

No decision about me, without me

Medway Commissioning Group Communications and Engagement Strategy 2011-2013 v2 DRAFT

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1. EXECUTIVE SUMMARY

“No decision about me, without me” is at the heart of the government’s reforms to the NHS.

Subject to parliamentary approval, these reforms will place responsibility for the commissioning of healthcare with local clinical commissioning groups. In Medway this group is called Medway Commissioning Group. We are working alongside the local primary care trust in Medway until we become a statutory organisation in our own right.

Using our first hand experience and understanding of patients and the care they receive in Medway, we will build on the work that has already been done to make systematic changes to the planning, commissioning and delivery of healthcare to improve the quality of care for patients and make a real difference to the health of local residents.

The reforms mean greater involvement of local people in shaping and delivering healthcare, improved information and choice for patients and commissioning of healthcare which is led by clinicians, health and care professionals.

The reforms are backed up by legislation currently going through parliament which places a legal duty on us to involve the public on any changes that affect patient services; consult people on our annual commissioning plans and involve patients and carers in their own care.

For a range of different reasons the health of people in Medway is often poorer when compared with people in the rest of the country. This is identified in the Joint Strategic Needs Assessment for Medway, a study of the local population and environment. Therefore, it is a priority for us that people have the information they need to look after their own health and know how to access health services when they need them.

This document sets out how Medway Commissioning Group will inform, engage and involve local people, partners, stakeholders and healthcare professionals. It identifies who we need to inform and involve, how we will do this and the outcomes we want to achieve.

Currently this is a draft strategy based on our ongoing work, research and discussion with local people, partners, stakeholders and health and social care professionals about healthcare in Medway. We are working with Medway LINK to include a wide range of local people in developing and agreeing the final version of this strategy.

Dr Peter Green
Chairman, Medway Commissioning Group

2. ABOUT US: MEDWAY COMMISSIONING GROUP

Under the government's proposals for changing the way the NHS works, responsibility for commissioning most health services will transfer from Primary Care Trusts to newly formed Clinical Commissioning Groups – groups of local family doctors and other healthcare professionals like hospital doctors and nurses, who will work with the public to plan and buy healthcare for their local communities.

In Medway that group is called Medway Commissioning Group. Its membership is made up of all GPs in Medway and it is working with the local primary care trust in Medway to develop clinically led commissioning of healthcare.

Under the government's reforms Medway Commissioning Group will gradually assume responsibility for planning and commissioning healthcare until it is ready to become a statutory organisation in its own right and take over complete responsibility.

At this time it will receive its own budget and will work with local people and organisations, including Medway Council and the providers of health and social care, to plan and pay for health services for Medway residents.

The focus is on driving the improvement of health and healthcare in Medway in a way that demonstrates real, tangible and outcome focused results for Medway residents.

A strength of Medway Commissioning Group (MCG) lies in sharing its footprint with Medway Council. This brings with it three clear benefits:

- First hand experience and understanding of the population of Medway
- A detailed local knowledge and understanding of Medway
- The strong relationships and links already developed with Medway Council and other partners, healthcare providers and local people

Our Role: To work with people in Medway and its partner organisations, using all available resources, to improve the health and physical, mental and social wellbeing of the population, taking the lead for, and commissioning, the majority of the local health services.

Our Vision: For the people of Medway to have access to the best healthcare available, the opportunity to improve their physical, mental and social wellbeing and be involved in decisions about their own health and healthcare in Medway.

Our Values are the values of the NHS Constitution which are enshrined in law. We will uphold the principles of the [NHS constitution](#) and demonstrate its values through:

- Quality that counts, with measurable outcomes
- Patient involvement in decision making
- A focus on providing good care and meaningful outcomes not just processes
- Empowering and supporting people to take responsibility for their own health
- Being efficient and effective, doing things once and well across sectors and teams
- High quality, targeted, information for health professionals and patients

Our strategic objectives:

- Develop into a trusted, transparent, efficient, inclusive commissioning organisation to improve healthcare quality and outcomes.
- Target healthcare and health promotion to reduce inequalities in outcomes.
- Promote healthy life styles to achieve long term health gain through meaningful clinical engagement with partners including providers, the Council, third and voluntary sectors.
- Commission pathways which from the patient perspective and outcome measures deliver high quality and integrated health care enabled by effective timely information.
- Meaningfully communicate and engage with patients, the wider community and voluntary bodies about the delivery of health and social care services.
- To become a truly listening, communicating and engaging organisation, both in education and through actively incorporating feedback into commissioning decisions.
- Adopt and demonstrate high standards of probity and governance which make best use of resources and meet statutory and mandatory targets.

