

# Communications and Engagement Strategy for the Health and Wellbeing Board



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## BACKGROUND

### 1.0 Health and Wellbeing Board

North Tyneside Council is required to appoint a Health and Wellbeing Board (HWB) to ensure that there is an integrated approach to the provision of health and social care services in the area. The HWB brings together representatives from a range of relevant organisations to provide shared leadership of the strategic approach to health and wellbeing of communities in North Tyneside.

Membership includes democratically elected representatives, patient representatives and commissioners across health and social care. It provides a forum for challenge, discussion, and the involvement of local people.

Established in each local authority area, such boards now have statutory duties and powers to encourage integrated working of commissioners and providers in order to improve the health and wellbeing of the local population, reduce inequalities, and improve the quality and experience of services for the local population.

The North Tyneside Health and Wellbeing Board is responsible for:

- a) Encouraging the commissioners of health and social care services to work in an integrated manner to improve the health and wellbeing of people in the area, including the making of joint arrangements
- b) Preparing and monitoring a Joint Strategic Needs Assessment, Joint Health and Wellbeing Strategy and Pharmaceutical Needs Assessment
- c) Encouraging the commissioners of health-related services, such as housing, to work closely with the HWB and the commissioners of health and social care services
- d) Considering the commissioning plans for health and social care services.

The Board is committed to working towards the vision set out in the North Tyneside Joint Health & Wellbeing Strategy, namely that by 2023, we will have improved health and wellbeing outcomes in North Tyneside to match the best in the country.

A number of subcommittees have also been established under the HWB to address specific themes. For example, North Tyneside has set up an Integration Board to create a more joined up and seamless health and social care provision that will improve the lives of borough residents and service users. Please see '**Appendix A**' for the structure and governance of the HWB and sub-committees/boards.

### 2.0 North Tyneside's profile and its Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS)

Driven by the Health and Wellbeing Board, the North Tyneside Joint Strategic Needs Assessment (JSNA) is an overarching assessment of the health and wellbeing

needs of our population across the wider health and social care economy. It is the basis for developing the Health and Wellbeing Strategy.

The JSNA has identified that North Tyneside, as a whole, is now one of the least deprived areas in the North East of England. However, stark inequalities persist within the borough in relation to income, unemployment, health and educational attainment.

The economic downturn and the current welfare reforms are impacting on the income of residents with the inevitable consequences for their health and wellbeing. The gap in life expectancy within the borough is wide (11.6 years for males and 9.2 years for females) and has also remained constant throughout the last decade.

Therefore, in response, the Health and Wellbeing Strategy has been devised to:

- Continually seek and develop new opportunities to improve the health and wellbeing of the population
- Reduce the difference in life expectancy and healthy life expectancy between the most affluent and most deprived areas of the borough
- Shift investment to focus on evidence-based prevention and early intervention wherever possible
- Engage with and listen to local communities on a regular basis to ensure that their needs are considered and wherever possible addressed
- Build resilience in local communities through focussed interventions and ownership of local initiatives to improve health and wellbeing
- Integrate services where there is an opportunity for better outcomes for the public and better use of public money
- Focus on outcomes for the population in terms of measurable improvements in health and wellbeing

### **3.0 Partners represented on the Health and Wellbeing Board**

Organisations represented on the HWB can help us to deliver the identified communications objectives, set out in this strategy, by sharing messages through their internal channels.

The organisations are as follows:

[North Tyneside Council](#) is the local government authority for North Tyneside. The area is split into 20 wards, each with three elected councillors.

The HWB is a committee and statutory duty of the council. At least one democratically elected member of the council, acting on behalf of residents, must be appointed to it.

While a lot of the health and wellbeing work is centred around and delivered by the Health, Education, Care and Safeguarding service, the health and wellbeing of the borough's residents is a priority for all council services, including housing, leisure, environment, etc.

The HWB will help to inform the work of the council's 'change' programme, 'Creating a Brighter Future', namely the 'Cared for, safeguarded and healthy' theme.

[North Tyneside Clinical Commissioning Group \(CCG\)](#) is the statutory health body responsible for the planning, choosing and buying of local NHS care and services to meet the needs of the local community in North Tyneside.

[Northumbria Healthcare NHS Trust](#) provides hospital services at North Tyneside General Hospital. The CCG commissions the Trust to provide services to improve the health and wellbeing of the borough's residents. They help to encourage individuals to stop smoking, increase physical activity, improve their diet and maintain positive mental health and offer services to support them to do this.

