

# **Healthcare for London – Consulting the Capital Stakeholder Communications & Engagement – Framework and Action Plan 23 Nov 2007**

This Framework details the responsibilities of individual PCTs, PCT Sector Leads and the Programme Office Communications Team. It is based on the understanding that the 31 London PCTs and Surrey PCTs will continue to work in collaboration to avoid duplication of effort and ensure the most effective use of professional resources. The timescales indicated are based on the assumption that formal consultation will run for a minimum of 14 weeks from late November 2007 to early March 2008.

**Each organisation will be expected to produce a local implementation plan, that includes the action outlined for them here plus any other activities that are appropriate, achievable and affordable within local resources and allocations for Communications and Stakeholder engagement.**

## **CONTENTS**

**The following stakeholder groups mirror the segmentation model described in the consultation strategy:**

- General guidance
- Tasks
- 1. NHS staff and internal stakeholder groups
- 2. Patients/carers
- 3. Health partners
- 4. Community
- 5. Influencers
- 6. Representatives

## General Guidance

This document should be read in conjunction with:

- Consultation strategy
- Sector leads' job description
- Distribution list
- Q & As and media protocol for communications staff
- Meeting record sheet
- Q & As

A Patient and Public Advisory Group (PPAG) is being formed (Oct 2007) and a Joint Overview and Scrutiny Committee is likely to be formed prior to the start of consultation. Each will be asked to review this Framework, the consultation strategy, the documentation and individual organisations' action plans and, later, evidence that action plans are being implemented.

If leave is given in the future for judicial review of any decisions taken in relation to a particular borough/geographical area, it will be the responsibility of the sector leads and local PCT(s) to support the programme team and provide detailed evidence of communications and engagement activity.

## Tasks

Task	Responsibility	Notes
<p><b>Planning</b></p> <p>Programme office is responsible for producing an overarching strategy and action plan</p> <p>Sector Leads are responsible for producing an action plan for their sector</p>	<p>Programme office</p> <p>Sector Lead / PCT</p>	<p>Programme office will also take responsibility for liaising directly with PCTs outside London that join the JCPCT</p> <p>Plan should include (but not necessarily in this order or in these headings):</p> <ul style="list-style-type: none"> <li>• Roles and responsibilities</li> <li>• Key contact details</li> <li>• Key speakers</li> <li>• Organisations to be mailed (and quantities) and events to be held</li> <li>• Budget</li> <li>• Local Q and As</li> <li>• Risk analysis</li> </ul>