We are responsible not just for patients registered with Medway GPs, but for everyone who usually lives in Medway, regardless of whether they are registered with a GP practice.

Medway Commissioning Group is already working with the primary care trust in Medway to take over responsibility for commissioning the majority of local health services, the annual Operational Plan and the budget to deliver it.

While the group is operating in shadow form major spending decisions are ratified by the board of NHS Kent and Medway which represents the three primary care trusts in Kent and Medway, NHS Eastern and Coastal Kent, NHS West Kent and NHS Medway.

3. INTRODUCTION

Communication and engagement is central to effective delivery. Effective communications and engagement can narrow the gap between the impact we want to have and the impact we actually have.

Medway Commissioning Group is committed to delivering high quality communications and engagement. We will take a planned and sustained approach to communications and engagement to fulfil our vision for the people of Medway to have access to the best healthcare available, the opportunity to improve their physical, mental and social wellbeing and be involved in decisions about their own health and healthcare in Medway.

This Communications and Engagement Strategy supports the annual Operational Plan, the Strategic Commissioning Plan and the Organisational Development plan which includes how we will engage and communicate with the people who support our organisation.

Medway Commissioning Group communicates and engages so that:

- People know who we are and what we do
- People know what services we commission and how to make choices in accessing them
- People are encouraged to make choices about their health and lifestyle and encourage their friends and families to do so, improving public health
- There is effective use of health services
- People know what to expect of the services we commission, and can publicly hold us to account
- There is “no decision about me, without me” through better involvement and engagement of the people who use services
- Our strategic objectives and the delivery of our plans is supported through engaging people, partners and stakeholders
- Planning and service provision is joined up
- Quality of care improves
- Our values are clear and reinforced
- The reputation of and confidence in the local NHS is maintained

We want people to be aware of and understand our vision and values, understand our decisions, and be able to inform and influence us wherever and whenever they can. That means making sure that the messages we send out are received and understood.

This strategy is informed by our ongoing engagement with the public, clinicians, partners and stakeholders which has given insight into the particular communications issues that we need to address; as well as the insight, research and situational analysis included in the appendices to the strategy.

Our Plans

Medway Commissioning Group is working with the primary care trust in Medway to take responsibility for and deliver the annual Operational Plan, the plan for delivering and achieving the vision and aims for the health of the people of Medway and the health services commissioned on their behalf, set out in the Strategic Commissioning Plan.

The Strategic Commissioning Plan and annual Operational Plan are informed by a Joint Strategic Needs Assessment (JSNA) which helps us to understand the health and needs of the population. A new JSNA is due to be published in the autumn of 2011.

The Office for National Statistics (ONS) projections suggest the overall population of Medway is expected to grow by 5.1% (12,900) from 2010 to 2020.

Medway has a smaller proportion of older people aged 65 and over than England as a whole, and this is expected to continue into the future. Nevertheless, the rate of growth for those 65 years of age or over is greater than the England rate and the population numbers in this age group are projected to increase by 28.1% between 2010 and 2020.

These demographic changes will drive growth in the number of relatively high intensity users of health services; it is likely that service demand will grow more quickly in Medway than in England as a whole. For example the ageing population will have a significant effect on the numbers with illnesses such as diabetes. From 2005 to 2020 the number of people with diabetes is expected to increase by 46% to over 14,700.

The life expectancy of those born in Medway today is lower than the South East and England as a whole. Medway has significantly higher rates of early death from cancer and Cardiovascular Disease (CVD) than is found nationally.

Contributing to this are both lifestyle and social determinants of health. Medway has significantly higher rates of obesity in both adults and children than the national average (respectively 31.4% compared to 24.2% and 11.2% compared to 9.2%) and higher rates of smoking than the national average (24.9% compared to 22.2%).

Within Medway there is a relatively diverse level of deprivation with three wards falling within the 20% most deprived wards of England and two wards falling within the 20% least deprived. As expected those areas with high levels of deprivation typically suffer on most domains of deprivation; income, employment, health, education, crime and living environment.

Our plans aim to reduce health inequalities, add life to years and years to life, deliver substantial efficiency gains and drive up quality.

