

Agenda

Joint Health Overview and Scrutiny Committee

Wednesday, 27 September 2023 at 5.00 pm
At Council Chamber - Sandwell Council House, Oldbury

This agenda gives notice of items to be considered in private as required by Regulations 5 (4) and (5) of The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

1 Apologies for Absence

2 Declarations of Interest

Members to declare any interests in matters to be discussed at the meeting.

3 Minutes

7 - 14

To confirm the minutes of the meeting held on 29 November 2022 as a correct record.



- 4 **Additional Items of Business**
- To determine whether there are any additional items of business to be considered as a matter of urgency.
- 5 **Midland Metropolitan University Hospital (MMUH) Update** 15 - 56
- To receive an update on the development of the Midland Metropolitan University Hospital (MMUH).
- 6 **Update on Changes to Day Surgery at Sandwell and West Birmingham Hospitals NHS Trust** 57 - 60
- To provide an update to the Committee on the ongoing work to implement the changes from the formal conversation to Changes to Day Surgery held between March 2022 and April 2022.
- 7 **Patient Experience at Sandwell and West Birmingham Hospitals NHS Trust** 61 - 68
- To update the Committee about Sandwell and West Birmingham Hospitals NHS Trust's (SWB) approach to patient experience.
- 8 **Work Programme 2023/24** 69 - 72
- To determine the matters that the Committee wishes to include on its work programme in 2023/24.

Shokat Lal
Chief Executive
Sandwell Council House
Freeth Street
Oldbury
West Midlands

Distribution

Councillor Brown (Chair) and E M Giles (Chair)
Councillors Akhtar, Clancy, Dunn, Johnston, Kalebe-Nyamongo, Millar and
Tilsley

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BIRMINGHAM CITY COUNCIL

**JOINT HEALTH
OVERVIEW & SCRUTINY
COMMITTEE
BIRMINGHAM &
SANDWELL
29 NOVEMBER 2022**

**MINUTES OF A MEETING OF THE JOINT
HEALTH OVERVIEW AND SCRUTINY
COMMITTEE BIRMINGHAM AND SANDWELL
HELD ON TUESDAY 29 NOVEMBER 2022 AT
1400 HOURS IN COMMITTEE ROOM 6,
COUNCIL HOUSE, BIRMINGHAM**

PRESENT: - Councillor Mick Brown in the Chair;

Birmingham: Councillors Kath Hartley, Jane Jones, Gareth Moore and Paul Tilsley,

Sandwell: Councillors Elaine Giles and Elizabeth Giles.

Attendees:-

Liam Kennedy, Midland Metropolitan University Hospital Delivery Director
Jayne Salter-Scott, Head of Public and Community Engagement, Sandwell
and West Birmingham NHS Trust

Ruth Wilkin, Director of Communications, Sandwell and West Birmingham
NHS Trust

Fiona Bottrill, Senior Overview & Scrutiny Manager, BCC

Stephnie Hancock, Deputy Democratic Services Manager, Sandwell MBC

Mandeep Marwaha, Committee Services, BCC

Gail Sadler, Scrutiny Services, BCC

NOTICE OF RECORDING/WEBCAST

01/29112022

The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's meeting You Tube site (www.youtube.com/channel/UCT2kT7ZRPFCXq6_5dnVnYlw) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

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02/29112022

APOLOGIES

Apologies were received from Councillors David Fisher, Sukhbir Singh Gill and Vicki Smith.

DECLARATIONS OF INTERESTS

03/29112022

There were no declarations of interests.

The business of the meeting and all discussions in relation to individual reports are available for public inspection via the web-stream.

MINUTES

04/29112022

The Minutes of the Joint Health Overview and Scrutiny Committee meeting held on 04 November, 2021 were approved as a correct record of the meeting.

MATTERS ARISING

The Chair referred to Solid Tumour Services for Sandwell and West Birmingham. A briefing note was shared at the informal meeting of the Committee on 24 February 2022, which had been resent to Committee Members.

Scrutiny Officers have requested a written update indicating when further details/information would be made available. This information would be circulated to the Committee.

COMMITTEE TERMS OF REFERENCE

The following report of the Senior Overview and Scrutiny Manager was submitted: -

(See document No.1)

An overview to the report was provided by the Senior Overview and Scrutiny Manager, Fiona Bottrill. It was noted the Terms of Reference of the Joint Health Overview and Scrutiny Committee Birmingham City Council and Sandwell Metropolitan Borough Council had been updated to reflect the changes in NHS organisations following the establishment of Integrated Care Systems. This was reflected in appendix 1 (section 1.1 and 3.1) of the report.

Upon consideration, it was:

05/29112022

RESOLVED:-

That the Committee agreed to the amendments to the terms of reference attached as Appendix 1 (section 1.1 and 3.1) of the report which reflected the

changes in NHS organisations following the establishment of the Integrated Care Systems.

ACUTE CARE MODEL

The following report and presentation of the Director of Midland Metropolitan University Hospital, Liam Kennedy was submitted: -

(See document No.2)

The Director of Midland Metropolitan University Hospital shared the presentation via his screen. It was noted this was a significant opportunity for Sandwell and Birmingham as this was the largest hospital currently being built in the country. This supported transformation within Community Services, Primary Care and regeneration work around the hospital to help the economy and work on a wider scale..

The presentation gave an overview to what the new hospital will look like with regards to the Wards, Operating Theatres etc; benefits of the new hospital; future service model; clinical care when the Midland Metropolitan Hospital opens; future service model by site; aims of clinical services transformation; the roadmap for the Midland Metropolitan Hospital over the next 2 years for opening in Spring 2024 and the service transformation roadmap.

It was noted there were 12 Transformations taking place within Clinical Services. These were noted as;

- 1) Emergency Day care – 2 sites to 1
- 2) Same Day Emergency Care - 2 sites to 1
- 3) Assessment Units – 2 sites to 1
- 4) Older Peoples Care and Frailty – 2 sites to 1
- 5) Stroke Decoupling
- 6) Cardiology
- 7) Acute Therapies – 2 sites to 3
- 8) Imaging – 2 sites to 3
- 9) Endoscopy – 2 sites to 3
- 10) Place Partnership
- 11) Theatres – 2 sites to 3
- 12) Enhanced Care

Furthermore, a summary of how to prevent unnecessary attendance, re-submissions and to reduce unnecessary stays in hospitals was shared with members and the model of care for frailty patients was summarised.

The next steps for the transformation consisted of;

- Continuous and extensive GP, public and patient engagement as detailed pathways develop across the transformational programmes;
- Further development of EQIAs and QIAs as transformation work progresses;
- Collaborative working with commissioners and key stakeholders;

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- Ongoing work with peer clinical reviewers during service refinements; and
- Delivery of the key transformational changes - Monitoring and sharing of the benefit realisation.

In response to questions from Members the following points were made:-

- It was queried if there was a multidisciplinary team around the intervention taking place for frailty patients. Members were informed the priority action element involves different compartments; integrated front door which includes wider partners such as third parties; social care etc where the package of care element is arranged. The clinical wrap around liaise with the social workers.
- Members noted the transformation sounded promising however, questioned what lessons had been learnt from the Queen Elizabeth (QE) Hospital was built and what lessons had been learnt from that experience given that there were capacity issues and not able to meet future demand.

In response, the following was noted;

- i) Lessons Learnt – Kevin Bolger (Chief Operating Officer) when the QE moved, was a Strategic Advisor on the Board. He was providing advice on areas that had gone wrong and lessons learnt to avoid the same mistakes. In addition, there was a New Hospital Programme Team (National Team) who would be providing guidance.
- ii) Demand & Capacity – A series of simulation modelling had taken place which looked at different levels of activity and demand. This is refreshed monthly. It was noted, the work within the Sandwell area was having a major impact on admissions and length of stay in hospitals for Sandwell patients. However, the impact on Birmingham and West Birmingham was not visible at present. At present, this was reflected upon what Sandwell was doing only and it was important to work with partners in Birmingham and West Birmingham. The Director of Midland Metropolitan University Hospital assured members the model looked good however, recognised there were areas of risks that would need to be addressed.
- iii) Concerns were raised around staffing to support the transformation. Members were informed there were 484 more staff required (based on models of care). A quarter of the recruitment had taken place and was working well. It was recognised recruitment was one of the biggest challenges in the NHS e.g. posts such as Radiographers and Acute Medical Teams will be difficult to recruit. There was confidence to recruit to all other posts.

