



Humber, Coast and Vale Cancer Alliance – ‘Achieving World Class Cancer Outcomes for Our Communities’

Communications and Stakeholder Engagement Strategy 2018 - 2021

Background

Almost 20,000 people in the Humber, Coast and Vale (HCV) are diagnosed with cancer each year; a rate significantly higher than the England average. The Cancer Alliance seeks to improve cancer survival rates by ensuring more people are diagnosed at an earlier stage by improving cancer awareness and uptake of screening.

Around 53,000 people in the HCV region are currently living with or beyond cancer. We are working together to improve the care and support people with cancer receive to enable them to be more in control and better able to cope with their treatment and recover.

In 2015 an [Independent Cancer Taskforce Strategy](#) set out an ambitious vision for improving services, care and outcomes for everyone with cancer: fewer people getting cancer, more people surviving cancer, more people having a good experience of their treatment and care, whoever they are and wherever they live, and more people being supported.

Who are the Humber, Coast and Vale Cancer Alliance?

Nineteen Cancer Alliances were set-up across England. HCV Cancer Alliance is one of those cancer alliances and covers the geographical area detailed in the following map. Humber, Coast and Vale Cancer Alliance are a collaboration of health, social care, third sector organisations, patients, carers and the public. The Cancer Alliance was set up to deliver the collective ambitions identified by the national Cancer Taskforce.

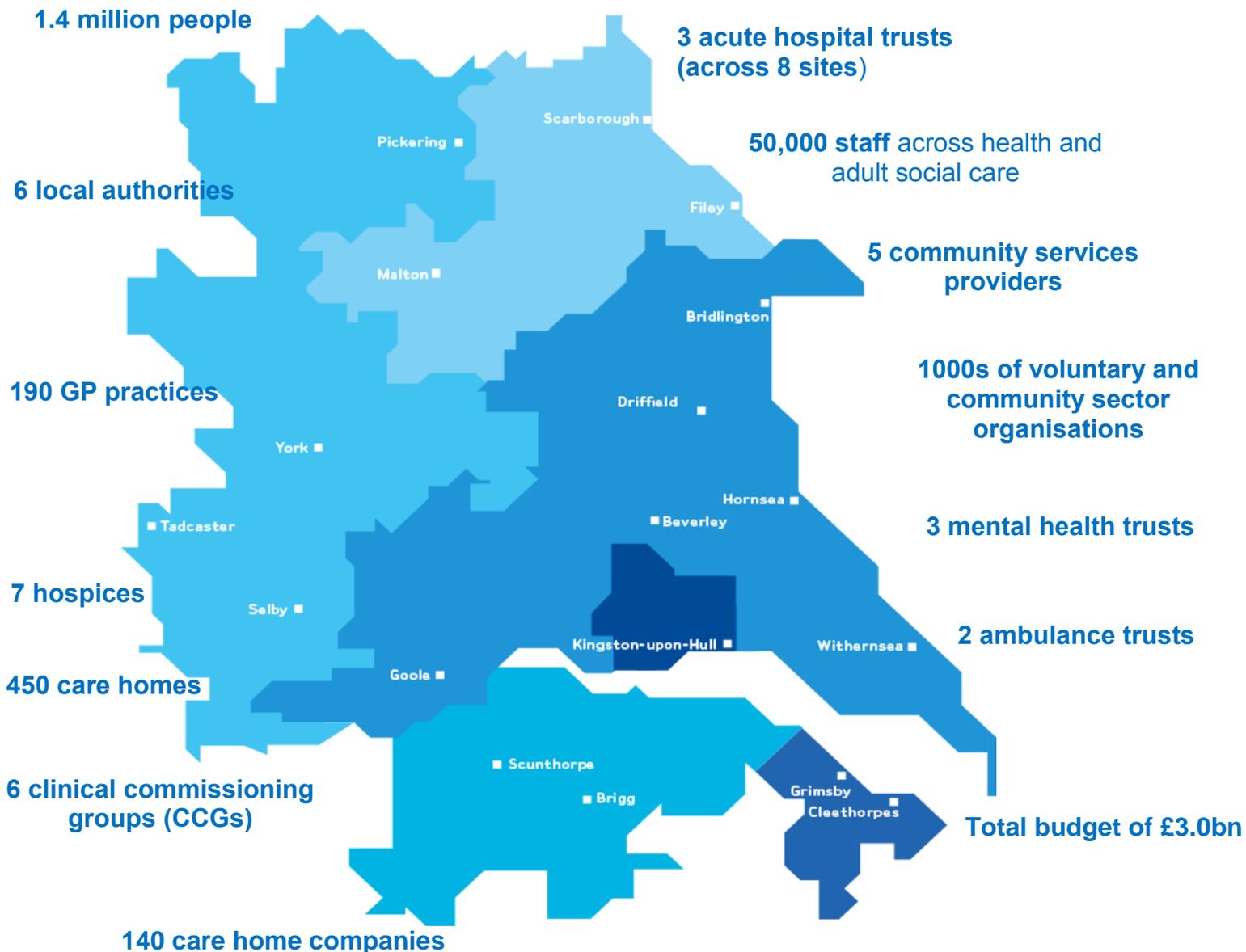
Humber, Coast and Vale Cancer Alliance brings together all the organisations that commission and provide cancer services across its footprint to enable effective and co-ordinated partnership working to improve outcomes and patient experience across all cancer services.