Six key health goals are identified in the plans:

- Improving health and wellbeing
- Target killer diseases
- Care pathways closer to home
- Supporting future generations
- Promoting independence and improved quality of life
- Improving mental health

As the local commissioners of healthcare for Medway our role is to build and maintain a local health system which delivers clinically safe and effective services for patients and the public in a timely manner, provides value for money for taxpayers and drives up the quality of patient care.

In order to deliver our plans continued partnership working will be essential within the NHS, between the commissioners of health services and other partner organizations, and with the involvement of the public at the heart of our plans.

Our plans aim for a health and social care system in Medway which delivers the right care first time and

- promotes positive well being and the prevention of ill-health;
- supports people to manage their own health
- makes it as simple as possible for people to access the right care for their condition and;
- ensures when they do need care, it is high quality, cost-effective and delivered as close to home as possible.

The Joint Strategic Needs Assessment (JSNA) and current service performance tell us that the areas on which we particularly need to focus are:

- Primary and Secondary prevention of Chronic Heart Disease (CHD)
- Chronic Obstructive Pulmonary Disease (COPD)
- Cancer
- Support for people with long-term conditions
- Support for people with dementia
- End of Life Care
- Urgent Care Services
- Mental Health Services

From April 2013, under the government's reforms of the NHS, the Health and Wellbeing Board of Medway Council will work closely with Medway Commissioning Group in preparing and agreeing the overall strategy for delivering health and social care in Medway and the associated commissioning plans that will deliver the strategy. The Board has been set up already in shadow form.

Statutory requirements

In addition to our commitment to high quality communications and engagement there is a number of statutory requirements that Medway Commissioning Group is committed to meeting.

The following responsibilities are either already enshrined in law or are included in the Health and Social Care Bill which supports the government's reforms of the NHS.

The NHS Constitution

The Constitution establishes the principles and values of the NHS in England. It sets out rights to which patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with responsibilities which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively. All NHS bodies and private and third sector providers supplying NHS services are required by law to take account of this Constitution in their decisions and actions.

Section 242 of the NHS Act

The Act places a duty on commissioners to involve and consult the public and patients when planning services or changing the way a service is provided or operates if the proposal impacts on how services are delivered or the range of health services available.

NHS Operating Framework

The framework requires clinical commissioning groups to:

Meet the government's "four tests" when planning service redesign...

- Support from GP Commissioners.
- Strengthened patient and public engagement.
- Clarity on the clinical evidence base.
- Consistency with current and prospective patient choice.

New requirements under the Health and Social Care Bill

Clinical commissioning groups will be required to include in their constitutions a description of the arrangements they have made to fulfil their duties to involve and consult the public and the principles that will follow in implementing those.

4. COMMUNICATION

We will make sure people have the information they need to access services and look after their own health

We want people to have easy access to the information they need about healthcare services so that they can access the right care, at the right time.

We want to improve the health and wellbeing of the population by making it easy for people to live healthy lives, for example by eating healthily, drinking sensibly, not smoking and keeping active. To do this we will make sure that information about services that can help people to give up smoking, for example, or take up exercise, reaches them.

We want people to be able to manage their own health conditions so that they stay as well as possible, so we will make sure that they get the information they need to do this. And we will make it easy for people to find out about the way we work, our policies and decisions and how they can contact us. We will make sure the information we give out is professional, accessible and high quality so that people can recognise it and know it comes from a trusted source.

Key Objectives

- Improve the take up of services by making it easy for people to find accurate information about services through a range of channels
- Encourage people to live healthy lives by promoting healthy life choices and publicising the services that can support them
- Improve the quality of services by acting on patient experience
- Encourage feedback from the public by making it easy for them to contact us and respond professionally and promptly when they do
- Continuously explore new ways of communications so that we can move with the times and adapt to the latest ways that people consume information, for example using social media and smartphones.

Key Actions

- ✓ Deliver high quality, relevant information about health and healthcare to people in the most direct way possible, e.g. via a magazine for residents
- ✓ Maintain an up-to-date, accurate and engaging website which makes it easy to search and find information about services and the local commissioners of health in Medway
- ✓ Work with the media to raise awareness of health and healthcare
- ✓ Communicate information via partner organisations and voluntary groups to reach as many people as possible
- ✓ Promote public health messages and services
- ✓ Use new technologies that support communications and engagement

5. ENGAGEMENT

We will involve local people at all stages in planning, shaping, designing and delivering services and in setting priorities for Medway.

