

AGENDA

Public Assurance Forum

Date: Monday 14th April 2025

Time: 1pm – 4pm

Location: Microsoft Teams

OPENING MATTERS AND PROCEDURAL ITEMS

Item No.	Agenda Item	Paper No / Verbal	Lead	Require Action	Time
2025/12	Welcome and apologies	Verbal	Co-Chairs	For noting	13:00
2025/13	Minutes of previous meeting	Paper 1	Co-Chairs	For noting	13:05
2025/14	Matters Arising/Actions	Paper 2	Co-Chairs	For approval	13:10
2025/15	Emergency Transformation Programme	Verbal	Mary Aubrey (Director of Getting to Good)/ Claire Dunn (Senior Comms Manager)	For information	13:20
2025/16	Partner's updates	Paper 3	Forum Members	For approval	13:40
2025/17	SaTH Divisional updates on key issues	Paper 4	Divisions	For information	14:00
2025/18	i. Service Change updates on Cardio-Respiratory	Verbal	Dianne Lloyd (Clinical Support Services Lead for HTP and Projects)	For information	14:20
	ii. Service Change Maxillo-Facial	Verbal			14:30
2025/19	Digital Transformation Programme update	Verbal	Sally Orrell (Digital Programme Comms and Engagement Manager)	For information	14:40

2025/20	Update on HTP: - Proposed HTP About Health Public update January 2025 - HTP Programme Board Engagement Report	Presentation Paper 5	HTP team Julia Clarke (Director of Public Participation)	For approval For discussion	14:55
2025/21	SATH Strategy & Partnership update	Paper 6	Carla Bickley (Associate Director of Strategy & Partnership)	For discussion	15:25
2025/22	SaTH Charity five year strategy	Paper 7	Julia Clarke	For information	15:35
2025/23	Supplementary Information Pack i. Public Participation Plan: 2024/25 Action Plan Update ii. Draft Public Participation six monthly Board Report	Papers 8-9	Julia Clarke	For information – to address any comments /queries	15:45
2025/24	Any Other Business	Verbal	Chair		15:55
	Dates for the Forum for 2025 and close of meeting	Paper 10	Chair	To note	16:00

Public Assurance Forum

Held on Monday 13th January 2025
13:00 – 16:00hrs via MS Teams

MINUTES

Present:

Cllr Joy Jones	Powys County Councillor and Chair of Newtown Health Forum (Co-Chair)
Trevor Purt	Non-Executive Director Trust Board
Hannah Morris	Head of Public Participation
Kate Ballinger	Community Engagement Facilitator
Carla Bickley	Associate Director of Strategy & Partnership
Kara Blackwell (part meeting)	Deputy Chief Nurse
Linda Cox	VCSA Deputy
Liz Florendine	Communication & Involvement Officer at Healthwatch Shropshire
Aaron Hyslop	Public Participation Team Facilitator (HTP Engagement)
Graeme Kendall	Centre Manager
Dianne Lloyd (part meeting)	Acting Deputy Divisional Director of Operations – Clinical Support Services
Sean McCarthy	Armed Forces Outreach Support Coordinator - Deputy
Hannah Morris	SATH Head of Public Participation
Lynn Pickavance	Telford Patients First Representative
Jane Randall-Smith	Llais Representative
Graham Shepherd	Shropshire Patient Group Representative
Jan Suckling	HealthWatch T&W Representative
Zain Siddiqui (part meeting)	Deputy Director of Operations - W&C Division
Hannah Warpole (part meeting)	Deputy Divisional Director of Operations – MEC Division

In attendance:

Rachel Fitzhenry	Senior Administrator (Minute taker)
Tom Jones (part meeting)	HTP Implementation Lead
Lydia Hughes (part meeting)	Communications and Engagement Manager HTP
Sarah Orrell (part meeting)	Digital Programme Communications and Engagement Manager
Rachel Webster (part meeting)	HTP Nursing, Midwifery and AHP Lead

Apologies:

Julia Clarke	Director Public Participation
Nigel Lee	Director of Strategy and Partnerships

Item No.	Agenda Item
2025/01	Welcome and Introduction
	Cllr Joy Jones opened the meeting by welcoming the group to the MS Teams meeting and introduced Professor Trevor Purt (SaTH Non-Executive Director) who is now the new Co-Chair for the Public Assurance Forum. Trevor also sits on both the Integrated Care Board's strategy committee and its Audit committee.
2025/02	Minutes of previous meeting (14th October 2024)
	The Minutes of the previous meeting on 14 th October 2024 were approved as an accurate reading.
2025/03	Matters Arising/Actions
	Separate Actions sheet attached.
2025/04	Terms of Reference
	The Terms of Reference were approved as an accurate reading.
2025/05	Partner's updates
	i) Shropshire Patient Group Graham Shepherd gave a brief update on the Shropshire Patient Group (SPG), paper provided: Following the relocation of the main entrance to the Treatment Centre, SPG have worked with the HTP team to further refine the signage, which has now been implemented. Additional wheelchairs have also now arrived. Shropshire Patient group members are also sitting on several Focus groups. The SPG meets monthly with guest speakers from across the various health providers, giving presentations and discussing their roles. Graham Shepherd informed the group, when he was volunteering on the haematology ward one of the nurses mentioned there is no signage for the O'Connor Suite, so patients/visitors have no idea what ward it is on or how to get there. ACTION: Aaron Hyslop to investigate the signposting for the O'Connor Haematology Day Unit.
2025/06	SaTH Divisional Updates on Key Issues
	i) Clinical Support Services - Dianne Lloyd (Acting Deputy Divisional Director of Operations) gave the key updates on current, future developments and changes from the Division, paper provided: <u>Workforce:</u> We are making progress with recruitment within the nationally recognised shortage professions of Radiographers and Sonographers with 6 new Radiographers coming into post and 4 of our trainee Sonographers successfully progressing through their training programmes. Recruitment to Pharmacist and Occupational Therapist positions remains very challenging and every effort is being made to attract applicants for these vacancies

as they have a significant impact upon patient flow through our hospitals and discharges.

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

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

Service performance against notable standards:

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

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

Patient engagement and involvement:

The Clinical Support Services Division Patient Experience Group continues to meet every month. We are delighted to report that we now have five patient representatives, and our meetings are also attended by the Lead Chaplain who also champions the patients' voice.

At the last meeting the group received a presentation on "Gather" which is an interactive tool that pulls together the themes from the Friends and Family Test to provide reports, allow analysis and create action plans and provide feedback to patients in a "you said.... we did" style. Therapies, Radiology and Phlebotomy are very keen to start using Gather and will be taking this forward. "Gather" is software used to get patient's feedback; it is an online method and enables people to use their smartphone or tablet. The QR code can be scanned, also people can go on to the website to access or written cards are available. "Gather" enables people to ask more specific questions about the service and it extends the range of questions and provides instant feedback. "Gather" also helps us to analyse themes to develop action plans. We want to put up notice boards in our outpatient areas, "you said, we did" based on what "Gather" is telling us. It's a much more informative and responsive way of gathering our feedback from our outpatients.

Patient engagement representatives have been involved in some service changes and improvements such as:

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

- Community Diagnostics Centre, Hollinswood House, Telford:

The CDC is now routinely benefiting from approx. 500 patients a month providing their feedback, the vast majority of which is very positive. Funding has been granted for a mobile unit to act as a waiting room adjacent to the mobile MRI scanner in the car park at Hollinswood House and this should be ready for the winter. Also expecting a return visit by the Experience by Design

team to review progress with the action plan identified in January, the majority of which has been delivered.

- Replacement Nuclear Medicine Gamma camera at RSH:
Building work to create a new department for the Gamma Cameral in the new Evolution Scanning Suite started in August 2023 and took approximately a year to complete. Patient engagement is ongoing through the Commissioning Support Service (CSS) Patient Engagement Group, and it is planned to carry out a 15 steps assessment visit / Experienced Based Design survey later this year.
- You Tube video's:
Two videos have recently been posted on You Tube showing the work of two services and have been viewed by the Patient Experience Group as well as at Regional / National professional conferences. They include patient feedback which was very positive about both services.
- The Stroke Therapy Team have set up group work to support inpatient rehabilitation. The team were finalists in the Patient Experience Network National Award ceremony on 3rd October 2024 for showcasing their work which sets new standards in healthcare.

"The First 15 Steps" assessment visits:

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

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

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

In the last month, the teams have visited:

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

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

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

Our plan is to carry out 15 steps visits in:

- Radiology – RSH Treatment Centre MRI and breast scanning
- Phlebotomy at both sites following moves to new locations due to the construction work involved with the Hospitals Transformation Programme:
- At PRH the majority of appointments have now moved from the Mallings's Building to the Community Diagnostic Centre (CDC), which is proving popular with patients and staff alike, particularly as car parking is free and spaces are available outside the CDC.
- At RSH the Phlebotomy service moved from Elizabeth House into William Farr House in September and is still settling into its new location however the decision has been taken to carry out the visit now to make sure the patients

are getting the best experience, particularly in relation to car parking now that the William Farr House Site has building work and a temporary access road.

Lynn Pickavance informed the group, she was involved in the Patient Experience groups in December and the feedback from patients regarding quicker appointments was very good but there is still a delay with results, sometimes up to 13-14 weeks. Patients were happy to hear about the new mobile waiting area. There is lots of good work being done at CDC.

iii) Women & Children's – Zain Siddiqui (Deputy Director of Operations) gave the key updates on current, future developments and changes from the Division, paper provided:

Maternity:

- An Antenatal and Newborn (ANNB) Quality Assurance visit was conducted in the department, with no urgent or immediate recommendations identified. Overall, the visit was positive, and the department has received the draft report for factual accuracy. Recommendations from the report will be monitored through appropriate governance processes.
- Clinical Negligence Scheme for Trusts (CNST) Year 6 progress is on track, with the service making good strides toward achieving all 10 Safety Actions.
- Maternity Services have been recognised as finalists for the Hero Equality Award at the Trust's Celebratory Awards event, highlighting their dedication to inclusivity and excellence.
- The smoking rate at delivery decreased to 5.4% in November, which is an encouraging improvement toward the target rate of 6%. The Healthy Pregnancy Support Service continues to actively support families, and the implementation of *Saving Babies' Lives Version provision of Nicotine Replacement Therapy to further reduce smoking rates during pregnancy.
- Midwifery-led care remains available at Wrekin MLU and through the homebirth service. In November, there were 4 births at Wrekin MLU and 4 homebirths, with 22 transfers to Consultant-Led Care. A Homebirth Lead Midwife has been appointed to establish a new homebirth team, which will support the homebirth service, the Midwifery-Led Unit, and families opting to birth against advice in the community. The team's official launch is planned for March 2025.
- The midwife-to-birth ratio is currently 1:23, which remains within reassuring levels.

Paediatric Services:

- Nurse staffing remains fragile due to increased short-term seasonal sickness absence. Mitigation measures, including encouraging agency staff to join the Trust bank and NHS Professionals (NHSP), are in place to ensure safe staffing levels.
- Activity and acuity within paediatric areas fluctuate in line with other regional units. Activity related to children and young people (CYP) with mental health illnesses or eating disorders has been stable during this period.
- External reviews were conducted for Ward 19 and paediatric specialties, including: Paediatric Oncology Peer Review on 17th October 2024, with positive initial feedback. Getting It Right First Time (GIRFT) Review of Paediatric Diabetes Services on 22nd November 2024, where the national team recognised exceptional participation and representation. The review highlighted workforce needs in medical, youth worker, and psychology roles and the need for collaborative preventative work to address the increasing prevalence of type 1 diabetes. Written feedback is awaited.

- Several colleagues from the Women and Children's Services Division were nominated for this year's Trust Celebratory Awards. Notably, Clinical Nurse Specialist (CNS) Sister Janice Llewellyn received the Shropshire Star Public Recognition Award for her exceptional support to families in her role as a Children's Oncology and Haematology Nurse.

Neonatal Services:

- The Neonatal Post-Acute Care Enablement (PACE) Group continues to evolve, with the Maternity and Neonatal Voices Partnership (MNVP) increasing their support. Recent upgrades include parent flats and plans to refurbish the quiet room, alongside a 15-steps audit.
- Progress on the Neonatal Transformation Workstream (MNTP) is strong, with most actions completed or underway. This includes the recruitment of nursing quality posts and the resolution of the nitric oxide issue with authorisation from the WM Neonatal Operational Delivery Networks (ODN).
- Positive feedback from the Freedom to Speak Up Team highlights engagement and morale in the neonatal area, now supported by a Freedom to Speak Up Ambassador.
- The West Midlands Neonatal ODN peer review on 2nd December 2024 received highly positive verbal and draft written feedback.

Gynaecology Services:

- The Hysteroscopy Transformation Group continues to work on improving service delivery pathways.
- A review of pathways for women with benign conditions has commenced to reduce delays in care.
- Ongoing work on the pessary pathway aims to establish clear collaborative management responsibilities.

Fertility Services:

- Nursing and medical staffing is gradually improving following the introduction of some new working practices, reduced nursing team sickness absence and the appointment of nursing staff on a fixed-term basis to cover absence.

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

Key activities identified by the division include:

- A single delivery plan has been produced in development with the Local Maternity and Neonatal System (LMNS), that now includes both the 3-year maternity and neonates delivery plan, alongside the equality and equity action plan, to reduce silo working and duplication.
- Further investment in the asthma and epilepsy pilot projects (aligned with CORE20PLUS5) by the ICB, has resulted in appointment of a lead nurse and other team members to progress the individual project aims. The Divisional Team are still awaiting the details of the revised project plan.
- Following the systemwide GIRFT review of Children's and 18-15-year-old diabetes care, significant systemwide preventative work is being planned to address the high prevalence of type 1 diabetes throughout the geographical area
- The Interim Director of Midwifery has identified areas for service improvement with good progress being made with commissioned quality improvement projects in: Maternity Triage, Postnatal Ward, Diabetes Service and Antenatal Clinic
- A review of Community Services has identified areas for efficiency, this will be subject to a management of change due to commence in February 2025.

Engagement events are underway with staff groups and collaboration planned with the Maternity and Neonatal Voices Partnerships to support and lead the proposed improvement work.

Kate Ballinger (Community Engagement Facilitator) informed the group, one of our focuses over the next 12 months is going to be diabetes, in terms of information sharing and engagement around it.

ACTION: Kate Ballinger to contact the W&C Division about the diabetes project.

Carla Bickley (Associate Director of Strategy & Partnership) informed the group, that credit that needs to go to the W&C department on some of the transformation, service and redesign work that they're doing around health inequalities. In terms of diabetes, there's a system wide programme that's nearly established. There may be further opportunities to explore the production of the women's health hubs in various neighbourhoods. It would be an action to take outside of the meeting because there will be some potential there for some pathway redesign and further opportunities for our patients and communities.

ii) Patient Experience - Kara Blackwell (Deputy Chief Nurse) gave the key updates on current, future developments and changes from the Division, paper provided:

Complaints:

The Complaints team have continued to work closely with Divisions to improve the length of time that complaints investigations take. Work is ongoing to reduce the backlog of complaints, and there has been a reduction across all divisions alongside a reduction in the time cases are staying open. There is focused work around complaints relating to end-of-life care.

The Patient Advice and Liaison Service (PALS) weekend service is receiving positive feedback in relation to responding to queries in a timelier manner.

Learning Disability and Autism Patient Experience Group:

The Group has now met on two occasions with good representation from key stakeholders within and external to the Trust. The Head of Patient Experience is continuing to recruit patient/carer representatives to the Group. The Group is planning a 15 Steps for Operating Department Practitioners (OPD) with a Learning Disability and autism focus for April 2025.

A new LD and Autism nurse for the Trust will commence in February 2025 with a focus on our LD and autism patient improvement priorities. This person will be a core member of our LD and autism Patient Experience Group and work closely with our LD service commissioned through Midlands Partnership FT who provide this service to the Trust.

PLACE:

Patient Led Assessment of the Care Environment (PLACE) programme for 2024 was completed in November 2024. Priorities identified from last year's PLACE reviews for PLACE Group to address included handrails, Patient TVs, Artwork, and Dementia standards and the Group is undertaking work in relation to these.

PLACE assessments for 2024, on each site areas covered included:

- 10 wards
- OPD and Emergency areas
- 3-4 food observations/assessments

- Assessments of communal and external areas

On each assessment there was a manager to facilitate the session along with a member of admin staff who completes the forms and record any actions as necessary, as well as 2 patient representatives on each assessment. The outcome of the assessment will be released around January/February 2025.

Patient Portal:

The Project is in the early stages of introduction, but key features of the portal have been presented at the Corporate Patient Experience Group as when in place patients will be able to see upcoming appointments, and summaries following appointment. Personal details such as Next of Kin can be updated on this.

A Pre-appointment questionnaire will be able to be sent as well as broadcast messages to patients. Regular updates will continue to be provided at the Group as our Patient representatives are keen to be involved throughout this project.

The Equality Delivery System (EDS 2022):

This is a mandatory framework for NHS commissioners and providers nationwide. Its purpose is to assess healthcare access inequalities, as well as the reported impact and experiences of individuals. The system consists of three domains, with Domain 1 concentrating on service delivery.

In November 2024, three stakeholder events were held, offering service users, staff, community groups, and other public stakeholders a chance to evaluate the actions being taken to address inequalities in healthcare access. The services reviewed this year were Dementia Services, Breast Screening and Phlebotomy Services. During these events, evidence related to people's experiences, impacts, and outcomes was shared, and feedback was gathered through facilitated table discussions. This provided valuable insights into areas of success, opportunities for service improvement, and an overall rating for each category. The grading and feedback collected from the group discussions have been shared with the service leads. The services reviewed will now create draft action plans in response to the feedback. The oversight of the collected grades and action plans will be shared with the stakeholders involved in each event, allowing participants to contribute to the actions and planned improvements.

Progress of the actions plans developed by the services reviewed last year were also shared with stakeholders at this year's events.

Experience of Care Strategy:

The Experience of Care Strategy was approved by the Quality and Safety Assurance Committee in December 2024. This strategy was developed with patient, family and our local community engagement. The teams are now working on the implementation of the delivery plan accompanying the strategy.

Chaplaincy:

The Multi-Faith Room at RSH was opened in July, with the PRH room opening in October 2024. Positive feedback has been received in relation to the redesigned spaces

The number of chaplaincy-led befriending volunteers supporting visits to patients across the Trust continues to grow. The Chaplaincy Team and volunteers are undertaking cancer champions training to provide additional support and signposting for patients.

Patient Experience:

Mobile telephone chargers have been introduced within the Emergency Departments at each site and the Maternity Atrium, providing access to charging

facilities when people attend the Trust in an unplanned or emergency situation. Take up has been particularly high at PRH.

There has been a significant increase in the number of digital stories being captured from people with lived experience. This feedback is being used in a range of staff training, enabling people sharing their stories to support compassionate training, reflective learning, and reinforce the importance of application in practice.

Workforce and Education:

Recruitment initiatives mean that we now have very few band 5 nursing vacancies across the Trust.

We have worked with Telford colleague around the introduction of apprentice Health care Support Workers into our workforce, enabling an opportunity for our young people living locally to undertake apprentice training. 19 people have been appointed to these posts and will start their 15-month apprenticeships in February 2025 and become Healthcare Support Worker (HCSW) in our Trust in 2026 following successfully completing this training.

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

Ongoing recruitment of Patient/Family representatives to our LD and autism group will help with us prioritising improvements based on their feedback so these will have the maximum benefits

ACTION: Kara Blackwell to liaise with Kate Manby (Ward Manager, Discharge Lounge) and the ward nurses to make sure patients and their families of LD and autism are given clear communication.

iv) Surgery, Anaesthetics Critical Care & Cancer – Graeme Kendall (Centre Manager), gave the key updates on current, future developments and changes from the Division, paper provided:

Divisional Patient and Carers Experience Group:

The group continues to meet on a regular basis. There is good engagement between the patient representatives and wards/department Matrons and Ward Managers. A Divisional action plan has been formulated and monitored. Standard agenda item of a patient story is presented by Matron/Ward Managers to facilitate shared learning and experience.

A series of familiarisation visits by the Divisional Patient Representatives have been undertaken. To date areas visited are:

- Day Surgery RSH
- Outpatients RSH
- Theatres RSH
- Pre-operative Assessment RSH
- Day Surgery PRH
- MSK Wards RSH
- MSK Wards PRH
- Head & Neck Ward 8 and Outpatients Departments ENT & Maxillofacial and Dental lab PRH
- Telford Elective Surgery Hub (Revisit took place after the opening of the Hub in June)
- Dental Laboratory RSH

Visits to Chemotherapy at RSH scheduled for 28th January 2025 and further visits to SAU/ Ward 37 are in progress.

Working group to review complaints had been established for Ward 4. Outcome from the working group was the establishment of communication sheet to record and aid staff conversations with relatives and carers. After a successful trial, this has now been combined with medicine documentation and will be utilised throughout the hospital. 2022 Inpatient survey released October/November 2023. Divisional action plan was formulated from Ward responses. Actions identified were: • Admission to hospital • Inpatient Care and Environment • Medical Care • Nursing Care • Care and Treatment concerns/satisfaction • Patient Information and documentation • Family and carers input and experience of services/treatments • Discharge planning • Feedback on Care provided and improvements that may be made. The majority of identified actions have now been embedded into the Wards; work is ongoing to monitor progress and ensure improvements are maintained. Currently awaiting publication of the 2023 survey to enable creation of an updated action plan for the Division. There will be a review of comparative data to ascertain where improvements have been achieved and if any themes have been carried forward from the previous survey. <u>Hospital Transformation Programme:</u> Consultant Colorectal Surgeon, Miss Kirsten McArdle, has been appointed as the Hospital Transformation Programme (HTP) Clinical Director and joins the HTP team from January 2025. Miss McArdle will join Andrew Evans and Clare Marsh to complement our Divisional HTP team. <u>MSK (Musculoskeletal):</u> • Ward 5 elective orthopaedics reopened on 4th November 2024. Following review from an external consultant, sign off was given by Infection Prevention Control and Executives, with mitigation in place. To date 63 joint replacements have been performed, with 24% of patients being discharged on day one and a further patient going home on the same day of surgery. The national percentage for day one discharge is 15% <u>Surgery, Gastro:</u> • New Urology Consultant and Colorectal consultant both in post and settling in well • TRIOMIC 12-month research project due to go live Q4 The project will change the current pathway, and patients will be seen in a community setting for a simple device-led investigation, with the overall aim to reduce invasive investigations whilst also providing a faster diagnosis (cancer and non-cancer). Colorectal Surgeon Mr Jon Lacy-Colson is leading on this on behalf of SaTH. The project will also reduce first appointment to treatment (currently 52+ weeks) and optimise colorectal consultant workforce <u>Oncology, Haematology, Radiotherapy:</u> • Haematologist specialist has started in haematology, and we have a substantive haematologist starting on the 6th January 2025 • We have a substantive clinical oncologist starting on the 17th January 2025 who will cover Urology, Head and Neck and skin
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- Additional funding received to support our urology backlog – sourced a locum 3 days a week to help improve waiting times

Theatres, Anaesthetics, Critical Care:

- Theatres – began implementation of a new Inventory Management System to improve stock management and tracking

Head and Neck:

- Continuing to hold additional clinics on weekends to reduce the waiting time for patients, these have been a real success with a reduction in long waiters
- Providing additional theatre capacity during the week and weekends with the support of external insourcing company. This is reducing the backlog of long waiting patients
- OMFS (oral and maxillofacial surgery) cancer is extremely fragile, Royal Wolverhampton are supporting by providing additional outpatient capacity for first Outpatient Appointment for patients on the urgent suspected cancer pathway

Ophthalmology:

- Urgent Eye Clinic remains challenged for capacity due to an increase in demand and reduced capacity in the community minor eye care service
- Following a tender process Paragon are now providing additional follow up capacity at weekends for patients awaiting glaucoma review. This will reduce the number of patients who are overdue their glaucoma review

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

Hospital Transformation Programme:

Accommodation application form completed for Proposed Paediatric recovery area to be relocated to the vacant High Dependency Unit (HDU) to support the clinical model. Application form to be taken to clinical space allocation group on 20th January 2025.

HTP team have been allocated Business Intelligence support to support each Division with bed modelling and process mapping.

Capital planning papers for both the transfer of trauma services from PRH to RSH and for proposed PRH Chemotherapy Day Centre are completed and ready to take to the next capital planning meeting to support feasibility studies.

HTP workstream meetings have now started within the Division and have already taken place with Theatre, Trauma & Orthopaedic and Head & Neck Centres. Meetings are essential for engagement process and gaining both clinical and operational buy in from our centre teams.

HTP teams continue to engage with our services users around the country. Divisional HTP team also update PACE monthly meeting.

MSK:

- Mutual Aid – Approval has been given to use Outpatient Network, an insourcing provider to clear the backlog of long waiting breach patients in December. This is in line with the NHSE national target of no 65-week breaches. A further proposal to use Outpatient Network between January and March 2025 to support the 52-week target, has been put forward
- TEMS (Telford Musculoskeletal Services) – In line with the cessation of TEMS and the move for all patients to go through MSST, the TEMS

waiting list will transfer to SATH. The date for this to happen has not yet been agreed as we need to understand the activity numbers involved and ensure the workforce resource to accompany this work is approved and in place

Surgery, Gastro:

- Business case in progress for Urology growth and the Urology Investigations Unit

Oncology, Haematology, Radiotherapy:

- Business case in progress through the various panels for fragile services within the centre
- The artwork that is being displayed within the centre was featured in the Shropshire monthly magazine
- The patient information panel have been involved with all Careflow patient template appointment letters
- All PIFU (Patient Initiated Follow Up) leaflets have gone through the patient information panel
- Lingen Davies Charity are providing water bottles for all radiotherapy patients

Patient Access:

- The Patient Experience Panel have supported updating our patient letters for those attending the RSH site. There is now an additional information sheet with advice to arrive early as well as parking instructions and a map of the site. The information provided is within national reading age standards.
- The Booking and Scheduling teams telephone lines reopened to previous times of 8am to 6pm Monday to Friday. The outgoing message has been reviewed and now includes instruction to contact via email if the patient would prefer

Jane Randall-Smith asked, if recruitment is easier and less challenging now that the Hospitals Transformation Programme is taking place and is it being used as an opportunity when recruiting.

Trevor Purt noted that HTP is a major draw in consultants wanting to come to SaTH. It helps with retention, and it makes SaTH a more attractive organisation to sign up to

v) Medicine & Emergency – Hannah Walpole (Deputy Divisional Director of Operations) gave the key updates on current, future developments and changes from the Division, paper provided:

Waiting Time Screens in ED:

Trial of screens in both our ED's has been concluded with feedback from patients, staff, Patient Experience Team and the UEC Patient and Carer Experience Panel (PaCE) incorporated to refine messaging and communication. Next phase of project is to publish the waiting times on the Trust Website.

Portable Telephone Charging Devices:

Introduced in August 2024 within RSH ED and PRH ED/Maternity atrium, the UEC Patient and Carer Experience Panel (PaCE) were updated in December on the rental usage and patient feedback since being introduced. People using

devices rated their experience as 5 out of 5 at RSH and 4.3 out of 5 at PRH. Patient feedback includes:

"I was pleasantly surprised to find this in the waiting room. It came in very handy as I had to rush in the late afternoon" (RSH)

"Fast charging and convenient. I wish there were more of these around, I'm forever forgetting to charge my phone" (PRH).

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

Urgent Treatment Centre (UTC):

UTC services at PRH and RSH are currently delivered by an Independent Service Provider however, the Trust will be bringing this service back in house from 1st April 2025. There will be no change to how our communities access UTC services from 1st April 2025, however, we will ensure our community stakeholders are involved in any future plans to further optimise and improve our UTC services.

Jane Randall-Smith asked, when will the A&E waiting times be input onto the website and does that also include waiting for the urgent treatment centre.

Hannah Walpole informed the group; the website launch will be on Friday 17 January as a soft launch with communications going out to key stakeholders. The website will show the breakdown for adults and children average waiting times, and in the ED waiting rooms, you can see the waits for the urgent treatment centre.

ACTION: Hannah Walpole to check with the Communication team to make sure that Llais are aware of the soft launch.

