



**Integrated  
Care System**  
Shropshire, Telford and Wrekin



**Shropshire, Telford  
and Wrekin**

# **Stakeholder Briefing Pack**

May 2025

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## Current Activity/Key Actions

- Currently recruiting to shared CEO with ShropCom, as well as exploring a group model with shared leadership whilst remaining as two statutory organisations.
- Steady improvements made in performance, with more to do:
  - Improved 4hr, 12hr and ambulance handover in May-to-date.
  - Improved 28-day Faster Diagnosis Standard (April and May - to date) - new Cancer Improvement Programme with new clinical leadership in place.
  - Total elective referral to treatment (RTT) waiting list (English & Welsh) reduced from 55,000+ last summer to 45,000 now. No. of patients waiting 52+ weeks reduced by more than 55% in period. Close to eliminating 65+ weeks (under 5 patients need national support).
  - Diagnostic improvements; from 53.6% of patients waiting under 6 weeks for tests in December 2024, to 78.6% in April 2025.
  - Finance; we have a breakeven plan for the year (underlying £45.1m deficit) and achieved breakeven in April. £2.4m cost improvement programme (CIP) efficiencies delivered in April 2025 (compared with £0.9m April 2024).
- Amongst top 25% of trusts for Same Day Planned Care, plus successful delivery of new Linear Accelerator (LINAC) in RSH to support cancer care.
- Groundworks recommenced on two modular wards at RSH – opening Winter 2025. Additional space for surgical and urgent medical care, plans for additional 10 acute medical beds at PRH to reduce risk in the UEC pathway. £16.2m work started at RSH to install heat pumps, solar panels and energy efficient measures.
- HTP: Building has reached highest point with continued engagement in Wellington, Ironbridge, Wem, Rotary Clubs and further focus groups planned in June.

## Next Steps

- Trialling new volunteer 'Discharge Drivers' to improve flow through UEC pathway.
- Group model development for Summer 2025:
  - Building Case for Change for NHSE assurance
  - Recruitment commenced for Shared CEO.
- Developing workforce plans to meet national targets - aiming to minimise mandatory redundancies through vacancy management and voluntary redundancy.
- Digital; continued rollout of patient portal giving patients access to electronic appointment letters - aim to reduce waiting times/clinic utilisation.
- £1m triomic cancer trial at Community Diagnostic Centre (CDC) – new clinical rooms to be added in June.
- 1st anniversary of Elective Care Hub – close to 5,000 patients used hub since June 2024.
- Phase 2 of Emergency Department redevelopment at RSH – late Summer 2025.

## Performance Update

### Waiting times:

- RJAH remains in Tier 1 for elective performance, with specific challenges in some key services – most notably the wait for spinal disorder treatment.
- At the end of March there were 882 English patients and 1,674 Welsh patients waiting over 52 weeks.
- Discussions continue with Welsh commissioners to provide clarity on 2025/26 targets and expectations.

### Next steps:

- Well underway with a revised delivery model. Key delivery themes are: Clinical pathway transformation; Workforce optimisation; Workforce growth; Non-recurrent backlog reduction initiatives; and Improving operational processes.
- These plans allow us to meet the planning guidance requirements by the end of the 2025/26.

### Activity:

- Elective activity in March was 1,139 against a plan of 1,208. For context, average activity over the past two years is around 1,000 cases per month, so we are moving in the right direction.
- New Theatre opened in November 2024 providing capacity for an additional 1,000 treatments per year.
- The Trust is actively working with both NHS and independent sector providers to increase capacity through these mutual aid arrangements.

## Highlights

### Apollo:

- Apollo, our new Electronic Patient Record system, went live earlier this month. It is a comprehensive solution made up from a suite of products that are integrated. It is replacing our long-standing patient administration systems, which have been integral to the way patients receive care to-date.
- Apollo represents the biggest single investment this organisation has ever made in a technological solution.

### Partnership working – new service:

- Launched a new minor diabetic foot service which provides essential surgical intervention for diabetic patients with tendon-related foot conditions. It runs in partnership with SaTH and has been introduced in response to increasing demand for specialist foot surgery for diabetic patients.

