

2013/2014 Business & Community Engagement Plan



Bringing business and community together

Introduction

This **Business and Community Engagement Plan (BCEP)** highlights the ways in which HiB and its stakeholders and partners will be managing and creating opportunities to engage with the local business and wider community.

Healthwatch Harrow Mission - "To establish Healthwatch Harrow as an organisation rooted in Harrow that is open to all and makes a real difference to people's lives through championing the health and wellbeing of Harrow residents".

Our mission is guided by our overall vision and longer term aspiration for Healthwatch Harrow which:

- Is accessible to all people
- Has a real impact on health and social care
- Genuinely meets public priorities and needs
- Hears the voices of everyone, knows what people think and understands their health and social care priorities
- Is transparent and accountable to the people it serves.
- Has a working relationship with statutory providers
- Influences a changing health and social care agenda

Purpose

We believe that it is important for everyone to have the opportunity to get involved and have their say in local issues that affect or interest them – be these to do with local employment, business, education, health and social care and community cohesion. Our BCEP will guide us and our local and wider stakeholders and partners in the involvement of and engagement with our communities, interested people, statutory and non-statutory bodies, businesses and other organisations in the services we all develop, manage and/or provide.

How we will deliver BCEP?

We will deploy the following mix of marketing and communication tools and techniques in undertaking the various activities in the attached schedule.

- Integrated campaigns to give people the choice of how they access information in a format and a time that suits them.
- Identify and mobilise the silent majority so that the decision makers feel comfortable they are making the right choice.
- Undertake detailed stakeholder analysis reports to identify and understand the "movers and shakers" relevant to the consultation.
- Use social media campaigns and Facebook fan pages to focus support for proposals.
- Go where the people that matter go.
- Do the simple things well, such as engaging at local exhibitions.
- Direct mail outs
- Telephone research.
- Media relations

We will use and design the following marketing tools:

- Web marketing
- Presentations/Corporate presentations
- Advertisements
- DVD promotion
- Social Media
- E-newsletters

Review Process

The BCEP will be reviewed on a **monthly basis** and a **current record** will be created of all marketing/outreach work completed and on-going. Effectiveness will be measured against the range of agreed targets, outcomes and KPIs achieved in our Performance Management Report.

BUSINESS AND COMMUNITY ENGAGEMENT PLAN 2013 - 2014

Aims / Objectives	Methodology	Activities	When	Who	Outcome
1. Promotion of Healthwatch Brand	Hub 1. Creation of Harrow Map with areas of impact	Promoting Healthwatch to community, voluntary, statutory and business sectors <ul style="list-style-type: none"> • Attend meetings • Tele-marketing • E-marketing & Marketing i.e. e-newsletters, website, social media including twitter, LinkedIn, Facebook, leaflets, posters, business cards • Events (HH Launch/HiB 30 years celebration, networking events, Under One Sky, CCG public meetings) • Media Coverage (radio, newspapers, television, YouTube, etc) • Seminars/workshops 	Continuous (Please see Appendix B – Board paper C) Continuous (However, planned telemarketing exercise to take place July to August 2013) Continuous and targeted Continuous and targeted (Appendix B – Events and meetings diary) Launch event scheduled for Autumn 2013 Targeted and diarised Continuous	Team (Jaswant, Rhona, Antonetta, Jenny, Chris) volunteers, Chair & delivery partners 2 graduates Antonetta with contribution from team and delivery partners Team, volunteers and delivery partners Chair of HH Team	Yr1 20% of people who have heard of HH as reported by LA residents panel 40% end of second year 50% of people who recognise HH as an effective and inclusive brand, championing health and social care issues (info from CRISPI list) No of people who have contacted HH (info from CRISPI list)(target to be benchmarked from yr1 figures) 70% of service users satisfied or very satisfied with the service they received (snap survey plus local checks)
	Development of 2 nd Hub and Spokes through creation of protocols and procedures, enabling easier access for public to inform Healthwatch	<ul style="list-style-type: none"> • Promoting through delivery partner networks • Drop in Sessions • E-marketing • Leaflets 	Roll out programme to commence End of July 2013	Team rolling out to delivery partners at Hub and Spokes	As above
	Sponsorship and Income Generation	Encouraging local business, statutory bodies, financial institutions to sponsor events and products	Continuous	Chair/HH Director/Programmes Director/ HiB Board/Delivery Board (DB)	

