

AGENDA

Public Assurance Forum

Date: Monday 14th October 2024

Time: 1pm – 4pm

Location: Microsoft Teams

OPENING MATTERS AND PROCEDURAL ITEMS

Item No.	Agenda Item	Paper No / Verbal	Lead	Required Action	Time
2024/37	Welcome and apologies	Verbal	Co-Chairs	For noting	13:00
2024/38	Minutes of previous meeting	Paper 1	Co-Chairs	For noting	13:05
2024/39	Matters Arising/Actions	Paper 2	Co-Chairs	For approval	13:10
2024/40	Modular Wards	Verbal	Inese Robotham	For information	13:15
2024/41	Operational Plan	Presentation	Helen Troalen	For information	13:30
2024/42	Partner's updates	Paper 3	Forum Members	For approval	13:50
2024/43	SaTH Divisional updates on key issues	Paper 4	Divisions	For information	14:10
2024/44	Staffing Levels	Presentation	Hayley Flavell	For information	14:30
2024/45	Digital Transformation Programme update	Presentation	Sally Orrell	For information	14:45
2024/46	Update on HTP: <ul style="list-style-type: none"> • HTP Update Presentation • HTP Programme Board Engagement Report 	Presentation Paper 5	HTP team Julia Clarke	For approval For discussion	15:00
2024/47	SATH Strategy & Partnership update	Paper 6	Nigel Lee	For discussion	15:20

2024/48	EPRR Core Standards Submission	Presentation	Emma- Jane Beattie	For discussion	15:35
2024/49	Supplementary Information Pack i. Public Participation Plan: 2024/25 Plan on a page Update ii. Public Participation Plan Action Plan update iii. Draft Public Participation Quarterly Board Report	Papers 7-9	Divisions Julia Clarke	For information – to address any comments /queries	15:50
2024/50	Any Other Business	Verbal	Chair		15:55
	Dates for the Forum for 2025 and close of meeting	Paper 10	Chair	To note	16:00

Public Assurance Forum

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

MINUTES

Present:

David Brown	Non-Executive Director SATH (Co-Chair)
Cllr Joy Jones (part meeting)	Powys County Councillor and Chair of Newtown Health Forum (Co-Chair)
Julia Clarke	Director of Public Participation
Kate Ballinger	Community Engagement Facilitator
Kara Blackwell (part meeting)	Deputy Chief Nurse
Linda Cox	VCSA Deputy
Aaron Hyslop	Public Participation Team Facilitator (HTP Engagement)
Nigel Lee	Director of Strategy & Partnerships
Dianne Lloyd (part meeting)	Acting Deputy Divisional Director of Operations – Clinical Support Services
Sean McCarthy	Armed Forces Outreach Support Coordinator - Deputy
Hannah Morris	SATH Head of Public Participation
Katy Moynihan	Lead Nurse Theatre, Quality and Safety
Lynn Pickavance	Telford Patients First
Jenny Price (part meeting)	Centre Manager
Jane Randall-Smith	Llais Representative
Graham Shepherd	Shropshire Patient Group Representative
Zain Siddiqui (part meeting)	Deputy Director of Operations - W&C Division
Jan Suckling	Lead Engagement Officer at Healthwatch T&W
Emma Weaver (part meeting)	Deputy Divisional Director - Clinical Support Services

In attendance:

Rachel Fitzhenry	Senior Administrator (Minute taker)
Adam Ellis-Morgan (part meeting)	Assistant Direct and Technical Lead for HTP
Tom Jones (part meeting)	HTP Implementation Lead
Sarah Orrell (part meeting)	Digital Programme Communications and Engagement Manager
Paul Owens (part meeting)	Hospital Transformation Programme Centre Manager for Medicine and Emergency Care Division.
Rachel Webster (part meeting)	HTP Nursing, Midwifery and AHP Lead

Item No.	Agenda Item
2024/25	Welcome and Introduction
	David Brown opened the meeting by welcoming the group to the MS Teams meeting.
2024/26	CQC Report
	<p>Kara Blackwell presented the CQC Report. The report included:</p> <p><u>Overall position</u></p> <ul style="list-style-type: none"> • We have made good progress and have improved our overall rating to requires improvement. • Our services were rated overall as good for caring. • Our services were rated overall as requires improvement for safe, effective, responsive and well-led. <p><u>CQC feedback</u></p> <p><i>"Improving culture of high quality, sustainable care"</i> <i>"Staff we met felt proud to work in the organisation"</i> <i>"Patient experience at the heart of everything"</i></p> <p>We have made good progress, and this has been recognised by the CQC:</p> <p><u>Positive feedback</u></p> <ul style="list-style-type: none"> • Learning lessons from patient safety incidents. • Commitment to continuous learning and improvement. • Easy for people to give feedback. • Visible, approachable and stable leadership. • Leaders ran services well using reliable information systems. • Staff supported to develop their skills. • Safeguarding robust and well managed. • Patients, public and staff highly engaged to support high quality sustainable services. • Trust engaged well with people and the community to plan and manage services • Strong emphasis on the wellbeing of staff. <p>Staff assessed risks to children and young people, acted on them and kept good care records.</p> <p>Outstanding practice – well done</p> <p><u>More to go - areas for improvement</u></p> <p>Staff in some areas did not always treat people with compassion and kindness, respect their privacy and dignity.</p> <ul style="list-style-type: none"> • Consistency in supporting patients to make decisions about their care and take account of individual needs. • Services did not always manage control infection risk well • Waiting times from referral to treatment were not in line with national standards. • Ensuring patients are risk assessed in a timely way • Consistency in completion of care records • Mandatory and legally required training • Not all staff understood how to protect people from abuse • Operational and financial challenges - greater partnership working • Management of risk and performance

Next steps

Reflect on progress so far
Embrace the feedback
Maintain focus on Getting to Good quality improvement journey
Work together and with partners

Please see link below of the full CQC Inspection Report for RSH published 15th May 2024.

<https://api.cqc.org.uk/public/v1/reports/0c2344aa-8cfa-414e-be98-ac7958ac9c01?20240827202516>

David Brown informed the group to email Rachel.Fitzhenry2@nhs.net if have any questions regarding the CQC Report.

2024/27 Minutes of previous meeting (15th April 2024)

The Minutes of the previous meeting on 15th April 2024 were approved as an accurate reading.

2024/28 Matters Arising/Actions

Separate Actions sheet attached.

2024/29 Partner's updates

iii) Llais

Jane Randall-Smith gave a brief update on Llais:

Llais summary report of what was heard during engagement in Llanidloes is available on the Llais website at the following link:

<https://www.llaiswales.org/news-and-reports/reports/llais-powys-executive-summary-llanidloes-engagement>

Llais also produced a poster, as a quick way to see what were the key findings and the actions which will be taken.

LLAIS
Eich llais mewn iechyd | Your voice in health and social care
a gofal cymdeithasol | and social care

Llanidloes Engagement - What We Heard

Key Findings

- Appreciation for Local Services** - Many people praised the care and dedication of staff at Llanidloes War Memorial Hospital, Llanidloes Pharmacy and Arwystli Medical Practice.
- Access to Services** - Difficulty obtaining NHS dental care, length of wait for planned care, distance to travel for routine and emergency care.
- Social Care Needs** - Worry that care and support not available when people need it.
- Service Delivery** - Difficulties getting appointments with GP, unhappy with telephone triage, desire for more face-to-face appointments, better communication needed between services and with patients.
- Holistic Approach to Healthcare** - A desire for care that supports the broader well-being of individuals.

Actions Taken

- Sharing Information with Trusts** - Feedback from our report will be addressed with NHS Trusts in England and other Health Boards in Wales, as part of Powys Health Board's commissioning review meetings.
- Travel** - Llais to remind Trusts and Health Boards about arranging suitable appointment times for patients who have a distance to travel.
- Planned Care** - Powys Health Board will use our feedback to inform future work on Waiting Well services.
- Some Specialist Services Cannot be Provided in Powys** - Due to patient safety and clinical governance. The Health Board aims to provide care closer to home where it is safe and viable to do so.
- Powys County Council** - Committed to improving public information about social care services.
- Shortage of Care Workers** - The Council is attempting to address this and Llais will be monitoring the issue.
- Feedback Shared with Powys Regional Partnership Board** - To support the continued planning and delivery of priorities for joint working between health and social care services.

For more information, please contact us: Website: www.llaiswales.org
Phone: 01874 624206 / 01686 627632 Email: powysenquiries@llaiscymru.org

By Post:
Llais Newtown, Ladywell House,
Newtown, Powys, SY161JB.

Llais Brecon, Neuadd Brycheiniog
Cambrian Way, Brecon, Powys, LD3 7HR.

#BeHeard
#ShapeTheFuture

There was a month-long engagement in Brecon area during April. Once all the information and insights had been collated, a joint workshop was held with representatives from Powys Teaching Health Board and Powys County Council to develop a plan of action/commitments. The report is being finalised at the moment and will be published on the website in due course.

During June, engagement occurred in Llandrindod Wells and Rhayader area and the information gathered is currently being collated.

Nationally, Llais has published its 3-year Strategic Plan for 2024-2027 and its Annual Plan for 2024-2025.

These are available on the website:

[A National Conversation: Llais Strategic Plan 2024-2027 | LLais \(llaiswales.org\)](#)

[Llais Annual Plan 2024-2025 | LLais \(llaiswales.org\)](#)

Julia Clarke said that the engagement poster was very useful and enabled the findings to be shared more widely (in this case by geographical locality).

ii) Shropshire Patient Group

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

Graham advised that he has attended the HTP Urgent and Emergency, Medicine, Anaesthetic, Surgery and Cancer Focus Group.

Additionally, he attended the HTP About Health presentation as well as the monthly Community Cascade which covers activity areas across the Trust where there is ongoing restructuring etc.

Graham has also had several face-to-face sessions with the HTP team members to obtain more detailed information in areas where time was not available in planned sessions.

iii) Telford Patients First

Lynn Pickavance gave a brief update on the Telford Patients First (TPF):

Lynn advised that membership numbers were lower and as Covid is prevalent again this means that the group's most vulnerable members don't always want to sit in a room with a group of other people, although they do try our best to have the room divided up.

Kate Ballinger attends the TPF meeting every month to give an update on HTP and Jan from Healthwatch also comes every month to update. There is lots of information being circulated to TPF by SaTH, so people can't say they're not receiving information

iiii) Telford & Wrekin Healthwatch

Jan Suckling gave brief update on Telford & Wrekin Healthwatch:

Jan advised that T&W HealthWatch are still going out doing outreach and engagement. They have a new Outreach Lead, and they continue to collect feedback and attending all the Wellbeing Hubs that Telford & Wrekin Council have put in place. The main feedback they receive continues to be around access to all services especially in primary care.

The GP report is due to be published on the 25th of this month

The feedback and signposting numbers are going up and becoming more visible.

	<p>Healthwatch still need volunteers, and although there is a good presence within a areas of Telford, they are trying to concentrate and go into the outer reaches where there isn't a lot of places for the team to engage,</p> <p>Now the GP report is nearly in place, the plan is to look at the hospital discharge process next. One of the volunteers is doing a project on pharmacies, with 15 surveys completed so far about what patients think about their pharmacies, what services they think the pharmacies provide and asking the pharmacist what their feelings are around 'Pharmacy First'.</p>
2024/30	<p>SaTH Divisional Updates on Key Issues</p>
	<p>i) Women & Children's Zain Siddiqui gave the key updates from the Division:</p> <p>Maternity</p> <ul style="list-style-type: none"> • CQC inspection rated as "good" across the board. • Year 5 of CNST safety requirements achieved. • Full implementation of Saving Babies Lives version 3 achieved. • Recruitment up to template for midwives including the 10 International recruits who now have their LMC registration and are being to progress fully onto rotas. • 15 band 5s to start in September recruited from our trainee midwifery programme. <p>Neonates</p> <ul style="list-style-type: none"> • CQC inspection rated as "good" across the board. • Phase 2 of the Maternity and Neonatal Transformation Programme now underway with an increased emphasis on improvements in Neonates. • Support from Allied health professionals- speech and language therapy, physiotherapy, occupational therapy and psychology now fully in place. • Recruitment of a Neonatal services Matron is nearing completion. <p>Paediatrics</p> <ul style="list-style-type: none"> • CQC inspection rated as "good" in all domains • Paediatric Vitals Software (system for electronically recording and reporting on vital signs) implementation on track and due to launch mid-July. • New equipment procured and in place for patient observations • Recruitment plan for paediatric nursing in place and on track <p>Gynaecology</p> <ul style="list-style-type: none"> • Continued focus on waiting list recovery through use of insourcing activity at weekends • Engaging with ICB colleagues to support the establishment of Women's Health Hubs in community settings <p>Fertility</p> <ul style="list-style-type: none"> • Funding approved from League of Friends to purchase laser to support embryo treatments. <p>Update on any current or future service developments or changes and how the team are involving the community in these changes:</p> <p>Focus groups have taken place with children and young people for the paediatric ward elements of the Hospital Transformation Programme.</p> <p>Continued partnership working with our Maternity & Neonatal Voices Partnership. Engagement via focus groups for HTP planning paused during pre-election period.</p>

David Brown asked if neonatal staffing been problematic. Kara Blackwell (Deputy Chief Nurse) informed the group the staffing has improved and there's a trajectory for to increase numbers up to The British Association of Perinatal Medicine (BAPUM) standards which we need to achieve.

Zain Siddiqui left the meeting.

ii) Patient Experience

Kara Blackwell gave the key updates from the Division:

Patient Led Assessment of the Care Environment (PLACE):

- PLACE was completed in November 2023, the key priority actions which the PLACE Group will be focusing on delivering this year have been agreed as dementia equipment, handrails, TV access and artwork in the hospital environment.

Complaints:

- Complaints improvement work continues across the Divisions to embed new structures and processes for managing complaints which encourages accountability at specialty triumvirate level. Further work in relation to early intervention and timescales for responses is ongoing.

There are now 60 Equality Diversity and Inclusion (EDI) champions in our wards and clinical areas. There is a training program for our ward senior leaders in relation to EDI to champion the work in relation to ensuring the needs of all our patients and their loved ones are met and that the care we deliver is inclusive to all patients/carers with a protected characteristic.

Experience Based Design Project:

The patient experience team led an Experience Based Design (EBD) survey at the Community Diagnostic Centre (CDC), Hollinswood House, Telford. A combination of four patient representatives and volunteers additionally supported data collection exercise. The survey collected data which looked at the care journey as well as the emotional journey of people's experience of accessing phlebotomy and radiology at the CDC. The questionnaires were completed by 139 patients, or their representative, and 15 staff. The approach aimed to understand how patients 'felt' at each stage of their journey and identify areas for enhancement so the patient experience could be improved. Results from this data identified areas for improvement which included, external signage, car parking, wheelchair accessibility, and opportunities to improve the waiting room and clinical rooms (e.g. radios to distract anxious patients during blood tests). This data was further used as a basis for discussions in a focus group which included nine staff (representing phlebotomy, radiology, and CDC management) and two patient representatives. The group considered the findings of the survey and discussed their ideas for improvement in the identified areas.

This information was collated, a report written and used to support an application for revenue that will enable improvements to be made at the CDC. Initial feedback from NHS Elect has noted that CDC-Telford was one of a few centres that exceeded expectations of the study by collecting over 100 patient responses. *'A big well done! This achievement is truly commendable, so thank you for your dedication and effort.'* The revenue application was successfully awarded the funding to support all of the improvements identified through the work.

Sought feedback from patients, carers, and the public to help inform the development of a new Experience of Care Strategy:

A survey has been undertaken to seek feedback from people accessing services within the hospital, community members, volunteers, and staff. Surveys were promoted widely within the community through: GP practices, patient participation groups, libraries, community groups and social media. Additional steps were taken to secure feedback from people accessing treatment within the Trust during this period with stands in the hospital, and an SMS text message survey being sent to a finite number of people accessing outpatient, inpatient, and emergency services. Feedback was received from a range of sources, enabling 2,049 voices to be heard. A focus group has been held with patient representatives to share the survey results and co-develop priorities.

Food tasting as part of a procurement process to select a new supplier.

- Work has been undertaken by the Facilities Team to source a new catering supplier for the Trust. As part of the procurement exercise each provider produced 11 set menu items to enable food to be assessed under a range of categories. Patient representatives were encouraged to participate to capture a patient voice in the decision-making process.

Update on any current or future service developments or changes and how the team are involving the community in these changes:

Learning Disability and Autism

A Learning Disability and Autism Patient Experience Group has been set up with key stakeholders from providers across the ICS as well as patients and carers. The first meeting is planned to take place later in July.

Equality Delivery System (EDS) 2022:

- We have started to plan our EDS 2022 submission for 2024/25 and which services will be included in this. As per last year once these have been identified we will be working with our patients, local communities and key stakeholders across the System in relation to their involvement in this process.
- The Patient Experience team have begun an improvement project to launch the initiative 'It's OK to Ask at SaTH' to improve communication between healthcare professionals and service users and empower patients to ask about their care pathway. A workshop is planned with patient representatives to co-produce the questions for the campaign.

Julia Clarke thanked Kara Blackwell for leading the work following on from on the HTP Learning Disability and Autism Patient Experience group. Some of the experiences that patients and their families had gone through as very distressing to hear which highlighted that this is such an important piece of work.

Jane Randal-Smith asked about the food tasting with new suppliers and if this was the first time it's been done and what was the outcome of the exercise. Kara Blackwell (Deputy Chief Nurse) informed the group, it is the first time that this has been done and we had feedback from a couple of our patient representatives around that process which they found helpful and there was also feedback around more staff benefiting from tasting some of the food provided because we always get comments on the food. It was important getting their feedback, because even though we give food out, we don't know what it tastes like, which is learning for us.

Julia Clarke informed the group, that food tasting is also part of the SaTH Academy programme, so that we can get independent feedback.

Kara Blackwell left the meeting.

iii) Clinical Support Services, Emma Weaver gave the key updates from the Division:

Workforce

Progress is being made with recruitment within the nationally recognised shortage professions of Radiographers, Sonographers, Pharmacists, Speech & Language Therapists and Occupational Therapists, although there are still times when services are affected by our staffing levels.

Of note, one of trainee Sonographers has just passed their first year of training and we have successfully recruited a Lead Speech & Language Therapist for Instrumental Assessments who is due to start in July / August. This is a highly specialist post focused on using imaging for swallowing assessments and will address the long waiting times for these assessments.

Recruitment to Pharmacist and Occupational Therapist positions remains challenging and every effort is being made to attract applicants for these vacancies as they have a significant impact upon patient flow through our hospitals and discharges. However, there have been some recent appointments and changes to working patterns in Pharmacy to make posts more attractive

Service performance against notable standards

The Division have been successful in gaining funding for 2 important business cases that will support the achievement of national clinical standards:

- Trauma Rehabilitation Co-ordinator
- Critical Care Dietetics and Speech & Language Therapists

Recruitment is underway for these posts.

Pathology, Microbiology and Blood Sciences have recently had successful accreditation assessments by UKAS and have met all the required clinical and safety 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.

Following the pandemic the DM01 target has been phased towards full recovery and the expectation is that we should achieve 85% performance by end March 2024, rising to 95% by the end of March 2025.

We are working to review our staffing templates to support extra sessions for MRI and we have extended the opening hours in our new Community Diagnostics Centre in Telford to 6 days / week in June with a plan to move to 7 day opening in another few months' time. We are also being supported by external companies with additional Sonographers and Radiographers for MRI scanning.

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) remains consistently at pre-pandemic levels: both at 98% against a target of 95%.

Update on any current or future service developments or changes and how the team are involving the community in these changes:

Patient engagement and involvement

The Clinical Support Services Division Patient Experience Group continues to meet every month and has recently completed a new “Welcome” booklet to encourage more people to think about becoming a Patient Engagement Representative in our Division.

The CSS Patient Engagement Group has recently been focusing on:

- 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. Recent work has included:

Community Diagnostics Centre, Hollinswood House, Telford:

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 action plan was developed following analysis of this feedback

The Phlebotomy Departments at both hospitals are changing location due to the Hospitals Transformation Programme:

- At PRH the majority of appointments have now moved from the Mallings’s Building to the CDC, which is proving popular with patients and staff alike, particularly as car parking is free and spaces are available outside the CDC. At PRH we still have a room for urgent clinic patient referrals.
- At RSH the service will move from Elizabeth House into William Farr House this autumn. It is thought that this will also be a popular move for patients and staff as car parking will be much easier and initially free of charge.

“The First 15 Steps” assessment visits:

Patient representatives have joined staff representatives in carrying out the 15 steps assessments and have given a valuable and 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
- RSH Outpatient and Community Therapy Department (on the William Farr House site).

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

iv) Surgery, Anaesthetics Critical Care & Cancer

Jenny Price gave the key updates from the Division:

Surgery

- Appointment into Urology consultant post – start date September 2024.
- Additional funding from Cancer Alliance for 6 months to support Urology patients for prostate biopsy.
- Business case approved for continuation of Breast pain service in Community – this service provides capacity to see Breast pain pts in the community ensuring our one stop clinics are utilised appropriately.

Elective Hub at PRH

- First all-day paediatric day 14/06/24. Planned all day list twice per month. 33 children planned for surgery across 4 theatres. Play worker available throughout the whole day working with pre & post op children; Overall a very successful day for the Elective Hub.
- Feedback received from patients is very positive.
- The lists going through the hub will address the current backlog.
- Members of the public (previous long serving staff) were invited and attended the opening event on the 10th June.

Oncology

Talks continue with Clatterbridge regarding colorectal oncology patients. They are regularly updated with the waiting times. Currently all patients wish to be treated at SaTH and do not want to travel to Liverpool.

Update on any current or future service developments or changes and how the team are involving the community in these changes:

HTP Centre Manager and Matron in post and supporting the Division with ongoing changes to the site - includes public engagement regarding developments and changes to access points for outpatient departments. This will have a particular impact on audiology services due to vibration and noise from the construction site at RSH

ENT/Max Fax/Ophthalmology

- ENT now fully staffed.
- ENT theatre utilisation highest in England.

MSK (Musculoskeletal)

- Suspension of Arthroplasty program at PRH due to upgrade to Ward ventilation system. Another Ward location has now been sourced and plan to restart operations is set for early in July 2024. SATH has been utilising RJAH and mutual aid for patients that meet the criteria to be transferred on for their procedures.
- Continuation of the Fracture Liaison Service at PRH has not been approved by ICB therefore patients identified from clinics and ward visits are being advised of further steps to be taken and being referred to their GP for further tests and bone density scans.

Feedback from Patient Representative: familiarisation visit to MSK wards PRH (30/5/24). Positive discussion with the ward managers

- Notice boards and information leaflets
- Lighting and reflections on notice boards
- Roles and responsibilities
- Ward layout
- Reducing falls
- Electronic board update/information

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 in memory of their son. The order has been placed and the Lingen Davies volunteers will installing it.
- Friends and family surveys are completed every day.

