

Title of Meeting: Date of Meeting: Paper Title:		NYCCG Governing Body 22 December 2020 Communications and Engagement Update			Agenda Item: 4.3 Session (Tick) Public						
								Private			
								Development Session			
					Responsible	e Gove	rning Body	Member Lead	Report Auth	or and	Job Title
					Julie Warren				Communicati	ons and	I Engagement Tear
	•	e Services, (Governance &								
Performance) 										
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Monitoring

This report is part of the monitoring process associated with delivery of core communications and engagement functions for NYCCG. Regular reporting is anticipated by the Communications and Engagement Strategy approved by the Governing Body on 25 June 2020.

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Any statutory / regulatory / legal	 Health and Social Care Act 2012 				
/ NHS Constitution implications	Equality Act 2010				
	NHS Constitution				
	 Patient and public participation in commissioning health and care: statutory guidance for CCGs and NHS England dated April 2017. 				
Management of Conflicts of	No conflicts of interest have been identified prior to the				
Interest	meeting.				
Communication / Public &	Communications and engagement are the core subject of				
Patient Engagement	this paper.				
Financial / resource implications	Delivery of work anticipated by these documents will be included in the regular budget process.				
Outcome of Impact	No impact assessments completed. These documents are				
Assessments completed	designed to deliver core duties under the NHS				
	constitutions, legislation and related guidance.				

Communications and Engagement Update – December 2020 (activities since October 2020)

Covid-19

- We are leading the communications for the vaccine programme within the North Yorkshire and York subsystem. This is being done within the Humber Coast and Vale integrated care system (HCV ICS) as part of the national programme.
- Communications and engagement remain central to the daily incident response discussions with both reactive and proactive activities as needed.

Communications and engagement strands

Strategic

• We have agreed to activate a 'Communications and Engagement Group' as a subgroup of the Quality and Clinical Governance Committee. The group will meet bi-monthly and become part of the CCG assurance process, as well as giving a strategic steer on priorities and delivery, including the annual plan anticipated by the Communications and Engagement Strategy(C&E strategy).

The first meeting will take place in January 2021 and the membership will include:

- Kate Kennady, Lay Member for Patient and Public Engagement
- Julie Warren, Director of Corporate Services, Governance & Performance
- Sarah Hay, Clinical Lead
- Chris Ives, Clinical Lead
- a representative from HealthWatch North Yorkshire
- a representative from the Staff Engagement Group
- members of the communication and engagement team
- The five year C&E strategy approved by the Governing Body (GB) in July 2020 anticipates a sixmonthly progress report to GB. We have been updating GB bi-monthly on our progress and this is the fourth of those reports. Once constituted we will work with the Communications and Engagement Group referenced above to develop an annual plan for 2021-22 (as set out in the C&E strategy) which be folded into the regular reporting process.
- After a pause in the restructure of the CCG communications and engagement team due to the Covid-19 pandemic Rachael Durrett has been appointed as Head of Communications and Engagement from 23 November.2020.

Engagement

• NHS Improvement and Assessment Framework (IAF): In November we received the delayed results of the NHS Oversight Framework Patient and Community Engagement Indicator 2019/20 Assessment submitted in February of this year. This assessment was based on our activities as the three legacy North Yorkshire CCGs and our results were mixed – ranging from outstanding to requires improvement.

Our overall rating was Amber, which feels fair, and the more detailed assessment the results provide confirm that we are on the right track with the activities we have included and prioritised in our own planning. You can see more detail about the results below:

Domain A	Domain B	Domain C	Domain D			Final RAGG*
2	3	3	1	1	10	AMBER

A - Governance: Good

Involve the public in governance

Implement assurance and improvement systems

B – Annual reporting: Outstanding

Demonstrate public involvement in Annual Report

C - Day to day practice: Outstanding

- Explain public involvement in commissioning plans
- Promote and publicise public involvement
- Assess, plan and take action to involve

D - Feedback and evaluation: Requires improvement

Feedback and Evaluate

E – Equalities and health inequalities: Requires improvement

Advance equality and reduce health inequality

In response to these results we will do more to:

- Demonstrate the difference that public involvement has made to commissioning, decision making and/or services.
- Be more creative in the methods we use to collect and communicate feedback.
- Showcase how we work with partners to enhance engagement, particularly with those who experience the worst health outcomes.
- Focus on health equality and inequalities, as well as reaching out to all of our communities.

Patient Partner Network

- December sees the third quarterly round of meetings with our three Patient Partner Network locality groups. This quarter the focus is on: primary care networks, winter and flu, Covid-19 and CCG finances.
- We are expecting about 70 people representing 34 of our GP practices, well distributed over our geography, at the meetings (HRW locality: 23 patient partners from 12 GP practices; HaRD locality: 22 patient partners from 11 GP practices; SR locality: 24 patient partners, from 11 GP practices).
- This broad and steady representation reflects a committed focus to building our CCG Patient Partner Network since NYCCG formed in April, and work we have done to support practices deliver their patient participation responsibilities. This membership is particularly notable for HRW which had no CCG legacy group to build on.

