‘Lets Talk’

Draft communication and engagement strategy 2012-2107

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1. Executive Summary

Sheffield Teaching Hospitals NHS Foundation Trust’s vision is:

*To be recognised as the best provider of health care, clinical research and education in the UK and a strong contributor to the aspiration of Sheffield to be a vibrant and healthy city region.*

The principal aims of the Trust are:

- Deliver the best clinical outcomes
- Provide patient centred services
- Employ caring and cared for staff
- Spend public money wisely
- Deliver excellent research, education and innovation

However the complexity of national and local NHS reforms, increasing public and staff expectations, coupled with significant economic challenges means the transformation agenda outlined in the Trust’s new corporate strategy – Making a Difference (2012-2017) is significant and marks the beginning of a new era for healthcare in the City.

To achieve the vision and aims set out in ‘Making a Difference’ will require a significant shift in our patients, staff and partners understanding and more importantly the level of their engagement, in what the Trust is aspiring to achieve over the next five years.

Therefore the imperative for effective communications and engagement with patients, our staff, the public, media, partners and commissioners has never been more important. The Trust must develop a culture in which our patients, public, stakeholders and staff are encouraged and empowered to influence and implement a significant transformation agenda. We will need to help our stakeholders understand the issues, challenges and aspirations we have and engage them in helping us to develop the solutions, make decisions and build on the opportunities this brings.

The Trust must also consider the changing nature of the NHS, particularly commissioning, and the concept of any qualified provider which is now established in a more competitive market arrangement. This adds a dimension to our communications and engagement strategy, which must consider in balance those who use and benefit from our services, those who deliver our services, and those stakeholders who pay for our services. It is very clear that a more strategic approach to marketing the services of the Trust is required, ensuring that people who want or need healthcare services see Sheffield Teaching Hospitals NHS Foundation Trust as the provider of choice. This area will need to be developed going forward, but the engagement of primary and secondary care clinicians is going to be a key element of this. Reputation management and brand expansion will also be key areas for development as part of an experiential marketing strategy. Looking forward, patient information will need to be seen in the context of greater patient choice, greater competition in the delivery of health services, and as a key component in quality and financial measures such as re-admissions.

With this in mind the Trust must review and refresh existing communication and engagement techniques and embrace modern technologies that offer new ways of reaching all of our audiences. The growing popularity and mainstreaming of ‘e’ communication, through social networking, podcasts, blogs etc, presents new ways for our patients, staff and partners to access information, form opinion and for us to gauge and influence them. For many sections of the community it is the communications medium of choice, and with the convergence of mobile phones,
digital communication and social networking it is in some cases the only form of communication. We are currently a long way from the interactive conversation with every patient, employee and member that should be our aspiration. The potential impact on reputation, the maximisation of Choose & Book and the public hunger for web-based information to inform decisions on choice make this a significant priority.

Set against this context the vision of the communications and engagement strategy is:

To establish and embed a vibrant communications and engagement approach that supports Sheffield Teaching Hospitals NHS Foundation Trust to achieve its corporate objectives, goals and vision.

The diagram below illustrates how achievement of this vision would support the aims of the corporate strategy – Making a Difference – 2012-2017:

The principal aims of the Trust’s communications strategy for 2012-2017 are to:

- Ensure patients are well informed about the quality, safety and availability of clinical services delivered by STH so that they are empowered to make an informed choice about what treatment/care they chose to have and who they want to provide it.

- Ensure access to information is given the same priority as enabling people to access our services. A primary reason to do this is to increase understanding of how they can be involved in improving their own health and wellbeing.
• Create a dynamic culture of staff engagement supported by two way effective communications at directorate/department level and horizontally across the Trust.

• Embrace patient and public engagement as standard practice as outlined in the Patient and Public Involvement strategy.

• Bring about deep understanding of the Trust’s vision, values and objectives to support patient care, staff well being and the efficient use of resources.

• Ensure all staff are fully engaged in the Trust’s commitment to deliver high quality safe care, by keeping them informed about what is changing, why change is needed and most importantly involving them in the decisions that affect them.

• Ensure GPs, Commissioners and Regulators are well informed about the services delivered by STH, and that the Trust is clearly aware of the priorities and requirements of those who refer to, purchase or regulate acute care.

• Develop the brand and reputation of the Trust through proactive and reactive media management, marketing, high quality patient information, and effective engagement so that staff, members and patients want to be ambassadors of the Organisation.

• Ensure patients, staff, partners, stakeholders, members, governors and the public understand Sheffield Teaching Hospitals NHS Foundation Trust vision, and the part they can/need to play in achieving it.

• Nurture new and existing relationships to enable partners be engaged and involved in transforming services, delivering care and shaping future developments.

• Ensure STH plays an active part in the local community leading debate about the healthcare it delivers, the strategy for healthcare in Sheffield and South Yorkshire, health promotion and illness prevention.

• Recruit and retain a vibrant, representative and active membership for the Trust.

The communications and engagement strategy builds on previous improvements in communication and engagement activities but also uses research, insight and best practice to describe a necessary step change in how we approach and deliver communication and engagement activities over the next five years. The aim will be to move from an ‘inform’ to ‘engage’ communications culture grounded on ‘dialogue instead of dictate’. There will be performance metrics developed to monitor and evaluate the progress made towards achieving each aim.

Key developments on this journey will include:

• Developing a culture which embraces staff engagement as standard practice is a key objective of this strategy and to support this a full review of internal communications and engagement activities will be carried out. Improvements will be made in response to the insight gained from the 2012 Trust internal communications audit and NHS National staff survey. For example a new interactive intranet will be developed to allow dialogue, ideas and
communications to flow more effectively horizontally and vertically through the Organisation.

• Developing a culture which embraces patient and public engagement as standard practice is outlined in the Trust’s Patient and Public Involvement strategy – Listening, Talking, Improving (Appendix 4) which sits alongside this communications and engagement strategy.

• Evoking a step change in internal communications to move from an ‘inform to engage’ approach with communication channels which flow up and down the organisation as well as horizontally through Directorates.

• Developing and protecting the brand and reputation of the Trust through proactive and reactive media management, marketing activity, high quality patient information, and effective engagement so that staff, members and patients want to be ambassadors of the Organisation.

• Access to information about the Trust, and access to the means for engaging effectively with the Trust will be given the same priority as enabling people to access our services.

• A marketing strategy will be developed aligned to the communication and engagement strategy. It will be focussed upon developing the infrastructure, marketing knowledge and access to insight necessary to support patient choice, and deliver service improvement, additional capacity where there is demand and it is financially viable to so.

• Expand the use of new media in our communications (video-casts, web chats, etc) moving towards an ‘on-line first’ ethos which was highlighted as a preference in the 2012 internal communications audit – Getting Communications Right for you and in national patient/public surveys. A digital communications strategy will be developed to complement existing traditional communication channels and tactics to ensure all our audiences have access to transparent, clear and relevant information when they want it.

