



Item No: 5

Meeting Date: Wednesday 22 March 2017

Glasgow City Integration Joint Board Public Engagement Committee

Report By: Allison Eccles, Head of Business Development

Contact: Allison Eccles

Tel: 0141 287 6724

BASELINE COMMUNICATIONS SURVEY FINDINGS

Purpose of Report:	The purpose of this report is to report the key findings from the Glasgow City Health and Social Care Partnership's baseline communications survey, and to seek approval of additional actions to be incorporated into the Partnership's Communications Strategy's action plan.
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Recommendations:	The IJB Public Engagement Committee is asked to: a) note the key findings of the Partnership's baseline communications survey; and b) approve the improvement actions set out in Section 5 of this report, and for them to be included in the Partnership's Communications Strategy's action plan to improve current communications activity.
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Relevance to Integration Joint Board Strategic Plan:

Communications assists the Integration Joint Board to engage with its stakeholders in the planning and delivery of health and social care services, supporting it to improve outcomes and achieve its vision for health and social care services in Glasgow as envisaged in the Strategic Plan.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Outcome 4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
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	<p>Outcome 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.</p> <p>Outcome 9. Resources are used effectively and efficiently in the provision of health and social care services.</p>
Personnel:	The additional improvement actions will require support from Council and Health staff in the Partnership's Business Development Team supporting communications.
Carers:	None
Provider Organisations:	None
Equalities:	None
Financial:	None
Legal:	None
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	Without a clear and consistent approach to communications there is a risk that the Integration Joint Board and the Partnership do not engage with patients, service users and carers in the manner envisaged in the Public Bodies (Joint Working) (Scotland) Act 2014.
Implications for Glasgow City Council:	As above for Personnel.
Implications for NHS Greater Glasgow & Clyde:	As above for Personnel.

1. Purpose

- 1.1 The purpose of this report is to report the key findings from the Glasgow City Health and Social Care Partnership's baseline communications survey, and to seek approval of additional actions to incorporate into the Partnership's Communications Strategy's action plan.

2. Background

- 2.1 The Integration Joint Board recently approved the Partnership's Communications Strategy 2017-19 and associated action plan in January 2017, <https://www.glasgow.gov.uk/CHttpHandler.ashx?id=36434&p=0>. The Strategy sets out the framework and channels for the Partnership to communicate with large internal and external audiences.
- 2.2 One of the Communications Strategy's key actions is to conduct a communications survey with the Partnership's internal and external audiences. It was proposed that it would be conducted at the start, mid-, and end-points of the Strategy so that a baseline could be established and the impact of communications activity could be measured. The survey would also be an opportunity to identify and make improvements to existing communications activity. Key findings from the baseline communications survey are now available.

3. Survey Methodology

- 3.1 A survey was conducted by the Partnership to measure and better understand:
- people's knowledge of the Partnership and Integration Joint Board (and its Committees), their work, and how to engage with them;
 - how people find out about the Partnership, Integration Joint Board (and its Committees), and Health and Social Care Integration (that is,, communications channels);
 - people's preferred communications channels;
 - the usefulness of current communications by the Partnership; and
 - whether improvements in communications activity can be made.
- 3.2 The communications survey was made available over a five-week period during January-February 2017, and its key internal and external audiences included:
- patients, service users and carers;
 - the public;
 - Partnership, Glasgow City Council and NHS Greater Glasgow and Clyde staff;
 - Glasgow City Integration Joint Board Members;
 - Glasgow City Council Elected Members;
 - NHS Greater Glasgow and Clyde Board Members;
 - the third and independent sectors; and
 - other public and private organisations.

3.3 Both web-based and hard copy versions of the survey were made available. To increase participation, the survey was shared with a range of patient, service user, carer, third and independent sector, and community representative groups/networks, and it was made available in a range of community facilities/offices (for example, health and care centres, social work offices, GP surgeries, libraries and community centres).

4. Key Findings

4.1 The key findings of the survey responses are summarised in this section of the report, and full analysis of them are attached at Appendix 1. Some differences in responses by survey participants who were not Council and Health staff in the Partnership are also highlighted (referred to as 'all other stakeholders').