Our Area

The Humber, Coast and Vale Cancer Alliance extends across a large geographical area with a number of public and voluntary sector organisations. Cancer is a strategic priority of the Humber, Coast and Vale Health and Care Partnership (formerly the Strategic Transformation Partnership).

Health and Care in Humber, Coast and Vale





The aim of the Cancer Alliance is to increase cancer survival rates across the region, ensuring that we address inequalities, reducing inequality and improving patient experience wherever possible.

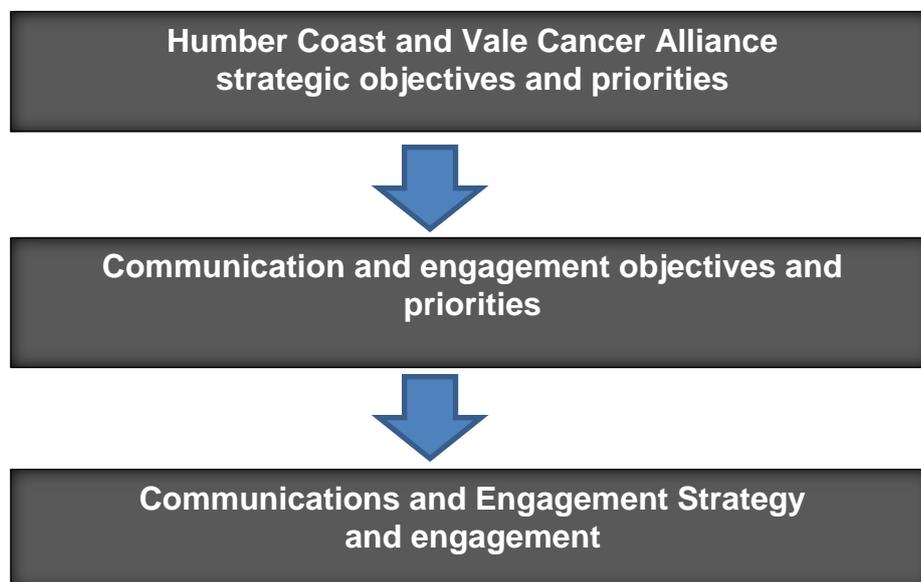
The Strategy:

This document sets out the HCV Cancer Alliance's Communication and Engagement strategy 2018-2020.

