healthwatch
Hackney

Communication and Engagement Strategy 2015/2016

Introduction

Healthwatch Hackney is the independent voice on health and social care for people in Hackney. From April 2013 we have accepted the increased powers and responsibilities for the 'public voice'. This proposal is another opportunity to demonstrate our commitment to ensuring that patient and public engagement is embedded in all new NHS and social care structures. Local people should have a say in what they want Healthwatch to do for them and what is important to them. They should feel a sense of ownership and feel part of this fundamental shift in public involvement.

It is important that engagement and involvement is not only done when required for statutory purposes. It must be a continuous dialogue with the people of Hackney and fundamental to all service commissioning and redesign. It is a time to embrace and recognise the benefits of engaging and consulting with everyone who uses services to drive change and seek positive outcomes.

That is why we have prioritised our engagement work, and worked hard to listen to views from communities who find it more difficult to influence how services are designed and delivered.

We will build on this to ensure that Healthwatch Hackney develops strong partnerships to promote improvements in health and social care and therefore better outcomes for local people. Every resident of Hackney should have an opportunity to 'have their say' on what services they need, how services will be delivered and who will deliver them. If local people are involved at all levels in decisions being made then they will feel a sense of ownership and also be less likely to accept poor quality services or decisions they disagree with.

"To be empowered you need to feel empowered. To feel empowered you need the information and mechanisms in place to be involved."

Background

Fundamental to the NHS reforms is the concept of 'No decision about me, without me'. This is not just a concept which relates to individual clinical decisions, but needs to be taken as a starting point for much wider and more meaningful public engagement in the planning, provision and evaluation of health and social care services. For the purpose of this proposal Healthwatch Hackney aims to ensure that this information is credible and coherent for all stakeholder audiences.

Our Vision

Our vision is to play a distinctive part in improving health and social care services in Hackney. We aim to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality and to:

- be a respected and trusted voice that is informed by evidence
- be an interpreter of information
- hold an overview
- have influence

We have three high level strategic aims:

1. Governance: to develop a robust, efficient and respected organisation and to ensure Healthwatch Hackney meets its objectives in an open and transparent manner

2. Listening and signposting: Understanding the needs of the people of Hackney, supporting them with opportunities to voice their views and providing them with information

3. Influencing: supporting and influencing those who have the power to change, design and deliver services so they better meet the needs and rights of users

What do we mean by communication and engagement?

Definition of words can be confusing when working with a diverse audience and this has the potential to cause communication barriers.

Who are our stakeholders?

Our stakeholders are individuals or organisations that have a direct interest in a service being commissioned or provided; also individuals with a direct involvement, interest and investment in health and social care services for everyone.

What does 'communication' mean?

By nature, communication is a two-way process where a connection is made. Communicating coherent information to all stakeholders will help everyone to make informed decisions. Communicating involves listening which is fundamental to the process and to decisions being made. It is also crucial that Healthwatch Hackney is seen to be a credible, ethical and a cohesive independent organisation.

What does 'engagement' mean?

Engagement is a term used to describe a two-way communication between Healthwatch Hackney and the residents of Hackney. This includes patients, carers and all members of the public. The aim is to keep them informed and also have an effective mechanism to seek their views, opinions and needs, and then communicate the information to the key decision makers in the health and social care infrastructure. Engaging with the people of Hackney helps Healthwatch influence decisions being made through anecdotal evidence from

people, with the crucial outcome being patients and public being at the heart of the decision making process for health and social care services.

What does 'commissioning' mean?

Commissioning is a way of getting the best value and health outcomes for all stakeholders by identifying and understanding their needs. This involves buying the best possible health and social care services that deliver best outcomes with the resources available.

Promotion - Letting people know about Healthwatch – Healthwatch will promote itself through short, simple messages about what it does, how it works, how it can be reached and how it is influencing change and improvements. Healthwatch will ensure good information is provided to people who access local health and adult social care services, as well as the wider community of 'friends, family and carers' who are a key source of information and support.

