as our volunteer management platform and implement updates – reviewed and completed action.
- Promote roles in A&E and Discharge – we continue to promote these two roles.
- Focus Group on selected area – we continued to hold regular focus groups with volunteers, the next planned group will be on PALs and Complaints
- Second in take for Youth Volunteers to open in February – Youth volunteering applications opened until July 2024
- Work on project brief for an NHS CT grant looking at system-wide developments- We have decided not to go ahead with the NHS CT grant as it did not fit with our service requirements.
- Plans to embed the volunteer to career programme are moving forwards making it business as usual – The scheme is now embedded with programmes being planned for 2024/25

Engagement:

- Develop spring/summer engagement calendar of external events – this is updated weekly in the Public Participation Department meeting.
- Confirm annual About Health plan and create publicity for distribution – all events have been confirmed for the year.
- Review and develop the People’s Academy for 2024 – Academies have been scheduled for the forthcoming year and we are working with internal teams to promote additional career opportunities to attendees by increasing the diversity of behind-the-scenes tours.
- Provide support for Hospitals Transformation Programme – There is an ongoing programme of events and meetings which the team organises and attends, including focus groups and About Health events.
- Work with the divisions to ensure they meet their Section 242 duties - We continue to provide advice to the division around their duties to engage and involve the public around potential service changes.

SaTH Charity:

- Quarterly SaTH Charity supporters email – Email to SaTH Charity supporters was last sent in March 2024
- Development of positive news and engagement stories – sustained increase in positive news stories being shared through social media.
- To support staff through the Small Things Fund – Small Things requests remain high with a total expenditure during the year to exceed £25,000.
- To increase the visibility of the charity throughout the Trust with the introduction of area specific banners – Area specific banners have been designed and are currently being printed and ready for distribution in April 2024
- Align activity to the NHS CT Development Grant – This grant is on target and is achieving all the objectives. A quantifiable increase in charity visibility has been measured in a 6 month customer survey.
- Research options for a multi charity event in 2024 – A multi charity event is being presented to Executives and Corporate Trustees for their approval.

2 Recommendations

The meeting is asked to:

NOTE the current activity in Quarter 4 across the Public Participation Team against the Public Participation action plan.

Julia Clarke

Director of Public Participation

April 2024

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, RJA, 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



The Shrewsbury and Telford Hospital
NHS Trust

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	C	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	3	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 4 Update
<p>Outreach Work in areas of health inequalities</p> <ol style="list-style-type: none"> 1. Further develop links with Public Health in local councils to identify community groups in areas of focus 2. Network with community groups and organisations and identify additional networking opportunities 3. Attend community events in identified areas, provide clear purpose of attendance (working with Town & Parish Councils) 4. Attend events during Pride month (June) to raise profile of SaTH Involvement with LGBT+ communities 5. Review and develop People's Academy for 2024 6. Deliver People's Academy course, and bespoke People's Academy day in Woodside Telford 7. Provide support for Hospitals Transformation Programme 8. Deliver About Health events 9. Work with the divisions to ensure they meet their Section 242 duties. 	<p>Recruitment of new Community & Group members through NHS 75</p> <ol style="list-style-type: none"> 1. Promote NHS75 through outreach work across Shrops, T&W, mid Wales, particularly focussing on areas of social deprivation and health inequalities 2. Attend community events to engage local population and recruit community members—focus on areas identified in Q1 3. Outreach with addiction and homelessness support organisations 4. Deliver hybrid People's Academy course 5. Attend Freshers' events at colleges/universities across Shrops, T&W and mid-Wales (supported by SaTH Volunteer team) 6. Provide support for Hospitals Transformation Programme 7. Deliver About Health events 8. Work with the divisions to ensure they meet their Section 242 duties. 	<p>Refresh organisational database information</p> <ol style="list-style-type: none"> 1. Thematic outreach with system partners for World Mental Health Day in October 2. Restart engagement with Gypsy and Traveller communities across Shrops, T&W, mid-Wales after summer break. 3. Outreach with refugees/asylum seekers to promote membership, volunteer and employment opportunities 4. Deliver Online People's Academy course 5. Expand rural network through existing contacts (Powys and Shrops) 6. Identify additional networking opportunities. 7. Provide support for Hospitals Transformation Programme 8. Deliver About Health events 9. Work with the divisions to ensure they meet their Section 242 duties. 	<p>Planning and consolidation</p> <ol style="list-style-type: none"> 1. Develop spring/summer engagement calendar of external events 2. Confirm annual About Health plan and create publicity for distribution 3. Review and develop the People's Academy for 2024 4. Deliver People's Academy course. 5. Provide support for Hospitals Transformation Programme 6. Deliver About Health events 7. Work with the divisions to ensure they meet their Section 242 duties. 	<ul style="list-style-type: none"> • The events calendar is regularly updated and reviewed weekly in the Public Participation department meeting. • About Health events are confirmed for the year, and we are trialling event specific emails to see if this generates a greater attendance. • People's Academies and Young People's Academies are scheduled throughout 2024, and we are working with internal teams to promote additional career opportunities to attendees by increasing the diversity of behind-the-scenes tours • The team continue to support the Hospitals Transformation Programme both in person at roadshow events and focus groups and by raising awareness of opportunities for involvement (<i>Focus groups and About Health events</i>) at all external meetings and events • The team attended the opening of the Telford Gurdwara in February and this led to a bespoke Hospitals Transformation Programme event with One Voice, Telford and Shropshire Windrush Caribbean Community in April



Stakeholder Groups

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

- 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.

Desired Outcomes

- To maintain the number of active volunteers at around 270 during the year
- 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	C	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 <i>Belong To Something</i>
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.

