

(INSERT TITLE)
COMMUNICATION AND ENGAGEMENT/CONSULTATION
(DELETE AS REQUIRED) PLAN

Version:	
Author:	
Date:	

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1. Background

2. Aims and objectives of the consultation

The aims of this consultation exercise are to:

3. Timescales

4. Leadership for Stakeholder Communications and Engagement

	What?	Lead Officer
Patients and Public	Documents to be disseminated	
	Public Events	
	Health Forum	
	CCG member notification	
	PPG Network	
	Press Release and website	
	Social Media	
Third Sector Organisations	Arrange to attend Third Sector orgs to discuss	
	Healthwatch Briefing	
	Promotion to Third Sector Organisations	
Primary Care	Information included in GP Commissioning bulletin	
	Commissioning PLT	
Partners and Providers	Stakeholder briefing to CEO's	
	Information sent via Comms leads	
MP's, Councillors and Scrutiny	Briefing Letter	

5. Range / reach for stakeholder communications and engagement

- Patient and public

Summary documents, including questionnaire and Frequently Asked Questions, will be developed to inform patients and the public of the engagement. This will be developed in conjunction with CCG Lay Readers.

The resources will be communicated and circulated through a variety of communication channels. This will be a large-scale communications campaign run over 12 weeks to ensure the public are made aware of the engagement. This will include features in the local press, regular press releases sent out to local media organisations, and poster drops in GP Practices and community facilities.

Information will be sent to the CCG's 'membership' and provider and partners members and networks.

Information will be taken to other public events that are taking place during the engagement.

PPGs will be asked to support the engagement within their Practice.

A public event will be facilitated to seek the views of patients and the public

- **Social media**

The engagement will be promoted extensively via social media channels (Twitter / Facebook / Instagram). Activity can be monitored and more posts can be added if necessary. A separate social media plan will be developed to enable the CCGs, partners and providers to promote consistent messages.

- **Third sector engagement and involvement**

NHS Warrington CCG has signed up to adhere to the shared principles of the Local Compact, in relation to engagement and engagement this is *"understand that by consulting people in third sector organisations, involving them in decisions and helping them take part in the planning and delivery of services, long-term relationships and partnerships between sectors are built"*

Third sector organisations will be informed of the engagement, and asked to publicise on their websites, through social media and their membership, clients, service users etc.

Local Healthwatches, recognised as the patient consumer champion, will be informed of the engagement as a key stakeholder and ask to provide a response and support the engagement.

Focused engagement will take place with groups that have been identified through the Equality Impact Assessment.

Warrington Voluntary Action will be asked to promote the consultation and advise on any specific Third Sector Organisation to communicate and work with.

Warrington's Third Sector Network Hub, as the Strategic Forum for the third sector will be asked to support and promote the consultation.

- **Clinical engagement**

GP member practices (GPs, Practice Nurses and Practice Managers) will be informed of the consultation through the Clinical Commissioning Bulletin, GP Federation Meetings, PLT sessions (both GPs and Practice Nurses) and a specific GP Briefing.

CCG Clinical Leads will be involved and informed.

Practices will be issued with communication materials to promote to patients.

- **Internal CCG**

The engagement will be presented at relevant CCG Committees (Quality Committees, Finance and Performance).

CCG Staff will be informed of the consultation via the staff brief and bulletin.

- **Provider level**

Service Providers will be briefed and asked to support the consultation and will be issued with communications materials. Providers will also be asked to display and distribute the key messages through their own communications channels.

Specific stakeholder briefings will be produced to gain responses from providers.

- **Public Health / Local Authority**

Public Health and Local Authority communications colleagues will be briefed regarding the consultation and asked that they publicise it through their existing communications channels.

