HEALTH AND WELLBEING SCRUTINY COMMITTEE **21 OCTOBER 2025**

BRIEFING ON STSFT ONLINE PATIENT COMMUNITY: *STSFT Connect*

1. PURPOSE OF THE REPORT

1.1 To provide the Health and Wellbeing Scrutiny Committee with an overview of a new online patient community set up by South Tyneside and Sunderland NHS Foundation Trust (STSFT).

2. INTRODUCTION AND BACKGROUND

2.1 Involving patients, the public and service users is a legal responsibility for all NHS Foundation Trusts as outlined in Section 242 of the NHS Act. STSFT recognises that without insight from those who use, or may use, its services, it is difficult to make fully informed decisions about service improvements.

2.2 In line with the STSFT's vision for excellence, the development of a new online patient community is a key objective of the Trust's Communications and Involvement Strategy (click here). It builds on strong foundations already in place for communications and engagement and aims to support and embed patient and public involvement as part of core organisational business.

2.3 By involving and listening to people in a more systematic and strategic way, it will help to embed co-design and co-production into the Trust's ways of working and ensure the focus is on things which matter most to patients and the local population. It aims to encourage and empower people to have a genuine say in how care is delivered and in shaping services based on local needs.

3. CONTEXT – PATIENT AND PUBLIC INVOLVEMENT

3.1 The recently published NHS 10-year plan 'Fit for the Future' (click here) echoes the importance of a commitment to ongoing public involvement and acknowledges that this should not be a one-off event, but a continuous process to help the NHS innovate and improve.

3.2 STSFT's new online patient community signals the Trust's commitment and strategic intent to embed the public voice in its decision-making by working with people and communities to co-design services as part of 'business as usual'.

3.3 Members are asked to note that this is just one of the ways the Trust aims to improve patient and public involvement. Work is also taking place with the voluntary and community sector and other key partners across the City to reach out to people, in situ, within their own communities for feedback about services, focussing on those who are more likely to be digitally excluded.

3.4 The long-term aim, along with the Trust's new online patient community, is to embed routine cycles of proactive face-to-face and digital involvement to make it as easy as possible for people to give feedback about services.

4. BEST PRACTICE STANDARDS

4.1 Statutory guidance *'Working in partnership with people and communities'* was published by NHS England and the Department of Health and Social Care (DHSC) in July 2022. It describes not only the legal duties placed upon NHS organisations around involvement, but also the need for a 'blended' approach to working in partnership with patients, service users and local communities.

4.2 It outlines best practice approaches (Figure 1) to patient and service user participation. Each approach offers a different level of involvement, from simply sharing information, to more comprehensive ways of working such as co-design and co-production, which give a greater opportunity for people to influence.

4.3 There is no 'one size fits all' approach. The various ways to involve people will depend on the context and scale of a piece of work and the stated objectives. Different elements of activity may be pertinent at different stages and may overlap.

4.4 STSFT already has a number of well embedded ways of capturing patient and service user feedback and uses several of the 'best practice' involvement approaches as outlined by NHS England (see Figure 1).

Figure 1: Different ways to involve people (STSFT best practice approach):

Inform	This is how the Trust shares information about its services.	• PR and social media • Stakeholder communications • Internal communications • Patient information • Digital footprint (website and Podcast)
Engage	This is how the Trust listens to peoples' feedback about experiences of services in order to gather insight.	• Regular stakeholder meetings (HWB / Scrutiny) • Healthwatch involvement • MP meetings • Monitoring of online feedback • Community engagement activities • Patient experience feedback / surveys • Perceptions research
Co-design	This is how the Trust involves people who have lived experiences of services to help design how things could work better and improve.	• Existing patient forums and user groups • Healthwatch involvement • Council of Governors involvement • Patient Experience Group • Learning from our Patient Advice & Complaints

		service and our Patient Safety Partners • **Online patient community STSFT Connect**
Co-production	This goes one step further. People are around the table as equal partners and involved from start to finish (not when a potential solution is defined).	• Limited / one off activities (i.e. new Eye Hospital) • Staff Shared Decision-Making Councils • Ongoing staff engagement programme • **Online patient community STSFT Connect**
Consult	This is where the NHS asks for peoples' opinions as part of a formal public consultation process led by commissioners.	• For example, the Path to Excellence programme.

5. OUR NEW ONLINE PATIENT COMMUNITY: STSFT CONNECT

5.1 The Trust's online patient community will increase the opportunity for much better co-design and co-production of services. It is a digital engagement tool which provides a moderated and controlled environment for feedback. It is a branded 'members-only' online space where the Trust can engage with patients and carers and involve them in how to improve services. It will allow the Trust to gather insights to help it test, learn and make decisions with much better involvement from people and much greater confidence.

5.2 Views and opinions are gathered through discussion threads, polls, videos and online surveys with fresh and relevant content uploaded frequently to ensure high levels of engagement.

5.3 Examples of how the Trust plans to use its new online community include:

- Testing service improvement ideas
- Involving people in setting key Trust priorities
- Perceptions tracking on a periodic basis on satisfaction and experience
- Feedback on Trust campaigns, initiatives and communication.

The new online community also provides a platform to seek interested members to become more involved in specific pieces of detailed co-production work. This will support the priorities of the Trust's Patient Experience Group to involve people in quality improvement projects, as equal partners, to discuss:

- Condition specific pathways
- Service re-development
- Improvements related to protected characteristics.

5.4 The name of the community ***'STSFT Connect'*** was developed by involving local people in the design and concept phase with over 50% of respondents to an online survey feeding back that 'Connect' would encourage them to sign up and the design would catch their eye (see below).

6. RECRUITING MEMBERS

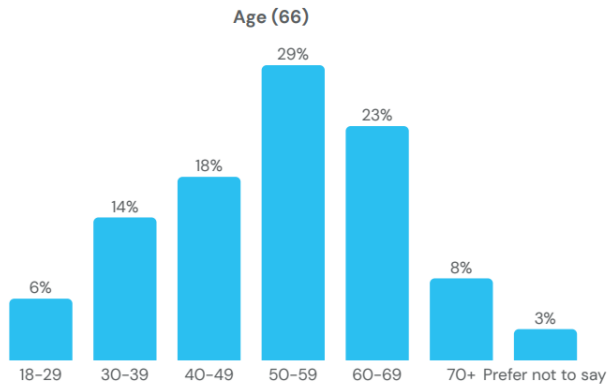
6.1 The first step in setting up the Trust's online patient community has been the launch of the recruitment phase. There is no set size or recommendation on 'how big' an online patient community should be. The most important aspect is that the online community is a place where people actively engage and get involved to give views. We aim to recruit around 500 people over an initial 12-month period.

