

# Engagement and Involvement Review 2020/21



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# 1 Executive Summary

**The last year has been like no other in NHS history and the impact of the Covid-19 pandemic has demonstrated the critical role our local communities have in responding to major health challenges and in helping to shape how services are delivered. The voices and views of local people help to influence the way services are designed and improve the range of local health and care services in Gloucestershire.**

Our commitment to understanding what matters most to people is set out in our [Engagement and Involvement Strategy](#), which was published in 2020, and is central to our ambition to be an outstanding organisation. This review highlights the progress we are making in delivering the strategy.

While involving people in developing health services is something we do regularly, we are continually exploring how we develop different ways to engage with you and the pandemic has meant we have been able to embrace new innovations and approaches. However, we continue to listen to what matters most to people so we can better understand what is working well and what we need to change.

In 2019–20, we have delivered a number of successful projects, listening and involving local people in a number of ways, and our highlights include:

- Creation of our Youth Involvement Group, with over 20 active members (page 8)
- Fit for the Future consultation on our vision for the future of specialist hospital care and to develop 'Centres of Excellence' (page 9)
- Involving a wide range of people to improve the experience of mental health patients attending our Emergency Departments (page 10)
- Working with our Partnership Involvement Network to hear from local communities, build connections, improve how we collaborate and cascade information through the voluntary and community sector to people with lived experience (page 12)
- The development of our Pathway to Excellence (P2E) programme, ensuring nurses and midwives are at the heart of shared decision-making in improving the quality of patient care (see page 17)
- The start of a co-design 'Bright Ideas Project' to explore the experiences of patients, families and colleagues in The Children Centre (see page 18)
- Establishing our Accessibility Advisory Group, providing expert advice and feedback to ensure our services are accessible (see page 18)

The local community made a significant contribution to the lives of colleagues, through the continued messages of support, thank you gifts and public gestures, including the 'clap for carers'. It has a huge influence on staff morale and lifted spirits during some of the most challenging moments.

We are also grateful to our local voluntary, community and social enterprise (VCSE) organisations, patients, carers and members of the public who have engaged with us over the last year and contributed to the progress we are making.

Our work could not be successful without your support and we very much welcome your feedback, ideas and fresh perspectives which help us to continue to improve both local services, and the way we work.



## THANK YOU



# 2 Who we are and what we do

We are an NHS Foundation Trust of around 8,000 people, providing care for the population of Gloucestershire and beyond.

The Trust provides acute hospital services from two large district general hospitals, Cheltenham General Hospital and Gloucestershire Royal Hospital. We also provide Maternity Services at Stroud Maternity Hospital and a range of outpatient clinics and some surgery services from community hospitals throughout Gloucestershire.

## 2.1 Our vision and values

Our shared vision is to deliver 'the Best Care for Everyone'. It is this ambition that directs and shapes how we work.

We care about what we do and believe our work matters for local people. We pride ourselves on our compassionate culture, which is underpinned by our three core values:



## 2.2 Our commitment to engagement and involvement

### Why is engagement and involvement important?

Our colleagues, patients and communities are at the heart of our ambition to deliver the best care for everyone. By actively engaging and listening to people who use and care about our services, we can understand what matters most in responding to the diverse health and care needs.

### What are we doing?

We are working to embed engagement and involvement in all our work across our hospitals.

We aim to ensure that the voices of patients, carers and colleagues are heard and they help shape our decisions as we work together to make this organisation an even better place to work and receive care.

### What will we achieve?

By working together, we can make better decisions and we will be able to:

- Improve the quality of care and services
- Improve patient safety
- Improve colleague and patient experiences
- Shape services around what local communities tell us matter most to them
- Attract, recruit and retain the best staff to the Trust
- Support and celebrate the diversity of local people in living healthier lives

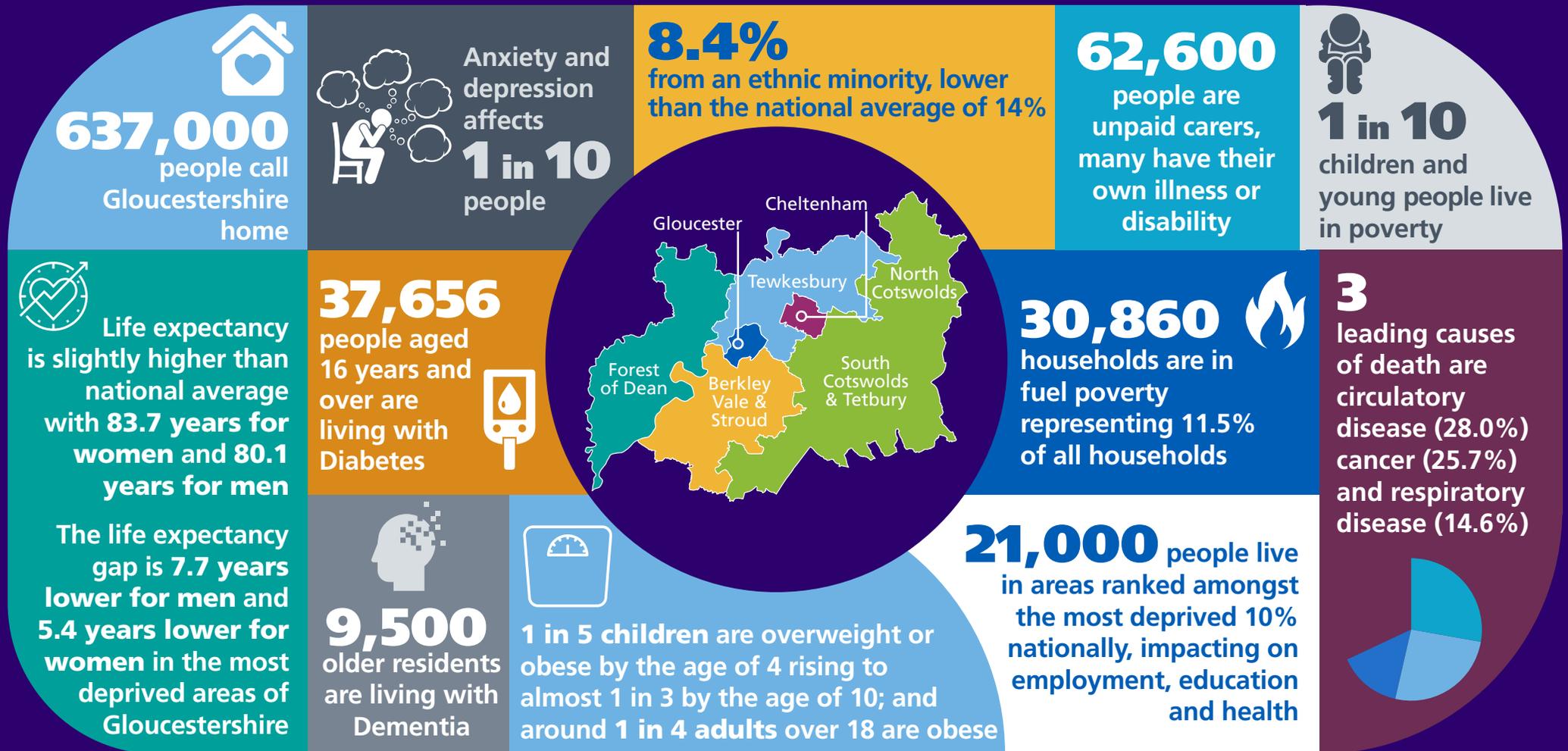


# 3 An introduction to Gloucestershire

The Trust is committed to working closely with partners and local communities to improve health and wellbeing and to ensure our services are accessible to all.

