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**Membership and Engagement Strategy**

**2022-2027**

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# **Why we need a strategy**

East Kent Hospitals University NHS Foundation Trust (EKHUFT) is **one of the largest hospital Trusts in England, with five hospitals and community clinics serving a local population of around 695,000 people.**The membership currently stands at 14,926 of which 6,640 are staff members.

This strategy outlines the Trusts vision for membership over the period 2022 - 2027 and focuses on People and Partnerships. We wanted to work with our members to build a strategy that incorporates these objectives and aligns us with the “We care” strategy.

Through this strategy we will set out the methods that will be used to develop an effective, responsive and representative membership that will assist in ensuring the Trust “Improves the quality of life for the communities we serve”.

Through our membership, the Trust can be closer to the people who access our services and more accountable to them than ever before. By implementing a Membership strategy, we intend to see our members becoming an increasingly active and valued component of the Trust, building on existing partnerships and supporting new ones.

The current age demographics of EKHUFT can be seen from the graph below. As seen we actually have from the existing membership a wide range of age groups. This changes when we then break it down into constituencies as seen in Appendix 1, the aim of this strategy is therefore to look at what we can do to engage with the current membership and to seek out new members that will add value to the Trust.

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 1,433 |
| 30-39 | 3,127 |
| 40-49 | 2,765 |
| 50-59 | 3,108 |
| 60-74 | 3,313 |
| 75+ | 1,171 |

1. **Developing our strategy**

Our members are vital to the development of our strategy and through a consultation we need to manage and capture their views and suggestions for improving and developing our membership over the next five years. Our membership needs to have diversity from and include many types of members such as but not exclusively, voluntary and community organisations so ensuring the voices are heard of everyone in our community is represented.

**Our mission**: *"Improve health and wellbeing"*

**Our vision:***"Great healthcare from great people"*



Our values

* People feel **cared** for as individuals
* People feel **safe**, reassured and involved
* People feel teamwork, trust and **respect** sit at the heart of everything we do
* People feel confident we are **making a difference**

Our priorities

We care about...

* Our patients
* Our people
* Our future
* Our sustainability
* Our quality and safety.

# **Objectives for 2022 - 2027**

This section outlines the membership objectives that we have set ourselves to achieve our strategy; and our priorities for delivery over the next five years, in order to provide focus and clarity. There are three objectives to the 2022-2027 membership strategy

**To improve engagement with members**

**To build a substantial membership that is representative of the communities we serve**

**To effectively communicate with our members, providing them with opportunities to shape our services**

These objectives form the framework by which we hold ourselves to account. They recognise and build on the systems and processes which the Trust has in place to grow, engage and involve its membership.

**Objective 1: To improve engagement with members**

**Aim: For members to feel part of the Trust and be aware of opportunities and how to be involved in helping to improve the way services are provided.**

As a Foundation Trust we are accountable to our local population and an active and engaged membership helps us work together with our communities. We understand that the value of membership is not in the numbers of people who have joined but in the quality of engagement with members. We recognise it is more beneficial to build an engaged and active membership rather than a large but passive one, and this is reflective of how our current members feel.

We want to broaden our membership and include voluntary and third sector organisations this will enable us to build a greater awareness and support from our community. Through innovative engagement approaches we want all our members to feel involved and supported to add value to the Trust; this will also help us to support our governors in representing the interests of members and the public.

We have identified seven priorities that will help us achieve improved engagement with members, these are:

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| **To improve engagement with members** | |
| **Priorities** | Build on our relationship with members to harness their experience and enable them to help improve services |
| Improve and increase community engagement |
| Develop events that are tailored to members |
| Build on relationships that exist with the Patient Experience Team the Trusts Communications and Engagement Team, the Trust Charity, and local organisations |
| Recognise members achievements |
| Encourage members and support them to become governors |

**Objective 2: To build a substantial membership that is representative of the communities we serve**

**Aim: To ensure our membership reflects the broad diversity of our local communities.**

It is important to regularly analyse our membership to make sure we understand its composition and take steps to ensure, as far as possible, it is representative of the people we serve. From our initial analysis on our current membership we can see just in terms of age groups that in fact we are already well diversified and further work is being completed ethnic groupings.