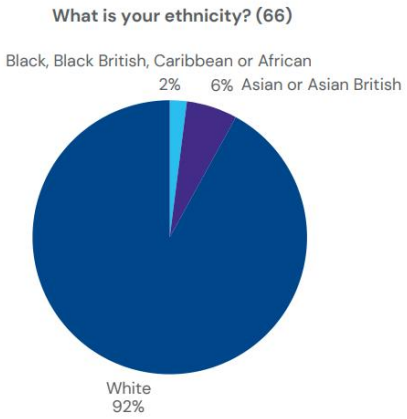
6.2 The STSFT Connect platform (click here) went live in August 2025 and at the end of September had 66 members. As of 13 October, the membership had grown further to 107 members. Members of the online patient community are being recruited in several ways:

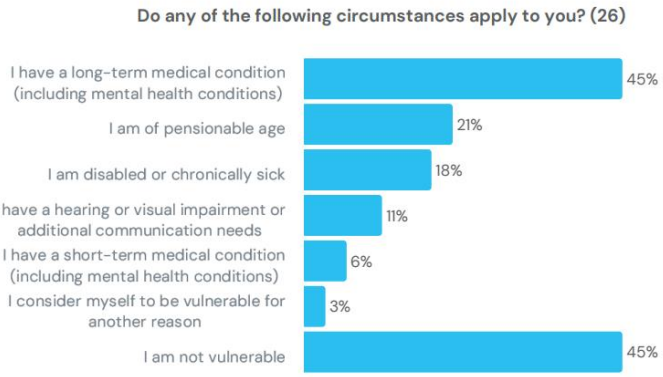
- With support from our key stakeholders including VCS partners
- Via targeted direct patient correspondence (letters and text messages)
- Via targeted marketing materials at patient touch points around Trust sites
- Via targeted recruitment to include vulnerable and 'hard to reach' groups and those with protected characteristics
- Via our FT membership database to encourage eligible FT members to join and become more actively engaged with the Trust
- Via social media, PR and digital activity.

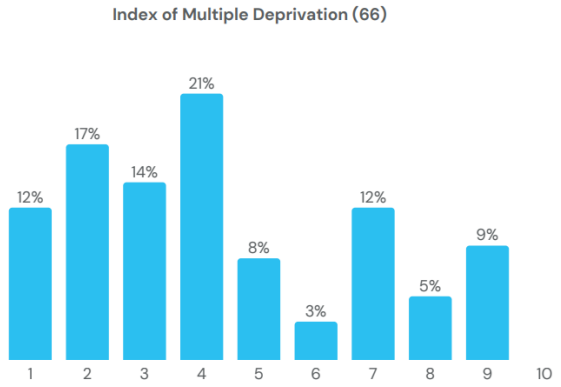
6.3 STSFT Connect uses a reward system allowing members who are active to collect points the more they engage and give the Trust their views. The more points members earn, they can get the chance to enter a prize draw on a quarterly basis. This is known to boost participation in consumer surveys.

6.4 Active recruitment is continuing to take place over the autumn months and will target local adults (18 years +) and their carers. The profile of members as at the end of September is shown in the graphics below:









Decile	Decile description	Member count
1	10% most deprived	8
2	10% to 20%	11
3	20% to 30%	9
4	30% to 40%	14
5	40% to 50%	5
6	50% to 60%	2
7	60% to 70%	8
8	70% to 80%	3
9	80% to 90%	6
10	10% least deprived	0

7. AREAS OF FOCUS

7.1 In addition to the areas outlined in section 5.3, the Trust will also focus on two specific areas over the coming 12 months. These are:

7.1.1 Feedback on '***how to improve peoples' experiences of waiting for care'.*** This is a key issue for people on waiting lists and the Trust will use its online community to ask patients and carers:

- what would make a difference to their experience while waiting for care
- how they want to receive info from the Trust and how often
- what level of 'customer service' they expect while waiting for care
- how the Trust can better support them while waiting
- how they use the NHS App and if they need any help on how to use it.

7.1.2 Feedback on how the Trust can '**reduce waste and be more efficient'.** The NHS Operational Planning Guidance 2025/26 emphasises the need for *'open and ongoing conversations with the public about how to improve productivity, reduce waste and tackle unwarranted variation in NHS services.'* STSFT Connect will ask patients and carers:

- how the Trust can be more efficient in the way it runs services
- where things are repeated unnecessarily in their care pathway
- what they have seen that wastes time, effort or money
- for their ideas on how the NHS can be more productive

8. NEXT STEPS

8.1 The Trust has been able to develop its online patient community thanks to funding secured from its dedicated STS Charity. This will support a 12-month pilot (August 2025 to July 2026) to demonstrate proof of concept in order to embed the online patient community into the Trust's business and operational processes moving forward.

8.2 Feedback will be triangulated and shared throughout the pilot via the Trust's internal governance systems to embed involvement at every level in the organisation. Themes and trends will be analysed to help to inform quality improvement priorities across the Trust based on what is important to local communities.

8.3 A robust evaluation will take place at the end of the pilot to measure engagement and feedback from members and, most importantly, how this is being used to drive improvements at the Trust.

9. RECOMMENDATION

9.1 The Health and Wellbeing Scrutiny Committee is asked to note and comment on the contents of the report.

9.2 Members are also encouraged to sign up to and share information about the Trust's new online community using the link below:

https://stsftconnect.explainonline.co.uk/

Liz Dawson
Director of Communications and Involvement
South Tyneside and Sunderland NHS Foundation Trust

Contact Officer: Nigel Cummings, Scrutiny Officer
07554 414 878
nigel.cumings@sunderland.gov.uk