Overall, Gloucestershire continues to be one of the healthiest places to live and has a population that is generally older than the rest of England, and the aging population continues to grow.

The county has very diverse communities, including rural and urban. For more information on the health and wellbeing of Gloucestershire visit [www.gloucestershire.gov.uk/inform](http://www.gloucestershire.gov.uk/inform)



# 4 Who do we engage and involve

**Our Involvement and Engagement Strategy outlines our ambition and commitment to meaningful engagement and involvement to shape our plans and improve our services.**

As one of the largest Acute Hospital Trusts in the country, we have a wide range of stakeholders that we want to engage and involve in our work.

Our stakeholders represent the vibrant and diverse communities of the area and must be reflected in the way in which we engage and involve people.

## Our Service Users and Supporters

Patients, service users, carers and families are at the heart of all that we do. We need to continue to involve them as we strive to embed person-centred care across all our services.

Our charity also has thousands of supporters and donors, helping to fundraise for new equipment and facilities.

The Trust also has approximately 2000 public members who have an interest in shaping services and being actively involved.

## Our Colleagues

We have a large workforce of some 8,000 people and over 450 volunteers, who live in our communities.

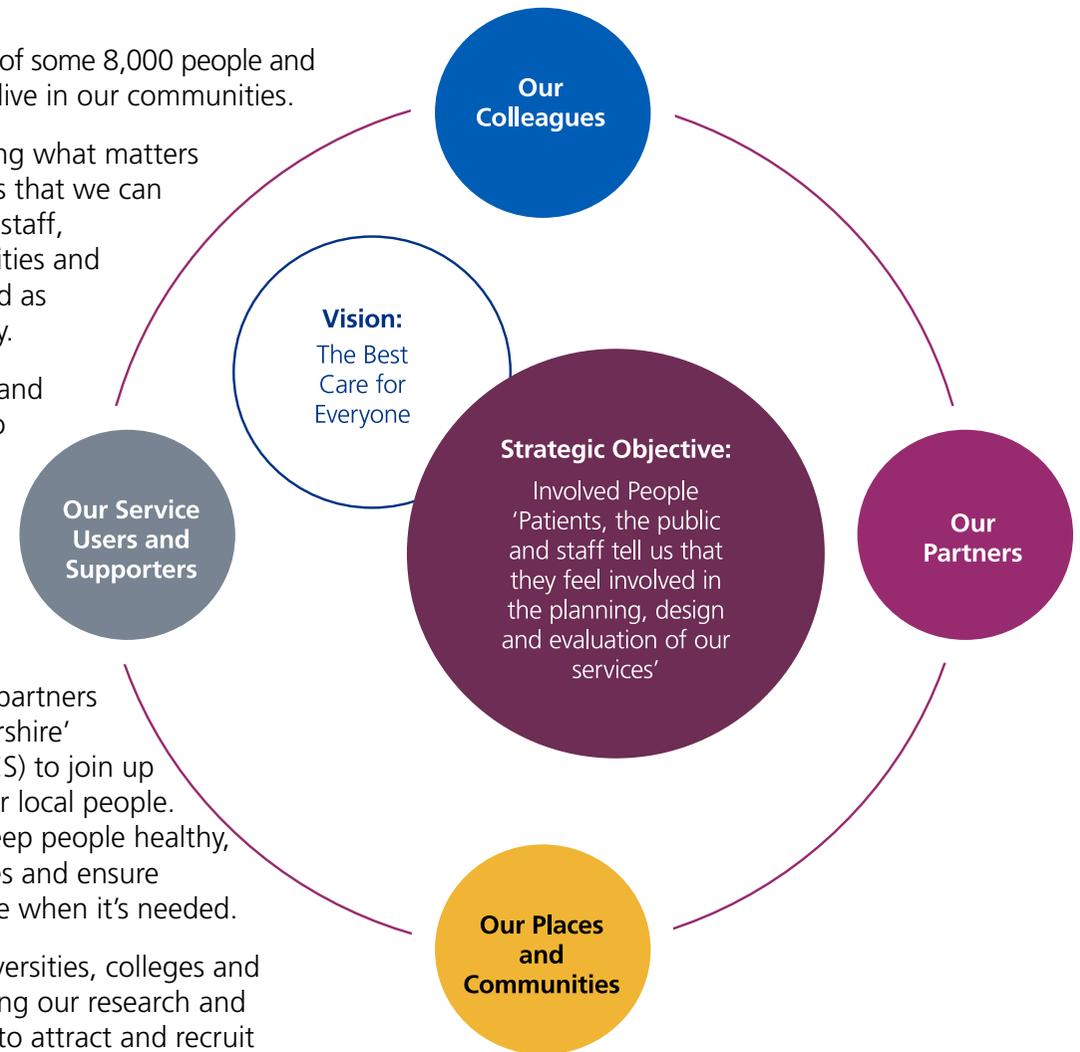
Listening and understanding what matters most to colleagues ensures that we can recruit and retain the best staff, providing career opportunities and services that are recognised as some of the best nationally.

The Trust also has elected and appointed Governors, who provide valuable scrutiny and challenge and represent the local voice at Board level.

## Our Partners

We work closely with our partners across the 'One Gloucestershire' Integrated Care System (ICS) to join up health and care services for local people. The partnership aims to keep people healthy, support active communities and ensure high-quality, joined-up care when it's needed.

Our relationships with universities, colleges and schools are vital in extending our research and ensuring that we are able to attract and recruit people from our communities.



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## Our Places and Communities

Understanding what matters most to our local communities is really important to us, particularly given the diverse rural and urban differences, and areas of deprivation.

Our partnership with the Voluntary, Community and Social Enterprise Sector (VCSE), which includes Healthwatch Gloucestershire, helps provide vital insight and reach into groups across our communities so that our services are accessible and responsive to all.

We also work closely with elected representatives including the Health and Care Overview and Scrutiny Committee and the Health and Wellbeing Board.

We are continually strengthening how we are able to engage and involve local people to ensure what matters to them is used to influence decision making.

