

East Dunbartonshire Health and Social Care Partnership (HSCP)

Communications Strategy (2019-22)

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FOREWORD

We are pleased to present the East Dunbartonshire
Health and Social Care Partnership (HSCP)
Communication Strategy (2019-2022). The East
Dunbartonshire HSCP has a long standing and well
established approach to communication with carers,
patients, service users, staff, partners and stakeholders.



Providing effective support for people is a priority for the East Dunbartonshire HSCP. Whenever possible, we will work to support people to live healthily and well within their local communities with their families and friends. To achieve this, we need to engage fully with all of our residents who are supported by our services. This requires effective channels of communication, which are designed to ensure that our information is clear, easily available to all and gets the right messages to the right people in the best possible way and for this reason, we have developed this Communications Strategy (CS).

The CS provides the framework for our overall approach to communication - who we communicate with and how we do it; and largely focuses on reaching wide audience groups. It also sets out a defined programme of communication activity with our HSCP colleagues and stakeholders.

This strategy will also compliment the accompanying HSCP Participation and Engagement Strategy (2019 - 2022), which is for individuals, groups and communities engaging in service planning and development. A significant amount of engagement activity already takes place in and across East Dunbartonshire. This strategy is designed to support our existing and future activity – ensuring we communicate effectively with all our stakeholders.

I hope you find it a valuable and useful framework that supports both individual and collective efforts across the HSCP.

Susan Murray (Chair)
East Dunbartonshire Health and Social Care Partnership (HSCP)
Integrated Joint Board (IJB)





2. INTRODUCTION

Effective communication is vital to the success of the East Dunbartonshire Health and Social Care Partnership (HSCP) ensuring that stakeholders are aware of, understand and are engaged in all relevant aspects of our work.

We know that the better informed and engaged people are about the services we provide the more satisfied they are likely to feel. Having good communications that are clear, honest and transparent and that seek to involve stakeholders early on in the process helps to build trust. We know that effective communications supports the planning, delivery and transformation of health and social care services, promoting effective professional practice and helping to increase stakeholder satisfaction.

It can therefore lead to better services, an improved reputation and stronger, more positive relationships with stakeholders, the people we serve and our partners in the public, voluntary and private sectors.

This Communications Strategy sets out how the HSCP will:

- provide the link between this document and our Strategic Plan (2018-21)¹ and the (eight) HSCP strategic priorities
- have a clear and effective approach to communication and engagement
- meet our vision and values
- identify our stakeholders and who we will communicate with (internally and externally) (see Appendix 1)
- describe how this document will support our commitment to meet the nine national health and wellbeing outcomes²
- identify the ways in which we will communicate, and;
- sets out how we will further improve the effectiveness of our communication activities

This Strategy also applies to all staff within the HSCP, regardless of whether they are employed by NHS Greater Glasgow and Clyde (GGC) or East Dunbartonshire Council (EDC).

East Dunbartonshire HSCP Strategic Plan (2018 - 2021)
 Scottish Government National Health and Wellbeing Outcomes





3. KEY POLICY DRIVERS

The Public Bodies (Joint Working) (Scotland) Act 2014³, is the legislative underpinning 'Integration' and sets out key planning and delivery principles of which communication and engagement are key components. Locally, the newly established East Dunbartonshire Integration Joint Board (IJB) will ensure that health and social care provision across East Dunbartonshire is joined-up and seamless, especially for people with long term conditions and disabilities, many of whom are older people.

There are several other drivers including local and national policies, guidance and legislation which place a duty on East Dunbartonshire HSCP to communicate and engage with the public. (See Appendix 2)

As a component part of the 'Integration' legislation, this Communication Strategy will strive to assist the HSCP in meeting our commitment to achieving the nine National Health and Wellbeing Outcomes as set out in **Table 1.** Only the outcomes which are directly relevant to this strategy are set out here for use. (See Appendix 3 for full list):

Table 1 - National Health and Wellbeing Outcomes

Number	National Health and Wellbeing Outcomes
3	People who use health and social care services have positive experiences of those services, and have their dignity respected
8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide
9	Resources are used effectively and efficiently in the provision of health and social care services





³ Public Bodies (Scotland) Act 2014

4. STRATEGIC APPROACH

The East Dunbartonshire HSCP is made up of EDC and NHS Greater Glasgow and Clyde (GGC) and is referred to as 'the Partnership' throughout this Communications Strategy (CS). As highlighted in section 3, the HSCP was set up in response to the Public Bodies (Joint Working) (Scotland) Act 2014. This created a requirement, in law, for Health Boards and Councils to work together in the planning, delivery and review of adult health and social care services, including services for children and older people. This is often referred to as 'Integration'.