Radiotherapy

	<p>Volunteers have set up a tea/coffee trolley service for all the oncology/radiotherapy patients whilst they are waiting for their treatment and appointments in the Lingen Davies reception area. This drinks service is run by Lingen Davies Charity.</p> <p>Jenny Price left the meeting.</p> <p>v) Medicine & Emergency Key updates from the division: Following on from Channel 4's Dispatches programme (24 June 2024), which highlighted the challenging conditions in our urgent and emergency care services at the Royal Shrewsbury Hospital it was noted that as with other hospitals, SaTH is facing significant challenges with urgent and emergency care. We understand these challenges and are investing in our services and making steady improvements as a Trust, as noted in our recent CQC report. However, there is still much more to do; we do not want to be in a position where we are caring for patients on corridors.</p> <p>We have detailed some of the ways we are working to improve care and support a positive experience for patients on our website. The full Trust statement is on our website: Statement from The Shrewsbury and Telford Hospital NHS Trust – SaTH.</p> <p>Since the programme, teams are working to reduce infection risk, increase cover in escalation areas, improve responsiveness to deteriorating patients, respond quickly to patients in pain, improve support for immunocompromised patients, and ensure additional housekeeper support.</p>
2024/31	Update on HTP
	<p>Rachel Webster and Tom Jones presented the update on HTP and briefed the group on the key areas:</p> <p>Improvements to Emergency Care</p> <ul style="list-style-type: none"> • We currently have two inadequately sized Emergency Departments, with the delivery of key clinical services split across two sites (including critical care), insufficient physical capacity (particularly for planned care services), mixing of planned and unplanned care pathways, and poor clinical adjacencies. Our buildings are aging and do not have the space or flexibility for modern healthcare. • By locating all our clinical specialties on one site, with an expanded, more modern Emergency Department and new adjacent acute floor, we will improve the care we provide. • Patients will receive more timely care and earlier review by the relevant specialists. This will reduce the amount of time patients spend in our hospitals and so improve flow through the system. • Designed to meet future and current needs of the population, the expanded Emergency Department will have: <ul style="list-style-type: none"> • 4 additional resuscitation bays that are larger and purpose built compared to the current 8 at RSH • A 110% increase of bed capacity in majors, giving a bed capacity of 21 • A larger ambulance waiting area with covered canopy to improve patient experience during transfer • A separate children's waiting area, offering 5 more paediatric assessment rooms (currently 2 at RSH)

Construction next steps

Next steps and site changes to RSH:

Monday 22 July - Helipad moves temporarily to the Boiler House recreation ground (off Somerby Drive) for the duration of the main build.

Monday 29 July - Outpatient entrance closes and changes to the car parks come into effect. The new road leading into RSH will now come into use.

Monday 5 August - Hoarding around the perimeter of the construction site will start to be installed.

September 2024 - Introduction of one-way system

Wayfinding and signage

- As outlined, there will be some changes to the way colleagues, patients and visitors access and travel around the RSH site
- A wayfinding and signage working group has been set up, which has had input from external experts, to discuss and develop plans
- In each car park, there will be large airport style signs, with display boards providing further information
- There will be receptionists at each entrance to help visitors find their way around the site

As these changes are temporary, and subject to change as the build progresses, the public are directed to the website: <https://www.sath.nhs.uk/patients-visitors/getting-to-us/royal-shrewsbury-hospital/>

Process for focus group actions

- Speciality focus groups are additional sessions on topics that warrant further exploration for the HTP project
- All the speciality focus group actions are fed back into the two regular quarterly focus groups

Rachel Webster and Adam Ellis-Morgan left the meeting.

HTP Programme Board Engagement Report

Julia Clarke gave a brief overview of the HTP Engagement Report:

(Following the announcement of a General Election on 4th July, all engagement related to HTP stopped on the 23rd May, due to being in pre-election period and recommenced on the 5th July 2024.

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

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.
 - 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, Children and Young People, Visual and Hearing Impairments, Veterans
- **About Health Events** – Held via MS Teams, these are quarterly events which are accessible to members of the public and staff.

	<ul style="list-style-type: none"> • 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 short A4 booklet is being distributed with a longer form version being developed by the communications team. • Community and organisational membership – SaTH have over 4800 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. • Monthly Hospital Update – Hospital Update is held 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 were included with each of the Clinical design 1:50 meetings with the Clinical teams and architects to help examine the plans on a room by room basis.
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2024/32	SATH Strategy & Partnership Update
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	<p>Nigel Lee provided a summary of key actions and activities relating to both the Trust and Integrated Care System (ICS) strategy development and implementation, as well as associated work.</p> <p><u>Integrated Care System (ICS)</u> Some highlights this quarter include:</p> <ul style="list-style-type: none"> • Focus on Cancer • STW launched the Talking Therapies service and single point of access for people struggling with anxiety, depression or post-traumatic stress disorder (PTSD) in the county. • LGBT+ people in the county, aged 50 - 100+, were invited to join SAND in some discussions to identify questions around particular themes • Online workshops to shape a digital platform for depression and mood disorders has launched as part of the Midlands Mental Health mission, multimillion-pound venture funded by the government, to speed up development of treatments for mental ill health. If you are interested in joining the Mission's Digital Platform project, please email: c.r.searle@bham.ac.uk. <p><u>NHS Shropshire, Telford and Wrekin (STW) Integrated Care Board</u></p> <ul style="list-style-type: none"> • ICB Management of Change commenced and is continuing to progress with the appointment of some new ICB executives • An ICB development session was held at end of May, which covered Health Inequalities, Rural Proofing in Healthcare and EDI. The aim is to
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encompass the rural proofing research in a new Rural health and wellbeing strategy being developed (details at Appendix 1).

- Work continues on developing a framework for system-wide action on Long-term conditions. A strategic document was produced earlier in 2024. There is significant potential to align the work to the ambitions of the Local Care Transformation Programme, where the focus on pathways, supported by development of Integrated Neighbourhood teams, is fundamental.

Shropshire, Telford and Wrekin Health and Wellbeing Board (HWBB)

Shropshire Health and Wellbeing Board

Areas discussed included:

- Joint Strategic Needs Assessment Update - focus on Children and Young People JSNA and Youth Survey.
- CYP Mental Health Transformation Plan
- CYP Social Prescribing
- Shropshire Food Poverty Alliance Report
- Shaping Places
- Health Protection Update

Shropshire Council are also jointly developing the 'Marches Forward Partnership', with leaders and CEOs from 4 Councils either side of the Welsh Border (Shropshire, Hereford & Worcestershire, Monmouthshire and Powys). Opportunities to align work on health, employment, energy and other major programmes are being discussed.

Shropshire, Telford and Wrekin Integrated Place Partnership Boards (SHIPP TWIPP)

Some of this quarter's topics included:

SHIPP

- Pharmacy First
- Healthwatch Diabetes Report
- Children's Practice Oversight - Neglect Screening Tool and GCP2
- Local Care Neighbourhood working
- Domestic Abuse in Shropshire
- Better Care Fund - annual report template and BCF update
- SHIPP Strategic Plan including Local Care and Neighbourhood Working Subgroup
- Smoking Cessation Service Update
- Shropshire Council CQC inspection

TWIPP

- CYP Social, Emotional and Mental Health delivery / BEEU review update
- Best Start in Life update
- STW ICB Governance Update
- Women's Health Hubs
- Special Educational Needs and Disabilities (SEND) update including: SEND & Alternative Provision Strategy., Ofsted & CQC Inspection March 2023 - outcomes and work so far, West Midlands SEND and AP Change Programme

SATH Workstreams

Provider Collaboratives

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

- Focus in the Committees in Common covering the NHS provider collaborative has been on areas of development that do not duplicate action and reporting that would be covered in existing system programmes.
- N8 Pathology Network Board met in early June, signifying an important next step in network maturity.
- Collaboration with UHNM continues to progress focussing on maxillofacial, gynae, cardiology, microbiology, urology and pathology. A fuller report is planned for the Trust Board.
- A workshop was held with Powys Teaching Health Board in April to review future opportunities in developing our partnership working and pathway development. Further updates to follow.

Internal Strategies

We continue to develop NHS Impact (Improving Patient Care Together) programme of work with updates reported via the getting to good programme; one of the 5 main sections refers to vision and strategy development and engagement.

Graham Shepherd noted, one of the biggest reasons why we have bed blockers (patients with complex needs) is possibly because the community can't take them off our hands. From the information given it appears Shropshire Community Trust will be coming on site to run the new modular wards at RSH but queried whether there will there be enough staff to do this.

Nigel Lee could not answer the staffing issue on behalf of the Community Trust, but advised that inpatients with more complex needs have been divided into three categories:

- Pathway 1 - Discharged to home - while patients might still need some support e.g. some social care. We have worked closely with the Community Trust on the virtual ward and tried to increase the numbers of pathways for people to still be supported in their own home.
- Pathway 2 - Where patients require some rehabilitation and recovery. The community hospitals are staffed by Shopcom and they're designed to take those patients, which may require slightly more than the average care.
- Pathway 3 - Where people are there for care and residential home, including Elderly, Mentally and Infirm (EMI) Homes, spaces which are unfortunately at a premium. The Community Trust don't own those, they are largely local authority led. The Community Trust will have patients in their beds that need to go to the next phase of their treatment and care. We've still got challenges and the improvement plan continues to be refined with the focus on a whole system plan. The wards are trying to identify discharge plans as early as possible, which helps plan more effectively.

Jane Randall-Smith noted that there had not been much recent news around health developments in Newtown

Nigel Lee advised that he understood that the Strategic Outline Case had been submitted by Powys Health Board and that following a review of capital spending by the Welsh Government the Health Board had resubmitted a prioritisation

	<p>template. The Health Board asked SaTH to comment on it around 3-4 months ago, and we provided a letter of support for the project. We're happy with what it will provide and we're happy to look at how we might support with areas of speciality or even training. .</p>
<p>2024/33</p>	<p>Digital Transformation Programme Update</p>
	<p>Sally Orrell (Digital Programme Communications and Engagement Manager) gave a brief presentation on the Digital Transformation Programme Update:</p> <p><u>About the programme</u></p> <ul style="list-style-type: none"> • In 2020 the Trust was given funding to begin a Digital Transformation Programme • Projects in the programme include replacement of outdated systems and the introduction of new systems that will give innovative ways of working • These systems will interlink and work together to: <ul style="list-style-type: none"> • Reduce/replace paper processes • Provide a single platform to view a patient's record <p>The aim of the programme is to provide information to the right people, at the right place, at the right time. This will transform our digital services to improve the quality, safety and experience of care that we provide to our patients.</p> <p><u>What has been achieved so far</u></p> <p>Badgernet Maternity: A maternity notes system that patients can self-refer and access their maternity notes through</p> <p>Vitals 4.3: An observation system that shows early warning scores and includes assessments for conditions such as sepsis</p> <p>Bluespier Theatre Management System: Used in our theatres to book procedures and track patients through operations</p> <p>MediSIGHT: An Ophthalmology Medical records Service to record procedures, view clinical summaries, record diagrams and freehand notes.</p> <p>ICNET: Used to track infections and patterns of infection in our hospitals</p> <p>CareFlow PAS: (Patient Administration System) holds patient demographics, appointments and inpatient spells</p> <p>CareFlow ED: Tracks patients through our Emergency Departments. Also includes a new electronic eCAS (casualty) card</p> <p><u>What's to come</u></p> <p>CareFlow Connect: An integrated communication platform for clinicians, delivering faster communication, better collaboration and safer care.</p>

Patient Engagement Portal (DRDoctor):

The portal will be used by patients to access documentation such as appointments and letters.

Single Sign On (Imprivata):

Imprivata OneSign allows users quick and secure access to clinical and administrative applications with a simple tap of an ID badge.

Bluespier Pre-op:

Creates a fully paperless pre-op journey that integrates into CareFlow PAS and Bluespier.

ICE Order Comms and Results Reporting:

Supports the electronic ordering of tests, examinations and services. These will be available to view alongside the patient's record in PAS and through CareFlow Connect, creating a more wholistic view of the patient's record in one place.

Capture Stroke:

Allows users to record stroke information. The software is proven to improve patient outcomes by ensuring that strokes are identified sooner, allowing clinicians to deliver better, more-timely, evidence-based stroke care.

Jane Randall Smith asked, "How did the implementation of Careflow go and what sort of feedback has the team had?"

Sally Orrell advised that it was the biggest digital change we've ever gone through. There was a lot of hard work that went on in the background in preparing the different teams, but the digital team worked very hard to support the trust during that time. We also had floor walkers come in to support staff for 24 hours a day for five weeks after the 'go live' to make sure that there was on site presence. There has been lots of positive feedback, people have said it's much more intuitive to use. We've developed quick reference guides, which are guides on pages to make sure that people can do things quickly and easily.

Jane Randall Smith asked about the Patient Portal and what do patients do who are not IT literate?

Sally Orrell informed the group that this is the very initial scoping stage at the moment. However, that issue been raised already and that's something that that will be addressed. The way the patient portal will work is that if you don't engage with the application digitally, there will be a process where that letter is automatically sent to you on paper instead. It's an important part of the project to make sure that we accept that not everyone is comfortable digitally.

Nigel Lee informed the group, several of the systems that Sally ran through are not just SaTH, all the communications encompass primary care and we're in discussions with Robert Jones about how we do that commonality of systems, with consistency of process, that will help drive consistency on how we support patients across the system. As part of the order communications process to Powys Health Board, they will join with us and be a stakeholder on that.

Three key areas being focused on more recently have been around driving the work on community and primary care. The second one is focusing on prevention. The third is the underpinning of the vital nature of both digital and data and using that technology. We have the ambition where we have set that out, but we would need that support from national capital funding to be able to do that.

Julia Clarke offered Sally Orrell support if needed to work with the individual patient representatives.

Sally Orrell left the meeting.

2024/34

Supplementary Information Pack

i. Public Participation Plan: 2023/24 Action Plan Update

Julia Clarke gave a brief update of the Plan on a Page for Charity, Engagement and the Volunteer teams.

ii. Draft Public Participation Quarterly Board Report

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.

Community Engagement (slides 5-16 in accompanying presentation)

Following the announcement of a General Election on 4th July, all public engagement was stopped on the 23rd May until 5 July, in line with Cabinet Office guidelines.

- 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 (4926) and organisations (423) continue to increase.
- 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, building links with our hard of hearing and deaf communities and attending Shropshire Council's Joint Strategic Needs Assessment events in Wem and Market Drayton
- The Public Participation Department has also been supporting our Trust to engage with our local communities around the Hospital Transformation Programme (HTP).

Volunteers

- We currently have 304 volunteers, who have given over 7669 hours of volunteer time in Quarter 4 across a wide range of activities There are over 30 different role descriptions across all areas on the Trust including non-clinical support roles
- The first week in June was National Volunteers week and there were a range of events and activities that took place this year to celebrate our volunteers, including a Thank You event at the Wroxeter Hotel and two of our volunteers going on Radio Shropshire to talk about their volunteering experience
- This quarter our third cohort of volunteers started the Volunteer to Career programme within Radiology at the Royal Shrewsbury Hospital. A fourth cohort is being planned in Maternity for September

	<p><u>SaTH Charity (Slides 21-28)</u></p> <ul style="list-style-type: none"> • Income for the 3 months of Q1 2024 was £182,619 and expenditure for this period was £66,989. • 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 • The SaTH Charity Abseil from the RSH ward block is being planned for September 2024. With our onsite charity partners Lingen Davies and the League of Friends we are coming together to raise funds to improve the health care of local people through this unique charity abseil.
2024/35	Any Other Business
	Nothing noted.
2024/36	Dates for the Forum 2024
	Monday 14th October at 1pm

PUBLIC ASSURANCE FORUM ACTION LOG

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
15th April 2024						
2024/24	15/04/2024	The Members updates and the Divisional updates will now be done at the beginning of the PAF agenda.	Divisions	15/07/2024		CLOSED
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. Dianne Lloyde gave a detailed presentation on DNAs.	CLOSED
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		CLOSED
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.	Julia Clarke	15/04/2024	Contacted Louise Graham who has made contact with Sarah Kerr re Veteran recruitment. Recommend to close	CLOSED

Public Assurance Forum: 14 October 2024

Agenda item		2024/41	
Report Title		2024-25 Operating Plan	
Executive Lead		Helen Troalen – Executive Director of Finance	
Report Author		Adam Winstanley – Deputy Director of Finance - Operational	
CQC Domain:			
Link to Strategic Goal:		Link to BAF / risk:	
Safe	√	Our patients and community	√
Effective	√	Our people	√
Caring	√	Our service delivery	√
Responsive	√	Our governance	√
Well Led	√	Our partners	√
Trust Risk Register id:		N/A	
Consultation Communication		N/A	
Executive summary:			
Executive summary:		The Trust has developed an annual operating plan in line with NHS England policy and guidance. The plan outlines the activity that the Trust will commit to during 2024/25, the performance targets that this capacity will deliver, the workforce required to deliver this activity and the overall cost ensuring this is within an affordable financial envelope.	
		The activity plan, the workforce plan and the financial plan all triangulate and have been approved by NHS England.	
		Performance of the annual operating plan is reported on in the public domain through the Integrated Performance Report which is presented to the Board of Directors in public. Assurance on the reported outcomes is gained through the committees of the Board of Directors such as the Quality and Safety Assurance Committee, the Performance Assurance Committee and the Finance Assurance Committee.	
Recommendations for the Board:		The Forum is asked to: note the key priorities for 2024/25 which are set out in the objectives and enablers slide.	
Appendices:		Appendix A – our objectives and our enablers 2024/25	

Our objectives 2024/25

Building on our work in recent years, we have agreed five core objectives for the coming year. These objectives will provide focus and help us move forward together in our improvement journey.

1

Deliver our quality priorities and the next phase of our Getting to Good programme

We will...

1. Deliver the quality priorities
2. Embed the Patient Safety Incident Response Framework (PSIRF)
3. Develop a Safety Strategy

2

Deliver elective services and implement enhanced recovery

We will...

1. Achieve 85% theatre utilisation by end of Q3 2024/25
2. Achieve PIFU performance to maximise productivity in outpatients
3. 90% of patients waiting over 12 weeks are validated every 12 weeks
4. Focus capacity on specialties with significant waiting lists to implement one stop diagnostics where appropriate
5. Achieve 52 week waiting times

3

Maintain Faster Diagnostics Standard and achieve 62 day Referral to Treatment Standard

We will...

1. Adopt Best Practice Timed Pathways for all tumour sites
2. Reduce backlogs for 104 and 62 day waits to deliver the 62 day performance standard
3. Ensure timely tracking and validation of patient pathways

4

Improve Urgent and Emergency Care (UEC) performance in line with GIRFT recommendations

We will...

1. Adopt and implement the SHOP (Sick, Home, Other, Plan) model across all our wards
2. Achieve 33% of discharges before midday
3. Deliver minors, urgent treatment centre and children and young people 4 hour performance

5

Use of resources – operate within our budget through delivery of efficiency and productivity measures

We will...

1. Deliver our efficiency programme
2. Deliver our headcount plan
3. Deliver within our agency budget
4. Deliver our income plan through our activity

Our enablers

In addition to our five objectives we have identified five key enablers, which will help ensure success.

1

Live the People Promise in our teams through valuing difference and inclusivity



2

Deliver our workforce plan, including agency cost reduction, based on the principles of Train, Retain and Reform



3

Develop an estates plan to optimise our current estate and continue to progress our Hospitals Transformation Programme



4

Develop and implement a sustainable travel plan to improve patient and staff experience



5

Electronic Patient Record (EPR) – complete phase one (implement and embed CareFlow PAS and ED) and commence phase two



Stronger Together

Transforming urgent and emergency care is everyone's responsibility



Public Assurance Forum	
Member Update	
<p>Name of Organisation: Shropshire Patient Group</p> <p>Name of Member: Graham Shepherd</p> <p>Date: Monday 14th October 2024</p> <p>Time: 1.00- 4.00pm</p> <p>Location: Microsoft Teams</p>	
1.	<p>Key updates from member organisation</p> <p>Members across the County are now attending the events which the Public Participation Team is providing on the HTP progress. Other members are participating on various Focus groups.</p> <p>Our member is still involved with the Outpatient programme (Not part of HTP)</p> <p>The MEC&SAC Focus group was attended and also the About Health meeting which has currently focused on HTP issues.</p> <p>There has been the opportunity to discuss in more detail, certain issues with staff. Including the significant operation to close the Outpatients front door and redirect patients through three new alternative entrances, the major one being via the Treatment Centre located at the rear of the hospital, which is now acting as the Hospital Main Entrance. Other accesses are via Ward Block and the gym entrance off Evolution Road.</p> <p>Major repositioning of roads, car parking, walkways and extensive new direction signs has been introduced. Building a complete Major extension, while continuing to run a fully functional hospital will be a challenge, with safety of the public and staff crucial. It will also be awkward for the contractors having to work in close proximity with the public.</p> <p>There has been involvement with members of the team in some of these areas, and under very difficult working conditions, it feels that they have delivered a safe and acceptable outcome.</p> <p>Internally, ensuring that patients are transferred quickly and safely from entrances 1 and 2, back to the outpatient area has caused some issues. These are predominantly due to the distances from entrances 1 and 2.</p> <p>Before closing, the clinics were located adjacent to the entrance, but are now 250 and 200 meters distance, which presents frail and elderly, together with people with walking difficulties serious issues without adequate assistance.</p> <p>Unfortunately, there was a series shortage of wheelchairs available at both locations, frequently running out!! Staff and volunteers have worked hard to cope with this situation, but it still exists.</p> <p>HTP members have revisited the situation, with patient involvement, and additional wheelchairs are being purchased, but it is likely that it will be at least two months since opening, before this comes into effect.</p> <p>Unfortunately, lack of wheelchairs has been an issue throughout the hospital for a number of years, there is confident that this will totally resolve the situation. Wheelchairs are not allocated by department!</p>

Significant work has been undertaken by HPT members to provide additional signage and information assisting people to clearly navigate the corridors. These signs will now include the distance to clinical locations together with anticipated times required. There will also be coloured floor signs at appropriate interceptions.
The times/distances will also assist patients arriving to determine if they need assistance.

2.	Any items for discussion at the Public Assurance Forum from member organisation
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3.	Action update from previous meeting (if applicable)
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Report by:	Graham Shepherd
Date	01/10/24

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, Clinical Support Services Lead for the Hospitals Transformation Programme and Projects

Date: Monday 14th October 2024

1. Key updates from Division

Workforce:

We are making progress with recruitment within the nationally recognised shortage professions of Radiographers and Sonographers with 6 new Radiographers coming into post and 4 of our trainee Sonographers successfully progressing through their training programmes.

Recruitment to Pharmacist and Occupational Therapist positions remains very challenging and every effort is being made to attract applicants for these vacancies as they have a significant impact upon patient flow through our hospitals and discharges.

We are pleased to note that all 8 of our Foundation Year Trainee Pharmacists who have been training with us for the past year passed their registration exam. This is testimony to the quality of the training we provide and although all 8 have taken up posts in other Trusts we are hopeful that this 100% success rate will boost our reputation and result in successful recruitment in future.

We are also consulting with Pharmacy staff on moving to a 9-day fortnight working pattern as this appears to be a better option for work-life balance.

The first of our internationally recruited Physiotherapists has just gained promotion to a band 7 post which is a fabulous achievement for them and for the teams supporting them.

