### Communications and Engagement Strategy 2016-17

<table>
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<tr>
<th>Name of meeting: Trust Board</th>
<th>Item: 16</th>
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<td>Date of meeting: 27th July 2016</td>
<td>Enclosure: K</td>
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**Purpose of the Report / Paper:**

The Communications Strategy 2016-17 for Kingston Hospital NHS Foundation Trust sets out the Trust’s plans for sustainably communicating with its key internal and external audiences over the next 18 months and how communications will support the delivery of other key strategies and developments.

**For:** Information ☐ Assurance ☒ Discussion and input ☐ Decision/approval ☒

**Sponsor (Executive Lead):** Ann Radmore, Chief Executive

**Author:** Lisa Ward, Head of Communications

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020 8934 2019

**Risk Implications - Link to Assurance Framework or Corporate Risk Register:** N/A

**Link to Relevant Corporate Objective:** All

**Impact on Patients and Carers:** Ensuring the provision of high quality communications, which improves patient experience

**Link to Relevant CQC Domain:**
- Safe ☐
- Effective ☐
- Caring ☐
- Responsive ☒
- Well Led ☒

**Document Previously Considered By:** EMC

**Recommendations & Action required by the Trust Board:**

The Board is asked to:

- a) **Comment** on the Communications and Engagement Strategy
- b) **Approve** the strategy, subject to any suggested changes or revisions.
Communications and Engagement Strategy 2016-17

Lisa Ward
Head of Communications
July 2016
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1. Executive Summary

This strategy sets out how communications and engagement activities will support the Trust over the next 12 months. The NHS regionally and nationally is busier than ever with an ambitious agenda to achieve including the delivery of performance targets and regional Sustainability and Transformation plans. The Trust is helping to shape the SW London plan and also has some key programmes of work that require high quality and robust communications support. This includes the delivery of the actions following the Trust’s CQC inspection in January 2016; Estates transformation programme and the Five year strategy and vision.

Internally there will be a focus on testing the effectiveness of the channels already in place to communicate and engage with staff and strengthening of those channels and the methods of cascading information if required. There will also be a project to look at refreshing the Trust’s intranet site.

A great deal of the communications carried out externally use digital channels and this strategy continues to build on the success and growing reputation the Trust has as an active user of social media to engage with a very wide audience. The website will be reviewed and optimised and additional social media channels implemented. There will also be more focus on placing features and case studies in national and trade media particularly highlighting our innovative use of IT to improve patient care, dementia care improvements and volunteering. This will help to build and cement our reputation across a much wider audience as a leading player in key areas.

This strategy includes a much greater focus on stakeholder and partner engagement and communications. In the current environment it is absolutely essential that we take a proactive approach to relationship building and management as the need to work in partnership and collaborate outside the boundaries of the Trust is greater than ever.

This strategy has been designed to meet the needs of a challenging and changeable environment and will be regularly reviewed to ensure it is meeting the needs of the organisation.
2. Introduction and context

Communications is a core function and with regards to the channels it covers – internal and staff engagement, external and digital - is well established and fully embedded, with a strong programme of activities. This strategy builds on, and also encompasses, the previous communications strategy agreed by the Board in January 2014, but recognises that the NHS is in a very different place to when the previous strategy was agreed. It includes more emphasis on engagement with our key partners and stakeholders linked to the delivery of our five year strategy and number of other external factors including the Sustainability and Transformation Plans; building on the staff communications and engagement and ensuring the Trust can deliver high quality communications for all of its key priorities.

There has been a significant period of change in board membership and leadership and in the external environment since the previous strategy. We are operating in a very busy and complex system with a challenging financial position, but there are many opportunities on the horizon. Even in financially restrained times good communications is completely possible and achievable, in fact it is even more essential.

Since the last strategy was approved in January 2014, the Trust has continued to cement its reputation as a leader in the use of IT and also as a ‘social organisation’ using digital channels to engage, inform and interact on a daily basis.

We are now in an age where people expect very different types of relationships with organisations that provide ‘services’ and there is an expectation that there is 24/7 feedback via social media and other digital platforms. Failure to embrace this new way of engaging and communicating can cause significant reputational damage and this has meant that the focus of the Trust’s communications team has shifted over the last few years to ensure we are embracing new ways of engaging with and responding to our community.

