

Ayrshire and Arran NHS Board



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Delivery, Recovery and Transformation Plan - Communication and Engagement Plan

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Recommendation

The NHS Board is asked to approve the communication and engagement plan to support the delivery of the Delivery, Recovery and Transformation Plan (DRTP) and note the actions that have been progressed to date.

Summary

A communication and engagement plan has been created to support the delivery of the Delivery, Recovery and Transformation Plan. This communication and engagement plan describes the phased approach we will take to informing and engaging with public stakeholders, acknowledging that the types of conversations and the engagement required for success will happen in a variety of ways and will be owned by everyone who has a role to play in achieving the aims of the plan. A range of informing and engaging activities are in train and the plan will evolve and develop to support the delivery of specific elements of the Transformational Change Programme.

Key Messages:

- The communication and engagement plan takes into consideration principles and requirements of statutory and policy guidance on stakeholder engagement.
- An initial set of informing and engaging objectives and 'key' messages have been agreed by stakeholders to inform three initial priorities for activities, which are currently in train.
- This plan will evolve and adapt to support individual elements of service change and the wider transformational service change agenda across the health and social care system.

Glossary of Terms

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| DRTP | Delivery, Recovery and Transformation Plan |
| TCIP | Transformational Change Improvement Plan |
| UHA | University Hospital Ayr |
| UHC | University Hospital Crosshouse |

1.0 Situation

1.1 A communication and engagement plan has been created to support the delivery of the Delivery, Recovery and Transformation Plan (outlined at Appendix 1, 2 and 3). This paper gives an overview of the phased approach that will be taken to inform and engage with key stakeholders, acknowledging that the types of conversations and the engagement required for success will happen in a variety of ways and will be owned by everyone who has a role to play in achieving the aims of the plan. A range of engagement activities are in train and the plan will evolve and develop to support the delivery of specific elements of the Transformational Change Programme.

2.0 Background

2.1 A range of legislation, guidance and standards have been developed to underpin the way public services involve and engage with communities. All of these emphasise the importance of designing and delivering public services in partnership with communities. The plan takes into consideration principles and requirements of a number of key documents, including:

- Scottish Government 2020 vision
- Our Voice Framework (2016)
- National Standards for Community Engagement (2016).
- The Carers (Scotland) Act 2016
- The Community Empowerment (Scotland) Act 2015
- Gunning Principles (2015)
- The Children and Young People (Scotland) Act 2014
- CEL 4 (2010) 'Informing, Engaging and Consulting People in Developing Health and Community Care Services.
- The Public Bodies (Joint Working) (Scotland) Act 2014 (includes 12 integration planning and delivery principles).
- The Social Care (Self Directed Support) Act 2013
- The Patient Rights (Scotland) Act (2011).
- Quality Strategy 2010

2.2 The plan also recognises that evidence of people's acceptance of the need for change is limited. We know that service change can be challenging and controversial for all stakeholders. This can be a product of the change itself and the extent to which proper, well designed consultation and engagement takes place. Patients and the wider public have historically been passive recipients of care and the Delivery, Recovery and Transformation Plan outlines the requirement for a fundamental philosophical shift in the mind set of all stakeholders. Any approach to consultation and engagement should draw on best practice and learning from successful approaches. The communication and engagement plan acknowledges the breadth and depth of engagement activities that are already in train, ensuring that a health and social care system approach to engagement will support greater consistency and effectiveness.

3.0 Assessment

- 3.1 A Public Engagement Group has been established to co-ordinate public engagement activity across Ayrshire and Arran health and social care services (three Health and Social Care Partnerships and NHS Ayrshire & Arran) in support of delivery of the Delivery, Recovery and Transformation Plan.
- 3.2 The group is also receiving support from the Scottish Health Council and the Consultation Institute.
- 3.2 An initial set of engagement objectives and 'key' messages have been agreed by stakeholders to inform four initial priorities for activities. These being:
- Use of social media
 - Local engagement within communities
 - Engagement with people at point of care
 - Engagement with young people
- 3.3 Progress has been made in the priority areas in line with agreed timescales (Appendix 1). Highlights include:
- All engagement communication from Health and Social Care will be under a single banner (#CaringforAyrshire).
 - A range of written resources have been developed and are in use by stakeholders (outlining model of care and using case studies to illustrate elements of the new/proposed model).
 - People are been actively encouraged to get involved in locality planning groups and the participation network.
 - A social media campaign is in train highlighting the key messages and using the #CaringforAyrshire banner for all communications e.g. winter planning
 - A dedicated webpage has been developed for #CaringforAyrshire on the NHS Ayrshire & Arran website.
 - Feedback from people e.g. engagement around the refresh of the Health and Social Care Partnerships Strategic Plans will continue to inform engagement activities.
- 3.4 Further activities are planned for quarter four of (2017-18) to continue to inform and engage with key stakeholders via social media, using the outputs from this activity to strengthen the 'key' informing and engaging messages and the case for transformational change. Individual communication and engagement plans for specific service changes will also be developed to support meaningful informing and engagement and the delivery of transformational service change.
- 3.5 The engagement objectives identified, recognise the way we deliver services will be different. We need to provide sustainable services in the way that we work, where our services are provided and by whom. Within the Transformational Change Improvement Plan we detailed guiding principles that will use to underpin the communication and engagement, these are detailed below:-

Safe, effective, person-centred

The NHS Quality Strategy identified three key elements that define a high quality service: effectiveness, patient safety and person-centredness. These remain priorities against which service changes should be assessed. Quality incorporates timeliness as part of effectiveness.