The Therapy Centre has developed an Improvement Plan which includes workforce planning and skill mix options and has recently recruited to some newly funded posts:

- Trauma Rehabilitation Co-ordinator to meet the Trauma Centre standards
- Dietetics and Speech & Language Therapists to meet the national Critical Care standards. We are still struggling to recruit a Critical Care Pharmacist and Critical Care Occupational Therapist, and we are hoping that having a more complete multi-disciplinary team in Critical Care may attract applications for these posts.

Service performance against notable standards:

- Cellular Pathology and the Mortuaries are currently undergoing their accreditation assessments by UKAS against updated clinical and safety standards.
- Nuclear Medicine, Pharmacy and the Community Diagnostic Centre in Hollinswood House have recently had CQC inspections.

Current Diagnostic Management Standard 1 (DM01) performance

The DM01 standard aims to ensure that 95% of patients do not wait longer than 6 weeks for an appointment in one of our Radiology Departments.

Although our DM01 performance reached 95% in March 2024 it has slipped back to 62% overall at the end of August 2024. There are several reasons for this including the return of our mobile scanning units at the end of March when funding for their contracts ended, reduction in the availability of companies providing outsourcing capacity for reporting and an increased focus on the Faster Diagnostics Standard to support the national backlog of cancer patients.

We are working to review our staffing templates to support extra sessions, and we have extended the opening hours in our new Community Diagnostics Centre in Telford to 6 days / week for all modalities. We are also now looking at options for mobile scanners and working with private companies who may now be in a position to provide additional support with reporting.

Breast Screening

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) remains consistently at 98% and 96% respectively against a target of 95%.

Pharmacy

Pharmacy are currently installing 4 automated devices (2 at each site) to dispense medicines to improve the discharge processes and access to pre-packed “TTO” medicines out of normal working hours.

Cellular Pathology

Cellular Pathology have received additional funding to expand the service to 6 days a week and this will begin on a voluntary basis soon pending permanent recruitment for the additional staff required. This will help the service to reduce the reporting backlog and meet the turnaround standards for reporting (95% within 7 days for urgent tests)

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. We are delighted to report that we now have 5 patient representatives, and our meetings are also attended by the Lead Chaplin who also champions the patients’ voice.

At the last meeting the group received a presentation on “Gather” which is an inter-active tool that pulls together the themes from the Friends and Family Test to provide reports, allow analysis and create action plans and provide feedback to patients in a “you said....we did” style. Therapies, Radiology and Phlebotomy are very keen to start using Gather and will be taking this forward.

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

- Pharmacy Advice Sheet – we are looking for patient representatives from our group to join a review led by the Trust’s Service Improvement Team into the use of this advice sheet and it’s wording.

- Community Diagnostics Centre, Hollinswood House, Telford:

The CDC is now routinely benefiting from approx. 500 patients a month providing their feedback, the vast majority of which is very positive. We are also pleased to report that funding has been granted for a mobile unit to act as a waiting room adjacent to the mobile MRI scanner in the car park at Hollinswood House and this should be ready for the winter. We are also expecting a return visit by the Experienced Based Design team to review progress with the action plan identified in January, the majority of which has been delivered.

- Replacement Nuclear Medicine Gamma camera at RSH:

Building work to create a new department for the Gamma Camera in the new Evolution Scanning Suite started in August 2023 and took approximately a year to complete. Patient engagement is ongoing through the CSS Patient Engagement Group and it is planned to carry out an 15 steps assessment visit / Experienced Based Design survey later this year.

- You Tube video’s: 2 videos have recently been posted on You Tube showing the work of two of our services and have been viewed by the Patient Experience Group as well as at Regional / National professional conferences. They include patient feedback which was very positive about both of these services:

- The Stroke Therapy Team have set up group work to support inpatient rehabilitation. The team were finalists in the Patient Experience Network National Award ceremony on 3rd October 2024 for showcasing their work which sets new standards in healthcare.
- The work of the Pharmacy Discharge Medicines Service which is now 2 years old and supports about 500 patients a month. The service has just been extended to Powys patients.

“The First 15 Steps” assessment visits:

Patient and staff representatives have continued with the programme of 15 steps assessments and have provided valuable feedback on some of our services.

The following areas have been assessed and each area has developed an action plan based on the feedback received:

- RSH Radiology Department
- PRH X-ray 1
- PRH X-ray 2
- PRH Therapy Department
- RSH Outpatient and Community Therapy Department (on the William Farr House site)

In the last month, the teams have visited:

- RSH Inpatient Therapy Gym
- Both mortuaries to look at the areas family and friends can access when they come to visit a loved one

All areas have already put in place some of the “quick win” actions identified by the visiting teams.

The visiting teams were extremely impressed with the care shown to patients / deceased patients and their family and friends and particularly remarked that this care was exemplary in both of our mortuaries.

Our next plan is to carry out 15 steps visits in:

- Radiology – RSH Treatment Centre MRI and breast scanning
- Phlebotomy at both sites following moves to new locations due to the construction work involved with the Hospitals Transformation Programme:
 - At PRH the majority of appointments have now moved from the Malling’s Building to the CDC, which is proving popular with patients and staff alike, particularly as car parking is free and spaces are available outside the CDC. At PRH we still have a room for urgent clinic patient referrals.
 - At RSH the service moved from Elizabeth House into William Farr House in September and is still settling into its new location however the decision has been taken to carry out the visit now to make sure the patients are getting the best experience, particularly in relation to car parking now that the William Farr House Site has building work and a temporary access road.

3. Action update from previous meeting (if applicable)

Appendices:

Report by:	Dianne Lloyd
Date	04.10.24

Public Assurance Forum

Divisional Update

Name of Division: Women & Children

Name of Divisional Lead: Carol McInnes

Date: 14th October 2024

Time: 13:00 Location: Microsoft Teams

1. **Key updates from Division**

Maternity

- CQC inspection rated as “Good” across the board.
- The midwifery workforce continues to face significant challenges due to long- and short-term sickness and parental leave. However, there was improvement in August 2024, with sickness/absence levels dropping below 30 WTE, compared to over 35 WTE in June and July.
- The workforce is currently over the nominal level by +6 WTE, with 19 Band 5 midwives set to start this month. Additionally, 2 more international midwives have been recruited through the successful international recruitment programme, and 10 international midwives have achieved NMC registration.
- Long-term sickness has improved, with positive acuity reaching 89% in August, exceeding the national target of 85%.
- An Insight visit by the ICS on 3rd June focused on engaging with women and their families. The review was positive, confirming the Trust’s strong family and public engagement processes. Constructive feedback was provided on enhancing engagement with diverse and seldom-heard communities, expanding work with multi-faith groups, strengthening the Maternity and Neonatal Voices Partnership (MNVP), and developing a communication plan for families involved in the Independent Maternity Review who wish to engage with the Trust.
- A second visit on 25th July focused on birth choices and preferences for women. The visit was very positive, with both staff and women providing evidence of support options being offered and discussed.
- The ANNB Quality Assurance visit was conducted, and no urgent or immediate recommendations were made. The visit was overall positive, with a report for factual accuracy and further recommendations expected.
- CNST Year 6 is progressing well, with all safety actions on track and none at risk.
- Maternity has launched a QI project for ATAIN, aiming to reduce mother-baby separation, with a focus on early recognition of chorioamnionitis and nasogastric tube feeding.
- The Interim Director of Midwifery has identified areas for service improvement, with additional QI projects planned for Maternity Triage, Postnatal Ward, Diabetes Service, and Antenatal Clinic.

Neonates

- Neonates received a “Good” rating across all areas in the recent CQC inspection.
- Phase 2 of the Maternity and Neonatal Transformation Programme is now underway, with a stronger focus on improvements in Neonates.
- The Neonatal Ward Manager has now started in post.
- A Neonatal Matron has been recruited and will start in November.
- The final report from the Neonatal External Review has been received, and an updated action plan is in development.
- Recruitment is in progress for Neonatal Nursing Quality posts, following a planned trajectory to meet British Association of Perinatal Medicine (BAPM) standards.
- The upgrade of the 3 parent flats is nearly complete, enhancing comfort for parents. An electric parent bed will also be provided, improving access for disabled and post-surgical mothers.

Paediatrics

- The CQC inspection rated all domains as “Good”
- The Vitals electronic observation system was launched on 16th and 17th July in acute paediatric services and Paediatric ED across both sites to enhance early detection and treatment of deterioration in children and young people (CYP).
- The paediatric sepsis module of Vitals was introduced on 10th September to improve sepsis detection and expedite care for affected CYP.
- A walkaround of paediatric areas by the Paediatric Transformation Assurance Group took place on 30th September, receiving positive feedback; the overview report is pending.
- Five newly qualified nurses began their roles on 23rd September and are undergoing a comprehensive induction, starting with a well-received week of live classroom sessions. Only a small number of vacancies remain in the paediatric areas.

Gynaecology

- Ongoing focus on waiting list recovery through weekend insourcing activity.
- Continued collaboration with ICB colleagues to support the development of Women's Health Hubs in community settings.
- An 18-week external service provision has been introduced to help manage the surgical waiting list.
- A Gynaecology-Oncology Clinical Nurse Specialist has been appointed and will soon start in post.
- Recruitment for a Gynaecology Advanced Nurse Practitioner is currently underway.

Fertility

- Funding approved from League of Friends to purchase laser to support embryo treatments.
- Recruitment of bank staff nurses with gynaecology skills has been completed to ensure availability of appropriately trained staff for short-notice requirements

2.	Update on any current or future service developments or changes and how are you involving the community in these changes?
<ul style="list-style-type: none"> • Focus groups with young people have been held as part of the Hospital Transformation Programme, gathering valuable feedback on issues such as meals and ward activities in the paediatric ward. • Ongoing collaboration with the Maternity & Neonatal Voices Partnership continues. • Engagement through focus groups for Hospital Transformation Programme planning was paused during the pre-election period. 	
3.	Action update from previous meeting (if applicable)
Report by:	Zain Siddiqui
Date	4 th October 2024

Public Assurance Forum

Divisional Update

Name of Division: Medicine & Emergency Care

Name of Divisional Lead: Laura Graham

Date: Monday 14th October 2024

Time: 1.00-4.00pm Location: Microsoft Teams

1. **Key updates from Division**

- **Frailty Assessment Units** - Within the first six weeks of opening, nearly 200 patients have been cared for in the units. Early data shows patients are spending fewer hours in an emergency department after arrival (more than three hours) and on average four days less time in hospital overall. An average of 75% of patients are also going back to their own homes and are less reliant on social care for discharge.
- **Initial Assessment** - Additional triage facilities for children and young people in the Emergency Department at PRH. We have seen an increase in the number of young patients currently being seen at both hospitals within the national target of 15 minutes (the time to initial assessment). Adult triage times have also improved.
- **Waiting Times Screens in ED Departments** - we are piloting new digital information screens in our ED waiting rooms to help inform patients of the average times they will be waiting to be seen.

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

None currently.

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

Not Applicable

Report by:	Hannah Walpole, Deputy Divisional Director of Operations, Medicine & Emergency Care
Date	04/10/2024

Public Assurance Forum

Divisional Update

Name of Speciality: Patient Experience

Name of Speciality Lead: Kara Blackwell

Date: 14th October 2024

Time: 14.00-17.00 Location: Microsoft Teams

1. **Key updates from Division**

- **Complaints:**

The Complaints Team have continued to work closely with Divisions to improve the length of time that complaints investigations are taking and have seen reductions in the length of time that complaints are staying open for. Work is ongoing to reduce the backlog of complaints

The team are also working with Divisions on improving the quality of responses and learning from complaints. .

The Patient Advice and Liaison Service (PALS) extended their opening hours to include weekend working from April this year, to make the service more accessible, and are ensuring that the team spent time in clinical areas, so that the service is visible to patients and families

- **Learning Disability and Autism Patient Experience Group**

The first meeting of the new LD and Autism Patient Experience Group took place in August. The meeting was well added and included service users, Trust staff and wider staff from partner organisations and the voluntary sector.

- **Experience of Care Strategy**

The Experience of care strategy is being finalised, this was developed with patient, family and our local community engagement and will go through our Quality meetings in November before being launched

- **Workforce and Education**

We have continued our recruitment initiatives and now have very few `band 5 nursing vacancies across the Trust. In September 2024 we welcomed over 40 newly qualified nurses to the Trust. The reduction in temporary staffing as a result of our ongoing recruitment will enable a stable substantive workforce and help improve patient care and experience.

We are currently working with Telford colleague around the introduction of apprentice HCAs into our workforce, this well enable an opportunity for our young people living locally to undertake apprentice training and be appointed to

substantive health care support worker posts when they finish their apprenticeship with the opportunity to then undertake further training to become Nursing Associates and for some our registered nurses of the future

- **Equality, Diversity and Inclusion (EDI)**

The EDI Advocates Group has been meeting monthly since it was relaunched in April 2024. New members have been recruited and the group has grown in size with a wide range of lived experience and interests now represented. There is a refreshed Terms of Reference, and a deputy co- chair patient representative will be elected now the group is larger. The group has agreed on some priorities including involvement in Electronic Patient Record projects, Veteran Awareness, Sunflower Lanyard initiative, screening programmes patient information and opportunities for co-production. The group priorities will be reviewed at least quarterly and added to as decided by the group.

- **Patient Safety Incident Response Framework**

One way in which the Patient Safety Team has developed to facilitate greater involvement of those involved in patient safety incidents is through the recruitment of a dedicated Family Liaison (FLO) Team, these posts are now in place across the Trust. The main focus of this team is to facilitate the inclusion of the experiences, thoughts and feelings of those involved in patient safety incidents in reviews, learning, and improvements. The team also plays a key role in ensuring those involved are kept updated on the progress of the review, identifying any additional support needs, signposting to available support services and obtaining answers to family questions. This new service has already shown a positive impact on those involved in patient safety incidents, allowing their voices to be heard and helping them to contribute to ongoing service improvements through their increased involvement.

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

- **Learning Disability and Autism Patient Experience Group**

Continuing to recruit to our new Learning Disability and Autism Group, to enable patients and families to share their experience and help us work to improve services provided using their experience of care.

- **Alcohol Liaison Services**

Current pilot in relation to Alcohol Liaison Service provision showing real progress in improving the care of our patients with alcohol related issues and addressing

health inequalities. We are working with Public Health in Shropshire around a business case for provision of service.

- **Equality Delivery System 2022 (EDS2022) Domain 1: Better Outcomes for All**

In relation to this year's EDS 2022, focus group sessions are being planned for November 2024. Three services will present evidence and be reviewed and scored with patient, staff and external organisational representation. Invitations will be sent out in October to key stakeholders representing groups who are negatively impacted by health inequalities. The action plans from the services reviewed in 23/24 will be shared to ensure transparency on progress from the last EDS 2022.

3.	Action update from previous meeting (if applicable)
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Not Applicable

Report by:	Kara Blackwell
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Date	02/10/2024
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Public Assurance Forum

Divisional Update

Name of Division: Surgery, Anaesthetics, Critical Care, Cancer

Name of Divisional Lead: Michelle Cole / Emily Hinkinson to represent Division

Date: Monday 14th October 2024

Time: 1.00 - 4.00pm Location: Microsoft Teams

1. Key updates from Division

New PACE (patient and carer experience) representative for the Division have met with the Centres. There is good engagement with patient representatives and the ward / department staff

A series of familiarisation visits by the patient representatives have been arranged. To date visits have been made to these areas

- Day Surgery RSH
- Outpatients RSH
- Theatres RSH
- Pre-operative Assessment RSH
- Day Surgery PRH
- MSK Wards RSH
- MSK Wards PRH

Further visits are being planned for visits to SAU /Ward 37 RSH, Telford Elective Surgery Hub, Head & Neck Ward 8, Outpatients Ophthalmology RSH

The inpatient survey action plan is embedded into wards with feedback from the people accessing the Surgery, Anaesthetic, Critical Care and Cancer services. The following themes for improvement include

- Admission to hospital
- Inpatient care and environment
- Medical care feedback
- Nursing care feedback
- Care and treatment satisfaction
- Patient information
- Pre and post op care
- Discharge planning
- Family and carers input and experience
- Patient feedback on services provided and improvement that could be made

The Division is continuing to maintain focus on Getting to Good, quality improvement journey which includes

- Centres focusing on risks; monthly meetings arranged and reporting monthly to the Divisional Committee
- Re-establishing elective services in Lofthouse at PRH. All day lists available Monday to Friday. Reviewing suitable procedures i.e. Urology (Urodynamics), Ophthalmology (Oculoplasty), Vascular (Varicose Veins), Orthopaedics (Carpal Tunnels and other local anaesthetic cases). Max Fax and Vascular local anaesthetic skin cancer cases
- Pre Op Assessment Homeworking – service improvements. Increasing the capacity of appointments, reducing carbon footprint, digital solutions, increasing overall patient satisfaction. Future initiatives include increasing the number of home clinics
- GIRFT recommendation for a band 4 coordinator to support improvements with on the day cancellations. Currently the requirement is under review with a plan to support on a trial basis
- Interventional radiology; waiting lists and capacity review

Surgery/Gastro:

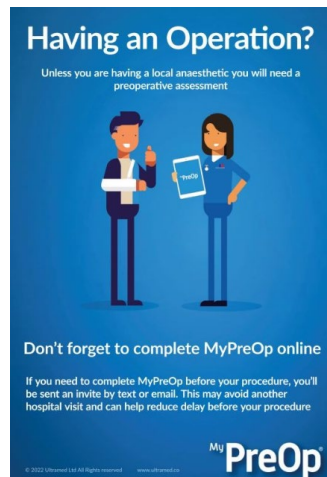
- Appointment of Urology consultant – start date November '24
- Additional funding from Cancer Alliance for 12 months until March '25 to support Urology patients for prostate biopsy
- Appointment of Colorectal Consultant with an interest in pelvic floor- start date October '24
- TRIOMIC 12 month research project due to go live Q3. The project will change the current pathway and patients will be seen in a community setting for a simple device-led investigation, with the overall aim to reduce invasive investigations whilst also providing a faster diagnosis (cancer and non-cancer). Colorectal Surgeon Mr Jon Lacy-Colson is leading on this on behalf of SaTH. The project will also reduce first appointment via routine referral to treatment (currently 52+ weeks) and optimise colorectal consultant workforce
- Significant reduction in first urgent suspected cancer within colorectal, was 42 days now 6 days
- Improvements on Ward 37 at RSH (Surgery). The Therapy team has been leading on a project with the Improvement Hub to set movement goals for patients. The Nursing team has then 'completed' or 'achieved' these goals with the patients. As a result, in August complex discharges reduced to 48% compared to 60% as a baseline in June, and total length of stay reduced to 10.5 days compared to 14 days. This is really great news for our surgical patients who are able to get home quicker, avoiding deconditioning, and this is enabling better patient flow

Theatres

- Work continues in theatres with the surgical ward involvement to improve processes before patients attend theatres for surgery – to improve patient safety and efficiencies
- 9th Theatre suite is now open and increasing elective and emergency provision

Pre-Op Assessment

"MyPreOp" is used in the preparation of a patient for an operation where an anaesthetist is going to be present. The MyPreOp system provides a cloud-hosted patient questionnaire and clinical portal. The patient questionnaire and some features of the clinical portal can be customised for our Trust. This includes the online patient questionnaire, your preoperative assessment workflow and the web-links providing patient information. Operational dashboards assist the team in delivering an efficient Pre-Op Assessment service and in optimising theatre list booking



MSK (Musculoskeletal):

- Ward 5 QIA (Quality Impact Assessment) report commissioned and presented providing for mitigation in order to reopen ward for elective orthopaedics. Executive have provided support and we await sign off from IPC and orthopaedic consultant body
- Due to lower limb consultant resignation, the centre has gone out to advert and shortlisted candidates with interviews planned for mid-October
- Due to waiting list management orthopaedics number of theatres has been reduced. The resumption of full theatre capacity has not yet been achieved due to staffing

Head and Neck:

- We are continuing to hold additional clinics on weekends to reduce the waiting time for patients, these have been a real success with a reduction in long waiters
- We are looking to engage external companies to support additional weekend theatres which will again enable us to treat long waiting patients and reduce waiting time. This will be using our elective surgery hub

Ophthalmology:

- Due to failure of the air filtration in the two treatment rooms in the Eye Department, the intravitreal injections have had to be moved to the cataract suite to ensure this vital treatment can continue. New filters have been ordered with a lead time of 7 days. Cataract surgery has been cancelled in the cataract suite for 2 weeks to allow for the injection service to continue until the treatment rooms are functioning again
- School screening has re-commenced for children in Shropshire. This service is no longer commissioned for children in Telford & Wrekin
- SaTH was the first in the West Midlands to implement a new eye e-referral system allowing community optometrists to refer to SaTH and seek urgent advice and guidance. This system initially had some teething problems; however, it is now working well

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

Surgery/Gastro: Business case in progress for Urology growth and the Urology Investigations Unit

Oncology:

- Following the death of a young patient, the parents have sponsored and erected an Oak Arbour outside the Lingen Davies unit in honour of their son. The wood company donated all of the oak and the construction company donated all of their hours
- We also have a patient who is displaying his artwork in the Lingen Davies Centre. He has made a pledge that when he passes, he will donate all of these pieces to the Lingen Davies Charity



MSK:

- Mutual Aid – Approval has been given to treat some long waiters at the Nuffield in Shrewsbury and Royal Orthopaedic Hospital Birmingham. Additional theatre lists have been provided by RJAH up to end of October '24
- Plans are underway to open the elective orthopaedic ward at PRH in November '24

3. Action update from previous meeting (if applicable)

No previous actions noted

Report by: Michelle Cole

Divisional Director of Nursing

Date: 03/10/2024

Patient Engagement Portal – An introduction

What is a Patient Engagement Portal (PEP)?

- A platform that empowers patients with online access to some medical records
- Allows information to be shared across teams and systems at the Trust

Why Now?

- The Trust have been working on the wider Digital Transformation Programme
- Implementation of the new PAS in April means we are now ready to introduce other supporting systems

How will it help?

- Once fully released - **instant** health updates for appointments, results and treatments
- Information is available in **different formats** for people with language, visual or hearing needs
- Reduces missed appointments through **ease of communication**
- **Direct updates to your information** and details at a time that suits you, without having to make phonecalls

Patient Engagement Portal – Key Features

The Patient Engagement Portal (PEP) is an online platform designed to empower you in managing your healthcare journey.

You will be able to:



View letters that we have sent to you about future appointments and previous appointment summaries



Update your records and personal information such as address or phone number



Receive broadcast messages about our services



View times and dates of future appointments, flag appointments you cannot make and rebook at an alternative time



Complete pre-appointment questionnaires



Opt out, should you wish



Alter how you view information to suit accessibility needs

Patient Engagement Portal – Next Steps

- Patient representatives have been recruited through the Patient and Carer Experience Panel – two reps came forward
- There will be a project initiation meeting later this year which will bring:
 - Timescales for the project
 - Details on scope and phases

Public Assurance Forum – 14 October 2024

Agenda item	2024/46		
Report Title	Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 2 2024/25		
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 3 2024/25 (page 7) <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 PAF:</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 2 2024/25 including:</p> <ul style="list-style-type: none"> • the engagement which has taken place during Quarter 2 • feedback received from our local communities and any actions taken as a result of the feedback • The engagement activities planned for Quarter 3 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 2 2024/25</p>

1.0 HTP Community Engagement Report (Quarter 2)

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 2 2024/25.