The Trust’s twitter followers have grown from 1,000 to 8,000 in three years and the Trust has daily interactions with patients, the public and stakeholders via this platform. It has allowed the Trust, and individuals in the organisation, to connect with a much wider patient and professional network that would have been previously possible. Twitter has been widely embraced by staff and there are now 15 official Kingston Hospital twitter accounts run by individuals and teams outside of communications and many more staff tweeting regularly on a professional basis. In addition to twitter feedback and information comes in via the website; NHS Choices; Patient Opinion; I want great care and Facebook.

The NHS is built on people and a number of NHS organisations have found themselves under the spotlight for a very prolonged period for failing to be in touch and aware of what their staff, and patients, are telling them. For both Mid Staffordshire and Morecombe Bay one of the major criticisms was that senior management were not aware of what was going on and not listening. Staff engagement and a visible leadership team is something this organisation can be very proud of and in the 2015 NHS staff survey the Trust was in the top 20% of Hospitals for staff reporting good
communication from senior managers.

Happy, engaged staff means better outcomes and experience for patients and also a staff base willing to get involved with change and innovation and delivering the Trust’s objectives. There is a great deal of evidence linking happy and engaged staff with improved quality. In a study carried out in 2012 (West and Dawson) they demonstrated strong links between well engaged staff and patient experience and outcomes. They found that Patient satisfaction is significantly higher in trusts with higher levels of employee engagement and mortality rates around 2.5% lower. The study also found that good engagement helped in improve staff health and wellbeing with staff reporting high levels of engagement in the national staff survey suffering less from work-related stress, and were less likely to feel pressure to come to work when they were not fully fit to do so. In Trusts where staff felt involved with improvements at work, infection rates fell.

Communications also has a role to play in promoting a culture of openness and transparency by ensuring that information is available to patients, the public and stakeholders.

3. Vision and Objectives

Communications is a constantly evolving and innovating field and we are committed to seeking out the most effective means and channels of communication and engagement. Through effective communications and engagement we can influence, inspire, explain, collaborate and enhance our reputation and support the delivery of the Trust’s vision, strategic objectives and five year plan:

**Working together to deliver exceptional, compassionate care – each and every time**

1. To ensure that all care is rated amongst the top 20% nationally for patient safety, clinical outcomes and patient experience.
2. To have a committed, skilled and highly engaged workforce who feel valued, supported and developed and who work together to care for our patients.
3. To work creatively with our partners to develop sustainable high quality care as part of a thriving health economy for the future.
4. To deliver sustainable, well managed, value for money services.

The objectives are influenced both by internal drivers and significant change in the external environment and the communications and engagement strategy needs to ensure it supports the delivery of them.

The Trust Board has also recently identified a number of key priority areas, which are the services we want to continue to excel in and also where there is greatest need among our population:

- Maternity services
- Frail elderly care
- Elective care
We believe that we can provide the very best start in life through excellent maternity care and also provide the best care in the last few years of life through our work on caring for the frail elderly, dementia, supporting independence and End of Life Care. Underpinning this is continuing to ensure that we provide comprehensive elective services and that we get the ‘basics’ right. Patient Administration has been difficult for a number of years. The administrative side is often many people’s first experience of Kingston Hospital and also where there is the largest throughput with more than 360,000 outpatient appointments a year.

4. Communications and Engagement Objectives

- Provide robust, fit for purpose communications and engagement resources that reflect today’s multichannel, 24/7 world. The resources and activities will be targeted at enabling the Trust to achieve its vision, corporate objectives and ambitious strategic plans for the future.
- Become renowned for the excellence with which we communicate and engage by embedding it as a core business function at every level of the Trust and providing everyone with the tools and support they need to communicate and engage well with all partners and stakeholders.
- To continue to engage staff through timely and relevant internal communications, which are cascaded, evolve and provide two way communication.
- Reach out to multiple groups in a cost effective way by maximising use of online and digital communications channels.
- To evaluate and measure the effectiveness of all communications and engagement and adapt and innovate when necessary.
5. **Key Delivery Plans**

The main priority is to ensure that there is effective two way communication between staff and leadership and patients and the Trust to ensure real engagement and delivery of service improvement.

The key operational priority for the communications and engagement strategy is to continue to provide multi-channel integrated communications and engagement that maximises the resources we have and adopts and exploits opportunities for developing new channels and approaches.