Anticipation and prevention, care at home, reducing inequality

The integration of health and social care provides the opportunity to refocus care from reaction to anticipation, from treatment to prevention and from acute services to community services. It also highlights the need to address inequality of outcomes across Scotland.

Maximising health gain, sustainability

Demand for health and social care will always exceed available resources, even in the absence of austerity. Resources spent on health and social care are unavailable for education and infrastructure development, which will in the longer term improve the health of the population through economic growth, more than any healthcare intervention can. We therefore have the moral responsibility to use the available resources in the most cost-effective way, to maximise the health of our population.

3.6 Questions

Between August 2015 and March 2016, the Scottish Government invited the public and patients to participate in a national conversation on what a healthier Scotland would look like. The Conversation asked three key questions:

- What support do we need in Scotland to live healthier lives?
- What areas of health and social care matter most to you?
- Thinking about the future of health and social care services, where should our focus be?

#caringforayrshire communication and engagement plan will build on these conversations

3.7 Aims and objectives

Our aims and objectives for the informing and engagement plan for **#caringforayrshire** will be to:

- Communicate the priorities set out in the Delivery, Recovery and Transformation Plan, generating awareness of the direction of travel and helping people to understand the drivers for change;
- Demonstrate the positive impact of evolutionary change through narrative where we have improved services and achieved better care/quality;
- Outline through narrative the benefits and opportunities offered by new/emerging models of care in the context of incremental improvement;
- Engage effectively with our stakeholders, encouraging and facilitating two way communication and a cultural shift towards personal ownership of wellbeing;

- Support those who have a role to play in achieving the outcomes described in the Delivery, Recovery and Transformation Plan to communicate and engage effectively with the public (working in collaboration with partners); and
- Meet the requirements of national engagement legislation/guidance for specific services changes.

4.0 Recommendation

- 4.1 The NHS Board is asked to approve the communication and engaging plan to support the delivery of the Delivery, Recovery and Transformation Plan and note the actions that have been progressed to date.

Monitoring Form

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|---|---|
| Policy/Strategy Implications | Involvement of people in the design and delivery of health and social care services is a statutory and policy requirement. |
| Workforce Implications | None |
| Financial Implications | None |
| Consultation (including Professional Committees) | This work is being progressed in partnership with stakeholders (three Health and Social Care Partnerships) |
| Risk Assessment | Failure to engage effectively with people will negatively impact on the organisations ability to demonstrate compliance with statutory and policy requirements. |
| Best Value <ul style="list-style-type: none"> - Vision and leadership - Effective partnerships - Governance and accountability - Use of resources - Performance management | The delivery of effective people engagement will support the organisational objectives and the delivery of sustainable health and social care services. |
| Compliance with Corporate Objectives | Deliver transformational change in the provision of health and social care through dramatic improvement and use of innovative approaches |
| Single Outcome Agreement (SOA) | Not applicable |
| Impact Assessment Not required as internal document. | |

Appendix 1

Delivery, Recovery and Transformation Plan Communication and Engagement Plan

1.0 Introduction

- 1.1 This communication and engagement plan has been created to support the delivery of the Delivery, Recovery and Transformation Plan, which sets out a framework for Ayrshire and Arran health and social care services to plan for the transformative change that will deliver health and social care designed to meet the needs of the local population in to 2020 and beyond. This communication and engagement plan describes the phased approach we will take to communicating and engaging with public stakeholders, acknowledging that the types of conversations and the engagement required for success will happen in a variety of ways and will be owned by everyone who has a role to play in achieving the aims of the plan. The outlined approach to engagement is positioned in such a way as to ensure there is good public awareness and acceptance of the need for change. It has been agreed by all partners that the #caringforayrshire branding will continue to be used for all communications.
- 1.2 The communication and engagement plan recognises the requirement to work in collaboration with partners (particularly the three Health and Social Care Partnerships/IJB's) to ensure that there is co-ordinated and consistent messaging and approach to engagement, avoiding duplication and securing consensus for the overall strategic direction of travel, mobilising action and increasing the pace of change across health and social care services.

2.0 Involving People

- 2.1 A range of legislation, guidance and standards have been developed to underpin the way public services involve and engage with communities. All of these emphasise the importance of designing and delivering public services in partnership with communities. This plan takes into consideration principles and requirements of a number of key documents, including:
- Scottish Government 2020 vision
 - Our Voice Framework (2016)
 - National Standards for Community Engagement (2016).
 - The Carers (Scotland) Act 2016
 - The Community Empowerment (Scotland) Act 2015
 - Gunning Principles (2015)
 - The Children and Young People (Scotland) Act 2014
 - CEL 4 (2010) 'Informing, Engaging and Consulting People in Developing Health and Community Care Services.
 - The Public Bodies (Joint Working) (Scotland) Act 2014 (includes 12 integration planning and delivery principles).
 - The Social Care (Self Directed Support) Act 2013
 - The Patient Rights (Scotland) Act (2011).
 - Quality Strategy 2010

- 2.2 We recognise and acknowledge that partners across Ayrshire and Arran are fully committed to the principles (outlined above), which already inform a range of engagement activity. This plan aims to build on and harness the existing good practice across Ayrshire and Arran, in pursuit of delivery of the Delivery, Recovery and Transformation Plan.
- 2.3 This plan also recognises that evidence of people's acceptance of the need for change is limited. We know that service change can be challenging and controversial for all stakeholders. This can be a product of the change itself and the extent to which proper, well designed informing and engagement takes place. People have historically been passive recipients of care and the Delivery, Recovery and Transformation Plan outlines the requirement for a fundamental philosophical shift in the mind set of everyone. Any approach to informing, engaging and consulting should draw on best practice and learning gained from previous successful approaches.