• Strengthen relationships with our partners in health, social care, Commissioning, the Sheffield Executive and Universities to support positive and effective working arrangements.

As well as supporting the delivery of the Trust’s corporate strategy the communications and engagement strategy embraces the NHS commitment to transparency, Patient Choice and the Information Revolution as set down in the NHS Constitution and the NHS White Paper, Equity and Excellence: Liberating the NHS, (2010). The strategy is grounded on the principles of the Department of Health ‘The Communicating Organisation’ (2010) and should be considered alongside the Trust’s Organisational Development strategy and the Patient Experience and Public Involvement Strategy. It also takes into account the communication and engagement plans of Commissioners and our local partners.

Conclusion

Effective implementation of the communications and engagement strategy will help support the Trust to realise its vision and corporate aims by:

  – fostering a culture in which patients, public and staff are empowered to influence and implement a significant transformation agenda.
– creating a dynamic culture of staff engagement which will benefit staff health and well being, service innovation and productivity.

– having a good reputation to ensure patient, commissioner and partner confidence which then translates into STH being trusted and chosen to be the Provider of Choice.

– having a robust marketing approach in place to help shape future service provision and generate new income.

– fostering a culture where the provision of accessible and transparent information is given the same priority as enabling people to access services.

– strengthening relationships with our partners in health, social care, commissioning, education, the voluntary sector and industry.

In summary the delivery of this communication and engagement strategy will help ensure Sheffield Teaching Hospitals NHS Foundation Trust continues to be trusted by patients to deliver their care, has a good reputation to ensure patient and commissioner confidence and provides patients the best possible experience of care.
2. Context

Sheffield Teaching Hospitals NHS Foundation Trust is the major provider of adult health care for the city and now also in the community. We also provide a substantial range of specialist services to people from South Yorkshire, North Derbyshire and beyond. The Trust has been awarded the title of Trust of the Year three times in six years in the Dr Foster Good Hospital Guide due to its excellent track record on clinical outcomes, safety and patient satisfaction. The Trust is regarded as a leading NHS Provider of healthcare and as such has a strong brand and reputation.

The recent integration with community health services has changed the nature of the organisation. It now provides elements of health promotion, public health, community health services, primary care and hospital care. This provides us with a unique opportunity to explore new ways of providing even better care to patients.

The NHS reforms nationally and locally will present further opportunities and challenges to redefine how healthcare is delivered and effective communication and engagement across partners will be critical if the aspirations of the City wide health and social care transformation programme - Right First Time are to be delivered and accepted by the local community.

The national economic situation inevitably has an impact on the financial position of all public services and raises the following issues for Sheffield Teaching Hospitals NHS Foundation Trust.

- Raised expectations of patients and the public as a consequence of the unprecedented investment over recent years that have enabled significant improvements to be made to services for local people.
- Low or potentially zero level of financial growth for NHS Trusts across the country that will bring challenges of ensuring that we continue to provide high quality, accessible services that meet the needs of local people and potential patients.
- Prioritising our work and ensuring that we work as efficiently and effectively as possible, delivering through partnership working with clinicians, partners, providers, staff and the public and patients.

We will need to help our stakeholders understand the issues we face as a result of reform and reduced funding. We need to engage them in helping us to develop the solutions, make difficult decisions and build on the opportunities this brings.

Research, information and experience also tells us that there are ways in which we can improve our engagement and communications with stakeholders to achieve the aspirations set out in the Trust’s corporate strategy – Making a difference – 2012 2017. We also know that there are areas of best practice that we should build upon.

Recent research and a SWOT analysis provides an overview of our current position and challenges around communications and engagement.

Further key insight which influences this strategy includes:

- Improvements in communications and engagement channels and tactics over the last 3 years are beginning to show results with 86 % of staff who responded to an internal communications audit in 2012 stating that they felt well or adequately informed. The number of respondents (circa 3,000) equated to one in every five members of staff employed by the Trust and
included staff who did not have easy access to e communications. However whilst there is a high level of staff who feel well informed, there is a lower level of staff who feel they are involved or engaged in decisions which affect the Trust or their department. This is also borne out in the results of the 2011 NHS staff survey although a significant improvement has been achieved compared to the 2010 NHS staff survey results on staff engagement. Developing a culture which embraces staff engagement as standard practice is therefore a key objective of this strategy.

- The 2009 Sheffield Place survey explored Sheffield residents’ satisfaction with where they live and the services they receive. The survey results found that the public are more satisfied with their local health services, than other public services. Specifically 78% of people surveyed in Sheffield are very satisfied or satisfied with services provided by their local hospitals which is good, but includes opportunities for further improvement. The City Council, with support from other public sector partners through the City Executive Board, is obliged to carry out the Place Survey as part of a statutory national survey every two years.

- In the 2011 NHS national patient survey, 82% of patients rated the care they received from Sheffield Teaching Hospitals NHS Foundation Trust as good or excellent. 89% felt they were treated with respect and 79% felt they were involved as much as they wanted to be in their care. However there were other areas of service provision, experience and communication which scored less favourably and so we cannot be complacent about our aspiration to be the Provider of Choice for patients. In addition when surveyed about NHS services, perceptions of non-NHS users are generally lower around quality than the experiences of NHS users, supporting the need to continue to reinforce the reputation of Sheffield Teaching Hospitals Foundation NHS Trust with the general public as well as patients.

- A proactive approach to working with the national and local media has manifested in a substantial increase in media coverage in the last two years. In 2010 the organisation featured in 570 media articles. This has increased in 2011 to 860 and of these the majority were positive in tone and a significant number appeared in the national media. Continued strong media relationships will be critical as we try to explain and engage the public and partners in the challenges and opportunities ahead.

- Informal feedback from external stakeholders has identified the need for more consistent and proactive approach to sharing information and involvement.

A duty to communicate, consult and involve

A number of pieces of legislation influence the nature of the communications and engagement strategy, including the NHS Constitution, the Civil Contingencies Act (2004) and the NHS Act (2006). We have a statutory duty, under the NHS Act (section 242 of the 2006 Act), to involve and consult the public on planning services, developing and considering proposals for changes in service provision and decisions that will affect how those services operate, as outlined in ‘Real Engagement’. We also have responsibilities under the NHS Constitution. We are required by law to take account of the Constitution in our decisions and actions. The Civil Contingencies Act (2004) sets out a responsibility to warn and inform the public around a major incident or emergency situation; and Section 242 (2) of the NHS Act (2006) sets out a statutory duty on all NHS organisations to involve and consult people on the planning, consideration and decision making around service changes.
3. Purpose, aims and objectives

Sheffield Teaching Hospitals NHS Foundation Trust’s vision is:

To be recognised as the best provider of health care, clinical research and education in the UK and a strong contributor to the aspiration of Sheffield to be a vibrant and healthy city region.