2.0 Engagement Approach and engagement activities for Quarter 2 2024/25.

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

Table 1 of the paper outlines community engagement activities which took place in Quarter 2 2024/25 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
6 July	Bishop's Castle Carnival	Various members of the public	Steady stream of public with interest in HTP
7 July	Craven Arms Family Fun Day	Various members of the public	HTP leaflets discussed and given out. Met with local Imam.
10 July	Monthly Hospitals Update	30 members of the public	Section on HTP with questions raised and answered
11 July	MEC & SAC Focus Group	11 members of the public in the call and 3 in the room	Good discussion and plans to get the word out in the community after request for info from Mytton Oak GP

Date	Event	Attendees	Outcome
12 July	Women's and Children's Focus Group	10 members of the public on the call, 2 in the room.	Numerous questions asked not all relevant to HTP. Useful discussion with PODS representative.
15 July	Public Assurance Forum	9 external member representatives	Well attended, very positive feedback from members and useful discussion on HTP
16 July	Volunteer RSH main outpatient briefing	7 volunteers	Information shared with volunteers and discussed support volunteers could provide
16 July	Shropshire Patient Group	Various members of the public	Brief update on HTP and discussed inviting HTP to provide an update at a future meeting
18 July	Community and Family Event (Ludlow)	Various members of the public	Discussions around HTP and 25 booklets given out
20 July	TAARC Caribfest, Hadley	Various members of the public	Discussions around HTP and 50 booklets given out
23 July	HTP volunteer Entrance Walkabout		Walkabout to get volunteer feedback on the new entrance
24 July	Young People's Academy	49 young people	Presentation given on HTP and questions answered
27 July	Cockshut Carnival	Various members of the public	Discussions around HTP and 15 booklets given out
30 July	About Health HTP Update	30 members of the public	Presentation well received and prompted robust Q&A session. Request for clear messaging about plans for PRH.
3 August	Clun Carnival	Various members of the public	20+ HTP booklets given out - interest in Disability Focus Group & forum
4 August	Haughton Fun day	Various members of the public	Interest in HTP and discussed various focus groups with the public
5 August	Local Resident Engagement session	spoke to appx 30 residents.	Had some interest in focus groups, questions about noise from works and traffic on Racecourse Lane.
8 August	Ludlow Market information stand	Various members of the public	Constant rain throughout day impacted footfall, passed out appx 25 HTP leaflets, had fruitful discussions with limited number of residents
14 August	Monthly Hospitals Update	13 members of the public	Section on HTP with questions raised and answered
14 August	South East Shropshire Community Connectors	Various representatives from community groups	Well attended meeting - gave information about upcoming HTP Focus Groups and site changes to RSH.
17 August	Minsterley Show	Various members of the public	15 conversations about HTP. Lot of out of area attendees

Date	Event	Attendees	Outcome
19 August	Armed Forces Outreach - Ponthafren Newtown	10 Attendees	Information sent to them about HTP Focus Groups. Brief update provided
19 August	Armed Forces Outreach - Shrewsbury	30 attendees	Lots of interest in HTP Veterans focus group and request for follow up information for those unable to attend (Aaron is attending 16/09/24)
26 August	Ironbridge Coracle Regatta	Various members of the public	20+ copies of HTP leaflet given out. Quite a few discussions about HTP
2 September	W&C Focus Group	2 attended F2F, 8 online	Exceptional representation from W&C that was noted by members of the public who were able to ask questions of senior leadership and clinicians. Not many questions from public though.
3, 4 & 5 September	Shrewsbury College Group Induction Fair	100+ students	Interest and discussion with students around HTP
3 September	MEC & SAC Focus Group	2 attended F2F, 9 online	Divisional representation called on and supported discussions which were useful.
3 September	Corporate Speciality Patient Experience Group Meeting	2 external members	Regular HTP attendance requested and will be arranged. HTP to link with Patient Experience to review accessibility
6 September	Oswestry Market information stand	Spoke to appx 26 people about HTP	Some challenging questions answered satisfactorily with Tom's help. A number of people came to see us after seeing in press. Recruited Hearing Dogs for Deaf People representative for BSL focus group.
7 September	Help Yourself to Health	Spoke to appx 20 people about HTP	Spoke to members of the public and other exhibitors, quite low footfall overall, of those who came some attended specifically as seen in press. Signed up 2 members. Trevor Purt in attendance and counsellor who invited us (Peggy Mullock) very pleased.
10 September	Armed Forces Covenant Board Update	Approx 10 members	Questions on car parking and transport, predicted impact on A&E wait times. Lots of discussion about various points of the project and interest in Armed Forces focus group.
11 September	Monthly Hospitals Update	8 members of the public	Section on HTP with questions raised and answered

Date	Event	Attendees	Outcome
12 September	Shawbirch PPG	Very well attended meeting, packed room (appx 40) plus appx 20 online	. Presentation well received and followed by thoughtful questions. Session finished with round of applause from those in room.
15 September	West Mercia Police Open day	Various members of the public	Had lots of conversations about HTP and its impact on maternity services in Telford.
16 September	Armed Forces Outreach Information Stand	Various members of the public	Lots of discussion around HTP, and promoting the Veteran focus group in October
19 September	Diabetes conference sponsored by SaTH Charity	300+ attendees	Information stand on HTP and information has been provided to all the delegates on the programme
25 September	People's Academy	10 attendees	Presentation, with a discussion around HTP
25 September	Market Drayton Health and Wellbeing Festival	100+ members of the public	Well attended event with information on HTP to share with the public
26 September	Telford Recovery Conference	Health and social care staff and voluntary services	Great networking event - contact made with staff and volunteers at recovery organisations across T&W. Potential for specialist HTP focus group in early 2025.
26 September	Deaf / BSL HTP Focus Group	11 members of Deaf community	Presentation on HTP and participants offering feedback on HTP as well as Trust-wide issues.
27 September	Church Stretton JSNA Consultation Results	Various members of the community	Town Councillors are interesting in knowing more about HTP – contact made with them
28 September	Maternity Services Open Day	243 attendees	Information on HTP on the stand. Lots of conversations about HTP and its impact on A&E in Telford. Attendees from across Shropshire and Powys, little concern about Maternity under HTP.
28 September	Shrewsbury Pride	Various members of the public	Lots of conversations around HTP. Signed up 10 new community members. Potential for HTP presentation to Shrewsbury Unitarians.

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
<p>Focus groups members have requested specific sessions looking at the following areas: Deaf and hard of hearing and Veterans.</p>	<p>We are planning a focus group for Veterans on 17th October. Two sessions are also planned, one for people with a hearing impairment (3rd October) and those who are deaf (26 September)</p>
<p>During the building works at RSH, when outpatients entrance is via the treatment centre, can more wheelchairs be provided and can the Trust consider putting more seating along the corridor, due to the increase in distance?</p>	<p>We understand the increase in distance to the outpatient clinics can be challenging for those with mobility issues. The Trust has now purchased an additional 15 wheelchairs as well as getting 15 wheelchairs fixed. The wheelchairs should be delivered within the next few weeks.</p> <p>SaTH Charity has also purchased “drop down” seating to go along the corridor (between the treatment centre and outpatients) for patients and relatives, to provide a resting point.</p>
<p>Can we have more signage to support wayfinding around the site during the construction?</p>	<p>Following the closure of outpatients, we have reviewed our wayfinding from the alternative entrances (treatment centre, ward block and gym entrance). An informal Human Factors and Ergonomics Review at RSH took place looking at signage, patient’s letters, car parks and entrances). Recommendations are now being actioned</p> <p>An internal signage review has taken place with patient representatives and volunteers and considerable updates have been made to new signage.</p> <p>A disabled access review has taken place with a wheelchair user who is familiar with the site. They reviewed the access from the perspective of a powered wheelchair user. Transport wheelchairs, active/manual wheelchairs, and bariatric wheelchairs have also been considered. A number of recommendations have been made.</p> <p>In October a review of the RSH site will also be carried out by a person with visual impairments and their guide dog.</p>

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 3 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
02/10/24	Telford Patients First	Public Participation
02/10/24	RSH Entrances Focus Group	HTP, Public Participation
03/10/24	Hard of Hearing Focus Group	HTP, Public Participation
09/10/24	Monthly Hospital Update	Public Participation
11/10/24	Much Wenlock Market information stand	HTP, Public Participation
17/10/24	Armed Forces / Veterans focus group	HTP, Public Participation
24/10/24	PPG HTP Update (Hybrid)	HTP, Public Participation
24/10/24	PPG HTP Update (online)	HTP, Public Participation
29/10/24	About Health – HTP Update	HTP, Public Participation
05/11/24	TBC Ellesmere Market information stand	HTP, Public Participation
13/11/24	Monthly Hospital Update	Public Participation
20/11/24	TBC - Shrewsbury town centre information stand	HTP, Public Participation
26/11/24	Telford Town Centre information stand	HTP, Public Participation
03/12/24	MEC & SAC Focus Group	HTP, Public Participation
05/12/24	W&C Focus Group	HTP, Public Participation
10/12/24	TBC - Welshpool Market information stand	HTP, Public Participation
11/12/24	Monthly Hospital Update	Public Participation

5.0 Recommendations

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 2 (2024/2025)
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 3 (2024/25)

Julia Clarke
Director of Public Participation
October 2024

Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 2 2024/25

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 (April – June 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 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
 - 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, Children and Young People, Visual and Hearing Impairments, Veterans

- **About Health Events** – Held via MS Teams, 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 short A4 booklet is being distributed with a longer form version being developed by the communications team.
- **Community and organisational membership** – SaTH have over 4800 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
- **Monthly Hospital Update** – Hospital Update is held 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 were included with each of the Clinical design 1:50 meetings with the Clinical teams and architects to help examine the plans on a room-by-room basis.

3. ENGAGEMENT ACTIVITY IN Quarter 2 2024/25

Engagement activity relating to the Hospitals Transformation Programme in Quarter 2 is outlined below:

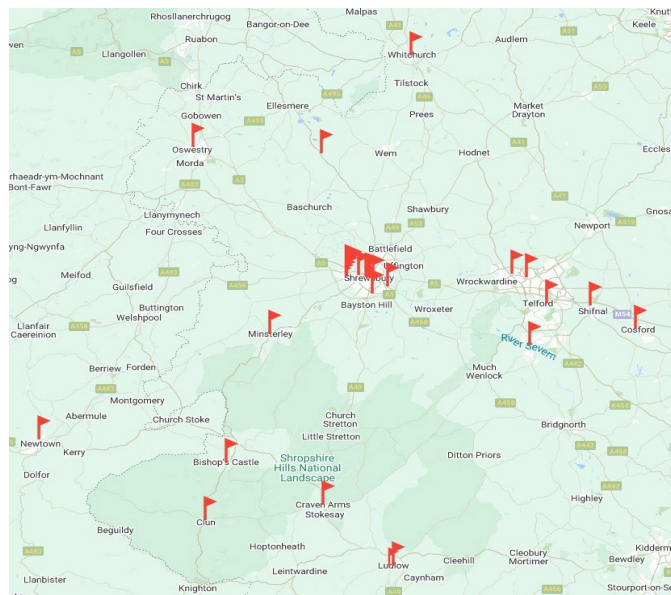
Date	Event	Attendees	Outcome
6 July	Bishop's Castle Carnival	Various members of the public	Steady stream of public with interest in HTP
7 July	Craven Arms Family Fun Day	Various members of the public	HTP leaflets discussed and given out. Met with local Imam.
10 July	Monthly Hospitals Update	30 members of the public	Section on HTP with questions raised and answered
11 July	MEC & SAC Focus Group	11 members of the public in the call and 3 in the room	Good discussion and plans to get the word out in the community after request for info from Mytton Oak GP

Date	Event	Attendees	Outcome
12 July	Women's and Children's Focus Group	10 members of the public on the call, 2 in the room.	Numerous questions asked not all relevant to HTP. Useful discussion with PODS representative.
15 July	Public Assurance Forum	9 external member representatives	Well attended, very positive feedback from members and useful discussion on HTP
16 July	Volunteer RSH main outpatient briefing	7 volunteers	Information shared with volunteers and discussed support volunteers could provide
16 July	Shropshire Patient Group	Various members of the public	Brief update on HTP and discussed inviting HTP to provide an update at a future meeting
18 July	Community and Family Event (Ludlow)	Various members of the public	Discussions around HTP and 25 booklets given out
20 July	TAARC Caribfest, Hadley	Various members of the public	Discussions around HTP and 50 booklets given out
23 July	HTP volunteer Entrance Walkabout		Walkabout to get volunteer feedback on the new entrance
24 July	Young People's Academy	49 young people	Presentation given on HTP and questions answered
27 July	Cockshut Carnival	Various members of the public	Discussions around HTP and 15 booklets given out
30 July	About Health HTP Update	30 members of the public	Presentation well received and prompted robust Q&A session. Request for clear messaging about plans for PRH.
3 August	Clun Carnival	Various members of the public	20+ HTP booklets given out - interest in Disability Focus Group & forum
4 August	Haughton Fun day	Various members of the public	Interest in HTP and discussed various focus groups with the public
5 August	Local Resident Engagement session	spoke to appx 30 residents.	Had some interest in focus groups, questions about noise from works and traffic on Racecourse Lane.
8 August	Ludlow Market information stand	Various members of the public	Handed out appx 25 HTP leaflets, had fruitful discussions with limited number of residents
14 August	Monthly Hospitals Update	13 members of the public	Section on HTP with questions raised and answered
14 August	South East Shropshire Community Connectors	Various representatives from community groups	Well attended meeting - gave information about upcoming HTP Focus Groups and site changes to RSH.
17 August	Minsterley Show	Various members of the public	15 conversations about HTP. Lot of out of area attendees

Date	Event	Attendees	Outcome
19 August	Armed Forces Outreach - Ponthafren Newtown	10 Attendees	Information sent to them about HTP Focus Groups. Brief update provided
19 August	Armed Forces Outreach - Shrewsbury	30 attendees	Lots of interest in HTP Veterans focus group and request for follow up information for those unable to attend (Aaron attended 16/09/24)
26 August	Ironbridge Coracle Regatta	Various members of the public	20+ copies of HTP leaflet given out. Quite a few discussions about HTP
2 September	W&C Focus Group	2 attended F2F, 8 online	Exceptional representation from W&C that was noted by members of the public who were able to ask questions of senior leadership and clinicians. Not many questions from public though.
3, 4 & 5 September	Shrewsbury College Group Induction Fair	100+ students	Interest and discussion with students around HTP
3 September	MEC & SAC Focus Group	2 attended F2F, 9 online	Divisional representation called on and supported discussions which were useful.
3 September	Corporate Speciality Patient Experience Group Meeting	2 external members	Regular HTP attendance requested and will be arranged. HTP to link with Patient Experience to review accessibility
6 September	Oswestry Market information stand	Spoke to appx 26 people about HTP	Some challenging questions answered satisfactorily with Tom's help. A number of people came to see us after seeing in press. Recruited Hearing Dogs for Deaf People representative for BSL focus group.
7 September	Help Yourself to Health	Spoke to appx 20 people about HTP	Spoke to members of the public and other exhibitors, quite low footfall overall, of those who came some attended specifically as seen in press. Trevor Purt in attendance and counsellor who invited us (Peggy Mullock) very pleased.
10 September	Armed Forces Covenant Board Update	Approx 10 members	Questions on car parking and transport, predicted impact on A&E wait times. Lots of discussion about various points of the project and interest in Armed Forces focus group.
11 September	Monthly Hospitals Update	8 members of the public	Section on HTP with questions raised and answered

Date	Event	Attendees	Outcome
12 September	Shawbirch PPG	Very well attended meeting, packed room (appx 40) plus appx 20 online	Presentation well received and followed by thoughtful questions. Session finished with round of applause from those in room.
15 September	West Mercia Police Open day	Various members of the public	Had lots of conversations about HTP and its impact on maternity services in Telford.
16 September	Armed Forces Outreach Information Stand	Various members of the public	Lots of discussion around HTP, and promoting the Veteran focus group in October
19 September	Diabetes conference sponsored by SaTH Charity	300+ attendees	Information stand on HTP and information has been provided to all the delegates on the programme
25 September	People's Academy	10 attendees	Presentation, with a discussion around HTP
25 September	Market Drayton Health and Wellbeing Festival	100+ members of the public	Well attended event with information on HTP to share with the public
26 September	Telford Recovery Conference	Health and social care staff and voluntary services	Great networking event - contact made with staff and volunteers at recovery organisations across T&W. Potential for specialist HTP focus group in early 2025.
26 September	Deaf / BSL HTP Focus Group	11 members of Deaf community	Presentation on HTP and participants offering feedback on HTP as well as Trust-wide issues.
27 September	Church Stretton JSNA Consultation Results	Various members of the community	Town Councillors are interesting in knowing more about HTP – contact made with them
28 September	Maternity Services Open Day	243 attendees	Information on HTP on the stand. Lots of conversations about HTP and its impact on A&E in Telford. Attendees from across Shropshire and Powys, little concern about Maternity under HTP.
28 September	Shrewsbury Pride	Various members of the public	Lots of conversations around HTP. Potential for HTP presentation to Shrewsbury Unitarians.

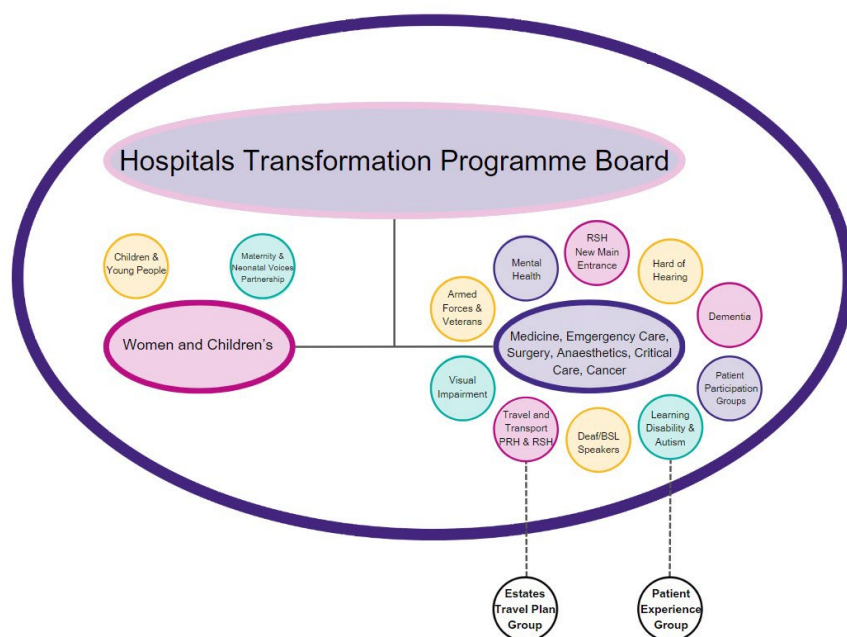
Please see the map below which highlights the areas of the Shropshire, T&W and Powys which were visited in Quarter 2:



3. SUMMARY OF FEEDBACK RECEIVED AND ACTIONS TO DATE

From the events 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:



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
<p>Focus groups members have requested specific sessions looking at the following areas: Deaf and hard of hearing and Veterans.</p>	<p>We are planning a focus group for Veterans on 17th October. Two sessions are also planned, one for people with a hearing impairment (3rd October) and those who are deaf (26 September)</p>
<p>During the building works at RSH, when outpatients entrance is via the treatment centre, can more wheelchairs be provided and can the Trust consider putting more seating along the corridor, due to the increase in distance?</p>	<p>We understand the increase in distance to the outpatient clinics can be challenging for those with mobility issues. The Trust has now purchased an additional 15 wheelchairs as well as getting 15 wheelchairs fixed. The wheelchairs should be delivered within the next few weeks.</p> <p>SaTH Charity has also purchased “drop down” seating to go along the corridor (between the treatment centre and outpatients) for patients and relatives, to provide a resting point.</p>
<p>Can we have more signage to support wayfinding around the site during the construction?</p>	<p>Following the closure of outpatients, we have reviewed our wayfinding from the alternative entrances (treatment centre, ward block and gym entrance). An informal Human Factors and Ergonomics Review at RSH took place looking at signage, patient’s letters, car parks and entrances). Recommendations are now being actioned</p> <p>An internal signage review has taken place with patient representatives and volunteers and considerable updates have been made to new signage.</p> <p>A disabled access review has taken place with a wheelchair user who is familiar with the site. They reviewed the access from the perspective of a powered wheelchair user. Transport wheelchairs, active/manual wheelchairs, and bariatric wheelchairs have also been considered. A number of recommendations have been made.</p> <p>In October a review of the RSH site will also be carried out by a person with visual impairments and their guide dog.</p>

4. FORWARD LOOK

A forward look of current engagement Activity in Quarter 3 (October-December 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
02/10/24	Telford Patients First	Public Participation
02/10/24	RSH Entrances Focus Group	HTP, Public Participation
03/10/24	Hard of Hearing Focus Group	HTP, Public Participation
09/10/24	Monthly Hospital Update	Public Participation
11/10/24	Much Wenlock Market information stand	HTP, Public Participation
17/10/24	Armed Forces / Veterans focus group	HTP, Public Participation
24/10/24	PPG HTP Update (Hybrid)	HTP, Public Participation
24/10/24	PPG HTP Update (online)	HTP, Public Participation
29/10/24	About Health – HTP Update	HTP, Public Participation
13/11/24	Monthly Hospital Update	Public Participation
26/11/24	Telford Town Centre information stand	HTP, Public Participation
03/12/24	MEC & SAC Focus Group	HTP, Public Participation
05/12/24	W&C Focus Group	HTP, Public Participation
10/12/24	Welshpool Market information stand	HTP, Public Participation
11/12/24	Monthly Hospital Update	Public Participation

5. RECOMMENDATIONS

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 2 (2024/2025)
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 3 (2024/25)