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- The Chair was impressed with the set up of the hospital which would allow moving patients around the hospital out of the public eye and that there was a specific Dementia Team looking at the design specifications needed for dementia patients
- Building handover in October 2023 and the hospital will be fully operational by 2024.
- Recruitment – there were mitigations in place i.e. locums, however, recognised this would be an expensive option. International recruitment company is providing support both in the UK and overseas. Doing a headhunting approach as this was the largest flagship hospital nationally, at the moment, with a lot more on offer than other hospitals. It was noted the recruitment levels were not great, however, with joint efforts with the Strategic Partnerships this would improve. It may be different ways of working would need to be explored. For example, had worked with two outsourced partner to assist with imaging. Concerns were raised around parking arrangements and impact on surrounding residential areas. Other new hospitals that had been opened in the last 5 years had been looked at. There was a 30% increase in activity added through the front door during the opening period. All areas had been factored into the modelling within the first 6 months. There was confidence the parking etc would be managed effectively during the transition period. It was noted there was a multistorey car park underneath the hospital. A mathematical model had been applied by using Queen Elizabeth Hospital as an example. A 15% window had been applied for staff, patients.
- The car park would consist of a section for electric vehicles and bicycles.
- It was important to ensure the concerns of neighbours within the surrounding areas was factored in and the relationship with the local authority has been very important.
- A friends and neighbourhoods' group were being set up to allow any concerns to be raised. A meeting with local councillors will also be taking place.
- Travel Plans – There were concerns around staff parking and their ability to have options available. It was noted there could be potential issues with the bus services therefore important staff were supported to attend and deliver services.
- Reference was made to parking issues that had been experienced with City Hospital and University Hospital Birmingham as well as parking on private roads. It was suggested staff members should car share if they are travelling from the same direction. Staff would also receive discount towards parking.
- A Transport Study was taking place in Sandwell and West Birmingham which also focuses on canals and possible routes to consider. It was important to provide citizens and staff a range of options.

Upon consideration, it was:

06/29112022

RESOLVED:-

That the Committee;

- (i) Noted the contents of Appendix 1 of the report detailing work to date
- (ii) Acknowledged ongoing work on:
 - Continuous and extensive GP, public and patient engagement as detailed pathways develop across the transformational programmes
 - Further development of EQIAs and QIAs as transformation work progresses
 - Collaborative working with commissioners and key stakeholders
 - Ongoing work with peer clinical reviewers during service refinements
 - Delivery of the key transformational changes
 - Monitoring and sharing of the benefit realisation

PROPOSED CHANGES TO DAY CARE SURGERY

The following report of the Director of Midland Metropolitan University Hospital, Liam Kennedy was submitted: -

(See document No.3)

Introductory comments to the report was provided by the Director of Midland Metropolitan University Hospital. It was noted, members had requested an update on feedback received during the public conversation on proposed changes to Day Case Surgery delivery following the opening of the Midland Metropolitan Hospital.

- (i) General surgical would be located at the Birmingham Treatment Centre; and
- (ii) Trauma and orthopaedics would be located at the Sandwell Treatment Centre.

In response to questions from Members the following points were made:-

- Costs involved and staffing were factored into this decision. In addition, consultation took place with patients. Engagement took place via postal surveys; in person meetings; online meetings; working closely with voluntary and faith sectors where targeted work took place.
- 50% of the citizens understood why there was a change to the day care surgery. There were concerns around travel access and inflated costs around taxi fares. This was being reviewed through a governance process. Further work was taking place to build on the Miss Daisy Scheme (Companion Based Service – collecting people from hospitals and dropping them home) and various solutions were being explored.
- It was highlighted clear communications of changes should be cascaded to the public to avoid any issues.
- Free parking was not expected to be provided. Car parks were managed by external providers and deal with the charges.

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- Signage – Ongoing conversations were taking place around the colour, background etc to the signage set out on the sites.
- The recommendation in the report referring to the implementation plan being drawn up along with the decision and the report findings will be shared formerly with the new Black Country and West Birmingham Integrated Care Board, the Joint Health Overview and Scrutiny Committee and shared widely with all key stakeholders and participants would be shared in due course.
- Over 35% of the local community would be employed which will assist with the regeneration.

Upon consideration, it was:

07/29112022

RESOLVED:-

That the Committee;

- (i) Noted the contents of the report in Appendix 1. This report presented the findings from the formal public conversation on the proposed changes to day case surgery across Sandwell and West Birmingham Hospitals between 7th March and the 15th of April, ahead of the opening on the Midland Metropolitan University Hospital.
- (ii) Acknowledged the proposed next steps:
 - The insight from the public conversation would be considered by the MMUH Surgical Programme Board and the Clinical Executive Group as well as the MMUH Steering Group as much of the insight and comments refers to generally to the new hospital development.
 - The MMUH Surgical Programme Board would consider the feedback relevant to their specialty area and explore how to mitigate any associated risks or potential negative impact on our patients caused by the proposed changes; and
 - Noted an implementation plan would be drawn up. The report findings would be shared formally with the new Black Country and West Birmingham Integrated Care Board, the Joint Health Overview and Scrutiny Committee and shared widely with all key stakeholders and participants.

DATE AND TIME OF NEXT MEETING

08/29112022

It was noted the Committee routinely meet quarterly however proposed to meet six monthly (unless there was a requirement to call for a meeting earlier).

Members agreed with this proposal.

**REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/
PETITIONS RECEIVED (IF ANY)**

09/29112022 There were no requests for call in.

10/29112022 **OTHER URGENT BUSINESS**

Strike Action - Direct impact on the Trust – It was noted that this was a challenging time for the NHS. Awaiting conversations to take place with RCM, Unison, and GMB. Contingency plans have been drawn together to explore the impact of the strike action.

AUTHORITY TO CHAIRMAN AND OFFICERS

11/29112022 **RESOLVED:-**

That, in an urgent situation between meetings, the Chairman jointly with the relevant Chief Officer has authority to act on behalf of the Committee.

It was moved and seconded that the Chairman be thanked for Chairing the meeting for the year.

Meeting ended at 15:12 hours.

Joint Health Overview and Scrutiny Committee (Sandwell and Birmingham)

27 September 2023

Subject:	Midland Metropolitan University Hospital (MMUH) Update
Director:	Rachel Barlow Managing Director MMUH Programme Company
Contact Officer:	Jayne Ilic Director of Communication and Engagement, MMUH Programme Company

1 Recommendation

That the Committee notes the contents of the report and acknowledges the progress to date and ongoing work to support the opening of the new hospital in Smethwick next year.

2 Reasons for Recommendations

This detail of this report is at request of members of the Joint Overview and Scrutiny Committee at its meeting in November 2022.

