AGENDA ITEM NO:

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST BOARD OF DIRECTORS

THURSDAY 25 APRIL 2013

Title:	MEMBERSHIP REPORT	
Responsible Director:	Fiona Alexander, Director of Communications	
Contact:	Fiona Alexander, Director of Communications (x14325)	

Purpose:	To update the Board of Directors on progress in the recruitment/engagement of quality members to UHB during 2012/13 and to outline the membership recruitment and engagement strategy update for 2013/14.	
Confidentiality Level & Reason:	N/A	
Medium Term Plan Ref:	Affects all strategic aims	
Key Issues Summary:	 Number of quality members recruited to UHB during 2012/13 Cost of recruiting those members Engagement initiatives 2012/13 Engagement and recruitment strategy for 2013/2014 Cost of engagement and recruitment strategy in 2013/2014 	
Recommendations:	The Board of Directors is requested: To NOTE progress made and APPROVE the recruitment and engagement strategy and costs for 2013/14.	

Signed:	Date: 10 April 2013
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UNIVERSITY HOSPITAL BIRMINGHAM NHS FOUNDATION TRUST BOARD OF DIRECTORS

THURSDAY 25 APRIL 2013

MEMBERSHIP REPORT PRESENTED BY DIRECTOR OF COMMUNICATIONS

1. Purpose

1.1 To update the Board of Directors on progress made in the recruitment, retention and engagement of quality members to UHB during 2012/13 and to outline the membership recruitment, retention and engagement strategy for 2013/14 along with the costs associated with delivering it.

2. **Objectives 2012/2013**

2.1 The Membership objectives for 2012/2013, agreed by the Board of Directors in April 2012, were:

2.1.1 Recruitment

To replace the annual churn and maintain existing membership numbers to no less than 23,000. The Trust would also ensure that the membership is representative of the constituencies it serves.

2.1.2 Retention/Engagement

To deliver the recruitment objectives the Trust agreed to use the methods outlined below, as analysis showed that those with an existing relationship with the Trust were more likely to play an active role within the hospital, as well as more likely to sign up as a member in the first place.

- Trust publications
- Internal leaflets
- Trust website
- Social media tools
- GP surgeries
- Existing members
- Community groups
- Governors
- Ambassadors
- Health talks
- Drop-in sessions

- **2.1.3** It was agreed emphasis would be put on the retention of existing members and further engagement. This would be achieved through:
 - The quarterly publication Trust in the Future
 - Further development of the Ambassador Programme, ensuring that Ambassadors are involved in appropriate activities and contributing to the recruitment of new members
 - Further developing membership content published via social media and Trust website
 - The inclusion of members on appropriate patient groups
 - Raising the profile and role of Foundation Members, Ambassadors and Governors within the Trust
 - Working with QEHB Charity to increase membership opportunities amongst fundraisers

2.2 Cost of delivering the 2012/13 objectives

2.2.1 The proposed cost of recruitment, communications, engagement and database management of members for 2012/13 was £59,290. See full breakdown in Appendix 2.

3. Performance against objectives in 2012/2013

3.1 Recruitment

The recruitment objectives have been achieved.

On 1 April 2013 UHB had a total membership of 23,941, an increase of 808 members (3.5%) on the previous year (23,133 members). During the last 12 months the Trust has also created a Rest of England constituents made up of members of the public who had registered an interest in the Trust but weren't eligible for membership as they were not a patient, a member of staff or lived in one of the public constituencies, which correspond to the city's parliamentary wards. There are 416 members in this new constituency.

The current membership is representative of the constituencies we serve.

3.2 Retention/engagement

The 2012/13 engagement objectives have been achieved.

Activities are aligned to the four membership types; thought, time, energy and support and are communicated through the Trust in the Future magazine to all members.

Social media tools such as Facebook and Twitter have played an important part in improving the accessibility of membership information

available in the last 12 months. Members may now get information directly to their smartphone, or any other device with internet access, as it is released.

Increased awareness around the role of staff governors has been made through a number of Trust publications. Engagement activities involve staff governors holding drop-in sessions for staff and fronting internal awareness campaigns in their role as staff governor, such as the Trust's Cycle Safe Campaign, which launched in September 2012.

The introduction of Membership Week was a new initiative for last year. This enabled the Trust to focus on the value of members and inspire others to join the programme. Information stands, recruitment activity and leaflet distribution was carried out by the Membership Office and Trust Ambassadors during November.

