

**Report To:** Inverclyde Integration Joint Board    **Date:** 12 September 2017

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IJB/31/2017/HW

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**Subject:** INVERCLYDE HSCP COMMUNICATION STRATEGY 2017 -2020

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## **1.0 PURPOSE**

- 1.1 The purpose of this paper is to seek approval from the Integration Joint Board (IJB) to implement this draft communication strategy, and to adopt the said strategy as our corporate approach to communication with members of the public, service users, carers, partners and stakeholders.

## **2.0 SUMMARY**

- 2.1 As a requirement of the Public Bodies (Joint Working) (Scotland) Act 2014, Integration Joint Boards are required to produce and implement a communication strategy.
- 2.2 The attached strategy has been drafted in accordance with the said legislation. It provides a framework for how the IJB and the Inverclyde Health and Social Care Partnership (HSCP) will communicate with service users, carer's partners and other stakeholders both locally and nationally.
- 2.3 This strategy takes into account verbal and written communication as well as the use of other visual or sensory formats. It takes into account the use of technology, interpreting services and third party involvement in establishing a two-way conversation or dialogue. This is to ensure that every opportunity is made to find the best means for an individual or partner to express their views, have these understood and be provided with an appropriate response.

## **3.0 RECOMMENDATIONS**

- 3.1 The IJB is asked to approve the Inverclyde HSCP Communication Strategy 2017 – 2020.

**Louise Long**  
Corporate Director, (Chief Officer)  
Inverclyde HSCP

## 4.0 BACKGROUND

- 4.1 In response to Public Bodies (Joint Working) (Scotland) Act 2014, the Inverclyde Health and Social Care Partnership (HSCP) was established. To meet the legal requirements, the HSCP produced an Integration Scheme. This document set out the commitment and processes by which it would adhere to its duties and obligations and delegated functions under the legislation.
- 4.2 As part of these commitments, duties and obligations, the attached communication strategy has been produced to demonstrate how the IJB and HSCP will communicate with service users, carers, partners and stakeholders.
- 4.3 The attached Inverclyde HSCP Communication Strategy 2017 – 2020 was created in collaboration with the Inverclyde HSCP Strategic Planning Group (SPG).
- 4.4 The SPG is made up of representatives from the Inverclyde Advisory Network, Third and Independent sectors, Allied Health Professionals, Nurse Practitioner, NHSGGC acute services, Staff Partnership Forum, Inverclyde Housing Association Forum, Inverclyde Council Strategic Housing Services, Community Planning Partnership, Inequalities, Migration and Strategic Housing, Chief Officer, Chief Financial Officer and HSCP Heads Of Services.

## 5.0 IMPLICATIONS

### FINANCE

There are no financial implications from this report.

#### 5.1 Financial Implications:

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

### LEGAL

- 5.2 There are no legal implications from this report

### HUMAN RESOURCES

- 5.3 There are no legal implications from this report

### EQUALITIES

- 5.4 Has an Equality Impact Assessment been carried out?

X	YES.
	NO –

5.4.1 The Communication Strategy 2017 – 2020 is a subset of the HSCP overarching strategic plan as required by the Public Bodies (Joint working) (Scotland) Act 2014. Therefore, it has been reviewed under the existing Strategic Plan equality mainstreaming report, equality outcomes and equality impact assessment documents. It has been found to be in keeping with these documents.

5.4.2 How does this report address our Equality Outcomes?

The Inverclyde HSCP Communication Strategy 2017 – 2020 meets our equality outcomes as highlighted below.

5.4.1.3 **People, including individuals from the protected characteristic groups, can access HSCP services.**

A framework will be in place to support people with protected characteristics to communicate any access issues in the way that is best or easiest for them.

5.4.1.4 **Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.**

Communication is actively encouraged, promoting a raised awareness of the communication needs of people with protected characteristics.

5.4.1.5 **People with protected characteristics feel safe within their communities.**

Not applicable.

5.4.1.6 **People with protected characteristics feel included in the planning and developing of services.**

By offering a range of communication approaches, people with protected characteristics can actively participate in the planning and developing of services, in ways that suit their abilities best.

5.4.1.7 **HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.**

The Communication Strategy reinforces that staff need to be adaptive to the various needs of people with protected characteristics.

5.4.1.8 **Opportunities to support Learning Disability service users experiencing gender based violence are maximised.**

Not applicable.

5.4.1.9 **Positive attitudes towards the resettled refugee community in Inverclyde are promoted.**

Not applicable.