[Newcastle Hospitals NHS Foundation Trust](#) also provides hospital services to residents and is commissioned by the CCG in the same way Northumbria Healthcare NHS Trust is.

[North of Tyne Local Pharmaceutical Committee \(LPC\)](#) is the statutory organisation which represents all community pharmacies in North Tyneside, Northumberland and Newcastle.

[Healthwatch North Tyneside](#) is the independent consumer champion for health and social care in North Tyneside. It seeks the views of patients, carers, service users and the wider public about how their health and social care services are run. Healthwatch has the right to visit places providing publicly funded health and social care services (such as hospitals, GP practices and residential homes). It makes reports and recommendations, publicises its findings, and it uses its statutory powers to bring about improvements in service standards.

[Voluntary Organisations Development Agency \(VODA\)](#) provides advice, training, information and support to voluntary and community groups. It works locally, regionally and nationally to promote the value and needs of the voluntary and community sector in North Tyneside. It helps to encourage and develop networks and partnerships between the voluntary and community sector and others.

[Age UK North Tyneside](#) provides services and support at to inspire, enable and support older people.



## COMMUNICATIONS

### 4.0 Purpose of this communications strategy

Given the broad and varied membership of the HWB, and the breadth of its work, it's important a clear and coherent communications strategy is developed and implemented.

This document provides an outline strategic framework for communications and engagement activity, ensuring the Health and Wellbeing Board (HWB) and associated sub-committees/boards have a 'profile' and the outcomes achieved through the work of the HWB are publicised to residents, patients, partners and other stakeholders.

It also sets out the core messages, vision and principles for communicating the role of the HWB to the widest possible audience.

It also addresses several recommendations from the 'peer review' undertaken by the Local Government Association (LGA) in February 2015 as part of its Health and Wellbeing System Improvement Programme. The recommendations and associated actions are outlined in '**Appendix B**'.

The strategy has been coordinated by North Tyneside Council's Communications team on behalf of the communications leads from the council, North Tyneside Clinical Commissioning Group, Northumbria NHS Foundation Trust and Healthwatch, who meet as part of the Health and Social Care Integration Communications Group. This group will now oversee communications for the Health and Wellbeing Board, and associated committees, rather than having a single focus.

The group will have the responsibility for ensuring that there is an open, transparent two-way communication system in place between stakeholders and those directly involved in the North Tyneside Health and Wellbeing Board.

This strategy also incorporates previous work undertaken by Claire Riley, Director of Communications for Northumbria NHS Foundation Trust, to communicate the role and priorities of the Integration Board.

It should be noted that Communications and Engagement Strategy is not a static document and it will be reviewed by communication leads. Further work is needed, once detail from the HWB is available, to develop a forward plan for communications and engagement activity.

### 4.1 Communications objectives

To coordinate and develop a planned communications and engagement approach that will:

- Give the HWB a 'profile', increasing/raising awareness and understanding of the role and work programme of the HWB amongst the public

- To promote engagement and consultation activities that are taking place, as well as raising awareness and increasing participation in the HWB
- To publicise the progress of the HWB to all relevant parties/partners both within and outside of the council and NHS
- To ensure other organisations represented on the HWB also benefit from communications activity
- To implement the communications and engagement recommendations of the peer review. See '**Appendix B**' for more detail.
- Highlight improvements and changes to the health and wellbeing of residents/service users, calls to action on how people can help themselves to improve their own health, and changes in services that will benefit communities
- Where appropriate, to raise awareness of associated boards and decisions taken. While we are clear that this strategy does not focus on the 'integration agenda', we recognise that it is a priority of the HWB. We will help to communicate the progress of integration across health and social care services in the borough. We will also seek to improve communications between workstreams under the Integration Board, highlighting the priorities each is pursuing.

