Communications Strategy
2013-2015

Brighton and Sussex University Hospitals
NHS Trust
Introduction

Executive Summary

The opportunities and challenges facing Brighton and Sussex University Hospitals in the short, medium and long term are considerable and there is an indisputable necessity to keep strengthening our reputation. An effective and ambitious communication function is no longer an extravagant luxury for any health service provider. Good and bad communication and/or the decision to communicate or not, can seriously impact on public confidence, staff morale and organisational reputation and result in lasting benefit or harm. Communicating well is vital to success, perceived and actual, and the importance of providing clear, consistent, relevant and timely communication cannot be underestimated.

This Communication Strategy sets out to build on the improvements made to our communication infrastructure in the last five years with the aim of ensuring that we continue to do the basics consistently well whilst extending our scope and ambition to better support the delivery of our vision, strategic goals and Integrated Business Plan.

As a Communications Team we will vary our emphasis according to need so that we sustain and progress our general internal and external communication channels; provide support to assist with the delivery of specific projects or programmes and pursue new ideas including those with the potential for generating our own income.

Traditionally communications strategies have talked about internal and external audiences as separate entities and, by implication at least, suggested that distinct approaches and methods of communication are needed for each. This increasingly feels like a false distinction and a needlessly restrictive and inefficient approach. To categorise, for example, the media as an external communication tool and Talkback as a means of communicating internally, misses the point that both are accessible to all. It is naïve and overly simplistic to assume that by producing a newsletter “for GPs” we have therefore communicated with GPs. What seems more sensible is to assume that whilst some GPs might read such a newsletter, others will read the local paper, others will look at our website and others talk to their neighbour who works for BSUH.

This Communication Strategy therefore sets out what we want to achieve and our approach to achieving it under the primary headings of key areas of work, rather than which audience we are trying to reach. It presupposes a degree of responsibility on the part of all those with a vested interest in our hospital to make the choices, which we know they are already making, to access or not the different methodologies we use.
Context and Background

We are committed to keep improving communication and engagement. Through effective communication we can manage, motivate, influence, explain and create conditions for change. The need to communicate and engage well with our staff, patients, the public, our partners and key stakeholders is central to the ongoing reputation management of BSUH. Communication is more than an exchange of information; it is as much about attitude and behaviour and as such involves everyone. Our Communications Strategy for the next three years will do all of the above whilst supporting delivery of our strategic goals:

BEST AND SAFEST CARE

- We will demonstrate the best and safest care in our District General Hospital services and our more specialised and tertiary services, evidenced by regulatory compliance, health outcomes, patient satisfaction and clinical opinion.

- We will deliver a step change in the level of safety our patients can expect by building on innovations such as the appointments of the first Chief of Safety in a UK hospital.

ACADEMIC EXCELLENCE

- We will work with our partner Medical School and the Kent, Surrey and Sussex Postgraduate Deanery to deliver the best teaching and training of current and future NHS professionals across primary and secondary care.

- We will treat the most complex clinical cases.

- We will contribute to clinical research in clearly defined areas; currently these are oncology, neurosciences, infectious diseases, ageing and paediatrics.

HIGH PERFORMING

- We will deliver national and local standards, and establish stretch targets for best and safest care that match the aspirations of our public and staff.

- We will support and develop our doctors, nurses, allied health professionals and our managers as natural leaders at every level across the hospital.

- We will invest in succession planning and attract the best and most able people.

- We will be financially responsible.

- We will consistently seek productivity and efficiency gains to enable continuing investment.
Purpose and Objectives

The overarching purpose of this Communication Strategy is:

- To build and sustain our reputation for providing excellent services and the confidence of our patients and their families that they are getting the highest standards of care;
- To gain widespread support and understanding of our strategic goals and ambition amongst all those with a vested interest in our hospital;
- To ensure those with a vested interest in our hospital feel able to influence and help shape our plans and operational priorities.

The principle objectives of this Communications Strategy are:

- To ensure our vision, values and future plans are communicated clearly to everyone with a vested interest in BSUH;
- To ensure our catchment populations have access to accurate, up-to-date and timely information about BSUH;
- To support delivery of our strategic goals;
- To ensure our patients have access to the information they need, when they need it;
- To promote BSUH as a good place to work; to inform, listen to and motivate our staff and to ensure they feel their contribution is recognised and valued;
- To analyse our existing communication tools and media, make any adjustments necessary and design and introduce new communication methodologies to fill any gaps identified;
- To keep our staff well informed and support everyone in the delivery of clear and effective communication to patients, their families and other key audiences;
- Evaluate the success of our programme of communication methodologies on a regular basis and make adjustments as appropriate;
- To ensure GPs, Clinical Commissioning Groups and other purchasers and regulators are kept informed about the services delivered by BSUH and that we are aware of the priorities and requirements of those who purchase or regulate acute healthcare.