#### **CLINICAL OR CARE GOVERNANCE IMPLICATIONS**

5.5 There are no clinical or care governance implications

## NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

5.6 The Inverclyde HSCP Communication Strategy 2017 – 2020 can be indirectly linked to all of the nine National Wellbeing Outcomes. However, section 2.10 of the strategy sets out the three specific outcomes the document attempts to meet. These have been summarised below.

5.6.1 **People are able to look after and improve their own health and wellbeing and live in good health for longer.**

Not directly reflected in this strategy.

5.6.2 **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.**

Not directly reflected in this strategy.

5.6.3 **People who use health and social care services have positive experiences of those services, and have their dignity respected.**

The Communication Strategy sets the precedent that all interactions between the HSCP should ensure:

- The content of communication is in a preferred format to meet the needs of service users carers communities and localities;
- That communication is in plain English, and
- Communications are respectful in content.

5.6.4 **Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.**

Not directly reflected in this strategy.

5.6.5 **Health and social care services contribute to reducing health inequalities.**

Not directly reflected in this strategy.

5.6.6 **People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.**

Not directly reflected in this strategy.

5.6.7 **People using health and social care services are safe from harm.**

Not directly reflected in this strategy.

5.6.8 **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.**

The strategy sets out the various communications, information and feedback routes available to ensure that

- staff are given every opportunity and encouragement to take part in meaningful engagement and two way conversations;
- To ensure that our partner and stakeholders have the same routes and two way conversations with the HSCP.

- The Communication Strategy is reviewed on an annual basis by the Strategic Planning Group, Communications Group and partner and stakeholder feedback processes.

#### **5.6.9 Resources are used effectively in the provision of Health and Social Care.**

As part of our core values the strategy strives to do better in learning from feedback and to improve the communications we have with service users, carers, communities and localities in Inverclyde. Working with all our partners and stakeholders we work collectively to implement deliver and review the Inverclyde HSCP Communications Strategy in the most effective and efficient ways possible.

### **6.0 CONSULTATION**

6.1 As stated at 4.4 of this report, this plan was collaboratively produced with partners. It has been widely circulated and consulted on via the SPG and associated representatives and networks throughout its development.

### **7.0 LIST OF BACKGROUND PAPERS**

7.1 Public Bodies (Joint Working) (Scotland) Act 2014

7.2 Inverclyde HSCP Integration Scheme

7.3 Inverclyde HSCP Equalities Impact Assessment



## COMMUNICATION STRATEGY 2017 - 2020

### *Improving Lives*

Principal Author:	Martin McGarrity: Integration Facilitator
Responsible Head of Service:	Helen Watson: Head of Strategy and Support Services
Approved by:	[Integration Joint Board]
Date approved:	
Date for Review:	
Version:	Final Draft
Replaces previous version: [if applicable]	

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DRAFT

## 1. Introduction

1.1. We are pleased to present the Inverclyde Health and Social Care Partnership (HSCP) Communication and Engagement Strategy for 2017 – 2020.

1.1.1 Inverclyde HSCP has a well-established and strong collaborative approach to engagement and communication with service users, staff, partners and stakeholders.

1.1.2 This key document sets out how the Inverclyde Integration Joint Board (IJB) will:

- Meet the four values and principles;
- Provide the link between this document and our strategic plan 2016 – 2019;
- Have a clear and effective approach to communication and engagement;
- Illustrate our approach to collaboration and joint working with service users, unpaid carers, partners and other stakeholders;
- Describe how this document will support the 9 national and wellbeing outcomes;
- Set out the decision making processes in the carrying out of integration functions.

1.2 The strategy details:

- Our strategic approach to communication and engagement and objectives;
- Who we will communicate and engage with;
- Our approach to quality, effective communication and engagement;
- The implications on equalities, accessibility and vulnerable individuals;
- How we will review and evaluate the strategy.

