

Quarterly Communications and Engagement Update

Governing Body meeting

7 September 2017

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Purpose of Paper	
This paper provides a summary of communications and engagement activity and impact between April and July 2017.	
Key Issues	
Activity covered includes reputation management, staff communications and engagement to support priority areas of work and ensure the CCG is meeting its statutory duties.	
Is your report for Approval / Consideration / Noting	
For consideration	
Recommendations / Action Required by Governing Body	
The Governing Body is asked to note the work undertaken and its impact, and raise any questions	
Which of the CCG's objectives does this paper support?	
Objective 1: To improve patient experience and access to care Principal Risk: 1.1 Insufficient communication and engagement with patients and the public on CCG priorities and service developments, leading to decisions that do not fully meet needs	
Are there any Resource Implications (including Financial, Staffing etc)?	
No, however work is currently underway to review communications and engagement capacity	
Have you carried out an Equality Impact Assessment and is it attached?	
This report covers previous activity and therefore an EIA is not appropriate. Individual EIA screening processes have been carried out for specific pieces of work.	

Have you involved patients, carers and the public in the preparation of the report?
<p>This paper highlights how we have involved patients, carers and the public in the last quarter.</p>

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1. Introduction

This report provides an overview of communications and engagement activity and impact during the first three months of 2017-19.

2. Communications

2.1 Reputation management

Work has continued to focus on building a positive reputation for the CCG and raising awareness of our commissioning work and priorities. An overview of media and digital activity is attached as Appendix 1 but the following is a brief summary:

2.1.1 Media

- We maintained a regular media presence with a total of 21 mentions, all of which were either positive (81%) or neutral (19%).
- Media releases were issued on a range of topics, including the Easter Choose Well campaign, our annual report and the CCG's good rating in the Improvement Assessment Framework.
- 16 media enquiries and interview requests were managed, with topics including the NHS cyber attack, local statistics for TB and asthma, mental health commissioning and procedures of limited clinical value.
- The key focus for work during June and July was raising awareness of the financial challenges the CCG is facing, including QIPP-related stories to show actions being taken to both improve care and deliver efficiencies.

2.1.2 Social media

- We've continued to use Twitter to support a variety of health campaigns, as well as specific CCG initiatives. Our following has increased by a further 300 followers during this time and we have also increased the digital impressions (number of people potentially reached) to 2.7m
- The most frequently used hashtags over the last quarter were around Choose Well over the Bank Holiday, Mental Health Awareness week, Diabetes and Pharmacy First.

2.1.3 APM planning

- Planning for this year's annual public meeting started, which will take place on 28 September. This year's meeting has a focus on children and young people and will include a variety of activities, including students from Sheffield College putting their health questions to the Governing Body.

2.1.4 HSJ awards

The communications team worked with teams across the CCG to complete entries for this year's HSJ awards. Four entries were submitted in total covering work on MSK, IAPT, integrated mental health and person-centred care.

2.2 External communications

2.2.1 Medicines Management Campaign

- A campaign has been developed to support work to reduce prescribing waste, which will be launched in the autumn.
- This uses a variety of activities, including advertising, PR and social media, and aims to reduce unnecessary repeat prescriptions. It will also support the STOP list guidelines that were produced earlier this year and help GPs to communicate these messages to patients.

2.3 Internal Communications

2.3.1 Staff

- We have continued to manage the monthly team briefings and monthly staff exchange forums, which ensure staff are kept up to date on key issues and have chance to discuss these in their teams.
- Key areas for staff communications have continued to be plans for developing an accountable care partnership in Sheffield and the ACS, as well as the Five Year Forward View Delivery Plan and the results of the CCG Improvement Assessment Framework. There has also been a big focus on QIPP, including teams sharing their tips for delivering their targets.
- We have also ensured that we also maintained a focus on sharing and celebrating successes, including work on Patient Activation Measures, CASES, IAPT, and Maddy's experience of spending a day with the Continuing Healthcare team.
- Work has also started to develop plans for supporting staff through change, which is being led by the deputy directors.
- A huge amount of work was also done to support the Move More month in June and encourage staff to take part. This was a great success, generating some healthy competition between teams, and helping to boost morale and team spirit.