Reaching people using different media – Healthwatch will use a variety of media (our website, newsletter, twitter and fliers) to reach, inform and engage the greatest number and diversity of local people. Healthwatch will use inclusive language, be accessible and provide information in ways that break down barriers. Where we can we also translate information into community languages.

Receiving and sharing information – Healthwatch will hold a range of information for commissioners, providers, practitioners and the public about what people who use services are experiencing, whether this is about general experiences, what they would like to happen or one-off good/bad events.

Reaching people through other organisations – Healthwatch will strengthen its links with other voluntary and community organisations that represent people, communities and special interest or needs.

People's impact – Healthwatch will give people feedback about the way their experiences and involvement have brought about changes and/or improved services and outcomes in the longer term. The success of engagement activity should be rigorously evaluated and involve members of the communities we represent.

Health & Wellbeing Board – Healthwatch will provide a co-ordinated communication route to and from the Council's Health and Wellbeing Board.

Clinical Commissioning Group – Healthwatch will provide a coordinated communication route to and from the CCG Board.

Data Protection -Healthwatch will have robust data protection systems so that appropriate information can be kept and made available to influence changes and improvements.

Specialists – Healthwatch will have access to a wider pool of skilled, knowledgeable members or associates, with a range of specialisms.

Our Engagement Model

Impact
stakeholders

Priority areas

4 / 5 key indpeth engagement projects that will drive impact, Enter and View visits

Community intelligence gathering

working with our VCS partners 'Network of networks' 'seldom heard'.

Day to day communication

Outreach - awareness raising, signposting, comment collecting. Website feedbackto 'the local voice'.

There are 4 steps to our engagement model:

1. Day to day dialogue and communication with patients and the public

It is important that everyone in Hackney is aware of Healthwatch and how they can provide feedback on their experience of health and social care services.

Healthwatch will provide information and signposting support to individuals

Working closely with our volunteers and members to conduct regular awareness raising, signposting and comment collection **sessions at key community gathering points** e.g LBH Service Centre, Homerton Foyer, GP practices.

Working in partnership with our networks to attend **community events** e.g. Hackney Carers Annual Conference, POhWER Learning Disability Speak Up forum, Older People's Reference Group.

Attending existing **focus groups, forums**, meetings and groups to listen to the voice of service users.

Outreach work with **specific target groups** such as young people, Turkish, Vietnamese, Congolese or specific user groups such as disability groups, mental health users to gather their views.

Producing and distributing leaflets widely across the NHS, Local Authority and the VCS Promotional material encouraging people to contact us directly through the website, email and over the phone.

Producing regular newsletters, email updates and press releases

Piggy backing on stakeholder comms and engagement activity e.g. CCG press releases, LBH and CCG website links etc and using the Council free sheet which goes to every household in Hackney.

3. Community intelligence gathering

Given the limited resources we have, we must ensure that our engagement work is efficient, effective and inclusive and that we get the widest possible views and access those voices that struggle most to be heard.

Hackney is characterised by its large and diverse ethnic minority communities and the proliferation of small community groups that have developed to meet the specific needs of these communities. Healthwatch at its most effective and efficient is able to work across its **network of networks** of user voice organisations (with close partnership working with the Health and Social Care Forum, the Children and Young People Providers' Forum and Hackney Refugee

Forum) to both gather intelligence but also to ensure that that intelligence has an impact on services and that impact can be demonstrated to the organisations and users taking part.

We will

- undertake both our own community insight events and also work with key partners such as the HSCF, CCG of SPPS to run events
- Annual Healthwatch event in the community
- consider the continuation of a community intelligence grant programme (funding dependent) to VCOs who have a specialist expertise or knowledge of patient or user experience of services.
- Ensure engagement is extended to children and young people.
- Ensure engagement seeks a diverse range of views and opinion, not excluding those who find it hard to be heard.

