



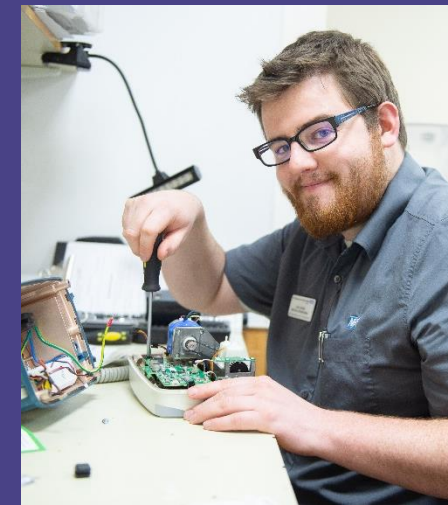
**Integrated
Care System**
Shropshire, Telford and Wrekin



**The Shrewsbury and
Telford Hospital**
NHS Trust

Hospital Services Transformation Programme

March 2023



**HOSPITALS
TRANSFORMATION
PROGRAMME**



HIGHER QUALITY,
SAFER CARE



IMPROVED
OUTCOMES



BETTER
ACCESS



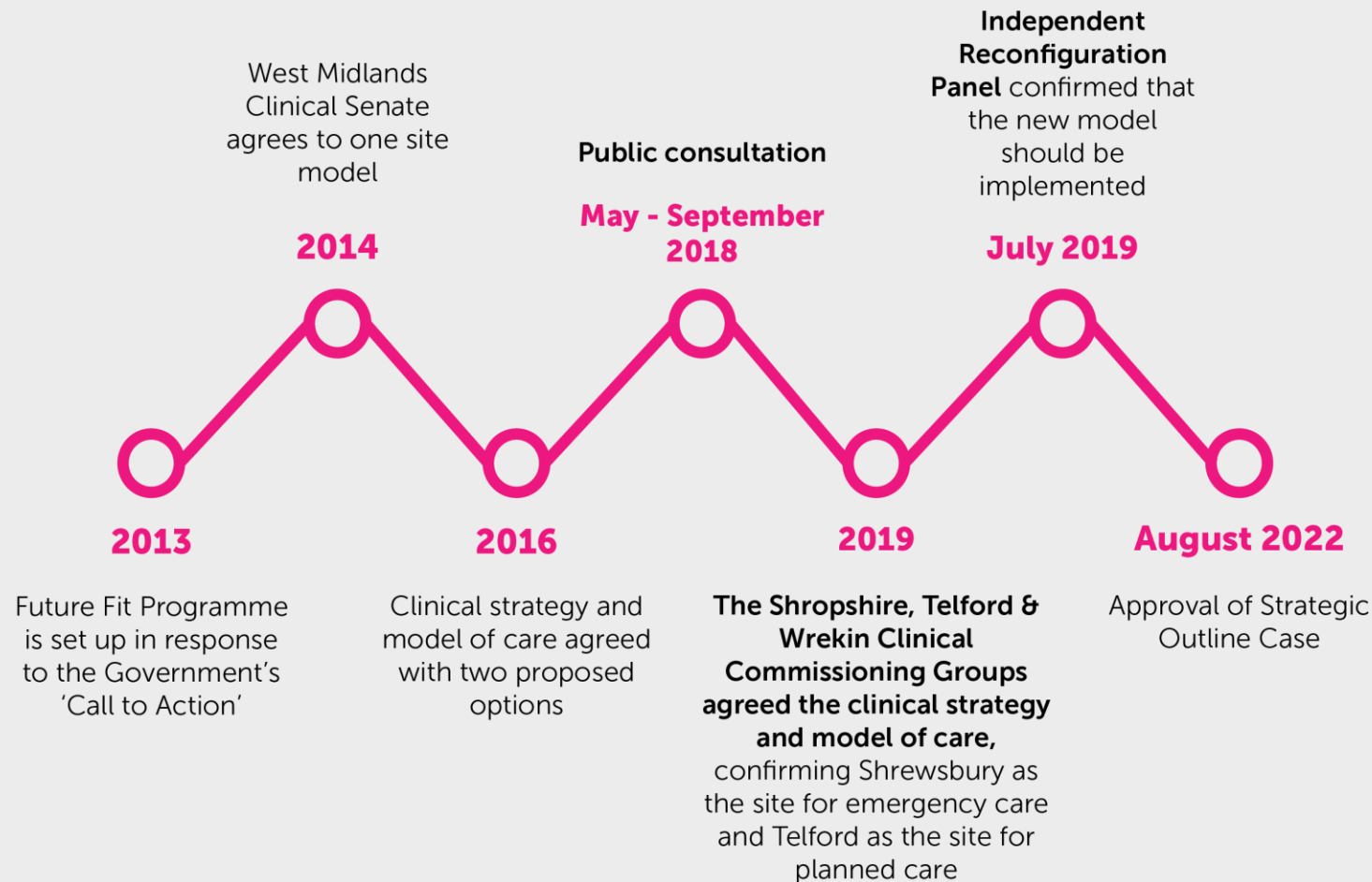
A GREAT PLACE
TO WORK

What will we cover?