The principal aims to achieve the vision are:

• Deliver the best clinical outcomes
• Provide patient centred services
• Employ caring and cared for staff
• Spend public money wisely
• Deliver excellent research, education and innovation

Delivery of these objectives will require effective communication and engagement with patients, staff and partners. As the structure and processes of the NHS change to enable greater transparency of clinical outcomes, increased competition and patient choice, the need for an excellent reputation among patients, staff and purchasers also grows.

Therefore the aim of the communications and engagement strategy is:

To establish and embed a vibrant communications and engagement approach that supports Sheffield Teaching Hospitals NHS Foundation Trust to achieve its corporate objectives, goals and vision.

Effective implementation of the strategy will ensure Sheffield Teaching Hospitals NHS Foundation Trust continues to be trusted by patients to deliver their care and has a good reputation to ensure patient and commissioner confidence and choice.

It will also support the Trust’s commitment to have caring and cared for staff by developing a dynamic culture of staff engagement supported by an effective two way communication model at directorate/department level, and horizontally across the Trust.

The principal aims of the Trust’s communications strategy for 2012-2017 are to:

• Ensure patients are well informed about the quality, safety and availability of clinical services delivered by STH so that they are empowered to make an informed choice about what treatment/care they chose to have and who they want to provide it.
• Ensure access to information is given the same priority as enabling people to access our services.
• Create a dynamic culture of staff engagement supported by two way effective communications at directorate/department level and horizontally across the Trust.
• Embrace patient and public engagement as standard practice as outlined in the Patient and Public Involvement strategy.
• Bring about deep understanding of the Trust’s vision, values and objectives to support patient care, staff well being and the efficient use of resources.

• Ensure all staff are fully engaged in the Trust’s commitment to deliver high quality safe care, by keeping them informed about what is changing, why change is needed and most importantly involving them in the decisions that affect them.

• Ensure GPs, Commissioners and Regulators are well informed about the services delivered by STH, and that the Trust is clearly aware of the priorities and requirements of those who refer to, purchase or regulate acute care.

• Develop the brand and reputation of the Trust through proactive and reactive media management, marketing, high quality patient information, and effective engagement so that staff, members and patients want to be ambassadors of the Organisation.

• Ensure patients, staff, partners, stakeholders, members, governors and the public understand Sheffield Teaching Hospitals NHS Foundation Trust vision, and the part they can/need to play in achieving it.

• Nurture new and existing relationships to enable partners be engaged and involved in transforming services, delivering care and shaping future developments.

• Ensure STH plays an active part in the local community leading debate about the healthcare it delivers, the strategy for healthcare in Sheffield and South Yorkshire, health promotion and illness prevention.

• Recruit and retain a vibrant, representative and active membership for the Trust.

We will do this by:

• Building credibility and trust in Sheffield Teaching Hospitals NHS Foundation Trust;

• Being proactive and consistent in all our communications;

• Improve the quality and accessibility of all our information;

• Engaging stakeholders in the required transformation of health services and ensuring their views are reflected in our decisions;

• Raising awareness and understanding of health and wellbeing to improve health and change behaviour where needed;

• Encouraging and developing channels which promote two-way internal communications which flow vertically and horizontally through the Trust;

• Improving partnership working to ensure a co-ordinated approach in everything we do;

• Improving the communications and marketing capability and capacity of staff across the organisation.
We will ensure consistent and simple messages flow through all engagements and all communications channels. Those common messages will include:

- Better, safer, high quality care – keeping the quality and safety of patient care as our priority above all else;
- Making sure people feel valued, treating them with care and compassion;
- Treating our patients and our staff with respect and dignity;
- We aim to provide more care closer to home, wherever it is clinically sensible to do so;
- Developing existing and introducing new services where there is a demand and it is financially viable;
- Being a sustainable and vibrant Foundation Trust with greater influence for the public of Sheffield over how the Trust is run and the services it provides.

Gathering insight forms a key tenet of the communications and engagement strategy to shape the direction of travel. Our aim is to gather insight through a co-ordinated approach and to feedback to people we engage with so they can see how their input has informed our actions.

The communication strategy sits alongside Sheffield Teaching Hospitals NHS Foundation Trust’s Patient Experience and Public Involvement Strategy – ‘Listening, Talking, Improving’ (2009) to ensure an integrated approach that will create an environment for active two-way dialogue and involvement.

It also takes into account the communication and engagement plans of Commissioners and our local partners including the University of Sheffield and Sheffield Hallam University along with the City Council and the Sheffield Executive.
4. Implementing the strategy

The following sections set out the approach we will take in the following key areas in delivering the communications and engagement strategy:

- Understanding our audiences
- Staff communication and engagement
- Patient and public communication and engagement
- Reputation, brand reinforcement and marketing
- Media relations
- Online and digital communication
- Member recruitment and engagement
- Supporting health promotion and illness prevention
- Emergency preparedness and crisis communications support

Understanding our audiences

The Trust has a large number of key relationships, not least its patients and the community for which it provides services, as well as those bodies responsible for commissioning, purchasing or regulating acute and community health care services.

The Trust will need to understand the needs and motivations of all of its audiences and stakeholder groups to ensure it can adapt messages, communication channels and engagement activities to a varied level of knowledge and understanding.

In engaging with the public, patients, staff and members, the Trust will also take account of the needs of individuals and groups who may find it more difficult to engage with the Trust or the NHS, and whose voices are often least well heard. This may be groups defined by: geography, ethnic group, sexual orientation, disability, age, social status, relative poverty or language.

The engagement process undertaken during development of the Trust's corporate strategy underlines the importance of opening channels of dialogue and senior leader visibility in the community. A programme to communicate and engage effectively with external stakeholders and partners is an integral part of the communication and engagement strategy.

Key priorities in the development of external stakeholder communication and engagement will include:

- An analysis of stakeholder’s communication and engagement preferences so that activity can be targeted most effectively. This will support Directorates in their efforts to embrace public and patient engagement in service development/transformation planning/implementation.

- In conjunction with the PPI team establish a schedule of annual events whereby the Trust can share information and engage with its local community.

- Provide clear and balanced information for stakeholders to enable them to participate fully in the strategic development of health and social care services.

- Ensure a regular schedule of meetings/briefings with key stakeholders including Commissioners, other health and social care providers, local MPs
Sheffield City Council’s Overview and Scrutiny Committee members, Sheffield LINK, Sheffield Executive, our partner Universities and Colleges and the Charity and volunteer organisations who support the Trust.

- Strong media relations to enable the wider public to have access to information and debate.

**Staff communication and engagement**

Research has shown that when employees are engaged they feel positive about the organisation and this can lead to improvements in the quality of working lives and enhanced performance. However, employee engagement goes beyond job satisfaction and is not simply motivation. Employee engagement is everyone’s responsibility and positive contributions can be made throughout the Trust to enhance it.