We will strategically align our recruitment and engagement programme to coincide with other key events throughout the year, for example Pride, Black History Month and Mental Health Awareness week. These opportunities will help us to raise awareness amongst seldom heard communities and address under-representation.

We have identified five priorities to support us to deliver objective 2

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| **To build a membership that is representative of the communities we serve** | |
| **Priorities** | Analyse our membership on a regular basis and establish targets for new members |
| Develop relationships with school’s universities and colleges to increase younger people’s representation |
| Increase representation among LGBTQ+ and BAME residents and from other protected characteristics  Increase representation among patients |
| Increase awareness among our staff and the wider health and care community in East Kent |
| Increase representation by people with a learning disability |

**Objective 3: To effectively communicate with members, providing them with opportunities to shape our services**

**Aim: For members to feel well informed and receive communications that are targeted towards their interests.**

Members are a vital link between the Trust and our communities. We want to establish methods for two-way communication and respond to the increased use of demand digital communications methods to meet the expectations of those who interact with us.

We need to adapt our communications to meet expectations and introduce new techniques to enable members' opinions to be heard.

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| **To effectively communicate with members, providing them with opportunities to shape our services** | |
| **Priorities** | Continue building and maintaining an accurate database |
| Identify opportunities and establish performance metrics for two-way communication between members and governors |
| Determine and provide appropriate information to members  Communicate the benefits of membership  Target communications towards audiences we want to increase |
| Introduce a regular Membership e-Bulletin that is member focused |
| Expand our social media presence |
| Explore the use of digital platforms to communicate with members |

# **Our Members and the Landscape**

The Trust covers a broad geographical catchment area however, our patient and carer population must be reflected in our membership base and we must draw on the experience of people who access the full range of services we provide.

Our members join the Trust to have their voices heard and to help us better understand the views of those who access our services so that we can improve the quality, responsiveness and development of services.

Members may only join the Trust in one category of membership. No skills or experience are required to be a member of our Foundation Trust but members should be interested in our services and compassionate towards the people who access them. We are committed to encouraging everyone who is eligible to become an active member of East Kent Hospitals Foundation Trust. We currently have 2 types members

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| **Public** | For people interested in our services who live in the communities of East Kent (Ashford, Canterbury, Dover, Folkestone & Hythe, Swale and Thanet) as well as patents who are receiving or have received services from the Trust and who live outside East Kent |
| **Staff** | All East Kent Hospital University NHS Foundation Trust permanent staff, those on a fixed term contract of at least 12 months and social care staff who work in the Trust are automatically offered membership. (Membership is not mandatory for staff) |

# **Membership Involvement Levels**

The Trust recognises that members will have differing levels of interest, time and availability for involvement. As such these can be separated into levels of involvement.

All members retain their statutory rights e.g. to vote or stand as a governor in Council of Governor elections.

Be informed

* Receive regular newsletters
* Receive regular communications
* Receive invitations to the Annual General Meeting of the Council of Governors and the Members Annual Meeting.

Take a lead (as above, plus)

* Invitation to stand for election as a governor to represent views of their constituency, raising views on behalf of their members
* Collect and feedback the views of their constituency on service quality and provision
* Attend formal meetings of the Council of Governors

Be Involved (as above, plus)

* Participate in surveys, questionnaires and consultations
* Participate in focus/discussion/advisory groups
* Be involved in volunteering for the trust

# **Accountability to our Members**

The Health and Social Care Act (2012) states that the fundamental duty of a Foundation Trust Board is to promote the success of the organisation so as to maximise its benefits to members of the Trust and the wider public. To ensure we are doing this as a Trust we have clear lines of communication between the Board and Members. This enables the Board to have a continuous “line of sight” to the views and priorities of members and the public, and so that members and the public are assured that the Board is performing as an effective steward of public assets. Much of the accountability of the Board to its members is through the Council of Governors, which has two fundamental statutory duties

- To represent the interest of the membership and the wider public; and

- To hold the Trusts Non-Executive Directors to account for the performance of the Board.

Public Governors

**Members**

**Members**

**Members**

**Accountability**

**Council of Governors**

**Board of Directors**

Elected from NHS Foundation Trust Members

Partnership Appointed Governors (Key Stakeholders)

Staff Governors

It is vital to ensure that the links between members and governors, and governors and the Board are robust so that a gap does not emerge between member and public interests and Board decisions. Focusing on strengthening these key links is the Foundation Trust Governance model and therefore a priority area within this strategy.

