

NHS Greater Glasgow and Clyde	Paper No. 24/21
Meeting:	NHSGGC Board Meeting
Meeting Date:	27th February 2024
Title:	Stakeholder Communications and Engagement Strategy 2020-23 Progress report
Sponsoring Director/Manager:	Sandra Bustillo, Director of Communications and Public Engagement
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1. Purpose

The purpose of the attached paper is to: provide a progress report on the implementation of the Stakeholder Communications and Engagement Strategy 2020-23.

2. Executive Summary

The paper can be summarised as follows:

The NHS Board approved the Stakeholder Communications and Engagement Strategy in December 2020-23 and since then it has been delivered through a series of action plans. This paper provided a report on the progress in implanting the strategy, ahead of a draft refreshed Strategy coming to the NHS Board in April 2023. The report covers progress in a number of priority areas:

- *Understanding our audiences*
- *Improving our External Communications*
- *Building and Strengthening of Engagement*
- *Building our Reputation*

3. Recommendations

The NHS Board is asked to consider the following recommendations:

BOARD OFFICIAL

Members are asked to:

- (a) *Note the progress made in delivering the 2020-23 Stakeholder Communications and Engagement Strategy*
- (b) *Note that the recommendations for communications and engagement from the Scottish Government external reviews have been fully implemented*
- (c) *Approve the actions to be taken forward for inclusion in the 2024-27 Strategy*
- (d) *Note that the 2024-27 Strategy will be brought back to the NHS Board for consideration in April 2024.*

4. Response Required

This paper is presented for **approval**. *(delete as appropriate)*

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows: *(Provide a high-level assessment of whether the paper increases the likelihood of these being achieved.)*

- **Better Health** **Positive impact**
- **Better Care** **Positive impact**
- **Better Value** **Positive impact**
- **Better Workplace** **Positive impact**
- **Equality & Diversity** **Positive impact**
- **Environment** **Positive impact**

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity:

This is attached in detail within the paper.

7. Governance Route

This paper has been previously considered by the following groups as part of its development:

Informal Directors

Corporate Management Team

8. Date Prepared & Issued

Paper prepared on: 6/2/24

Paper issued on: 20/2/24

Stakeholder Communications and Engagement Strategy 2020-23

Progress report

February 2024

1. Introduction

In December 2020, the NHS Board of NHSGGC approved its first [Stakeholder Communications and Engagement Strategy](#) covering 2020 to 2023. Several factors had influenced the decision to develop a new strategy.

The organisation was continuing to respond and recover from a global pandemic and communication and engagement played a key role, both in terms of informing the public about the range of measures introduced to keep them safe - including the mass vaccination programme - and in involving them as we introduced new, adapted service models at pace. NHS Greater Glasgow and Clyde was also at Level 4 of the Escalation Framework for issues related to communications and engagement with patients and families. It was important to learn from the experience of families involved so that communications could be improved going forward. Finally, with the appointment of a new Director of Communications and Public Engagement, which brought together discrete Communications and Patient Experience and Public Involvement teams for the first time, there was an opportunity to develop a more cohesive, integrated approach to support effective approaches to inform, engage and consult.

The Strategy was delivered through a series of annual implementation plans. Progress reports on specific actions were provided to management and governance committees, including Board briefings. Work continues the refresh of the Strategy for 2024-27 and this will be brought to the NHS Board for approval in April 2024. In anticipation of this, the following report has been prepared to provide a detailed update on overall progress in delivering the priorities of the 2020-23 Strategy.

2. Strategic Aims

The Strategy identified several strategic aims. As a reminder, these were as follows:

- Embed a clear and consistent communications and engagement approach that supports NHS Greater Glasgow and Clyde towards achieving our vision, aims and commitments (1)
- Empower staff and teams across NHSGGC to feel able to engage with people in an open and honest manner, ensuring that the public voice is at the heart of all service planning, improvements and developments (2).
- Achieve the best representative views, comments and opinions from our diverse communities that we can so that our work is inspired and shaped by people's views (3)
- Enable people to voice their views, needs and wishes and to be able to contribute to plans, proposals and decisions about services (4).
- Make it easy for people to access information about health and healthcare as part of our role to support people to stay well and make healthy choices, and ensure that this information can be made available to everyone (5).

- Use innovative ways to communicate and engage with key stakeholders, members, partners, patients, the public and local community groups in ways that most suit them, while maintaining and improving those channels that are already shown to be effective (6).
- Give local people the knowledge, skills and confidence to maintain good health and better manage their own health conditions, using real insight from people to help them make the right choices to access local services, manage their own health and prevent illness where possible (7).
- Develop and protect the reputation of the organisation through proactive and reactive media relations, social media, marketing activity, high quality service and performance information and effective engagement (8).
- Build collaborative, trusted relationships between the Board, our patients, their carers and our communities, based on honesty, openness and transparency (9).
- Ensure that the NHSGGC's communications and engagement activity is accessible to all by using a variety of media, clear language and recognising and addressing individuals' needs. This includes language translation and accessibility for visually and hearing impaired members of our community. We will also ensure we provide communication and engagement opportunities accessible for those with Learning Disabilities (10).
- Ensure that we are actively seeking views from groups who are 'seldom heard' and/or have poor health outcomes (11).
- Measure and evaluate engagement effectively using disaggregated data and report back to local people on how their feedback has been used to shape and improve services (12)

