## Awareness Raising Strategy 2017/18

## The purpose of this paper is;

To outline the proposed awareness raising strategy for 2017/18, to shape our awareness activity and investigate how awareness activity sits alongside our current communications, VCFS, stakeholder mapping, volunteer and engagement strategy.

To review what we are currently doing to build awareness, who we should be talking to when driving awareness (within our resource and budget) and identify the relevant metrics to put in place to measure and evaluate our success, so that we have the information we need to make best use of our resources in future years.

Note: the awareness – raising sub group met on 28th April 2017 and the discussions during that meeting helped form the basis of this paper.

## The Board is asked to;

* Review and feedback comments on the new awareness strategy outlined in this paper
* Endorse the areas we proposed we will target for new awareness-raising and how these sit alongside our other existing strategies (all of which have elements of awareness-raising within them)
* Endorse the strategy and the next steps to be taken to develop it into an implementation plan.

Note: There are no significant budget implications to these plans as the Eagle Radio campaign has already been agreed and paid for. Any spend on social media will come from our existing communications budget.

## Introduction

We have a vision relating to awareness that states;

*Vision: Healthwatch Surrey’s role, function and services are known, understood and valued by consumers and therefore they readily contact us.*

*Goal: To have a simple, widely understood identity and mission and ensure that at the time when people may benefit from contacting (or have stories to tell) Healthwatch Surrey, they know who we are and what we do, can find and interact with us easily and, where appropriate, do share their need and/or stories with us.*

Also for our vision, *to become a respected, trusted and credible champion of the consumer for health and social care in Surrey* the goal is to have relationships in place that enable us to be trusted by all of our stakeholders, which also hinges on awareness (stakeholder).

Whilst we haven’t previously had a structured awareness strategy we have been working hard to raise awareness of Healthwatch Surrey through a variety of awareness-raising initiatives.

## What are we currently doing to raise awareness?

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| * Monthly e-bulletins * Engagement - high street listening events, drop in hubs, community events, AGMs * Posters/leaflets (partners, libraries, physios, community hospitals, care homes) * PALS & Complaints teams (leaflets/posters) * Paid advertising (Eagle radio July & Hospital radio magazines) * Campaign-led communications strategy * Stakeholder mapping leading to programme of meetings with key stakeholders. | * Comms groups (district & borough, HWBB, STP) * Community cash fund * Presentations (Boards, VCFS, PPGs, Commissioners) * Website (re-launch) * Social media (Facebook, twitter, street life/next door) * Media strategy (1-2-1 meetings, emails, press releases, press coverage, radio interviews, case studies). |

Our first paid for advertising radio campaign (and associated social media, online advertising and video) has been developed with the objective of raising awareness of the Healthwatch Surrey name and our core functions.

## Who should we target?

In an ideal world every Surrey resident would be aware of HWSy, understand exactly what we do and how to contact us if they wish to share an experience. In reality this would be extremely costly and include a lot of wastage for those not in the ‘mind-set’ of sharing an experience. In order to make our budget work hard for us we need to look at segmenting our audience to allow us to maximise awareness with minimum wastage.

Concentrating on ‘in service users’ (those currently accessing services in Surrey) will allow us to maximise our efforts to those most likely to be in the mind-set of sharing an experience with us.

Looking at the resources available to us we can also see that there is a propensity for women to interact with us. Our database shows a 56% bias to women (of those who specify a gender, so likely to be higher in real terms) and our social media statistics show women are more likely to interact with us through Facebook (56%) and Twitter (71%).

Women play an active role in their family health and the experiences we receive from women can also relate to other members of their family e.g. their own parents or their children. 30% of the women that we have spoken to identify themselves as carers/relatives/friends/neighbours of the service user they are talking about.

Therefore, to target women (as the guardians of family health) would allow us to raise awareness amongst the group who are currently most likely to interact and share experiences with Healthwatch Surrey.

Alongside ‘in service users’ and ‘women as guardians of family health’ our 2016 reflective review identified some key stakeholders for which awareness could be improved, these included; district & borough councils (D&B) and the Voluntary Community Faith Sector (VCFS) organisations, particularly related to our Information and Advice services.

## Segmenting the Audience

‘In service’

users

Women

Surrey Residents

Stakeholders

## How should we/are we reaching these groups?

### Surrey Residents

Our communication activity will be targeting a broad Surrey audience e.g. Eagle radio, media coverage for our project work, our social media activity etc. The engagement listening tours around Surrey also give exposure of our branding and purpose to those that encounter our stand and literature, or see our branding in the prominent high footfall locations.

It is key that our overarching Healthwatch message and branding is clear and consistent in all our communications, this then begins to underpin other activity and reinforce our brand name and message. The re-design of our literature and communications to a consistent look and feel will be integral to this.

A media strategy is currently being developed to look at increasing our profile with journalists and editors for key media channels for Surrey. Increased exposure within media should be gained from these relationships, alongside increased project activity which will generate more opportunities for press coverage, this will also help increase awareness among Surrey residents as a whole.

Given the above, we do not recommend that any extra activity resource/budget (over and above what happens as part of our planned communications, engagement and media coverage) is invested in the broad audience of all Surrey residents.

### ‘In service’ users

Targeting people ‘in service’, either patients or the family and friends of patients, is key to reach those in the mind-set of sharing their experiences. There are many touchpoints at which we could target people ‘in service’ across Surrey.

In order to streamline this to make a manageable campaign we propose to concentrate on the **point of access** to the system e.g. GP surgeries, and **end of services** e.g. Physio, Community hospitals.

