



Communications Strategy (Draft)

2011 - 2015

November 2011

1.0 Introduction

Good communication is fundamental to the effective operation of any organisation. Within the Public Health Agency (PHA) good communication needs to be at the centre of all of our activities. We all share an equal responsibility for ensuring that we communicate effectively both externally and internally. Our core business which includes informing and influencing public health behaviours and lifestyle choices, demands that our communication solutions are dynamic and of a high quality on all occasions.

An effective communications process will ensure that an organisation's vision, purpose and key objectives are clearly articulated and understood by stakeholders as well as staff. Improved understanding can build and enhance organisational reputation. Likewise promoting a positive corporate image of the PHA is vital to our credibility and is essential for building further public and partner confidence and support for the work that we do.

This strategy sets out a vision for communication by the PHA and is intended to:

- support open and transparent, timely and effective communication;
- support the delivery of our organisational objectives
- be an effective means of demonstrating the success of our work
- ensure people understand what we do
- change behaviour and perceptions where necessary
- outline communication approaches and channels that will be used to support the work we undertake in pursuit of our purpose
- set out actions that we will undertake to help realise our vision.

2.0 Context

Background

The PHA was established on 1 April 2009 as part of the reforms to Health and Social Care (HSC) in Northern Ireland. We are a multi disciplinary organisation with both a strong regional and local presence. The PHA is the regional organisation for protecting and improving health, including sharing learning on issues of quality and safety in health care, driving developments in connected health and innovation through supporting research and development. Our role commits us to addressing the root causes and associated inequalities of preventable ill-health and lack of wellbeing.

The PHA's aim is that all people in Northern Ireland achieve their full health and wellbeing potential. Crucial to this will be our ability to generate confident, credible and timely messages and responses based on best practice and evidence. Since the establishment of the PHA there has been a high level of interest in all aspects of its work. For the first time health protection and health improvement functions have been focused in one organisation which has allowed new opportunities for more impactful communication.

At the same time, the last two years have brought very real challenges to public health, such as the H1N1 (swine 'flu) pandemic and communication as a function has been very central to our response. Our credibility will continue to depend on how successful we are in communicating essential public health information to key target audiences including the general public, the media, elected representatives and other key influencers.

A challenging context

The political, economic, social and technological context that we operate within presents both opportunities and challenges for the PHA to optimise its communication with key audiences at both a macro and micro level.

Our political landscape features a maturing devolved government with a clear agenda for health incorporating a dual focus on reform and public health. Our role in supporting commissioning during the lifetime of this strategy will reflect this focus and will require regular and impactful messaging around a diverse range of health protection and improvement including reducing inequalities.

All PHA communication activities reflect the strategic direction of the DHSSPS. In the last two years we have sought to build sound relationships with DHSSPS as well as other HSC organisations, delivering where possible and appropriate joint messages in a planned and coordinated way.

The current financial constraints and economic recession will continue to have a detrimental impact on some of our most vulnerable people and communities. The Programme for Government 2011 – 2015 has recognised that only not only is increasing investment in preventive focused public health interventions never more

important than in the current economic climate it is also a necessary foundation to funding and reforming our healthcare system in the longer term.

At the core of the PHA is its commitment to working in partnership with local communities to ensure better health outcomes. In undertaking our communications work we have sought to embed meaningful engagement and joint communication on the issues that individuals and communities recognise and acknowledge as shared priority.