3 How does this deliver objectives of the Corporate Plan?

Midland Metropolitan University Hospital supports the following priorities:

Priority 1	We will help keep people healthier for longer
Priority 2	We will help keep people safe and support communities
Priority 3	We will work together to join up services
Priority 4	We will work closely with local people, partners and providers of services



4 Context and Key Issues

- 4.1 When Midland Metropolitan University Hospital opens next year, it will bring together all critical and emergency care services that are currently provided at City and Sandwell Hospitals.
- 4.2 The hospital design strengthens our ability to deliver the best standards of care alongside an opportunity to transform some of our clinical services.
- 4.3 Our journey towards Midland Met involves us transforming some of our services before we open our doors. Our future service model has 12 transformation areas based on clinical improvements. Several changes will happen before we move into our new hospital, and these will continue once we are open.
- 4.4 In order to ensure that we seek the views of our patients, the people who use our services and our wider stakeholders in any of our service improvements we have in place robust plans to ensure that we both inform, listen, learn, and implement where we can suggestions from all our stakeholders, which includes our patients, people who use our services, their carers, and their communities.
- 4.5 We are also concentrating our efforts on delivering care for more patients away from the hospital setting, in their own homes or closer to home in a community setting. Right sizing our community beds facilities and home-based care services will help us achieve this.
- 4.6 There is collaborative work underway between us, acute and community services, primary care, social care, mental health, Ambulance services, and our partners in the voluntary, community, faith-based sector.
- 4.7 We have lots of exciting work going on around engagement, the Arts, fundraising and wider regeneration. We want Midland Met to sit at the heart of the community, it is our intention to open the doors to the local community, to create a feeling of well-being. Our hashtag for Midland Met has always been #MorethanAHospital.



5 Appendices

Appendix 1 - Midland Metropolitan Hospital presentation

6 Background Papers

None



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Midland Metropolitan University Hospital Joint Oversight and Scrutiny September 2023



Agenda

MIDLAND
METROPOLITAN
UNIVERSITY HOSPITAL

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Item

1. Hello, my name is
2. Getting to know Midland Met
3. Arts, fundraising and community engagement
4. The learning campus, employment opportunities and regeneration
5. Q&A
6. Close



Hello my name is...

- Rachel Barlow – Managing Director
- Jayne Ilic – Communications and Engagement Director

Getting to know Midland Met



Midland Metropolitan University Hospital Programme Company



Purpose

To safely open the Midland Metropolitan University Hospital.

Vision

To transform clinical services, acting as a catalyst for enhanced care and treatment, improving life chances and health outcomes across our communities.

Our values

Ambition - Respect - Compassion

Objectives

Patients



Enable outstanding health outcomes for patients with equality of service provision no matter where you live.

Provide a safe and welcoming environment for care.

Provide integrated care services that are seamless for patients.

People



Develop career pathways for local people.

Provide an inspiring and inclusive place to work.

Provide comfortable and productive spaces that make people feel valued.

Population



Be #morethanahospital engaging with local people to provide accessible and inspiring community spaces.

Seize every opportunity for MMUH to regenerate the neighbourhoods.

Create a catalyst to improve life chances for today's and future generations.

Getting to know Midland Met

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Midland Metropolitan University Hospital will be the acute centre for care for Sandwell and West Birmingham NHS Trust and includes:

- A purpose-built emergency department with co-located imaging and diagnostic services.
- A dedicated children's emergency department and assessment unit.
- Operating theatres for both emergency and major planned surgery.
- A midwife led birth unit next to a delivery suite, two maternity wards an antenatal clinic and a neonatal unit.
- Same day emergency care for adults.
- The regional sickle cell and thalassaemia centre.

Patients can expect to receive all of this as a standard part of our care model:

- The same high standards any day of the week with senior doctors leading expert clinical teams.
- Diagnostic tests including X-ray, MRI and CT scans, plus other tests for urgent care.
- Our Winter Garden and outdoor spaces are designed to help patients stay active.



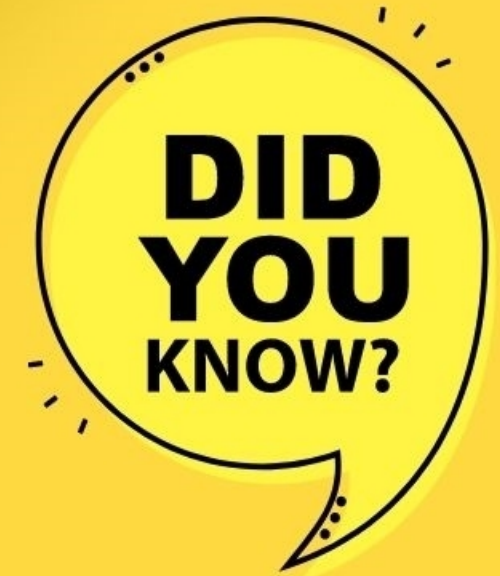
The benefits of our new hospital

- The hospital will house state-of-the-art equipment to support faster diagnosis and improve patient outcomes.
- It will be home to 11 emergency, trauma and elective inpatient operating theatres, maternity theatres and 15 birthing rooms for maternity services.
- The wards and rooms centre on patient wellbeing. All bedrooms have an external view onto one of the courtyards or surrounding areas of the hospital.
- The design includes 50 per cent single rooms with en-suite shower rooms in the main ward areas which will reduce the risk of spreading infections.
- The hospital provides a dementia friendly environment. Colours and clear bed numbers will help patients identify where they are. Layouts of wards will be the same, with each group of four beds within a ward having a different colour theme.



There will be separate routes for inpatients and visitors.

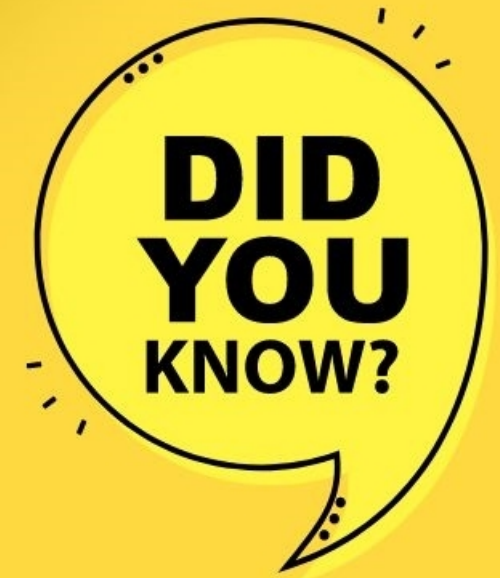
Inpatients will be transferred around the new hospital via separate corridors and lifts to those used by visitors. It will preserve patient privacy and dignity whilst moving around the hospital.



The Winter Garden is more than just a place to meet.

It will not only be an inviting place for staff, patients and visitors to meet and relax, but it will also be the main welcome point housing a contemporary art gallery.

Visitors will be able to find their way around with the help of clear signs, volunteers and wayfinding from this location.



Our latest progress video highlights some of our main achievements...

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Our future service model

Whilst Midland Met will care for patients that need emergency care or a stay in hospital, most outpatient care, day-case surgery and routine diagnostics will remain at the Sandwell and City Hospital sites alongside Rowley Regis Hospital and Leasowes. This includes:

- A 24/7 urgent treatment centre in Sandwell.
- Birmingham Treatment Centre and Birmingham and Midland Eye Centre (BMEC) at City Hospital.
- Provision for step down / rehab facilities.

Significant changes are taking place in our community and primary care services so that even more care can be provided in people's own homes.



OUR FUTURE SERVICE MODEL BY SITE

(Plans as of January 2023)

DUDLEY ROAD SITE (City Hospital)

BIRMINGHAM TREATMENT CENTRE

OUTPATIENT SERVICES

Including:

- General clinics for multi-speciality use.