## 4.2 Communications approach

- A 'core script' to be developed to explain the role of the HWB, its membership and its priorities. It will be used to help members in describing their work, ensuring a clear and consistent message goes out across the different organisations and audiences. It would be used across all initial communications and would, for example, provide simple opening text on websites, newsletters and other channels.
- Communications and engagement on health and wellbeing will be collaborative with health colleagues and other partners, wherever necessary, to ensure consistent, effective and sharable messages.
- As the nominated organisation for coordinating communications, a member of the council's Communications team will attend pre-agenda meetings to identify reports that will be of interest to the media, public, stakeholders etc.
- Understand our stakeholders so communications can be appropriately tailored, meaningful and effectively delivered. Recognise that some sections of our population will require tailored approaches and that we also need to target the groups who are in greatest need. We will seek to use the JSNA data and other local intelligence including engagement activity to inform this work

- Language will be appropriate for the audience, explaining concepts, acronyms and policy
- Agree a spokesperson from the lead commissioning organisations, suggested as follows:
  - North Tyneside Council – Chair of the HWB, Cllr Lesley Spillard
  - CCGs – Dr John Matthews, GP and Clinical Chair of the CCG
- Once this communications and engagement strategy is approved by the HWB, the communications and engagement group will begin to develop a forward plan
- The possible development a brand and an overarching strap line for the HWB offer will be discussed at the communications group.

## **Logistics**

North Tyneside Council will be the central coordination point for communication activity, however, media relations will be conducted in partnership with those represented on the HWB. Partners will take a lead role dependent on the campaign or the nature of the enquiry.

The agreed 'spokespeople' will be called upon where appropriate.

### **4.3 Key messages**

At the heart of all our communications will be the need to reflect the outcomes and priorities of the HWB and the Joint Health and Wellbeing Strategy. Individual messages, campaigns and activity should all be able to demonstrate that they will deliver in a way that reflects these.

- The HWB is committed to improving health and wellbeing for local people, and reduce inequalities. It will prioritise areas of greater need and greater potential for improvements, so that it can make the best use of available resources.
- The HWB acts as the focal point for health and social care organisations and professionals to agree goals and lead change
- It aims to improve outcomes in the NHS, public health and social care
- It brings together those who buy and run services in the borough, including council services such as public health, adult social care and children's services; the NHS and Healthwatch, to plan the right services for North Tyneside
- We will listen and welcome feedback from our communities and service users, specifically through engagement activity



- The HWB acknowledges wider determinants of health and wellbeing, i.e. housing, education, employment, etc.
- Together, the organisations represented on the HWB have built strong partnership working and collaboration within the borough
- The strategy to join up services will help avoid duplication amongst other health professionals and provide more efficient services to our communities
- Patients and the public will experience more joined-up services from the NHS and the council in the future, with a smoother transition between services and a better ‘customer experience’

#### 4.4 Audiences

The key stakeholders are:

- Public, patients/service users and carers
- Clinical Commissioning Group
- Governing body, staff and the board of Northumbria Foundation Healthcare Trust
- Governing body, staff and the board of Newcastle Hospitals NHS Foundation Trust
- Staff working with Primary Care, i.e. GPs practice nurses, health visitors, community health nurses
- Elected members and staff, and commercial partners where relevant, of North Tyneside Council
- The Health and Wellbeing and Adult Social Care Overview and Scrutiny Subcommittee
- Healthwatch
- VODA
- Age UK
- Other community and voluntary sector providers
- Other health providers – dentists, pharmacists (to check with Claire/Caroline?)
- MPs

Please see ‘**Appendix C**’ for further detail on what we hope to achieve from communication with identified audiences.

#### 4.5 Communications channels

- Press releases
- Media opportunities/photo calls

- Digital platforms, including web and social media
- Our North Tyneside (the council's residents' newsletter)
- Articles produced for inclusion in partners' publications, both internally and externally
- Letters for inclusion in print media
- Health and Wellbeing newsletter – for board members and associated stakeholders/partners
- Internal communications across all organisations
- Social marketing – social marketing is a systematic process that uses a range of marketing concepts and techniques to achieve a particular behaviour change. One of the underpinning features is gaining insight and understanding about your target groups, their knowledge, attitudes and beliefs, and the social context in which they live. Information gathered at engagement events or from documents like the JSNA could inform some social marketing work, if required

Further detail for each channel can be found in '**Appendix D**'

#### **4.6 The approval process for communications activity**

Each communications lead to use their usual approval process, but to endeavour that 48 hours notice is given to other organisations to comment on the activity (dependent on what it is). However, if it is an urgent matter/media enquiry, a more immediate turn around will be expected.