ACTION: Hannah Morris to contact Mary Aubrey (Programme Director, Getting to Good) and Claire Dunn (Senior Communications Manager) to give a detailed presentation on A&E and MIU waiting times from a Trust perspective at the next PAF meeting in April.

Lynn Pickavance asked if the waiting time was after a patient has been triaged, also what is the triage time for arrival and are we meeting those targets?

Hannah Walpole informed the group, it's the time to be seen by a clinician, not the time to triage. Those are two separate things. The triage time target on arrival is 15 minutes but unfortunately those targets are not being met. The initial assessment forms are a large part of the improvement work that we're doing through our Emergency Care Transformation Programme, where we have seen some sustained improvements maintained. We are in the upper quartile nationally in terms of our performance. We do recognise that at the points of winter pressures and when the department is under pressure, it is difficult to meet our targets due to the number of patients in the department. This is something that is forming a large focus of our improvement programmes. The teams have made some fantastic improvements across both adults and paediatrics over the last 12 months, which we will continue to build on over the coming year in terms of our focus.

Lynn Pickavance suggested that to make patient messaging simpler to understand, it should read, "the waiting time is from when the patient walks through the door".

	Lynn Pickavance informed the group that in the last few months concerns have been raised with the ICB about the Urgent Treatment Centre at PRH. Patients have realised there has been some kind of change occurring but are not sure where they need to go. It is a very popular service, and patients want to be involved. Hannah Walpole informed the group, that the priority for the next financial year (from April 2025) is to look at how we can optimise and improve those services, feedback from patients and our local GPs in terms of how they interact with that service which will be key to how we shape and develop that. The plan is to bring the UTC service back in house, without having to go through a third party and all the contractual obligations that were contracted to deliver. It gives us a good opportunity and we would welcome input from our patient groups. ACTION: Cllr Joy Jones asked about triage times not meeting their targets, what the variation is and what was the average last month. Hannah Walpole to provide Rachel Fitzhenry with the integrated performance paper to circulate to the group. Trevor Purt informed the group that the soft launch is important in the sense that it does give people that require A&E the option of seeing what the time waits are. The concern of the Trust Board is that this must improve by a significant amount and that as we continue to improve the 4-hour target performance, it is important that A&E does not become an alternative to seeing a GP or going to the pharmacist or community hospitals. We need to be clear that when we put that data up that A&E is for people who acquire urgent and emergency care and not to replace the other parts of the system.
2025/07	Digital Transformation Programme Update
	Sally Orrell (Digital Programme Communications and Engagement Manager) gave a verbal update on the Digital Transformation Programme: The team are moving along nicely with the engagement portal project in terms of the planning. As a digital team, we're taking some time to look at the system and to start testing access and how it works. Over the next couple of months there's going to be a lot of technical work going on in the background. The team are actively working with patient representatives and Ruth Smith (Patient Experience Lead) to recruit some patient representatives, who will help in the very early stages of the project to understand how we're going to approach the project, help advise on the right kind of communications and the early decisions we're making. The team are also working with other Trusts to look at their lessons learned and what they would have done differently. We had a meeting last week with the University Hospitals Bristol and Weston NHS Foundation Trust, who are currently in the process of implementing their portal, so they're a little bit further on than us, but we are listening to their lessons learned and any struggles that patients might have had and how we can overcome them. It is helpful to have that before we go through that process ourselves so we can make a note of how we can do things a little bit differently. The team are still very much in the early days trying to be as involved in patients as much as possible and to make sure that we're making those right decisions.

	Sally Orrell left the meeting
2025/08	Update on HTP Rachel Webster (HTP Nursing, Midwifery and AHP Lead) and Tom Jones (HTP Implementation Lead) presented the update on HTP and briefed the group on the key areas, presentation provided: <u>Latest developments:</u> • Significant clinical engagement to develop pathways • Workforce modelling and recruitment – already seeing positive improvement in clinical recruitment • Continuing community engagement with our communities • Focus on social value with our contractors • Working with other organisations / seeking opportunities to improve the experience for patients • Communications campaign as we move closer to implementation • Ongoing staff engagement to keep workforce informed • Working with Community colleagues on wider transformation plans <u>Building Our Success:</u> To make our vision of two thriving hospitals a reality, we need a number of different projects that are aligned to HTP to support the agreed clinical model, both within our communities and at our hospitals. This includes: • Planned care hub – opened at PRH in June 2024 • Community Diagnostic Centre in Hollinswood House, Telford – completed its final phase of services opening in June 2024 • Options 3 and 4 of the HTP business case – this includes additional services of the clinical model and other aspirations, such as a cancer treatment day centre and respiratory centre at Princess Royal Hospital (PRH), additional new wards and ward developments, theatre refurbishment, integrated health and wellbeing services. The HTP funding provides a strong starting point to realise our vision and address our most significant challenges. We are continuing to look for further opportunities to secure additional capital funding and work with charitable partners to deliver the full transformational objectives of the FBC. <u>RSH Construction Progress:</u> • A new road layout is now in place, which includes a one-way system on parts of the hospital site. This is to protect drivers from the large number of wide construction vehicles that will be on site. • We've created an additional exit off the hospital, which is open during peak hours (4pm-6.30pm), Monday-Friday. • We have begun the site set up to safely demolish Elizabeth House, which was previously used as the blood test location at RSH. Once demolition has taken place, the site will become the new energy centre to house the generators for the new healthcare facilities. • On Saturday 14 December we had the crane delivered to the HTP construction site. This milestone will allow the construction team to progress with the foundations for the new healthcare facilities. The second crane will arrive onsite in March 2025. • Works are continuing to progress with construction in our Emergency Department at RSH, where we expect the first phase to complete in Spring 2025. Construction will then progress into other areas within the department.

	Trevor Purt informed the group, the Board have established a HTP Assurance Committee, which is what provides the assurance to the Board on progress and delivery. There's a critical golden thread that runs through the whole programme and there are several gateways on that thread that need to be passed through to move on. Those gateways will include the clinical model, the workforce, the training for the workforce, the operational model, the building, the equipping, the engagement/communication aspects, but importantly it also will pick up on the system elements of this. In many ways it's not a hospital transformation programme, it's a healthcare transformation programme. Part of this is around providing an equivalent of 250 beds in the community through different models of care. It is important that as we go through this, that is picked up at one of the gateway challenges. Rachel Webster informed the group; a decision has been made to not call a space 'fit to sit' because the model should deliver a flow whereby you wouldn't have people needing to sit in an additional space. The reason we've got 'fit to sit' now is because we don't have the adequate resources, and the clinical pathway model isn't right. What we would expect to have when this clinical model is fully implemented, is that the flow will be efficient through the emergency department that you wouldn't need to have a 'fit to sit'. Rachel Webster informed the group, a suitable trained professional is about patients getting the right service from the person with the right skills, and that isn't always necessarily the traditional doctor or nurse. It's about focusing on what service needs to be delivered, what's the core competent skills an individual needs and looking at other trusts and what sort of professional registration can and should deliver that. We haven't done all that work, as we haven't got all those answers yet. Lynn Pickavance asked, if the current UTC, which is GP led will still be in existence or will we be losing this because we will be in a better place and the UTC will be coping? Rachel Webster informed the group, that's for the here and now, but there's a lot more conversations to have with our commissioners in relation to who is best placed to provide that urgent treatment service; is that GPs independently and commissioned directly and maybe working collaboratively with our clinical clinicians or is it a hybrid model, or is it that SaTH clinicians provide that service. Those conversations are still yet to be completed in terms of the future of the urgent treatment service provision for 2028. What the objective will absolutely be is, who's best able to deliver the service, be that GPs or SaTH to make sure that the Urgent Treatment Centres provided at both sites are resilient and is fit for purpose. Lynn Pickavance informed the group, there is so much work and changes being undertaken with HTP. We are very grateful at the Telford's Patients First Group that we have the Public Participation team answering questions on HTP. Also, the HTP information booklet is a real success. ACTION: Hannah Morris to speak with the Volunteer team about volunteers disseminating the HTP information booklets. Hannah Morris gave a brief update on the HTP Programme Board Engagement Report, paper provided. *Rachel Webster and Tom Jones left the meeting*
2025/09	SATH Strategy & Partnership Update

Carla Bickley (Associate Director of Strategy & Partnership) provided a summary of key actions within the SaTH Strategy & Partnership update, paper provided:

NHS Shropshire, Telford and Wrekin (STW) Integrated Care System (ICS)

Some highlights this quarter include:

- The system's Integrated Care Partnership met at the end of October 2024, and endorsed the refreshed system Integrated Care Strategy. This is published on the ICB's website.
- The Government has launched the consultation exercise for the NHS 10 year plan. The website is open to all members of the public to submit comments, and this is also open to any individual members of staff. NHS Trusts were also invited to submit comments. The focus is on plans to improve health and care services in England, based on 3 major 'shifts':
 - Shift 1: moving more care from hospitals to communities
 - Shift 2: making better use of technology in health and care
 - Shift 3: focussing on preventing sickness, not just treating it

We expect further engagement activity in Jan-Mar 25, and the launch of the 10-year plan in Spring 2025.

Integrated Care Board (ICB):

- Primary focus of the ICB for the period of November to March will be on managing Urgent and Emergency Care (UEC) with all system partners. We fully expect seasonal viruses to be a factor and are already seeing flu cases at a higher level than 2023/24. Co-ordinating actions and assurance will be via the UEC Board.

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

SHIPP:

- Revised Terms of Reference and frequency of meetings moved to bimonthly from November 2024
- Continued Funding for VCS Grants
- Hearing & Sight Loss Service
- Family Hubs and Integration
- Healthwatch – Cancer Care Report
- SHIPP Neighbourhood Working group continues to progress with key actions to support the delivery of the SHIPP agenda
- Governance – SHIPP Subgroup
- Update on STW NHS Talking Therapies Service
- CYP Joint Strategic Needs Assessment - school aged children and young people chapters
- Transforming the System - Turning the Curve
- Draft Healthy Ageing and Frailty Strategy 2024

TWIPP:

- TWIPP Terms of Reference Review
- TWIPP Priorities Review – focus on: All age Mental Health, Frailty, support to local General Practice.
- Areas of risk identified and escalation needs
- GP Out of Hours Procurement Briefing

	• TWIPP workshop held focussing on Healthy ageing (frailty) strategy, acute frailty programme, ageing well strategy and ageing well partnership, community falls prevention TWIPP Neighbourhood working Group established and continues to progress finalising TWIPP priority workstreams Telford & Wrekin Council held a 2032 Vision Event and follow up meeting with multi-agency partners, focussing on the four most deprived areas in the South of Telford. Further scoping and alignment to commence January/February 2025. <u>Provider Collaboratives:</u> Activity in collaboration is taking place in a number of areas: Collaboration with University Hospital North Midlands Trust continues, focussing on maxillofacial, gynae, cardiology, microbiology, urology and pathology. Work as key partners in the N8 Pathology Network Board is vital for digital, workforce and service sustainability. We continue to strengthen our relationships and support the development of our local provider collaborations and integrated system-wide working through various established boards and programmes of work. <u>Internal Strategies:</u> A SATH internal Health Inequalities programme of work has been established focussing on the following areas (based on the National NHS priorities): Strategy development includes: • A review of the Equality, Diversity and Inclusion Strategy in conjunction with the ICS. • A draft Trust Communications Strategy has been developed and is currently in the process of being consulted on ahead of board approval. • The Trust has commenced work to develop a data strategy, with engagement sessions to follow. Importantly, this is being developed in parallel with the ICB, who are also drafting a data strategy. • A draft Estates strategy has been produced with engagement sessions planned ahead of board approval. A stocktake meeting on our current position in relation to the delivery of 2024/25 operational plan has taken place, and work continues to align our strategic priorities to the 2025/26 operational planning rounds.
2025/10	Supplementary Information Pack
	i. Public Participation Plan: 2023/24 Action Plan Update Hannah Morris gave a brief update of the Plan on a Page for SaTH Charity, Engagement and Volunteers, paper provided.
2024/11	Any Other Business
	Nothing noted.
	Dates for the Forum 2025
	Monday 14th April - 13:00-16:00 Monday 21st July - 13:00-16:00 Monday 13th October - 13:00-16:00

Public Assurance Forum Action Log

Agenda Item	Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
14th October 2024						
2025/05	13/01/2025	Aaron Hyslop to investigate the signposting for the O'Connor Haematology Day Unit.	Aaron Hyslop	14/04/2025	O'Connor/Haematology is not signposted in RSH and is not accurately represented on the internal map. Estates have been approached to understand the signage issue; Comms will amend the map, changes to be verified with O'Connor/Haematology. Aaron will follow up as appropriate.	ONGOING
2025/06	13/01/2025	Kate Ballinger to contact the W&C Division about the diabetes project.	Kate Ballinger	14/04/2025	All in place, Kate made contact with Diabetes Lead, Sarah Davies.	CLOSED
2025/06	13/01/2025	Kara Blackwell to liaise with Kate Manby (Ward Manager, Discharge Lounge) and the ward nurses to make sure patients and their families of LD and autism are given clear communication.	Kara Blackwell	14/04/2025	Paula Gardner (Director of Nursing) will be chairing a Discharge improvement group which will include discharge lounge.	CLOSED
2025/06	13/01/2025	Hannah Walpole to check with the Communication team to make sure that Llais are aware of the soft launch.	Hannah Walpole	14/04/2025	Hannah confirmed with Comms that Healthwatch were included in Stakeholder comms.	CLOSED
2025/06	13/01/2025	Hannah Morris to contact Mary Aubrey (Programme Director, Getting to Good) and Claire Dunn (Senior Communications Manager) to give a detailed presentation on A&E and MIU waiting times from a Trust perspective at the next PAF meeting in April.	Hannah Morris	14/04/2025	Mary Aubrey and Claire Dunn will be attending to give presentation on 14th April.	CLOSED
2025/06	13/01/2025	CIlr Joy Jones asked about triage times not meeting their targets, what the variation is and what was the average last month. Hannah Walpole to provide Rachel Fitzhenry with the integrated performance paper to circulate to the group.	Hannah Walpole	14/04/2025	Trust Board IPR paper circulated to the group with Trust Board papers link included. Available every other month to view on the website.	CLOSED
2025/08	13/01/2025	Hannah Morris to speak with the Volunteer team about volunteers disseminating the HTP information booklets.	Hannah Morris	14/04/2025	We provide volunteers with regular updates around HTP through our weekly volunteer emails and catch up meetings. Due to a delay in the new HTP booklets being printed, we should hopefully be able to disseminate these to volunteers within the next month.	CLOSED

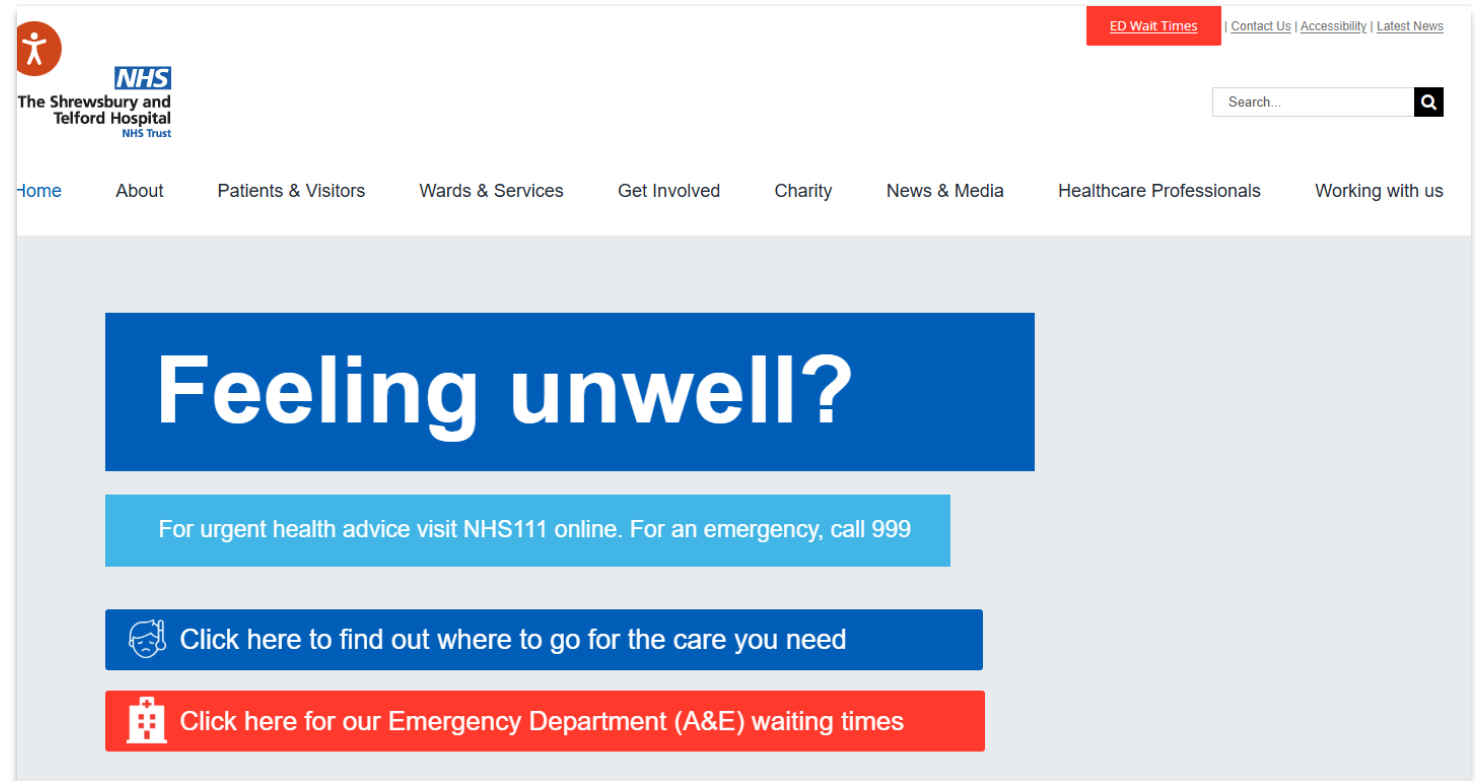
ED wait times – SaTH website

We recently piloted a new tool on our website/waiting rooms.

This was to help inform our communities of the average wait to be seen times in our Emergency Departments (A&Es).

It is part of our ongoing improvement work to help patients receive the right care for their health needs and improve their hospital experience.

How long patients will wait is one of the questions we are asked the most.



ED wait times – SaTH website



Staff and patient feedback included:

- More clarity is needed to explain what the times mean
- We need to tell the whole story of the patient journey in ED
- Datix raised that suggests patients are confused by 'inconsistent and inaccurate timings' on the waiting room screens and that an 'average' time probably sets an expectation
 - MIU information needs to say that they are not open 24 hours

ED wait times – SaTH website

Improvements following staff and patient feedback include:

- Longest wait times
- Number of patients waiting now included
- Information on opening times at Minor Injury Units
- Last time data was updated
- Updated patient information - times are a guide only and may change (sickest patients always seen first)
- Visual – patient journey explainer

Emergency Department (A&E) wait times

	Current longest waiting time to see a doctor/nurse	Current number of patients waiting to be seen
Royal Shrewsbury Hospital Adults	2 hrs 54 mins	16
Royal Shrewsbury Hospital Children	2 hrs 54 mins	16
Princess Royal Hospital Adults	2 hrs 54 mins	16
Princess Royal Hospital Children	2 hrs 54 mins	16
Community Minor Injury Units (MIUs): 60 minutes		

Please be aware that MIUs are not open 24 hours, so check [opening hours](#) before you attend.

[Learn more about our wait times.](#)

Last updated on Wednesday, 12 March 2025 10:15.

ED wait times – ED waiting rooms

Emergency Department (A&E) wait times			Emergency Department (A&E) wait times		
	Current longest waiting time to see a doctor/nurse	Current number of patients waiting to be seen		Current longest waiting time to see a doctor/nurse	Current number of patients waiting to be seen
Princess Royal Hospital Adults	2 hrs 54 mins	16	Royal Shrewsbury Hospital Adults	2 hrs 54 mins	16
Princess Royal Hospital Children	2 hrs 54 mins	16	Royal Shrewsbury Hospital Children	2 hrs 54 mins	16
Learn more about our wait times. Last updated on Monday, 14 April 2025 11:12am.			Learn more about our wait times. Last updated on Monday, 14 April 2025 11:12am.		

About our Emergency Department (A&E) waiting times

We are not able to tell you how long you will wait to be seen.

Our wait times are approximate and are provided as a guide only.

There is a wait time for adults and a wait time for children (under 18).

The wait time is in hours and minutes.

The wait time shown is the longest wait from time of arrival to being seen by a doctor or registered nurse.

The wait times are refreshed every 15 minutes. During busy times, this may be over 4 hours.

The Emergency Department (A&E) demand can change quickly. For example a serious car accident can affect the wait time. The sickest patients will always be seen first.

We are working to see you as soon as possible.

Please ask if you would like any help.



ED wait times – next steps

- Soft launch planned for May/June
- Media release and social media messaging supported by alternatives to care messaging
- Feedback – sath.commsteam@nhs.net

Public Assurance Forum	
Member Update	
Name of Organisation: Healthwatch Shropshire Name of Member: Hannah Davies Date: Monday 14th April 2025 Time: 1.00- 4.00pm Location: Microsoft Teams	
1.	Key updates from member organisation Shropshire Pharmacy services and Consultations Report Published Working with NHS Shropshire, Telford and Wrekin and the Local Pharmaceutical Committee we developed a survey to ask patients about both their awareness of enhanced services and their experience of using pharmacy services. Our report has recently been published and can be found here: https://www.healthwatchshropshire.co.uk/report/2025-03-27/shropshire-pharmacy-services-and-consultations Share For Better Care Campaign We have joined the campaign, organised by the Care Quality Commission and Healthwatch England, aiming to encourage more people to share their feedback to drive improvements in health and care. Find out more here: https://www.healthwatchshropshire.co.uk/news/2025-02-10/share-better-care Understanding Your Cancer Journey Event at Shrewsbury Town Football Club We recently attended an NHS Shropshire, Telford and Wrekin event aimed at hearing from people who have received a diagnosis of cancer in the last three years. This event was hosted in collaboration with local cancer services and organisations. We facilitated a table at the event where people shared their experiences of cancer care. We also provided a stand, and Chief Officer Lynn Cawley presented our Living Well with Cancer report: https://www.healthwatchshropshire.co.uk/report/2024-10-10/living-well-cancer Healthwatch Shropshire Forward Plan We are currently looking at our Forward Plan and welcome any suggestions on areas you feel we need to focus on. Please let Hannah know during the meeting or get in touch: Tel 01743 237 884 Email: enquiries@healthwatchshropshire.co.uk

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 2 nd April 2025	

Public Assurance Forum	
Member Update	
Name of Organisation: Shropshire Patient Group Name of Member: Graham Shepherd Date: Monday 14th April 2025 Time: 1.00- 4.00pm Location: Microsoft Teams	
1.	Key updates from member organisation There has been a small growth in patient interest, but enthusiasm is not like it was prior to COVID, due mainly to changed nature of direct involvement over the years. Our monthly Teams meetings have involved a very high-quality section of SaTH presenters including: • Cathy Levey, Public Health Department Officer talking about “Weight and Food Strategy” for the County. • Naomi Roche, Head of Services, Healthy Population, talking on “Public Health” nursing. • Emma Bayliss, Governance and Patient Experience Lead (Community Health Trust), will talk on “what is happening with Community Health Transformation” • Maureen Wain, Director of Elective Care, SaTH will talk on the “Update on her area of work” • Helen Rowney, Head of Transformation of Adult Mental Health ICB who updated the members in her area of work” • Sally Orrell, Digital Programme Communications and Engagement Manager, who updated members “on how digital & Communication is progressing”. • Sharon Fletcher, Head of Safety and Quality Improvement, Talked to us about her “job and remit”. We would appreciate if staff would be willing to update us on progress in their area of responsibility. We have members involved in various task groups, and I was accompanied by our Chair to be shown around the new A&E department, which as expected is what the patients have waited for over twelve. I also enjoyed a presentation and tour with members of HTP It was very impressive.
2.	Any items for discussion at the Public Assurance Forum from member organisation

3.	Action update from previous meeting (if applicable)
Report by:	Graham Shepherd
Date	08/04/2025

Public Assurance Forum	
Divisional Update	
Name of Division: Medicine and Emergency Care Name of Divisional Lead: Laura Graham Date: Monday 14th April 2025 Time: 1.00-4.00pm Location: Microsoft Teams	
1.	Key updates from Division - UTC Service has been brought in house from 1st April 25. UTC/Minors now co-located at “front door” at PRH - Development of Offload to Assess (OTA) launched cross site to ensure patients receive diagnostics earlier in their journey. - Opening of new majors/resuscitation area at RSH ED providing an improved patient environment 
2.	Update on any current or future service developments or changes and how are you involving the community in these changes?

- Phase 2 UTC Service Improvement work to begin with dedicated workstreams to support within our Emergency Care Transformation Programme. Public engagement will be facilitated via these workstreams.

3. Action update from previous meeting (if applicable)

- 1. Hannah Walpole to check with the Communication team to make sure that Llais are aware of the soft launch.**

HW confirmed with Claire Dunn (Communications Team) that Llais were included in stakeholder comms.

- 2. Cllr Joy Jones asked about triage times not meeting their targets, what the variation is and what was the average last month. Hannah Walpole to provide Rachel Fitzhenry with the integrated performance paper to circulate to the group.**

HW confirmed that IPR is available to the public via Trust website [Trust Board Papers – SaTH](https://www.sath.nhs.uk/about-us/trust-information/board-papers/) <https://www.sath.nhs.uk/about-us/trust-information/board-papers/>

Report by:	Hannah Walpole – Deputy Divisional Director of Operations
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Date	03/04/2025
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Public Assurance Forum	
Divisional Update	
Name of Division: Women & Children Name of Divisional Lead: Zain Siddiqui Date: Monday 14th April 2025 Time: 13.00 – 16.00 Location: Microsoft Teams	
1.	Key updates from Division Maternity - The service continues to face significant challenges due to the unavailability of midwife over 35 WTE affected by a combination of long-term and short-term sickness and parental leave. However, long-term sickness rates have markedly improved, contributing to a positive acuity level which has been above the national target of 85% for the past 6 months. Importantly, one-to-one care during labour and the supernumerary status of the coordinator have been maintained, which is reassuring. - Workforce alignment to the nominal role has progressed positively, with ongoing recruitment and attrition to attrition rates. Maternity Services have appointed to establishment with no vacancies. The service has also successfully recruited 2 additional international midwives through its international recruitment program. To date, 10 international midwives have achieved NMC registration. - An ANNB Quality Assurance visit was conducted in the department, with no urgent or immediate recommendations identified. Overall, the visit was positive, and the department has received the draft report for factual accuracy. Recommendations from the report will be monitored through appropriate governance processes. - CNST Year 6 has been submitted with evidence pertaining to successful achievement of 10/10 safety actions. - The smoking rate at delivery is consistently below 6%, which is encouraging and in line with the target rate of 6%. - Midwifery-led care remains available at Wrekin MLU and through the homebirth service. The service has facilitated births at Wrekin MLU and home settings. A Homebirth Lead Midwife has been appointed to establish a new homebirth team, which will support the homebirth service, the Midwifery-Led Unit, and families opting to birth against advice in the community. The team's official launch is planned for April 2025. - The midwife-to-birth ratio is currently 1:23, which remains within reassuring levels. Paediatric Services - Following the Paediatric Nursing Workforce "Summer / Winter template" briefing paper being developed to address seasonal variance, and subsequently being signed-off at Trust Board on Thursday, 16th January 2025. Practical elements have commenced which has included seeking staffs' first choice of working area within the specialty which has enabled the splitting of the single rota into specialist areas with resulting work being undertaken by the health roster and ESR teams. The new summer rosters will commence on May 1st. - Nurse recruitment remains positive and on trajectory, to fulfil the summer / winter template. Band 6 – 3wte experienced nurses, 2 with specialist skills from outside of the region and 1 who has been developed internally. Band 5 – 4wte

commencing in March / April, and 5wte in September. Of the 4wte outstanding, 12 third year student nurses from Birmingham and Keele Universities are attending for interview on 5th April. Band 4 NAs - 2.0wte student NAs will qualify in September 1.0wte in March 2026, and 2.0wte in September 2026.