<p><b>Events / presentations</b></p> <p>Sector Leads are responsible for liaising with PCTs and arranging local presentations to local groups. E.g. BME and voluntary communities, OSC and PPI. Sector leads hold a budget for this.</p> <p>Sector Leads are responsible for liaising with PCT comms leads and arranging public meetings. Sector Leads will consider displays at commuter train stations. Sector leads may bid for financial assistance to the programme office</p> <p>Programme office is responsible for arranging pan-London events e.g. all PPI members, Royal Colleges, national charities, JOSOC.</p>	<p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Programme office</p>	<p>Programme office will provide Powerpoint presentations with optional slides depending on audience, banner panels to brand and consultation documents</p> <p>Ensure you have the necessary equipment and presentation tools e.g.</p> <ul style="list-style-type: none"> <li>• PA system</li> <li>• PowerPoint projector and screen</li> <li>• Top table if Q&amp;A session</li> <li>• Consultation documents and other products</li> <li>• Banners</li> <li>• Catering/refreshments</li> <li>• Meeting recording form (and someone to fill it in) - to be returned to prog office</li> <li>• Disabled access</li> <li>• Adaptions for visually impaired or deaf people (when necessary - request notification prior to meeting)</li> </ul> <p>Programme office will hold 5 training sessions for lead speakers to become comfortable with presentation</p> <p>Preference will be to put forward clinicians whenever possible to speak. Programme office will hold details of clinicians available and third party organisations who could bring local or personal flavour to the debate e.g. diabetes UK, Stroke Association</p> <p>Clinicians need good notice to be available – plan ahead with them. Do you need to arrange a pre-meet, especially if different speakers are speaking on different topics?</p> <p>PCTs to liaise with acute trusts to secure events with their staff and users</p> <p>Recommendation is to hold one or two meetings with key audiences prior to Christmas and the rest in January and February</p> <p>Public meetings: The proposal is to hold 'Coffee morning' style events in which the public are invited to come along anytime between 3pm and 8.30pm. A number of execs and clinicians would be available to talk individually to people. There could be a traditional 'talk' every hour or so. Likely to be advertised in local papers with editorial, posters etc. Fairly resource intensive so it is not expected to do morning and evening events.</p> <p>PCTs to inform Programme team of events so that details can be uploaded onto the consultation diary on website and used in pan-London advertisements.</p>
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<p><b>Traditionally excluded groups</b></p> <p>Sector Leads / PCTs are responsible for ensuring traditionally excluded groups have the opportunity and are encouraged to contribute to the consultation</p> <p>The programme office will contract an organisation to run focus groups with traditionally excluded groups to ensure they are represented in the final analysis</p>	<p>Sector Leads / PCTs</p>	<p>Programme office will ensure any consultation run by the external organisation is in the spirit of the consultation and dovetails with PCTs' own work</p>
<p><b>Syndicated material</b></p> <p>The programme office will be responsible for producing newsletters, articles, media releases, case studies, presentations etc</p> <p>Sector leads / PCTs will be responsible for localising syndicated material and issuing in a timely manner</p>	<p>Programme team</p> <p>Sector Leads / PCTs</p>	
<p><b>Website</b></p> <p>Everyone should promote the Healthcare for London website. It is impossible for the consultation document to carry every single piece of information, and therefore the website is an active tool for information provision, technical data, case studies, media releases etc.</p> <p>Sector Leads / PCTs are responsible for alerting the programme team of any local information that needs to be updated (especially when dates have been set for events) and for providing local information on their own sites</p>	<p>Programme office</p> <p>Sector Leads / PCTs</p>	

Audience	Communication objectives	Communication & engagement activities	Timescale/ progress	Who
<p><b>1. NHS STAFF, internal stakeholder groups</b> Includes:</p> <ul style="list-style-type: none"> <li>• Non Executive Directors</li> <li>• Ambulance Service</li> <li>• PEC members</li> <li>• GPs, GP practice managers, staff and LMCs</li> <li>• Dentists and LDC, Opticians and LOC</li> <li>• Community pharmacists and LPC</li> </ul> <p>Types of staff who by purely using traditional communication methods could be missed e.g:</p> <ul style="list-style-type: none"> <li>• Off-site staff</li> <li>• Learning Disabilities Service</li> <li>• Health Visitors</li> <li>• Staff without a permanent base</li> <li>• Staff without e-mail</li> <li>• Shared staff, Shift workers, part-time and Seconded staff</li> <li>• Absent/ill staff</li> <li>• Staff on maternity leave</li> <li>• Contracted staff</li> <li>• Night staff</li> <li>• Staff who have problems with jargon, literacy or language.</li> <li>• Unions</li> </ul>	<ul style="list-style-type: none"> <li>• To ensure awareness of the aims of the consultation – i.e. to improve and develop services and increase awareness of the main drivers for change.</li> <li>• To provide reassurance that any future proposals will be subject to consultation and scrutiny</li> <li>• The five key principles and models of care and delivery.</li> <li>• To listen to and incorporate staff views in shaping plans.</li> <li>• To enable staff to understand the impact of any proposals on their role.</li> <li>• To demonstrate that all levels of staff have been engaged including those staff who work in patients' homes and don't have access to a computer.</li> </ul>	<p><b>Planning</b> The responsibility for engaging with PCT staff, Acute trust staff for whom they are lead commissioners, primary care staff in their area and contractors, is the responsibility of each individual PCT.</p> <p>PCTs to ensure development of a plan (covering all levels of staff) to ensure that staff have the opportunity to become involved and have a clear mechanism for feeding their views into planning. Should include:</p> <ul style="list-style-type: none"> <li>• joint working between Comms and PPI leads supported by HR</li> <li>• work with staffside/staff and via JSCs – supported by HR</li> </ul> <p><b>Products</b> Common, customised presentation training to be devised and delivered to PCT CEs, clinical champions etc in each organisation creating a team of well prepared speakers/presenters who can be deployed at staff events/team briefings locally and in Trusts and MH Trusts</p> <p>Distribution of consultation information primarily by electronic methods, but see audience list opposite. Powerpoint presentation</p> <p><b>Practical action</b> Making consultation document and summary document available as part of staff involvement plan.</p> <p>Syndicated (produced by Programme team) items posted on Intranet and links to H4L website</p> <p>Staff briefings and monthly articles in newsletters (syndicated)</p> <p>Staff to be encouraged to visit the website which will contain an extensive Q &amp; A section that will help them discuss the proposed changes with patients and the public.</p> <p>Letter to individual members of staff – Programme Team will draft a generic letter for local Comms leads to utilise.</p>	<p>Plans complete by 7 Nov</p> <p>Training events in mid Nov</p> <p>Mid Nov</p> <p>30 Nov</p> <p>Nov onwards</p> <p>Oct onwards</p> <p>Dec onwards</p> <p>30 Nov</p>	<p>Sector Lead / PCT</p> <p>Programme team</p> <p>Programme team to produce, all to distribute (see list)</p> <p>All</p> <p>Sector Lead / PCTs</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT / Programme Team</p> <p>Sector Lead / PCT / Programme team</p>