6. APPENDIX 1 – Outstanding actions from previous focus groups

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 MEC & SAC ACTION LOG

21	02/09/2024	Ed Rysdale to speak with Adam Ellis-Morgan about temporary traffic lights at RSH.	Ed Rysdale	03/12/2024	Spoken to Adam about traffic lights. Not being used, but are using people to help with traffic, rather than lights we can be more responsive to peaks and troughs in demand and will keep under regular review.	COMPLETE
22	02/09/2024	Hannah Morris to discuss with HTP about inviting Community Trust representatives to future focus groups.	Hannah Morris	03/12/2024		IN PROGRESS
23	02/09/2024	Ed Rysdale to investigate what staff grades there will be in the PRH Urgent Treatment Centre.	Ed Rysdale	03/12/2024	On going as part of pathway development, but the question shouldn't be about specific group of clinicians, but about the presence of clinicians with the required clinical competencies to deliver the care that is required. That may well be an SAS grade doctor but it may be that an RCEM accredited ACP or suitably qualified GP with experience may be appropriate. It can be assured that clinicians with the necessary competencies will be working in the UTC. The workforce model will continue to be developed, but we are working on the assumption that we will need clinicians present 24/7 who have the skill set to stabilise a patient who walks / is brought into the department until they can be transferred to an appropriate site, which could be Shrewsbury, Birmingham, Stoke etc.	COMPLETE
24	02/09/2024	Lydia Hughes to investigate panels that give different updated messages for health promotion and to look at the option of a digital panel.	Lydia Hughes	03/12/2024	Unfortunately, due to cost implications we are unable to have digital panels. However, as the construction will be ongoing for a number of years, areas within the hoarding will be refreshed annually. There are also HTP screens which are regularly updated on the digital screens inside the hospital (where it is safer and more comfortable to view) and in GP practices.	IN PROGRESS
25	02/09/2024	Lydia Hughes confirmed there will be photographs of the finished building on the boardings along RSH building.	Lydia Hughes	03/12/2024	The hoarding artwork will have artist impressions of the new healthcare facilities. It is due to be installed in the next few months.	COMPLETE

ACTION LOG FROM W&C'S ACTION LOG

Action No	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
W&C 2nd September 2024						
27	02/09/2024	Member of the public to send Ed Rysdale his predicted figures for transfer from PRH to RSH to look at. Ed Rysdale will respond directly to the member of the public regarding the request	Ed Rysdale			ONGOING
W&C 12th July 2024						
17	12/07/2024	Meinir Williams to consider producing a document which shows the changes and added benefits that HTP will deliver which were not included in the original consultation in 2018.	Meinir Williams		Work is underway to describe more detail on option 3 and 4 which covers the full ambition of the development, including integrated health centre at PRH, will be shared in due course.	ONGOING
22	12/07/2024	Meinir Williams to investigate the Birmingham Children's Hospital expertise to be brought to PRH or RSH using video.	Meinir Williams		Anne-Marie Lawrence will reach out to Birmingham, HTP to work with clinical team to allocate facility to support video link for MDT work, etc. Video link and remote consultation has been an ongoing discussion through build design so capability is part of the programme.	ONGOING

Appendix 2

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

DATE	EVENT	VENUE	TIME
02/10/24	Powys Health & Wellbeing Network meeting	Hope Church, Dolfor Road, Newtown	10:00-12:30
02/10/24	Telford Patients First	Dawley Town Hall	14:00 - 16:00
02/10/24	Armed Forces Outreach	Turreff Hall, Donnington	16:00 - 18:00
03/10/24	Hard of Hearing Focus Group	SECC	10:00-12:00
03/10/24	VTC C3 Celebration evening	SERRI- RSH	1800-1930
04/10/24	Cleobury Mortimer JSNA Consultation	Cleobury Mortimer Library	10:00-12:30
07/10/24	BP Checks T& W Public Health	Woodside Park Lane Centre	10:00-12:00
07/10/24	World Mental Health Day event	Hadley Learning Community	15:00 - 16:30

07/10/24	Filming Mealtime Buddy Training	TBC	09:00-17:00
08/10/24	RSH Entrances Focus Group	MS Teams	18:00-19:00
10/10/24	Visit to Traveller site	Granville site, Donnington Telford	09:00 - 13:00
11/10/24	Much Wenlock Market information stand	The Corn Exchange, 62 High Street, Much Wenlock, TF13 6AE	TBC
11/10/24	Job Centre Plus 50+ Event	Shrewsbury Town Foundation	10:00
11/10/24	Shrewsbury Town - Charity night for SaTH Charity (Neonatal unit) 80's night, tickets are £60	Shrewsbury Town Football Club, The Croud Meadow, Oteley Rd, Shrewsbury SY2 6ST	TBC
17/10/24	About Health - Menopause	MS Teams	18:30 - 19:30
17/10/24	Armed Forces / Veterans focus group	K2 & MS Teams	10:00-12:00
18/10/24	Montgomery Health Day	Montgomery Town Hall	10:00 - 17:00
22/10/24	Volunteer Coffee and Catch up	William Farr House	10.00-11.00
24/10/24	PPG HTP Update (Hybrid)	K2 & MS Teams	10:00-12:00
24/10/24	PPG HTP Update (online)	MS Teams	18:00-19:30
25/10/24	Sally Jamieson's Halloween Event for SaTH Charity	The Brooklands, Meole Brace	16:00 - 20:00
29/10/24	About Health – HTP Update	MS Teams – live	18:30 – 19:30
30/10/24	Young People's Academy	SECC	09.00 – 16:30
05/11/24	TBC Ellesmere Market information stand	TBC Ellesmere Market	TBC
05/11/24	Volunteer Recognition Event	TBC	TBC
06/11/24	Telford Patients First	Dawley Town Hall	14:00 - 16:00
12/11/24	BP Checks T& W Public Health	Sambrook Centre - Stirchley	10:00-12:00
13/11/24	Monthly Hospital Update	MS Teams	11:00 - 12:00
14/11/24	T&W Chief Officer's Group (Voluntary sector organisations)	MS Teams	14:00 - 16:00
21/11/24	Volunter Coffee and Catch up	William Farr House	14.00-15.00
21/11/24	Dementia Information Event (Carers Rights Day)	TBC	TBC
26/11/24	Telford Town Centre information stand	Telford Town Centre	9:00 - TBC
27/11/24	People's Academy	SECC	09.00 – 16:30
03/12/24	Grief Awareness Week - EOLC team event	TBC	TBC
03/12/24	MEC & SAC Focus Group	SECC/MS Teams – Hybrid	10:00 - 12:00
04/12/24	Telford Patients First	Dawley Town Hall	14:00 - 16:00
05/12/24	W&C Focus Group	SECC/MS Teams – Hybrid	10:00 - 12:00
10/12/24	TBC - Welshpool Market information stand	TBC - Welshpool Indoor Market	TBC
11/12/24	Monthly Hospital Update	MS Teams	11:00 - 12:00
11/12/24	BP Checks T& W Public Health	The Anstice, Madely	10:00-13:00

Public Assurance Forum Meeting

Agenda item	2024/47		
Report Title	Strategy and Partnership 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 development of the strategies and plans. Key issues to note include:</p> <ul style="list-style-type: none"> - Work continues to progress in numerous areas with a key focus on strengthening collaborative partnership working, internal strategies and health inequalities. 		
Recommendations for the Committee:	<p>The Committee is asked to note the report.</p> <p>This report is provided for information only.</p>		
Appendices:	None		

1.0 Introduction

1.1 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)

Some highlights this quarter include:

- Flu, COVID and RSV vaccines are now available. For more information about vaccines, visit: <https://www.shropshiretelfordandwrekin.nhs.uk/your-health/where-to-get-advice-and-help/vaccinations/>
- Colleagues, partners, service users and members of the public gathered at the area's Integrated Care Board (ICB) Annual General Meeting (AGM) on Wednesday 25 September. Further information is available on their website.
- Colleagues from across the Integrated Care System joined together at the Severn Diabetes Conference held at Shrewsbury Town Football Club on Thursday 19 September. The day was hosted by Dr. Probal Moulik, Consultant Endocrinologist, and the Hummingbird Team, and focused on Type 1 and Type 2 diabetes, complications, obesity and hyperlipidaemia. Further systemwide work is planned for this area of work.
- Patients experiencing a mental health crisis can now benefit from support through 111. The change means the NHS in England is one of the first countries in the world to offer access to a 24/7 full package of mental health crisis support through one single phone line.
- Healthwatch Shropshire wants to hear the experience of patients using pharmacies – not only for the Pharmacy First service but all of the other services provided by pharmacies. To share their experiences, people can visit the ICB website or call 01743 237884.
- Telford Buddy System - The Buddy System is a support service for adults (aged 18 years or older) who are lacking in confidence, have low self-esteem, isolated or lonely. The aim is to alleviate inactivity and social exclusion by getting people involved in their communities through offering support via trained volunteers in the accessing of social opportunities, activities and interests. Volunteers are paired with people who have similar interests. More information can be found here.
- NHS Business Services Authority is carrying out research about the HRT Prescription Prepayment Certificate (PPC) Service. Research sessions usually last an hour and can be held in person, over the telephone, or online. You can sign up to take part by completing the short survey found here.
- The West Midlands Secure Data Environment (SDE) is bringing together people's health and care information from across the region (while keeping it safely within the NHS) to help researchers learn more about the health conditions that affect lots of people and the less common ones affecting just a few. Working with the NHS, researchers will also be able to discover ways to help people living in areas of the West Midlands where health is poorer, and lives are shorter. They want to know how people feel about their health data being used for this research and have created a questionnaire which can be found here.
- Shropshire Council is inviting young people with Special Educational Needs and Disabilities (SEND) from Year 9 onwards, as well as those who have completed their education, to share their views. They also welcome parent carers and professionals working with SEND young people to take part in the survey. The feedback received will help shape future services and support. The survey is open until 31 October 2024, and you can find it here or on their website.

2.1 NHS Shropshire, Telford and Wrekin (STW) Integrated Care Board

A summary of this quarter's topics included: -

- Ian Bett has been appointed and commenced in post as the new Chief Delivery Officer for the ICB.
- Lorna Clarson has been appointed and commenced in post as the new Medical Director for the ICB.
- Work continues on strengthening the revised governance framework with a focus on PHM, Health Inequalities, Clinical Leadership and alignment of transformation programmes of work such as LCTP and HTP.
- Establishment of a systemwide Strategy and Development Group to support the ICS Strategy and Development Board with the implementation of the required actions pertaining to the updated ICS strategy and Joint Forward Plan.
- Review and alignment of priorities to the recently published Darzi Report.

2.2 Shropshire, Telford and Wrekin Health and Wellbeing Board (HWBB)

Shropshire Health and Wellbeing Board

Areas discussed included:

- Shropshire Integrated Place Partnership Strategic Plan & Local Care Neighbourhood Working Update
- Primary Care Update
- Better Care Fund
- Joint Strategic Needs Assessment
- Joint Forward Plan
- Suicide Prevention Strategy Update
- Inequalities Plan, Progress update
- Rural Proofing
- CYP JSNA update
- Cost of Living Dashboard update
- ICP Dashboard update
- Women's Health Hub Progress report
- SHIPP Update

Telford Health and Wellbeing Board

- Updates included in TWIPP

2.3 Shropshire, Telford and Wrekin Integrated Place Partnership Boards (SHIPP TWIPP)

A summary of this quarter's topics included:

SHIPP

- Update on Primary Care Networks
- Virtual Care Delivery
- Neighbourhood working and Local Care
- CAMHS Recommissioning Verbal Update
- BCF – Planning Template
- C&YP Mental Health thrive
- JSNA update CYP early years
- Housing and Health workshop update

- Women Health Hubs
- Revised SHIPP & System Governance
- Healthwatch update
- Voluntary and Community Sector Infrastructure Update
- Local Care update
- System Quality Risk Register

SHIPP Neighbourhood Working group continues to progress with key actions to support the delivery of the SHIPP agenda.

TWIPP

- Special Educational Needs and Disabilities (SEND) update
- SEND & Alternative Provision Strategy approved
- Ofsted & CQC Inspection March 2023 - outcomes and work so far
- West Midlands SEND and AP Change Programme update
- CQC Inspection LA 22.07.24
- Learning Disability Strategy implementation update
- Children & Young People Mental Health Services review
- Local Care Transformation Programme update
- TWIPP Neighbourhood Working Accelerator Group update
- Teldoc proactive care project
- System updates
- Strategic Commissioning Intentions and implications for Place
- ICB Management of Change and Structure update
- Drug & Alcohol Strategy implementation update
- All-Age Carers Strategy Consultation update
- TWIPP Terms of Reference Review
- TWIPP Priorities Review
- Areas of risk identified and escalation needs
- GP Out of Hours Procurement Briefing

TWIPP Neighbourhood working group has been established and continues to progress finalising TWIPP priority workstreams to support delivery of the TWIPP agenda.

3. SATH Workstreams

3.1 Provider Collaboratives

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

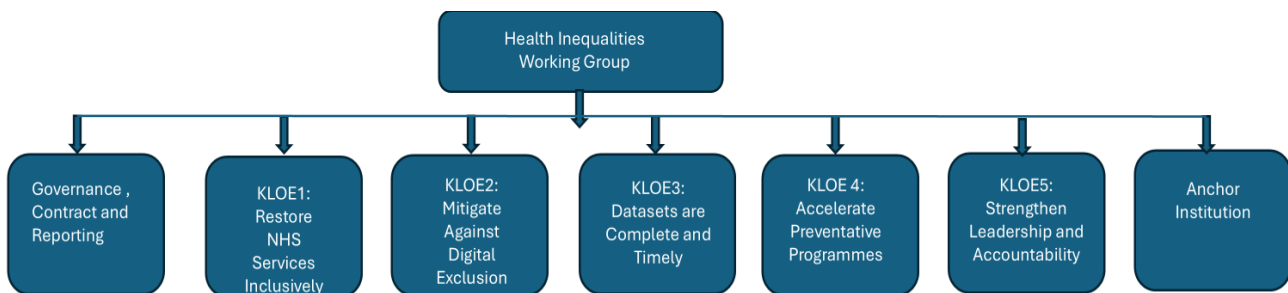
- Mr Andrew Morgan has been appointed and commenced post in October as the new Chair-in-Common of Shropshire Community Health NHS Trust and The Shrewsbury and Telford Hospital NHS Trust.
- The Shrewsbury and Telford Hospital NHS Trust (SaTH) has reached a major milestone in its Hospitals Transformation Programme (HTP) by signing a design and build contract with Integrated Health Projects (IHP). This joint venture between VINCI Building and Sir Robert McAlpine will construct a modern, four-storey building at the Royal Shrewsbury Hospital (RSH) site, designed to enhance hospital care for communities in Shropshire, Telford and Wrekin, and mid Wales. To support the realisation of our clinical ambitions we are about to commence a review of key clinical pathways aligned to the systemwide joint forward plan and programmes of work such as the LCTP.

- N8 Pathology Network Board continues to progress.
- Collaboration with UHNM continues to progress focussing on maxillofacial, gynae, cardiology, microbiology, urology and pathology.
- We continue to strengthen our relationships and support the development of our local provider collaboration and integrated systemwide working through various established boards and programmes of work.

3.2 Internal Strategies

We continue to develop NHS Impact (Improving Patient Care Together) programme of work with updates reported via the getting to good programme; one of the 5 main sections refers to vision and strategy development and engagement. Strategy sessions continue to raise awareness via the STEP and leadership programmes and work continues to align and embed our Trust strategy into the operational planning cycle.

In July 2024 we held a board development session pertaining to health inequalities. Much work continues in this area with a programme of work currently being established focussing the following areas:



Strategy development includes:

- The Trust People Strategy has been signed off at board, communication/briefing sessions planned.
- We are currently in the process of reviewing the Equality, Diversity and Inclusion Strategy in conjunction with the ICS.
- A draft Trust Communications and Engagement Strategy has been developed and is currently in the process of being consulted on ahead of board approval.
- The Trust has commenced work to develop a data strategy, engagement sessions to follow.
- A draft Estates strategy has been produced with engagement sessions planned ahead of board approval.
- Risk management strategy has been produced.
- The quality strategy is due for revision.

4. Recommendation

The Committee is asked to NOTE the report.

SaTH NHSE Core Standards for Emergency Preparedness Resilience and Response 2023-2024

Emma-Jane Beattie EPRR Manager



NHS Emergency Preparedness Resilience and Response



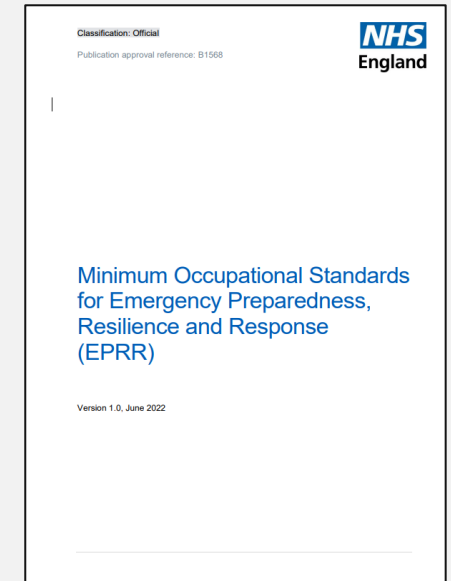
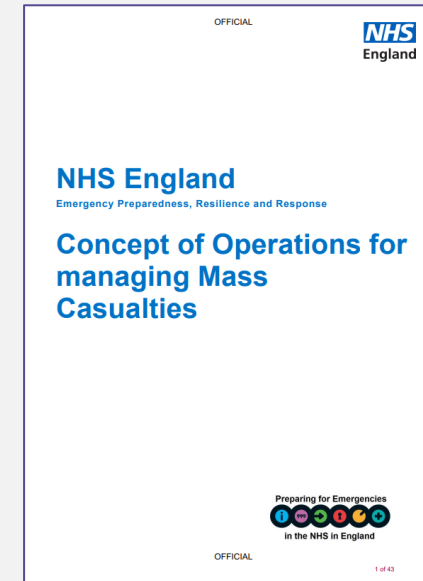
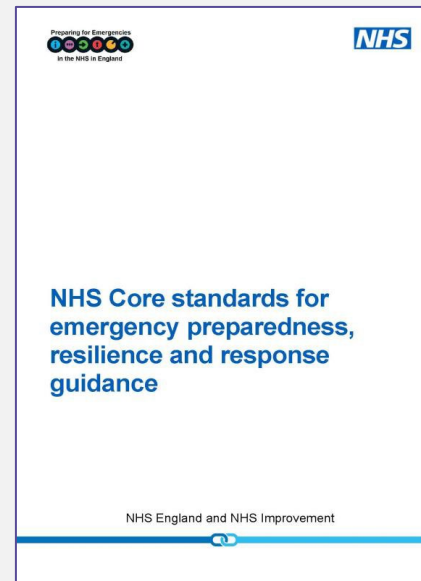
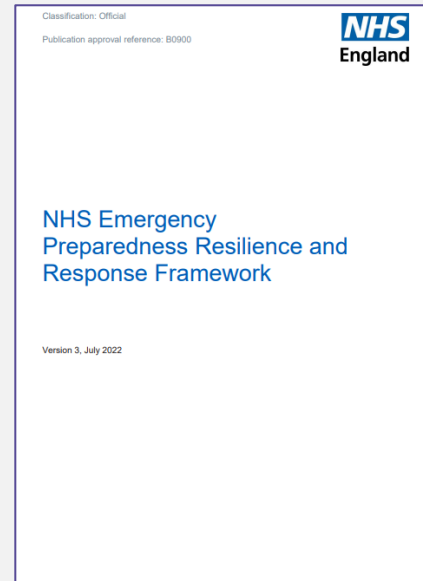
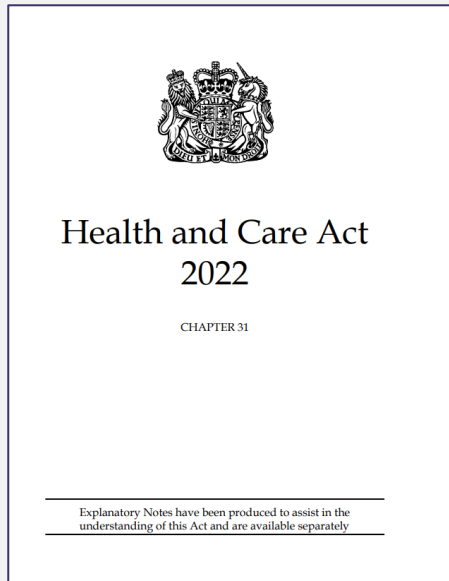
The Shrewsbury and
Telford Hospital
NHS Trust

Introduction

All NHS-funded organisations must meet the requirements of the Civil Contingencies Act 2004, the NHS Act 2006, the Health and Care Act 2022, the NHS standard contract, the NHS Core Standards for EPRR and NHS England business continuity management framework.

NHSE Core Standards for EPRR - NHS funded services must demonstrate they can effectively respond to major, critical and business continuity incidents whilst maintaining services to patients. The purpose of the EPRR annual assurance process is to assess the preparedness of the NHS, both commissioners and providers, against common NHS EPRR core standards.

NHS Legislation and non-statutory Guidance



National Security Risk Assessment & National Risk Register



NSRA Risk Ref	Risk Description
9	Large Scale CBRN Attacks
26a	Failure of the National Electricity Transmission System
54	Pandemic
10	Conventional attacks on infrastructure
47	Severe space weather
50	Low temperatures and heavy snow
55	Outbreak of an emerging infectious disease
63	Nuclear mis-calculation not involving the UK
3	Terrorist attacks in venues and public spaces
31b	Technological failure at a UK critical financial market infrastructure
46	Disaster response in the Overseas Territories
62	Attack on a UK ally or partner outside NATO or a mutual security agreement requiring international assistance

[Prepare](#)

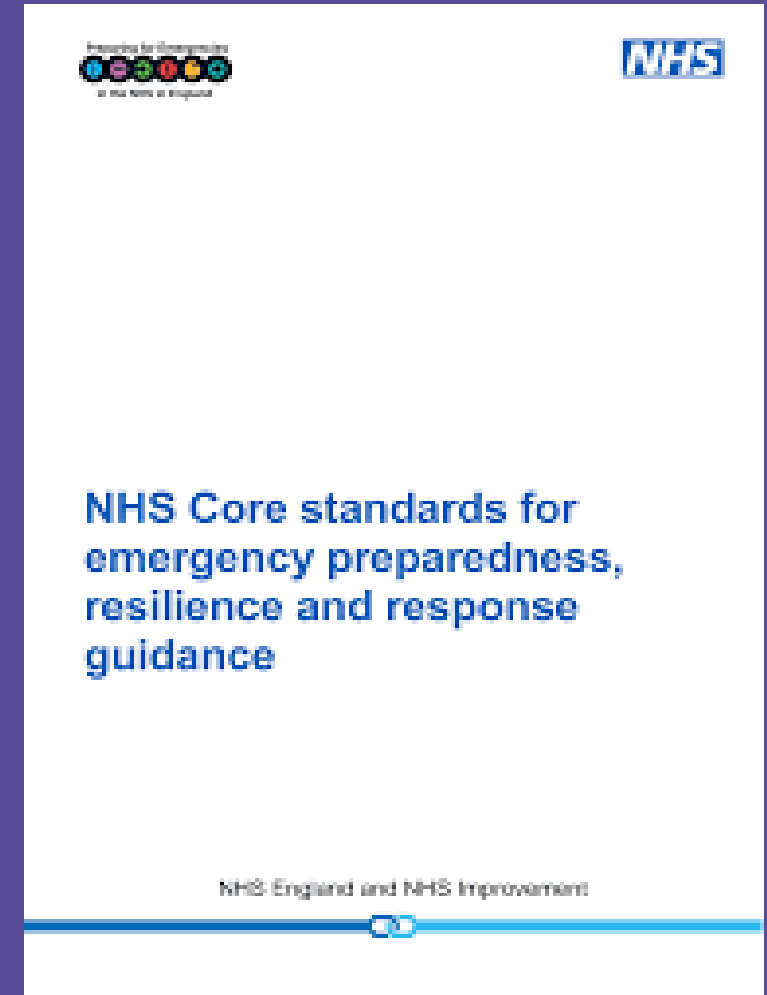
Get prepared for emergencies Be informed about hazards Get involved in your community

**HOW WOULD YOU
PREPARE
FOR AN EMERGENCY?**

Emergencies such as flooding, fires and power cuts can affect us all. There are simple and effective steps you can take to be more prepared.