3. Strategy Impact Review

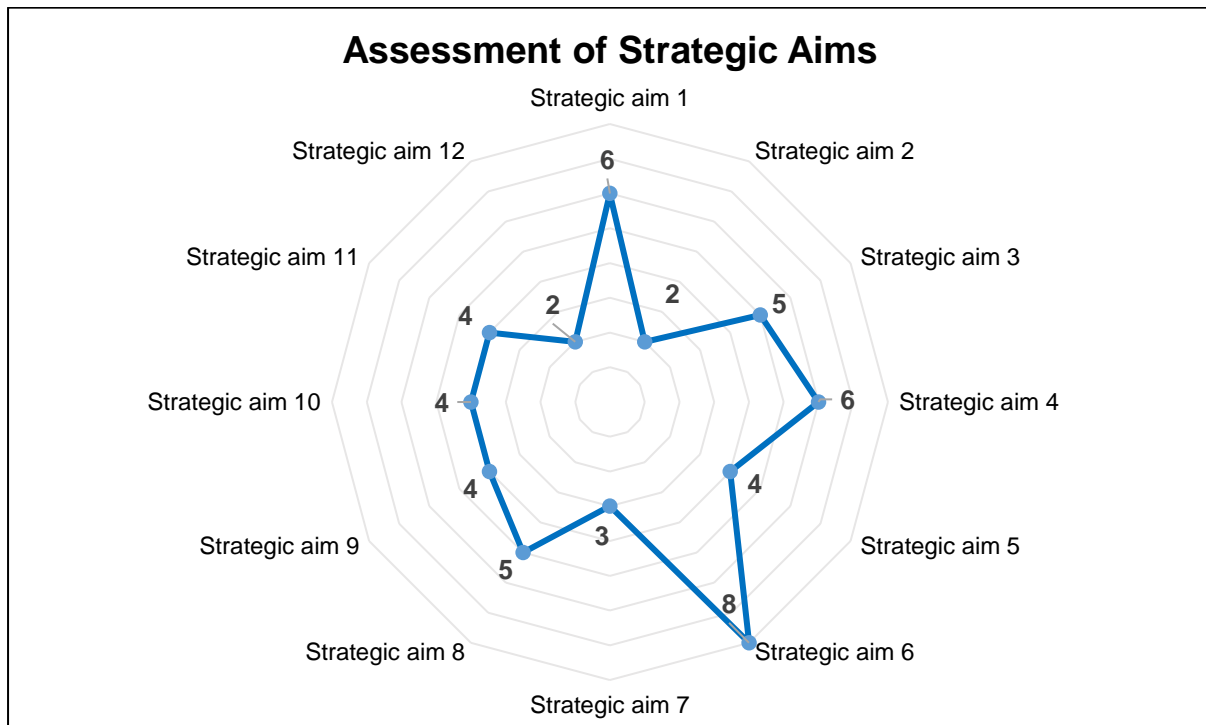
Communications and engagement form part of a range of activities undertaken by an organisation to deliver its priorities. Measuring the specific contribution of communications and engagement to these goals can be difficult e.g. a patient persuaded to attend alternatives to Emergency Department may be influenced by a communications campaign, the ease of access of alternatives or a redirection policy, or, by a combination of all three activities.

Whilst it is difficult to specify impact, there are a number of ways to assess whether communications and engagement has had the intended impact. These are:

- Outputs – communications and engagement activities – Did you deliver what was intended?
- Engagement – what your target audience does with your message e.g. likes, shares – Did your audience respond positively to your activities?
- Outcomes – what change do you achieve e.g. behavioural/service/policy change – Did you achieve the aim?

The process of assessing and capturing the impact of specific campaigns and involvement activities is an evolving area. Whilst there are good examples of measuring impact, the detail of which are given below, this requires further development in the refresh of the strategy for 2024-27.

A high-level impact assessment of the strategy is included below. This sets out the extent to which activities have contributed to the overall strategic aims, highlighting potential areas of focus in the refreshed strategy.



4. Key priorities 2020-2023

The following section sets out progress against each of the key priorities for action, as identified in the Strategy, highlighting those that are complete and those that will be carried forward into the refreshed strategy.

Understanding our audiences	Strategic Aims Met
Working in partnership with our stakeholders.	1,3,4,10,11
<p>Deliverable(s):</p> <p>(a) We will routinely identify all our stakeholder groups and the appropriate channels to use for each of these groups, and we will refresh these on a project-by-project basis ensuring we give all affected communities across NHSGGC the opportunity to be involved.</p> <p>(b) Recognising that not everyone has access to digital communication approaches, we will ensure that traditional methods of communication are included in the mix of communications methods deployed.</p>	
<p>Progress:</p> <p>(a) Stakeholder mapping is a standard part of the planning stage of all engagement activity. A Planning Engagement Tool has been developed to support staff to map audiences they wish to engage with. file:///C:/Users/BUSTIS~1/AppData/Local/Temp/MicrosoftEdgeDownloads/52cef590-443a-43fb-a97f-e59cd80acea0/Engagement-Planning-Tool.pdf</p>	

<p>(b) Understanding the challenges faced by some stakeholders in accessing digital communications, wherever appropriate and possible, a blend of platforms are used to ensure maximum engagement and reach to all relevant audiences. This includes traditional methods such as local print press, posters and leafleting alongside liaison with local community groups such as Hospitalwatch at the Vale of Leven. This complements a wider organisational community outreach programme and direct engagement with Elected Representatives.</p>	
<p>Status: Complete. Now business as usual.</p> <p>A priority in the refreshed strategy will be to develop further understanding of digital literacy.</p>	