Bespoke OP services

- ENT and SLT
- Breast services
- Gynaecology & Colposcopy
- Hearing Services
- Orthopaedic & Fracture Clinic
- Oral Surgery (TBC)

DIAGNOSTIC

- Endoscopy Unit
- Imaging (PE, US, MRI, CT)
- Phlebotomy
- Cardiac Diagnostics Respiratory Physiology (main dept)

DAY TREATMENT

Day Surgery Unit (6 theatres) & minor ops

OTHER

- Pharmacy
- Research

SHELDON

OUTPATIENT SERVICES

Including:

- Dermatology
- Cardiac Rehabilitation
- Pain Management Clinics Therapy Services (Rehab, OT, Neurology, SLT, MSK)
- Dietetics

DGM Building

- Clinical Admin
- National Poisons Information Service (NPS)

BIRMINGHAM MIDLAND EYE CENTRE (BMEC)

OUTPATIENT & DIAGNOSTIC SERVICES

- Ophthalmology clinics (adults & children)
- Glaucoma clinics
- Visual Function dept Orthoptics
- Optometry
- Other specialist eye diagnostics
- Behcets Service
- Medical Illustration

OPHTHALMOLOGY A&E

DAY TREATMENT

Ophthalmology Day Surgery (adults & children)

OTHER

- Clinical Admin
- Training facilities

MIDLAND METROPOLITAN UNIVERSITY HOSPITAL

URGENT TREATMENT CENTRE

ACUTE INPATIENT BEDS: 732

- 13 Adult wards (32 beds each) including coronary care (14) beds, hyper acute stroke (6) beds & level 1 beds (16 distributed within wards)
- 2 Maternity wards (56 beds)
- 30 Critical Care beds
- 36 Neonatal cots
- 50 Paediatric beds (& 6 day case spaces)
- 108 AMU beds & 24 Same Day Emergency Care trolleys

EMERGENCY / ELECTIVE SURGERY / DAY CASE

- Emergency Department
- 2 Trauma theatres
- 2 Emergency theatres
- 7 Elective theatres
- 2 Maternity theatres
- 15 Delivery Suites
- 6 Birthing centre
- Medical Infusion/Procedure Suite & SCA

DIAGNOSTIC

- Endoscopy Unit
- Cardiac Interventional Suite (2 cardiac labs) Imaging (Plain x-ray, US, Ante Natal US, MRI (1), CT (2), Physics & Nuclear Medicine, IR) Medical Illustration (inpatient support) Essential Service Laboratory Medical intervention unit
- Cardiac Diagnostics (main dept)
- Respiratory Physiology (inpatient support)
- Neurophysiology (inpatient support)

OUTPATIENT SERVICES (Bespoke)

- Antenatal Care and phlebotomy
- Paediatrics (including audiology test room, orthoptic consulting rooms)
- Urodynamics

OTHER

- Research
- Pharmacy
- Clinical and Corporate Administration
- Education Centre
- Multi-faith Centre
- Mortuary
- Integrated discharge hub

Community Intermediate Care Beds

SANDWELL TREATMENT CENTRE

OUTPATIENT SERVICES

General clinics for multi speciality use Bespoke OP Services including:

- ENT
- Gynaecology + Colposcopy
- Paediatrics
- Orthotics (main dept)
- Orthopaedics & Fracture Clinic
- Midwifery led Antenatal Care
- Dietetics
- Dental
- Therapy Services - (MSK, Hand Therapy, SLT, OT, Foot health)
- Cardiac Rehabilitation Clinical Research Facility

DIAGNOSTIC

- Endoscopy Unit
- Imaging (Plain x-ray, US, Ante natal US, MRI, CT)
- Medical Illustration
- Phlebotomy
- Cardiac Diagnostics
- Neurophysiology Service (main dept)
- Respiratory Physiology
- Pathology (specialist labs)
- Integrated discharge hub

SANDWELL URGENT TREATMENT CENTRE

PRIMARY CARE GP practice

OTHER

- Trust Headquarters
- Occupational Health Department Pharmacy
- Mortuary (main dept inc. PM)
- Clinical and Corporate Admin Academic & Research (main dept)
- Education Centre

DAY TREATMENT

- Chemotherapy Services
- Medical Infusion Suite
- Day Surgery Unit (4 theatres)

Community Intermediate Care Beds

ROWLEY REGIS HOSPITAL

OUTPATIENT SERVICES

General clinics for multi-speciality use including:

- Community Clinics
- Ophthalmology
- Dental
- Urology
- Gynaecology (community)
- ISHUS
- Dietetics
- Children's services
- Therapy Services - (MSK, Rehab, SLT, OT, Foot health)

DIAGNOSTIC

- Imaging (Plain x-ray, US)
- Phlebotomy
- ECG

PRIMARY CARE COMMUNITY

Admission Avoidance Service

URGENT COMMUNITY RESPONSE

ADMISSION AVOIDANCE

VIRTUAL WARDS

OTHER

- Clinical and Corporate Admin
- Main Catering Unit

DAY TREATMENT

- Heart of Sandwell Day Hospice

Community Intermediate Care Beds

LEASOWES

COMMUNITY SERVICES

ICARES, District Nursing, ESD Stroke Team, School Nursing, Health Visiting, Specialist Nursing Teams (Continence, Heart Failure, Diabetes, Falls), ISHUS, Community Rehabilitation Teams, Case Management Team, Foot Health, Admissions Avoidance Team, HAPO, MSK Clinics, Hand Therapy Service, Specialist Diabetes Service, Community Paediatric Nursing, Specialist Nursing & Therapy Teams, Respiratory Team, HIV Clinic, GP practices & other primary care services.

Clinical services transformation

In preparation for the opening of Midland Met, crucial work is being undertaken across 12 areas to transform our services, focusing on our acute care model. It comprises of these services.

Emergency Department 2 site to 1	Senior decision making supported by rapid diagnostics to support right care right place.	Acute therapies 2 sites to 3	Extended working hours will enable patient therapy provision to support earlier discharge.
Same Day Emergency Care 2 site to 1	Expansion of same day emergency care (SDEC) pathways to optimise ambulatory care, reducing admissions and assessment unit demands.	Imaging 2 sites to 3	Improved turnaround times will support rapid decision making at the front door. Demand management and artificial intelligence will improve efficiency.
Assessment Units 2 site to 1	Rapid diagnostics and decision making over seven days to reduce length of stay (LOS) in assessment units.	Endoscopy 2 sites to 3	Separation of inpatient and outpatient endoscopy to the treatment centres and Midland Metropolitan University Hospital to support patient flow and productivity.
Older peoples Care & Frailty 2 site to 1	End to end acute and community care will prevent patients being admitted unnecessarily or reduce LOS if admitted.	Place Partnership	Community beds and home-based services right sized to enable increased supported discharge from acute settings.
Stroke Decoupling	Rehabilitation to be provided in a community setting to improve patient care, end of life experience and release acute beds.	Theatres 2 sites to 3	Increased use of day case pathways with day case activity split from elective and emergency activity will improve.
Cardiology	Increased use of ambulatory pathways and day case procedures will prevent patients being in hospital unnecessarily.	Enhanced Care	Provision of a post anaesthetic care unit (PACU) and ward based enhanced care to support care pathways.

Patients



**Patient Objective Benefit Total
£796m**

Enable outstanding health outcomes for patients with equality of service provision no matter where you live.

Provide a safe and welcoming environment for care.

Provide integrated care services that are seamless for patients.

Patients – top 3 benefits	£M
Reducing the acute bed base	448
Split of Elective and ED	244
Agency Savings	39
TOTAL PATIENT RELATED BENEFITS	796

People



**People Objective Benefit Total
£982m**

Develop career pathways for local people

Provide an inspiring and inclusive place to work

Provide comfortable and productive spaces that make people feel valued

People – Top 3 benefits	£M
Consultant Journeys	356
Employment GVA	217
Staff Satisfaction Increase	172
TOTAL PEOPLE BENEFITS	982

Population



**Population Objective Benefit Total
£241m**

Be #morethanahospital engaging with local people to provide accessible and inspiring community spaces.

Seize every opportunity for MMUH to regenerate the neighbourhoods.

Create a catalyst to improve life chances for today's and future generations.