Set against the context outlined earlier in this document, staff engagement is critical if we are to deliver the corporate vision and aims. In particular the significant transformation agenda facing the Trust will require levels of staff engagement not previously experienced.

*The Workplace Communication Consultancy (2005) reported that statistics show “90% of those who are kept fully informed are motivated to deliver added value; while of those who are kept in the dark almost 80% are not”.*

A great deal has been learnt from the Trust’s Lets Talk engagement initiative which was launched in 2010 along with the research conducted in 2011 with clinical consultants about what they require to enable them to be more engaged in the issues and aspirations of the Trust. The consultation process to develop the Trust’s corporate strategy also provided valuable discussion and feedback with the highest ever level of staff involvement.

As a consequence of this insight staff communication and engagement is a key priority for the Trust and three work streams are already in place to deliver improvements in the following areas:

- The staff journey
- Staff engagement
- Staff health and well being

There are action plans in place for each work stream and progress will be measured using a set of defined metrics which include key indicators in the NHS national staff survey and annual internal communications audits.

A group of senior managers and representatives of staff are also engaging in a piece of work to redefine partnership working in the Trust. The outcomes of this work will feed into the development of the Organisational Development Strategy and will be a key component of the ongoing communications and engagement strategy implementation.

Effective internal two way communications is pivotal to supporting a dynamic culture of staff engagement. As such a full review of communication channels, tactics and flow will be carried out to inform future developments. Some of the basics of good internal communication have already been put in place, with the introduction of Team Brief, the insistence that all staff have a regular appraisal (PDR), regular team meetings and the introduction and development of small-group engagement events such as conversations with the Chief Executive and Lets Talk sessions. However
there is evidence from the internal communications audit that there is a clear need to revitalise staff communications. The audit attracted just over 3,000 respondents which equates to one in every five employees. The findings were encouraging but also outlined some clear developments and a direction of travel for internal communications over the coming years:

Significant findings include:

- 74% of staff feel well or adequately informed about Trust wide issues. However while there is a high level of staff who feel well informed, there is a lower level of staff who feel they are involved or engaged in decisions which affect the Trust or their department. This is also borne out in the results of the 2011 NHS staff survey although a significant improvement has been achieved compared to the 2010 NHS staff survey results on staff engagement.

- 60% of staff feel well or adequately informed about their own department/ward issues

- 93% of staff who responded said they found the information they received very or somewhat useful

- 90% of staff who responded accessed email or the internet at least once a day suggesting e communications is an effective channel for information sharing and engagement opportunities.

- The most common source of information for staff is the email bulletins from the Communications team. The second most common source is the individual member of staff’s line/department manager. There is a clear preference for the main information channel of information to be line managers and team meetings suggesting there is a desire for more face to face communication. Supporting this is the survey finding that 80% of respondents would welcome a ‘Back to the Floor’ programme of engagement sessions between front line staff and senior managers to gain mutual understanding of the issues and opportunities being faced.

The drive will be for central communication and senior leader visibility to be supportive of a vibrant communications model at divisional and departmental level, and horizontally across the organisation.

Building on the insight above, key priorities in the development of internal communications will include:

- Review and reinforce a multi-channel approach enabling staff to raise concerns, complaints, new ideas and innovations with a robust feedback loop. This work will link with the developments outlined in the Trust’s IT strategy.

- Review the coverage and quality of the Team Brief process ensuring that it becomes a comprehensive, timely conversation throughout the organisation, with effective feedback and ownership of the Brief at every level of leadership.

- Establish a network of communications champions in each Directorate as part of the Let’s Talk initiative across the Trust to carry and reinforce messages and ensure staff feel able to communicate concerns, new ideas and innovations.

- Build upon the staff conversations lead by the Chief Executive during 2011 to establish bi-annual open staff meetings to meet senior leaders face-to-face,
and support ongoing initiatives, such as the Quality and Efficiency programme, Patient Safety and Research and Innovation.

- Review and redefine the email distribution lists to enable more accurate targeting of messages.
- Develop and implement a much-improved intranet which will be the main news carrier in the Trust and a primary channel for staff engagement both horizontally and vertically across the Trust.
- In all areas of internal communications, expand the use of new media in staff communications (video-casts, web chats, etc) moving towards an ‘on-line first’ ethos which was highlighted as a preference in the 2012 internal communications audit – ‘Getting Communications Right for you.’

However, there must also be recognition that communication cannot be a central function alone. It must be a two way process and everyone must recognise their responsibility to communicate within and across their teams. Therefore communication skills and responsibilities will become an integral part of appraisal and personal development plans for all staff.

**Patient and public engagement**

We need to involve, engage and communicate with patients and the public to help shape our strategic direction and we need to listen and act on what they tell us in order to continually improve care and services.

This translates into engaging with patients and the public to foster and represent patients’ and public interest, to create structures for the public to have a tangible input into strategic decision making and to support and implement patient choice.

The Trust’s Patient and Public Involvement strategy – Listening, Talking and Involving outlines the approach and developments required to achieve our vision to see PPI embedded at all levels and in all aspects of our work.

This means that we will:

- Ensure patients and their relatives always have the opportunity to tell us about their experience of our services.
- Ensure our staff seek and follow up feedback from patients as an integral part of their role.
- Ensure our staff integrates PPI into service planning and decision making about the services and facilities we provide.
- Involve appropriate staff, user groups, partner and other organisations, including the voluntary sector, in the planning of changes to our services.
- Demonstrate improvements to services as a result of continuing feedback from patients and the public.

This will:

- Ensure listening and responding to patients and the public is integrated into all aspects of our work
- Ensure follow up action is taken.
- Ensure that patients and the public know the actions we take as a result of their comments.
- Enable staff within the Trust who have specialist roles in PPI to work effectively together.
- Link patient and public involvement (PPI) activities with associated Trust work, including, quality initiatives, governance, audit, marketing and commissioning.

Reputation, brand reinforcement, and marketing

A distinct part of communication and engagement activities over the next five years will be to proactively increase marketing of the Trust’s activities, services and reputation. For existing and potential patients as well as commissioners, Sheffield Teaching Hospitals NHS Foundation Trust brand should be short hand for safe, high quality health care delivered with compassion. Our brand and what it stands for should be regarded as a precious and protected asset. Therefore this strategy aims to develop and protect the brand through proactive and reactive media relations, marketing activity, high quality patient information, and effective engagement so that staff, members and patients want to be Ambassadors of the Organisation.

Media relations

Sheffield Teaching Hospitals NHS Foundation Trust has a high profile in the national and local media which is important in order to sustain our reputation for being a provider of high quality care, patient experience and a leader in teaching, research and innovation.

As an NHS organisation we are accountable to the public and need to work with the media to explain our role and be accountable. We also need the media - it is a valuable way of reaching people, raising awareness and encouraging healthier lifestyles. For this reason alone, it is crucial that good media relations form one of the core principles of our communications and engagement strategy.