There are lots of ways people presently share their experiences and are actively involved and engaged in shaping local health services in Gloucestershire, including:

- Elected and appointed Governors
- Partnership Involvement Network
- Gloucestershire Voluntary and Community Sector Alliance
- Gloucestershire Hospitals Youth Ambassadors
- Trust Members
- Online patient experience websites, including NHS Choices and Care Opinion
- NHS Friends and Family Test questions
- Patient Advice and Liaison Service
- Directly with our complaints, concerns and customer service team
- Healthwatch Gloucestershire
- Engagement on Social Media
- Patient Stories
- Through engagement activities and events
- Attendance at Trust Board and Annual Members Meeting
- Participation in our Fit for the Future engagement and consultation
- Hospital Reflections & Experience Group

However, we know that there is more we can do increase opportunities for meaningful involvement and to ensure this reflects the diverse communities we serve. We are also strengthening how we work with partners and the voluntary and community sector.

We are confident that we can be more innovative, systematic, and resourceful in how we engage stakeholders to improve experience for both patients and colleagues.



# 5 The impact of involvement and engagement over the last year

**Over the last 12 months we have worked with a range of communities and local partners across Gloucestershire to involve and engage people in local plans and service developments.**

## 5.1 Patient Experience Team

### Brief description

The response to Covid, and restrictions to visiting, required the Patient Experience Team to work innovatively in order to enable patients to stay connected with loved ones.

### Who did we speak to?

The team was reconfigured into the 'Patient Support Service', to support patients, relatives, families, carers and staff during this pandemic, offering a seven day service.

### What and how did we ask?

The impact of Covid meant that our traditional approaches used to gather, understand and improve patient experience needed to adapt to support our patients, relatives and colleagues across the hospitals.

### What did people tell us?

Relatives and staff told the team that it was critical to continue to offer direct access to patients and information, in order to get updates, send messages of love and help people stay connected due to visiting restrictions.

### What did we do?

The team made a number of changes based on feedback and to enable patients to connect with loved ones:

- A new telephone helpline for relatives and carers was set up, helping to coordinate information and take pressure from the wards
- A new 'virtual visiting' system was set up so that patients could see loved ones using iPads
- A messaging services was set up enabling people to send letters, photos and messages for patients, that were printed and delivered to the wards
- A team of volunteers managed belongings to be drop off for patients and delivered to the ward

Since the new service was set up on 3 April 2020, the team worked seven days a week, taking over 6800 telephone calls, delivered over 1,100 messages, letters and photos to patients on our wards, and collected over 4,500 belongings from relatives unable to visit patients.

### Find out more here

[www.gloshospitals.nhs.uk/contact-us/patient-advice-and-support/](http://www.gloshospitals.nhs.uk/contact-us/patient-advice-and-support/)

## 5.2 Youth Involvement Group

### Brief description

We recognise the importance of involving young people to engage with them and ensure they have a voice in our decision-making.

In April 2020 the Trust established a Youth Involvement Group, meeting monthly, and with over 20 young people registered as part of the group.

### Who did we speak to?

When a planned Gloucestershire Hospitals Youth Group Open Day due to take place in March 2020 had to be postponed due to the pandemic, the group was revitalised through virtual monthly online meetings.

### What and how did we ask?

We asked young people how they would like to be involved with the Trust and how we could support them.

Virtual and socially distanced events have been held, meetings are co-chaired by a Youth Ambassador alternating monthly to share opportunities amongst the group.

### What did we do?

The Youth Group have been actively involved in shaping the Trust's plans for the future, including the Fit for the Future consultation, where members produced a short film for social media to encourage other young people to find out more about the proposals.

The group have been able to have interactive online discussions with a number of Consultants and nurses about Trust services to find out more about what it is like to work for the NHS and give feedback on programmes of work.

Youth Ambassadors have also supported the rebrand and redesign of our Children Centre, collaborating with the Art Department at University of Gloucestershire on designs, as well as inputting into the design of a new Transitions Service for paediatric diabetes patients.

They have also engaged with Healthwatch Gloucestershire's Youth Engagement Officer and heard more about getting involved in their new programme called 'Young Listeners'.

### What did people tell us?

Members of the group told us that when decisions are being made about how to run or change a service, particularly for children and young people, there must be opportunities for the Youth Group to be involved and take part in meetings and discussions and put across their opinions and ideas.

## 5.3 Fit for the Future Consultation

### Brief description

The Fit For The Future (FFTF) consultation set out our vision for the future of specialist hospital care in Cheltenham and Gloucester and to develop Centres of Excellence.

### Who did we speak to?

There has been ongoing engagement as part of the Fit For The Future programme for over three years and we have continued to involve clinical colleagues, patients, partner organisations, local communities and representative groups to encourage everyone to have their say.



### What and how did we ask?

We embarked upon an ambitious staff and public socially distanced and virtual consultation.

We wanted to understand what people thought about the proposals and the ambitious future vision for Cheltenham and Gloucester Hospitals.

The consultation sought views on proposals to strengthen five specialist hospital services: Acute Medicine (Acute Medical Take), General Surgery: Upper and Lower Gastrointestinal (including Emergency General Surgery), Image Guided Interventional Surgery (including Vascular Surgery), Gastroenterology inpatient services and Trauma and Orthopaedic inpatient services.

We used surveys, focus groups, virtual engagement events, socially distanced on-street outreach, social media, a Citizens Jury to find out what people thought about our plans.

### What did we do?

Despite the challenges of the pandemic we were able to deliver a comprehensive range of consultation activities, including:

- Approximately 5,000 consultation booklets
- 297,000 door-to-door leaflets distributed, generating 1700+ requests for information
- 75+ consultation events
- More than 1,000 socially distanced face-to-face contacts with members of the public and over 350 staff
- 22 Interactive Facebook Live events with a reach of over 140,000 with over 1,500 'engagements' which included over 1,000 clicks on the link in the post
- Social Media generated over 30,000 impressions and almost 800 engagements
- 700+ Fit for the Future surveys completed

The outcomes from the consultation were reviewed by an independent Citizens' Jury who made a number of recommendations. All the result of this work is available online: [Fit For The Future](#)

## 5 The impact of involvement and engagement over the last year

### What did people tell us?

- Our proposals for centres of excellence were strongly supported
- The socially distanced engagement approach worked well, and can be developed further
- We need to balance how we present complex information to make it easy to understand
- Feedback has directly influenced decision making, including recommendation to explore the new option for Planned General Surgery
- The consultation was rated as 'good' by The Consultation Institute (TCI)

Full detailed feedback can be read here:

[🔗 FFTF Consultation Outcome Report](#)

### Find out more here

The outcome of the consultation enables the exciting next step in developing the Centres of Excellence that will have a huge impact on the quality of patient care across the county. It also enables further opportunities for engagement on the development of the hospital sites and service developments.

Full details on the consultation can be found here: [🔗 https://www.onegloucestershire.net/yoursay/fit-for-the-future-developing-specialist-hospital-services-in-gloucestershire/#collapseDMBC](https://www.onegloucestershire.net/yoursay/fit-for-the-future-developing-specialist-hospital-services-in-gloucestershire/#collapseDMBC)

### 5.4 Healthwatch Gloucestershire Mental Health Support in Emergency Departments

#### Brief description

Healthwatch Gloucestershire is the county's independent health and social care champion and support health and care services to involve people in decisions that affect them.

