



5 year Community Engagement Strategy – initial results

HTP Focus Group 2 December

Where we are now

Community Engagement today

Core20PLUS Communities

Dementia | Diabetes | Respiratory | Cardiovascular

More than
5000
Community Members



More than
470
Networked
Organisations



2024/25
140 community
events/meetings
attended

2024/25
26
community
events/meetings
held

Regular
About Health
events



Regular
Hospital Update
events

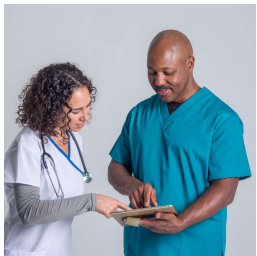


10 NHS 10 year plan - Strategic Shifts



Shift to Preventative Care

Transition from reactive sickness treatment to proactive prevention, targeting obesity and cardiovascular health improvements.



Neighbourhood Health Services

Deploy integrated community health teams to decentralize care and improve collaboration across sectors.



Digital-First Healthcare

Adopt digital tools like NHS app expansion, digital triage, and online hospitals to connect patients remotely.

Summary Infographic

Finance

- 3% real-terms increase in **revenue** & 3.2% in **capital funding**
- ICBs & providers to deliver financial balance/surplus in each year (by 2029)
- New Urgent & Emergency Care (UEC) **payment model** and best-practice tariffs
- Zero **bank & agency** spend by 29/30



Productivity

- **Boost efficiency:** Cut inpatient stays, improve theatre use, and return to pre-COVID activity (2% annual productivity target)
- **Go digital:** Move to digital by default care across all services
- **Track Performance:** Publish trust-level productivity metrics to reduce variation



Workforce & Leadership

- Renewed commitment to staff wellbeing and **anti-discrimination**
- Establishment of a **College of Executive & Clinical Leadership** (2026/27)
- **Leadership and Management Framework** with standards, training & 360° feedback



Key Upcoming Guidance

Strategic
 Commissioning
 Framework
 October 2025



Model
 Neighbourhood
 Framework
 November 2025



Foundation
 Trust
 Framework
 Consultation
 November 2025



System
 Archetypes
 Blueprint
 November 2025



Integrated
 Health
 Organisation
 (IHO) Blueprint
 Later in 2025



Financial
 Allocations &
 Technical
 Guidance
 Autumn 2025



Key Targets

- 92% of patients treated within **18 weeks** by 2028/29
- **UEC:** 82% 4-hr A&E performance by March 2027 and national 85% 28/29
- **Primary/Community:** 90% of urgent patients seen same day
- **Mental Health:** 94% of schools covered by mental health support teams 28/29



New Operating Model

- **Regions:** oversee performance and responsible for grip & support for systems
- **ICBs:** act as strategic commissioners, focussing on prevention and value
- **Providers:** collaboration, quality and productivity with earned freedoms



Transformation

- **Neighbourhood Health:** Reducing hospital admissions & improving access
- **Prevention:** Tackling obesity, CVD, smoking and antibiotic misuse
- **Digital:** 95% digital appointments (2028/29). NHS Online Hospital - 2027
- **Quality:** Modern service Frameworks for CVD, mental illness, sepsis, dementia & frailty



Engagement so far

- Workshop with engagement team and ICB and Strategy colleagues
- Away Day with wider Public Participation Team
- Conversations with communities at events around the county and mid-Wales
- Survey issued to Community members – over 300 responses
- Survey issued to SaTH Managers – closes 5/12/25
- HTP Focus Group 2/12/25

Community Engagement Survey - Summary

🔑 Key Findings

- **Preferred Engagement Methods:**
Online surveys, email updates, and patient/community panels most popular
- **Barriers to Involvement:**
Lack of clear information, doubt about impact of feedback, transport/timing issues
- **Connections to SaTH:**
Majority of respondents are patients or carers, local community members, volunteers and staff
- **What Would Help:**
Clearer communication, visible impact of feedback, convenient times/locations, online options, accessibility support

🏆 Key Takeaway

Our community wants:

- **Clarity**
- **Transparency**
- **Visible impact**

They value multiple channels (online and in-person) but need assurance that their voices shape real decisions.

Community Engagement Survey cont.

Who completed our survey?