Within East Dunbartonshire, all community and primary health and care services, including services for children, adults, older people, and criminal justice services, have been integrated. This means that those who use health and social care services get the right care and support, at the right time and in the right setting, with a focus on community-based and preventative care and support.

East Dunbartonshire Integration Joint Board (IJB) is the governance body that has the oversight for the strategic planning, funding and service delivery as outlined within the HSCP Strategic Plan (2018-2021). The HSCPs' aim is to work with partners, people and communities to deliver local health and social care services, improve health, deliver support, tackle health inequality, and improve community wellbeing.





The policy priorities of the HSCP as outlined in our Strategic Plan (2018 - 2021) are to:

Table 2 - East Dunbartonshire HSCP - Strategic Plan Priorities

Number	HSCP Strategic Plan (2018-21) Priorities
1	promote positive health and wellbeing, preventing ill health, and building strong communities
2	enhance the quality of life and supporting independence for people, particularly those with long-term conditions
3	keep people out of hospital when care can be delivered closer to home
4	address inequalities and support people to have more choice and control
5	people have a positive experience of health and social care services
6	promote independent living through the provision of suitable housing accommodation and support
7	improve support for carers enabling them to continue in their caring role
8	Optimise efficiency, effectiveness and flexibility

5. VISION AND VALUES

Effective communication will be fundamental to the attainment of the vision of the East Dunbartonshire HSCP, which is:

'Caring together to make a positive difference'.

East Dunbartonshire HSCP has agreed vision and values; these were developed in association with staff, patients, carers, service users and stakeholders. The values which are listed below in which everyone in a governance role, employed by, or contracted by, the HSCP is expected to adhere to are:





Table 3 - East Dunbartonshire HSCP- Values

East Dunbar	East Dunbartonshire Health and Social Care Partnership (HSCP)							
Organisational Values								
Respect	Show kindness and courtesy and consider other people's feelings: • we will treat each other, our partners and people who access our services, fairly, as individuals and as equals with humanity and respect • we will be polite and courteous when dealing with each other • we will respect each other's diversity and differences • we will respect and maintain colleague's and the people who use our services need for privacy and confidentiality							
Integrity	Live our values with our colleagues, partners and people who access our services: • we will take ownership of our actions and apologise when needed in a sincere way • we will be willing to learn from mistakes and make changes for improvement • we will take responsibility for and be accountable for our decisions and actions • we will support each other and demonstrate care and compassion in all our actions and communications • we will be open to feedback on our performance and acknowledge what is working well and what areas require further development							
Professionalism	Behaving in a way that benefits the people who access Our services: • we will never forget that everything we do is for our patients/service users • behave in a way consistent to the values of the HSCP in and out of our work • through integration learn about other professions and how this can support us in our service delivery • share best professional practice across the HSCP • make time as teams and individuals to reflect on what we have done and what needs to change when moving forward with integration							
Empathy and Compassion	Understanding and caring for the wellbeing of others: • we will listen and hear what you have to say • we will acknowledge when we can't deal with a situation and sign post you in the right direction • we will take time to find out your personal preferences and needs • we will be sensitive and kind • we will never be too busy to care							
Honesty	Be kind, honest, sincere, genuine, truthful and consistent: • in all our dealings with our colleagues and people who use our services we will promote an open and transparent environment							





6. COMMUNICATIONS OBJECTIVES

The HSCP is committed to effective communication with all our stakeholders so that they are aware of, understand and are engaged with our services as appropriate. Taking a positive and proactive approach to communication ensures that information about what we do, why we do it and how we do it is provided in a clear and effective way.

This commitment supports the familiarisation of the services and activities available to people and communities and can help build trust and confidence in the HSCP, which in turn, helps build positive relationships and improves reputation.