3.0 Engagement Objectives

- 3.1 As detailed in the Transformational Change Improvement Plan 2017-2020 (TCIP), there is a recognition that as we work towards the 2020 vision, and integrate health and social care, the way we deliver services will be different. Services in NHS Ayrshire and Arran will need to change substantially over the next two decades: in the way that we work, where our services are provided and by whom. Within the TCIP we detailed guiding principles that will use to underpin the engagement, these are detailed below:-

Safe, effective, person-centred

The NHS Quality Strategy identified three key elements that define a high quality service: effectiveness, patient safety and person-centredness. These remain priorities against which service changes should be assessed. Quality incorporates timeliness as part of effectiveness.

Anticipation & prevention, care at home, reducing inequality

The integration of health and social care provides the opportunity to refocus care from reaction to anticipation, from treatment to prevention and from acute services to community services. It also highlights the need to address inequality of outcomes across Scotland.

Maximising health gain, sustainability

Demand for health and social care will always exceed available resources, even in the absence of austerity. Resources spent on health and social care are unavailable for education and infrastructure development, which will in the longer term improve the health of the population through economic growth, more than any healthcare intervention can. We therefore have the moral responsibility to use the available resources in the most cost-effective way, to maximise the health of our population.

- 3.2 Following on from the TCIP the Delivery, Recovery and Transformation Plan outlines a vision for Ayrshire and Arran where people live longer, healthier lives at home or in a homely setting (in line with 2020 vision) with the aim to provide high quality integrated health and social care services that have a focus on prevention, early intervention and supported self-management. There is a need to describe what care will look like for people in the new landscape of health and social care.
- 3.3 The *Creating a Healthier Scotland* national conversation highlighted a public demand for real change in six broad areas:
- Supporting people to lead healthier lives – with more work on prevention, health education and promotion of individual life-style change;
 - Supporting wellbeing and better connected communities – with a focus on early intervention and parity between mental and physical health services;
 - Making even greater strides in person-centred care – with people more involved in decision making and a greater focus on supported self-management;
 - Providing responsive and seamless journeys of care – with easier access to services and integration across primary and secondary care as well as across health and social care;
 - More focus on social care and caring – better information about entitlement, more support at home, support for unpaid carers and better recognition for those working in social care; and
 - Addressing pressures and priorities in the system – getting better at workforce planning and development, looking at targets and outcomes and taking challenging decisions about funding.

These findings are congruent with the vision outlined in the Delivery, Recovery and Transformation Plan and offer an opportunity for framing local informing and engaging from the perspective of people and the benefits that they will experience as a result of the actions we propose to take in the future, whilst recognising the public's attachment to 'much loved' health and social care services.

3.4 The objectives of this plan are as follows:

- Communicate the priorities set out in the Delivery, Recovery and Transformation Plan, generating awareness of the direction of travel and helping people to understand the drivers for change;
- Demonstrate the positive impact of evolutionary change through narrative where we have improved services and achieved better care/quality;
- Outline through narrative the benefits and opportunities offered by new/emerging models of care in the context of incremental improvement;
- Engage effectively with our stakeholders, encouraging and facilitating two way communication and a cultural shift towards personal ownership of wellbeing;
- Support those who have a role to play in achieving the outcomes described in the Delivery, Recovery and Transformation Plan to communicate and engage effectively with the public (working in collaboration with partners); and
- Meet the requirements of national engagement legislation/guidance for specific services changes.

3.5 Understanding what people want

During our information and engaging exercises we will want to build on what we have already heard from our stakeholders. We will review how we have engaged, reflect on our strengths, discuss our priorities and build on the opportunities and priorities to create sustainable health and care services for Ayrshire and Arran. These are described in more detail below.

1. How we have engaged with the public so far

Engagement with our patients and communities has been an ongoing process. Our three Health and Social Care Partnerships (HSCP) have established locality forums, which provide the structure for continuous engagement, including the development of HSCP strategic plans. A participation network supports engagement from a Health Board perspective (with over a 1000) members, which allows flexibility for people to engage in a way that meets their needs. In addition a public/patient engagement plan has been developed to support the delivery of the Transformational Change Improvement Plan under the single banner of #caringforayrshire. Engagement activities commenced in September 2018 the HSCP's and NHS Ayrshire and Arran co-ordinating engagement activities using shared resources.

2. Recognising our strengths

People said that we have made good progress on joining up services, dialogue with the public was open and honest, and some local services are good. We need to maintain and build on these particular strengths.

3. Priorities for the future

Access is the top priority for people, who want quick, prompt and convenient access to services. We want to improve service access and co-ordination in our Target Operating Model, to help the right care be delivered in the right place at the right time. Other priorities for people include being involved in planning their own care and engaging with staff that are professional, caring and competent. Patients and the wider public have historically been passive recipients of care and we recognise the requirement for a fundamental philosophical shift in the mind set of all stakeholders.

4. Opportunities to improve wellbeing and meet needs at less cost

People said we should encourage personal responsibility and enable people to keep fit and healthy, encourage healthy lifestyles and community responsibility. Our proposals for how we work in the future include an emphasis on prevention, enabling self-care and delivery of integrated care in the community.