316 total responses

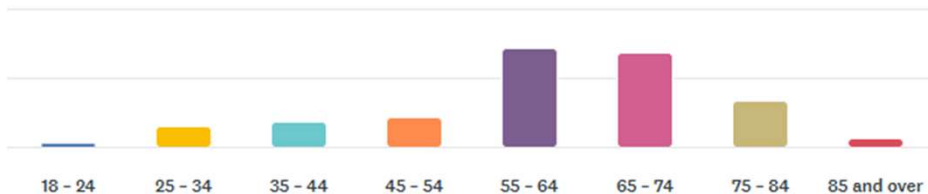
Geography

Shropshire – 53%
Telford & Wrekin – 41%
Mid-Wales – 4%

♂ - 23%

♀ - 72%

Age profile of respondents



89% of respondents identified as White:British

Top Priorities Identified:

- Joined-up working with partners.
- Prevention and tackling inequalities.
- Early involvement in service changes.
- Better communication and feedback loops.

Feedback by Theme

THEME

REPRESENTATIVE COMMENTS

Joined-Up Working

“Joined up thinking means all working for same aim”; “Resources are precious and limited.”

Prevention

“Prevention is better than cure”; “Prevention is always cheaper than cure.”

Communication

“Lack of clarity and feedback”; “Earned trust requires transparency.”

Transforming Care

“Local people must come first, in being considered, committed to, concentrated on, and always consulted.”

Foundation Trust

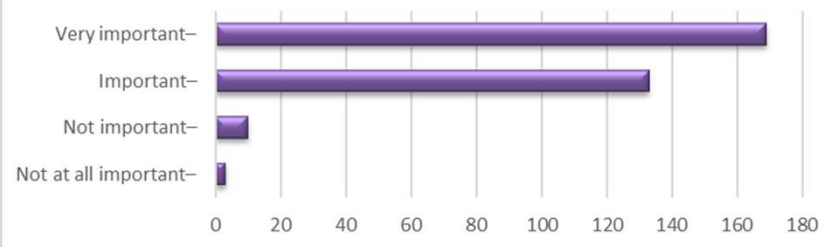
“It will make our voice really matter and not [be] ignored.”

Results/comments – Joined-Up working

Objective 1: More Joined-Up Working

What do we mean by this?

Working together with partner organisations, charities, and community groups to coordinate better and avoid duplication



96% of respondents thought Joined-Up working was **Important** or **Very Important**.

29% of respondents thought this was the most important priority

“Resources are precious and limited a more coherent strategy to avoid duplication and target efforts will pay dividends in the long term.”

“There is so much duplication and waste. People burning themselves out and yet not able to deliver the care they’re striving too.”

“No organisation can do it all on their own. Need shared ideas and resources equalling shared costs.”

“Joined up working saves time and stops patients and carers having to repeat themselves to different departments etc”

PROPOSED OBJECTIVE 1: MORE JOINED-UP WORKING

LINK TO TRUST OBJECTIVE: Enhance wider health & wellbeing of our communities

WHAT WE WILL DO

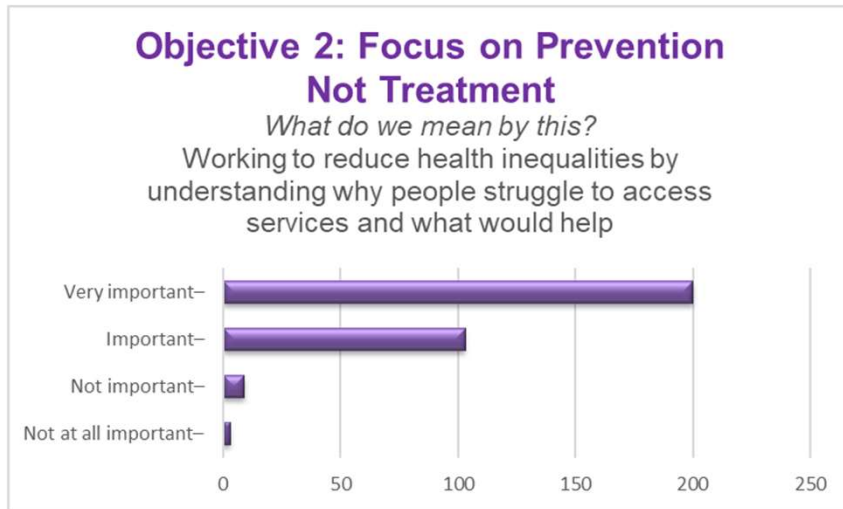
Develop system-wide approach to key health priorities eg obesity, smoking to ensure efficient, targeted engagement across all partners and agreed annual programme of engagement

Specifically consider any opportunities for joint working with Shropshire Community Trust as part of the Group Model from April 2026.