Through this Communications Strategy and the Participation and Engagement Strategy, we will:

- 1. align our approach to national strategies, including the Community Empowerment act (see Appendix 2), which supports enhanced public involvement in the delivery and distribution of health and social care services
- confirm our own branding and corporate identity for use on all digital and printed materials (ensure branding is distinctive and recognised as a separate legal entity from our parent organisations)
- 3. utilise our branding to promote our identity and priorities
- 4. deliver a co-ordinated, managed and consistent approach to communications
- 5. create awareness and understanding of, and engagement in, our vision for health and social care services
- 6. promote the HSCP and build a positive reputation and image
- 7. increase awareness of the services provided by the HSCP
- 8. support the development and promotion of our shared culture, vision, values and behaviours
- 9. provide information about our services and activities
- 10. provide stakeholders with opportunities to share their views and ideas and to contribute to the planning and delivery of health and social care services
- support people and service users to make better informed decisions about their health and social care needs
- 12. assist in developing, sharing and promoting best practice
- raise awareness of, acknowledge, promote and celebrate successes of the HSCP, and;





14. uphold, promote and embed approaches, standards and governance for effective communications by the HSCP as set out within the Communications Strategy

The Communications Strategy is underpinned by key standards, policies and guidelines from both East Dunbartonshire Council and NHS Greater Glasgow and Clyde on:

- accessible and equalities sensitive communications tailored to the specific audience, as appropriate
- media relations protocols setting out how we manage reactive enquiries and proactive communication with the media
- acceptable use of social media applies to both corporate and personal use of social media
- data protection compliance with the Data Protection Act 1998, and;
- General Data Protection Act (GDPR) (2018)

7. COMMUNICATION STANDARDS

Here we will describe how our Communications and Engagement activities will be delivered:

Open and honest	• In good time
• Clear	Accessible
Timely and accurate	Relevant
• Three way	

For full list and definitions, please see Appendix 4.

Evidence based research, statistics, proof of concepts, and case studies will also provide real-life examples of how we are making a difference and tell the HSCP's story in an effective and compelling way.

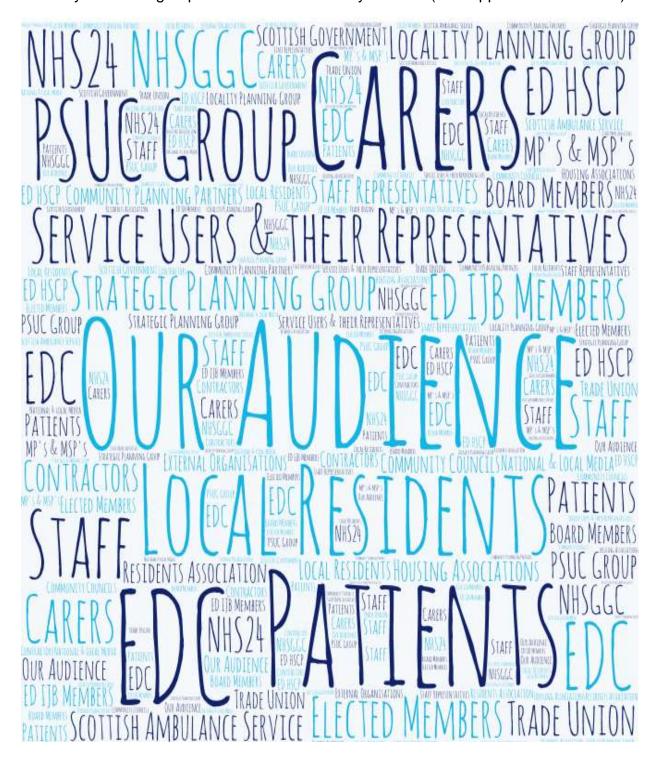




8. WHO IS OUR AUDIENCE?

Our key audience is anyone who has an interest or who has engaged with services or those who have a strategic and/or operational role in health and social care.

