

AGENDA

Public Assurance Forum

Date Monday 3rd July 2023

Time 2pm-5pm

Location Microsoft Teams

OPENING MATTERS AND PROCEDURAL ITEMS

Item No.	Agenda Item	Paper No / Verbal	Lead	Required Action	Time
2023/26	Welcome and apologies	Verbal	Co-Chairs	For noting	14:00
2023/27	Minutes of previous meeting	Paper 1	Co-Chairs	For noting	14:05
2023/28	Matters Arising/Actions	Paper 2	Co-Chairs	For approval	14:10
2023/29	Review of Terms of Reference with expanded membership and publication details	Paper 3	Co-Chairs	For approval	14:15
2023/30	Update on HTP	Presentation	HTP team	For approval	14:25
2023/31	SaTH Transformation Team Update	Presentation	Matt Mellors - Head of PMO	To discuss – Getting to Good programme	14.45
2023/32	SATH Strategy & Partnership update	Paper 4	Director of Strategy & Partnership	To discuss	15.05
2023/33	Update on Service Developments: • Renal Dialysis	Verbal	Public Participation team	To discuss	15.20
2023/34	RSH Gamma Camera	Presentation	Helen Williams	To discuss	15.30
2023/35	Partner's updates	Verbal	Forum Members	To discuss any SaTH involvement opportunities	15.40

				described in s2 and s3	
2023/36	<p>SATH Divisional updates on key issues:</p> <ul style="list-style-type: none"> • Women & Children • Medicine & Emergency • Clinical Support • Surgery, Anesthetics & Cancer (SAC) • Patient Experience 	<p>Paper 5 Paper 6</p> <p>Paper 7 Paper 8</p> <p>Paper 9</p>	Divisional Directors	To discuss - any partner involvement opportunities described in s2 and s3	16.00
2023/37	Communications Strategy	Presentation	Chief Comms Officer		16.20
2023/38	<p>Supplementary Information Pack</p> <ul style="list-style-type: none"> i. Public Participation Plan: 2023/24 Action Plan Update ii. Draft Public Participation Quarterly Board Report 	Papers i-ii	<ul style="list-style-type: none"> i. Public Participation team ii. Public Participation team 	For information – to address any comments /queries	16.30
2023/39	Any Other Business	Verbal	Chair		16.35
2023/40	Dates for the Forum for 2023 and close of meeting	Paper 10	Chair	To note	16.40

Public Participation Forum

Held on Monday 3rd April 2023
14:00 – 17:00hrs via MS Teams

MINUTES

Present:

David Brown	Non-Executive Director SATH (Chair)
Julia Clarke	Director of Public Participation SATH (Deputy)
Hannah Morris	SATH Head of Public Participation
Annemarie Lawrence	Director of Midwifery
Dianne Lloyd	Acting Deputy Divisional Director of Operations – Clinical Support Services
Emily Hinkinson	Centre Manager MSK
Graham Shepherd	Shropshire Patient Group Representative
Jane Randall-Smith	Powys Community Health Council representative
Jennifer Fullard	Chief Communications Officer
James Owen	Deputy Director of Education & Improvement
Cllr Joy Jones	County Councillor of Newtown East Ward
Kate Ballinger	Community Engagement Facilitator
Kate Manning	Head of Communications & Engagement
Linda Cox	VCSA Deputy
Rachel Cox	Communication & Involvement Officer at Healthwatch Shropshire
Ruth Horner	Interim Centre Manager- Cardiology, Stroke, Care of the Elderly, General Medicine
Ruth Smith	Head of Patient Experience
Sophie Stevens-Jones	Communications and Engagement Associate
Laura Graham	Divisional Director of Operations
Lynn Pickavance	Telford Patients First Group

In attendance:

Rachel Fitzhenry	Senior Administrator (Minute taker)
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Item No.	Agenda Item
2023/12	Welcome and Introduction
	David Brown opened the meeting by welcoming the group to the MS Team meeting.
2023/13	Minutes of previous meeting (9th January 2023)
	The Minutes of the previous meeting on 9 th January 2023 were approved as an accurate reading.

2023/14	Matters Arising/Actions
	Separate sheet attached.
2023/15	Annual review of Terms of Reference
	<p>Julia Clarke gave a brief update on the Terms of Reference:</p> <ul style="list-style-type: none"> • There has been a request from a number of community sources that we publish the Public Assurance Forum agenda and papers on the Public Participation website, Forum members all agreed. It was noted that the Trust's Senior Leadership Committee (SLC) would need to approve this • Take the names out of the core members and replace with just the job role, so when people change roles the Terms of Reference does not need to be fully reviewed again but keep a separate sheet with names and contact details, which can be published on the website. • The Public Assurance Forum agenda and papers will be circulated to member deputies, in case there is an unexpected availability. • A Supplementary Pack has been included in the information only, which is useful but not essential. If members are happy with this approach, it will be included within the Terms of Reference. <p>Group members agreed for all above to be updated and circulated to the group to check for any discrepancies before it is uploaded onto the Public Participation website if it is approved by SLC.</p> <p>ACTION: Julia Clarke / Rachel Fitzhenry to update and circulate Terms of Reference to Forum Members for virtual comment and bring back to the July meeting for final sign off.</p>
2023/16	Joint Chair of PAF
	<p>David Brown asked Forum Members if they were happy for Cllr Joy Jones, who put her name forward to join him as Co-Chair, the Group members agreed.</p> <p>ACTION: David Brown to contact Cllr Joy Jones outside of meeting to discuss taking forward the role of Co-Chair.</p>
2023/17	Update on HTP
	<p>Jennifer Fullard gave an update on HTP Comms & Engagement and Next Steps:</p> <p><u>Latest and next steps:</u></p> <ul style="list-style-type: none"> • Introduction to Matthew Neal, Director of the Hospitals Transformation Programme. • Where are we and next steps. • Communications and Involvement: HTP update. • Wider (SaTH) Communications and Engagement Strategy development. <p><u>August 2022:</u> Strategic Outline Case approved by the Department for Health and Social Care.</p> <p><u>2022/2023:</u> We created our Outline Business Case - greater detail including clinical model and architect designs:</p> <ul style="list-style-type: none"> • Detailed pathway design. • Detailed architectural designs. • Procurement and commercial approaches described.

- Planning permission sought.

Summer 2023:

- Treasury approval Procurement routes established.
- Contracts can be signed.
- Transition into delivery.

Autumn 2023:

Implementing HTP and our agreed clinical model

A phased approach:

There are a number of critical phases that will be supported from a communications and involvement perspective:

- **Phase one: Listening and awareness** – December 2022 to March 2023 we will develop specific focus groups with service users and interested groups to help inform the development of the Outline Business Case.
- **Phase two: Development of the Outline Business Case** – Current – June 2023. The development of the detailed Outline Business Case will be informed by engagement activity with key stakeholders ahead of the draft of the Outline Business Case being reviewed by April 2023.
- **Phase three: Development of the Full Business Case** – Summer - Autumn 2023.
- **Phase four: Implementation phase** – Autumn 2023 - 2025. Informing and involving people as detailed plans are developed and put in place to reconfigure services, including building works and service movements.
- **Phase five: Launch of new service configuration** – 2025. Formally communicating the changes and how patients will access services. Supporting ongoing communications to understand the difference the new services are making.

How to get involved in shaping our strategy:

We are inviting patients, colleagues, and partners to share their thoughts on how we communicate as a Trust. The Trust has an ambitious long-term strategy for transformation and improvement and good communications are essential in the delivery of our priorities.

We are keen to understand what is working well, what can be improved and what are your priorities.

Share your views on how we:

- Communicate publicly through our existing channels, for example the media, social media, newsletters.
- Keep our staff informed and involved through internal communications.
- Communicate everyday with each other.
- Use new technologies to stay current.
- Ensure our communications are accessible for different audiences.

ACTION: Graham Shepherd requested details of when the HTP Radio interviews will be broadcast as people who ring in and ask questions may not be actively involved. Jenny agreed to supply.

Julia Clarke asked Jenny for early sight of any press releases to be issued so that they can be issued to Forum members first.

Ruth Horner gave a brief update on Echo-cardiology:Background:

- In November 2022 the Cardiorespiratory service wait time for echocardiography was at 11 weeks with only 54% of patients being seen within the 6-week National Access Target for diagnostics.
- As a result of this, the service made the decision, supported by the Trust, its system partners and through public consultation to temporarily relocate the echocardiography service at the Royal Shrewsbury Hospital site to the Princess Royal Hospital at Telford.
- This temporary move would facilitate an increase in the capacity for echocardiography, through flexible use of staff and accommodation.

Current position:

- The temporary relocation commenced on 16th January 2023 and has now (17/3/23) been in place for 9 weeks.
- The current echocardiography performance against the National Access Targets for diagnostics is 82%.
- This represents a 28% improvement in performance.
- The service is on target to be back within the 95% National Access Target for diagnostics before the end of April.
- The service continues to monitor its performance weekly to provide local and national assurance that the 6-week National Access Target will be met.

Sarah Byrne gave a brief update on Mobile Breast Screening:The Challenge:

- There was a backlog of clients who were waiting to be invited for their NHS breast screening, this is due to delays during the first wave of the pandemic.
- 17,725 women were overdue with their invitation for breast screening:
 - Market Drayton – 2669
 - Bridgnorth – 4235
 - Shrewsbury – 10,821
- There was no backlog in Telford due to the hospital based mobile unit being on site for the duration of the pandemic.

Solution:

- We made a temporary change for the service to Market Drayton & Bridgnorth in 2022.
- To clear the backlog of 17,725 women who required their breast screening appointment, the service was centralised to the main hospital sites (RSH and PRH).
- Temporarily centralising the service ensured that women were offered a screening appointment sooner rather than waiting for the mobile unit to arrive at their location. Thus, preventing delays in diagnosis.
- To help clear the back log of appointments (in Shrewsbury, Market Drayton and Bridgnorth) the Trust is insourced additional staff to support the services at RSH and PRH. The contract only provided the services to be delivered at the main hospital sites.
- The breast screening service also expanded from a 5-day service to a 7-day service.
- Extended days with no radiographer travel time meant we could screen more women per day.
- Women phoned in for their appointments at their convenience.

	<ul style="list-style-type: none"> • We organised community transport via Community Wheels. Women came with friends and some women treated it as a day for an outing with friends. All outstanding women had been invited by 2022. • The mobile is back out in the community having resumed its normal round plan. • We are back on track and the mobile will return to Market Drayton and Bridgnorth in 2025. <p><u>Current Position:</u></p> <ul style="list-style-type: none"> • Women were able to attend for their screening in a timely manner. • Recovery is well under way as per NHSBSP requirements for 3 months above 90%. <p><u>Jan 2023</u></p> <ul style="list-style-type: none"> • Uptake – 70.2% • Round length – 86.5% • Screen to RR – 40% <p><u>Feb 2023</u></p> <ul style="list-style-type: none"> • Round length 93.6% • Screen to RR 97% <p>The number of patients waiting for breast screening due to the COVID-19 pandemic has been reduced by more than 17,000 to zero – in just six months.</p> <p>Julia Clarke congratulated Sarah Byrne and the team on all their hard work and how it has been a huge success story.</p> <p>ACTION: Jennifer Fullard to discuss contacting the Shropshire Star to cover the mobile breast screening success story.</p> <p>Julia Clarke gave a brief update on Renal Dialysis:</p> <ul style="list-style-type: none"> • The Renal Unit in Hollinswood House construction is progressing. • The 1st and 2nd floor partitions and the mechanical and electrical elements are now complete. • The patient trolley lift is under construction. • The external Energy Centre foundations are now complete with walls under construction. • The window replacement survey has been completed. • Completion is scheduled for the end of July 23. Still awaiting lease agreement between developers and National Grid.
2023/19	Partners Updates
	<p>i) Healthwatch Telford & Wrekin</p> <p><u>Key updates:</u></p> <p>As members of the Forum will be aware in the recent period there has been a Tender for Healthwatch Services in Telford & Wrekin. The contract for HWT&W has been awarded to Engaging Communities Solutions based in Walsall who run a number of local HW in the West and East Midlands. This will be effective from 1st April 2023.</p> <p>We have been busy with our Exit Plans, but normal engagement and Enter & View Activity have continued. Jan Suckling (our Lead) will join the Enhanced Community Support Team and lead the HWT&W team in the future and the</p>

current work plan will continue. There will be a local Advisory Board for HWT&W that David Bell hope to join and continue with the Forum and other SATH activities.

HWT&W continue to be concerned about local GP services, Ambulance waits, A&E provision and the backlog in hospital services and any discharge delays given the issues facing care services. They will continue to monitor the Hospitals Transformation Services.

HWT&W Chair will be presenting their final report to the Health & Wellbeing Board shortly.

Items for discussion:

- A&E Provision
- Ambulance Services
- Backlogs
- Discharge
- Social Care provision

ii) Healthwatch Shropshire

Rachel Cox gave a brief update on Healthwatch Shropshire:

Complaints Survey

Healthwatch Shropshire are grateful for the input from complaints managers from Shropshire Council, Midland Partnership NHS Foundation Trust, Shrewsbury and Telford Hospital NHS Trust, Shropshire Community Health NHS Trust and West Midlands Ambulance Service NHS Foundation Trust to the questions used in their survey. The survey was launched on 28th February and has had a good response so far. Healthwatch Shropshire would be grateful if all partners could promote this survey through their networks. It is hoped that this will be a good opportunity to get independent feedback on the handling of complaints from a patient or service user perspective. The survey will remain open until the end of March.

'Because we all care' engagement with older people

Healthwatch Shropshire are encourage older people to share their experience with them about health and social care during the winter so they can help services identify and address issues and improve support for their community. Also, to increase feedback about crucial areas of winter care.

Healthwatch Shropshire have attended the Home Instead Coffee Morning, Knit and Natter at Wem Library, Greenacres group for the elderly and we are visiting the Memory Café in Ludlow and Much Wenlock Dementia Support Group and Knit and Natter in Ludlow. On social media Healthwatch Shropshire are asking for a general call for experiences so no survey but directing people to the 'Share Your Views' section on our website.

Market Halls

Healthwatch Shropshire have been visiting markets across Shropshire, talking to people about their views and asking them if they are concerned about a particular service to put a button in the cup for that service. By talking to people in their leisure time they have been able to have some lengthier conversations and gather some in-depth feedback about people's experiences this winter.

'Because we all care' – GP referrals

Healthwatch Shropshire had an excellent response to the online survey they ran at the end of last year asking about people's experiences of seeking a referral into secondary / specialised care. We heard from 369 people. The report being drafted

	<p>will examine the experiences of 279 people who were either referred or expected a referral.</p> <p>ACTION: Julia Clarke asked Rachel Cox to send the link on the Complaints Survey to Hannah Morris/Kate Ballinger who would be happy to share in the Public Participation monthly update to 3500 community members to be included in the section, 'Partners News and Updates'.</p> <p>iii) Shropshire Patient Group</p> <p>Graham Shepherd gave a brief update on the Shropshire Patient Group:</p> <p>Following the discussions at the last PAF, Julia Clarke and Hannah Morris met with Graham and Julian Birch (Chair of Shropshire Patient Group) to discuss the role of PAF and the involvement of the public in improvement work at SaTH. An action following this meeting was that Julia would discuss public involvement with improvement work with Rhia Boyode (Director of Workforce) and James Owen the Head of Service Improvement was presenting to Forum members later on the agenda.</p> <p>This meeting was detailed and informative with all present agreeing a clear path going forward. The suggestions re changes to the Terms of Reference for the Forum are detailed in the minute 2023/15</p>
2023/20	SATH Divisional updates on Key issues:
	<p>The divisions gave a brief update on their key issues.</p> <p>i) Women & Children's</p> <p>Anmarie Lawrence gave the key updates from the Division:</p> <p><u>Gynaecology</u></p> <ul style="list-style-type: none"> • We continue to receive a high number of referrals for gynaecology outpatient appointments. Work is being undertaken with primary care to review referral pathways in an effort to address the increase in activity we have seen. • Compliance with the 2 week wait cancer standard has improved, a further review of the pathway is scheduled to look for other opportunities to improve waiting times. <p><u>Paediatrics</u></p> <ul style="list-style-type: none"> • A successful recruitment campaign has been undertaken to address nursing workforce shortages by introducing rotational posts across SaTH, Shropcom, Robert Jones & Agnus Hunt and Hope House, further work is underway to implement adult nurse conversion courses with local universities. <p><u>Neonates</u></p> <ul style="list-style-type: none"> • New staffing guidance has been published for neonatal units. A gap analysis has been undertaken against this guidance and a business case to address the gaps identified has been produced. This will need to be taken through the system planning process. • New recliner chairs have been purchased for all cots in the unit to enable parents to stay close to their babies for as long as they want to (in comfort!). <p><u>Maternity</u></p> <ul style="list-style-type: none"> • Delivery against the Ockenden action plan is ahead of plan.

- Midwifery staff vacancies have been addressed; our new staff members have now completed their preceptorship.
- We've received very positive feedback from Health Education England about the experience and support our student midwives receive.
- International recruitment for midwifery staff is underway, this will help add some resilience to our workforce plan and help us to create a more representative and diverse workforce.

Update on any current or future service developments or changes:

- Planning for 2023/24 is underway based on national priorities for all services.
- Work has commenced with a project group to look at the hysteroscopy pathway with a focus on patient experience incorporating pain management.

How the Division is going to involve patients/public in the next quarter:

Continued partnership and engagement work alongside our Maternity Voices Partnership colleagues for our maternity and neonatal services. Areas of focus include:

- Development of the competency framework for midwives – Maternity Voices Partnership supporting with this by focusing upon community engagement to capture service user experience, to produce video case studies for the training package.
- Community – peri-natal mental health provision, receiving a number of DNA's – the Maternity Voices Partnership are helping with marketing the service, supporting referral process (clarify the service provision for our women)
- Neonatal service – Reqs, working with the team, refurbishing the parent flats.
- A review of the 360 tour for neonatal service, volunteers are reviewing this to make sure all information needed is included.
- Continued implementation of 15 steps for maternity. Our post-natal area visit has just been completed, action plan in place for delivery – feedback directly to Maternity Voices Partnership.
- Research – Harvard University Project 'Team Birth' – focus on communication (huddles/ boards/ training to improve communication – grant stage) Focus group with volunteers to look at feasibility of study and appropriateness.
- Maternity Voices Partnership volunteers have re-reviewed the birth preference card and provided feedback – a revised version is with the printers.
- Maternity Voices Partnership presentation for Band 7 away day about service user engagement
- Preceptorship midwifery briefing has been filmed by Maternity Voices Partnership.
- A volunteer is providing support with induction of labour videos.
- Maternity Voices Partnership support to anaesthetics team re process and information for C- Sections commenced.
- Social media led project – patient admission information (top tips)
- Support for pelvic health project continued with Maternity Voices Partnership / volunteers – referral form has just gone live.
- Maternity Voices Partnership volunteers have supported with antenatal education information by reviewing content on pilot information prior to 'go live'.

- Maternity Voices Partnership link for (EPAS) Early Pregnancy Assessment Service – feedback re clinical appearance of unit, murals purchased following feedback, awaiting fitting date.
- Gynaecology

PACE group in place – looking to increase the participation numbers and increasing diverse representation via primary care (communication and bookings first priority, will seek engagement hysteroscopy pathway work

ACTION: Kate Ballinger to link Annmarie Lawrence with Women and Children groups who represent our Seldom Heard groups within our communities to look at getting them involved with maternity and paediatric services e.g. the refurbishing the parent’s rooms within the hospital and the offer of women coming in to talk about their religious needs whilst in hospital.

Annmarie Lawrence added, this will be helpful due to the ten international midwives starting in September this year, which will bring in much needed diversity.

Julia Clarke informed Annmarie Lawrence that the Public Participation team do have extensive links into the community as well as our 3600 individual members and contacts with 300 organisations and the Public Participation team would be very happy to act as messengers to reach out to different parts of the community. The team would be very happy to do that and to facilitate any focus groups.

Annmarie Lawrence left the meeting.

ii) Medicine & Emergency

Laura Graham gave the key updates from the Division:

The new Acute Floor at RSH has been up & running since the end of December 2022. This floor provides a dedicated assessment and treatment area for medical patients referred by their GP. As of 14th March 2023, patients had been treated within this area. Prior to opening of the Acute Floor this group of patients would have had to be seen in our Emergency Department. Despite this our Emergency Departments remain under considerable pressure.

The Division has rolled out a ward process improvement programme across all medical wards. This is focused on bringing our discharges forward to earlier in the day and in doing so improving patient experience.

Update on any current or future service developments or changes:

Work continues to prepare for the relocation of the PRH renal dialysis unit to Hollinswood House in the autumn of next year.

How the Division is going to involve patients/public in the next quarter:

Patients/public will continue to be involved in the ongoing renal dialysis unit relocation and our PACE panels across the Division.

