

**The new health and social care landscape – A communications strategy for the public sector changes in Herefordshire**

## **1.0 Overview/Introduction**

- 1.1 This strategy is intended to ensure a seamless transition from NHS Herefordshire to GP led commissioning (Herefordshire Health-Care Commissioners) by providing clear and consistent communication to all identified stakeholders during this time. It is important for the public, colleagues and staff across both the commissioning and provider organisations to understand the changes and, in the case of staff, the impact upon them individually.
- 1.2 In order to ensure that this strategy can work to best effect, it is recommended that it is owned equally by Herefordshire Council, NHS Herefordshire and Herefordshire Commissioning Consortium. It will be informed through the strategic objectives set out by the HPS Transition Board and Herefordshire Health-Care Commissioners (HHCC) and the Herefordshire Public Services Leadership Team.
- 1.3 It should also link with the work streams emerging from the new Health and Wellbeing Board (HWBB). It is anticipated that the HWBB will be the vehicle through which local health and wellbeing outcomes will be addressed and improved, as a result of its multi-agency membership. The work emerging from the HWBB will provide significant opportunities to impress upon stakeholders the need for people to take personal responsibility for lifestyles (of which health is one aspect of) and to improve the way we use feedback from stakeholders and the public. There are also opportunities to develop an ongoing dialogue between health and social care commissioners and their stakeholders through innovative engagement work, which can inform future social marketing campaigns, as well as the development of services.
- 1.4 As the local health and social care landscape is developing rapidly, this strategy is designed to run in 90 day cycles so that it can provide flexibility and evolve to meet changing requirements and milestones during the transition.
- 1.5 Key documents informing the strategy going forward should include the HPS Joint Corporate Plan, the Health and Wellbeing strategy, the HPS Transition plan, the Joint Strategic Needs Assessment, the PCT Annual Plan, the QIPP; West Mercia, Wales and Gloucestershire Cluster plans, NHS Listening exercise results and the HPS Public Engagement Strategy and Plan.

- 1.6 There are three main strands to the strategy: stakeholder communication, internal communication and public and staff engagement.

## 2.0 Objectives

2.1 This strategy has a number of key objectives, which are intended to inform stakeholders from the partner organisations, the community, regionally and nationally about the changes happening to public services within Herefordshire and which are nationally recognised as innovative. These are:

- To support, inform and supplement 'business as usual' communications for Herefordshire Council, NHS Herefordshire and Herefordshire Healthcare Commissioning Consortium.
- To reaffirm the message that communications and responsibility of ensuring a smooth transition to the new NHS commissioning arrangements is a responsibility shared across the public sector. Everyone within Herefordshire Public Services and beyond has a personal responsibility to advocate for and participate constructively in the changes.
- To facilitate a seamless transition from NHS Herefordshire to HHCC
- To ensure that consistent messages are produced on behalf of all organisations throughout the transition period indicating clearly that good services, based on local need and quality patient care are at the heart of what we do
- To raise the profile of health and well being with Herefordshire residents, community groups, parish councils, local businesses and increase engagement in, and ownership of, it
- To begin, with our colleagues across the Herefordshire Partnership, to embed a broader culture of personal responsibility, which is wider than health than the health agenda
- To create a culture where people take responsibility for their own health

- To establish the HWBB as the central mechanism locally for delivering health and wellbeing outcomes by partners from across the public sector
- To establish an effective stakeholder engagement programme to inform the work streams identified by the HWBB and maximise opportunities for local people, staff and targeted stakeholders to get involved
- To develop a programme of internal communication to keep staff abreast of developments and changes during the transition period and to support the HR process
- To respond to and address issues identified through the NHS Listening exercise/national pause, ensuring that the Herefordshire's integrated approach to health and social care is seen as robust and influencing/reflecting national policy
- To support the development of HealthWatch and enable it to promote its work as a local 'health watchdog'
- To respond to requirements arising through the clusters in West Mercia, Wales and Gloucestershire.