- The RN Degree Apprenticeship (Child) programme for NAs due to commence at Wolverhampton University in September, with 2 “home-grown” NAs planned to commence has been withdrawn; places are hopefully being commissioned from Keele. This will form the final part of the non-registrant to registered nurse pathway, which has been actively developed over the last 3 years.
- Activity and acuity in the paediatric areas has been variable throughout February and March, but in line with other regional paediatric units. Activity specific to CYP with mental health illnesses/eating disorders has increased significantly over recent months.
- A virtual visit by the WMPCCN took place on 25th March to review progress of the action plan developed after the Critical Care and Paediatric Surgery Review in April 2023. The initial findings were very positive with note made of the huge amount of work undertaken as part of the PTP and demonstrated through PTAC, where the WMPCCN is a key stakeholder. The success of the paediatric surgical hub days was noted as excellent practice.

Neonatal Services

- The neonatal senior nursing leadership team is now fully recruited and making a significant contribution to progression of action plans and key activities, alongside the co-clinical directors. The interim Care Group Manager has commenced to fill the triumvirate vacancy.
- The workforce plan/trajectory to train staff to QIS level is progressing as per trajectory and is on target to achieve BAPM compliance of 70% registrants QIS trained by January 2026.
- Recruitment of the neonatal quality nursing posts to further meet BAPM compliance is on target, with the 3rd nurse appointed and 2 further in the recruitment process.
- The Neonatal Unit were awarded the Bliss Baby Charter Silver Award which demonstrates their progress in delivering the foundations of family integrated care (FIC).
- The Unit is being assessed to meet UNICEF Baby Friendly Standards Level 2 in April. This level focuses on a well-educated workforce.
- The Neonatal Pace Group is developing, and discussions with the MNVP have resulted in a commitment to increase their support to the Unit. The work to upgrade the parent flats is complete, and future plans include a 15-steps audit to be undertaken in June and plans to refurbish the quiet room.
- The West Midlands Neonatal ODN Quality Nurses are currently supporting the neonatal data coordinator to improve current data capture ahead of implementing the Neonatal Badgernet system, for which has achieved approval status on 3rd April.
- The Freedom to Speak Up Team has continued to report positive feedback and engagement during walkabouts in the neonatal area and has now recruited a F2SU Ambassador in the area.
- The West Midlands Neonatal ODN peer review took place on 2nd December 2024. The initial feedback was very positive; however, the formal report is still awaited.
- Business case approval for NeoBadger system.

Gynaecology Services

- The Senior Nurse Leadership remains challenged; however, the Gynae-Oncology CNS and Gynaecology Advanced Nurse Practitioner have now commenced into post as has the Lead Colposcopy Nurse.
- Ongoing work is being carried out by the Hysteroscopy Transformation Group to address complaints and rectify elements of poor practice previously identified.
- A review of the patient pathway for women with suspected benign conditions has been initiated to prevent delays in the management of their conditions.
- Further work on the pessary pathway is underway to ensure clarity around collaborative management responsibilities.
- Outsourcing companies are supporting the service to significantly reduce the current theatre waiting lists.
- SaTH launched a comprehensive menopause support programme for staff as a commitment to health and wellbeing; this programme is being led jointly by Gynaecology Consultant, Dr Jo Ritchie, and our CEO, Jo Williams.

Fertility Services

- Nursing and medical staffing levels are gradually improving due to the introduction of new working practices and a reduction in nursing team sickness absence.
- Preparation for the upcoming HEFA review, scheduled for 8th & 9th May 2025, is in progress with key documentation submitted as per the required schedule.

2.

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

Key activities identified by the division include –

- A single delivery plan has been produced in development with the LMNS, that now includes both the 3-year maternity and neonates delivery plan, alongside the equality and equity action plan, to reduce silo working and duplication.
- Further investment in the asthma and epilepsy pilot projects (aligned with CORE20PLUS5) by the ICB, has resulted in appointment of a lead nurse and other team members in order to progress the individual project aims. The Divisional Team are still awaiting the details of the revised project plan.
- Following the systemwide GIRFT review of Children's and 18-15-year-old diabetes care, significant systemwide preventative work is being planned to address the high prevalence of type 1 diabetes throughout the geographical area
- The Interim Director of Midwifery has identified areas for service improvement with good progress being made with commissioned quality improvement projects in: Maternity Triage, Postnatal Ward, Diabetes Service and Antenatal Clinic
- A review of Community Services has identified areas for efficiency, this will be subject to a management of change due to commence in February 2025. Engagement events are underway with staff groups and collaboration planned with the Maternity and Neonatal Voices Partnerships to support and lead the proposed improvement work.

3.	Action update from previous meeting (if applicable)
Report by:	Zain Siddiqui
Date	08/04/2025

Public Assurance Forum	
Divisional Update	
Name of Speciality: Patient Experience Name of Speciality Lead: Kara Blackwell Date: 14th April 2025 Time: 13.00-16.00 Location: Microsoft Teams	
1.	Key updates from Division Complaints: Progress has been made in reducing the backlog of complaints and reducing the amount of time that complaints are open for. Work continues with the divisions to ensure that robust processes are embedded. New processes are now in place for all complaints relating to patients who have passed away, to ensure that families receive an early call from a senior manager in the division, with the offer of a meeting. The Patient Advice and Liaison Service (PALS) is being well used, with seven day cover and regular outreach to clinical areas. Patient Portal The patient portal is now set to go-live as a small pilot in the Ear, Nose and Throat department, commencing in Spring 2025. When patients are given an appointment at the Trust, they will get a text to let them know that an appointment letter is ready to view. Patients will also get text reminders about their appointment. They will be able to view the information instantly in an online, secure patient portal. If patients can't make their appointment, they will be able to let the Trust know about this through the links in the message. Should there be a need to, patients will also be able to cancel appointments and let the Trust know new times or dates to reschedule. Further roll-out is expected later in 2025. Patient representatives have been involved in the project from the start, providing valued input and feedback, helping to shape the project to take into account patient needs. Experience of Care Strategy The Experience of Care Strategy was approved by the Quality and Safety Assurance Committee in December 2024. This strategy was developed with patient, family and our local community engagement. The Experience of Care Strategy has been published on the Trust website, alongside an easy

read and British Sign Language version to support accessibility: [Experience of Care Strategy – SaTH](#)

- **Chaplaincy**

The Chaplaincy Team have been involved in the launch of a Veteran's Café within the Trust. The café provides a safe space where members of the veteran community working or volunteering within the hospital can meet together, access support and signposting.

The Chaplaincy Team have worked in collaboration with the Palliative and End of Life Care Team to incorporate an enhanced assessment of a patient's spiritual needs in documentation. The documentation captures what is important to an individual, what brings them comfort, and views that can help shape their care in their last days of life.

A Chaplaincy survey has been launched, seeking feedback from people to gain a better understanding of the patient's spiritual, pastoral and religious needs and how these can be met.

- **Patient Experience**

An Experience Based Design (EBD) survey was carried out in January 2024 at the Community Diagnostic Centre (CDC), with a focus upon Phlebotomy and Radiology services. The aim of the workstream being to gain feedback from people to provide an understanding of their experience and identify opportunities to improve the services. In response to the findings an application was submitted to NHS England, securing funding to support a range of improvements. A second wave of the EBD workstream was undertaken in November 2024, the aim being to gain an understanding of people's experiences following the initial improvements being introduced.

Members of the Patient Experience Team worked collaboratively with patient partners to gather feedback from 130 people accessing Phlebotomy and Radiology services. The Patient Experience Team worked collaboratively with patient partners involved in the study and staff from the service to consider the findings and identify improvements that could be made in response to feedback.

Improvements in people's experience of arriving at the CDC, waiting to be seen, communication with the team, and leaving the service all reflected improvements in comparison to findings of the initial study cycle. Further opportunities for improvement highlighted signage, seating, accessibility, and the self check-in machines.

A second wave of funding from NHS England was secured to support the improvements and work is being undertaken throughout March and April 2025.

Further work undertaken during quarter four include:

- Launch of the laith Gwaith initiative, identifying Welsh speakers within the Trust
- Undertaking a review of information displayed on screens in waiting areas across the Trust, ensuring information meets health literacy recommendations and incorporating information in British Sign Language. The new information will be live on screens in April 2025.
- A pilot of the 'It's OK To Ask' initiative within the Outpatient Department at the Princess Royal Hospital. Patient partners were involved in developing the information. Feedback will be reviewed prior to wider roll out.

- **Workforce and Education**

We continue to run very successful weekend recruitment events for both Health Care Support Workers (HCSWs) and Registered Nurses (RNs). The last event was on Saturday 5th April 2025 which saw 36 HCSWs and 40 RNs attend.

The new to care HCSW Apprentices have settled into their clinical areas and are enjoying the combination of study and clinical work. We hope to be able to recruit a second cohort in the coming months.

Continuing professional development funding has come to the end of its most recent funding cycle, and we now await our allocation for the 2025 /26 financial year. This money comes from NHS England annually and supports the professional development aspirations of registrants across the organisation.

The pre-registration team continue to run skills academy for pre-registered nurses, nursing associates and Allied Health Professionals (AHPs), to prepare them for the skills they will require at point of registration.

We are preparing to recruit the next cohort of Student Nurse Associate apprentices in September. We will be partnering with Keele for this particular cohort, which, for the first time, will see us recruit external candidates for the apprenticeship.

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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The Trust is continuing to recruit patient representatives to support Speciality Patient Experience Groups. If patient or carer representatives would be interested in becoming a group member to support improvement work,
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information is available on the Trust website: [Speciality Patient Experience Groups - SaTH](#)

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, Patient Led Assessment of the Care Environment (PLACE) group, Exemplar assessments, mock CQC assessments and a range of other activities.

3.	Action update from previous meeting (if applicable)
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None at this time

Report by:	Ruth Smith
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Date	8 th April 2025
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Public Assurance Forum	
Divisional Update	
Name of Division: Surgery, Anaesthetics, Critical Care, Cancer Name of Divisional Lead: Michelle Cole Date: 14th April 2025 Time: 14.00-17.00 Location: Microsoft Teams	
1.	Key updates from Division Divisional Patient and Carers Experience Group (PACE) The group continues to meet on a regular monthly basis via teams link and maintains good engagement between the patient representatives, Matrons, Ward and Department managers Most identified actions from the inpatient survey have been embedded into the Wards, work is ongoing to monitor progress and ensure improvements are maintained. The Division is awaiting publication of the most recent inpatient survey to enable the creation of an up to date Divisional action plan and to undertake a review of comparative data to ascertain where improvements have been made and where work is still required. Feedback will be shared at this forum Theatres The first High-Intensity Theatre (HIT) list at PRH; The team completed 11 hernia cases in a single day, surpassing the usual maximum of 6-7. Despite the high volume, we operated within our usual resources - using only our SaTH team, with one additional nurse. This achievement highlights that highly productive surgical sessions can take place in the Hub with the SaTH team on weekdays Pre-Op Assessment Ongoing review of demand and capacity for the pre-op team awaiting 'my pre op' digital tool to support maximising appointment slots Trauma & Orthopaedics, MSK • Reinstating Elective Orthopaedic Surgery. SaTH has created an Enhanced Recovery Project Team which is held monthly and involves stakeholders from across the Trust. There is a dedicated Specialist Nurse Team, theatre and ward training sessions • Ward 5 PRH - Recovery of Elective Orthopaedics. The GIRFT recommendation is to improve patient outcomes and reduce infection risks. The recovery of planned orthopaedic surgery at PRH has continued with knee replacement surgery resuming. The first phase started with hip replacement surgery - the first patients operation went well, and she was walking on the same day • With the introduction of a new enhanced recovery pathway with new surgical and anaesthetic techniques, patients are able to walk within hours of surgery and thus they are able to return home sooner. Since re-opening, many patients have been discharged on the day after their surgery, whereas previously most patients stayed an average of four days • We have completed the first day case hip patient. This is a step further than a day case knee, remembering the days when hip patients stayed in for 2 weeks with full hip precautions post-surgery • Newly appointed Lower Limb Consultant is due to start in June

- Due to waiting list management and theatre staff shortages, elective orthopaedics has had a reduced number of theatre sessions since COVID. The new theatre planner will go live from 1st April, with 19.5 lists per week allocated to MSK elective
- The Telford Musculoskeletal Service (TEMS) will be transferred to PRH from 1st April

Surgery, Gastro

- New Urology Consultant and Colorectal Consultant both in post and providing RTT and Cancer capacity to support the reduction of waiting times
- New Gastroenterologist in post with further recruitment into vacant posts April
- TRIOMIC 12-month research project due to go live Q1 due to works delays. The project will change the current pathway and patients will be seen in a community setting for a simple device-led investigation, with the overall aim to reduce invasive investigations whilst also providing a faster diagnosis (cancer and non-cancer). Colorectal Surgeon Mr Jon Lacy-Colson is leading on this on behalf of SaTH. The project will also reduce first appointment via routine referral to treatment (improvements already seen here with wait reduced from 52 weeks to 45) and optimise colorectal consultant workforce
- Electronic Surgical Assessment Unit whiteboard: The SAU whiteboard will allow visibility and transparency of SAU clinic / assessment area. Previously this was a paper-based system involving loose paper sheets and an A4 diary. The implementation of the whiteboard will improve patient outcomes by ensuring that all tasks are conducted appropriately and accordingly. In turn, assisting with capacity and flow. Further development of a capacity dashboard for SAU is ongoing with support from the IT department
- Dr Mark Smith (Consultant Gastroenterologist) has been appointed as the Endoscopy Lead with the Integrated Care System

Patient Access

- Pilot for the new Patient Engagement Portal DrDoctor is planned for the end of April, initially for ENT clinics
- SaTH will begin the NHSE validation sprint from 1st April to 30th June
- Urgent suspected cancer: booking of the first outpatient appointments is now sitting within the centralised booking team in Patient Access Centre
- Plans to improve outpatient clinic utilisations are being implemented support by Foureyes

2.	Update on any current or future service developments or changes and how are you involving the community in these changes?
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Divisional Patient and Carers Experience Group (PACE)

A focus group meeting was held at the end of January 2025 to discuss the content and progress of the meetings held throughout the previous year; a review of the terms of reference was also undertaken. Following this meeting we are pleased to update that going forward Lynn Pickavance, patient representative, will co-chair the meeting with Emma Salvoni, Deputy Divisional Director of Nursing and Matron Claire Cox as Deputy chair. The agenda for the monthly meetings have also been revised to place more focus on the monthly review of the complaint themes received within the Division and the sharing of learning and experience from these complaints. Each month a Ward or Department will be asked to bring a case study presentation of a complaint, learning obtained, and assurance of actions undertaken. This will be actioned on a rotational basis. Wards will also be asked to present any compliments received to the meeting, again on a rotational monthly basis. A number of other items or speakers have been identified and will added into the monthly agenda as appropriate.

A series of familiarisation visits by the Divisional Patient Representatives have been undertaken. To date areas visited are:

- Day Surgery RSH and PRH
- Outpatients RSH
- Theatres RSH
- Pre-operative Assessment RSH
- MSK Wards both sites
- Head & Neck Ward 8 and Outpatients Departments
- ENT, Maxillofacial and Dental laboratory PRH
- Telford Elective Surgery Hub. Revisit took place after the opening of the Hub last year
- Maxillofacial Laboratory RSH
- Chemotherapy – Lingen Davies Unit RSH
- Ward 37 RSH

Surgery, Gastro

- Business case in progress for Urology growth and the Urology Investigations Unit, currently with our Integrated Care Board (ICB)
- Engagement with GPs by way of a monthly forum to update on Colorectal TRIOMIC
- Collaborate work with ICB currently in progress to support weight loss management service; weight loss management injections
- Recruitment underway to support Health Care at home IBD (inflammatory bowel disease)

Trauma & Orthopaedics, MSK

- Fracture Liaison Service – Resubmission of business case to the ICB following “system wide” discussion around inequity in service provision for T&W patients
- Telford Musculoskeletal Services (TEMS) – Shropcom activity coming back into SATH which will see the elective waiting list double in size
- Trauma Hospital Transformation Programme – The centre continues to work towards single site trauma with an active working group now in place

Patient Access

- Patient representative from PACE group will visit the Bookings and Scheduling Teams at William Farr House on 29th April
- Medical records storage space continues to be a concern, and a business case is being prepared with a view to have all records stored in one location

ITU away day

The relatives of a patient who was treated on ITU last year, attended and spoke to staff at their away day regarding the importance of organ donation

Complaints update

Following a complaint received about post discharge care of a surgical patient, a meeting with senior nursing staff, the patient and family at home was arranged. This resulted in positive improvements within surgery and the emergency department. It also addressed training concerns for nurses and doctors

3.	Action update from previous meeting (if applicable)	
Patient Access - Recruitment for booking clerks has been successful over recent weeks across both outpatient and inpatient scheduling teams - DNA rates continue to decrease slowly, and the teams continue to review and identify themes		
Report by:		Centre Managers
Date		March 2025

Public Assurance Forum	
Divisional Update	
Name of Division: CSS Name of Divisional Lead: Anna Martin, DDO - CSS Date: Monday 14th April 2025	
1.	Key updates from Division An expanding Division: Since the last meeting, the Clinical Support Services (CSS) Division has welcomed the Health & Safety Team and the Cardiorespiratory Service who have joined the Radiology Centre. From 1st April the Division has also welcomed the Oncology & Haematology Centre who have moved over from the Surgery, Anaesthetics, Cancer and Critical Care Division. CSS has strong alliances with these services, so it makes sense to bring them together. As a result of these changes the Division is currently rethinking its name. <u>Pathology</u> Accreditation: The Human Tissue Authority (HTA) made an unannounced routine inspection visit to the SaTH mortuaries in October 2024 with a follow up visit on 2nd April 2025. The HTA Regulation Manager has acknowledged the good work carried out by Pathology, Maternity and Estates, good teamwork in the mortuary and has now closed all the outstanding actions. Training is continuing to support the correct release procedures from the mortuary to the undertakers outside normal working hours. New Point of Care Testing (POCT) Room: Point of Care Testing brings some simple laboratory tests out into clinical areas to speed up processing and reporting for example, routine tests for glucose levels. Currently in our Emergency Department (ED) at RSH this equipment has not had a dedicated space for its use. This changed when we opened our new Resus and Majors areas within our refurbished and extended ED at RSH in March when a dedicated POCT room was created. This will make testing much safer for patients as it will be an easier process for staff with less risk of distractions. <u>Pharmacy</u> New Automated Medicines Dispensing Cabinets As part of the first stage of our HTP we have been working to modernise our medicines stock control and dispensing practices. In the old Resus and Majors Departments we used the old manual Pharmacy stock control system with medicine stock cupboards that required the Pharmacy Team to check stock levels, go back to the Dispensary and return with the required amount of stock to replenish the stock levels every day.

An automated cabinet called “BD Pyxis” was installed in our new Resus and Majors areas at the end of March which will deliver benefits such as:

- Faster access for patients to the medicines they need
- Releasing time for the Pharmacy Team as the cabinet communicates digitally with Pharmacy to advise on the amount of stock that needs replacing
- Medicines are more readily available to the teams in these areas as more stock can be held safely in the cabinets which are accessed via a secure log-in process

The picture below shows one of the cabinets with its storage cupboards being installed in the new Medicines Preparation Rooms:



A strategy is being developed to propose the roll out of automated cabinets across both sites and throughout the new building at RSH beginning with the installation of a BD Pyxis cabinet into ED at PRH soon.

The new cabinets will link in with the digital system for prescribing that will be installed this year called EPMA (Electronic Prescribing and Medicines Administration) and together they will improve the processes for prescribing, reviewing, administering and restocking medicines in clinical areas.

New Pharmacy Team for ED

A business case has been supported to develop a dedicated Pharmacy Team for our ED's who provide an on-site service to support patient safety, improve flow through our ED's, and reduce the potential for harm e.g. by reducing the number of missed doses of critical medicines. Recruitment will take place this year.

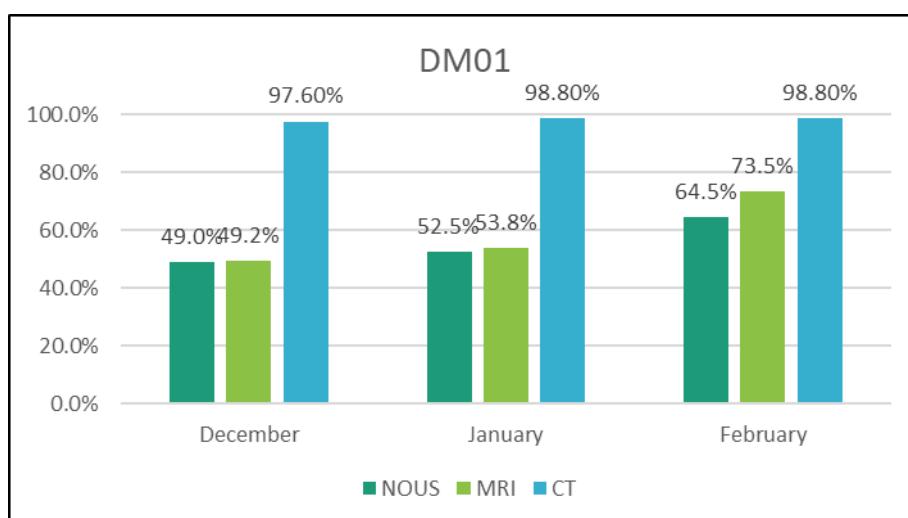
Discharge Medicines Service has supported an average of 520 patients a month over the period of August 2024 to February 2025. Auditing indicates an estimated cost reduction for readmitted patients of nearly £1m.

Radiology

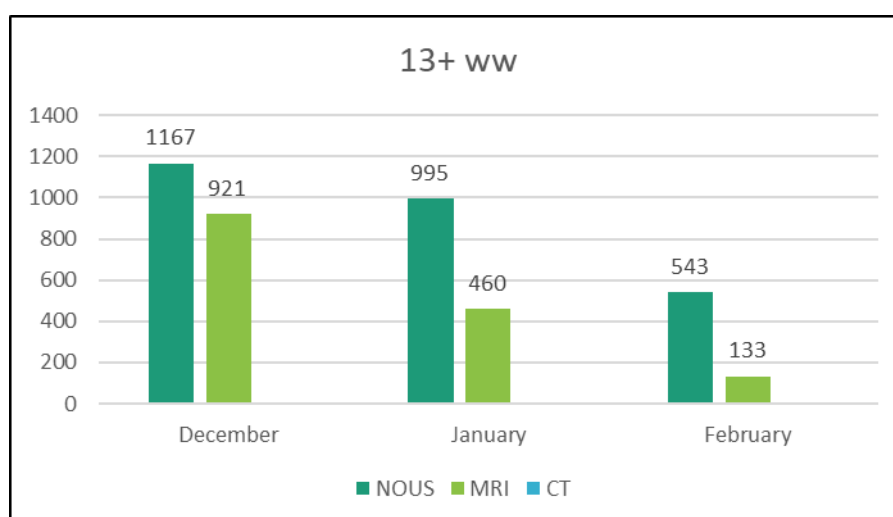
The DM01 standard aims to ensure that 95% of patients do not wait longer than 6 weeks for an appointment in one of our Radiology Departments. Locally, the System DM01 target is 85%.

Additional capacity and mobile MRI scanners are in place.

The position up to February can be seen in the chart below:



The number of patients who are waiting over 13 weeks for their appointment has also fallen (there are no patients waiting over 13 weeks for a CT appointment):



Reporting recovery:

- **CT** - From mid-October 2024 we have been outsourcing more CT reports each week to bring reporting times down. Urgent and cancer CT scans are now being reported within 2 weeks, and we have removed our backlog of routine reporting.
- **MRI** - from mid-December 2024 we have been outsourcing an extra 400 MRI reports per week with the aim of clearing the backlog of MRI reports by the end of March.
- To ensure long term sustainability we are maximising our Advanced Practice Reporting Radiographers to report plain film images, allowing Radiologists to focus on MRI and CT reporting. In addition, our Advanced Practice Consultant Radiographer has started training in MRI reporting.

Community Diagnostics Centre (CDC), Hollinswood House, Telford:

The CDC is now routinely benefiting from approx. 500 patients a month providing their feedback, the vast majority of which is very positive.

The actions identified by the Experienced Based Design audit have been funded by NHS Elect and include a second set of electric doors at the entrance and better chairs in the waiting room. These findings and actions are consistent with those of the Equality Delivery System Assessment for Phlebotomy and a recent First 15 steps assessment visit. Phlebotomy are also looking into the possibility of having volunteers to support patients with a meet and greet service.

Following the success of the CDC in Hollinswood House, Telford, the Division is at an early stage of scoping proposals to develop a second CDC in the county.

Therapies

A new Therapy Centre Manager started in post in February 2025 and is undertaking a review of all services, particularly those seen to be 'fragile' as they are provided by single handed therapists or very small teams. Of note at present:

- Amputee Rehabilitation service at both sites is currently being supported by a Locum Physiotherapist whilst recruitment continues
- Stroke Specialist Occupational Therapy vacancies have resulted in a temporary reduction in the 7-day service to a 6-day service during the recruitment period

2.

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

The CSS Patient Experience Group continues to meet every month. We continue to involve our patient engagement representatives in some of our service changes and improvements such as:

Service moves at PRH

The Trust needs to use all of its inpatient bed spaces to support timely admissions for patients from ED and admissions for planned surgery and procedures.

Cardio-respiratory Service at PRH

The Cardio-respiratory Department (along with the Cardiac Day Unit) is currently occupying an inpatient ward area at PRH on Apley Ward. To free up some space that could be used for inpatient care on Apley Ward the Cardio-Respiratory Service has explored the potential to move some of its routine respiratory outpatient appointments to the CDC where it already has an outpatient clinic base. The acute elements of the service would remain at PRH e.g. support for the Cardiac Cath Lab and patients on the wards.

Stroke Rehabilitation at PRH

Stroke Rehabilitation at PRH is currently carried out in the old Day Hospital area of the Paul Brown Unit (PBU) now known as the PBU Gym. Kitchen assessments are also carried out in this area.

There is a 'domino effect' of proposed moves that could change the location of stroke rehab:

- The Lofthouse Suite at PRH was originally a local anaesthetic procedure suite however, these patients are now being treated in the main theatres so blocking space

for patients who need general anaesthetics for their surgery. This is because the Medical Day Unit is currently having to use the Lofthouse Suite as it's location due to pressures on space at PRH.

- A proposal has therefore been created to move the Medical Day Unit into the space currently occupied by the Discharge Lounge in the PBU and move the Discharge Lounge into the PBU Gym. The proposal is for the plinths used for stroke rehabilitation and a new assessment kitchen to move from the PBU Gym area into another area in the PBU converted for these purposes. These plans are being developed by CSS and the Medicines & Emergency Care Division along with Estates.

Hospitals Transformation Programme – specifically for CSS:

Within the HTP plans for 2028 we are currently developing plans for:

- **Chemotherapy Day Unit at PRH** in addition to the unit at RSH
- **Oncology & Haematology Ward** in the new build at RSH
- **Cardiac Cath Lab at RSH** including a recovery area that can also accommodate Interventional Radiology patients
- **Integrated Breast Unit at PRH** to bring routine and symptomatic breast screening into the same location as breast surgery outpatients
- **Pathology at PRH** – expansion of Specimen Reception and Phlebotomy areas
- **Pharmacy** reconfiguration and refurbishment at RSH
- **Radiology** – number and location of scanners
- **Therapy Gym** to support the Acute Stroke Ward at RSH

CSS Patient Experience Group update

“**Gather**” (an inter-active tool that pulls together the themes from the Friends and Family Test to provide reports, allow analysis, create action plans and provide feedback to patients in a “you said....we did” style) is now being used in Phlebotomy with plans to roll out to Therapies and Radiology.

