

Monthly Stakeholder Briefing Pack

December 2025

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Current Activity/Key Actions

Most improved Trust in country for reducing waiting times for planned care patients. Secured £2m in NHSE funding. End of Q2 2025/26, moved up 17 places in the National Oversight Framework (NOF). Now positioned at 96 out of 134 Trusts.

Resident doctor strike action (17-22 December). Plans in place to maintain safe levels of patient care, particularly Urgent and Emergency Care (UEC) pathway for time-critical planned care, and to minimise impact on wider services.

Performance:

- Diagnostics: DM01 for October – 86.9% of patients waiting less than 6 weeks, best performance for 5 years and now in top performing half of the country.
- Number of patients waiting for tests reduced from over 18,000 last year to 13,000 this year.
- Elective care – reduced overall elective waiting list by 30% in the last year. Elective list for children reduced by 40%.
- % of patients treated within 18 weeks rose from 48.1% in April to 62.3% in September 2025. Further increased to 65.5% at the end of November 2025. Ahead of SaTH's improvement target of 60% and national improvement target is to get to 65% by March 2026.
- Reduced proportion of patients waiting over 52 weeks from 7% to 0.2%. Now in top performing quartile of the country (national target <1% over 52 weeks by March 2026).
- 28-day cancer Faster Diagnosis Standard (FDS) improved further in October to 80.3%, best performance on record for the Trust. Now well into the top performing half of the country (national target 80% by March 2026).
- 62-day cancer Referral To Treatment (RTT) standard in October was 71.4%, no longer in the bottom quartile nationally and best performance in over three years (national target 75% by March 2026).
- UEC - 4hr/12hrs/ambulance handover remain highly challenged, although 4hr performance is demonstrating statistically significant improvement (national 4hr target 78% by March 2026).

Finance:

- Deficit of £3.9m to breakeven plan at end of month 8 (November) predominantly driven by premium staffing costs and unavailability with additional actions being taken. Great progress towards eliminating agency spend, leading to improved patient care and financial savings. Need to continue to reduce bank spend.
- £24.9m efficiencies delivered in 2025/26 to date – £7m more compared to the same time last year. Accelerating transformational work will improve efficiency, reduce escalation costs and add value for patients.

Other Key Developments

As part of the UEC improvement plan and to increase resilience during winter:

- Two new modular wards bringing an additional 56 inpatient beds at RSH opened earlier this month (December).
- Significant investment and changes at PRH to improve flow and reduce unnecessary hospital admissions. Forty new acute assessment space, including a Frailty Same Day Emergency Care Unit, to also open in December.
- New initiatives with partners include Integrated Community Front Door service at both Emergency Departments to help patients who need urgent care get the community support they need quickly.

Hospitals Transformation Programme (HTP):

- Topping-out ceremony of the new four-storey healthcare facilities at Royal Shrewsbury Hospital (RSH). Development includes four new clinical floors and an expanded and modernised Emergency Department.

Flu Vaccination Campaign:

- More than 4,195 staff vaccinated to date - more than 6% up on the same time last year.

Digital:

- Digital investment and pilots of AI Scribe and the Patient Engagement Portal recently rolled out.

2025 CQC Maternity Survey:

- Survey found women at Trust's maternity services feel treated with kindness and compassion and are spoken to in a way they can understand.

Hot Topics/Current Activity

NHS England Waiting times:

- At the end of November, 57.29% of patients were being seen within 18 weeks. This is well ahead of our planned position (which was 51.08% for the end of November). We remain well on target to achieve or exceed our 60% target for the financial year end.
- The proportion of patients waiting for a first outpatient appointment <18 weeks was 74.46% at the end of November – an improvement of 20.74% since April.
- RJAH remains in Tier 1 for elective performance, with specific challenges in some key services – most notably the wait for spinal disorder treatment.
- Due to varying performance and contracting expectations, Welsh patients are waiting longer, however there is effort internally to address the disparity.

People/Workforce:

- Vacancy rates fell again in October to 7.04% (against a target of 8%), and are projected to fall further in coming months, based on recruitment to new posts as per our workforce plan.
- Sickness absence remains low at 5.06% and we continue to cope well despite high community prevalence of flu at present.

Industrial Action:

- The Trust managed a period of industrial action at the end of November, managing to avoid any significant disruption to patient care and without compromising patient safety.
- At the time of writing, another five days of industrial action by Resident Doctors is about to start. The Trust has again got plans in place to mitigate.

Other Key Developments

National Oversight Framework:

- RJAH was ranked 25th among all 134 NHS Acute Trusts in the second iteration of the NHS National Oversight Framework (NOF) published earlier this month. This is an improvement of two places since the tables were launched in September.
- The league tables form part of an interactive dashboard which was launched by NHS England as part of its commitment to drive transparency and improvement.

Green Plan Investment:

- The first phase of work to install solar car ports in several of our car parks is almost complete, with the ports in our main patient car park to be ready by the end of the year.
- This has been made possible by the securing of £2.4m from Great British Energy to significantly expand the amount of self-generated renewable energy we produce.