Our key audience groups and stakeholders may include: (See Appendix 5 for full list)

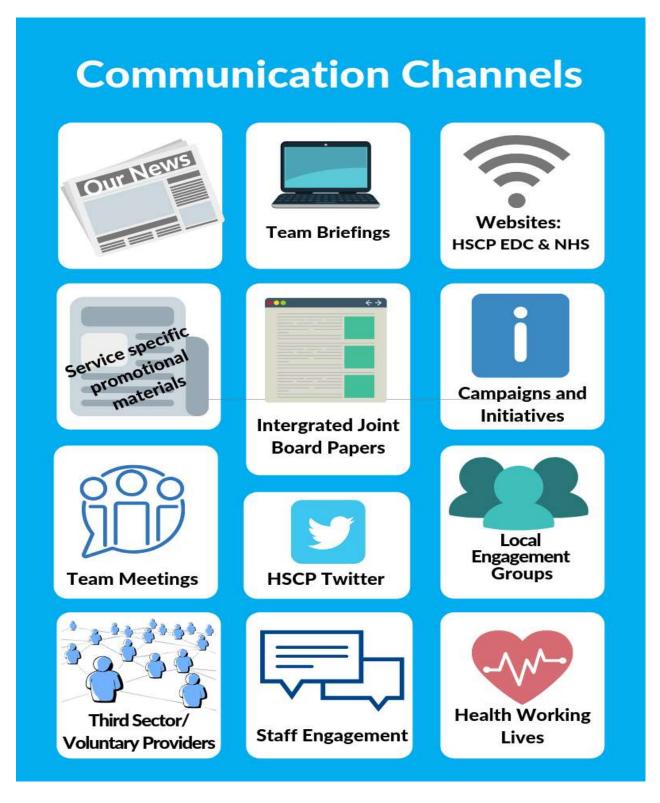






9. COMMUNICATION CHANNELS

The following key channels will be used by the HSCP to communicate with its audience. NHS GGC and East Dunbartonshire Council also have various channels to communicate with key stakeholders. (See Appendix 6 for full list)





10. ROLES AND RESPONSIBILITIES

HSCP Integrated Joint Board Members

It is the role of Board members to be the 'face' of the HSCP and to actively promote and drive forward the delivery of the strategic priorities. Board members may be required to provide quotes or to participate in media responses and can expect to receive advice and support from the EDC and NHSGGC communication teams when undertaking this role. Board members are responsible for being transparent about decisions taken and the strategic thinking behind them so that stakeholders can understand why decisions have been made.

Senior Management Team

The HSCP Senior Management Team (SMT) is responsible for driving the Communications Strategy, by clearly communicating their decisions (and the decisions of the HSCP Board). It is the role of SMT to identify potential communication opportunities for services and potential issues which the communications teams within EDC and NHS GGC can proactively promote and address.

Corporate Communication Teams

EDC and NHS GGC Communications Teams will support the HSCP in implementing and driving forward the Communications Strategy and its actions as well as supporting day-to-day functions. These teams are the first port of call for media, elected representatives and other queries and for staff in relation to advice on communications issues. The communications teams are responsible for ensuring the methods of communication adopted are appropriate and relevant. A Media Relations Protocol is in place to define the approach taken to media relations activity, roles and responsibilities within the HSCP and the respective communications teams.

Health & Social Care Staff

All staff have a responsibility to understand and promote the priorities of the HSCP through the work they undertake and to comply with the various internal communications channels and processes outlined in the staff Communication Strategy. All staff/employees are ambassadors for the HSCP and have a role to play in upholding its





reputation. They should be aware of this in both their personal and professional interactions.

11. GOVERNANCE

To ensure the consistency and accuracy of our information and communications, all HSCP branding and communications will be approved by the HSCP's Senior Management Team (SMT) or by the relevant delegated Service Manager for the service area it relates. Where a communication crosses service areas, a member of the SMT (or his/her nominee) will give final approval.