Laura Graham left the meeting.

iii) Clinical Support Services

Dianne Lloyd gave the key updates from the Division:

Workforce:

The previously reported challenges due to vacancies, sickness, and COVID sickness continue to be evident in all Centres within Clinical Support Services. Significant work continues across the Division with growing success including international recruitment, apprenticeships, “golden tickets” for final year students, recruitment events and introducing new roles and ways of working such as Pharmacy Technicians and Reporting Radiographers.

In this way we have been successful in recruiting into some notably hard to fill vacancies such as radiographers, sonographers and physiotherapists, however we continue to have less success in the nationally recognised shortage professions of Pharmacists, Speech & Language Therapists and Occupational Therapists.

Our newly qualified band 5 posts will not come into place until July / August therefore our service provision remains challenged during this time.

Pharmacy Integrated Workforce Project:

A system wide (ICS) Integrated Care Systems Pharmacy Workforce Plan has been submitted to the ICS Investment Panel to establish a Pharmacy Faculty / Workforce Development Team and if successful may support the longer-term recruitment and retention of pharmacy staff.

This is required because nationally and locally the Pharmacy workforce has been adversely affected by the development of Primary Care Networks (PCN’s) across the system resulting in a significant increase in vacancies within SaTH now and predicted for the future as the PCN’s have an ambition to recruit up to 55 Pharmacists by 2024. Nationally, some Trusts are reporting vacancy rates in excess of 50% (SaTH vacancy rate currently 20%).

2022 Staff Survey – headlines:

- 2022 response rate for the Division was our highest yet at 57%.
- Despite our workforce challenges, all 9 People Promises/themes have improved year on year in CSS, with 5 being higher than the Trust’s average.
- All 30 sub scores have also improved year on year, with 27 of these being higher than the Trust’s average.

DM01 (Diagnostic Management Standard 01) position:

We are now making significant and steady progress with reducing our backlogs and waiting times as can be seen in the chart below:

Metric	Latest Month	Actual	Target	Performance	Assurance	Mean	Lower Process Limit	Upper Process Limit
DM01 Performance - Imaging	Feb-23	79%	99%			68%	55%	81%
DM01 Performance - MRI	Feb-23	93%	99%			67%	51%	83%
DM01 Performance - CT	Feb-23	96%	99%			77%	61%	93%
DM01 Performance - Ultrasound	Feb-23	64%	99%			66%	54%	79%

We are achieving this through a wide variety of ways including the use of mobile CT and MRI scanners, waiting list initiatives, insourcing and outsourcing for

additional capacity in reporting, new ways of working such as Reporting Radiographers, home reporting equipment and improved staffing levels.

Based on the above, we predict we will achieve the DM01 standard of 99% by October 2023 for CT and MRI and by November for Ultrasound.

Breast Screening:

- **The temporary move of Breast screening services for Market Drayton and Bridgnorth** enabled us to temporarily centralise the service at RSH and PRH and due to this we were able to extend appointment times into evenings and weekends.

As a result, the Covid-19 backlog waiting list of 17,141 patients has been cleared in the last 6 months. The mobile breast screening units have now returned to their 3 yearly cycle of moving around the county.

Round length (the percentage of eligible women whose first offered appointment is within 36 months of their previous screen against a target of 90%) continues to improve from a position of 0.8% in January 2022 to 93% in December 2022 (latest reported figure).

- **New Mobile Breast Screening Unit** - The Department of Health and Social Care has awarded SaTH £384,000 to purchase a mobile breast screening unit and screening X-ray equipment which will replace our oldest mobile unit (12 years old) and boost capacity as the old unit is a single unit and then new van will have twin screening units. This money is in response to addressing areas where uptake is low and should address key issues around health inequalities and boost activity (Breast Screening uptake target is 70%: SaTH's November's uptake was 54.6%).
- **NetCall text reminders for appointments** will be introduced in the new financial year.

National shortages of Medicines and Blood Supply Shortage continue and is remaining difficult to sustain with over 800 medicines on the list including critical care medicines, immunoglobulins, opiates, fertility medicines, bowel preparations, Entonox, monoclonal used to treat Covid, liquid antibiotics for Strep A in children, Molybdenum used in Nuclear Medicine. and several hundred medicines at any time are now subject to ongoing shortages along with portable oxygen cylinders. Our Pharmacy Procurement Team work tirelessly to ensure continued supply / appropriate substitute medicines.

The national shortage of red blood cells and platelets is being co-ordinated regionally. The Midlands Regional Blood Transfusion Committee has written to all hospitals in the region to thank them for their support which has helped stabilise the national blood stocks to a safer level.

Update on any current or future service developments or changes:

A new Therapy Service for Neonates:

We have been successful in a bid via the West Midlands Neonatal Operational Delivery Network in securing Ockenden funding for the permanent appointment of therapy staff across all 4 professions to work in the Neonatal Unit at PRH and recruitment is currently underway. We are aiming to also improve our Acute Paediatric Therapy Service.

RJAH on-call Blood Sciences service remains temporarily withdrawn (wef 05.09.22) as previously notified, due to lack of staff to maintain an on-site service at RJAH and all tests continue to be processed at RSH and TAT's remain unaffected. Once there are sufficient BMS staff available service will be restored

in the mornings at weekends and further discussions are being held about the future requirements of the RJAH on-call service.

Community Diagnostics Centre (CDC):

As previously advised, this project is to develop a Community Diagnostic Centre at Hollinswood House, in Telford. It forms part of a national programme of work to increase the accessibility of diagnostic tests in the community. The expected operational date for the CDC is from mid-July 2023 dependent upon agreement of the lease for the building, enabling estates work and the installation of CT and MRI scanners. Recruitment to the CDC posts is on-going and making good progress.

Pathology Network:

The Pathology Centre is working with their Network partners and has set up a 'N8' Network Governance Board. Dr Angus McGregor, Interim Medical Director for CSS has recently been appointed to the post of Pathology Network Medical Director.

The Network's primary roles will be to agree the membership, the governance structure, and to review the operating model options, before making their recommendations for future integrated Pathology service provision. Engagement sessions are held monthly with the Pathology Networking Steering Group, including staff representatives for SaTH.

Musculo-skeletal (MSK) Transformation Programme:

This programme involves the 3 local NHS providers (SaTH, RJAH and SCHAT) in developing an integrated pathway from GP referral to surgery if required, including post-operative care.

The first phase will be the introduction of a single Referral Centre and triage process leading to conservative management mainly via Physiotherapy and Occupational Therapy across all of the 3 Trusts which began in principle from 01.02.23.

The programme is led by the ICS who have an engagement strategy encompassing staff and patients.

How is the Division going to involve patients/public in the next quarter:

Since the last meeting of the Public Assurance Forum, Clinical Support Services Division has established a Patient Experience Group reporting to the Patient and Carer Engagement Panel and chaired by the Acting Deputy Divisional Director with membership from across all 4 Centres and a patient representative in attendance at the first two meetings.

A recruitment campaign is underway to recruit more patient representatives for future meetings.

The early work of this new group has been to develop a patient and carer involvement and engagement strategy and action plan specifically for CSS.

We are making a big effort to increase the amount of patient feedback we are collecting and discuss this at our new Patient Experience Group meetings. Here are just a few examples typical of the feedback we are receiving:

Our Phlebotomy Manager attended a volunteer phlebotomy engagement meeting on the of 16th November 2022. It was well attended and feedback from the volunteers about staff and the department was fantastic. It was also a good opportunity to use the meeting to thank the volunteers for all their hard work and dedication to the service.

The Phlebotomy service continues to receive positive feedback from service users, recently for example *“in the troubled world we live in the visit to phlebotomy is a welcome and enjoyable experience.”*

Breast Screening (19.12.22): *“Thank you for the excellent service you deliver. The team are kind, compassionate, caring and skilled. You worked really well together today too - seamless. Thank you.”*

MRI: *“Just to say a big thank you for looking after me so well on 18 January. It was all very efficient and with smiles on faces especially when humour is hard to find in parts of the NHS. Once again thank you.”*

Pharmacy: *“When mum was discharged from ward 27 in November she commented on how polite and professional all the pharmacy staff were that she came into contact with and in particular the pharmacist who sorted her meds out when she was discharged”*

Therapies: *“My therapist has given me my life back. My accident left me feeling I would never be how I am now, thank you from the bottom of my heart”.*

Julia Clarke informed Dianne Lloyd if her team need any support with identifying participants for the neonatal work, the Public Participation team will be very happy to help support in carrying this out.

iv) Surgery, Anaesthetics & Cancer (SAC)

Emily Hinkinson gave the key updates from the Division:

Oncology

- Radiotherapy waiting area – feedback from patients regarding the waiting area and improvements to the environment which could be undertaken to make it a better patient experience.
- Introduction of new Careflow system

Haematology

- PIFU leaflets updated.

ENT

- Shortlisting complete for fixed term 9th ENT consultant, 2 applicants to interview
- Cancer Alliance funds secured to purchase new equipment within Head and Neck

Ophthalmology

- Additional funding from Cancer Alliance secured for 97K, equipment ordered.
- Additional capacity secured to support 2WW Head and Neck, 2WW compliance met for 3 consecutive months.

Surgery

- Lack of FIT [faecal immunochemical test] with colorectal cancer referrals causing significant risk to patients' treatment
- Hepatology service has been formally assessed by IQILS [Improving Quality in Liver Services] and have passed the requirements for level 1. We are therefore an official IQILS accredited service.

MSK

- Newly appointed Orthogeriatrician has started in his substantive role at PRH.

Patient Access

- The team have now validated circa 10,000 patients in line with NHSE directive.

Update on any current or future service developments or changes:

HTP planning and engagement with the public continues across the Division.

Theatres

- Equality / Diversity survey conducted by theatres team; action plan reviewed.
- Restoration of elective orthopaedic training underway.

ENT/Ophthalmology

- Introduction of aqueous shunts or Glaucoma drainage services pending approval by commissioners.
- Electronic triage due to start January for Otology patient's 1st April.
- New 2WW proforma for Head and Neck approved via ICB/ICS implemented as of 1st January.
- Business Case in progress for 6th Max Fax Cancer Consultant.
- Business Case completed for Rhinology kit, due to be presented to League of Friends March 2023.

Oncology/Haematology

- Haematology Advanced Care Practitioner started in February.
- Delivery of a new Cool Cap machine funded by patients and the Lingen Davies charity.
- Patients currently having treatment in the department have shared their views and ideas and we have quickly processed these i.e., removing all unnecessary posters, removed used paperback books and lost property. Painted the walls and hung pictures that a patient had donated.

ENT/Ophthalmology

- SaTH working in conjunction with Paragon to provide support for Paediatric Ophthalmology; first clinics booked in March 2023
- Weekend Vanguard lists still underway to support skin cancer, Ophthalmology and dental extractions.

Surgery

- In December 2022, formal approval was achieved to implement robotic surgery at SaTH. The Trust has procured a state of the art Intuitive Da Vinci Xi dual console system that will allow us to provide robotic surgery for urology, colorectal, gynaecology-oncology and head and neck patients. The system will be delivered on site before the end of March 2023. Extensive training for all theatre teams, surgeons and CSSD staff across the Trust will start soon in collaboration with Intuitive who have a wealth of experience in this activity.
- ITU returned to main RSH building. Ward 37 opened, Ward 29 moved to Ward 26 to allow works on Ward 29.

MSK

- Long waiting orthopaedic patients have been treated in partnership with SWELOC in London, Balborough in Derby and RJAH. Patients have thanked SaTH for the opportunity and reported a great experience in London.

Patient Access

- Wording of patient appointment letters reviewed and updated.

Theatres

- Patient satisfaction survey, including Vanguard Unit and pre-op; recommendations and feedback discussed with divisional teams.
- Social media campaign for band 4 nursing associates about to go live.

Plaster room

- Patient information leaflets and posters reviewed and updated.

How is the Division going to involve patients/public in the next quarter:

- Reintroduce observe and act groups to wards and departments.
- The transition from SEMA to Careflow; as part of the project, patients are involved and asked to provide suggestions for the Trust letter templates. The reading age was reduced to bring in line with all templates - reading age is 9 to 11 years.
- Patient information panel have reviewed our PIFU & RSM leaflets suggesting changes to bring the reading age down from 12 to 9 on all leaflets. These will now be discussed further with clinical teams to undertake amendments.

Graham Shepherd questioned whether Orthopaedics will be available on all three sites (RSH, PRH & RJAH). Emily Hinkinson explained that trauma patients who go through ED will go to the Shrewsbury site (this is part of the HTP model). The elective orthopaedic patients, for example, hip and knee replacements will go to the Telford site. Robert Jones & Agnes Hunt Hospital will still be available for the other side of the county.

Lynn Pickavance congratulated the team on the letter design and the letters going from SEMA to Careflow. Lynn was involved as a patient and recognised the work from people in all areas, the people who attended the meetings were very enthusiastic and they quickly adapted to the reading that was trying to be achieved for 9-11 years old. Julia Clarke credited Ruth Smith for coordinating this piece of work.

Emily Hinkinson left the meeting.

v) Patient Experience

Ruth Smith gave the key updates from the Division:

The Chaplaincy Team within the Trust has been fully recruited to in quarter 4 2022/23. One full time and three part time Chaplains have joined the multifaith team to provide improved service cover. A patient representative was involved in a stakeholder group as part of the recruitment process.

The Chaplaincy Team supported patients and colleagues across the Trust in celebrating, Lunar New Year (January 2023), Holocaust Memorial Day (27th January 2023), World Interfaith Harmony Week (February 2023) and Ash Wednesday (22nd February 2023).

The 10th March 2023 marked the date that the World Health Organisation officially declared COVID-19 a pandemic. In remembrance of this date, a short service was held in each of the hospital chapels. The gathering was held to remember the sacrifices made by staff, and those lost directly or indirectly from the pandemic. Recognition was also given to the sacrifices staff make every day to ensure the safety and wellbeing of our population.

	<p>Update on any current or future service developments or changes:</p> <p>As part of the Electronic Patient Record (EPR) work being undertaken within the Trust and requirement to review patient letters held in the present system (SEMA), a Letters Task and Finish Group has been formed to support the review within programme timescales.</p> <p>A patient representative of the Patient Information Panel, who has received health literacy training, joined the Letters Task and Finish Group, to provide insight and input. Workshops have been held to review the core letter templates presently used within the Trust and agree standardised templates to be adopted going forward. In addition to the patient representative from the Letters Task and Finish Group, additional representation has been included in the workshops to provide insight from a patient perspective.</p> <p>In addition to patient representatives being involved in the letter review process, dates have been identified to capture feedback from people with lived experience, attending outpatient appointments. This is to gain feedback from patients who have received a letter and attended an appointment, identifying if the information met their needs in attending the appointment, aspects that helped them, and areas that may be confusing. This will be used to inform the work being undertaken.</p> <p>How is the Service going to involve patients/public in the next quarter?</p> <p>The Co-Chair patient representative of the Patient and Carer Experience (PaCE) Panel will be attending an NHS England conference in London in recognition of Experience of Care Week. This provides an opportunity to learn and share best practice initiatives with NHS Trusts across England.</p> <p>Involvement of patient and carer representatives will continue through involvement of representatives on the Patient and Carer Experience (PaCE) Panel, Speciality Patient Experience Groups, Patient Information Panel, Independent Complaints Review Group, Trust Food Group, recruitment, Patient Led Assessment of the Care Environment (PLACE) group and a range of other activities.</p> <p>David Brown commented on the interfacing across both hospitals sites and commented on how fantastic it is, with large numbers of patients and staff who were involved in their engagement.</p> <p>David Brown questioned Ruth Smith if there was additional space for Friday prayers. Ruth advised that there is additional space for Ramadan but there are also discussions going on for an improved space going forward with HTP and Estates.</p>
2023/21	SATH Improvement Hub and Public Involvement
	<p>James Owen gave an update on the SATH Improvement Hub and Public Involvement.</p> <p><u>Aim:</u> To empower colleagues at all levels to have the confidence, capability, passion, and knowledge, to test changes and make improvements at SaTH and the communities we serve.</p> <p><u>Four Themes:</u></p> <ul style="list-style-type: none"> • Building Capability • Clinical Patient Flow • Getting to Good

	<ul style="list-style-type: none"> • Learning from incidents <p><u>What the team do at the moment:</u></p> <ul style="list-style-type: none"> • Every project we get involved with has a project brief. • Projects range from the very small, to the very big. • We think of people effected by change on every project, using a tool called stakeholder analysis. <p><u>Every project we ask the question:</u></p> <ul style="list-style-type: none"> • Is the project a material change that requires public involvement? • @SaTHImprovement <p>Julia Clarke noted, in one of the Improvement slides it states, “Is the project a material change that involves public involvement”. It was noted that the “material changes” requirement relates to the requirement for a formal public consultation (as per Future Fit in 2018). Public involvement is an ongoing requirement for any service development and improvement as we should be involving users of the service in this work.</p> <p>ACTION: Kate Ballinger to discuss with James Owen a mechanism to identify how to support greater public involvement in the Improvement team’s work.</p> <p>ACTION: James to be invited back to the October PAF to provide an update.</p> <p>James Owen left the meeting.</p>
2023/22	“The Big Conversation” – ICS update
	<p>Kate Manning gave an update on “The Big Conversation” – ICS update:</p> <p>In March we launched the ‘Big Health and Wellbeing Conversation. We have held community ‘listening events’ in four locations so far: Sutton Hill (Telford), Malinslee & Dawley Bank (Telford), Bishops Castle, Ludlow and Market Drayton.</p> <p>An additional event will take place in Shrewsbury before the end of March. Feedback from these events will inform the Joint Forward Plan and enable us to improve local health and care services.</p> <p><u>Stakeholder engagement - Agreeing our strategic intention:</u></p> <p>We are also undertaking stakeholder engagement. With our partners, we want to shape our strategic direction for the next five years, our commissioning intentions, our strategic objectives, how we will get there, what we will spend and how we will monitor and measure we are improving quality, care and realising our vision. We have sessions booked with Provider Trusts and the Integrated Care Partnership Network (Local authority officers, elected members and The Voluntary Community and Social Enterprise organisations).</p> <p><u>This discussion will involve some difficult choices:</u></p> <p>What we do first and what do we defer? What can we do differently? What should we do more of? What should we stop doing? What should we prioritise within our financial envelope?</p> <p><u>Promotion: Printed Materials Distribution:</u></p> <ul style="list-style-type: none"> • Over 3000 Leaflets and 500 Posters distributed in Bishops Castle, Ludlow, Market Drayton, Shrewsbury and Telford.

- Promotional materials distributed to Shropshire and Telford & Wrekin hospitals, councils, parish councillors, colleges, local voluntary organisations and Healthwatch.
- On the ground promotion to community centres and groups, churches and faith groups, libraries, visitor/information centres, leisure and fitness centres, shops, cafes, community/town notice boards, pharmacies, dentists and in person leaflet distribution.

Access:

- Lack of provision and decline / closure of local services and Concerns of closure of local services (e.g. GPs, emergency services, dentists, ambulance, Ludlow and Bishops Castle Community Hospital).
- Social Care, community services, not meeting local need e.g. dementia.
- Concern over transport services (e.g. costs, lack public transport, private transfers, dial-a-rides).
- Varied experiences of GP appointments -difficult to have face to face appointment, getting through on phones, having different GPs reduces the relationship.

Self-Care Management:

Raise awareness on where people can get the right type of support (e.g. what services are there, how to find the right service)

- There is lack of knowledge on how patients can manage their health issues (e.g., diet control, exercise, health checks up).

Quality of Services:

Services need to work together better (e.g., outreach activity, community hospitals and social care in the local community).

Face to face consultation is sometimes required especially for examinations and accurate diagnosis (e.g. photos of a rash are not sufficient, engaging with people with specific conditions such as dementia).

Consider the need for collaboration between NHS, Local Authorities and Social Care (eg. greater involvement of clinicians in community services).

Staff and Resources:

Patients praised practice staff and valued the services NHS staff provide. Concern over lack of staff/staff retention/staff recruitment (e.g., hiring bank staff, mandatory tenure of staff).

Lack of social care workforce and the impacts on in-patients and discharge plans.

Technology:

Technology is suitable for some things and can save time and money (e.g., receive test results by phone, video, confirming appointments, joining up conversations, use of applications to record health such as blood pressure).

Different levels of confidence using technology and there is some hesitancy and low confidence. Technology should be part of a suite of approaches to providing health and care services.

Inequality in access to technology which needs to be recognised (e.g., some people don't have access to internet or to a smartphone).

What is a People's Network:

As part of the big conversation, we are recruiting a 'people's networks'. A virtual network of local residents which will enable us to gather views and opinions on a wide variety of health topics, on an ongoing basis.