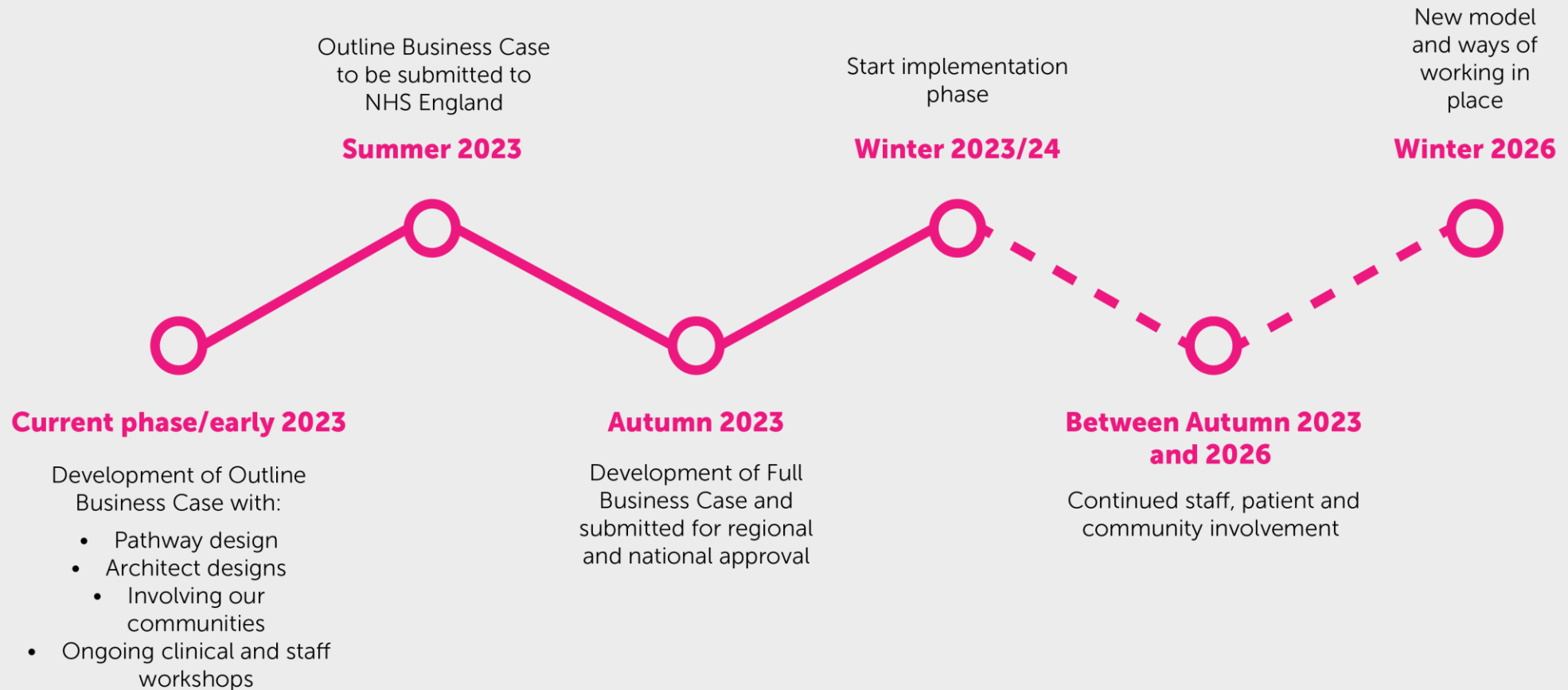
- A recap of our journey so far
- The developing, agreed, clinical model
- Opportunities to get involved



Our journey so far



Our journey to come



Why do we need to work differently?

- The COVID-19 pandemic, and the pressures this winter have shown that more than ever, we need these changes; our agreed new model of care.
- Having duplicated services across different sites mean that our ways of working are not as good as they could be and impact on the service we can provide.
- Unsustainable workforce across duplicated services
- Long waiting times for urgent, emergency and planned care
- Buildings do not give layout, space or capacity required, including for infection prevention and keeping people safe from seasonal infections, eg, Covid and flu
- We are committed to developing two thriving hospital sites – the Princess Royal Hospital in Telford and the Royal Shrewsbury Hospital – that provide the best care to all of the communities we serve.