### Enhanced Recovery:

- Our Enhanced Recovery Service has just passed a landmark of its 1,000<sup>th</sup> hip or knee replacement, with patient discharged home on 'day 0' – the same day of surgery.

## Current Activity/ Key Actions

### Adult Mental Health

- STW Talking Therapies – reliable improvement metrics within STW Talking Therapies are strong – 74.9%. This has been acknowledged by NHSE ranking the service among the best nationally for reliable recovery.
- A pilot project is underway with the learning disabilities service to identify carers who may benefit from Talking Therapies.
- People with Severe Mental Illness (SMI) are at increased risk of poor physical health. In Quarter 4, 60% of SMI patients undertook a physical health check meaning the service successfully met the national target.
- Learning Disabilities – MPFT is engaged in regional discussions regarding learning disabilities via a West Midlands Alliance meeting. This support discussions regarding complex cases and identifying gaps in provision such as individuals with a forensic history.

### Children and Young People (CYP) Mental Health

- Mental Health Support Teams (MHSTs) - ongoing work is taking place on shared learning to enhance efficiency across MHST teams. South Telford MHSTs are recognised as making a positive impact with learning to share across the service.
- CYP Access and Treatment - access within 4 weeks and treatment times reduced to 16.44 weeks.
- ADHD - median wait time for assessment is 62 days. Median wait time for treatment is 291 days. Staff capacity, including vacancies, is impacting length of wait and work is ongoing to support staffing level.
- Family uptake of virtual ASD appointments (via Helios subcontract) is very low. 19/300 families have accepted these appointments to date.

## Next Steps

- Talking Therapies - in early summer, a promotional campaign will be launched to target the LGBTQ+ community with the aim of proactively encouraging people to seek support for their mental wellbeing.
- Learning Disabilities – work taking place to review patients waiting over 52 weeks specifically for occupational therapy and speech and language therapy.
- CYP - extensive work is taking place to ensure service provision for children and young people is provided in a timely manner.
  - Helios ASD virtual appointments – improved communication underway to ensure families understand the appointment offer and address misconceptions.
  - Waiting Well service – proactive outreach service for families on wait list has resumed and is facilitated by two assistant psychologists.
  - Monthly access meetings will begin in June and aim to identify why patients with the longest waits are waiting and what interventions are needed.



## Current Activity/ Key Actions

### General Practice:

- Appointment data shows there are more appointments in General Practice (GP) now than pre-pandemic and that this is continuing to be sustained.
- In March 2025, 65% of patients were seen face-to-face and a total of 256,398 appointments were delivered in STW.
- 52% of patients are seen same day or next day (target 54%) and 82% within 14 days (target 88%).

### Pharmacy:

- Combined Pharmacy First, hypertension case-finding and oral contraception consultations at 4,404 in April - 6% over the 4,150 target.

### Optometry:

- New service, 'Optometry First' now in mobilisation stage with aim to launch in July 2025.

### Dental:

- Uplift to average units of dental activity (UDA) price for dentists in STW has been agreed with the requirement to deliver additional urgent appointments.

## Next Steps/Key Actions

- Approximately 10 projects are being put forward for the annual Improvement Grant Capital Funding. Updates will be provided on potential GP practice improvement schemes as they go through the NHSE approval process.
- Both same/next day appointments and appointments within 2 weeks in GP are showing a slight downward trend and are below target.
  - As such, an improvement plan for GP appointments within 2 weeks has been drafted, for sign-off via the May Primary Care Commissioning Group (PCCG) meeting.
- 100% of practices have signed up to the new national Advice and Guidance Directed Enhanced Service (DES), aiming to increase pre-referral access for Primary Care to specialist support.
- A cardiovascular disease (CVD) independent prescribing pilot is due for launch in three community pharmacies as part of the independent prescribing pathfinder programme in community pharmacy.