### 3.0 Risks and Issues

3.1 There are a variety of risks and issues which can impact both the direction and speed of travel of the changes and these are set out below.

<b>RISK</b>	<b>IMPACT</b>	<b>LIKELIHOOD</b>	<b>RATING</b>	<b>MANAGEMENT</b>
Substantial changes to reform bill	<ul style="list-style-type: none"> <li>Any changes could impact how the set up is rolled out in Herefordshire</li> <li>More/continued responsibilities for PCTs/clusters</li> <li>Longer transition timelines</li> <li>Potential need to adapt rethink Herefordshire models</li> </ul>	2	3	Risk analysis looking at all potential outcomes. Communications plans applied and delivered under the umbrella of this strategy, guided by new strategic objectives of HPS Transition Board and HHCC board.
Continued uncertainty about the future for staff	<ul style="list-style-type: none"> <li>Uncertainty can lead to disengagement and low productivity</li> <li>NHSH and HHCC lose out because staff move on to other jobs, taking their knowledge with them</li> <li>May impact JCP objective to retain high quality workforce</li> </ul>	4	3	Development of internal communications plan to keep staff informed of what is happening. Utilise Team Talk briefing system

<b>RISK</b>	<b>IMPACT</b>	<b>LIKELIHOOD</b>	<b>RATING</b>	<b>MANAGEMENT</b>
Less third sector funding and this impacts provision of services and support, and their ability to support service redesign	<ul style="list-style-type: none"> <li>• Impact on local services</li> <li>• Inability to deliver against some health targets</li> <li>• Disengagement of third sector at a time we want to deliver a message of 'everyone having healthcare responsibility'</li> </ul>	3	4	Risk analysis required to inform future planning and development
Savings required through QIPP impact frontline services	<ul style="list-style-type: none"> <li>• £11m savings required – could impact services. Risk not being able to win and retain public/customer support for new health and social care landscape</li> </ul>	3	4	Foster a culture of proper use of services. Communications plans should be in place to support process
Lack of customer/stakeholder understanding about who is responsible for services	<ul style="list-style-type: none"> <li>• Not knowing who to call or contact for help or advice – impact on reputation of ALL organisations</li> </ul>	3	4	Single point of contact, branding exercise and direct communication with residents so that they know who to contact
Perceived lack of accountability in how services are commissioned	<ul style="list-style-type: none"> <li>• As highlighted through the NHS Listening Exercise</li> </ul>	4	4	Apply any mitigation as directed by Government and communicate wish to be open and accountable locally

<b>RISK</b>	<b>IMPACT</b>	<b>LIKELIHOOD</b>	<b>RATING</b>	<b>MANAGEMENT</b>
Challenge to make everyone take responsibility for their own health and wellbeing	<ul style="list-style-type: none"> <li>Unless communicated positively and effectively, could be seen as council/GPs taking money out of local services in climate where people expect everything to be available to them “we pay for it and expect you to do it for us”</li> </ul>	3	3	Stakeholder and public engagement projects to help understand barriers to good health and create sense of responsibility Communicating the choice and control/personalisation agenda to help people stay independent and living in their own homes
Projected health and social care funding gap of £29m by 2014	<ul style="list-style-type: none"> <li>Greater demand upon services, unable to meet local need</li> </ul>	2	5	Need for current services to be streamlined so that money can be reinvested to meet the growth in demand
That NHS reforms continue to be politically charged and become so at a local level	<ul style="list-style-type: none"> <li>Negative messages about health and social care services being shared through media, locally</li> </ul>	2	3	Need to create climate of ownership – elected members can play a vital role in delivering and receiving information that can be used to develop effective services