The media are both an audience and a communications vehicle with the capacity to bolster or damage a reputation. By working on a basis of mutual professional respect, we need to continue to build our relationship of trust with the media; not only feeding a steady stream of positive news stories but also owning up to mistakes if things have gone wrong. This is achieved by working with the media, responding quickly to media enquiries, getting back to journalists when we say we will and being available around the clock, 365 days a year. It is about going the extra mile to help a journalist with their inquiry by finding an answer to a question or a spokesperson to make a comment on an issue or topic.

It is important that the Trust continues to develop, maintain and nurture an open and constructive relationship with the media (digital and online) and therefore we will:

- Continue to nurture relationships that can optimise coverage of positive stories and ensure balanced reporting of those issues which are less favourable.
- A new system of media evaluation will be put in place so that changes in tone of coverage can be measured and analysed
• Develop an online press office to complement the current communications team service.

• Become a trusted source of ‘healthcare experts’ for the media to call upon.

• Review and expand the number of trained spokespeople who are confident in working with the media.

• Have robust systems in place to provide crisis communications support quickly and efficiently if required.

**Online communication**

Online communication plays a major part in the promotion and management of the Trust’s reputation. It is a source of information for patients, public, staff, stakeholders, members and potential employees. For many sections of the community it is the communications medium of choice, and with the convergence of mobile phones, digital communication and social networking it is in some cases the only form of communication. It is important to recognise that the internet and social media is also increasingly becoming used as a news source in itself, in some cases replacing more traditional print and broadcast media.

In 2010 the Trust re-launched its internet site with a greatly expanded directory of services and information for external and internal users. The site has been upgraded to meet new accessibility standards and is enhanced with ‘talking text’ and language translation options. However we are a long way from the interactive conversation with every patient, employee and member that should be our aspiration. At the same time we need to explore further on-line teaching facilities which enable our clinicians to build on the extremely strong reputation for the hospital’s services and expertise nationally and internationally.

A Trust presence on social networking sites such as Twitter and Facebook is in place but a digital media strategy will set out how the Trust can take full advantage of this media. Video, web and podcasts, blogs and web chats are already common place in large organisations. There is already significant interest within Directorates in developing this technology and this will need to be further explored and exploited in conjunction with the developments outlined in the Trust’s IT strategy. The introduction of a wireless network across the Trust will be critical.

Online communications also demands a change of attitude which can only really be achieved if our communications ethos is ‘on-line first’, developing our communications for an online world and then considering what we might need to do offline.

Key priorities in the development of new media will include:

• Where appropriate and beneficial we will develop the Trust’s presence on social networking sites (for example Facebook, Twitter, MySpace).

• Development of a digital communications strategy to expand the use of, smartphone applications, video-casts and other web based tools as part of our communications armoury.

• Supporting the development of screen-based information channels in public areas.
• Ensuring multiple channels available for interactive feedback from patients about all aspects of their care, maximising return rates and building credible data at ward or clinician level.

• Developing the Trust’s internet and intranet sites to keep pace with information demands and interactive functionality.

Marketing

The Chartered Institute of Marketing defines marketing as:

“The strategic business function that creates value by stimulating, facilitating and fulfilling customer demand. It does this by building brands, nurturing innovation, developing relationships, creating good customer service and communicating benefits. With a customer-centric view, marketing brings positive return on investment, satisfies stakeholders and contributes to positive behavioural change and a sustainable business future.”

This definition forms the basis of Sheffield Teaching Hospitals NHS Foundation Trust’s approach to marketing. Experiential marketing allows customers to engage and interact with brands, products, and services in sensory ways that provide the icing on the cake of providing information. Personal experiences help people connect to a brand and make intelligent and informed purchasing decisions. The term "Experiential Marketing" refers to actual customer experiences with the brand/product/service that drive choice and increase brand image and awareness. It’s the difference between telling people about features of a product or service and letting them experience the benefits for themselves. When done right, it’s the most powerful tool out there to win brand loyalty.

A marketing strategy will be developed aligned to the communication and engagement strategy. It will be focussed upon developing the infrastructure, marketing knowledge and access to insight necessary to support patient choice, and deliver service improvement or capacity where there is demand and it is financially viable to do.

The marketing strategy will aim to provide the framework, tools and approaches to inform the Trust on where it needs to improve its existing service delivery, focus on new service development opportunities or build relationships with patients, GPs and Commissioners, partners to ensure we align service offering with need and demand. It will also support reputation reinforcement and brand offering.

The strategy will focus on developing the overall ability and processes of the Trust to use marketing to:

• Improve patient care;
• Improve the experience of those who commission or refer users to our services;
• Promote the Trust, so that we are seen as the provider of choice;
• Provide a more integrated framework for all those activities that occur within the Trust and to develop services to meet the needs of the diverse community we serve;
• Maximise the impact of our research and innovation links.
• Realise additional resource for reinvestment in NHS services locally.

The Trust Marketing Strategy will involve everyone from Board members through to individual clinicians. However particular emphasis will be placed on developing marketing expertise and skills to support Directorates deliver their service proposals.
for 2012-2017. There will be a clear framework within which marketing occurs which will produce clearer and crisper service opportunities.

The strategy will focus upon providing clear analysis and insight for Clinical Directorates:

- A clear process which puts marketing at the front end of the integrated business planning (IBP) process;
- A marketing intelligence database will be developed;
- The Senior Leaders Development programme will be key in delivering the marketing skills that people need, to undertake the task effectively.

As well as having the marketing approach and structures embedded within the Trust, we will need to invest time in understanding new Commissioning structures and forging new relationships with Commissioners, GPs and other business partners.

**Patient information**

The quality, transparency and accessibility of information for patients are a key enabler for successful engagement and also in influencing patient choice. Therefore access to information about the Trust, and access to the means for engaging effectively with the Trust will be given the same priority as enabling people to access our services. Increasingly patients want access to information 24hrs a day, 7 days a week and in a way which is convenient to them. Their expectations of the range and quality of information which is readily available is also growing, particularly in terms of clinical outcomes, safety, choice of treatments/care or indeed data about individual clinicians.

The latest innovations in web and smart phone technology is helping patients and the public to find and use NHS services, manage conditions and make better lifestyle choices in a way that is very convenient for them. This is no longer just the domain of
a younger generation either. For example, the number of people over 65 actively using the Internet has increased by more than 55 percent, from 11.3 million active users in November 2004 to 17.5 million in November 2009. Therefore the Trust needs to be ahead of the pace of change in order to be ready to accommodate patient's expectations and changing ways of delivering healthcare and advice.

Accessible, credible and relevant patient information needs to be seen in the context of greater patient choice, greater competition in the delivery of health services, and as a key component in quality and financial measures such as re-admissions.