We will make the involvement of people central to everything we do and give people the opportunity to have as much involvement as they want to have in the commissioning of healthcare locally.

Our aim is to make it as easy as we can for people to be involved and to actively include them in ways that are meaningful and give real opportunities to influence.

We will tell people how their involvement has influenced decisions. Prioritising local health needs may mean that on occasions we are not able to do what people want, if that happens we will explain why and be held to account for our decisions.

We will fulfil our statutory duties to involve and consult people when planning services or changing the way a service is provided or operates, if the proposal impacts on how services are delivered or the range of health services available.

Key objectives

- Ensure healthcare in Medway meets the needs of the local population by involving them in any changes that affect patient services
- Improve the quality of care for individuals by involving patients and carers in decisions about their own care
- Improve healthcare by ensuring patient representation at all levels of decision making

Key actions

- ✓ Ensure patients' experience directly influences commissioning decisions through their involvement in our Strategic Change Groups
- ✓ Ensure patient views influence decision making through patient representation via Medway LINK on our Board
- ✓ Ensure the views of local people are systematically used when setting plans by co-ordinating and using patients' experience
- ✓ Ensure service planning and change is supported by the public, clinicians, emerging Health and Wellbeing Board and Medway Council's Overview and Scrutiny Committees by involving them effectively
- ✓ When engaging and consulting with people make the best use of their time by co-ordinating engagement activities with our partners, providers and other groups
- ✓ Make everyone's opinion count by involving as many and varied people as possible by supporting Medway LINK to be an effective advocate
- ✓ Improve care by using the feedback from patient participation groups when making decisions and setting plans and priorities

6. CLINICAL ENGAGEMENT

We will ensure that in line with the government's aims clinicians will lead the improvement of health and healthcare in Medway

Clinical commissioning of health puts clinicians in the driving seat. We want clinicians in Medway to be central to everything we do. This includes hospital and community doctors and nurses, not just GPs, as well as a host of other people working in the medical and social care professions in Medway.

We will ensure we utilise the broad experience of clinicians as providers of healthcare by fully involving them in our commissioning decisions.

We want clinicians to have the latest information about health and social care to help them to communicate and provide the best service possible to their patients.

To achieve this we will involve and engage clinicians through easy access to timely and accurate two-way communication about commissioning of health in Medway.

Key objectives

- Improve healthcare by ensuring clinicians lead commissioning decisions and drive the future of health services in Medway
- Ensure service redesign is led by clinicians and is in the best interests of the public by basing it on clinical evidence and local need
- Improve access to, and quality of, care by making sure that clinicians have accurate information about local services and pathways

Key actions

- ✓ Ensure commissioning decisions are based on clinical views by having clinicians leading Strategic Change Programme Groups
- ✓ Make sure commissioning is truly clinically led by having clinicians in key roles on decision making boards
- ✓ Improve the quality of public messages about health by using the expertise of clinicians when developing and communicating key messages to the public
- ✓ Improve services by making it easy for clinicians to report problems and suggest improvements by providing two-way mechanisms for GPs and Consultants to work with commissioners for example through our intranet
- ✓ Include all clinicians in commissioning decisions by providing a range of opportunities and mechanisms for them to do so.
- ✓ Make it is easy for clinicians to be aware of changes to services by communicating through a range of channels including a dedicated area of our website

7. STAKEHOLDERS AND PARTNERS

Healthcare in Medway will be joined-up, deliver improved patient experience, better outcomes and value for money

We use our unique insight and knowledge of Medway to build on the track record in Medway of partners communicating and engaging effectively and working as a “whole system” in the interests of health and social care.

We will maintain the excellent working relationships and robust structures that exist in Medway and build on them because we know that effective communication and engagement with our partners and stakeholders will be central to our success.

Our key local stakeholders include our partners Medway Council, Medway Local Involvement Network (Medway LINK), provider organisations, local MPs, other NHS organisations, local voluntary sector organisations, community, patient and faith groups. A list of stakeholders can be found at Appendix 1.