	<p><u>What are the benefits of a People’s Network:</u> A single system-wide network would enable us to:</p> <ul style="list-style-type: none"> • Engage more efficiently. • Have an inclusive and broad respondent base, beyond the reach of some of our conventional methodologies. • Have a responsive and innovative feedback mechanisms. • Ensure that the conversations we have with our populations are impactful, valuable, and not repetitive for the respondent. <p><u>Next Steps:</u></p> <ul style="list-style-type: none"> • Focus on recruitment for People’s Network. • Further engagement activity throughout April and May. • More effort will be placed on reaching marginalised groups. • 3rd planning session booked with system partners at the end of March to align and support activity. • Additional activity will focus more on community outreach - Go to them instead of them coming to us! • We will Feedback to people: 'You said, we did' once the plan is finalised. <p>Cllr Joy Jones commented, a lot of residents in Powys feel left out on being able to have a voice. It’s very important that the ICS team do go out to town communities and arrange meetings with the town councils to explain what it’s about and to ask them if they can set up a meeting in their own area for their own communities so people will then have a link to come into which will encourage people to come along and give their voice. There needs to be a better joined up approach with Shrewsbury and social services – Powys patients leaving the hospital in Shrewsbury know where to access services over the border. There is a huge issue with the transport services, people struggle on knowing where to go, and how to get to certain sites.</p>
2023/23	Social Inclusion Report
	<p>Kate Ballinger gave a brief update on the Social Inclusion Report:</p> <p>During the pandemic, the Public Participation Team applied for funding through NHS Charities Together to address some of the gaps in engagement with Black and Minority Ethnic (BAME) and other seldom heard communities.</p> <p>A grant of £50,000 was received and this supported a number of initiatives at SaTH including the funding of a Social Inclusion Facilitator role for 12 months. The aim of this role was to establish links and build relationships with seldom heard community groups and organisations and individuals across Shropshire, Telford & Wrekin, and Powys.</p> <p>The project ran from January 2021 to October 2022; at the start of the project a gap analysis of our existing links with socially excluded groups was undertaken to identify Areas of Focus for the project.</p> <p><u>Conclusions:</u> As a hospital Trust, it is right that patients, carers and our local communities are at the heart of everything we do, and involving our community is important and needs to be strengthened. We want to build greater public confidence, trust and understanding by listening and being responsive to the needs of our local communities.</p> <p>We will continue to build links with our Areas of Focus/seldom-heard groups who we have started to work with over 2021 - 2022. We will need to ensure we are listening to and responding to people who are within these groups.</p>

	<p>Many of the people we have talked to, both service users and their advocates, have stated that successful healthcare outcomes for patients from seldom-heard groups are dependent on mutual trust, between those who provide the service and those receiving them.</p> <p>We will ensure that key barriers to engagement are identified through ongoing conversations and understanding the needs of those groups.</p> <p>A sound partnership between the third sector and healthcare providers is essential if we are to be effective in increasing the opportunities for involvement in their own healthcare of those in danger of exclusion.</p> <p>We recognise that the third sector delivers specialist services and often provides us with excellent opportunities for engagement. These organisations normally have a greater understanding of the lifestyles and challenges experienced by those from seldom-heard groups.</p> <p>We also recognise that while we have been successful in reaching many of the Area of Focus, there is still work to be done to build connections with the same groups in other geographical areas we cover.</p> <p>Finally, we need to not only build relationships but to maintain them in a way which shows our commitment to creating a two-way communications channel which will not only inform but also listen and collaborate.</p> <p>Julia Clarke congratulated Kate Ballinger and Michael Crawshaw on all their hard work and also thanked NHS Charities Together who kick started this with £50,000 which covered the Social Inclusion Facilitators role, staff training (which was delivered through the Workforce team), and improvement to faith areas within the hospital (delivered through the Patient Experience team). Although this was delivered through three separate teams within the Trust, we have all worked together to make sure that we cover everything.</p>
2023/24	Any Other Business
	<p>Julia Clarke informed the Group there will be a couple of slides on the Public Assurance Forum to be circulated for any comment. They are also a useful aid memoire for any organisations who would like to know what happened at the Public Assurance Forum as the slides cover the main agenda items and any points that came out of each item.</p> <p>Linda Cox who sits on the Voluntary Sector Assembly Board informed the Group as the Compact Champion the team have decided to revisit the Compact so the team will be in contact to see if SaTH would like to sign up again.</p> <p>Linda Cox queried if there is an organisation chart which shows how all of this work fits together and how things are worked through, as its difficult to understand. There is a Who's Who on the website Whos-Who-Website-March-2023-V2.pdf (sath.nhs.uk) which explains who the Divisions are and who is included within the Board. There are also the Public Participation pages which talks about Public Participation and Patient Experience. Links will be included within the Teams chat.</p> <p>David Brown thanked the Group members for attending.</p>
2023/25	Dates for the Forum for 2023
	<p style="text-align: center;">Monday 3rd July 2023 at 14.00-17.00pm Monday 9th October 2023 at 14.00-17.00pM</p>

PUBLIC ASSURANCE FORUM ACTION LOG

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

CLOSED ACTIONS

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
24th January 2022						
2022/06	24/01/2022	Forum members were asked to ask the above questions to their members and feedback to Shirley-Ann and confirmed that the Stakeholder Group will help inform what is important to the patients.	Members	17/02/2022	Strategy now finalised and presented to Board	CLOSED
		It was agreed that the Strategy needed to clearly articulate how the Trust is working with external organisations in order to demonstrate an open and transparent approach in involving patients in the scrutiny of services. Shirley-Ann to arrange further discussion with Lynn Cawley.	Shirley-Ann/Lynn Cawley	28/02/2022	Strategy now finalised and presented to Board	CLOSED
9th January 2023						
2023/09	09/01/2023	Julia Clarke to email David Brown with any key issues that will need raising at the next Trust Board.	Julia Clarke	31/01/2023	Email sent	CLOSED
9th January 2023						
2023/01	09/01/2023	Nominations for co-Chair to be sent to Julia Clarke from public members.	Members	03/04/2023		CLOSED
2023/06	09/01/2023	Julia Clarke to discuss public involvement with Rhia Boyode.	Julia Clarke	03/04/2023	James Owen will attend the meetings.	CLOSED
2023/07	09/01/2023	Julia Clarke asked Sally Hodson to ask Lisa Challinor to focus on updating on sections 2 & 3 (involvement and engagement) at the next meeting.	Lisa Challinor	03/04/2023		CLOSED
2023/07	09/01/2023	Julia Clarke asked Kate Ballinger to send the revised Public Participation website links out to the Public Assurance Forum members for comments before launch .	Kate Ballinger	10/02/2023		IN PROGRESS
2023/16	03/04/2023	David Brown to contact Cllr Joy Jones to discuss taking forward the role of Co-Chair.	David Brown			CLOSED

**PUBLIC ASSURANCE FORUM
TERMS OF REFERENCE**

Constitution

The aim of the Public Assurance Forum is to bring a public and community perspective to, and scrutiny of processes, decision making and wider work at The Shrewsbury and Telford Hospital NHS Trust. The Public Assurance Forum is an advisory group who are there to ensure that decisions about services and the delivery of care are developed in partnership with our local communities. The Forum will provide constructive challenge and scrutiny of decisions from a patient and public perspective

Membership

The membership of the Public Assurance Forum will be:

Core Members	Deputies
<ul style="list-style-type: none"> • Chair – Non-Executive Director David Brown • Co-Chair - Montgomery Health Forum Councillor Joy Jones • Deputy Chair – Director of Public Participation Julia Clarke • Interim Director of Strategy and Partnerships Nigel Lee • Head of Public Participation Hannah Morris • Community Engagement Facilitator Kate Ballinger • Head of Patient Experience Ruth Smith • Divisional Directors or nominated deputy from the four clinical divisions: <ul style="list-style-type: none"> - Clinical Support Services Anna Martin - Medicine and Emergency Care Laura Graham - Surgery, Anaesthetics & Cancer Lisa Challinor - Women & Children Carol McInnes • Deputy Director of Education & Improvement James Owen • Healthwatch Shropshire Vanessa Barrett / Lynn Cawley 	<p>Head of Public Participation Hannah Morris</p> <p>Public Participation Facilitator Michael Crawshaw</p> <p>Patient Experience Julia Palmer</p> <p>Medicine & Emergency Care Hannah Walpole</p> <p>Surgery, Anaesthetics & Cancer Andrena Weston</p> <p>Healthwatch Shropshire Vanessa Barrett / Lynn Cawley</p>

<ul style="list-style-type: none"> • Healthwatch T&W David Bell • Community Health Council (CHC) Andrea Blayney • Shropshire Patient Group Graham Shepherd • Telford Chief Officers Group (COG) Terry Gee • Patient First, Telford Patrick Spreadbury/Lynn Pickavance • Maternity Voices Partnership Louise Macleod • Shropshire Voluntary and Community Sector Assembly (VCSA) Linda Cox • Powys Association of Voluntary Organisations (PAVO) Clair Swales • Health and Wellbeing Board Kelly Middleton/Andy Burford <p><u>Proposed Membership</u></p> <ul style="list-style-type: none"> • Telford Interfaith Council • South Shropshire Interfaith Council • Challenging Perceptions • Shropshire Mental Health Support • Shropshire Youth Association • Taking Part • PODS • PACC • Armed Forces Outreach Support • Shropshire Disability Network • Shropshire Carers • Credu Powys • Telford and Wrekin All Age Carers Centre • Shropshire Rural Support • Age UK <p>Members from other nominated groups (following feedback from stakeholders) can be invited to attend to represent the different communities and areas covering Shropshire, T&W and Powys'</p>	<ul style="list-style-type: none"> Healthwatch T&W Fiona Doran Shropshire Patient Group Gillian Sower Patient First, Telford Patrick Spreadbury/Lynn Pickavance Health and Wellbeing Board Kelly Middleton/Andy Burford
<ul style="list-style-type: none"> • The appointment of each member of the public/patient groups will be for two/three years. Each organisation will choose which individual will represent their group at the Public Assurance Forum. There will be an opportunity for reappointment and the organisation 	

may choose to nominate a specific role (e.g. Chief Officer so timescales will not apply)

- All representatives are expected to attend forum meetings regularly and give feedback, gather views and information. Each organisation should also nominate a Deputy in the event of unavailability of the main representative.
- A formal review will be undertaken after one year to evaluate the effectiveness of the Forum and its processes.
- To ensure the autonomy of the Forum, members of the following organisations are not able to become a member, however there may be occasions in which they are invited to attend the Public Assurance Forum regarding a specific issue:
 - Public members of Health Scrutiny committees or the Joint Health Overview and Scrutiny committee (and equivalent in Powys)
 - Political or campaign groups
 - NHS organisations such as CCG's, other NHS Trusts
 - Local Authority officers
 - Individual Public members, who are not representing a group or organisation.

Others may attend for specific agenda items as required.

The Committee will be chaired by a nominated Non-Executive Director of the Trust. In the absence of the nominated Chair, the meeting will be chaired by the Deputy Chair. If there are no Chairs available to attend the meeting, then it will be rearranged.

Responsibilities of Members

Stakeholders will nominate the individual that should attend to represent their organisation at the Public Assurance Forum (plus on deputy in the event of unavailability). Public Assurance members must be:

- An active member of the organisation they represent.
- Be able to provide feedback from the Forum to their organisation/community group and vice versa provide the views of their group to the forum.
- Be committed to work collaboratively with the Trust.
- Be prepared to voice their view as a lay representative and contribute to debate within the forum.
- Be mindful of the need for confidentiality in relation to some agenda items that may come to the attention of the Forum.

Questions from the public to be directed to the relevant public organisations. The Trust will promote and direct members of the public to the relevant organisations, with Healthwatch/CHC as the over-arching non-membership organisations that members of the public will be signposted too.

Attendance

Members may appoint suitable deputies to represent them. Deputies must attend when required. It is expected that the organisation will attend for a minimum of 75% of meetings in a year. Attendance will be monitored by an attendance matrix.

Quorum

- A minimum of three members from The Shrewsbury and Telford Hospital NHS Trust and three public representatives.

Frequency of meetings

- The Forum will take place quarterly (or more often, if necessary, at the discretion of the Chair)
- Meeting dates will be agreed on an annual basis and will not be changed without the permission of the chair.
- Agendas, minutes and papers for the meeting will be distributed no less than seven days before the meeting. Any exceptions to this will require written notification to the chair, and subsequent agreement on distribution arrangements.
- The agenda and papers will be sent to all nominated Deputies as well as nominated core members.
- The agenda and papers will be published on the SaTH Website following a PAF meeting for the public to view.
- Contact details for member organisations will be made available on the SaTH website.

Authority

- The Public Assurance Forum is an advisory body and does not have decision making powers.
- It formally reports to Trust Board quarterly through the Public Assurance Forum Chair as part of the Public Participation quarterly update.
- Members should raise issues of concerns through the Forum in the first instance. The Forum may then decide to refer the issue back to the divisions or department for further consideration. The Chair, deputy Chair and the Public Participation Team are available to provide support to the Forum.
- It is important that Divisions and departments engage with the Public Assurance Forum at an early stage to ensure early and meaningful engagement and to avoid unnecessary delays.
- The Public Assurance Forum have the authority not to assure a document and refer it back to the Division/department with further queries, comments or guidance.

Duties

- To support SaTH to develop ways of engaging and involving the public and local communities.
- To agree members who will be involved in key pieces of work to ensure that the public/community voices have been heard in decision made across SaTH.
- To provide a mechanism for public assurance around decision making processes across the organisation
- To review and support the development of public engagement plans in relation to service changes and developments (Section 242)
- To support the Divisions in developing an ongoing dialogue and engagement plan with its patients, public and local communities.
- The Forum should provide advice and assurance on Division's plans to engage and involve the public and the local communities on their planning and delivery of their services.
- To provide assurance to SaTH that the voices of patients, public and carers are heard and taken into account in relation to service development, changes, strategies and other key documents.
- Enable our Seldom Heard Communities to be listened to and involved with the Forum and for their views to be taken into account.
- To use the expertise of the group members to support making informed decisions and recommendations on engaging our communities in relation to service developments and changes within the Trust.
- To provide assurance that Equality Impact Assessments are integrated and take into consideration the impact upon patients, carers and our local communities.

Reporting

The Committee will routinely receive the following reports:

- Action Plan for the Public Participation Plan
- Public Participation Quarterly Trust Board Update

Administrative arrangements

The Secretarial support will be provided by the Public Participation Team who has responsibility for:

- Keeping a record of matters arising and issues to be carried forward.
- Producing an action list following each meeting and ensuring any outstanding action is carried forward on the action list until complete.
- Producing a schedule of meetings to be agreed for each calendar year and making the necessary arrangements for confirming these are dates and booking appropriate rooms and facilities.
- Producing appropriate support to the Chair and Committee members.
- Providing notice of each meeting and requesting agenda items no later than 7 working days

before a meeting.

- Agreeing the agenda with the Chair prior to sending the agenda and papers to members no later than 5 working days before the meeting (urgent business should be agreed with the Chair, prior to the meeting, and the secretary should be notified).

Review

Terms of Reference will be reviewed annually.

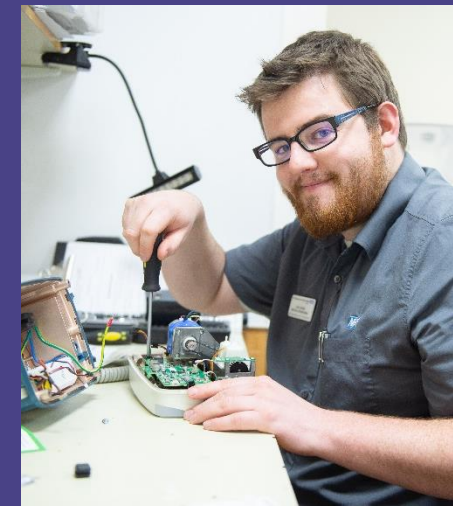
Approved: July 2022

To be reviewed: July 2023

Hospitals Transformation Programme

Update to Public Assurance
Forum

3 July 2023



Why are we here?

- An update on the Hospitals Transformation Programme
- Where are we in the process?
- Latest developments
- Responding to your questions
- Involving and informing you on the next steps and what this means for services
- Questions

Rachel Webster, Lead Nurse Hospitals Transformation Programme

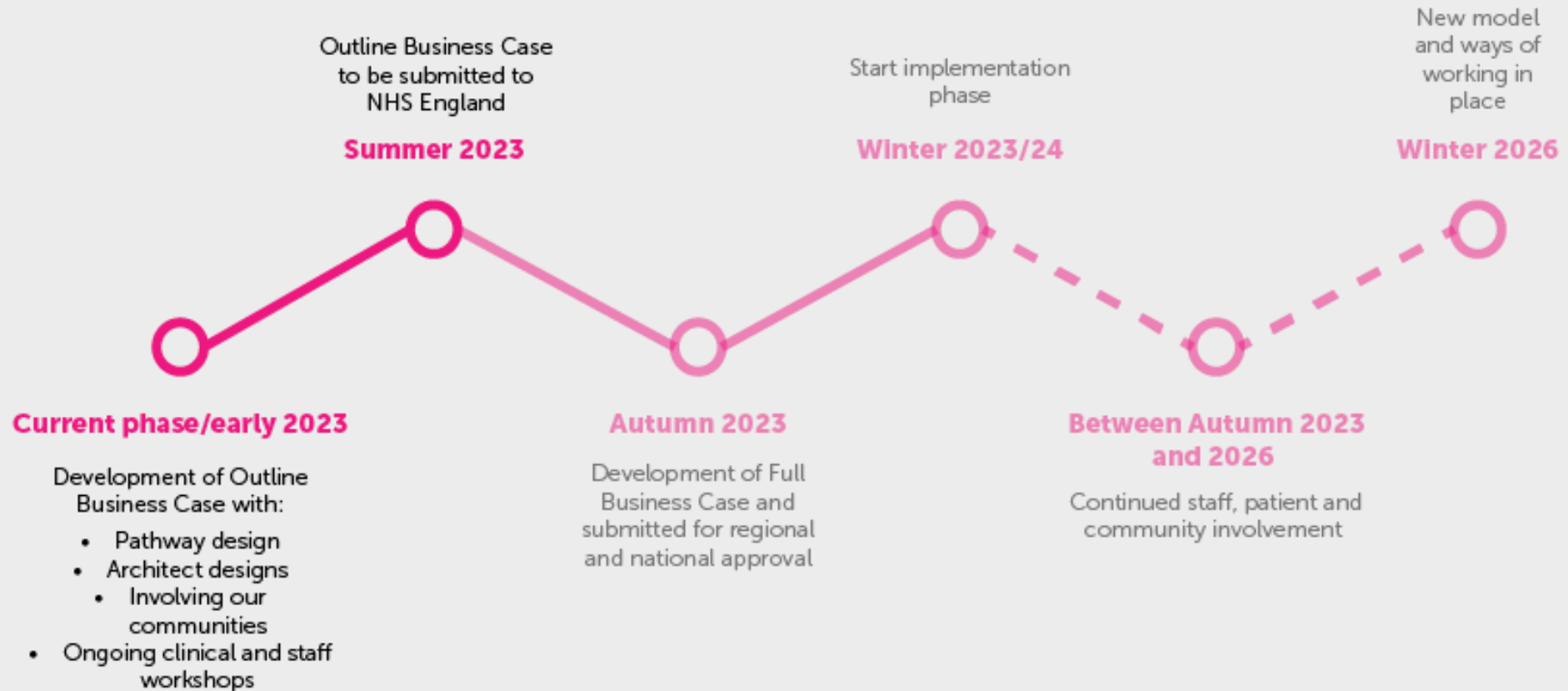
Adam Ellis Morgan, Lead for Estates for the Hospitals Transformation Programme

Tom Jones, Hospitals Transformation Programme Implementation Lead

Julia Clarke, Director of Public Participation



Where are we in the process?



Where are we in the process?

- We've **worked with our lead clinicians** to add further detail into the clinical model to start to design the **“flow” of clinical services** (how our clinical teams will work and connect to each other).
- **On track** to submit the Outline Business Case during Summer 2023
- **Preparations underway** to be ready for the implementation phase
- Your feedback is continuing to inform the development of our plans. This **involvement will continue** and over the next few weeks, months and years there will be many opportunities for people to help us influence the physical environments and people's experience of our services.