Q1 April – May – June	Q2 July – August – Sep	Q3 Oct – Nov – Dec	Q4 Jan – Feb – March	General Notes Progress against plan Q3
<ul style="list-style-type: none"> Establish a calendar of engagement events with local schools and colleges Develop a communications plan for volunteering to encourage applications. Promote roles in A&E and Discharge Develop a volunteer to career pathway Review and update website content and social media exposure Deliver Volunteers' Week 2023 Review Better Impact as our management platform and implement updates Young People's Academy 	<ul style="list-style-type: none"> Contact local colleges with information on the Volunteer to Career's (VTC) scheme Engage with fresher's events at local schools or colleges Recruit gardening volunteers to meet any identified need. Plan the next Young person's Academy Review Better Impact content (files, templates etc.) to ensure it is current. Review IPC training in light of hospital guidance changes and update as required Active database review Focus Group on selected area Launch Youth Volunteer Programme 	<ul style="list-style-type: none"> Promote volunteering through the Trust's Peoples Academy Ongoing development of Better Impact Review inactive volunteers Raise awareness to Trust areas the benefit of having Volunteer support and encourage engagement with placing volunteers. Support volunteer recognition event Volunteer Christmas campaign Focus Group on selected area Review Social Media activity 	<ul style="list-style-type: none"> Volunteer annual survey on the views of our volunteers Develop a plan for 2024/25 Plan for Volunteers' Week 2024 Review Better Impact as our management platform and implement updates Promote roles in A&E and Discharge Focus Group on selected area Second in take for Youth Volunteers to open in February Work on project brief for NHS CT grant—decision made not put in application following scoping exercise. Plans to embed the volunteer to career programme are moving forwards making it business as usual. 	<ul style="list-style-type: none"> The annual survey has been held and analysed and a plan has been shared with Volunteers. Action Plan has been developed following the survey Plan on a page completed for 2024/2025 Venue has been booked for volunteers week celebration, plan for the week is to visit wards and departments to meet teams and update ward information Promotion of A&E and Discharge have been ongoing throughout 2023 and 2024 A focus group is planned focussing on PALS and Complaints Applications for Youth applications are open until July 2024 We have decided not the go ahead with the NHS CT grant as it did not fit with our service requirements The volunteer to career programme is now embedded with the team taking a lead on different programmes through the rest of 2024



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	C	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 Q4 activity:
<ul style="list-style-type: none"> British Ironworks NHS75 birthday Daisies to go on sale Implement first stage of legacy campaign and link to retirement sessions provided to staff Staff NHS Birthday Thank You Campaign go-live Quarterly Charity Supporters email to be sent Commence gathering information for the Annual report highlighting achievements over the last 12 months NHS Charities Together National Conference Corporate Partnership Planning Development of positive news and engagement stories 12 Promotion of 'Small Change Big Difference' Scheme Complete Stage 3 NHS CT final reports 	<ul style="list-style-type: none"> NHS 75 Birthday Review initial plans for Christmas Quarterly Supporters email to be sent Submit draft copy of the Annual Report for review Promote our Lake Vrywyn Half Marathon Runners Development of positive news and engagement stories 12 Awareness campaign on Staff Lottery Sign Ups Summer promotion of Small Things Fund Recruit marketing role supported by NHS CT Development grant 	<ul style="list-style-type: none"> Potential go-live of NHS CT In Memory Campaign Christmas Campaign and Christmas Lights Switch On Quarterly Supporters email to be sent Development of positive news and engagement stories 12 Clarify how fund plans will be developed for 2024/2025 Winter promotion of small things fund Finalise the annual report with accounts Hold workshops for fund advisors, divisional directors and finance leads— This action was superseded by an action from CFC, Sara Biffen was tasked with including it as part of operational planning. Update report on development grant 	<ul style="list-style-type: none"> Quarterly supporters email Development of positive news and engagement stories Campaign to contact Funeral Directors offering support at challenging times for their clients To support staff through the Small Things Fund To increase the visibility of the charity throughout the Trust with the introduction of area specific banners Raise the profile of the charity through actions on the Public Participation Plan Align activity to the NHS CT Development Grant Research options for a multi charity event in 2024 	<p>Supporters email planned for WC 18/03/2024 subject to abseil confirmation.</p> <p>Positive news stories ahead of target with increased traction through Social Media</p> <p>Small Things requests remain high with a total expenditure during the year to exceed £25,000</p> <p>Area specific banners have been designed, planned print and distribution is April 2024.</p> <p>The NHS CT funded development grant is on target and is achieving all objectives. A quantifiable increase in charity visibility has been measured through the 6 month survey.</p> <p>Multi charity event is being presented to the Corporate Trustee for their approval</p>

Public Assurance Forum – 15 April 2024

Agenda item	2024/22		
Report Title	Quarter 4 Public Participation Report		
Executive Lead	Julia Clarke, Director of Public Participation		
Report Author	Hannah Morris, Head of Public Participation		
CQC Domain:			
	Link to Strategic Goal:	Link to BAF / risk:	
Safe	Our patients and community	√	BAF9
Effective	Our people		
Caring	Our service delivery		Trust Risk Register id:
Responsive	Our governance		
Well Led	Our partners	√	
Consultation Communication	Public Assurance Forum – 15 January 2024 Senior Leadership Committee – 25 January 2024		
Executive summary:			
Executive summary:	<p>1. The Board's attention is drawn to the following sections:</p> <ul style="list-style-type: none"> • Community Engagement (slides 5-13) • Volunteers (slides 14-20) • SaTH Charity (slides 21-27) <p>2. The risks are:</p> <ul style="list-style-type: none"> • Fail to deliver the Public Participation Plan, resulting lack of confidence of our communities • Fail to deliver statutory duties (s242) to engage with the public <p>3. We are have the following actions:</p> <ul style="list-style-type: none"> • A detailed five-year action plan with progress being reviewed at each meeting by the Public Assurance Forum • Continue to support our Divisions to ensure they meet their Statutory Duties. 		
Recommendations for the Board:	<p>The Board is asked to:</p> <p>NOTE the current activity in Quarter 4 across the Public Participation Team. This report is provided for information only.</p>		
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 <https://www.sath.nhs.uk/about-us/get-involved/get-involved-public-participation/> 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 on:

- 2.1 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 (4595) and organisations (413) continue to increase. (Slide 7 details)
- 2.2 Our Social Inclusion Facilitator has been making stronger links with a number of Seldom Heard Groups this Quarter focusing on homelessness and rough sleeping, veterans, BAME groups, rurality as well as making links with other statutory organisation (such as Public Health) (Slide 8).
- 2.3 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), focus groups for patients with specific condition eg mental illness, dementia and a focus group looking at the new main entrance following feedback from communities. All focus groups presentations are published along with Q&As and action logs (after they've been reviewed by the attendees). We also hold quarterly HTP About Health Events with a presentation from the HTP team and an opportunity to discuss and ask questions, which are recorded and available on our website. (See slides 9-12) For more information please see our website: [HTP Focus Groups - SaTH](#)
- 2.4 There were no questions following the Trust Board meeting this quarter but there was a late submission for Q3 December 2023 Trust Board (slide 13). Following Board Questions submitted in December 2023, a response was provided on our website: [Public Questions Log – SaTH](#). A meeting has been arranged with the member of public who requested further information. The meeting will be on 26th April with the Director of Nursing, Chief Operating Officer and the Director of Strategy and Partnership