Key objectives

- Communicate and engage effectively with our partners and stakeholders so that they support our objectives
- Make sure our plans are co-ordinated and informed by effective engagement with our partners and robust structures e.g. the Health and Wellbeing Board
- Improve health, social care and other local services by delivering effective joined-up communication and engagement

Key actions

- ✓ Ensure partners and stakeholders are engaged by working as a “whole system” to improve health and healthcare in Medway through operational and decision making boards
- ✓ Promote whole-system thinking and integration of services by involving and engaging our stakeholders in decisions at all stages of planning, policy development and service redesign
- ✓ Communicate effectively with our stakeholders and partners through a range of communication methods

8. ACCESSIBILITY

We will communicate and engage in ways that are accessible to everyone in our community.

We have a duty to ensure that our communications and engagement activity is inclusive and does not disadvantage anyone in our community. We work harder to ensure that people who do not have a voice, or may not have equal access to information or opportunities to engage, are not disadvantaged.

We will support and encourage community leaders to be communications champions and develop our work with them to ensure that people from different backgrounds and faiths, with different languages and different communication needs have access to information and can get involved.

Key objectives

- Make sure our services meet the needs of everyone in the community by involving and engaging as wide a range of the public as possible
- Target services effectively to areas of particular need by using information and research about different communities' needs
- Increase our reach into communities where evidence shows we need to engage more

Key actions

- ✓ Make sure as wide a range of our community as possible is informed about health and healthcare in Medway and know how to influence it by working with Medway LINK / Healthwatch and community, patient and faith groups
- ✓ Include the opinions of a wide range of people by establishing methods to make the Medway Health Network as representative as possible
- ✓ Ensure our public events are accessible to everyone and there is equal access of opportunity for people to be involved
- ✓ Make it easy for everyone to access information and engage with us by making all of our information and communication channels accessible
- ✓ Promote ways that people can receive information from us in alternative formats and languages
- ✓ Work closely with voluntary organisations to regularly review and test the accessibility of our information

9. BEING A TRUSTED ORGANISATION

We will work hard to maintain an excellent reputation and be a trusted organisation by living up to our vision and values in everything that we do.

We will be accountable to the National Commissioning Board and held to account by the people we serve through local Healthwatch and Medway Council's Overview and Scrutiny arrangements.

We will build trust in our organisation through the way we demonstrate our values, uphold professional standards and work with our partners and the public.

We will be an effective and listening organisation which acts on feedback from local people and clinicians and is focused on improving patient experience, health outcomes and value for money.

We will have a clear corporate identity and maintain the NHS brand.

The media are a key influencer locally and nationally and we will build and maintain a good relationship with them. We work with the media to help us to inform and engage with people.

Key objectives

- Promote the NHS constitution and live up to its values in everything we do
- Be transparent and open
- Deliver what we promise

Key actions

- ✓ Promote and protect our reputation by maintaining good relationships with the local print and broadcast media
- ✓ Work with the media to promote our achievements, policies and decisions and to ensure that reactive stories are balanced
- ✓ Be transparent and open with the media
- ✓ Enhance our reputation through our trusted, visible and recognisable identity on all of our information
- ✓ Produce communications and engagement materials to a professional standard and that reflect our values
- ✓ Work closely with our colleagues in Kent and beyond to maintain confidence in the NHS country-wide
- ✓ Work with our partners so that communications and engagement activity reflects our values and those of the health economy throughout Medway and is co-ordinated and effective

10. EVALUATION

Where do we want to be: Target outcome linked to Pipeline or Values	How do we plan to meet target?	How will we measure our success	What do we need to do to get there?
Public and patient engagement is embedded into the organisation and commissioning process	Representation on all SCP groups Pat. reps on decision making boards Medway Health Network Via feedback from PPGs	Numbers of people involved People feel involved and able to influence (survey)	Identify or establish benchmark if none exists and set targets and actions for improvement if necessary
We are engaged with the different communities in the geographical area we cover	Via PPGs/MHN Work with Medway LINK/ Council and partners	Monitor to ensure representation reflects community Influence is measured	As above
People involved in front-line care can influence commissioning decisions	Clinicians lead decision making 2-way via website SCP groups Speciality reviews	Test clinician's views on their involvement and outcomes Review survey	As above
Communication is accessible and two-way	Ensure this is built into current methods	Review communication channels and test	As above
People can access information to make healthy lifestyle choices and know where to get support to make the choices	Use of a range of communication channels and campaigns Promoted in primary care e.g through Audit +	Feedback Survey	As above
People know and understand the challenges and improvements that are being made in the health economy in Medway	Medway Health Network PPGs Range of comms channels	Feedback Survey	As above

11. RESOURCES

NHS resources are limited and must be used to improve the health of the nation and drive up the quality of care people receive. This applies to all resources. Therefore we need to be confident that the resources we use to deliver this strategy meet those aims.