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2. Gathering views, understanding and experiences of carers and service users	Collation of information from public community engagement meetings, events through national, local and in-house surveys and focus groups. Information received from Speak Out page on Healthwatch Harrow website and completed leaflets and information cards.	Collecting intelligence via communication exchange with Community and voluntary sector. See Appendix A	Continuous, diarised	Team & DB, Chair and volunteers	<ul style="list-style-type: none"> • Baseline and movement towards reflecting the borough 18+ demographic profile • Recommendations made that lead to changes • Issues reported included in JSNA
	Surveys and face to face, telephone, Speak Out via leaflet and website.	Collecting intelligence via communication exchange with Public services & statutory bodies. See Appendix A	Continuous	Hub1 Team, Hub2 and Spokes	<ul style="list-style-type: none"> • Issues submitted to HWBB • Data received and analysed every quarter
	Surveys, face to face, telephone, Speak Out via leaflet and website.	Outreach with business sector, gathering survey's from attendees of meetings, workshops and events See Appendix A	Continuous and diarised	Hub1 team, HiB board	
	Interrogating reports from statutory bodies and delivery partners	Analysing data reports received from i.e.: - <ul style="list-style-type: none"> • MONITOR • PALS and complaints reports • OFSTED • CQC, CCG, HWE • Health & Well-being board • NICE • JSNA • Delivery Partners 	Quarterly and ad-hoc	Team, Delivery partners, volunteers analyst	
	Enter and View or PLACE visits	Recording information received from Enter & View, i.e:- <ul style="list-style-type: none"> • Hospitals • Care Homes/Hospices • Doctors/Health Centres • Dentists • Mental Health facilities 	Ad-hoc	Jaswant, Rhona and trained volunteers & delivery board members	
3. Making people's views known, including those from excluded and under-represented communities.	Utilise data gathered from reports and intelligence received	Creating trend analysis reports from data received through: <ul style="list-style-type: none"> • Data entry • Reports from public and statutory sector • Reports from voluntary sector 	Quarterly	Jaswant/Rhona/Antonetta/Jenny	<ul style="list-style-type: none"> • Make recommendations to Healthwatch England to advise the CQC to carry out special reviews or investigations into areas of concern

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	Act as critical friend to commissioners and providers of services to help bring about improvements. Inform monitoring bodies and service providers of local people's views through Media coverage, social media, website, Hubs and Spokes, meetings	Presenting or reporting to: <ul style="list-style-type: none"> • HWE, CQC • HWBB • CCG • Commissioners • Overview and Scrutiny Committee • Service providers • Public • LBH, councillors 	Continuous	Team, Chair	<ul style="list-style-type: none"> • Evidence of reports and feedback from Healthwatch England
4. Promoting and involving people in the monitoring, commissioning and provisioning of local care services.	Use the broad range of stakeholder engagement techniques to maximise opportunities for local people to have their say. Engaging with Community, business, public, statutory and voluntary sectors	Promoting involvement through:- <ul style="list-style-type: none"> • Speak Out • Creating and attending Focus Groups • Attending & organising Public meetings • Attending Events/workshops (business and community) • Website • E-newsletter (Healthwatch & partners) • Social Media • Media Coverage(newspapers, radio, YouTube) • Face to face meetings • Schools curriculums • Consultations/surveys • Regional activities 	Continuous	Team, Delivery Partners, Chair, Volunteers, LA and providers	<ul style="list-style-type: none"> • Health and Social care services are demonstrably influenced by the delivery of the consumer voice through HH leading to services that build on the patient and service user experience; • Membership of HH increases through embedding and working closely with patient participation groups, neighbourhood groups and other partners; • People who want to take part in HH activities are treated fairly and are able to take as full a part as they want; • Successful professional relationships are in place with Harrow Health and Wellbeing Board, commissioning leaders and local providers • HH has a focus on partnership, outreach networking, relationship building and achieving common cause

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5. Recommending investigation or special review of provider services, either via Healthwatch England, or directly to the Care Quality Commission (CQC).	Obtain evidence to allow for recommendations to be made	Recommend investigation from evidence collated through following methods:- <ul style="list-style-type: none"> • Review Trend Analysis reports • Create recommendations and report • 'Enter and View' visits • Create Annual Report for public awareness 	Continuous	Jaswant/Rhona/Chair/Delivery Partners	<ul style="list-style-type: none"> • Concerns raised become formal recommendations • Evidence that prioritisation methodology is responsive to public concerns
6. Providing non clinical advice, signposting and information to all service users about access to services and support in making informed choices.	Influence or provide advice and information (signposting) services to ensure that all sections of the local population have access to good quality impartial advice and advocacy relating to health and social care services available to them, utilising a bespoke database of existing local networks and support systems	Research and then update current information and signposting through: <ul style="list-style-type: none"> • Client enquiries • Attending and presenting at events • Website updates • 2 monthly E-newsletter • Social media entry • Media Coverage • Informing service providers of inaccuracies in their information 	Continuous	Team/Chair/Hub2 & Spokes	<ul style="list-style-type: none"> • Easy to access information and advice about health and social care • People in Harrow know about HH, what its role is and it is perceived to be a credible organisation • People get the information that they require • Signposting and Advice enquiries are answered promptly and fully using provider and secondary information sources
7. Signposting to a professional Independent NHS Complaints Advocacy Service.	Make arrangements for supporting local people with any complaints they may wish to progress in relation to NHS service provision and social services	Signpost to appropriate advocacy service <ul style="list-style-type: none"> • HAD • Age UK Harrow • Harrow Mencap • Kids Can Achieve • Local authority 	Continuous	Team	<ul style="list-style-type: none"> • People are signposting to the correct provider of service