

TRUST BOARD	Date: 25 TH July 2013	
	Agenda Item: 4.2	
REPORT TITLE:	FT Membership Strategy	
EXECUTIVE SPONSOR:	Gillian Francis-Musanu Director of Corporate Affairs	
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REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)	FT Project Board – March 2013 Trust Board Seminar – May 2013	
Purpose of the Report and Action Required:		(√)
The Trust Board is asked to approve the Trusts plans for developing a representative membership.	Approval	√
	Discussion	
	Information	
Summary of Key Issues		
This report sets out how Surrey & Sussex Healthcare NHS Trust plans to undertake membership recruitment as part of the governance arrangements for developing a representative membership community in the journey to become a Foundation Trust.		
Relationship to Trust Corporate Objectives & Assurance Framework:		
Objective 3: Work in partnership with our community		
Objective 4: Become a sustainable, effective organisation.		
Corporate Impact Assessment:		
Legal and regulatory implications	The Trust is required to recruit and communicate with members of the FT.	
Financial implications	A budget has been identify for membership recruitment	
Patient Experience/Engagement	The plans for membership will be a positive opportunity to significantly increase patient & public engagement	
Risk & Performance Management	None identified currently	
NHS Constitution/Equality & Diversity/Communication	The membership requirements need to ensure that socio-economic factors are taken into consideration both in recruitment and engagement of members.	
Attachments:		
FT Membership Strategy		

Surrey & Sussex Healthcare NHS Trust
Membership Strategy

Final

Executive Summary

Surrey and Sussex Healthcare NHS Trust is preparing to apply for Foundation Trust status. In order to be successful the Trust will need to demonstrate that it has a membership of sufficient size and diversity to meaningfully represent its catchment population and that its membership is engaged with the work of the hospital.

The Trust's membership is also the pool from which the Council of Governors will be elected. The Trust's membership, its Council of Governors and the Board of Directors will form core parts of the governance structure once authorised as a Foundation Trust.

The Trust is required to submit a Membership strategy as part of its application for Foundation Status. This strategy will form part of a larger piece of work to increase public engagement in the work of the Trust.

1. Introduction

This strategy sets out a framework to develop an active membership of people who want to be involved in helping shape our future. In liaison with our governors (once appointed) we will seek to ensure that the membership is representative of those eligible to join.

As a public benefit organisation, we will be faced with a complex set of relationships and accountabilities; to the council of governors, the wider membership and the local community, commissioners, partners and Monitor (the independent regulator). Managing this in an effective and transparent way and building strong relationships will be a priority for the board of directors.

Surrey & Sussex Healthcare NHS Trust (SaSH) is committed to building a substantial and representative membership base to take forward the trust's strategy, to support public accountability and local engagement, and to develop a more outward-facing organisation.

SaSH believes that a well-informed, motivated and engaged membership will help it to be a more responsive organisation with an improved understanding of the needs of its patients and local communities.

SaSH employs just over 3,500 staff, providing a comprehensive range of emergency and non-emergency services to the residents of East Surrey, North-East West Sussex, and South Croydon, including the major towns of Crawley, Horsham, Reigate and Redhill.

Our Trust sits at the heart of our community of half a million people, as well as the thousands of people that pass through Gatwick Airport each day. We are responsible for East Surrey Hospital (ESH) in Redhill, where we provide the more acute and complex services. In addition, we reach out into the community to provide a range of out-patient, diagnostic and less complex planned services closer to home. We provide services at Dorking and Caterham Dene Hospitals, and Oxted Health Centre, in Surrey, and at Crawley, Horsham and Queen Victoria Hospitals in West Sussex.

The Trust treats in excess of 65,000 in-patients and 252,000 out-patients a year. We also deliver 4,500 babies, administer 4,800 chemotherapy treatments and have 82,000 attendances to our Emergency Department.

In seeking foundation trust status, Surrey & Sussex Healthcare NHS Trust will hold a public consultation on its proposals and strategic direction. In advance of this, we will begin recruiting public (including patients) and staff members.

This paper outlines our plans for membership recruitment, the proposed structure of the staff and public constituencies of the foundation trust, and how members will be engaged in the governance of Surrey & Sussex Healthcare NHS Trust.