NHS
South Tyneside and Sunderland
NHS Foundation Trust

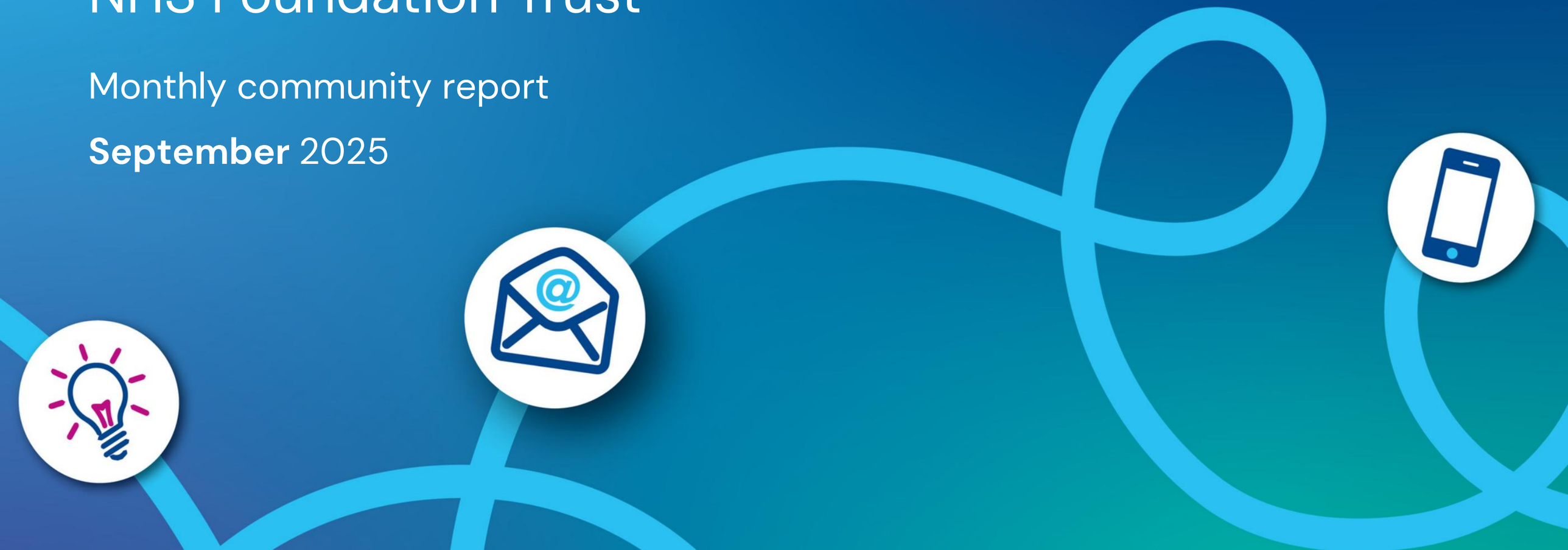
Connect

explain

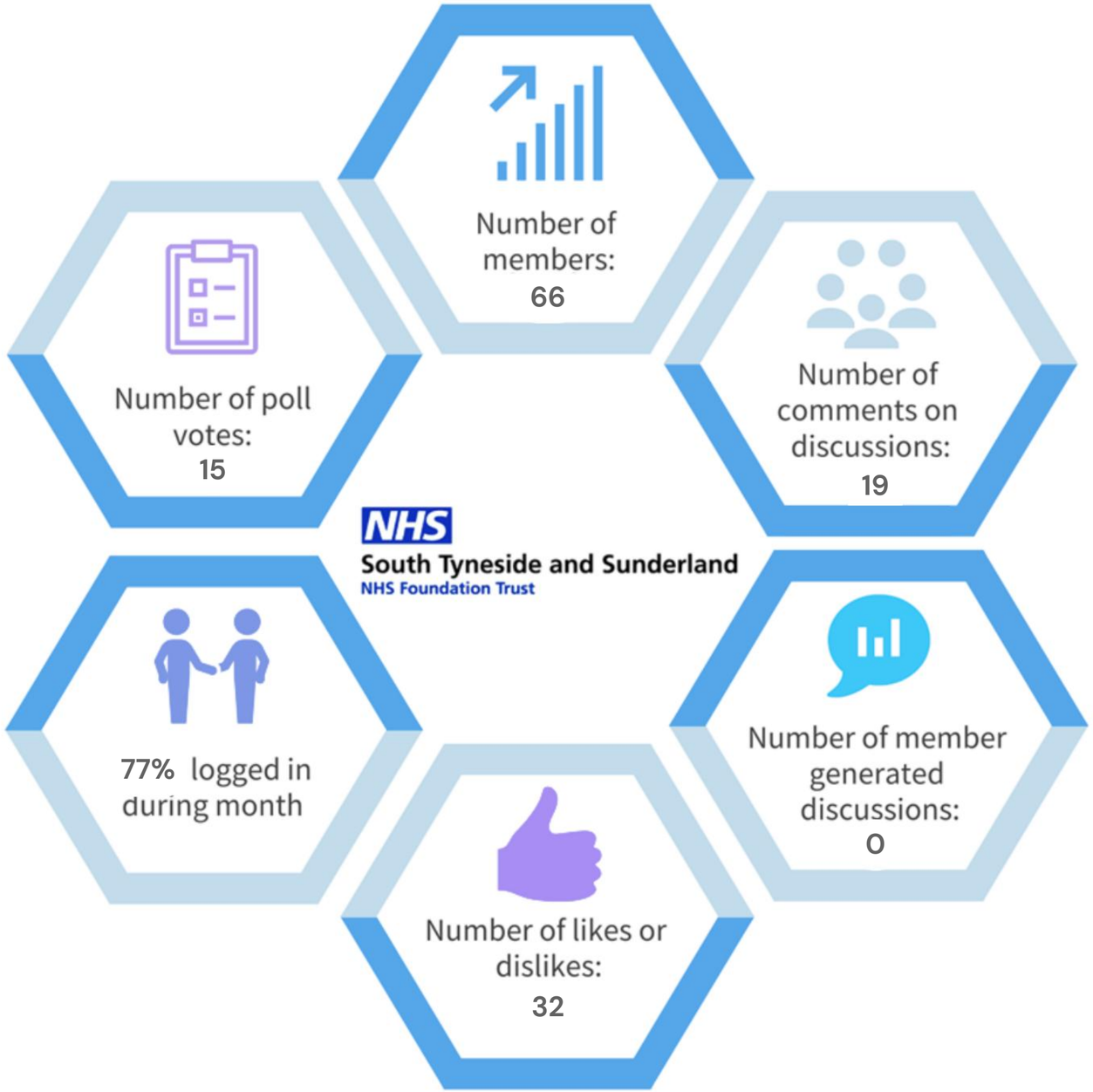
South Tyneside and Sunderland NHS Foundation Trust

Monthly community report

September 2025



Key stats – September



Member profiling

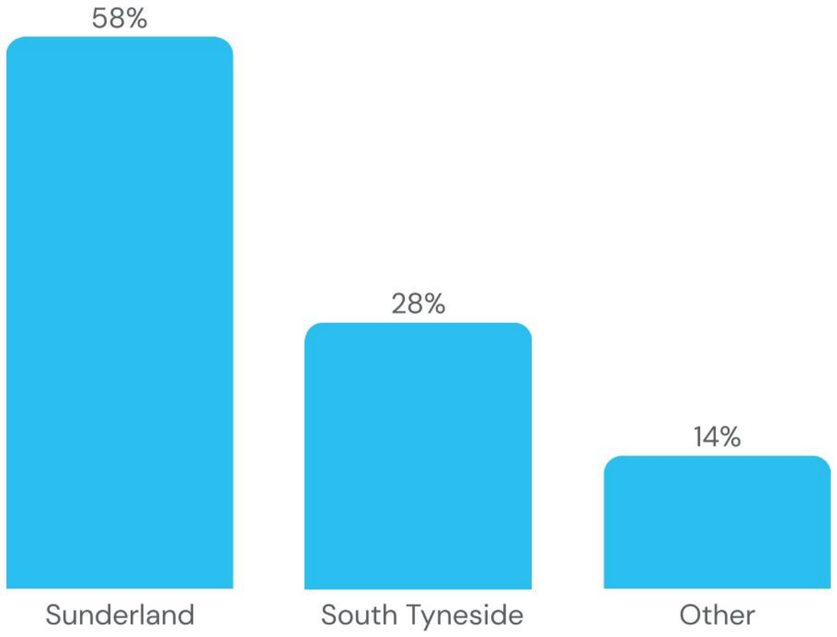
A summary of our members' profiling data, please consider that not all members have answered all the profiling questions.

