

Communications and Involvement Plan 2017-2020

Version 2

Document Reference No.	CORP012
Version No.	2.0
Issue Date	November 2017
Review Date	November 2020
Document Author	Head of Comms
Document Owner	Head of Comms
Accountable Executive	Director of Workforce and OD
Approved by	Director of Workforce and OD
Approval Date	20 November 2017
Document Type	Written Control Document
Scope	All Employees
Restrictions	None

Contents

Section 1	Introduction Section
Section 2	Strategic Context
Section 3	Current Position
Section 4	Strategic Vision
Section 5	Strategic Aims
Section 6	Tasks and Actions
Section 7	Standards and KPIs

Appendices

Appendix 1	Standards for Communications and KPIs
------------	---------------------------------------

Section 1.0 - Introduction

The Communication and Involvement Plan sets out the approach to be taken by The Mid Yorkshire Hospitals NHS Trust to develop communications and involvement with staff and stakeholders. It is designed to support the Trust's ambitions in terms of Striving for Excellence and by putting in place the mechanisms to equip the organisation to deliver a high quality patient experience.

Specifically, the plan must address the long-standing challenges that the Trust faces in terms of staff engagement and external reputation which are identified as key risks to the Trust delivering its wider objectives and are included in the ambitions set out in its new strategic plan.

The strategy and associated action plan covers:

- Communication and engagement with patients
- Communication and engagement with staff
- Communication and engagement with external stakeholders, such as community and interest groups, politicians and the media.
- Involvement of staff, patients, commissioners and other stakeholders in the planning and development of services

In the context of this plan the term communication refers to the exchange of information between groups of people. Communication should flow in multiple directions and is not specifically a 'top down' process.

Involvement (sometimes referred to as participation or engagement) takes communication to a higher level and is about proactively creating opportunities to influence Trust decision-making for people who use services and our staff, as experts by experience, to shape services and participate in processes that lead to more effective decision making.

The plan does not specifically cover arrangements for involvement of people in planning their own care or for routine gathering of - and responding to - retrospective patient experience data, such as the national patient surveys and Friend and Family Test. Although these processes are fundamental to creating a culture where people are empowered, which will facilitate effective engagement at a more strategic level. These processes fall under the leadership of the Director of Nursing and Quality and are managed within the nursing directorate.

Effective engagement takes place on a number of levels and the extent to which people are committed to a concept or change will be determined by the extent to which they have been engaged:

- Giving information about what is planned
- Seeking views and acting on feedback
- Deciding together on a course of action and working in partnership to bring about change
- Co-production - supporting people to develop and implement their own ideas

Section 2.0 - Strategic Context

Section 242 of the Health and Social Care Act places a legal obligation on NHS organisations to involve and engage with the public whenever changes to services are being considered. The legislation states:

“Each relevant English body must make arrangements, as respects health services for which it is responsible, which secure that users of those services, whether directly or through representatives, are involved (whether by being consulted or provided with information, or in other ways) in--

- (a) The planning of the provision of those services,
- (b) The development and consideration of proposals for changes in the way those services are provided, and
- (c) Decisions to be made by that body affecting the operation of those services.”

The legislation focuses on the requirement to make arrangements for involvement and this document sets out the infrastructure to support effective communications and engagement as well as the standards to be achieved through those mechanisms.

Involvement is required to be proportionate to the extent and nature of the change. Where substantial changes are proposed, there is a requirement to demonstrate that stakeholders have been involved in developing the proposals and for formal consultation.

NHS Trusts are publicly funded organisations and have a duty of accountability to the public. This duty of transparency is enshrined in the NHS Constitution which sets out a commitment to enabling people to make choices about their healthcare and will be involved in all decisions about their individual care. The NHS Constitution also sets out the requirement for the NHS to work in partnership with other organisations. Communication is vital to enabling these commitments and aspirations to be fulfilled.

The onus on NHS organisations to engage and communicate with communities is also enshrined in the NHS constitution, which requires organisations to respond to the diversity of the communities served in their planning processes. Mechanisms for public accountability engagement are also core to compliance standards, including those set out in the Freedom of Information Act and by the NHSLA and CQC.

The current Government has reaffirmed its commitment to the principle of openness and transparency with the phrase 'Nothing about you without you'. The Trust's communications and involvement strategy must be designed to support this principle. In addition to the requirements placed on NHS organisations, there is extensive evidence that services that are developed with full involvement of the people who know them best - those who use them and work in them - are more patient centred and efficient.