Understanding our audiences	Strategic Aims Met
<p>Understand how our stakeholders feel about us.</p>	4, 9
<p>Deliverable(s):</p> <p>(a) We will carry out regular surveys of our key stakeholders to measure attitudes and opinions towards NHSGGC including a focus on stakeholder perceptions and understanding of the Board.</p> <p>(b) We will seek the opinions of our stakeholders on our engagement and on how they wish to engage with us.</p>	
<p>Progress:</p> <p>(a) Commissioned Progressive Research in 2022 to carry baseline sentiment research with a representative sample of NHSGGC population and presented to the Board in September 2022.</p> <p>(b) The NHSGGC Stakeholder Reference Group was set up to provide patient and public input to the design of engagement and communications processes and was consulted on the first Stakeholder Communications and Engagement strategy.</p> <p>Under the Chairmanship of Vice Chair, Ian Ritchie, the Stakeholder Reference Group continued to meet throughout the pandemic to support NHSGGC to design and develop our activities and act as a public sounding board for activity until it was disbanded* in 2023</p> <p>*A review of the SRG membership was undertaken which identified a lack of membership across protected characteristic groups. In partnership with the Equalities and Human Rights Team, recruitment was undertaken to increase representation which was unsuccessful. In agreement with the MFT Programme Board, the group was disbanded in 2023 in favour of wider mix of engagement to support more diverse involvement.</p>	
<p>Status: Complete. Sentiment analysis to be repeated every two years. The next survey is scheduled for 2024. This will be carried forward to the refreshed strategy.</p>	

Improving our External Communications	Strategic Aims Met
Improving our communication with patients and families.	6
Deliverable(s): (a) Continue to develop effective communications approaches with patients and their families, tailored to their individual needs.	
Progress: (a) The Consultation Institute was commissioned to carry out research with Ward 6A families. The final report was published in 2022 and the findings from the review were incorporated into the communications plan for the reopening of Ward 2a in March 2022. A comprehensive package of information for patients and families, including video, age-appropriate FAQs, in-person orientation visits and media access, was well received by parents and our young patients. (b) The Healthcare Associate infection (HAI) communications strategy was updated in 2021 and 2023 to incorporate learning from QEUH/RHC experience of effective communications with patients and families during incidents. The communications strategy was approved through the Acute Infection Control Committee and the Board Infection Control Committee.	
Status: Complete.	

Improving our External Communications	Strategic Aims Me
Strategic communications planning.	5,6,7
Deliverable(s): (a) We will use insights to target and assess activity. (b) We will work closely with others to learn and share evidence including Healthcare Improvement Scotland	
Progress: (a) This is an area that has developed over the course of the last three years. From working with Business Intelligence to gather data on changing service use, we have broadened the use of metrics and other insights to include information gathered through patient feedback and surveys and analytics available through our social media channels. Examples of this include the development of a maternity campaign, development of targeted campaigns for Emergency Departments, the insights provided through sentiment analysis and the monitoring of engagement and reach through social media and our IPN. (b) We have worked successfully with Healthcare Improvement Scotland on several areas including being the only territorial NHS Board to pilot the national Quality Framework for Community Engagement, having our approach to engagement social media published as an example of good practice and providing a national webinar on digital engagement. In addition, the PEPI team led on the design and delivery of the	

national pathfinder for engagement in Reshaping Urgent Care and the experiences of people using Flow Navigation Centres.	
Status: In progress, further work required to use evaluation routinely.	

Improving our External Communications	Strategic Aims Met
Continue to develop our external communications channels.	1, 5, 6, 8 10
<p>Deliverable(s):</p> <ul style="list-style-type: none"> (a) Website: We will continue to develop the NHSGGC website to ensure information is relevant, clear and easily accessible and includes dedicated engagement space where people can find information on how to get involved. (b) Social media: We will continue to grow and develop these networks as trusted channels of communication. (c) Social media: We will deliver a new social media strategy and set clearly identifiable goals for each social channel. (d) Social media: We will work to create compelling content for our online audiences, tailored to their needs. (e) Social media: We will look to ask more questions to start conversations, provide responses to incoming posts, answer questions on partner feeds to enhance engagement. (f) Involving People Network: (IPN is our database of people who wish to continue to receive information which enables us to have 'direct to public communications'.) We will continue to expand and grow this platform. 	
<p>Progress:</p> <ul style="list-style-type: none"> (a) Delivered a project to build and develop a new website with improved security and accessibility. This was an in-house solution which saved on external costs for delivery. Design and functionality were guided by user experience and engagement. (b) In total the number of followers on our corporate social accounts has increased by 128% over the past three years. (YouTube grown by 600%, Facebook by 15%, Instagram by 11%, LinkedIn by 25%, X (formally Twitter) by 118%). (c) The social media strategy was approved by the Corporate Management Team in December 2021. We have set up a social media oversight group to deliver this strategy. (d) We have developed tailored content for both platforms and audiences. This has included an award-winning student campaign using Tik Tok, resulting in significant engagement with the campaign, together with increased awareness and use of the Flow Navigation Centre by 18-25 year olds. We continue to evolve our digital content through an 	

<p>increased development of video content on platforms such as Instagram.</p> <p>(e) We have introduced and continued to develop our use of social media platforms to engage and encourage feedback through examples of Twitter and Instagram polls.</p> <p>(f) Because of GDPR we maintain a capacity number of newsletter subscribers. We have increased our activity from an average of six stories per month in 2019 to an average of 22 stories in 2023. Our average email open rate increased from 26% 2019 to 46% in 2023 compared to an industry average of 21%. We have developed an approach to publishing localised content based on geographic areas and will continue to develop a stakeholder management system to allow us to engage with individuals. We have been successful in reaching specific topic-based groups to provide feedback and become more involved in the ongoing work of NHSGGC.</p> <p>(g) The HSCPs also use social media channels to engage with their communities and routinely promote NHS messages, particularly about services in their areas, via those routes.</p>	
<p>Status: Complete / business as usual to develop practice as trends evolve.</p>	