Improving care for everyone



PRH will become the site specialising in 'Planned Care'



- ✓ Diagnostic endoscopy
- ✓ Vibrant planned care site, with medical and surgical in-patients on a planned pathway of care
- ✓ Adult and child out-patients
- ✓ Day case surgery centre
- ✓ Midwife led unit
- ✓ 24 hour Urgent Treatment Centre (A&E local model) with co-located 12 hour SDEC
- ✓ Procedure suite (for local anaesthetics)
- ✓ Enhanced rehab facilities and 2 new therapy led wards
- ✓ Respiratory day case unit
- ✓ Chemotherapy day case unit



Dedicated planned care hub – aligned with HTP

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



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

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

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

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



RSH will become the site specialising in Emergency Care



- ✓ Emergency Department
- ✓ Urgent Treatment Centre
- ✓ Critical Care Unit
- ✓ Consultant-led Maternity Care
- ✓ Children's Inpatient Services
- ✓ Emergency Surgery and Complex Planned and Children's Surgery
- ✓ Emergency Medicine, including Cardiology, Stroke, Respiratory and Acute Medicine
- ✓ Consultant Neonatal Services
- ✓ Head and Neck Inpatient Services
- ✓ Radiotherapy and Inpatient Cancer Care



Location of the new build at RSH



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

NHS
The Shrewsbury and
Telford Hospital
NHS Trust



- Easier to access for patients
- Better clinical adjacencies between services
- Improved, modern main entrance for patients



Listening to local communities

- We are working with Shropshire Council to seek planning permission for the building works at RSH
- There will be a range of ways to view our plans, to ask questions of our programme team and give feedback
- This engagement activity is part of the planning process
- We are committed to working with our architects and suppliers to ensure we are:
 - Considerate constructors
 - Acting sustainably

We want to involve you, our staff and patients, and be a good neighbour and involve our local communities:

- Additional focus group – 11 July, w/c 17 July and possibly a later date in August
- An online planning website (available from 19 July)
- Planning events:
 - 19 July, 4pm to 7pm at Shropshire Conference and Education Centre
 - 22 July, 10am to 2pm at Shropshire Conference and Education Centre
 - 24 July, 3pm to 7pm at Gains Park Hall
- Online webinar – 1 August at 6pm
- About Health event – 25 July
- EQHIAs focus group – August
- We can also attend community meetings to provide updates upon request

For more information visit:

www.rshplanningapplication.co.uk





The Shrewsbury and
Telford Hospital
NHS Trust

How can we inform and engage local people?



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

Next stages for involvement

- Entering the next phase where we can meaningfully involve our focus groups and communities in designing a positive experience for patients
- We will want to involve them in the evolving design including (but not exclusively) with
 - Accessibility and sensory needs
 - Wayfinding/ signage
 - Look and feel of environment (as long as within clinical IPC guidelines)
 - Public spaces
 - Transport and parking
 - Public Artwork
- This will continue over the coming years as more detail becomes available

We recognise some of our information is commercially sensitive – we will do our best to let you know in advance of key announcements (however this may be via email).



Get involved

- **What information would your networks like to know?**
- **How can we support you to keep your networks informed and involved?**
- **What formats would you like to receive information in?**

- If you would like us to attend a meeting to update your group/organisation or to register for a focus group, email us on sath.engagement@nhs.net
- Keep looking at our website for more information: www.sath.nhs.uk/about-us/hospitals-transformation-programme/

If you want to hear more about what's happening at our hospitals and how to get involved, email: sath.engagement@nhs.net





The Shrewsbury and
Telford Hospital
NHS Trust

Questions



Integrated
Care System
Shropshire, Telford and Wrekin



Getting to Good

Public Assurance Forum July 3rd, 2023

Getting
to
GOOD ✓



Transformation of Care “Getting to Good”

Our Improvement Journey



- Our trustwide quality improvement programme which aims to help us achieve our overarching vision to provide excellent care for the communities we serve.
- This improvement will be recognised with a CQC rating of “good”.
- We are currently in Phase 2 of G2G with move to Phase 3 planned for this year.

Transformation of Care “Getting to Good”

Delivering Change

An Operational Delivery Group (ODG) is in place to accelerate and support the delivery of improvements in Phase 2 of ‘Getting to Good’.

- The Group is made up of Senior Responsible Officers (SROs), a NHSE support team and Improvement Director, Service Improvement Team, Programme Management Office, Informatics and Communications.
- Within each of the eight programmes there is an executive lead responsible for delivery; core action areas; delivery milestones; metrics and a target. The Group meets weekly for the SRO to deliver updates, evidence and information about progress.
- ODG is the assurance group prior to the SATH Oversight and Assurance Group offering support and healthy challenge to senior responsible officers, identifying strengths within projects and areas for improvement.



Progress summary

By programme

Maternity Transformation	Corporate Governance	Quality and Safety
Digital	Elective Recovery	Workforce Transformation
Finance and Resources	Urgent Care Improvement	

- **Two** programmes are progressing well reporting all projects as being on track this period and rated **Green**
- **Six** programmes are experiencing slippage in delivery of milestones and are rated **Amber**.

Progress summary

By individual project

Theatre Productivity	Levelling Up Clinical Standards	Diagnostics Recovery	Performance and Business Intelligence
Outpatient Transformation	Medical Staffing	Learning from Deaths	Equality, Diversity and Inclusion
Quality and Regulatory Compliance	Delivery of the Quality Strategy	Recruitment and Retention	Digital Infrastructure

- In this period, both Medical Staffing and Levelling Up Clinical Standards projects are now off track and rated **Red** alongside Theatres and Outpatients
- A further eight projects have slippage in delivery of milestones and are rated **Amber**
- The remaining projects are all on track and are rated **Green** or delivered and are rated **Blue**.

Progress summary

By individual project

Risk Management	Communications & Engagement	Cancer Performance	Maternity Transformation	Quality Governance
Critical Care Improvements	Expansion of Medical Examiners Office	Fundamentals in Care	UEC Improvements	
Emergency Care Transformation	Culture & Behaviours	Future Workforce Design	Leadership Development	

Progress summary

Performance trend

Projects reported as delivered

- Financial Reporting and Planning
- Financial Literacy
- Productivity and Efficiency

Projects reported as improved

- UEC Improvement programme

Projects reported as worsening

- Digital Infrastructure
- Levelling Up Clinical Standards
- Medical Staffing
- Learning from Deaths



Reported progress

Theatre productivity

Project remains off track due to inability to increase available theatre capacity

Following review of current milestones, recommendation was made to include late starts, early finishes, cancellation reasons, turnaround time and planned utilisation versus actual.

Actions undertaken included

- Implementation of a new list planning meeting with Booking and Scheduling
- Further improvements to reporting and review of automation of reports
- Continued dialogue with NHSE Theatre lead
- Bluespier Pre-operative assessment demonstration

Key update

- Access to day case beds improved
- Focus remains on list and bed planning in advance of To Come In
- Fortnightly Theatre Improvement Task and Finish Group will continue to meet

Theatre utilisation – April 2023

RSH:

- 72% uncapped / 70% capped

PRH:

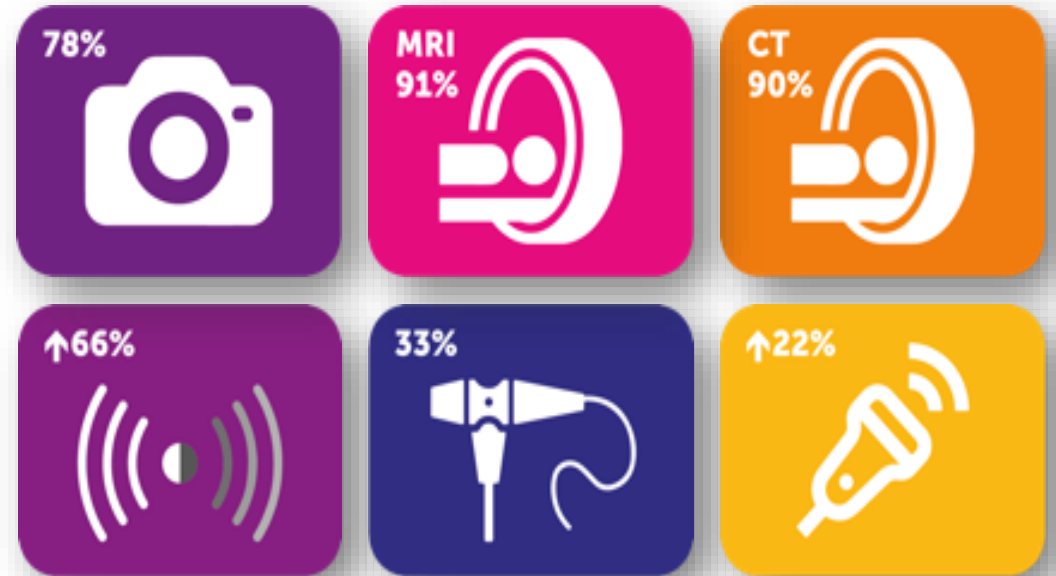
- 69% uncapped / 66% capped

On current trajectory, the Trust is set to achieve 85% theatre utilisation by April 2024

Reported progress

Diagnostics recovery – March performance

- Imaging at 78%, MRI at 91%, CT at 90%
- Ultrasound increased to 66%
- Echo increased to 85%
- Overall Endoscopy performance at 33% (Feb)
- Non-Obstetric Ultrasound Waiting List Initiatives helped increase performance by 22%
- 12-month extension of current CT and MRI scanners
- Additional CT for 5 months and MRI for 12 months
- Community Diagnostic Centre opens Sept 2023





Reported progress

Emergency Care Transformation Programme

The Emergency Care Transformation Programme aims to improve clinical quality across the Emergency Departments, culture and communication, governance and pathways.

The programme has a delivery plan consisting of 134 actions.

The delivery and embedding of each of the actions is scrutinised at a monthly assurance committee which includes Healthwatch, the Ambulance Service, the ICS and public representation.

The delivery to date includes work to the initial assessment process, improved security for reception staff and a more consistent communication in respect to serious incidents



EMERGENCY CARE
Transformation Programme

NHS
The Shrewsbury and
Telford Hospital
NHS Trust

We value your feedback

Please tell us what you think of our ED waiting rooms

What do we do well and where can we do better?

Share your experience by scanning the QR code to take part in our short survey



Partnership
Ambitious
Caring
Trusted

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



Patient and Public Involvement

- Communications – Initial focus on educating our staff on what Getting to Good was and the progress being made. Next step is to have more external focus and public involvement.
- Maternity Transformation – Maternity Voices Partnership and service user experience feedback gathered.
- Emergency Care Transformation – PaCE panel member representation on Emergency Care Transformation Assurance Committee (ECTAC) and service user experience feedback.
- PaCE panel members meeting to increase understanding of the programme and answer specific queries.




Thank you

Any Questions?

Getting
to
GOOD

Public Assurance Forum Meeting 25 April 2023

Agenda item	2023/32			
Report Title	Strategy and Partnership Update			
Executive Lead	Nigel Lee, Interim Director of Strategy & Partnership			
Report Author	Carla Bickley, Associate Director of Strategy & Partnership			
	Link to strategic goal:		Link to CQC domain:	
	Our patients and community	√	Safe	√
	Our people	√	Effective	√
	Our service delivery	√	Caring	√
	Our governance	√	Responsive	√
	Our partners	√	Well Led	√
	Report recommendations:		Link to BAF / risk:	
	For assurance		BAF1, BAF2, BAF3, BAF4, BAF6, BAF7, BAF8, BAF9, BAF10, BAF11, BAF12, BAF13, BAF14, BAF15	
	For decision / approval		Link to risk register:	
	For review / discussion			
	For noting			
	For information	√		
	For consent			
Presented to:				
Executive summary:	<p>Significant work is in progress both in SATH and across the Integrated Care System on the development of the strategy and planning documents which underpin the short and medium term delivery of ICS and Trust priorities and duties.</p> <p>This paper provides a summary of key areas.</p> <p>The Forum is asked to NOTE the report, including the timetable to produce key system strategy and plan documents.</p>			
Appendices				
Executive Lead				

1. Introduction

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

2. Integrated Care System (ICS)

2.1 ICS Clinical Strategy

The ICS Clinical Strategy 2023-2025, led by the ICB Chief Medical Officer, is set within the context of the wider Integrated Care Strategy (published in early 2023). The clinical strategy focusses on six clinical pathways:

- Urgency and Emergency Care; Cancer; Cardiac; Diabetes; MSK; Mental Health

In addition to these six priorities, maternity and neonatal were recognised as established programmes of work that will continue, with further phases of clinical improvement programmes focussing on Respiratory (Asthma), Urology and Gynaecology (pathways, capacity, and demand).

2.2 Joint Forward Plan (JFP)

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

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

A draft JFP has been approved via the ICS (end of March 23) and submitted to NHSE. Whilst feedback on the draft document was positive all partners will continue to work collaboratively to produce the final version of the JFP by end of June 2023. The ICS Big conversations have been held in the past few weeks, and further stakeholder events including hard to reach service users/carers have taken place.

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

Health and Wellbeing Boards are a statutory forum where political, clinical, professional and community leaders from across the care and health system come together to improve the health and wellbeing of their local population and reduce health inequalities. A summary of this month's topics included:

- Implementation of healthy lives trauma approach to care
- A review of dentistry and access to services
- The early intervention/prevention scheme in Oswestry was spotlighted as good practice
- Healthwatch report in regard to calling for an ambulance
- Better Care Fund utilisation and follow up meetings to review and ensure alignment to the JFP particularly in areas such as prevention, inequalities, admission avoidance and delayed discharges
- All age carer strategy
- Joint Service Needs Assessment in relation to Drug and Alcohol
- Armed Forces

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

For both Shropshire, Telford and Wrekin Integrated Place boards the main focus has been on the development of the JFP and public engagement (health and wellbeing conversation). However, some areas to note include:

- TWIPP/SHIPP are currently agreeing the strategic plan deliverables and alignment to the above
- Telford & Wrekin Council and partners have underlined their commitment to prevent and tackle all forms of domestic abuse with the launch of a new strategy. The Domestic Abuse Strategy

2023-25 was approved at the council's cabinet meeting and the borough's health and wellbeing board in March, and a new integrated domestic abuse service was commissioned.

- SHIPP - Updated on the progress of the Virtual Ward, Healthwatch your care, our way report, Better Care Fund review, Big conversation events feedback and future dates
- TWIPP – Person-Centred Care Approach, Strategic Plan Deliverables, CQC Local Authority Assessments

3. SATH Workstreams

3.1 Provider Collaboratives

We continue to participate in the wider NHS provider collaborative forums sharing experience and good practice with webinars scheduled for later this month.

Work continues to take place to strengthen and develop our current working relationship with Shropshire Community Healthcare NHS Trust focussing on the delivery of the JFP, but with early focus for 2023/24 on the implementation of the Local Care Transformation Programme priorities of an Integrated Discharge Team and Virtual Ward, subject to system financial approval. Medium term plans are being established ensuring continued alignment between the Local Care programme and our Hospital Transformation Programme.

We continue to engage with Powys in relation to the development of their local services and community hubs.

3.2 Veterans and Armed Forces Pledge

Our Hospitals Pledge – ***“We pledge to value our military community”***

SaTH is proud to have been awarded the Employer Recognition Scheme Silver Award and in conjunction with our partners and local community we continue to promote and embed the Armed Forces Covenant for Communities, with an aspiration of achieving Gold Award status in the future.

3.3 Health Inequalities

We are currently working with the ICS and partners to develop and implement a system-wide programme of work focussing on short, medium and long-term goals for tackling health inequalities. Further updates will be provided as this area progresses.

3.4 Internal Strategies

- Clinical Strategy

Work is currently underway to finalise the SATH clinical services strategy. Led by the Exec Medical Director, further communication and engagement with divisions will take place to support the development of divisional plans.

- Research and Innovation Strategy

A draft research and innovation strategy has been produced and will undergo internal ratification process for approval.

4. Recommendation

The Forum is asked to note the report.

PRH Renal Service Hollinswood House Presentation

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



Hollinswood House Telford

- The Renal Unit on the 1st and 2nd floor of Hollinswood House is nearing completion, scheduled for October 23
- Ventilation & Steelwork has now been completed
- Ceilings, doorframes and floor finishes now underway
- CCTV and Alarm systems now being installed
- I.T. Hub and patient check in works have commenced
- External slabbing and access works are now underway.



Hollinswood House Renal Floors progress photographs.

Renal
1st Floor



Renal
2nd Floor



Nuclear Medicine

The Shrewsbury and Telford Hospital
NHS Trust

Gamma Camera Upgrade.

Helen Williams
Lead Superintendent Radiographer RSH
June 2023



Nuclear Medicine

- Nuclear Medicine involves a highly sensitive imaging technique, which is used to look at cell function rather than structure alone.
- This process can detect disease progression much earlier than other modalities.
- As part of the process, radiation is injected into the patient, which results in hotspot areas on the image.
- Nuclear Medicine imaging is mainly used by Oncology and Trauma and Orthopaedic services.



Current Position

- SaTH have two 20 year old cameras, one at each site (RSH and PRH).
- The manufacture has issued us with an end-of-life notification.
- SaTH Nuclear Medicine service covers all of STW ICS, and also some referrals for Welsh patients.
- The current service is supported by Radiopharmacy which is located at RSH.
- This is a heavily legislated service, due to the unsealed radioactive sources.
- We currently run a limited service at PRH due to the location. This primarily supports the paediatric service.

Wrexham

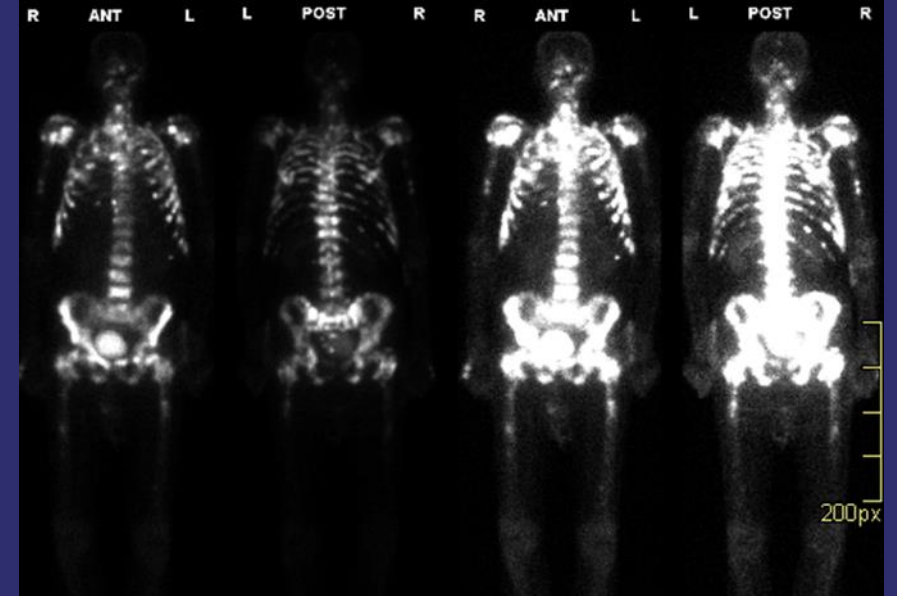
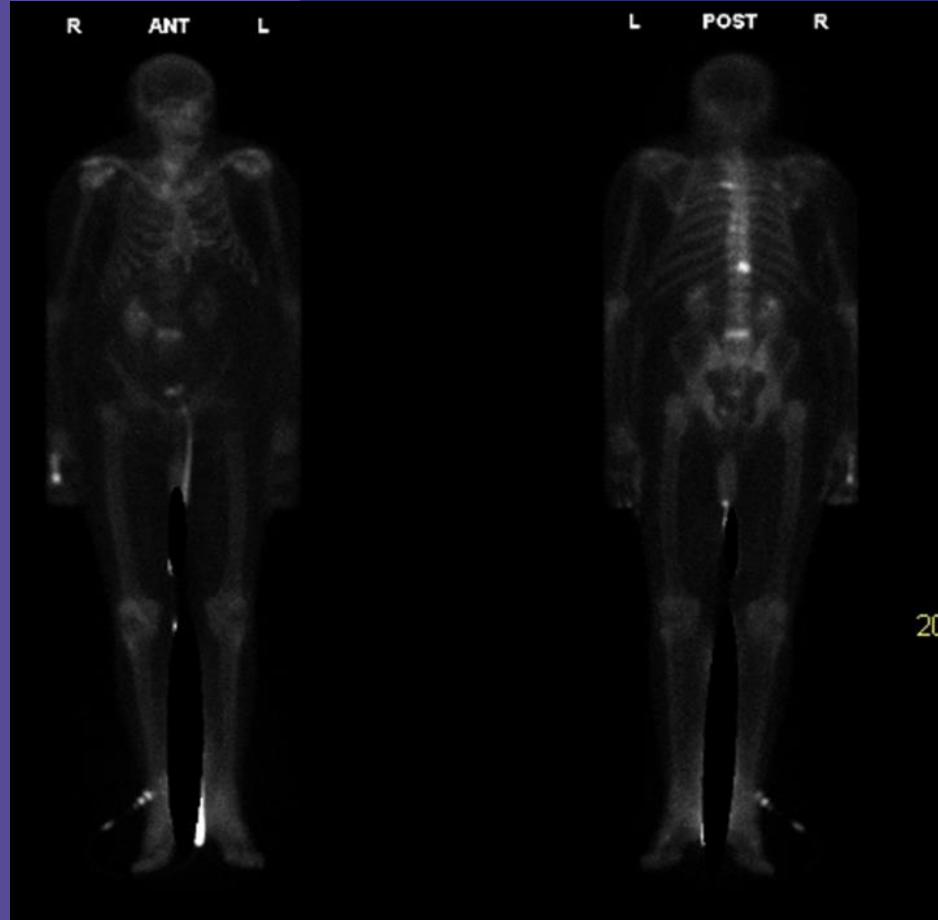
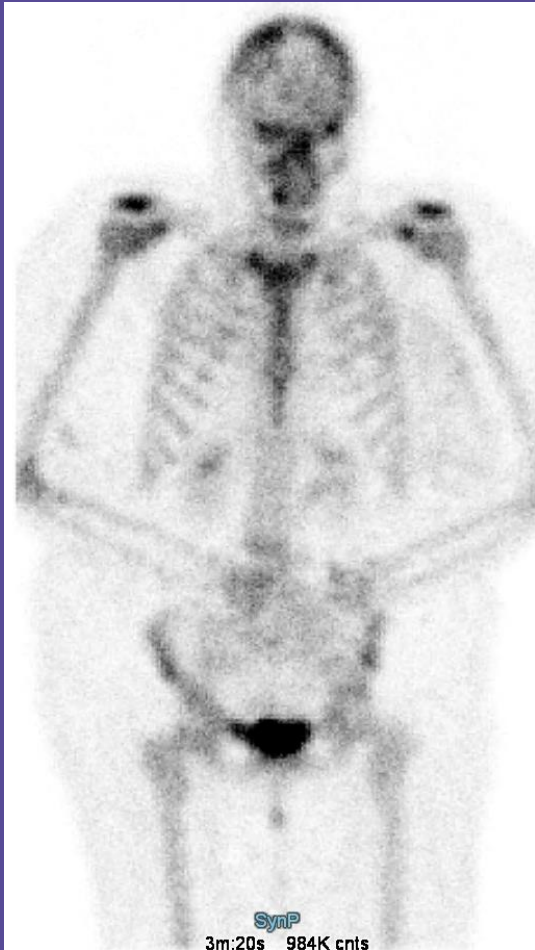


Proposal

- Upgrade the scanner at RSH.
- Upgrade the estate to house the scanner.
- Keep the scanner at PRH running to support the Paediatric service only (current practice).
- Ensure all developments meet new legislative requirements.