Key priorities in the development of patient information will include:

- Develop a web based documents library to make patient information leaflets accessible on-line, and move to an ethos of 'on-line first' where we consider how to use on-line resources to deliver information and transfer to hard-copy where necessary
- Research and pilot the development of video-based and smart phone applications for appropriate patient information.
- Expand the publication and promotion of key information on clinical outcomes, safety, patient experience, quality of care and specialist services beyond the current communication outlets.

**Celebrating success**

Recognising the success of individuals, teams and services plays an important part in raising morale and developing a culture in which employees can feel valued and acknowledged for their work and achievement. The Thank You Awards have now established themselves as a key event in the Trust's calendar, with over 150 nominations in 2011 and over 400 staff being recognised for their service above and beyond the call of duty. The annual Long Service Awards ceremony is also an important occasion to recognise people’s contribution to the Trust. However, celebrating success needs to happen day-in-day-out at a local level; from a simple thank-you to more formal recognition and rewards from managers. This will continue to be developed using insight from the Let’s Talk initiatives and other staff feedback.

Celebrating success also needs to be strategic and externally-focused. Sharing success more widely on a local, national and international stage will contribute to reinforcing a reputation for expertise and high quality care, with the resultant impact of being in a stronger position to retain and attract patients and a high calibre workforce. The Trust has had considerable success on a national and international scale and new opportunities to capitalise on success must continue to be maximised through public relations activity.

Key priorities for development will include:

- Support and encourage leaders to explore and implement local ways to ensure that success is celebrated
- Work to secure the placement of stories of innovation/good practice in national and international media and professional journals (digital and traditional)
- Encourage submissions for external and internal awards schemes
• Develop an annual calendar of events to promote services and facilities.

Member recruitment and engagement

The recruitment of and engagement with a growing, enthusiastic and well-informed membership basis is a key element of the communications and engagement strategy. The Membership Recruitment and Retention Strategy will therefore be reviewed to ensure existing and potential members are motivated to play an active part in Sheffield Teaching Hospitals NHS Foundation Trust and the development of local health services.

The Communicating Organisation

The drive for continuous communications and engagement improvement requires unprecedented leadership at every level of the organisation. The importance of developing and supporting leaders to adopt effective communication and engagement behaviours/practices will be an essential part of delivering the Trust’s corporate objectives and meeting patient and staff expectations. There is strong commitment from the Board of Directors to ensure the delivery of the corporate strategy and the Trust’s Organisational Development strategy places an emphasis on providing the skills and environment in which leaders can learn and practice excellence in communications and engagement.

Supporting health promotion and illness prevention

The Trust will continue to use its growing range of preventative screening and advice services, to encourage participation and raise awareness and understanding of disease and to encourage good health and well being. Effective communications and social marketing campaigns will be vital to assist this objective. In partnership with Public Health professionals, local patient support groups, national campaign groups, we will support key health promotion and illness prevention initiatives by:

• Providing opportunities for promotion of screening and awareness programmes in our hospitals, community health settings and at public events
• Using national awareness campaigns to lead local activity
• Identifying case studies to support Trust, Public Health and National health campaign groups news stories and awareness campaigns
• Use behaviour change research and best practice to inform local social marketing campaigns.

Crisis communications

In the event of a major incident effective and responsive communications will impact directly on public perception and confidence in Sheffield Teaching Hospitals NHS Foundation Trust and the NHS. Communications plans for such events need to be adaptable to take account of as broad a range of scenarios as possible, although no two incidents will ever be the same. A communications major incident action plan forms part of the Trust’s major incident plan. It will be reviewed annually to ensure it is fit for purpose and able to respond to a fast-moving media environment. Mechanisms for effective internal communications in the event of a major incident will be tested as part of the Trust’s contingency planning exercises. Communications with, and roles of, partner agencies and stakeholders will also be reviewed and
confirmed as part of the action plan. Where possible, existing communications mechanisms will be utilised to ensure consistency and work will be undertaken to identify any gaps. A 24/7 communications on-call arrangement is in place to address issues which arise out of office hours and to support on-call managers.
5. Ownership and Responsibilities

All staff

- Ensure public and patients are kept informed of developments within Sheffield Teaching Hospitals NHS Foundation Trust.
- Take personal responsibility for being well informed by seeking information on relevant issues through the sources available, and participating fully in Team Brief/Team meetings.
- Share relevant information from meetings and other forums with colleagues
- Read staff bulletins and share with staff who don’t have access to e-mail
- Take an active role in opportunities to engage in corporate and departmental decision making and provide feedback, ideas or suggestions.
- Adhere to the Trust’s media protocol

Clinical staff

- Provide clear and understandable information to patients and their carers about their condition
- Clearly explain treatment options with patients and their carers ensuring they feel involved in decisions about their care
- Ensure consistency of information throughout the pathway of care
- Ensure other healthcare professionals involved in the care of a patient are provided with all relevant information

Executive management team and senior managers

- Ensure that the aims and objectives of the communications strategy are embedded in all aspects of their work
- Communicate decisions clearly and quickly to allow the cascade of information
- Lead and support cultural development within their area of responsibility so communications is regarded as an important and legitimate source of investment of management time and resources
- Role-model a transparent approach to two-way communication, being clear about what decisions are being made, when and for what reason
- Actively encourage staff involvement.
- Adhere to the Trust’s media protocol
Trust Communications team

- Implement, and monitor progress against the communications strategy using insight, best practice and evaluation
- Ensure effective processes are in place to allow consistent distribution of information across the Trust and outside the organisation
- Monitor internal communications and share areas of good practice
- Provide the advice and expertise needed to facilitate good communications and engagement
- Ensure information to be shared is clear, accurate and accessible
- Review the communications strategy annually
- Lead on the development of an ‘online first’ ethos for the Trust’s communications
- Adhere to the Trust’s media protocol and operate a 24hr, 7 day a week media liaison service
- Develop and implement a marketing strategy to support Trust wide and Directorates objectives. Provide marketing advice and technical expertise to Directorates.

Trust IT Service

- Provide the technical skills and expertise needed to make the most of electronic communications channels and the ability to encourage staff engagement using two way communication channels.

Patient and public involvement (PPI) lead

- Develop engagement/consultation plans in conjunction with the Communications team
- Oversee delivery of the Trust’s Patient Experience and Public Involvement Strategy.

Employee representatives (e.g. staff side leads)

- Ensure management team members receive feedback on staff views
- Feedback information to their members
- Encourage staff to participate in all relevant communications channels and keep themselves well-informed
- Respect the Trust’s media protocol
6. Benefits
Delivery of the communication and engagement strategy will help ensure Sheffield Teaching Hospitals NHS Foundation Trust is trusted by patients to deliver their care, has a good reputation to ensure patient and commissioner confidence and motivates staff to deliver their best for patients.