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<p><b>2. PATIENTS / CARERS</b> Includes:</p> <ul style="list-style-type: none"> <li>• HIV +ve people</li> <li>• Mental health users</li> <li>• Disabled people</li> <li>• Drug users</li> <li>• Sensory impaired people</li> <li>• People with a long-term condition</li> <li>• Older frail people or people with dementia</li> <li>• Physically disabled people</li> <li>• PALS and Friends</li> </ul>	<ul style="list-style-type: none"> <li>• To ensure awareness of the overall aims of the consultation i.e. to improve and develop services and increase awareness of the main drivers for change</li> <li>• Consultation is not about specific service change, its about principles and models of care / delivery.</li> <li>• To provide reassurance that any future proposals will be subject to consultation and scrutiny</li> <li>• The five key principles.</li> <li>• To listen to and incorporate views on the options and plans.</li> <li>• To gain understanding of new ways of delivering health care outside large hospitals and demonstrate new approaches to care in community settings.</li> <li>• To be open and create understanding that there are no hidden agenda.</li> </ul>	<p><b>Planning</b> As for staff audience, PCTs to ensure development of a plan. Engage with PCT and Trust PPI Forums and Trust heads of comms – on consultation process and communications and engagement plans</p> <p><b>Products</b> Full consultation document and summary. Powerpoint presentations to be developed</p> <p><b>Practical action</b> Send consultation document and summary to all known (pre-engaged) local carer and patient interest groups with offer of speaker for an event. Need to engage trusts to target their users.</p> <p>Distribute summary document via health outlets e.g. Community clinics, outpatient waiting, MIUs, walk in centres, blood test units, A&amp;E, GP and dental surgeries, community pharmacies, sexual health clinics.</p> <p>Send summary to all Expert Patient Programme graduates and current course attenders, PALs and Friends groups.</p> <p>Arrange for consultation proposals to be considered at all regular/planned service planning/redesign group meetings where service users participate.</p> <p>Place feature articles during consultation period in all existing patient/public newsletters.</p> <p>Publicise and promote consultation to patients and carers e.g. repeat prescriptions? Utilise established groups for Long Term conditions and include Mental Health.</p> <p>Provide link from PCT websites to the consultation website.</p> <p>Media activity as per section below</p>	<p>Plans complete by end Oct</p> <p>30 Nov</p> <p>1 – 10 Dec</p> <p>1 – 10 Dec</p> <p>1 – 10 Dec</p> <p>1 Dec onwards</p> <p>1 Dec onwards</p> <p>1 Dec onwards</p> <p>30 Nov</p>	<p>Sector Lead / PCT</p> <p>Programme team</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p>