#### **4.7 Measuring our success**

We will evaluate our communication, learn from this and continually seek to improve our performance. We will do this by monitoring:

- Press coverage
- Hits on websites
- Social media – shares, tweets, retweets, favourites, likes,
- Feedback from the council's residents' newsletter
- The council's annual Residents' Survey
- We will seek to carry out a survey with HWB members. This has been an approach taken by other HWBs; they have regularly undertaken a survey with board members to gauge their perception of awareness and understanding

both within their own organisations and amongst their key stakeholders/audiences

#### 4.8 Communications issues/risks

- Failure to successfully communicate the complexity of issues discussed
- Failure to engage with the public and staff
- Failure to evaluate properly
- Insufficient forward planning

### ENGAGEMENT

#### 5.0 Purpose and objectives

##### Goal statement

***Engagement activity for the Health and Wellbeing Board will ensure that people's opinions are at the heart of decision making. The communications and engagement group will forward plan to ensure engagement opportunities are maximised and their delivery integrated.***

The HWB recognises that it is important to engage and involve patients, and the wider public, in their decision-making to increase customer satisfaction, challenge and change attitudes, as well as to ensure services are right and protect our reputations.

At the meeting of the HWB on July 2, members identified engagement and involvement as one of its main focuses for the year, including how the HWB understands existing engagement opportunities and how it can strengthen its approach, making the HWB everyone's board.

Statutory guidance on JSNA and JHWS advises that when involving the local community, health and wellbeing boards should consider inclusive ways to involve people from different parts of the community, including people with particular communication needs, to ensure that differing health and social care needs are understood, reflected and can be addressed by commissioners. This should recognise the need to engage with parts of the community that can sometimes be socially excluded and vulnerable.

Involvement should aim to allow active participation of the community throughout the process – enabling people to input their views and experiences of local services, and to have a genuine voice and influence over the planning of their services.

The Health and Social Care Act 2012 states that Health and Wellbeing Boards must also involve their local Healthwatch and the local community, and this should be continuous throughout the JSNA and JHWS process.

## 5.1 Approach

The success of the engagement approach will be dependent on the development of a forward plan to identify the topics to be engaged on. From there, we can look at the appropriate channels we can utilise, including where possible, to link into existing engagement opportunities

Once we are in a position to produce a forward plan, we will work to develop effective, on-going, two-way conversations with those who are affected (or have the potential to be affected) by the actions or decisions the HWB takes. The forward plan will also help the communications and engagement group to actively monitor any engagement activity.

With a communications and engagement group already established - including representation from the council, Northumbria Healthcare NHS Trust, North Tyneside Clinical Commissioning Group and Healthwatch - we can avoid duplication of engagement activity.

The group will also get sight of the 'reporting template' of the Integration Board's associated work streams. This includes a section populated by members of the groups relating to any potential engagement work. This can be added to a forward plan.

The peer review recommended maximising the use of established community engagement processes such as residents' panel, ward meetings, customer centres, online communication channels, etc. It suggested that the HWB starts thinking through how the HWB 'hear the voices' of patients and citizens directly.

The council will soon be creating a multi-organisation Engagement Group to discuss, and potentially share, engagement opportunities within the different organisations across North Tyneside, across all disciplines not just health and wellbeing. This can provide a useful focus for forward planning.

## 5.3 Engagement channels

### **COUNCIL:**

The council's different opportunities to access information and get involved are brought together under four categories:

**-Informs** by actively promoting/signposting residents and other relevant stakeholders to information about North Tyneside Council services (and how to access them), our decisions and the delivery of our [Council Plan](#). This will include helping people understand how we are addressing the challenging economic position by doing things differently in the interests of our borough's residents and its communities.

**-Consults** with our residents and service users when significant changes or new approaches are being considered, so we can ensure that we listen to their thoughts in a timely and efficient way before we reach that decision. When we

consult we will make it clear what questions we are asking and how the responses will be used. Some of the consultation will relate to statutory process, including planning and licensing issues.

-**Involves** residents and service users in a creative and innovative way, ensuring equity of access to opportunities which arise.

-**Collaborates** with service users, working together in a more in depth way which takes into account the individuals' interest and expertise on the issue. Some of these activities will focus on **empowering** our residents to create solutions that arise in their communities through using methods such as social action, ensuring that their voices are central in driving agendas.