4.2 **Number of participants.** There were 910 survey participants who provided a completed survey, and almost all of them provided a full response set (885, 97.3%).

4.3 **Background information [910 responses].** Survey participants were asked for background information about themselves:

- most were Council and Health Board staff in the Partnership – around seven in 10 (621, 68.2%). The remaining three-tenths (289, 31.8%) consisted of a range of stakeholders, the main ones including patients, service users and carers (80, 8.8%); Council and Health Board staff outwith the Partnership (61, 6.7%); providers/contractors of health and/or social care services (59, 6.5%) and GP/primary care contractors (28, 3.1%);
- the majority were female – just under three-quarters (664, 73%);
- almost all were adults aged 18-64 (840, 92.3%) – just over nine in 10;
- the majority were White Scottish (83.7%) – just over eight in 10; and
- a fifth (177, 19.5%) reported that they had a long-term illness, health condition or disability that affects their daily activities.

4.4 **Knowledge of the Partnership and Integration Joint Board [910 responses].** Survey participants were asked how much they knew about the Partnership and Integration Joint Board (and its Committees). While survey participants generally knew about the Partnership, this was less so for the Integration Joint Board and its Committees:

- almost all knew about/knew a lot about the Partnership – nine in 10 (830, 91.2%), although three-quarters of all other stakeholders reported the same (224, 77.5%);
- most knew about/knew a lot about the Integration Joint Board, just under three-fifths (519, 57%), but just over two-fifths knew nothing about it (391, 43%). However, over half of all other stakeholders reported that they knew nothing about the Integration Joint Board (160, 55.4%); and
- the majority or most knew nothing about the Integration Joint Board's Committees: Finance and Audit Committee (665, 73.1%); Public Engagement Committee (661, 72.6%); and Executive Committee (562, 61.8%).

4.5 Knowledge of Health and Social Care Integration [910 responses]. Survey participants were asked how much they knew about the Integration agenda, and the work within Glasgow City. While survey participants generally knew about Integration nationally and locally, this was less so for particular elements of Integration within Glasgow City (for example, the vision statement and strategies/plans):

- the majority knew about/knew a lot about Integration at a national level, just under three-quarters (667, 73.3%), and within Glasgow City, four in five (740, 81.3%). However, around two-thirds of all other stakeholders reported the same about Health and Social Care Integration at a national (185, 64%) and local (191, 66.1%) level;
- half (457, 50.2%) knew about/knew a lot about the Integration Joint Board's/Partnership's vision statement, but half (453, 49.8%) knew nothing about it; and
- the majority or most knew nothing about the Equalities Mainstreaming and Outcome Plan (723, 79.5%); Participation and Engagement Strategy (648, 71.2%); Strategic Plan (547, 60.1%); and Locality Plans (546, 60%).

4.6 How to engage with or find out about the Partnership and Integration Joint Board [responses varied for each category]. Survey participants were asked if they knew how to engage with or find out about the Partnership and Integration Joint Board in different ways. Where the categories were applicable to survey participants or they had an opinion:

- the majority knew how to contact the Partnership (local health or social work office or headquarters) – over four in five (731, 85.2%) [858 responses];
- most knew how to request a health or social care assessment or service from the Partnership – two-thirds (532, 66.3%). However, this was lower for all other stakeholders – just over half (138, 53.9%) [802 responses]; and
- the majority or most – around seven in 10 – did not know how to get involved in a Locality Forum or patient, service user or carer representative group (549, 72.9%); access papers of the Integration Joint Board (and its Committees) (548, 68.4%); and make a Freedom of Information request to the Integration Joint Board (528, 66.5%) [753, 801 and 794 responses].

4.7 Communications channels [910 responses]. The most common communications channels through which survey participants heard or found out about Integration, the Partnership or Integration Joint Board (and its Committees) were both electronic and face-to-face:

- internet website (Council or Health Board) – two in five (372, 40.9%);
- email and staff intranet website (Council or Health Board) – three in 10 (268, 29.5%) (264, 29%);
- staff magazine/newsletter (Council or Health Board) – one in four (236, 25.9%); and
- staff briefing (Council or Health Board), Glasgow City Integration newsletter, and staff team meeting/immediate line manager (Council or Health Board) – one in five (198, 21.8%) (194, 21.3%) (190, 20.9%).