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<p><b>3. HEALTH PARTNERS</b> Includes:</p> <ul style="list-style-type: none"> <li>• HEIs, Deanery</li> <li>• Private providers</li> <li>• Trusts and PCTs bordering London</li> <li>• Local councils and councils bordering London</li> <li>• Trusts, SHAs outside London</li> <li>• Voluntary and charitable sector</li> <li>• Previously engaged stakeholders and public</li> <li>• Department of Health</li> <li>• Secretary of State</li> <li>• London Ambulance Service</li> <li>• Local partnership groups/boards</li> <li>• Volunteers</li> <li>• NHS Retirement Fellowship</li> </ul>	<ul style="list-style-type: none"> <li>• As 2 above, plus:</li> <li>• To help us encourage informed debate</li> </ul>	<p><b>Planning</b> As for staff audience, PCTs to ensure development of a plan. Engage with PCT and Trust PPI Forums and Trust heads of comms – on consultation process and communications and engagement plans</p> <p><b>Product</b> Full consultation document and summary. Powerpoint presentations to be developed</p> <p>Consultation newsletter</p> <p><b>Practical action</b> Encourage all local organisations to adopt link from their website home page to consultation website</p> <p>Encourage all local partner organisations to include information on consultation in their publications/distribution systems</p> <p>Media activity as per section below</p>	<p>Plans complete by end Oct</p> <p>30 Oct</p> <p>Mid Oct onwards</p> <p>Ongoing</p> <p>Ongoing</p>	<p>Sector Lead / PCT</p> <p>Programme office</p> <p>Programme office</p> <p>All</p> <p>All</p>

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<p><b>4. COMMUNITY</b></p> <ul style="list-style-type: none"> <li>Public</li> <li>Commuters</li> </ul> <p>Includes community groups:</p> <ul style="list-style-type: none"> <li>Schools</li> <li>Local churches/faith communities and leaders</li> <li>Residents Associations</li> <li>Community groups</li> <li>PPI Forums</li> <li>Play groups / mother and toddler groups</li> <li>Sports and social clubs</li> <li>Youth groups</li> </ul> <p>Business representatives:</p> <ul style="list-style-type: none"> <li>LDA, CBI</li> <li>Trade associations</li> <li>Large employees, Fire service, Met Police etc</li> </ul> <p>Traditionally excluded gps e.g:</p> <ul style="list-style-type: none"> <li>Alcohol users, BME groups, homeless people, lesbian and gay people, offenders, older people, people on low incomes, prisoners, refugees and asylum seekers, residents of care homes, travellers, women</li> <li>Unemployed people, housing association tenants</li> </ul>	<ul style="list-style-type: none"> <li>As 2 above plus:</li> <li>To build trust in the NHS as caretakers of the nation's health</li> <li>For the community to better understand how the NHS works and the range of services on offer</li> <li>For the Healthcare for London team to better understand the needs of the population</li> </ul>	<p><b>Planning</b> As for staff audience, PCTs to ensure development of a plan. Engage with PCT and Trust PPI Forums and Trust heads of comms – on consultation process and communications and engagement plans</p> <p><b>Product</b> Arrange to hold open public meetings at “sector” level</p> <p>Purchase paid advertising in local press and consider other local media from launch through consultation period to publicise consultation, timescales, meetings, how to access information etc</p> <p>PCTs to research minority language and BSL and Braille translation requirements and Easy Read Versions documents to be commissioned by Programme Team</p> <p><b>Practical</b> Place consultation document and summaries in all local libraries.</p> <p>Ensure prominent link from home pages of public websites to consultation website. Facilitate link from council/community website home or health pages to consultation website and local NHS sites</p> <p>Target local groups with document and summaries and offer of a speaker for a meeting in consultation period.</p> <p>Consider interpretation services for meetings (minority languages and BSL) - each PCT to access interpreters for local use and liaise with Local Authority on use of in-house resources wherever possible</p> <p>Media activity as per section below</p>	<p>Plans complete by end Oct</p> <p>Jan – Mar 08</p> <p>Dec 07 – Feb 08</p> <p>End Oct 1 Dec</p> <p>1 – 10 Dec</p> <p>1 – 10 Dec</p> <p>1 – 10 Dec for document Jan / Feb for meetings</p> <p>Dec onwards</p>	<p>Sector Lead / PCT</p> <p>Sector Lead</p> <p>Programme office and Sector Leads</p> <p>Sector Lead / PCT Programme office</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p> <p>Sector Lead / PCT</p>