5. Issues which need attention

People thought that access is currently an issue for some services, with too much travel for routine appointments and treatment and long waiting lists for some mental health services. There is also a perception that local facilities such as community hospitals and GP surgeries are underutilised and there is a lack of investment in prevention and early intervention. More efficient use of resources, including estates, is a key system enabler in our proposals for the future.

6. Priorities from providers to support more joined up care

Providers also proposed empowering and enabling people to manage their own health and wellbeing better, as well as investing in local community-based delivery to support access, co-ordination and integration of services. This could be supported by creating co-ordinators to support people to have more choice and receive the right care.

4 Informing and Engaging (commenced September 2018)

- 4.1 We have established an ongoing programme of informing and engaging, using a range of approaches to secure meaningful dialogue with the people of Ayrshire and Arran. Information will be provided in a format that promotes understanding of the future design and delivery of health and social care. We will support consistent messaging and engagement through partnership working with Health and Social Care Partnerships (acknowledging the significant engagement activity that is ongoing across HSCP's). Staff engagement will be critical to success and a programme of engagement with health and social care staff is already underway to encourage 'selling the vision' conversations with patients, families and carers that will support the delivery of the Delivery, Recovery and Transformation Plan.
- 4.2 Engagement will take a balanced approach – that NHS Ayrshire and Arran is focused on providing the best possible care and that, while we are moving to a model that provides care as locally as possible, we will also be asking people to accept that for some services this will look different. We will work closely with the Scottish Health Council to ensure that engagement around specific service changes are in line with best practice and the requirements of national guidance.
- 4.3 The initial set of high level informing and engagement messages are outlined below and are in line with regional and national plans. It is recognised that these messages will evolve through regional and local partnership working and feedback from people, with bespoke messages being developed for specific audiences and/or service change. We will ensure that local engagement is congruent with regional and national messaging.

We will describe our approach to future care delivery through narrative, developing resources that will include case studies, stories, digital animation and info-graphics, as well as more traditional written and on-line materials e.g. FAQ's.

Key Messages

- Over the years the NHS Ayrshire and Arran has continually adapted and developed as a result of new health challenges and better ways of working.
- Many of the people of Ayrshire and Arran are living much longer lives and that means our health and social care services need to evolve to make sure they can look after more people and in better ways.
- Given the demands on health and social care services, we need up-to-date ways of doing things in order to meet the growing needs of the people of Ayrshire and Arran.

- Our health and social care services are finite resources and we need to live within our means.
- We need to provide existing and new services in better ways, providing the best quality care. We need to look after people in ways that are affordable and make best use of the healthcare workforce, their skills, and resources.
- Current workforce challenges including the recruitment and retention of key health professionals is driving the way we deliver services. Going forward sustainable models of care will be delivered through the creation of new roles with a focus on advanced practice for a variety of health care professionals.
- Advances in medical treatment and technology mean we can now deliver increasingly specialised services for conditions that were unknown or untreatable when the NHS was first created 70 years ago. Locally-based services will continue to provide the routine community and hospital care, and more specialised services will be delivered in centres of clinical excellence within regions or, in some cases, at a national level. This will mean Ayrshire and Arran patients get access to the best clinical expertise.
- Health and social care services will continue to adapt to ensure they meet the needs of people and go on delivering long into the future.
- We want to build on the excellent care already provided. We will do this by working with partners across health and social care to speed up the developments needed, ensuring we focus resources in ways that allow us to develop the best services to meet people's needs as close to home as possible.
- Our health and social care staff are highly skilled and dedicated people who work hard to deliver care in a way that allows them to provide the very best care and treatment within the resources available.
- We all have a role to play in supporting Ayrshire and Arran health and social care services. By doing what we can to look after our own health and wellbeing we can make sure services are there for when we really need them.

- 4.4 We will use the overarching model of care infographic outlined in the Delivery, Recovery and Transformation Plan to outline the future delivery of health and social care. This will support a consistent approach to messaging, allowing informing and engaging around specific elements of the model in the context of the 'whole'.

5 Phase 1 – Informing and Engaging

In September 2018, we will commence our informing and engaging with people, using the key messages outlined above in 4.3 we will:

- outline the current challenges and opportunities faced by health and social care services.

This will include the demographics, issues of deprivation and the demands on health and social care services. We will outline the opportunities offered for people to take ownership of their own health and wellbeing and their future experience of health and social care services which will be more seamless and tailored to individual need.

- The direction of travel for sustainable health and social care services locally and regionally

Integrated services will facilitate the delivery of the majority of health and social care locally. People may have to travel to centres of excellence regionally for some specialist services which will ensure the best possible outcomes.

- Seek people's views on what a good service looks like for them and their families.

We will ask people what they would wish to receive from high quality integrated health and social care services. This will include six dimensions of safe, effective, patient centred, timely, efficient and equitable.

As detailed in the TCIP, we will ensure that feedback is sought on the guiding principles detailed below:

- Quality
- Maximising Health Gain
- Reducing Inequality
- Anticipation and Prevention
- Home or homely setting
- Sustainability (e.g estates issues, workforce challenges etc.)