“The First 15 Steps” assessment visits:

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

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

- RSH Radiology Department
- PRH X-ray 1
- PRH X-ray 2
- PRH Therapy Department
- RSH Outpatient and Community Therapy Department on the William Farr House site – repeat visit planned
- RSH Inpatient Therapy Gym
- Both mortuaries to look at the areas family and friends can access when they come to visit a loved one
- Radiology at RSH Treatment Centre - MRI and Breast Screening Unit
- Phlebotomy in the CDC

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

- Evolution Scanning Suite, RSH (MRI and new Nuclear Medicine unit)
- PRH Breast Screening
- Phlebotomy in William Farr House
- CDC – Radiology and Cardiorespiratory
- Cardiorespiratory at RSH and PRH

3. Action update from previous meeting (if applicable)

Report by:	Dianne Lloyd, CSS HTP and Project Lead
Date	2 nd April 2025

Hospitals Transformation Programme: Public Assurance Forum

14 April 2025



HOSPITALS
TRANSFORMATION
PROGRAMME



HIGHER QUALITY,
SAFER CARE



IMPROVED
OUTCOMES



BETTER
ACCESS



A GREAT PLACE
TO WORK

Why are we here?



- Where are we in the process?
- Latest developments
- Your feedback
- How can you get involved?
- Questions

Rachel Webster, HTP Nursing, Midwifery and AHP Lead

Tom Jones, HTP Implementation Lead

**HOSPITALS
TRANSFORMATION
PROGRAMME**



HIGHER QUALITY,
SAFER CARE



IMPROVED
OUTCOMES



BETTER
ACCESS



A GREAT PLACE
TO WORK

Improving Care for Everyone



The clinical model



RSH will specialise in emergency care and will have:

- A modern, purpose-built Emergency Department – with separate children's footprint
- A critical care unit
- Consultant led maternity care
- Children's inpatient services
- Emergency Medical Specialist Services, including Cardiology, Stroke, Respiratory and Acute Medicine
- Emergency and trauma surgery
- Head and neck inpatient services
- Radiotherapy and inpatient and day cancer care and treatment

Both sites will continue to provide a number of services, which include:

- Adult, children's and maternity outpatients
- Endoscopy services
- Urgent care services and medical Same Day Emergency Care
- Diagnostics, imaging services including X-ray
- Frail and elderly care services

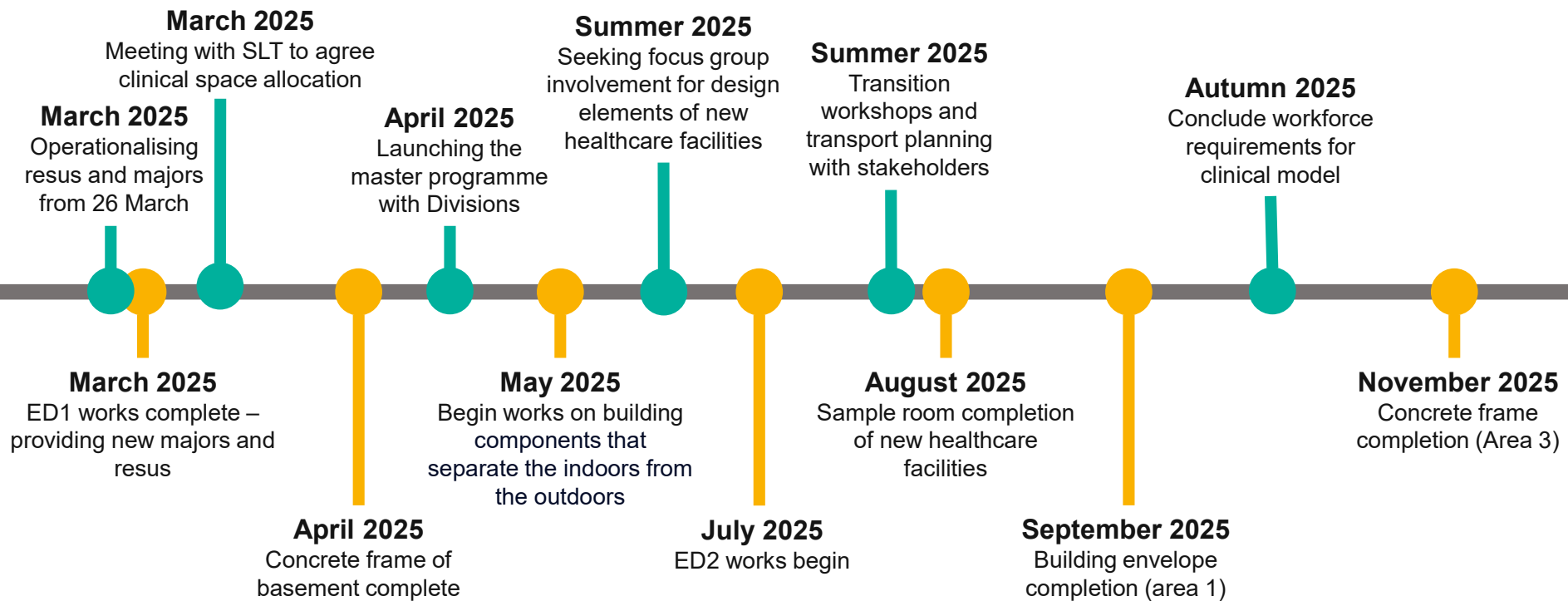


PRH will specialise in planned care and will have:

- 24/7 urgent care services
- Planned inpatient surgery and medical and surgical emergency patients on a planned pathway of care
- Local anaesthetic procedures
- Day case surgery
- Midwife led maternity unit
- Enhanced rehab facilities and therapy led wards
- Cancer treatment day unit – aligned to HTP
- Respiratory treatment centre – future opportunity

Expected 2025 milestones

Workstream milestones



Construction milestones

Latest developments

Improving our Emergency Department

Phase one – complete in March 2025

- 8 new, larger resuscitation rooms with improved infection, prevention and control
- 10 new majors cubicles – improved experience for patients
- New modern staff bases with improved patient visibility



Comparison – Resuscitation Areas



Hear from our clinicians



HOSPITALS
TRANSFORMATION
PROGRAMME



HIGHER QUALITY,
SAFER CARE



IMPROVED
OUTCOMES



BETTER
ACCESS



A GREAT PLACE
TO WORK

Improving our Emergency Department

Next steps – from April 2025

- 2 new adult mental health rooms – expected to complete in Spring 2026
- New separate adult and children ED reception - expected to complete in Summer 2026
- New children's triage rooms – Spring 2027
- New children's emergency footprint – Spring 2027
- New Ambulance Receiving Area footprint creating 6 cubicles – Autumn 2027

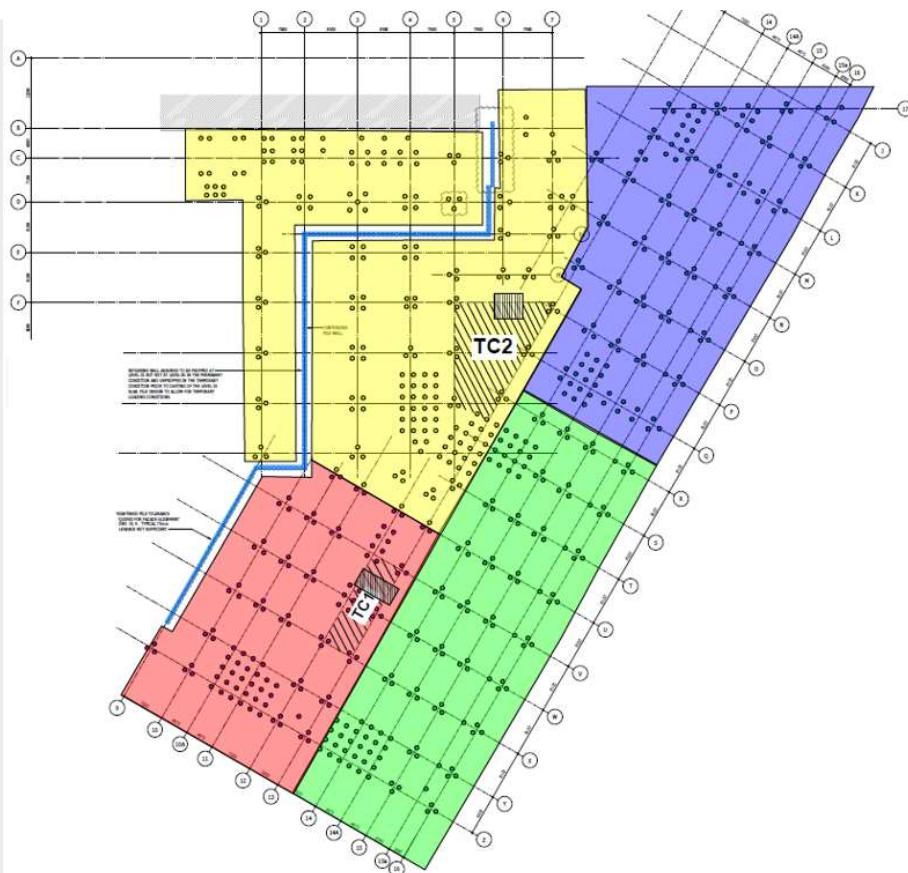


Main build progress

- **Second tower crane now on site.** Both cranes will remain on the construction site for the duration of the build
- Work continues to prepare for **connecting the existing building and new building** and progressing well. IHP continue to work closely with our clinical services to ensure minimal disruption
- Elizabeth House has been demolished, with slab works due to begin imminently – this will make way for the **new energy centre**
- The road leading up to the Copthorne building has closed to traffic to allow IHP to undertake drainage and associated infrastructure works in the road. The car park for services within Copthorne building has been relocated to the front of the RSH site (no loss of spaces)



Construction site plan



TC1 & TC2 – cranes on site

Area 1

Concrete frame completion – May 25
Building envelope completion – Sept 25

Area 2

Concrete frame completion – Aug 25
Building envelope completion – Apr 26

Area 3

Concrete frame completion – Nov 25
Building envelope completion – Aug 26

Area 4

Concrete frame completion – Feb 26
Building envelope completion – Nov 26



Benchmarking visits

The Grange University Hospital – opened in 2020

- Offer a singular Emergency Department at the Grange, with 3 non-emergency hospital sites that provide other services
- Visited by HTP, Capacity and Site Managers, and ShropDoc on 1 May 2024 and a further visit took place on April 2nd 2025.

Lesson learnt and benefits

- The transfer process of patients must be coordinated effectively. They use a 'flow centre' to manage this, which is a single point of access
- The main benefit they have seen is huge improvements to their planned care and capacity, by effectively ringfencing this service. In Winter 23/24, the Trust didn't cancel a single elective procedure



Benchmarking visits

Midland Metropolitan University Hospital – opened October 2024

- A new hospital built in the middle of two neighbouring hospitals, specialising in emergency care. The A&E departments at City Hospital and Sandwell Hospital have closed, with a new and improved UTC at Sandwell Hospital.
- Visited by Rachel Webster (HTP Nursing, Midwifery and AHP Lead) and Andrew Tapp (Clinical Director for HTP) in October 2024 – the team remain in close contact with Midland Met

Lesson learnt and benefits

- Appropriately timed communications to public is vital, showing what each hospital can deliver/provide and also what it can't.



Benchmarking visits

Bournemouth and Poole – opening in 2025

- Royal Bournemouth Hospital to become the emergency centre, with a six-storey expansion of healthcare facilities called the BEACH building (Births, Emergency And Critical care, and Children's Health)
- Poole Hospital will become the site specialising in planned care. They opened their theatre complex in July 2023 to support this change. They will also provide a 24/7 UTC to help ease pressure at the emergency site.

Lesson learnt and benefits

- Ensuring staff are engaged and aware of the changes, and ultimately what it means for their team. Making sure support is available for staff who require it as part of the service change.



How can you remain involved?



The Shrewsbury and
Telford Hospital
NHS Trust



Integrated
Care System
Shropshire, Telford and Wrekin

Charitable Support



Building modern healthcare facilities is challenging. While the clinical model is fully funded, hospitals must adapt to the changing healthcare needs of their communities. Our partner charities strive to enhance the experience of all people using our services, with particular focus on some exciting developments – a Cancer Centre at PRH for Telford patients, a Respiratory Centre at PRH for all our patients in Shropshire, Telford & Wrekin and mid Wales.

Our fundraising campaign supports three key areas within our new building:

Supporting future opportunities to expand services at both hospitals, including plans for a new cancer treatment centre and a respiratory centre at PRH.

Creating a positive environment for healing involves more than just treating ailments. Calm Spaces or community artwork can help foster a positive atmosphere for patients and their loved ones.

Developing community spaces within the hospital or its grounds, such as sky gardens for the new Children's Ward or Critical Care Unit, and a community garden.



BETTER, SAFER
CARE



IMPROVED
OUTCOMES



SHORTER
WAITING TIMES

17



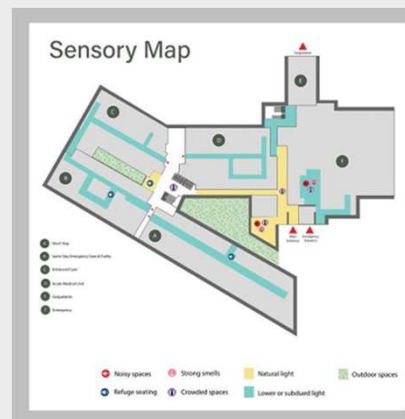
HOSPITAL TRANSFORMATION PROGRAMME

Public Focus Groups

We have been holding quarterly focus groups as well as one-offs covering specific topics, through which our communities have provided guidance on many aspects of the programme.

Focus Group output includes:

- A **redesigned front entrance**
- A **sensory map**, **sensory room**, and **calm spaces** for neurodiverse patients
- Plans for **dementia clocks** and **dementia friendly signage**
- Design guidance including **colour palettes**, **appropriate seating**, and **details such as USB charging ports**



Upcoming Focus group sessions

**Communications and engagement for
Urgent and Emergency Care (UEC)**

3rd June, 10am-12noon

**Wayfinding for new healthcare
facilities**

5th June, 10am-12noon



BETTER, SAFER
CARE



IMPROVED
OUTCOMES



SHORTER
WAITING TIMES

About Health

We continue to update our communities via presentations, online or in person. The About Health online meetings are held quarterly over MS Teams, offering a one-hour update from senior members of the programme team, with the opportunity to ask questions. Presentations are also delivered in the community for interested groups.

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

About Health: HTP

**May 6th
18:30-19:30**

MS Teams

Other Planned Presentations:

- Wellington U3A – 8th May
- Shropshire Association of Local Councils – 10th June
- Nurses League RSH TBC
- Rotary Clubs throughout region TBC



BETTER, SAFER
CARE



IMPROVED
OUTCOMES



SHORTER
WAITING TIMES

Engagement in the Community

We will be holding informational public drop-ins through 2025 and beyond, with confirmed dates below. We are always looking for opportunities to share information, if there is an event you think we should be attending, please email sath.engagement@nhs.net

- Church Stretton Co-op – 2nd May, 10:00-13:00
- Mayor of Shrewsbury's Charity Fete – 5th May, 10:00-16:00
- Ironbridge Co-op – 12th May, 12:00-16:00
- Edstaston Village Hall (Wem) – 21st May, 10:00-12:00
- Wellington Market – 9th May, 10:00-14:00
- Oswestry Outdoor Market – 6th June, 10:00-13:00
- Welshpool Market (town centre) – 16th June, 10:00-14:00
- Ludlow Market (Buttercross) – 23rd June, 10:00-14:00
- Bridgnorth Market – 11th July, 10:00-14:00
- Market Drayton Indoor Market – 17th September, 10:00-13:00
- Lydham Friday Market – 3rd October, 10:00-13:00



BETTER, SAFER
CARE



IMPROVED
OUTCOMES



SHORTER
WAITING TIMES

Additional engagement routes



Event & Date	Subject
Monthly Hospital Update – MS Teams	Monthly Trust News Update including update on HTP
Monthly newsletter email update - sent to our 5000+ community members	Update from Public Participation team including HTP update and details on how to get involved
Quarterly About Health online updates	One hour MS Teams online presentation for public from HTP team with Q&As
Quarterly Public Assurance Forum (next one July 2025) with representatives from organisations across health & social care in Shropshire, Telford & Wrekin & Mid Wales	Presentation from HTP team with Q&As
SaTH website and intranet	Webpages which support public engagement and Latest HTP meetings/feedback Public Participation - SaTH



BETTER, SAFER
CARE



IMPROVED
OUTCOMES



SHORTER
WAITING TIMES



HOSPITAL TRANSFORMATION PROGRAMME

Thank you for joining us...



- If you sign up to become a community member sath.engagement@nhs.net we will keep you updated on how you can get involved and updated on the programme through our monthly update.
- Any further questions, please email: sath.engagement@nhs.net

**HOSPITALS
TRANSFORMATION
PROGRAMME**



HIGHER QUALITY,
SAFER CARE



IMPROVED
OUTCOMES



BETTER
ACCESS



A GREAT PLACE
TO WORK

Questions



The Shrewsbury and
Telford Hospital
NHS Trust



Integrated
Care System
Shropshire, Telford and Wrekin

Public Assurance Forum – 14 April 2025

Public Assurance Forum		2025/20	
Report Title		Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 4 2024/25	
Executive Lead		Julia Clarke, Director of Public Participation	
Report Author		Hannah Morris, Head of Public Participation	
CQC Domain:		Link to Strategic Goal:	Link to BAF / risk:
Safe		Our patients and community	√
Effective		Our people	
Caring		Our service delivery	
Responsive		Our governance	
Well Led	√	Our partners	
Consultation Communication			
Executive summary:		1. The Public Assurance Forum’s attention is drawn to the following sections: - Engagement approach and engagement activities for Quarter 4 (page 1-4) - Summary of feedback received and actions to date (page 4 – 5) - A forward look of engagement activities planned for Quarter 1 2025/26 (page 5-6) 2. The risks are: - Fail to engage our communities around the Hospitals Transformation Programme, resulting in lack of confidence within our communities. - Fail to deliver statutory duties (s242) to engage with the public. - Staff not having the skills or confidence to engage with our communities. 3. We are have the following actions: - An ongoing calendar of events to support public engagement in the HTP. Regular report to the HTP programme Board relating to engagement activity and any feedback and actions needing to be taken - Continue to support our HTP team to ensure they meet their Statutory Duties. - The Public Participation Team are providing support to the HTP team to engage and involve our local communities and their representatives within the Programme.	

Recommendations for PAF:	The Public Assurance Forum is asked to: NOTE the current public engagement activity in relation to the Hospitals Transformation Programme in Quarter 4 2024/25 including: • the engagement which has taken place during Quarter 4 • feedback received from our local communities and any actions taken as a result of the feedback • The engagement activities planned for Quarter 1 2025/26 This report is provided for information only.
Appendices:	Appendix 1: Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 4 2024/25

1.0 HTP Community Engagement Report (Quarter 4)

Plans to transform our hospital services in Shropshire, Telford & Wrekin and mid-Wales are now well underway. As part of our statutory duties (under Section 242 of the Health and Social Care Act) and our ongoing commitment to engage and involve our local communities and patients, we have developed a range of regular events to support public engagement with the Hospitals Transformation Programme. This report has been prepared to inform the Public Assurance Forum of the engagement activity in the Quarter 4 2024/25.

2.0 Engagement Approach and engagement activities for Quarter 3 2024/25.

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

- Public Focus Groups
- About Health Events
- Public Assurance Forum (PAF)
- Attending external meetings and events
- Community Cascade
- Community and Organisational Membership
- Monthly Hospital Update meetings

Table 1 of the paper outlines community engagement activities which took place in Quarter 4 2024/25 in relation the Hospitals Transformation Programme. **Local elections are due to take place in Shropshire on 1st May 2025 most public engagement related to HTP has stopped on the 10th March, due to being in pre-election period. All public engagement will recommence on the 2nd May 2025.** Engagement activity relating to the Hospitals Transformation Programme in Quarter 4 is outlined below:

Date	Event	Attendees	Outcome
8 January	Wellington Probus Club	21 retired business professionals in attendance	Presentation was appreciated with thoughtful questions afterwards. Some doubts about programme that were addressed and numerous comments afterwards about misinformation. Overall very positive.
28 January	About Health - HTP	22 members of the public attended the meeting including Shropshire Councillors from Ludlow and Clee.	Event went well with a good range of questions from the public
28 January	Shrewsbury Rotary Club	16 members were present	Presentation was very well received. There was interest in a follow-up visit as well as interest in charitable support for HTP.
29 January	Countywide Community Connectors	107 people in meeting	Shared links to upcoming Engagement opportunities for HTP
14 February	Newport Market HTP Drop-in	Spoke to appx 39 members of the public	handed out HTP booklets. Strong feelings were shared with multiple people attending after seeing advertised in press, all left more informed if not wholly convinced, but there was also positivity about the investment.
18 February	Gypsy/Traveller outreach (Park Hall site, Oswestry)		Conversations mainly about HTP and communications. 5 copies of current HTP leaflet left with residents, and explanation of HTP very well received.
20 February	Young People's Academy	19 young people attended	Lively discussion and presentation on HTP provided to young people
27 February	Neighbours Drop-in	Approx 10 members of the public	Members of the public attended to seek more information about the works. Issues included parking and traffic on nearby estates, noise, dust, and emissions from the building works, and the aesthetics of the builder's compound.
5 March	Telford Patients First		HTP update given. Patient group requested printed copies of the HTP booklet
13 March	People's Academy	16 attendees	Presentation on HTP given, with questions answered
13 March	Wrekin Rotary HTP presentation	Appx 20 in attendance	Contentious start to meeting with a lot of strong feelings about the plans, but ended with members understanding more about the programme. Followed up by emailed questions from 2 members and an invite to Wellington Rotary.
18 March	ED Tours for HTP Focus Groups and PAF members	22 Attendees	Feedback that members thoroughly appreciated the opportunity, the feedback was extremely positive, people were thankful for the invite and excited for the continuation of the project, including enthusiasm for the focus groups themselves.

3.0 Summary of feedback received from the public

This quarter we did not hold a focus group meeting for MEC & SACC and Women's and Children's and this was due to holding a special event to invite focus group members to see the first area that has been developed as part of the Hospital Transformation Programme – ED1. ED1 is the first development of our new emergency department at RSH and has our resuscitation area and part of our new Major's. Over 22 members of our focus groups and volunteers were given a tour of this new area on 18th March. Some of the feedback from those who saw the new ED1 is below:

*“Our Deputy Regional Director recently had the opportunity to tour the first phase of refurbishment within the Emergency Department at **Royal Shrewsbury Hospital** – and what an impressive transformation! 🌟*

The spacious facilities, including larger resuscitation bays and an improved majors area, will create a modern, well-equipped and patient-focused environment for urgent and emergency care. It was great to see firsthand how these changes will make a real difference to the experiences of patients and staff.

The refurbishment forms part of the Hospital Transformation Programme (HTP), where a four-storey expansion is currently under construction at the front of the RSH site.”

Andrea Blayney, Llais

“Many thanks to you (Julia), Ed and all of your colleagues for giving the opportunity to see the new Emergency Centre at RHS yesterday. So much consideration has been given to the detail and the needs of patients and staff. A real achievement on the part of everyone involved”

Jenny Horner, Market Drayton Patient Participation Group Chair

*“We were given an informative tour and chat about the new areas, and, **WOW!** It's a huge improvement to our current A&E....much more space, thoughtfully laid out, good nurses station, so much easier for moving beds, service trolleys etc.”*

RSH A&E Volunteer

4.0 Forward Look

A forward plan of current known engagement activity relating to the Hospitals Transformation Programme with HTP team attendance as well as Public Participation team for Quarter 1 2025/26 is outlined below. There are many other events that the Public Participation team are attending alone (see Appendix 2)

Date	Event	Required attendees
02/05/25	Church-Stretton Co-op Drop-in	HTP, Public Participation
06/05/25	About Health – HTP Update	HTP, Public Participation
08/05/25	Wellington U3A presentation (HTP)	HTP, Public Participation
09/05/25	Wellington HTP Market Drop-in	HTP, Public Participation
12/05/25	Ironbridge Co-op HTP Drop-in	HTP, Public Participation

21/05/25	Wem Rural Community Drop-in	HTP, Public Participation
28/05/25	Hospital Monthly Update	Public Participation
29/05/25	Young People's Academy	HTP, Public Participation
03/06/25	MEC & SAC Focus Group	HTP, Public Participation
05/06/25	W&C Focus Group	HTP, Public Participation
10/06/25	SALC HTP Update	HTP, Public Participation
16/06/25	Welshpool Market HTP Drop-in	HTP, Public Participation
23/06/25	Ludlow Market HTP Drop-in	HTP, Public Participation
25/06/25	Hospital Monthly Update	Public Participation

5.0 Recommendations

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 4 (2024/2025)
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 1 (2025/26)

Julia Clarke

Director of Public Participation

April 2025

Hospitals Transformation Programme Engagement Report from Public Participation Team (Community Engagement) – Quarter 4 2024/25

1. INTRODUCTION

Plans to transform our hospital services in Shropshire, Telford & Wrekin and mid Wales are now well underway. As part of our statutory duties (under Section 242 of the Health and Social Care Act 2012) and our ongoing commitment to engage and involve our local communities and patients, we have developed a range of regular events to support public engagement with the Hospitals Transformation Programme. This report has been prepared to inform the Public Assurance Forum of the engagement activity in the previous Quarter 4 (January-March 2025).

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

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

Whilst SaTH is leading on the HTP communication and engagement, the objectives are supported by our partners across the sector. This has been strengthened by a presentation by the ICB Director of Partnerships and Place attending the Medicine & Emergency Care and Surgery, Anaesthetics, Critical Care & Cancer (MEC&SACCC) HTP focus group in December to update on wider transformation plans and agreement from Shropshire Community Trust that the Deputy Chief Operating Officer would attend future MEC&SACCC focus group meetings from March 2025 onwards.

2. ENGAGEMENT APPROACH

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

- **Public Focus Groups** - Focus groups are held quarterly with all the presentations published on the Public Participation pages of the SaTH website along with all Questions and Answers and Action logs for full transparency, website: [Hospitals Transformation Programme Focus Groups – SaTH](#). The focus groups are aligned to the clinical workstreams within the HTP programme:

- Medicine and Emergency Care and Surgery, Anaesthetics, Critical Care and Cancer focus group (MEC & SACC)
- Women's and Children's focus group

In addition we have held bespoke focus groups on specific issues including.