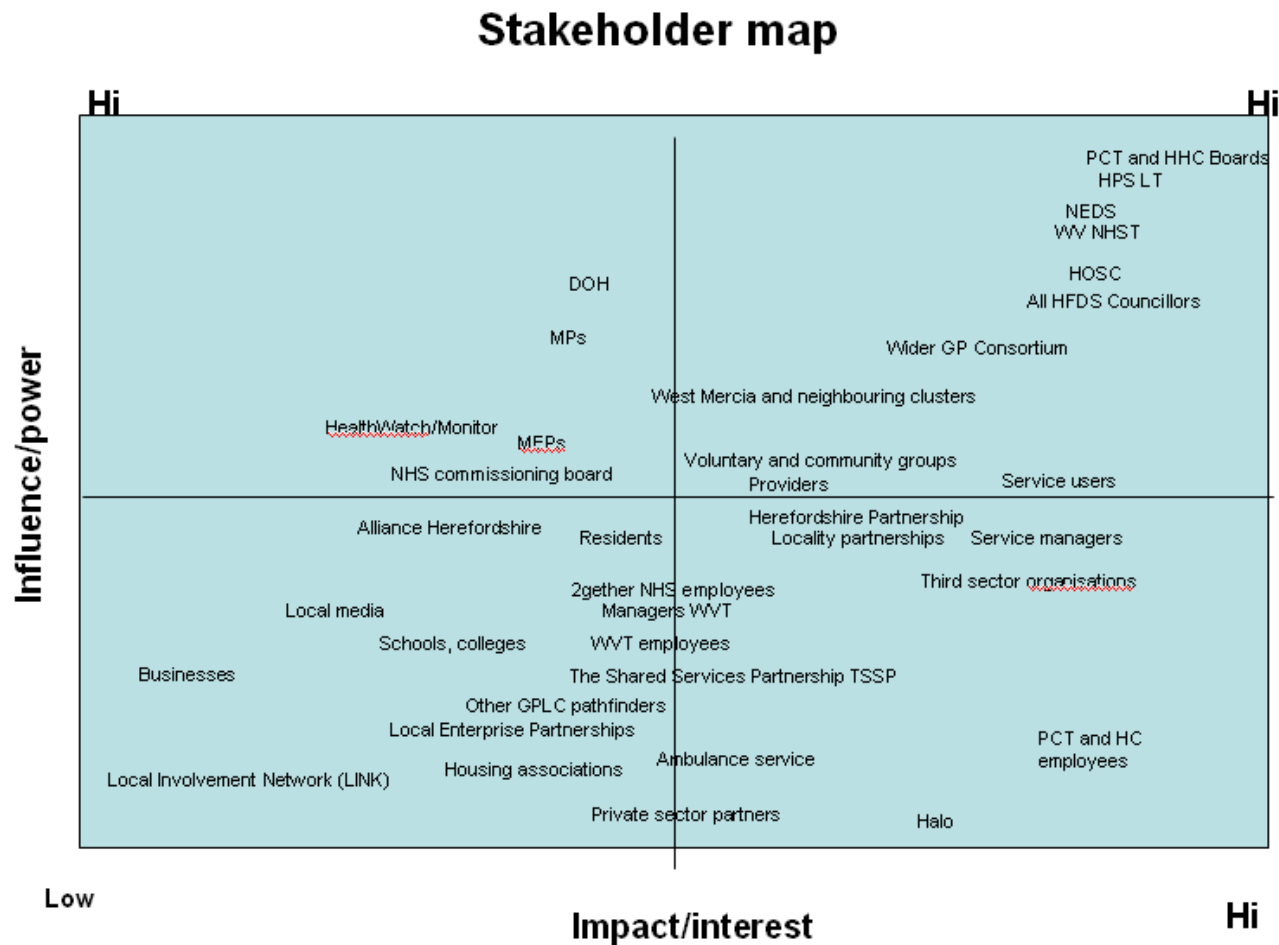


## 4.0 Opportunities

- a) Establishment of new HWBB, Herefordshire early implementer: Opportunity to work with stakeholders to inform HWBB themes and to begin move to increase people's responsibilities for their own health and overall lifestyles.
- b) New role for public health within local authority rather than NHSH, role for HC to be championing health and personal responsibility for lifestyles.
- c) Establishment of HealthWatch
- d) End of the NHS Listening Exercise: It would be useful if we were in a position to hit the ground running, demonstrating how Herefordshire has/is responding to the points raised under the four consultation themes.
- e) Herefordshire is already leading the way nationally through its work on integrated health and social care services.
- f) Any milestones emerging from the HPS Transition Board.
- g) The establishment of nine locality areas will allow the develop of precise messages, tailored to the individual needs of each area and delivered through local GPs, elected members, local delivery teams, parish councils and voluntary sector groups.
- h) A new approach to health and wellbeing, encouraging residents to change their behaviour and take personal responsibility for their own and their family's health. This could be supported through a social marketing campaign, backed by the wider Herefordshire partnership, rather than one organisation.
- i) Ability to demonstrate Herefordshire's determination to be locally accountable and transparent from the outset of this new way of working

## 5.0 Stakeholders

The matrix below identifies the stakeholders impacted by these changes



## 6.0 Target Audiences

- 6.1 A number of audiences have been identified as the initial communications and engagement targets of this strategy and have been grouped together to allow development of appropriate messages and communications.
- 6.2 As we move through the life of the strategy, they can be updated and refocused as required.
- Residents, customers, patients and service users in Herefordshire
  - Our employees and colleagues across NHS Herefordshire, Wye Valley NHS Trust, 2Gether and the council
  - Employees within our numerous contractor and provider organisations, and trade union representatives
  - Elected county, town and parish councillors, scrutiny members and appointed non-executive directors, and MPs and MEPs
  - Young people – through schools and colleges, after school and special interest clubs and groups
  - Third sector providers and partners
  - Businesses, trade associations and the private sector