Over the past 12 months we have worked closely with Healthwatch Gloucestershire on a number of projects, and listened to experiences that local communities had shared with them about our services.

This included a report into how well the needs of people accessing mental health support at Gloucestershire Royal and Cheltenham General Hospitals' Emergency Department (ED) were being met and their experiences.

### Who did we speak to?

Healthwatch spoke with:

- People with a mental health condition/issue, who have used ED in the past year at either Gloucestershire Royal or Cheltenham General Hospitals
- Those who care for someone who has a mental health issue, and family members of people with a mental health condition, who have used ED at these hospitals
- Staff and volunteers from voluntary and community organisations in Gloucestershire who work with people who have mental health issues

### What and how did we ask?

We wanted to know about the background and circumstances of people's attendance at ED, their experience whilst there, and discharge and follow-up arrangements.

Healthwatch developed a survey and provided opportunities for more detailed semi-structured interviews. A total of 21 people responded.



## What did people tell us?

Key points included:

- People told Healthwatch that they are often reluctant to access mental health support in the ED
- Many expressed that feeling heard, understood and not being judged by ED staff was an important factor in feeling safe
- People reported being left for long periods, left in busy environments, left in isolation without being checked on, and left without any indication of timescales
- Only receiving medical help for their presenting physical health needs. However, these were often only a symptom of a bigger mental health problem that also needed addressing

## What did we do?

We heard the individual's experiences Healthwatch reports and recommendations made were taken to Emergency Department Mental Health Working Group.

The group brings together clinical representation from the Trust with Mental Health Liaison Team (Gloucestershire Health and Care NHS Foundation Trust) and our patient 'experts by experience'. By working in partnership we aim to improve mental health patient experiences and make positive changes, not only to our Emergency Department, but also across our services and sites. Future work will be focused on the development of a Mental Health Strategy.

## Find out more here

[Healthwatch Gloucestershire: Experiences of urgent mental health care in accident and emergency: A Gloucestershire Perspective](#)

"By working in partnership we aim to improve mental health patient experiences and make positive changes"



## 5 The impact of involvement and engagement over the last year

### 5.5 Partnership Involvement Network

#### Brief description

In 2020 the Trust established a Partnership Involvement Network to ensure we work closely and regularly share information with our voluntary and community sector (VCS) partners and others to develop closer relationships with local communities and understand lived experiences.

#### Who did we speak to?

We spoke to a wide range of representative organisations and partners, in particular local VCS organisations, in order to establish the Network. This includes:

- Gloucestershire County Council and Gloucestershire District Councils
- Gloucestershire Voluntary & Community Sector Alliance
- Healthwatch Gloucestershire
- Gloucestershire Carers Hub
- Inclusion Gloucestershire
- The Friendship Café
- LGBT+ Partnership: Cheltenham & Gloucestershire
- Age UK Gloucestershire
- The Sight Loss Council
- The Barnwood Trust
- The National Star College
- Maternity Voices Partnership
- Kingfisher Treasureseekers
- Know Your Patch Networks
- Gloucestershire Action for Refugees and Asylum Seekers
- The Nelson Trust
- Trust Governors
- Gloucestershire Hospitals Networking Group
- Age UK Gloucestershire
- British Red Cross
- MacMillan
- Royal National Institute of Blind People (RNIB)

- Patient Advice and Liaison Service
- Trust Volunteers
- Young Gloucestershire
- Teens in Crisis
- Swindon & Gloucester Mind
- Cheltenham Samaritans

#### What and how did we ask?

We asked local representative organisations and VCS partners what matters most to them and their members in supporting our work to actively engage and involve local people.

#### What did we do?

Monthly updates are shared with Trust news, which is then cascaded through VCS networks to ensure that more people know more about our services and see ours as an equal and collaborative partnership where robust challenge can be given and is welcomed.

We regular engage with members of the Network in many ways to ensure we can regularly seek the views of a representative sample of local residents on health and care issues and in our planning. We are also always looking for new ways to work in partnership on future projects together, including fundraising bids to benefit the people they work with.



### **What did people tell us?**

Partners told us that the network needed to be made up of representatives from the voluntary and community sector, through them we can engage with people with lived experience local communities and patient groups and Healthwatch Gloucestershire.

The Network supports us to work closely together with local communities, ensuring continuous feedback, exchange of information and develop new approaches to ensure a diverse range of people's voices are heard.

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## **5.6 Our Creative Communities: New Perspectives**

### **Brief description**

The 'Our Creative Communities: New Perspectives' project is a collaboration to boost mental health and wellbeing through mindful photography, to support staff, patients and volunteers.

### **Who did we speak to?**

We worked collaboratively with lead partner Gloucester Cathedral and Gloucestershire Action for Refugees and Asylum Seekers (GARAS), Inclusion Gloucestershire, Gloucestershire Carers Hub and Look Again photography on a funding bid to deliver mindful photography courses.

Funding was awarded by Take Note, GUST and the Esmee Fairbairn Foundation, funders who focus on bringing together arts and non-arts partners to achieve greater collective impact.

### **What and how did we ask?**

The project brings together carers, patients, volunteers, NHS staff, adults facing disabling barriers, adults living with or in recovery from mental ill health and people who are seeking or have been granted asylum and truly involves us in our community in a brand new way. We will continue to work closely with these partners and look for future funding opportunities in the year ahead.

### **What did we do?**

Look Again Photography delivered three courses of mindful photography which staff, patients and volunteers took part in. These sessions brought together a diverse group of people, blending our team with our community, for their mutual benefit.

The sessions provided our staff with an opportunity to pause and reflect at a time when the significant pressures of the pandemic had started reduce. Our paediatric diabetes patients took part in one of the courses, which was targeted at young people.

### **What did people tell us?**

People told us that the course gave them new skills, new friends, a feeling of community and a sense of connection to others through the pandemic. The sense of isolation had previously been strong and these course helped people reconnect.

Members of the groups told us that they continued to meet outside of the sessions as a long term source of support to keep in touch on a social level and share photos if they would like. Participants of the course said that it helped them in the 'here and the now' to reconnect with themselves. Many had struggled with their mental health and the course helped ground them, enabling them to stop, take a breath and be present.

### **Find out more here**

The work will be exhibited and celebrated at both Gloucester Cathedral and Gloucestershire Royal Hospital in the summer and autumn of 2021 and more partnership working opportunities being explored for the year ahead.

## 5 The impact of involvement and engagement over the last year

### 5.7 Centres of Excellence

#### Brief description

Our strategic site programme will see building work to improve Cheltenham General Hospital (CGH) and Gloucestershire Royal Hospital (GRH), establishing our Centres of Excellence.

Plans for CGH include modern day case surgery facilities with two additional theatres and a Day Surgery Unit and GRH will benefit from an improved Emergency Department and acute medical care facilities designed to speed up diagnosis, assessment and treatment. There will be a redesigned outpatients and fracture clinic accommodation for orthopaedic outpatients, additional x-ray capacity and a programme of ward refurbishment.