**Integrated Communication:**

- Platforms, speeches, announcements
- Broadcast
- Digital
- Press
- Opinion formers, campaigners and MPs
- Staff and volunteers
- Word of mouth
- Correspondence, letters and emails
- Wards and waiting rooms
- Point of delivery
- Marketing
- Branding and corporate identity
- Events
- Publications and Patient Information
- Digital assets (website and intranet)
- Public relations
- Community networks – Healthwatch, CCGs, GPs, members, governors
- Sponsorship and partnerships
- Social media and online communities

To provide focus, the key delivery plans have been divided into the following:

- Staff
- External
- Digital
- Stakeholder/Partner Engagement
Staff
5.1 Staff

Internally communications will continue to be focused around team brief, monthly staff recognition awards and the Chief Executive’s weekly message. Continuing to provide a high quality internal communications service is vital to ensuring that our staff remain engaged and two way communications continues. The Trust has well engaged staff and the most recent NHS staff survey showed that the engagement score had improved since 2014 and the survey also put the Trust in the top 20% for communication between staff and senior managers.

However, it is clear that the messages from the top of the organisation and from services leaders are not always reaching all staff. To test this and scope out what other channels or resources could be used a communications audit will be carried out. The communications around the audit will reiterate that communications is ‘everyone’s job’ and the communications tools and collateral need to support all staff to communicate.

One of the other areas where there is definitely a growing appetite for improvement is the Trust’s Intranet. There are already a number of staff engaged with looking at how it can be vastly improved and also more responsive to how the the organisation and staff want to utilise this key communications channel and work required will be scoped during 2016.

Staff also need to be equipped with the tools and information to be able to tell the story of our future and what we are here for. This will support them to fulfil their ambassadorial role for the Trust. There will be more emphasis placed on sharing the Trust’s strategy and vision with staff as it emerges and also with keeping everyone updated on the rapidly changing and evolving external environment both at a regional and national level.

This strategy also recognises the increasingly diverse cultural and ethnic mix in the Trust. 10% of staff are from Europe and a sustained overseas nursing recruitment drive has also increased the number of staff from the Philippines. This means that we need to take into consideration different values, behaviours and beliefs when delivering our communications. In addition to a more diverse cultural mix, the Trust has a growing younger population that have different needs with regards to what they want to see communicated and also how they want to be communicated with.

In December 2015 the Trust held its first Annual awards ceremony called the #TeamKHFT awards. This event was a huge success and we will build on this with the next event in November 2016. We will also continue to build on the #TeamKHFT brand during the next years and will utilise it in communications celebrating success, recruitment and retention campaigns and information for patients. Following the Annual awards and CQC inspection in January 2016 there was a real sense of ‘team’ in the Trust and we need to continue to harness this.
New developments

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<tr>
<th>What</th>
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<tr>
<td><strong>Communications Audit</strong> – Assess what works well; what staff want more and less of.</td>
<td>End September 2016</td>
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<td><strong>Development of internal social network</strong> – building on the success of twitter and high levels of staff engagement with it, the communications team will explore the use of Yammer with staff. This is currently being piloted in Maternity and we will learn from their experience before rolling out further. Test concept in the audit.</td>
<td>End September 2016</td>
</tr>
<tr>
<td><strong>Intranet redevelopment</strong> – develop a business case for capital funding and seek external funding. The redevelopment of the intranet would provide a vital tool for the entire organisation to better engage with each other; share best practice and ideas; access information to make their lives easier and support a number of Corporate functions and processes.</td>
<td>October 2016</td>
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<td><strong>Healthy lifestyles and wellbeing</strong> – work with Occupational Health and Workforce to promote services to staff on a regular basis and promote external NHS staff benefits on offer.</td>
<td>End October 2016</td>
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<td><strong>CEO Coffee break</strong> - to further enhance visibility of the CEO and Executive team, a randomly selected group of staff will be invited for coffee and a catch up once a month.</td>
<td>End September 2016</td>
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<td><strong>Enhancing staff reward:</strong></td>
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<td><strong>Ward/Team of the Month</strong> – an opportunity to enhance staff reward. Complement the Monthly values awards and will be agreed by the Executive team based on feedback and information received during the month.</td>
<td>End September 2016</td>
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<td><strong>Token of appreciation</strong> – all managers to receive notes and coffee/tea voucher to distribute as they wish to teams and individuals. These thank yous will also be shared to ensure there is wider recognition and awareness across the Trust.</td>
<td>November 2016</td>
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5.2 External

External communications are a key part of ensuring the Trust protects and enhances its reputation and that the tools and information are available to support patients and their families to make an informed choice and to feel reassured about the care provided. External communications also affects the Trust’s relationship with key partners and stakeholders, members and governors and plays a part in many people’s first impression of the organisation.