## **7.0 Key messages**

- 7.1 Key messages will be used in all our communication to ensure consistency and support the transition, clearly demonstrating commitment to continuity within those services during and after the transition, backed by the council, primary care trust and HHCC. General messages should join up across the HHCC strategy, Joint Corporate Plan and the PCT Annual Plan (see 7.1 below). More work should be done to develop these messages, with input and agreement from the Boards to ensure that communications work is owned and steered by their vision alongside tangible targets.
- 7.2 Added to this, in some cases, key messages will need to be developed to target specific audiences, depending on what it is we wish to ask them, or tell them about the transition period. In some instances, stakeholder and public engagement will also inform key messages to be used in social marketing campaigns around health and social care.

### **General messages**

- That we are committed to continuing to create sustainable health and social care services of the highest quality in Herefordshire and that the partnership of public services within the county will continue to work together to achieve this aim.
- We want to create effective health care services for Herefordshire, influenced and designed by local people and healthcare experts, which meet the needs of our patients.
- Everybody has/we all have a responsibility for their/our own health and wellbeing.

- Herefordshire is leading the national health and social care agenda, thanks to its robust approach to providing health and social care, closer to where people live
- Patients, service users and carers are at the heart of what we do and they will have a greater voice and more choice in how services are managed and delivered for them by local organisations in their local area

## 7.2 Key message to staff and colleagues

- ***That we are committed to continuing to create sustainable health and social care services of the highest quality in Herefordshire and that the partnership of public services (which includes HC, NHH, WVNHS and HHCC) within the county will continue to work together to achieve this aim.***

And more specifically:

- Herefordshire is at the forefront of NHS/ public sector reforms and pathfinders for clinical commissioning consortium and HWBB
- Ensuring a smooth and sustainable transition from PCT to GP-led commissioning is our most important commitment to our customers and patients
- Your experience and knowledge is invaluable during this time of transition

- These new ways of working are an opportunity to make our health and social care services leaders in the field
- We all have a responsibility for our own health and wellbeing and should be advocates for this in the wider community

### **7.3 Key messages to other stakeholder groups**

As the strategy develops, key messages may be developed and tailored to the needs of stakeholder groups identified as key communications targets, depending upon the behaviour you wish to change or influence or whether messages are to inform people about the transition, with no action needed.