This strategy will be reviewed annually by the council of governors' (initially to be set up in shadow form) and the board of directors to ensure it reflects the community served and our strategic priorities.

2. Membership

NHS foundation trusts are democratic organisations with members who actively participate in the governance structure and must have public and staff constituencies within their membership. All members have equal voting rights (one member one vote). By giving staff, patients, the public and our partners a stake in the organisation, we have been set the challenge of transforming the trust into an outward facing, locally owned organisation that uses its members as a valuable resource to improve performance.

SaSH welcomes the opportunity to develop a motivated, representative and informed membership to develop the work of the Trust and to assist its effective operation as a Foundation Trust in the future.

The Governance arrangements for the Trust will have three main components:

- Membership Community
- Council of Governors
- Board of Directors

Membership of the Trust is open to all those over the age of 14 who live within the designated catchment area or work for the Trust provided that they meet the membership criteria and have not physically or verbally abused Trust staff. Membership of the Trust is free.

We want our members to play an active part in helping shape the future of our services by providing feedback, responding to surveys and consultations and voting in elections to the council of governors. Moreover, we hope that some will want to be more involved by standing for election to the council of governors.

Public membership should reflect the range of identified catchment areas as far as possible. The trust will build its membership base as it seeks authorisation as an NHS Foundation trust. This is a natural extension of its existing work to encourage public and patient engagement.

Public and patient engagement within the Trust takes place through a range of activities however we want to build on this work to:

- develop regular consultative meetings with the local community about how to improve our services;
- hold regular briefings for and with stakeholders and;
- use a variety of ways to seek the views of patients and the public through various feedback mechanisms such as Patient Opinion and “Your Care Matters”

SaSH is also supported by its own Charitable Funds where generous members of local communities who have had contact with our hospitals or have family or friends who have been cared for by the trust’s services give their time and money to support us.

2.1 Benefits of membership for public members

It will be important to present tangible benefits valued by members and to provide a role which supports the organisation in improving the services it offers.

The trust will:

- segment its membership so that it can communicate with specific groups of patients, based on age, and their areas of interest
- solicit the views of members on those issues that matter to them most
- produce briefings on clinical service developments and the opportunity for members to participate in focus groups to share their views and experiences;
- consult members on the trust’s plans for future healthcare services;
- produce a twice yearly newsletter for members and all members on email will receive a copy of the bi-monthly stakeholder briefing which goes out to key partners and friends of the Trust;
- hold open forum events with the trust’s Chair, Chief Executive, Medical Director & Chief Nurse and other executive directors and clinicians;

A key benefit for public members will be the ability to stand for election to the Council of Governors and to elect others to it. This ability to hold the organisation to account and have a voice in the strategic direction of the trust is vitally important.

The role of FT governors is set to change following implementation of the Health Act 2012 and the report of the Mid Staffordshire NHS FT Public Inquiry. These responsibilities will be clearly outlined in the Governor’s handbook and made available to all governors.

Members will be invited to training and awareness events in anticipation of standing for the Council of Governors.

The Trust will begin to develop a dedicated area of its website for members and advertise the benefits to public members via the following messages:

- You can help us improve our services by giving us your views.
- You can be a critical friend to SaSH telling us when we get things right, but also ensuring that we always centre our services on patient need.
- You can attend open days and special members’ events such as talks by our clinical specialists.
- You will be invited to special members’ tours of key services or new buildings whenever opportunities arise
- You can help others understand more about the services that the trust offers.
- Your views will help decide the direction of our service and hospital developments in the future

- You will be able to work with people with a special interest in a particular service or area to help improve that service for future patients.
- You will be kept informed about the latest news and events from SaSH, the latest developments in clinical care and medicine, and our research partnerships as an associated University Hospital of Brighton and Sussex Medical School
- You can vote for people to represent your interests on the Council of Governors
- You can stand to be a governor and be a voice for other members of the public and patients.
- You will be able to act as an ambassador for the trust and will be closely involved in the ongoing recruitment of members.