Member profiling

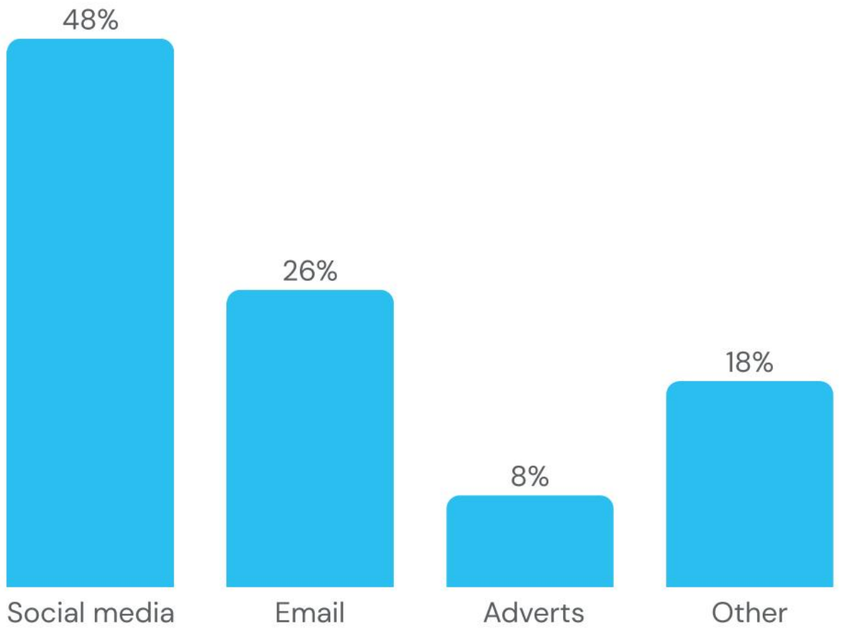
In September, slight changes were noted in profiling statistics due to new sign ups. For example, 58% of members live in Sunderland and 28% lived in South Tyneside, with 14% of members selecting ‘other’, with other options including: Washington, Morpeth, Durham, Gateshead, Seaham and Washington.

Further changes were seen in how respondents heard of the STSFT community, with 48% now hearing via Social media, and email dropping to 26%, followed by 8% seeing adverts about the community. Of the 18% who selected ‘Other’, options selected included: Trust bulletin, word of mouth, staff intranet, during a patient experience group meeting and intranet.

Which of the following areas do you live in? (65)



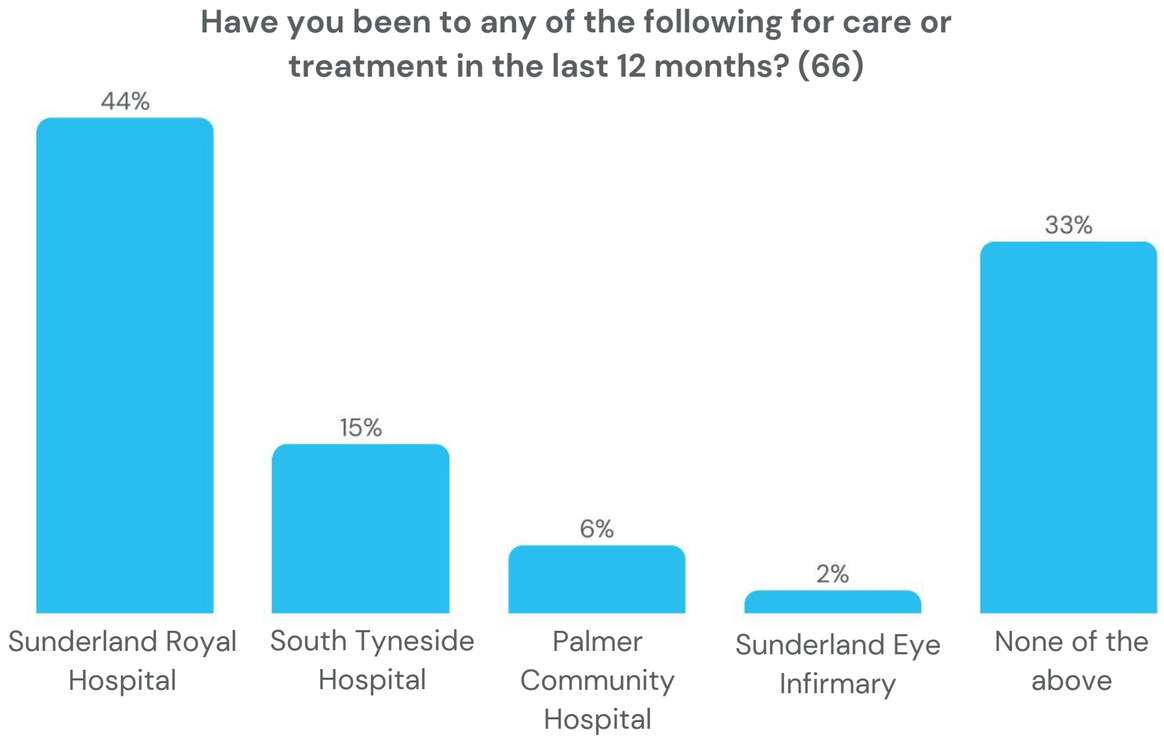
How did you hear about STSFT Connect? (66)

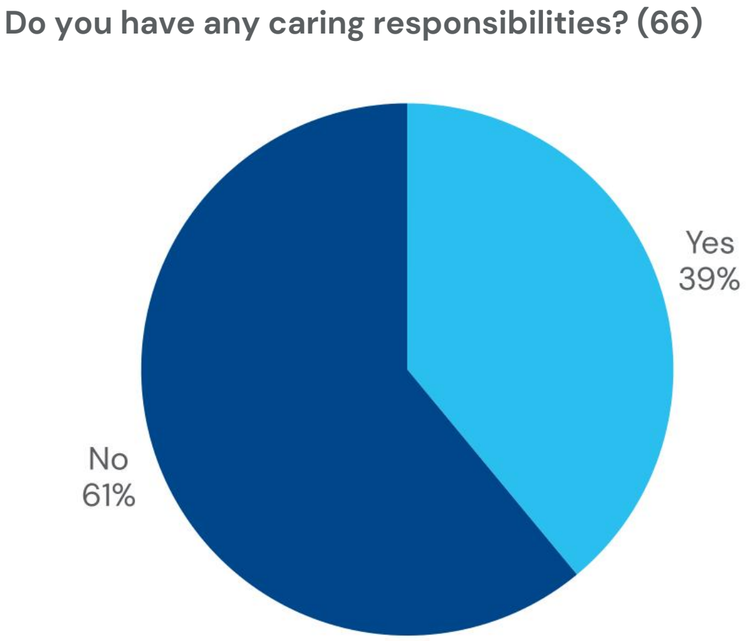


Member profiling

Further changes were seen in member profiling relating to locations of care, with members having visited Sunderland Royal Hospital rising from 31% to 44%, Palmer Community Hospital visits dropping from 12% to 6%. Members who had visited South Tyneside Hospital for care in the last 12 months rose by 3% to 15%, and Sunderland Eye Infirmary halved to 2%.

