

**NHS Dorset Clinical Commissioning Group**  
**Governing Body Meeting**  
**Engagement Report**

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| <b>Date of the meeting</b>                           | 18/09/2013  |
| <b>Author</b>  | L Kite, Deputy Director of Engagement and Communication   |
| <b>Sponsoring GB member</b>                          | T Goodson, Chief Officer<br>Presented by: C Summers, Director of Engagement and Development   |
| <b>Purpose of report</b>                             | The purpose of this report is to update members on the progress of the engagement and communication strategy action plan.   |
| <b>Recommendation</b>                                | The Governing Body are asked to <b>note</b> the report.   |
| <b>Resource implications</b>                         | Any resource implications have been identified as part of the implementation plan for the Engagement team.  |
| <b>Link to strategic principles</b>                  | <ul style="list-style-type: none"> <li>• Services designed around patients</li> <li>• Preventing ill health and inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul> |
| <b>Risk assurance</b><br>Impact on high level risks  | None  |
| <b>Privacy impact assessment</b>                     | This report has no impact on privacy and therefore no impact assessment is needed.  |
| <b>Outcome of equality impact assessment process</b> | This is an update on progress of actions and therefore has no equality or diversity implications to address.  |
| <b>Actions to address impact</b>                     | None required   |
| <b>Legal implications</b>                            | None.   |
| <b>Freedom of information</b>                        | Unrestricted.   |
| <b>Stakeholder Engagement</b>                        | There was engagement with key stakeholders to develop the strategy and elements of the action plan have involved stakeholders in its development.   |
| <b>Reason for inclusion in Part 2</b>                | N/A   |
| <b>Previous Committees/Governing Body</b>            | This report is also scheduled to be presented to the Clinical Commissioning Committee on 25 September.  |

## 1. INTRODUCTION

- 1.1. We agreed our communication and engagement strategy in September 2012. The strategy identified actions to deliver the strategy and some of these actions have been updated and revised to form the 2013/14 work plan for the team.
- 1.2. This report provides the Governing Body with an update on the progress of this work.

## 2. REPORT

- 2.1. Communication and engagement is central to our work and forms the core of the commissioning cycle we adopted to deliver our goals through our support function.
- 2.2. Engagement remains as one of the key domains for the on-going assurance process for CCGs and NHS England will be asking us to evidence our approach to involving our stakeholders as part of this process.
- 2.3. Over the past year, the approach to engagement has evolved in line with national expectations which highlight the role of the patients and the public in local decision making. We have spent time to ensure that we are embedding engagement into the organisation as a key part of a more coordinated approach to project management within the organisation.
- 2.4. The team have been working with commissioning colleagues to ensure that the support offered and the guidance given is best practice and meets the aspirations outlined in the engagement and communication strategy.

## 3. KEY ACHIEVEMENTS

- 3.1. An analysis of progress against the updated priority areas is attached at appendix 1, however there are some notable achievements to highlight in more detail.
  - Extensive engagement has been undertaken with previous PCT cluster network -members to agree the future shape of a new health involvement network for Dorset CCG. From this has developed four new locality health networks to support locality prioritisation and decision making. Health Involvement Network members will be mapped to enhance and improve each individual locality network;
  - We have led a Dorset wide research project, "*the big ask*", bringing together hospital and community providers in Dorset to seek the views of the public about local health services;

## 9.5

- We have started to develop a strong CCG brand and corporate identity within our publications and other media, adopting the visual elements developed for the mission and values work during authorisation
- We have worked with partners in the local authority, Healthwatch Dorset and the voluntary sector to put on a public event in Poole called “*Being Well – the Wellbeing Show*”, where local health and social care developments were highlighted and all local organisations represented;
- Each of our Clinical Commissioning Programmes (CCPs) has a link engagement team member with 30 projects identified as needing support to ensure effective engagement with the priorities and work programmes. Each CCP will have its own specific engagement group of users, carers and the public based on the specific feedback from network members on their areas of interest;
- Work has started with practice managers to understand their role within the CCG and how they can continue to be engaged with commissioning decisions including a bespoke programme alongside our April membership event;
- A new database has been developed to manage interactions with our key audiences. This will allow us to define a more individual approach to meet specific clinical and service review needs and develop more powerful relationships;
- We have engaged with over 500 local stakeholders on the refresh of our five year strategy. The synthesis of this is helping to inform our CCG strategy refresh;
- We have seen over 150 members of staff participate in orientation sessions, supported by GP leads, to talk about our new ways of working and to get feedback about how the organisation needs to develop for its key human resource. A whole staff event was welcomed by staff in May to bring together the new teams and to present our strategy and structures.

## 4. CONCLUSION

- 4.1. The first six months has been busy for the engagement team to ensure that the structures and the processes are fit for purpose.
- 4.2. We are now seeing how these processes work in action to add value to localities, clinical commissioning programmes and the CCG as a whole.
- 4.3. The next six months will focus on the delivery of the approach for engagement for the CCG to support clinical and service reviews. It continues to underpin the mission and values of the organisation and we will be developing systems to ensure this is effectively monitored and evaluated.