## Current Activity/ Key Actions

- As previously shared by SaTH, we are currently recruiting for a shared CEO. A Group Model is being explored with shared leadership but SaTH and ShropCom remaining as two statutory organisations.
- At time of writing, COVID uptake for the spring booster offer (ends 30<sup>th</sup> June) is at 47.82%.
- Our Alternatives to Emergency Department workstream achieved:
  - An increase in cases processed through the Single Point of Access (SPOA) for alternative options. Despite increased demand on SPOA, a 10% reduction in recommended conversions to ED was achieved.
  - Enhanced responses in Category 2 incidents throughout the year.
  - A 20% increase in Urgent Community Response (UCR) activity.
- Efforts continue to address service waits for planned care services by rectifying data quality issues and targeted improvements in wait times, with substantial progress made over the last 2 months- including the reduction in 78, 65, and 52-week wait categories and demonstrating ongoing commitment to recover and deliver timely patient care.
- Recruitment and training of Specialist Nursery Nurses, which has directly enhanced capacity to conduct Schedule of Growing Skills (SOGS) Assessments, thus ensuring better access to paediatric services.
- Efficiency and productivity programmes in place to support this year's ambitious financial plan. Commitment shown to both areas from staff across the organisation who are working to ensure best care is provided within the resources available.

## Next Steps

- Group Model development – see SaTH update (Slide 3) for more information.
- Developing workforce plans to meet national targets – aiming to minimise mandatory redundancies through vacancy management and voluntary redundancy.
- Focused efforts for 2025/26 on optimising community UEC pathways. The strategic objective is to shift unnecessary activities from acute settings to more appropriate community environments.
- Workshops held across corporate and operational teams during months 1 and 2 to support CIP delivery.
  - These sessions helped engage a broad range of teams to gather insights, foster a collaborative environment conducive to change, and apply an improvement methodology to continuously generate cost-saving ideas.
  - This not only supports in-year savings but also contributes to shaping the CIP plan for 2026/27.

## Current Activity/ Key Actions

- Ian Green OBE, current Chair of Salisbury NHS Foundation Trust, has been appointed Chair of NHS STW. Start date to be confirmed.
- NHS Government Reset Programme: To respond to the challenges set out by NHS England and the Government, the six ICBs in the West Midlands are working together to review options as to how the new strategic commissioning and Model ICB Blueprint can be best delivered within the reduced running costs budgets. NHS Shropshire, Telford and Wrekin is actively exploring a cluster model with NHS Staffordshire and Stoke-on-Trent. The ICB has been asked to reduce its running costs by 55% during 25/26
- GP Out of Hours (GPOOHs): Due to capacity constraints within the Independent Patient Choice and Procurement Panel, NHS STW has been informed that the review - originally expected by the end of May 2025 - is now likely to conclude in mid to late June; NHS STW will maintain in the standstill period until the panel's recommendations are received.
- A Healthy Ageing and Frailty survey has recently launched to hear from local people about what growing older means to them and how we can better support healthy ageing and people living with frailty across the county. To guide local planning and improvement, [a draft Healthy Ageing and Frailty Strategy \(2025–2028\)](#) has been developed and is being engaged upon. The deadline for feedback is Monday 30 June 2025.

## Next Steps

- NHS Government Reset Programme: Going forwards, each ICB will submit a plan to NHS England at the end of May 2025. This will propose a clustered model with NHS Staffordshire and Stoke-on-Trent. The future organisation will be much smaller in terms of the number of people that it employs
- GPOOHs: Once NHS STW has received the Independent Patient Choice and Procurement Panel's recommendations, these will be communicated to MPs and next steps confirmed.
- Coinciding with World Day for Cultural Diversity (Wednesday 21 May), the [‘Everyone Belongs Here’ campaign](#) was launched across the Integrated Care System (ICS)
  - This campaign celebrates the rich diversity of our workforce and community and stands firmly against discrimination in all its forms.
  - Recruitment is now underway for colleagues to get involved and shape the campaign.





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# Thank you

For more information, please contact:  
[stw.communications@nhs.net](mailto:stw.communications@nhs.net)