Initial communication and engagement activity will focus on four key areas as outlined below (please refer to Appendix 1, 2 and 3 for detailed action plan and our planned engagement and communications plan).

| Resources | Key Actions |
|--------------------------------|---|
| Mandate | <ul style="list-style-type: none"> • Develop and agree informing and engaging mandate with NHS Board and IJBs. This mandate will make the aim, process and outcome clear to all. |
| Information booklet for people | <ul style="list-style-type: none"> • This document will succinctly outline the challenges, opportunities and key questions to inform people. |
| Link to website | <ul style="list-style-type: none"> • Develop case studies and videos to showcase aspects of the new models of care. |

| Area of Activity | Key Actions |
|--|---|
| Social Media | <ul style="list-style-type: none"> • Develop digital resources around key messages / overarching model of care including the use of animation, videos and infographics. • Deliver planned programme of informing and engaging via social media (facebook and twitter), including case studies and stories, weekly blog and twitter chat round key topics. • Develop discussion forums. |
| Local engagement via HSCP's | <ul style="list-style-type: none"> • Continue to use the established Public Engagement Group to ensure all planned engagement is consistent, complimentary and 'whole' system in approach. • Use HSCP engagement structures (e.g. locality planning groups) and existing planned activity (e.g. HSCP strategic plans) to engage with people around key messages/ overarching model of care and specific elements of service change. • Develop feedback mechanisms to inform the ongoing development of the Delivery, Recovery and Transformation Plan. |
| Engagement with people at point of care (secondary services) | <ul style="list-style-type: none"> • Deliver a planned programme of informing and engaging at point of care and via the NHS Ayrshire and Arran Participation Network including point of care engagement, focus groups and a variety of feedback mechanisms |

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| | <ul style="list-style-type: none"> • Bespoke informing and engaging sessions will be planned for specific elements of service change as they arise. |
| Informing and engaging with people with protected characteristics (eg. Disabled, BME, LGBT, young people, pregnant etc) | <ul style="list-style-type: none"> • Outreach programme of informing and engaging will be organised to ensure we are inclusive. • Develop specific digital resources around key messages / overarching model of care to engage with people with protected characteristics • Deliver a planned programme of engagement for people. |

5.2 Informing and engaging around the Delivery, Recovery and Transformation Plan will be a continuous and iterative process and a formative approach to evaluation of engagement activities will inform future communication and engagement planning and engagement around specific elements of service change. The Public Engagement Group will develop evaluation methodologies with the support of the Scottish Health Council and the Consultation Institute.

Appendix 1 - Communication and Engagement Plan (Phase 1 – Action Plan) September to December 2018

| Engagement Activity | Actions | Status | Responsible officer | Timescale | Progress (Sept 2018) |
|---------------------------|--|---|--|------------------------|---|
| Infrastructure/governance | <ul style="list-style-type: none"> Develop a communication and engagement plan for approval by NHS Board and IJB's. Continue to use the Public Engagement Group to coordinate engagement activity across HSCP's/Acute Services (including planning leads, comms leads and SHC) Ensure engagement activity includes staff and external groups Agree oversight and reporting arrangements for engagement activity (SPOG and TLG) Secure resources and service support for delivery of the informing and engaging plan Develop evaluation plans | <p>Complete</p> <p>Ongoing</p> <p>Ongoing</p> | Director of Transformation and Sustainability | August/September 2018 | <ul style="list-style-type: none"> SPOG – 13 August 2018 TLG – 17 August 2018 Public Engagement Group 27 August 2018 NHS Board – October 2018 |
| Resource Development | <ul style="list-style-type: none"> Agree key messages with partners Develop information booklet Continued use of #caringforayrshire Designated web page for caringforayrshire Develop overarching | <p>Complete</p> <p>Review</p> <p>Complete</p> <p>Complete</p> | <p>Comms Manager</p> <p>Comms Manager</p> <p>Comms Manager</p> <p>Comms Manager</p> <p>Comms</p> | September/October 2018 | <p>Update leaflet https://www.nhsaaa.net/media/4150/mis17-174-cc-caring-for-ayrshire-a5-leaflet_spreads.pdf</p> <p>www.nhsaaa.net/caringforayrshire</p> |

| Engagement Activity | Actions | Status | Responsible officer | Timescale | Progress (Sept 2018) |
|-----------------------------|---|--------|---|-------------------------|---|
| | <p>model of care infographic for use in conjunction with key messages</p> <ul style="list-style-type: none"> • Develop range of written/visual/audio visual resources around key messages / overarching model of care • Develop an range of digital resources around key messages/overarching model of care • Continue to capture case studies and experiences | | <p>Manager</p> <p>Comms Manager</p> <p>Comms Manager</p> <p>Person Centred Team</p> | | <p>Proposal to develop NHS GGC Moving Forward Together for NHS A&A</p> <p>Agree schedule for social media</p> <p>Update webpage</p> <p>Update #CaringforAyrshire icon on your news page AthenA.</p> <p>Progress Patient Stories on caringforayrshire webpage.</p> |
| Social Media | <ul style="list-style-type: none"> • Agree and deliver planned programme of social media engagement around key messages / overarching model of care. • Secure leadership support for specific social media activities including: <ul style="list-style-type: none"> ○ Weekly blog ○ Discussion forums | | Comms Manager | September/ October 2018 | <p>Develop template for social media campaign – Date, key message, method, audience, comments, Lead.</p> <p>Discuss and agree at Public Engagement Meeting.</p> <p>Investigate social media training / input from Consultation Institute.</p> |
| Local engagement via HSCP's | <ul style="list-style-type: none"> • Public Engagement Group to consider Delivery, Recovery and Transformation Plan / overarching model of care/ key messages and congruence with HSCP strategic plans to ensure 'whole' systems support. | | <p>Public Engagement Group</p> <p>Public Engagement Group</p> | September/ October 2018 | <p>Develop monthly informing of new scope of work (dementia, end of life care, Digital services, respiratory TEC, mental health innovation money, breastfeeding, diabetes, Arran model of care, radiology, Primary Care, Intermediate Care and Rehab, unscheduled care, transforming outpatient, review of pathways of acute services etc..</p> |