3.0 Volunteers (Slides 14-20)

- 3.1 We currently have 324 volunteers, who have given over 7072 hours of volunteer time in Quarter 4 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 This quarter we have carried out our annual volunteer survey (see slides 16-18). Following the collation of data from this year's survey we held a focus group with our volunteers to go through the results and subsequent action plan which has been developed by the volunteer team. 93% of volunteers would recommend volunteering at SaTH (7% said maybe). A "You Said, We Did" was developed as a result of the survey (see slide 17-18) to ensure that we respond to the comments made by our volunteers.
- 3.3 The volunteer team have successfully been awarded a £25K grant to develop a Volunteers to Careers Programme (slide 19-20). Cohort 2 within Midwifery completed the programme this Quarter, finishing with a celebratory evening with family and staff. Cohort 3 is focusing on Radiotherapy and all places for this cohort have been allocated.

4.0 SaTH Charity (Slides 21-27)

- 4.1 Income for the 3 months of Q3 2023 was £133,967 and expenditure for this period was £55,629. (Slide 21)
- 4.2 To date we have 1945 SaTH Charity Supporters and 1049 members of staff are now playing the staff lottery (from zero when it was started four years ago) and half the funding is paid out 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 23-24).
- 4.4 This Quarter a survey was sent out to staff and the public about SaTH Charity and was compared to the baseline survey that was previously conducted in July/August 2023. The results showed that the increased activity on social media is increasing awareness of the Charity, with 25% of participants hearing about us on social media, this is compared with 2% in the previous survey.
- 4.5 In Quarter 4 the charity approved 74 charitable fund requests across 14 different funds. Some of the items of expenditure in Quarter 4 are shown on Slide 24 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 Q2 Forward Plan (summarised slides 27-29)

5.1 General activity

- 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 Q1
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public
- **Volunteers week 2024 1 – 7 June.** Plans are well underway to celebrate volunteers week 2024. The celebration event is booked for 29th May at the Wroxeter Hotel, which is in school holidays to allow for our young volunteers to attend

5.2 Dates for your diary – please contact sath.engagement@nhs.net or visit our website for more information [Public Participation - SaTH](#)

COMMUNITY ENGAGEMENT MEETINGS

Date	Time	Event
Wednesday 10 April	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)
Tuesday 30 April	18:30 – 19:30	<i>About Health Event</i> – Hospitals Transformation Programme
Wednesday 08 May	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)
Thursday 30 May	18:30 – 19:30	<i>About Health event</i> – Operational Update

HOSPITAL TRANSFORMATION PROGRAMME FOCUS GROUPS

Hospitals Transformation Focus Group			
Date	Time	Event	Booking
Monday 03 June	10:00 – 12:00	Medicine and Emergency Care/Surgery, Anaesthetics and Cancer Focus Group	Via email
Friday 07 June	10:00 – 12:00	Women's and Children's Focus group	Via email
Saturday 18 May	10:00 – 12:00	Children/Young People Focus Group	Via email

7. Recommendations

The meeting is asked to:

NOTE the current activity in Quarter 4 across the Public Participation Team

Julia Clarke
Director of Public Participation
 April 2024

Public Participation Report Quarter 4 (January - March 2024)

Julia Clarke – Director of Public Participation



Volunteering

Engagement

SaTH Charity

Highlights of Public Participation – Q4

COMMUNITY ENGAGEMENT (for details see slides 5 – 13)

- The SaTH Public Assurance Forum, which provides independent assurance on our engagement met on the 15 April 2024 and the highlights of this meeting are outlined in slides 5-6
- 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 (4595) and organisations (413) continue to increase
- Over the past Quarter, the Public Participation team have supported 27 HTP events with the public. These include a number of specialist focus groups including mental health, dementia and the new RSH front entrance. We continue to hold our regular W&C's and MEC & SAC focus groups and our About Health Event.
- Our Social Inclusion Facilitator has been making stronger links with a number of seldom heard groups. 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 – Q4

VOLUNTEERS (for details see slides 14 – 20)

- We have 324 active volunteers within the Trust who have provided 7072 hours of their time this quarter across 30+ clinical and non-clinical roles. We have 169 volunteers on our Youth volunteer scheme (16-24 year olds)
- This Quarter we sent out our **Annual Volunteer Survey** to find out the views of our volunteers. Following the analysis of the data we held a focus group with our volunteers in February to discuss the results and developed an action plan with them.
- Cohort 2 (Midwifery) of the **Volunteer to Career programme** finished with a celebratory evening of volunteers and staff. Preparation are now underway for cohort 3 who will be volunteering within Radiotherapy. Applications for this cohort have now closed and the introductory session will be held in April.
- **New PRH Volunteer-led Information Desk installed.** There is now a new volunteer-led Information Desk in the main entrance of PRH. The Information Desk is a place where people can come to ask for help, as well as promoting ways for the Public to #GetInvolved with the hospital



Highlights of Public Participation – Q4

SATH CHARITY (for details see slides 21 – 27)

- Income for the 3 months January – March 2024 was **£133,967** compared to **£56,890** in the same period last year. Expenditure for the same period was **£55,629** compared to **£80,875** in 2023.
- Final income for the year 2023/24 was **£471,251** compared to **£413,244** in 2022/23. Total expenditure for the year was **£517,437** compared to **£369,851** in 2022/23
- In Quarter 4 the charity approved 74 charitable fund requests across 14 different funds
- 1945 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. Results from a survey we recently undertook are outlined within this report
- Our supporters continue to fundraise for SaTH Charity in Quarter 4 some of which are highlighted within this report.