Again, slight changes were seen in response to caring responsibilities, with 39% of members stating in September that they having caring responsibilities, while 61% of members stated that they do not.



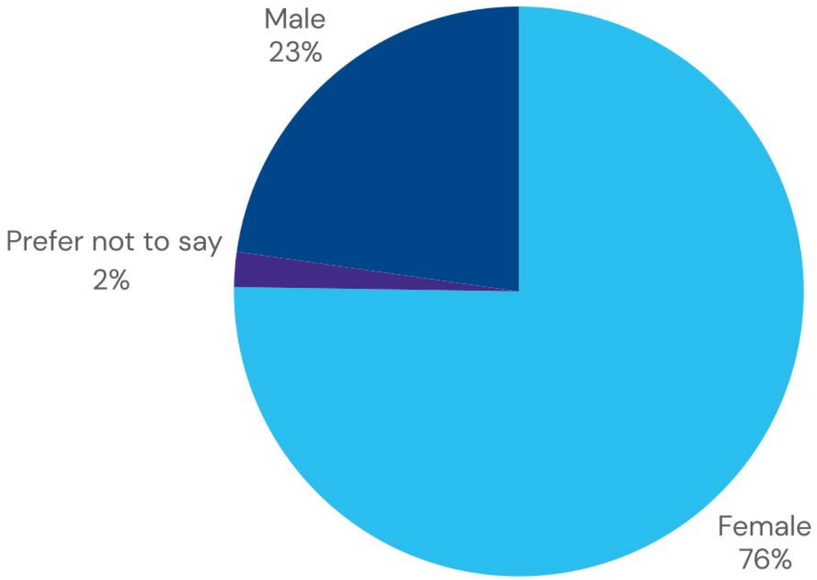


Member profiling

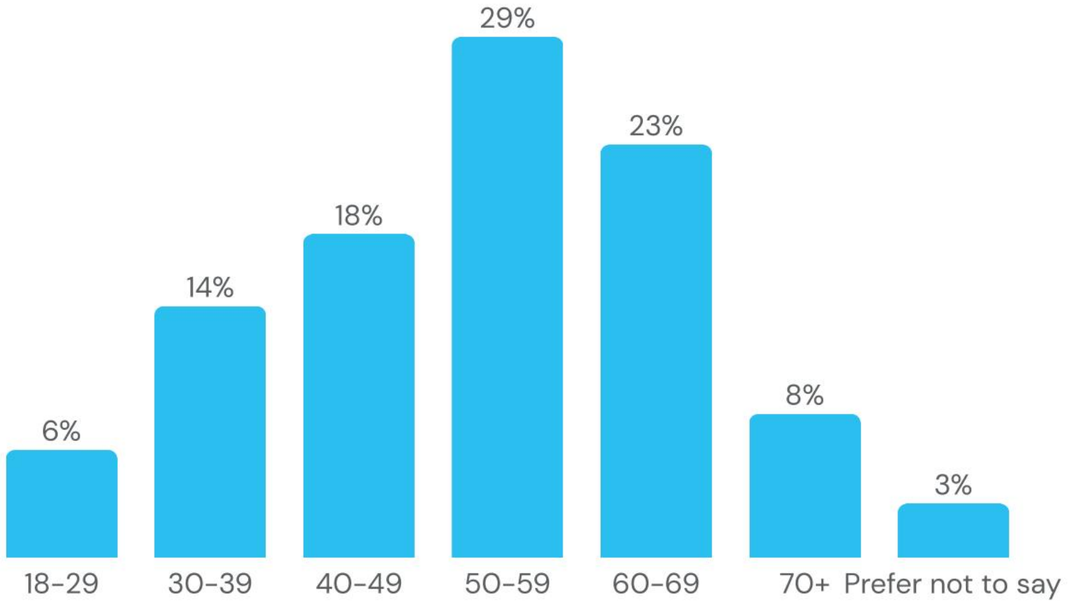
Slight changes were notified in September's gender profiling data, with Female members rising to 76% from 69%, and male members decreasing to 23% from 27%. Those who answered prefer not to say halved to 2%.

Most members on STSFT Connect continued to be between 50 and 59 (29%). 18% of members are aged between 40-49, 23% are aged between 60-69, 14% are aged between 30-39, and 8% are aged 70+. The least represented age bracket on the community is those aged 18-29 (6%).

Please select the gender you identify with (66)



Age (66)

