

Communications and Engagement Strategy 2017/18

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1. Purpose

The purpose of this strategy is to support Herefordshire CCG to achieve its key goals and objectives for the year 2017/18 and beyond.

It sets out our approach to communication and engagement with our members, as well as with patients, local people and our other stakeholders.

During the year 2017/18 the CCGs communication and engagement focus will be:

- Primary Care - 7 Day Services (Hereford walk-in centre consultation and county-wide)
- Community Services redesign
- QIPP Programme – priority treatment
- Planned Care Programme

We also have three other main areas of focus:

- Development of refreshed website
- Primary care (GP services)

Appendix A is our plan on a page which gives more detail about these areas and how we will involve patients, local residents and other stakeholders.

2. About Herefordshire CCG

Herefordshire Clinical Commissioning Group (CCG) is the NHS organisation responsible for planning and buying health and care services on behalf of everyone in our county. We are clinically-led and have 24 member GP practices. We are responsible for the following services:

- Urgent and emergency care (including out-of-hours services)
- Planned, non-emergency hospital care
- Rehabilitation care
- Mental health and learning disability services
- Most community health services, including Continuing Healthcare
- Ambulance transport

We do not provide clinical services ourselves but we commission services from Wye Valley NHS Trust, Together NHS Foundation Trust and from other major acute providers, including Gloucestershire Hospitals NHS Foundation Trust, Worcestershire Acute Hospitals NHS Trust, University Hospitals Birmingham NHS Foundation Trust, and other hospitals in Bristol and Wales, as well as a number of independent healthcare providers, including Nestor Primecare Ltd, Spire Healthcare, Nuffield Health, St Michael's Hospice, Shaw Healthcare and the Blanchworth Care Group. We also commission services from Herefordshire Council.

Our mission statement is:

The mission of NHS Herefordshire Clinical Commissioning Group is to achieve a high quality, sustainable and integrated health and care economy with patients at the heart of everything we do.

The group will promote good governance and proper stewardship of public resources in pursuance of its goals and in meeting its statutory duties.

Our vision:

We have a vision for a high quality, sustainable and integrated Herefordshire health economy with the public and patients at the heart of everything we do.

Our values:

The values that lie at the heart of the CCG's work are as follows.

We will:

- be accountable to Herefordshire's patients and public, who are at the heart of everything we do
- aim to be a high reputation, high performance CCG
- have strong, close links to front line clinical practice
- ensure equality and equity of services and outcomes
- maintain continuous and meaningful staff engagement
- seek opportunities to work collaboratively with other commissioners
- be open and transparent in the way we work
- treat staff and patients with dignity and respect "We want to create high quality health and care services that benefit everyone in Herefordshire – the kind of services that we would want available for our friends and family if they were unwell or needed help and support with a condition that impacted on their lifestyle."

As a public body, we adhere to the [7 principles of public life](#) (Nolan Principles 1995):

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

3. Current situation – SWOT Analysis

Strengths/what has worked well	Weaknesses
<ul style="list-style-type: none"> • A structured approach to communicating key messages and briefing stakeholders at the right time, in the right way, by the right person. • Good relationships developed with Members of Parliament (MPs), Health Overview and Scrutiny Committee, Health and Wellbeing Board and Healthwatch Herefordshire • Good relationship with local media • Co-producing and working in partnership with stakeholders to commission services • A supportive and developing Patient Participation Group (PPG) network. 	<ul style="list-style-type: none"> • Not all relationships with local community networks well established, in particular hard to reach groups. • Limited use of social media • Resources within the CCG/CSU stretched • Website needs to be reviewed/refreshed (planned for 2017) • Lack of media exposure • Agreement on messages and co-ordinating messaging across partners.
Opportunities	Threats
<ul style="list-style-type: none"> • Use PPG networks to reach out and listen to communities • Build on relationships with One Herefordshire and STP partners to reach and listen to a wider communities • Build stronger networks and communication and engagement support with primary care • Explore wider use of social media to reach and hear from a broader range of local people • Strengthen ongoing relationships with local media personnel • Participate in the STP communications and engagement group and the One Herefordshire communications group to support the service transformation plan across the local economy. 	<ul style="list-style-type: none"> • The scale of the service change and transformation can make it a challenge to co-ordinate and communicate messages • Increased media attention because of One Herefordshire and the STP • Partners across the system working under different timescales

Actions resulting from the SWOT analysis are:

- a) Revitalise the One Herefordshire communications group
 - Increase participation in the STP communications group to support the STP work streams.