Work collaboratively with partners and support the Neighbourhoods and PLACE developments to share learning, good practice and impact

WHAT DO YOU THINK WOULD EXCELLENT LOOK LIKE?

Results/comments - Prevention



97% of respondents thought Prevention was **Important or Very Important.**

35% of respondents thought this was the most important priority

“Help me to keep fit and healthy and aware of my overall health”

Treatment is important, but you will always be fighting fires if you don't start seriously looking at preventative health care.

“Prevention is so important, it will help relieve the pressure on the staff and waiting lists as well as ensuring patients that already have issues are dealt with more quickly.”

So many people could avoid more serious physical or mental health problems if they were prevented from them in the first place rather than waiting until being at their worst to receive treatment which could have been avoided in the first place.

PROPOSED OBJECTIVE 2: FOCUS ON PREVENTION NOT TREATMENT

WHAT WE WILL DO

Use the Core20plus 5 Health Inequalities model to drive engagement activities and signpost patients and citizens to services available in primary and community care to support them and move towards prevention rather than treatment

Meet with people where they live and go to their forums so we can focus on achieving maximum effectiveness.

Develop an annual programme of visits to seldom heard groups that data shows experience inequity of health access to ensure they receive information face to face and their voice can be heard

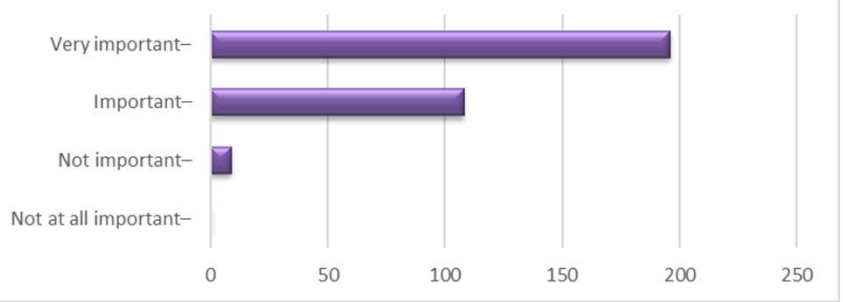
WHAT DO YOU THINK WOULD EXCELLENT LOOK LIKE?

Results/comments - Transformation

Objective 3: Transforming Care

What do we mean by this?

Involving local people early when we're planning changes to services, so your voice shapes decisions that affect you



93% of respondents thought Transforming Care was **Important** or **Very Important**.

20% of respondents thought this was the most important priority

“Local people use your vital services most therefore should be most involved in shaping them.”

“We need a chance to give our feedback before decisions are made, not fight them afterwards”

“We have ideas and suggestions that we need you to hear”

“I believe that openness and transparency in involving the community in major decisions about THEIR NHS is vital for the benefit and best use of services.”

Define "Local" !

“Communities in South Shropshire are not very well informed of what is going on at SaTH, and rumours can cause anger and upset”

PROPOSED OBJECTIVE 4: SUPPORT TRANSFORMING CARE

WHAT WE WILL DO

Continue to deliver the programme of engagement supporting the Hospital Transformation Programme and any associated projects (HTP)

Establish better links with SaTH Service Improvement team and System Transformational teams to get involved with service changes/developments that are being planned and make sure engagement becomes part of the process

Provide training and tools to help more clinical teams learn how to plan and deliver meaningful involvement activities and to ensure informed and high-quality engagement is undertaken

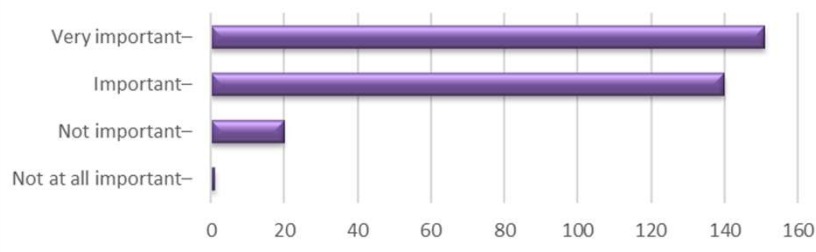
WHAT DO YOU THINK WOULD EXCELLENT LOOK LIKE?

Results/comments - Communication

Objective 4: Communication and Feedback

What do we mean by this?