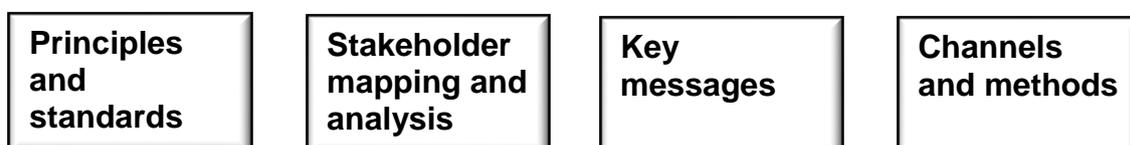
The Vision of the Communication and Engagement Strategy is to establish and embed a proactive approach to communication and engagement that will support the delivery of the HCV Cancer Alliance's objectives. We view patients and carers as partners in the design and delivery of their care. This vision is founded on the principle of putting the patient at the heart of the redesign of cancer services in every aspect of the cancer journey.

The strategy sets out our strategic communication and engagement objectives and priorities, describes the principles we will base our communication and engagement on and summarises the channels available to us to deliver these.

This is an overarching strategy and individual projects within the work-streams of the Cancer Alliance will have detailed plans for how communication and engagement activity will be carried out.



The four foundations of effective communication and engagement:





Our Key communication and engagement objectives

- Ensuring those affected by cancer, their carers, friends and family (seen as key stakeholders) can give feedback and are listened to. (Those affected by cancer may include those who have been referred under the two week wait guidelines which did not result in a cancer diagnosis).
- Identify mechanisms by which stakeholders can better understand, be involved and actively shape and influence the priorities and ambition of the Cancer Alliance.
- Establish mechanisms for the involvement of key stakeholders in the development of cancer services using the Engagement Ladder approach (appendix 1). The aim being greater collaboration with patients, carers and the public to enable the work of the Cancer Alliance to be informed and influenced by patients, carers, the public and other key stakeholders.
- Using feedback from patients, carers and other key stakeholders (national cancer patient experience survey, PALs, Friends and Family Test, 360 degree stakeholder survey and other mechanisms) to improve patient experience of cancer services.
- Increase awareness and understanding, across our stakeholders and local population, of the Cancer Alliance, who we are, what we do and how we are working to improve outcomes for people who have experienced cancer.
- Encourage strong clinical engagement and leadership from Cancer Alliance stakeholders to develop and transform services collaboratively.
- Build relationships across the Cancer Alliance with all stakeholders using appropriate internal and external communication and engagement methods.
- Increase trust and confidence in cancer care, services and the Cancer Alliance.
- Develop the profile, visual identity, reputation and key messages of the Cancer Alliance.

Outline Strategy

The approach to communications and engagement for the HCV Cancer Alliance aligns with the outline strategy of the Humber, Coast and Vale Health and Care Partnership Communications and Engagement Strategy (formerly STP). The strategy details how communications and engagement will support the delivery of the cancer work priorities. The following key elements form part of both strategies:

1. Building an effective **framework for engagement**:
 - a. Agree key engagement principles
 - b. Conduct a comprehensive stakeholder mapping and analysis exercise (identifying influencers and decision makers)
2. Establish **mechanisms for involvement**:
 - a. Patients, carers and the wider public
 - b. Staff (across the Humber, Coast and Vale Cancer Alliance)



- c. Equalities groups and people who are 'seldom heard'
 - d. Political and other stakeholders
3. Building an effective framework for **communicating** :
- a. Agree an approach to messaging and develop branding across the Humber, Coast and Vale Cancer Alliance
 - b. Establish mechanisms for proactive communications
 - c. Agree a media protocol to ensure effective handling of media enquiries

The delivery of our strategy is therefore focussed around these key areas and will form the basis of the action plan for implementation of the strategy which will be developed and agreed by the Communications and Engagement Steering group. The Steering group has membership from the four programme work-streams, Healthwatch, patients, carers and the public, voluntary and community sector representatives, public health and communication and engagement staff from across the Cancer Alliance.