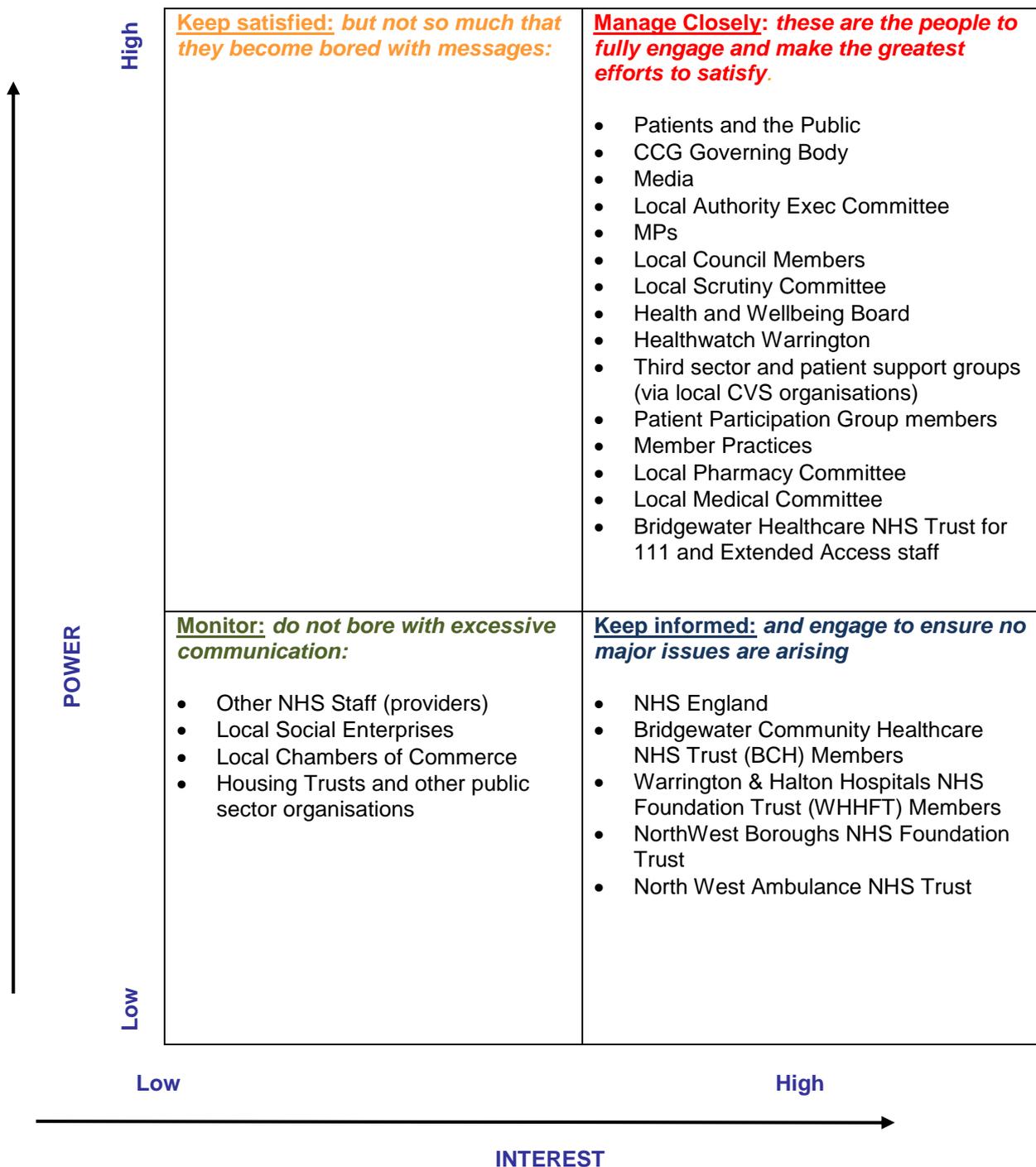
They will be provided with materials to distribute in various facilities and through their neighbourhoods teams.

We will work with Local Authority colleagues to ensure the consultation is effectively communicated via children services and schools.

- **Political engagement**

A briefing letter will be produced to inform all Councillors, Scrutiny Committees and MPs on the consultation.

6. Stakeholder matrix



Red – High Power, High Interest – fully engage and satisfy
Orange – High Power, Mod Interest – inform, seek approval and satisfy
Blue – Mod Power, High Interest – inform and engage
Green – Low Power, Low Interest – monitor and inform

Strengths	Weaknesses
<ul style="list-style-type: none"> • Transparent and open process • Skilled communication and engagement resource, which is flexible and has the ability to scale up when required. • Effective and robust consultation process • Extensive engagement has previously taken place • Ensures effective and open relationship with local people • National direction 	<ul style="list-style-type: none"> • Continuously changing environment • Identified audience? Do the messages need to be segmented / targeted
Opportunities	Threats
<ul style="list-style-type: none"> • Continue to further enhance clinical engagement between provider and commissioner organisations. • Enhance robust working arrangements with partners and providers • Instil confidence in public and patients 	<ul style="list-style-type: none"> • What if the outcomes aren't what is expected • Loss of public and clinical engagement and confidence. • Lack of support for implementation by partner

Adherence to the Gunning Principles

When undertaking any public consultation in the UK the Gunning Principles must be applied. This has been confirmed by the Court of Appeal in 2001 (Coughlan case).