| Engagement Activity | Actions | Status | Responsible officer | Timescale | Progress (Sept 2018) |
|--|---|--------|--|---------------|---|
| | <ul style="list-style-type: none"> • Public Engagement Group to consider existing planned HSCP engagement activity and agree any additional activities and support required. • Public Engagement Group will develop specific communication and engagement plans for service changes on a case by case basis. • Feedback mechanism to be developed and tested. • Public Engagement Group will link with regional and national engagement activities to ensure a consistency of approach. | | <p>Public Engagement Group</p> <p>Public Engagement Group</p> <p>Public Engagement Group</p> | | <p>Topic and press release, video, poster.</p> <p>Develop survey monkey questionnaire with key questions.</p> |
| Engagement with people at point of care (secondary services) | <ul style="list-style-type: none"> • Deliver a planned programme of informing and engaging at point of care and via the NHS Ayrshire and Arran Participation Network including point of care engagement, focus groups and a variety of feedback mechanisms • Secure service/leadership support for engagement activities • Feedback mechanism to be developed and tested. | | Clinical Transformation Board | November 2018 | <p>TBC</p> <p>TBC</p> <p>Hard copy of questionnaire to Outpatient Departments, GP Surgeries etc.</p> <p>TBC</p> |

| Engagement Activity | Actions | Status | Responsible officer | Timescale | Progress (Sept 2018) |
|---|---|--------|--|--------------|--|
| | <ul style="list-style-type: none"> • Link with Public Engagement Group to ensure 'whole' systems approach • Bespoke engagement will be planned for specific elements of service change in line with national requirements | | | | |
| Engagement with people with protected characteristics | <ul style="list-style-type: none"> • Develop specific digital resources around key messages / overarching model of care to engage with people • Engage with people 'where they are' including Ayrshire Equalities Partnership, Participation Network, Ayrshire College, Community Groups, voluntary organisations and HSCP structures and point of care services • Deliver a planned programme of engagement for people using social media platforms | | Comms/AND Public Engagement Group | January 2019 | <p>Engagement with colleges, UWS and secondary schools planned</p> <p>Social media being used gain feedback from young people.</p> <p>HSCP CPP and Locality Planning Partnerships – linkages.</p> <p>As above.</p> |

Appendix 2

How we will inform and engage

We have undertaken a stakeholder analysis of all those involved and affected by the #caringforayrshire and a process for communicating with and involving them. This approach will be flexible to allow maximum reach following feedback from our staff, our stakeholders and partners.

| Influence and engagement | |
|--|--|
| Engage regularly | Involve in governance and decision making |
| Engage on specialty interest | Involved in decision making for specialty area |
| Keep informed and discuss area of interest | Engage through involvement at area of interest level |
| Keep informed via regular communication | Engage broadly and hear feedback |

| Stakeholders | Methods of engagement | Channels of communication |
|---|---|--|
| NHS Ayrshire and Arran Board | Briefings, papers, presentations | Regular meeting structure |
| Integrated Joint Boards | Briefings, papers, presentations | Regular meeting structure |
| Corporate Management Team | Briefings, papers, presentations | Regular meeting structure |
| Scrutiny Groups | Briefings, papers, presentations | Regular meeting structure |
| Local Councils <ul style="list-style-type: none"> Elected Members | Briefings, papers, presentations | Regular meeting structure |
| Health and Social Care Partnership <ul style="list-style-type: none"> Stakeholder Reference Groups Third Sector Forum Strategic Planning Group Locality Planning Forum members Locality Planning Partnership Ayrshire and Arran Self Management Network TACT | Briefings, papers, presentations HSCP Locality meetings Information materials | Regular meeting structure Promoted via NHSAA and HSCP channels Web portal on NHSAA and HSCP websites Facebook and twitter accounts Press releases Media |
| Independent Sector <ul style="list-style-type: none"> CPP Partners | HSCP Locality meetings | Promoted via NHS AA and HSCP channels |

| Stakeholders | Methods of engagement | Channels of communication |
|---|--|--|
| <ul style="list-style-type: none"> • Libraries • Primary Care networks • Carers Centres • Equalities networks • TSI • Money matters • Mental Health networks • Learning Disability (LD) network • Justice network • Recovery at work (RaW) network • Refugee network • Housing, Homeless/hostels • Housing • Alcohol and Drug Partnership (ADP) network • Mental Health reference group • CPP Locality Coordinators • Disability networks • Public Partnership Forum • Carers • Scottish Health Council | <p>Information materials</p> <p>Briefing meetings as required</p> | |
| Other WoS Regional Boards | Briefings, papers, presentations, individual discussions | WoS Regional Planning Process and specific focussed meetings |
| WoS Regional Planning | Membership, briefings, papers, presentations, discussions | Regular meeting structure |
| MSPs | Briefings and information materials | Dedicated meetings and briefings |
| Local politicians | Briefings and information materials | Dedicated meetings and briefings |
| Area Partnership Forum | Routine agenda item plus information materials and briefings as required | Regular meeting structure |
| Operational Directors | Routine agenda item plus information materials and briefings as required | Regular meeting structure |
| Directorate Senior Teams | Routine agenda item plus information | Regular meeting structure |

