BARNSLEY HEALTH AND WELLBEING BOARD

Proposed Strategy for Communications and Engagement

1. PURPOSE OF REPORT

1.1 The purpose of this report is to set out the aims and objectives and core principles for a proposed communications and engagement strategy for the Health and Wellbeing Board for Barnsley.

2. RECOMMENDATIONS

It is recommended that:-

2.1 Members of the Health and Wellbeing Board discuss the proposed strategic approach to communications and engagement and agree next steps

3. INTRODUCTION/BACKGROUND

- 3.1 The Barnsley Health and Wellbeing Board (HWB) is a Committee of Barnsley Council, as set out in the Health and Social Care Act 2012. It brings together Elected Members and Officers of the Council, South Yorkshire Police, NHS organisations, including members of the Barnsley Clinical Commissioning Group (CCG) and NHS England, local Heathwatch and Providers to improve the health and wellbeing of the residents and communities of Barnsley and reduce health inequalities.
- 3.2 The Health and Social Care Act 2012, requires the Health and Wellbeing Board to:
 - Oversee the production of the Joint Strategic Needs Assessment (JSNA) to provide a clear statement of the health and wellbeing needs and assets of Barnsley residents and communities
 - Develop a Health and Wellbeing Strategy which is based on the needs identified in the JSNA and other forms of local intelligence, to provide a framework for how these needs are to be collectively addressed
 - Develop health, social care and public health commissioning plans to deliver the priorities of the strategy
 - Promote and deliver integrated working
- 3.3 The Barnsley Health and Wellbeing Strategy 2013-2016 describes the purpose of the Board as being to:
 - Establish a shared understanding of health and wellbeing needs and how these can be met with residents and communities
 - Secure better health and wellbeing outcomes for residents, quality of care and value for money
 - Support joint working and integration of services, taking a whole systems approach, which places the resident at the centre of the decision making process - including the further development of joint commissioning and the alignment of resources

- Lead strategic planning and drive commissioning of NHS, public health, social care and related children's services around the needs of residents
- Ensure the voice of local residents can influence and inform the strategic planning and commissioning of services
- Lead and build partnerships for health and wellbeing across organisations and the wider community
- Become a forum for discussion and accountability with regards to policies, services and activities that influence the health and wellbeing of residents and communities
- Develop and drive major service re-design around health and wellbeing to deliver better local outcomes for local residents
- 3.4 In order to meet these objectives the Board has recognised the vital importance of having a focus on communications and engagement if it is to fulfil its role. The Director of Public Health (Acting) has been charged with taking a leadership role as 'communications champion' for the Health and Wellbeing Board.

4. AIMS and OBJECTIVES

- 4.1 The proposed aim of the strategy is to lead effective communications and engagement to support delivery of the Health and Wellbeing Board's vision and priorities as set out above
- 4.2 We want to take steps to ensure that Barnsley residents have confidence in the local health and care system, is knowledgeable about how to access services, how to stay healthy and independent, where to find assistance and how to get involved.
- 4.3 We also want to make sure that we support our communities to get involved in the services they receive and giving local people greater influence over decisions that affect them and their communities.
- 4.4 We aim to do this through the following objectives:
 - **Inform** provide people with accessible information on how to use the health and care system and make best use of health and wellbeing opportunities
 - **Engage** go out to people and engage them on their terms us ing 'the ladder of engagement' (see appendix) to inform, consult, involve, collaborate and empower people
 - **Promote** raise the profile and reputation of the Health and Wellbeing Board increasing knowledge and awareness about its role
 - Influence Stimulate change through social marketing approaches that target communities, affect behaviours, reduce disease and promote wellbeing
 - **Assure** Give people reassurance and confidence in their services through proactive communications that celebrate achievements.

5. VALUES

5.1 The proposed core values that should underpin how our communication and engagement will be shaped and delivered are set out below.

Our values for communications are to be:

- Open and honest, demonstrating integrity and public accountability
- · Clear, simple and easily understood
- Appropriate to the target audience
- Consistent with local and national messages
- Professional in style, tone and content.

Our values for engagement are to:

- Engage with honesty being clear about purpose and what is possible
- Go out to communities and engage with people on their terms using
- appropriate engagement methods
- Ensure dialogue is two-way, listen and encourage constructive criticism
- Be accountable and act upon feedback
- Let people know what we have done.