When planning the Self Care (phase 2) consultation the four principles will be applied as evidenced below.

1. When proposals are still at a formative stage - *Public bodies need to have an open mind during a consultation and not already made the decision, but have some ideas about the proposals.*

The consultation questions make clear the options to agree or disagree with the proposals. At presentations at public meetings and Third Sector Organisations it will be made clear this is a consultation and if the majority of the public did not agree it would not happen.

2. Sufficient reasons for proposals to permit 'intelligent consideration' - *People involved in the consultation need to have enough information to make an intelligent choice and input in the process. Equality Assessments should take place at the beginning of the consultation and published alongside the document.*

The consultation documents makes the reasons for the proposals clear, as below

- There are a number of medicines currently prescribed in Warrington that patients and the public can get over the counter
- The medicines on the list are usually prescribed for minor health problems only and where this is not the case they will continue to be prescribed.
- NHS Warrington CCG spends approximately £1million per year on the medicines that are available to buy over the counter, which are often only required short term for minor ailments. This money can be better spent on reducing health inequalities across the town for the benefit of the wider population.

A Frequently Asked Question sheet has been produced for the public to further understand the implications of the proposals.

The consultation document makes clear the impact of the proposals stating "All residents of Warrington have the potential to be affected as the proposal is that the medications will not be prescribed, unless in exceptional circumstances or if it is **NOT** a minor ailment. However the majority of the medications or alternatives can be purchased over the counter for less than the cost of a prescription."

An Equality Impact Assessment has been undertaken to determine where specific engagement should be undertaken.

3. Adequate time for consideration and response - *Timing is crucial – is it an appropriate time and environment, was enough time given for people to make an informed decision and then provide that feedback, and is there enough time to analyse those results and make the final decision?*

The consultation is being undertaken over 12 weeks. The engagement and communications methods will be wide and varied, which included press, social media, emails, printed documents in various places and targeted engagement at groups and public events. As well as general engagement and communications focused work will be undertaken to target those people who are currently exempted, as these will be most impacted.

This will include:

- Attending public events
- Targeted engagement at Third Sector Organisations who represent the wider community – Warrington Disability Forum, Long Term Conditions Support Group, Speak Up (adults with learning disabilities), Priestley College, Older Persons Engagement Group

Targeted communications at CAB, charity shops, job clubs, schools news, community centres, libraries, young Healthwatch, Children's Centres, Health and Wellbeing Mentors

After the consultation there will be one month to produce the final report, which will include the analysis of the results and to mitigate any risks identified.

4. Must be conscientiously taken into account - *Think about how to prove decision-makers have taken consultation responses into account.*

The feedback from the consultation will be reported back to the Governing Body – with the themes from the engagement and will include any mitigating actions. If the proposals are agreed a comprehensive communications plan will be developed after the consultation to inform the community about the changes and self - care messages will be developed.

7. Consultation process

Before decision to undertake a formal consultation		
Who is the CCG staff or clinical lead?		
What are we consulting on?		
What do we want to achieve from the consultation?		
Has a EIA Screening been undertaken?		
Has a full EIA been undertaken?		
Has the consultation been added to the risk register		
Does a formal consultation need to be undertaken?		
Has any pre engagement taken place or is any planned or needed?		
Agreed timescales for engagement		
Agree costings and resources needed		
To commence consultation	Actions/updates	Lead and Timescales
Communication and engagement plan		
Summary document with survey		
Agreed survey		
From the EIA decide what groups to target		
Agree commitment of CCG Lead to attend meetings,		

respond to finalise documents etc		
Agree CCG spokesperson for media		
To send/ discuss at Comms/ Engagement network to inform of plans		
To send plan to HW and WVA to agree their involvement		
Briefings to be produced		
Press release		
Website content		
Social Media pack		
FAQ if appropriate		
Inform CCG PALS and any other relevant PALS		
Audit trail of activity to be drafted		
Agree who will finalise documents		
Agreed who completes report after engagement		
Feedback log to be kept updated		
Catch up meetings to be arranged as appropriate		
Check on survey results and demographics to determine if more focused engagement is needed		
Update FAQ from feedback received		
After consultation		