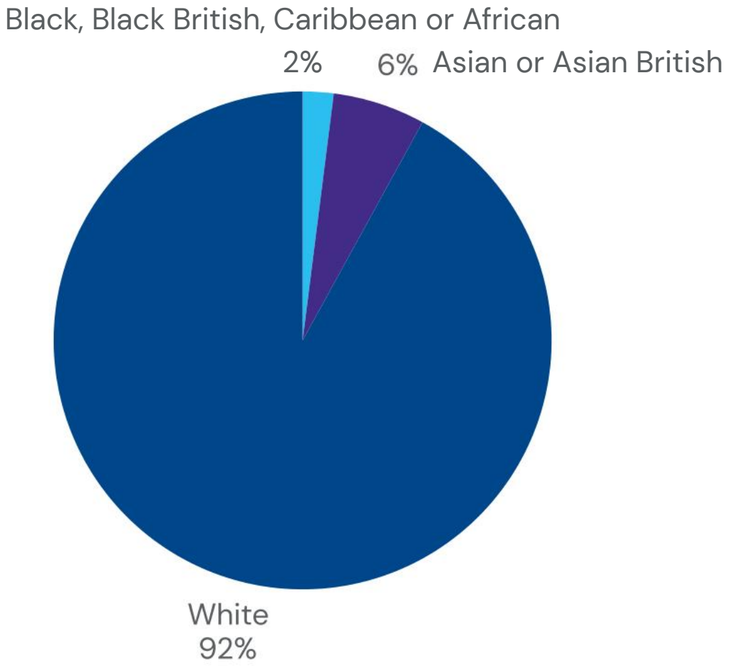


Member profiling

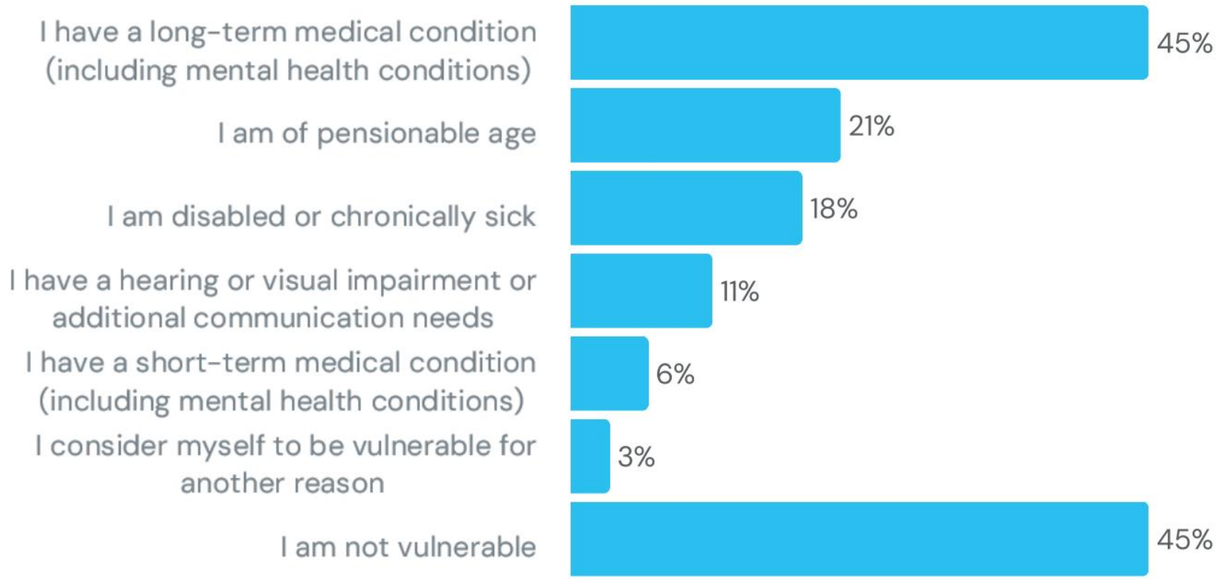
In terms of ethnicity, 92% of community members identify as White, 2% as Black, Black British, Caribbean, or African, and 6% as Asian or Asian British.

45% of members report having a long-term medical condition, while 6% have a short-term condition. Additionally, 21% of members are of pensionable age, 18% identify as disabled or chronically sick, and 11% have a hearing or visual impairment or other communication needs. 3% consider themselves to be vulnerable for another reason, while 45% don't consider themselves vulnerable.

What is your ethnicity? (66)

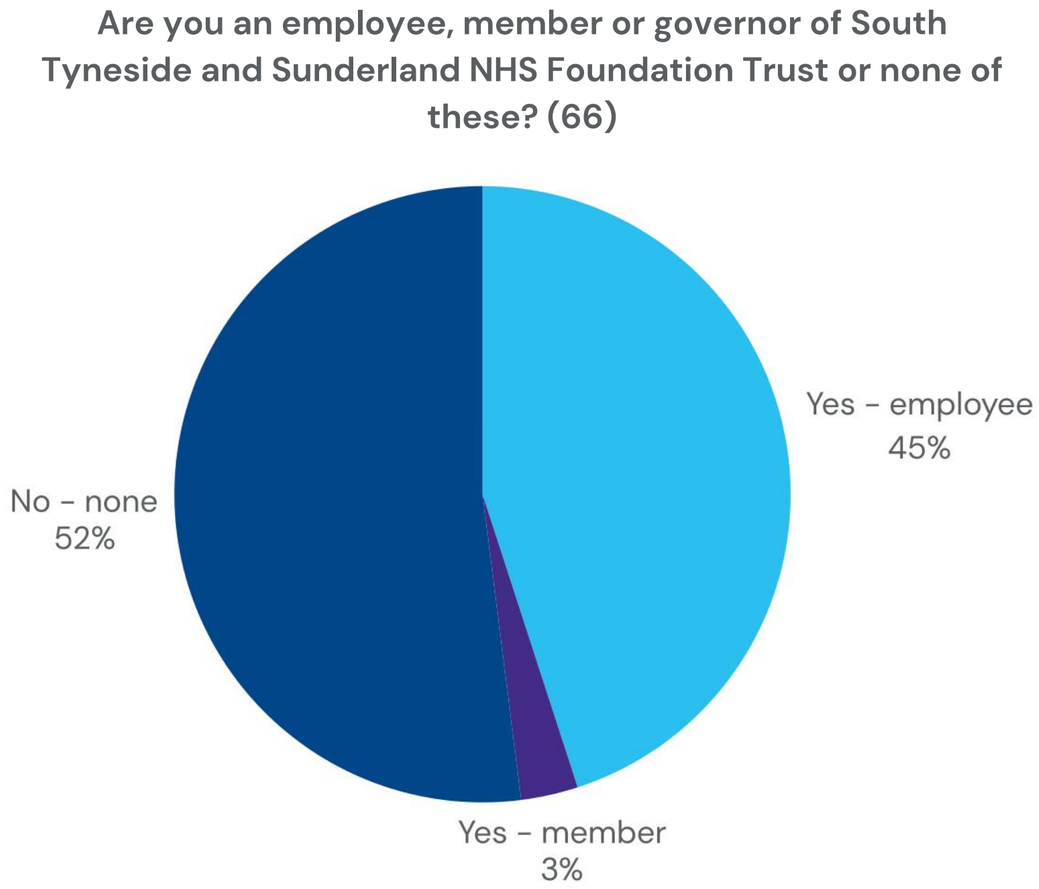


Do any of the following circumstances apply to you? (26)