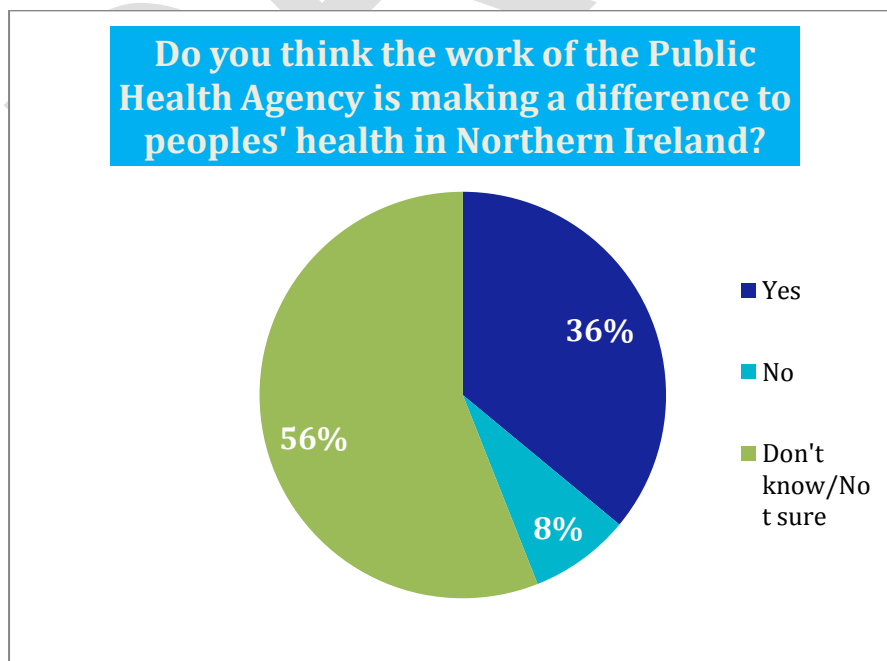
Awareness

The PHA has begun the process of benchmarking its impact through communications. This will guide and inform our work in future and we aim to broaden the range of benchmarking and evaluation tools we use.

As an initial step, the PHA included questions in a NI Omnibus Survey in January 2011 to gauge public awareness and opinion of the organisation. This snapshot, albeit limited in scope, suggests that whilst the PHA has made a solid impression since it was established, there is the opportunity for increasing awareness and understanding of our role, the work that we do and its impact.

This snapshot will be used as a baseline against which we will measure the effectiveness of our communications activity. Key findings included:

- Of 1021 total respondents, 47% have heard of the PHA
- The most common sources by which respondents had heard of the PHA were NI television including adverts and features (33%), work related activities (18%) and local newspapers (16%)
- 36 % feel that the PHA is making a difference to peoples' health in NI, 8% did not and 56% did not know / were not sure.

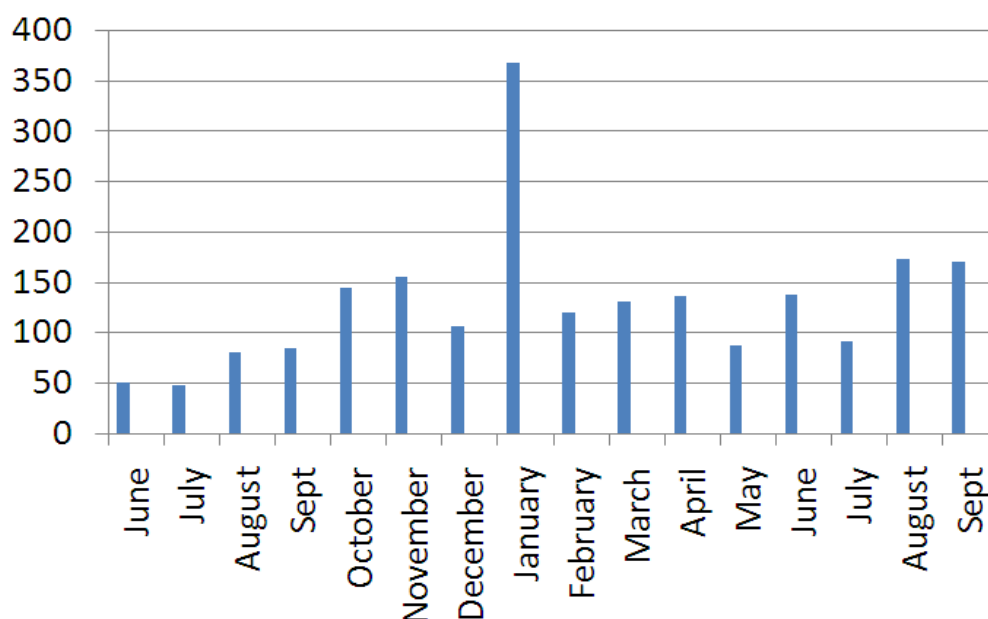


Millward Brown Omnibus, Jan 2011

Media coverage

The work of the PHA is of significant media and public interest. There is a continual appetite for information locally, nationally and internationally. For example in the period between June 2010 and September 2011 the following media mentions were recorded.

PHA Media mentions by month (June 10/September 11)



Resources

The PHA's communication function comprises two teams:

Corporate and Public affairs – leading on development of integrated communications planning; handling media relations, corporate website content and social media messaging, event management and internal communications.