The internet (Council or Health Board) (72, 24.9%) and email (62, 21.5%) also featured more highly for all other stakeholders (albeit at a lower rate), as did contractor/provider networks (52, 18%), grapevine/ conversations with other people (45, 15.6%), and the Glasgow City Integration newsletter (38, 13.1%).

4.8 Preferred communications channels [893 responses]. Survey participants were asked to indicate their five preferred ways to get information on Integration, the Partnership or Integration Joint Board (and its Committees). The following communications channels featured more highly as preferred communications channels, which were both electronic and face-to-face:

- internet website – just over half (464, 52%);
- newsletter – just under half (431, 48.3%);
- email – over two-fifths (405, 45.4%); and
- staff briefing, staff team meeting/immediate line manager, and staff intranet website (Council or Health Board) – a quarter (233, 26.1%) (215, 24.1%) (206, 23.1%).

Internet website (163, 57.2%), newsletter (145, 50.9%), and email (117, 41.1%) also featured more highly as preferred communications channels for all other stakeholders, as did leaflet/poster (75, 26.3%), social media (67, 23.5%), and health and social care service directory (62, 21.8%).

4.9 Usefulness of information communicated [889 responses]. Survey participants were asked to rate the usefulness of information already communicated about Integration, the Partnership and Integration Joint Board (and its Committees). The majority, around three-quarters (653, 73.5%), found some use in it. Over a third (307, 34.5%) found it useful/very useful, and just under a further two-fifths (346, 38.9%) found it a little useful. A sixth (143, 16.1%) found it not useful at all, and a tenth (93, 10.5%) had no opinion/did not know.

4.10 Improvements [885 responses]. Around half (471, 53.2%) of survey participants reported that improvements could be made on how information has been communicated about Integration, the Partnership, and Integration Joint Board.

4.11 Improvement suggestions and further comments. Survey respondents were given the opportunity to identify how the Partnership can improve its communications, as well as any further comments about communications in regards to Integration, the Partnership, and Integration Joint Board (and its Committees). In general, survey respondents highlighted:

- there is a need to increase people's understanding of Integration, the Partnership, and Integration Joint Board (and its Committees)
- there is a need for more accessible and good quality information (for example, a briefing or leaflet) on Integration, the Partnership and Integration Joint Board (and its Committees) – services and how to access them, key people, places, strategic direction including the vision statement, priorities, governance, strategies/plans, and how to get involved to inform service planning;
- there is a need for the information to be made available in a range of community facilities and offices;

- there is a need for people to be more aware of the key channels that the Partnership uses to communicate with its different stakeholders so that they know where and how to access information and can be better informed in their engagement with the Partnership and Integration Joint Board;
- there is a real opportunity for the Partnership to be smarter in the way that it uses its communications channels so that it more effectively and efficiently communicates and engages with a wide range of audiences – for example, an electronic ‘one-stop shop’ like a website (or dedicated web pages) linked to email and social media (for example, Twitter);
- given that the Partnership supports some of the city’s most vulnerable people with health and social care needs and engages with a range of people from wide-ranging backgrounds according to age, sex, gender, and ethnicity among others, there is a need for more accessible communications – less use of jargon and acronyms, greater use of plain language, and more use of key information, updates and consistent messages. Where there is a need to use jargon and acronyms, their use should be kept to a minimum and be explained; and
- whilst electronic channels are a means to communicate more efficiently with a wide range of large audiences, the communications needs of hard-to-reach and vulnerable groups need to be considered to better support them, which may mean that there needs to be different ways of communicating or current communications channels need to be adapted.