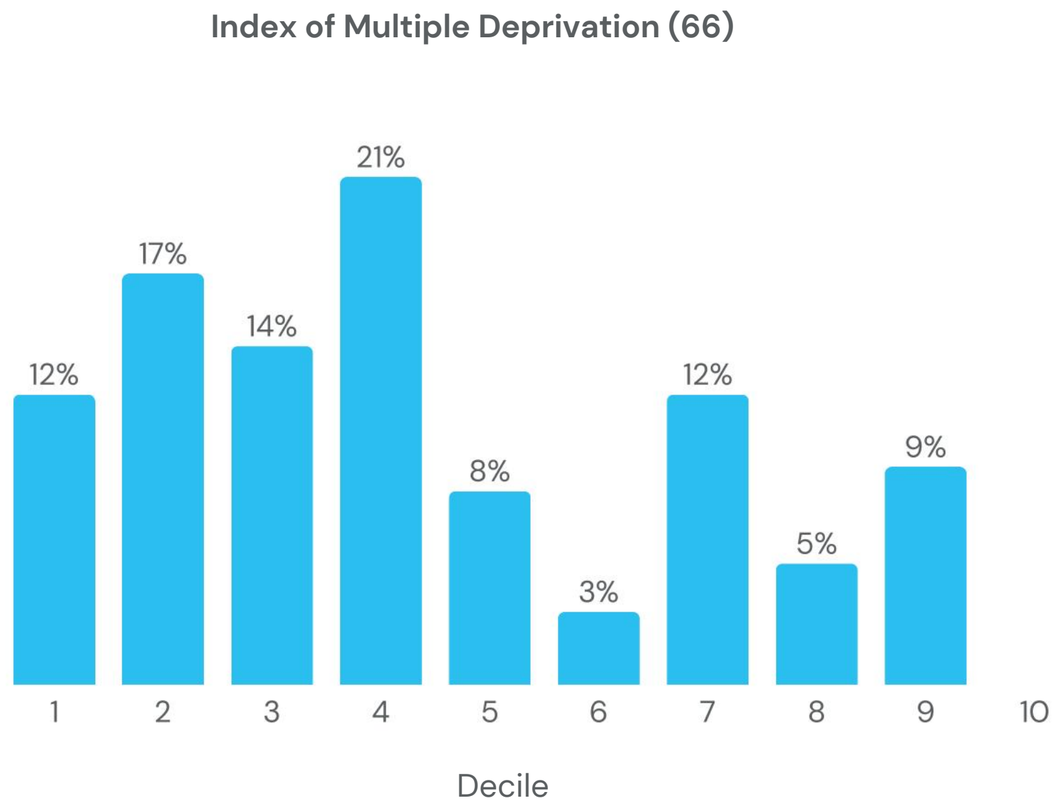
Member profiling

Considerable changes to the profiling relating to employement, membership or governorship of STSFT were noted this month, with 52% of members reporting that they were none of the above, an increase of 14%. In addition, those reporting to be an employee of STSFT fell by 13%, and finally membership falling by 1% to 3% overall.



Member profiling

In September, the distribution of members by Index of Multiple Deprivation (IMD) showed that deciles 2, 3 and 4 were most represented among members, with 5, 6 and 8 least represented. In line with the previous month, no members were identified within decile 10.



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Content from September

An overview of the content seen on the community in September

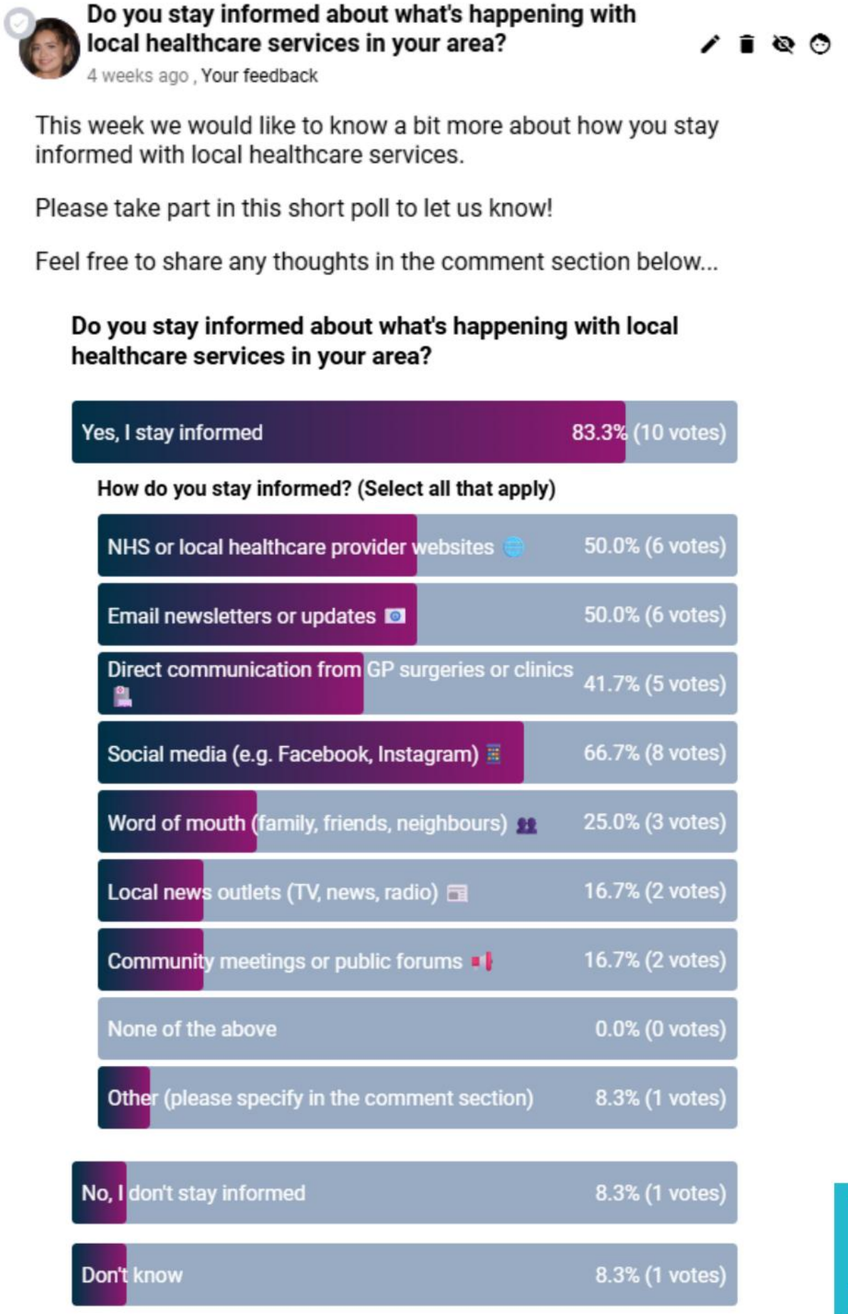
Do you stay in formed about what's happening with local healthcare services in your area?

At the start of September, members were asked whether they stayed informed about what's happening with local healthcare services.

As shown in the poll, 83% of respondents answered that they did stay updated, with most votes cast for Social Media as the method for staying informed (67%), followed by NHS or local healthcare provider websites and Email newsletters of updates (50%).

Other methods included Direct communications from GP surgeries (42%), word of mouth (25%), Local news outlets and Community meetings (17%).

Overall, 8% of members answered that they do not stay informed, or don't know.