3. Priority projects

We have to be realistic about the capacity we have to influence change at Healthwatch Hackney, and concentrate our time and effort in the areas where we have the ability to make the most difference. Our targeted engagement work is determined using a bottom up and top down approach, i.e. from the bottom up as a result of the issues, trends and themes that present themselves as a result of the voice of patients and the public, and from the top down as a result of CCG of LBH commissioning intentions, gaps in JSNA information or feeding into the Health and Wellbeing Strategy.

This work includes our Enter and View function, which enables our volunteer authorised representatives to enter and view health and social care services to see and hear for themselves how services are provided.

Our process for deciding which workstreams to focus on is based on:

- Analysing the comments and suggestions received from health and social care users throughout the course of the previous year.
- Reviewing the current Joint Strategic Needs Assessment, Health and Wellbeing Strategy and key commissioner and service provider plans to identify gaps or areas where greater user experience would have an impact on service improvement.
- Reviewing potential priorities against:

1. Is this an appropriate area of work for Healthwatch to focus on i.e. within our remit?
2. Does it fit within current commissioning priorities and therefore likely to have an impact?
3. Is the issue already being dealt with through other avenues/organisations?
4. Does it offer potential projects that are achievable within resources?
5. Is it an area where we can add significant value/ have a significant impact?
6. Is it achievable in the timeframe?
7. Will it impact on a large number of people or have a significant impact on one of our key target groups?
8. Will it have an impact on mortality or quality of life?

- Developing a long list of potential priorities and consulting with Healthwatch members and the wider community to rank the potential priorities as to level of importance.

- Finally the Board review the outcomes of the community priority setting and agree up to five priorities where we think we can have the greatest impact.

We use these workstream areas to decide how we spend our core funding, against our purpose and role as well as being responsive to issues that emerge. In addition, we bid for funding and are responsive to requests to run additional programmes of work, as they meet our community interest / stated purpose.

4. Influencing Stakeholders

Healthwatch Hackney must build constructive and effective relationships with our key stakeholders and be viewed as a trusted and respected partner in the health and social care commissioner landscape.

We aim to support and influence those who have the power to change design and delivery of services so they better meet the needs and rights of users. Our Chief Executive, staff and patient representatives will be an integral part of local and regional decision making bodies.

We will provide our stakeholders with evidence-based intelligence to ensure:

- the perspective and voice of local people appears in the JSNA and HWS.
- that commissioners and providers make space to hear the views and feedback of service users and the public when making different decisions.
- patients and users are engaged in co-producing and co-commissioning services
- our recommendations about how services could or should be improved impact on commissioning processes and services improvements

Breaking down the barriers

Healthwatch Hackney acknowledge the barriers that people experience in speaking up about their experiences of health and social care (as highlighted in a research report to the CQC called 'Fear of raising concerns about care' which was published by ICM in April 2013) and will take steps to break down these barriers.

The 3 main **barriers** to passing on concerns about care:

2. Not wanting to be seen as a trouble-maker.

3. It would not make a difference and nothing would improve as a result.

4. Worried their care would get worse as a result.

In Hackney we have also found that issues like not speaking English well, lack of access to the internet and lack of literacy skills also influence people in passing on concerns about their care

The same report also identifies 5 key **enablers** that people have told them would encourage them to speak up.

2.1 Knowing what standard of care they had a legal right to receive would encourage them to speak out about poor care.

2.2 Being told that they can raise concerns when they are receiving care or being actively encouraged to do so.

2.3 Knowing it will be anonymous is crucially important

2.4 Knowing what action has been taken as a result.

2.5 Being supported to do so!

These are all factors that Healthwatch will address through our accountability structure, ensuring we retain our independence, whilst building our relationships with others and reflected in plans for the future.

Feedback

Information about Healthwatch Hackney reach and impact will be regularly reported to the public in Hackney through a variety of media, in a variety of formats. Most of which will be publicly available.