Should the Health and Wellbeing Board, or associated boards, require engagement activity, there are opportunities to utilise the council channels including:

- Residents' Panel
- Online engagement communication channels, i.e. surveys on website, encouraging feedback/conversations on social media, etc.
- The council's corporate Engagement team also links into other teams within the council
- Channels to engage with young people through the Children's Participatory and Advocacy team.

Engagement opportunities associated with the council's Adult Social Care service include decision-making panels, focus groups and regular questionnaires.

### HEALTHWATCH:

Healthwatch North Tyneside (HWNT) currently uses a variety of channels to gather intelligence on the views and experiences of local peoples in their use of health and social care services in North Tyneside.

Healthwatch's channels are set out below:

Ongoing outreach and engagement	Details
Telephone	Members of the public contact HWNT by telephone to talk about their issues.
Email/web 'contact us' form	People directly email or use the online form on the HWNT website that allows people to submit their experiences of social care and health services
Outreach work/meetings/ events	Attending organised events or meeting and

	attending community venues to proactively approach people for issues.
Other data sources	Requesting data from other sources such as CQC, PALS, ICA, NHS Choices or patient opinion.
Social media	People state their views on health and social care services through social media forums tagging HWNT
Voluntary and Community Sector	A new six-monthly forum facilitated by VODA in partnership with HWNT to gather the experiences of local people via the VCS. HWNT is developing an information sharing protocol with the VCS.

Healthwatch North Tyneside also carries out specific focused engagement in relation to a number of priority lines of enquiry which are reported separately through thematic reports.

Source	Details
Thematic proactive engagement	Holding engagement events with a targeted group of people with specific questions in pursuit of project goals.
Surveys/polls (online)	These are sent out often in relation to thematic projects and distributed broadly.
Offline forms/surveys etc.	Placed in public areas or distributed at events or are posted back

The communications and engagement group should also be able to share information via the Community and Health Care Forum's network. This is an organisation that provides opportunities for voluntary organisations and members of the community to have their say in the planning and delivery of health and social care in North Tyneside. Independent of statutory agencies, it is a forum for people to provide their views on the range and quality of health and social care services throughout the borough of North Tyneside.

## 5.2 Principles for engagement

Local community expectations will be managed by making clear the parameters of what is possible.



When engagement activity takes place, those who we engage with can expect the following 'standards':

- **Inclusive:** Making sure that everyone will be able to engage in the process
- **Clear:** Being clear on our aims of each engagement activity from the outset, and the extent to which residents will be involved
- **Integrated:** Ensuring that we do at whatever level is joined up with decision making processes
- **Tailored:** Understanding our audience and using different methods appropriately to enable and encourage them to be involved
- **Feedback:** We will give feedback, through agreed channels, when we have completed our activity
- **Timely:** We will ensure that we give, where we can, sufficient notice to make opportunities available to all - giving adequate time for consideration and response - and when proposals are still at a formative stage. We will take into account those times when it is more appropriate to engage depending on our target audience.

#### 5.4 Measuring our success - evaluation

Once engagement activities are planned and delivered, we will measure success through:

- Number of people attending/joining in with engagement activity
- Feedback received from such activity
- Involvement of people from all parts of the local community – including seldom heard groups, children and young people – so the Board can clearly demonstrate 'reach' in its engagement activities
- Partners implementing engagement standards as set out in '5.2 Principles for engagement'.

The effectiveness of patient and public engagement will be evaluated, and the learning collected used to plan and develop future engagement.

## 5.5 Audience

The audience will depend on the topic the engagement activity relates to. There will be different types and levels of appropriate engagement depending on the situation/topic.

Engagement opportunities should consider inclusive ways to involve people from different parts of the community, including people with particular communication needs, to ensure that differing health and social care needs are understood and reflected.

The communications and engagement group can help the HWB to plan the timing, venues and access to engagement activities to maximise appropriate participation.

## 5.6 Risks

- If a decision was to be taken too quickly, proper consultation may not take place. This will be mitigated through effective forward planning by all partners.
- That we don't fulfil our statutory duty to engage. This will be mitigated by ensuring engagement needs are considered as part of all decision-making.

## 6.0 Budget

At this point, no single budget is attached to this piece of work for communications activity, but organisations commit time and staff resource to the work.

A financial budget may need to be considered for engagement work and if we're going to develop a brand.