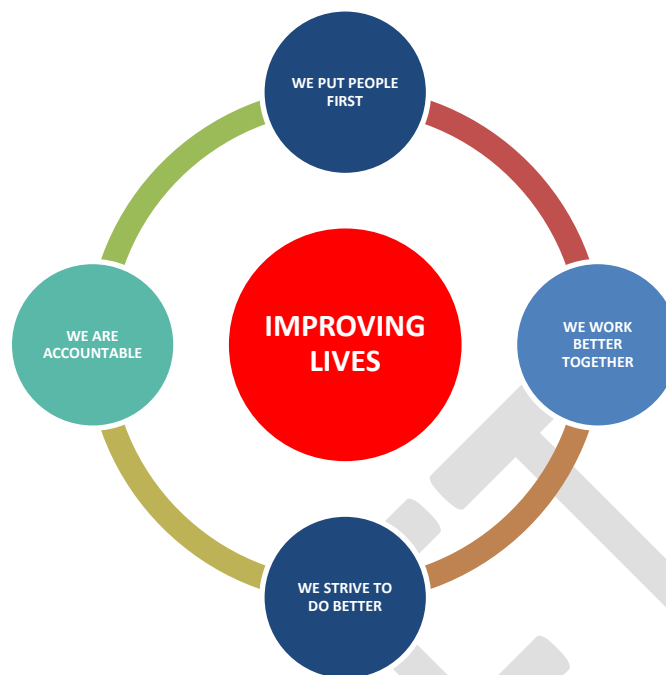
## 2. Strategic Approach

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2.1 Our Health and Social Care Partnership (HSCP) has been set up in response to the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, often referred to as the integration legislation, but here in Inverclyde, we have had integrated services since 2010. That means we have strong foundations to take forward our vision - **Improving Lives**. This vision is underpinned by the values in diagram 1.



**Diagram 1: HSCP values**



- 2.2 These values are reflected in the commitments of the Inverclyde Integration Scheme in line with the Public Bodies (Joint Working) (Scotland) Act 2014.
- 2.3 This document aims to set out these key values and describes who we will engage and communicate with and how we aim to achieve this over the next three years.
- 2.4 The Integration Joint Board (IJB) is responsible for the delivery of our values. They also hold the overall governance for communication and engagement through the HSCP reporting structure which demonstrates to the public that **we are accountable**.
- 2.5 The implementation of the strategy and its values will be monitored by the joint Strategic Planning Group (SPG) and indicates our commitment to working **better together**.
- 2.6 The SPG will review its communication and engagement strategy on an annual basis to ensure it is fit purpose and to ensure that **we strive to do better**.
- 2.7 Our approach and values are at the heart of our Strategic Plan and central to our commitment to **put people first**.
- 2.8 The Strategic Plan is the main document that sets out Inverclyde HSCP integration arrangements and functions over the next three years in line with the nine national wellbeing outcomes. It will also underpin our drive to strengthen our relationships with local people through our locality arrangements.

2.9 You can find a copy of our strategic plan, which includes the nine national wellbeing outcomes, together with all of our current plans, strategic needs assessment and housing contribution statement at: <https://www.inverclyde.gov.uk/health-and-social-care/health-and-social-care-partnership-strategic-plan>

2.10 As part of the Integration legislation, this Communication and Engagement Strategy strives to meet our commitment to achieving the nine National Wellbeing Outcomes as set out in table 1. **Only the outcomes which are directly relevant to this strategy are set out here for ease of use.**

**Table 1 – The National Wellbeing Outcomes**

<b>Number</b>	<b>Outcome</b>
<b>3</b>	People who use health and social care services have positive experiences of those services, and have their dignity respected.
<b>8</b>	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.
<b>9</b>	Resources are used effectively and efficiently in the provision of health and social care services.

### **3. Communication Objectives**

3.1. Inverclyde HSCP has developed this strategy to shape how we will communicate and contribute to building on our successful and effective partnerships and working arrangements. We are confident that the objectives set out below will build trust and confidence in our interactions and conversations with service users, carers and all our partners and stakeholders. These objectives are:

- To ensure branding is distinctive and recognised as a separate legal entity from our parent organisations;
- Make effective use of our branding to promote our identity, values and principles;
- To embed a culture of honest, openness and transparency in all our interactions;
- To ensure our priorities are articulated through effective publications;
- To establish and maintain effective conversations with all partners and stakeholders;
- To promote accessible and equalities-sensitive ways of communicating with various groups and those with protected characteristics living and / or working in Inverclyde;
- To ensure our staff are provided with recognisable identification;
- To ensure effective ways of communicating with staff, parent organisations, people who use and provide health and social care services and key stakeholders such as GPs, independent, third and housing sector partners and other contractors;

- To ensure all staff are aware of the objectives of integration and their roles in achieving these through verbal and written communication;
- Ensure our Chief Officer, Heads of Service and Service Managers are supported to build effective two way communication within their teams;
- Use a wide variety of communication approaches and research the most up to date techniques, to effectively connect with the public;
- Ensure that local communities are aware of health and social care information and services available to them so they can make informed choices;
- To empower and enable opportunities to the population of Inverclyde to provide the HSCP with feedback on our services through complaints, comments, compliments, suggestions, consultations, surveys or face to face contact.
- To provide opportunities for engagement. Making use of focus groups, engagement events and surveys to support continuous learning, quality and improvement.
- To develop a digital strategy over the next 3 years to support engagement with the wider public through social media.