Population – Top 3 benefits	£M
MMUH Construction GVA	142
Homes England GVA	41
Homes England Council Tax	23
TOTAL POPULATION BENEFITS	241

- The Midland Met programme of service transformation, workforce redesign, and building construction, is the biggest such development ongoing in the English NHS at this time.
- To ensure that we can fit effectively into the new hospital we have a plan to reduce the number of unfunded inpatient beds.
- We have successfully progressed the 62 bed-closure plan with a total of 50 beds now closed and a further 12 due for closure by October 2023. To ensure that we can safely close unfunded beds and mitigate against any risks, our teams are achieving this through multiple schemes aimed at admission and attendance avoidance.
- These include urgent community response, frailty same day emergency care (FSDEC), medical and surgical SDEC, virtual wards and care homes admission avoidance. All these schemes are starting to meet or even exceed the expectations that we have of them.
- None of these essential transformations would be possible without our partners at Place level – Sandwell Metropolitan Borough Council, adult social care, the Integrated Care Board, local GPs and colleagues in the voluntary and third sector.



Arts, fundraising and community engagement



Our arts programme

- The hospital will have the most amazing gallery space, one of the longest in the region.
- We are investing in high quality arts, education, and heritage programmes to help enhance the experience of our patients.
- We'll deliver an exciting arts and culture programme with lots of great cultural partners for our opening festival.
- We have several programmes in development that imagines the hospital as a site for socially engaged art, a place for children beyond the classroom and a civic and community hub and garden.



Supporting We Are Metropolitan

- Your Trust Charity is the registered charity of Sandwell and West Birmingham NHS Trust and is passionate about making a difference to people's lives.
- Your Trust Charity is working hard to deliver the 'We Are Metropolitan' fundraising campaign and raise £2m to:
 1. Develop community spaces.
 2. Create a welcoming and healing environment.
 3. Enhance research and development.
- Your Trust Charity is helping our organisation play a major role in new community regeneration initiatives within our local communities.



Launch of the Midland Met Mobile

- Our Midland Met Mobile is a repurposed patient transport vehicle.
- It will be out and about in our communities, shopping centres and libraries spreading the word about Midland Met.
- It will also be visiting our sites so we can speak to colleagues about the benefits and opportunities associated with Midland Met.



Our goal is to ensure that every resident of Sandwell and West Birmingham knows that Midland Met is on the horizon and here to transform their healthcare for years to come.

We'll be taking our messages out into the community, driving into each and every one of our neighbourhoods. We know that we have strong communities around us, but we must engage and enable them to feel a belonging to our new hospital.

We'll initially be out on the road from mid September until the end of October visiting libraries across our communities from Wednesbury to West Bromwich and lots of places in between.

Midland Met Mobile hits the road...



We have strong relationships across health, social care, the voluntary, community and faith-based sectors. These organisations are based in our communities and support local people.



We are completing public engagement across the 12 core transformation areas. So far, we've:

- Completed our day case surgery conversation.
- Our stroke services conversation is in progress.

Near Neighbours' events took place in 2023 and more are planned for 2024. We've spoken to over 900 residents, listening to their concerns and ideas.

During 22/23 we talked to residents of Sandwell at Town Teams led by Healthwatch and there is more to come.

Public and community engagement



The learning campus, employment opportunities and regeneration





Midland Met learning campus

- Partnership with Sandwell College, Aston and Wolverhampton universities, incorporates The Learning Works.
- Focus on skill shortages across additional clinical services, allied health professionals and nursing and midwifery.
- Provides pathways into long term employment for residents and will accelerate the delivery of transformational regeneration in the area.



- 1280 learners will be assisted every year across a range of short and longer term courses.
- Includes community space; the design will encourage the community to engage, explore and seek out opportunities.
- £12.9m secured from the Towns Fund government programme.
- Gateway location on our own land at the front of Midland Met – students will be able to connect training to real life experience.



Opportunities at or close to Midland Met

- Midland Met learning campus.
- Community garden.
- New housing – mixed modes, apartments and houses.
- Employment opportunities, commercial and retail.
- Education from 16+ through to university level.
- Improved connectivity between canal tow path and hospital site.
- Active travel opportunities – bike lanes connecting Sandwell and Birmingham.

- The Trust board have agreed to 484 more staff at Midland Met and there are several active recruitment campaigns underway to support us in being fully staffed.
- We hosted a dedicated consultant open day in July at Midland Met to support our objective to recruit to these consultant roles.
- Further events are being worked on with a nursing recruitment day being planned for November 2023.
- We are focusing heavily on employment opportunities for local people. We've set a target of over 35 per cent of jobs being available to residents.

Employment opportunities



CONSULTANT OPEN DAY
Friday, 7 July
09:30 - 15:30

CONSULTANT OPEN DAY
Friday, 7 July 2023 | 09:30-15:30
Midland Metropolitan University Hospital | Crawford Street, B64 2ET

The new Midland Metropolitan University Hospital opens in Birmingham in 2024. It brings together acute and emergency care onto a single site, in a new, state-of-the-art clinical facility.

Southall and West Birmingham NHS Trust, that is responsible for the new hospital, is seeking excellent clinical candidates for consultant posts that will work in the new facility and across the wider Trust.

ABOUT THE OPEN DAY
At our open day you can:
• Find out about consultant roles and opportunities at the Trust.
• Take a tour of the new hospital and the Trust's other sites.
• Meet senior clinicians and Trust executives.
• Find out about innovative services, research and development and teaching opportunities.
• Join Trust staff for an evening in Birmingham.

Scan the QR code below to register or contact michelle.jarrold@nhs.uk to find out about roles available.

ABOUT MIDLAND METROPOLITAN UNIVERSITY HOSPITAL
Our new hospital will offer outstanding clinical facilities, operating theatres, rapid diagnostics, same day emergency care services, assessment units, maternity services, acute medical and surgical wards. Half of the beds are in single on-suite rooms. The unique design of the building protects patient privacy and dignity with dedicated routes for visitors, patients and staff. The public areas include an indoor visitor garden with an art gallery, green spaces, retail outlets and community facilities. The Trust will maintain its existing three hospital sites that will predominantly run outpatient clinics, routine diagnostics and day case surgery.

ROLES AVAILABLE
We are looking for a range of exciting and challenging roles in particular, we are looking for consultants in:
• Acute medicine
• Elderly care
• Paediatrics
• Critical care
• Stroke and neurology
• Respiratory
• Emergency medicine
• Radiology
• Rheumatology

Booking is essential to reserve your place.



- Our recruitment team is working closely with widening participation colleagues to develop sector-based work academy programmes (SWAPs) both with external partners (Sandwell College) and in house teams.
- Our SWAP programme focuses on upskilling residents to help them gain employment. The aim is to support people to confidently apply for entry level roles like healthcare support workers and ward service officers.
- Programmes like this are essential to help us achieve our ambitious goal of having our workforce made up by 35 per cent of residents.
- Midland Met is #morethanahospital and will provide the catalyst for growth, regeneration and employment opportunities in the immediate surrounding areas.



How Midland Met will support regeneration

Economic

- Increasing skills, employment and wages, attracting new businesses and investment, redevelopment of brownfield land.
- Encouraging new housing and infrastructure investment.

Social and cultural

- Interventions which promote health and wellbeing, strong and engaged communities, arts and culture.

Environmental

- Sustainability and net zero carbon.
- Active travel initiatives, accessible green space and measures to reduce air pollution.

Effective delivery requires:

- Leadership and vision.
- Collaborative working and partnerships.
- Aligning resources.

Keeping stakeholders informed



System and stakeholder visits

We have hosted several visits over the past year with key stakeholders including John Spellar, MP for Warley who was thoroughly impressed with the progress made.

As the esteemed Member of Parliament toured through the corridors of the Midland Metropolitan University Hospital, he was struck by the vibrant energy and unwavering commitment displayed by all involved in the build.

When meeting with stakeholders, we explain the clinical and operational changes that we need to make to provide community and acute services differently once Midland Met opens in 2024. These service transformations will ultimately help us realise the numerous benefits that Midland Met will drive in and for the health and wealth of our communities.