- the RSH planning application
 - Two focus groups for RSH and PRH Travel and Transport
 - Mental Health
 - Dementia
 - Learning Disabilities and Autism
 - Children and Young People
 - Visual and Hearing Impairments
 - Veterans
- **HTP About Health Events** – Held via MS Teams, these are quarterly events which are accessible to members of the public and staff with the HTP presenting on latest developments across SaTH with an opportunity for members of the public to ask questions. These are recorded and the recording is published on the website.
 - **Public Assurance Forum (PAF)** – PAF receives a quarterly update from the HTP. PAF is an advisory group who bring a public and community perspective to, and scrutiny of processes, decision making and wider work at SaTH. The Forum meets quarterly, and all external members represent community organisations across our catchment areas and are able to identify and help us link with our wider communities. Feedback from PAF is included in the Public Participation Report which is presented at Public Board meetings so there is a direct link from our communities to the Trust Board
 - **Attending community meetings** – Through our links with community organisations we attend a wide range of community meetings to provide an update on the HTP and other developments at SaTH. This includes local Parish Councils and other organisations who serve local communities.
 - **Community Events** – The Public Participation Team regularly attend external events to link with our local communities, this includes seldom-heard groups and communities. Providing information on the Hospitals Transformation Programme is also important, currently a short A4 booklet is distributed with an updated version prepared each quarter.
 - **Community and organisational membership** – SaTH have over 5000 community members and 400 organisational members, who each receive a regular email newsletter update (#GetInvolved) from SaTH, which includes information on HTP and ways to get involved with the programme e.g. focus groups and About Health Events. It also includes news updates and public messages.
 - **Monthly Hospital Update** – Hospital Update is a monthly Teams meeting which provides an update to our local communities on news at SaTH (including a regular update on HTP). The presentation is published and there is an opportunity for members of the public to ask questions

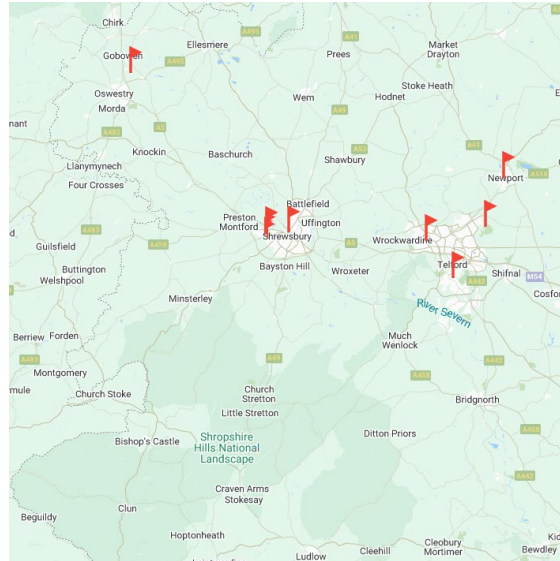
3. ENGAGEMENT ACTIVITY IN Quarter 4 2024/25

Local elections are due to take place in Shropshire on 1st May 2025 most public engagement related to HTP has stopped on the 10th March, due to being in pre-election

period. All public engagement will recommence on the 2nd May 2025. Engagement activity relating to the Hospitals Transformation Programme in Quarter 4 is outlined below:

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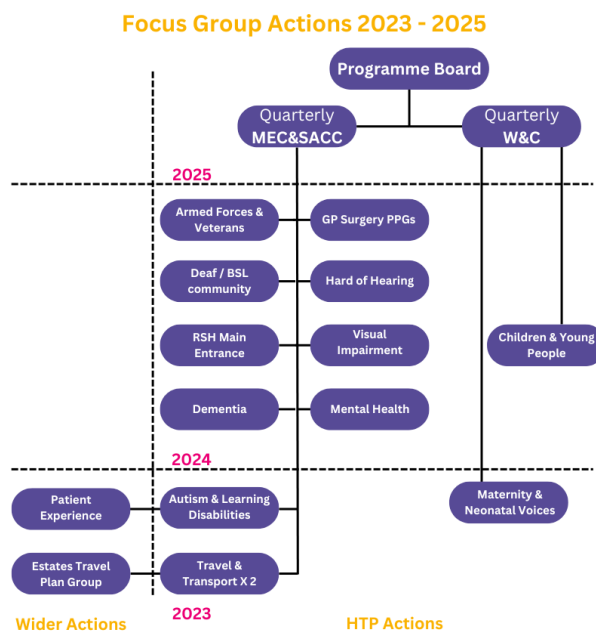
Please see the map below which highlights the areas of the Shropshire, T&W and Powys which were visited in Quarter 4:



3. SUMMARY OF FEEDBACK RECEIVED AND ACTIONS TO DATE

From the events we organise and from those we attend in relation to the Hospitals Transformation Programme we receive feedback, suggestions, and questions from our communities. For every public focus group we produce a questions and answers sheet and action log. This information is available on our website: [Hospitals Transformation Programme Focus Groups - SaTH](#)

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



This quarter we did not hold a focus group meeting for MEC & SACC and Women's and Children's and this was due to holding a special event to invite focus group members to see the first area that has been developed as part of the Hospital Transformation Programme – ED1. ED1 is the first development of our new emergency department at RSH and has our resuscitation area and part of our new Major's. Over 22 members of our focus groups and volunteers were given a tour of this new area on 18th March. Some of the feedback from those who saw the new ED1 is below:

*“Our Deputy Regional Director recently had the opportunity to tour the first phase of refurbishment within the Emergency Department at **Royal Shrewsbury Hospital** – and what an impressive transformation! 🌞*

The spacious facilities, including larger resuscitation bays and an improved majors area, will create a modern, well-equipped and patient-focused environment for urgent and emergency care. It was great to see firsthand how these changes will make a real difference to the experiences of patients and staff.

The refurbishment forms part of the Hospital Transformation Programme (HTP), where a four-storey expansion is currently under construction at the front of the RSH site.”

Andrea Blayney, Llais

“Many thanks to you (Julia), Ed and all of your colleagues for giving the opportunity to see the new Emergency Centre at RHS yesterday. So much consideration has been given to the detail and the needs of patients and staff. A real achievement on the part of everyone involved”

Jenny Horner, Market Drayton Patient Participation Group Chair

*“We were given an informative tour and chat about the new areas, and, **WOW!** It's a huge improvement to our current A&E....much more space, thoughtfully laid out, good nurses station, so much easier for moving beds, service trolleys etc.”*

RSH A&E Volunteer

4. FORWARD LOOK

A forward look of current engagement Activity in Quarter 1 (April-June 2025) relating to the Hospitals Transformation Programme with HTP team involvement as well as Public Participation Team is outlined below in **Table 3**. A full list of all known activity including events attended only by Public Participation team is in Appendix 2

Date	Event	Required attendees
02/05/25	Church-Stretton Co-op Drop-in	HTP, Public Participation
06/05/25	About Health – HTP Update	HTP, Public Participation
08/05/25	Wellington U3A presentation (HTP)	HTP, Public Participation
09/05/25	Wellington HTP Market Drop-in	HTP, Public Participation

12/05/25	Ironbridge Co-op HTP Drop-in	HTP, Public Participation
21/05/25	Wem Rural Community Drop-in	HTP, Public Participation
28/05/25	Hospital Monthly Update	Public Participation
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23/06/25	Ludlow Market HTP Drop-in	HTP, Public Participation
25/06/25	Hospital Monthly Update	Public Participation

5. **RECOMMENDATIONS**

The Public Assurance Forum is asked to note:

- the engagement which has taken place during Quarter 4 (2024/2025)
- feedback received from our local communities and any actions taken as a result of the feedback.
- The engagement activities planned for Quarter 1 (2025/26)

6. APPENDIX 1 – Actions from previous focus groups

The table below is of actions from this Quarter's focus groups, to view all actions, including those that have been closed please visit our website: [Hospitals Transformation Programme Focus Groups - SaTH](#)

ACTION LOG FROM MEC & SAC ACTION LOG

Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
03/12/2024	Kate Ballinger to organise an About Health Event on Digital for next year.	Kate Ballinger		Working towards February date with Digital team.	COMPLETE
03/12/2024	Kate Ballinger to liaise with Sally Orrell to include the changes in NHS work that the government have been discussing in digitalisation within brief for Hospital Update and the About Health Event.	Kate Ballinger		Regular information included in Hospital Update, to be covered in more detail during the About Health event.	COMPLETE
03/12/2024	Julia Clarke to raise the possibility of the Trust having an electronic car parking information board with Louise Kiely (Head of Facilities). [We found out following the meeting that this will be coming to SaTH in 2025/6.	Julia Clarke		ANPR System will be fully rolled out by first half of 2025 at which point information boards will be possible and pursued.	COMPLETE
03/12/2024	Julia Clarke to contact Weight Management leads in the Local Authorities and flag these issues raised.	Julia Clarke		Links made between focus group attendee and local authority leads on weight management strategy.	COMPLETE
03/12/2024	Kate Ballinger to contact Claire Parker around attending the Diabetes About Health Events being arranged at SaTH in 2025.	Kate Ballinger		Planning underway for thematic engagement in 2025, Claire Parker on invite list for Diabetes quarter - April to June 2025.	COMPLETE

03/12/2024	Claire Parker to contact Shropshire Council to see if the funding is still in place and whether has there been a reduction in social prescribing.	Claire Parker		The Shropshire Public Health Social Prescribing Service for adults continues to be delivered across the North, Shrewsbury, South East and South West PCNs. For Children and young people, the service is commissioned by the South East and South West PCNs, and although still available across the county, it has been significantly reduced (and referrals paused in some areas) due to withdrawal of funding from the Shrewsbury, North and Rural PCNs. Services are welcome to make referrals through the following: https://next.shropshire.gov.uk/public-health/social-prescribing/	COMPLETE
03/12/2024	Julia Clarke to liaise with Shropshire Community Health NHS Trust to arrange for a colleague to attend future focus group meetings.	Julia Clarke		Steve Ellis, Deputy Director of Operational Service Development for Shropshire Community Health Trust, will attend future MEC&SACC focus groups.	COMPLETE

ACTION LOG FROM W&C'S ACTION LOG

Date of meeting	Action	Lead Officer	Timescale/ Deadline	Comment/ Feedback from Lead Officer	Action
05/12/2024	Rachel Webster to speak with Sara Biffen (Hospital Transformation Programme HTP Delivery Director) about who to invite from Shropcom for the upcoming HTP Focus Groups, (subsequent to meeting it has been agreed that Steve Ellis, Deputy COO at Shropcom will attend the MEC&SACC focus groups).	Rachel Webster		Steve Ellis, Deputy Director of Operational Service Development for Shropshire Community Health Trust, will attend future MEC&SACC focus groups.	COMPLETED

Appendix 2

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

DATE	EVENT	VENUE	TIME
03/04/25	Volunteer to Career 5&6 Session 1	Education Centre PRH	1800-1900
13/04/25	Montford Bridge Cafe we will be holding a motorcycle event.	Montford Bridge Cafe - A5 SY4 1EB	09:30 - 13:00
02/05/25	Church-Stretton Co-op Drop-in	Co-op, Lion Meadow, Church Stretton, SY6 6BX	10:00-13:00
05/05/25	Mayors Charity Fete	The Quarry	10:00 - 16:00

06/05/24	Dying Matters Event, and official opening of the OWEN Room and special guests	SECC Dining Room	12:00 - 14:00
06/05/25	About Health - HTP	MS Teams	18:30-19:30
07/05/25	Telford Patients First	Dawley Town Hall	14:00 - 16:00
08/05/25	Volunteer to Career 5&6 Session 2	Education Centre PRH	1800-1900
08/05/25	Telford Community Connectors	TBC	
08/05/25	Wellington U3A presentation	Wellington Methodist Church, New Street, Wellington, TF1 1LU	14:00-15:00
09/05/25	Research Participant Celebration Event	Rodington Village Hall SY4 4QS	13.30-15.00
09/05/25	Wellington Market Drop-in	Wellington Market, 11 Market Street, Wellington, TF1 1DT	10:00-14:00
10/05/25	BOTS Open Day	Hope Church Hall, Oswestry SY11 2NR	11:00 - 14:00
12/05/25	Ironbridge Co-op Drop-in	Wharfage Road, Ironbridge, Telford, TF8 7NJ	12:00-16:00
13/05/25	V2C Cohort 5 - Find out about events	Theatre Severn	10:00 - 15:00
20/05/25	Shropshire Patient Group	Edstaston Village Hall, SY4 5RF	10:00-12:00
20/05/25	See Hear event/Dementia Information Day	MS Teams	10.00-12.00
21/05/25	Wem Rural Community Drop-in	Education Centre PRH	1800-1900
21/05/25	Community Connectors North Shropshire	Barns Theatre, Shrewsbury School	First show is 14:30:00 Second show is 19:30
22/05/25	Volunteer to Career Cohort 5 ONLY Industry Session	Education Centre PRH	09:00 - 16:00
26/05/25	Steel Magnolia play	Shrewsbury Sports Village	10:00 - 16:00
29/05/25	Young People's Academy	PRH	18:00-19:00
01/06/25	SaTH Charity Annual Football Tournament	K2 (William Farr House) and MS Teams	10:00-12:00
03/06/25	V2C Welcome event	Dawley Town Hall	14:00 - 16:00
03/06/25	MEC&SAC Focus Group	K2 (William Farr House) and MS Teams	10:00-12:00
04/06/25	Telford Patients First	MS Teams	18:30-19:30 (TBC)
05/06/25	W&C Focus Group	Education Centre PRH	1800-1900
10/06/25	SALC HTP Update	Shrewsbury Castle	11:00 - 15:00
12/06/25	Volunteer to Career Cohort 5&6 Session 3	Theatre Severn	10:00 - 12:00
14/06/25	Armed Forces Day Celebration	PODS Hub, 1 Hawksworth Road, Central Park, Telford, TF2 9TU	12:30 - 14:00
16/06/25	Armed Forces Outreach	Town Hall, 42 Broad Street, Welshpool, SY21 7JQ	10:00-14:00
16/06/25	Drop-In to PODS	MS Teams	17:00 - 19:00
16/06/25	Welshpool Market Drop-in	PRH	18:00-19:00
17/06/25	Shropshire Patient Group	Malinsgate Police Station, Telford TF3 4HW	09:00 - 17:00
19/06/25	V2C Session 1 -Effective communication	Buttercross, High St, Ludlow, SY8 1AW	10:00-14:00
22/06/25	Malinsgate Community Open Day	Education Centre PRH	09:15 - 15:00

23/06/25	Ludlow Market HTP Drop-in	Theatre Severn	10:00 - 15:00
26/06/25	People's Academy	Edstaston Village Hall, SY4 5RF	10:00-12:00

Public Assurance Forum Meeting 14 April 2025

Agenda item		2025/21			
Report Title		Strategy and Partnership Update			
Executive Lead		Nigel Lee, Director of Strategy & Partnerships			
Report Author		Carla Bickley, Associate Director of Strategy & Partnerships			
CQC Domain:		Link to Strategic Goal:		Link to BAF / risk:	
Safe	√	Our patients and community	√	BAF1, BAF2, BAF3, BAF4, BAF6, BAF7, BAF8, BAF9, BAF10, BAF11, BAF12, BAF13, BAF14, BAF15	
Effective	√	Our people	√		
Caring	√	Our service delivery	√	Trust Risk Register id:	
Responsive	√	Our governance	√		
Well Led	√	Our partners	√		
Consultation Communication					
Executive summary:		Significant work is in progress both in SATH and across the Integrated Care System on the development of the strategies and plans. Key issues to note include: - The important role of the Integrated Place Partnership Boards in our system. - Work continues to progress in numerous areas with a key focus on strengthening collaborative partnership working, internal strategies, health inequalities and supporting ShIPP neighbourhood sub group working. - National changes for ICBs and NHS England, which remain at early stages of development			
Recommendations for the Committee:		The Forum is asked to note the report.			
Appendices:		None			

1.0 Introduction

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

2. NHS Shropshire, Telford and Wrekin (STW) Integrated Care System (ICS)

Some highlights this quarter include:

- The Government NHS 10 year plan launch expected following consultation based on 3 major 'shifts':
 - Shift 1: moving more care from hospitals to communities
 - Shift 2: making better use of technology in health and care
 - Shift 3: focussing on preventing sickness, not just treating it
- National "Reforming Elective Care" Guidance published. Notably this encompasses 2 important themes for residents:
 - The focus on understanding health inequalities as part of reducing waiting times
 - Greater use of technology by patients as part of their pathway, including use of NHS App
- Operational planning complete for 2025/26
- Strategic Commissioning intentions have been developed, to give guiding priorities for the system
- ICB and NHSE reform – this is still in initial phase of development, and will create change across the system and England.
- Focus on Neighbourhood working – NHS England published guidance on neighbourhood health in January, and STW has produced a document outlining our local approach.

2.1 Integrated Care Board (ICB)

- Primary focus of the ICB for the period of November to March has been on managing Urgent and Emergency Care (UEC) with all system partners.
- Focus moving forward will be on NHSE reform and subsequent actions required.

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

Areas of focus included:

- CYP JSNA update and Youth Strategy
- Shropshire Neighbourhood Working
- Better Care Fund 2024-25
- Cancer Care Report - Healthwatch
- Shropshire Dental Access update
- Winter Resilience Plan - update
- Chair's Report (including Pharmacy updates)
- ShIPP Update

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

Both TWIPP and SHIPP have held workshops to consider priority areas of focus for 2025/26, based on system wide as well as local priority themes. A summary of this quarters topics included:

SHIPP

- ShIPP Neighbourhood Working Strategy and Hub Subgroup Update
- CYP JSNA – Pregnancy & Birth chapter and Youth Strategy
- Public Health Nursing Service

- Health & Wellbeing Board and SHIPP Development session
- Neighbourhood working priorities

TWIPP

- GP Out of Hours Procurement Briefing
- TWIPP Neighbourhood working Group established and finalising TWIPP priority workstreams
- Telford & Wrekin Council held a 2032 Vision Event and follow up meeting with multi-agency partners, focussing on the four most deprived areas in the South of Telford. Further scoping and alignment to commence
- Energise business case opportunity discussed and to be developed over next quarter

3. SATH Workstreams

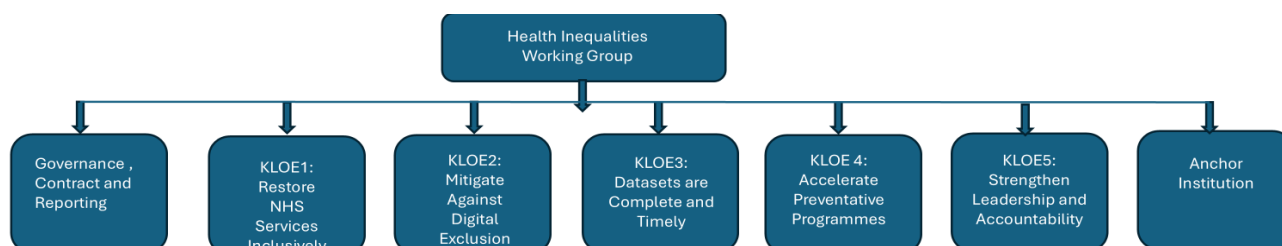
3.1 Provider Collaboratives

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

- Collaboration with University Hospital North Midlands Trust continues, focussing on maxillofacial, gynae, cardiology, microbiology, urology (Robotic surgery) and pathology. Work as key partners in the N8 Pathology Network Board is vital for digital, workforce and service sustainability.
- Continued joint work with STW partners in Musculo-skeletal service development.
- We continue to strengthen our relationships and support the development of our local provider collaborations and integrated system-wide working through various established boards and programmes of work. From March 2025 we have taken the responsibility of chairing the systemwide SHIPP working group ensuing alignment across all providers and system priorities.

3.2 Internal Strategies

Work continues to progress in relation to our Health Inequalities programme of work in the following areas (based on the National NHS priorities):



Strategy development includes:

- A review of the Equality, Diversity and Inclusion Strategy in conjunction with the ICS.
- A Trust Communications and Engagement Strategy has been developed and is currently in the process of being consulted on ahead of board approval.
- The Trust has commenced work to develop a data strategy, with engagement sessions to follow. Importantly, this is being developed in parallel with the ICB, who are also drafting a data strategy.
- A draft Estates strategy has been produced with engagement sessions planned ahead of board approval.
- Systemwide group continues to meet and align systemwide strategies such as weight management, suicide prevention and programmes of work.

Work continues to align our strategic priorities to the 2025/26 operational planning rounds.

4. Recommendation

The Forum is asked to NOTE the report.



The Shrewsbury and
Telford Hospital
NHS Trust



2025 - 2030

SATH CHARITY 5 YEAR STRATEGY

WELCOME TO THE SATH CHARITY STRATEGY 2025 - 2030

by Jo Williams, Chief Executive and Andrew Morgan, Chair in Common



At the Shrewsbury and Telford Hospital NHS Trust Charity, we believe in the extraordinary power of compassion and community to transform lives. This strategy is not just a roadmap—it is a call to action. It reflects our ambition to go beyond what is possible with NHS funding alone and to create a legacy of exceptional care for our patients, staff, and communities.

Every day, we see how your support changes lives. From funding advanced renal dialysis machines that give patients comfort and dignity, to creating welcoming oncology units that provide hope and healing for those on their cancer journey, your contributions are at the heart of these transformations.

As the dedicated charity for The Shrewsbury and Telford Hospital NHS Trust, we enable our hospitals to do more—going beyond what is possible with NHS funding alone. Together, we’ve made a tangible difference by:

- **Enhancing patient care:** Funding advanced clinical equipment that improves outcomes and experiences.
- **Supporting staff well-being:** Providing spaces and initiatives that help our incredible teams thrive.
- **Transforming environments:** Creating welcoming and modern facilities that promote healing and comfort.

This strategy builds on that incredible foundation. It outlines our bold vision for the next five years,

But we cannot do this alone. Behind every milestone is a community of people—donors, staff, volunteers, and partners—working together to achieve the extraordinary. Your support fuels our mission and ensures that no dream is too ambitious and no challenge too great.

As you read this strategy, we invite you to join us. Join us in shaping a brighter, healthier tomorrow for everyone in our community. Together, we can transform lives—one act of generosity at a time.

Thank you for being part of this incredible journey.

Together, we’ve already achieved so much:

- **£497,000 raised last year** by our generous community of donors and fundraisers.
- **£656,000 invested** in vital projects, from groundbreaking technology to improving patient environments.
- **842 donors and 76 fundraisers** united by a shared commitment to make a difference.

These are more than numbers—they are lives touched, futures brightened, and moments made possible by kindness and generosity.

STRATEGY ON A PAGE

OUR VISION

To be a nationally recognised, award-winning charity that sets the standard for transforming healthcare, supporting staff, and enriching the lives of every patient and community we serve.

OUR MISSION

To bring people and communities together to achieve extraordinary outcomes by funding innovative projects, enhancing care environments, and supporting the well-being of our staff beyond what NHS funding alone can provide.

OUR CHARITY VALUES

Partnering - working effectively together with patients, families, colleagues and other stakeholders



Ambitious - setting and achieving high standards for SaTH Charity to support continuous improvement the quality and sustainability of our services

Caring - showing compassion, respect and empathy in everything we do as a charity

Trusted - being open, transparent and reliable, doing our best to consistently support the delivery of excellent care for our communities

Our strategic objectives outline the bold steps we will take to achieve our vision of becoming an exemplary healthcare charity and delivering extraordinary outcomes for patients, staff, and our community

STRATEGIC OBJECTIVE 1

Forge Transformative Partnerships

We will build strong, dynamic relationships with local businesses, national organisations, and community groups to amplify our reach and resources. By working together, we can achieve greater impact, fund ambitious projects, and inspire collective pride in our hospitals.

STRATEGIC OBJECTIVE 2

Achieve Ambitious Growth in Income and Investment

We will grow our income to enhance patient care and staff well-being, ensuring the funds raised makes a meaningful difference. At the same time, we are committed to investing responsibly, safeguarding resources to maintain financial stability and sustain our impact over the long term.

STRATEGIC OBJECTIVE 3

Make Giving Effortless and Inspiring

We will create user-friendly and inclusive donation experiences that inspire generosity. From digital platforms to visible on-site opportunities, we'll ensure that everyone in our community can easily contribute and see the tangible impact of their support.

STRATEGIC OBJECTIVE 4

Redefining Care Through the Hospital Transformation Programme

We will launch a joint appeal to inspire community support, funding advanced medical equipment and creating uplifting environments that redefine care for patients and staff. By enhancing the patient journey and celebrating staff dedication, we will make the charity integral to the hospitals' transformation.

STRATEGIC OBJECTIVE 5

Empower and Equip Our People

We will support and develop our fund advisors, staff, and internal teams to maximize their potential. By providing training, tools, and guidance, we will align charitable efforts with the Trust's priorities and deliver exceptional outcomes together.

OBJECTIVE 1

Forge Transformative Partnerships

We will build strong, dynamic relationships with local businesses, national organisations, and community groups to amplify our reach and resources. By working together, we can achieve greater impact, fund ambitious projects, and inspire collective pride in our hospitals.



We are very fortunate to have amazing support from our two main charitable partners – SaTH League of Friends and Lingen Davies Cancer Fund. We will continue to nurture these relationships but also look to develop closer links with local organisations and corporate bodies

WHAT WE WILL DO	ENABLERS	OUTCOMES	TIMESCALE
1. Continue to support the fundraising activities of partner charities – League of Friends and Lingen Davies	Work closely with executive committees to work collaboratively	Continued strong relationship and positive joint working	2025-2030
2. Develop Corporate Strategy to strengthen links and opportunities to expand corporate sponsors	Develop corporate sponsorship database and resource pack. Identify subject experts to visit and build links with organisations	Increased interest/enquiries about legacy/future gifts opportunities	2026/7
3. Develop a Legacy Strategy to raise awareness of opportunities for future gifts in wills	Develop a tree of remembrance offer on both sites. Attend staff financial retirement sessions. Liaise with local legal firms	Clear and easy process for legacy bequests and, in due course, increase in bequests received	2027/8

OBJECTIVE 2

Achieve Ambitious Growth in Income and Investment

We will grow our income to enhance patient care and staff well-being, ensuring the funds raised makes a meaningful difference. At the same time, we are committed to investing responsibly, safeguarding resources to maintain financial stability and sustain our impact over the long term.

Every patient deserves the best possible experience during their time in our hospitals – from the moment they arrive until they're ready to return home. Over the next five years we will work to put patients at the heart of everything we do, by supporting and funding services and key programmes to provide an exceptional patient experience at every stage of their treatment journey.

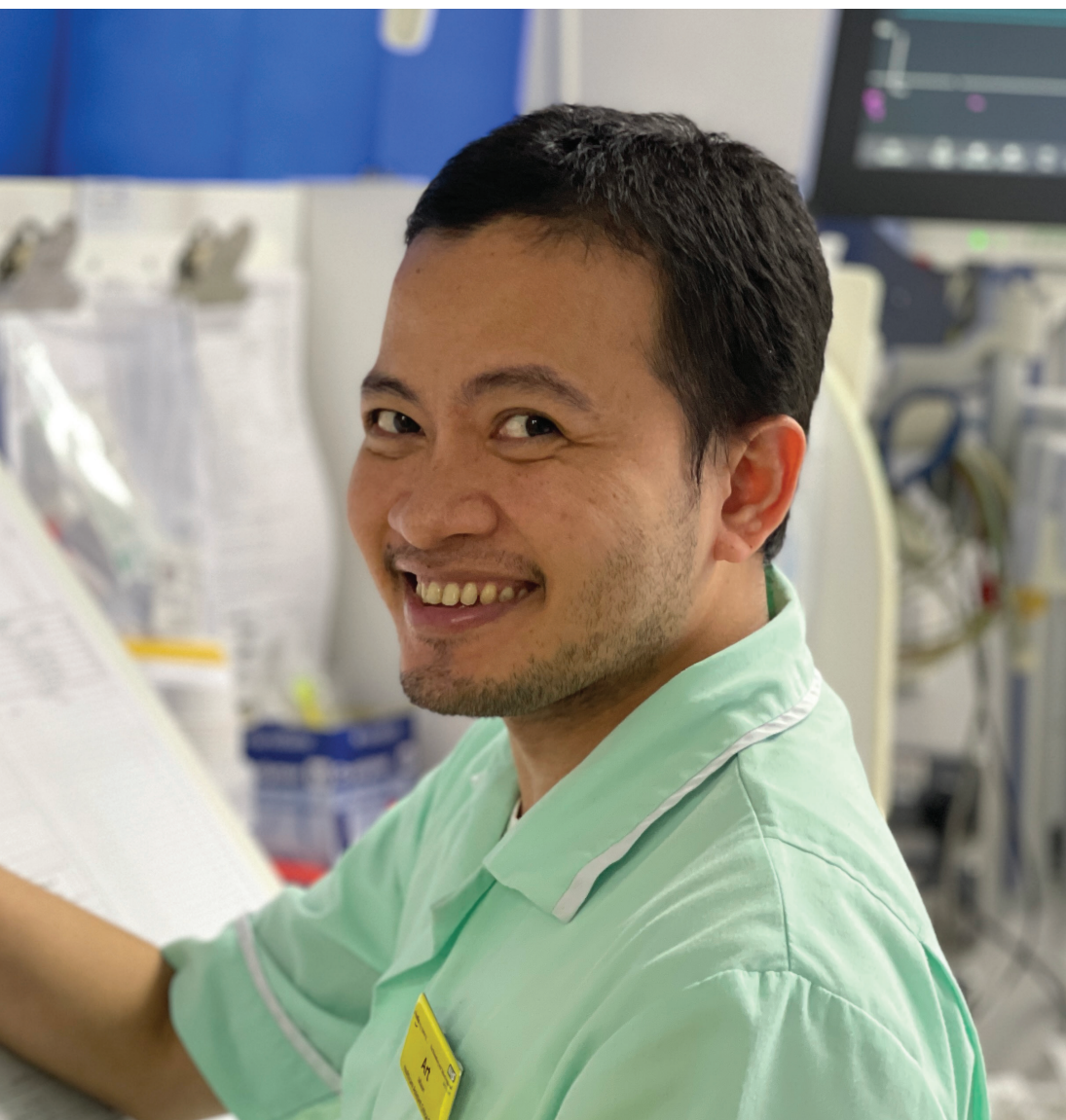
WHAT WE WILL DO	ENABLERS	OUTCOMES	TIMESCALE
1. Develop and extend our existing fundraiser database	Managing and rewarding fundraisers to further develop the relationship	Developed long-term meaningful relationships with our fundraisers. To see increased staff and community fundraisers	2025/6
2. Work closely with the Trust's Communication team to promote SaTH Charity with external and internal audiences	Agree clear activity timetable with dedicated Comms link	Greater visibility of Charity activity in social media, press and internal communications	2025/6
3. Manage our investments to optimise returns, balancing against risk and liquidity considerations with due consideration of our values reflected in the portfolio	Longer-term perspective of performance and discussion with our portfolio advisers	Our investment activity aligns with our values and supports charitable activity now and in the future	2027/8



OBJECTIVE 3

**Make Giving Effortless
and Inspiring**

Make Giving Effortless and Inspiring
We will create user-friendly and inclusive donation experiences that inspire generosity. From digital platforms to visible on-site opportunities, we'll ensure that everyone in our community can easily contribute and see the tangible impact of their support.