| Stakeholders | Methods of engagement | Channels of communication |
|--|---|---|
| | materials and briefings as required | |
| HSCP Chief Officers | Routine agenda at Strategic Planning and Operational Group (SPOG) and briefings as required | Regular meeting structure |
| HSCP Senior Teams | Routine agenda at meetings and briefings as required | Regular meeting structure |
| Specialty Clinical Groups | Routine agenda at meetings, information materials and briefings as required | Regular meeting structure |
| NHSAA Staff Area Partnership Forum Existing Networks | Routine agenda at meetings, information materials and briefings as required | Regular meeting structure |
| HSCP staff | Routine agenda at meetings, information materials and briefings as required | IJB meetings IJB development sessions Papers/updates to Council and elected members Senior Management Teams and other forums Internal newsletters and briefings Intranet/public-facing websites and social media |
| GPs LMC Local bodies | Routine agenda at meetings, information material and briefings as required | Clinical groups |
| Independent Contractors Pharmacy Opticians Dentists | Routine agenda at meetings, information material and briefings as required | Advisory committees |
| Scottish Ambulance Service | Routine agenda at meetings, information material and briefings as required | |
| NHS 24 | Routine agenda at meetings, information material and briefings as required | |
| Local Authority Staff | Information, updates, briefings as required | |
| Further and Higher Education | Information, updates, briefings as required | |

| Stakeholders | Methods of engagement | Channels of communication |
|------------------------------------|---|---------------------------|
| Housing Police Fire Services | Information, updates, briefings as required | |
| Third sector | Information, updates, briefings as required | |
| Private sector | Information, updates, briefings as required | |

Appendix 3

Caring for Ayrshire Communications action plan September 2018



Key messages

- Over the years the NHS Ayrshire and Arran has continually adapted and developed as a result of new health challenges and better ways of working.
- Many of the people of Ayrshire and Arran are living much longer lives and that means our health and social care services need to evolve to make sure they can look after more people and in better ways.
- Given the demands on health and social care services, we need up-to-date ways of doing things in order to meet the growing needs of the people of Ayrshire and Arran.
- Our health and social care services are finite resources and we need to live within our means.
- We need to provide existing and new services in better ways, providing the best quality care. We need to look after people in ways that are affordable and make best use of the healthcare workforce, their skills, and resources.
- Current workforce challenges including the recruitment and retention of key health professionals is driving the way we deliver services. Going forward sustainable models of care will be delivered through the creation of new roles with a focus on advanced practice for a variety of health care professionals.
- Advances in medical treatment and technology mean we can now deliver increasingly specialised services for conditions that were unknown or untreatable when the NHS was first created 70 years ago. Locally-based services will continue to provide the routine community and hospital care, and more specialised services will be delivered in centres of clinical excellence within regions or, in some cases, at a national level. This will mean Ayrshire and Arran patients get access to the best clinical expertise.
- Health and social care services will continue to adapt to ensure they meet the needs of people and go on delivering long into the future.
- We want to build on the excellent care already provided. We will do this by working with partners across health and social care to speed up the developments needed, ensuring we focus resources in ways that allow us to develop the best services to meet people's needs as close to home as possible.
- Our health and social care staff are highly skilled and dedicated people who work hard to deliver care in a way that allows them to provide the very best care and treatment within the resources available.
- We all have a role to play in supporting Ayrshire and Arran health and social care services. By doing what we can to look after our own health and wellbeing we can make sure services are there for when we really need them.

Target groups and level of commitment

Decision-making groups

- Ayrshire and Arran NHS Board Commitment
- Corporate Management Team Commitment
- Area Partnership Forum (APF) Commitment
- Area Clinical Forum (ACF) Commitment
- Health and Social Care Partnerships Commitment

Staff

- All NHS staff Awareness / Understanding / Support
- All H&SCP staff Awareness / Understanding / Support
- Community staff: for example, Community nursing staff, ANPs Awareness / Understanding / Support

Stakeholders

- Scottish Health Council Support/Involvement
- Consultation Institute Support / Involvement/Training
- Independent contractors Awareness / Understanding / Support
- MPs / MSPs Awareness / Understanding
- Local authorities Awareness / Understanding / Support

Public

- Media Awareness / Understanding
- Patient/Public Reference Group Support / Involvement
- Public Partnership Fora Support / Involvement
- Patient groups Awareness / Understanding
- Service users Awareness / Understanding
- General public Awareness / Understanding

| Level of commitment | Objectives |
|--|--|
| Awareness I know it is happening | To create an awareness of the need for transformational change |
| Understanding I know what is happening | To create an understanding with staff, public, stakeholders and media on why existing services need to change |
| Support I support what is happening | To support local people and NHS Ayrshire & Arran and partnership staff to take ownership of the key messages and help to spread these within their own departments / communities |
| Involvement I am doing X to make it happen | Buy-in from senior clinicians and other stakeholders to take part in the review and subsequent communications activity in order to ensure a consistent message |
| Commitment I will do what it takes to make it happen | Staff and other stakeholders are committed to the plan's messages and objectives and take part in communication activities to support the objectives of the exercise. |