Media relations
The Trust has good working relationships with the local, trade and some parts of the national media, to ensure that we are always contacted to contribute to issues concerning the hospital. One of the challenges of generating media coverage comes from the Hospital’s catchment area covering parts of four London Boroughs and Elmbridge in Surrey, which means that there is not one newspaper or media outlet covering our area. Despite ensuring that all relevant media are targeted, the coverage is still largely Kingston centric and we need to continue to seek positive media coverage beyond the Kingston media (Surrey Comet). The team will be proactively working with the media covering Richmond (Richmond and Twickenham Times), Merton (Wimbledon Guardian), Wandsworth (Wandsworth Guardian) and Elmbridge (Surrey Advertiser) to generate more coverage about the Hospital and also local Radio (Radio Jackie).

There is an onus on staff, particularly managers, to involve the communications team in promoting key initiatives and to highlight any issues that may lead to criticism or other reaction through the media. Experience to date shows that Executive Directors and senior managers make appropriate contact with the communications team in advance of potential adverse publicity and the team is able to prepare for it. However, information about good news stories is less likely to be volunteered and the communications team will be more proactive in identifying good news stories. This can be done through the Executive Management Committee, which the Head of Communications is a member of, and Senior Leaders, which the Clinical Directors and Heads of Service are members of. More informally, the communications team will continue to ensure they are out and about in the organisation and building and maintaining relationships with staff to source good news stories.

A media relations plan, which includes proactive activity and also issues that need to be planned for will support the delivery of this strategy and is owned and managed by the communications team.

Publications
Communications continues to take the lead on producing the Annual Report and the accompanying Annual Review. A monthly e-bulletin for members continues to be issued recently started to send out a stakeholder version of the Chief Executive’s weekly message.

Membership communications and engagement
The main aim of the current membership strategy is to engage with and target hard to reach and underrepresented groups such as young men and ethnic minorities and actively engage the members the Trust has already recruited in a meaningful way. The Trust now has just over 6,000 public members and it is important that as many as possible are retained. Membership is one of the three ways to ‘Get involved and support Kingston Hospital’ and in turn, the Trust will continue to use the membership to increase the number of volunteers and to support fundraising. Alongside
encouraging wider support for the Trust, communications will continue to run Members events and use more digital channels to communicate with members as nearly 3,500 members have provided email addresses. Writing to members needs to be done infrequently as there are significant cost implications of doing this. However, subject to sponsorship, a new Hospital magazine will be launched and mailed to all members not on email (an e-version will be sent to those on email) and in August 2016 the Annual Review will be emailed and posted to all members. Communications in partnership with the Company Secretary will also continue to run membership recruitment drives and facilitate the Governor Information desks, which began at the start of 2016.

**Fundraising**
The Communications team supports Fundraising to raise awareness of the current Dementia Appeal and the other affiliated charities. Publicity and marketing is an integral part of the success of the Appeal and more general fundraising and the activities target both internal and external audiences. A separate communications plan is being developed with fundraising to support communications and engagement on the Appeal.

**Events**
The communications teams are also responsible for organising and running a number of events including the Annual Trust Open Day, AGM/AMM and members’ health talks and this will continue.

**New developments**

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<tr>
<td><strong>Development of Employer Brand</strong> – working in partnership with the Workforce team.</td>
<td>End December 2016</td>
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<td><strong>Chief Executive’s weekly note</strong> – circulate to key stakeholders and publish on website</td>
<td>In place</td>
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<tr>
<td><strong>National/Trade press coverage</strong> – sell in features and news stories to relevant trade and national press. To include technology/IT; dementia and maternity.</td>
<td>July 2016 onwards</td>
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<td><strong>Trust Magazine relaunch</strong> – seek sponsorship and advertising to cover the publication and circulation of a bi-annual magazine</td>
<td>End September 2016</td>
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<td><strong>Redesign and relaunch of Patient Information</strong> – to include an audit of existing information and a redesign to A4 format. Much easier to update and reproduce in-house.</td>
<td>End March 2017</td>
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<td><strong>Rolling Brief and Governors’ presentation</strong></td>
<td>End August 2016</td>
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Digital

Welcome to our OPEN DAY

TWEETS 5,874 FOLLOWING 584 FOLLOWERS 8,057 LIKES 1,280

Tweets Tweets & replies Media

You Retweeted

jo sharpen @josharpen · 3h
Yet again thankful for the NHS this week. Staff at @KingstonHospNHS made an emotionally difficult operation bearable #SaveTheNhs #fertility