7. Risks
- Poor communication and engagement could adversely impact on the standard of clinical care provided and subsequent outcomes. This in turn will risk regulatory sanctions.
- Poor communication will risk patient and staff confidence, satisfaction and experience which lead to poor operational and financial performance.
- Poor reputation management will influence Commissioners and the public when it comes to viewing Sheffield Teaching Hospitals NHS Foundation Trust as the Provider of Choice.
- Poor staff engagement has been proven to be a contributory factor to staff health and well being, productivity and sickness rates.

8. Resources
Sheffield Teaching Hospitals NHS Foundation Trust has dedicated communications and patient and public involvement (PPI) teams but will need to invest in additional marketing and digital communications expertise in order to implement this strategy to maximum effect. The work outlined in this document and associated action plans will be led by the communications team with support in appropriate areas from the PPI team and other teams from across the Trust and partner organisations. Budgets will be identified to support pieces of work. Regular personal development plans and reviews will ensure that the teams have the appropriate skills in place to deliver the strategy.

However this strategy cannot be successfully delivered by one team alone. Communications and engagement are the responsibility of the whole organisation. To reflect this, further training will be made available to staff as part of the organisation’s training plan and one-off training sessions will be organised as necessary.

We will work with communications and engagement teams from other organisations to ensure that we present a co-ordinated approach to our work across the city, maximise opportunities and prevent duplication. This will help us to make sure that we do not constantly contact stakeholders (including patients and the public) with the same questions or information but from different organisations.

9. Measurement – how will we know if our strategy is successful?
If we are to ensure Sheffield Teaching Hospitals NHS Foundation Trust communications and engagement work is evidence based and meets the needs of our key audiences, we need to continually evaluate and measure our activity and progress. A defined set of performance metrics will be developed.

Our key performance indicators will be:
Changes to care and services as a result of our insight gathering – we will track the impact of patient and public voices in our service development/ transformation work and through performance management systems.

Shifts in activity – if our work is successful, we will be able to track a shift in the behaviour of patients and the local community, such as an increase in self care connected to the Choose Well and Right Care, Right Place, Right Time programme.

Increase in referrals and improved financial performance where funding and capacity allows.

Positive reputation and brand recognition with the public and stakeholders – via polling, surveys and media evaluation we will look for year on year improvements to their perception of our reputation.

Public awareness of Sheffield Teaching Hospitals NHS Foundation Trust and its role – via polling, surveys and focus groups will look for year on year improvement in public awareness.

Return on investment for our work – we will align costs of communications and engagement activities with value for money (aligning this with shifts in activity wherever possible).

Involving seldom heard groups – we will track who we are talking with and listening to by project, campaign and engagement activity. This will help us to identify gaps and ensure we are continually capturing views and impact of our work.

Staff satisfaction and engagement – our work with staff, to inform and engage will be measured through both our own internal audits and the annual independently run NHS staff survey.

It is proposed that the following methods will be applied to assess outcomes, using some or all of them as they lend themselves most appropriately to different aspects of the strategy:

- Patient feedback gathered and reported in the quarterly Patient Experience Report
- Feedback from staff and stakeholders – including formal surveys and Let’s Talk events
- Media evaluation
- Annual audit of internal communications
- Feedback through the communications champion network
- Participation in open forums and other staff engagement opportunities
- Trust membership registrations
- Social networking activity analysis

This strategy will be reviewed annually. It is essential for the success of this strategy to have buy-in from staff across the organisation and other stakeholders. In order to
do this we will:

- develop an awareness-raising programme to raise the profile and implications of the strategy;
- agree a cycle of reporting to the Executive Team and Board on progress against the action plan; and
- integrate the strategy into the leadership development programme and induction.

10. Conclusion

The delivery of this communication and engagement strategy will help ensure Sheffield Teaching Hospitals NHS Foundation Trust continues to be trusted by patients to deliver their care, has a good reputation to ensure patient and commissioner confidence and provides patients the best possible experience of care.

However the success of this strategy is dependent on everyone who works for Sheffield Teaching Hospitals NHS Foundation Trust. Day-to-day communication and engagement with patients, carers and the public creates a lasting impression about our organisation. All staff share the responsibility for ensuring that the impression they leave is a good one.
### SWOT analysis of marketing potential

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Strong clinical services;</td>
<td>• Lack of dedicated Commercial Unit/team</td>
</tr>
<tr>
<td>• Strong clinical experience and knowledge of the sector;</td>
<td>• No systematic marketing approach currently in place;</td>
</tr>
<tr>
<td>• Main specialist provider for many services</td>
<td>• Limited marketing experience within the Trust overall;</td>
</tr>
<tr>
<td>• Established good reputation and high rate of patient satisfaction;</td>
<td>• Some Corporate processes still hinder agile responses to service</td>
</tr>
<tr>
<td>• University linkages and research base;</td>
<td>opportunities.</td>
</tr>
<tr>
<td>• Strong communication function</td>
<td>• Limited tender response experience</td>
</tr>
<tr>
<td>• Strong analytical skills within many Directorate Divisions;</td>
<td>• Scale and appropriateness of capacity in some areas</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Strong Directorate/Care Group structures and plans to engage with.</td>
<td>• Lack of understanding by Directorates around marketing may lead to</td>
</tr>
<tr>
<td>• Integrated Business Planning processes now part of the routine;</td>
<td>resistance to adopting the Strategy, as it may be seen as non-</td>
</tr>
<tr>
<td>• Reconfiguration of services and Right First Time partnership which will</td>
<td>patient related and more aligned to ‘business’ language.</td>
</tr>
<tr>
<td>allow changes to type and amount of capacity/skills;</td>
<td>• Other providers</td>
</tr>
<tr>
<td>• Partnership with others has improved knowledge and widened perspective</td>
<td>• Political change</td>
</tr>
<tr>
<td>• Growing understanding of the role of Corporate functions in supporting</td>
<td></td>
</tr>
<tr>
<td>the Operational Divisions</td>
<td></td>
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<tr>
<td>• Senior Leaders Development programmes provide a framework to widen and</td>
<td></td>
</tr>
<tr>
<td>develop marketing skills</td>
<td></td>
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<tr>
<td>• The CLAHRC, D4D and Academic Health Sciences Network provides new</td>
<td></td>
</tr>
<tr>
<td>opportunities for developing new services to meet user needs</td>
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</tr>
</tbody>
</table>
Appendix 2