Two thriving hospital sites...



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TELFORD

SPECIALISING IN PLANNED CARE



✓ PLANNED SURGERY: PROCEDURES, DAYCARE SURGERY,
NON-COMPLEX INPATIENT SURGERY

✓ A&E LOCAL MODEL

✓ INPATIENT MEDICAL CARE

✓ GENERAL SURGERY

✓ UROLOGY

✓ ORTHOPAEDICS

✓ GYNAECOLOGY

✓ WEIGHT LOSS SURGERY

✓ BREAST SURGERY

✓ REHABILITATION

ONE HOSPITAL, TWO SITES

BOTH SITES WILL PROVIDE

✓ 24-HOUR URGENT CARE CENTRES ✓

✓ DIAGNOSTICS ✓

✓ OUTPATIENT ADULT ✓

✓ OUTPATIENT CHILDREN ✓

✓ MIDWIFE-LED MATERNITY SERVICES ✓

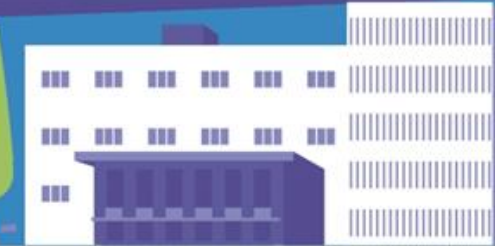
✓ FRAIL AND ELDERLY CARE SERVICES ✓

✓ DIAGNOSTIC ENDOSCOPY ✓

✓ DAY CASE CHEMOTHERAPY ✓

SHREWSBURY

SPECIALISING IN EMERGENCY CARE



✓ EMERGENCY DEPARTMENT ✓

✓ CRITICAL CARE UNIT ✓

✓ CONSULTANT-LED MATERNITY CARE ✓

✓ CHILDREN'S INPATIENT SERVICES ✓

✓ EMERGENCY SURGERY ✓

✓ COMPLEX PLANNED AND CHILDREN'S SURGERY ✓

✓ EMERGENCY MEDICINE INCLUDING CARDIOLOGY,
STROKE, RESPIRATORY, AND ACUTE MEDICINE ✓

✓ CHILDREN'S ASSESSMENT UNIT ✓

✓ CONSULTANT NEONATAL SERVICES ✓

✓ RADIOTHERAPY AND INPATIENT CANCER CARE ✓

✓ HEAD AND NECK INPATIENT SERVICES ✓

A whole service approach

Hospital services and staff depend a lot on each other. Our workstreams look at:

- **Medicine and urgent and emergency care**
- **Surgery, anaesthetics and cancer**
- **Women and children's services**
- **Clinical support services (eg, pathology, pharmacy, therapies and radiology)**

Outpatient and outreach services continue at both sites and within the community.

This is one part of the wider ambition for local health and care – across both The Shropshire, Telford & Wrekin ICS and mid Wales (North Powys Wellbeing Programme).



If I need urgent care...

- NHS 111 will help make sure you get to the right place.
- If the problem is urgent but there is no threat to life and limb, 24/7 enhanced urgent care services will be available at both sites with an A&E Local model in Telford.
- You will be triaged within 15 minutes and will have direct access to a multidisciplinary team of health, care and community professionals for diagnosis and treatment in the same place, on the same day.



Urgent care services
24/7 at both sites

Telford		Shrewsbury
✓	Simple injuries from falls and sport	✓
✓	Dislocation of fingers and toes	✓
✓	Cuts and abrasions	✓
✓	Minor scalds and burns	✓
✓	Bites and stings	✓
✓	Ear, nose and throat problems	✓
✓	Coughs and colds	✓
✓	Abdominal pain	✓
✓	Vomiting and diarrhoea	✓
✓	Imaging	✓
✓	Same day diagnostics	✓



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Urgent and Emergency Care and Medicine



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In an emergency...

- In a life or limb-threatening emergency, you will be taken straight to Shrewsbury usually by ambulance “blue-light.”
- There will be faster access to medical and surgical specialties, all on the same hospital site.
- If you go to Telford as a “walk-in” but do need emergency, life or limb-saving treatment, expert staff will be able to support, stabilise and transfer you to the emergency site .



A modern emergency department in Shrewsbury for everyone

- This is the agreed, most appropriate location for everyone arriving in an emergency from across Shropshire, Telford & Wrekin and mid Wales.