(pictured 'gravity chair' purchased for staff to relax in)

COMMUNITY ENGAGEMENT (1): Public Assurance Forum 15 April 2024

- The Public Assurance Forum (PAF) met on 15th April 2024,
- Key Items that were discussed at the Forum included:

COMMUNITY ENGAGEMENT (2): Public Assurance Forum 15 April 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
- **Monthly Hospital Update (previously Community Cascade)** – this is delivered once a month and focuses on current news and provides a Q&A opportunity
- **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 Quarterly public focus groups for Women and Children’s and MEC&SAC (Medicine, Emergency Care and Surgery, Anaesthetic, Critical Care and Cancer). There have also been specialist focus groups on Mental Health, Dementia and the new RSH Front Entrance.
- 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 ENGAGEMENT – Social Inclusion

- We have attended a total of five Careers Information Fairs across Shropshire and mid-Powys. These were held in Shrewsbury, Ludlow, Oswestry, Newtown and Welshpool.
- We visited both The Ark homelessness project and Shropshire Supports Refugees in Shrewsbury. At these meetings we engaged with staff and service users and captured their experience.
- A visit was made to Market Drayton Royal British Legion where we discussed concerns with Armed Forces Veterans. These included the need to identify as a veteran as part of the Armed Forces Compact.
- We visited the KIP Project in Wellington with the Telford & Wrekin Public Health team. This homelessness project is a partnership of VCS organisations supporting vulnerable individuals with multiple and complex needs. We had discussions with both clients and support staff around the hospital discharge experience.

- The Shropshire European Organisation is a non-profit company which helps and supports the Eastern Europe community. We met a member of the Bulgarian community, who has invited us to come and talk to their local community group.
- We are working with Powys Association of Voluntary Organisations to explore new ways of engaging the rural agricultural community in relation to Health and Wellbeing.
- We attended the Chinese New Year celebrations at the Chinese Arts and Culture Centre in Telford. Attendees had opportunity to visit various workshops



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 March 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 based upon the feedback we received from our focus group members and local communities. This quarter we have held focus groups relating to HTP on Dementia, Mental Health and the new RSH Front Entrance.
- **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: [HTP Focus Groups – SaTH](#)
- 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 April 2024 at 6.30pm**

You said, we did – some examples from focus groups



Please see action logs for further details - [Hospitals Transformation Programme Focus Groups - SaTH](#)

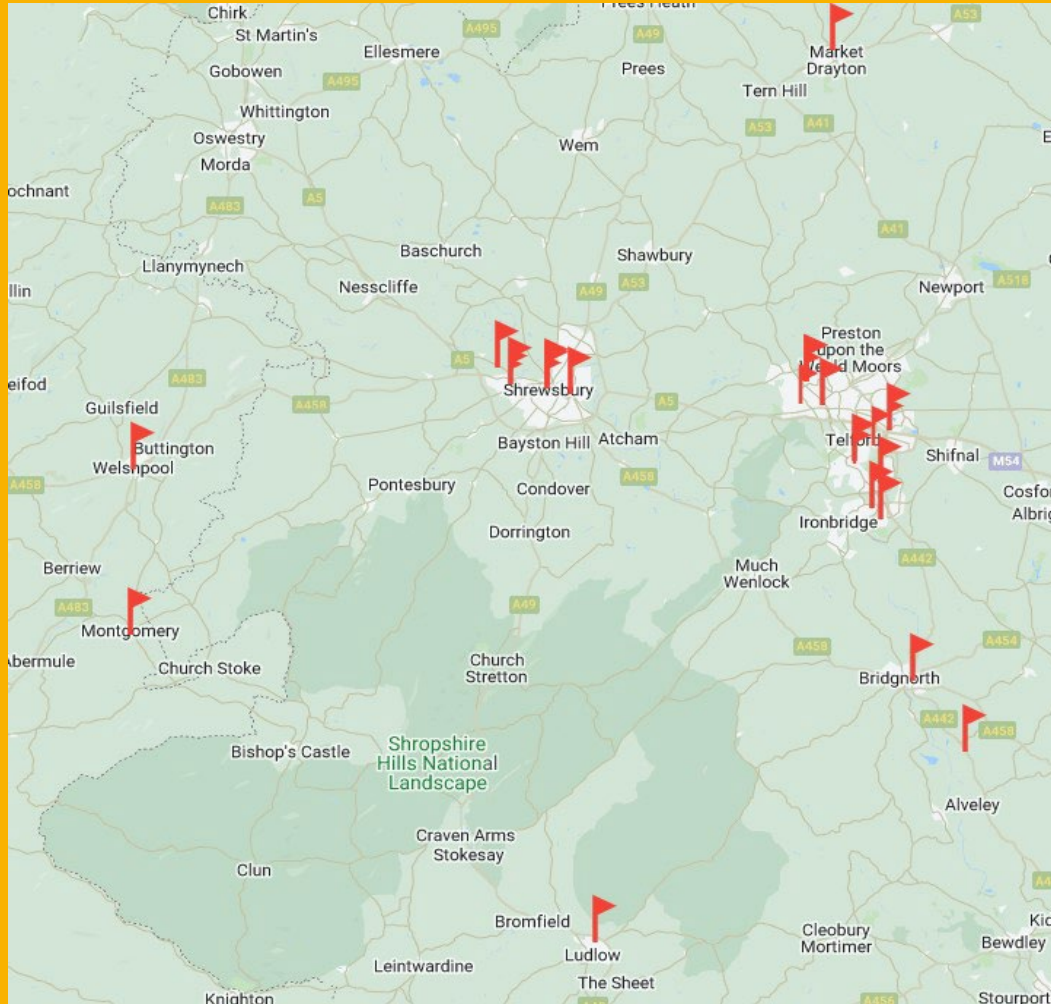
You Said	We did
<p>Currently there is one bereavement suite in the new build plus the ability to flex a room to provide a second room if required. Is it possible to have two Bereavements suites with the flexibility of a third when required?</p>	<p>We have looked at our plans and following your feedback we have incorporated a second Bereavement suite with the flexibility to have a third if required. The Bereavement suites will have their own entrance and will have a lounge area attached</p>
<p>Losing a baby is very difficult, and it can be really challenging if the sound from the post-natal ward can be heard in the bereavement suite – will you soundproof these rooms?</p>	<p>Yes definitely, we will ensure these rooms are well soundproof, as well as the areas around them. We can separate the corridor by the suites from the main ward to ensure that other patients are not using it as a throughway.</p>
<p>Hospital can be really challenging for people with neurodiverse needs, particularly the noise and sound. How will the new build accommodate for our patients who have additional needs</p>	<p>We have worked with our focus groups to look at the designs, we are looking to identify Calm spaces within the new build (areas that have retreat areas, which will reduce acoustic levels and have softer lighting). We will look at having sensory maps throughout the building, which will identify calm spaces, areas which may be busy or quieter areas – this will support our patients and carers navigate the building.</p>
<p>Would it be possible to have fold down seating in the corridors – if you are pregnant or have mobility issues the corridors can be quite a challenge and it would be really helpful to have some seating in these areas?</p>	<p>Yes, we are looking at putting permanent seating and calm areas along our corridors. Hospital corridors can often look quite bland and uninviting spaces – we are planning to put seating along our corridors to make some of them social areas, and other calm areas. It's important that all areas of the new build is designed to support our patients visiting the areas – not just the clinical space.</p>
<p>Can the public be involved in wording and wayfinding – some of the terms such as “crisis rooms” and “SDEC” can be stigmatising or too clinical for patients to know what they mean?</p>	<p>We agree, it is important that both our staff and patients understand the names of different areas. We are working with our clinicians to look at the wording, but we will also be asking our focus groups to get involved and support this piece of work.</p>
<p>Consider one more than one main entrance for the new build at RSH, due to the high level of footfall through the entrance to the building</p>	<p>Following feedback AHR have redesigned the front entrance of the new build – there will now be an entrance for emergency care and another for the rest of the building</p>
<p>Consider introducing free parking for community transport as it is often a difficult issue to manage</p>	<p>Links have been provided to community groups with our car parking team (within facilities) to action community vehicles being registered at our hospitals</p>
<p>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 quite isolating if in hospital</p>	<p>AHR will look to see what can be achieved in communal spaces with the maternity inpatient floor</p>