Showing you how your feedback has made a difference, building trust, and creating more opportunities for you to get involved



83% of respondents thought Communication and Feedback were **Important** or **Very Important**.

7% of respondents thought this was the most important priority

“It’s important to ensure people are aware of the impact their feedback has made. Clearly promoting tangible and beneficial results. It encourages, engages and empowers.”

“Communication key - Feedback important good and bad. So much good work going on and important that this is recognised.”

“Too many organisations ask questions and do nothing with the answers”

“Communication & efficiency is very important”

PROPOSED OBJECTIVE 3: BETTER COMMUNICATION AND FEEDBACK

WHAT WE WILL DO

Make sure we avoid jargon in our communications and that our communities receive the right information, at the right time in a format that is accessible and inclusive

Show people how their input has made a difference and measure progress. Be honest about what can't be changed and celebrate what we have done well together

Maximise digital opportunities for involvement and health – support communities to access and use digital systems and improve digital confidence through our engagement work

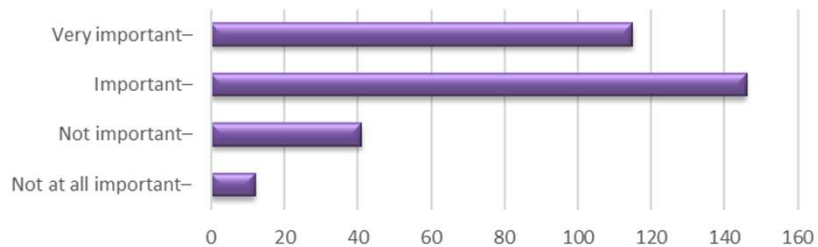
WHAT DO YOU THINK WOULD EXCELLENT LOOK LIKE?

Results/comments – Foundation Trust

Objective 5: Foundation Trust Status

What do we mean by this?

Working towards Foundation Trust status, which gives local people and staff a formal say in how the Trust is run (national objective by 2035, NHS 10 Year Plan)



83% of respondents thought Foundation Trust Status was **Important** or **Very Important**.

8% of respondents thought this was the most important priority

Living in rural Powys, Shrewsbury & Telford Hospital have always taken amazing care of our needs and having a voice a say in our local care not those who live in Cardiff

“Local people know what the community needs”

“We have a voice, a formal say in what is going on.”

“We should have a say and receive answers”

OBJECTIVE 5: FOUNDATION TRUST

Move towards the national objective of all Trusts achieving Foundation Trust status by 2035, with the first wave in 2026

Public Assurance Forum (PAF) – Review membership when guidance issued about FT membership/governors

Community members – currently have 5300 and 300 organisations but will need to review geographic spread when FT guidance issued

Continue to work with and develop our relationships with organisations that help and care for people in their Community (voluntary sector, Community Groups, GPs, HealthWatch and Llais) Be open to community feedback and honest about what we can do to make our services better.

WHAT DO YOU THINK WOULD EXCELLENT LOOK LIKE?

Barriers

Access & Information	Communication Failures	Process & System Issues	Staff Attitude & Culture	Practical Barriers
Lack of awareness	Lack of responsiveness	No visible impact of feedback	Dismissive Behavior	Travel & transport
Unclear process	Poor feedback loops	Complex or Ineffective Complaint Processes	Defensive Responses	Timing and scheduling
Hard-to-find contact details	Unclear communication channels	Lack of Follow-Up	Resistance to Change	Digital access, including poor broadband coverage in rural areas
Limited promotion	Limited transparency	Perceived "Tick-Box" Engagement	Lack of Accountability	Physical accessibility
Over-reliance on digital	Inaccessible formats	Inconsistent Systems Across Services	Negative Perceptions	Other practical constraints

Suggested Improvements

Clearer Communication	Community Presence	Transparency & Openness	Convenient Engagement Options	Accessibility & Inclusion	Show Impact of Feedback
More timely updates, clear information, and better listening	Greater visibility in local areas, outreach events, and face-to-face engagement	Honest communication and clarity on decisions	Flexible meeting times, online/remote options, and easier participation	Support for transport, disability access, and inclusive formats	Demonstrate “You said, we did” and tangible changes from community input

More generally for the Trust, we should explore **“Simpler Processes - Reduce bureaucracy and make feedback routes easier.”**

Next steps

January 2026 - Draft Strategy to attendees, Public Assurance Forum, Managers, ICB and partners for final comments

April 2026 Final version to Public Assurance Forum and Senior Leadership Committee

May 2026 Trust Board