#### Who did we speak to?

Through our patient and public involvement work we involved local people and local organisations, cascading information through letters to local residents and using our Partnership Involvement Network.

We worked closely with patients, Healthwatch Gloucestershire and Gloucestershire Carers Hub in solutions development workshops to help directly shape plans.

#### What and how did we ask?

In June 2020 we wrote to local residents, living in close proximity to GRH and CGH to advise them of our plan to submit planning applications for both hospitals.

Over 500 letters were sent, offering local residents an opportunity to get more involved in our exciting plans and a route to sign up to quarterly updates. We also engaged with local organisations such as Sandford Parks Lido, Maggie's and businesses situated in close proximity to Gloucestershire Royal Hospital. With the plan to keep local people informed and ensure that we are good neighbours both before, during and after the building works.

#### What did we do?

Work continues on this significant project as we focus on ensuring that while building works take place we are also 'good neighbours' to local residents and local organisations, with clear communication channels embedded into the programme.

In the development of plans we involved patients, for example in looking at the increased mental health facilities planned in our Emergency Department (ED) we worked with experts by experience that are part of our ED Mental Health Working Group. For the development of our new Day Surgery Unit a patient became a member of our project team. Our Accessibility Advisory Group met to ensure the views of people living with a disability inform our site development.

#### What did people tell us?

Members of the Accessibility Advisory Group, which include organisations such as the National Star College, the Sight Loss Council and Inclusion Gloucestershire told us that they felt empowered to be in the room with architect's, builders and NHS staff and included in the development of our two hospital sites. Areas of particular focus were on ensuring the privacy and dignity of our patients and providing 'quiet areas' so that patients didn't struggle with sensory overload.

#### Find out more here

[www.gloshospitals.nhs.uk/about-us/news-media/press-releases-statements/exciting-plans-transform-gloucestershire-hospitals/](https://www.gloshospitals.nhs.uk/about-us/news-media/press-releases-statements/exciting-plans-transform-gloucestershire-hospitals/)



“ensuring the privacy and dignity of our patients and providing 'quiet areas' so that patients didn't struggle with sensory overload”

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## 5.8 Arts Steering Group

### Brief description

With the establishment of an Arts Steering Group in 2020 the Trust were successful in securing funding from the Cheltenham and Gloucester Hospitals Charity and the recruitment to the 12 month post of an Arts Coordinator to work with staff, patients and the public to use visual arts to improve the hospital environment.

### Who did we speak to?

Our new Arts Coordinator will deliver an exciting arts programme which will provide us with an opportunity for outreach into our diverse community. Significant focus within the Art Coordinator role is on our Strategic Site Development with the creation of a new Day Surgery Unit and extension of our Emergency Department at Gloucestershire Royal Hospital. This will ensure not only that there is strong involvement, but also to create an extraordinary environment to positively transform the experiences of patients, visitors, carers and members of staff through art.

### What and how did we ask?

Our Arts Coordinator provided a new approach to working with local artists, developing written briefs and involving patients, our experts by experience and staff in this work. Through the creative consultation process artwork will be produced to improve the environment of the room where our mental health patients are interviewed when they attend the Emergency Department. The current room provides a stark place to sit and the room will feel much softer and more welcoming for both staff and patients with this new art installation.

Additionally we ran a Children's Centre focus group for staff and we also involved Healthwatch Gloucestershire to consider our current environment and how this could be improved by developing a new 'look and feel' with the support of our Communications Team and also our Arts Coordinator. Future arts sessions are planned to be delivered in the Children's Centre with patients, carers, families and staff to inform the environment.

### What did we do?

We began a programme of delivering creative consultations to actively engage patients, carers, families and staff. We also planned the community outreach sessions that our Arts Coordinator can support. Our intention is to strengthen our engagement and involvement work and to get better at demonstrating the difference we can really make, by increasing how communities can be involved in shaping services and decision-making in creative, innovative ways.

### What did people tell us?

We will continue to work closely with patients, carers and communities who have experience of using health and care support or services to make improvements in how that care is planned, organised and delivered. We know that people share our ambition to continually improve services into the future and art provides us with another avenue to work more closely with local people, in particular with the arts community but also more broadly by delivering activities through schools and colleges.

### Find out more here

[www.gloshospitals.nhs.uk/your-visit/plans-transform-our-hospitals/](https://www.gloshospitals.nhs.uk/your-visit/plans-transform-our-hospitals/)

## 5 The impact of involvement and engagement over the last year

### 5.9 Widening Participation Review – Big Conversation

#### Brief description

In autumn 2020 we commissioned an external OD consultancy (DWC) to engage our colleagues in a “Big Conversation” exploring our organisational culture. This was in recognition that too many of our ethnic minority, disabled and LGBTQ+ colleagues do not have as positive experiences of working in our Trust, as their counterparts.

We also wanted to recognise the importance of the Black Lives Matter movement and the disproportionate impact of COVID-19 on ethnic minority communities – combined these presented a unique opportunity to respond and make a difference. Diversity is a fact but inclusion is a choice; as such we hold the ambition to becoming a truly inclusive organisation where all colleagues, irrespective of their personal characteristics, work in an environment free from discrimination and where they can fulfil their ambitions.

#### Who did we speak to?

We spoke to colleagues from across the organisation, including our equality and diversity, LGBTQ and disability networks, staff side and unions, Governors, Board, as well as individual teams.

#### What and how did we ask?

Throughout the autumn of 2020 we held a series of discussion groups with key stakeholders; under the banner ‘A Big Conversation’.

In addition we broadcast four Facebook Live events [www.facebook.com/gloshospitals](https://www.facebook.com/gloshospitals) of the Big Conversation to engage colleagues and be transparent about the experiences people told us.

We asked colleagues to tell us about their experiences, what outstanding equality, diversity and inclusion look and feel like if we get it right, how Covid had impacted on colleagues and what next steps we can take together in improving the quality of staff experiences.

#### What did people tell us?

The listening events enabled colleagues to share their experience and where improvement could be made, including:

- Fairness in recruitment and access to career development opportunities
- Working in an organisation where disrespect and rudeness is too often tolerated
- A work environment that is inclusive for all where colleagues trust each other to act when it is not demonstrated

#### What did we do?

The insight and feedback from colleagues has led to a number of key recommendations which we are now implementing in 2021/22, including:

- Reforming our approach to recruitment and selection, with a strong emphasis on positive action
- Expanding the range and access to development opportunities for minority groups, such as mentoring and leadership development
- Strengthening our governance and engagement processes to increase the representation and voices of minority groups in decision making forums
- Launching a campaign and training materials to support colleagues who experience or witness poor behaviours in the workplace



### Find out more here

The recommendations that have come from this work will be published in early May 2020, and are already being acted on as a means to improve the equity of experience and opportunities which are available to all colleagues, regardless of their background or any protected characteristics they hold.

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## 5.10 Pathway to Excellence (P2E)

### Brief description

The Pathway to Excellence (P2E) accreditation programme recognises hospitals with positive practice environments where nurses can excel. The aim of the P2E programme is to bring about the cultural and transformational change needed to create a healthy and vibrant nursing and midwifery workforce, improving recruitment and retention and the quality of patient care.