The Loop

• Membership of our virtual network of patients continues to grow and we now have 305 members (up 16 over the last two months).

Media

- Amanda Bloor, as chair of the North Yorkshire and York Covid-19 system response Gold Command, has been participating in weekly North Yorkshire Local Resilience Forum (LRF) press conferences since October. These are hosted by North Yorkshire County Council and include representatives from public health, education and the police. They provide a platform for updating the media and through them the public, on the evolving Covid-19 picture and the vaccination programme. These have provided an opportunity to help shape public behaviour and give people information about how to best access the most appropriate NHS service.
- There has been significant media activity over the last two months with a continued average of 2-3 media releases a week. Over the last period these have focused on winter including flu and self-care and Covid-19 including giving guidance on where best to access care, and messages to support the appropriate patient flow across all NY&Y NHS services.¹

Website

 After a substantial pause we now have an active cross-office working group in place to help develop the NYCCG website. A permanent website will allow us to 'turn off' the three legacy sites, which we aim to do prior to support for these sites lapsing on 31 March 2021. Running one site

¹ All media releases can be found on our website: https://www.northyorkshireccg.nhs.uk/news-and-information/

rather than four will enable us to be more efficient and streamlined for our primary care colleagues, staff and the public.

Social media

- We are continuing to post daily updates on our Twitter and Facebook averaging around 125 posts per month on each platform. We are active on Instagram with 1-2 posts per day. Instagram enables us to reach an additional, often younger demographic. Since the last update we have gained 40 Instagram followers, 30 new Twitter followers and 24 new likes on our Facebook page.
- In October and November our main social media topics included Christmas prescriptions, access to maternity and cancer services, antibiotics awareness, 'Pharmacy First' and alcohol awareness along with information on Covid-19 safety and the vaccination programme. We reached a total of 63,000 people on Twitter over the two months and 105,000 people on Facebook. This is significantly higher than the previous two-month numbers of 46,000 on Twitter and 30,000 on Facebook. This may be because we promoted more awareness campaigns over the last two months which have attracted interest.

Newsletters

Engagement with our three existing newsletters remains largely consistent. The analytical data available to us show the following open rates:

- Monthly staff newsletter around 55% of recipients open (up from around 50% at last report).
- Monthly stakeholder newsletter around 45% of recipients open
- Weekly primary care newsletter between 40%-50% of recipients open

This data does not capture instances where recipients read the information on their screens without opening the newsletter in their browser.

Internal communications

- Staff Engagement Group (SEG): SEG continues to meet monthly and is beginning to make moves towards being self-led and self-managed as anticipated in the terms of reference.
- Learning programme: The autumn learning programme ran from mid-September to 1 December. Thirteen sessions were delivered in areas including the Microsoft suite, wellness and resilience and community engagement. The programme attracted over 120 registrations (with Excel: beyond the basics the most popular) and were well attended.

Evaluation shows that most people who attended found it useful and would be interested in future sessions. While the programme appears to have been a success for those who participated it has necessarily relied on the knowledge and generosity of colleagues to give their time to it as session leads. There appears to be appetite for another programme next year which we will explore.

Key Campaigns

'Winter': There is a full calendar of activity aligned to winter and flu. There is a predictable cadence to winter that enables us to do a significant amount of forward planning across all our communications and engagement channels and activities have been sustained since September. Key elements include:

- Communications to support <u>flu vaccination</u> uptake and phased access to the vaccination programme (from September)
- Additional activity to promote self-care and a 'winter ready' medicine cabinet (from September)
- The National 'Help us help you' winter campaign coordinated by NHSE and produced by Public Health England (from October)
- Collaboration with NHS partners to support the <u>flow</u> of people particularly with acute colleagues – to help relieve pressure on services (as needed)
- Publicity to ensure people get their <u>medications early</u> during the holiday period, and to signpost to open pharmacies over the Christmas and New Year holidays (November/December)
- Norovirus communications self-care and staying home to keep others safe. (from December)

- 'Think Pharmacy': This campaign aimed at encouraging patients to choose self-care options where appropriate, and freeing up GP appointments for those patients who need more intensive support. launched in September. Campaign materials have consistently been among the most widely shared posts on our social media channels and have been used by primary care colleagues. This has been a successful joint project with the Local Medical Council and Community Pharmacy North Yorkshire.
- Our recent campaigns have been added to our growing <u>Campaign Resource Hub</u> for practices which provides 'off the shelf as needed' campaign assets and materials.

Key Projects

- We continue communications and engagement partnerships for a number of projects, including:
 - East Coast Acute Services Review: The next stage is to undertake a review of paediatric services at Scarborough Hospital. This will start in the new year with an early engagement programme through focus groups with service users to gain feedback on services provided and views on what the priorities should be when shaping any future service. A briefing has also been prepared for high level stakeholders and MPs to update them on progress with the review so far and advise on the next steps in terms of paediatric services.
 - Whitby Hospital: Work on the project continues and current engagement led locally by Humber Teaching NHS Foundation Trust is working with patients and the public to look at some of the final details of the project such as landscaping, artwork, and naming.