New Quality Management System:

- RJAH will soon be introducing a new Trust-wide system, called Radar Healthcare, which will improve how we manage information relating to patient safety, patient experience, risk management and clinical and quality audits.
- Currently all these elements are managed by multiple digital systems, but Radar Healthcare brings all this information together into one easy-to-use system.

Current Activity

National Oversight Framework Q2:

- MPFT has once again been rated in segment 1 – the highest possible category – in the latest quarterly results published under NHS England's new NHS Oversight Framework (NOF).
- The framework provides a national assessment of how NHS trusts are performing across a range of measures, including access to services, quality of care, patient experience, safety, workforce, finance and productivity.
- Retaining a segment 1 position continues to put MPFT among the best performing trusts in the country, and is a significant achievement given the size, breadth and diversity of services the Trust provides.
- MPFT sits in the non-acute category of the NOF ratings and has moved from second to third position out of 61 trusts since quarter 1.

Financial Wellbeing and Housing Support Team:

- Along with supporting a high volume of clients and delivering life-changing outcomes, the financial well-being and housing support team, who are integrated with MPFT's community mental health services, has helped secure 23 new tenancies, supported clients to be £400,071.00 better off through grants, benefits and appeals and saved £15,460 through formal debt management.

Talking Therapies – Adult Mental Health:

- Shropshire, Telford and Wrekin Talking Therapies is among the best performing Talking Therapies services in the country for the percentage of patients seeing a significant improvement in their symptoms of anxiety and depression.
 - The service's 'reliable improvement' rate for 2025/26 is 74.6%, above the national average of 68%.
 - The service is seeing improvements in reliable recovery for people from the global majority – 66% compared with baseline of 50%.
 - The number of people to completed a course of treatment has increased from 3,942 from Apr-Nov 2024 compared to 4,484 in the same period in 2025.
 - The number of referrals has also increased for the same period, up from 8,264 in 2024 to 9,261 in 2025.

Other Key Developments

Child and Adolescent Mental Health Service (CAMHS) mobilisation:

- MPFT have been awarded the 2026–31 contract to deliver a new CAMHS model for STW, replacing BeeU in April 2026.
- Mobilisation work is underway to implement the 'I Thrive' framework, improve access for CYP (0–25) with focus on prevention, early help, and address inequalities through a co-produced, partnership approach.

Crisis text message service – Adult Mental Health:

- A new crisis text messaging service is now live. The service is hosted through the support of SHOUT.
- Residents of Shropshire, Telford & Wrekin can text 'STW' to 85258 and they will receive free and confidential mental health support 24/7.

Access and Experience:

- Access to General Practice in STW remains broadly in line with national performance.
- 55% of appointments were delivered within 0–1 days, exceeding the national average of 52%, indicating continued capacity for same-day access.
- 80% of appointments took place within 14 days, compared to 76% nationally, demonstrating sustained performance against national access expectations.
- The GP Patient Survey 2025 shows 75.2% of patients reporting a good overall experience, consistent with the national average of 75.4%, reflecting stable patient confidence in local services.

Workforce and Capacity:

- Workforce indicators suggest that system-level GP capacity pressures remain comparable to the national picture.
- The proportion of patients registered with practices exceeding 4,000 patients per fully qualified GP is 10.2%, slightly below the national rate of 10.3%, indicating STW is not disproportionately exposed to workforce pressure.

Demand and Activity:

- Appointment volumes remain stable at over 250,000 appointments per month, reflecting sustained demand across system.
- Digital and telephone consultations now account for 47% of all activity, supporting same-day access while helping to manage workforce and estate constraints.
- Escalation protocols continue to be used selectively in a small number of practices that are experiencing sustained demand pressure.

Digital Access and Records:

- Digital enablement across Primary Care continues to improve and is largely compliant with national requirements.
- 100% of practices now have GP Connect access enabled for both HTML and structured records.
- 98% of practices can update records via GP Connect.
- Prospective Records Access is enabled in 78% of practices, with further improvement expected.
- Online consultations are switched on in 76% of practices, providing an expanding route of access for patients.

Service Transformation:

- Optometry First continues to reduce demand on General Practice, with minor eye condition referrals to GPs down 18% since full rollout across 10 PCNs.
- The Community Pharmacy cardiovascular pilot remains active, with 76% of participants achieving improved blood pressure control and 92% patient satisfaction, supporting prevention and early intervention.

Next Steps

Practice Level Support (PLS):

- Evaluation of 8 pilot practices concluded in November, focusing on resilience, access, and workforce sustainability, with shared learning informing future support.

Workforce:

- Recruitment through the Additional Roles Reimbursement Scheme (ARRS) continues, with 28 new posts in development.
- A regional retention forum took place in late November to review flexible career options and retention approaches.

Digital Resilience and Access:

- Testing of new digital backup infrastructure is underway in two practices.
- Cybersecurity and data awareness sessions for Practice Managers are progressing, with completion expected by end of year.
- Targeted support will continue to increase Prospective Records Access and online consultation utilisation.