Improving our External Communications	Strategic Aims Met
<p>Deliver relevant information for our communities.</p>	<p>1, 5, 6, 7, 8</p>
<p>Deliverable(s):</p> <p>(a) We will develop regular targeted communications to ensure all communities are kept updated on key health and social care developments in their local areas.</p> <p>(b) We will also explore the use of local online networks, such as community Facebook pages, to reach and engage with local communities.</p>	
<p>Progress:</p> <p>(a) Following engagement with local communities, we developed monthly newsletters in partnership with the relevant Health and Social Care Partnerships including local community groups, Hospitalwatch (Vale of Leven) and Your Voice Inverclyde (IRH). Newsletters are now published for the catchment areas of Vale of Leven, Inverclyde Royal Hospital, Glasgow Royal Infirmary, Queen Elizabeth University Hospital /Royal Hospital for Children and Royal Alexandra Hospital.</p> <p>(b) We have mapped and tested our approach to online community Facebook groups and are using the learning from this to inform future work areas.</p>	
<p>Status: Complete / business as usual. Additional development of online community group work being taken forward into next strategy cycle.</p>	

Improving our External Communications	Strategic Aims Met
Effective Media Relations	8,9
<p>Deliverables:</p> <ul style="list-style-type: none"> (a) We will provide a responsive and professional media relations service and will ensure that all our spokespeople are appropriately trained prior to any media interviews. (b) We will monitor press coverage on a daily basis and correct any inaccuracies or issue rebuttals, if and where appropriate. (c) We will operate as a digital newsroom 	
<p>Progress:</p> <ul style="list-style-type: none"> (a) A portfolio approach was introduced in 2021, enabling the team to develop relationships with local media and local staff and proactively identify opportunities to provide media with positive content which also furthered the health board's own objectives. There has been a concerted effort to develop relationships with broadcast such as BBC and Channel 4 with the production of tv series (two series of Extreme Medics). We operate a 24/7 press office which allows us to efficiently respond to all media enquiries or incidents at any time, tying in with the board's corporate on-call rota. (b) Media training is provided to our senior team and media is reported on a weekly basis to our senior team. We work wherever appropriate to issue correction notices to the media; having an efficient and responsive press desk reduces the likelihood of these issues occurring. (c) We now provide news releases with digital and audio on a routine basis, featuring contributions from senior leaders from across the organisation. Wherever possible, the strongest medium for promoting our key messages is pursued and as a result and thanks to incorporating video, imagery and audio into day-to-day responses, we are able to maximise exposure on any given issues across platforms. This has been well evidenced during COVID-19, throughout winter, and is weaved into our proactive approach to working with the media. (d) Along with the HSCPs, we regularly highlight the positive achievements of our staff, including promoting award winners, research and innovation. 	
Status: Complete / business as usual	

Improving our External Communications	Strategic aims Met
Campaigns	1,5,6,7,8
<p>Deliverable(s):</p> <ul style="list-style-type: none"> (a) We will continue to deliver insight-driven local campaigns with clear, consistent public messaging. (b) Deliver a range of campaigns to support people to use our services appropriately, including unscheduled care, GP Out of Hours, and our seasonal campaigns. 	

<p>Progress:</p> <p>(a) We have delivered a series of campaigns over the last three years which have increasingly included insights which we will continue to develop as we move forward to refine our approach e.g. Home For Lunch, which was based on internal and external feedback relating to discharges and Men's Health – a multi-channel campaign targeting and encouraging males to access unscheduled care more effectively, based on a major ED survey focused on attitudes and awareness of unscheduled care services. The survey findings which have been shared across Health Boards, are also being used to target other key demographics through new integrated campaigns.</p> <p>(b) Communications has been a key facet of the response to the redesign of urgent care, with a multi-channel approach being used to drive awareness of new urgent care services, alongside education in relation to traditional services. This has been key in driving up awareness and usage of the FNC for example which has regularly featured across all media platforms, being supported by highly targeted social media and traditional advertising. Similar campaigns have been designed and deployed with support of the services including the ABC approach to winter, the wider Right Care, Right Place messaging, Flu and Covid vaccination campaigns and capital planning projects such as the INS.</p>	
<p>Status: In progress. Wherever appropriate and possible, insights are now driving communications campaigns, and will help underpin strategy for the next three years.</p>	

Improving our External Communications	Strategic aims Met
<p>Communicating in an emergency.</p>	6
<p>Deliverable(s)</p> <p>(a) Regularly review the major incident communications plan to ensure it is fit for purpose and able to respond to a fast-moving media environment.</p>	
<p>Progress:</p> <p>(a) Our business continuity plan has been kept up-to-date and is reviewed on a regular basis, with the last update in 2023.</p> <p>(b) Desktop exercises have taken place in preparation for potential major incidents to ensure the planning is robust and the correct protocols are in place in the event of a major incident.</p> <p>i. During the pandemic we effectively and efficiently disseminated information to both staff and the public based on a rapidly evolving situation such as the use of Personal Protective Equipment and visiting as well as crucial public health messaging. This included our social media platforms, Involving People Network, media and internally through our intranet and Core Brief daily staff operational bulletin.</p> <p>ii. Membership of Public Health Communications Forum and NHSGGC Resilience Group</p>	
<p>Status: Complete / business as usual</p>	