1. Building an effective framework for engagement

Our key communication and engagement principles

- a) **Channels and methods** – We will utilise a variety of communication and engagement mechanisms dependent on the topic and the stakeholder group. We will draw on existing mechanisms across the Health and Care Partnership. Recognising that Cancer is one of a number of Programmes within the Partnership and that it is important to utilise opportunities to use existing channels and forums for communication and engagement across the Partnership and across our partner organisations. We will work with our stakeholders to ensure that engagement follows best practice and principles of co-design and co-production, where this is appropriate.
- b) **Key messages** – We will develop our high level key messages. We will provide clear, meaningful, timely and transparent communication. Creating key messages supports us to be clear about what we want to say, and achieve, through our communication and engagement activity. We will be clear about why we are engaging with stakeholders and ensure opportunity for two way communication; acting on feedback as well as sharing information (see Appendix 2 - *Checklist for Communication*)
- c) **Collaborative working** – We will work in partnership with clinical stakeholders across the Alliance in the development of new services, treatments and pathways.
- d) **Stakeholder Identification/Mapping/Analysis** - We will identify and better understand our stakeholders by building relationships, developing networks with individuals and groups across all sectors which will support the Alliance to be responsive and relevant to stakeholders

The Humber, Coast and Vale Cancer Alliance have a number, and variety, of stakeholders as detailed in Table 1. We recognise that full stakeholder



mapping is required across the Cancer Alliance footprint and work-streams. Identifying our audience and who we are trying to reach is important and can take time to pinpoint. As Cancer is a programme within the wider Humber, Coast and Vale Health & Care Partnership, stakeholder mapping would be carried out in partnership, linking with other Programmes within the Partnership.

Stakeholders will include patients who are experts by experience, or have experience of a care pathway, who may be able to inform and shape our plans; stakeholders who need to be kept updated on developments; targeted groups we would like to engage with to help us better understand their experiences and views of local healthcare services.

Stakeholder Mapping will enable us to consider how best to reach and engage with those stakeholders. Auditing how stakeholders would like to receive information and be involved will support better communication and engagement.

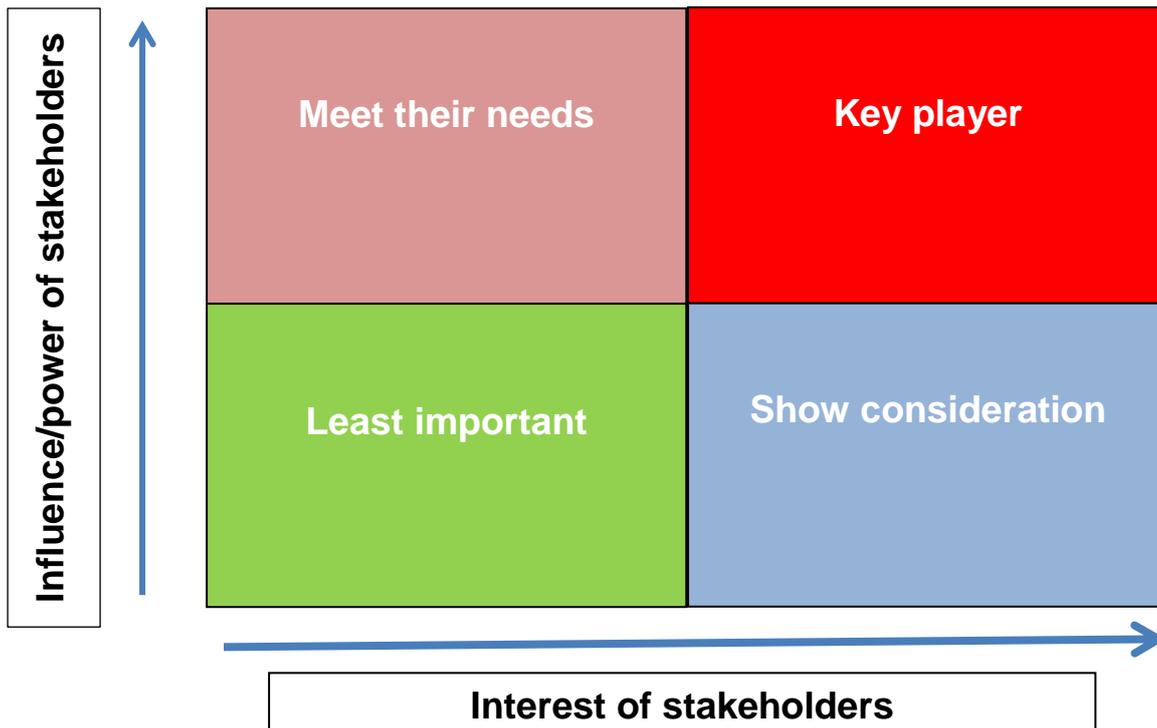
The full stakeholder/audience mapping will identify our stakeholders. Identifying stakeholders is the first step in the process, analysis of stakeholders is the second step.