# **Council of Governors**

The Council of Governors is comprised of 19 Governors, consisting of 16 elected Governors (including public and staff) and 3 Governors who are appointed to the Council by key stakeholder organisations that share a close relationship with the Trust. The Council is chaired by the Trust Chair, who ensures that the council is made aware of the relevant issues in sufficient depth to enable them to fulfil the needs of public accountability.

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| **Public Governors** | Represent member constituents in  Ashford (2)  Canterbury (2)  Dover (2)  Folkestone & Hythe (2)  Swale (2)  Thanet (2)  Rest of England and Wales (1) |
| **Staff Governors** | Represent the views of staff across the Trust. (3) |
| **Appointed Governors** | The appointed Governors are nominated as representatives for their organisation. Examples are local councils, universities, local voluntary groups (3) |

# **Strengthening the links between members and Governors**

The Trust will promote governor’s ability to represent the interests of the membership and the wider public by:

* Investing in development days with a particular focus on membership engagement and accountability.
* Keeping members well informed about their Governor representative - Bringing Governors together with members at public meetings and inviting members to attend the Council of Governors
* Encouraging Governors to participate in the Trusts Joint site visits with Non-Executive Directors to speak with service users and carers about their experience.
* Involving governors in membership recruitment
* Publishing Council of Governors papers publicly - Enabling members to evaluate the effectiveness of Governors in representing their interests.

# **Strengthening the links between Governors and the Board**

The Trust will promote the role of Governors into holding Non-Executive Directors to account for the performance of the Board through:

* Investing in joint Board and Council days with a particular focus on accountability
* Facilitating communication between Governors and the Non-Executive Directors whom they hold to account through

  + Attending Board of Directors meetings
  + The attendance by designated Non-Executive Directors at Governor Committees and Working Groups
  + Regular access to the Trust Chair

# **Strategy Governance**

The Council of Governors delegates authority to the Membership Engagement and Communication Committee (MECC) to make decisions on behalf of and be accountable to the Council of Governors for recruiting, engaging and communicating with the Trusts membership and representing the interests of patients, carers, families and the general public in the areas served by the Trust.

The MECC will review progress against the objectives of this strategy quarterly reporting back on progress at the Council of Governors meeting through a written or verbal update from the committee Chair. An annual report of progress against this strategy will also be available at the Annual Members Meeting.

# **Continuous Learning**

To ensure that both members and the Trust get the best out of membership, we will build mechanisms for learning and improvement into all membership initiatives. Members will be able to provide feedback at any stage

foundationtrust@nhs.net

The Trust will also actively seek to learn lessons through:

* An annual membership surveys
* An annual Governor surveys
* Feedback from Governors through the annual Chair’s appraisal process
* Feedback forms at events
* Membership database reports (e.g. meeting attendance, membership growth, membership demographics)

# **Give Feedback**

To provide feedback on this strategy or to request further information, please contact the Trust’s membership office at Email: [foundationtrust@nhs.net](mailto:foundationtrust@nhs.net)

**Appendix 1 – Age break-down by constituency**

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 46 |
| 30-39 | 152 |
| 40-49 | 182 |
| 50-59 | 182 |
| 60-74 | 296 |
| 75+ | 124 |

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 398 |
| 30-39 | 381 |
| 40-49 | 193 |
| 50-59 | 227 |
| 60-74 | 417 |
| 75+ | 294 |

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 65 |
| 30-39 | 142 |
| 40-49 | 142 |
| 50-59 | 150 |
| 60-74 | 322 |
| 75+ | 193 |

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 50 |
| 30-39 | 87 |
| 40-49 | 101 |
| 50-59 | 121 |
| 60-74 | 233 |
| 75+ | 140 |

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 37 |
| 30-39 | 59 |
| 40-49 | 42 |
| 50-59 | 71 |
| 60-74 | 110 |
| 75+ | 61 |

|  |  |
| --- | --- |
| **Age** | **Total** |
| 22-29 | 248 |
| 30-39 | 253 |
| 40-49 | 206 |
| 50-59 | 234 |
| 60-74 | 481 |
| 75+ | 260 |