Examples

- If you have a stroke, a member of your family, carer or friends will phone 999 (Act FAST) and the specialist ambulance crew will begin treatment on your way to the emergency department at the Royal Shrewsbury Hospital where you will be met by specialist emergency and stroke teams who will be able to diagnose and begin your treatment quickly. Once you are clinically well enough, you will be able to access rehabilitation services as close to home as possible – in Shrewsbury, Telford and north Powys.
- If you have chest pain and phone 999, paramedics will carry out a heart tracing to determine where you will be the best place for care. If you're having a heart attack, you will be taken to the specialist heart attack centre in Stoke or Wolverhampton. If you're not having a heart attack, the ambulance crew will bring you to the emergency department at the Royal Shrewsbury Hospital for prompt assessment by the emergency department and cardiologists. If you 'walk-in' to the Princess Royal Hospital A&E Local with chest pain, you'll have a tracing and the same triage process. If it is a heart attack, you'll be taken to Stoke/Wolverhampton. If it isn't but you need to stay in hospital for further testing, you'll be taken to Shrewsbury. If you can be treated on the same day, you'll be able to stay in Telford for same day treatment and discharge.



Why is this an improved service?

- Most people who currently attend our A&E departments need urgent care for non-life-or-limb-threatening conditions and don't need a comprehensive emergency department or hospital admission. Approximately two-thirds (65%) of patients will access same day urgent care in the same place they do now.
- The right staff will be available, with the right equipment to see, diagnose and treat your urgent and emergency needs on the same day (at both sites). Bringing specialist teams all together in the same hospital will resolve the majority of the issues that affect the current emergency care provided to all residents.
- We will be working even more closely with, NHS 111, our primary and community care colleagues.
- We can provide better, more joined up care for children in an emergency situation by being located alongside dedicated, specialist paediatric staff



Why is this an improved service?

- Specialist hospital teams often have to work together to help an individual person and currently, having separate teams across two sites can delay care for many and impacts on our ability to provide the best quality care, 24 hours a day, 7 days a week.
- Bringing emergency specialist teams all together in the same hospital will resolve the majority of the issues that affect the emergency care provided to all residents.
- Having an appropriately sized, staffed and designed Emergency Department supported by all the medical and surgical specialist teams needed will mean more rapid and effective care for those in a life or limb-threatening emergency, even if the travel time is greater.



Planned Care (Surgery, Anaesthetics and Cancer)



What do we mean by Planned Care – Surgery



Surgery covers a vast array of specialist services including:

Bariatric Surgery – provides a surgical and medical service for patients who are overweight, have medical problems and need to lose weight to improve their health. Services include Gastric bypass, Gastric sleeve and intragastric balloon. The service also runs a support group for patients who are having or have had or want weight loss surgery.

Breast Services – specialises in the treatment of all breast conditions and breast cancer and breast screening services.

Colorectal Surgery – for patients with symptoms suggestive of benign and malignant diseases of the gastrointestinal tract including colorectal cancer, inflammatory bowel disease (ulcerative colitis and Crohn's) and anorectal conditions such as haemorrhoids, anal fistula and fissures. The service also runs a bowel screening programme.

Ear Nose and Throat – specialising in common conditions including allergies, ear infections and care for ear ailments such as balance disorders, tinnitus, hearing impairment and ear injuries.

Gastroenterology / Hepatology – the service provides diagnosis, treatment to prevent stomach and intestines (gastrointestinal) and liver, gall-bladder, biliary tree and pancreatic disease (hepatology). The service provides endoscopic procedures, a test utilising a long thin tube with a camera inside to look inside the body.

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What do we mean by Planned Care – Surgery



Ophthalmology – specialising in conditions and diseases of the eye, such as glaucoma, cataracts, macular degeneration, orthoptics.

Oral and Maxillo-Facial – provides care for patients with irregularities and pathology of the jaws and mouth (soft tissue lesions of the skin in the head and neck region, and abnormal hard and soft intra-oral lesions). Surgical removal of teeth is generally the most common procedure performed.

Upper GI Surgery – is surgery performed to treat pathologies of the upper gastrointestinal tract (small bowel), gall bladder, liver, pancreas or oesophagus (food pipe), the first part of the small intestine and the stomach. The most common GI surgeries include, hernia surgery and repair, gastrointestinal cancer, gallbladder surgery, liver and bile duct surgery, pancreatic surgery.

Urology – provides diagnostic and treatment of disorders of the kidneys, ureters, bladder, prostate and male reproductive organs. The service will manage conditions such as kidney stones, bladder, kidney and testicular cancer, prostate cancer.