Table 1: Generic Stakeholders

<p>Internal (Humber, Coast and Vale Cancer Alliance) e.g. Cancer Alliance System Board Programme Leads Work-stream SRO/Sponsors Cancer professional leads across CA</p>	<p>NHS Organisations/Partnerships e.g. NHS England (National & Regional Teams) Public Health England Local Authority/Public Health Health & Care Partnership</p>
<p>Patients, Carers and Public e.g. Patient Participation Groups Patient Support/User groups Yorkshire Cancer Patient Forum Healthwatch</p>	<p>Public Affairs/Opinion formers e.g. MPs LA Overview & Scrutiny Committee Media Councillors</p>
<p>Charities e.g. Macmillan Cancer Support Yorkshire Cancer Research Cancer Research UK</p>	<p>Local Government e.g. Overview & Scrutiny Councillors</p>
<p>Voluntary, Community & Faith sector</p>	<p>Communications & Engagement Networks e.g. NHSE Communications & Engagement groups, H&C Communication Leads, CCG & Trust Communication & Engagement leads, Macmillan Cancer Care engagement channels</p>



The analysis will identify stakeholder’s levels of interest, influence and attitude towards the Programme’s outcomes and the importance of the stakeholder within the work of the Cancer Alliance. Preferably, analysis should be carried out for each communications and engagement exercise undertaken, as different stakeholders will have different levels of interest depending on the subject area. A more detailed analysis will form part of the action plan which will be developed by the HCV Cancer Alliance Communications and Engagement Steering group.



Stakeholders can move from different categories on the template throughout the different stages of the programme or project and therefore, it will be necessary to reassess the stakeholder analysis as part of the project plan.

2. Establish mechanisms for involvement:

We will use a range of mechanisms, approaches and information to engage, listen and involve our stakeholders. This will involve working across the Alliance with our partners and stakeholders.

Due to the wide geographical area and high level interest in cancer and specific pathways we require a range of engagement approaches from providing information to stakeholders to gathering feedback and actively involving stakeholders in specific areas of work.

Fully understanding how cancer services can be planned and delivered in the future, we need to understand our local population’s experience and their thoughts. This can



be achieved through co-design. We will use social marketing approaches to our engagement activity to better influence how that engagement takes place. Social marketing is an approach used to achieve positive impacts on the behaviour of individuals and groups and to help sustain these over time. A guide to social marketing can be found here: <http://www.thensmc.com/resource/social-marketing-works-short-guide-nhs>

Involving people in the design and delivery of cancer services is a key aspect of the communications and engagement strategies of both the HCV Cancer Alliance and the HCV Health and Care Partnership. Involvement must be meaningful and effective, planned, resourced and pitched at the appropriate level. Plans for involvement of key groups and individuals will be drawn up and delivered at work-stream level using existing networks and relationships where possible.

