# Leeds Health & Wellbeing Board

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Report of: Head of Communications and Marketing

Report to: Health and Wellbeing Board

Date: 20 November 2013

Subject: Leeds Health and Wellbeing Communications and Engagement

**Framework** 

Are there implications for equality and diversity and cohesion and integration?	☐ Yes	⊠ No
Is the decision eligible for Call-In?	☐ Yes	⊠ No
Does the report contain confidential or exempt information?  If relevant, Access to Information Procedure Rule number:  Appendix number:	☐ Yes	⊠ No

## **Summary of main issues**

The Health and Wellbeing Board is a key strategic body in the city of Leeds, and as it progresses through its first years, there is a need to develop and build on the existing communication with stakeholders, participating organisations and, above all, the citizens of Leeds.

The attached framework sets out; the principles by which communications and engagement with stakeholders will take place; and the core messages. There are a number of key matters to highlight to the Board:

- The core messages reflect the five outcomes in the Joint Health and Wellbeing Strategy.
- The framework covers the full range of health and wellbeing activity across the city and tries to ensure that activity is complementary across all organisational boundaries.
- As part of recognising the opportunities for providing better value for money, alignment
  of communications is crucial. Good alignment of communications and engagement
  activity currently exists between council based services, the three CCGs and also
  between the CCGs and the providers. Joint working is reasonably commonplace
  and complementary work plans exist. However, there is currently no citywide Health &
  Wellbeing communications network in existence.

- The aspiration is to widen the existing network to create a truly citywide communications network as soon as possible, improving inclusion of provider services, the third sector and wider health sector partners.
- Since last reporting to the HWB, communications activity has significantly increased for both the HWB priorities and the work of the board itself. Engagement activity, particularly through the CCGs has also maintained momentum despite the significant organisational changes.
- To ensure the Board and strategy are promoted and continuous work happens, a baseline of activity has been introduced to accompany the cycle of meetings and activities the Board undertakes. This is set out in appendix 3.

#### Recommendations

The Health and Wellbeing Board is asked to:

- Note the progress made in developing a framework for communications and engagement for the health and wellbeing agenda in Leeds.
- Note the proposals with regard to the communications and engagement work plans over the next six months.
- Note the progress made to manage and co-ordinate communications and engagement activity across the health and wellbeing partnership.
- Note the intention to expand the communications network to include providers, third sector and other wider health sector partners as soon as possible.
- Provide feedback as appropriate.

## 1 Purpose of this report

- 1.1 The Health and Wellbeing Board came into formal being in April 2013. Initial communications activity was guided by an interim 'Communications and Engagement Strategy and Plan' for the shadow and early life of the board. With the Board now formally established, this paper provides an outline strategic framework for communications and engagement activity now the Board is 'doing the doing', and it will act as a summary vision and strategy to aid the network both of communication professionals and others working within health commissioning, health provision, and across the council.
- 1.2 The report is intended to stimulate discussion about the communications activity in relation to health and wellbeing as well as providing the Board with an overview of the current and proposed work plans.

## 2 Background information

- 2.1 The health and wellbeing agenda in Leeds is evolving quickly and there has been a lot of recent change in the system. There has been structural and organisational change across the city, increased political oversight to the agenda and alterations to funding arrangements among many other changes. This fast changing landscape has presented challenges in terms of establishing a consistent and comprehensive approach to communications.
- 2.2 Despite this, health and wellbeing stakeholders from across the city have come together to make progress on developing the communications strategy. The attached framework is the initial product of this work. While considerable progress has been made since the formal establishment of the Board, it is recognised that there is some way to go. The following section highlights a number of key matters for the Board to consider.

#### 3 Main issues

- 3.1 The HWB vision is that "Leeds will be a healthy and caring city for all ages, where people who are the poorest will improve their health the fastest". The communications and engagement framework has this and the priorities in the Joint Health and Wellbeing Strategy at its heart. The combined efforts of H&W communications professionals across the city will focus on core messages reflecting these priorities.
- 3.2 Within the framework the widest possible view of H&W has been taken, acknowledging that alongside the health and social care sector sit a vast number of services and organisations (e.g. housing, probation, leisure services, the criminal justice system, transport) which contribute to improving the city's health and wellbeing. The framework covers the range of health and wellbeing activity across the city and tries to ensure activity is complementary across organisational boundaries.
- 3.3 Since the creation of the CCGs and the move of Public Health back to the council communication networks across the city have gradually developed. Greatest

alignment of communications and engagement activity currently exists between council based services and the three CCGs. Links which exist with provider organisations are developing. Joint working is happening however, for example the work on the current flu campaign has been co-ordinated across public health, social care, the CCGs, providers and the wider council. Communications leads in the CCGs do also have good links with counterparts in provider organisations.

- 3.4 There is a recognised need to have formal, stronger and more effective links with other stakeholders including the NHS providers, third sector providers and wider health sector partners. The aspiration is to widen the city communications network as soon as possible so a truly coherent and comprehensive network of H&W communications professionals across the city is created. This can provide the best opportunities to join up H&W messages across the city, create consistent messages across the city and share information and insight. It also provides a platform for ensuring the Transformation Programme, the Integrated Transformation Fund (ITF) and the successful Integrated Pioneer bid for health and social care is successfully communicated both externally and internally.
- 3.5 With the recent significant structural change created by health and social care reform, organisations have been a period of flux. Over the last six months new teams and networks have gradually been established and this has resulted in clearer resources being identified for communications work. Since last reporting to the HWB, communications activity has significantly increased for both the HWB priorities and the work of the board itself and this is reflected in the forward looking work plans detailed at appendix 2 in the framework.

## 4 Health and Wellbeing Board Governance

#### 4.1 Consultation and Engagement

4.1.1 The primary audience for the framework must be the people of Leeds, and the communication strategy is designed to ensure communication activity takes this into account at all stages by aligning with the outcomes and priorities for the JHWS.

## 4.2 Equality and Diversity / Cohesion and Integration

4.2.1 Work is underway to fully understand relevant stakeholders so communications can be effectively delivered and engagement activities made appropriate and meaningful. It is recognised that recognise some sections of the population will require tailored approaches and that there is also a need to target those groups who are in greatest need. The JSNA data and other local intelligence including engagement activity will be used to inform this work.

## 4.3 Resources and value for money

- 4.3.1 Not directly applicable.
- 4.4 Legal Implications, Access to Information and Call In
- 4.4.1 Not applicable.

#### 4.5 Risk Management

4.5.1 No specific risks identified, however, as previously reported to the Board the complexity of the emerging new health and well-being landscape, with a multitude of different stakeholders with different roles and responsibilities, makes the communications and engagement area very challenging. There is a risk of confused or inconsistent communications unless a clear framework for coordination is agreed.

#### 5 Recommendations

- 5.1 The Health and Wellbeing Board is asked to:
  - Note the progress made in developing a framework for communications and engagement for the health and wellbeing agenda in Leeds.
  - Note the proposals with regard to the communications and engagement work plans over the next 6 months.
  - Note the progress made to manage and co-ordinate communications and engagement activity across the health and wellbeing partnership and the proposals to further improve this.
  - Provide feedback as appropriate.