## 8.0 Key corporate strategic communications activities

8.1 This strategy should be led by milestones emerging from the Joint Corporate Plan, the establishment of the HWBB, the HHCC work plan so that all communications work can be aligned to what is actually happening at key stages.

*Board members will be responsible for highlighting these key milestones to the communications team.*

8.2 There should be a monthly health story, highlighting a success in healthcare, in order for a repeated drip feed of success, demonstration of continuity of services and ongoing commitment to creating high quality and sustainable health and care services.

## 9.0 Strategic Communications action plan

Denotes  
completed

What	Audience	Action	Additional notes	Timelines	Responsible
PCT/WVT APM	Public and identified stakeholders	Opportunity to communicate key themes and priorities across all organisations		July 26	PCT Board to deliver messages Complete
Stakeholder workshops	As identified through stakeholder map		Beginning of the conversation with key stakeholders	July 2011	Dean Taylor
Develop timed action plan to support public health staff during transfer to council	<ul style="list-style-type: none"> <li>Is national guidance available?</li> <li>Timeframes for transfer</li> <li>Develop robust communications to support HR</li> </ul>	Communications channels could include face-to-face, Team Talk, manager briefings, CEO road shows, First Press, intranet, change champions		Ongoing	Communications team with HR
Agree target engagement groups for health change	Relevant engagement groups as identified through work themes		To be signed up to by HWBB, HHCC, HPSLT	Autumn	Public engagement team
Develop key messages	Each stakeholder group see 6.0	Identify primary and secondary messages,	To be signed up to by HWBB, HHCC,	Autumn	Developed by Boards supported by



		from each strategy	HPSLT		communications team
A/E Campaign	Herefordshire Citizens	Use range of communications channels to reduce A/E attendances/ admissions	Example of joined up working	Autumn-Winter	GPCC
Strong health story for media/ Digital channels	All Herefordshire residents and businesses	Identify forthcoming good health stories which identify commitment to continuity and best practice		Once work plans agreed	Project/care leaders to highlight to communications team
Develop stakeholder engagement programme	Businesses Third Sector Parish Councils Older People	Develop an engagement programme based on HWBB work stream, JPC work streams and HHCC work streams	This work has started but is dependent upon the relevant forums providing clear areas of work and priorities	Autumn	Public Experience team
Agree a shared health vision	All local people	HHCC, PCT and HC to agree a shared vision and it to be communicated as part of the strategy	Could this be informed by the workshops?	August Complete (see HWBB Dev Framework)	HPS LT/ GPCC/HWBB
Strong health story for media/digital channels	All Herefordshire residents and businesses	Identify forthcoming good health stories which identify commitment to continuity and best practice		Autumn	Project/care leaders to highlight to communications team

<b>What</b>	<b>Audience</b>	<b>Action</b>	<b>Additional notes</b>	<b>Timelines</b>	<b>Responsible</b>
Stakeholder workshops - localities	Local communities in nine locality areas	<ul style="list-style-type: none"> <li>• Clarify purpose and scope of these events</li> <li>• Build upon Reaching the Hearts</li> <li>• Separate stakeholder maps to be drawn up</li> </ul>	Facilitated by Public Experience team	October	Dean Taylor/ C Staite/ Public Experience Team
Drip feed messages and change to all staff	<ul style="list-style-type: none"> <li>• Agree key priority messages</li> <li>• Put together action plan</li> <li>• Communicate through channels as outlined above</li> </ul>	Should be a more general campaign based around changes in organisation and messages arising through HWBB		August/Sept 2011	Led by Boards with communications support
HealthWatch early implementer	Wider community and stakeholders	Need to communicate the establishment of the HW, its intentions and role in	Dependent upon receiving implementer status	August - complete	RBP/communications team

		the health and social care landscape going forward			
HealthWatch Early Implementer	Local Community Public Sector leaders	Ongoing communication regarding the development and implementation of the HealthWatch early implementer		October 2011-June 2012	Communications Team/ RBP