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**Appendices**

**Appendix 1**

**Engagement and communication  
action plan**

**ENGAGEMENT AND COMMUNICATION STRATEGY: PROGRESS SEPTEMBER 2013**

| Key actions from strategy  | Delivery date | Progress to delivery  | Other issues for consideration   | Lead |
|--|---------------|---|--|------|
| <b>ENGAGEMENT</b>  |               |   |  |      |
| Develop an annual delivery engagement delivery plan which outlines projects, developments and changes proposed and ensure this is circulated and explained to stakeholders | April 2014    | <ul style="list-style-type: none"> <li>• Meetings held with all CCPs and priorities identified for service redesign and review.</li> <li>• Priorities documented in High Level Delivery Plan(updated June 2013) agreed with service delivery team</li> <li>• Engagement plans in place to support specific areas of redesign and delivery.</li> </ul>                       | <ul style="list-style-type: none"> <li>• CCPs are currently developing five year commissioning plans and some preliminary discussions with the TP Team and Chris McCall to discuss engaging with the membership.</li> <li>• Close working with Strategy Team colleagues will align processes with strategy.</li> </ul> | ER   |
| Develop the process for recording engagement activity and reporting back to stakeholders to show how decisions have been affected by the engagement                        | February 2014 | <ul style="list-style-type: none"> <li>• Redesign and delivery template complete and road tested with several CCP colleagues. Positive feedback.</li> <li>• Development of online statement of involvement pages to record activity.</li> <li>• CCG newsletter, member bulletin, staff updates and stakeholder bulletin used to feedback as well as social media</li> </ul> | <ul style="list-style-type: none"> <li>• Health Involvement Network pages on our web site will also be developed to provide interactive feedback.</li> </ul>   | ER   |

| Key actions from strategy  | Delivery date                                       | Progress to delivery  | Other issues for consideration  | Lead           |
|--|---|---|---|----------------|
| <p>Ensure the development and implementation of a staff engagement and communications plan for 2013/2014 which responds to the needs of staff and the organisation.</p>  | <p>October 2013</p>                                 | <ul style="list-style-type: none"> <li>• Staff orientation sessions and staff survey information used to gain feedback from staff</li> <li>• HR and OD information now on intranet</li> <li>• Staff comms and engagement survey live until early September</li> <li>• Draft plan in place for October 2013 for staff event for consideration</li> </ul>   |   | <p>EP / LK</p> |
| <p>Undertake research across Dorset to determine peoples' current thoughts and views about health services to set a baseline. NB since this was set NHS England has also launched its call to action which seeks to gather views about how the NHS can address its challenges over the coming years.</p> | <p>Launched June 2013<br/>Results November 2013</p> | <ul style="list-style-type: none"> <li>• <i>The Big Ask</i> – a research project in conjunction with all NHS partners in Dorset went live across the county in June and runs until September.</li> <li>• Nearly 5,000 respondents to questionnaire so far. Currently undertaking focus groups with public, patients and diverse groups</li> <li>• Social media has been a key part of this research project with a Healthy Dorset brand developed to support comms for all partners involved in the project.</li> </ul> | <ul style="list-style-type: none"> <li>• The feedback from this work will also be used to feed into the call to action information and additional work will be done to seek views of local people on the NHS challenges.</li> </ul> | <p>LK</p>      |

| Key actions from strategy  | Delivery date | Progress to delivery   | Other issues for consideration   | Lead |
|--|---------------|--|--|------|
| <b>STAKEHOLDER MANAGEMENT</b>  |               |  |  |      |
| Develop and implement a stakeholder management strategy which includes the further development of systems to manage these relationships across the CCG                                   | November 2013 | <ul style="list-style-type: none"> <li>• Work has been completed to understand the CCG approach to stakeholder or 'audience' management.</li> <li>• Briefing planned for engagement governing body members in late September.</li> <li>• Implementation plan started to reshape stakeholder engagement</li> </ul>  |  | LK   |
| Develop and launch the new CCG engagement/involvement network to support both CCPs and localities effectively engage with key stakeholders on service change, development and reductions | July 2013     | <ul style="list-style-type: none"> <li>• Consultation complete, recommendations to GB and agreed.</li> <li>• Results of consultation out to stakeholders underway</li> <li>• Preparation underway to inform all current members of existing networks.</li> <li>• CCC to agree TOR for engagement sub committee</li> <li>• Plans to be formulated to launch new network and to promote throughout the county using new marketing materials</li> </ul> | <ul style="list-style-type: none"> <li>• Work continues with current locality Health Networks to become embedded in the locality and to receive greater support within the locality</li> </ul> | ER   |
| Agree future relationships and contractual arrangements with the voluntary sector management bodies to   | March 2014    | <ul style="list-style-type: none"> <li>• Work to consider voluntary sector role in the CCG to be undertaken as part of the integration work with local authorities</li> <li>• Early work has started map current use of the sector and the CCG spend and value</li> </ul>  | <ul style="list-style-type: none"> <li>• The CCG needs to be clearer about the role of the voluntary sector in the future</li> </ul>   | LK   |