Many patients and their families wish to show their appreciation for clinical services and NHS staff by donating to their local Trust. There is currently little opportunity to do this on-site so we will work with our communities and clinicians to make this easier and provide stories and visible evidence of how donations were spent

WHAT WE WILL DO	ENABLERS	OUTCOMES	TIMESCALE
1. Improve the SaTH Charity branding	Work with our staff, our supporters and volunteers to create a professional brand for the Charity	An inclusive and recognisable brand that reflects the Charity's values	2026/7
2. Ensure the Charity is more visible within the hospitals	Have digital donation facilities e.g. tap and donate in main entrances and areas of high footfall	An instant and accessible way for members of the public to donate resulting in increased income	2025/6
3. Streamline the internal requests and approvals process for staff	Consult on process and develop new policy and electronic request form	A reduction in delays for expenditure requests and greater staff satisfaction with process	2025/6

OBJECTIVE 4

Redefining Care Through the Hospital Transformation Programme

We will launch a joint appeal to inspire community support, funding advanced medical equipment and creating uplifting environments that redefine care for patients and staff. By enhancing the patient journey and celebrating staff dedication, we will make the charity integral to the hospitals' transformation.

The clinical model is fully funded but hospitals need to meet the evolving healthcare needs of the communities they serve. Working in partnership with our communities, our partner charities strive to enhance the experience of all people using our services, with particular focus on some exciting developments – a Cancer Centre at PRH for Telford patients, a Respiratory Centre at PRH for all our patients in Shropshire, Telford Wrekin and Mid-Wales. We also hope to provide enhanced, landscaped “sky gardens” at RSH

WHAT WE WILL DO	ENABLERS	OUTCOMES	TIMESCALE
1. Explore and develop partnership working to create opportunities to support major appeals for HTP	Work with existing Charity partners and develop links with corporate sponsors	A coordinated and credible major appeal to raise significant funds for specific project(s)	2025-2027
2. Develop prioritised HTP “wish list” for discussions with potential supporters	Develop marketing and information materials to create a resource library for fundraisers	Prioritised fundraising for equipment/building	2026/7
3. Make HTP experts available to support fundraising activities	Working with Public Participation team, HTP team and Sath Charity to maximise impact	Positive community support and continue to ensure clear understanding of HTP benefits are known	2025-2030



OBJECTIVE 5

Empower and Equip Our People

We will support and develop our fund advisors, staff, and internal teams to maximize their potential. By providing training, tools, and guidance, we will align charitable efforts with the Trust's priorities and deliver exceptional outcomes together.

Our staff are key partners in delivering the objectives of the Strategy, both in terms of managing the different Trust Funds that constitute SaTH Charity and as enthusiastic fundraisers.

WHAT WE WILL DO	ENABLERS	OUTCOMES	TIMESCALE
1. Ensure fundraising priorities and divisional charity expenditure plans are aligned to Trust's strategic priorities	Integrating fundraising and expenditure plans into the Trust's capital and annual business planning processes	Identified schemes/projects suitable for charitable funding by SaTH Charity or partners	2025/6
2. Provide guidance and training for fund advisors and staff on donor stewardship and fundraising activities	Regular attendance at Divisional Boards by Charity team and individual development sessions with fund advisors	Staff will recognise and deliver their important role in the delivery of our charitable objectives	2025/6
3. Fund investments in clinical equipment, the hospital environment and enhanced service delivery based on divisional plans	Clearly summarised business plans and financial cases to support funding requests	Optimised health outcomes and/or patient experience	2025-2030



FUNDRAISING ROADMAP

EVENTS

Launch Year 1 of HTP appeal and introduce new Charity Policy with streamlined processes

2025

CORPORATE AND LOCAL BUSINESSES

Launch Corporate Strategy and resource pack for local businesses

2026



2027

APPEALS

Consider next phase HTP or other major appeal

2028/9

INDIVIDUAL GIVING

Year 1 of introduction of digital donations on hospitals sites and development of hospital remembrance trees

INVESTMENTS

Develop values-based, sustainable investment portfolio

FUTURE GIFTS

Develop Future Gifts offer through legacies and promote sensitively with staff and community



GOVERNANCE

SATH CHARITY STRATEGY GOVERNANCE

The SaTH Trust Board, as Corporate Trustee, is responsible for the governance of SaTH Charity, and therefore for ensuring that the Charity complies with legislation (Charities Act 2022) and the requirements of the Charity Commission. The Corporate Trustee has a duty to ensure the Charity has a clear vision and manages the Charity in accordance with the Charity’s purpose.

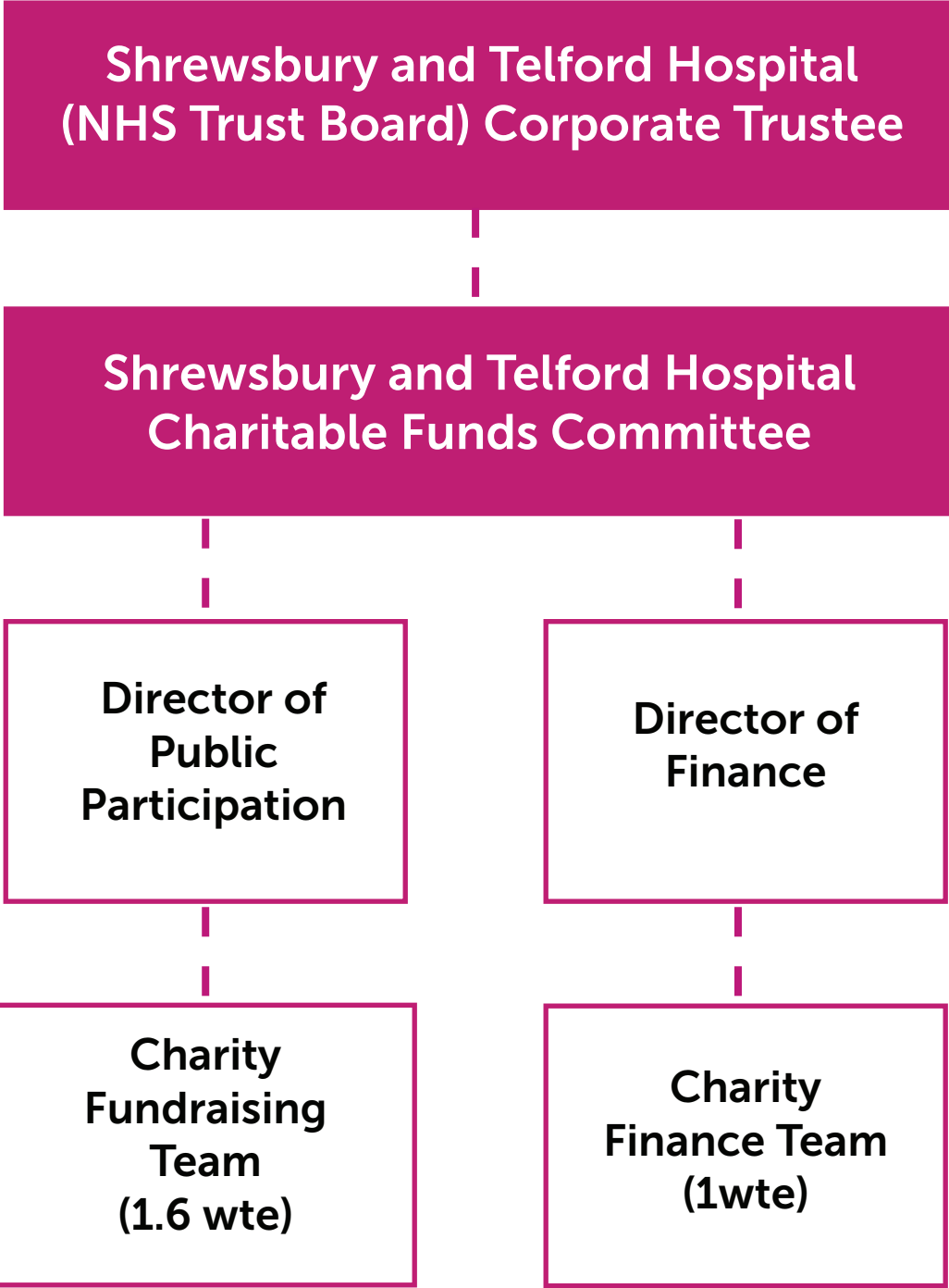
Key Performance Indicators for SaTH Charity set against the five strategic objectives, including financial performance, engagement and impact and reported quarterly through the Strategy on a Page to the Charitable Funds Committee.

The Charitable Funds Committee meets quarterly and is responsible for setting targets and indicators of success and to review performance against these to identify whether the aims of the Charity are being met. They also consider all Charity funding requests between £15,000 and £75,000. The Corporate Trustee considers all Charity funding requests over £75,000.

All requests less than £15,000 but more than £2,000 are approved by two members of the Charitable Funds Committee, one of whom must be an Executive Director. All requests under £2,000 can be approved by the Fund Advisor once it has been reviewed by the Charity team to ensure it meets the objects of the Charity.

SaTH Charity is committed to transparency, accountability, and impact, ensuring that all funding decisions contribute to enhancing patient care and staff support.

SATH CHARITY STRUCTURE



#SaTHCharity



Supplementary Information Pack

Agenda item

2025/23

- i. Public Participation Plan: 2024/25 Action Plan Update **Pages 104-110**
- ii. Draft Public Participation six monthly Board Report **Pages 111-158**

Public Assurance Forum: 14 April 2025

Agenda item		2025/23	
Report Title		Public Participation Department Priorities 2024/25	
Executive Lead		Julia Clarke, Director of Public Participation	
Report Author		Hannah Morris, Head of Public Participation	
CQC Domain:		Link to Strategic Goal:	Link to BAF / risk:
Safe		Our patients and community	√
Effective		Our people	
Caring		Our service delivery	
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:		1. The Forum’s attention is drawn to Appendix 1 – Plan on a Page for: • Community Engagement (including HTP) • Volunteers • SaTH Charity 2. The key risks are: • Fail to deliver the Public Participation Plan, resulting in a lack of confidence for our communities • Fail to deliver statutory duties (s242) to engage with the public, resulting in possible judicial challenge 3. We are have the following actions: • Continue to support our Divisions to ensure they meet their Statutory Duties.	
Recommendations for the Public Assurance Forum:		The Public Assurance Forum is asked to: NOTE The Activity completed by each of the areas during Quarter 4 This report is provided for information only .	
Appendices:		Appendix 1: Plan of a Page for Community Engagement, SaTH Charity and Volunteers	

1.0 Introduction

- 1.1 The Public Participation team consists of community engagement (including HTP), volunteers and SaTH Charity
- 1.2 The Public Participation Plan (PPP) was developed in 2021 partnership with our local communities with over 1000 contributions to identify the main theme. The Plan outlines how we will work with our communities over the next five years and was approved by the Trust Board in October 2021. Following approval of the Plan, an action plan was developed.
- 1.3 We then asked members of PAF and SaTH community members to prioritise the agreed actions to form an annual plan for the next five years. The results are shown in the overarching plan which has been developed into the prioritised Community Engagement 2024/25 plan on a page (Appendix 1). This now includes all the outstanding actions and supersedes the original 2021 PPP action plan. This update also contains the full suite of Public Participation annual plans (i.e. Community Engagement Volunteers and SaTH Charity).
- 1.4 We have issued a SaTH Charity Strategy 2025-2030 [\[insert link\]](#) and will be developing a five-year Community Engagement Strategy for 2025-30 and will engage with PAF and members of the wider community throughout its development. We will also be developing a Volunteers Strategy 2025-2030 and will engage with our volunteers and the wider community.
- 1.5 Highlights of key achievements from Quarter 4 from each of the Public Participation areas includes:

1.6 Volunteers:

- Volunteer to Career programme Cohort 5 to start in June and which will include Veteran and Families, as well as maternity.
- The volunteer annual survey is live, and a focus group is being organised with volunteers to go through the results. This has been slightly delayed due to capacity issues within the volunteer team.
- Plan on a Page for 2025/26 has been developed and approved.
- As part of National Volunteer Week, the Trust is holding a volunteer thank event on 4th June at Wroxeter Hotel.
- The volunteer database has been updated and is regularly reviewed
- "Volunteer to Career - find out more" focus group held in March and plans underway for focus group topics for 2025/26
- Volunteer recruitment has been put on hold for non-priority areas due to the Trust recruitment freeze and capacity issues within the volunteer team
- Volunteering was promoted at the recent People's and Young People's Academies
- January Volunteer Coffee and Catch Up held at RSH and plans underway for the new

year

- Please note that due to a vacancy freeze there were 3 vacant posts within the team. All 3 new members of the team started on 31 March 2025. This leaves one vacancy which will be going through the recruitment approval process.

1.7 Community Engagement:

- There has been a pause in community engagement for 6 weeks before the local elections on 1 May 2025.
- Plans for Spring/Summer engagement reviewed considering thematic engagement for 25/26. Target audiences from Core20PLUS5, which is a national approach to support the reduction of health inequalities at both national and system level, The approach defines a target population of the most deprived 20% of the national population – the Core20, with the Plus being population groups identified at local level e.g. ethnic minority communities, people with learning disabilities, protected characteristics under the Equality Act 2010 as well as inclusion health for people experiencing homelessness, drug and alcohol dependency, Gypsy, Roma and Traveller communities etc. The approach identifies 5 focus clinical areas requiring accelerated improvement – Maternity, Severe Mental Illness, chronic respiratory disease, early cancer diagnosis and hypertension. These are an area of focus for ongoing engagement
- “About Health” programme for 25/26 being developed with specialist sessions on themes identified for engagement based on Core20Plus5.
- People’s Academy and Young People’s Academy updated, and first sessions delivered. These have been paused until September recognising capacity issues in the team. (There are currently two posts vacant and only one engagement team member in post)
- Working with Trust Health Inequalities network to identify areas for targeted engagement over the coming months
- Community Survey needs to be developed as part of the background work for the Community Engagement Strategy 2025-30 and has been added to Action plan for Q1.
- Young People’s Academy delivered from SERII in February with 19 attendees, People’s Academy delivered from William Farr House in March with 16 attendees.
- Support provided for HTP through monthly email update and sharing information at community meetings
- Three “About Health” events delivered in Q4 -January—HTP Update, February—Emergency Planning, March—Parking now and in the future
- No support required by Divisions regarding service changes required this Quarter

1.8 SaTH Charity:

- The Charity saw a 39% increase from £359k to £497k in our latest audited accounts published on the Charity Commission website in January 2025. Quarterly email has been drafted, and will go out to supporters after the local elections on 1 May 2025 [insert link please]

- There have been a large number of positive news stories which have been picked up by local and national media
- We have supported 27 wards and departments through the Small Things Fund which is funded mainly through the staff lottery and is used to provide wellbeing and environmental improvements for staff.
- The Corporate Trustee approved the new Charity Strategy (2025-2030). Plan on a Page developed and approved for 2025/26
- The Charity's Policy has been reviewed, updated and approved by the Corporate Trustee. and along with the updated expenditure request form is now on the intranet.
- League of Friends and Lingen Davies are working with SaTH Charity to support fundraising for HTP
- There is regular review of how we communicate and engage with supporters and potential supporters of the charity.
- A plan is being developed to support fundraising opportunities in relation to HTP

2 Recommendations

The meeting is asked to:

NOTE the current activity in Quarter 4 2024/25 across the Public Participation Team against the Public Participation action plan.

Julia Clarke
Director of Public Participation
April 2025



Stakeholder Groups

A. Public (incl. patients)

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

B. Local Business and Organisations

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

C. Staff

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

D. Existing charitable organisations providing support

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

E. Volunteers

They might develop into active fundraisers. Volunteers give time which is comparable to giving money and aligns to supporting SaTH. Volunteers can raise the profile of the charity.

Charity Team

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

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

Strategic Aims

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

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

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

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

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

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

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

Desired Outcomes

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

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

Q1	Q2	Q3	Q4	General Notes
April – May – June	July – August – Sep	Oct – Nov – Dec	Jan – Feb – March	Progress against Q4
- Prepare the SaTH Charity "Thank you daisy" campaign to raise awareness to staff of SaTH Charity. - Gain approval for the first SaTH Charity abseil as a major fundraiser and profile builder. Gain support from Lingen Davies and the League of Friends to make it a joint event. - Launch webpages and booking process to sign up 130 supporters of the Abseil - Quarterly Charity Supporters email to be sent - Attend and engage with NHS Charities Together National Conference - Develop funding process support for LoF and Lingen Davies - Secure fixed term contract for Charity Comms & Engagement post - Development of positive news and engagement stories 12	- Promote SaTH Charity Abseil as a fundraiser and profile builder with staff and supporters - Submit draft copy of the Annual Report for review by CFC. - Promote our Lake Vrynwy Half Marathon Runners - Development of positive news and engagement stories 12 - Awareness campaign on Staff Lottery Sign Ups and summer promotion of Small Things Fund - Seek to gain approval of the Communications and Marketing post initially funded through NHS CT - Promotion of 'Small Change Big Difference' Scheme - Quarterly Supporters email to be sent - Hold SaTH Charity Abseil event - Develop fundraising visibility plan - Increase corporate supporters	- Quarterly Supporters email to be sent - Development of positive news and engagement stories 12 - Engage with the Divisional teams to ensure they have everything they need available to them to include charitable funds in the planning process for 2025/2026 - Winter promotion of small things fund - Finalise the annual report with accounts and seek approval from Corporate Trustee - Visit divisional board meetings to update on the charity. How to access funds, fundraising support etc - Support the Charity's Trustees in developing and implementing the charity's strategy development. - Focus on Legacy giving, consider a campaign of some description.	- Quarterly supporters email - Development of positive news and engagement stories - To support staff through the Small Things Fund - Raise the profile of the charity through actions on the Public Participation Plan - Research options for a multi charity event in 2025 with LoF and LD. - Review all marketing and media identify any gaps and meet the shortfall. - Develop an action plan based on the Trustee produced strategy when available. - Review the requests for HTP support, identify opportunities to support as and where appropriate	- Quarterly email has been drafted, and will go out to supporters shortly - We have had a large number of positive news stories which have been picked up by local and national media - We have supported a 27 wards and departments through the Small Things Fund. - Completed actions from the Year's plan on a Page. The Corporate Trustees have approved the new Charity Strategy (2025-2030). Plan on a Page developed and approved for 2025/26 - The Charity's policy has been reviewed, updated and approved by the Corporate Trustee's. - LoF and LD are working with SaTH Charity around fundraising for HTP - Regular review how we communicate and engage with supporters and potential supporters of the charity. - Developing a plan to support fundraising opportunities in relation to HTP

- Areas of Focus

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

SaTH Community Engagement Action Plan 2024/2025  Our Vision: To provide excellent care for the communities we serve  The Shrewsbury and Telford Hospital NHS Trust																								
Strategic Aims To contribute to delivery of the Public Participation Plan, namely: 1. INCLUSION: 2. RESPONSIVE: 3. DECISION-MAKING: 4. GET INVOLVED: 5. COMMUNICATION: 6. OUR STAFF:																								
Desired Outcomes - Make every contact count, and identify and find ways to engage with those communities who may have barriers to engage with us - Key barriers to engagement identified & mitigation in place - Regular meetings/networks in place to keep in contact with stakeholders - Increase in incoming enquires and active and ongoing engagement from stakeholders - Increase in both group & individual membership (Target 10% over the year)																								
Key Risks / Benefits <table> <tr> <th></th><th>L</th><th>C</th><th>LxC</th><th>Mitigated L&C</th></tr> <tr> <td>Fail to deliver the Public Participation Plan, resulting lack of confidence of our communities</td><td>2</td><td>4</td><td>8</td><td>A detailed Action Plan and yearly plan on a page will be drawn up and submitted quarterly to the Public Assurance Forum (PAF)</td></tr> <tr> <td>Fail to deliver our statutory duties (S242) to engage with the public</td><td>3</td><td>4</td><td>12</td><td>Continue to support our Divisions to ensure they meet their statutory duties. Update PAF on engagement relating to service changes</td></tr> <tr> <td>Failure to continue to involve communities during the building stage of HTP could result in challenge</td><td>2</td><td>5</td><td>10</td><td>Full programme until 2027 and ongoing attendance/ events planned until 2027</td></tr> </table>						L	C	LxC	Mitigated L&C	Fail to deliver the Public Participation Plan, resulting lack of confidence of our communities	2	4	8	A detailed Action Plan and yearly plan on a page will be drawn up and submitted quarterly to the Public Assurance Forum (PAF)	Fail to deliver our statutory duties (S242) to engage with the public	3	4	12	Continue to support our Divisions to ensure they meet their statutory duties. Update PAF on engagement relating to service changes	Failure to continue to involve communities during the building stage of HTP could result in challenge	2	5	10	Full programme until 2027 and ongoing attendance/ events planned until 2027
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Q1 Q2 Q3 Q4 General Notes																								
April—May—June 2024 Jul-Aug-Sep-2024 Oct—Nov—Dec-2024 Jan—Feb—March-2025 Quarter 4 Update cont.																								
1. Recruit Fixed term Community Engagement Facilitator to lead work with Children and Young People 2. Plan major events to attend over the next 12 months 3. Publish Community Survey report and review/refresh digital communication channels 4. Meet with DWP and local authority teams to explore development of People's Academy 5. Deliver People's Academy and Young People's Academy days 6. Provide support for Hospitals Transformation Programme 7. Deliver About Health events 8. Work with the divisions to ensure they meet their Section 242 duties. 1. Attend community events to engage local population and recruit community members/ promote HTP involvement opportunities 2. Develop an action plan for engaging with CYP and identify areas of need and targeted engagement 3. Develop Learning Disability Academy for delivery in Q3 4. Attend Freshers' events at colleges/universities across Shrops, T&W and mid-Wales 5. Develop and deliver People's Academy and Young People's Academy days 6. Attend events during Disability Pride month (July) to raise profile of SaTH Involvement with community support groups 7. Attend JSNA Place meeting across Shropshire, T&W. Look for equivalent programme in Powys. 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. 1. Deliver LD People's Academy 2. Review engagement with those communities which may be socially excluded including Gypsy and Travellers and refugees/asylum communities and identify key areas of engagement for the next Quarter. 3. Create campaign to promote community membership through rural faith networks to align with Interfaith Week and About Health event. (Powys and Shrops) 4. Identify additional networking opportunities, and establish regular contact with both Healthwatch, Llais and NHS Shropshire, Telford and Wrekin 5. Explore use of #GetInvolved pages on SaTH website to report impact of feedback received 6. Provide update on refreshed digital engagement for Public Assurance Forum 7. Deliver People's Academy and Young People's Academy 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. 1. Develop spring/summer engagement calendar of external events 2. Confirm annual About Health plan and create publicity for distribution 3. Review and develop the People's Academy for 2025 4. Review engagement with Seldom Heard communities and develop an action plan for 25/26 5. Develop community survey for 25/26 6. Deliver People's Academy and Young People's Academy days 7. Provide support for Hospitals Transformation Programme 8. Deliver About Health events 9. Work with the divisions to ensure they meet their Section 242 duties. Quarter 4 Update 1. Plans for Spring/Summer engagement reviewed in light of thematic engagement for 25/26. Target audiences (Core20PLUS5) are an area of focus for ongoing engagement 2. About Health programme for 25/26 being developed with specialist sessions on themes identified for engagement 3. People's Academy and Young People's Academy updated and first sessions delivered to new schedules were very successful 4. Working with Trust Health Inequalities network to identify areas for targeted engagement over the coming months 5. Community Survey needs to be developed as part of the background work for the Public Participation Strategy 2026-31 and has been added to Action plan for Q1. 6. Young People's Academy delivered from SERII in February with 19 attendees, People's Academy delivered from William Farr House in March with 16 attendees. 7. Support provided for HTP through monthly email update and sharing information at community meetings 8. Three About Health events delivered in Q4, January—HTP Update February—Emergency Planning March—Parking now and in the future 9. No support required by Divisions regarding service changes required this Quarter 10. Please note due to a recruitment freeze there are two vacant posts within the team																								

SaTH Volunteer Development & Action Plan

April 2024 to March 2025

Stakeholder Groups

A. Volunteers

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

B. Staff

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

C. Public

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

D. Schools, Organisations and Local Business.

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

E. Other Volunteer Organisations.

Maintain relationships with other volunteer organisations such as LoF, Lingen Davies, British Red Cross, RVS etc.

Programme

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

Strategic Aims

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

V2 18/12/2024



Desired Outcomes

- To maintain the number of active volunteers at around 270 during the year
- Ensure those who have completed the recruitment process have meaningful and regular placements.
- To support areas that would benefit from volunteer's support and deliver that benefit.
- To provide 24 positive news stories to support Public Participation

Key Risks / Benefits	L	C	LxC	Mitigation
High turnover of volunteers creates capacity issues within the volunteer management team	4	1	4	Ensure robust recruitment process are in place, including structured interview. Those who do not meet the requirements to volunteers are, where possible, offered alternatives e.e.g work experience. Provide ongoing support through welfare calls and catch ups
The risk of providing adequate training prior to commencement with the Trust.	2	3	6	Strict on-boarding process to ensure that volunteers understand where they can work and how to mitigate risk through their training
Required Volunteer Recruitment to meet Trust need	2	3	6	All volunteer checks are done through the central Volunteer Dept. following an agreed protocol and the Manager has extensive experience of recruitment and Trust Policy. A recruitment focus is in place.