Public and Professional Information – leading on development and delivery of public information campaigns, publications, technical website development and design, print and production of materials.

Conclusion

In moving forward with our communication work, the PHA must present itself with a strong and credible authority, using the resources available to best effect, working across the HSC to maximise impact while maintaining independence when necessary, and ensuring that the public and other audiences are aware of our distinctive work, role and responsibilities and are responding positively to our communications.

3.0 The next four years

Aim and key objectives

This communications strategy is designed to support implementation of the PHA's corporate strategy. This sets our four goals as:

- Protecting the health of our population
- Improving their health and social wellbeing
- Improving the quality and safety of health and social care services
- Improving early detection of illness

To support achievement of these goals our communication approaches will have the following objectives:

1. Continue to develop the level of public and professional awareness, recognition and confidence in the PHA and its role.
2. Deliver successful, targeted and integrated communications based on clear methodologies and outcomes reflecting PHA work priorities.
3. Further develop effective two-way external communication and engagement with a range of publics and target audiences.
4. Establish clear and accessible internal communication practices which support organisational performance.

In carrying out our work and maintaining our public reputation, we will work to ensure that our communications are, at all times:

- Accurate
- Accessible
- Balanced
- Consistent
- Reliable and credible
- Clear
- Timely

Key messages:

PHA messaging currently extends from the corporate (see below) to those identified for each priority area of work. These will be added to through subsequent sub-strategies and specific communication plans, tailored to PHA work programmes that will be developed over the period of this strategy.

Corporate messages:

Protection and Improvement - The PHA is the leading public health organisation protecting and improving the health and wellbeing of the people of Northern Ireland.

Reducing Inequalities – The PHA works to reduce inequalities in health and social wellbeing through targeted, effective action.

Partnership – Strong partnerships with individuals, communities and other key stakeholders are required to achieve the PHA's objectives.

Evidence base- We are an evidence based organisation and will ensure that interventions are informed by up to date evidence where available. We will look to further develop the evidence base by initiating robust evaluations of new interventions.

Under-pinning messages

There are a number of areas on which our messaging will be focused, consistent with the four key goals set out in the corporate strategy.

1. Protecting Health:

The PHA protects the health of the population by:

- providing an expert, timely and coordinated response to adverse incidents;
- leading specialist work programmes for the prevention and control of communicable diseases
- overseeing the surveillance of communicable diseases
- managing prevention initiatives such as immunisation programmes to prevent infectious diseases

2. Improving health and wellbeing:

We are working to best improve the health and wellbeing of our population by;

- Giving every child and young person the best start in life;
- Ensuring a decent standard of living for all by acting with partners to increase income, reduce living costs and developing key living skills for vulnerable groups
- Supporting involvement in community activities , improving neighbourhood environments to build more sustainable communities
- Making healthier choices easier through better information and influencing health behaviours

3. Improving quality and safety of Health and Social Care services through:

- Working with the health and social care Board (HSCB) and Trusts to ensure that every patient gets the highest quality care possible that is the right treatment at the right time, the first time and every time;

- ensuring that:
 - safe practice remains a high priority;
 - research underpins good practice;
 - statutory and regulatory functions are adhered to;
 - and that we maximise innovative use of technology to support patients / clients in their homes and professional staff in their practice

4. Improving early detection of illness:

- We are working to improve the early detection of illnesses and minimise the impact of disease by maintaining high quality screening and testing programmes, introducing new ones and ensuring that all programmes meet required standards.
- We want to increase the uptake of screening programmes and will work closely with particular communities to do so.

Our target audiences

Our success as an organisation relies heavily on our ability to communicate effectively with our key audiences. Good communication practice demands that we 'Know our audiences, listen to them, communicate in their language, on their terms and through their preferred channels of information'

The PHA's audiences are diverse and our messaging needs to be tailored to be effective. Getting the message across will require the use of various approaches such as public relations; multi-media campaigns, on-line presence; social media and publications depending on the audience and the message to be delivered. Our key stakeholders will come from the following groups.