2.3.2 Members

- A view of communications with member practices has been carried out and a number of recommendations developed for discussion. In the interim, work has already been carried out to improve the weekly GP bulletin
- Communications to support Neighbourhoods has been reviewed and plans put in place to improve this. This has included the development of high quality materials to support communications and the redesign of the monthly newsletter, which is now achieving the aim of spreading good practice and ideas across different neighbourhoods.

2.3.3 For Pete's Sake campaign

- We have been working with the CHC team to develop a campaign about improving patient care. This arose from feedback from the wife of a CHC patient who sadly died earlier this year. 'For Pete's Sake' urges us all to remember the person behind the patient, whether we are caring for them directly or planning services, and think about what we can do to improve their experience.
- NHS England are also supporting the campaign, and the production of a video to be launched at their nursing conference in October.

3. Engagement

The main focus has continued to be supporting priority areas of work and work to help develop an effective infrastructure for high quality, impactful engagement, in line with the refreshed objectives.

3.1 CCG priority areas of work

Urgent care

- This has continued to be a key priority. Feedback from the engagement work was analysed and key themes identified to inform the development of options for a new service model. The engagement manager is a member of the project group and has attended all meetings to support this process. The team has also supported the production of equality impact assessments for the various options.

Impact: The feedback from local people has helped to shape the proposals for urgent care and ensure patient needs are understood and addressed. Information regarding other service areas is being shared with portfolios to inform their commissioning.

Primary care

- Supported work on care navigation, providing feedback from previous engagement activities to inform planning and roll-out
- Carried out an evaluation of person centred care planning submissions from practices to identify opportunities to develop or strengthen patient participation groups (PPGs).

Impact: This has helped to shape plans and ensure patient feedback is taken into account. It will also support our work to strengthen PPGs across the city.

Accountable Care System (ACS)

- We have continued to support engagement work for the ACS, contributing to the regional engagement mapping exercise that has been carried out.

Impact: This will ensure that existing feedback and intelligence from people in Sheffield is fed into the ACS workstreams and future activity planning. It will also ensure we have evidence to demonstrate how we are meeting our statutory responsibilities.

3.2 Other work

- Children's respite services: continued to provide advice and support to ensure appropriate and proportionate engagement with families who are likely to be directly affected by proposals for changes to the service.
- Continuing Healthcare: ongoing advice and input to support the development of a new adults short breaks (respite) policy for Sheffield, in partnership with Sheffield Council.
- Renal Dialysis patient transport: led public engagement in the evaluation of the tender submissions.
- Mental health transformation programme: scoping of engagement requirements underway.
- Ongoing support and advice on patient engagement provided to the elective care portfolio and MSK team.
- Cancer: supported a multi-agency event for people who are living with and beyond cancer to inform commissioning plans.

Impact: has ensured the CCG is meeting its statutory responsibilities, as well as its commitment to making sure patients and the public are effectively involved in commissioning. This will ultimately also help ensure that services meet patients' needs.

3.3 Developing an effective infrastructure to enable high quality engagement

3.3.1 Patient Participation Group (PPG) network

- In response to feedback from network members, we organised a half-day conference in June to allow time to cover more topics and networking opportunities.
- Areas of work discussed included neighbourhoods, the musculoskeletal service and elective care.
- The event was very well evaluated and a number of topics have been agreed for future meetings.

Impact: This is helping to develop PPGs and increase their engagement in our commissioning. It has also made PPGs more aware of some of the key issues facing primary care so that they can consider how they can support their practice. Feedback from attendees has been fed into work on neighbourhoods and elective care to influence commissioning plans.

3.3.2 Developing community contacts

- There have been significant changes to the local Healthwatch team so we have been building relationships with the new staff to ensure ongoing dialogue about patient engagement and experience in the city.

- Margaret Kilner, the new Healthwatch chief executive, will be joining the Strategic Patient Experience, Engagement and Equality Group from the autumn, and members also attend the city-wide Equality Group, chaired by the CCG.
- Work has continued with Care Opinion (formally Patient Opinion) to explore opportunities for using their online system for public engagement.