Q1	Q2	Q3	Q4	General Notes
April – May – June	July — August — Sep	Oct — Nov — Dec	Jan — Feb – March	Progress against Q4
- Progress with the Volunteer to Career Programme in Radio-therapy and Midwifery - Deliver Volunteers' Week 2023 - Promote volunteering through the Trust's Peoples Academy - Monthly coffee and cake catch up with volunteers 2 x Focus Group on selected area - Active database review - Establish a calendar of engagement events with local schools and colleges to ensure a good intake for the Youth Programme and Volunteer to Career Programme	- Launch 2024 September Youth Volunteer Programme - Engage with schools and colleges with on and off site presentations regarding volunteering - Interviewing, processing and training for the new cohort of Youth Programme volunteers - Review and update website content and social media exposure - Review Better Impact content (files, templates etc.) to ensure it is current. - Active database review 2 x Focus Group on selected area - Promote volunteering through the Trust's Peoples Academy - Monthly coffee and cake catch up with volunteers - Review roles and role descriptions on Better Impact and update where necessary	- Interviewing, processing and training for the new cohort of Youth Programme volunteers - Plan and sent volunteers annual survey - Promote volunteering through the Trust's Peoples Academy - Support Trust Awards volunteer recognition event - Volunteer Christmas campaign - Monthly coffee and cake catch up with volunteers 2 x Focus Group on selected area - Active database review - Produce a draft of the 5 year plan for volunteering	- Start planning of a Hybrid Volunteer to career programme that works not just for one specific area - Volunteer annual survey feedback and focus group - Develop a plan on a page for 2025/2026 - Plan Volunteers' Week 2024 - Review Better Impact as our management platform and implement updates 2 x Focus Group on selected area - Second in take for Youth Programme to open in February - Promote volunteering through the Trust's Peoples Academy - Monthly coffee and cake catch up with volunteers	- VtC programme Cohort 5 to start in June and will include Veteran and Families. - The volunteer survey is live and a focus group is being organised now the new volunteer manager is in post - Developed Plan on a Page for 2025/26 and this has been approved - Volunteer thank event booked for the 4th June at Wroxeter Hotel - The volunteer database has been cleansed and regularly reviewed - Find out more focus group held in March and plans underway for 2025/26 - Volunteer recruitment has been put on hold for non-project areas due to the Trust recruitment freeze and capacity issues within the volunteer team - Volunteering was promoted at the recent People's and Young People's Academy - January Coffee and Catch Up held at RSH and plans underway for the new year - Please note that due to a vacancy freeze there were 3 vacant posts within the team. All 3 new members of the team have started on 1st April

Public Assurance Forum: 14 April 2025

Agenda item		2025/23	
Report Title		Quarter 3&4 Public Participation Report	
Executive Lead		Julia Clarke, Director of Public Participation	
Report Author		Hannah Morris, Head of Public Participation	
CQC Domain:		Link to Strategic Goal:	Link to BAF / risk:
Safe		Our patients and community	√
Effective		Our people	
Caring		Our service delivery	
Responsive		Our governance	
Well Led	√	Our partners	
Consultation Communication			
Executive summary:		The Shrewsbury and Telford Hospital NHS Trust is committed to ensuring that the patient-public voice is at the centre of shaping our health services, both now and in the future. At the heart of our organisation and its future success are our patients, carers and local communities. We aim to provide the best care and experience we can, and to ensure that we do this, our local communities need to feel listened to, and that as an organisation we are responsive to their needs across Shropshire, Telford & Wrekin and Mid-Wales. Whilst we have a legal duty to engage with the public, we go far beyond this requirement. In the overview of the SaTH Care Quality Commission Inspection Report published in May 2024, the CQC found <i>“People who use services, the public and staff were highly engaged and involved to support high-quality sustainable services”</i> Under the banner of #GetInvolved, https://www.sath.nhs.uk/about-us/get-involved/get-involved-public-participation/ we aim to provide a range of opportunities for our communities to be involved with us. We reach out to engage with the public and the emphasis is on everything we do directly linking to our local communities.	
Recommendations for the Board:		The Public Assurance Forum is asked to: NOTE the current activity from October 2024 to March 2025 across the Public Participation Team and TAKE ASSURANCE from this work that our statutory duties are being met as well as CQC Well-led requirements	
Appendices:		Appendix 1: 6 month Public Participation Trust Board Report (in PAF supplementary pack)	

1.0 Public Participation Team

The Care Quality Commission rely on Key Lines of Enquiry (KLOEs), prompts and sources of evidence to answer the five key questions: is the service safe, effective, caring, responsive and well-led. One of the 8 Well-led KLOES is *“are the people who use the services, the public, staff and external partners engaged and involved to support high quality sustainable services”* and more specifically relating to public participation *“are people’s views and experiences gathered and acted upon to shape and improve the services and culture? Does this include people in a range of equality groups?”*

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

- Community Engagement including the Hospitals Transformation Programme (HTP)
- Volunteering
- SaTH Charity

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.

The Public Participation Report (which is in the Board supplementary pack and contains rich information and assurance on the work of the team) contains a summary/highlights of the work across these three teams in slides 2-4, with the detail in the following slides.

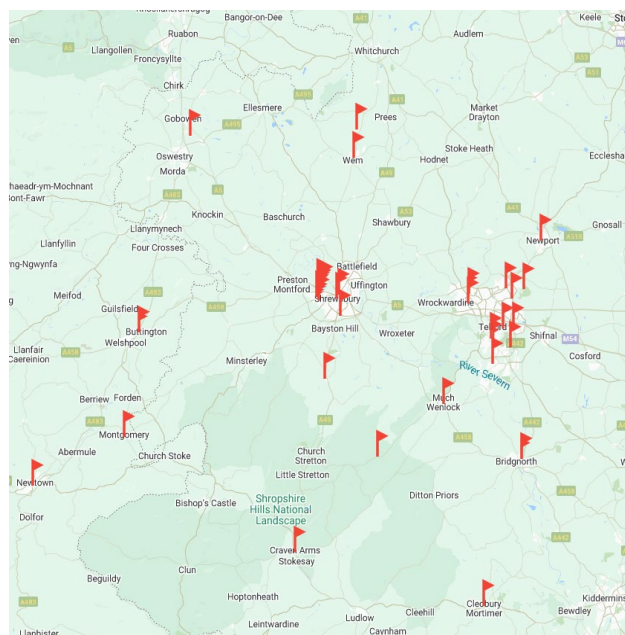
2.0 Community Engagement including HTP (slides 5-20 in presentation)

- 2.1 The Community Engagement Team continues to engage with the public with a regular series of virtual and face-to-face meetings, health lectures and newsletter email updates. Activity is reported to the quarterly Public Assurance Forum which is co-chaired by a SaTH NED (Professor Trevor Purt) and a public member from Montgomery Health Forum (Cllr Joy Jones) and has a wide range of community, voluntary and statutory sector organisations as members, who have the opportunity to discuss issues directly with our Divisional teams. Who also attend. The papers are published on our website for full transparency and key items from the meetings in October and January are included in the accompanying pack (Slides 6 and 7).
- 2.2 Our community members (5189) and organisations (469) continue to increase. (Slide 8 details) and they have access to a wide range of ways to find out more about the Trust and to get involved. Some of the events we have attended/organised are detailed on Slide 9
- 2.3 Our engagement team has been making stronger links with a number of Seldom Heard Groups over the past six months focusing on Gypsy and Traveller outreach, veterans/Armed Forces and deaf/hard of hearing groups (Slides 11-12).

2.4 **HTP engagement (see slides 13- 20)** The Public Participation Department has also been leading the work to engage with our local communities around the Hospitals Transformation Programme (HTP). Meetings are supported by the HTP team and chaired by the Director of Public Participation.

The team has organised a number of events including regular quarterly public focus groups (aligned to the clinical workstreams ie Medicine, Emergency Care & Surgery, Anaesthetics, Cancer & Critical Care and Women & Children's), as well as focus groups for patients with specific conditions eg mental health, dementia, children & young people and one looking specifically at the new main entrance. In early October we have held two face-to-face focus groups for the deaf (with support from BSL translators) and hard of hearing communities, one for our Veterans Community and two for GP Patient Participation Groups. All these have an extensive Q&A section to gain the views and comments from attendees. All focus groups presentations are published on our website along with the Q&As and action logs (after they've been reviewed by the attendees) to ensure full transparency. For more information please see our website: [HTP Focus Groups - SaTH](#)

2.5 We have also attended 42 events across the county and mid-Wales (noting there has been a pause due to going into pre-election in March) and a further 14 online events. The map below shows the spread of the face to face meetings and details are on slides 16-17 in the supplementary pack



2.6 We have been planning our engagement with our local communities for the next 6 months including the following focus groups:

- Communications and engagement for Urgent and Emergency Care (UEC) on Tuesday 3 June at 10:00am (Hybrid meeting)
- Wayfinding for new healthcare facilities on Thursday 5th June at 10:00am (Hybrid meeting)

2.7 Over the next 6 months we have planned 12 HTP drop in events across the areas we serve, in which the public can find out more about our plans. Drop-in are planned in:

Church Stretton, Shrewsbury, Wellington, Ironbridge, Wem, Oswestry, Welshpool, Ludlow, Bridgnorth, Market Drayton and Lydham

- 2.8 Our next HTP About Health Event is taking place on Microsoft Teams on Tuesday 6th May at 6.30pm
- 2.9 A special event was held in March in which focus group members were invited to see the first area that has been developed as part of the Hospital Transformation Programme – ED1. ED1 is the first development of our new emergency department at RSH and has our resuscitation area and part of our new Major's. Over 22 members of our focus groups and volunteers attended, with great feedback about the new facilities

3.0 Volunteers (Slides 21-27)

- 3.1 We currently have 251 volunteers, who have given almost 14,000 hours of volunteer time across a wide range of activities. We have over 30 different role descriptions across all areas on the Trust including non-clinical support roles. Our volunteers have supported an number of “one off events” alongside their regular placements, including Exercise Spring and the William Farr Academy (See slide 22).
- 3.2 We have held an number of focus groups for our volunteers including an Autism Awareness session and a feedback session to support improvements of the new outpatients entrance
- 3.3 Julia Clarke and Hannah Morris were invited to attend an event at the House of Commons, Over 80 leaders from across government, the NHS and voluntary and community sectors attended for the launch of a new report by Helpforce - “Unlocking the Power of Volunteering to support our NHS”. With in the report SaTH's Volunteer to Career programme was highlighted as an area of good practice. (slide 23)
- 3.4 There have been some changes to the volunteer team over the past 6 months and we have welcomed 3 new members of staff to the team - Volunteer Services Manager (Pete), Volunteer Project Lead (Eve) and a Volunteer Facilitator (Jez)
- 3.5 We celebrated one of our long serving volunteers, Terry Seston turned 90 in January. The news of Terry turning ninety spread and he was featured on the BBC news website and on Midlands Today News (slide 24)
- 3.6 As part of the Trust's annual Recognition week we held a volunteer celebration event, with over 60 volunteers attending. Peter Hicking won the title of Volunteer of the Year at the Trust awards. Peter regularly contributes over 1000 hours a year to the trust.
- 3.7 Following a successful bid proposal to the ICB the Shrewsbury and Telford Hospital NHS Trust and Helpforce are working together to deliver a 6-month volunteer project which should help to reduce hospital readmission through safe and timely discharge and follow up community support. This project starts in April 2025. The project includes implementing volunteer drivers to support patients getting home after discharge and providing telephone support for up to 72 hours post discharge. (slides 26-28)
- 3.8 The Volunteer to Career scheme continues to go from strength to strength – over the past the 6 months we have run a VtC cohort in radiotherapy (RSH) and within

midwifery (PRH). Our volunteers within Radiotherapy contributed over 461 hours of volunteering and our maternity volunteers have contributed over 893 hours (slide 29)

- 3.9 In partnership with the national charity Helpforce we are offering the opportunity to extend our Volunteer to Career programme to Veterans and their families. This will be a bespoke cohort and participants will have the chance to look at different roles in the NHS

4.0 SaTH Charity (Slides 30- 39)

- 4.1 SaTH Charity's Annual Report and audited accounts for 2023/4 were published on the Charity Commission website in January 2025. These show a 39% increase in income (from £359k to £497k)
- 4.2 In order to further increase charity income, particularly to meet HTP additional developments, the Charitable Fund Committee and Corporate Trustee will be considering increasing the 1.6wte fundraising team
- 4.3 Income for the 6 months of Q3& Q4 2024 was £209,142 compared to £319,462 in the same period last year. Expenditure for the same period was £147,179 compared to £116,195 in 2023). Some examples of expenditure are shown on Slide 32.
- 4.4 A 5 year Charity Strategy(2025-2030) has been developed and approved by the Charity's Trustees and provide a clear direction of travel for the charity moving forward
- 4.5 SaTH Charity Policy has been reviewed and amended and was approved by the Charity's Corporate Trustee's in March 2025
- 4.6 Currently SaTH Charity has 949 supporters (slide 33):
Donors (875) - Provide financial support to the charity – this could be through a one-off donation, or multiple donations.
Fundraisers (74) -Organise events, and other initiatives, such as a sponsorship for a marathon, to raise money and donations.
- 4.7 There are over 1000 members of staff who are now playing the staff lottery (from zero when it was started four years ago) - half the income is paid out in winnings to staff and half re-invested in the staff Small Things Big Difference Trust Fund.
- 4.8 Slide 34 -36 shows some of the way our supporters have raised money for SaTH charity including our annual staff football tournament, an Halloween fundraising event by regular fundraiser Sally Jamison, support by Telford Rotary Club for our dementia fund and The Works in Shrewsbury donating items for children at both our hospital sites.
- 4.9 Slides 37-39 highlight some of the ways SaTH Charity have made a difference, including, the redevelopment of Ward 32 Courtyard for Trauma and Orthopaedic patients (slide 37). Funding new internal signage to support patients and relatives navigate to clinics following the closure of the outpatient entrance (slide 38) and through our Small Things Big Difference fund (aimed at supporting staff), the charity have provided new furnishings for the restorative clinical supervision room (slide 39)

5.0 Q3 Looking Forward (summarised slides 40-42)

5.1 Looking Forward highlights (slide 40)

-
- The Public Assurance Forum to meet on 13 January 2025
- Continue to support staff with any future service changes engagement
- Supporting the HTP Engagement programme, including quarterly focus groups for the public and patients.
- Continued attendance at community events to engage with the public
- Continuing to support staff wellbeing through Charity Small Things Big Difference Fund
- 1-7 June is National Volunteer Week and we will be celebrating with our volunteers and staff with a special “Thank you” event on 4th June
- Work with Helpforce to set up the Veterans to Career pilot and the Volunteer Discharge Project.

5.2 Dates for your diary (slides 42). Please contact sath.enagagement@nhs.net or visit our website for more information [Public Participation - SaTH](#)

6. Recommendations

The Public Assurance Forum is asked to:

NOTE the current activity from October to March across the Public Participation Team and TAKE ASSURANCE from this work that our statutory duties are being met as well as CQC Well-led requirements

Julia Clarke Director of Public Participation

March 2024



Public Participation Report

(October 2024 – March 2025)

Julia Clarke – Director of Public Participation

Volunteering

Engagement

SaTH Charity

Highlights of Public Participation

COMMUNITY ENGAGEMENT (for full details see slides 6 – 20)

- The SaTH Public Assurance Forum, which provides independent assurance on our engagement activities met on the 14 October 2024 and 13 January 2025 the highlights of this meeting are outlined in slides 6-7. Professor Trevor Purt (NED) co-chaired this meeting with Joy Jones (Montgomery Health Forum)
- The Public Participation Team continues to engage with the public through a regular series of virtual and face-to-face meetings, health lectures and newsletter updates. Our community members (5189) and organisations (469) continue to increase.
- Over the past six months, the Public Participation team have supported 56 HTP events with the public. We have attended 42 face to face meetings and events, and 14 online events. (There has been a pause in March/April 2025 due to local elections, in line with Cabinet Office guidelines).
- The community engagement team continue to reach out to our communities and have made links with our Gypsy and traveller community across Shropshire, Telford & Wrekin.



Highlights of Public Participation

VOLUNTEERS (for details see slides 21 - 28)

- We have 251 active volunteers within the Trust who have provided 13,883 hours of their time over the last six months. These are across 30+ clinical and non-clinical roles.
- Following a successful bid application the Trust are working with Helpforce (a national charity) to deliver a 6-month volunteer project which should help to reduce hospital readmission through safe and timely discharge and follow up community support.
- Our Volunteer to Career (VtC) programme has successfully delivered two new cohorts of volunteers within Radiotherapy and midwifery. Cohort 5 is due to begin in June within Midwifery. We have also launched our VtC Veteran and families programme, which will join cohort 5 in June but provide participants with the chance to look a range of clinical and non-clinical roles within the NHS



Highlights of Public Participation

SATH CHARITY (for full details see slides 28 - 38)

- Income for the 6 months October 2024 – March 2025 was £209,142 compared to £319,462 in the same period last year. Expenditure for the same period was £147,179 compared to £116,195 in 2023
- SaTH Charity had **164** requests for support from SaTH Charity, **56** of which were for the staff Small Things/Big Difference Fund.
- Our supporters continue to fundraise for SaTH Charity, with some events highlighted in this report.
- A 5 year Charity Strategy(2025-2030) has been developed and approved by the Charity's Trustees and provide a clear direction of travel for the charity moving forward
- SaTH Charity Policy has been reviewed and amended and was approved by the Charity's Corporate Trustee's in March 2025



COMMUNITY ENGAGEMENT

COMMUNITY ENGAGEMENT

Public Assurance Forum 15 October 2024

- The Public Assurance Forum (PAF) was established in 2021 to bring a public and community perspective to processes, decision making and wider engagement work at The Shrewsbury and Telford Hospital NHS Trust. The Forum provides constructive challenge and scrutiny of decisions from a patient and public perspective. They also share information back into their own organisations
- PAF has a wide range of community and statutory sector organisations as members as well as representation from SaTH's Divisional Leadership Team. All papers are available on the Trust website [Public Assurance Forum – SaTH](#)
- The Public Assurance Forum (PAF) met on 14th October 2024, key items that were discussed at the Forum included:
 - An update on the RSH modular wards from the Assistant Chief Executive
 - Presentation on the 2024/5 Operational Plan from the Director of Finance
 - Updates from partner organisations and Divisions
 - Presentation from the Director of Nursing on nurse staffing levels
 - Digital Transformation update with reference to the patient portal
 - Presentation on latest HTP developments and latest ongoing community engagement
 - Presentation from Director of Strategy and Partnership on key developments
 - Presentation on the Emergency Preparedness and Resilience core standards position at SaTH
 - Public Participation action plan update and review of draft Public Participation Board report

COMMUNITY ENGAGEMENT

Public Assurance Forum 13 January 2025

- The Public Assurance Forum (PAF) met on 13th January 2025, key items that were discussed at the Forum included:
 - Updates from partner organisations
 - Updates provided by the Divisions on service development and any public engagement
 - Presentation on latest HTP developments (including the proposed presentation for the 'About Health' public update). The HTP Programme Board Engagement report for quarter 3 was discussed.
 - Digital Transformation update, including an update on the A&E waiting time webpage. After discussion with the group, a more detailed update will be provided at April's meeting
 - Presentation from Associate Director of Strategy and Partnership on key developments
 - Public Participation action plan update (including Plan on a Page for Charity, Community Engagement and Volunteers) was discussed

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 newsletter update** – An email update to our 5000+ members and organisations
 - **Monthly Hospital Update (previously Community Cascade)** – this is a public session delivered once a month by the Director of Public Participation and focuses on current hospital news, public participation update and provides a Q&A opportunity. The presentations are available on our website
 - **About Health Events**– There is an ongoing series of one hour Teams health events delivered by health professionals for staff and the public on topics including the menopause, HTP, chaplaincy and other requested topics. The sessions are recorded and available on the website, with an opportunity for Q&As.
- The Hospitals Transformation Programme remains the main theme of feedback received by the Community Engagement team and we continue to work closely with HTP colleagues to support ongoing engagement.



Community Members

Total at 31/03/25 **5189**

Joined Oct - March **194**



Organisations

Total at 31/03/25 **469**

Joined Oct - March **40**



Community Events

Held Oct - March **12**

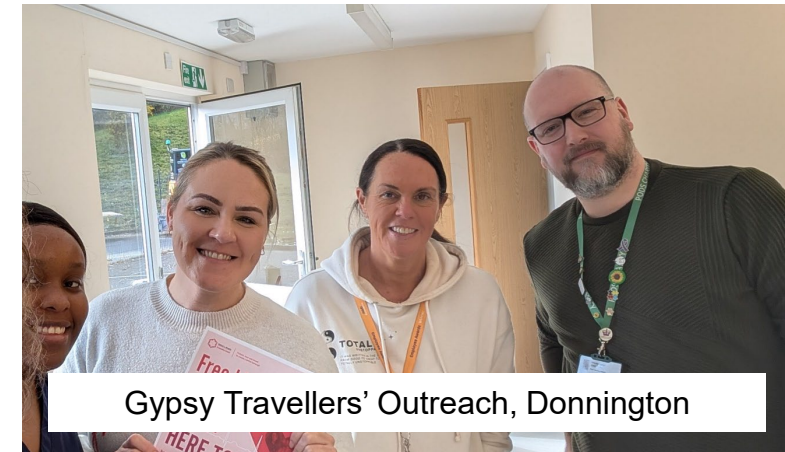
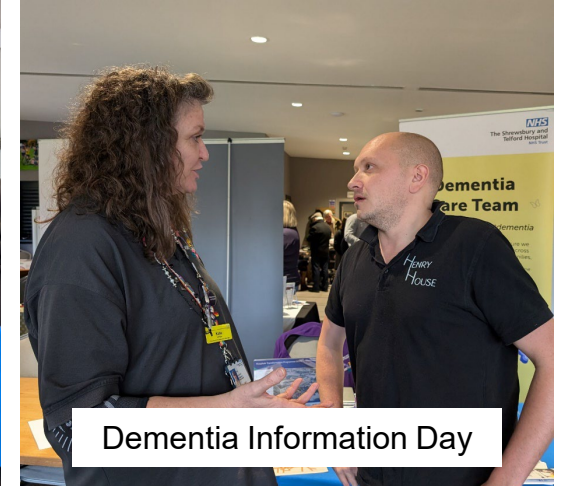
Attended Oct - March **60**

Community Engagement

The Engagement team have attended a wide range of events across the whole of Shropshire, Telford & Wrekin and mid-Wales over the past 6 months, sharing information about HTP, volunteering and involvement opportunities and gathering feedback about SaTH services.

Events included:

- Wem Health event
- Montgomery Health Day
- Carer's Rights Day events in Telford & Shrewsbury
- Dementia Information Day at Bridgnorth Rugby Club
- Shropshire Rural Support
- Community Connectors (across Shropshire and Telford & Wrekin)
- Welshpool Livestock Market
- Community Open Day (Donnington)



Community Engagement - Hospital Events

Our Autumn/Winter About Health programme has covered a wide variety of topics including:

- Menopause
- HTP (x2)
- Pastoral Care in our hospitals
- Research & Innovation
- Emergency Planning
- Parking Now and in the future

When the public register for these events they are asked if they want to join the Trust as community members. The Parking event alone brought more than 20 new members who now receive our monthly updates.

Allowing for breaks for Christmas and the pre-election period, the engagement team have also delivered:

- 4 x online Hospital Update meetings
- 2 x Young People's Academy and 1 x People's Academy



Our Menopause About Health event remains our most popular session and was attended by ~100 people



Our Pastoral Care About Health event had >20 people attend and created a new volunteer for the team



Quarterly updates about research opportunities at the Trust are now included in #GetInvolved



We shared information about onsite parking to >20 members of the public with potential to follow up in 12 months

Social Inclusion - Gypsy and Traveller Outreach

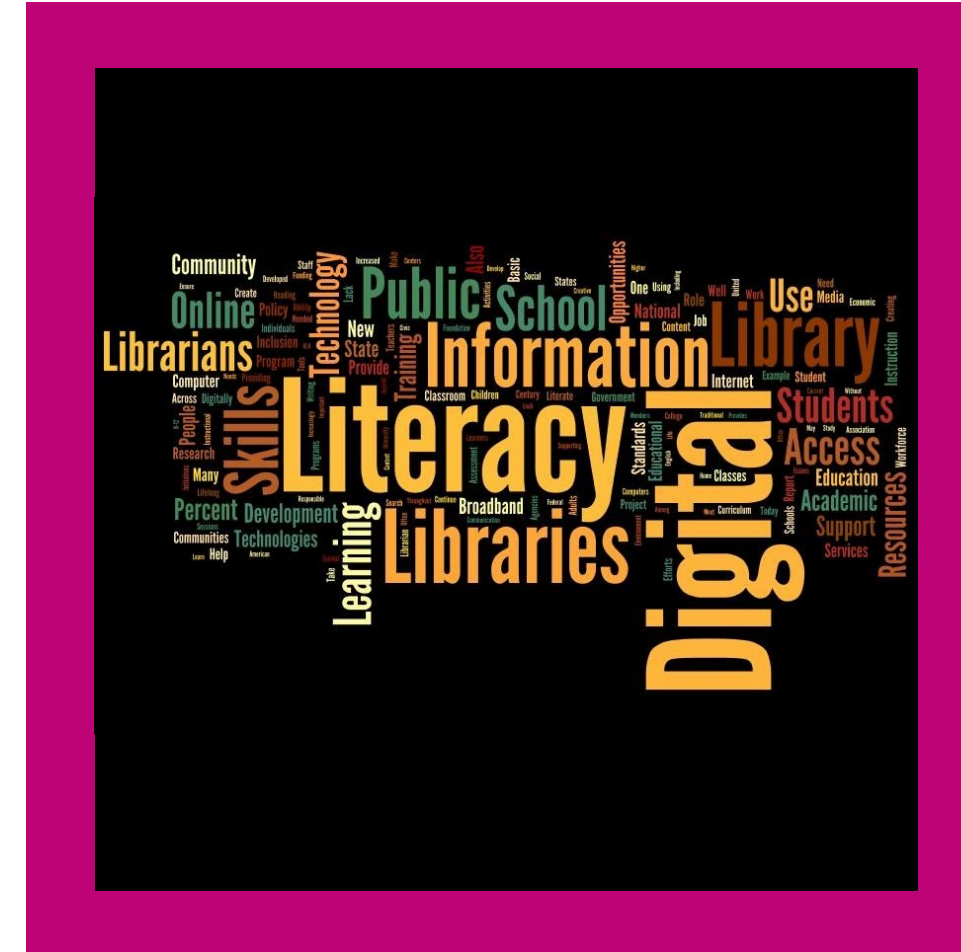
One of our areas of focus this year is increasing engagement with the Gypsy Traveller communities living in Shropshire, Telford & Wrekin and mid-Wales.

We have been working with local Councils and health partners and have visited a number of sites including Lodge Road (Donnington), Lawley and Park Hall (Oswestry). We were joined at the March visit by our EDI Midwife and are looking for further opportunities for joint visits in 2025.

The purpose of our visit was to understand how we can engage and involve with this seldom-heard community. Feedback included:

- Prefer to be given information face to face, although some people we spoke to use Facebook.
- Difficulty in accessing online forms
- Information being provided in a simpler format

We have liaised with the relevant areas regarding this feedback



Social Inclusion

Veterans/Armed Forces Outreach

The team have been working to widen our engagement of our Veterans and Armed Forces, particularly to promote our Veteran and Families Volunteer to Career Programme which is due to start in June 2025 and our HTP Veteran focus group which was held in October.

Over the past 6 months we have attended a number of outreach sessions within our local communities. We have promoted the Volunteer to Career programme, and our new volunteer driver role. We also had feedback as to why we ask for Veteran status during inpatient stays at our hospitals, as the veterans were not aware of any differences in their care. This has been raised with the Veteran lead and Patient Experience team, and we also now have copies of our SaTH Veteran Aware patient leaflet, which can provide more information

Hard of Hearing HTP Focus Group

The team supported HTP with engagement for deaf and hard of hearing focus groups. Deaf 'n Able a local support group helped us to promote the focus group and ensure that we made the session as interactive and accessible as possible. Including sharing information about apps that provide real-time transcripts and conversation which focus group participants could use to fully engage in conversations. This proved invaluable during the event, and will be made available in future involvement opportunities.