12. COMMUNICATION AMBITIONS

The following proposals for effective communications are detailed below;

- develop a corporate policy and a staff training plan that will further embed the HSCP vision, values and corporate identity on their working environment (HSCP internal)
- develop a HSCP-wide specific engagement and participation strategy (internal/external)
- identify and deliver bespoke HSCP website (internal/external)
- embed our branding and corporate identity throughout the HSCP for use on all digital and printed materials
- engage and support comment and considerations from staff and from members of the East Dunbartonshire Public, Service User and Carer (PSUC) group to shape future communications both directly, involving both face to face and capitalising on the increase uptake and use of technology

13. COMMUNICATIONS ADVICE, GUIDANCE AND SUPPORT

Advice, guidance and support on the full range of communications channels and activities across the HSCP, EDC and NHS GGC have been made available. Both EDC and NHS GGC corporate communications teams also support external HSCP communications with the media and external organisations. (see policies below):

- East Dunbartonshire HSCP Media Protocol (Oct 2017)
- East Dunbartonshire HSCP Internal Communications Protocol (Oct 2017)
- East Dunbartonshire HSCP Website/Webpages Protocol (Oct 2017)





14. MEASUREMENT AND EVALUATION

It is vital to assess how effective or not our communications activities are and whether they meet the objectives and outcomes we want to achieve. To do this, we will undertake to regular monitoring and evaluation to understand our baseline (starting point), and then to assess the levels of awareness and understanding of our messages and information, and the impact these are having on our people and communities (See Action Plan - action 3). Other measurement methods, which can help provide an indication of whether we're getting things right or not include:

- media coverage (local and national)
- webpage hits/visitors (EDC website)
- social media reach/engagement (HSCP Twitter and EDC Twitter / Facebook health and wellbeing specific messages), and;
- service user/client enquiries/compliments/complaints

There will be bi-annual reporting regarding communication activities to the Senior Management Team and Integrated Joint Board and/or its planning groups and committees. All communications activities will be evaluated continually to ensure they meet the needs of the target audiences. The Strategy will be reviewed on an annual basis and any improvements identified will be incorporated into subsequent versions of both this Strategy and related action plans.



15. USEFUL CONTACTS

The communications teams within East Dunbartonshire Council and NHS Greater Glasgow & Clyde Health Board provide a communications function to support the HSCP in the delivery of the overall Communications Framework. This support includes taking care of media and stakeholder relations and can extend to creating content to make customers and stakeholders aware of the HSCP business and upholding the good reputation of the organisation.

Health and social care staff are required to follow the policies of their employing organisations and to refer to the relevant HSCP protocols that provide staff guidance.

Advice and support should be sought from the following contacts.

NHSGGC Communication Service:

Tel: 0141 201 4429, press.office@ggc.scot.nhs.uk

■ EDC Communication Service:

Tel: 0300 123 4510, corpcommunications@eastdunbarton.gov.uk

HSCP Contact:

Tel: TBC





16. ACTION PLAN

In order to improve the effectiveness of our communication activities and evaluate the progress we make in the development and roll-out of improved and effective communications activity, the following high-level action plan is required:

Number	Action	Owner	Timescale
1.	a) Development of a corporate policy (staff code of conduct / staff charter) to strictly ensure that HSCP publicity or information (both printed and digital) will not be released that does not fit our branding and/or HSCP corporate identity - This must be adhered to (internal) b) Create corporate templates that fit our values identity and will be the ONLY items used for all communications / publicity (posters, leaflets, surveys) by the HSCP and its teams (see Appendix 7) c) Corporate policy to also include and to further embed our corporate identity to enhance our communications both internal and external. (For defined values to be taken seriously, employees must understand the consequences of non-compliance. Values and vision should be a prominent feature and SMT should offer guidance and support in meeting the requirements of this policy)	Senior Management Team	Immediate to (March 2020)
2.	The HSCP and its teams will use established mechanisms to regularly communicate with the HSCPs internal and external audiences through the channels outlined (see Appendix 6) in this Communications Strategy	Management Team and Senior Managers /	January 2019 on-going
3.	Develop and conduct a communications survey/questionnaire for both internal and external audiences who the HSCP communicates with and to understand: • the current awareness of the HSCP and its services • knowledge of our planning structures • the channels used for communications • the effectiveness of the HSCPs existing communications channels	Senior Management Team	By December 2019 (baseline) December 2020 (mid-point)