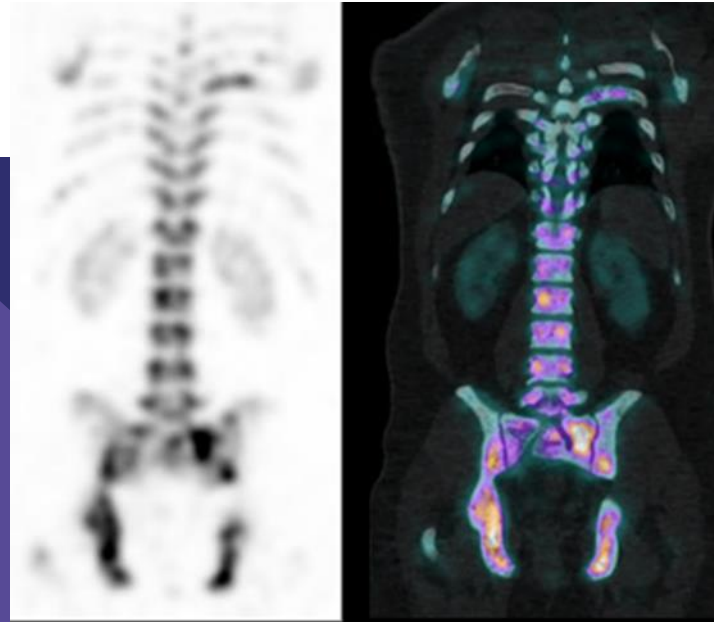
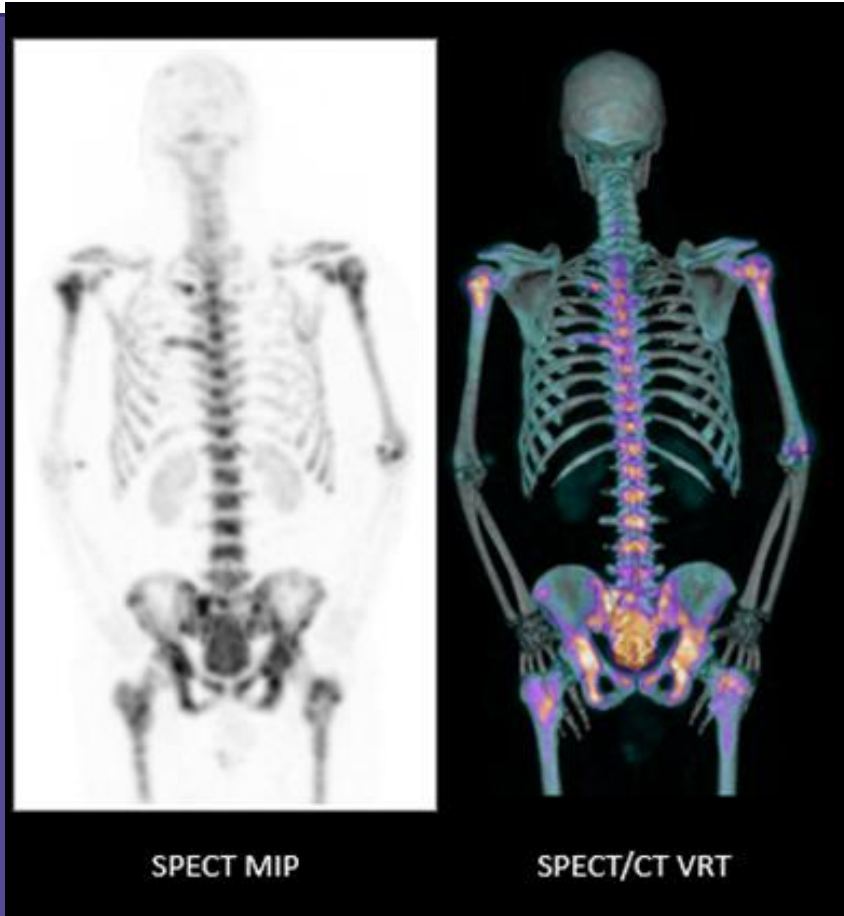


Current Position

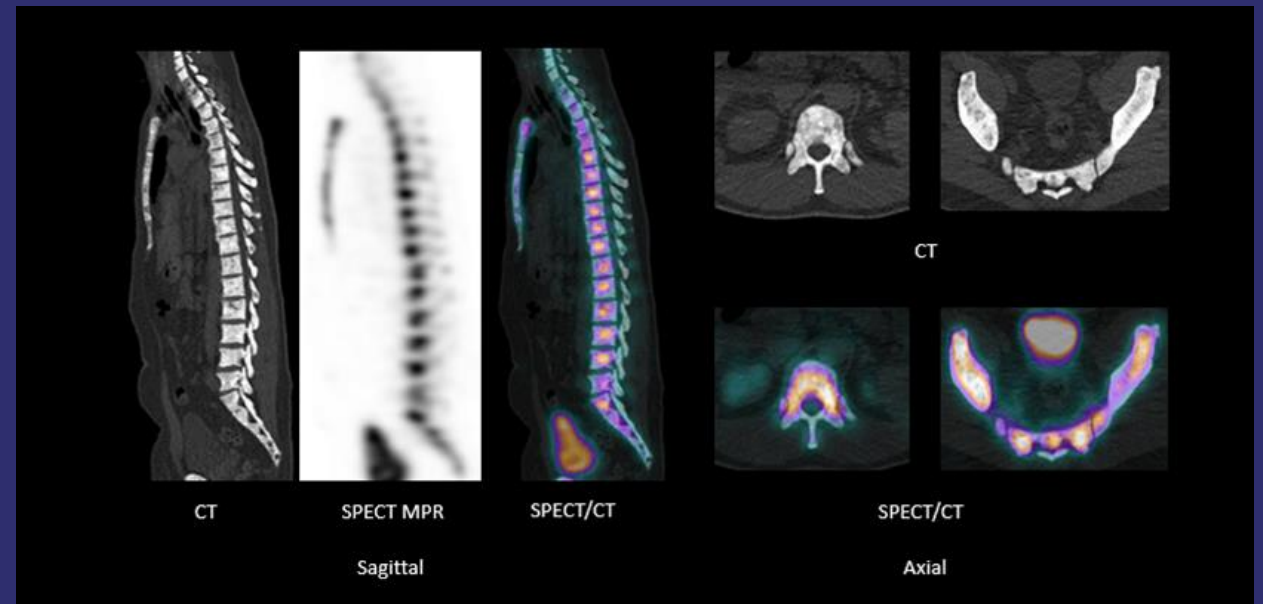


- Single plane images.
- Poor resolution
- Limited functionality

Future Position



- Single plane images with CT
- Increased diagnostic accuracy
- Reduced radiation dose for the patient



Public Assurance Forum

Member Update

Name of Organisation: Healthwatch Shropshire

Name of Member: Liz Florendine

Date: Monday 3rd July 2023

Time: 2pm- 5pm

Location: Microsoft Teams

1. Key updates from member organisation

Diabetes

Diabetes survey has been publicised across the county. We want to hear from people with diabetes or those who have been identified as being at risk of developing diabetes (pre-diabetic) about their experiences of diabetic care and support. We will then share the responses with the NHS and Public Health to help inform the transformation programme and ensure the patient voice is at the centre of development. [Diabetes care and support - share your experiences | Healthwatch Shropshire](#)

Complaints Survey

Complaints survey closed end of May. 78 usable responses were received and the report is being written. We hope to publish this in July.

Market Halls

We visited 5 markets across Shropshire and spoke to over 100 people about their experiences, asking specifically if they had concerns about any particular services. It was a good opportunity to get some detailed, in-depth feedback. The report has been published and is available on our website. [Shropshire Markets - What are you concerned about? | Healthwatch Shropshire](#)

'Because we all care' – GP referrals

The report has been published and NHS Shropshire, Telford & Wrekin have assured us that 'a range of actions will be developed with the new recovery plan to address the issues raised.' [Because we all care – GP referrals | Healthwatch Shropshire](#)

Your Care Your Way-Meeting Communication Needs

We heard from a range of people with communication needs, their families and carers, receiving suggestions to improve communication and the way

information can be provided. Your Care Your Way-Meeting Communication Needs Healthwatch Shropshire Easy read will be available soon.	
2.	Any items for discussion at the Public Assurance Forum from member organisation
3.	Action update from previous meeting (if applicable)
Report by:	Liz Florendine
Date:	21/6/23

Public Assurance Forum	
Member Update	
Name of Organisation: Shropshire Patient Group representative Name of Member: Graham Shepherd Date: Monday 3rd July 2023 Time: 2pm- 5pm Location: Microsoft Teams	
1.	Key updates from member organisation
<p>SPG now has representatives on the Planned & Unplanned, Clinical Support Services and Women's & Childrens HTP Focus groups. We also have a volunteer for the Transport Group when it is formed. They are enthusiastic to contribute to the HTP group moving forward".</p>	
2.	Any items for discussion at the Public Assurance Forum from member organisation
3.	Action update from previous meeting (if applicable)
Report by:	Graham Shepherd
Date	21/06/23

Public Assurance Forum

Divisional Update

Name of Division: Women & Children's

Name of Divisional Lead: Carol McInnes, Director of Operations

Date: June 2023

Time: 14.00-17.00 Location: Microsoft Teams

1. **Key updates from Division**

Gynaecology

- We continue to receive a high number of referrals for gynaecology outpatient appointments. Work is being undertaken with ICS colleagues and primary care to review referral pathways in an effort to address the increase in activity we have seen.
- Performance against the national cancer standard has dropped, with patients waiting longer to be seen and treated than planned for. Work is underway to improve this pathway.
- The Trust Fertility Service has been inspected by the regulatory body for fertility services, formal feedback is awaited.

Paediatrics

- A transformation plan has been established to oversee improvements to our paediatric services. The plan will be overseen by the Trust Medical Director and report through to the Quality and Safety Committee.

Neonates

- New staffing guidance has been published for neonatal units. A gap analysis has been undertaken against this guidance and a business case to address the gaps identified has been produced. This is in the process of working through system planning processes.

Maternity

- Delivery against the Ockenden action plan is ahead of plan.
- International recruitment for midwifery staff is underway, this will help add some resilience to our workforce plan and will also help us to create a more representative and diverse workforce.
- A piece of work has been launched focusing on ensuring our maternity service delivers the best outcomes for BAME members of our local communities.

2. **Update on any current or future service developments or changes**

- Planning for 2023/24 is underway based on national priorities for all services.
- Work continues with a project group to look at the hysteroscopy pathway with a focus on patient experience incorporating pain management.

3. **How is the Division going to involve patients/public in the next quarter?**

1. **Continued partnership and engagement work alongside our MVP colleagues for our maternity and neonatal services. Areas of focus include -**
 - Continued development of the competency framework for midwives – MVP supporting with this by focusing upon community engagement to capture service user experience, to produce video case studies for the training package

- Community – peri-natal mental health provision, receiving a number of DNA's – the MVP are helping with marketing the service, supporting referral process (clarify the service provision for our women)
- Continued implementation of the '15 steps' programme for maternity across our service areas
- MVP support to anaesthetics team regarding the process and information for C-Sections continues
- Social media led project – patient admission information continues (top tips)
- Support for pelvic health project continued with MVP/ volunteers – referral form has gone live, feedback to be sought

Gynaecology

- PACE group in place – looking to increase the participation numbers and increasing diverse representation via primary care (communication and bookings first priority, will seek engagement hysteroscopy pathway work)

4. Action update from previous meeting (if applicable)

- MVP volunteers have re-reviewed the birth preference card and provided feedback – a revised version has now been produced and is in place
- MVP presentation for preceptee midwives delivered as part of their induction programme
- A volunteer has provided support with induction of labour video's, this is now live
- MVP link for EPAS – feedback was received regarding the clinical appearance of the unit, murals were purchased following feedback, these have now been fitted
- MVP volunteers have supported with antenatal education information by reviewing content on pilot information prior to 'go live'
- Preceptorship midwifery briefing has been filmed by MVP

Report by: Carol McInnes

Date 20/06/23

Public Assurance Forum

Divisional Update

Name of Division: Emergency Medicine

Name of Divisional Lead: Laura Graham

Date: Monday 3rd July 2023

Time: 14.00-17.00 Location: Microsoft Teams

1. Key updates from Division

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

As shared last month the Division has rolled out a ward process improvement programme across all Medical wards. This is focused on bringing our discharges forward to earlier in the day and in doing so improving patient experience. We have seen tangible benefits through a reduction in time patients are spending as an inpatient in our hospitals and patients being discharged earlier in the day. We will continue to build on this progress over the coming months.

The Division embarked on a three-year improvement programme, focusing on our Emergency Departments, last October. Led by our clinical teams this programme is improving the care and experience of our patients accessing our Emergency Departments. This month we welcomed PACE panel member Dawn to our assurance meeting that oversees the delivery of this programme, ensuring positive change is embedded. Her insights, questioning and challenge were hugely valuable and we look forward to her continuing input throughout the journey of this programme.

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

Work continues to prepare for the relocation of the PRH renal dialysis unit to Hollinswood House in the autumn. Patients/public will continue to be involved in this project and our PACE panels across the Division. It is hoped that we may be able to hold an open day to allow patients to visit the Unit before it's official opening subject to us being able to satisfy health and safety requirements.

3. Action update from previous meeting (if applicable)

Report by:	Laura Graham, Divisional Director of Operations
Date	27/06/23

Public Assurance Forum

Clinical Support Services Divisional Update

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

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

Date: Monday 3rd July 2023

Time: 14.00-17.00 Location: Microsoft Teams

1. Key updates from Division

Workforce:

Significant work on our recruitment and retention plans continues across the Division including international recruitment, apprenticeships, “golden tickets” for final year students, recruitment events and introducing new roles and ways of working such as Pharmacy Technicians and Reporting Radiographers.

In this way we have been successful in recruiting into some notably hard to fill vacancies such as radiographers, sonographers and physiotherapists and we will have stable staffing positions in these areas from July / August when our newly qualified band 5’s will join our teams.

However, we continue to have less success in the nationally recognised shortage professions of Pharmacists, Speech & Language Therapists and Occupational Therapists and we continue with every effort possible to fill these vacancies.

An integrated Shropshire, Telford & Wrekin workforce plan to counterbalance the movement of Pharmacists into the Primary Care Networks has been approved by the Integrated Care Board and will hopefully result in joint appointments and rotational posts.

Service performance against notable standards:

Current Diagnostic Management Standard 1 (DM01) performance (May 2023):

The DM01 standard requires that only 1% of patients should wait over 6 weeks for a diagnostic test. Our imaging performance is on an overall improvement trend:

- MRI - 90%
- CT - 98%
- Non-obstetric Ultrasound - 66%

We are making steady progress in reducing our backlogs created during the pandemic through a wide variety of ways including the use of mobile CT and MRI scanners, waiting list initiatives, insourcing and outsourcing to create additional capacity for reporting, new ways of working such as Reporting Radiographers, home reporting equipment and improved staffing levels.

Therefore, our CT and MRI outpatient recovery trajectories show both services will recover the DM01 standard of 99% by July 2023.

Non-obstetric Ultrasound DM01 recovery is expected by January 2024. Regionally, all Trusts are reporting issues with recovering the DM01 standard for non-obstetric ultrasound and none are achieving this yet.

Breast Screening:

- Recovery of breast screening round-length (defined as the time between the previous screening test and being offered another examination should not be longer than 3 years) and time to results (target of 2 weeks) is now consistently at pre-pandemic levels: both at 98.8% in May (target 95%). The Team have won the SaTH Improvement Award 2023 for reducing the backlog of over 17,000 patients, demonstrating a high degree of public engagement and involvement with colleagues.
- The Department of Health and Social Care has awarded SaTH £384,000 to purchase a mobile breast screening unit and screening equipment which will replace the oldest mobile unit (12 years old) over the summer months.
- “NetCall” text reminders for appointments – implementation is on-going with our IT Department’s support and will happen in approx. 6-8 weeks. Once embedded for Breast Screening appointments this will roll out to support other outpatient appointments across the Division e.g. radiology and therapies and in this way we hope to reduce “DNA” rates (patients who do not attend and do not tell us in advance).

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

The total number of urgent patients waiting beyond the standard of up to 2 weeks at the end of May has now reduced to 61 patients.

The total number of routine patients waiting beyond the standard of up to 6 weeks has significantly decreased from nearly 2,000 to 179 patients.

Blood transfusion:

Over recent months we have been reporting that the NHS Blood Transfusion Service had issued an alert for stock levels of red blood cells and platelets, however with effect from the 1st June 2023 this alert has been removed.

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 has established a Patient Experience Group reporting to the Patient and Carer Engagement Panel (PACE) chaired by the Acting Deputy Divisional Director with membership from across all 4 Centres and a growing number of patient engagement representatives including our Lead Chaplain for the Trust. We are keen to have at least 1 patient engagement representative working alongside each of our Centres – Radiology, Pathology, Pharmacy and Therapies and our recruitment campaign continues.

The early work of this new group has been to develop a patient and carer involvement and engagement strategy and action plan specifically for our areas. From our strategy the first 2 actions we are working on are:

- 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.

- Carrying out assessments of our environments visited by our patients e.g. reception areas and treatment spaces. We are using a simple tool called “The First 15 Steps” designed by the mother of a young child who needed to use many hospital services during her early years, and the mother said she knew within the first 15 steps whether the care that would be provided to her child would be safe and caring. We are setting up small groups including our patient engagement representatives to go and visit each other’s departments to carry out these assessments and make recommendations.

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

New Community Diagnostics Centre (CDC) in Telford:

This project is to develop a Community Diagnostic Centre at Hollinswood House in Telford. It forms part of a national programme of work to increase access to diagnostic tests in the community.

The CDC will have a CT and MRI scanner and a Phlebotomy service for 250-300 patients / day and the ability to carry out certain types of blood tests (Monday to Friday).

The expected operational date for the CDC is from mid-autumn this year as a huge amount of building work has to happen first to convert Hollinswood House into a healthcare facility and we are continuing to recruit to the additional staff needed. Good progress is being made with both.

Once the building has been handed over and is safe to visit, we are going to take a group of patient representatives around the building to advise us on the environment and the patient’s journey.

New Therapy Service for Neonates:

We have been successful in a bid for Ockenden funding to introduce Dietitians, Occupational Therapists, Physiotherapists and Speech & Language Therapists into the Neonatal Unit at PRH and recruitment is currently underway. They will provide a critical role in supporting the developmental stages of these very premature babies. Our new Neonatal Clinical Lead Occupational Therapist and Dietitian have just started and they are working on integrating with their new multi-disciplinary colleagues and developing an understanding of the unit, its processes and practices and areas for development. We are planning to use feedback from families to inform how we develop this new service.