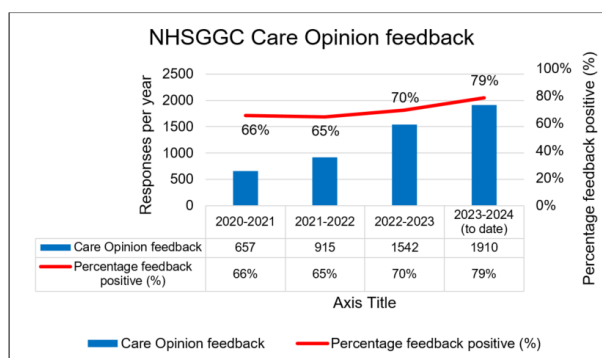
SECTION C: Building and Strengthening of Engagement

Building and Strengthening of Engagement	Strategic aims Met								
<p>Listening to our patients.</p>	<p>1, 2, 10, 12</p>								
<p>Deliverable(s)</p> <ul style="list-style-type: none"> (a) Staff across NHSGGC will be empowered and encouraged to draw on the lived experiences of patients. (b) We will continue to raise awareness of the different ways that patients and carers can share their experiences via Care Opinion and all feedback sources at service and corporate levels through a range of communications approaches. (c) We will continue to embed the principles of the What Matters to You to encourage and support meaningful conversations between people who provide health and social care and the people, families and carers who receive such care. 									
<p>Progress:</p> <ul style="list-style-type: none"> (a) A formalised approach to providing support for staff was implemented in 2021. (i) An online ‘request for support’ process was introduced which is received by the Patient Experience Public Involvement (PEPI) Team from service areas looking for support on the involvement of patients, service users or the public. The first full year (2021-2022) saw the team involved in 35 requests. This increased to 80 requests last year (2022-2023) and as of January 2024 more than 100 requests have been supported for the current year (2023-2024) with support provided to approximately 215 service areas in total. <div data-bbox="496 1245 1082 1597" data-label="Figure"> <table border="1"> <caption>PEPI Support requests</caption> <thead> <tr> <th>Year</th> <th>No. of service areas receiving support</th> </tr> </thead> <tbody> <tr> <td>2021-2022</td> <td>35</td> </tr> <tr> <td>2022-2023</td> <td>80</td> </tr> <tr> <td>2023-2024 (to date)</td> <td>105+</td> </tr> </tbody> </table> </div> <p>A recent evaluation of the process highlighted a high level of satisfaction, with 90% of staff saying that the advice and support received fully met their needs in relation to their request: <i>“Ongoing support has been very welcome and worthwhile. Links have allowed us to expand into other areas with support of the PEPI Team”.</i> <i>“The PEPI Team member was very knowledgeable & supportive. Gave lots of good ideas of how to improve the patient interview process moving forward, and how to create and use feedback themes”.</i></p>	Year	No. of service areas receiving support	2021-2022	35	2022-2023	80	2023-2024 (to date)	105+	
Year	No. of service areas receiving support								
2021-2022	35								
2022-2023	80								
2023-2024 (to date)	105+								

- (ii) Lunchtime learning sessions were introduced in 2022 as short information sessions on practical tools and approaches for staff to involve patients, the public and those with Lived Experience. Since they started in 2022, the PEPI team has delivered 16 sessions with 765 staff.
- (iii) In 2022, a dedicated resource page for staff was introduced providing 13 online resources including practical tools, templates and information to support the involvement of patients.
- (iv) Healthcare Improvement Scotland's [Quality Framework for Community Engagement and Participation](#) has been developed as a self-assessment approach to supporting NHS Boards, local authorities and Integration Joint Board deliver effective community engagement. As the test area for NHS Boards, this was trialled from 2022 in several of our sectors and directorates (paediatrics and neonatal and North Sector) with refinements made and fed back to Healthcare Improvement Scotland.

It is designed as an improvement tool to support staff reflect on current activity and areas for improvement. This has resulted in action plans to be taken forward, with a proposed roll out across other sector and directorates. This approach will also support organisational governance in relation to engagement and involvement activities.

- (b) The approach to using the Care Opinion feedback system has developed over the course of the last three years.
 - i. More than 260 staff have been trained by the PEPI Team as responders on Care Opinion.
 - ii. The volume of feedback received through Care Opinion has increased each year from 657 in 2020-21, to 915 in 2021-2022 and to 1,542 in 2022-23. This represents an increase of approximately 134%. For 2023-24, the number of stories published has surpassed last year's figure in Month 9. From the table below, it can be seen that both the number of stories has increased and the percentage of those shared as positive experiences.



- iii. A Feedback Dashboard has been developed to provide staff with an overview of stories shared by the public. The dashboard

<p>approach allows staff to interact with their feedback reports to understand changes in feedback rates month to month, observe trends in themes and criticality. This provides a more robust view of feedback data than previous reports. Development continues with next steps focusing on greater integration with Care Opinion reporting.</p> <p>(c) Patient Stories: Board Patient Stories are shown at the start of each Board meeting to support the sharing of learning and experiences of people receiving care. In total, 12 stories have been produced to date with a rolling programme scheduled for each Board meeting. These stories are also shared with staff and through our website. This work was showcased at the Institute of Healthcare Improvement International Conference in May 2023.</p> <p>What Matters To You? We embed the principles by regularly promoting through our staff engagement channels which includes supporting an annual awareness day which includes case studies highlighting good practice. Weekly examples are also included in the Chief Executive’s message to all staff.</p> <p>(d) The PEPI team has completed two annual Engagement and Involvement Overview Reports for NHSGGC, with the third to be completed by June 2024. The report has been produced to provide an overview of the range of engagement and involvement occurring across NHSGGC and the six Health and Social Care Partnerships (HSCPs). It presents an opportunity to celebrate the positive work being carried out by teams across NHSGGC to involve our people and communities in the delivery, design and improvement of services.</p> <p>In the report for 2021-2022, 27 examples of good practice were shared from across the organisation involving over 5,000 people. The report for 2022 – 2023 highlighted 42 examples with involvement of over 7,500 people.</p> <p>As a partner to this overview report the PEPI team has been working to extract case studies from the report and shine a light on the excellent work carried out by teams throughout the year. These case studies are housed on NHSGGC.scot accessible to staff and the wider public as are the full reports themselves. For 2024 the team are exploring the use of video or graphical materials to further share examples gathered for the report.</p>	
<p>Status: Complete. Business as usual.</p>	