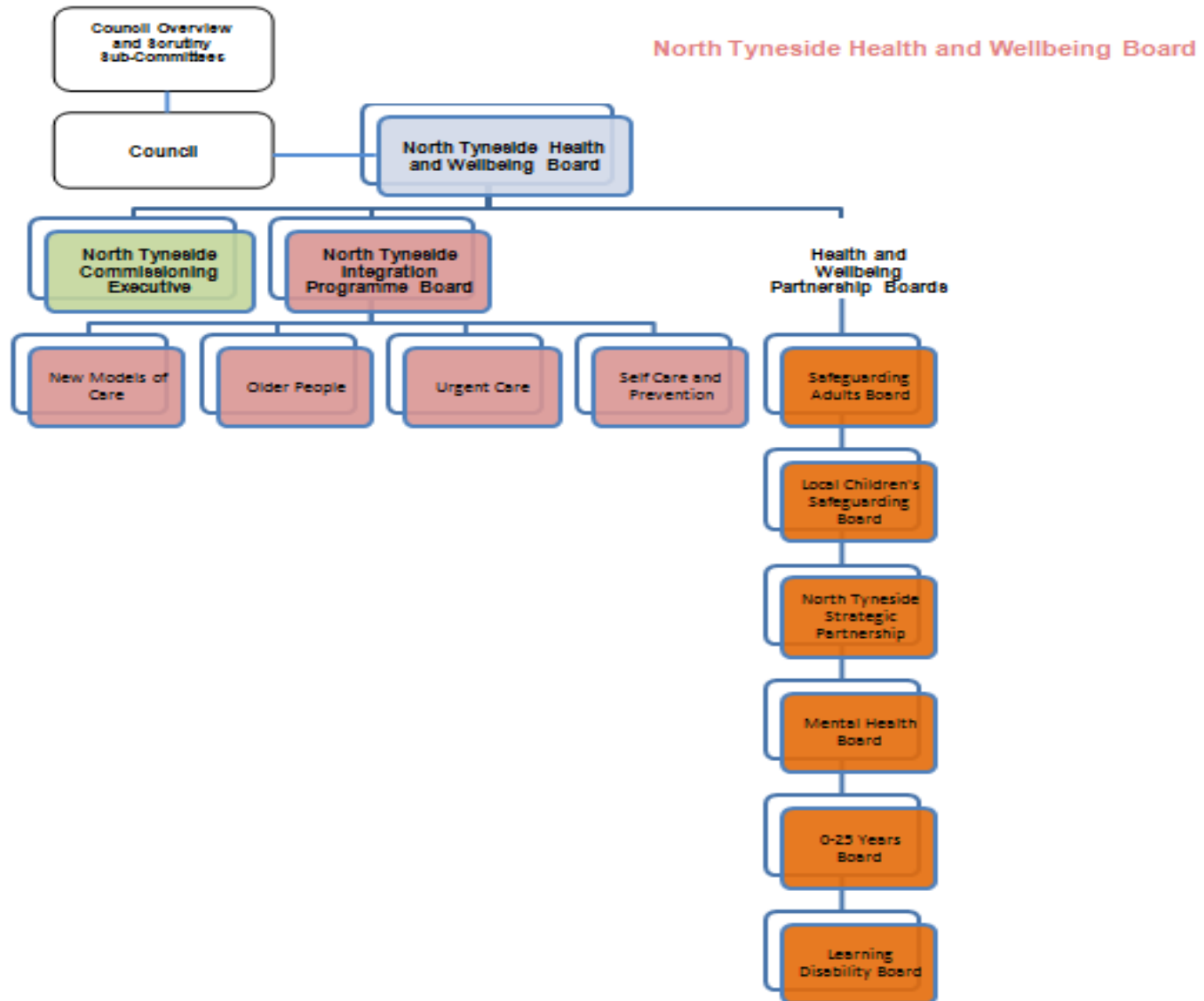
## 7.0 Forward plan (TBC)

The forward plan for communications and engagement activity will be developed by the communications group. To do this, we will also need:

- Advance notice of any decision/action that requires communications and/or engagement activity
- The communications group to get sight of the 'reporting template' of the Integration Board's associated work streams. This includes a section populated by members of the groups relating to any potential engagement work.
- A nominated member of the communications group will attend pre-agenda meetings of the HWB, to identify any reports that may be of interest

An update of any communications and engagement activity will be provided to the HWB.