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

The map displays the 27 events we have attended in Quarter 4 (Jan – April 2024) and discussed HTP with the public.



In Q1 2024/25 we have the following events planned:

Date	Event	Required attendees
4 April 2024	HTP drop-in event, Wem Town Hall	HTP, Public Participation
11 April 2024	SALC- HTP presentation to Central Shropshire	HTP, Public Participation
15 April 2024	Public Assurance Forum	HTP, Public Participation, PAF members
16 April 2024	SALC- HTP presentation to North Shropshire	HTP, Public Participation
17 April 2024	Market Drayton Health and Wellbeing Festival	HTP, Public Participation
18 April 2024	Brookside Big Local Resident Meeting	HTP, Public Participation
23 April 2024	Telford HOSC presentation	HTP, Public Participation
26 April 2024	One Voice Telford	HTP, Public Participation
30 April 2024	About Health Event – HTP	HTP, Public Participation
15 May 2024	Age UK, HTP drop in event	HTP, Public Participation
15 May 2024	Whittington Parish Council Annual Public meeting	HTP, Public Participation
18 May 2024	Children's and Young People's HTP Focus groups	HTP, Public Participation
20 May 2024	NSRAF (Vetrans) HTP presentation	HTP, Public Participation
23 May 2024	Young People's Academy	HTP, Public Participation
26 May 2024	People's Academy	HTP, Public Participation
3 June 2024	MEC & SAC Focus Group	HTP, Public Participation
7 June 2024	W&C Focus Group	HTP, Public Participation
13 June 2024	HTP drop in – Church Stretton	HTP, Public Participation

COMMUNITY ENGAGEMENT: 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 4 no eligible* questions were submitted to the Trust Board, but there was a late submission for Q3 December 2023 Trust Board. All eligible questions submitted to the Trust Board from the public are published on our website - [Public Questions Log – SaTH](#)
- Following Board Questions submitted in December 2023, a response have been provided to the following questions:
 - Please advise each of the specific features of incapacity SaTH management attribute to be each of the cause/s of A&E ‘intense overcrowding’ ?
 - Please advise each of which department/s and/or committee/s within SaTH is/are addressing each of the cause/s of A&E overcrowding ?
 - In the interests of patient safety (increase in SaTH A&E deaths noted) please advise a) each of the actions SaTH is i) taking and ii) planning to provide capacities to meet patient need demand, to avert ‘intense overcrowding’ in A&E, to allow deep cleans; b) by which date will each of these be delivered?
- Responses to these questions can be found on our website [Public Questions Log – SaTH](#). A meeting has been arranged with the member of public who requested further information. The meeting will be on 26th April with the Director of Nursing, Chief Operating Officer and the Director of Strategy and Partnership



VOLUNTEERS - Volunteers' Highlights

We currently have 324 active volunteers at the Trust.

- Our **Youth Volunteer scheme** re-opened this quarter and we currently have 169 youth volunteers on the scheme
- This Quarter we sent out our **Annual Volunteer Survey** to find out the views of our volunteers. Following the analysis of the data we held a focus group with our volunteers in February and developed an action plan.
- Cohort 2 (Midwifery) of the **Volunteer to Career programme** finished with a celebratory evening of volunteers and staff. Of the 18 volunteers who completed the programme, 16 have either been offer university or college places to study midwifery/nursing/Health related subject or have secure employment at the Trust.
- **Volunteers' week 2024 1 – 7 June.** Plans are well underway to celebrate volunteer's week 2024. The celebration event is booked for 29th May which is in school holidays to allow for our young volunteers to attend

Quarter 4

New applications received

139

Volunteers completed the application process

80

Total Active volunteers

324

Total hours

7027

VOLUNTEERS - Volunteers' Highlights

- **Volunteers have been refreshing their training with the Moving and Handling team.** Volunteers complete eLearning and additional face to face training. Through our volunteer management software training our volunteers are alerted when this training needs refreshing. This quarter many of our volunteers were newly trained or “refreshed” in wheelchair, beds and roll cage training.
- **Volunteers have been asked to support with the big switch over to Careflow on the weekend of 19th April.** We already have three volunteers signed up to support and expect more to sign up closer to the time.
- **New PRH Volunteer-led Information Desk installed.** There is now a new volunteer-led Information Desk in the main entrance of PRH. The Information Desk is a place where people can come to ask for help, as well as promoting ways for the Public to #GetInvolved with the hospital



VOLUNTEERS – Annual Survey

- Each year an annual volunteer survey is sent to all active volunteers to gain their feedback and to look at ways we can improve our volunteer's experience at SaTH
- Following the collation of data from this year's survey we held a focus group with our volunteers to go through the results and subsequent action plan which has been developed by the volunteer team.
- **93% of volunteers would recommend volunteering at SaTH (7% said maybe)**
- **82% of volunteers are motivated to volunteer to give something back**



- Highlights from the survey included(out of a score of 10):
 - 9.1 felt that their role makes a difference to patients/service users
 - 9.2 agrees that SaTH respects individual differences (e.g. cultures, backgrounds etc
 - 8.9 feels valued by the Trust
 - 9.1 volunteers feel supported by volunteer team and 9.0 by wards and departments



VOLUNTEERS – Annual survey, You said, we did...