2.2 Benefit of membership for staff members

The benefits shown for members of the public constituency also apply to staff, including the ability;

- To stand for election to or to elect others to the Council of Governors.
- Staff will be part of an organisation with greater flexibility to make changes and to innovate.
- Staff will be able to contribute directly to steering the organisation's direction by getting involved in generating plans for the future.
- Through representation on the Council of Governors, staff will have a greater voice to develop ways of working that reflect patients' needs and priorities.
- Staff will be encouraged get involved to make a real impact on local health provision and service design.

2.3 Members as a resource for the organisation

It is anticipated that members will have information, experience and networks of real value to the Trust and the intention will be to make the best possible use of that expertise by:

- Giving the Council of Governors the support and resources it needs to communicate regularly with members.
- Using our devolved clinical leadership management structure to encourage staff to seek members' ideas and opinions on service developments.
- Helping members to be ambassadors for the trust and to communicate with the wider community about the trust and its work, including with partner organisations
- Providing regular briefings for members on key trust issues so that members are well briefed and able to answer questions from their constituent members.
- Establishing easy feedback mechanisms through which members can express their views and pass on concerns about the Trust's services and how it is performing to the Council of Governors and through them to the trust's Board.
- Enabling our supporters and patient activists to add a new dimension to their support for the trust.
- We will also offer members other ways in which they can become involved, perhaps by volunteering or becoming involved with charitable activities.

3. Substantial and representative membership

The trust will begin membership recruitment from the end of July 2013 onwards through a campaign titled '*Be Part of our Future*'. The campaign will consist of a wide

range of opportunities for individuals to become a member through recruitment activities such as direct mail-out of existing patients, members of the public and key partners, via online application and direct face to face recruitment opportunities in the Trust or at venues throughout the catchment area.

Members will be asked to identify any service areas in which they are particularly interested when they join the Trust in order to be able to target interest in particular subject events in the future.

We will seek to work actively with our strategic partners in developing our membership strategy and in particular develop specific actions to work with our Local Authority, voluntary and community sector, business and educational establishments and commissioners to engage with partnership and network groups already in existence across Surrey & Sussex.

Applicant foundation trust's are not given a specific membership size that they must achieve and there is a great deal of variation. However, evidence shows that two methods of recruitment are the most successful in securing members; face to face recruitment and direct mail. The trust will use this approach and a variety of other methods to ensure success in recruitment.

From July 2013 – December 2013, the Trust plans to recruit around 1000 members. Over time, the Trust is intending to recruit in the region of around 5,500 members and is developing a specific membership recruitment action plan to support this strategy.

General public knowledge about foundation trusts is limited and patients who use our services are most likely to become members, regardless of where they live and those do not use our services are least likely to be interested in becoming members, even if they live close to the hospital. This is just one of the challenges of recruiting members.

3.1 Membership objectives

Over this year to the end of 2013 we plan to:

- Begin to build a membership base and ensure that it reflects the diversity of our local community (according to the latest 2011 census).

In particular we will want to:

- Approach patient, public, stakeholders and charitable supporters who are interested in our services.
- Ensure that individuals who have expressed an interest in becoming members receive an application form and a welcome pack.
- Develop a range of engagement events and activities and focus on increasing membership attendance at these events.
- Increase understanding amongst members of the trust's strategy and the range of services offered by it, including current changes in health services and the real challenges facing the health system.
- Develop interest in building and sustaining a thriving and influential Council of Governors which is embedded in the local community, is responsive to the aspirations and concerns of members, and works effectively with the trust's board of directors

We anticipate that the shadow “Council of Governors” will review these objectives and continue to do so within the first year of operating as an authorised Foundation Trust.

4. Defining the membership community

4.1 Membership Constituencies

The public membership constituency will be open to all residents over the age of 14 in the Trusts catchment population. However, members will not be eligible to stand as governors until the age of 16.

4.2 Public Constituency

The public constituency will be split into a number of defined geographical areas and each will have designated seats on the Council of Governors as follows:

Constituency			
		Governors	
Public	Mole Valley District *(84,600)	2	
Public	Reigate & Banstead *(138,600)	4	
Public	Tandridge District *(83,100)	2	
Public	Crawley District *(123,900)	3	
Public	Horsham *(131,700)	3	
Public	Other areas	1	
Total Public Elected Governors		15	

** based on Surrey County Council & West Sussex County Council dataset of GP registered population JSNA (2012)*

The trust will target particular recruitment campaigns in these areas as necessary so that its membership represents the whole community proportionately.