3.1 You said we did on website
3.2 Community Intelligence reports and recommendations

Appendix 1 Who are our Stakeholders?

The number of Healthwatch stakeholders is likely to be very numerous, and some may change from time to time as there are changes in Health and Social Care structures, in the way services develop and operate, and in the focus of Healthwatch activities.

The following broad categories could include -

Public

a) People who live, work, visit, are cared for in Hackney
b) Voluntary and Community Sector
c) Neighbourhood Groups
d) Residents Associations
e) Faith Groups
f) Citizens Advice Bureau
g) Other individuals
h) Other groups

Patients

a) Patient Participation Groups
b) Super Patient Participation Groups
c) Patient Reference Groups
d) Hackney CCG PPI Group
e) Hackney CCG Lay Members
f) Homerton Hospital Patient Groups
g) Campaign and Special Interest Groups e.g. Save Our NHS
h) Other individuals
i) Other groups

Health

a) Neighbouring Healthwatch Organisations

b) Hackney CCG

c) Hackney Health and Wellbeing Board

d) Homerton Hospital

e) East London Foundation Trust

f) London Ambulance Service

g) Public Health Bodies

h) GP Practices

i) Allied Health Professionals, such as Therapy, Dietetic, Optical,

j) Pharmacy

k) Dental Practitioners

l) Nursing and Midwifery Services

m) St Josephs Hospice

n) Private Providers

o) Other individuals

p) Other groups

Social Care

a) Local Authority and Private Providers / Agencies for :
b) Adult
c) Older
d) Physical
e) Sensory
f) Autistic Spectrum Disorder
g) Fostering and Adoption
h) Child Care
i) Partnership Boards, such as Safeguarding
j) Carers Groups
k) Neighbouring Social Care Providers
l) Other individuals
m) Other groups

Education

a) Early Years

b) Schools and Colleges

c) Parent / Teacher associations

d) Adult Education, such as WEA, U3A

e) Other individuals

f) Other group

Other

a) MPs and Councillors

b) Libraries

c) Housing Associations

d) Emergency Services – Fire, Police,

e) Youth Partnerships

f) Sports and Leisure Providers

g) Employment Agencies

h) Probation Service

i) Advocacy / Complaints Services

j) Other individuals

k) Other groups

National

a) NHS Commissioning Board
b) Healthwatch England
c) Care Quality Commission
d) Dept of Health
e) NICE
f) King's Fund
g) Royal Colleges, of Medicine, Nursing, etc
h) Academic Institutes
i) Professional Journals
j) Data Protection and Equality Provision Organisations
k) Other individuals
l) Other groups

Media

a) Local, Regional, National
b) Newspapers
c) Radio
d) Television
e) Electronic, Intranet, Web, etc

Appendix 2 Public engagement techniques

These are many and varied, and could include -

- **Discussion groups** - these are usually facilitated, and may be face-to-face or organised electronically. They can be set up for a specific purpose, or used to target existing patient and carer groups, interest groups and support groups

- **Focus groups** - focus groups are guided discussions with a small group of people. They are usually one-off sessions, although several may be run simultaneously in different locations

- **Citizens' panels** - a citizens` panel is a large,demographically representative group of citizens regularly surveyed to assess public preferences and opinions

- **Health panels** - health panels have primarily been used to explore people`s views on "live" policy issues, and the allocation of health service resources. Participants are usually recruited using a quota sampling technique to reflect the socio-economic make-up of the area. Membership is refreshed on a regular basis

- **User groups** – user groups are groups of service users that meet regularly to discuss the quality of a service, and other related topics. They help to identify the concerns and priorities of other service users and can lead to the early identification of problems, or ideas for improvements