You said...	We did...
I think in A&E we could offer an earlier shift to cover breakfasts, say seven to eleven	These shifts are now available on My Impact
Would be great to have a volunteer's swipe card (Maternity) that maybe is kept in the office, and we sign it in and out on shift to save taking the other workers	We have made contact to the Ward Manager and Matron, and swipe passes are going to made available to maternity (antenatal and postnatal) volunteers
More emotional support offered to volunteers that may be dealing with difficult cases at the hospital	<p>The wards/department and volunteer team are available for any volunteer who may want to talk to us about any issue. Volunteers can also access some of our staff support services.</p> <p>We are planning to arrange regular drop-in sessions at both sites where you can have a coffee and chat to us about any concerns or issues.</p> <p>We have also designed (and currently in print) an information card which volunteers can attach to their ID badges which has contact information on.</p>
A functional vacuum would be good on the response desk (RSH), sometimes one is there sometimes not	We have been in contact with Admissions and asked them to place a request for this
Have more easy access to parking	Parking is an issue at both hospital sites. There are a number of initiatives which the Trust has put in place (including a Park and Ride service at RSH and PRH).

VOLUNTEERS – Annual survey, You said, we did...

You said...	We did...
I find a more detailed explanation of the role and also how the differing roles/groups/committees link would be extremely useful...less uses of acronyms, especially within reports	We have passed this feedback onto our patient experience team
Pay for travel expenses	We do pay travel expenses, please let us know if you aren't sure about how to do this
The geography of RSH A&E is challenging. Encourage RSH vols to download and print a map in case they need to run errands to there	We have added a map of A&E (kindly designed by one of our volunteers) to My Impact and will let all new A&E volunteers know to download it.
Volunteers not being utilised fully and wards/departments not understanding the volunteer role	A feedback session is being arranged with Volunteers to talk about ideas and try to include a member of staff to find out their suggestions. Over the next year we will be working with wards to develop our support of volunteers on placement and update our information pack for wards/departments
Local induction/Onboarding	Book in a feedback session with Volunteers to talk about ideas and try to include a member of staff to find out their suggestions. All volunteers are offered the opportunity to have more than one shadowing sessions with a more experience volunteer.
Volunteer team visibility	Members of the volunteer team will be signing up for shifts on either site – please let us know if you would like us to shadow your shift.

VOLUNTEERS - Volunteer to Career (VtC)

The aim of the clinical 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 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.**



We had a fantastic turn out for our presentation evening for Cohort 2. All volunteers were presented with their certificate of completion for the programme, a certificate of recognition for their hours completed and a presentation folder.

The volunteers were thanked for their dedication and hard work over the last few months and their combined total of over 1000 hours of volunteering.

A reflection video was played, which you can view [here](#).



“The V2C programme really helped me with my interview, I explained all the things I had learnt whilst volunteering and really boasted about the support sessions and all the amazing things we got taught - the interviewers were very impressed and said they had never heard of the programme before but it sounded amazing and very much needed in more trusts to give potential students a good idea of the role and gain valuable experience!”

VOLUNTEERS - Volunteer to Career (VtC)



The Shrewsbury and Telford Hospital
NHS Trust

Cohort 3 – Radiotherapy launches 25 April 2024

The aim of the clinically-led career 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 within **Radiotherapy** at the Royal Shrewsbury Hospital over a 6 month period.

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

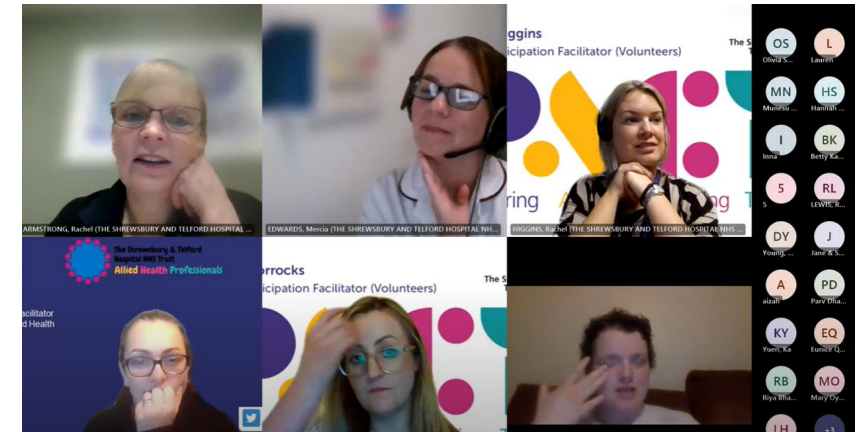


a Helpforce programme

Volunteer to Career

Volunteering for your future

- The 'Find out more' MS Teams for cohort 3 event was well attended with over 30 potential volunteers joining online to hear about the next VtC programme which is focussing on therapeutic radiotherapy.
- Recruitment is now closed with 16 people registered for the welcome event

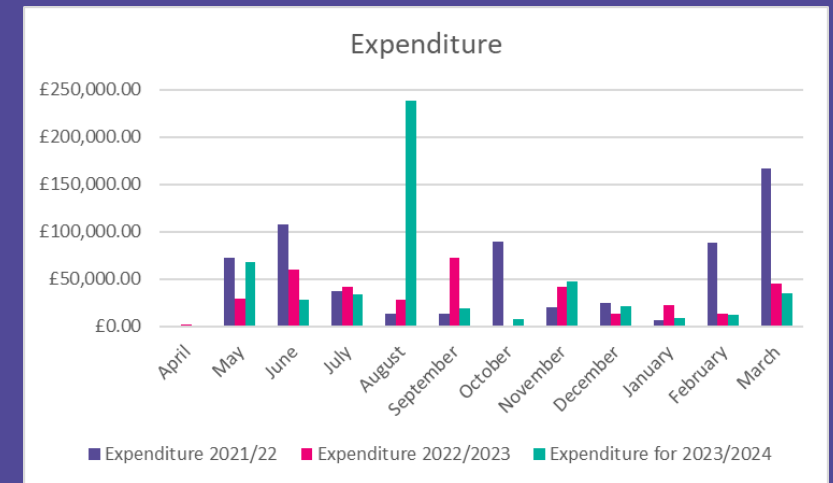
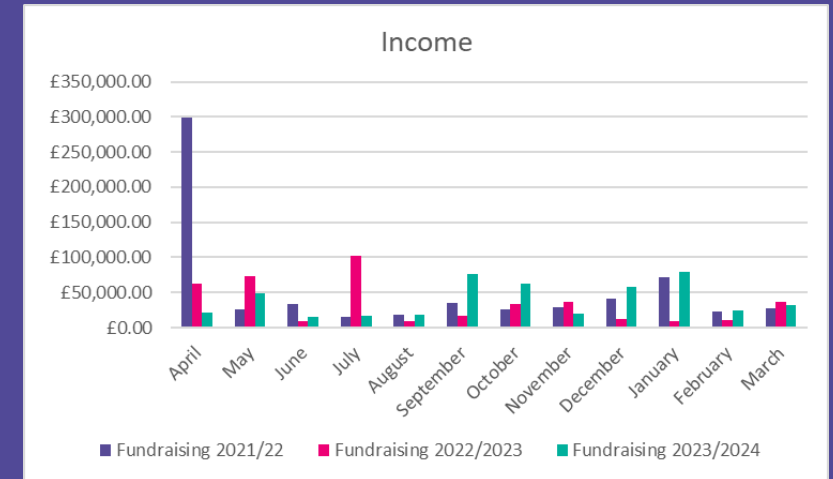