SaTH NHSE Core Standards Submission 2023/24

- The 2023 EPRR Process resulted in SaTH being assessed as “Non-Compliant”
- The number of standards Acute Trusts are assessed against 64 Core Standards.
- The Deep Dive Investigation this year is Cyber- the trust reported full compliance with 10/11 requirements.



SaTH Self-Assessment 2023/2024

In accordance with the requirements laid out in the EPRR 2023-2024 Assurance Process Letter (1hh July 2024), the overall level of compliance is based on the total percentage of standards that the Trust is Fully Compliant with.

In respect of the 64 Core Standards relevant to Acute Providers Shrewsbury and Telford Hospitals NHS, the Trust has self-assessed against the Core Standards for Emergency Preparedness, Resilience and Response as follows:

Fully Compliant	Partially Compliant	Non Compliant
56 (c.f. 29 in 2023)	6 (c.f. 33 in 2023)	0 (-)

This equates to a compliance of 90% Substantial Compliance



Standards with Partial Compliance – Action Plan

Core Standard	Standard Name	Action Plan
21	Trained On Call Staff	Action plan for 24/25 to ensure all Senior Managers and Executives on Call are compliant or are demonstrating evidence of attendance and compliance with their core competencies, and Training Needs Assessments as part of their annual appraisals.
22	EPRR Training	The Trust will explore the ability and viability of making EPRR general awareness mandatory and arrange for an e-learning module to be developed on LMS
24	Responder Training	Action plan for 24/25 to ensure all Senior Managers and Executives on Call are compliant or are demonstrating evidence of attendance and compliance with their core competencies, and Training Needs Assessments as part of their annual appraisals.
37	LHRP Engagement	The COO(AEO) or deputy AEO will make every effort to attend LHRP meetings. A request to the LHRP has been made to ensure that calendar invitations are circulated to the appropriate representatives
43	Information Sharing	The LRF Information Sharing agreement is being signed ff by COG in November in 2024. The SaTH Information sharing guidance has been uploaded as evidence
49	Data Protection and Security Toolkit	EPRR lead to work with the Digital and IG teams to support any gaps

Timelines

- 30th August - Submission of all Evidence to NHS Futures 169 pieces of evidence submitted.
- 4th November - NHSE & ICB Confirm and Challenge Meeting.
- 14th November Annual Report presented to Public Board.
- November- LHRP assurance signed off.
- Update to board- revised post C&C position to be reported.



Deep Dive- Cyber

- Cyber Security & IT related incident preparedness
- Cyber Security & IT related incident response arrangements
- Resilient Communication during Cyber Security & IT related incidents
- Media Strategy
- Testing and exercising
- Continuous Improvement
- Training Needs Analysis (TNA)
- EPRR Training
- Business Impact Assessments





Any Questions?

Supplementary Information Pack

Agenda item

2024/49 i. Public Participation Plan: 2024/25 Plan on a page update **Page 79-85**

2024/49 ii. Public Participation Plan Action Plan update **Page 86-105**

2024/49 iii. Draft Public Participation Quarterly Board Report **Page 106-143**

Public Assurance Forum: 14 October 2024

Agenda item	2024/49		
Report Title	Public Participation Department Priorities 2024/25		
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 2 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 (PPP) was developed in 2021 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 2024/25 plan on a page (Appendix 1). This now includes all the outstanding actions and supersedes the original 2021 PPP action plan (please note all outstanding PPP actions are highlighted in blue). This update 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 2 from each of the areas includes:

Volunteers:

- The Volunteer Youth Programme 2024/25 was launched in September and 2 schools have already been visited to talk about volunteering and another 5 schools have been booked to attend in the next few months. We already have 37 Youth applications in progress.
- The volunteer website pages have been reviewed and now include case studies have been added as well as a smaller selection of roles to make them easier to understand.
- Files on our volunteer management system (Better Impact) have been reviewed and are up to date.
- This quarter we have held focus groups for volunteers on the RSH front entrance changes and a briefing following the Dispatches programme
- The volunteer team promoted volunteering at our recent People's and Young People's Academies.
- Following feedback from our annual volunteer survey, we are now holding monthly coffee and cake catch up with volunteers at both sites. Feedback from our volunteers has been really positive.
- Volunteer roles have been reviewed and updated or removed (if the role is no longer fit for the service and is not an active role)

Engagement:

- Community Survey report is not completed, data is currently being collected. Report to be available during Q3
- The Public Participation Team have an ongoing calendar of events and meetings which they attend in the community, including those specific to HTP Engagement.
- The CYP Action plan remains in progress with further meetings to progress taking place in October. Plans revised in line with current engagement by Paediatrics
- Learning Disability academy planning in place to deliver an academy in Q3
- The team attended induction events at Shrewsbury Colleges Group and these were really successful.
- Q2 Young People's Academy great success with 49 young people attending. Q2 People's Academy have 21 people signed up to attend
- Engagement team providing local intelligence and supported HTP roadshow events. Supporting with links and network contacts for specialist focus groups.
- The team have attended all the JSNA events taking place across Shropshire.
- Ongoing calendar of About Health took place during Q2 including a session on HTP, Patient Safety
- 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:

- SaTH Charity Abseil took place on 21st September with fantastic support from fundraisers, with over £20k being raised for the charity
- Draft annual report was submitted to Charitable Funds Committee and approved. Awaiting final approval from the Corporate Trustees.
- The NHS CT development position was approved by CFC as part of a realignment of staff cost based on successes achieved.
- Strong media presence this quarter, with media up take being led by the charity abseil
- Engaged with corporate supporters including a new supporter Enterprise.
- First strategy workshop held led by CFC chair on behalf of the Corporate Trustee in August and 2nd workshop to be arranged to identify agreed priorities.

2 Recommendations

The meeting is asked to:

NOTE the current activity in Quarter 2 2024/25 across the Public Participation Team against the Public Participation action plan.

Julia Clarke
Director of Public Participation
October 2024

SaTH Volunteer Development & Action Plan

April 2024 to March 2025

V1 25/03/2024



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, British Red Cross, RVS etc.

Programme

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

Strategic Aims

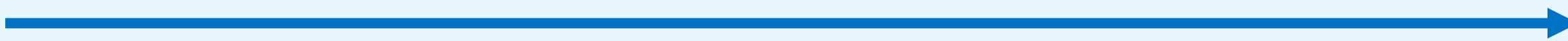
- To improve the patient journey through a vibrant and effective volunteer programme. To ease pressures on staff and support their wellbeing.
- To work towards maintaining the required number of volunteers to meet the demand from the areas supported by the volunteer service.
- To hold quarterly volunteer 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
High turnover of volunteers creates capacity issues within the volunteer management team	4	1	4	Ensure robust recruitment process are in place, including structured interview. Those who do not meet the requirements to volunteers are, where possible, offered alternatives e.g work experience. Provide ongoing support through welfare calls and catch ups
The risk of providing adequate training prior to commencement with the Trust.	2	3	6	Strict on-boarding process to ensure that volunteers understand where they can work and how to mitigate risk through their training
Required Volunteer Recruitment to meet Trust need	2	3	6	All volunteer checks are done through the central Volunteer Dept. following an agreed protocol and the Manager has extensive experience of recruitment and Trust Policy. A recruitment focus is in place.

Q1	Q2	Q3	Q4	General Notes
April – May – June	July – August – Sep	Oct – Nov – Dec	Jan – Feb – March	Progress against Q1
<ul style="list-style-type: none"> Progress with the Volunteer to Career Programme in Radiotherapy and Midwifery Deliver Volunteers' Week 2023 Promote volunteering through the Trust's Peoples Academy Monthly coffee and cake catch up with volunteers 2 x Focus Group on selected area Active database review Establish a calendar of engagement events with local schools and colleges to ensure a good intake for the Youth Programme and Volunteer to Career Programme 	<ul style="list-style-type: none"> Produce a draft of the 5 year plan for volunteering Engage with schools and colleges with on and off site presentations regarding volunteering Review and update website content and social media exposure Review Better Impact content (files, templates etc.) to ensure it is current. Active database review 2 x Focus Group on selected area Launch 2024 September Youth Volunteer Programme Promote volunteering through the Trust's Peoples Academy Monthly coffee and cake catch up with volunteers Interviewing, processing and training for the new cohort of Youth Programme volunteers Review roles and role descriptions on Better Impact and update where necessary 	<ul style="list-style-type: none"> Interviewing, processing and training for the new cohort of Youth Programme volunteers Plan and sent volunteers annual survey Promote volunteering through the Trust's Peoples Academy Support Trust Awards volunteer recognition event Volunteer Christmas campaign Monthly coffee and cake catch up with volunteers 2 x Focus Group on selected area Active database review 	<ul style="list-style-type: none"> Start planning of a Hybrid Volunteer to career programme that works not just for one specific area Volunteer annual survey feedback and focus group Develop a plan on a page for 2025/2026 Plan Volunteers' Week 2024 Review Better Impact as our management platform and implement updates 2 x Focus Group on selected area Second in take for Youth Programme to open in February Promote volunteering through the Trust's Peoples Academy Monthly coffee and cake catch up with volunteers 2 x Focus Group on selected area Active database review 	<ul style="list-style-type: none"> VtC in Radiotherapy is up and running and maternity dates are also booked. Volunteers' Week 2024 was our biggest attendance yet for a volunteer week celebration—pre-election period meant social media was not as good as we had hoped. Talks were held but the volunteer team at the people's academis Monthly coffee and cake catch up with volunteers going well with nice feedback from volunteers Focus groups were held on Psychology services, CQC report and a briefing on A&E programme Active database review is always ongoing. A list of schools has been created and meetings are in the process of being set up



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.
- **Children and Young People** Focussing on areas experiencing Health Inequalities
- **Seldom Heard Groups and their advocates.** 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 2024/2025



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

- Make every contact count, and identify and find ways to engage with those communities who may have barriers to engage with us
- Key barriers to engagement identified & mitigation in place
- Regular meetings/networks in place to keep in contact with stakeholders
- Increase in incoming enquires and active and ongoing engagement from stakeholders
- Increase in both group & individual membership (Target 10% over the year)

Key Risks / Benefits	L	C	LxC	Mitigated L&C
Fail to deliver the Public Participation Plan, resulting lack of confidence of our communities	2	4	8	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
Failure to continue to involve communities during the building stage of HTP could result in challenge	2	5	10	Full programme until 2027 and ongoing attendance/ events planned until 2027

Q1	Q2	Q3	Q4	General Notes
April—May—June 2024	Jul-Aug-Sep-2024	Oct—Nov—Dec-2024	Jan—Feb—March-2025	Quarter 1 Update cont.
<ol style="list-style-type: none"> 1. Recruit Fixed term Community Engagement Facilitator to lead work with Children and Young People 2. Plan major events to attend over the next 12 months 3. Publish Community Survey report and review/refresh digital communication channels 4. Meet with DWP and local authority teams to explore development of People's Academy 5. Deliver People's Academy and Young People's Academy days 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. 	<ol style="list-style-type: none"> 1. Attend community events to engage local population and recruit community members/ promote HTP involvement opportunities 2. Develop an action plan for engaging with CYP and identify areas of need and targeted engagement 3. Develop Learning Disability Academy for delivery in Q3 4. Attend Freshers' events at colleges/universities across Shrops, T&W and mid-Wales 5. Provide update on refreshed digital engagement for Public Assurance Forum 6. Develop and deliver People's Academy and Young People's Academy days 7. Attend events during Disability Pride month (July) to raise profile of SaTH Involvement with community support groups 8. Provide support for Hospitals Transformation Programme 9. Deliver About Health events 10. Work with the divisions to ensure they meet their Section 242 duties. 11. Research and develop Engagement action plan for Children and Young People. Purpose: to create a sustainable CYP Forum (in Q2/3). 	<ol style="list-style-type: none"> 1. Deliver LD People's Academy 2. Develop a Children's and Young People's Forum 3. Restart engagement with Gypsy and Traveller communities across Shrops, T&W, mid-Wales after summer break. 4. Outreach with refugees/ asylum seekers to promote membership, volunteer and employment opportunities 5. Create campaign to promote community membership through rural faith networks to align with Interfaith Week and About Health event. (Powys and Shrops) 6. Identify additional networking opportunities. 7. Deliver People's Academy and Young People's Academy days 8. Provide support for Hospitals Transformation Programme 9. Deliver About Health events 10. Work with the divisions to ensure they meet their Section 242 duties. 11. Review engagement with those communities which may be socially excluded and identify key areas of engagement for the next Quarter 	<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 2025 4. Review engagement with Seldom Heard communities and develop an action plan for 25/26 5. Develop community survey for 25/26 6. Deliver People's Academy and Young People's Academy days 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>Quarter 1 Update</p> <ul style="list-style-type: none"> • Victoria Okwudi joined us at the beginning of June. Induction has gone well and we are excited about the opportunities for CYP engagement she brings. • Following our pre-election hiatus, we have revisited our engagement events and have been able to cover the areas we have missed in June. 	<ul style="list-style-type: none"> • Survey shows overwhelming preference for Facebook, but as 80% of respondents came through a Facebook link, this is of limited value. Further research through face to face engagement before finalising the report. • Contacts with DWP and local authorities refreshed and information shared. Further discussion in the autumn • Q1 Young People's Academy great success with staff bringing students in from Idsall and North Shropshire College. June People's Academy cancelled because of pre-election period. • Engagement team providing local intelligence for and capacity at HTP roadshow events. Supporting with network contacts for specialist focus groups. • May and June About Health events withdrawn during pre-election period. Full schedule for July onwards and events already in calendar for 2025. • Engagement team continue to provide SurveyMonkey services for divisions and involved in refresh of Trust survey tools.



Stakeholder Groups

A. Public (incl. patients)

Appealing to the public is important to achieve our core objectives of raising funds, community engagement and creating a platform to recognise care received.

B. Local Business and Organisations

SaTH provides health care for the workers of local businesses, many will have employees who either or their family are patients at SaTH. Supporting SaTH Charity is likely to be popular with employees. SaTH Charity is keen to engage, encouraging fundraising and their support.

C. Staff

The Charity recognises SaTH staff as its key asset and is focussed on supporting their wellbeing to aid wellbeing and retention. Staff can influence patients to be supporters and are also valuable fundraisers.

D. Existing charitable organisations providing support

SaTH Charity must not be seen as a threat but as a complimentary partner to other charities. Engagement with our ICB 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. Volunteers can raise the profile of the charity.

Charity Team

The SaTH Charity Team sits within the Public Participation Team, aligning it with engagement and volunteering.

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

Strategic Aims

To raise funds that provide medical equipment, patient and visitor wellbeing support and workforce training not meeting criteria for funding through normal NHS channels.

To provide engagement opportunities for local people, business's and organisations to recognise the Trust's value to our local community.

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

To appeal to corporate and community organisations wishing to provide fundraising support and which aligns to the Trust's strategic objectives.

To encourage divisional utilisation of funds to support identified needs and ensuring all approved applications align to need and delivering best value and benefit to the Trust's patients.

To raise awareness of the Trust's activities with target groups & stakeholders to encourage engagement, and development of the SaTH Charity brand.

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

Desired Outcomes

- To increase charitable income, raised or left by legacy to SaTH Charity by 5% year on year based on a rolling 3 year average.
- Increase the visibility of SaTH Charity as the Trust's Hospital Charity locally, measured by increased engagement through social media and supporters and fundraising
- Develop partnership working with corporate organisations in county to maximise relationships with business sector
- Enhancing community involvement with SaTH through positive media opportunities engagement events and fundraising activity.

Key Risks / Benefits	L	C	LxC	Mitigation
5. Fundraising income falls below target of 3yr rolling average +5%	2	4	8	Activity targets and reports monitored through CFC to identify any variance and take action
6. SATH Charity team capability	2	3	6	The Charity Policy clearly outlines duties, delegation and monitoring with training
8. SATH Charity team capacity & succession planning	2	3	6	Annual review to CFC of team function and comparison with NHS CT data. Secure fixed term funding for Charity Comms and engagement post.

Q1	Q2	Q3	Q4	General Notes
April – May – June	July – August – Sep	Oct – Nov – Dec	Jan – Feb – March	Update Q1 activity:
<ul style="list-style-type: none"> Prepare the SaTH Charity "Thank you daisy" campaign to raise awareness to staff of SaTH Charity. Gain approval for the first SaTH Charity abseil as a major fundraiser and profile builder. Gain support from Lingen Davies and the League of Friends to make it a joint event. Launch webpages and booking process to sign up 130 supporters of the Abseil Quarterly Charity Supporters email to be sent Attend and engage with NHS Charities Together National Conference Develop funding process support for LoF and Lingen Davies Secure fixed term contract for Charity Comms & Engagement post Development of positive news and engagement stories 12 	<ul style="list-style-type: none"> Promote SaTH Charity Abseil as a fundraiser and profile builder with staff and supporters Submit draft copy of the Annual Report for review by CFC. Promote our Lake Vrynwy Half Marathon Runners Development of positive news and engagement stories 12 Awareness campaign on Staff Lottery Sign Ups and summer promotion of Small Things Fund Seek to gain approval of the Communications and Marketing post initially funded through NHS CT Promotion of 'Small Change Big Difference' Scheme Quarterly Supporters email to be sent Hold SaTH Charity Abseil event Develop fundraising visibility plan Increase corporate supporters 	<ul style="list-style-type: none"> Focus on Legacy giving, consider a campaign of some description. 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 When developed support the Charity's Trustees in implementing the charity's fundraising strategy 	<ul style="list-style-type: none"> Quarterly supporters email Development of positive news and engagement stories To support staff through the Small Things Fund Raise the profile of the charity through actions on the Public Participation Plan Research options for a multi charity event in 2025 Review all marketing and media 	<ul style="list-style-type: none"> The SaTH Charity Thank you daisy campaign was launched in June. 300 nominations were received and all nominees will receive a daisy and personal thank you card containing their nomination WC 01/07/2024 Approval gained for the Abseil and it will be our first joint fundraiser with Lingen Davies and League of Friends. Web pages and flyers created Abseil was launched WC 24/06/2024. Charity supporters email sent. NHS CT conference was attended and provided great networking opportunities and cross fertilisation of ideas. New funding request process in place with League of Friends which is seeing improvement in the speed of approvals. SaTH Charity communications and engagement post extended for 2 years.

Public Assurance Forum: 14 October 2024

Agenda item	2024/49		
Report Title	Public Participation Plan – Action Plan		
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		
Executive summary:	<p>1. The Forum’s attention is drawn to Appendix 1 – Public Participation Plan, Action Plan update.</p> <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: NOTE the outcome of the 43 actions of the Public Participation Action Plan. This report is provided for information only and going forward will be replaced by the Community Engagment plan on a page.</p>		
Appendices:	Appendix 1: Public Participation Plan, Action Plan update.		

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 themes. 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 The Public Participation Plan outlines our four main aims for our work around engaging with our communities. These are:
- Improve the depth of decision-making at SaTH, by ensuring the views of our local communities are part of the decision-making process, ensuring public scrutiny and assurance of our processes and decision-making
 - Build greater public confidence, trust and understanding by listening and being responsive to our local communities
 - Promote honesty and transparency across the organisation and with local communities by creating accessible, meaningful and timely engagement with our communities
 - Enable our workforce to have the skills and confidence to engage with our communities, so it becomes “business as usual”.
- 1.3 Our Public Participation Plan provides a framework for good practice in relation to how we engage with our community through our guiding principles for Public Participation at SaTH
- 1.4 The Public Participation Plan outlines 6 key objectives which will be achieved and embedded over the next five years at SaTH, these are:
- **Objective 1 – Inclusion:** To increase the number and diversity of people involved with SaTH, ensuring that they are provided with meaningful and timely involvement opportunities
 - **Objective 2 – Responsive:** Build greater public confidence, trust and understanding by listening and being responsive to our local communities
 - **Objective 3 - Decision- making:** To introduce a public and community perspective to decision making and wider work at The Shrewsbury and Telford Hospital NHS Trust, including, recruitment, strategic planning, training and service development and delivery
 - **Objective 4 - Get Involved:** Ensure our communities feel better informed and able to **Get Involved** if they choose to. Develop a range of involvement opportunities that are rewarding, meaningful and enable individuals from a diverse range of backgrounds to get involved.
 - **Objective 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 better use of digital communications)
 - **Objective 6 – Our Staff:** Enable our staff to have the skills and confidence to engage with our communities

- 1.5 Each of the 6 objectives had actions to achieve these and were placed in priority order by our Public Assurance Forum
- 1.6 This paper provides an update on all 43 actions which were part of the Public Participation Action plan. Of the 43 actions 38 have been delivered and 5 actions are currently outstanding
- 1.7 The five actions that are still to be delivered will now be incorporated into the Community Engagement Plan on a Page.
- 1.8 This action plan is now superseded by the Community engagement plan on a page

2 Recommendations

The Forum is asked to:

NOTE the outcome of the 43 actions of the Public Participation Action Plan.

Julia Clarke
Director of Public Participation
October 2024

Public Participation Plan Action Plan

Julia Clarke – Director of Public Participation
Hannah Morris – Head of Public Participation



Public Participation Plan

- Our Public Participation Plan, which outlines how we will work with our communities over the next 5 years, was approved by the Trust Board on 7 October 2021
- The Plan was developed in partnership with our communities. We held a number of engagement events over the past year to hear the views of our local communities and from our staff, including:
 - Virtual Focus Groups (staff and public)
 - An online survey
 - Make a Difference online interactive platform



Objectives of the Five Year Plan

OBJECTIVE 1 - Inclusion

To increase the number and diversity of people involved with SaTH, ensuring that they are provided with meaningful and timely involvement opportunities

OBJECTIVE 2 - Responsive

Build greater public confidence, trust and understanding by listening and being responsive to our local communities

OBJECTIVE 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

OBJECTIVE 4 - Get involved

Ensure our communities feel better informed and able to Get Involved if they choose to. Develop a range of involvement opportunities that are rewarding, meaningful and enable individuals from a diverse range of backgrounds to get involved.