A study published by the Kings Fund in 2012 found compelling evidence that organisations with engaged staff deliver better patient experience, fewer errors, lower infection and mortality rates, stronger financial management, higher staff morale and motivation and less absenteeism and stress and that patient engagement can deliver improved care and outcomes. The study also found specific evidence in the NHS and other systems that medical engagement leads to improved performance. This reflects evidence in the private and commercial sector where engagement of staff and customers in product and service design is core and where staff are empowered to make decisions and resolve problems within their own sphere of responsibility to enhance the customer experience.

Effective communication ensures the public understand the services that are available, how and where to access them and are able to make informed choices. Communication with staff is essential to ensuring staff understand their contribution to the success of the organisation and to maintaining morale. Well managed communications are also powerful in protecting the organisation's reputation.

Section 3 - Current Position (Autumn 2017, document covers the next three years)

The Trust faces a number of specific challenges in relation to communications and involvement.

- Complexity

The Trust delivers services to a diverse population of more than 0.5 million people and employs 8,000 staff who occupy diverse roles and across a large number of sites. The organisation has multiple stakeholders, such as NHS departments, commissioners, GPs, service providers, local authorities, politicians, interest groups, educational institutions and suppliers whose level of interest will vary according to the issue and who have different information requirements and different ways of accessing information.

- Reputation

Although it is improving, the Trust's reputation is historically not good – given its history of failure to achieve financial and performance targets over a number of years. This performance has been reflected in negative media attention, although the local media do also showcase some of the positive work taking place in the Trust. There is a

continued risk to reputation as a result of members of the public who have not had a

positive experience approaching the media. There has also been coverage of non-compliance with national standards, which is compounded by incidents of staff 'whistleblowing' rather than using other, internal channels to raise and resolve concerns.

Failure to address these underlying challenges will lead to a continued risk of reputational damage to the Trust. Hence, the Trust will need to develop complementary strategies for ensuring services are of a consistently high standard, that there are transparent and accessible processes in place for responding when things go wrong and that staff are assured that action will be taken if they raise concerns. These strategies include the Trust's complaints procedure, the work and visibility of the PALS team, Duty of Candour arrangements, and Serious Incident (SI) reviews.

- Stakeholder relations

The Trust has been successful in developing a proactive approach to managing relationships with key stakeholders, including commissioners and public representatives, such as MPs, local authority members and watchdog bodies such as Healthwatch, with some positive effect. Given the situation with the Acute Hospital Reconfiguration in 2017 – and its impact on Dewsbury Hospital in particular – these relationships need to continue to improve to one where there is mutual trust. Consideration also to be given to the strategic context of the Trust and the work taking place during the timescale of this plan with the West Yorkshire Sustainability and Transformation Partnership (and the place-based plan it needs to deliver), the Wakefield Multi-specialty Community Provider (MCP), and the West Yorkshire Association of Acute Trusts (WYAAT), amongst others.

- Staff engagement

Evidence from staff surveys and from specific pieces of work to assess staff perception demonstrate, whilst the Trust has had some success in developing corporate communications, there is still more work to do to address staff confidence in the organisation and to enhance direct communications between managers and staff. Historically the Trust has a long history of difficult employee relations, although relationships with the Trades Unions are showing some recent improvement. Recent Staff Friends and Family Test (FFT) results are showing signs of improvement and that the Trust is making efforts to embed its refreshed values and new behaviours.

- Corporate identity

In spite of being established for more than a decade, the Trust has struggled to develop a coherent corporate identity or common culture. Staff and the public tend to identify with the site or service that they access rather than with the organisation and there is limited sense of the added value or 'offer' of Mid Yorkshire as a whole. Much work has taken place to start to rebrand the organisation and its services, taking into account the new guidance from NHS England which was released in 2017. In 2016 the Trust's values were refreshed and a new set of behaviours agreed – these need focus to fully embed them in everything staff do across the Trust: from initial recruitment to appraisals and

how staff (whatever their role) respond to patients and visitors.

Section 4 - Strategic vision

The Trust's mission statement is:

- To provide high quality healthcare services at home, in the community and in our hospitals, to improve the quality of people's lives.

The vision statement is:

- We strive to achieve excellent patient experience each and every time.