Staff engagement and involvement – Across the HCV footprint, health and social care organisations employ around 80,000 people in a wide variety of roles. Involvement of staff in taking forward the objectives of the Alliance is essential in order to create the necessary buy-in for delivering change.

Work-stream communications and engagement plans will each include a plan for involving the relevant groups in developing and delivering the objectives and the methodology will be scoped for each plan.

A monthly update is produced by the communications and engagement team and this is circulated to stakeholders involved in the work of the cancer alliance.

Yorkshire Cancer Patient Forum – we link with the Yorkshire Cancer Patient Forum, an established and respected forum made up by individuals who have been directly affected by cancer – patients, carers, friends and family – and those working with or within cancer services.

The Forum's aim links with a key objective of our strategy and is to enable the views and experiences of people affected by cancer to be heard and used to improve the quality of cancer care in the Yorkshire and Humber area. The forum links closely with the new West Yorkshire and Harrogate Cancer Alliance's Patient Panel.

The Humber, Coast and Vale Cancer Alliance are connecting with the Community Panel and WY &H Cancer Alliance to further scope the approach being used and identify if this model could be replicated in the HCV Cancer Alliance area supporting the patient voice to be heard and included in the works-streams of the Cancer Alliance programme, influencing and shaping that work.

Communication and Engagement Steering group – the Steering group has membership from the cancer alliance four programme work-streams, Healthwatch, patients, carers and the public, voluntary and community sector representatives, public health and communication and engagement staff from across the Cancer Alliance. The purpose of the steering group is to develop a collaborative framework



that facilitates meaningful patient engagement and co design approaches at all levels of the Cancer Alliance work programme.

3. Building an effective framework for communicating with our stakeholders

Good communication and engagement with stakeholders will be achieved through a variety of methods, but will be tailored to the audience.

The Cancer Alliance will develop and put the right structures and systems in place to ensure that effective internal and external communication is achieved.

Internal Communications: It is vital that mechanisms are identified to engage and communicate, at the right time and with the key messages, with staff across the geographical area of the Cancer Alliance. It is important that staff (working across the HCV Cancer Alliance) understand the purpose of the Alliance, its priorities and their role in delivering those priorities. This is only achievable when staff feel engaged, informed and a valued part of the Cancer Alliance. We aim to communicate and engage with clinicians from primary and secondary care who are involved with patients across a range of cancer pathways to ensure that clinicians are informed and involved with the work of the Alliance.

External Communication: As with internal communication, it is vital that mechanisms are identified to engage and communicate with stakeholders identified through the stakeholder mapping and analysis exercise.

It is important that all communication activity is guided by 'A Checklist for Communication' which can be found in Appendix 2 and sets out the planning, preparation and implementing stages for effective communication.

Communication and engagement channels and methods

Humber, Coast and Vale Cancer Alliance will use a number of channels and tools to support engagement and these include the following: (not an exhaustive list as stakeholder mapping ongoing)

Media

In terms of media, it is important to build a positive working relationship with the media and we will take a proactive approach to this. This will aim to build a relationship that delivers coverage in the media that is balanced and further supports our objectives, including supporting stakeholder involvement by reaching our local population and additionally building and developing trust in the Alliance.

The Cancer Alliance is new to Twitter and developing its use of Twitter to gradually maximise opportunities to promote campaigns and local messages and stories and raise the profile of the Alliance. We are building our use of Twitter to gain momentum and utilising our partner organisation's social media opportunities where there is scope to reach a wider audience and target our tweets to particular areas



where this is required. Many of our Clinical Commissioning Groups have a large following on social media and our aim is to develop our closer working relationships with colleagues in our partner organisations to promote key messages, news, national and local campaigns through their platforms. The Cancer Alliance Twitter

handle is:  @HCVcancer

The Humber, Coast and Vale Cancer Alliance does not have its own Facebook page but, as with Twitter, links with our partners to promote key messages, campaigns and stories. These include the Health and Care Partnership, CCGs, NHS Trust, LA and NHSE Regional and National teams. We will review the use of Facebook in the future.