SaTH CHARITY - Highlights

- Income for the 3 months January – March 2024 was **£133,967** compared to **£56,890** in the same period last year. Expenditure for the same period was **£55,629** compared to **£80,875** in 2023.
- Final income for the year 2023/24 was **£471,251** compared to **£413,244** in 2022/23. Total expenditure for the year was **£517,437** compared to **£369,851**

During this period SaTH Charity had:

- 300 monetary donation entries registered on the charity database across 26 different funds
- 33 donations were marked as ‘In Memory’ donations
- 1,049 members of staff are now playing the staff lottery with 50% of proceeds supporting the Small Things Big Difference fund for staff and 50% given in prize money
- 1945 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 42 requests for support to enhance the experience of staff at work, which also promotes the work of the Charity.



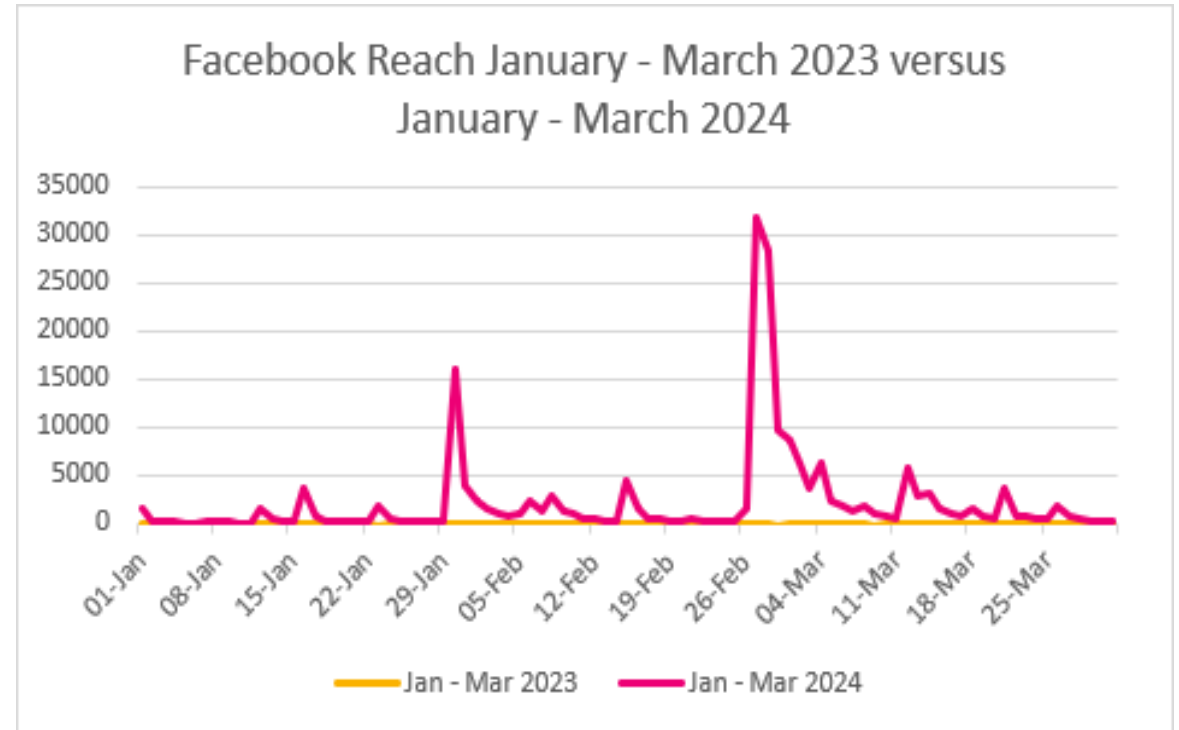
NHS CT Development Grant

The NHS CT funded grant to develop the SaTH Charity brand and visibility in the community is progressing well.

The main element of the grant is the funding of a Charity Communications Officer. Based on progress made the project has been adapted to increase the hours of the post to 30 as opposed to gaining external consultancy and agency support.

Key points from the project this Quarter include:

- A survey about SaTH Charity has gone out to staff and our community so that we can understand more about people’s understanding and perception of the charity. The survey results have now been collected and have been reviewed (please see the next slide for more detail).
- Social Media interaction continues to grow and develop. The more posts we can get out and share spreads the news that SaTH Charity is keen to engage and support fundraisers. (please see the reach of our social media opposite)
- Contacting local funeral directors asking how SaTH Charity could support them with providing information to relatives who may wish to donate to our charity. The objective was to remind key contacts that they could suggest SaTH Charity as a potential benefactor from collections. This has been positively received
- A Social Media post asking knitters to provide dementia blankets, and items for the Neonatal dept went viral with donations coming from Glasgow and Cornwall! This is shown in the two peaks on the graph opposite!
- The new Charity promotional leaflet has been designed and printed



* [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”

NHS CT Development Grant (Month 6)

As part of the project, a questionnaire was sent out to the public and staff via the quarterly newsletter, via Chatterbox and social media. The questionnaire had 39 responses. The baseline survey was previously conducted in July – August 2023.

After reviewing the data, it appears that the increased activity on social media is increasing awareness of the Charity, with **25% of participants hearing about us on social media**, this is compared with 2% in the previous survey.