OBJECTIVE 5: Communication

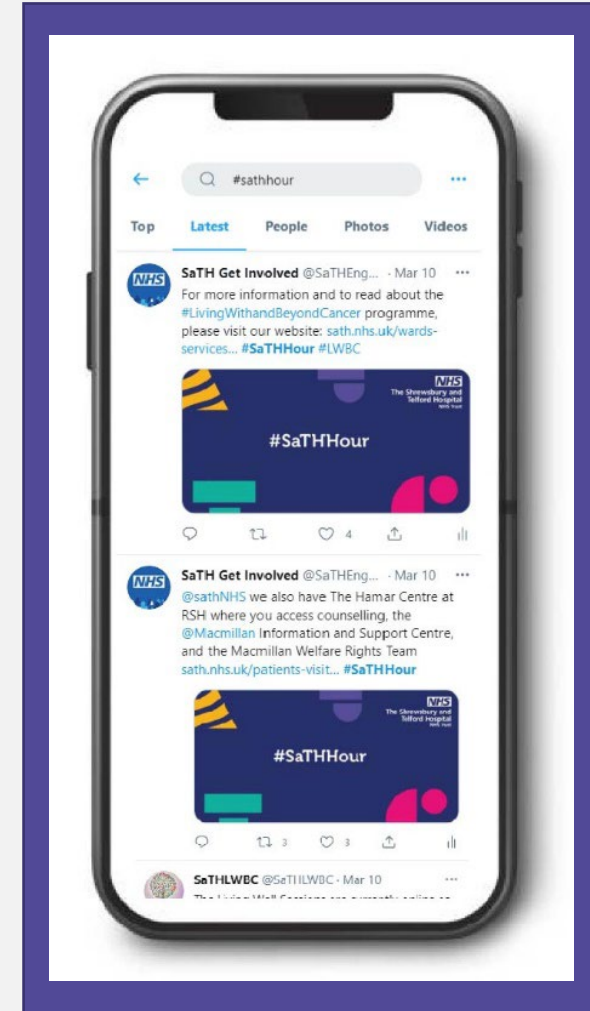
SaTH will communicate with our communities directly to ensure they are kept informed and update about what is going on at the hospitals (making better use of digital communications)

OBJECTIVE 6: Our Staff

Enable our staff to have the skills and confidence to engage with our communities

Survey

- An online survey was developed to ask our communities how they would prioritise the actions for the different objectives which are outline in our Public Participation Plan
- 75 people responded to the survey. We also had feedback from members of the Public Assurance Forum
- The milestones under each objective have been prioritised based upon the feedback we received (1 – being the most important)
- The delivery of these milestones will now be prioritised through their ratings (as shown on the following slides).
- An update will be provided against the Plan to the Public Assurance Forum each quarter



Objective 1 - Inclusion

Milestone	Status	Outcome
<p>1. Providing a range of involvement opportunities for individuals and organisations to #GetInvolved including (but not restricted to):</p> <ul style="list-style-type: none"> • Monthly Cascade update meetings • Health Lectures • Quarterly Community meetings • Community Drop in sessions • Community Membership (with a monthly email update) • Specific workshops/focus groups (Section 242) • People’s Academy • Volunteering • Working with local businesses and local fundraisers • Partnership working with other charities 	<p>DELIVERED</p>	<ul style="list-style-type: none"> • Increased community & organisational membership by over 10% each year • There are monthly hospital Updates provided to the public via MS Teams • We provide an on-going yearly calendar of ‘About Health’ events, including quarterly HTP updates • We had low attendance at Community drop in sessions (which were started online due to COVID) so these have been discontinued • We provide regular email updates to all community and organisational members • We support Divisions in engaging with the public around service changes. All information on service changes can be found on our website Service Changes and Developments – SaTH • We deliver regular People’s & Young People’s academies at both hospital sites. We put on bespoke academies (e.g. LD Academies) when requested • We have a robust volunteering offer at SaTH, which includes, Volunteer to Career and a Young people’s scheme • We continue to build links with local business and fundraisers and are currently working on a 5-year fundraising strategy • We continue to build links with other charities and in September we are holding our first joint fundraising event with two hospital related charities in September
<p>2. Work with the VCSA, Local Authorities and other stakeholders to share information, gain their views and feedback and support them to get involved at SaTH</p>	<p>DELIVERED</p>	<ul style="list-style-type: none"> • We have representatives from VCSA, COG and the local authorities on our Public Assurance Forum. • Members of the public participation department regularly attend VCSA and COG meetings • Our Community Engagement team work collaboratively with colleagues across the local health economy to increase our reach.

Objective 1 - Inclusion

Milestone	Status	Outcome
3. Contacting all new community members with information about how they could #GetInvolved	DELIVERED	<ul style="list-style-type: none"> All community and organisational members received a regular email update from the Trust, which also provides opportunities for individuals and organisations to get involved.
4. Promoting and increasing our community membership each year by 10% ensuring that we have a representative membership across the areas we serve	DELIVERED	<ul style="list-style-type: none"> Individual and organisational membership has increased by over 10% each year. Membership was just over 3000 in October 2021 (when the Public Participation Plan was approved). To date (July 2024) membership is 5152 (4727 community members and 425 organisational members)
5. Attending a programme of local events to promote the work and opportunities for involvement	DELIVERED	We have a calendar of events attended by the public participation department. Outcomes of all events are recorded on the our schedule.

Objective 2 - Responsive

Milestone	Status	Outcome
<p>1. Ensuring that when engaging with the public we feedback their comments, compliments, and concerns to the Patient Experience team. We will ensure there is a response to the individual/organisation to “close the loop”</p>	<p>DELIVERED</p>	<p>The department will take feedback forms to all events and meetings and ensure that feedback and queries are taken back to the appropriate department within the organisation to respond too. When appropriate feedback is also provided to patient experience and PALs/Complaints.</p> <p>For all service changes and developments, we put all feedback on our website, this includes Q&A's, engagement reports and presentations</p> <ul style="list-style-type: none"> • Service Changes and Developments – SaTH • Hospitals Transformation Programme Focus Groups – SaTH
<p>2. We will work with our external stakeholders to identify the health and wellbeing needs of the populations we serve. We will work collaboratively with our partners with the information we received to feed into the Joint Strategic Needs Assessment</p>	<p>ONGOING/DEVELOPING</p>	<p>The team are attending Stakeholder events throughout the year, on the Place Plan JSNA for different areas. We are utilising the information provided by these to develop our engagement and involvement opportunities</p>
<p>3. Meeting with our statutory partners (e.g. Healthwatch, Llais etc) on a regular basis to share information, concerns and feedback</p>	<p>ONGOING/DEVELOPING</p>	<p>Many of our statutory partners are members of our Public Assurance Forum and will provide updates and feedback any concerns. The Forum also provides members the opportunity to get updates from the Trust</p>
<p>4. Promoting the use of “You Said, We Did” across the organisation and ensure that the Public Participation team use this to support the feedback process</p>	<p>ONGOING/DEVELOPING</p>	<p>We provide feedback back on all questions raised by the public on service changes/developments (for example our HTP focus group Q&A's) however this is not implemented across the Trust, and is not standard practice.</p>

Objective 2 - Responsive

Milestone	Status	Outcome
5. Monitoring of themes from questions raised by the Public at Trust Board and through Freedom of Information requests – these will shape some of our engagement activities	DELIVERED	Questions raised by the public in relation to Trust Board are available on our website with a response. The process is now overseen by our Freedom of Information Team
6. Providing feedback and updates to those who give their time and #GetInvolved	DELIVERED	All information on service changes are available on our Trust website. We provide Q&A's and these are circulated to focus group attendees prior to publishing on the website. All outcomes of engagement activities are recorded on the Public Participation Events planner.
7. Regularly updating our #GetInvolved webpages to include information on: <ul style="list-style-type: none"> • Service changes/Developments • Equality Impact Assessments (EQIA) • Upcoming involvement opportunities • Recording of involvement meetings with Frequently asked Questions or Questions and Answers , where applicable) 	DELIVERED	<p>For all service changes and developments, we put all feedback on our website, this includes Q&A's, engagement reports, EHIA's and presentations</p> <ul style="list-style-type: none"> • Service Changes and Developments – SaTH • Hospitals Transformation Programme Focus Groups – SaTH

Objective 3 – Decision Making

Milestone	Status	Outcome
<p>1. Working with our partners in Health and Social Care to ensure that our approach is collaborative and efficient</p>	<p>ONGOING/DEVELOPING</p>	<p>Links and partnerships have been formed with many statutory and non- statutory organisations across the areas we serve. We continue to strive to form strong partnerships so that resources are utilised, and the communities benefit from a collaborative and joined up approach. Examples including working with the ICS around health inequalities</p>
<p>2. Ensuring communities are provided with meaningful opportunities to #GetInvolved and we move away from the model of individual representation on committees, which can often feel tokenistic</p>	<p>DELIVERED</p>	<p>The Public Assurance Forum members consist of individuals representing organisations within our communities. When requested we offer involvement opportunities to our PAF members, however we have moved away from single representatives being asked to sit on committees and work with our Divisions to provide more inclusive ways to engage our communities. Opportunities for individual engagement continue through focus groups and workshops.</p>
<p>3. Developing stronger partnership links with our statutory organisations such as Healthwatch, Llais, HoSC and HWBB</p>	<p>ONGOING/DELIVERED</p>	<p>Healthwatch, Llais and representatives from HWBB are members of PAF and can provide a members update. A representative from the department also attends VCSA and the Chief Officers Group. Members the department attend a systemwide (Health and Social care) engagement leads meeting to share, update and discuss collaborative working</p>

Objective 3 – Decision Making

Milestone	Status	Outcome
4. Ensuring service changes or developments are made available online for our public and staff to view	DELIVERED	All service changes are available on our Trust website Service Changes and Developments – SaTH
5. Embedding community engagement internally with our different teams and departments so that they understand how to start the engagement process.	ONGOING/DELIVERED	The Public Participation Team continue to provide support to different teams/departments within the organisation, supporting them to engage with our local communities. Division are members of the Public Assurance Forum and provide an update to forum members
6. Ensuring we meet our Section 242 duties by early and proactive engagement around potential service changes or developments.	DELIVERED	The Public Participation team support departments with service changes, providing advice, setting up and facilitating focus groups with our communities and patient groups. All service changes and documentation is available on our website Service Changes and Developments – SaTH
7. Developing a Public Assurance Forum to bring a public and community perspective to and scrutiny of processes, decision making and wider work at SaTH. The Forum will comprise representatives of organisations across the areas we serve and will be co-chaired jointly by a Non-Executive Director and an elected Public Representative	DELIVERED	The Public Assurance Forum was developed in January 2022 and meets quarterly. All papers for the Public Assurance Forum are available on our Trust website Public Assurance Forum – SaTH

Objective 3 – Decision Making

Milestone	Status	Outcome
8. Ensuring all service developments have EHIA's with patient and public engagement	DELIVERED	Equality and Health Inequality Impact Assessments are always completed as part of the process for service changes which the Public Participation department support with public engagement. EHIA's are available for service changes are available on website Public Assurance Forum – SaTH

Objective 4 – Get Involved

Milestone	Status	Outcome
1. Involving patient and public representatives in assuring EQIA's	DELIVERED	EQIA's have been replaced by Equality and Health Inequality Integrated Impact Assessments (EHIIIA). These are included in Section 242 engagement plans presented to the Public Assurance Forum for advice and guidance.
2. Ensuring the views of our seldom heard groups are incorporated into the planning, and delivery of services, strategy and planning	DELIVERED	Through our community engagement team we are making links with our seldom heard communities. We are finding ways to work collaboratively with our partners (e.g public health, ICB and voluntary sector) to look at opportunities to work collaborative.
3. Ensuring our community membership represents the diverse communities we serve.	DELIVERED	Our membership is reviewed and we try to ensure that we have a representative membership. Our community engagement team plan their activity around areas identified by Health Inequalities and seldom heard communities. We work with our diverse communities to look at how we can best engage with them

Objective 4 – Get Involved

Milestone	Status	Outcome
<p>4. Increasing the involvement of Seldom Heard individuals and groups. We will provide additional support to facilitate involvement of these groups, especially where there may be barriers to engagement</p>	<p>DELIVERED</p>	<p>When we identify groups who may need additional support or have barriers to engaging with us, we work with these groups and representatives to ensure we provide the best opportunity to get involved. An example is the bespoke focus groups being held as part of HTP. Specialist focus groups include:</p> <ul style="list-style-type: none"> • Visual impairment • Dementia • Veterans • Deaf and hard of hearing (with BSL interpreters) • Autism and Learning disabilities
<p>5. Developing new methods and tools to engage our communities which are inclusive and break down the barriers of “traditional” engagement</p>	<p>DELIVERED</p>	<p>We have a range of ways in which our community can get involved including focus groups (hybrid –in person or MS Teams), regular community email updates, attending events and going out to our communities e.g visiting traveller communities</p>
<p>6. Understanding how the Trust can include and support our seldom heard communities to #GetInvolved</p>	<p>DELIVERED</p>	<p>Our Community Engagement team work collaboratively with colleagues across the local health economy to increase our reach. We also work with our communities to look at how we can best engage and involve them with SaTH</p>

Objective 4 – Get Involved

Milestone	Status	Outcome
7. Increasing the number of seldom heard groups who are involved and giving their views	DELIVERED	The community engagement team are actively involved with a number of projects across the region including Farming Fit and Community Connectors to hear more from seldom heard communities
8. Developing a programme of training and support to be provided to individuals and organisations who want to #GetInvolved e.g. People's Academy	DELIVERED	We hold regularly People's and Young People's Academies throughout the year at both hospital's sites. We have also developed and delivered bespoke academies including a Learning Disabilities and a Job Centre academy
9. Supporting the development of our Social Inclusion Project with the appointment of a Social Inclusion Facilitator	DELIVERED	A social inclusion facilitator was appointed as part of the successful bid application to NHS Charities Together. The post was so successful that the Trust made the post permanent.

Objective 5 - Communication

Milestone	Status	Outcome
1. Ensuring information on our #GetInvolved webpages is current and relevant.	DELIVERED/ONGOING	Information on our Public Participation webpages are regularly reviewed and updated
2. Providing a monthly email update to all community members and organisations	DELIVERED	A monthly email update goes to all community and organisational members
3. Making use of digital technology to involve a wider audience (e.g Microsoft Teams) but not to the exclusion of face-to-face engagement	DELIVERED	We use a wide range of tools to engage with our communities, including MS Teams, Zoom, hybrid meetings (e.g. individual able to attend in person or online). We also have an on-going calendar of events which we attend in person
4. Using social media more effectively to communicate with our communities, including information about opportunities to #GetInvolved	DELIVERED	The Engagement team, SaTH Charity and Volunteers have social media accounts on Facebook, X (formerly Twitter) and Instagram, which we utilise on a regular basis to promote forthcoming events and events that we are attending, as well as good news stories.
5. Promoting internally and externally the calendar of events which are hosted by the Public Participation Team (such as Health Lectures)	DELIVERED	We utilise social media to promote events that we are organising as well as external events that we are attending. The department also has a calendar of events which we share internally and externally with health and social care colleagues. Outcomes of events are also documented and highlights are provided in our Quarterly Trust Board paper (including an update from PAF).

Objective 5 - Communication

Milestone	Status	Outcome
6. Revising our #GetInvolved webpages, so information is easy to find and is accessible.	ONGOING/DELIVERED	Information on our Public Participation webpages are regularly reviewed and updated
7. Working with other departments to promote the Involvement agenda.	ONGOING/DELIVERED	Ongoing discussions with Divisions to support engagement with our local communities. Divisions are represented at our Public Assurance Forum and provide updates to members
8. Developing the #GetInvolved webpages to showcase positive examples of successful involvement, which demonstrate the positive impact of public engagement	ONGOING	All service changes and relevant documentation are available on our website. Our volunteer team have case studies on their webpages; however, this area still needs further development.
9. Promoting involvement opportunities (such as the People's Academy) at external and internal events	DELIVERED	The Public Participation team take out a range of resources to external and internal events including Get Involved leaflets, HTP leaflets, up and coming events (including About Health Events, People's Academies and focus groups)
10. Promoting good news stories, features and pictures to our communities through email updates, social media and meetings.	DELIVERED	The Engagement team, SaTH Charity and Volunteers have social media accounts on Facebook, X (formerly Twitter) and Instagram, and we promote good news stories, events through these. A regular email update goes to all community members and organisation, which highlights good news stories and events.

Objective 6 – Our Staff

Milestone	Status	Outcome
1. Working with our departments and Divisions to create new and meaningful ways to become involved	DELIVERED	We work with the Division to ensure they meet their Statutory Duties, and we support the Division to engage with their local communities around specific topics
2. Developing a tool kit that will be accessible to staff with a step by step guide on engaging the public around service changes and developments	DELIVERED	A tool kit has been developed and is available on our staff intranet: SaTH Intranet - Public Engagement Our Legal Duties There is also a flow diagram to give a step-by-step guide to staff regarding the process of engagement around Section 242. This was also shared with PAF members for feedback and development.
3. Supporting our Divisions in meeting their Section 242 duties and ensuring there is meaningful engagement with stakeholders	DELIVERED	We continue to support our Divisions around engaging the public and our partners regarding service changes. All information on service changes can be found on our website Service Changes and Developments – SaTH
4. Developing and delivering an online training video for staff	NO ACTION	In discussion with staff, it was decided that a video would not be the best way to engage with staff around service changes. The Team attended several Divisional meetings to discuss Section 242 duties as well as the online tool kit.

Public Assurance Forum – 14 October 2024

Agenda item	2024/49		
Report Title	Quarter 2 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			
Executive summary:			
	<p>1. The Public Assurance Forum's attention is drawn to the following sections:</p> <ul style="list-style-type: none"> • Community Engagement (slides 5-15) • Volunteers (slides 16-19) • SaTH Charity (slides 20-27) <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 Public Assurance Forum:			
	<p>The Public Assurance Forum is asked to:</p> <p>NOTE the current activity in Quarter 2 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 5-15 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 (4857) and organisations (429) continue to increase. (Slide 7 details)
- 2.2 The Community Engagement team have been attending a wide range of events this quarter, including Clun Carnival, Haughton Hall in Shifnal, the Montgomery Show, the Minsterley Show and Ironbridge Coracle Regatta. Community events give us the opportunity to discuss HTP, Volunteering, Young People's Academy and a range of other related issues.
- 2.3 Our Social Inclusion Facilitator has been making stronger links with a number of Seldom Heard Groups this quarter with a focus on our rural communities, LGBTQ+, addiction and recovery and building links with Public Health to support engagement with Gypsy and Traveller communities in the county (Slide 9).
- 2.4 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/groups e.g. Deaf/BSL etc. 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 10-15) For more information please see our website: [HTP Focus Groups - SaTH](#)

3.0 Volunteers (Slides 16-19)

- 3.1 We currently have 296 volunteers, who have given over 6224 hours of volunteer time in Quarter 2 across a wide range of activities. There are over 30 different role descriptions across all areas on the Trust including non-clinical support roles

- 3.2 SaTH Volunteers have been integral to support patients and visitors with wayfinding since the closure of the Outpatients Entrance at Royal Shrewsbury Hospital, helping to direct and support patients and visitors.
- 3.3 Our Volunteers have supported 'Exercise Western', playing the role of patients of a road traffic accident in order for staff in A&E to test how to use Careflow in a major incident situation.
- 3.4 We have a new meeting and greet volunteer role in W&C and the Alcohol Liaison Service welcomed a new volunteer to their team – they are the first 'Lived Experience' volunteer in the service and are providing peer support for patients in our care going through detox.
- 3.5 Cohort 3 of the Volunteer to Career programme within Radiology at the Royal Shrewsbury Hospital, finished in September with volunteers contributing over 665 hours to Radiotherapy. A fourth VtC cohort in Maternity is due to start in October (slide 19).

4.0 SaTH Charity (Slides 20-27)

- 4.1 Income for the 3 months of Q2 2024 was £160,498 and expenditure for this period was £43,472. (Slide 20)
- 4.2 To date we have 2648 SaTH Charity supporters and 959 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 In Quarter 2 the charity approved 90 charitable fund requests across 21 different funds. Some of the items of expenditure in Quarter 2 are shown on Slide 21. It illustrates the benefit that can be created through fundraising and donations made to SaTH Charity.
- 4.4 Staff and supporters continue to raise money and awareness of SaTH Charity, and highlights from Quarter 2 are shown on slide 22, including a supporter running the London Marathon for the neonatal unit, Dementia Clinical Specialist asking for donations in lieu of wedding gifts and a mother and daughter running the Shrewsbury Half Marathon for Haematology, to celebrate the daughter's recovery from cancer.
- 4.5 SaTH Charity's annual Thankyou Daisy campaign took place in July. Trust Staff were asked to nominate a colleague for a Thankyou Daisy based on kindness or support they had received. Each nominated person then received a personal card which contained their written nomination inside and was accompanied by a special NHS daisy.
- 4.6 On the 10 July the SaTH Charity Swan Fund (EoL) celebrated their 9th birthday. The team held a knitter's café to thank all the people who support our families with knitted hearts. Hearts are made in matching pairs, with one given to the patients who are reaching the end of their life, and the matching one is given to their loved ones
- 4.7 The SaTH Charity Abseil from the RSH ward block took place in September 2024 and has raised over £25,000 (including gift aid) for SaTH Charity. With our onsite charity partners Lingen Davies and the League of Friends we all came together to raise funds to improve the health care of local people through this unique charity abseil.

4.8 The Trust had a successful bid application approved by NHS Charities Together for £30K. The grant was to support the development of SaTH Charity by raising awareness around fundraising and improving the visibility of the charity. In August the grant concluded having met all its objectives (Slide 27).

5.0 Q2 Forward Plan (summarised slides 29-31)

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 (e.g Sensory and Auditory impairment, veterans)
- A Young People’s Academy and a People’s Academy to start in Q3
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public

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

COMMUNITY ENGAGEMENT MEETINGS

Date	Time	Event
Thursday 17 October	18:30 – 19:30	<i>About Health</i> – Menopause Update
Tuesday 29 October	18:30 – 19:30	<i>About Health</i> – Hospitals Transformation Programme
Wednesday 30 October	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)
Tuesday 12 November	18:30 – 19:30	<i>About Health</i> – Pastoral Care in our hospitals
Wednesday 27 November	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)

HOSPITAL TRANSFORMATION PROGRAMME FOCUS GROUPS

Date	Time	Event
Thursday 17 October 2024	10:00 – 12:00	Armed Forces Focus Group
Thursday 24 October 2024	10:00 – 12:00	PPG Representatives Focus Group (F2F)
Thursday 24 October 2024	18:00 – 20:00	PPG Representatives Focus Group (online)

Tuesday 03 December 2024	10:00 – 12:00	MEC & SACC Quarterly Focus Group
Thursday 05 December 2024	10:00 – 12:00	W&C Quarterly Focus Group

7. Recommendations

The meeting is asked to:

NOTE the current activity in Quarter 2 across the Public Participation Team

Julia Clarke

Director of Public Participation

October 2024



Public Participation Report

Quarter 2 (July – September 2024)

Julia Clarke – Director of Public Participation

Volunteering

Engagement

SaTH Charity

Highlights of Public Participation – Q2

COMMUNITY ENGAGEMENT (for details see slides 5 – 15)

- The SaTH Public Assurance Forum, which provides independent assurance on our engagement met on the 14 October 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 (4857) and organisations (429) continue to increase.
- Over the past Quarter, the Public Participation team have supported 46 HTP events with the public. We have attended 34 face to face meetings and events, and 12 online events this quarter.
- Our Social Inclusion Facilitator has been making stronger links with a number of seldom heard groups. This work aligns with our Trust and system focus on Health Inequalities (CORE20PLUS5) and EDI.