	 preferred communications channels and internal and external stakeholders' awareness and understanding of the HSCP and IJB and their work. 		December 2021 (end - point)
	To track changes and implement opportunities for improvement and conduct the survey three times over the course of the		
	Communications Strategy, which will further inform its review in 2021		
4.	A feasibility study will be undertaken to scope out the possibility of developing and implementing an external website for the HSCP and IJB to communicate with internal and external stakeholders including patients, service users, carers and their representatives and the public	Senior Management Team	by December 2021
5.	The HSCP will examine different and better ways of communicating with patients, service users, carers and their representatives, particularly hard-to-reach and vulnerable groups	Senior Management Team	by May / June 2020
6.	Establish, develop and implement a programme of external engagement opportunities (HSCP events x 2 per annum) for carers, patients, and public and service users to meet staff and managers, by using the PSUC group as a vehicle for participation	Senior Management Team	by May / June 2020
7.	Create and deliver a HSCP-wide specific engagement and participation strategy, (linking in with this Communications Strategy) including all HSCP teams covering all engagement, participation and involvement, including service change/redesign framework	Senior Management Team	by March 2020



APPENDIX 1. COMMUNICATIONS MATRIX

The following tables sets out the channels that will be used by the HSCP to communicate with its stakeholders at both corporate and partnership levels.

East Dunbartonshire Health and Social Care Partnership Communication Matrix East Dunbartonshire Council / NHS Greater Glasgow and Clyde Corporate Level

Communications	Corporate /	Internal /	Frequency			s audienc							
Channel	ED HSCP	External		Patients, service users, carers and their reps	Public	ED HSCP staff	EDC and NHS staff	ED HSCP IJB, Elected members, NHS Non- Exec Directors	Trade Union / Staff side	Contractors/ Providers of health and social care	East Dun CPP members	Scot Gov and/or MPs / MSPs	The media
'Our News' HSCP staff newsletter	ED HSCP	Internal	Monthly			х	х	х	х				
Team Brief - Susan Manion (Chief officer)	ED HSCP	Internal	As and when required			х	х	х	х		х		
Managers briefings and Core Brief (NHS GGC)	Corporate	Internal	As and when required			х	х	х	х		х		
HSCP webpages on EDC website	Both	External	On-going	х	х	х	х	х	х	х	х	х	Х
NHS GGC and EDC Intranet inc health and social care related web-pages (inc Staffnet and The Hub)	Both	Internal	On-going			х	х	х	х		x		
All HSCP staff emails (all NHS GGC and all EDC)	Both	Internal	On-going			х	x	x	x		x		
HSCP IJB and its committees approved agendas, minutes and reports	ED HSCP	External	On-going	х	x	х	х	х	х	х	х	х	х



Communications Channel	Corporate / ED HSCP	Internal / External	Frequency	Commu	nication	s audienc	е						
				Patients, service users, carers and their reps	The Public	ED HSCP staff	EDC and NHS staff	ED HSCP IJB, Elected members, NHS Non- Exec Directors	Trade Union / Staff side	Contractors/ Providers of health and social care	East Dun CPP members	Scot Gov and/or MPs / MSPs	The media
HSCP Twitter	ED HSCP	External	On-going	х	х	х	х	Х	Х	х	х	х	х
NHS GGC / EDC and its committees approved agendas, minutes and reports	Corporate	External	On-going	х	х	х	х	х	х	х	х	х	х
HSCP Service- specific channels: newsletters, websites, social media, leaflets, surveys, posters and projects/initiatives/ campaigns	ED HSCP	External	On-going	x	х	х	х	х	х	х	х	х	х
Public, Service User and Carer group participation / involvement	ED HSCP	External	On-going	х	х		х	х					
Public, Service User and Carer (PSUC) group - newsletter	ED HSCP	External	Quarterly	х	х		х	х	х	х	х	х	х
Public, Service User and Carer (PSUC) group - Posters and leaflets	ED HSCP	External	On-going	х	х		х	х	х	х	х	х	х