Building and Strengthening of Engagement	Strategic aims Met
<p>Engaging Well</p> <p>Deliverable(s):</p> <p>(a) Our wider approach to public engagement and involvement will follow CEL4 guidance and the national standards for Community Engagement</p> <p>(b) We will develop an NHSGGC stakeholder engagement framework.</p>	<p>1, 2, 3, 4, 6, 11, 12</p>

<p>(c) The PEPI Team will also support the delivery of corporate engagement exercises, including formal consultation processes.</p>	
<p>Progress:</p> <p>(a) We maintain regular meetings with Healthcare Improvement Scotland (HIS) to provide early sight and discussion of work areas. We formally involved them in the planning of engagement for GPOOH with support for our process and agreed to their request to act as a test for a new process to support Boards in non-major service change. CEL4 has now been replaced with new Scottish Government guidance: 'Planning with People'.</p> <p>(b) The Stakeholder Engagement Framework has been drafted and requires approval. Progress of this has been impacted in part by the delay in National Guidance but is a priority for the coming year.</p> <p>(c) Progress on the delivery of corporate engagement programmes has been positive:</p> <ol style="list-style-type: none"> I. GP Out-of-Hours service: Formal two month engagement process concluded on 11/12/23. This included direct engagement with over 1,000 people and feedback from 2,940 people, which is significantly higher than comparable processes across NHS Scotland (average 450 responses). Analysis of the feedback is being finalised. II. Redesign of Urgent Care: Ongoing work in relation to capturing feedback from people that use Emergency Departments, the Flow Navigation Centre and NHS NearMe has resulted in feedback from over 5,000 people. This work is supporting more targeted communication messaging and campaigns to support behaviour change among target populations. III. Best Start – Maternity and Neonatal services: Engagement has resulted in feedback from over 2,700 people. This has informed the development of NHSGGC's maternity and neonatal strategy and the engagement activity for this group of service users was shortlisted for the UK Patient Experience Network Awards in September 2023. IV. Primary Care Strategy: The first phase of this engagement to inform strategy development was completed in August 2023 receiving feedback from over 900 people. V. eHealth Strategy: Delivered engagement with the public in 2022 ahead of formal strategy formation, with 245 people sharing their views on key priorities, success and difficulties faced accessing digital healthcare. Alongside this we undertook testing of new engagement approaches around eMedicines which reached over 700 people, and led to the formation of an ongoing Patient Reference Group. 	
<p>Status:</p> <p>In progress. We will contribute to the assessment of the HIS test process on supporting Boards through service change that is not considered to meet the threshold of major service change. We will take finalise and implement the Stakeholder Engagement Framework. We will continue to deliver corporate programmes of engagement and consultation to support the organisation in the delivery of its priorities.</p>	

Building and Strengthening of Engagement	Strategic aims Met
Engaging Differently	6
Deliverable(s) (a) We will use a variety of tools to create two-way dialogue through online and digital engagement	
Progress: We have made significant progress in this including the use of online focus groups, social media platforms and using the IPN for feedback. Approaches include: <ol style="list-style-type: none"> 1. In line with our Social Media Strategy, we have encouraged two-way interactions across our social media platforms such as X (formally Twitter), Instagram and Facebook. This engagement has provided significant opportunities for rapid, real-time feedback. It supports a diverse audience reach in cost-effective ways and has allowed us to engage with, and receive, feedback from significantly higher numbers of our population than previously. This includes the use of polls on X and Instagram. 2. Seeking involvement via the IPN: With an audience of 75,000, our Involving People Network provides significant opportunities to recruit people to take part in our engagement activities. This includes requests to participate in focus groups and complete surveys. 3. Text based evaluation is now used regularly for targeted engagement activities, where texts are issued to invite feedback directly from those that have used our services. 4. Development of automated opportunities for feedback i.e. this has been built into the end of virtual calls for NHS NearMe and the Flow Navigation Centre. 5. New approaches and tools have been developed including the creation of dashboards to support staff access real time feedback. 	
Status: Complete/business as usual.	

Building and Strengthening of Engagement	Strategic aims Met
Focus on collaboration in delivering engagement	3, 4, 9
Deliverable(s): (a) We will work with partner agencies to support communities to engage with us	
Progress: (a) (i) Working in partnership with Your Voice Inverclyde in the development of the GPOOH engagement. Working with NHS24 and	

<p>Scottish Government to deliver the National Evaluation of Flow Navigation Centres.</p> <p>(ii) Working in partnership with engagement colleagues across all HSCPs to deliver GPOOH outreach programme</p> <p>(iii) Development of a Maternity third sector reference group, bringing together third sector services with senior staff to discuss maternity service developments.</p> <p>(iv) Work with men's groups such as Govan Men's Shed to shape Unscheduled Care (ABC) public messaging.</p>	
<p>Status: While we have made some development on this activity it will benefit from further focus.</p>	