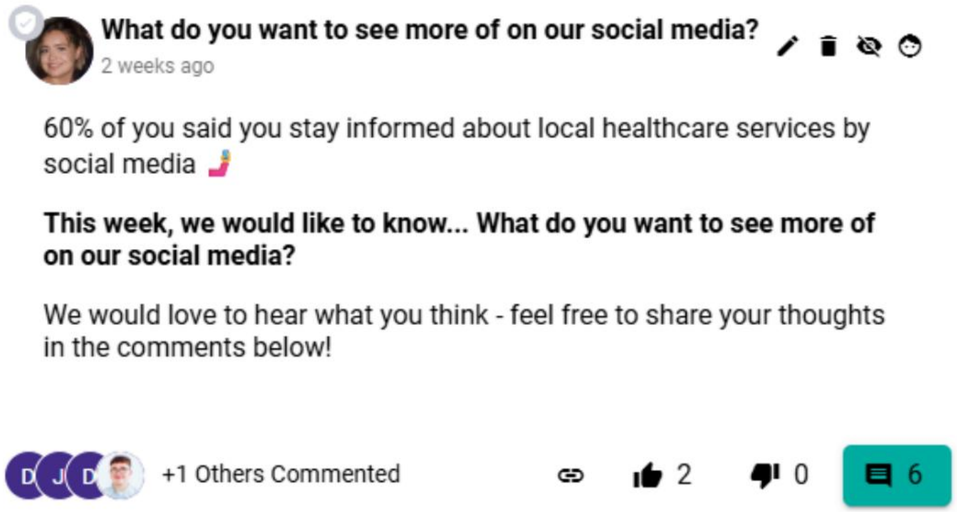
What do you want to see more of on our social media?

The second post in September asked what members want to see more of, suggestions included updates on new technology, medication and changes due to building work. Others suggested information on waiting times and travel requirements for certain clinics.

"I think updates on the trust services. Explain to people why they might have to travel further to their health appointments to get the most appropriate care. People still are unhappy about having to go from Sunderland to South Tyneside - tell them why this is happening and the benefits to them"

"I would like to see information around updates of new technology or medication that is helping patients, changes due to building work that is happening"

"Information on waiting times for departments i.e 12w wait from referral to appointment"



What do you think we could do to make people think twice about smoking and vaping on-site?

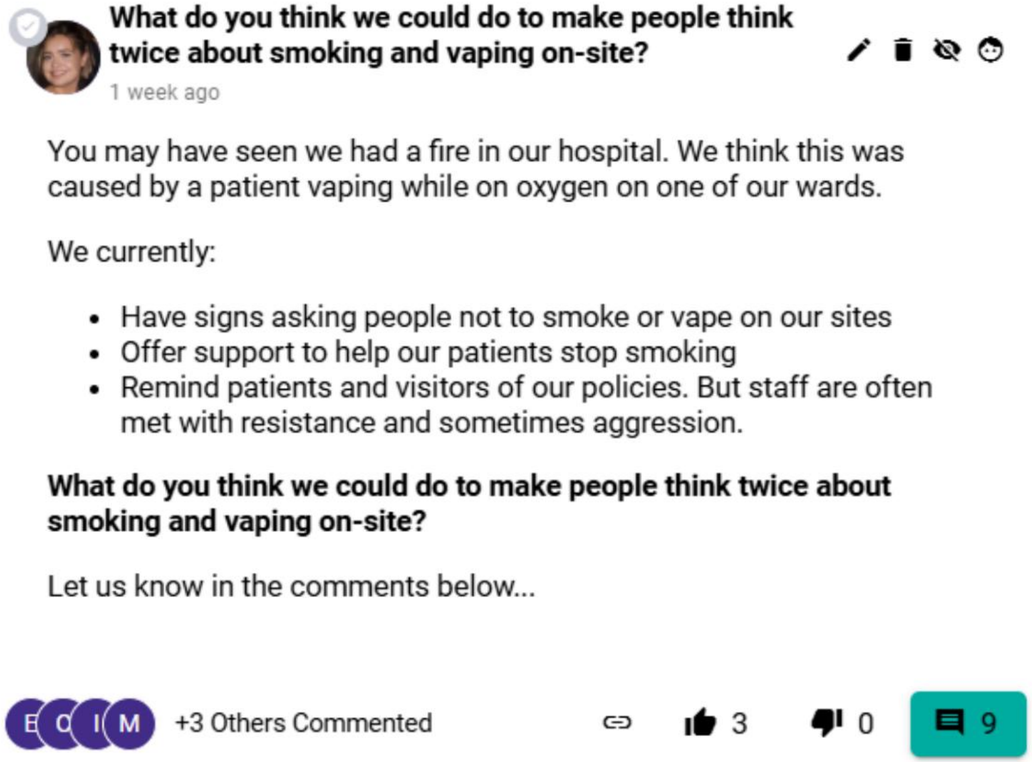
Given a recent incident in one of the Trust's hospitals, the third post on the community asked members what they think the Trust could do to make people consider their smoking/vaping on-site.

Members felt strongly about this issue and put forward several suggestions, including the use of strong visual deterrents such as impactful imagery, physical changes like relocating designated smoking areas away from prominent locations to discourage casual smoking, increased enforcement through dedicated staff, and enhanced education campaigns, including targeted interventions.

"I know it would be difficult, but people need to be moved on. I think the only deterrent would be for the situation to be properly 'policed' with someone on site dedicated to do this, whether it be security or someone else"

"It's often people who have very obvious health conditions, such as amputees that are smoking at the main entrance. Maybe enrol them into an educational session on their ward if smoking is observed or suspected during their stay at hospital"

"To try to also drive key messages about the health impacts of smoking, then whatever designated areas are provided, should be plastered with posters of real patient cases that demonstrate the state of lungs of smokers, associated illnesses, lung removal operations, life expectancy etc"



No Excuse for Abuse - Help shape our campaign by taking the survey

Having seen a recent rise in violence and aggression towards staff, South Tyneside and Sunderland NHS Foundation Trust is working on a campaign to remind patients, carers and the wider community that abuse will not be tolerated.

As part of development of this campaign the trust would like feedback from the community on the concepts they have created. This survey was hosted externally by STSFT, though one member shared their thoughts in the comments, with a preference towards concept 3. Please refer to the next page for the full-size concepts.

"I think concept 3 is much more hard hitting (which I think it needs to get). Concept 1 is my second choice as the colours are more impactful but option 2 I think works least of all"

No Excuse for Abuse - Help shape our campaign by taking the survey

6 days ago

We have seen a rise in violence and aggression directed towards our staff recently... This is not ok.

We are working on a campaign for patients, carers and the wider local community to remind them that we will not accept any sort of abuse.

This campaign will include posters and videos. We will use real stories from our staff to highlight what they have had to deal with. Our aim is to make people think twice about how they behave.

You can help us with this campaign by giving us your feedback on concepts we have created. You can do this by clicking 'start survey'.

See the comments below for a preview of the concepts before taking part in the survey.

Please note, the images used in these concepts are not final, the chosen concept will be updated with pictures of our own staff.

We look forward to hearing your thoughts

Start Survey

Concept 1

Concept 2

Concept 3

No Excuse for Abuse – Help shape our campaign by taking the survey

Concept 1

Concept 2

Concept 3

Author: Scarlet Morgan
Figure check: Emily Stephenson
Final check: Ross Palmer

Explain Market Research
0191 261 5261
info@explainresearch.co.uk
@explainMR