#### 4. Who will we communicate with?

4.1 Our communication stretches across Inverclyde, and in particular, our wellbeing localities. However, we are also responsible for communicating with services across Scotland from Scottish Government, Elected Members, Local Authorities and NHS Boards and Regulatory Bodies.

4.2 To deliver on our purpose to plan and develop health and social care services for the people of Inverclyde, we are committed to **working better together in** communicating with service users, carers, partners and stakeholders. We therefore have set out a list of partners and stakeholders we routinely communicate with. This list is not exhaustive:

People using our services		
Individual service users and families	Unpaid carers as equal partners in care	Members of the public;
Independent advocacy	Solicitors	Patients Advisory and Support Service
People living in the three wellbeing localities, communities and neighbourhoods across Inverclyde		

People Delivering services		
The health and social care workforce	Unpaid carers as equal partners in care	Volunteers;
Foster carers	Professional staff	Trades Unions;
People who support the delivery of health and social care		

Partners and Stakeholders		
Internal to HSCP	External to HSCP	Support to HSCP
Community Planning Partners – Inverclyde Alliance	Partners in primary care such as GPs, Dentists, Pharmacists and Optometrists	Inverclyde Council, Education and Communities Directorate
Unpaid Carers	Ardgowan Hospice	The Scottish Courts and Children's Hearing system
Inverclyde Council Committees	Acute hospital (secondary care) sector partners	Police Scotland
HSCP staff	Third Sector Partner Organisations	Scottish Fire and Rescue
Contractors	Independent Sector Providers	The Scottish Ambulance Service
Allied Health Professionals	Children's Reporter Administration	NHS Greater Glasgow and Clyde Board
Staff Partnership and Practitioner Forums	Adult Protection Committee	Stakeholders from national and local representation and negotiation bodies
Housing Sector Providers	Child Protection Committee	The Scottish Prison Service
Inverclyde Council Safer and Inclusive Communities	Local and national media	Inverclyde Community Justice Partnership to the HSCP.
Professional regulatory and scrutiny Stakeholders	Your Voice	Inverclyde Carers Centre
Criminal Justice	North Strathclyde Multi-Agency Public Protection Arrangements Strategic Oversight Group (MAPPA SOG).	Elected Members, MSPs and MPs
	MAPPA Operational Group (MOG).	

## 5. Our approach to quality and effective communication

5.1 The style and standard of communication within Inverclyde HSCP will demonstrate our overarching values principles and culture which **puts people first** and **strives to do the best** we can to **work better together**. We will be:

- ✓ **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 Equalities Act 2010; being available in font size 12 as standard for ease of reading; Audio format

for listening; in pictures to see if necessary and in a preferred language using appropriate media to support understanding;

- ✓ **Relevant** – informative with the focus on the needs of the intended audience;
- ✓ **Inclusive** – speaking face to face or by telephone whenever possible; encouraging interaction and valuing the feedback from discussion in a preferred format or language suitable to the situation and need.

## 6. Equalities

- 6.1. People who access our services including children and young people, may have a specific communication need (e.g. visual or hearing impairment, additional learning needs, or because English is not their first language). It is therefore important that information is accessible, and in the person's preferred format or language that is easily understood of the intended audience.
- 6.2 As stated elsewhere in this strategy, verbal and written communication in visual or sensory formats is crucial to minimising misunderstandings or confusing messages being exchanged. Therefore, the strategy takes into account the use of technology, interpreting services and third party involvement in establishing a two-way conversation or dialogue. This is to ensure that every opportunity is made to find the best means for an individual or partner to express their views, have these understood and be provided with an appropriate response.
- 6.2 As a companion document to the Inverclyde HSCP Overarching Strategic Plan 2016 – 2019, the Equalities Impact Assessment (EQIA) undertaken for that document is relevant to the communication strategy. Therefore this document has been reviewed against the existing and active EQIA and found to be compliant with the equality duties prescribed by the Equalities Act 2010 and our equality outcomes and mainstreaming report.
- 6.3 The Communication Strategy and Equality Impact Assessment will be presented for approval to the Integration Joint Board prior to its publication.

## 7. Implementation, Review and Evaluation

- 7.1 The Communication Strategy will be fully implemented within three months from its publication on the HSCP website.
- 7.2 This strategy will be reviewed on a yearly basis from the date of it being published to ensure it remains fit for purpose.
- 7.3 A collaborative evaluation will be undertaken 6 months prior to the 2019 expiry date.