Building and Strengthening of Engagement	Strategic aims Met
Giving all our stakeholders a voice	3, 4, 11
<p>Deliverable(s):</p> <p>(a) We will work with partners to develop approaches to support the involvement of seldom heard voices.</p>	
<p>Progress:</p> <p>We have made some progress and been able to test different approaches over the past three years. However this still needs to be mainstreamed as routine.</p> <p>(a) As part of the NHS NearMe, we reached out to patients whose first language is not English through online surveys, virtual focus groups and engagement with protected characteristic groups including Scottish Women's Autism Network, Glasgow Disability Alliance, Visibility Scotland, Health and Social Care Alliance and West Dunbartonshire Access Panel and PAMIS Promoting an Inclusive Society.</p> <p>(b) We supported maternity service user involvement: The engagement approach to support the development of NHSGGC's Maternity and Neonatal Strategy blended traditional and digital methods, including a social media campaign, the use of 'badgernet' (a maternity app), and multilingual surveys. We developed a survey which was fully translated into Arabic, Romanian, and Polish. The survey was shared by text with more than 12,000 women, with personalised text messages sent to 641 women in their native languages. The survey targeted women who had given birth within a 12-month period from April 2022 to March 2023, and this pioneering approach not only provided us with a wealth of data and insights from nearly 3,000 responses, but also demonstrated our commitment to understanding the diverse needs of our community.</p> <p>It is anticipated that learning from this work coupled with learning from the Equalities and Human Rights Team Peer worker programme (working with volunteers to reach into their communities) in shaping how we effectively engage with and involve communities in the work of NHSGGC going forward through programmes such as Moving Forward Together.</p>	

<p>(c) The PEPI team is in the process of developing an engagement plan to better understand care access pathways used by Men across NHSGGC, with a focus on older less digitally connected men. This is a group that is generally harder to reach (as reflected in our equalities monitoring capture) and has been identified as less likely to be aware of care pathways, making more use of A&E than other groups.</p> <p>Alongside the above approaches to reaching seldom heard voices, the PEPI team have recently begun conversations with Equalities and Public Health colleagues on digital exclusion. A specific focus is how we could work together more effectively to ensure those who cannot engage through digital channels are provided effective opportunities to share their views with NHSGGC in the community.</p>	
<p>Status: In progress. More work required to mainstream these approaches.</p>	

Building and Strengthening of Engagement	Strategic aims Met
<p>Learning from lived experiences.</p>	<p>3, 4</p>
<p>Deliverable(s):</p> <p>(a) We will work with key partners across NHSGGC, including HSCPs and third sector groups such as the ALLIANCE to explore how we can share learning and ensure the lived experience of people is at the heart of our services.</p>	
<p>Progress:</p> <ul style="list-style-type: none"> (i) Engagement on several of NHSGGC’s strategies has involved Lived Experience Volunteers including the draft Primary Care Strategy and Maternity Strategy. (ii) We have routinely involved a range of third sector organisations in our engagement activities across all HSCPs. In 2022, we became a member of the ALLIANCE to support our links with the organisation and their networks. (iii) The development of the revised Quality Strategy has benefited from the input of those with Lived Experience. The Accelerated Design Event in November 2023 included the input of 25 Lived Experience Volunteers, with work informing a wider public survey receiving feedback from more than 1,000 members of the public. Several of the Lived Experience Volunteers continue to provide input as the development of the strategy continues. (iv) The PEPI team has developed a simplified process to support teams to recruit and support Lived Experience Volunteers (LEV) to support the development and delivery of services. This LEV process was built on learning from NHSGGC, Healthcare Improvement Scotland and wider third sector to develop a more accessible process. This new process focuses on supporting teams to understand why they want to involve people alongside the support they will give volunteers to flourish and actively influence their teams work. 	
<p>Status: Framework complete. Moved into Business as Usual.</p>	

Building and Strengthening of Engagement	Strategic aims Met
Inclusive engagement	10, 11
<p>Deliverable(s): (a) We will continue to work with colleagues to mainstream a sensitised approach to engagement and deliver on our duties under the Equality Act (2010)</p>	
<p>Progress: The role of the Patient Engagement Public Involvement (PEPI) Team to inform and involve patients and communities is delivered in line with the Equality Act (2010).</p> <p>The Equalities and Human Rights Team (EHRT) are responsible for the Fairer NHSGGC: Meeting the Requirements of the Equality Act (Equality Scheme) which reports on a suite of equality outcomes and describes how our mainstream function meet the general duty in the Equality Act.</p> <p>The most recent report on NHSGGC's inclusive engagement work can be found in the Fairer NHSGGC: Monitoring Report 2020 – 2022.</p> <p>This outlines the innovative ways in which we engaged with equalities groups including work to inform vaccination planning during the pandemic. It highlights partnership working with voluntary sector organisations such as BEMIS (Empowering Scotland's Ethnic and Cultural Minority Communities) and the Glasgow Disability Alliance.</p> <p>Peer education models were also used to train key workers in the community who were supporting vulnerable community members with key COVI-19 intelligence.</p> <p>Work was also undertaken to assess accessibility and experiences to inform the delivery of a range of services including NHS NearMe, Flow Navigation Centres, GP Out of Hours among others.</p> <p>Equalities Monitoring Report: A Fairer NHS Greater Glasgow and Clyde Monitoring Report 2020-2022</p>	
<p>Status: In progress. Further work continues through close collaboration between PEPI and EHRT.</p>	

Building and Strengthening of Engagement	Strategic aims Met
Working with key stakeholder groups	9
<p>Deliverable(s) (a) Enhance our relations with politicians representing NHSGGC constituencies</p>	
<p>Progress: (a) Building on the regular weekly written briefings provided to MSPs and MPs since 2020, we have implemented in-person sessions with West</p>	

<p>of Scotland MSPs and MPs which are attended by the Chair, Chief Executive and a number of senior executives which include an update on current areas of interest and an opportunity for question and answers.</p> <p>(b) Weekly briefings are sent to all six Local Authority Chief Executives and Leaders.</p>	
<p>Status: Complete/ business as usual</p>	

Section D: Building our Reputation.