Communications Channel	Corporate / ED HSCP	Internal / External	Frequency	Commu	nication	s audienc	е						
Criamie	LDTISGF	LAtemai		Patients, service users, carers and their reps	Public	ED HSCP staff	EDC and NHS staff	IJB,	Trade Union / Staff side	Contractors/ Providers of health and social care	East Dun CPP members	Scot Gov and/or MPs / MSPs	The media
Local third sector interface (TSI) / voluntary	ED HSCP	External	On-going	х	х								
Independent providers	ED HSCP	External	On-going							х			
Events	ED HSCP	External	As and when required	х	х		х	х	х	х	х	х	Х
Solus screens in KHCC / health centres	ED HSCP	External	On-going	х	х								
'Health Working Lives' briefings, emails and posters	ED HSCP	Internal	On-going			х			х				
HSCP partnership briefings	ED HSCP	Internal	On-going			х			х				
Chief Officer and Heads of Service sessions, HSCP- wide Leadership sessions, Head of Service sessions with locality groups, iMatters and staff awards	ED HSCP	Internal	On-going			х			х				
All-staff emails (all HSCP, all health and all social work and all NHS GGC)	Corporate and ED HSCP	Internal	On-going		х			х					





APPENDIX 2. KEY POLICY DRIVERS

Community Empowerment (Scotland) Act 2015

Part 10 of the Act focuses on participation in public decision making. 'A new regulation-making power, enabling Ministers to require Scottish public authorities to promote and facilitate the participation of members of the public in the decisions and activities of the authority, including in the allocation of its resources. Involving people and communities in making decisions helps build community capacity and also helps the public sector identify local needs and priorities and target budgets more effectively'. www.gov.scot/publications/community-empowerment-scotland-act

The Scottish Government National Health and Wellbeing Outcomes (2014)

Outcome 8 concentrates on engagement: 'People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide'.

www2.gov.scot/National-Health-WellbeingOutcomes

Patient Focus Public Involvement (2006)

In 2006, Patient Focus Public Involvement was launched nationally. Patient focus, public involvement, often referred to as PFPI, emphasises two different ways in which people can participate in healthcare. Patient Focus: means the provision of treatments and services which put the needs of the person at the centre to improve their experiences and outcomes of care and treatment. Public Involvement: means involving people in decisions about how their health service is designed and provided. Public involvement should be part of the planning approach of an organisation. www.webarchive.org.uk/Resource/Doc/158744/0043087.pdf

Carers (Scotland) Act 2016

The Carers Act 2016 places a duty on local authorities and health boards to involve carers in planning the carer services they provide. must 'take such steps as they consider appropriate' to involve carers and carer representatives in the planning and evaluation of services that support carers. www.gov.scot/Unpaid-

<u>Carers/Implementation/Carers-scotland-act-2016</u>





APPENDIX 3. NATIONAL HEALTH AND WELLBEING OUTCOMES

	National Health and Wellbeing Outcomes
1	People are able to look after and improve their own health and wellbeing and live in good health for longer
2	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community
3	People who use health and social care services have positive experiences of those services, and have their dignity respected
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being
7	People using health and social care services are safe from harm
8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide
9	Resources are used effectively and efficiently in the provision of health and social care services



APPENDIX 4. COMMUNICATION STANDARDS

COMMUNICATION STANDARDS	
Open and honest	taking a person centred approach; sharing information which is truthful and accurate
In good time	providing up to date information as soon as possible, consistently and quickly
Clear	easy to understand; avoiding the use of jargon and in plain English
Accessible	meeting the standards of the Equality Act (2010). Use styles, formats, fonts and materials that are accessible and appropriate to the needs of the audience (Ariel 12 minimum)
Timely and accurate	support transparency, accountability and fairness
Relevant	informative with a focus on the needs of the intended audience
Three way	communication will be three way and work as a conversation - not a broadcast - with means for people to actively contribute at all levels and across the organisation