Internal key audiences include:

- All staff
- PHA Board
- Agency Management Team
- Regional / local offices
- Staff Organisations / professional bodies
- Trade Unions / staff side

External key audiences include:

Decision makers

NI Assembly

All Government departments

- Minister for Health, Social Services and Public Safety
- DHSSPS
- NI Assembly Committees
- MEP's/MP's/ MLA's / Local Councillors

Partners

- Voluntary and Community Sector
- HSCB / Commissioners
- 5 Health and Social Care Trusts
- NIFRS and Ambulance Service
- PCC
- RQIA
- Contracted providers
- Local Councils
- Professional bodies – BMA, RCN etc
- NDPB's – eg. Safefood, FSPB, Sport NI etc
- Institute for Public Health
- CoE for Public Health

General Public

Healthcare professionals

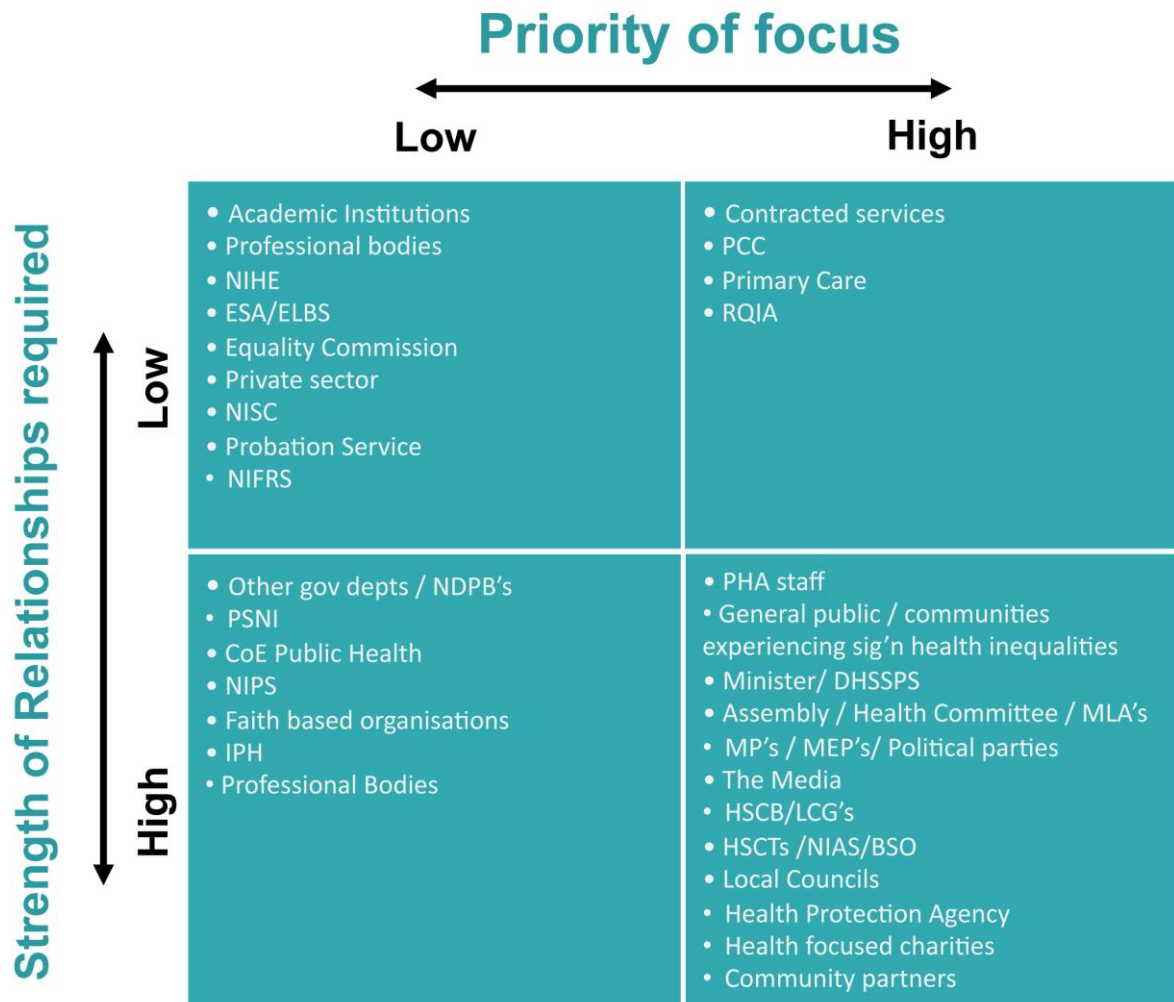
The Media

Health focused charities

Academic Institutions

Given the range of audiences it is important that we consider how best to manage different needs, expectations and circumstances. The following stakeholder analysis provides an overview on how we will prioritise our resources to ensure effective communication.