Musculo-skeletal (MSK) Transformation Programme:

This programme involves the 3 local NHS Trusts (SaTH, RJAH and SCHAT) in developing an integrated pathway from GP referral to surgery if required, including post-operative care.

The first phase started in February to introduce a single Referral Centre and triage process leading to conservative management mainly via Physiotherapy and Occupational Therapy with patients able to attend any of the 3 Trusts and for the first time since the pandemic our waiting times have reduced to under the target of 4 weeks.

The programme is led centrally by the Integrated Care System (ICS) who have an engagement strategy encompassing staff and patients.

The Macmillan Integrated Therapy Service now has a series of “tiles” within the SaTH Cancer App. This is an exciting opportunity to develop and provide information for those living with cancer, as part of the personalised care agenda. Specific information has already been added for Dietetics and Speech & Language Therapy, with Occupational Therapy and Physiotherapy following a similar format, including videos to help with managing side effects of treatment, and links to Macmillan / signposting to a range of organisations and services across health and social care. This project is a great example of partnership working with the Trust’s Macmillan Cancer Information Centres and as we develop the tools, we will be working with patient representatives within Cancer Services

in order to get their views on how to navigate around the “tiles” from a patient’s perspective.

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

Note: The gamma camera at PRH which is used only for children, will continue to operate as normal whilst the Women’s & Children’s department remains at PRH.

**Nuclear medicine uses very small amounts of radioactive material (radioisotopes) inside the body to see how organs or tissues are functioning in order to make a diagnosis or to target and destroy diseased or damaged tissues in order to treat certain conditions including cancer. It uses about the same amount of radiation as a normal x-ray. The gamma camera is used to produce images of the radioisotopes.*

Our new Discharge Medicines Service (DMS) has been set up to provide an important link between hospital and community Pharmacists to support the safe management of medicines after discharge, avoid over-prescribing and avoid re-admissions due to any complications with medicines after discharge.

The new team presented a poster about the service at the National Clinical Pharmacy Congress in May 2023 with a lot of positive feedback and other organisations have been in touch to discuss their work. We will be gathering patient feedback about the new service to inform its further development.

And finally.....just one example of the great comments we receive about our services, this time involving a patient with a learning disability who was frightened to have a blood sample taken:

Our Phlebotomy Service received a compliment from the Community Learning Disability Nurse who emailed “*Can I just say a big thank you for successful bloods for this chap today, as I understand it he was “putty in the nurses’ hands”. The support staff have said that the way they were with him put him at ease and he was really compliant. Obtaining bloods for our client group is often tricky and this has taken 5 months to achieve. It is a great example of joint working and reasonable adjustments to ensure such a successful outcome for him.*”

3. Action update from previous meeting (if applicable)

All covered in updates above.

Report by:	Dianne Lloyd
Date	21.06.23

Public Assurance Forum

Divisional Update

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

Name of Divisional Lead: Andrew Evans *on behalf of Lisa Challinor*

Date: Monday 3rd July 2023

Time: 14.00-17.00 Location: Microsoft Teams

1. Key updates from Division

Division fully supporting and engaged with the CareFlow system

ENT/Max Fax/Ophthalmology

- Additional funding from Cancer Alliance to support Max Fax Cancer patients
- Paediatric Ophthalmology wait time reduced to less than 6 weeks
- Electronic triage for Otology patients 1st April

Theatres

- Social media campaign and open day at PRH to recruit theatre staff was a success
- Elective Hub work streams continue
- Bespoke leadership and coaching training now being undertaken within the PRH Theatre department (developed by own team)

Sterile Services Department

- New washers and autoclaves have been installed

Patient Access

- The team have now validated circa 12,000 patients via Netcall in line with NHSE directive to validate all patients who have waited over 12 weeks for an OP appointment 8,000 responses were received via Netcall and the remainder contacted were contacted via telephone – this is an ongoing process

MSK

- Proposal to redesign Tier 1 and Tier 2 rotas has been put forward to executive team/ICB. This will see a significant uplift in the number of doctors on each site

2. Update on any current or future service developments or changes

HTP planning and engagement with the public continues across the Division

ENT/Max Fax/Ophthalmology

- Introduction of aqueous shunts or Glaucoma drainage services pending approval by commissioners
- New 2WW proforma for Head and Neck approved via ICB/ICS implemented as of 1st January
- Business Case in progress for 6th Max Fax Cancer Consultant
- Appointment of 9th ENT fixed term contract consultant – start date August 2023

Theatres

- Robotic surgery to commenced in May at RSH Theatres

Radiotherapy

- waiting area – feedback from patients regarding the waiting area and improvements to the environment which could be undertaken to make it a better patient experience

MSK

- Trauma Working Group formalised to implement the move of trauma to RSH in line with GIRFT recommendations and HTP
- Ongoing mutual aid discussions with ROH to support hip replacement surgery

3. How is the Division going to involve patients/public in the next quarter?

- New patient representatives have joined the Patient and Carers Experience group and will attend monthly meetings. Observe and act sessions will be arranged with the Elective Surgery Hub, T&O wards, fracture clinics and plaster rooms

4. Action update from previous meeting (if applicable)

Report by:

L Challinor

Date:

20/06/23

Public Assurance Forum

Divisional Update

Name of Speciality: Patient Experience

Name of Speciality Lead: Ruth Smith

Date: Monday 3rd July 2023

Time: 14.00-17.00 Location: Microsoft Teams

1. **Key updates from Division**

Patient Experience

The Chapels within the Trust have registered as Safe Places, providing a safe space for anyone who may feel vulnerable, frightened, or in need of support. Members of the Chaplaincy Team have joined Speciality Patient Experience Groups, providing additional insight and support to the work streams.

Patient representatives working with the Trust were invited to attend an Improvement conference, providing oversight of work undertaken across a range of wards and departments to support improvement. Patient partner attendance at the event was welcomed, providing a valuable insight into discussions.

A range of activities were supported during Experience of Care Week examples of these are:

- Patient feedback was shared with a wide range of Wards and Departments.
- PAT dogs visited patients across the Trust, engaging patients and carers.
- The Trust supported NHS England in delivering two online workshops sharing work undertaken within Chaplaincy and Reconditioning.
- Two patient representatives helped mark the week through sharing reflections on their experiences of working with the Trust to support patient experience improvement work.
- Wards and Departments were recognised for their achievements in gathering and receiving positive feedback. Certificates were awarded under a range of categories.
- The Co-Chair patient representative of the Patient and Carer Experience (PaCE) Panel attended an NHS England conference in London. This provided an opportunity to learn and share best practice initiatives with NHS Trusts across England.

The Quality Team have been working with the clinical teams to raise awareness on reconditioning and the benefits associated with maintaining movement and activity when in hospital. A range of ways to keep active have been introduced across the Trust, recent examples include Easter and Coronation activities, with a visit from Mr Motivator to help raise awareness amongst patients. Patient feedback has been positive, and the Trust was recently recognised for the work undertaken as being in the top three Trusts nationally for their achievements, and first place regionally.

Patient Safety

The Patient Safety Incident Response Framework is due to replace the current Serious Incident Framework (which outline how NHS organisations should respond to and investigate serious patient safety incidents) in September 2023.

It is focused on four key aims:

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

We have moved out of the 'diagnostic and discovery' phase where we assessed our current readiness to respond to PSIRF with a variety of stakeholders including patients and families who had been involved in investigations.

We are now moving to the phase where we begin to bring together the design of our response to PSIRF which will ultimately lead to the development of our Patient Safety Incident Response Plan and our PSIRF policy.

We have a PSIRF away day on the 28th of June with both SaTH staff and external colleagues and stakeholders which will be used to shape our plan for PSIRF.

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 Experience

Involvement of patient and carer representatives will continue through involvement of patient partners on the Patient and Carer Experience (PaCE) Panel, Speciality Patient Experience Groups, Patient Information Panel, Independent Complaints Review Group, Trust Food Group, Letter's Task and Finish Group, recruitment, Patient Led Assessment of the Care Environment (PLACE) group, Exemplar assessments and a range of other activities.

To provide patients accessing the Emergency Departments with increased opportunities to provide feedback on their experience of care, the introduction of text (SMS) Friends and Family Tests (FFT) will be piloted for a 6 month period.

The Communication Team are meeting with patient representatives to identify what matters to them to feed into the development of a communication strategy for the Trust.

The Mental Health Lead Matron has worked with patients and carers to develop a Learning Disability charter, this is to be rolled out during quarter two 2023/2024.

Patient Safety

The outputs from the 28th of June 2023 will be used to engage with the wider community to further design our PSIRF response.

The Patient Safety Specialist is requesting support from the PACE panel to review our thoughts on PSIRF and help shape the final PSIRF plan.

An opportunity has been identified with Healthwatch colleagues to utilise an ICB level user experience forum to particularly review and challenge our proposals on the compassionate engagement and involvement of patients and families in incident investigations.

Further thoughts on co-design from the Public Assurance forum would be appreciated.

3.	Action update from previous meeting (if applicable)
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The Trust is continuing to recruit patient representatives to support newly formed Speciality Patient Experience Groups. If patient or carer representatives would be interested in becoming a group member to support improvement work, information is available on the Trust website: Speciality Patient Experience Groups - SaTH	
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Report by:	Ruth Smith – Patient Experience Pete Jefferies – Patient Safety
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Date	23 rd June 2023
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Approach to building a Communications Strategy Public Assurance Forum

3 July 2023



Building a Communications Strategy

- Communications affects **everyone** – we all have a role
- The Trust has an **ambitious long-term strategy** for transformation and improvement – good communications are essential in the delivery of our priorities
- The Communications Strategy is **part of a suite of strategies** that aligns with the **Trust's overall Strategy**. It will:
 - Provide a long-term **strategic direction** for Communications (five years)
 - Act as a **key enabler** to delivering the Trust's overall aims and priorities
 - **Support** our:
 - Service users
 - Carers and families
 - Seldom heard groups
 - Colleagues
 - Partners



Key principles

As part of this listening phase, we want to build some key principles that everyone can commit to.

Here are some suggestions based on what we have already heard...

Real people

Proactive relationships

Person centred

Commitment to two way communications

Valuing our people

Digital first

Accessible

Value for money

Visible leadership through communications

Enabling the Trust's reputation to move towards Good and aspiring towards Outstanding

Targeted and impactful



Our approach

Summer 2023 – listening phase

- Reviewing existing intelligence – complaints, patient feedback surveys, engagement feedback
- Seeking the views from existing groups: PAF and PACE panels, our staff networks/unions
- Survey to capture general experiences of corporate communications
- Roadshows in the canteens at PRH and RSH to listen to staff and service users
- Dedicated focus groups on specific issues (as needed), for example intranet, website

Autumn 2023 – approval and implementation phase

- Sign off by the Trust for the Communications Strategy
- Targeted discussions to build action plan and key milestones
- Implementing an action plan for year one and a forward plan for key priorities
- Agreeing measures to evaluate progress



Seeking to understand

- What is currently working well?
- What could be improved?
- What matters most to people (priorities)?
- What channels are most effective/could be improved?
- What channels should we invest in for the future?
- How accessible are our communications?
- How can we best use technology?
- How can we ensure our communications are person-centred and compassionate?



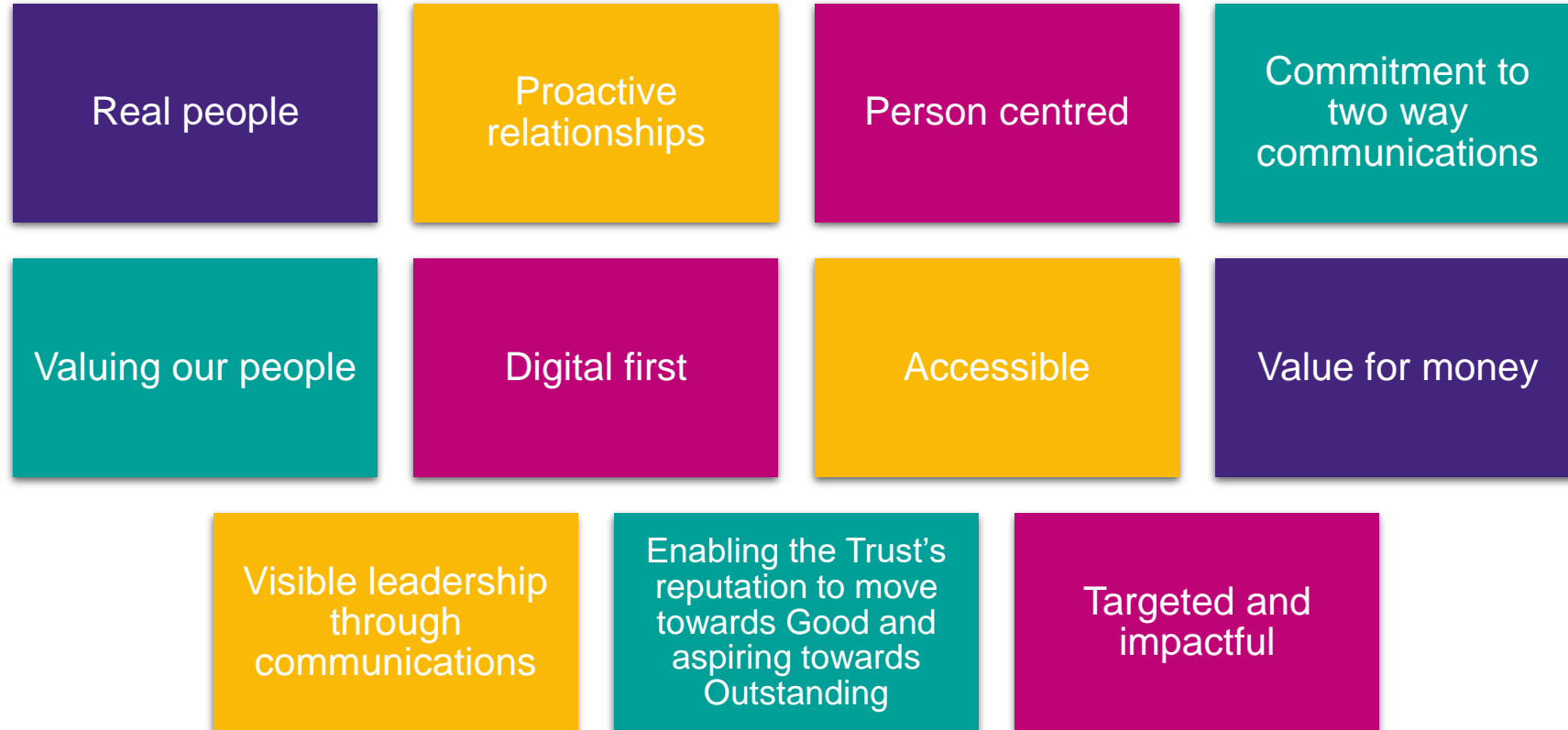
Discussion

Considering the Trust's approach to communications...

- What works well?
- What can we improve?
- What should our top priorities be for the next five years?
- What does success look like?



Are these the right principles?

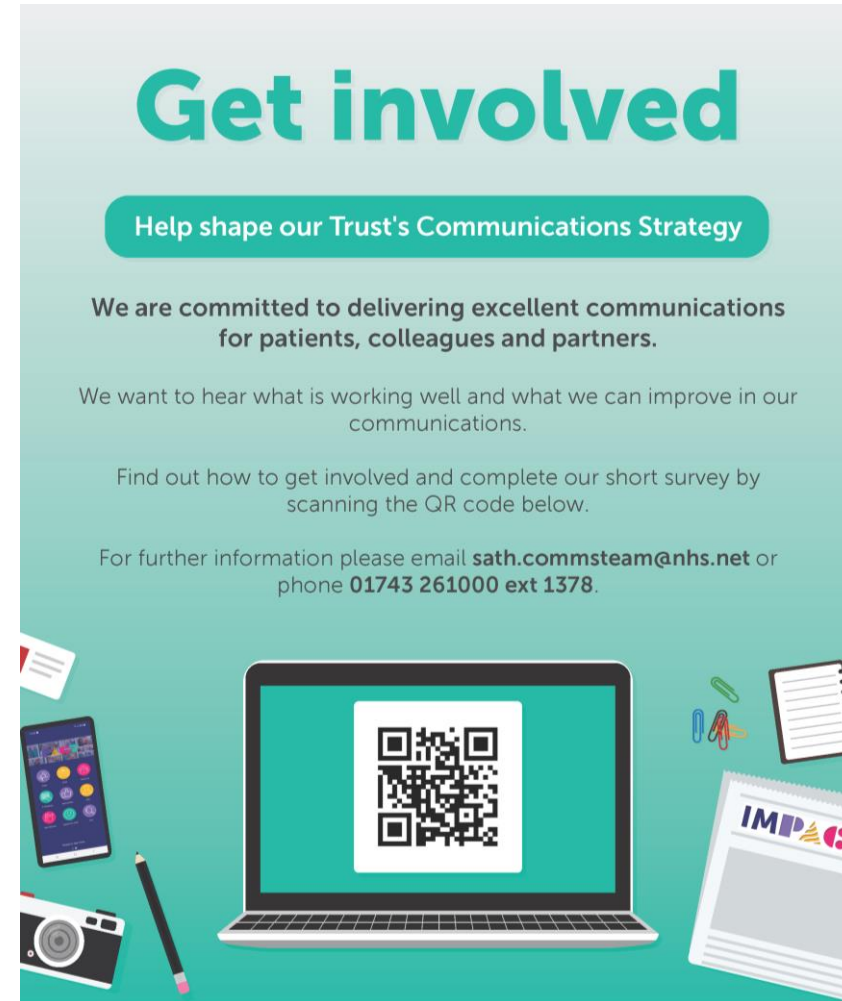


Are there other principles?



Get involved

- Follow our website for the latest information
- Complete our survey (once live) and please share with your networks
- Attend webinars/focus groups
- Email us at sath.commsteam@nhs.net



Get involved

Help shape our Trust's Communications Strategy

We are committed to delivering excellent communications for patients, colleagues and partners.

We want to hear what is working well and what we can improve in our communications.

Find out how to get involved and complete our short survey by scanning the QR code below.

For further information please email sath.commsteam@nhs.net or phone 01743 261000 ext 1378.





The Shrewsbury and
Telford Hospital
NHS Trust

Thank you for listening



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

Supplementary Information Pack

Agenda item

2023/38 i. Public Participation Plan: 2023/24 Action Plan Update **Page 1-5**

2023/38 ii. Draft Public Participation Quarterly Board Report **Page 6-29**

Public Assurance Forum: 3 July 2023

Agenda item	2023/38 (i)		
Report Title	Public Participation Department Priorities 2023/24		
Executive Lead	Julia Clarke, Director of Public Participation		
Report Author	Hannah Morris, Head of Public Participation		
CQC Domain:	Link to Strategic Goal:		Link to BAF / risk:
Safe	Our patients and community	√	BAF 9
Effective	Our people		
Caring	Our service delivery		Trust Risk Register id:
Responsive	Our governance		
Well Led	Our partners	√	
Consultation Communication	Public Engagement throughout 2021 Approved by Trust Board October 2021 Regularly presented to PAF at quarterly meetings and SaTH Charity to Charitable Funds Committee meetings		
Executive summary:	<p>The Forum's attention is drawn to the Appendices which outlines the Yearly 'Plan on the Page' for Community Engagement, Volunteers and SaTH Charity</p> <p>The plan for community Engagement and Social Inclusion link to our Public Participation Plan which outlines how we will work with our local communities over the next five years and was approved by the Trust Board in October 2021</p>		
Recommendations for the Public Assurance Forum:	<p>The Public Assurance Forum is asked to:</p> <p>NOTE The Activity completed by each of the areas during Quarter 4</p> <p>This report is provided for information only.</p>		
Appendices:	Appendix 1: Plan of a Page for Community Engagement, SaTH Charity and Volunteers		

1.0 Introduction

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

2.0 Risks to the project

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

Areas of Focus

- **Individuals from the communities we serve in** Shropshire, T&W and Powys)
- **The wider public** individuals who have an interest in a specific area or condition e.g. maternity.
- **Patients and Carers** whose interest may be specific to a service or may have a wider remit.
- **Statutory Bodies e.g.** Healthwatches, CHC, H&WB, Joint Health Overview and Scrutiny Committee.
- **Staff** Our Trust workforce.
- **Voluntary Organisations** the VCSA sector has a deep reach into our communities.
- **Patient groups** of all interests.
- **Other Health and Social Care Organisations e.g.** ICS, Shrop Comm, RJA, primary care, social care etc.
- **Seldom Heard Groups and their advocates.** Young People; LGBT+; BAME; Gypsy & Travellers; Faith Groups; Carers; Addictions; Learning Disability; Refugees/asylum seekers; Homeless; Armed Forces Veterans; Disability.
- **Methods of Engagement**
- **Partnership** working with VCSA groups, representatives and forums. Contact community leaders, establish ongoing relationships through building trust. Articles for relevant newsletters. Liaison work with advocates, engage with local authorities and other statutory bodies.
- **Attending** events, conferences and other significant meetings, festivals, celebrations and activities relevant to the communities we serve, and where we can increase inclusion by offering a range of involvement opportunities.