Vascular Surgery – provides treatment for conditions affecting arteries, veins and lymphatics throughout the body and screening for aortic aneurysms. Examples of conditions treated are: aortic aneurysms, carotid disease, leg ulcers, deep vein thrombosis, diabetic foot disease.

Trauma and orthopaedics - common procedures undertaken, the department also surgically manages cystic lesions of the jaw and intra-oral lesions.

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What do we mean by Planned Care – Anaesthetics and Cancer Services?

Anaesthetics – there are four main types of anaesthesia to support an individual to not feel pain during a procedure or operation these are known as general anaesthesia, regional anaesthesia, sedation and local anaesthesia. The team facilitate pain-free childbirth, surgery, resuscitate acutely unwell patients and run chronic pain services. Pain Management – SaTH provides an inpatient pain management service. Ongoing pain management is managed through referral by GP to the Community Service to Connect Pain Health

Critical Care – a service that provides treatment and monitoring for those who are very ill and require intensive treatment and close monitoring, or if intensive care can help an individual recover from surgery. The services are also referred to as Intensive Care Units (ICU) or Intensive Therapy Units (ITU) or High Dependency Units (HDU).

Cancer Services – also referred to as Oncology and Haematology Service, incorporating diagnosis, care and treatment of patients with cancer. Treatments include chemotherapy, radiotherapy and palliative care support.



What is planned care and where will I go?

Planned (or elective) care covers a number of services:

- Diagnostics
- Outpatient care (same day clinics and procedures)
- Surgery that isn't emergency/immediately life-saving or for trauma
- Cancer treatment

Delays to planned care can have a real impact on the quality of peoples' lives and their ability to recover or start further treatment. The way our services and resources are currently set-up means our staff struggle to provide the quality of care that our patients need.

The Princess Royal Hospital in Telford will be a dedicated planned care hospital.



A dedicated site for planned care with:

- ✓ Shorter waiting times
- ✓ Fewer cancellations
- ✓ Better experience
- ✓ Better recovery

How will we change under HTP?

Planned Care Site

- Dedicated planned in-patient surgical and orthopaedic activity that does not require Critical Care support
- Adult day case surgery to take place in elective hub, four new theatres and recovery area (operational from 2024/25)
- Orthopaedic trauma rehabilitation / therapy led ward
- Development of a Medical and Surgical procedure suite
- Chemotherapy day centre development

Emergency Care Site

- Surgical emergency services will now be aligned to all other specialties, including Women and Children's
- Amalgamated Critical Care Unit, new 32 bedded unit
- Head and Neck in-patient ward relocated from PRH
- New Oncology and Haematology in patient ward, with increased single room provision
- Paediatric emergency and planned care surgery



Why is this an improved service?

By having a dedicated planned care hospital, we will:

- **Dedicate beds and wards for surgery and same day treatments** – reducing the risk of “no bed available”
- Ensure operations and procedures take place **all year round** utilising dedicated theatres and wards
- **Reduce the number of cancelled operations** due to pressures in emergency care
- Have **shorter waiting times** that mean people can have faster access to treatment, improving their recovery
- Have the **right staff, right equipment and right facilities** always available and prioritised for planned care
- Have **joined-up care** – our specialist surgeons, and their teams, are on the same site (eg, kidney, bowel) and can work together to provide high quality care
- Have **safer care** – less risk of infection and viruses for cancer and other patients as people will be tested before they arrive and emergency care will be separate
- Have **dedicated teams** that can look after your needs before, during and after your operation
- **Give a better experience for patients**



Improved Clinical Safety and Facilities



Improved clinical safety

- Enabling a greater amount of timely consultant delivered decision making and care
- Improved access to key multi-disciplinary teams which will lead to improved patient experience and outcomes
- Separation of emergency and planned care patient flows protecting planned operations from cancellation
- Increased availability of cancer care locally with Chemotherapy day centre development at PRH

Improved Infrastructure

- Modern, fit-for-purpose facilities will improve clinical adjacencies and flows through the hospital and offer greater capacity and space within departments in comparison to present facilities
- Contribute to an enhanced patient experience
- Providing more single rooms to improve dignity and infection control especially for immuno-compromised patients

Clinical Support Services



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Who are Clinical Support Services?