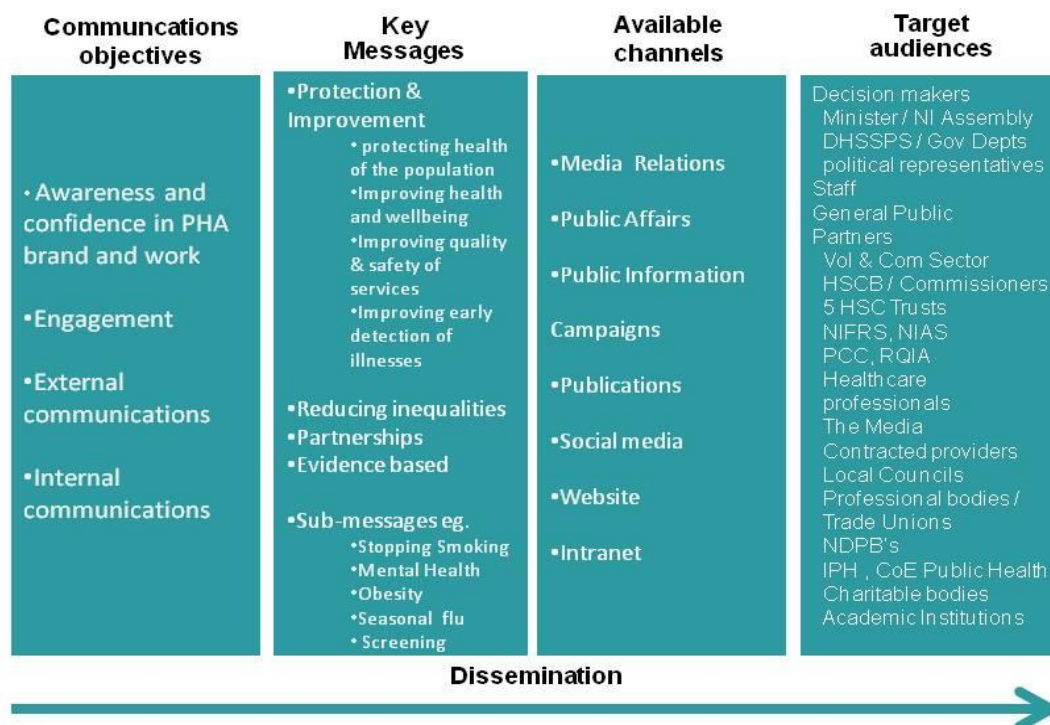
Stakeholder analysis



4.0 – Implementation

The implementation of this strategy requires that we maximise all of our communication resources throughout the PHA both individually and collectively and make sure that we are working to well defined and accessible work processes. The PHA Communications team will play an active role in making this happen with the support of all PHA staff. But to do this effectively means that we need to have a number of key building blocks in place underpinning all of our activities as outlined in the diagram below.

PHA Communications process



Successful implementation of this strategy will require an ongoing commitment to make sure that communications planning is undertaken for all aspects of the PHA business plan. This means that we actively consider the potential communication requirements and opportunities at the planning stage of PHA work programmes. By placing communication planning at the top of our agenda we will be better able to identify in a timely manner the resources to meet the demands for support and ensure that good opportunities to disseminate our messages are not overlooked.

1) Communications Action plan

A four year action plan has been developed with timeframes and identified leads to ensure the implementation of this strategy. A strategic communications group is proposed to drive implementation. The strategic communications group will report to the Agency's Management Team and to the Agency Board on progress. The strategy will be reviewed annually against agreed objectives and delivery of planned actions.

2) Communications Toolkit

In order to maximise both the effectiveness and range of our communication activities we recognise that it is essential that our staff are equipped and supported to help meet their communication commitments. The communications toolkit is designed to provide PHA staff with clear guidance and access to resources on all aspects of planning and delivering communications activities. It includes relevant policies, templates and protocols and can be accessed via the PHA Intranet – Connect. It will be reviewed regularly to ensure that relevant updates are available. Staff will be encouraged to identify additional requirements to the core group of resources.

Appendix 1 – Communications team structure

Public Health Agency – Organisational structure

Public Health – Communications