We will seek cost-effective ways of delivering communications and engagement and test its usefulness and effectiveness and work with partner organisations so that communications and engagement activity is planned, co-ordinated and makes the best use of public resources

The resources, both in terms of staff and money, required to deliver this strategy are currently held by the Communications and Engagement teams within the three PCTs that make up the Kent and Medway cluster (NHS Kent and Medway). They are working as a shared service which will become part of a national shared service by April 2012.

This is an indication of the current channels and resources that the Primary Care Trust in Medway uses to communicate and engage with local people. In the future Medway Commissioning Group may need to decide on a different level of resource required and available to deliver this strategy.

Communication method	What is it?	Audience	Resource required
Digital communication	Website, you tube, twitter, ISSUU (accessible online platform for publications)	Public	Pay: Access to digital communications manager Non Pay: £3500 hosting cost if taking over NHS Medway site plus additional cost of upgrades/apps; £200 ISSUU
For Practitioners	Area of website dedicated to information for practitioners	Clinicians	Pay: Access to website administrator Non Pay: As above
Health Matters	Twice yearly magazine delivered to Medway residents plus mini editions inside Medway Council's magazine Medway Matters six times a year	Public	Pay: Access to communications team Non pay: Health Matters: £18k per issue (on average 50-65% recoverable from sponsorship) Medway Matters: £3k per issue Photography: £500

Growing Healthier	E-newsletter available to anyone who wishes to sign-up online, sent out via campaign monitor for ease and evaluation purposes	All audiences	Pay: Access to communications team; web administrator Campaign monitor: £200
Medway Commissioning Group Update	Monthly electronic bulletin for GPs to update on new information about primary care	Member organisations (GPs, dentists, pharmacists, providers)	Pay: Access to communications team; web administrator Campaign monitor: as above
Practice Managers Bulletin	E-newsletter aimed at practices	GP practices	Pay: Access to communications team; web administrator Campaign monitor: as above
Medway Health Network	A network that anyone can join to find out about and get involved in decisions about local healthcare	All audiences	Pay: Access to engagement team; communications team; web administrator Non pay: Cost of events, annual engagement report, printed materials, roadshows, surveys, postage
Medway Health Debate	Annual engagement event to engage in and feedback people's views on healthcare in Medway		Pay: Access to engagement team Non pay: Hall hire, refreshments, printed material
Media relations	Press releases and interviews with local, regional, trade press	Public	Pay: Access to media team
Marketing and campaigns	Posters, leaflets, advertising to promote services and support public health	Public	Pay: Access to campaigns team Non pay: Cost of events, marketing materials, advertising, roadshows
Board Meetings and AGM	Meetings held in public to debate and make decisions about health	All audiences	Pay: Access to communications team Non pay: Cost of event, annual report
Information Cascade	Use of partners' communication channels to widen reach	All audiences	Pay: Access to communications team

The following analysis has been used to inform this strategy.

4.1 SWOT

<p>Strengths</p> <ul style="list-style-type: none"> • Track record of Whole System Working • Established communications methods • Good relationship with local media • Stakeholder knowledge of previous successes and future challenges • Coterminous with Medway Council • Good working relationships with Medway Council/LINKs 	<p>Opportunities</p> <ul style="list-style-type: none"> • Better engagement with clinicians • Opportunity to drive up quality • Wider engagement with patients and public • Closer partnership working through Health and Wellbeing Board
<p>Weaknesses</p> <ul style="list-style-type: none"> • Limited data on public perception • Lack of public awareness of commissioner role • Limited financial resources • Limited finances to support strategy • Dependence on CSU and Shared Services to deliver strategy 	<p>Threats</p> <ul style="list-style-type: none"> • Reputation damage through negative media reporting • Capacity to deliver on increased expectations • Resistance from population in terms of healthy lifestyle choices • Confusion about new arrangements from patients/public/partners/voluntary sector •

4.2 Political, Environmental, Social and Technological environment (PEST)

<p>Political</p> <ul style="list-style-type: none"> • NHS funding decisions • Impact of national policies locally • Requirements around service redesign and public consultation • Further restructuring of NHS under different political makeup 	<p>Social</p> <ul style="list-style-type: none"> • Medway population among least healthy in the South East • Pockets of deprivation in Medway • Economic downturn
<p>Environmental</p> <ul style="list-style-type: none"> • Increasing partnership working • Flu pandemic 	<p>Technological</p> <ul style="list-style-type: none"> • Increase in multi-media • Expanding social media • Rising public use of multi-media

Digital communications and engagement

The Medway Health Network's circulation is currently 365 members of the public and an additional 143 voluntary and community organisations. There are also some 649 businesses included on the Network's database.