Communications action plan

| Audience ⇨ | Decision-making groups | Staff | Stakeholders | Public | Cost | Comment / timing |
|--|------------------------|-------|--------------|--------|--|----------------------------------|
| Possible methods ↓ | | | | | | |
| Stop press bulletin | ✓ | ✓ | ✗ | ✗ | N/A | On request NHS A&A staff only |
| Posters (displayed on approved noticeboards) | ✓ | ✓ | ✗ | ✓ | Dependent on quantity (Internal printing 7p per copy) | |
| Targeted presentation to staff groups | ✓ | ✓ | ✗ | ✗ | N/A | |
| Targeted presentation to public groups | ✗ | ✗ | ✓ | ✓ | N/A | |
| eNews | ✓ | ✓ | ✗ | ✗ | N/A | Issued weekly to NHS A&A staff |
| eNews special | ✓ | ✓ | ✗ | ✗ | N/A | On request NHS A&A staff only |
| Staff news | ✓ | ✓ | ✗ | ✗ | N/A | NAHSCP |
| Daily digest | ✓ | ✓ | ✗ | ✗ | N/A | Issued daily to NHS A&A staff |
| AthenA | ✓ | ✓ | ✗ | ✗ | N/A | NHS A&A staff only |
| Desktop banners | ✓ | ✓ | ✗ | ✗ | N/A | NHS A&A staff only |
| All staff emails | ✓ | ✓ | ✗ | ✗ | N/A | NHS A&A staff only |
| Information leaflet / flyer | ✗ | ✗ | ✓ | ✓ | Dependent on quantity | |

| | | | | | | |
|---|---|---|---|---|---|--|
| Payslips (NHS A&A) | ✓ | ✓ | ✗ | ✗ | N/A | Notice required (TBC) |
| Payslips (H&SCP) | ✓ | ✓ | ✗ | ✗ | N/A | |
| Social media | ✗ | ✗ | ✓ | ✓ | N/A | |
| Targeted social media | ✗ | ✗ | ✓ | ✓ | TBC | |
| Chief Executive blog | ✓ | ✓ | ✗ | ✗ | N/A | NHS A&A staff only |
| Media releases and targeted features | | | | | | Facebook |
| Facebook | ✗ | ✗ | ✓ | ✓ | N/A | Carena, CPP localities, libraries, The Ayrshire Community Trust (TACT) |
| Twitter | | | | | | Independent Sector |
| Public website | | | | | | |
| HSCP, NHS Ayrshire & Arran, Community Planning Partnership (CPP), Carena, | ✗ | ✗ | ✓ | ✓ | N/A | |
| Display on TownCentre TV, Bridgegate Irvine | ✓ | ✓ | ✓ | ✓ | Dependent on requirements | North Ayrshire |
| Newspaper advertising | ✗ | ✗ | ✓ | ✓ | Dependent on size, media outlet, frequency / length of time | West FM |
| Radio advertising | | | | | | Irvine Beat FM |
| Survey monkey | ✓ | ✓ | ✓ | ✓ | N/A | |
| Video blogs | ✓ | ✓ | ✓ | ✓ | Internally produced: N/A Externally produced: TBC | |
| Electronic bulletin – for example, Healthwise | ✗ | ✗ | ✓ | ✓ | N/A | |
| Public information | ✗ | ✗ | ✓ | ✓ | Dependent on quantity | October 2018 |

| | | | | | | |
|------------------------|---|---|---|---|--|--|
| leaflet | | | | | | |
| Case studies - written | x | x | ✓ | ✓ | Dependent on if printed copies are required | |
| Case studies - video | x | x | ✓ | ✓ | Internally produced: N/A Externally produced: TBC | |

Available methods of communication

| Target audience | Method | Details |
|-------------------------------|--|---|
| Staff | Stop press bulletin | Staff information newsletter: NHS A&A staff, however can be shared with HSCP staff |
| Staff / Public | Posters (displayed on approved noticeboards) | Placed within all NHS premises, and partner premises where necessary |
| Staff | Targeted presentation to staff groups | As required |
| Staff | eNews | Weekly electronic all staff email bulletin: NHS A&A staff only |
| Staff | eNews special | Electronic news bulletin with a focus on a particular campaign: NHS A&A staff only |
| Staff | Daily digest | Daily electronic bulletin sent to all staff: NHS A&A staff only |
| Staff | AthenA | Staff intranet with banners on the homepage linking to further information: NHS A&A staff only |
| Staff | Desktop banners | Banner is available to direct staff to further information / communicate key messages: NHS A&A staff only |
| Staff | All staff emails | Used to communicate important and timely messages: NHS A&A staff only |
| Staff / public | Information leaflet / flyer | Distributed at events, NHS premises |
| Staff | Payslips | Short key messages can be shared with all staff: NHS A&A staff only |
| Staff / public / stakeholders | Social media | Corporate account is followed by members of staff, as well as members of public |

| | | |
|-------------------------------|--|---|
| | | A bank of key messages can be created and published at regular intervals |
| Staff | Chief Executive blog | Used to highlight key messages: NHS A&A staff only |
| Staff / public / stakeholders | Media releases and targeted features | Drafted and issued as appropriate |
| Staff / public / stakeholders | Public website | A dedicated page is available on the public website and highlighted on all communications www.nhsaaa.net/caringforayrshire |
| Staff / public / stakeholders | Newspaper advertising Radio advertising | Used to highlight events and engagement |
| Staff / public / stakeholders | Survey monkey | A questionnaire can be created and distributed widely to get people's views on the campaign |
| Staff / public / stakeholders | Video blogs | Filmed on a monthly basis with the Chief Executive and / or directors , and published on the public website |
| Staff / public / stakeholders | Electronic newspaper – for example, Healthwise | Public online newspaper used to highlight important developments and share good news stories |