<table>
<thead>
<tr>
<th><strong>Strengths</strong></th>
<th><strong>Weaknesses</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strong internal communication function</td>
<td>Brand recognition is continually improving but limited resources will always limit impact</td>
</tr>
<tr>
<td>Effective joined up working, both internally across strategy, HR, communications and PPI teams and externally, with communications and engagement colleagues in partner organisations</td>
<td>Public view of public services – lack of trust in some messages</td>
</tr>
<tr>
<td>Strong brand recognition</td>
<td>Negative stories at national and local level will impact on confidence and trust in the NHS and STH.</td>
</tr>
<tr>
<td>Substantially increased favourable media coverage (traditional and digital).</td>
<td>Capacity when matched against demand and projected need for time intensive campaigns and engagement activities</td>
</tr>
<tr>
<td>Good relationships key stakeholders</td>
<td>Some channels of communications need reviewing immediately e.g. intranet and e communications</td>
</tr>
<tr>
<td>A clear organisational strategy - Achieving Balanced Health – has been revised to reflect the changing economic climate</td>
<td>Lack of consistent approach to communications and engagement across the organisation</td>
</tr>
<tr>
<td>A clear organisational strategy</td>
<td>Lack of consistent standard of communications and engagement across the organisation</td>
</tr>
<tr>
<td>A strong organisational success story to tell.</td>
<td></td>
</tr>
<tr>
<td>Communications and engagement buy-in and understanding of its potential from Governors, the Board of Directors and Executive Team.</td>
<td></td>
</tr>
<tr>
<td>Strengthened understanding from stakeholders about the successes to date and challenges ahead</td>
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<tr>
<td>Well used communications and PPI services</td>
<td></td>
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<tr>
<td>There is a strong sense of organisational drive and determination</td>
<td></td>
</tr>
<tr>
<td>Regular contact and dialogue with local politicians</td>
<td></td>
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<tr>
<td>Strengthened communications and engagement evaluation mechanisms are resulting in better data intelligence – resulting in more tailored approaches</td>
<td></td>
</tr>
<tr>
<td>Some well established communications and engagement channels</td>
<td></td>
</tr>
<tr>
<td>Areas of good practice around communications and engagement</td>
<td></td>
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<tr>
<td>Good media profile</td>
<td></td>
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<tr>
<td>Good relationships with many key stakeholders</td>
<td></td>
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<tr>
<td>Good satisfaction rates from patients and staff in</td>
<td></td>
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</table>
recent surveys
Strong reputation and brand focused on high quality care and patient experience.

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>To be trusted and therefore our public and stakeholders want to engage and communicate with us</td>
<td>Public sector projected funding will have an impact on communications and engagement resources and planned work schedule</td>
</tr>
<tr>
<td>To ensure continued effective signposting</td>
<td>Public perception of NHS reforms</td>
</tr>
<tr>
<td>To link communications with delivery – changing people’s health behaviour with targeted social marketing campaigns</td>
<td>Changes to the political environment</td>
</tr>
<tr>
<td>To raise expectations and awareness of healthcare services in Sheffield</td>
<td>Inability to keep pace with technological developments in online communications.</td>
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<tr>
<td>To deliver effective campaigns which affect behavioural change</td>
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<tr>
<td>To strengthen brand recognition</td>
<td></td>
</tr>
<tr>
<td>To raise awareness of Sheffield Teaching Hospitals NHS Foundation Trust’s clinical outcomes and performance</td>
<td></td>
</tr>
<tr>
<td>To continue to develop ways of working with communications and engagement teams in partner organisations, adding value to city wide relationships</td>
<td></td>
</tr>
<tr>
<td>To be recognised as a leader in NHS communications and engagement</td>
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</tbody>
</table>
## Appendix 3

### Stakeholder analysis and map

**Stakeholder communications and engagement analysis**

<table>
<thead>
<tr>
<th>Stakeholder Group</th>
<th>Strategic Direction</th>
<th>Finance</th>
<th>Performance</th>
<th>Safety</th>
<th>Patient experience</th>
<th>Public health</th>
<th>Service changes</th>
<th>Service info</th>
<th>Governance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public and Patients</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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</tbody>
</table>

- STH website, leaflets, information, updates, feedback mechanisms, Board papers, documents etc.)
- Media coverage
- GPs or other health/social care professionals
- Board meetings from 2012
- Public health campaigns
- Social marketing campaigns
- Information leaflets (electronic and paper format, accessible for all audiences)
- Patient networks
- Events
- NHS Choices
- Governors (one to one contact, recruitment events, Good Health Magazine, Governors Council meetings)
- Partner communications/media coverage

Frequency:
- On-going
- Monthly
- Ad hoc
- Various
- Annual/ ad hoc
- Ongoing
<table>
<thead>
<tr>
<th>Stakeholder Group</th>
<th>Primary Interest Areas</th>
<th>Methods of engagement and communications</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strategic Direction</td>
<td>Induction day and process</td>
<td>Upon starting</td>
</tr>
<tr>
<td></td>
<td>Finance</td>
<td>Department/ward team meetings</td>
<td>Locally agreed</td>
</tr>
<tr>
<td></td>
<td>Performance</td>
<td>1-1, appraisal and PDP</td>
<td>Annual review</td>
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<tr>
<td></td>
<td>Safety</td>
<td>ebulletins</td>
<td>Ad hoc</td>
</tr>
<tr>
<td></td>
<td>Patient experience</td>
<td>Team Brief</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td>Public health</td>
<td>Communications update</td>
<td>weekly</td>
</tr>
<tr>
<td></td>
<td>Service changes</td>
<td>Link magazine</td>
<td>Quarterly</td>
</tr>
<tr>
<td></td>
<td>Service info</td>
<td>Intranet – information about all directorates, corporate documents, links to information, policies and procedures</td>
<td>On-going</td>
</tr>
<tr>
<td></td>
<td>Governance</td>
<td>Operational Board, Clinical Management Board, General Managers meeting, Nurse Directors meeting.</td>
<td>Quarterly</td>
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<tr>
<td></td>
<td></td>
<td>Chief Executive’s weekly online briefing</td>
<td>Monthly</td>
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<tr>
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<td>Staff road shows – Chat with the Chief</td>
<td>Quarterly</td>
</tr>
<tr>
<td>Stakeholder Group</td>
<td>Primary Interest Areas</td>
<td>Methods of engagement and communications</td>
<td>Frequency</td>
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<tr>
<td></td>
<td>Strategic Direction</td>
<td>MP briefings with CE/Chair</td>
<td>Quarterly</td>
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<td></td>
<td>Finance</td>
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<td></td>
<td>Performance</td>
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<td>Safety</td>
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<td>Patient experience</td>
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<td>Service changes</td>
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<td>Service info</td>
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<td></td>
<td>Governance</td>
<td></td>
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<tr>
<td>Political</td>
<td>X</td>
<td>Email updates and information to MPs and councillors when required (usually urgent information).</td>
<td>Ad hoc</td>
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<td></td>
<td>X</td>
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<tr>
<td>Partners and Commissioners</td>
<td>Strategic Direction</td>
<td>Primary Link bulletin</td>
<td>Quarterly</td>
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<tr>
<td></td>
<td>Finance</td>
<td>Service Directory (online and printed)</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>Performance</td>
<td>Project/service development communications</td>
<td>Ad hoc</td>
</tr>
<tr>
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<td>Safety</td>
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