Transport and travel

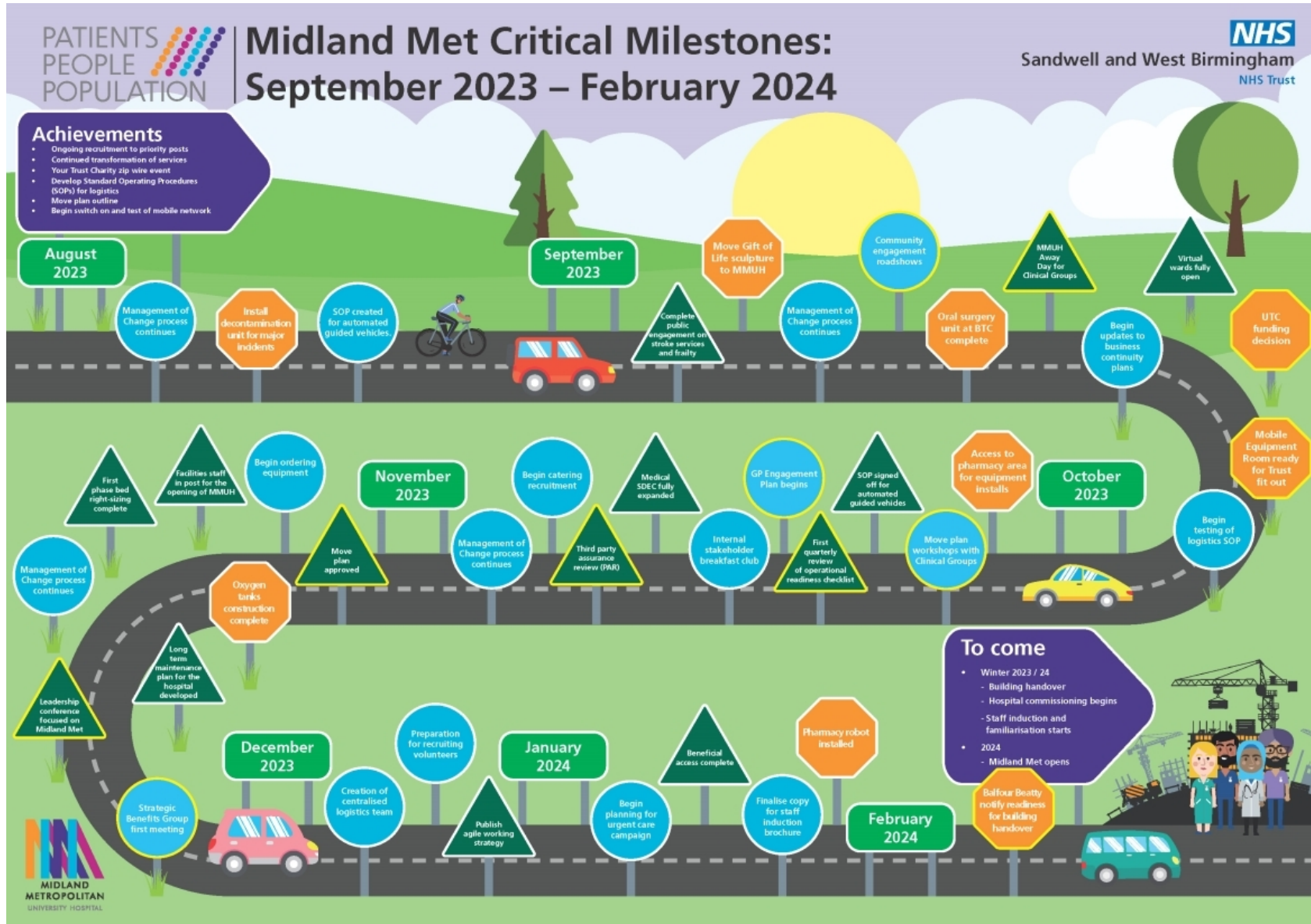
Whilst Midland Met has been designed to accommodate plenty of covered parking within the building for staff and patients, there are several programmes to support sustainable travel.

- Bike lanes from Sandwell and Birmingham will converge on Midland Met. The canals are being redeveloped to offer a scenic route to site and buses will be regularly scheduled, arriving and departing from the front of Midland Met.
- We are working with Transport for West Midlands on the public transport routes with potential for onsite bus stops and a new bus route.
- There are plans to help support routes for local residents of the Sandwell Borough to get to Midland Met via public transport.



Stakeholder visits







Midland Met Monthly



MidlandMetUH SWBHnhs midlandmetuh

Latest updates on the Midland Met development and beyond

Issue 07 - July 2023

Lights, Camera, Action – Midland Met is beamed live to three million viewers on NHS birthday



ITV Central News presenters Sameena Ali Khan and Steve Clamp ahead of their live broadcast from the Winter Gardens at Midland Met on 5 July.

And we're live from Midland Met!

On 5 July, the 75th birthday of the NHS, the ITV Central News team decamped from Gas Street

The communications team worked in harmony with colleagues across the new hospital team to demonstrate our Trust values in ensuring every detail went according

first contact right through to the day of broadcast.

Kitted out in full PPE, presenters Sameena Ali Khan and Steve Clamp delivered the broadcast from the Winter



<https://www.youtube.com/watch?v=dxaRwTnIGnk&list=PLoYmVhk1vF7WISITSw-uXuW9JO2YMiF2H>

Over to you....



Thank you



To find out more visit [swbh.nhs.uk](https://www.swbh.nhs.uk) or email
swbh.comms@nhs.net

#MoreThanAHospital

Joint Health Overview and Scrutiny Committee (Sandwell and Birmingham)

27 September 2023

Subject:	Update on Changes to Day Surgery at Sandwell and West Birmingham Hospitals NHS Trust
Director:	Rachel Barlow, Managing Director, MMUH Programme Company
Contact Officer:	Jayne Salter-Scott, Head of Public and Community Engagement

1 Recommendation

That the Committee considers and comments on the update on changes to Day Surgery at Sandwell and West Birmingham Hospitals NHS Trust.

2 Reasons for Recommendations

This report is at request of members of the Joint Overview and Scrutiny Committee at its meeting in November 2022.

3 How does this deliver objectives of the Corporate Plan?

Midland Metropolitan University Hospital supports the following board priorities:

Priority 1	We will help keep people healthier for longer
Priority 2	We will help keep people safe and support communities
Priority 3	We will work together to join up services
Priority 4	We will work closely with local people, partners and providers of services



4 Context and Key Issues

- 4.1 To provide an update to committee members on the ongoing work to implement the changes from the formal conversation to Changes to Day Surgery held between March 2022 and April 2022.
- 4.2 We are continually working to improve the quality of care we provide for our patients, and people who use our services. Sandwell and West Birmingham NHS Trust will operate from two treatment centres for planned day surgery; these sites are the Birmingham Treatment Centre and the Sandwell Treatment (currently Sandwell General Hospital). Acute care and elective surgery that require an overnight stay will be delivered at Midland Metropolitan University Hospital (MMUH).
- 4.3 In preparation for the opening of MMUH it is necessary to make changes prior to opening. As part of our clinical service model the Trust has developed clinical pathways including a new theatre model which allocates surgical specialities to a single treatment centre. The new theatre model resulted in a potential change in location of day surgery for General Surgery and Trauma and Orthopaedics.
- 4.4 The table below identifies current and future provision.

Current Provision	Future Provision
General Surgery: Day case surgery is currently delivered from the Birmingham Treatment Centre and Sandwell General Hospital	General Surgery: Birmingham Treatment Centre
Trauma, Orthopaedics and Plastics: Day case activity is currently delivered from the Birmingham Treatment Centre and Sandwell General Hospital	Trauma, Orthopaedics and Plastics: Day case activity: Sandwell General Hospital *Changes will not affect where patients go for their pre-assessment and out-patient care. This remains across both sites



4.5 Several common themes emerged from the conversations:

- **Improve communication and information** about the new hospital and what is moving and what is staying where when the new hospital opens.
- **Travel and access** to different sites will potentially have a financial and time impact on patients and their families and friends.
- People could see the benefits for the **future workforce**.
- Some people thought it would be clearer for patients and would provide a consistency of care, reduce wait leading to **improved patient satisfaction**.