Audience	Communication Objectives	Communication Activities	Timescale/ progress	Who
<p><b>5. INFLUENCERS</b></p> <ul style="list-style-type: none"> <li>• MPs, MEPs</li> <li>• Media</li> <li>• Clinical Advisory Group Chairs</li> <li>• Campaign Groups</li> <li>• Mayor, GLA</li> <li>• London Assembly</li> </ul>	<ul style="list-style-type: none"> <li>• As 2 above plus:</li> </ul>	<p><b>Planning</b> As for staff audience, PCTs to ensure development of a plan.</p> <p><b>Product</b> Print copies of consultation documentation, but face to face meetings key for this audience</p> <p>Pan-London briefing and media release</p> <p>Syndicated press release with opportunity to tailor for local media (to include local issues, quotes from local clinicians etc)</p> <p>Nominate local spokespeople to receive press and radio media training and presentation training.</p> <p>Develop positive case studies</p> <p>Consultation newsletter</p> <p><b>Practical</b> Advance copies of consultation documents, summaries and a briefing to MPs' offices together with information on the planned local comms. Liaise with MPs' offices and establish meetings - individual - group</p> <p>Write to, and meet, the Leader of the local Council</p> <p>Provide media with three or four press notices and opportunities for interviews with clinicians – potentially 1 notice prior to consultation and 1 per month during consultation and 1 following closure.</p> <ul style="list-style-type: none"> <li>- National / London</li> <li>- local</li> <li>- specialist / ethnic</li> </ul> <p>Bid for feature space in council newspapers</p>	<p>End- Oct</p> <p>Oct onwards</p> <p>Oct onwards</p> <p>Nov onwards</p> <p>1 Nov</p> <p>Ongoing</p> <p>Mid Oct onwards</p> <p>25 Nov</p> <p>Ongoing</p> <p>Nov</p> <p>Nov onwards Nov onwards Nov onwards</p> <p>Nov onwards</p>	<p>Sector Lead / PCT</p> <p>All</p> <p>Programme office</p> <p>Programme office to provide template Sector Lead / PCT Sector Lead / PCT</p> <p>All</p> <p>Programme office</p> <p>Programme office</p> <p>Sector Lead / PCT Programme office</p> <p>Sector Lead / PCT</p> <p>Programme office Sector Lead / PCT Programme office</p> <p>Sector Lead / PCT</p>

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<p><b>6. REPRESENTATIVES</b></p> <ul style="list-style-type: none"> <li>• PPIFs</li> <li>• Unions</li> <li>• OSCs</li> <li>• Professional bodies</li> <li>• Patient and Public Advisory Group</li> </ul>	<ul style="list-style-type: none"> <li>• As 2 above</li> <li>• Provide evidence that the views of stakeholders are being sought and are being thoroughly considered by the Joint Committee of PCTs.</li> </ul>	<p><b>Planning</b> As for staff audience, PCTs to ensure development of a plan</p> <p><b>Product</b> Establish Patient and Public Advisory Group (PPAG)</p> <p>Consultation documents and Powerpoints</p> <p>Face to Face meetings</p> <ul style="list-style-type: none"> <li>- Pan London</li> <li>- Local</li> </ul> <p>Consultation newsletter</p> <p><b>Practical action</b> The PPAG will be asked to review the strategy and consultation material and monitor and advise the consultation process</p> <p>All PPIF members invited to meeting PCTs expected to meet their local PPIFs</p> <p>Joint OSC meeting to be arranged PCTs expected to present to their local OSCs</p>	<p>Plan by end Oct</p> <p>Mid Oct</p> <p>End Nov</p> <p>Nov onwards Nov onwards</p> <p>Mid Oct onwards</p>	<p>PCTs</p> <p>Programme office</p> <p>Programme office</p> <p>Programme office Sector Lead / PCT</p> <p>Programme office</p> <p>Programme office Sector Lead / PCT</p> <p>Programme office Sector Lead / PCT</p>