You Retweeted

#hellomynamewisSarah @sarah_janemad · Jul 21
@Nutrition_HWP @Nutnurse97 ❤ this great idea 👍 nutrition and hydration

Kingston Hospital @KingstonHospNHS
It's a scorcher in Kingston today and Operation Ice lolly is underway to cool down our patients! ☀️🍦
5.3 Digital

A key role of a communications and engagement function is to provide the organisation with the resources and channels to communicate. As outlined in section 4.1 there are number of channels and resources in place for communicating with staff. To enhance staff engagement and communications a priority for this year is the redevelopment of the intranet.

The website continues to be a very important platform for communicating with our key audiences and communications is working with the services to ensure that all the information is kept up to date and data is made available.

Social media

In just a matter of years, online communications, social media and the use of digital channels in everyday life has transformed and revolutionised how everyone can communicate and how the NHS can interact with its patients and stakeholders. Social media such as twitter, Facebook, Instagram and YouTube have and continue to change how everyone accesses and shares information.

The Trust has had particular success with twitter and now has 8,000 followers compared with 4,000 in January 2014. The communications team regularly monitors the Trust’s feed and deals quickly with any negative issues raised and also retweets, and shares with the teams/staff involved, any positive tweets and these are also included in the Trust’s Compliments report. Twitter provides the Trust with a positive tweet nearly every day and social media more generally allows the Trust to engage in the wider healthcare economy and very quickly, and with minimal effort, join a debate – the advantages of this communications platform cannot be underestimated.

Over the next 12 months, communications will use twitter to highlight particular services through ‘tweetathons’ on for example A&E and maternity and also themed weeks where the tweets educate the audience on a particular topic. This will be complemented by information on the website and media stories also focusing on the same topic. The Trust will also continue to increase its use of Facebook, which alongside twitter is also well supported by staff and more and more patients are feeding back their experiences via our Facebook page. The Trust has also recently launched an Instagram account and is working with Workforce to explore an increased use of LinkedIn to support recruitment and retention.

Website

The Trust website has continued to evolve and last year a maternity microsite was launched that sits alongside the main Trust site. Both sites have increasing numbers of visitors and to ensure the sites remain secure and accessible, they are now hosted on a much larger server.

Information screens

Plasma screens in place across the organisation and are situated in all outpatient areas, A&E and inpatient wards. There is increasingly tailored and specialist information on each screen to ensure that it is relevant to the patients and visitors in those areas and wards. Communications are continuing to manage the screens and work with specialities and wards to ensure the information is timely and appropriate.
### New developments

| **Launch of Trust Instagram account** – the Hospital generates strong imagery and this platform will enable to Trust to attract interest and engagement from users of Instagram. | In place |
| **Launch of Trust Linkedin page** – this will provide an additional platform for marketing KHFT as an employer of choice and run targeted recruitment campaigns | In place |
| **Tweetathons/Q&A** – launch a series of tweetathons focusing on a service e.g. maternity; Emergency Dept; Paediatrics. In addition, opportunity for patients and public to ask an individual or team questions and find out more. | September 2016 |
| **Website audit and optimisation** – meet with clinical specialties and teams to update web pages and maximise usage of the website | End September 2016 |
| **Launch of Child friendly Paediatrics Information** – Section has been designed and written aimed at children being treated here in partnership with Momentum | In place |
Stakeholder/Partner Engagement
5.4 Stakeholder/Partner Engagement

**Key partners and stakeholders**
The first principle of engagement is to be clear on who we see as partners and who are our stakeholders. Our partners are those that we have an active and transactional relationship with and where there are inter-dependencies; and stakeholders can be classified as those with an interest in us or who represent the people and communities we provide services to. Our ultimate aim through partner and stakeholder engagement is to be assertive and create a permissive environment that allows us to operate and achieve our objectives. The Trust already engages on differing levels with a number of stakeholders and partners and the map at Appendix 1 describes this.

Kingston Hospital aims to focus on real and meaningful engagement, where two-way communication and dialogue with partners and stakeholders is paramount. More than ever the Trust needs to have strong and productive relationships with its partners, and support from stakeholders, given the high level of change and uncertainty, the actions required as a result of the CQC inspection and to ensure that the plans required for the next five years are developed through working in collaboration and in new and innovative ways with a wide group of providers and commissioners.