5. Improvement Action Plan

5.1 The Partnership’s approved Communications Strategy included 10 actions of planned communications activity to implement, improve and develop the ways in which the Partnership communicates. The actions in the following table are proposed to be added to the set of existing ones to improve current communications activity. They relate following improvements identified by the survey:

1. increase people’s awareness of Integration, the Partnership, and Integration Joint Board (and its Committees)
2. improve information on Integration, the Partnership, and Integration Joint Board (and its Committees)
3. make clear the channels that the Partnership uses to communicate with stakeholders;
4. improve the approach to communications so that they are more accessible (jargon, acronyms, and key messages); and
5. be more effective and efficient with current communications channels so that the Partnership can communicate and engage with a wide range of people

Action	Improvement	Timescale
1. Develop ‘about us,’ ‘publications,’ ‘how to get a service,’ and ‘how to get involved’ webpages for the Partnership and Integration Joint Board (and its Committees) on the Partnership’s website. The webpages should include both background information and relevant documents.	1, 2 and 4	June 2017
2. Develop a briefing about Health and Social Care Integration, the Partnership, and the Integration Joint Board (and its Committees), including information on	1, 2, and 4	June 2017

its vision, priorities, services, functions/structure, responsibilities, workforce, performance, and key strategies and documents. The briefing should be in electronic and paper formats and be available in accessible formats if required.		
3. Develop a 'news' webpage on the Partnership's website, which, as a 'one-stop shop,' has on-going Partnership news stories and announcements, the Partnership's Twitter Feed, the current and past editions of the Partnership's newsletter, and a link to the Partnership's Communications Strategy. As part of this, encourage staff across the Partnership to use the webpage as a key communications channel to communicate with a wide range of people.	1, 2, 3, and 5	June 2017
4. As part of the Partnership's Communications Strategy's action plan to examine different and better ways of communicating with people, particularly hard-to-reach and vulnerable groups, include guidance for staff on how to communicate in a more accessible way (for example, concise information, key messages, and jargon-free and plain language.)	4 and 5	November 2017
5. Related to the above action, facilitate engagement sessions with Black Minority Ethnic groups in Glasgow on their user experience of Your Support Your Way Glasgow –the Partnership's external website for social care supports in Glasgow.	2, 4 and 5	November 2017
6. Develop and disseminate a summary version of the Partnership's Communications Strategy so that stakeholders are more aware of the Partnership's framework for communications and the channels it uses to communicate to various audiences.	3	July 2017

5.2 The improvement actions will be taken forward by staff in the Partnership supporting the Communications Strategy and its action plan.

6. Recommendations

6.1 The Integration Joint Board Public Engagement Committee is asked to:

- a) note the key findings of the Partnership's baseline communications survey; and
- b) approve the improvement actions set out in Section 5 of this report, and for them to be included in the Partnership's Communications Strategy's action plan.

Appendix 1: Full Survey Analysis Tables

Q1. Which category best describes you? (please select one response)

Number applicable=910

Number with a valid response=910

Response	Frequency
Patient/Service user	49 5.4%
Carer	31 3.4%
Employee - Glasgow City Council	260 28.6%
Employee - NHS Greater Glasgow and Clyde	412 45.3%
Glasgow City Integration Joint Board Member	3 0.3%
Glasgow City Council Elected Member	1 0.1%
Non-Executive Director of NHS Greater Glasgow and Clyde Board	5 0.5%
Staffside/Trade Union	2 0.2%
Provider/Contractor of health and/or social care services - voluntary or private	59 6.5%
GP/Primary Care contractor	28 3.1%
Public/Citizen	11 1.2%
External organisation - public or private	19 2.1%
Other	19 2.1%
Do not want to disclose	11 1.2%
Total	910

Q2. Do you work within the Glasgow City Health and Social Care Partnership? (please select one response)

Number applicable=910

Number with a valid response=910

Response	Frequency
Yes - Staff within the Partnership (GCC and NHSGCC employees)	621 68.2%
No - All other stakeholders (not Partnership staff)	289 31.8%
Total	910

Q3. What is your gender? (please select one response)

Number applicable=910

Number with a valid response=910

Response	Frequency
Male	213 23.4%
Female	664 73.0%
Transgender	2 0.2%
Do not want to disclose	31 3.4%
Total	910