Report produced with engagement and communications audit trail		
Complete Equality Impact Assessment		
Complete Gunning Principles		
Take to CCG boards for decision	Primary Care Quality Committee agreed for commencement of the consultation 07.17	
Formal letters to Healthwatch, stakeholders and MPs on the decision and next steps	<ul style="list-style-type: none"> • Healthwatch • Providers • Warrington Borough Council • Third Sector Hub • Scrutiny • MPs • Cllrs • Care Home • Primary Care • CCG PALS • LPC • LMC 	
Feedback to the third sector and wider community	Patient briefings	
To agree on the evaluation of the proposal if agreed		

Appendix A

Audit of engagement activity – to be used in the final outcomes report

Stakeholder Group	CCG Action		Dates
Patients and Public			
Website			
Social Media			
Consultation Document	To be disseminated electronically <ul style="list-style-type: none"> • Providers to send to membership and on website • All GP Practices • School News for parents and teachers • Chamber of Commerce • Warrington Collegiate • Neighbourhoods – Community Centres and community newsletters • Priestly College • Third Sector newsletter and e-news • Children’s Centres • Residents Group • Chester University Warrington Campus • Nurseries 	To be sent to and displayed <p>All GP Practices</p> <ul style="list-style-type: none"> • The Gateway – for public and to all tenant organisations • Warrington Disability Partnership Centre for Independent Living • Healthwatch Warrington (including Men’s HW and Young HW) • CAB • Pharmacies • Children’s Centres • WBC Job Clubs • WBC Contact Centre • Health and Wellbeing Mentors • Wellbeing Hub • LiveWire Sites and Libraries • Lifetime 	

		<ul style="list-style-type: none"> • Providers (for waiting rooms, outpatients etc) • Community centres/ venues to target new parents and young mums (breastfeeding and mums and tots groups) • Care Homes 	
Health Forum To be discussed and disseminated to CCG Patient and Service User Forums.			
CCG 'Membership' Scheme The CCG have developed a membership scheme with approx. 200 individual and Third Sector representatives on the mailing list.			
PPGs Individual PPGs and PPG Networks			
CCG Public Event			
External Public meetings/ events Health and Wellbeing Event Public Health are organising a event to target the community.			

Healthwatch Warrington AGM		
Speak Up Living Well event		
Healthwatch Warrington public event for medicines management		
Media		
Warrington Voluntary Action		
Healthwatch Warrington		
Third Sector Network Hub		
Equality Groups and vulnerable groups (to focus on protected characteristics from the EIA)		
Warrington Disability Forum (Stay connected)		
Speak Up for learning disabilities		
Speak Up for people with mental health problems		
WIRED Carers		
Warrington Parents and Carers		
West Warrington OPEG		

LifeTime		
WBC Job Club		
Third Sector Network Hub		
Primary Care Engagement		
GPs		
Federations Meeting Healthier Warrington Phoenix Teaching Warrington Alliance		
Commissioning PLT		
Other Clinical Engagement		
Pharmacists		
Bridgewater Community Healthcare NHS Foundation Trust		
Internal Engagement		
CCG Staff		
Primary Care Quality Committee		
Primary Care Development Group		
Stakeholder Group		
Health and Wellbeing Boards		
Public Health		
Bridgewater Community Healthcare NHS Foundation Trust		

Warrington and Halton Hospitals NHS Foundation Trust		
North West Boroughs		
St Helens and Knowsley Hospitals NHS Trust		
Warrington Borough Council/ Public Health		
Partnership Boards <ul style="list-style-type: none"> • Learning Disability and Austim • Carers • Hate Crime • Mental Health • CYP 		
Schools		
Care Homes		
Local Medical Committee		
Local Pharmaceutical Committee		
Halton CCG and St Helens CCG		
LiveWire		
Political Engagement		
Overview and Scrutiny		
MPs		
Councillors		

Appendix B: Communication development

- A.** Aim
- B.** Objectives
- C.** Key messages
- D.** Target audiences
- E.** Risks
- F.** Tools / tactics - 'communications mix'
- G.** Internal communications

Appendix C

Communication toolkit

1. Frequently asked questions
2. Stakeholder briefings
3. Social Media
4. Press release
5. Website text
6. Internal staff briefing