### Who did we speak to?

A critical element of the P2E is ensuring that nurses and midwives are at the heart of shared decision-making and part of the governance structure. The principles of shared decision-making ensure that agreement is reached in an inclusive and collaborative way.

The focus of our engagement was directly with nurses and midwives across the Trust.



### What and how did we ask?

The P2E framework offers a range of models for shared governance and we worked with colleagues to agree which approach would be most appropriate for the Trust to adopt.

We worked with nurses and midwives to explore the Pathway programme and develop six practice standards essential to an ideal nursing practice environment:

- Leadership
- Shared decision making
- Quality
- Safety
- Well-being
- Professional development

### What did people tell us?

Colleagues told us that the 'Council' model promoted shared leadership and its structure is most commonly used in healthcare.

The Councils meet to reflect on issues that impact directly on their area and this includes clinical practice standards; quality improvement; person centred care (for colleagues and people using our services); professional development; research; care delivery; and recruitment.

Colleagues wanted to be able to directly shape the culture, processes and influence decisions about how care is structured and delivered in our Trust.

It was also identified that there needed to be opportunities for nurses and midwives to network, collaborate, share ideas, and be involved in decision-making.

### What did we do?

Our first co-ordinating Nursing and Midwifery Excellence (NaME) Council was set up in July 2020 with an Executive Sponsor for the programme Professor Steve Hams, meeting monthly.

Since then the Trust has set up a further 15 councils (including a council for reward and recognition, advanced and consultant practice, midwife led care and also 5 specialty councils).

### Find out more here

Shared governance is continually evolving and aims to empower those colleagues who are closest to the patient, enabling shared decision-making to improve services to provide the Best Care for Everyone.

[www.gloshospitals.nhs.uk/about-us/news-media/press-releases-statements/nursing-and-midwifery-excellence-collective-leadership-gloucestershire-hospitals/](http://www.gloshospitals.nhs.uk/about-us/news-media/press-releases-statements/nursing-and-midwifery-excellence-collective-leadership-gloucestershire-hospitals/)

## 5 The impact of involvement and engagement over the last year

### 5.11 Children's Centre Project

#### Brief description

The 'Bright Ideas Project' was created by colleagues in the Children Centre to gather feedback from pupils at local primary and secondary schools

#### Who did we speak to?

The Involvement Team built on the excellent work instigated by the Children's Centre team where they worked with local primary schools and delivered a 15 Step Challenge to inform the new design of the department.

#### What and how did we ask?

A staff focus group was run to ensure that staff also informed the design process and future creative consultations are planned to formally involve patients, carers, families and staff. Views were asked for in relation to a theme for the unit, a design for nurse's uniforms and stations and on the food we serve our patients.

#### What did we do?

From autumn 2020 onwards our Gloucestershire Hospitals Youth Ambassadors worked regularly with the Children's Centre team to support the co-design of the environment and in the creation of a set of promises to be displayed in the department, a redesign of the whole area and consideration to be given to a new name. Building on this excellent involvement work the Communications Team began work on a new 'look and feel' using material produced from a variety of engagement activities, involving staff, patients, carers and families.



### 5.12 Accessibility Advisory Group (AAG)

#### Brief description

Our Trust Accessibility Advisory Group was set up to provide expert advice and feedback to the Trust to ensure its buildings and services are accessible to the public, patients and carers. The scope of the group initially was focused on our strategic site development, in regard to access for disabled people but with plans to broaden the remit from this to across both of our hospitals.

#### Who did we speak to?

Listed below are the organisations that are members of this group:

- The Sight Loss Council
- Inclusion Gloucestershire
- The National Star College
- The Barnwood Trust
- RNIB
- Gloucestershire Deaf Association
- Gloucestershire Carers Hub
- Age UK
- The Macular Society
- The Thomas Pocklington Trust

### **What and how did we ask?**

This group is also of particular interest to our Governors and two are members of this group. AAG is chaired by the Engagement Manager from the Thomas Pocklington Trust. The terms of reference for the group were co-designed.

### **What did we do?**

Our first meeting was held in April 2021 and work was focused on considering the overview of the building works planned at Cheltenham General and Gloucestershire Royal. The group discussed how we could take into account the needs of people living with disability to ensure their privacy and dignity is respected and to ensure that we always consider accessibility from this perspective.

### **What did people tell us?**

Members of the group felt empowered and were excited to see future plans and consider how potentially we can collectively improve facilities and access.

Working in partnership and endeavouring to share decision making as much as possible we plan to build the credibility and influence of this group over time across our hospital sites.

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## **5.13 Transition Diabetes Project**

### **Brief description**

The Trust has developed a new Diabetes Transition Service to support young people between the ages of 16-19 years old, as they move from children's to adult services.

### **Who did we speak to?**

Our Paediatric Diabetes Team is incredibly proactive in engaging with their patients and families and does this on an ongoing basis. We spoke with young people who were about to move to the adult service, those who had already moved on and their parents to find out what went well and what could be improved.

### **What and how did we ask?**

The Involvement Team conducted a series of surveys, telephone interviews, a focus group and a number of sessions with Youth Ambassadors to understand the experience of diabetes patients and their families.

### **What did people tell us?**

Some young people with diabetes told us that they do not get a good experience of transition and the impact this has on how they well they managed their diabetes. Parents in particular expressed their concerns about the stark contrast with the number of appointments offered between the paediatric diabetes experience and the adult diabetes service.

The former being a particularly supportive service, with regular appointments and a real feel of being looked after in comparison with the adult diabetes service where there are significantly fewer appointments. Youth Ambassadors who were also paediatric diabetes patients took part in a focus group. In this session they co-designed a survey, requested that appointments for the new service would run outside of school hours and reflected that they didn't have a strong preference on where clinics were held, whether they were on a hospital site or in the community.

### **What did we do?**

The new Diabetes Transition service continues to be co-designed with young people by working closely with our Youth Ambassadors.

One critical improvement we will make is to include young people in the interviews for a Transition Diabetes Youth Worker. The role will help set up peer to peer support that patients told us would be welcomed to help them manage their diabetes.

### **Find out more here**

<https://www.gloshospitals.nhs.uk/our-services/services-we-offer/childrens-services/about-us/diabetes-children/>

# 6 Other ways we involve and engage

**Over the last year we have continued to strengthen and develop the range of ways we are able to engage and work with local people and colleagues. As an NHS organisation we also have a number of established approaches to ensure the voice of local communities are represented.**

Wherever possible we try to work with our NHS and care partners across Gloucestershire. There is a clear benefit to local people in health and social care working together on engagement and involvement opportunities, helping us to have more meaningful conversations and ensuring our voluntary and community sector have an active role.

## 6.1 One Gloucestershire

Over the last few years, health and care organisations across the county have worked together closely as the One Gloucestershire partnership, helping to make sure the experience of local people using services is more joined-up.