The Clinical Support Services Division employs around 855 staff in total across the following services:

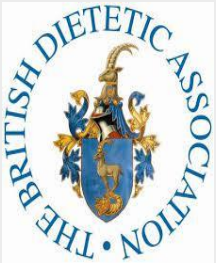
Pathology – Consultant Pathologists, Biomedical Scientists, Laboratory Assistants, Phlebotomists, Nurses

Pharmacy – Pharmacists, Pharmacy Technicians, Assistants,

Radiology – Consultant Radiologists, Radiographers, Sonographers, Nurses, Assistants, Porters

Therapies – Dietitians, Occupational Therapists, Physiotherapists, Speech & Language Therapists, Assistants

Admin staff work across all of our departments e.g. in reception areas and we support many students each year.



How will we support the emergency and planned care sites?

As you can see our staff work in every area of our hospitals now and they will continue to do so in future.

For the emergency care site there is a great opportunity for us to develop new roles in all of the services that will support our patients when they are in the most need of acute care and support their transfer to the planned care site, home or another appropriate location for their continued care.

For the planned care site there is a great opportunity for us to focus on making sure these services run smoothly through developing new ways of working and by working closely with our surgical colleagues in the support of pre-operative and post-operative services all the way through to timely discharge. We will also play an important role in the rehabilitation of patients, including those transferred from the emergency care site.

So for us it is all about making sure our staff and facilities are in the right place to support the changes in services at both sites.



What the HTP proposals mean for us:

For Clinical Support Services the HTP proposals bring many opportunities, such as:

- Making sure we have the right staff in place to support the specialties that will be delivered in the 2 new redesigned hospitals providing a greater opportunity for our staff to specialisation and rotate into different areas
- Creating safe staffing levels aligned to national clinical standards and regulations e.g. redesigned critical care, stroke, trauma and neonatal care
- Balancing the demand upon our services with the capacity to adequately support the re-designed services e.g. thinking about which services will require 7 day support
- Developing new roles in support of the new / revised pathways e.g. Advanced Practice roles in support of the A&E Local service at PRH such as Prescribing Pharmacists, Reporting Radiographers and First Contact Practitioner Therapists and Dietitians. There are many more examples...
- New ways of working e.g. development of Community Diagnostic Hubs, increase in Point of Care Testing, expansion of virtual ward services, pharmacy automation, new discharge pathways supporting Home First etc.
- Redesigning / relocating our physical environments e.g. pathology and mortuaries, radiology, pharmacy, therapy outpatients etc.

Women's and Children's



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What do we mean by Women and Children's Services?

Consultant led maternity care services - take place within antenatal, postnatal and delivery suite departments. This service is generally for women who have an existing medical problem or may need additional monitoring during labour, or if the labour is being induced. Highly trained experienced midwives and doctors will support the woman throughout.

Midwife led maternity services - means that the midwife is the lead health-care professional, responsible for the planning, organisation and delivery of care given to a woman from the initial booking of antenatal visits through to care during the postnatal period.

Neonatology – is a subspecialty of paediatrics that consists of the medical care of newborn infants, especially the ill or premature newborn. It is a hospital-based specialty, and is usually practised in neonatal intensive care units

Gynaecology – treats women's diseases, especially those of the reproductive organs.

Children's / Paediatric services – Inpatient, day case surgery, Adolescent Unit and Oncology services

Outpatient – e.g. Obstetric, Early Pregnancy Assessment Service, Fertility services, Paediatrics and Gynaecology

What about services for women and children?



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- It's essential that consultant-led inpatient women and children's services are located with immediate access to our medical and surgical specialists and our critical care services.
- Antenatal and post natal services will continue at both sites.
- Both sites will provide general and specialist paediatric outpatients, diagnostics, specialist nursing and 24-hour urgent care meaning most children will continue to receive the majority of their outpatient and urgent care at the hospital site closest to home.
- Specialist emergency services for children such as trauma, high-dependency and critical care, along with specialist paediatricians, will be based 24/7 at the Shrewsbury emergency site, ensuring children needing to be admitted to hospital for emergency care or an operation will have immediate access to the specialists that they may require.

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Maternity Services

ONE HOSPITAL, TWO SITES



EXCELLENT CARE,
IN THE RIGHT PLACE,
AT THE RIGHT TIME,
FROM THE RIGHT PEOPLE



Children's Services

ONE HOSPITAL, TWO SITES



TELFORD

BOTH SITES WILL PROVIDE

- ✓ GENERAL AND SPECIALIST PAEDIATRIC OUT PATIENTS ✓
- ✓ SUPPORT FROM SPECIALIST NURSING AND MULTI-DISCIPLINARY TEAMS ✓
- ✓ ACCESS TO XRAY, SCANNING AND OTHER DIAGNOSTIC TESTS ✓
- ✓ 24HR URGENT CARE CENTRE FOR URGENT ASSESSMENT AND CARE FOR THE MAJORITY OF CHILDREN ✓