After each recruitment drive, we will evaluate our membership against the demographic profile of our catchment and plan the next phase of activity accordingly. This will be done through attending community events in these areas and also through postcode-targeted patient mailings.

4.3 Staff Constituency

The staff membership constituency will include all staff that have either a permanent contract of employment with the Trust, a contract of employment with a term of at last 12 months or have been employed continuously for 12 months.

The staff membership constituency will also include staff employed at Surrey & Sussex Hospital through an Independent Contractor.

Volunteers who have been registered for over 12 months will also be included in the staff membership constituency.

Membership of the staff constituency will be automatic unless individuals formally opt out. The Trust values the contribution all staff can make to the development of the Trust

We are proposing that the staff constituency will be split into four groups as follows:

- A Medical and Dental
- B Nursing and Midwifery
- C Other clinical staff not in B
- D All other staff not in A, B or C (including volunteers and contractors)

Staff governors will be elected as follows:

Constituency			
Staff	Medical & Dental	1	
Staff	Nursing & Midwifery	1	
Staff	Other Clinical	1	
Staff	All other staff	1	
Total Staff Elected Governors		4	

Executive or non-voting Directors cannot stand for election as staff governors; similarly Non-executive Directors cannot stand for election as public governors.

4.4 Partnership organisations

Partner governors will be appointed by the relevant organisation as follows:

Constituency - Nominated Stakeholders (appointed by the relevant body)			
Type	Appointed by	Governors	
Clinical Commissioning Group	*Crawley CCG	1	
Clinical Commissioning Group	*East Surrey CCG	1	
Clinical Commissioning Group	*Horsham & Mid Sussex CCG	1	
Clinical Commissioning Group	*Surrey Downs CCG	1	
Local Authority	Surrey County Council	1	
Local Authority	West Sussex County Council	1	

Partner	Health Watch	1	
Partner	Brighton & Sussex Medical School	1	
Partner	Voluntary Sector Umbrella organisation	1	
Total nominated Governor's		9	

** Governors nominated by CCGs will not be part of the board of the CCG.*

Total on Governor's Council	28	
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Make up of the governor's council is proposed as:

- Total elected public governors = 15 (more than half) + 4 elected staff governors = 19
- Total nominated governors = 9

4.5 Younger members

The need to ensure a proportionate membership in terms of age also means that we will need to tailor specific campaigns to fill any gaps in our membership profile.

In particular, we will work to develop a young persons' patient panel, to develop sustainable plans for recruiting younger members. This is likely to include using members as ambassadors, working with secondary schools across Surrey and Sussex helping also to recruit young people to train as healthcare workers, including nursing and medical students.

4.5 Diversity

It is vital to ensure that we have representation from black and minority ethnic, white non-British communities and from those with disabilities. The trust will need to develop a membership which is largely representative of specific local communities. Where there are particular minority groups who seem to be under represented in the membership in comparison to their presence in the wider community, efforts will be made to find ways of encouraging members of that particular community to join. Involvement in community meetings may include presentations about health conditions of particular interest for certain minority groups.

As with all trust leaflets, translations will be available in other formats as requested. We will ask those joining as members if they have any special needs in terms of disabilities that may need extra support.

4.6 Transition to membership

Members of the trust's existing patient groups will be invited to become part of its public membership and some may wish to stand for election to the Council of Governors. We will build on the involvement and engagement work currently undertaken by our patient representatives.

It is proposed that early engagement with patient representatives takes place to consider how these members can continue to contribute to service specific issues and ensure that we secure the meaningful two-way relationship that we currently have.

It will also be important to use the insight of patient representatives to identify specific areas of the work and business of the trust that will be of most interest to patients and service users. This might include:

- helping to produce patient-friendly information;
- participating in focus groups on service provision;
- giving feedback on policy and strategy;
- advising the trust on issues relating to travel and transport;
- food, hygiene and infection prevention; and other elements of patient experience.

As part of our recruitment, we will ask members to state in order of priority the top three areas that are of most interest to them. This information will be stored on the membership database and can be used to segment the membership for targeted engagement and involvement activities.