We also feedback to the group that pink boxes used for patients to safely store their hearing aids whilst in hospital are still available through our dementia team and are issued to patients living with dementia when admitted to our wards

HTP ENGAGEMENT

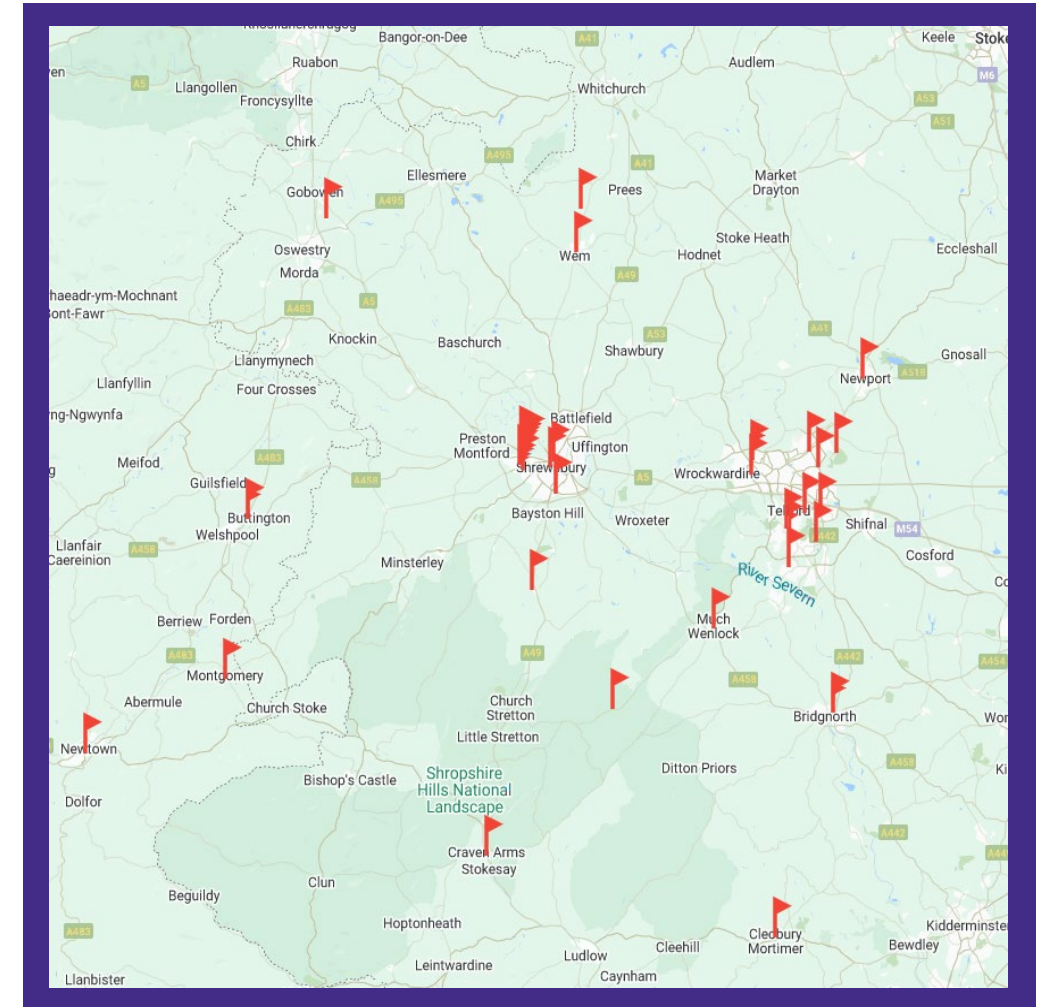
Getting involved with HTP

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

- **Quarterly focus groups** which are aligned to our clinical workstreams. Workstream focus groups have been planned over the next two years which will inform the plans as they develop towards implementation and will continue until the programme is completed. We hold the focus groups every three months, and members can either attend in person or via MS Teams. Focus groups were held in early March, July and September for Medicine and Emergency Care with Surgery, Anaesthetics, Critical Care and Cancer and another for Women & Children's services
- We are holding a series of specialised focus groups based upon the feedback we received from our quarterly focus group members and local communities. From April-September we have held HTP focus groups for patients with Dementia, Mental Health, Children and Young People, the new RSH Front Entrance and for patient who are deaf with BSL translators. In October focus groups were held for our hard of hearing communities and our Armed Forces Community, as well as two for GP Patient Participation Groups.
- **Presentations, Q&As and action logs** from our focus groups are published in the public domain and can be found here with the Q&As from the focus groups : [HTP Focus Groups – SaTH](#)
- **Quarterly *About Health* HTP events** have been delivered using MS Teams in April, July and October and the next About Health event is on the evening of **Tuesday 6th May 2025 at 6.30pm**. All About Health events are recorded and available on the website

HTP Engagement Map

- The map displays the **42** events we have attended in the reporting period (October 2024 – March 2025) and discussed HTP with the public.
- Please note that all external engagement from the 10th March has been paused due to being in pre-election
- We have also organised/attended **14** online meetings/events; often these meetings cover large geographical areas across T&W, Shropshire and Powys.
- We held **6** focus groups in this period as well as tours of ED1 in place of the quarterly focus groups scheduled for March, attended by **63** members of the public.
- We hosted **6** drop-ins in community settings across the areas we serve during this period, attended by **180** members of the public.
- **13** presentations were delivered to **205** people.



HTP Engagement

In Q3 2024/25 we attended the following events :

Date	Event
01 October 2024	Wem Rural Parish Council
03 October 2024	Hard of Hearing Focus Group
08 October 2024	RSH Volunteers - entrances focus group
11 October 2024	Much Wenlock Drop-in
14 October 2024	Public Assurance Forum
17 October 2024	Armed Forces Focus Group
22 October 2024	Volunteer Coffee and Catch-up
24 October 2024	PPG Focus Group F2F
24 October 2024	PPG Focus Group Online
29 October 2024	About Health HTP
30 October 2024	Young People's Academy
26 November 2024	Telford Town Centre Drop-in
03 December 2024	MEC&SAC Focus Group
05 December 2024	W&C Focus Group
05 December 2024	RSH Residents Drop-in
09 December 2024	Welshpool Livestock Market Drop-in
11 December 2024	Volunteer Coffee and Catch-up



Tom Jones and Aaron Hyslop with Senedd Member for Montgomeryshire, Russell George, at Welshpool Livestock Market

HTP Engagement

In Q4 2024/25 we organised and facilitated the following events:

Date	Event
08 January 2025	Wellington Probus Club
13 January 2025	Public Assurance Forum
28 January 2025	About Health HTP
28 January 2025	Rotary Club of the Severn
29 January 2025	Countywide Community Connectors
14 February 2025	Newport Market Drop-in
20 February 2025	Young People's Academy
25 February 2025	RSH Residents Drop-in
13 March 2025	People's Academy
13 March 2025	Rotary Club of the Wrekin
18 March 2025	MEC&SAC & W&C ED1 Tours



Julia Clarke, Matt Neal and Ed Rysdale with David Morris,
President of Rotary Club of the Severn

Upcoming Engagement & Focus groups

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

The next Focus Groups:

- **Communications and engagement for Urgent and Emergency Care (UEC)** on Tuesday 3 June at 10:00am (Hybrid meeting)
- **Wayfinding for new healthcare facilities** on Thursday 5th June at 10:00am (Hybrid meeting)
- Please note all Focus groups can be attend in person or via MS Teams

Our next **HTP About Health event** will be held on MS Teams on 6th May 2025 at 6.30pm (Via Microsoft Teams)

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

- Church Stretton Co-op – 2nd May, 10:00-13:00
- Shrewsbury Mayor's Charity Fete, Shrewsbury Quarry – 5th May, 10:00-16:00
- Wellington Market – 9th May, 10:00-14:00
- Ironbridge Co-op – 12th May, 12:00-16:00
- Wem Rural Community Drop-in, Edstaston Village Hall – 21st May, 10:00-12:00
- Oswestry Charity Market (Outdoor Market) – 6th June, 10:00-13:00
- Welshpool Market (town centre) – 16th June, 10:00-14:00
- Ludlow Market (Buttercross) – 23rd June, 10:00-14:00
- Bridgnorth Market – 11th July, 10:00-14:00
- Market Drayton Indoor Market, Wednesday 17 September, 10am-1pm
- Lydham Friday market (Lydham Village Hall), Friday 3 October, 10am-1pm

Focus Group Tours of ED1

A special event was held in March in which focus group members were invited to see the first area that has been developed as part of the Hospital Transformation Programme – ED1. ED1 is the first development of our new emergency department at RSH and has our resuscitation area and part of our new Major's. Over 22 members of our focus groups and volunteers attended. Some of the feedback from those who saw the new ED1 is below:

The spacious facilities, including larger resuscitation bays and an improved majors area, will create a modern, well-equipped and patient-focused environment for urgent and emergency care. It was great to see firsthand how these changes will make a real difference to the experiences of patients and staff.

Andrea Blayney, Deputy Regional
Director, Llais

So much consideration has been given to the detail and the needs of patients and staff. A real achievement on the part of everyone involved"

Jenny Horner, Market Drayton Patient
Participation Group Chair

*"We were given an informative tour and chat about the new areas, and, **WOW!** It's a huge improvement to our current A&E....much more space, thoughtfully laid out"*

RSH A&E Volunteer



Additional Engagement Routes

Event & Date	Subject
Hospitals Update meeting	Monthly Trust News Update including update on HTP
Monthly newsletter email update - sent to our 4900+ community members	Update from Public Participation team including HTP update and details on how to get involved
Three weekly 1:50 HTP Clinical design meetings in ED, acute medicine, critical care, maternity & children's services – Public Assurance Forum member representatives on each group	Detailed design discussions with architects and clinical teams
Quarterly Public Assurance Forum (next one July 2025) with representatives from organisations across health & social care in Shropshire, Telford & Wrekin & Mid-Wales	Presentation from HTP team with Q&As
SaTH website and intranet	Webpages which support public engagement and Latest HTP meetings/feedback Public Participation - SaTH

VOLUNTEERS

Volunteers

- We currently have **251** active volunteers at the Trust.
- Our volunteers continue to provide support to “one-off” events including:
 - **Exercise SPRING!** – on 18th March 15 volunteers supported ‘Exercise SPRING!’. In view of the Hospitals Transformation Project (HTP), the Trust handed over part of the new Emergency Department (ED)/ Resus in March 2025. The Trust was required to undertake and demonstrate that we could safely evacuate the new areas of the ED footprint. The live exercise, where volunteers posed as patients and their family members tested the progressive Horizontal Evacuation Strategy for the new ED majors and resus.
 - **William Farr Academy** – once again Volunteers supported both the Medical Work Experience Day and the MMI Day for aspiring medical students.
 - **Volunteer Wrapping Gifts** – volunteers helped the charity by wrapping Christmas present donations for children which were delivered to lots of different areas throughout the hospitals.
- We have held a number of focus group for our volunteers including:
 - **HTP Entrance Support** - A feedback session was held with members of the HTP team and volunteers who are helping with the entrance changes. The session was to feedback some of the actions that have been put in progress after feedback from those volunteers. It was also to say thank you for all their work
 - **‘Autism Awareness’** – an excellent focus group was hosted by one of our new volunteer Wendy Dodman. Wendy spoke about being diagnosed with Autism in later life. Over 20 volunteers attended which was a great turnout.
 - Former volunteer (and previous winner of Volunteer of the Year) Ethan Holmes hosted a focus group to talk about how volunteering propelled his career to become a paramedic.

Oct 24 – Mar 25

Total Active volunteers

251

Total hours

13,883

Volunteer Highlights

- **House of Commons** – Julia Clarke and Hannah Morris were invited to attend an event at the House of Commons, Over 80 leaders from across government, the NHS and voluntary and community sectors attended for the launch of a new report by Helpforce - “Unlocking the Power of Volunteering to support our NHS”. Within the report SaTH’s Volunteer to Career programme was highlighted as an area of good practice.
- **Volunteer Team** – During the past 6 months there have been changes within the volunteer team. At the end of March we welcomed 3 new members of staff to the team – Volunteer Services Manager (Pete), Volunteer Project Lead (Eve) and a Volunteer Facilitator (Jez)



Volunteer Highlights

- **Volunteer Terry Seston turned 90!** – Terry celebrated his 90th Birthday in January and the volunteer team surprised him with a cake and present for his birthday. The news of Terry turning ninety spread and he was featured on the BBC news website and on Midlands Today News
- **Volunteer Celebration Event** – Volunteers were celebrated as part of the Trust's annual Recognition week in the lead up to the Trust awards. Over 60 volunteers came along to the event, held at the Wroxeter Hotel and were able to meet our new CEO and Chair in Common.
- **Volunteer of the Year** – Peter Hicking won the title of Volunteer of the Year at the Trust Awards. Peter regularly contributes over 1,000 hours of volunteering every year



Volunteer Highlights

Volunteer Claire Ashton – As part of LGBT+ History Month, Volunteer Claire Ashton was interviewed by the BBC about how her experiences in the army as a trans woman led to a mental breakdown.

"Claire Ashton felt different to other soldiers in the Royal Artillery. She had joined the army in 1969... At the time it was illegal to be gay in the armed forces, something Ms Ashton was not, she was in fact transgender.

"They thought I was gay, but trans hadn't crossed their radar all those years ago" She faced constant speculation and inappropriate questioning, and the pressure of hiding her identity became so overbearing that she had a mental breakdown while on deployment in Germany in 1972 and was medically discharged by the army.

In 2023, Ms Ashton was chosen by Fighting With Pride to carry the charity's flag during the Festival of Remembrance at the Royal Albert Hall in front of the King and Queen.

"There wasn't a prouder veteran that day," said Ms Ashton.

<https://www.bbc.co.uk/news/articles/c4gwegv2z54o>

'The Army's gay ban led to my mental breakdown'



Claire Ashton became a police officer after leaving the army

Rob Trigg

BBC political reporter, Shropshire

24 February 2025

Volunteer Discharge Project

Following a successful bid proposal to the ICB the Shrewsbury and Telford Hospital NHS Trust and Helpforce are working together to deliver a 6 month volunteer project which should help to reduce hospital readmission through safe and timely discharge and follow up community support. This project starts in April 2025

This proposal sets out the resources needed to expand the existing SaTH volunteering services to support the Trust's discharge services to:

- Speed up the discharge of patients from hospital to their home
- Provide transport and ensure they have support to settle in when arriving back at home
- Identify and support any additional support needs that may arise in the first few days being back at home
- Reduce the risk of the patient being readmitted to hospital.

The logo for Helpforce, featuring the word "helpforce" in a stylized, lowercase, red font with a slight shadow effect, set against a dark blue background.

PROJECT: Discharge Volunteer Roles

The volunteer roles required can be split into three main areas:

- **Discharge Volunteers:** these are based in the hospital to support the discharge flow i.e. collecting prescriptions, helping to transport patients from wards to the discharge lounge.
- **Volunteer drivers:** this would be to transport home for suitable patients using a Trust car and support on the day of discharge i.e. ensure that they are safe, well, and warm i.e. have food and drink, and a safe environment at home (e.g. the lighting, water and heating are all fully functional). Could also reduce SaTH reliance on private taxi hire.
- **Settling in volunteers:** wherever possible, working with the Discharge team, a volunteer will meet the patient in hospital just prior to discharge and make telephone calls to ensure patients are comfortable and integrated back into their homes and communities following a stay in hospital. They will call the patient on the next day or within 48 hours if at the weekend and provide support and advice for patients and referrals to other local relevant organisations (where appropriate). These volunteers provide extra support (up to) one week following discharge from hospital, helping to spot problems early on, and prevent readmission to hospital.



DISCHARGE PROJECT: Outcomes

Initially the service will run Mon-Fri 9am-5pm.

Once the service has been embedded we would expect:

- Minimum of 50 new discharge calls per month and followed up calls for a maximum of three days post discharge – potentially 200 calls per month
- The service growing incrementally and becoming like business as usual so that next year additional voluntary sector support may not be required
- Regular meetings with stakeholders to highlight positive and/ or constructive feedback for improvement
- A full independent post-project evaluation by Helpforce capturing key indicators



Volunteer to Career (VtC)



Volunteer to Career

The aim of the clinically-led VtC programme is to provide volunteers with career support and interventions including career conversations, mentoring, guidance on career pathways, employability support and mock interviews and skills. Alongside this the volunteers also get the chance to volunteer for 50+ hours within the designated clinical area.

Cohort 3 (Radiotherapy) and Cohort 4 – Midwifery

Over the past the 6 months we have run a VtC cohort in radiotherapy (RSH) and within midwifery (PRH).

- We have closed the end of the 'formal support' for Cohort 4 and 5 and in December and March we celebrate their success in a celebration evening.
- Our volunteers within Radiotherapy contributed over **461 hours of volunteering** and our maternity volunteers have contributed over **893 hours**

Cohort 5 – Midwifery and Veteran & Families

- In partnership with the national charity Helpforce we are offering the opportunity to extend our Volunteer to Career programme to Veterans and their families. This will be a bespoke cohort and participants will have the chance to look at different roles in the NHS
- In March we held a 'Find out more' session on MS Teams for potential volunteers to find out more about the Volunteer to Career



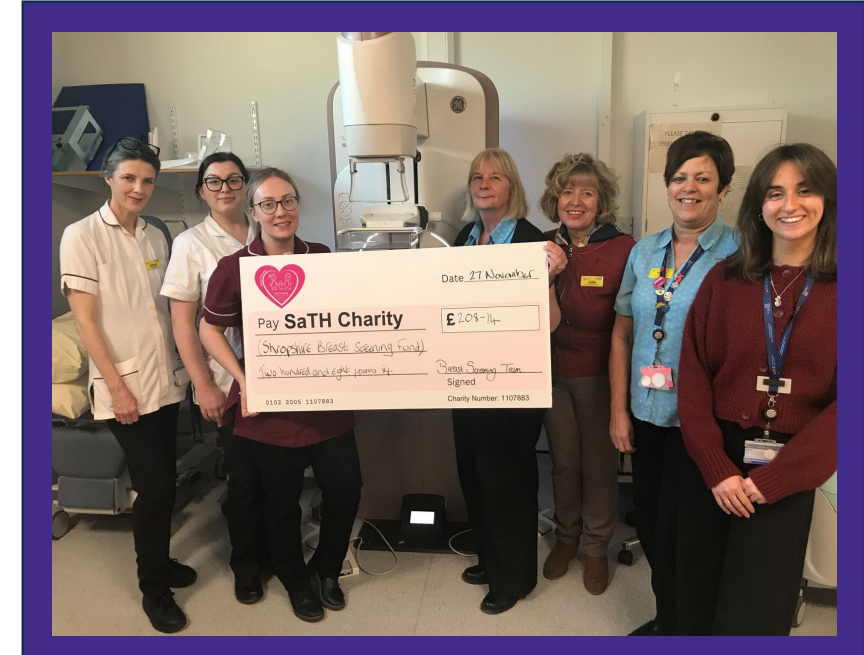
Volunteer to Career

For Veterans and Military Family Members
A programme supporting the direct route
in to work in the healthcare sector

SATH CHARITY

SaTH Charity Highlights

- SaTH Charity annual accounts 20 23/24 were published on the Charity Commission website in January 2025 and saw a 39% increase in income from £359k to £497k. The Charity should exceed £500k this year
- Income for the six months from 1st Sept 2024 – 28th Feb 2025 was £209,142 compared to £319,462 in the same period last year. Expenditure for the same period was £147,179 compared to £116,195 in 2023.
- SaTH Charity's Annual Report and audited accounts for 2023/4 were published on the Charity Commission website in January 2025. These show a 39% increase in income (from £359k to £497k)
- **During this period SaTH Charity had:**
 - **1296** monetary donation entries registered on the charity database, this is more than usual and the increase was down to the successful charity abseil and Lake Vrywny half marathon that took place during this period.
 - **35** donations were 'In Memory' donations
 - **1082** members of staff are now playing the staff lottery
 - There were **164** requests for support from SaTH Charity, **56** of which were for the staff Small Things/Big Difference Fund (mainly funded by the staff lottery).



SaTH Expenditure

- There were **136** approved requests for charitable funds. Examples of approved funding included:
- Specimen x-ray window – this request was for an additional x-ray window so both theatre rooms had this capability. The window gives the ability to visualise the specimens and to harvesting more samples preventing 'Insufficient' pathology biopsies. **£15,000**
- Urodynamics Machine – this additional Urodynamics machine at RSH would enable those urology patients who do not require x-ray to be seen in a separate clinic educe the time waiting to an estimated 12 weeks rather than the current 40 weeks. **£13,026**
- Single-use cordless retractor - the lighted retractor is indicated for enhancing visibility to a surgical field through retraction of soft tissue and illumination of the surgical cavity. It is intended for general, plastic, and reconstructive procedures in breast. **£5,461**
- HTP wayfinding signs – this was requested to enhance the signage around the organisation to improve patient experience and access. The method was tested by the HTP and received positive feedback from volunteers who requested this improvement. **£4,894**
- Furniture for professional nurse advocate (PNAs) 'safe space' – furniture was requested to furnish the safe space where staff and the PNAs can talk.



SaTH Charity Supporters

SaTH Charity Supporters – we have approximately 1,045 supporters in two categories

1) Donors

Provide financial support to the charity – this could be through a one-off donation, or multiple donations.

Donors	
Number of Donations	Total
1	875
2 to 5	70
5 and above	9

2) Fundraisers

Organise events, and other initiatives, such as a sponsorship for a marathon, to raise money and donations.

We are currently working to report more on our supporters and how we can support them (stewardship). This information will be gathered using the Beacon Database which has been collecting this data since August 2022.

Fundraisers	
Number of Fundraising Pages	Total
1	74
2 and above	17

Thank you supporters!



Thanks to the ongoing relationship with The Works in Shrewsbury, the charity received six boxes filled with donations, purchased by their customers, including nearly 1000 packs of stickers, books and soft toys.

Stickers are very popular with our young patients, they can help a child feel better about visiting the hospital and children will often stop crying to choose their favourite sticker!

We are honoured to have SaTH Charity's Dementia Appeal chosen as one of the charities to benefit from donations made to the Telford's Tree of Life which is organised by the four Rotary Clubs of Telford. The tree could be viewed at Telford Shopping Centre.

The Tree of Life gives loved ones an opportunity to sponsor a name on the tree. These names are displayed on the Tree of Light in Telford Centre, Orbit Wellington and the windows of Tranter Lowe's offices in Oakengates.



Sally Jamieson's Halloween Event

Sally runs a yearly Halloween event to raise awareness of breast cancer as part of the breast cancer awareness month in October. This year she had to change plans due to flooding at the planned venue and instead held an event selling cakes and tombola at a local Co-op.

She was joined by her granddaughter Willow Mitchell, and her two friends Molly Moore and Ella Seeney, selling the jewellery. The sales from the spooky jewellery raised £60. The event raised £1561 in total for the Breast Cancer Fund.

Impact Statement:

"We are so grateful to receive this donation from Willow, Molly and Ella.

"I'm so impressed with their ingenuity and thoughtfulness at creating items for SaTH Charity. We know this money will make a real difference to patients who are receiving treatment for breast cancer.

We are also very grateful to Sally for her ongoing support of SaTH Charity."

Julia Clarke, Director of Public Participation



Willow Mitchell, Molly Moore and Ella Seeney selling jewellery.

Football Tournament support

The Dementia team have received items purchased thanks to all the generous supporters of the second annual SaTH Charity Football Tournament, organised by RSH Porter Mark Rawlings back in May. The tournament raised nearly £5,000 for the Dementia appeal of SaTH Charity and saw Drongo United lift the trophy.

The event was a great success with 140 members of staff from SaTH taking part and hundreds of supporters cheering them on.

The money raised from the day has enabled the dementia team to purchase single-use items such as reminiscence dolls, teddies, other nostalgic items and activities for patients living with dementia.

The next SaTH Charity football tournament is planned for **1st June 2025** and we are looking for staff teams to join this amazing charity event!

Impact Statement:

"We are so grateful to Mark and the players for choosing the dementia care appeal. We use lots of single use items to support our patients like reminiscence dolls and teddies, the money raised will make a real difference to our patients and enable us to provide more support."

Karen Breese, Dementia Care Clinical Specialist



Members of the Dementia Team with items purchased from donations raised by the football tournament

Ward 32 Courtyard Redevelopment

The courtyard on Ward 32 (Trauma and Orthopaedics) at RSH has been redeveloped with the help of SaTH Charity, who purchased the area a new gazebo and two new benches.

The gardening team at RSH has worked closely with the ward staff to create raised beds, filled with sensory plants that can support patients who have memory issues to connect with nature and memories of their gardens. The area will also give patients an opportunity to get outside and to try some reconditioning activities.

Impact Statement:

"The patient's moods were immediately lifted by coming outside, sitting in a green space and feeling the sun on their skin. We can't underestimate the importance of getting patients outside not only for their physical health but their general wellbeing. I look forward to seeing how the garden develops."

- Jo Williams, Chief Executive of SaTH



Opening of the courtyard on ward 32.

HTP Wayfinding Signs at RSH

After the outpatient entrance was closed to start building work for the Hospitals Transformation Programme, SaTH Charity was asked to fund wayfinding signs to support patients and relatives to navigate to and from the clinics and the Treatment Centre/Ward Block entrances. The additional signage cost £4,995 and has had a positive impact for visitors to the hospital.

Impact Statement:

“Due to the new HTP building at RSH, the old outpatient entrance was closed. As a result, we received feedback from patients and volunteers about how to improve the signage from the alternative entrances. Thanks to the charity the signage is now in place and is helping patients and relatives navigate to the right department.”

Rachel Webster, HTP Nursing, Midwifery and AHP lead



Furniture for Professional Advocate Team

Thanks to SaTH Charity, the Professional Nurse/Midwifery/AHP Advocate Team now has a comfortable 'safe space' to facilitate Restorative Clinical Supervision (RCS) sessions for our colleagues working at PRH.

SaTH Charity 'Small Things Fund' purchased 2 comfy chairs and a coffee table to furnish the room, make it more inviting. Previous feedback from the team highlighted the difficulties in finding a suitable place to meet with members of staff away from their place of work to talk openly and confidentially.

Impact Statement:

"I can't thank you enough for helping the Professional Nurse/Midwifery/AHP Advocate team create a comfortable 'safe space' to facilitate Restorative Clinical Supervision (RCS) sessions for our colleagues working at PRH. We hope to create the same at RSH in the future."

Karen Sargent, Professional Nurse Advocate

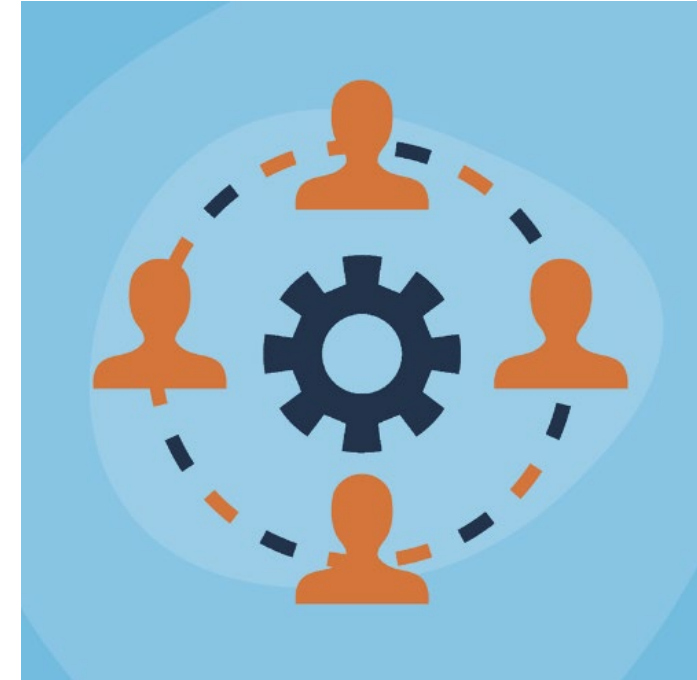


Karen Sargent, Professional Nurse Advocate Lead
with the items SaTH Charity purchased.

Looking Forward

Public Participation- Forward Look

- The Public Assurance Forum to meet on 14 April 2025
- Continue to support staff with any future service changes engagement
- Supporting the HTP Engagement programme, including quarterly focus groups for the public and patients.
- Continued attendance at community events to engage with the public
- Continuing to support staff wellbeing through Charity Small Things Big Difference Fund
- 1-7 June is National Volunteer Week and we will be celebrating with our volunteers and staff with a special “Thank you” event on 4th June
- Work with Helpforce to set up the Veterans to Career pilot and the Volunteer Discharge Project.



Dates for your diary

Date	Time	Event	Booking
Thursday 22 May	18:30 – 19:30	<i>About Health</i> – Operational Update	
Wednesday 28 May 2025 Wednesday 25 June 2025	11:00 – 12:00	Monthly Hospital Update (formerly Community Cascade)	

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

Hospitals Transformation Focus Group

Date	Time	Event	Booking
Tuesday 6 May 2025	18:30 – 19:30	<i>About Health</i> – Hospitals Transformation Programme	If you are interested in joining a Focus Group please email sath.engagement@nhs.net
Tuesday 03 June 2025	10:00 – 12:00	Communications and engagement for Urgent and Emergency Care (UEC)	
Thursday 5 June 2025	10:00 – 12:00	Wayfinding for new healthcare facilities focus group	

Public Assurance Forum meetings 2025

Monday 21st July 13.00-16.00

Monday 13th October 13.00-16.00