- b) Improve primary care engagement
 - Develop a communication and engagement strategy for primary care and co-produce action plans for better engagement and communication with GPs and across all primary care
 - Strengthen the PPG network and broaden to become a wider 'Patient Forum' and work closer with them.

- c) Increase the CCGs public profile as system leaders
 - Build on existing relationship with local press and regional media
 - Media training for key spokespeople
 - Increased focus on targeting hard to reach groups.

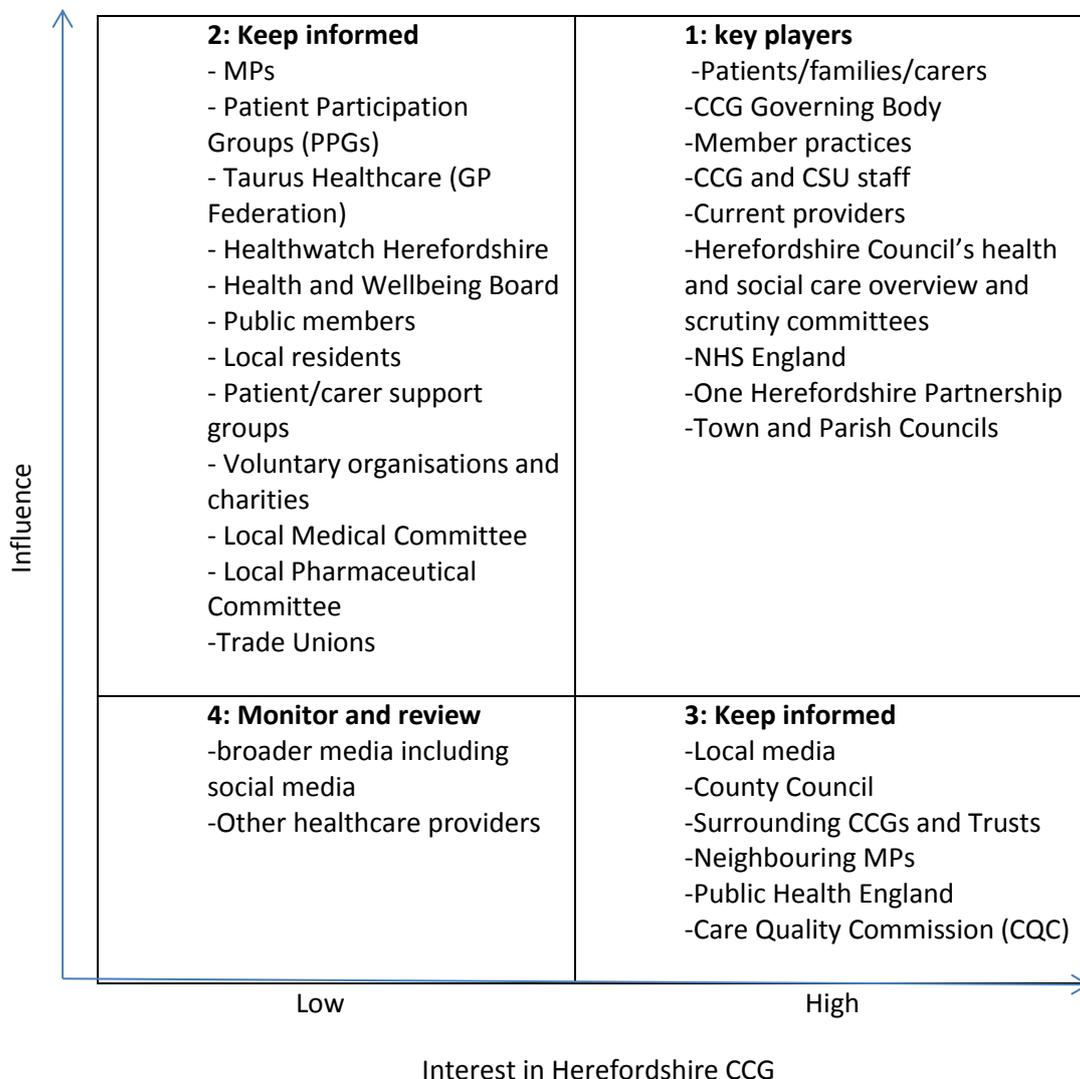
4. Stakeholders

A structured approach to continuing to maintain good relationships and contacts with the stakeholders below is vital.