Members continue to play an important role in obtaining patient feedback on services. Information gathered via a survey directed at foundation members contributed significantly towards the creation of MyStay@QEHB – a website providing information on the quality of clinical services. Members also took part in a Trust-wide survey on public transport facilities serving the hospital site, which has resulted in improvements to local bus services and timetable information.

Evidence of the contribution members make towards improving the Trust's services can also be seen in the monthly 'You Said, We Did' articles which highlight areas of improvement made by listening to feedback. Examples of this include improving information on travel routes, providing better seating and improving visitor facilities on wards.

In January 2013 UHB Membership Week was held, which aimed to raise awareness of membership and encourage existing members and staff to refer a friend or relative. Information stands were held at the Main Entrance where potential members could sign up. Membership Week was promoted to patients and visitors through the hospital's website, social media and publications and to staff via internal communication channels. This activity resulted in 150 new members.

Online communication through e-bulletins, Facebook and Twitter have resulted in a rise in online applications since the campaign began. Further promotion through UHB's communication channels and via volunteers aims to increase the number of people signing up going forward.

3.3 Cost of delivering the 2012/2013 recruitment and engagement plan

The actual cost of delivering the plan was £57,778 around £1,500 under budget.

4. Patient and Public Involvement at UHB

- 4.1 The Membership programme is just one strand of public and patient involvement at UHB. See Appendix 1 for a summary of the PPI programme and its outputs in 2012/13.
- 4.2 Through the work of membership and PPI the Trust ensures that patients and the public are actively involved in improving the patient experience.
- 4.3 Evidencing the output of this involvement is becoming increasingly important in the context of the Health and Social Care Act, the publication of the Francis Report and changes to the role of Governors in foundation trusts.

5. **Objectives for 2013/14**

5.1 Recruitment

- 5.1.1 To replace the annual churn and maintain existing membership numbers to no less than 23,000. With a membership of 23,000, UHB would be in the top 10 of foundation trusts with the highest number of members, based on 2011/12 figures which are the most recent available.
- 5.1.2 To ensure the membership is representative.
- 5.1.3 There are no plans to launch a major recruitment campaign. Such a campaign would cost between £11,000 and £14,000 to yield around 3,000 new members.

5.2 Engagement/retention

- 5.2.1 In order to maintain membership and develop engagement further over the next 12 months, the Trust will continue to use the tried and trusted methods listed below:
 - Trust publications
 - Internal leaflets
 - Trust website
 - Social media tools
 - GP surgeries
 - Existing members
 - Community groups
 - Governors
 - Ambassadors
 - Health talks
 - Drop-in sessions

Membership Week

5.3 Cost of delivering the 2013/14 objectives

5.3.1 The proposed cost of recruitment, communications, engagement and database management of members for 2013/14 is £68,531. The increase in cost on 2012/13 is an additional solus mailout to all non-staff members inviting them to the AGM. See full breakdown in Appendix 2.

6. Recommendations

The Board of Directors is asked to **NOTE** progress made in 2012/13 and **APPROVE** the recruitment and engagement strategy and the cost of delivering it for 2013/14.

APPENDIX 1

SUMMARY OF PATIENT AND PUBLIC INVOLVEMENT 2012/13

The involvement summarised below is over and above participation in local and national surveys and outputs resulting from the bedside patient satisfaction surveys.

1. Patient and Carer Councils

The Trust has four Patient and Carer Councils: one for wards (inpatients), one for outpatients, a Mystery Patient Council and a Young Person's Council.

The purpose of the councils is for patients, Foundation Trust members and the public to work in partnership with staff to improve the services provided to patients. All council members are also Foundation Trust members. All of the councils have been active in seeking patients' views to influence the improvements in care.

The Councils hosted a seminar this year to celebrate their achievements over the last year. This included a reflection on the working arrangements for the Councils and the work programmes for the next year. Membership across all Councils has increased with the total number of patient and public representatives now being 50.

The wards and outpatients councils have continued to use the 'Adopt-A-Ward or Department' scheme to facilitate partnership working with staff to provide a patient perspective to improving the experience of patients and their relatives. Some members have also been involved in the 'Back to the Floor' quality visits undertaken by the senior nursing team.

The work programmes this year have concentrated on establishing the new councils and how they can best support wards and departments to improve the experience of patients, carers, relatives and visitors. Councils have continued to be actively involved with ongoing work on nutrition and hydration of inpatients, privacy and dignity, and patient experience data collection.