* **Access to the system** – anyone accessing the system enters through their GP and often is discharged back to the GP at the end of treatment. This makes the GP surgery an ideal place to ensure awareness is high among those who may want to share their experiences. Awareness raising in this area would include literature and posters in surgeries and establishing contact with PPGs to work together to increase awareness of the HWSy offering, collecting evidence and promoting our information and advice services. We could also explore ways of having a presence in online booking systems for GP appointments.
* **End of services** – those leaving completing their treatment at Physio, community hospitals, outpatients etc. who are in a position to share feedback of their recent treatment pathways with us.

To attempt to raise awareness amongst the many ‘in-service’ users at the same time is a large undertaking and pressure on resource. Therefore, we would recommend a **phased roll-out** tackling 1 CCG area at a time. This awareness raising would also require volunteer input to help with the targeting of surgeries and contacting of PPGs and therefore should be aligned with the roll out of the **new volunteer strategy**, combined with a cascading of the presentation training to volunteers.

### Women (as the family health guardians)

We see from our current demographics women are most likely to share their experiences and these not only relate to their own experiences but can also relate to those of their parents or children.

Our social media insights show that women are more likely to interact with us through Facebook and Twitter.

Using social media, we propose to boost this existing reach by running a paid for targeted Facebook campaign which allows us to interact with this audience around relevant services/system changes. Our new HWSy video could be utilised to highlight our services and coupled with a poll/interactive content linked to relevant topical service changes to encourage engagement. e.g. mental health, maternity etc. The aim would be to make the content as engaging and interactive as possible for this target group.

### Stakeholders (including VCFS & District & Borough Councils)

We have invested a lot of time during the last year raising our profile with commissioners through our ‘What We’ve Heard’ (WWH) meetings and this is reflected in the positive feedback from the reflective audit. The continued strategy behind building relationships with commissioners will ensure that this momentum is built upon and will include getting smarter about planning cycles to maximise the effectiveness of our thematic priority work.

As the awareness among these groups is good they will not form part of any new targeted awareness – rather continued momentum to ensure awareness levels and relationships are maintained.

The reflective review identified that awareness was lowest among District and Borough councils and the VCFS organisations, particularly related to our Information and Advice services.

The VCFS strategy will identify a key group of VCFS organisations we will build relationships with and awareness will form part of that strategy. Activity with these stakeholders will include the HWSy message being communicated through VCFS community groups and organisation channels, the launch of the new community cash fund 2017 and the associated communications around it.

We will also look at how awareness can be increased within D&B Councils by attending the D&B comms groups and raising our profile within this group. We will also develop a deeper understanding how the D&B councils work and identify the most appropriate people to target with our Healthwatch Surrey message – to include targeted meetings by staff team with key D&B health and wellbeing contacts. We are also working on building our profile with the SCC Adults and Health Select Committee (used to be called Scrutiny) and the elected councillors who sit on that.

## What do we want from our awareness activity and how will it be measured?

### Surrey residents

* Healthwatch Surrey’s role, function and services are known, understood and valued by consumers and therefore they readily contact us.

**measured by;**

* increased web traffic, experiences shared and calls to our Helpdesk.

### ‘In service’ users

* increased awareness of HWSy and relationships formed with PPG groups. Literature and posters/electronic screens displayed in all GP surgeries in Surrey.

**measured by;**

* increased feedback forms (coded), increased helpdesk traffic, increased attendance at PPG meetings for surgeries that have face-to-face meetings.

Women (as the family health guardians)

* interaction with women in the county, participation in our social media poll and increased experiences linked to the topic of the poll e.g. NHS 111, maternity etc.

**measured by;**

* web stats, poll results, video views, interaction with content, click through to our website, calls to our Helpdesk and experiences shared.

### Stakeholders (including VCFS & D&B councils)

* awareness of our thematic priority work and closer working partnerships to increase the impact and influence of our work
* increased applications to the Community Cash Fund (CCF)

**measured by;**

* number of applications to the Community Cash Fund, improvement of the awareness measures for VCFS, D&B and Commissioner organisations in the reflective review, increased participation in the reflective review from D&B and VCFS organisations. Increased ‘influence’ scores in the reflective review from commissioners.

## In sum,

This awareness raising strategy cannot be looked at in isolation as all of our existing strategies also have some element of awareness raising too. Below is an overview of the proposed new awareness strategy and how that sits alongside the existing Healthwatch strategies.

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| Our strategies 2017/18 | Targeting who? | How? | Status of strategy |
| Awareness strategy | * Surrey Residents * ‘In-service users’ * Women | * Eagle radio and associated comms. * Phased roll-out of HWSy message in GPs via PPGs & end of service providers. * Social media | Draft |
| Communications strategy | * Surrey residents * ‘In service’ users * Key stakeholders (Inc. VCFS, D&B councils and commissioners) | * E-bulletin * Media coverage * Campaign led comms * Press releases * Project communications * Social media * VCFS partnership comms * System partners promotion of our comms | Final |
| Engagement strategy | * Surrey residents, * ‘In-service users’ * Outreach groups | * Listening events: high streets, & service providers * Reactive engagement * Outreach events | Final |
| VCFS strategy | * Target VCFS groups | * Partnerships * Community Cash Fund * Promotion of our comms | Final |
| Stakeholder mapping/ Board participation strategy | * Commissioners * CQC * Key Board meetings * Hospital trusts | * WWH meetings * Board meetings | Ongoing/  Draft |
| Volunteering strategy | * Existing volunteers * Potential volunteers * Stakeholders, VCFS * Surrey residents | * Volunteer led local awareness * PPG awareness raising * Local stakeholder meetings | Final |

## Next Steps

* Endorsement of this awareness strategy by the awareness-raising sub group and the Board
* Develop a detailed implementation plan for this strategy and targeted messages for the distinct audiences
* Development & costing of detailed social media strategy
* Agreement of which CCG to start the ‘in-service’ awareness plan and roll out to volunteers.