The plans and strategic requirements currently are wide-ranging and likely to grow and provides some context on how vital external relationships and engagement are to the organisation:

- South West London Sustainability and Transformation Plan and sub-regional plans.
- Kingston Co-ordinated Care
- Richmond Outcomes based commissioning
- SWL Acute Provider Collaborative
- SWL Commissioning and Five year view
- Financial position – locally and nationally
- Cancer Vanguard
- CIP programme
- A&E Improvements
- SWLEOC
- SWL Pathology

The Trust’s stakeholder engagement approach also needs to complement the Public and Patient Involvement Strategy, which was approved by the Board in January 2016 as any future plans and developments have to ensure the best possible care and outcomes for our patients and the local community.

Stakeholder engagement is something that everyone in the organisation can play a part in and it is important that the tools and narrative are provided to enable this. However, the Trust needs to build on existing, and forge new, relationships with key individuals in key partner and stakeholder organisations and groups.
Objectives:
- Engage with our stakeholders to fully understand all our and their needs, expectations and opportunities
- To communicate and engage consistently and regularly using a clear narrative
- Collaborate with our stakeholders to identify priorities and develop solutions, initiatives and partnerships to ensure the continued provision of high quality, sustainable patient care.
- Create a receptive environment to enable the Trust to take full advantage of new opportunities and to increase its resilience when things don’t go to plan
- To ensure that the Trust’s strategy and plans are aligned with those of the wider health economy and receive support
- To protect and strengthen the Trust’s reputation, ensuring it is the local hospital of choice and is able to maintain and grow market share

Our approach
In previous iterations of the stakeholder engagement strategy there had been a recommendation to plan activities on a geographical basis with Executive and Non-Executive Directors focusing on a particular ‘patch’. This approach will not work with the Trust’s current strategic aims and objectives as they are cross boundary and not limited to one area. The collaboration required on a number of different programmes and projects with the Trust’s partners and stakeholders will be underpinned by the following:

Strong relationships with counterparts – The Executive team and other senior leaders already have relationships on some level with colleagues carrying out similar roles in a number of our key partner organisations. The Executive team has also identified the need for greater clinical engagement and stronger relationships with GPs going forward.

Focusing on strengthening these relationships has to continue particularly with CCG, Community and Acute Trust colleagues. There are a number of joint initiatives, commissioning decisions and partnerships where the success will be based on the relationships underpinning them.

Using the stakeholder map attached, the key stakeholders and partners will be matched with members of the Executive team to ensure that there is a named ‘owner’ for each relationship going forward.

CEO Weekly – This is now being shared with a wide group of key partners and stakeholders and will be sent every Monday to this group.

Bi-monthly stakeholder update – In addition to the CEO weekly a bi-monthly stakeholder update will be developed with the Chairman and the Executive team to circulate across key partners and stakeholders. This will contain more detailed information about news and developments at the Trust.
Regular MP/Local Cllr engagement – With some potentially large scale change on the horizon these relationships are more important than ever. The Trust has very good relationships with Kingston and Surbiton MP James Berry and Richmond Park MP Zac Goldsmith. The Trust also has good but more distant relationships with Tania Mathias (Twickenham), Dominic Raab (Esher and Walton) and Stephen Hammond (Wimbledon). There are council representatives on the Council of Governors, but relationships need to be strengthened with the leaders and Chief Executives of Kingston and Richmond council and the Chairs of HOSC and HOP.

Regular meetings need to be scheduled with James Berry and Zac Goldsmith and the option of a briefing meeting in Westminster with the wider group of MPs once the Trust has a clearer picture of its five year strategy and role in the future health economy. This will also be replicated for the leaders and CEOs of Kingston and Richmond councils.

GP engagement – the Trust has a small amount of resource currently dedicated to GP engagement and this works well at maintaining links with our referring practices and ‘trouble shooting’ any issues. The Trust now needs to build on this with greater senior leader and clinician engagement as active and positive relationships with GPs are one of the keys to the Trust delivering on future plans and aspirations.

Stakeholder/Partner communications - In addition to the above, the website will also be used more proactively to communicate with stakeholders and the Trust will ensure that it is actively engaging via social media with its partners and stakeholders. The communications team will also focus on external relationships with communications colleagues across the wider health economy and supporting and strengthening in particular CCG and community relationships and primary care comms if they emerge. Currently very little interaction with CCGs and we will take the lead on this and build our own regular opportunities for networking and working in partnership.