4.6 Progress to-date

The future option for day surgery is based on the new hospital being open. The move to a single site consolidated model for general surgery and trauma and orthopaedics will take place as part of the programme approach to opening Midland Metropolitan University Hospital. We are not in a position at the moment to make the changes as we await the completion of MMUH.

4.7 Improve communication and information

We have developed a 'plan on a page' that we talk through and share with individuals and communities at every opportunity. It offers an explanation of which services are moving to the new hospital and which are remaining at the treatment centres. It is regularly updated, and we are looking into a large print version and version in our most spoken community languages.

4.8 Travel and access

We have activated a Transport and Connectivity Workstream to ensure patients can get to and from the new location between current sites and from wider area.



4.9 Future Workforce

The SWAP Programme which involves us working with Sandwell College to develop courses to upskill local people and help them to gain employment. The MMUH programme has set ambitious targets for ensuring that over 35 per cent of local residents work in or supporting the new hospital.

4.10 The recruitment team, working closely with widening participation team has been successful in offering 14 ward service officer roles through this scheme. We are also working on developing this further to bring in health care support workers. This is part of our commitment to ensuring that we improve not just health, but the life chances for local people.

5 Appendices

None

6 Background Papers

None



Joint Health Overview and Scrutiny Committee (Sandwell and Birmingham)

27 September 2023

Subject:	Patient Experience at Sandwell and West Birmingham Hospitals NHS Trust
Director:	Chief Nursing Officer Melanie Roberts
Contact Officer:	Patient Insight and Involvement Jamie Emery jamie.emery2@nhs.net




1 Recommendation

That the Joint Health Overview and Scrutiny Committee (JHOSC) notes and comments on the Sandwell and West Birmingham Hospitals NHS Trust's (SWB) approach to patient experience.

2 Reasons for Recommendations

The detail of this report was produced at the request of the JHOSC in August 2023.

3 How does this deliver objectives of the Corporate Plan?

	Best start in life for children and young people
	People live well and age well
	Strong resilient communities



4 Context and Key Issues

- 4.1 The purpose of this report is to update the JHOSC about the Sandwell and West Birmingham Hospitals NHS Trust (SWB) approach to patient experience. The report describes:
- recent history and context;
 - action taken;
 - the forward plan in line with the 'Fundamentals of Care' (FoC) (International Learning Collaborative, 2013) approach.
- 4.2 FoC is SWB's flagship clinical improvement framework driving our patient focussed strategic objectives. The approach strives to improve basic standards of care, ensuring these are owned by all and applied consistently.
- 4.3 Within the FoC framework, 'Communication' and 'Harm Free Care' are identified as priorities in line with the patient strategy. Work and projects described in this report strive to improve patient experience and personalisation in compliance with these standards, within the FoC framework.
- 4.4 SWB appointed a patient experience lead in January 2022. The purpose of this appointment was to implement a governance framework and systems of learning from patient experience; also to instigate and support various workstreams to improve experiences of care.
- 4.5 At this time, local and national patient experience benchmarking was undertaken against national CQC and NHS England experience measurement tools. Self-assessment according to the NHSI Patient Experience Improvement Framework and National Institute for Clinical Excellence guidance was completed.
- 4.6 A working action plan to develop internal systems and processes for gathering and learning from patient insights was devised. This plan was informed by the analysis and the SWB FoC strategy.
- 4.7 Information below describes progress since and further plans.



4.8 Patient Experience Developments, 2022 – 2023

4.9 Patient Experience Group

A multi-disciplinary Patient Experience Group (PEG) was established, including external partners. PEG reviews progress against FoC from patient, relative and carers perspectives. PEG reports through to Trust Board via Quality and Safety Committee. PEG's cycle of reporting is reviewed regularly to ensure reporting, discussions and action required are timely and relevant.

A communication action plan is overseen by PEG which receives routine updates on key updates and established workstream achievements.

Maternity and neonatal services have since implemented a local PEG based on corporate terms of reference and cycle of reporting.

4.10 CQC national surveys

An analysis framework of SWB CQC national patient survey results is in place; this includes year on year comparison highlighting significant statistical variations and national plus regional benchmarking.

4.11 Patient Reported Experience Measures (PREMs)

This programme was established and continues development across SWB. This allows local areas to measure specific experiential aspects of care (e.g. involvement in care, communication, kindness and respect etc.) and allows areas to rely on the NHS Friends and Family Test as a single indicator of experience.

Over 60 areas Trust-wide (from zero in April 2022) now have capability to gather additional experiential data electronically, aligned with FoC standards.

To support increased participation, a PREMs trial using SMS methodology has recently taken place in Imaging across a 2,000 patient sample. Over 200 patients participated over 4 days. This was a highly significant increase compared with existing participation, providing the Imaging department with rich insight into their patients' experiences of care, both qualitative and quantitative.



4.12 Patient experiences of specific local projects

Supplementary to PREMs described above, detailed analysis of patient reported experiences were conducted to support local work or specific workstreams. For example, experiences of Intelligence Conveyancing¹, food, nutrition and hydration and mental health needs, drawing on a range of data sources.

4.13 Interpreting

A review of SWB services and provision was completed in partnership with the Sandwell Consortium. An action plan was formulated on the basis of considerable the public feedback obtained (qualitative) and the subsequent review recommendations. Delivery involves trialling virtual video interpreting services (underway in Maternity and Audiology), booking system modernisation, introduction of quality standards and development of information about interpreting services for patients and their families.

4.14 Birmingham Midland Eye Centre (BMEC)

An independent review of patient experience was completed. A further academic study of BMEC patient experience (January – July 2022) was also completed. Recommendations from both reports informed the BMEC experience action plan.

4.15 Bereavement

A steering group is established to develop and improve information, and its accessibility, about death and processes involved. Methodology to capture relatives' and carers' experiences of loved-ones' deaths in SWB's care has been devised. A community feedback session took place (September 2023) to understand community needs, widen the discussion and inform work and training plans.

4.16 Patient experience training

Internal training focussing on experience and communication has been developed and deployed, using lived-experiences of care. Additionally, a one-day session drawing on internal expertise and external partners focussing on FoC took place (June 2023). This session is being enhanced and three further days are scheduled for early 2024.

¹ **Intelligence Conveyancing** – the practice of patients being transported via ambulance to a hospital / Emergency Department outside of their immediate local area due to prevailing regional pressure in the system. For example, a patient living in Solihull may taken to Sandwell Hospital Emergency Department due to existing regional pressure.



Lived experiences of mental health are included in training plans. The #HealthNow Birmingham has provided a virtual training package for use in SWB Primary Care areas, with agreement to develop a similar resource for acute and emergency care.

4.17 Patient stories

Patient, carer and relatives' lived-experiences of care are routinely captured across the organisation with supporting guidance developed for staff, for use in meetings across the organisation and in training sessions.

4.18 Population participation

A framework for patient and population participation in SWB meetings, training and assurance has been devised and continues development (**appendix i**).

4.19 Personalisation of Care

A multi-disciplinary trial of documentation to improve care personalisation is in place across 'Care of the Elderly' inpatient wards. Personalisation training has supported implementation in these areas. Initial pre and post baseline measurement strongly indicates positive impact. A personalisation study day is scheduled (October 2023) supported by external expertise and patient family / carers.

4.20 Recruitment

A Patient Experience Manager was recruited and is making significant impact in development of work described.

4.21 Patient Experience – Onward Developments

4.22 Fundamentals of Care – Experience and Personalisation

Key priorities are identified for year one focussed upon triangulating all sources of patient experience data, developing training and SWB peoples' access to this.

Further, personalisation of care is a key area of further focus across. Methods to support personalisation through pre-operative assessment are being explored.