Highlights of Public Participation – Q2

VOLUNTEERS (for details see slides 16 – 19)

- We have 296 active volunteers within the Trust who have provided 6224 hours of their time this quarter across 30+ clinical and non-clinical roles.
- **We have held a number of focus group for our volunteer this quarter including:**
 - A briefing prior to outpatients closing at RSH
 - A walkabout with volunteers following the closure of outpatients to give feedback and suggestions
 - A briefing following the dispatches programme to give volunteers an update
- SaTH Volunteers have continued to support wayfinding, following the closure of the Outpatients Entrance at Royal Shrewsbury Hospital, helping to direct and support patients and visitors.
- 9 volunteers played crucial role in 'Exercise Western', a simulation of a major incident in RSH A&E. Volunteers played the role of patients of a road traffic accident in order for staff in A&E to test how to use Careflow in a major incident situation.
- Cohort 3 of our Volunteer to Career has now finished with volunteers contributing over 665 hours to the radiotherapy department. Cohort 4 in midwifery has now started.



Highlights of Public Participation – Q2

SATH CHARITY (for details see slides 20 – 27)

- Income for the 3 months June – August 2024 was £160,498 compared to £50,082 in the same period last year. Expenditure for the same period was £43,472 compared to £299,216 in 2023.
- In Quarter 2 the charity approved 90 charitable fund requests across 21 different funds.
- 2648 people are registered as SaTH Charity supporters (this includes staff and members of the public).
- Following a successful £30K grant from NHS Charities Together in August 2023. The grant was to develop the SaTH Charity brand and visibility in the community. The project concluded in August having met all its objectives.
- Our supporters continue to fundraise for SaTH Charity in Quarter 2 some of which are highlighted within this report.



COMMUNITY ENGAGEMENT

COMMUNITY ENGAGEMENT (1): Public Assurance Forum 14 October 2024

The Public Assurance Forum (PAF) met on 14th October 2024, key items that were discussed at the Forum included:

COMMUNITY ENGAGEMENT (2): Public Assurance Forum 14 October 2024

The Public Assurance Forum (PAF) met on 14th October 2024, key items that were discussed at the Forum included:

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.
- The end of the pre-election period at the beginning of July saw the engagement team restart our engagement programme, attending a wide variety of community events and meetings across Shropshire, Telford & Wrekin and mid-Wales.
- The Hospitals Transformation Programme remains the main theme of feedback received by the Community Engagement team and we continue to work closely with colleagues to support ongoing engagement.



Community Members

Total at 30/09/24 **4857**

Joined in Q2 **287**



Organisations

Total at 30/09/24 **429**

Joined in Q2 **6**



Community Events

Held in Q2 **10**

Attended in Q2 **37**

Community Engagement

We have attended a number of community events this quarter including Clun Carnival, Haughton Hall in Shifnal, the Montgomery Show, the Minsterley Show and finishing at the Ironbridge Coracle Regatta. We have also attended community Events in Bishop's Castle, Craven Arms, Ketley, Ludlow, Hadley and Cockshutt (Ellesmere). These gave us the opportunity to discuss HTP, Volunteering, Young People's Academy and a range of other related issues.

Our July Young People's Academy (YPA) was our busiest yet:

- **49 young people completed the day** and receiving their certificate and badge.
- We held a number of sessions at the YPA including, behind-the-scenes tours Basic Life Support Skills session, information on volunteering, HTP and sighted guiding training.
- Following feedback, we are looking at how we can include more interactive content following at the Young People's Academy.



Behind the scenes tour in Theatres



Hand Hygiene Assessment with Volunteer Team



Fun with the Resus Team

Social Inclusion

The farming community face numerous health inequalities from both their rurality and the nature of their work. We are proud to continue this work which also catches farmers from across Shropshire.

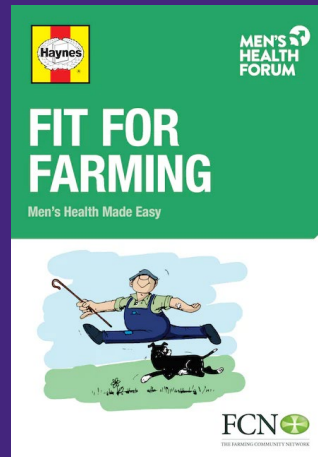
The Farming Fit partnership initiative (previously the Powys Agri-Wellbeing Scheme – PAWS) officially launched at the Royal Welsh Show on Tuesday 23rd July. SaTH Community Engagement have been a partner in this initiative for over two years and have been part of the small task and finish group.

Farming Fit have a dedicated space where they can have blood sugar, BMI, and pulse checks with medical staff as well as engage in 'How are You' chats.

Farming Fit has achieved so far:

- 1,111 engagements undertaken with members of the rural community,
- 1,015 individual health checks carried out, and resulted in 20 people being advised to contact their GP.

These are incredible numbers and show the value and worth of this workstream.



We had a great day at Shrewsbury Pride!! The Public Participation team went out to talk to our community about HTP and ways to #GetInvolved with our hospitals.

- We have been talking with and listening to colleagues and service users at Telford After Care Team and the Shropshire Recovery Project to see how we can ensure the voice of people in addiction recovery services is captured.
- During August, we met with Public Health officers in Telford & Wrekin to agree some collaborative engagement events through to the end of the year. This is in addition to the work already planned with the Gypsy and Traveller community in the borough.

HTP ENGAGEMENT

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, Critical Care 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 for our deaf/BSL community. In October focus groups will be held for our hard of hearing communities and our Armed Forces Community.
- **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](#)
- **Quarterly *About Health HTP* events have been delivered** - The next About Health event is on the evening of **Tuesday 29th October 2024 at 6.30pm**

HTP Engagement Map – Q2 2024/2025

- The map displays the 34 events we have attended in Quarter 2 (July – September 2024) and discussed HTP with the public.
- In Quarter 2 we have attended 12 online meetings/events; often these meetings cover large geographical areas across T&W, Shropshire and Powys.
- Due to all engagement being paused during the Pre-Election Period we held two sets of quarterly focus groups in this period (W&C and MEC&SACC) – July and in September.
- A specialist focus group was held for our Deaf/BSL community to gain their valuable feedback.



HTP Engagement – Q2 2024/2025

In Q2 2024/25 we organised and facilitated the following events:

Date	Event
10 July	Monthly Hospital Update
11 July	MEC & SAC Focus Group
12 July	W&C Focus Group
15 July	Public Assurance Forum
23 July	Volunteer RSH main outpatient walkabout
24 July	Young People's Academy
30 July	About Health HTP Update
5 August	Local Resident Engagement Session
8 August	Ludlow Market Information Stand
14 August	Monthly Hospital Update
2 September	W&C Focus Group
3 September	MEC & SAC Focus Group
3 September	Corporate Speciality Patient Experience Group Meeting
6 September	Oswestry Market Information Stand
10 September	Armed Forces Covenant Board Update
11 September	Monthly Hospital Update
12 September	Shawbirch Patient Participation Group
16 September	Armed Forces Outreach Information Stand
26 September	People's Academy
26 September	Specialist HTP Focus Group – Deaf/BSL Focus group



Aaron Hyslop, Adam Ellis-Morgan and Rachel Webster at Age UK Shrewsbury

Upcoming Engagement & Focus groups

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

The next Focus Groups:

- Specialist focus group: Hard of Hearing, 3rd October 2024
- Specialist focus group: Armed Forces & Veterans, 17th October 2024
- Specialist focus group: Patient Participation Groups – 24th October 2024
- Medicine and Emergency Care/Surgery, Anaesthetics and Cancer Focus Group on 3 December at 10:00am (Hybrid meeting)
- Women's and Children's Focus group on 5th December at 10:00am (Hybrid meeting)
- Please note all Focus groups can be attend in person or via MS Teams

Our next HTP About Health event will be held on MS Teams on 29th October at 6.30pm (Via Microsoft Teams)


Drop-in sessions or meetings are being planned throughout Shropshire, Telford & Wrekin, and Powys, which will provide the opportunity for members of the public to find out more about the programme; dates now confirmed for:

- 11th October – Much Wenlock Market
- 26th November – Telford Town Centre
- 9th December – Welshpool Livestock Market


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

You Said, We Did

We have been working closely with patients, colleagues, and the public to help inform our plans and designs. Some examples of this are:



We will now have a second Bereavement suite in the designs of the new Women and Children's facilities




Considering 'Calm Spaces' within the new build which provide quieter areas for visitors with neurodiverse needs


Providing a sensory maps on each floor which help identify quieter areas for visitors with neurodiverse needs



Front entrance redesign into the new building with two separate entrances following public feedback



Incorporating a sensory room for children to support those with learning disabilities and autism



Ongoing work to develop clear wayfinding and signage around the new facilities

Additional Engagement Routes

Event & Date	Subject
Hospitals Update meeting	Monthly Trust News Update including update on HTP
Monthly newsletter email update - sent to our 4900+ 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 October 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



The Shrewsbury and
Telford Hospital
NHS Trust

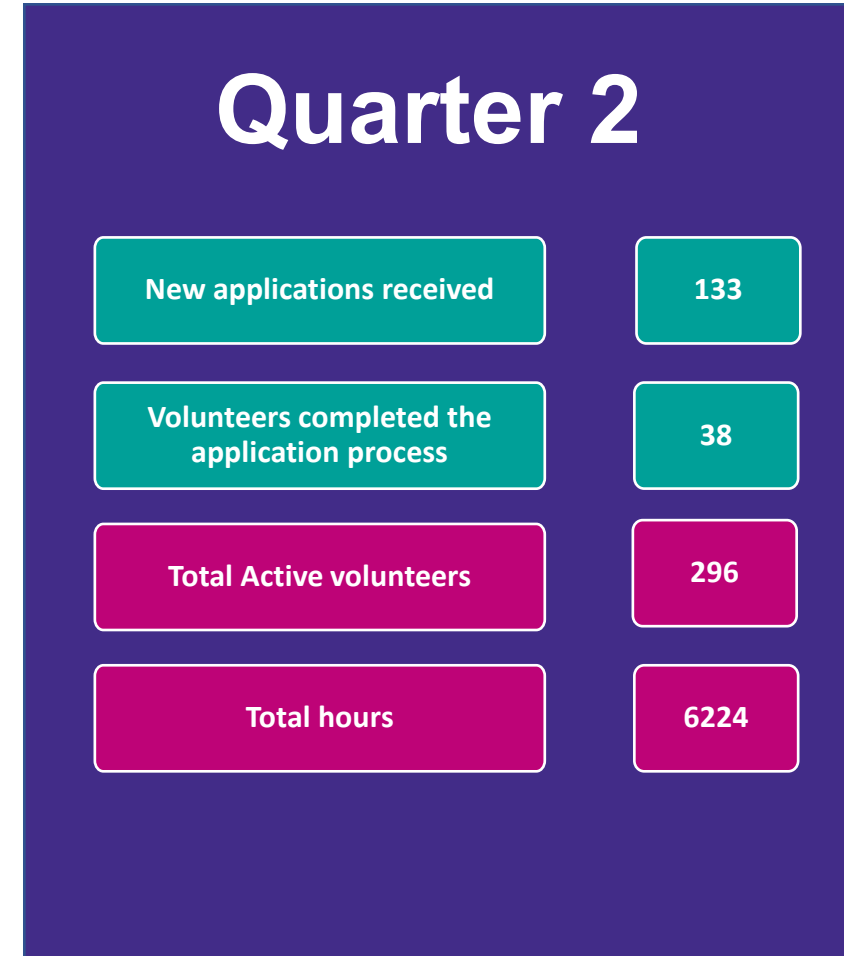
VOLUNTEERS



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

Volunteers Highlights

- We currently have 296 active volunteers at the Trust.
- We have held a number of focus group for our volunteer this quarter including:
 - A briefing prior to outpatients closing at RSH
 - A walkabout with volunteers following the closure of outpatients to give feedback and suggestions
 - A briefing following the dispatches programme to give volunteers an update
- SaTH Volunteers have continued to support wayfinding, following the closure of the Outpatients Entrance at Royal Shrewsbury Hospital, helping to direct and support patients and visitors.
- This month we have been out and about talking to local schools and colleges about the Public Participation Team and the benefits of volunteering. We currently have 112 volunteers on our Youth Volunteering scheme
- A fantastic well done to a number of our volunteers who took part in the SaTH Charity abseil this month. Most notably our two volunteers in their 80's who scaled the ward block and raised over £6000 between them! [Shrewsbury: Friends in their 80s complete five-storey abseil - BBC News](#)



Volunteers Highlights

- SaTH Volunteers have been integral in supporting the closure of the Outpatients Entrance at Royal Shrewsbury Hospital, helping to direct and support patients and visitors
- Volunteers are based in the Treatment Centre and Ward Block entrances to help with wayfinding since July 2024
- Volunteers have been highly praised by staff, on social media, and have even feature in the press
<https://www.bbc.co.uk/news/articles/c4gllv2p558o>

Sally Wilson

Had a great experience yesterday with parking thought was well done and volunteer was really helpful...



Volunteers Highlights

- 9 volunteers played crucial role in 'Exercise Western', a simulation of a major incident in RSH A&E. Volunteers played the role of patients of a road traffic accident in order for staff in A&E to test how to use Careflow in a major incident situation.
- We held our first 'volunteer coffee and catch up' in our new offices at William Farr House, it was well attended and great to see a few new faces.
- The Alcohol Liaison Service welcomed a new volunteer to their team – they are the first 'Lived Experience' volunteer in the service and are providing peer support for patients in our care going through detox
- A new role Meet and Greet role in Women and Children's at PRH started this month. The role aims to welcome and support patients and their families when they come into unit for appointments.



Volunteer to Career (VtC)



Highlights from this Quarter:

A volunteer from Cohort 3 has been successful in gaining employment in the Radiotherapy department.

Two Volunteer to Career graduates from Cohort 2 have been in touch to let us know they have recently been successful in gaining employment in the Women and Children's Centre where they previously volunteered- Well Done!

Cohort 3 – Radiotherapy

- 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 within Radiotherapy at the Royal Shrewsbury Hospital over a 6-month period.
- We are close to the end of the 'formal support' for Cohort 3 and we will celebrate their success in a celebration evening in October.
- To date, just over **665 hours of volunteering** have been contributed to Radiotherapy from this cohort of Volunteers

Cohort 4 - Midwifery:

- We held a 'Find out more' session on MS Teams for Cohort 4. This was well attended, and Rachel Armstrong and midwife Naomi Parry spoke about the programme. The cohort also heard from a VtC Graduate and now SaTH employee Rachael Campbell about her positive experience and journey on the programme.
- Cohort 4 are due to start their volunteering and training sessions in October/November 2024



The Shrewsbury and
Telford Hospital
NHS Trust

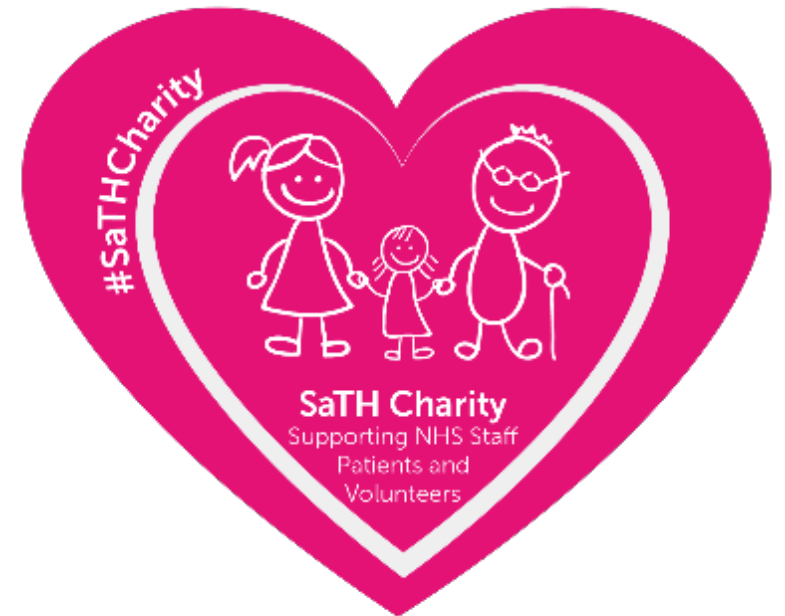
SATH CHARITY



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

SaTH Charity Highlights

- Income for the 3 months June – August 2024 was **£160,498** compared to **£50,082** in the same period last year. Expenditure for the same period was **£43,472** compared to **£299,216** in 2023.
- **During this period SaTH Charity had:**
 - **577** monetary donation entries registered on the charity database, this is an increase from Q1 where we had 87 monetary donations made, the increase was down to the abseil and Lake Vrywny half marathon that took place during this period.
 - **23** donations were 'In Memory' donations
 - **959** members of staff are now playing the staff lottery
 - **2,648** people are registered as a supporter/donor/fundraiser (this includes staff and members of the public)
 - SaTH Charity had **90** requests during the quarter for support from SaTH Charity, **44** of which were to the staff Small Things Fund.



SaTH Expenditure

- In the three months June - August 2024 there were **90** approved requests for charitable funds across **21** different funds. Examples of approved funding included:
- Two reclining chairs for Ward 23 side rooms. **£2,495.93.**
- Mural in the Midwife Led Maternity Unit to improve the area and make it more inviting. **£3,000.**
- High-quality, portable full-HD monitors purchased for Urology to carry out Cystoscopy within a ward setting and thus freeing up theatre capacity and reducing the time from requesting to having the procedure a **£4,500.00.**
- Upgrade of furniture in parents' flats including an electric raise bed for Neonatal to improve the environment for parents staying on the ward. **£4,894.80.**
- Replacement furniture for Swan Suite - Ward 15 16, the room will be used by relatives to have open and honest conversations about end-of-life care. **£1,332.00**



Thank you supporters!

Jonathan Taylor ran the London Marathon in April to raise money for the Neonatal unit and made his presentation to the hospital in July. Jonathan was inspired to undertake this challenge as he wanted to give back to the unit where his son Oliver received treatment for a week following his birth.



Newlyweds Karen Breese, our Dementia Care Clinical Specialist and her husband Clive Coxtan asked for donations to SaTH Charity's Dementia Appeal in lieu of gifts and raised £500 for the Dementia fund.



Vicki Clayson and her mum, Sarah Lysaght ran the Shrewsbury Half Marathon on Sunday 29 September. Their motivation was to celebrate Sarah's recovery from cancer.

Sarah started running as part of recovery after cancer, as a way to get to know her body again after the treatment. Ten years later and she's still going strong and to celebrate her health she is raising money to support Haematology patients at SaTH.



A flower says it all

The SaTH Charity Thankyou Daisy campaign took place in July and was well received by all.

Trust Staff were asked to nominate a colleague for a Thankyou Daisy based on kindness or support they had received. Each nominated person then received a personal card which contained their written nomination inside and was accompanied by a special NHS daisy.

The comments meant so much to so many, a thank you goes a long way!

Impact Statement:

“Thank you for my daisy and my card, reading my colleagues kind words has meant so much to me. I am making a difference”

Medical Admin RSH



Big smiles from colleagues when they received their daisies and cards

Two intrepid octogenarians abseiled for SaTH charity

Intrepid octogenarians Angela Turner and Joan Woodhouse took on the challenge to abseil from the ward block at Royal Shrewsbury Hospital (RSH) to raise money for charity.

Angela, 82, and Joan, 80, raised funds for The Shrewsbury and Telford Hospital NHS Trust (SaTH) Charity's Chemotherapy Day Centre which is close to their hearts. They have raised over £7400 for SaTH Charity!

Both women have a deep connection with the Chemotherapy Day Centre - Joan has volunteered on the unit for the last six and a half years and Angela has previously volunteered for eight years at the centre.

Impact Statement:

Angie Cooper, Matron for Oncology & Haematology, said: "We are delighted to see Angela and Joan take on such this challenge to raise money for the Chemotherapy Day Centre. The whole team at the centre are proud of their bravery."



Angela Turner and Joan Woodhouse at the foot of the ward block

NHS CT Development Grant (Month 12)

The NHS CT funded grant to develop the SaTH Charity brand and visibility in the community concluded in August having met all its objectives.

The main element of the grant was the funding of a Charity Communications Officer, based on the success and progress achieved the role has been extended until August 2026.

Key points from the project:

- The increase in awareness gained from the project has meant the charity achieved the three key performance indicators for the project which were

1. Outcome: Increase in brand awareness - Target of 10%

ACHIEVED – Survey has completed and shows an increase of 25% of participants hearing about us on social media, this is compared with 2% in the previous survey.

2. Outcome: Increase in donations to the Charity - Target of 10%

ACHIEVED – Compare data to last year after 6 months (February 2024). In the period October to March 2022/23 £140,203 vs the same period 2023/24 was £273,822, this is a 51% increase. Overall, the year ending the charity received £357,000 2022/23 compared to 2023/24 saw a 39% increase in donations with £471,251.

3. Outcome: Increase in number of Charity supporters - Target of 25% and this will be mainly community with some increase in corporate supporters

ACHIEVED – Compare data to last year after 6 months (February 2024).

Looking Forward

Public Participation- Forward Plan

- The Public Assurance Forum to meet on 13 January 2025 (last met 14 October 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 Sensory and Auditory impairment, veterans)
- A Young People's Academy and a People's Academy to start in Q3
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public



Dates for your diary

Date	Time	Event	Booking
Thursday 17 October	18:30 – 19:30	<i>About Health</i> – Menopause Update	
Tuesday 29 October	18:30 – 19:30	<i>About Health</i> – Hospitals Transformation Programme	
Wednesday 30 October	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)	
Tuesday 12 November	18:30 – 19:30	<i>About Health</i> – Pastoral Care in our hospitals	
Wednesday 27 November	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)	

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

Hospitals Transformation Focus Group

Date	Time	Event	Booking
Thursday 17 October 2024	10:00 – 12:00	Armed Forces Focus Group	If you are interested in joining a Focus Group please email sath.engagement@nhs.net
Thursday 24 October 2024	10:00 – 12:00	PPG Representatives Focus Group (face to face meeting)	
Thursday 24 October 2024	18:00 – 20:00	PPG Representatives Focus Group (online meeting)	
Tuesday 03 December 2024	10:00 – 12:00	MEC & SACC Quarterly Focus Group	
Thursday 05 December 2024	10:00 – 12:00	W&C Quarterly Focus Group	

People's Academy Dates for 2024



THE YOUNG PEOPLE'S
ACADEMY



THE PEOPLE'S **ACADEMY**

Date	Venue
Wednesday 30 October	SECC

2025

Thursday 20 February	SECC
Thursday 29 May	Education Centre, PRH
Thursday 24 July	SECC
Thursday 30 October	Education Centre, PRH

Date	Venue
Wednesday 27 November	SECC

2025

Thursday 13 March	SECC
Thursday 26 June	Education Centre, PRH
Thursday 25 September	SECC
Thursday 27 November	Education Centre, PRH

Public Assurance Forum meetings 2025

Monday 13th January 13.00-16.00

Monday 14th April 13.00-16.00

Monday 21st July 13.00-16.00

Monday 13th October 13.00-16.00