Q4. What is your age? (please select one response)

Number applicable=910

Number with a valid response=910

Response	Frequency
0-17 years	0 0.0%
18-64 years	840 92.3%
65 and over years	37 4.1%
Do not want to disclose	33 3.6%
Total	910

Q5. What is your ethnicity? (please select one response)

Number applicable=910

Number with a valid response=910

Response	Frequency
White - Scottish	762
	83.7%
White - Other British	57
	6.3%
White - Irish	18
	2.0%
White - Gypsy/Traveller	2
	0.2%
White - Polish	1
	0.1%
White - Other Ethnic Group	15
	1.6%
Asian, Asian Scottish or Asian British	6
	0.7%
African, Caribbean or Black; African, Caribbean or Black Scottish; or African, Caribbean or Black British	4
	0.4%
Mixed or Multiple Ethnic Groups	5
	0.5%
Other Ethnic Group	8
	0.9%
Do not want to disclose	32
	3.5%
Total	910

Q6. Do you have any long-term illness, health condition or disability that affects your daily activities? (please select one response)

Number applicable=910

Number with a valid response=910

Response	Frequency
Yes	177 19.5%
No	676 74.3%
Do not want to disclose	57 6.3%
Total	910

Q7. How much do you know about the following? (please select a response for each category)

Number applicable=910

Number with a valid response=910

Category	Response and frequency		
	I know a lot about it	I know about it	I know nothing about it
Glasgow City Health and Social Care Partnership	267 29.3%	563 61.9%	80 8.8%
Glasgow City Integration Joint Board	74 8.1%	445 48.9%	391 43.0%
Glasgow City Integration Joint Board - Executive Committee	28 3.1%	320 35.2%	562 61.8%
Glasgow City Integration Joint Board - Finance and Audit Committee	22 2.4%	223 24.5%	665 73.1%
Glasgow City Integration Joint Board - Public Engagement Committee	22 2.4%	227 24.9%	661 72.6%

Q8. How much do you know about the following? (please select a response for each category)

Number applicable=910

Number with a valid response=910

Category	Response and frequency		
	I know a lot about it	I know about it	I know nothing about it
The national agenda for Health and Social Care Integration	138 15.2%	529 58.1%	243 26.7%
Health and Social Care Integration within Glasgow City	176 19.3%	564 62.0%	170 18.7%
Vision statement of the Glasgow City Integration Joint Board/Glasgow City Health and Social Care	77 8.5%	380 41.8%	453 49.8%
Glasgow City Integration Joint Board Strategic Plan	54 5.9%	309 34.0%	547 60.1%
Locality Plans	72 7.9%	292 32.1%	546 60.0%
Participation and Engagement Strategy (Integration Joint Board)	32 3.5%	230 25.3%	648 71.2%
Equalities Mainstreaming and Outcome Plan (Integration Joint Board)	18 2.0%	169 18.6%	723 79.5%

Q9. Do you know how to...? (please select a response for each category)

Number applicable=varied per category

Number with a valid response=varied per category

Category	Response and frequency		
	Number of responses where category was applicable or respondent had an opinion	Yes	No
Contact the Glasgow City Health and Social Care Partnership - a local health or social work office or headquarters	858	731 85.2%	127 14.8%
Request a health or social care assessment or service from the Partnership	802	532 66.3%	270 33.7%
Get involved in one of the Partnership's Locality Forums or join a patient, service user or carer representative group that links with the Partnership	753	204 27.1%	549 72.9%
Make a Freedom of Information request to the Integration Joint Board	794	266 33.5%	528 66.5%
Access current and past agendas and papers of the Glasgow City Integration Joint Board and its Committees	801	253 31.6%	548 68.4%

Q10. Where have you heard or found out about Health and Social Care Integration, the Glasgow City Health and Social Care Partnership or the Glasgow City Integration Joint Board and its Committees? (please select all that apply)