Regional/national networking opportunities – there are regular NHS networking events and conferences held and a calendar of events will be developed to ensure that all suitable opportunities are captured and considered. Local networking is a priority, but building relationships outside of our health economy and with national and regional leaders will help to both seek out what is working well elsewhere and also provide the Trust with support, advocacy and some ‘head cover’ during more challenging periods.

Awards, external funding and presenting opportunities – a number of senior leaders already present at regional and national events and this is an excellent way of raising the organisation’s profile and reputation. In addition, the Trust has put more focus and resource into entering national awards schemes and bidding for external funding and this should continue.

Capturing engagement – with a very complex agenda ahead, and the potential for many more opportunities for engagement, the Trust will trial a tool for capturing the conversations and intelligence to ensure information is shared and actions and opportunities followed up. The proposal is to trial a ‘low tech’ approach to Customer Relationship Management (CRM) that will be managed via the Communications and Strategic Development teams and utilise an existing CRM style database.
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<tr>
<td><strong>Strong relationships with counterparts</strong> - The Executive team and other senior leaders already have relationships on some level with colleagues carrying out similar roles in a number of our key partner organisations. Focusing on strengthening these relationships has to continue particularly with CCG, Community and Acute Trust colleagues. The stakeholders will also be assigned an ‘owner’ from the Executive team.</td>
<td>All members of the Executive team</td>
<td>Ongoing</td>
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<tr>
<td><strong>CEO Weekly</strong> – shared with partners and stakeholders</td>
<td>HofC</td>
<td>In place</td>
</tr>
<tr>
<td><strong>Bi-Monthly stakeholder update</strong> – developed with the CEO and Chairman</td>
<td>HofC</td>
<td>September 2016</td>
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<td><strong>MP/Local Cllr engagement</strong> – ensure regular briefings in the diary with key MPs and Chairs of HOSC/HOP</td>
<td>Chairman and CEO HofC to support</td>
<td>September 2016</td>
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<td><strong>GP engagement</strong> – work with the GP Liaison Manager to explore opportunities for greater senior engagement with GPs.</td>
<td>HofC/DDofSD</td>
<td>August 2016</td>
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<td><strong>Capturing engagement</strong> – trial a ‘low tech’ approach to Customer Relationship Management (CRM). Information will be gathered from a number of sources and meetings and uploaded by stakeholder to an existing donor management database that can be adapted for this use.</td>
<td>HofC/DDofSD</td>
<td>September 2016</td>
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</tbody>
</table>
What will success look like?

- Improved partner relationships
- Improved reputation - increased confidence in our ability to achieve our goals
- Greater involvement in key initiatives with key partners, that may affect us achieving our goals
- Improved and consistent messaging
- Staff acting as Hospital ambassadors
- Improved recruitment and retention of staff
- Improved commissioning negotiations
- Increased stakeholder involvement
- Increased awareness of stakeholder opinions and issues

There are more detailed plans for engagement with some of the groups identified in the stakeholder map outlined further in the following linked Trust strategies:

- Patient and Public Involvement Strategy
- Membership Strategy
- Volunteering Strategy

6. Communications Approach

The Trust aspires to the following guiding principles, while recognising patient confidentiality, in its approach to internal and external communications and engagement:

- Effective communications is everyone’s responsibility;
- Wherever communication takes place it should always be on a two-way basis;
- Communications should be open and transparent;
- Information should be comprehensive - information should not be withheld from those who need to know, either by choice or by inadequate communication;
- Information should be up-to-date and received as soon as it is available;
- Use plain language and communicate in a way which enables everyone to understand.

For the communications department to successfully implement this strategy, the team needs to be kept fully updated on any developments, changes or decisions that might impact on reputation, patients, staff, partners or other stakeholders. All members of staff throughout the organisation have a part to play in supporting the delivery of effective communication, ensuring that this takes place internally, engaging with partners and the public and by helping the Trust share good news and developments. It is not just the responsibility of the communications team to communicate.
Department roles and links with other Departments

The staffing in the team is currently four substantive members of staff – Head of Communications, two Communications Managers (shared with Patient Experience until September 2016) and a Communications Assistant. The team is also looking to add to the team through a part time internship and apprentice. The team’s role is to:

- Plan and co-ordinate communications activities across the organisation;
- Own and develop online and digital capability and infrastructure;
- Provide advice and support to senior managers and clinicians;
- Liaise with the media on a proactive and reactive basis;
- Take the lead on promoting a positive image and reputation for the Trust;
- Train and skill up other Trust staff to carry out own small scale departmental communications.