This way of working is also set out by NHS England as part of the national vision for Integrated Care System (ICS). The aim of an ICS is to ensure greater cooperation across health and care organisations that allows them to work closer together to improve the health and wellbeing of populations across large areas.

The One Gloucestershire's 'Your Say' section is the joint online consultation database where members of the public can take part in surveys and keep up to date with the engagement work being undertaken across the county.

The collaborative way of working has been beneficial in the way health and care organisations across Gloucestershire have responded to the Covid-19 pandemic, with partners working together as part of the ongoing emergency to ensure our populations get the care they need.

Together, we have developed a range of engagement methods to ensure an appropriate approach to enabling people to have their say. Further information about One Gloucestershire can be found here:

[www.onegloucestershire.net/yoursay/](http://www.onegloucestershire.net/yoursay/)



## 6.2 Governors

A driving force behind our Trust is the active involvement of members of the public, patients and staff through our Council of Governors. We have 22 public, staff and appointed governors who represent the views and interests of Trust members and the local community, to ensure our Trust reflects the needs of local people.

Our governors ensure we listen to the views of patients and people who live locally, along with our staff and other interested parties. They hold us accountable and ensure we can make improvements to our services, and the information we provide.



The Council of Governors meet six times a year to provide feedback on developments and decisions at our hospitals. These meetings are open to the public, who are welcome to attend.

Over the last year our Governors have been actively involved in a range of programmes and committees across the Trust, including the Emergency Department Mental Health Working Group, Accessibility Advisory Group and are connecting with the GP Patient Participation Groups (PPGs) to listen to local issues for patients and carers.

Further information about Governors can be found here: [www.gloshospitals.nhs.uk/about-us/governors/](http://www.gloshospitals.nhs.uk/about-us/governors/)

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### 6.3 Members

As a Foundation Trust, we are accountable to local people and we actively promote the benefits of becoming a member and how to stand for election as a governor.

Members are our staff, our patients and members of the public who either have a general interest in healthcare or are interested about a specific condition or speciality. Members are regularly invited to get actively involved with the Trust to develop services which will best suit the needs of local people.

We are reviewing and updating our Membership strategy to ensure that people can actively get involved and influence the development of future local services provided by the Trust.



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### 6.4 Patient Experience

Our patient experience matters to us. Our Trust’s strategy has a commitment to create a culture where patients really are at the heart of everything we do and that a patient centred care is embedded across the Trust.

We know from international evidence that outstanding patient experience improves patient safety and clinical effectiveness and also improve the experience of NHS colleagues.

As a Trust we produce an Annual Patient Experience Report which focuses on all our patient experience initiatives, including Friends and Family, compliments, comments and complaints and projects that have happened across the organisation this year. This can be read at:

[www.gloshospitals.nhs.uk/about-us/reports-and-publications/reports/](http://www.gloshospitals.nhs.uk/about-us/reports-and-publications/reports/)

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### 6.5 Healthwatch Gloucestershire

The Trust works closely with Healthwatch Gloucestershire (HWG) and they are actively involved in our work and plans, including attendance at Trust Board, Partnership Involvement Network and a number of service projects, including the Covid vaccination programme. More information about Healthwatch can be found here:

[www.healthwatchgloucestershire.co.uk/](http://www.healthwatchgloucestershire.co.uk/)

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### 6.6 Patient and colleague stories

Patient and colleague stories are regularly presented at the beginning of Trust Board meeting. The stories provide an example of the lived experience of patients and colleagues to highlight examples of excellence and where there are areas for improvement.

[www.gloshospitals.nhs.uk/about-us/our-board/board-papers/](http://www.gloshospitals.nhs.uk/about-us/our-board/board-papers/)

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### 6.7 Our Annual Members Meeting

As a result of the Covid pandemic a virtual Trust Annual Members Meeting took place on 8 October 2020 and was broadcast live, enabling colleagues and local people to join us and has been viewed over 2,200 times.

During the AMM the Trust shared highlights and achievements during one of the most challenging years in NHS history as well as sharing some next steps and future developments planned for the year ahead. You can watch the Annual Members Meeting again at:

<https://tinyurl.com/GlosAMM>



## 6 Other ways we involve and engage

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### 6.8 Staff Councils

Well-led Trusts have collective leadership, structural empowerment and a culture of inter-professional decision making. We are transforming the way we do things so that we're using Pathway to Excellence and Magnet standards. We have to date established 5 fully formed shared professional decision-making Councils and have at least another 10 establishing themselves.

For more information on our Staff Councils visit [www.gloshospitals.nhs.uk/about-us/our-trust/quality-performance/nursing-and-midwifery-excellence/](http://www.gloshospitals.nhs.uk/about-us/our-trust/quality-performance/nursing-and-midwifery-excellence/)

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### 6.9 J2O Staff Engagement

Each month Executive and Non-Executive Directors meet with staff from services as part of the Journey to Outstanding visits.

The aim of the visit is for colleagues to engage directly with Executive and Non-Executive Directors and share what is going well, what barriers there are to success and any key safety concerns affecting both staff and patients.

The visits support the Trusts desire to have direct opportunities for colleagues on ward and services to share their experiences, achievements and concerns with Board members.

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### 6.10 NHS Staff Survey

Each year colleagues across the Trust are invited to take part in the NHS Staff Survey, which is the largest survey of staff opinion in the UK. It gathers views on staff experience at work around key areas, and includes: appraisal and development; health and wellbeing; staff engagement and involvement.

In 2020 a total of 3,519 colleagues completed the survey, which is just under 50% of all staff and showed some key improvements, in particular 70% of staff recommending the Trust as a place to receive care and 64% recommending it as a place to work. However, we also know there is more work to do with regards to career progression and discrimination for colleagues from ethnic minority backgrounds.

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### 6.11 Social Media

Social media has evolved significantly over recent years and, when used in the right way, can enable closer involvement and engagement with a wider range of local people, colleagues and represent the diverse communities across the county.

In response to the pandemic, much of the Trust's engagement and involvement activity used social media solutions, with a far wider reach and scale of connection that ever before. This include Facebook Live events, Covid updates, live streaming Q&A sessions with staff and listening to individuals experiences of services.

We have several social media channels that anyone can follow and these are outlined below:

-  [www.twitter.com/gloshospitals](http://www.twitter.com/gloshospitals)
-  [www.facebook.com/gloshospitals](http://www.facebook.com/gloshospitals)
-  [www.youtube.com/c/GlosHospitalsNHS](http://www.youtube.com/c/GlosHospitalsNHS)
-  [www.linkedin.com/company/gloucestershire-hospitals-nhs-foundation-trust/](http://www.linkedin.com/company/gloucestershire-hospitals-nhs-foundation-trust/)

# 7 Future Plans

**The Coronavirus pandemic has had a significant impact on a range of our plans; particularly improve the quality and scale of our public involvement work. However, we have adapted our approaches and have been able to develop new skills and options that we hope will open up access to involvement and engagement for more people.**

Over the next year we plan to carry on in delivering against the milestones within our Engagement and Involvement Strategy. In addition we will continue to strengthen and improve the range of ways people can work together with the Trust and we are always keen to listen to suggestions on how to make this more accessible.