APPENDIX 5. KEY AUDIENCES AND STAKEHOLDERS

OUR KEY AUDIENCE GROUPS AND STAKEHOLDERS

- carers, patients, service users and their representatives
- the public and local residents
- staff working within East Dunbartonshire Health and Social Care Partnership
- East Dunbartonshire Council and NHS Greater Glasgow and Clyde employees
- East Dunbartonshire Integration Joint Board (IJB) Members
- East Dunbartonshire Council Elected Members
- HSCP Strategic planning group
- HSCP Locality planning groups (East and West)
- NHS Greater Glasgow and Clyde Executive & Non-Executive Director Board Members
- East Dunbartonshire Public, Service User and Carer (PSUC) group
- neighbouring HSCP Boards, NHS 24 and Scottish Ambulance Service (SAS)
- Trade Unions/staff representatives
- Contractors/providers of health and social care services and their representative groups (including third and independent sector and General Practitioners)
- Housing associations
- East Dunbartonshire Community Planning Partners (inc Scottish Fire & Rescue Service, Police Scotland, local colleges, Strathclyde Passenger Transport (SPT) Scottish Enterprise)
- MPs/MSPs within East Dunbartonshire and those who's constituency borders / overlaps and those with a health and social care remit
- Community councils / residents associations
- Relevant external organisations (e.g. Scottish Government & Scottish Health and Social Care Regulators), and;
- the media (local and national)





APPENDIX 6. COMMUNICATION CHANNELS

East Dunbartonshire Health and Social Care Partnership (HSCP)

- HSCP 'Our News' e-newsletter (staff newsletter with the Chief Officer's message)
- Team Brief (corporate briefing for staff from Susan Manion Chief Officer)
- East Dunbartonshire HSCP webpages (EDC website)
- East Dunbartonshire Council and NHS Greater Glasgow and Clyde health and social care specific web pages (Internet web pages for the public)
- Twitter @EastDunHSCP
- East Dunbartonshire HSCP Integration Joint Board and its committees approved agendas, minutes and reports
- health and social care service(s) specific newsletters
- service specific leaflets and posters displayed in GP offices, social work offices, health centres, hospitals, libraries, schools and community centres
- service specific projects/initiatives/campaigns
- local engagement groups (for example, PSUC group, Carers Group)
- third sector/voluntary and independent providers
- engagement events
- other channels (for example, service directories, EDC corporate comms/media stories and marketing campaigns)
- Healthy Working Lives briefings (internal letter / briefings to inform staff within the HSCP about health and wellbeing issues and promotions/campaigns)
- HSCP Briefing (briefing for staff within the Partnership on specific topics affecting them - as and when required)
- Team Meeting Communications Briefing (communications as part of staff team meetings)
- staff engagement opportunities including Chief Officers and Heads of Service sessions, annual staff awards, Head of Service sessions with locality planning groups, service-led sessions with Core Leadership Leads and iMatters
- all-staff emails (internal / external)
- word of mouth, one to one discussion with stakeholders





NHS GGC and East Dunbartonshire Council also have various channels to communicate with key stakeholders.

NHS Greater Glasgow and Clyde (GGC) (corporate communications):

- Health News (public newspaper)
- Staff News (staff magazine)
- NHS Greater Glasgow and Clyde Internet website
- Staffnet (Intranet website for staff and authorised users)
- Twitter @NHSGGC
- Facebook NHS Greater Glasgow and Clyde
- Team Brief (corporate briefing for staff from NHS GGC Chief Executive)
- Core Brief (corporate briefing for staff on specific topics affecting them)
- all-staff emails
- Health Board approved Board/Committee agendas, minutes and reports

East Dunbartonshire Council (EDC) (corporate communications):

- Edit (staff magazine)
- East Dunbartonshire Council website
- The Hub (Intranet website for staff and authorised users)
- Twitter @EDCouncil
- Facebook East Dunbartonshire Council
- Executive Message and Corporate Briefing (corporate briefing for staff from the Chief Executive)
- Managers' Briefing (corporate briefing for staff on specific topics affecting them)
- Corporate Announcements (all-staff emails)
- East Dunbartonshire Council approved Committee agendas, minutes and reports





APPENDIX 7. CORPORATE IDENTITY

(TEMPLATE CREATION)

Stationery and written communications

- Letterheads
- Compliment slips
- Fax header sheets
- Emails
- Business cards

Digital and online communications

- Webpages (EDC website)
- Intranet (NHS GGC / EDC)
- Social media channels (Twitter)
- E-bulletins and newsletters (Our news / patient/public newsletters)

Patient information

- Leaflets
- Posters
- Surveys

Presentations

PowerPoint presentations

Marketing and promotional and organisational development materials

- Displays
- Exhibition/event stands
- Pull-up banners

Uniform and identification

Lanyards (reminder to all staff this must be adhered to)

Media Relations

· All templates form part of the Identity