SHREWSBURY

SHREWSBURY WILL ALSO PROVIDE

- ✓ INPATIENT CHILDREN AND ADOLESCENT BEDS ✓
- ✓ INPATIENT NEONATOLOGY ✓
- ✓ CHILDREN'S SURGERY ✓
- ✓ TRAUMA, HIGH-DEPENDENCY AND CRITICAL CARE SUPPORT FOR CHILDREN ✓



EXCELLENT CARE,
IN THE RIGHT PLACE,
AT THE RIGHT TIME,
FROM THE RIGHT PEOPLE



HIGHER QUALITY,
SAFER CARE



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Gynaecology Services

Gynaecology will be available on both sites following HTP, these services being generally separated by site depending on the patients presentation; patients on a planned care pathway predominantly treated at the PRH Site, emergency gynaecology care delivered at the RSH Site with outpatient services available at both sites.

Planned Care Site

- Planned Day Case and Inpatient Gynaecology Surgery (better protected from emergency bed demand cancellations)
- Planned Procedures Unit
- Early Pregnancy Assessment Service
- Outpatients

Emergency Care Site

- Gynaecology Assessment and Treatment Unit for Emergencies
- Gynaecology Inpatient ward area
- Planned Inpatient surgery that requires post-operative Critical Care availability
- Early Pregnancy Assessment Service
- Outpatients

Improved Clinical Safety and Facilities

Improved clinical safety

- Essential links with the emergency department, critical care, surgical and medical specialities will be enhanced
- Enabling a greater amount of timely consultant delivered decision making and care
- Improved access to key multi-disciplinary teams which will lead to improved patient experience and outcomes
- We can provide, better more joined up care for children in an emergency situation by being located alongside dedicated, specialist paediatric staff

Improved Infrastructure

- Modern, fit-for-purpose facilities will improve clinical adjacencies and flows through the hospital and offer greater capacity and space within departments in comparison to present facilities
- Contribute to an enhanced patient experience
- Providing more single rooms to improve dignity and infection control

Examples

- If a family (parents/carers and children) is in an accident or situation where they all require emergency care or resuscitation, after a 999 call, the ambulance will take them all directly to the Royal Shrewsbury Hospital site. Currently, adult care and care for children in this situation can occur at different sites and mean families are separated.
- If you are deemed 'high-risk' during pregnancy and require consultant-led maternity services, you will receive this care at the Royal Shrewsbury Hospital site where you will have immediate access to all relevant, emergency, surgical and medical specialties pre, during and after delivery should you need them, without needing to be transferred. Outpatient appointments will continue at each site, with midwife-led care available at each.
- If you are listed for gynaecology surgery your planned procedure could be delayed due to operational pressures from the emergency demand. Separation of emergency and planned gynaecology flows will protect planned activity from disruption and cancellations.



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Continued developments at the Princess Royal Hospital



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Planned Care Hub at PRH



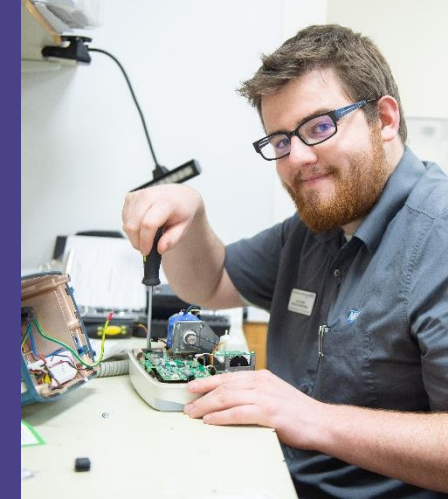
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The Planned Care Hub will include:

- 4 additional theatres (2 with laminar flow for specific cases)
- 8 Recovery bays
- 16 Day Case trolleys

Existing Day Case unit will continue to be used as at present (often for medical escalation and day surgery provided through temporary unit in car park)



Artist's impression of PRH front entrance

- Transforming front door
- Improved reception
- Better access
- Better wayfinding
- Increased retail space