Through the network people can respond to surveys and consultations, ask questions and provide feedback.

The Growing Healthier newsletter has a circulation of around 1,000 recipients which is sent out on an electronic platform which allows us to monitor the number of people who open it. Currently 20% open the newsletter, the recipients list is being reviewed to improve this rate.

Issuu is an online platform designed to make it easier for people to find, read and follow our publications. We have 18 publications on our website. Since we joined the site in March our documents have been viewed a total of 18,961 times with unique page views at 370,158.

You Tube: 1,108 people have viewed our You Tube channel and viewed our videos 1719 times.

We have 80 followers on Twitter, since June 2011 we have "tweeted" 73 times, resulting in the links we are tweeting being opened 100 times. Many of our followers are key stakeholders (MPs, councillors etc) and journalists.

Internet use

97% of people in Medway have access to the internet at home and 50% have access to the internet at work.

Between February and May 2011 there were 290,769 visits to Medway PCT's website. Of those 195,508 visits were to the main area of the site and 97,261 visits were to the practitioners' area.

The PCT website has over 4500 *unique visitors per month and 7500 visitors per month in total.

Use of the PCT internet has risen steadily over the past 2 years:

Jan 09 - Jan 10: 86,230 Visits, 55,025 Absolute Unique Visitors, 245,640 Page views

Jan 10 - Jan 11: 90,990 Visits, 57,668 Absolute Unique Visitors, 255,594 Page views

Unique Visitors represent the number of unduplicated (counted only once) visitors to the website over the course of a specified time period.

The most popular pages are Working for the NHS, contact us, about us, emergency dentist (DentaLine), MedOCC, News and the NHS Medway Board

These pages have been consistently top for the past 3 years. These pages are common for a corporate site.

It demonstrates that for individual services people are more likely to be taken to NHS Choices by search engines if they are looking for specific services.

However, DentaLine and MedOCC are always popular as you would expect people to look for an emergency dentist or GP online in the evening or at weekends.

This is backed by the keyword most used on our site or to find our site - other than NHS Medway or Medway PCT keywords most used are 'Emergency dentist' 'late night dentist' 'DentaLine or MedOCC etc.

Media viewing habits¹

Which of the following do you watch/read/listen to regularly?

The most popular newspapers were Medway Messenger (64%), the free paper Kent Messenger Extra (50.2%) and Medway News (41.4%). Kent on Sunday (16.8%) and its sister free paper Your Medway (20.6%) were less popular

The most popular broadcast outlet is BBC local television news (76.4%), followed by Meridian local television news (60.8%).

The most listened to radio station in Medway was Heart (54.6%), followed by KMFM (35.6%) and BBC Radio Kent (29.8%).

The BBC website is a most popular outlet for media at 42.6% and facebook is also very popular (43.4%). Use of twitter has steadily grown over the past year from 4% to 10% by April 2011.

75.8% of residents recall receiving a copy of Medway Matters at home, of those 80% looked at a copy of Medway Matters.

¹ Medway Council Residents Survey, April 2011, Lake Research. Based on quarterly surveys of 400 residents between April 2010 and April 2011.

Medway Commissioning Group - Communications and Engagement Planner July-Sept 2011