We will develop our membership database to ensure it allows public members to contribute directly and meaningfully about areas that concern them most, and in doing so assist the Trust in improving the delivery of its services.

It is important to ensure that our duty to deliver patient and public engagement on service specific issues continues at a local level and is facilitated and supported by the trust's divisional structure. This work will be co-ordinated by the trust's Customer Care Manager. There will need to be a strong synergy between this local involvement work with service users, some of whom may not be members, and with the broader membership. Our patient and public engagement work will encompass communications with both membership special interest groups and service users (who are potential members) and will ask for their willingness to take part in a variety of activities at departmental level.

4.6 Resources to develop the membership

The Director of Corporate Affairs as Company Secretary is responsible for supporting the Council of Governors and membership. She will be supported by the FT Programme Manager and the Corporate Governance Officer.

5. Building the membership base

In order to deliver the benefits of membership identified in this strategy, awareness of the benefits of membership needs to be raised among staff. Staff need to understand the benefits of Foundation Trust Status for SaSH; how they can become involved in shaping the future direction of the Trust as staff members, the need to involve members as representatives of patients and the public in the evaluation and development of the work of the Trust.

The Executive Team will need to ensure that evaluation of the Trusts services include members' views and that members' views are consulted on service developments. Consultation with members needs to be included in future project plans for service developments.

Once established, the Council of Governors will complete the following actions within the first 12 months of operation as an NHS Foundation Trust in relation to building the membership base:

- Adopt the membership strategy
- Set up working groups around areas of specific interest including membership

The Board of Governors would begin to undertake the following actions within the first 18 months of operation as an NHS Foundation Trust:

- Identify their specific areas of interest linked to working groups and projects being undertaken by the Trust.

6. Managing active membership

Monitor style membership reports will be produced on a quarterly basis and presented to the Board by the end of 2013 by which time comparative data on the Trust's catchment area should be available through an enhanced database. This will allow the Trust to identify areas where membership recruitment needs to be targeted; e.g. younger members, to ensure that the Trust's membership is representative of the local population in terms of socio-economic status, diversity, gender, age, ethnicity and disability.

References

Applying for NHS Foundation Trust Status Guide for Applicant, Monitor, 2008
(including amendments published in 2010 & 2013)

Compliance Framework 2010/11, Monitor, March 2010

The NHS Foundation Trust Code of Governance, Monitor, March 2010

Managing your members, Foundation Trust Network, 2010

Developing the role of the NHS Foundation Trust Governors, Monitor 2008

Initial FT Membership Recruitment Strategy Action Plan 2013/14

Aim	Action	Timescale
Develop FT Membership promotional materials	<ul style="list-style-type: none"> • Online FT recruitment form & information on website pages • Membership forms • Banner stands • Promotional material (posters etc) • Membership leaflet 	July/Aug 2013
Membership recruitment activities	<ul style="list-style-type: none"> • Postal recruitment to existing patients, community & voluntary groups • Weekly face to face recruitment sessions in outpatients and strategic areas across the hospital • Links with GP patient participation groups • Recruitment articles in newspapers, LA publications, community & voluntary sector publications • Develop a timetable to attended targeted community events • Include FT membership forms in inpatient & outpatient surveys, trust newsletters • Develop the role of staff membership “champions” • Procure membership database 	August 2013 onwards
Recruitment of members from excluded communities	<ul style="list-style-type: none"> • Work with County Councils & Voluntary Sector, Healthwatch to target recruitment activities • Link with development workers • Offer visits to faith, older people, disability, carers, LGBT groups etc • If necessary identify support from specific expert membership recruitment organisations to target specific groups (i.e. young people, disabled people etc) 	Sept 2013 onwards

<p>Communicating with Membership</p>	<ul style="list-style-type: none"> • Develop membership newsletter and publish 3 – 4 newsletters per year (see how this can be combined with existing publications e.g. Health Focus) • Further develop membership pages on the Trust Website and consider social networking opportunities • Develop a programme of Membership Open Days • Undertake a survey of members to gain their opinion on how the Trust can best communicate and engage with members • Promote membership attendance at AGMs • Provide opportunities for membership to get involved in focus groups around specific services 	<p>Oct/November 2013 onwards</p>
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