## 7.1 Elective care

One of the greatest consequences of the Covid-19 pandemic has been the significant impact on waiting times, and in particular for planned elective care. This has led to a considerable backlog of people waiting for NHS treatment.

Throughout the pandemic in Gloucestershire we have been able to maintain cancer services and our urgent and emergency procedure. However, this has meant that people referred for treatment for a wide range of conditions have had to wait.

It is essential that anyone who is waiting for planned elective care are proactively engaged to support them, understand what may have changed for them and identify appropriate options for their treatment plans.

A new Elective Care Customer Services Team has been set up and will be dedicated to working with all those patients on our waiting lists.

We will support our patients to continually understand what matters most to them and to enable clear information and involve them in decisions about their care.

## 7.2 Gloucestershire Trailblazer: 'Team around the person'

Nationally the NHS is continuing to improve the quality of training for health care staff, with the aim of ensuring better person-centred care. Poor patient experience often stems from disjointed healthcare, involving referrals to multiple specialty services focusing on specific illness issues rather than an individual's holistic health and wellbeing needs.

NHS partners in Gloucestershire are keen to help lead a new approach in the training of future doctors, nurses and allied healthcare professionals, delivering effective services within an integrated health and social care system, placing the person at the centre of care and decision making.

Over the next year we will involve patients, carers and community groups to co-design the detail of the longitudinal programme, mapping out patient journeys, identifying needs and resources, improving patient experience and tackling health inequalities.

### 7.3 Trust Hearing Audit

In 2021 we will complete and publish the findings of a comprehensive hearing audit, which is being carried out to understand what provision the Trust is currently making for patients who have hearing loss or who are Deaf British Sign Language users.

The need for the audit arose from patient feedback about the absence of hearing induction loops and concerns about staff Deaf Awareness. Staff feedback was also an influential factor and included communication struggles due to the lack of personal listening devices, poor environmental acoustic quality and the hastily installed clear screens at reception desks in response to Covid-19.

The report will include:

- Data gathered from all wards, day units and outpatient departments in the Trust
- A risk assessment detailing how poor communication impacts on patient experience and health outcomes
- Recommendations for the acquisition of auxiliary aids and equipment for all wards and patient-facing departments in the Trust

### 7.4 Improving Outpatient Services

Before the pandemic it was recognised that there has been a growing need to improve the experience for people accessing outpatients' appointments, ensuring the best possible care for patients and carers.

Over the next two years we plan to work with local GPs, patients and colleagues to co-design and develop different options for how outpatient appointments could work, considering a range of opportunities. The outcome will be to ensure that patients to be seen in the right place, at the right time, and by the most appropriate healthcare professional.

### 7.5 Community Outreach

We are making a joint submission with Gloucestershire Health and Care NHS Foundation Trust and Gloucester Young Thinkers, Primary Care and the voluntary and community sector to the NHS Charities Together programme to recruit a Community Outreach Worker.

Our aim over the next two years will be to build connections to promote self-management of chronic diseases and help remove health barriers, particularly focusing on Barton and Tredworth, which has high levels of deprivation and health inequalities.

### 7.6 Engagement and Involvement Framework

Over the next year the Trust will continue to strengthen our commitment to public and patient involvement by developing a framework to support colleagues and local people.

The aim will be to co-design a process which ensures that involvement and engagement for all plans and proposals are considered and any required impact assessment is completed. The Engagement and Involvement Framework will be published on our website.



“Over the next year the Trust will continue to strengthen our commitment to public and patient involvement”

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## 7.7 Colleague engagement

We will progress implementation of the two-year staff survey action plan which was defined in 2020, and work more closely with our clinical divisions to embed change at a local level.

We will listen to colleagues on an ongoing basis through the introduction of a pilot cultural barometer that will triangulate patient feedback and staff experience. The project will enable better access to information and feedback and empower services in delivering change.

We will also continue to rollout of the SPEaC App, an online tool to capture feedback on day-to-day experiences of colleagues at work. This will enable us to identify and be more responsive to what makes a great day at work, and more importantly what barriers and challenges colleagues are experiencing.

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## 7.8 Trust Website

We plan to develop a “Get Involved” section of our Trust website to provide information on different ways people can get involved with our work and report on the impact and decisions made as a result of engagement and involvement. We also have produced a series of short films with inspirational members of staff who have improved services by involving patients, which will sit in this section of our website.

We will also ensure this is linked to the ‘Get Involved in Gloucestershire’ <https://getinvolved.glos.nhs.uk/> online platform where individuals and communities can share views, experiences and ideas about local health and care services across the county.



# 8 Summary

**Gloucestershire Hospitals NHS Foundation Trust aims to provide the ‘best care for everyone’ through the services we deliver and strengthen how these are directly shaped through the engagement and involvement of local people.**

There have been a number of successful achievements over the last year, in particular the extensive consultation on the Fit for the Future plans, which will significantly improve the quality of services and establish centres of excellence in Cheltenham and Gloucester. Our response to supporting patients and carers during Covid was critical, particularly when people were unable to visit their loved ones in the hospital, and the difference our Patient Experience Team made is something we are extremely proud about.

However, there is more that we want to achieve and we are excited about the future programmes or work planned, that will continue ensure local people can be involved in shaping and co-designing services.

The impact of the Covid-19 pandemic is likely to continue to dominate over the next year, as nationally and locally services, and the public, adjust to a new normality. Once the imminent threat from Coronavirus subsides it is essential that health and care services are able to recover, albeit in a potentially changed way of working.

A range of ‘silver-lining’ innovations, including increased video consultations and digital tools that have been successfully implemented in response to the pandemic, may become mainstays of future services, enabling greater flexibility for services and patients alike.

In addition, how we deliver involvement activities in the future are likely to bring together the lessons learnt from the Fit for the Future consultation, with virtual, digital and socially distanced events and engagement programmes of work.

We want to work closely with staff, patients, carers and communities who have experience of using health and care support or services to make improvements in how that care is planned, organised and delivered.

We know that people share our ambition to continually improve services into the future.

Although we have seen significant changes over the last year, this review demonstrates our continued commitment to improve the way we involve people to shape better health and care services.

Our intention is to strengthen this work and to get better at demonstrating the difference we can really make, by increasing how anyone can be involved in shaping services and decision-making. As the needs of our local communities and population change, we will continue to work together to establish how best to meet new challenges.

Over the next year we will focus on further improvements in how we engage and act on what patients and the public are telling us.

Finally, we would like to thank all of our patients, staff and community partners who have worked with us in to help achieve our goals and in supporting the organisation during the response to the coronavirus pandemic.





**Gloucestershire Hospitals**  
NHS Foundation Trust



[www.gloshospitals.nhs.uk](http://www.gloshospitals.nhs.uk)

**BEST CARE FOR EVERYONE:  
BEST CARE FOR EACH OTHER**