Appendix 3

Objective	Action	Required Outcome	Target date	Progress
Embed public and patient engagement into the organisation and commissioning process	Develop communications and Engagement Strategy with MCG Board, carry out wider consultation with patients and public	There is a clear policy for engaging with patients and public and processes to embed it	Sep-11	Board approved 27 July, feedback from public consultation incorporated into v2, further discussion at event 23 Nov 11
	Work with Medway LINK and GP practices to Develop Patient Participation Groups through DES	Patients can directly influence commissioning and improvement of services through their relationship with GPs and ultimately clinical commissioners	Sep-11	21 practices have signed up to the DES, development is being supported by Medway LINK and cluster engagement staff
People involved in front-line care can influence commissioning decisions	1. GP Monthly slots. 2. Website project to improve practitioners area of website and make it home page for all GPs promotes we are listening email	Access to and use of two-way communication with GPs increases clinical involvement in decision making	Sep-11	Communications discussed with GPs at GP monthly August
People involved in front-line care can influence commissioning decisions	Survey to establish how GPs want to be communicated with	Access to and use of two-way communication with GPs increases clinical involvement in decision making	Aug-11	Completed and findings built into Comms and Engagement Strategy
There is a culture of continuously improving the quality of clinical care There is clear, consistent, communicated reasons for the things MCG is going to do, understood and accepted by practices and providers	Website project to improve practitioners area of website to make it easier for clinicians to find information about best practice	GPs have easy access to and use information about the latest changes to pathways, referrals etc	Sep-11	Website pages redesigned and developed. To be launched at Dec GP monthly
	1. Send Growing Healthier newsletter to practices, providers and stakeholders on a monthly basis 2. Improve take up rate of newsletter	People know about MCG and its work and understand and support its decisions	July/Aug/ Sept	July and September editions issued
	1. Media training for main spokespeople. 2. Promote MCG in the media, secure local media interviews/positive coverage	There is a good relationship with the media who know about MCG and its work and understand and support its decisions	Jul-11	1. Completed 2. Completed

<p>People can access information to make healthy lifestyle choices and know where to get support to make the choices</p>	<p>Campaigns for Q3: Mental Health, Flu, Healthy Start, Breastfeeding, End of Life Involve clinicians and local patients as case studies in campaigns and use GP surgeries as place to promote campaigns</p>	<p>Clinical commissioners promote campaigns and lead work in their own surgeries</p>	<p>Ongoing</p>	<p>Health Matters editions, Choose Well distribution, Flu distribution, GP monthly</p>
<p>Embed public and patient engagement into the organisation and commissioning process</p>	<p>Clinical Commissioners lead on service redesign of Elm House and Kings Road Clinics</p>	<p>Service redesign is clinically led</p>	<p>Sept</p>	<p>HOSC, MHN, Consultation launched Aug</p>

Medway Commissioning Group - Communications and Engagement Planner Oct-Dec 2011

Objective	Action	Required Outcome	Target date	Progress
There is a culture of continuously improving the quality of clinical care	MCG update one page bulletin to flag updates and practitioners area of website	GPs have easy access to and use information about the latest changes to pathways, referrals etc	Launch December	Designed
	Clinical surveys led by GPs to improve provider services: Dermatology and Rheumatology	GPs influence and improve services provided by MFT and provide patients feedback	Launch December	
Embed public and patient engagement into the organisation and commissioning process	Ensure all GPs have an email address to receive bulletins etc	GPs have easy access to and use information about the latest changes to pathways, referrals etc	Launch December	On target
	Hold an event for MCG to consult with the public on what they want from clinical commissioning and the future of healthcare	The public feel able to influence commissioning decisions and understand them	24/11/2011 Corn Exchange, Rochester	
People know and understand the challenges and improvements that are being made in the health economy	1. Send Growing Healthier newsletter to practices, providers and stakeholders on a monthly basis 2.Improve take up rate of newsletter	People know about MCG and its work and understand and support its decisions	Ongoing	October edition sent out
	Work with Medway LINK and GP practices to continue to develop Patient Participation Groups through DES	Patients can directly influence commissioning and improvement of services through their relationship with GPs and ultimately clinical commissioners	Ongoing	21 practices have signed up to the DES
People can access information to make healthy lifestyle choices and know where to get support to make the choices	Campaigns for Q3: Seasonal flu, Choose Well, Bowel/Breast Cancer/Mental Health Involve clinicians and local patients as case studies in campaigns and use GP surgeries as place to promote campaigns	Clinical commissioners promote campaigns and lead work in their own surgeries	Ongoing	Audit+ in Primary Care, Health Matters magazine delivered to every home
People involved in front-line care can influence commissioning decisions and Embed public and patient engagement into the organisation and commissioning process	Strategic Change Group lead on service redesign recommendations, decision ratified by Commissioning Committee	Service redesign is clinically led and informed by patients	September	Completed
	Focus groups and Clinical Commissioners lead on service redesign of Eating Disorders	Service redesign is clinically led and informed by patients	Nov	Focus groups held, options being explored, HOSC briefed