| <b>Key actions from strategy</b>  | <b>Delivery date</b> | <b>Progress to delivery</b>   | <b>Other issues for consideration</b>   | <b>Lead</b> |
|---|----------------------|---|---|-------------|
| support the CCG with its engagement and development of the sector   |                      |   |   |             |
| Undertake an awareness campaign for engagement opportunities with the public to encourage more members to network and to provide clarity about the ways to get involved | October 2014         | <ul style="list-style-type: none"> <li>• Communication plan in development</li> <li>• New marketing materials in concept stage</li> </ul>   | <ul style="list-style-type: none"> <li>• This links to the launch of the health involvement network</li> </ul>  | ER          |
| Develop a corporate approach to customer insight using current sources of data to support commissioning   | January 2014         | <ul style="list-style-type: none"> <li>• Current data use across the CCG mapped and purpose and value understood</li> <li>• Staff group brought together to develop corporate approach to collecting and using data</li> <li>• Awaiting final report and recommendations for consideration</li> </ul> | <ul style="list-style-type: none"> <li>• Need to ensure this links with quality and performance work to present a comprehensive view of services to the CCPs</li> </ul> | LK          |
| <b>COMMUNICATIONS</b>   |                      |   |   |             |
| Launch the CCG five year strategy and increase awareness of its ambition  | June 2013            | <ul style="list-style-type: none"> <li>• Strategy published and circulated to stakeholders</li> <li>• Briefing sessions undertaken with key stakeholders and events held to promote ambitions</li> </ul>  | <ul style="list-style-type: none"> <li>• Feedback from events and presentations is informing the strategy refresh</li> </ul>  | LK          |

| Key actions from strategy  | Delivery date  | Progress to delivery  | Other issues for consideration  | Lead |
|--|----------------|---|---|------|
| Develop and agree the process for engaging staff, stakeholders and members on the refresh of the five year strategy  | September 2013 | <ul style="list-style-type: none"> <li>Plan being considered at September GB meeting</li> </ul>   |   | LK   |
| Develop external and internal communication products which are relevant and valued to support the work of the CCG to illustrate how its values and aims are being embedded throughout the organisation | January 2014   | <ul style="list-style-type: none"> <li>A review and evaluation of existing products and tools has taken place and confirms there is a need balance the reliance on print and digital communications to encourage better conversations in a more compelling way.</li> <li>Media relations are identified as an efficient and impactful way to 'talk' with our internal and external audiences. A new production and publication cycle is being devised for implementation in January 2014 to reflect this.</li> <li>On-going improvements to the intranet include introduction of video content, bespoke locality sections, national health news feeds and social media.</li> <li>News content is improving on the external website and is regularly shared in social media (Twitter and Facebook).</li> </ul> | <ul style="list-style-type: none"> <li>Staff resources need to be developed to increase our digital resources (intranet and website). Funds have been identified to hire specialist digital skills to deliver the clinical content needed to support the membership.</li> </ul> | EW   |
| Develop and deliver a media strategy to include social media and   | July 2013      | <ul style="list-style-type: none"> <li>A draft media strategy has been developed as part of our stakeholder management approach which incorporates media</li> </ul>   | <ul style="list-style-type: none"> <li>Further media training is required to prepare more GPs so there is a</li> </ul>  | EW   |

| Key actions from strategy  | Delivery date | Progress to delivery   | Other issues for consideration  | Lead |
|--|---------------|--|---|------|
| covering issues/crisis comms, media training and protocols                       |               | <p>relations (press), social media and rich media production.</p> <ul style="list-style-type: none"> <li>Journalists' database has been set up to develop a more proactive/pitching approach to stories and targeted coverage.</li> <li>Excellent links forged with new BBC Dorset breakfast show. Positive impression of NHS 111 Dorset in recent national and regional BBC TV coverage.</li> <li>New stakeholder management system (Vuelio) has led to more consistent approach to engagement with the media.</li> </ul> | bigger pool of commentators.  |      |
| Develop processes to measure success of the brand development and implementation | January 2014  | <ul style="list-style-type: none"> <li>Baseline of current views to be set in the autumn to allow annual assessment of views and satisfaction</li> </ul>   | <ul style="list-style-type: none"> <li>The initial CCG stakeholder survey from 2012 will feed into this.</li> </ul> | LK   |
| Implement a process to measure the success of communication and engagement       | November 2013 | <ul style="list-style-type: none"> <li>This work is to be started as part of the stakeholder development work so evaluation is embedded into our engagement work.</li> </ul>   |   | LK   |