Impact: relationships developed and strengthened to support more effective engagement

3.3.3 Strategic Patient Experience, Engagement and Equality Group (SPEEEG)

- The group has gained assurance on a number of areas of engagement work, including the approach to children's respite services, urgent care and the renal patient transport procurement.
- Assurance has also been gained that the feedback from the PPG network on neighbourhoods and elective care is being used to inform planning and commissioning.
- A proposal was taken to governing body to establish the group as a formal committee. This was approved, subject to agreement from members to amend the constitution, and Terry Hudson will join the committee as the clinical representative. New terms of reference have been developed to support this.

Impact: Assurance provided to Governing Body that engagement work is being carried out appropriately and used to influence commissioning, in line with statutory requirements. The CCG's approach to engagement, equality and patient experience has also been strengthened by establishing SPEEEG as a formal committee.

3.3.4 Other work

- We are continuing to work with CCG and council staff to identify opportunities to involve members of the former Citizens Reference Group in our work. This will help to maintain links with members so they can continue to make a valuable input into commissioning in the city. This has included the meeting arranged to discuss tackling our financial pressures.

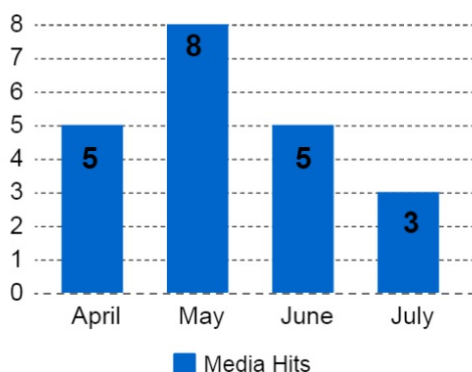
4. Equality Impact Assessments

- Equality and diversity is being incorporated into the remit of the engagement team and work has started to identify the priority requirements and resources to deliver them. The team is already supporting staff across the CCG to complete equality impact assessments and we have started work to improve this process and ensure a more coherent, streamlined approach, in line with the changes made to quality impact assessments. A new approach was trialled as part of the NHS England assurance process for the urgent care redesign and feedback is being used to confirm final recommendations.

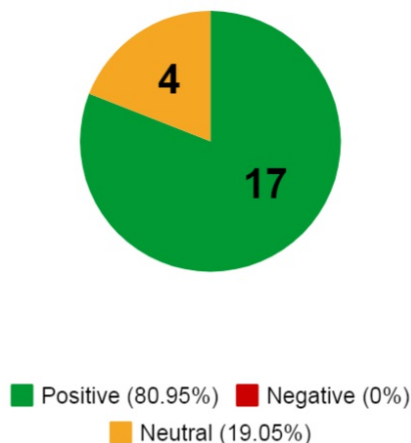
Communications Update April 2017 - July 2017

Media

Total number of media hits



Tone of the media coverage



Type of coverage



Print = 9



Online = 12

Press Releases and Media Enquiries

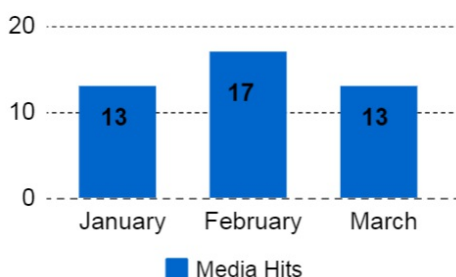


Proactive

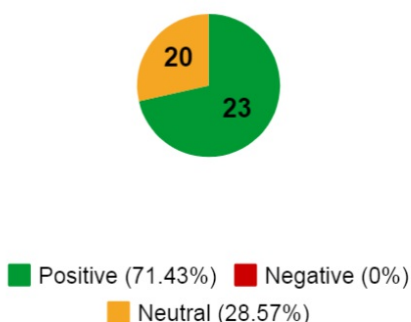
Reactive

In comparison to January 2017 - March 2017

Total number of media hits



Tone of the media coverage



Type of coverage



Broadcast = 2



Print = 16



Online = 25

Press Releases and Media Enquiries



Proactive

Reactive

Digital



Public Facing Website
Total number of hits: 33,479

Staff / Member Intranet
Total number of hits: 184,904



Social Media



Total number of tweets sent: 752
Total number of retweets: 630
Social media referrals to website: 339
2,687,042 digital impressions