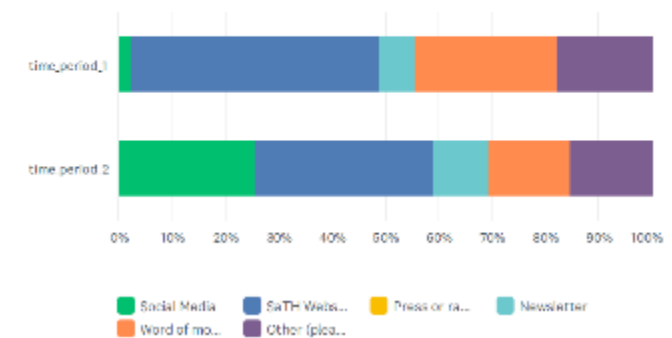
74% of people thought the charity had a positive on clinical outcomes. We recognised that we need to do more work on promoting the work we do and the items we purchase for clinical areas, so it's clear the impact we are having on clinical outcomes.

The biggest increase we saw from the previous survey was in relation to the question: 'Would you consider donating to SaTH Charity?' with those who answered 'Yes' to this question increased from 44% to 77%. Similarly, the number of people who answered, 'Yes' to 'Would you consider fundraising for SaTH Charity?' also increased from 42% to 56%.

The answers from the survey will help to direct our calendar of events and social media including the content of newsletters. One of the first actions is to advertise our fundraising packs and the support we offer for those undertaking fundraising for us.

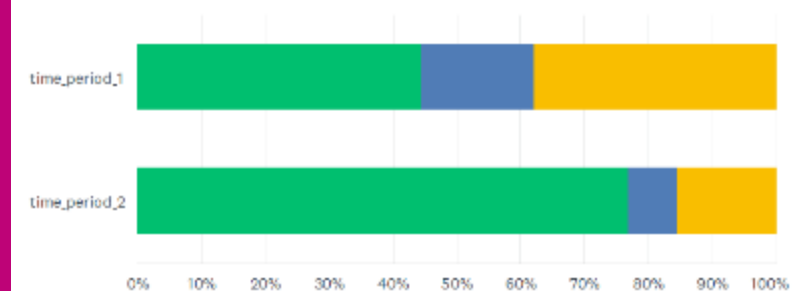
Q3 If you have heard of SaTH Charity, where did you find out about it?

Answered: 84 Skipped: 0



Q5 Would you consider donating to SaTH Charity?

Answered: 84 Skipped: 0



SaTH CHARITY - Expenditure

In the three months January to March 2024 there were **74** approved requests for charitable funds across **14** different funds. Examples of approved funding included:

- An Outdoor storage unit to protect and make more accessible the play equipment within the Children's Courtyard at PRH.
- A Specialist Phlebotomy chair for the Haematology dept to enable them to take bloods more effectively without causing patient distress.
- Gym equipment for the Therapy team to support patient recovery.
- Reclining chairs for AMU, SAU and the discharge lounge at RSH to improve patient experience and their comfort.
- Relative's chairs for Swan Rooms on Ward 25 and 27 to enable relatives to stay with patients at end of life.
- Development of facilities within the relative's room in Critical Care to include a sofa bed and armchair so that relatives can rest whilst visiting patients at a traumatic time.

"I would like to thank you both again for supplying our teams with the various items for our new offices in the old Accommodation Block at RSH. We have moved in today and I cannot tell you how fantastic it is to have these items available. Believe it or not, the Hoover has already been in use, the fridge is absolutely perfect and the microwave being eyed up for enabling different lunch options!"

Fiona Richards - Corporate Nursing



SaTH Charity Fundraising

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

- Hospital Trust Director (Nigel Lee) and his son Flight Lieutenant Tom Lee successfully scaled Mount Kilimanjaro for charity by climbing the mountain in Tanzania. They started their climb on Wednesday January 17 and reached the summit to raise funds for **SaTH Charity's Cancer Fund** and the RAF Benevolent Fund
- Following on from the successful of last year's SaTH Charity football tournament, which raised over £1,000 for the charity, colleague Mark Rawlings is organising another 7-a-side tournament for SaTH teams on Sunday 19 May, 10:00 – 16:00 at the Shrewsbury Sports Village. Money raised from the event is being donated to the Dementia Care Appeal fund.



SaTH Charity Fundraising

Our long-time supporter Sally Jamieson ran another exciting event. This time she organised a charity bunny trail for children, alongside a memory walk for adults in aid of our Dementia Fund and Alzheimer’s Research UK Shropshire Fundraising Group. The walk took place on Good Friday, 29 March between 10:00 – 15:00, in the Quarry Park in Shrewsbury. The event raised £1000 for the Dementia Appeal

Local organisations have supported SaTH Charity over Easter by donating Easter Eggs to children as inpatients or as visitors to our young people’s assessment units within our busy A&E departments. The Charity received support from local businesses and organisations including Tesco, Morrisons, Newtown Cricket Club, Sainsburys and Babcock International



PUBLIC PARTICIPATION - Forward Plan

- The Public Assurance Forum to meet on 15 July 2024 (last met 15th April 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 (e.g Learning disabilities, Young people and children, Mental Health)
- A Young People's Academy and a People's Academy to start in Q1
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public
- **Volunteers week 2024 1 – 7 June.** Plans are well underway to celebrate volunteers week 2024. The celebration event is booked for 29th May at the Wroxeter Hotel, which is in school holidays to allow for our young volunteers to attend



Dates for your diary

Date	Time	Event	Booking
Wednesday 10 April	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)	
Tuesday 30 April	18:30 – 19:30	<i>About Health Event</i> – Hospitals Transformation Programme	
Wednesday 08 May	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)	
Thursday 30 May	18:30 – 19:30	<i>About Health event</i> – Operational Update	

Hospitals Transformation Focus Group			
Date	Time	Event	Booking
Monday 03 June	10:00 – 12:00	Medicine and Emergency Care/Surgery, Anaesthetics and Cancer Focus Group	Via email
Friday 07 June	10:00 – 12:00	Women's and Children's Focus group	Via email
Saturday 18 May	10:00 – 12:00	Children/Young People Focus Group	Via email

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

People's Academy Dates for 2024



Young People's Academy	
Date	Location
Wednesday 22 May	SECC
Wednesday 24 July	PRH Education Centre
Wednesday 30 October	SECC

People's Academy	
Date	Location
Wednesday 26 June	SECC
Wednesday 25 September	PRH Education Centre
Wednesday 27 November	SECC

Public Assurance Forum meetings 2024

Monday 15th July 13.00-16.00

Monday 14th October 13.00-16.00