Section 5 - Strategic Aims

- Keep our patients safe at all times
- Achieve excellent patient experience and deliver expected outcomes
- Be an excellent employer
- Be a well-led and governed Trust with sound finances
- Have effective partnerships that support better patient care
- Provide excellent research, development and innovation opportunities

Section 6 Action Plan

In order to ensure the Trust meets its constitutional requirements and the principles set out in the document the following actions need to be undertaken.

Action	Target audience	Lead	Timescale – to complete / review date
Evaluation of staff communications mechanisms	Staff	Head of Communications	December 2017
Embed Team Brief cascade	Staff	Head of Communications	July 2018
Conduct an audit of current newsletters and publications (internal and external)	All stakeholders	Head of Communications	July 2018

Map current arrangements for working with other organisations' communications teams on shared agenda (eg: WYAAT, Connecting Care)	Staff and stakeholders	Head of Communications	December 2017
Infrastructure - Communications			
Look at approaches to refresh the Trust intranet e.g. upgrade to Sharepoint 2016 and recommend one of these	Staff	Head of Communications / AD for IT	December 2018
Trust website – content refresh	Stakeholders / patients / general public	Head of Communications	December 2018
Develop mechanisms for assessing communication skills in recruitment as part of behaviours framework (e.g. psychometric profiling and competency-based interviewing)	Staff and stakeholders	HR Director	December 2018
Continue to develop a more open culture with news media organisations through programme of regular face to face briefings, opportunities to spend time in the Trust	Public	Chief Executive	Monthly
Review use of social media to capture new public audiences	Public	Head of Communications	December 2018
Establish mechanism for annual audit of staff communications	Staff	Head of Communications	July 2018

Develop a range of corporate communications and patient information materials which can be accessed via multiple sources in a range of formats	Stakeholders / patients	Head of Communications	June 2018 and on-going maintenance
Undertake a programme of work to re-brand the organisation, including standards of behaviour, communication and visual identity	Staff and stakeholders	Head of Communications	Reviewed as and when new materials are produced
Infrastructure - involvement			
Review arrangements for proactive engagement with OSC, Healthwatch and other key stakeholder groups	Stakeholders	Head of Communications	July 2018
Develop partnership arrangements with staff side to support more effective, proactive engagement	Staff	Director of Workforce and OD	December 2017
Extend participation already undertaken by volunteers and existing user groups	Stakeholders	Volunteers lead / Director of Nursing and Quality	December 2018
Bi-monthly open staff meetings	Staff	Head of Communications	Launch Autumn 2017 and run monthly
Implement directorate level action plans to respond to staff survey results, CQC reports and FFT.	Staff	All directors/line managers	Ongoing, reviews through governance arrangements

Maintain a high profile for the Trust's arrangements for raising concerns, including Freedom to Speak Up guardian and champions, feedback mechanisms and action taken	Staff	Head of Communications / Freedom to Speak Up Guardian	Review quarterly
---	-------	---	------------------

Section 7.0 - Standards & KPIs

Standard	How will it be measured	Accountability
All proposals for major service change will include a detailed communications and engagement plan which is synchronised to key milestones and has clear accountabilities	Communications and engagement plan is developed as part of planning and is implemented and is checked at sign off by CEG	Divisional Clinical Directors/ Head of Communications
Communications of major change will be managed to ensure there are plans for staff to be communicated with before public announcements wherever practically possible	Check at CEG sign off of plans. Through the liP process and working group	Divisional Clinical Directors/ Head of Communications
Service users will be involved in planning processes for all major service developments	Check at CEG sign off of plans	Divisional Clinical Directors/ Head of Communications
Service users and relevant staff will be involved in all major estate redesign projects`	Check at CEG sign off of plans	Divisional Clinical Directors/ Head of Communications /Director of
All staff to have access to monthly face to face Team Briefing	Annual audit of staff communications	Executive Directors / Head of Communications / all line managers

Communications skills to be incorporated into core training and appraisal for management roles	Communication skills training is available as in week long training programme for new managers.	Head of Communications /OD Associate Director
Guidelines for use of email and all user emails will be designed to minimise communication overload	Routine monitoring of compliance with standard.	Head of Communications / Asst Director IM&T
Communication skills to be included in job descriptions for all roles with management responsibility	Audit of job descriptions	Head of Communications /OD Associate Director
Service user representatives to be involved in appropriate staff training	Evidence of involvement	Head of Communications /OD Associate Director