2. Young Person's Council

The Young Person's Council has provided a way of involving young people aged 16-25 years in the development and improvement of services within our hospitals to ensure they have the best possible experience. The group have been involved in facilitating consultations events to gain young people's views on developing facilities and support for young people in the hospital.

3. Mystery Patient Council

Council members have undertaken several Mystery Shopper visits to test services and facilities in the hospital. The initiative has been very useful in

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highlighting key areas for improvement. Group members have worked with the staff in a variety of areas and have reported their findings which have been used to inform education and training programmes for staff.

The council has concentrated on restaurant facilities and therapy services this year, but plans to roll out the initiative to other departments and services in 2013/14.

4. Readership Panel

The group was established six years ago and provides a forum for involving patients and the public in reviewing and influencing the way in which information is provided in all formats.

This ensures that all information within the Trust is produced in a way that is useful to patients, carers and the public, has a consistent style, and is in a non-jargonised language that falls in line with national NHS guidelines. This year the group has specifically been involved with:

- Information leaflet for patients referred to the Rapid Assessment, Interface and Discharge (RAID) team for mental health
- Revising the information for the hospital information channel of the bedside televisions in wards
- Leaflet on reducing side effects of Radiotherapy
- Patient information poster Are you at risk of pressure sores?
- Hearing aid leaflets regarding assessment, fitting and aftercare
- Information leaflet on Customer Care Standards

The Panel have also been involved in the review of Trust audits documents, procedures and guidelines including:

- Procedure for the handling of patient's cash, valuables and property
- Guidelines for Urinary Continence Care for adult patients aged 16 or over
- Enhanced Recovery Programme Recovering from Bowel Surgery
- Patient Experience Audit: Were you involved in decisions about your care?
- Patient Experience Audit: Were you given conflicting information?

5. Carers' Advisory Group

The group has continued to meet and consists of carers, members of Birmingham Carers' Association, Birmingham City Council communities department, Patient & Carer Council representatives, Governors and staff. The set of Principles for Carers, which were developed last year, have been used to formulate education and information for staff.

An assessment of the impact of this will be undertaken in 2013, and any actions for improvement implemented.

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6. Local Involvement Networks (LINks): the Trust Working Group

The University Hospitals Birmingham Working Group is a-sub group of the Birmingham LINks, and was established in April 2009. A good working relationship has continued with members, many of whom were members of the disbanded PPI Forum.

The Trust has hosted the monthly meetings and arranged talks by Trust representatives and fact-finding visits. Members have also been invited to take part in various engagement activities.

A second successful event to promote and publicise the work and support provided by more than 15 patient and carer support and information groups was hosted by the group.

7. Patient and Carer Consultations

Patient and Carer Council members, the Trust LINks members, and Foundation Members were consulted on the following during the year:

- Equality Delivery System
- Diarising the patient's day
- General Medical Council Medical education
- Information for relatives of the patient at end of life

8. Volunteers from the local community

The Trust had around 570 people registered as active volunteers at the end of March 2013. A continued effort has been made to recruit from groups that would not traditionally be linked with hospital volunteering. The profile of volunteers is now:

35% male 24% black and Asian 15% under 30 years old 26% over 66 years old 13% employed

A Volunteer Committee, established in 2011 and chaired by a Governor, continues to formally involve volunteers in the development of the voluntary services within the Trust. The Committee organised a fundraising event as part of National Volunteer Week, where they were also involved in promoting and publicising the role of volunteers in the hospital. The Committee have been involved in reviewing the annual awards celebration for long service awards.

Voluntary Services commenced a new Buggy service in 2012, to transport patients and visitors from the car park to the hospital main entrance. Over

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14,000 individual journeys have provided in the first 12 months and feedback from patients and visitors has been very positive.

Good working relationships have continued with the Birmingham Voluntary Services Council, and the Associate Director of Patient Affairs continues to be an active member of the Birmingham Action Resource for Voluntary Organisations.

National recognition of the standard of the service has been demonstrated through a request from the Department of Health for the Associate Director of Patient Affairs (ADoPA) to continue to be part of the strategic group developing volunteering across health and social care across England. The AdoPA has also been elected for a second term to a key national role as the Chair for the National Association of Voluntary Services Managers, the organisation that leads volunteering in the NHS.