Audiences

BSUH has a large number of key and statutory relationships, these include:

- All staff groups including volunteers
- Patients, their families, carers and patient groups
- Trade Unions and Staff Side Representatives
- Future NHS Foundation Trust members
- Future Board of Governors
- Other organisations in our local health and social care system
- Our Clinical Commissioning Groups
- NHS Sussex
- NHS South of England
- Voluntary organisations
- Local authorities for Brighton and Hove and Mid Sussex
- Local MPs
- Local media
BSUH employs almost 7000 people, working across two main sites (the Royal Sussex County Hospital and the Princess Royal Hospital) and numerous satellite sites (including Brighton General Hospital, the Park Centre for Breast Care, Hove Polyclinic and Lewes Victoria Hospital). Every member of staff has the ability to be a BSUH ambassador and ensuring they are informed and involved is vital to the success and reputation of the organisation.

Good internal communication should help staff communicate effectively with the people they interact with on a daily basis, and motivate and empower them to meet the needs and expectations of our patients. A ‘one size fits all’ approach to staff communication and engagement will only ever be partially and intermittently successful. Research indicates that NHS staff prefer verbal communication underpinned by written communication, particularly during times of significant change, and we therefore need to strengthen and broaden the variety and scope of our regular internal communication channels. To ensure we reach as many staff as possible with news and information which is relevant and of interest to them we will:

- Audit the accessibility and usefulness of our existing suite of internal communication media (All Staff Info-Mail; Chief Executive’s Friday Message including blog; Nursing and Midwifery Matters; Talkback; Staff Info-Net including the ‘Your Say’ staff discussion board) and continue to provide/adjust these in line with the results of these audits;
• Undertake to talk to staff in every (main) area of the hospital and establish their preferred way of receiving news and information. In response we will design and implement a suite of new communication tools for reaching different staff groups and areas throughout the hospital;

• Introduce dedicated news/information Notice Boards in prominent areas throughout the County, the PRH and our satellite sites and work with identified Communication Champions in each area to ensure that key internal communications are displayed on these boards and that they are refreshed and updated in a timely way;

• Work with the Chief Executive and members of the Hospital Management Board to establish regular, informal Communication Network meetings to stimulate and perpetuate the verbal communication of key news and information;

• Conduct our own, more frequent and targeted staff surveys and publish the findings on the intranet. The annual NHS Staff Survey is used to inform our approach to organisational development and the areas on which we focus improvement measures. A series of shorter, more targeted staff surveys, focussed on, for example, a group of wards with similar patient profiles would provide more immediate and likely more pertinent feedback. Comments from these questionnaires will be themed, published on the info-net, and provided to HR to enhance our understanding of the views and experiences of our staff;

• Design a set of new tools to communicate urgent or immediate news which clearly differentiates this from the day-to-day news which people need to know but not right now.
Celebrating Success

Recognising the success of individuals, teams and services plays an important part in raising morale and creating a culture in which employees feel their work is valued and appreciated. The Hospital Star Awards have an important part to play and an element of external and independent adjudication is a strong factor in establishing credibility. The Awards have now established themselves as a key event in the BSUH calendar with 755 nominations in 2012.

However, celebrating success needs to happen on a more regular basis and at a more local level but also externally focussed in a way that contributes to our reputation for expertise and high quality care with the resultant impact on our position to retain and attract a high calibre workforce. The Hospital has considerable success at a national and international level and opportunities to capitalise on this is maximised through public relations activity. Teaching and research will play an increasingly important part in this. We will:

- Continue to build on the success of the Hospital Star Awards and maximise the internal and external benefits of the scheme;
- Continue to produce Talkback (quarterly staff magazine) and develop other media for promoting and celebrating success within individual departments, specialties, Divisions, throughout the hospital and externally;
- Secure the placement of stories involving innovation and good practice in national publications including professional and specialist journals;
- Encourage and support staff in submitting entries to external award schemes;
- Develop a ‘ward of the month’ and other schemes to promote and reward success at a local level;
- Develop a series of web-based media to raise internal awareness of local projects and initiatives and share success stories and good practice as widely as possible e.g. nursing and midwifery news.
The BSUH Patient Information Service has a portfolio of in excess of 250 patient information leaflets. These are subject to strict guidelines in respect of content and clarity and in many cases form part of the consent to treatment process. In addition patient information leaflets must meet the requirements of the NHS Litigation Authority and the CQC.