Number applicable=910

Number with a valid response=910

Response	Frequency	Response	Frequency
PUBLIC newsletter - Glasgow City Health and Social Care Integration Newsletter	194 21.3%	Event	86 9.5%
PUBLIC magazine/newsletter - NHS Greater Glasgow and Clyde's Health News	137 15.1%	Consultation exercise	68 7.5%
Internet website for the Council or Health Board	372 40.9%	Campaign or initiative	17 1.9%
Twitter - Glasgow City Health and Social Care Partnership	45 4.9%	Email	268 29.5%
Twitter - Glasgow City Council or NHS Greater Glasgow and Clyde	27 3.0%	Senior Management from the Partnership - face-to-face	138 15.2%
Other websites or social media relating to the Glasgow City Health and Social Care Partnership	47 5.2%	STAFF magazine/newsletter - Council or Health Board	236 25.9%
Health and/or social care resource directory	73 8.0%	STAFF Intranet website - Council or Health Board	264 29.0%
Your Support Your Way Glasgow	41 4.5%	STAFF briefing - Council or Health Board	198 21.8%
Approved agendas, minutes and reports of the Glasgow City Integration Joint Board and its Committees	105 11.5%	STAFF team meeting/immediate line manager - Council or Health Board	190 20.9%
Locality Forum within the Partnership	79 8.7%	Staffside/Trade Union	44 4.8%
Patient, service user or carer representative group that links with the Partnership	41 4.5%	Press/External media	51 5.6%
Contractor/Provider network - voluntary or private	59 6.5%	Grapevine/Conversations with other people	130 14.3%
Leaflet/Poster	79 8.7%	Other external website or social media	18 2.0%
Noticeboards in health and care centres, sw offices, libraries, comm centres or other estabs	89 9.8%	Other	37 4.1%
Television screens in above establishments	38 4.2%	None - do not know anything about them	46 5.1%

Q11. What would be your FIVE preferred ways of getting information on Health and Social Care Integration, the Glasgow City Health and Social Care Partnership or the Glasgow City Integration Joint Board and its Committees? (please select five responses)

Number applicable=910

Number with a valid response=893

Response	Frequency	Response	Frequency
Newsletter	431 48.3%	Consultation exercise	101 11.3%
Internet website	464 52.0%	Campaign or initiative	51 5.7%
Social media (e.g., Twitter and Facebook)	143 16.0%	Email	405 45.4%
Approved agendas, minutes and reports of the Glasgow City Integration Joint Board and its Committees	161 18.0%	Senior Management from the Partnership - face-to-face	154 17.2%
Health and social care service directory	167 18.7%	STAFF magazine/newsletter - Council or Health Board	67 7.5%
Locality Forum within the Glasgow City Health and Social Care Partnership	145 16.2%	STAFF Intranet website - Council or Health Board	206 23.1%
Patient, service user or carer representative group that links with the Partnership	56 6.3%	Staff briefing - Council or Health Board	233 26.1%
Contractor/Provider network - voluntary or private	61 6.8%	STAFF team meeting/immediate line manager - Council or Health Board	215 24.1%
Leaflet/Poster	178 19.9%	Press/External media	62 6.9%
Noticeboards in health and care centres, sw offices, libraries, comm centres or other estabs	145 16.2%	Grapevine/Conversations with other people	35 3.9%
Television screens in above establishments	92 10.3%	Other	15 1.7%
Event	178 19.9%	None	15 1.7%

Q12. In general, how useful have you found the information already communicated about Health and Social Care Integration, the Glasgow City Health and Social Care Partnership or the Glasgow City Integration Joint Board and its Committees? (please select one response)

Number applicable=910

Number with a valid response=889

Response	Frequency
Very useful	61 6.9%
Useful	246 27.7%
A little useful	346 38.9%
Not useful at all	143 16.1%
No opinion/Do not know	93 10.5%
Total	889

Q13. Can there be any improvements in how information has been communicated to you about Health and Social Care Integration, the Glasgow City Health and Social Care Partnership or the Glasgow City Integration Joint Board and its Committees? (please select one response)

Number applicable=910

Number with a valid response=885

Response	Frequency
Yes	471 53.2%
No	83 9.4%
No Opinion/Do not know	331 37.4%
Total	885