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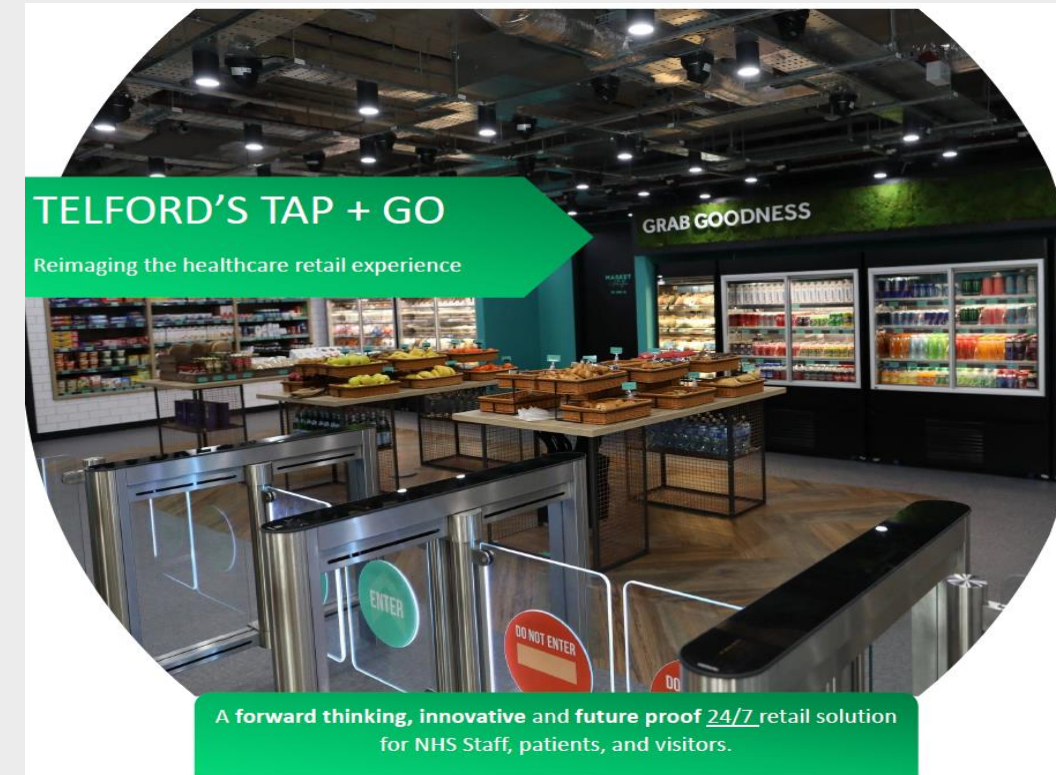


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Retail offer

- Staffed coffee shop during set hours
- One of first hospitals in NHS to offer “frictionless” retail services (core range of products to be agreed)
- Uses app or credit/debit card plus pre-paid cards available
- Core range of products to be agreed



Looking at travel and transport

- We recognise Travel and Transport is a key issue for patients, visitors and staff.
- We will build on the work of the Travel and Transport Group that was set up in 2018: [Travel and Transport - NHS Future Fit](#)
- A Travel and Transport review has been commissioned to inform:
- Car parking
- Ambulance conveyances
- Patient, visitor and staff transport requirements

Once the outputs of the review are available and we move to progress our plans and move towards implementation we will work with our communities, via:

- Dedicated Focus Group
- Public Assurance Forum and;
- Anyone identified as being potentially adversely affected through the EHIA's to identify any mitigating actions and developing potential alternative transport offers and options.

How can you get involved?



Get involved

- There will be a range of ways to get involved over the next few years.
- You can help us develop these plans in the best way for the future of local healthcare services.
- The About Health meeting in January was recorded and is available with the Q&A's: <https://www.sath.nhs.uk/news/http-about-health-event/>
- Future sessions are being arranged on a quarterly basis and we will publish these in our monthly newsletter update. The next About Health event is on the evening of Tuesday 9 May
- Workstream focus groups have been planned over the next two years which will inform the plans as they develop towards implementation. We are also planning focus groups to help shape the retail offer in the new front entrance at PRH and to look at transport issues. If you are interested in joining any of the groups please email sath.engagement@nhs.net
- We want to ensure that anyone who is interested can get involved in some way.
- If you sign up to become a community member sath.engagement@nhs.net we will keep you updated on how you can get involved and updated on the programme through our monthly newsletter update.



Focus groups

Focus groups are taking place in May and June directly linked to each of our workstreams

**Urgent and Emergency
Care and Medicine**
25 May
11:30 – 13:30

**Planned care: Surgery,
Anaesthetics and
Cancer**
6 June
10:00 – 12:00

Women and Children
5 June
10:00 - 12:00

**Clinical Support
Services**
21 September
11:00 – 13:00

We have invited a range of community groups of people with or representing people with recent, lived experience that can help to inform our plans as well as asking people to sign up to their specific interest group.

There will be further focus groups and discussions over the three years, including on the new retail space at PRH and transport.



Questions?