The use of our social media is guided by 'A Social Media Toolkit for the NHS' developed by NHS Employers.

<http://www.nhsemployers.org/your-workforce/need-to-know/social-media-and-the-nhs/a-social-media-toolkit-for-the-nhs>

Campaigns

The HCV Cancer Alliance has developed a calendar which details all the Public Health England Campaigns linked to Cancer (and related topics) and these form part of a forward planner which enables us to plan our media activity and link with communication teams across the Cancer Alliance to forward plan and promote the campaigns on their media platforms. All CCGs are responsive to the national public health campaigns.

Branding and Visual Identity:

HCV Cancer Alliance webpage - The webpage on the Health and Care Partnership website will be reviewed with a view to being re-developed to provide a more prominent and accessible source of information, digital content, news and interaction with stakeholders and wider audiences. The Cancer Alliance website will be refreshed and contain information that is trusted, relevant and acts to provide a visible platform raising the profile of the Cancer Alliance. The website will promote opportunities, for patients and carers, the public and our other key stakeholders to get involved. There will be a prominent link to and from the Humber, Coast and Vale Health Care Partnership website to complement the existing Health and Care Partnership website, whilst using this as an opportunity to create a personalised brand that is carried through the Alliance.

Date of Review:

The Communications and Engagement Strategy will be updated April 2021



Appendix 1 - The 'Ladder of engagement'

The 'Ladder of engagement' is a framework for understanding different forms and degrees of patient and public participation.

Devolving		<i>Placing decision-making in the hands of the community and individuals.</i>
Collaborating		<i>Working in partnership with communities and patients in each aspect of the decision, including the development of alternatives, and the identification of the preferred solution.</i>
Involving		<i>Working directly with communities and patients to ensure that concerns and aspirations are consistently understood and considered. For example, partnership boards, reference groups, and service users participating in policy groups</i>
Consulting ◆		<i>Obtaining community and individual feedback on analysis, alternatives and / or decisions. For example, surveys, door knocking, citizens' panels and focus groups.</i>
Informing		<i>Providing communities and individuals with balanced and objective information to assist them in understanding problems, alternatives, opportunities, solutions. For example, websites, newsletters and press releases.</i>

◆ **not** Formal Consultation



Appendix 2 - Checklist for Communication (produced by Yorkshire and the Humber Clinical Networks)

- What is your vision/message?
- What are you doing and why?
- What are your overall objectives?
- What are you trying to communicate?
- Who is your target audience?
- Who should know about the work/information?
- Who do you need to engage with to address the work/issues?
- Who are you trying to affect influence?
- How can communication activities help you achieve your objective?
- Do you want to push information? Pull information, share learn engage?
- What should your audience do with your work?
- What are you trying to achieve with your audience?

Prepare the Communication

- What are your key messages for your audience?
- What will be your communication goals?
- What communication related challenges are you facing?
- What are the main issues you are dealing with, where communication can help?
- What channels of communication will you use?
 - Electronic – web, email, discussion group, social media
 - Face to face – workshop, training, event
 - Print – publications, leaflets, posters
 - Social media – Twitter, Facebook, Instagram
 - Other media TV, Radio
- Outputs – What will you transmit?
- Activities – what will you do – how will you communicate?
 - Organise workshops
 - Write publications
- What are your milestones and timeline?
- What do you need to ensure the strategy reinforces, rather than hinders your approach?

Do – Implementing the Communications

- What are the key elements of quality that you need to keep in mind to make your communications credible?
- What budgets do you have/how much do you need?
- What capacity (skills & time) do you have to carry out your activities?
- What can you do yourself and what needs (external) support?
- Who (internally/externally) needs to be involved in the communication?
- Who will carry out what activity?