This is a general stakeholder map; detailed stakeholder mapping is undertaken for each programme of work to ensure the relevant stakeholders are engaged and informed appropriately according to their level of interest and impact and that the most effective channels are used for each.

Appendix B gives examples of some of the channels we use to communicate with stakeholders.

a) Mapping



5. Approach to communication and engagement

We have a legal duty to ensure we involve the public in the commissioning of services for NHS patients.

In discharging our duty, we listen to, and gather the views, of patients and local communities in a variety of ways including; public meetings and events, workshops and outreach work, briefings and newsletters, as well as using social media and traditional media to communicate with a wide audience. We always act on the feedback we receive from patients and the public.

We strive to engage with as many people of Herefordshire as possible so that they are involved in deciding how their health and care services are commissioned. We also work through our member practices' patient participation groups, by hosting engagement events and focus groups.

We have in place a communications and involvement Governing Body committee chaired by the lay member for patient and public involvement. Its primary role is to provide assurance to the CCGs Governing Body that all key service change proposals, improvement programmes and developments have appropriate plans in place to engage and involve patients and public. It also ensures that Quality Impact Assessments (QIA) and Equality Impact Assessments (EIA) are completed. The committee reports any key issues and risks to the Governing Body. The effectiveness of engagement and consultation plans and activities is discussed at this committee.

The good practice approach we have followed over the past year will continue and include the following examples of how the [Nolan Principles](#) continue to guide our actions:

- Identify and use the most effective methods of communicating and engaging with different groups of stakeholders (see appendix B) to ensure everyone has a voice
- Develop digital stakeholder networks to engage people and spread messaging more widely. A digital stakeholder map is included in appendix C
- Use plain English to provide consistent, simple messaging to be understandable to all
- A proactive approach to briefing key stakeholders in an open and transparent way
- Logging contacts/conversations with key individuals and groups on a shared file
- Review frequency of contacts with key stakeholders to make sure each are contacted proactively when appropriate
- Maintain a calendar of events which is updated regularly
- Careful planning for briefing on specific announcements
- Proactive approach to briefing the media – including offering interviews.

For all communications relating to the STP and One Herefordshire, we will work closely with partners to develop a consistent approach and joint messaging where feasible.

Duty to engage: public and patient involvement

Under section 14Z2 of the NHS Act 2006, as amended by the Health and Social Care Act 2012, we have a duty to make arrangements to involve (whether by consultation, information or other means) patients and the public at various stages of the commissioning cycle including:

- In planning commissioning arrangements
- In the development and consideration of proposals for change in the way services are provided
- In any decisions affecting the operation of services.

We also have a legal duty under the Equality Act (2010) to eliminate inequality and discrimination on the grounds of race and ethnic group, age, gender, disability, faith and sexual orientation.

The CCG constitution adheres to the ideals of the NHS Constitution (2012), which sets out the principles, rights and values of the NHS in England.

The NHS Constitution includes pledges linked to patient and public engagement, specifically:

- Information provision support choice
- Ensuring involvement in service planning and redesign
- Responsibilities to patients including the provision of feedback.

Herefordshire CCG’s constitution states:	Examples of how this will be achieved
<p>‘General duties – in discharging its functions the CCG will:</p> <p>5.2.1 Make arrangements to secure public involvement in the planning, development and consideration of proposals for changes and decisions affecting the operation of commissioning arrangements</p>	<p>The CCG has a structure that enables engagement at every level and is based upon:</p> <ul style="list-style-type: none"> • A public membership scheme • Active PPG at all practices • Established patient forum • Lay member representation on the CCG board • Patient/carer/lay representatives sitting on the communication and engagement committee • Joint working with community and voluntary sector • Liaison with Healthwatch Herefordshire.