Board Members and Executive Management Committee members:

- Provide information about possible PR opportunities;
- Provide ‘heads up’ on any issues with a reputational risk and assist in the development of plans to manage the issues;
- Ensure that there are channels in place to communicate key messages to teams and feed information back up to the top;
- Work with the communications team on campaigns and initiatives to market and publicise services;
- Provide clinician input and content;
- Engage with key stakeholders.

Governors:

- Assist in communicating to key groups, individuals and communities within their constituencies;
- Increased visibility and awareness of key announcements and initiatives through the implementation of the Governor Involvement Strategy.

Other staff:

- Be involved in communications activities where appropriate;
- Work with colleagues and managers to ensure that information is shared;
- Report good news stories and flag up issues to the central team;
- Carry out small scale departmental communications under the guidance of the communications team.
7. **Evaluation**

Evaluation should be seen as an integral and continuous stage in the communications process and is vital if we are to understand what works and what doesn’t and whether our messages are reaching the right audiences. Evaluation also helps to:

- focus effort; keeping the important in perspective.
- demonstrates effectiveness; showing the value of good communications.
- ensures efficiency; so investment is used where needed.
- enables continuous improvement; helping us become better communicators.

The strategy’s activities will need to be evaluated to ensure that the emphasis and agreed priorities have delivered. This evaluation is also key to planning activities and prioritising the workload of the small communications team in future years.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Quantitative Measurement</th>
<th>Qualitative Measurement</th>
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</table>
| Internal communications and staff engagement | - Trust continues to be in top 20% for staff engagement  
- Increase in staff engagement score  
- Trust continues to be in the top 20% for good communication between senior managers and staff  
- Increase in score for: *I am able to make suggestions to improve the work of my team or department*  
- Increase in recommendation score of place to work and receive treatment  
- Communications audit of cascade and channels | Feedback and soft intelligence from staff during walkabouts, events and briefings. |
| External and digital communications | - Increase in website hits and reach through use of Google analytics  
- Increase in positive media coverage across all boroughs served by the hospital  
- Increase in twitter followers by a further 500 to 8,500.  
- Utilise Linkedin to advertise five key roles a month. | - Feedback on website through review of content and soft intelligence on how Trust is perceived externally.  
- Positive feedback from open day and increased engagement and support from external partners.  
- Governors and staff more visible at community and local events and meetings. |
8. Conclusion

An annual work plan will underpin this strategy and will ensure delivery of the measures and tactics on time. As the Trust is currently in a period of intense external activity and change, the plan will be flexible enough to accommodate additional communications work going forward. Progress against this strategy and plan will be reported every six months to the Executive Management Committee and the Trust Board, via the Chief Executive. This will ensure that the communications strategy is further embedded into the organisation and owned by the Trust and its management. It will also ensure that the plan can be adapted if priorities change during the year. The Strategy will be reviewed, and an update provided, in July 2017.
APPENDIX 1

STAKEHOLDER MAP

Low

Police        Transport for London Authority        NHS Providers

ENGAGE AS REQUIRED

NHS Employers        Competition and Markets Authority

Surrey and Sussex Healthcare

Royal Surrey County Hospital

Low

High

Public/Local Community        Mayor’s office        Education Partners

Local Community Groups        Third Sector/Charities/Voluntary Sector

Faith groups

KEEP INFORMED

Private Healthcare Providers

Surrey County Council

High

Low

London Ambulance Service        South East Coast Ambulance Service

Royal Colleges

Accreditation Bodies

Satisfaction

Dept of Health

CCGs:

Croydon

Sutton

Wandsworth

High

Low

MPs:

Dominic Raab

Stephen Hammond

MPs:

James Berry

Zac Goldsmith

Tania Mathias

Media

CEOs/Leaders

CCGs:

Kingston

Richmond

Sutton

Wandsworth

NHS England (London)        Monitor

CQC        COG        AHSN        LETB

Richmond OBC        Cancer Vanguard

Kingston HOP        Richmond HSC

Kingston & Richmond LA

CCGs:

Kingston

Richmond

Merton

Surrey Downs

Patients

Healthwatch

Volunteers

SWLCC        SWLEOC        SWLP

CQC        COG

Richmond

OBC

Cancer

Vanguard

Knowledge

Catalyst

Burroughs

Medical School