6. WHO IS OUR AUDIENCE?

- 6.1 The Board works with many individuals and stakeholder groups. Communication and engagement needs are different in different settings and our responses need to be inventive and flexible. We will work to evaluate our stakeholders so that communications can be effectively delivered and engagement activities made appropriate and meaningful.
- 6.2 To achieve the objectives of better health and wellbeing, reduced inequalities and effective use of services, it is appropriate to acknowledge that some sections of our population will benefit from a more intensive and sustained approach to communications. The Board will undertake campaigns and social marketing programmes that target communities and groups in areas of greatest need, where people have a greater requirement for information and opportunity. Understanding the need for targeting will be based on needs assessment established through the Joint Strategic Needs Assessment and local intelligence.
- 6.3 Staff delivering a wide range of health, care and wellbeing services need to be developed as ambassadors of the vision and the carriers of the message. To deliver strategic change, improve user experience and engage with groups and individuals, the behaviours of staff are central. We need to establish management briefing systems and internal communications that ensure they are knowledgeable and informed and are able to access materials that assist in communicating key messages. We will ensure that staff in the provider services also have information about the priorities for change and will work through our communications leads networks to achieve this.

7. EQUALITY AND DIVERSITY

7.1 Equality is essentially about creating a fairer society where everyone can participate and has the opportunity to fulfil their potential. The population is diverse in its makeup and both engagement and communication needs to be responsive to that diversity. The equality scheme for the Council describes the need to address inequalities by race, gender, disability, sexual orientation and religion. Social exclusion through either illness, poverty, infirmity, literacy or other factors

presents a key challenge for communication to be effective and involvement to be inclusive. It will be important to seek to establish accessible methods of communicating and engaging with all our communities.

8. WHAT ARE WE COMMUNICATING?

8.1 Further work will need to be done on this to come to the Board in the form of a communications plan for approval but some examples of themes we may want to focus on include:

Be well and stay well - individuals supported to take control of their health and wellbeing, to live independently and to care for each other. To make this happen we will invest each year more of our time, energy and resource in preventative services and early intervention

Be equal - we want people in all our communities to enjoy the same high standards of health and wellbeing. We will work more positively with those in our more deprived communities and will target investment to support this aim.

Be together - we will establish a relationship of trust with our local residents and with organisations providing care, health and wellbeing services within the Borough

Be innovative - we will be brave enough to try new ideas and to learn quickly from our mistakes in order to improve the quality, safety and effectiveness of our services

8.2 In order to support the above it is proposed that a simple set of messages are developed that can be promoted throughout all Health and Wellbeing communications. Examples could include:

We are working to

- Make Barnsley a healthier place
- Give people greater choice and independence
- Reduce inequalities through services accessible to all
- Involve people in the shaping of local priorities
- Secure high quality services for all users

We want people in Barnsley to

- Be responsible by looking after their own health, welfare and wellbeing
- Be informed through receiving good advice and information
- Be assisted through getting the right help at the right time and in the right place
- Be involved by working together with us

9. METHODS FOR COMMUNICATION AND ENGAGEMENT

- 9.1 There is no single communication method which is capable of reaching all audiences, or all members of one audience. We will need to exercise creativity and employ varied mechanisms as the tools of communication and engagement.
- 9.2 Traditional methods will be employed such as tried and tested approaches such as press releases, newsletters and public meetings / events.

- 9.3 We also need to look to innovate through web communications and the use of targeted social media such as twitter, texting and social networking sites to identify ways of going out to targeted communities.
- 9.4 We will also need to strengthen our presence on local radio and broadcasting websites and to have less reliance on print media.
- 9.5 All of above will require the communications leads across organisations to work together and co-ordinate communication messages.

10. MEASURING SUCCESS

- 10.1 The Board will need to determine how communications and engagement success will be measured and reviewed. Some possible measures, borrowed from the Department of Health, are set out below:
 - How well local people have a better understanding of the services available
 - How well local people are involved in the designing and delivery of services
 - How well we have responded, as a Board, to customer comments and complaints and how satisfied members of the public are with the services they receive
 - How well local people have been involved in assessing whether priority outcomes have been achieved

11. NEXT STEPS/ WAY FORWARD

- 11.1 If the Board is supportive of the overall principles and approach set out in this proposal, the next steps will be to develop a communications and engagement plan, together with the resources required, for further consideration and approval by the Board.
- 11.2 It is suggested that this plan is presented to the next meeting of the Health and Wellbeing Board.

APPENDICES

Appendix 1: The Ladder of Engagement

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Appendix 1

The Ladder of Engagement¹

The ladder of engagement is based on work undertaken by the International Association for Public Participation. Whenever a service engages with the public it is expected that the level of participation willf all under at least one area of this spectrum. No one area is more desirable than the other and it is expected that multiple areas of the spectrum will be included in the communications and engagement plan for the Board.

Activity	Description	Example
Empower	Processes which place the final decision making in the hands of the public	A citizens jury
Collaborate	Partnership between the public and those responsible for planning services in each aspect of decision making	A consensus building process
Involve	To consistently understand and consider the public's concerns and aspirations	A workshop or focus group
Consult	Gatherine the views of the public to help inform plans and services	A survey
Inform	To provide the public with information which is balanced and objective	A newsletter

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¹ Adapted from a version produced by Sefton Health and Wellbeing Board