We will plan patient and public engagement so that we can ensure patients and the public are involved in every stage of the commissioning cycle as shown below:



Herefordshire CCG's constitution states:	Examples of how Herefordshire CCG will achieve this:
a) Working in partnership with patients and the local community to secure the best care for them	Building on existing engagement work, the CCG will be working with the STP to engage with key stakeholders, particularly hard to reach communities
b) Adapting engagement activities to the meet the specific needs of different patient groups and communities	This will include: <ul style="list-style-type: none"> • Using the support groups networks • Identifying opportunities to meet individuals and groups on their own ground, rather than expecting them to attend organised events
c) Publishing information about commissioned health services on the CCG's website and through other media	<ul style="list-style-type: none"> • Increase use of simple, plain English messaging via social media • Include interactive features on the new CCG website
d) Listening, encouraging and acting on feedback; including complaints, compliments and patient stories.	<ul style="list-style-type: none"> • Monthly summary report to the Governing Body • Continue to support, inform and involve the patient forum, once established and PPGs
e) Where it is intended that services will change, the CCG will engage	The Communications and Involvement Committee will continue to meet bi-

with the Local Authority Overview and Scrutiny Committees (Adults and Children's), and where formal consultation on changes is required, will follow the Cabinet Office's 'Code of Practice on Consultation'	monthly to provide an assurance role.
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6. Risks and mitigations

Risk description	Likelihood	Severity	Mitigation/action
Duplication of engagement with partners communication/engagement processes could result in engagement fatigue	High	High	CCG will work within the HWBB framework and with One Herefordshire partners to ensure campaigns are aligned and, where appropriate, campaigns are undertaken jointly.
Reputational risk – the CCG is responsible for local commissioning which brings with it significant financial challenge, pressures on services (e.g. any perceived cuts) could be attributed to the CCG	High	High	Promoting the CCG must be done in the context of what is realistic and deliverable during financially challenging times in order to manage people's expectations. We must be open and transparent about these challenges.
Lack of understanding of roles and responsibilities in NHS – continuing complexity of the NHS structure is challenging and therefore must be communicated in a way to make it engaging and encourage people to want to understand it.	High	High	Ensure that the CCGs role is clearly articulated within press releases and publications.
Limited media coverage for CCG – service providers tend to get more local news coverage because of the front line nature of their work.	High	Medium	Develop a media plan to improve profile.
Co-ordination of communication and engagement activities between STP and One Herefordshire partners	High	High	Revitalise the One Herefordshire communications group and participate in the STP communications group to ensure messages and activity is planned and co-ordinated.

7. Evaluation

Getting communications and engagement right will play a big part in ensuring the CCG's success in achieving its key objectives over the coming year.

Where possible, communication and engagement campaigns will have evaluation methods built in, for example with surveys.

Actions

- Monitor and analyse media coverage
- Record the number of people attending our public events
- Record interactions with individuals/groups out in the community, particularly hard-to-reach groups and seldom-heard individuals
- Analyse the diversity of the people we interact with
- Monitor the number and diversity of the public membership.

Appendix 1:

Methods of communicating and engaging with stakeholders

This is an example of the channels we would use to communicate and engage with our stakeholders.

Key players (proactive, regular contact)	Briefings/ Newsletters/ Reports/ Phone calls	Face to face meetings	Works hops/ Focus groups	Social media Website/ twitter
Key players (proactive, regular contact)				
Patients/families/carers	Y	Y	Y	Y
Governing Body	Y	Y	Y	Y
Member practices	Y	Y	Y	Y
CCG and CSU staff	Y	Y	Y	Y
Current providers	Y	Y	Y	Y
Herefordshire Council's health and social care overview and scrutiny committee	Y	Y	Y	Y
NHS England	Y	Y	Y	Y
One Herefordshire	Y	Y		Y
Town Councils	Y	Y	Y	Y
Keep involved/informed (regular contact)				
MPs	Y	Y		
PPGs	Y	Y	Y	
Taurus Federation	Y	Y		
Healthwatch Herefordshire	Y	Y		
Health and Wellbeing Board	Y	Y		
Public members	Y	Y	Y	Y
Local residents	Y	Y	Y	Y
Patient/carer support groups	Y	Y	Y	Y

Voluntary organisations and charities	Y	Y	Y	Y
Local Medical Committee	Y	Y		
Local Pharmaceutical Committee	Y	Y		
Unions	Y	Y		
Keep informed (contact as needed)				
Local media	Y	Y		
Herefordshire Council	Y	Y		
Surrounding CCGs and Trusts	Y	Y		
Neighbouring MPs	Y			
Public Health England	Y	Y		
Care Quality Commission (CQC)	Y			
NHS Improvement	Y			
Monitor and review				
Media including social media	Y			
Other healthcare providers	Y			

Appendix 2: Digital stakeholder map