## 8.0 APPENDIX A - STRUCTURE



## 8.1 APPENDIX B – PEER REVIEW

Recommendation	Action
Use the communications group more strategically and in a coordinated way	<ul style="list-style-type: none"><li>• Communications leads to use agreed 'key messages' to be used in communications activity. This will help to ensure a strategic and consistent collective view and a shared vision.</li><li>• Share work programme across the organisations</li><li>• All communications leads to share press releases, or other communication activity, prior to issuing, and to allow time for comments, allowing us to avoid duplication and maximise opportunities</li><li>• All websites to carry the same introductory text about the HWB.</li></ul>
Coordinate any communications activity to ensure the HWB's priorities and work programme are shared across the organisations.	<ul style="list-style-type: none"><li>• As above</li><li>• Media activity to be coordinated by North Tyneside Council's Communications team.</li></ul>
Ensure we give a profile to all organisations represented on the HWB	<ul style="list-style-type: none"><li>• Highlight key pieces of work through communications activity</li><li>• Explore doing a 'focus on' an organisation - i.e. a piece of work one has undertaken that has helped to deliver one of the board's priorities. This could assist with the recommendation of better understanding of the community and voluntary sector, particularly Healthwatch, as identified in the peer review.</li></ul>

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Hear the voice of patients directly involved, and tell the story better. Give residents the opportunity to inform the priorities of the HWB?

- Identify patients/residents who have used services commissioned by the HWB.
- Explore using experience stories from patients and 'tell their story'. An example where this had been done is one by Islington Clinical Commissioning Group which engaged with local people to develop their integrated care model, and then worked with The Young Foundation to explain and bring to life the changes that are being implemented. The first output is We Care Together – Maggie and Rose's Story. The animation aims to explain the changes and support frontline workers in explaining the benefits of the changes to local people. You can view it here: [Maggie and Rose's Story](#)
- Explore allowing and encouraging the public to put questions to the HWB through communications and engagement activity, this could be sent prior to meetings, in a similar way to meetings of Full Council, to allow for a prepared answer

Use Healthwatch and the community and voluntary sector in a more focused way, to engage with the community and feed back their views. Also use them more widely.

- Maximise the use of existing engagement channels
- Share communications with them for them to share with users. Help them to publicise their role and work with the HWB

Develop messages that the public can relate to and understand

- Use agreed 'key messages' in publicity
- Continue holding meetings in the community to make the HWB more visible to the community so that the public can relate to its messages and programmes of work.
- Explore using patient stories

Develop a shared singled vision on what the HWB should do in the future

- Creating and agreeing a set of key messages should assist in a shared vision

Make information about the HWB's delivery programme and performance data relating to this visible and widely accessible to the public.

In line with the council's corporate approach, its Policy, Performance & Research team is exploring how to display performance data in a more user-friendly way. An update will be provided by the team's manager, Craig Anderson, in due course.

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## 8.2 APPENDIX C – AUDIENCE AND OUTCOMES

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Priority audience	What we hope to achieve
Senior managers/elected members within those organisations represented on the board	Disseminate communications messages more widely. Have confidence talking about the HWB and its work programme, and have an understanding of the other boards/sub-committees and their role.
Partners, including the community and voluntary sector	Transparency on the work programme and decisions taken at the HWB and associated boards/sub-committees.  Help in disseminating relevant messages through their channels.  Clarity around their roles in relation to the HWB, to facilitate successful collaboration, and wider support e.g. on public engagement  High levels of confidence that the HWB is adequately addressing the needs of their audiences

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<p>Staff (within the council, NHS, CCGs, VCS)</p>	<p>Raise awareness with them about the existence of the HWB, its priorities and decisions taken.</p> <p>Encourage them to act as an information channel to relevant public audiences, e.g. to explain how they can voice their own views about local health issues/services, and how they can influence the Board's work</p> <p>Understand how they themselves can feed views/ideas into the HWB</p>
<p>MPs</p>	<p>As above (staff section) and have high levels of confidence in the quality of the HWB's work</p>
<p>Service users</p>	<p>Understand the role of the HWB and how the services they use</p>
<p>Residents/patients</p>	<p>Raise awareness about the existence of the HWB, its priorities and decisions taken – therefore becoming more informed</p> <p>Understand how they can feed views/ideas into the HWB or just attend the meetings.</p> <p>An understanding of the changes to public health responsibilities</p>
<p>Media</p>	<p>Disseminate our communications messages as widely as possible</p> <p><b>Note: local, national and specialist media to be used as a channel to reach audiences</b></p>