SaTH Community Engagement Action Plan 2023/2024



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



The Shrewsbury and Telford Hospital
NHS Trust

Strategic Aims

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

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

Desired Outcomes

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

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

Q1	Q2	Q3	Q4	General Notes
April—May—June 2023	Jul-Aug-Sep-2023	Oct—Nov—Dec-2023	Jan—Feb—March-2024	Quarter 1 Update
<p>Outreach Work in areas of health inequalities</p> <ol style="list-style-type: none"> 1. Further develop links with Public Health in local councils to identify community groups in areas of focus 2. Network with community groups and organisations and identify additional networking opportunities 3. Attend community events in identified areas, provide clear purpose of attendance (working with Town & Parish Councils) 4. Attend events during Pride month (June) to raise profile of SaTH Involvement with LGBT+ communities 5. Review and develop People's Academy for 2024 6. Deliver People's Academy course, and bespoke People's Academy day in Woodside Telford 7. Recruitment of General Practice contacts as Community Members 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. 	<p>Recruitment of new Community & Group members through NHS 75</p> <ol style="list-style-type: none"> 1. Promote NHS75 through outreach work across Shrops, T&W, mid Wales, particularly focussing on areas of social deprivation and health inequalities 2. Attend community events to engage local population and recruit community members—focus on areas identified in Q1 3. Outreach with addiction and homelessness support organisations 4. Deliver hybrid People's Academy course 5. Attend Freshers' events at colleges/universities across Shrops, T&W and mid-Wales (supported by SaTH Volunteer team) 6. Recruitment of Opticians as Community Members 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>Refresh organisational database information</p> <ol style="list-style-type: none"> 1. Thematic outreach with system partners for World Mental Health Day in October 2. Restart engagement with Gypsy and Traveller communities across Shrops, T&W, mid-Wales after summer break. 3. Outreach with refugees/asylum seekers to promote membership, volunteer and employment opportunities 4. Deliver Online People's Academy course 5. Expand rural network through existing contacts (Powys and Shrops) 6. Identify additional networking opportunities. 7. Recruitment of Dentists/Dental Surgeries as Community Members 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. 	<p>Planning and consolidation</p> <ol style="list-style-type: none"> 1. Develop spring/summer engagement calendar of external events 2. Confirm annual About Health plan and create publicity for distribution 3. Review and develop the People's Academy for 2024 4. Deliver People's Academy course. 5. Recruitment of Pharmacies as Community Members 6. Provide support for Hospitals Transformation Programme 7. Deliver About Health events 8. Work with the divisions to ensure they meet their Section 242 duties. 	<p>Areas of challenge</p> <p>In response to feedback received, the online People's Academy has been replaced with a full day face to face course. This allows greater flexibility and the opportunity to deliver the course offsite using remote link up to presenters when required. We delivered an offsite pilot in Woodside in May, and are working with the probation service to provide another Bespoke Academy course in the Autumn.</p> <p>Recruitment of GP Surgery contacts has been increased to include Healthy Lifestyles Advisors, many of whom are actively involved in the Community Connectors networks.</p> <p>Themes for the year</p> <ul style="list-style-type: none"> • Carers • Disability • Learning Disabilities • Children and Young People • BAME • Faith groups • Armed Forces Veterans <p>We are keen to build our connections across the Integrated Care System and will work collaboratively with partners including the ICB, Healthwatch and Llais (formerly CHC)</p>



Stakeholder Groups

A. Volunteers

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

B. Staff

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

C. Public

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

D. Schools, Organisations and Local Business.

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

E. Other Volunteer Organisations.

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

Programme Arrangements

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

Strategic Aims

- To improve the patient journey through a vibrant and effective volunteer programme. To ease pressures on staff and support their wellbeing.
- To work towards maintaining the required number of volunteers to meet the demand from the areas supported by the volunteer service.
- To hold quarterly volunteer focus groups to engage with our volunteer cohorts
- Review requests for new areas within the Trust for support that would receive a positive benefit from a volunteer programme and provide meaningful opportunities.
- To raise awareness of the Trust's volunteering activities with our patients, their families and stakeholders to encourage their engagement with us.
- To provide experience of working in a hospital setting for young volunteers or those looking for a career in the NHS, for example, the NHS Cadets and Young Volunteer Scheme.
- Deliver a successful Volunteers to Careers project in support of growing our own workforce
- Support our staff to effectively manage and support our volunteers while on placement.

Desired Outcomes

- To maintain the number of active volunteers at around 270 during the year
- Ensure those who have completed the recruitment process have meaningful and regular placements.
- To support areas that would benefit from volunteer's support and deliver that benefit.
- To provide 24 positive news stories to support Public Participation
- Organise Making a Difference days to gain the support of local businesses and organisations
- Organise and run 2 Young People's Academies

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

Q1 April – May – June	Q2 July – August – Sep	Q3 Oct – Nov – Dec	Q4 Jan – Feb – March	General Notes Progress against plan Q1
<ul style="list-style-type: none"> Establish a calendar of engagement events with local schools and colleges Develop a communications plan for volunteering to encourage applications. Promote roles in A&E and Discharge Develop a volunteer to career pathway Review and update website content and social media exposure Deliver Volunteers' Week 2023 Identify areas across both sites that require gardening volunteers Review Better Impact as our management platform and implement updates Young People's Academy 	<ul style="list-style-type: none"> Contact local colleges with information on the Volunteer to Career's scheme Engage with fresher's events at local schools or colleges Recruit gardening volunteers to meet any identified need. Review Social Media activity Plan the next Young person's Academy Review Better Impact content (files, templates etc.) to ensure it is current. Review IPC training in light of hospital guidance changes and update as required Active database review Focus Group on selected area 	<ul style="list-style-type: none"> Promote volunteering through the Trust's Peoples Academy Ongoing development of Better Impact Review inactive volunteers Consider lead volunteer roles and how they could be developed to support the volunteer programme Raise awareness to Trust areas the benefit of having Volunteer support and encourage engagement with placing volunteers. Support volunteer recognition event Volunteer Christmas campaign Focus Group on selected area 	<ul style="list-style-type: none"> Volunteer annual survey on the views of our volunteers Develop a plan for 2024/25 Plan for Volunteers' Week 2024 Review Better Impact as our management platform and implement updates Promote roles in A&E and Discharge Focus Group on selected area 	<p>Engagement events have been reduced to meet capacity. Telford Colleges supported.</p> <p>Applications were at high levels and have now been paused to enable them to be processed. Communication plan now on hold</p> <p>A&E roles are now embedded with good level of support at both sites.</p> <p>Volunteer to Career project is a great success with Cohort 1 half way through. It is hoped a second Cohort will take place before year end.</p> <p>Social Media developing with increased interaction</p> <p>Volunteers week a huge success culminating in the volunteer thank you event at Wroxeter.</p> <p>Gardening volunteers currently on hold due to capacity. Successful corporate volunteers days have been held</p> <p>Better Impact is providing insight into volunteer patterns, trends enabling planning for the future</p> <p>A very successful Young People's Academy was held in May</p>



Stakeholder Groups

A. Public

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

B. Local Business and Organisations

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

C. Staff

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

D. Existing organisations providing charitable support

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

E. Volunteers

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

Charity Team

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

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

Strategic Aims

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

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

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

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

To encourage utilisation of funds to support identified need

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

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

Desired Outcomes

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

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

Q1 2022	Q2 2022	Q3 2022	Q4 2023	General Notes
April – May – June	July – August – Sep	Oct – Nov – Dec	Jan – Feb – March	Update on Q1 activity:
<ul style="list-style-type: none"> British Ironworks NHS75 birthday Daisies to go on sale Implement first stage of legacy campaign and link to retirement sessions provided to staff Staff NHS Birthday Thank You Campaign go-live Quarterly Charity Supporters email to be sent Commence gathering information for the Annual report highlighting achievements over the last 12 months NHS Charities Together National Conference Corporate Partnership Planning Development of positive news and engagement stories 12 Complete Stage 3 NHS CT final reports 	<ul style="list-style-type: none"> NHS 75 Birthday Review initial plans for Christmas Quarterly Supporters email to be sent Submit draft copy of the Annual Report for review Promote our Lake Vrywyn Half Marathon Runners Development of positive news and engagement stories 12 Awareness campaign on Staff Lottery Sign Ups Corporate Partnership progress report Summer promotion of Small Things Fund Recruit marketing role supported by NHS CT Development grant 	<ul style="list-style-type: none"> Potential go-live of NHS CT In Memory Campaign 'Spread the Sparkle' Christmas Campaign with Raffle and Christmas Lights Switch On Launch Tree of Lights Quarterly Supporters email to be sent Development of positive news and engagement stories 12 Begin discussions on Fund Plans for 2022/2023 Winter promotion of small things fund Finalise the annual report with accounts Hold workshops for fund advisors, divisional directors and finance leads 	<ul style="list-style-type: none"> Quarterly Supporters email to be sent Development of positive news and engagement stories 12 Push on Staff Lottery Sign Ups Highlight key fundraising activity and planned spend To support staff through the Small Things make a Big Difference Fund. Make sure charity has a strong presence in all areas of the Trust to raise awareness and understanding of the charity. Raise profile of charity through actions on the Public Participation Plan Prepare NHS CT Development grant interim report 	<p>Daisies are now on sale</p> <p>Legacy plan developed, options of staff engagement being explored.</p> <p>Thank you campaign live with 304 applications</p> <p>Charity email sent</p> <p>Foundations of annual report undertaken. Liaising with accounts team for their future input.</p> <p>National Conference attended</p> <p>Database created of local small companies.</p> <p>News stories on target</p> <p>NHS CT Stage 2 and 3 reports on target</p>

Public Assurance Forum: 3 July 2023

Agenda item	2023/38 (ii)		
Report Title	Public Participation Report Quarter 1 (April-June 2023)		
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 Public Participation Plan approved by Trust Board October 2021 Quarterly Action Plans from SaTH Charity, Engagement and Volunteers are submitted to PAF.		
Executive summary:	<p>This paper gives an update on the work of Public Participation (Community engagement, volunteering and SaTH Charity) for Quarter 1 of 2023/24.</p> <p>It is important that the Trust continues to engage and involve our local populations in a meaningful and inclusive way. COVID-19 has impacted on the ways we engage with our local communities; however, it is essential that we continue to have an ongoing dialogue with our communities, and ensure they have opportunities to be involved. This paper outlines how we have engaged with our local communities, an update on our volunteers and SaTH charity and where funding has been allocated across the Trust.</p>		
Recommendations for the Public Assurance Forum:	<p>The Public Assurance Forum is asked to:</p> <p>NOTE the current activity in Quarter 1 across the Public Participation Team</p> <p>This report is provided for information only and to agree items for PAF update to Board(slides 5&6).</p>		
Appendices:	Appendix 1: Quarter 1 Public Participation Report		

1. Introduction

- 1.1 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

- 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 (3648) and organisations (356) continue to increase.
- 2.2 The Public Participation Department 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 public focus groups (aligned to the clinical workstreams) and About Health Events. For more information please see our website: [HTP Focus Groups - SaTH](#)
- 2.3 In partnership with Telford Job Box a bespoke one day People's Academy was held in Telford and was attended by 26 members of the public
- 2.4 Our Social Inclusion Facilitator has been making stronger links with a number of Seldom Heard Groups this Quarter including focusing on rurality/rural deprivation, Armed Forces Outreach, faith and homelessness.

3.0 Volunteers

- 3.1 We currently have 322 volunteers, who have given over 5547 hours of volunteer time in Quarter 4
- 3.2 The volunteer team have successfully been awarded a £25K grant to develop a Volunteers to Careers Programme. The programme will start by focusing on careers within Midwifery. We welcomed our first Cohort of 14 volunteers, to the programme and we are currently recruiting for cohort 2 in the autumn.
- 3.3 1-7 June 2023 was National Volunteers Week. We celebrated volunteering at SaTH throughout the week, which ended with a Volunteer Thank you Event at the Wroxeter Hotel, attended by over 70 volunteers.
- 3.4 We held a focus group to keep volunteers updated with the Hospital Transformation Programme. 22 volunteers attended and it was interesting to hear their views and suggestions, which were fed back to the HTP team

3.5 In Quarter 1 a Young People's Academy was delivered to over 39 young people aged 16-25 years old in Telford.

4.0 SaTH Charity

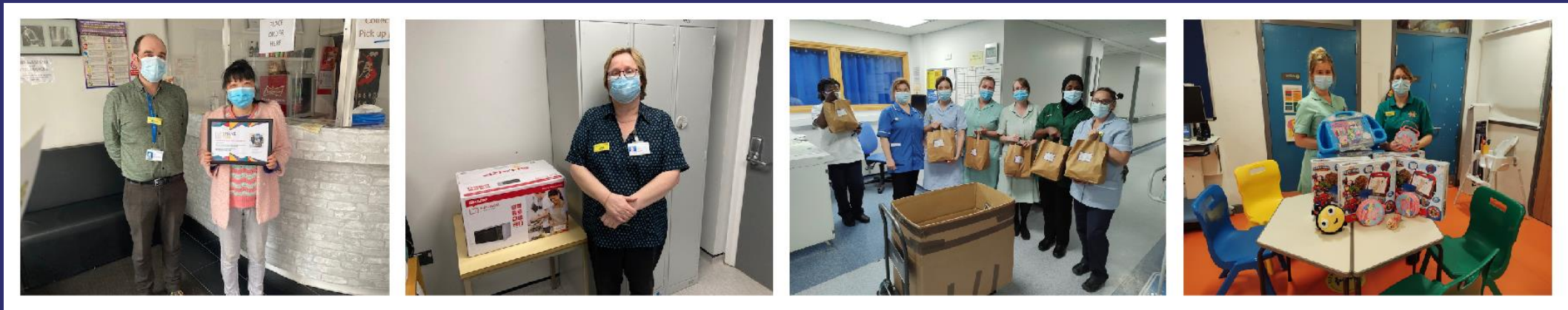
- 4.1 Income for the 3 months of Q1 2023 is £64, 642 and expenditure for this same period was £53,153.
- 4.2 To date we have 1143 SaTH Charity Supporters and 696 members of staff are now playing the staff lottery
- 4.3 To improve the governance and reputational issues, all internal and external post marked as being charitable donations or for a charitable fund, will be sent directly to the fundraising office rather than individual departments from the 1st July 2023
- 4.4 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 (specifically around fundraising and improving the visibility of the charity)
- 4.5 SaTH Charity gave staff the opportunity to recognise a colleague with a specially commissioned NHS 75 daisy from British Ironworks. Over 300 nominations were received. Cards with the citations and daisies will be given to staff on 5th July during the NHS Birthday celebrations. The daisies are also available to but for £5 each to raise funds for SaTH Charity

5.0 Risks to the project

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

Public Participation Report Quarter 1 (April- June 2023)

Julia Clarke – Director of Public Participation



Highlights of Public Participation – Q1

COMMUNITY ENGAGEMENT (for details see slides 7 – 12)

- The Public Participation Department has been supporting our Trust to engage with our local communities on the Hospitals Transformation Programme (HTP). The team has organised a number of events including focus groups (aligned to the clinical workstreams) and an About Health Event
- Due to the pre-election period in Telford & Wrekin, (which ran from end of March up to the local elections on 04 May) the team had to limit their engagement activities within the community for some events but is now reaching out to communities and organisations to involve them in the discussions
- The team continues to build links with our seldom heard communities. In Quarter 1 there was a focus on rurality and rural deprivation, Armed Forces outreach, our multi-faith communities and communities in Powys.
- The engagement team worked in partnership with Telford Job Box, T&W Council to deliver a bespoke People's Academy at Woodside, Telford. It was attended by 26 people across the local area.



Highlights of Public Participation – Q1

VOLUNTEERS (for details see slides 13 – 17)

- We have 322 active volunteers within the Trust who have provided 5,768 hours of their time this quarter across 30+ clinical and non-clinical roles.
- 1-7th June was National Volunteers Week. We celebrated with our volunteers using social media, local radio and our own staff to send our volunteers thank you messages. To end the week a “Thank You” tea party was held for our volunteers at the Wroxeter Hotel.
- We held a focus group on the HTP Programme for our Volunteers; this was well attended and it has been agreed that we will hold regular sessions for our volunteers to keep them updated on the programme
- Our first cohort of “Volunteers to Careers” has started, which focuses on careers within midwifery. A number of employability support sessions have been held for our volunteers. We are current advertising for our second cohort to start in September.
- In October we delivered a Young People’s Academy in Telford to **39** young people aged 16-25, all of whom expressed an interest in pursuing a career in healthcare



Highlights of Public Participation – Q1

SATH CHARITY (for details see slides 18 – 23)

- Income for the three months of Q1 2023 was £64,642 and expenditure for this same period in 2022 was £53,153
- The Trust has successfully bid to NHS Charities Together for £30K. The grant is to support the development of SaTH Charity (specifically around fundraising and improving the visibility of the Charity)
- SaTH Charity have given staff the opportunity to recognise a colleague with a specially commissioned NHS 75 daisy from British Ironworks. Over 300 nominations have been received. Cards, with the citations and the daisies will be given to staff on 5th July during the NHS 75th Birthday celebrations
- To improve the governance and reputational issues, all internal and external post marked as a charitable donations or for a charitable fund, will be sent directly to the fundraising office rather than individual departments from the 1st July 2023



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

COMMUNITY ENGAGEMENT (1): Public Assurance Forum 3 July 2023

- The Public Assurance Forum (PAF) met on 3rd July 2023, with good member representation from community members and divisional teams.
- **External membership of the Forum includes representatives from: Healthwatch Shropshire, Healthwatch T&W, Community Health Council which is being replaced by Llais (Voice) from April 2023, Shropshire Patient Group, Telford Chief Officers Group (COG), Telford Patient First, Maternity Voices Partnership, Shropshire Voluntary and Community Sector Assembly, Powys Association of Voluntary Organisations (PAVO), Health and Wellbeing Board, Montgomery Health Forum.**
- Key Items that were discussed at the Forum included:

COMMUNITY ENGAGEMENT (2): Public Assurance Forum 3 July 2023



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 3600+ members and organisations
- **Community Cascade** – this is delivered twice a month following feedback from the public requesting an additional session in the evening
- **About Health Events**– There is an ongoing series of virtual health events for staff and the public.
- The team have a number of community events which they are planning to attend over July-September, providing the public the opportunity to find out more about SaTH and ways they can get involved
- Many of these events will focus on HTP and provide communities with information on how they can get involved in shaping the delivery of the agreed clinical model



Community Members

Total at 19/06/23 **3648** ↑

Joined in Q1 **145**



Organisations

Total at 19/06/23 **356** ↑

Joined in Q1 **13**



Community Events

Held in Q1 **7**

Attended in Q1 **43**

Getting Involved with HTP

The Public Participation Department 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 the four clinical workstreams. Workstream focus groups have been planned over the next two years which will inform the plans as they develop towards implementation. Following feedback from first set of focus groups in February and March we merged our planned and emergency focus group.
- Two focus groups were held in June for Medicine and Emergency Care with Surgery, Anaesthetics and Cancer and another group for Women & Children's services
- Q&As from both 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](#)
- A “Planning” focus group is being planned to provide more details on the physical design of the buildings to deliver the Emergency Departments, Critical Care and Women & Children's services at RSH
- **Quarterly *About Health HTP* events have been delivered** - our second event for HTP was delivered in May with Matthew Neal-HTP Director, Dr Ed Rysdale-Clinical lead and Meinir Williams-Programme Lead. Future sessions have been arranged on a quarterly basis. The next About Health event is on the evening of **Tuesday 25 July 2023**
- We have supported the Divisions to develop their Equality and Health Inequality Impact Assessments as part of the Outline Business Case

HTP Focus groups

Focus groups are taking place in September directly linked to each of our workstreams

**Medicine and Emergency
Care/Surgery,
Anaesthetics and Cancer**

**7 September
10:00 – 12:00**

Women and Children

**5 September
10:00 - 12:00**

**Clinical Support
Services**

**21 September
11:30 – 13:30**

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 a group for children/young people (Autumn 2023), travel and transport and the new retail space at PRH. A one-off “planning” application focus group will also be held.

COMMUNITY ENGAGEMENT - Social Inclusion

A gap analysis of our seldom-communities has been undertaken and an action plan has been developed with a quarterly update provided to the SaTH's Public Assurance Forum. Areas of focus in Quarter 1 included:

Rurality/Rural deprivation –

We attended Community Connector meetings in Shrewsbury, Ludlow, Albrighton and Bishops Castle, where we are building links with a variety of community organisations.

We had a stand at the annual Market Drayton Health and Wellbeing Festival (26 April 2023) which was well attended by other organisations and the public in North Shropshire enabling them to find out more about getting involved with SaTH and about HTP.