- **Patient Participation Groups** - each Patient Participation Group (PPG) is

linked to a specific GP practice. Ideally PPGs are run by patients, and supported by doctors, the Practice Manager, and other staff from the practice. The way they operate varies. Some have committees elected by patients, while others may be organised and run by the practice. Some practices may also have a "virtual" group, and some may only have a "virtual" group. PPGs provide opportunities for sharing of information – news, views and ideas, between the practice and the patients. Health education events may also be held

- **Nominal groups** – these begin with a specific and clear question or topic, and the participants identify issues and prioritise them. The same question or topic can be used with different groups of people, e.g. with staff, patients, carers, and the issues and priorities compared

Public meetings

These are meetings for which there has been an open invitation. There may be a set agenda, or discussion may focus on issues raised at the meeting. Public meetings have been used to impart information, but may not be the best way to do this. They can be used creatively to obtain information from participants, or as a forum for debate

Electronic discussion groups

Such groups could include -

- **Blogs** - these are on-line journals or notice boards, where individuals or organisations can provide commentary and critique on news, or specific subjects such as politics, local events or health matters

- **Webchat** - "real time" webchats are based on instant messaging, such as MSN. This is an informal way to gather information from different stakeholders and to answer specific questions they may have. Participants are invited to contribute to the discussions, but usually anyone can observe the proceedings on-line, even if they cannot contribute

- **Chatrooms / on-line discussion groups, forums** - these are web tools that

allow discussions to be held on-line. Participants can post their own comments on-line, which distinguishes them from one-way communication tools such as e-mail bulletins

Other public engagement techniques

Other techniques which may be used include -

- **Requested and spontaneous views** – information obtained by this range of methods can be sought about specific issues, or may be spontaneous as a result of an ongoing organisational initiative. This can be more effective around a particular issue. Methods often include on-line consultations

- **Shadowing** – this allows staff to gain a new and different perspective of the patient`s experience by accompanying a patient or user as they use services. An agreed period of time is spent shadowing an individual, and lessons learnt are used to inform / improve services

- **Story telling** / Patient diaries – these techniques invite participants to capture and record their experience of services in a way that can be fed back to staff

- **Conversation cafes / open surgeries** – informal dialogue methods which invite people to take part in discussions about topical issues, in informal settings

- **Mystery shopping** – a way of auditing services through the involvement of trained user volunteers

Methods of promoting Healthwatch Hackney

Method	Information	Cost estimate	Action
A7 Information Card	To distribute to all providers in borough. Cards will have basic contact details and key message – print 25k	**£400** including Design, 350gsm, two side print	
A4 Healthwatch Poster	To distribute to all providers in borough. 500 quantity	**£100**	
Staff Business Card	500 business cards x 2 sets	**£215** including Design ,400gsm, laminated two side print	
Promotional Materials	Pens (logo, website) Tote Bags (logo, website, phone) Suggested by C&E members: Fridge Magnet (not printed yet)	1000 pens **£415** 250 tote bags: **£450** (£1.80 each) Fridge Magnet: **£300-400**	
Screen advertising at GP, Library etc	Promote HWH on information screens		
Targeted VCO Annual Report Adverts	Put HWTH advert on targeted VCO's annual printed reports	Could vary from free to up to £250	
Hackney Today			
Local Community Newspapers			
Website search engine optimisation (SEO) and key words	1. Google provide free SEO opportunities to charities (look into this option) 3. generate all keywords that we would like used on website search (action)	Review Google opportunity	
Web link on VCO/statutory websites	We could ask if other local providers are willing to link our website to their website.	Could be free or we might have to give admin cost to individual organisations web management company to add web links	
Facebook Advertisement	Facebook will target all residents of Hackney and put HWH advert on their page (Like or become a Fan).	Various cost options available. £250-1000 per month estimated budget	
Browse Aloud on	Additional function on website that	1yrs @ **£1000**	

website	allows people to listen to written text and also translate website into different languages- targeted for people who can't read, English as second language, dyslexia, etc.	2 years @ **£1672** + VAT	