## 8.3 APPENDIX D – COMMUNICATIONS CHANNELS

### EXTERNAL

Channel	Detail	Date(s)
Press releases	Proactive media relations will be used at regularly throughout the year. The work of the HWB will highlighted and any media-worthy reports publicised. Press releases will also be used to highlight improvements and changes to the health and wellbeing of residents/service users, calls to action on how people can help themselves to improve their own health, and changes in services that will benefit communities.	Ongoing – more detail to be provided once a communications and engagement forward plan can be produced.
Media opportunities/photo calls	To be identified	As above
NTC’s residents’ magazine	Advertise dates for future meetings and encourage the public to come along. /highlight any key pieces of work/achievements.	Quarterly over the next year: November 2015, March 2016 and June 2016

### DIGITAL PLATFORMS

Social media	<p>NTC will use Twitter and Facebook and make use of its existing and new digital platforms.</p> <p>Corporate Facebook and Twitter accounts will be used for general health messages in line with any media relations. Press releases to be shared via</p>	TBC through forward plan
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social media channels. Organisations to share each other's posts

Communicate HWB meeting dates, reports, national health initiatives, decisions taken at HWB, patient stories

Make use of new council YouTube channel – this could be useful for 'telling the story' of patient experiences. We will require assistance in identifying patients/service users.

## Website

Web pages to be written and developed further (NTC). They will be reviewed regularly to ensure information isn't outdated. It will be used to share relevant information, documents and engagement activity (i.e. a survey) with the public and professionals and other stakeholders.

Each organisation's website to include the same introductory text. There's currently a webpage on the council and CCG websites.

Wherever possible, use the council's homepage to advertise meeting dates, reports, newsletter, etc.

If relevant, an update will be provided on the council's website after each meeting/quarterly, to convey priorities and summarising the work to achieve them. This could be in the form of the stakeholder newsletter, if appropriate.

Develop an area on the work of the Integration Board and other sub-committees unless this can be addressed through an electronic version of the newsletter. See the 'peer review' appendix for information on displaying performance data on the web.

Provide materials for inclusion in partners' publications, i.e. newsletters, websites, staff communications, etc	<p>Updates to be provided to relevant partners through the newsletter (see the internal communications section below).</p> <p>Any relevant press releases, social media tools, etc, to be shared, whenever appropriate.</p>	
Letters for inclusion in print media	Sent to the 'letters to editors' in local newspapers.	Only to be used for specific 'hot' topics
Social marketing	Social marketing – social marketing is a systematic process that uses a range of marketing concepts and techniques to achieve a particular behaviour change. One of the underpinning features is gaining insight and understanding about your target groups, their knowledge, attitudes and beliefs, and the social context in which they live. Information gathered at engagement events or from documents like the JSNA could inform some social marketing work, if required.	TBC if required

## INTERNAL

Channel	Detail	Date(s)
<b>Newsletter/email bulletin</b>	The peer review identified the need for transparency with partners and a regular electronic newsletter/bulletin would be a beneficial tool to highlight the work and decisions taken at the HWB and associated boards/work streams. It will mostly be focused on the HWB but with any relevant health updates. It will be concise with links to reports and data.	TBC

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Members' Briefing  
(democratically  
elected councillors)

Regular update to be provided to members

The electronic newsletter/bulletin could be provided to partners will also be shared with elected members, if appropriate.

Newsletter is issued weekly, however, it will be utilised as and when appropriate.

Staff  
communications

Organisations and stakeholders have established internal communications channels and these will be utilised to highlight the HWB's priorities, and in the initial stages of communications, increase awareness and understanding of its role.

An overview of the HWB and its work to be provided initially, with key overarching messages, followed by regular news/updates from the HWB.

The council will use intranet pages and monthly staff newsletters. It also has the following internal channels for sharing information and/or engaging with staff: Staff Panel; annual Big Team Brief; Senior Leadership Team messages; communications champions; notice boards; and links into commercial partners' communications.

Northumbria NHS Foundation Trust can make use of the following channels: weekly staff bulletin; bimonthly magazine; Chief Executive Roadshow; monthly Team Brief system.

North Tyneside CCG has a monthly GP bulletin and internal Team Brief.

Ongoing