Looking forward, patient information will need to be seen in the context of greater patient choice, greater competition within the provision of health services and as a key component in quality and financial measures such as readmissions. To ensure our Carer and Patient Information is of the standard it needs to be and to respond to the growing demand for clear, appropriate and accessible information we will:

- Improve the process of developing new patient information leaflets by providing a bespoke advisory and support service to frontline staff tasked with producing patient information leaflets. This will include help with the writing, layout and printing of new leaflets as required and the production of a suite of patient information leaflet templates to enhance and standardize the clarity and quality;

- Improve the process of reviewing and updating existing patient information leaflets through the undertaking of a monthly audit of leaflets which are “live” on the Carer and Patient Information (CPIG) database;

- Extend the Carer and Patient Information certification through manual audits on wards of leaflets used that have not been through the review process;

- Explore and if appropriate introduce the opportunity for local businesses to advertise on our patient information materials as a means of income generation;

- Improve the availability of patient information on our website including the development of patient information sections on departmental/speciality web pages;

- Research and pilot the development of patient information in other formats including video and audio;

- Produce new and up-to-date versions of existing generic carer and patient information including the “Welcome To” booklet and Visitor’s Code and, following consultation with patients and carers, develop new resources e.g. accessible and easy to follow site maps.
Online and Digital

During 2012 the public website received around 40,000 unique visitors a month. To put this reach into perspective 16,000 patients come through A&E in BSUH last year. The website is the primary channel that the public use to proactively seek information about BSUH. The staff extranet/info-net receives around 30,000 unique visitors a month and has become the main central source of information and news for staff.

A well presented and managed website has a multitude of benefits. It can: provide an outstanding patient service and encourage feedback; cement our reputation for excellence and encourage word of mouth recommendations; Instil pride and loyalty amongst our staff; provide patients, the public and GPs with comprehensive and clear information about our services and give people a convenient and accessible way of giving us both positive and negative feedback about their experience.

The way the hospital uses digital communication channels is constantly changing as new methods and technologies are developed and our aim is to stay at the forefront of these advancements and utilise them to communicate widely and effectively with different groups in a timely and appropriate way. To do this we will:

- Migrate all of our websites to a new support service, which will give us timely technical support and bring us up to the latest version of our Content Management System (CMS) software. Being on the latest version of the CMS will give us a robust platform to start some new developments on the site which have not been possible up to now;

- Make BSUH websites more search-led to enable users to quickly access the information and documentation they are looking for, rather than relying on an increasingly complex hierarchical site structure, which can make it hard to locate information. This is dependent on upgrading to the latest version of the EasySite CMS.
• Develop a responsive public website which gives users the ability to view it effectively on a range of mobile devices. The new site would also have a range of new features and be redeveloped around detailed analysis of how users currently use the site including most accessed content, search terms and technologies used;

• Redesign the extranet to bring it into line with recent corporate publications and the public website. Also rework the homepage to better suit our communications requirements, which have changed significantly since the site was launched;

• Continue to embrace social media and investigate new channels, tools, networks and communities. Also monitor the effectiveness of our presence and ensure we are maximising our potential;

• Improve the quality of our online information, keeping it up-to-date and comprehensive, and develop new sites as the business requires including departmental sites;

• Present information online in new and innovative ways using web graphics, news feeds, e-books, video and audio clips as appropriate to the context and the audience;

• Investigate the development of apps that will enhance staff/public experience;

• Investigate the possibility of advertising online. Our detailed archive of web analytics means this could be targeted to audience sectors;

• Use the tools and modules at our disposal in the CMS to streamline business processes that are currently offline or done in a less effective way, saving time and making them more robust. This includes new online forms, directories and document browsers;

• Continue to encourage two-way communication and feedback with our local health economy and staff via social channels, blogs and discussion forums.
Media Relations

As a public sector organisation and the only teaching hospital in the South East Coast region, BSUH attracts a great deal of interest from the local and national media. This includes newspaper, radio and television coverage, both news-related and documentary.