Armed Forces Outreach- Armed Forces Outreach was another area of focus in May and we attended 4 sessions (including the Armed Forces outreach morning) in the lead up to our attendance at Armed Forces Day at Shrewsbury Castle on Saturday 24 June.

Faith - We were invited to take part in Iftar, the breaking of the Ramadan fast, at King Street Mosque in Telford (19 April 2023). This was an important event for the Muslim community which we were delighted to attend with other non-Muslims living and working in the Telford area.

Powys – We went to a Powys Agri Wellbeing Support meeting, these are designed to bring together health and wellbeing services for farmers with the aim of improving their mental health and wellbeing.

Homelessness - We went to Shrewsbury Ark who provide ongoing support and day centre facilities for the homeless and vulnerable in Shrewsbury, to provide support for their final report for the NHS Charities Together Stage 2 grant, and meet the new management team.

SaTH and Job Box People's Academy

The People's Academy at Park Lane Centre, Woodside was attended by **26** individuals from across Telford & Wrekin.

The event included:

- Information about the NHS
- An update on the Hospitals Transformation Programme
- Volunteering Opportunities
- A Basic Life Support skills session
- NHS Careers
- Dementia Friends Awareness

Following the success of this event and feedback from participants, we have reviewed our People's Academy delivery and have moved from four sessions over four weeks to single day delivery in future.



COMMUNITY ENGAGEMENT: Questions from Trust Board meetings

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

- During Quarter 1 **no eligible*** questions were submitted to the Trust Board
- All eligible questions submitted to the Trust Board from the public are published on our website - [Public Questions Log – SaTH](#)

* i.e. relevant to an agenda item and within 10 days of the meeting



VOLUNTEERS - Volunteers' Highlights

We currently have 322 active volunteers at the Trust.

- 1-7 June 2023 was National Volunteers Week. We celebrated volunteering at SaTH throughout the week, which ended with a Volunteer Thank you Event at the Wroxeter Hotel, attended by over 70 volunteers.
- We held a focus group to keep volunteers updated with the Hospital Transformation Programme. 22 volunteers attended and it was interesting to hear their views and suggestions, which were fed back to the HTP team.
- One of our volunteers called John played the organ for a wedding that was taking place on one of the wards at RSH for a seriously unwell patient - John said it was a pleasure to be able to contribute.
- The SaTH Volunteer team were approached by a local Telford company, **DeterTech** who wanted to support PRH through **Corporate Volunteering**. Over three days, 9 volunteers transformed a courtyard. The volunteers finished the courtyard by replanting tubs with bright flowers.
- NHSCT's Volunteer Future Report has been published, which highlighted SaTH's Young Volunteer's project as an area of good practice.

Quarter 1

New applications received

124

Volunteers completed the application process

62

Total Active volunteers

322

Total hours

5,547

Volunteers Week

1st-7th June we celebrated National Volunteers Week. This years theme was 'celebrate and inspire'. Highlights from the week included:

- Julia Clarke and volunteer Mel Amor went on BBC Radio Shropshire to promote the volunteers and volunteering
- Featured volunteer stories on social media throughout the week
- Over 40 staff sent thank you messages to our volunteers which were shared with them and two nurses from ED came to the tea party to personally thank the volunteers
- A "Thank You" afternoon tea for our volunteers was held at the Wroxeter Hotel. The event included:
 - showcase volunteer highlights from the past year.
 - Volunteer certificates and long-service badges
 - SaTH Charity gifted them an NHS 75 keepsake daisy as a thank you.
 - Volunteers representing Lingen Davies and League of Friends were invited as guests, and members of the Trust Board also attended

Impact Statement

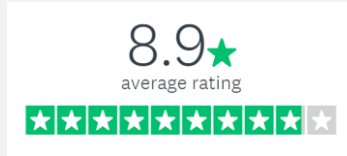
"Thank you so much for yesterday. The afternoon tea was delicious, the company super and the setting perfect on such a lovely sunny afternoon. It was inspiring to hear about all the amazing years of service people have given, and particularly Jean (who happened to be on the table we were sitting on) with her contribution of 29 years, just incredible." – Anonymous volunteer



Annual Volunteer Survey Results 2023

Every year we send out a Volunteer Survey to all our Trust volunteers. We had 125 responses out of 333 active volunteers. A Focus group was held with volunteers to feedback the results.

Q8: On a scale of 1-10, how satisfied are you with your experience of volunteering at SaTH?



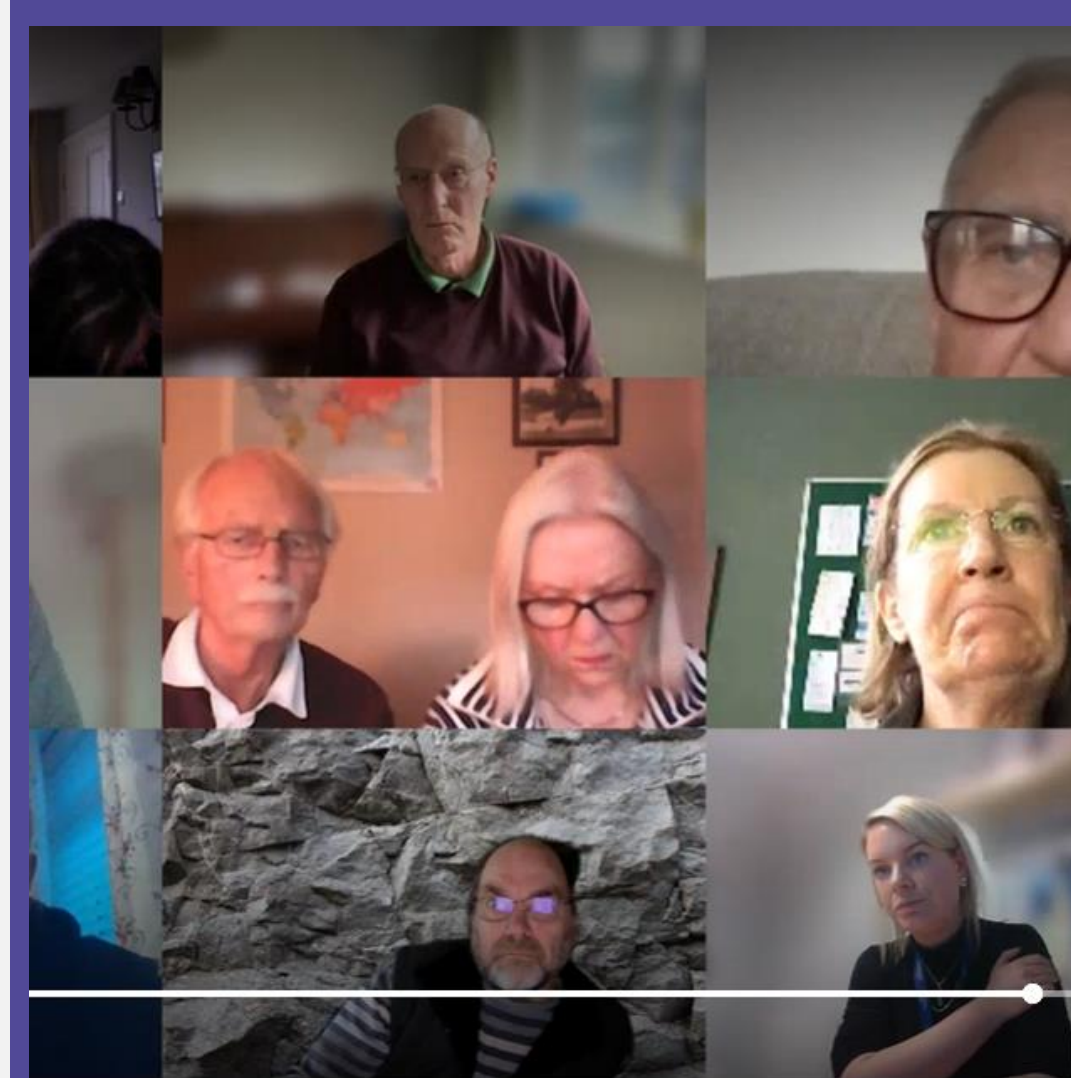
Q11: On a scale of 1-10, how supported do you feel by the Volunteers Team?



Q12: On a scale of 1-10, how welcomed and supported do you feel by SaTH staff when you started your placement?



Any issues raised around volunteering from the survey were followed up by the volunteer team - either with the individual or with the ward/department. The department also holds regular focus groups with volunteers and staff to look at how we *can* improve our volunteer's experience at our hospitals. All new volunteers also receive a "wellbeing" call after four shifts to ensure they are settling in



Volunteer's to Careers- HEE funded Project

The Public Participation Team has been awarded £25k to develop a **Volunteers to Careers programme at Trust**. The project, funded by HEE, aims to create a career pathway for volunteers at the Trust. This programme will start by focusing on careers within Midwifery. **Progress to date:**

- We have received over 100 expressions of interest from people wanting to join the programme
- We welcomed 14 volunteers in our first cohort, these volunteers attended a welcome event on 4th April at the PRH.
- We are currently advertising for Cohort 2 and were invited along to the Maternity Open Day at PRH to talk about the programme- we also recruited three new volunteers from this Open Day.
- We held our first employability support session (on communication and difficult conversations) on the evening of 18th April
- For our second employability support session We were joined by a Senior Practice Education Facilitator and her colleague who was student midwife. During the session the volunteers were able to take turns 'delivering' a baby using the simulation suite and were given the opportunity to ask lots of questions about the student midwife's experiences
- Our Volunteer lead for the project has been asked by HEE to provide a masterclass on the development of our programme to other Trusts who have recently received funding.



VOLUNTEERS -Young People's Academy

The team delivered the Young People's Academy in Telford

39 young people aged 16-25, all of whom have an interest in pursuing a career in healthcare.

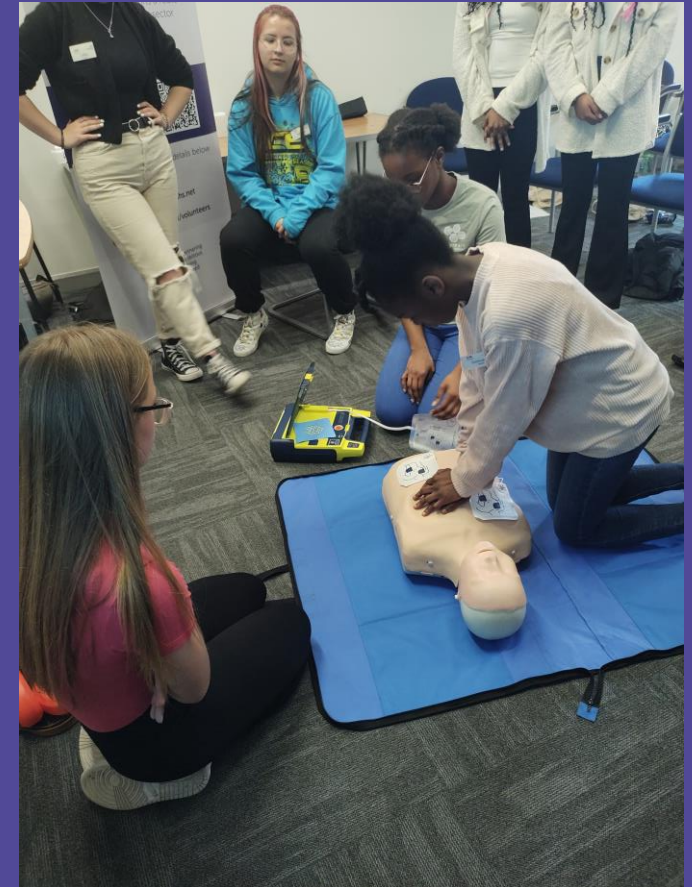
The day included:

- Understanding the NHS
- Volunteering presentation
- A first aid session (provided by St John Ambulance)
- Dementia Friends session
- Getting Involved at SaTH
- Hospitals Transformation Programme
- Routes into NHS Careers – clinical and non-clinical

Feedback from Participants:

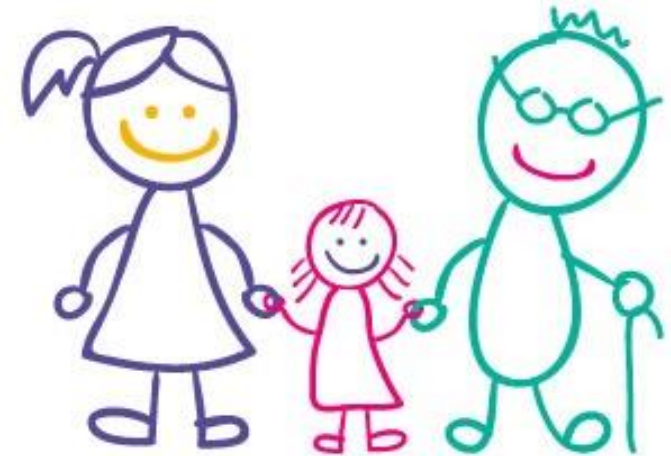
“I want to say thank you for encouraging Young People to be apart of the NHS. It's means a lot to know we are belonged.”

“I thought that the First Aid training was really engaging, as well as it being a really valuable skill to have. The Dementia Friends session was also one of my favourite sessions because I thought that it was really interesting to hear first hand experiences”



SaTH CHARITY - Highlights

- Income for the three months of Q1 2023 is £64,642 compared to £161,880 in the same period last year. Expenditure for the same period was is £53,153 compared to £198,545 in 2022 (which included several large projects)
- In Quarter 1, SaTH Charity had:
 - 92 monetary donations registered on the charity database across 22 different funds
 - 26 donations were marked as 'In Memory' donations
 - 696 members of staff are now playing the staff lottery (from 0 four years ago when it was first introduced by the Public Participation team)
 - 1143 people are registered as supporters (this includes staff and members of the public)
 - To improve the governance and reputational issues, all internal and external post marked as being charitable donations or for a charitable fund, will be sent directly to the fundraising office rather than individual departments from the 1st July 2023



Shrewsbury and
Telford Hospital
Charity

SaTH CHARITY - Highlights

- 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 (specifically around fundraising and improving the visibility of the charity)
- SaTH Charity gave staff the opportunity to recognise a colleague with a specially commissioned NHS 75 daisy from British Ironworks. Over 300 nominations were received. Cards with the citations and daisies will be given to staff on 5th July during the NHS Birthday celebrations. The daisies are also available to buy for £5 each to raise funds for SaTH Charity
- Staff have been invited to apply to run for SaTH Charity in the Lake Vrywy Half Marathon which takes place in September 2023
- For the first time we have been able to secure charity places for the Market Drayton 10k and Shrewsbury 10k runs in 2024. This is part of ongoing efforts to raise the profile of SaTH Charity across our community, leading to increased income and engagement with the Trust.



SaTH CHARITY - Highlights

Impact Statements:

SaTH Charity purchased 100 quick read books for our onsite libraries for staff:

“Thanks for all the hard work ordering the books for our summer “Quick Reads” giveaway to hospital staff. It will be a lovely summer gift for people to take on holiday and read to escape the stresses of work.” **Sarah Rochelle, Library Assistant**

SaTH Charity new CRM enabled us to have an online process for charitable donations):

“Thank you, brilliant service! This is much better system” - **Penny Watson, Swan End of Life Care**

“A sofa bed in the ITU relatives room at RSH will allow patients’ relatives to be able to rest and stay comfortably over night when they are going through a very difficult and sensitive time, with the aim to improve the experience for relatives as there are no sleeping facilities currently.” – **Andrena Weston, Centre Manager**



SaTH CHARITY - Fundraising

- NHS75 Birthday Plans are well underway including the donation of a “Bevan the Bear” from Merrythought bears in Ironbridge to raffle as part of the NHS75 Birthday Celebrations
- British Ironworks have also donated two plaques to mark the King’s Coronation, supplied 6,000 free passes for staff to visit the British Ironworks Centre and provided free tickets to a Reggae event they held on 3 June. They are also calling on other businesses to support the NHS for their 75th birthday year through their networks
- A corporate sponsor, The Works in Shrewsbury sent in another amazing donation of items for the hospitals. This includes books and activities for Children’s services throughout the Trust, as well as for our patients living with dementia
- The charity team supported the Speech and Language and Dietetics Teams by liaising with our Supermarket Community Champions and collecting water and snacks for Nutrition and Hydration Week (pictured)
- The Healthcare Art Club run by one of our doctors for all staff continues to be supported by SaTH Charity.



SaTH CHARITY - Fundraising

- Sally Jamieson held her annual easter event and raised an amazing £505.50 for the Dementia Appeal
- The Shropshire Golf Club raised £1200 for the Children's ward from a club raffle and donated a giant easter egg.
- The research and innovation team at SaTH have raised £603 (and still climbing) to promote their work and raise money for the Research and Innovation Trust Fund so more work can be done. 8 members of the team trekked up Mount Snowdon to raise the funds.
- Ernest Wilkie and fellow residents of STAR Housing's supported living community at Wilkinson Avenue raised £870 for the Haematology Fund
- The family and friends of Ron Haseman raised £3,000 in memory of him as a huge thank you to the service for everything they did for him
- The family and friends of Sanjay Neergheen also raised money in his memory of almost £1,700
- Ian Mair has completed his Moped Challenge to ride his 1967 50cc moped 230 miles over the 10 highest roads in Wales, to say thank you for the treatment of his daughter Kathryn. He has raised £2,461



SaTH CHARITY - Expenditure

In Quarter 1 there were **61** approved requests for charitable funds across 13 different funds. Examples of approved funding included:

- Chairs for family in the bereavement suite on Ward 28 (Elderly Care Patients Fund)
- Sara Steady stand aid and highback chairs used to support and improve the rehabilitation process for patients (Stroke Fund)
- 3 x places at conference for diabetes nurses (Hummingbird Fund)
- Skylights, bags, badges, blankets, cards and many other things for the EOLC team (Swan Fund)
- Room hire for patient safety event at AFC Telford (Talk Safe Training)
- Books for the Neonatal Department (Neonatal Fund)
- Chemotherapy nurse training (Haematology Oncology Fund)
- 2 x Benches for RSH (NHS CT Fund)

Impact Statement:

“Relatives and loved ones who are staying overnight with EOLC patients are offered a comfortable recliner chair to rest in overnight and a fleece blanket if offered also so they can keep warm” - Penny Watson, EOLC Administration Assistant

“The purchase of highback chairs for patients in stroke rehab will help with flow as patients will benefit with improve rehab to get them moving and ready for discharge quicker” – Andrew Parry, Operational Manager - Stroke and Care of the Older Adult

PUBLIC PARTICIPATION - Forward Plan

- The Public Assurance Forum to meet on 9th October 2023 (last met 3rd July 2023)
- 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 planning permission at RSH when it goes live.
- A Young People's Academy and a People's Academy to start in Q2
- Start the NHSCT grant project to support the development of SaTH Charity
- To continue to support staff wellbeing through SaTH Charity
- Attendance at community events to engage with the public



Dates for your diary

Hospitals Transformation Focus Groups			
Date	Time	Event	Booking
Tuesday 5 September	10:00 – 12:00	Women's and Children's	Via email
Thursday 7 September	10:00 – 12:00	Medicine and Emergency Care/Surgery, Anaesthetics and Cancer	Via email
Thursday 21 September	11:30 – 13:30	Clinical Support Services	Via email

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

Following feedback from the People's Academy in May, we have developed a single day People's Academy course to take place in person on our hospital sites. Confirmed dates for 2023:

Date	Time	Venue
Friday 07 July	09:00 – 16:30	Shrewsbury Conference Centre RSH Site
Friday 22 September	09:00 – 16:30	Education Centre PRH



Please register for all events online at: <https://sathnhs.eventbrite.co.uk/>

About Health Events

Held in the evening, our 'About Health' Events are a great way of finding out more about different aspects of health and hospital care, upcoming events can be found below:

Date	Subject
Thursday 29 June	Operational Update
Thursday 06 July	In Conversation with our Windrush Nurses
Tuesday 11 July	PSIRF - Our new Patient Safety Framework
Tuesday 25 July	Hospital Transformation Programme update
Tuesday 26 September	Clinical Audit
Thursday 19 October	Patient Safety Instant Response Framework Update
Tuesday 07 November	Hospital Transformation Programme
Thursday 16 November	Pastoral Support in our hospitals
Tuesday 05 December	Patient Experience

As part of NHS75 we are delighted to confirm our **About Health** event on Thursday 06 July where Julia Clarke (Director of Public Participation) will be hosting a conversation with some of our (retired) nurses from One Voice, Telford & Shropshire Windrush Caribbean Community.

Please send any questions for the ladies to sath.engagement@nhs.net

About Health events are held on Microsoft Teams and take place 18:30 – 19:30.

Please register here:
<https://sathnhs.eventbrite.co.uk/>



Public Assurance Forum meetings 2023/2024

Monday 9th October 14.00-17.00

2024

Monday 15th January 13.00-16.00

Monday 15th April 14.00-16.00

Monday 15th July 14.00-16.00

Monday 14th October 14.00-16.00