Digital communication with patients and the public and creating the optimum patient friendly environment, in readiness for the opening of



Midland Metropolitan University Hospital and across the retained estate, is being developed through the FoC plan.

4.23 Training

Further communication and customer services training is being sourced. Discussions have taken place about developing additional internal training in advanced communication skills.

A charter is under development communicating what patients, carers and relatives should expect from communication with staff and staff behaviour.

4.24 Data triangulation

A dashboard incorporating patient, carer and relative feedback across a range of sources will be developed to support understanding of patient experience feedback at various organisational levels, from ward to Board. This will allow improved understanding of patient reported progress against SWB FoC standards.

4.25 Carer support - development

A carers network being created to work in conjunction with a community carers group / forum, incorporating lived-experiences of mental health needs. Further on-site support (e.g. access to parking, on-site discounts, carer packs, overnight stay etc.) is being scoped. Information will be produced for carers about what support is available to them.

4.26 Vulnerabilities

Supplementary to the carer support development, a specific workstream to develop and improve how SWB people communicate with a range of vulnerable patients is being implemented. Key priorities are to scope specific supporting documentation, communication tools, aids (e.g. 'communication boxes') and any suitable training. This work will inform plans on developing a patient friendly environment.

4.27 Patient Experience Ambassadors

All SWB people are being invited to join a community of practice across the Trust; profession, designation or seniority is not relevant to who can join this. Key requirements for Ambassadors are their passion and commitment to promoting positive patient experience and initiating changes in their areas. This community will share best-practice and influence improvement in experience and communication locally. They will be empowered to escalate through to PEG should they need.



5 Appendix

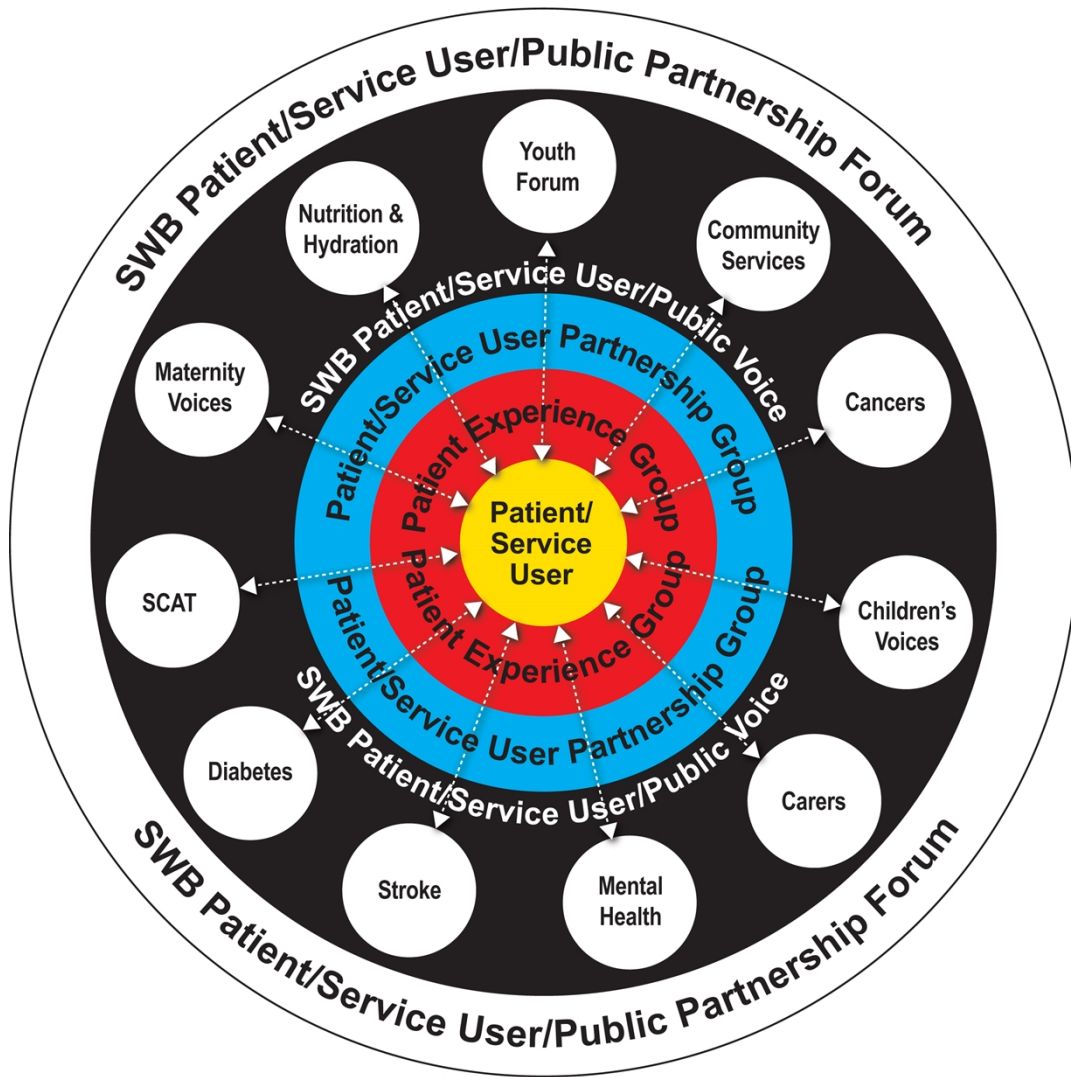
Appendix 1 - SWB Patent and Public Participation Framework

6 Background Papers

International Learning Collaborative. (2013). The Fundamentals of Care Framework. Retrieved from ILC: <https://ilccare.org/resource/the-fundamentals-of-care-framework/>



SWB Patient and Public Participation Framework



Joint Health Overview and Scrutiny Committee (Sandwell and Birmingham)

27 September 2023

Subject:	Work Programme 2023/24
Director:	Director Law and Governance and Monitoring Officer Surjit Tour
Contact Officer:	Stephnie Hancock Deputy Democratic Services Manager



1 Recommendation

That the Committee considers and comments upon the draft attached work programme for 2023/24 and determines whether it wishes to include any other matters.

2 Reasons for Recommendations

- 2.1 A strong and effective work programme underpins the work and approach of Scrutiny.
- 2.2 It is good practice for work programmes to remain fluid, to allow for scrutiny of new and emerging issues in a timely manner.

3 How does this deliver objectives of the Corporate Plan?

	Best start in life for children and young people
	People live well and age well





4 Context and Key Issues

- 4.1 Proactive and constructive scrutiny of health and care matters can build constructive relationships that deliver better outcomes for local people and communities; the people who represent them, and the commissioners and providers of health and care services.
- 4.2 The Committee is asked to determine what matters it wishes to scrutinise in 2023/24.
- 4.3 Going forwards, the Committee will also be presented with a report setting out progress on actions and/or recommendations it has previously agreed/approved to note/monitor progress and ensure that matters can be escalated in a timely manner if required.

5 Appendix

Appendix 1 - Work Programme

6 Background Papers

None



Birmingham and Sandwell Joint Health Overview and Scrutiny Committee

DRAFT Work Programme 2023/24

Month	Item/Topic	Aims and Objectives	Scrutiny Method	Cabinet Member/ Lead Officer	Other Witnesses	Additional Information and Outcome*
TBC	Midland Metropolitan Hospital: Emergency and Urgent Patient Care	TBC				
TBC	Midland Metropolitan Hospital: Models of care across the Trust	TBC				
TBC	Midland Metropolitan Hospital: Primary Care Services	TBC				
TBC	Scrutiny and Quality Assurance	To agree a 2-3 year schedule of reports from NHS Trust serving Birmingham and Sandwell including: CQC report Quality Account Analysis of complaints and how this has				

		driven service improvement Key risks / issues for the Trust.				
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*Outcome: This will be populated once the item/topic has been completed. It will identify the added value and impact.