The media’s representation of BSUH can have a disproportionate influence on the public perception of the hospital’s services and, as such, plays a significant role in helping to shape the reputation of the hospital.

It is essential the power of the media is never underestimated and that all contact between the media and the hospital is through the Communications Department.

To ensure the reputation of the hospital is promoted and protected in relation to the media, we will:

- Ensure the hospital responds promptly and robustly to all media enquiries, positive and negative, and improve the identification of potential positive stories and facilitate their exposure to the media;

- Introduce and develop a new initiative of audio recording to enhance and increase radio media coverage. This will involve interviews with key members of staff being recorded and distributed over email and the internet to relevant local radio stations;

- Develop the use of audio podcasts on the public website and staff extranet to enhance positive news coverage of the hospital and communication with staff and patients;

- Explore the possibility of developing the use of ‘multi-media’ press releases, covering every aspect of media for use by the press. This will include written word, pictures, audio clips and video coverage;
• Improve our media monitoring process and produce a monthly analysis of coverage to track positive and negative trends. The graph below shows the weekly positive and negative media coverage over three months since September 2012 and this analysis will be continued.

Press Coverage 2012 - Weekly Score

• Provide media training for members of the executive team and other hospital staff who are likely to be called upon for comment or interview. This will cater for a wide range of media outlets (television, radio and newspaper interviews), be designed to reduce the impact of negative and maximise the impact of positive publicity;

• Oversee all filming carried out on hospital property and involving hospital staff and, where appropriate, generate income through the facilitation of filming for which we could charge a location fee;

• Monitor external websites which encourage patients to share their experience of hospital and its services, such as NHS Choices, respond to them promptly where relevant and explore new ways of encouraging those with positive comments to post on them.
Clinical Commissioning Groups and GPs

Under reforms outlined in the Health and Social Care Bill, Clinical Commissioning Groups (CCGs) will take over responsibility for commissioning the majority of NHS services in England.

The engagement of primary care clinicians will therefore be a key element of ensuring that BSUH is seen as the provider of choice for the services which sit within our portfolio.

We also need to improve the ways we keep our commissioners informed about changes and developments to the services we want them to commission from us, as well as those we don’t. To achieve this we will:

- Develop a new website for GPs which is updated as often as necessary with regular, relevant news and updates from BSUH. Pushing information to GPs (via a more traditional newsletter format) has proved ineffective in the past. Having a central information portal enables us to share real-time news, links to other relevant web pages and contact lists (including the soon-to-be-launched GP contact page). It also enables us to communicate with primary care quickly in times of business continuity and/or major incident;

- This site will have a memorable URL (www.bsuh.nhs.uk/GPinfoLINK) which we will promote and publicise using several different mechanisms to give it a high profile and longevity amongst the GP community;

- We will ensure our new Clinical Strategy is shared with CCGs and other NHS partners in a format which is clear, accessible and draws their attention to the bits we need them to read.
Special Projects

There are a number of special projects which will require ad hoc communications support over the next two years. To provide this we will utilise our existing suite of communications tools, the new developments detailed above and also advise and support the relevant teams and leads in designing and implementing bespoke communication approaches and methodologies as required. The list of special projects below is not exhaustive and will likely need adding to within the life of this strategy.

Electronic Patient Record (EPR)
The EPR programme has its own Stakeholder Engagement Plan - which covers both internal users and external stakeholders - and is approved by the EPR Programme Board. The responsibility for implementing this will sit with the EPR Programme Team with ongoing advice and support from the Communications Team as and when required.

Foundation Trust
Our Foundation Trust application will require two streams of communication and engagement work; one which targets our own staff internally to ensure greater understanding of the need, process and purpose; the second around recruiting new members and more fully engaging with our existing membership.

3Ts
The 3Ts redevelopment will be focussing on the decant process and the Stage 1 main site preparation over the next 18 months. St Mary’s (adjacent to the RSCH on Eastern Road) is being prepared as an administration and management centre. Communication during this time will primarily focus on the staff and patient groups affected by the decant process and on keeping information about the site up-to-date as construction progresses.

The construction of the 3rd Cardiac Theatre at RSCH
Construction of the 3rd Cardiac Theatre has necessitated the narrowing of the North Service Road to a single lane and closing it completely at weekends. The main communication concern for this project is letting staff and the public know about alternate routes to the car park and Children’s Hospital.

The construction of the (Modular Theatre) Day Surgery Unit at PRH
Day Surgery capacity at PRH is being extended through the addition of a modular theatre in car park two.