Prevention and Community-Based Care:

- Evaluation of the cardiovascular pharmacy pilot will inform future alignment with the NHS Health Check digital pathway.

Current Activity

ShropCom has consistently supported partners in addressing increased demand while remaining committed to expanding community services and achieving the key milestones set out in the Winter Plan:

- We are continuing to deliver our financial plan. The Trust is reporting an adjusted financial surplus of £1,523k after eight months of the year, which is a favourable variance to plan of £274k.
- Percentage of patients waiting less than 18 weeks – Referral to Treatment (RTT) has shown an improvement from 80.47% in September to 82.46% in October (unvalidated).
- Children's Speech and Language Services have seen a steady improvement of waiting lists. A combination of early intervention programmes, holiday clinics and revalidation of waiting lists has resulted in a drop in children and young people (CYP) waiting over 52 weeks and an improvement for those waiting over 40 weeks.

Quality:

- The falls per 1,000 occupied bed days has fallen for the second consecutive month to 3.60 and is below our target of 4.0. Plans are in place to reduce this further. Several initiatives have been introduced, including:
 - Extending the Urgent Community Response (UCR) team hours to midnight daily.
 - Assigning Integrated Front Door practitioners at PRH and RSH Emergency Departments from 08:00–20:00 every day.
 - Expanding Care Transfer Hub and Therapy Hours to 08:00–20:00, seven days a week.

The second Group Model staff engagement session was held on Wednesday 19 November 2026 at AFC Telford. This provided a valuable opportunity to exchange ideas and collaboratively co-design some of our workstreams, identifying how we can enhance pathways for both patients and staff together.

The second quarter national NHS Oversight Framework (NOF) results have been published with ShropCom retaining our overall NOF rating of 2 (above average). ShropCom also achieved an Oversight rating of 1 (high performing) for finance and productivity.

Flu vaccination uptake - 47% of staff have received their flu vaccination.

Next Steps

- Developing the medium-term plan (5 years) for ShropCom and aligning activity with the Group.
- Continuing to reduce waiting times of over 52 weeks for community services.
- Collaborating with system partners in Shropshire as part of phase one of the National Neighbourhood Health Implementation Programme (NNHIP).
- Group Model Engagement: Additional sessions are scheduled, focusing on smaller, specific staff groups and services to agree on actions and plan next steps.
- A staff engagement survey will be issued to gather feedback on the new Group name.
- Flu vaccination uptake: Further staff engagement is planned to promote uptake.

Current Activity

NHS Government Reset Programme:

- A local voluntary redundancy scheme for staff across NHS Shropshire, Telford and Wrekin and NHS Staffordshire and Stoke-on-Trent launched on 1 December and will close on 22 December 2025.
- A formal Management of Change consultation will open in early January 2026 which will include Senior Leadership Teams (Bands 8C to 9 + VSM2) from across the wider cluster.

UEC/Winter pressures:

- The system is working hard to mitigate winter pressures (e.g. an early rise in flu cases, high number of respiratory-related emergency department (ED) attendances, IA (17-22 Dec), and is focusing on improving patient flow, enhancing community care and preventative measures like vaccinations. Helping to reduce unnecessary hospital admissions and speed up discharge processes.
- Key initiatives include the British Red Cross ED Support Service, Shrewsbury PCN's Winter Wellness Clinic, the expansion of the Urgent Community Response (UCR) teams, as well as encouraging the public to support discharge if loved ones are ready to go home.

Lung Cancer Screening:

- On 1 December, a new Lung Cancer Screening (LCS) Programme was launched for people living in STW. The aim of the LCS Programme is to identify lung cancer early, often before symptoms appear, when treatment is more effective and more lives can be saved.

Locally Commissioned Services (LCS) Review:

- NHS STW is reviewing Locally Commissioned Services in General Practice to ensure funding is fair, sustainable, and better matched to local population needs. LCS in STW currently vary significantly due to historical development. Introducing a more consistent approach will improve fairness in patient access, reduce differences in services between practices, align provision with national best practice, and help ensure long-term financial sustainability.

Next Steps

Reset Programme:

- Staff who have submitted applications for voluntary redundancy will be informed of decisions in early January 2026. A selection process for a cluster Senior Leadership Team will take place in early March.

Lung Cancer Screening:

- The programme will start in areas of highest deprivation, lung cancer prevalence and smoking rates, and will be rolled out to other areas across the county over the next 4 years. It forms part of a national NHS programme which is aiming to achieve 100% coverage across England by 2029.

LCS Review:

- The review is being conducted with GP leaders and the Local Medical Committee (LMC), with a new service model planned for implementation in April 2026. A more detailed Case for Change document will be shared with stakeholders shortly.

Promotion of Public Health Messages:

- Public Health and NHS leaders are urging simple steps to help prevent spread of winter illness- get vaccinations if eligible, clean hands regularly, open a window when inside, and stay at home when unwell - to curb rising winter illness admissions.

Thank you

For more information, please contact:
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