Building our Reputation	Strategic aims Met
<p>Deliverable(s):</p> <p>(a) A distinct part of communication and engagement activities over the next three years will be to promote the Board's performance and achievements. This will focus on authority and expertise of our people and the high-quality care we provide. This will be delivered through proactive and reactive media relations, marketing activity, thought leadership, effective engagement and proactive management of contentious issues.</p> <p>(b) We will monitor, manage and analyse online reviews and social media comment. Using social listening tools, we will develop reporting to capture key stakeholder online sentiment about NHSGGC.</p>	8
<p>Progress:</p> <p>(a) Significant progress has been achieved in bolstering existing, and, taking advantage of new strategic approaches to enhance NHSGGC's reputation through effective communications.</p> <p>NHSGGC clinicians regularly support our proactive communications to tell the Health Board's story and promote key messaging through proactive media features including print, broadcast and online. Opinion pieces are additionally regularly exploited in the media to help position the Health Board as an authority on key issues, to promote new services, performance related issues, and provide timely updates on major health issues. Proactive PR planners for all key services and hospital sites underpin the work and help identify major stories and issues – including compelling patient case studies - throughout the calendar year to tie in with organisational objectives and the wider agenda. Taking this approach ensures a steady flow of positive coverage to help provide overall balance against negative reputation issues.</p> <p>Clinicians are regularly interviewed for broadcast including BBC and STV, particularly around new technologies and services, alongside responding to complex issues relating to winter for example.</p> <p>During the height of the pandemic, to help support and promote the work being done across services, we were also able to deliver our annual awards ceremony virtually, helping maximise positive exposure</p>	

<p>and engagement with staff and the public. This has evolved now so awards ceremonies will incorporate a digital element to showcase positive achievements on a wider scale.</p> <p>(b) Social listening software was procured to enable automated monitoring of publicly available comments about NHSGGC. The approach was subject to significant scrutiny in 2023, and following a review the service was limited to ensure personal accounts would not be included in future monitoring and reporting.</p>	
<p>Status: Complete/ business as usual</p>	

5. Implementing the recommendations from QEUH/RHC external reviews

There were a number of recommendations from two external reviews commissioned by the Scottish Government into the QEUH and RHC. The detailed recommendations for communications and engagement are attached at Appendix A. The 2020-23 Stakeholder Communications and Engagement Strategy incorporated the findings and recommendations from the external reviews, and as demonstrated in this review, all have since been implemented in full.

6. Conclusion

The Stakeholder Communications and Engagement Strategy 2020-23 was delivered in unprecedented times, as health and care services responded to the COVID pandemic. Effective communications and engagement was vital as services responded at pace to the developing situation. The Strategy provided a structured framework to support the organisation deliver its priorities, ensuring that patients and the public were involved and able to give their views.

Over the past three years, there has been considerable progress in delivering the aims of the Strategy. The report highlights also that there remain some areas where further focus is required. Board members have been consulted at an early stage of the development of the refreshed strategy and are now asked to agree to the proposed areas for further activity being carried forward to the 2024-27 Strategy.

In summary, Members are asked to:

- (a) Note the progress made in delivering the 2020-23 Stakeholder Communications and Engagement Strategy
- (b) Note that the recommendations for communications and engagement from the Scottish Government external reviews have been fully implemented
- (c) Approve the actions to be taken forward for inclusion in the 2024-27 Strategy
- (d) Note that the 2024-27 Strategy will be brought back to the NHS Board for consideration in April 2024.

RECOMMENDATIONS ON COMMUNICATIONS AND ENGAGEMENT FROM EXTERNAL REVIEWS

1. Queen Elizabeth University Hospital/Royal Hospital for Children Independent Review (June 2020)

6) NHS Boards should prepare information resources to remind local people about past decisions on siting of health facilities.

7) In light of the public's perception of risks associated with the adjacent waste water site, any future project facing similar public perceptions should sustain a robust communication plan, recognising and addressing any concerns.

56) We welcome NHS GG&C's recent investment in its strategic communications capability. NHS GG&C's Board needs to ensure political and public messaging that is accurate and sensitive:

- To manage adverse events and atypical public disclosures effectively within an overall plan underpinned by values of accountability and transparency;
- To recognize that modern communications need to acknowledge perceptions as well as facts as the NHS Board sees them;
- To adapt to a changing picture including defensive approaches that could include rebuttal of inaccurate reporting and disclosure that is false or threatens confidentiality;
- To recognise tactically within its internal and external communications that declining public trust may necessitate greater disclosure in justifying its actions rather than tighter control on the flow of information (9.14.1)

2. The Queen Elizabeth University Hospital/NHS Greater Glasgow and Clyde Oversight Board Interim Report (December 2020)

Recommendation 9: NHS GGC should pursue more active and open transparency by reviewing how it has engaged with the children, young people and families affected by the incidents, in line with the person-centred principles of its communication strategies. That review should include close involvement of the patients and families themselves.

Recommendation 10: NHS GGC should ensure that the recommendations and learning set out in this report should inform an updating of the Healthcare Associated Infection Communications Strategy and an accompanying work programme for the Health Board.

Recommendation 11: NHS GGC should make sure that there is a systematic, collaborative and consultative approach in place for taking forward communication and engagement with patients and families. Co-production should be pursued in learning from the experience of these infection incidents.

Recommendation 12: NHS GGC should embed the value of early, visible and decisive senior leadership in its communication and engagement efforts and, in so doing, more clearly demonstrate a leadership narrative that reflects this strategic intent.