

# North Central London Fertility Policy Development

Phase Two Communications and  
Engagement Strategy *(Preliminary draft)*



## **North Central London Fertility Policy Development Communications and Engagement Strategy: Preliminary draft**

*This document is a preliminary draft of the communications and engagement strategy to support the second stage of the North Central London Clinical Commissioning Group (NCL CCG) Fertility Policies Review, to develop one policy for the boroughs of Barnet, Camden, Enfield, Haringey and Islington.*

*The final strategy, detailed engagement plan, and communications messaging, will developed through October and November.*

### **Background and context**

NCL CCG was formed in April 2020, with the merger of the five North Central London CCGs: Barnet, Camden, Enfield, Haringey and Islington. Each borough had its own fertility policy and with the formation of a single clinical commissioning group, NCL CCG has been working to develop a new, single policy which will cover all five boroughs.

The first phase was a Review of the five legacy policies, which produced a set of principles and recommendations to inform the development of the future single policy. A key strand of the Review was seeking the views of our residents, service users, voluntary and community (VCS) organisations, fertility groups and wider stakeholder audiences, both on the current fertility policies and also what the CCG should consider when developing the future single policy. The engagement window for this work ran from 10 May to 9 July 2021; to view the Engagement Report – [click here](#).

The second phase is the development of the future policy for NCL. Building on the approach taken in the first phase, a programme of engagement will be undertaken with residents, service users and wider stakeholder audiences to seek views on the draft final policy. The views gathered through this engagement will be used to shape the final policy. We anticipate that this engagement window will run from 22 November.

To note, during this engagement period views will also be sought on how the CCG can ensure the effective implementation of the future policy. These views will be captured to inform the development of a separate communications plan to support the publication of the final policy and its successful implementation. As such, publication and implementation communications planning are not covered in this strategy.

### **Phase two communications and engagement objectives**

The objectives for the second phase of communications and engagement are to:

1. Ensure that learnings from the first engagement phase are used to shape how we deliver engagement during the second phase;
2. Clearly demonstrate how insights captured in the first phase of engagement were used to inform the development of the draft single policy;
3. Articulate how feedback received on the draft policy will be used to shape the final policy, and ensure this is clearly evidenced in the final policy;
4. Maximise opportunities for residents, service users and wider stakeholders to provide feedback on the final draft policy – employing a range of engagement methods / channels, and ensuring materials are accessible etc.;
5. Proactively seek opportunities to hear from the diverse communities living in NCL, and ensure methodologies and materials are culturally competent and inclusive;

6. Seek feedback on how the CCG can support raising awareness, and understanding, of the future policy, and use this feedback to inform ongoing communications activity; and
7. Ensure the CCG is prepared to respond to challenge from stakeholders, and that any reputational risks are managed.

### Phase two key stakeholder audiences

The key audiences we focused on engaging with in the first phase of the Review remain the same for the second phase of the review.

We will ensure that what we learnt in terms of how to engage some of these audiences, and the connections we built in the first phase, are used to build on in the second phase.

Importantly, where we have permission to do so, we will ensure that all individuals who took time to participate in the first engagement phase are proactively re-contacted to promote their involvement in the second phase.

Group	Details
<b>Individuals that participated in the first phase of engagement</b>	<ul style="list-style-type: none"> <li>• Survey respondents</li> <li>• Participants in phase one engagement events, interviews, focus groups etc.</li> </ul>
<b>NHS partners and Fertility service providers (NCL)</b>	<ul style="list-style-type: none"> <li>• University College London Hospitals NHS Foundation Trust</li> <li>• Imperial College Healthcare NHS Trust</li> <li>• Homerton University Hospital NHS Foundation Trust</li> <li>• Guy's and St Thomas' NHS Foundation Trust</li> <li>• Central and North West London NHS Foundation Trust</li> <li>• Whittington Health</li> <li>• Royal Free London NHS Foundation Trust</li> </ul>
<b>Service users, residents,</b>	<ul style="list-style-type: none"> <li>• CCG Community Members</li> <li>• Local and national fertility groups</li> <li>• NCL Patient Participation Group networks</li> <li>• (NCL GP member practices) patient participation groups (PPGs)</li> </ul>
<b>Community, voluntary and charity sector organisations, resident associations</b>	<ul style="list-style-type: none"> <li>• Local Healthwatches</li> <li>• Local patient representative groups and charities</li> <li>• Special interest groups</li> </ul>
<b>Primary care</b>	<ul style="list-style-type: none"> <li>• GP member practices (including GPs, practice nurses, practice managers and administrative staff)</li> <li>• Primary care networks (PCNs) (including clinical directors)</li> <li>• GP Federations</li> <li>• Local Medical Committees (LMC)</li> </ul>
<b>Local Authorities</b>	<ul style="list-style-type: none"> <li>• Communications and Engagement teams</li> </ul>
<b>Political stakeholders</b>	<ul style="list-style-type: none"> <li>• MPs</li> <li>• Council Leaders (HOSC, JOSOC Chairs and Cllr leads for Adults and Social Care across the five boroughs)</li> <li>• JHOSC, HOSCs</li> <li>• Health and Wellbeing Boards</li> </ul>
<b>North Central London CCG</b>	<ul style="list-style-type: none"> <li>• Governing Body</li> <li>• Clinical leads</li> <li>• Executive Management Team</li> <li>• All other staff</li> </ul>

## **Communications Approach**

The communications approach for the second phase of the Review will focus on ensuring:

- We demonstrate how the final draft policy was developed, including clearly showing how engagement feedback from the first phase was used;
- The scope of the second phase of the review is clearly outlined and stakeholders are informed about the policy development process;
- That messaging / information shared is consistent, accurate and timely throughout and materials are in plain English (with other languages and formats on request);
- All CCG communications channels are used to promote engagement activity, and that partner organisations are also utilised as far as possible;
- We make it easy for people to understand, and feedback their views on, the proposed policy (e.g. providing a summary of key differences between legacy and the draft policy); and
- That the CCG responds quickly and accurately to all correspondence received through the second phase.

### **Communication messaging and materials**

As described, these will be developed once the proposed draft single policy is available. Core communication materials that will be developed will include:

- Refreshed CCG website pages – hosting legacy policies, final draft policy, details on engagement opportunities
- Core presentation
- Questionnaire
- Refreshed public information leaflet
- Easy read public information leaflet
- CCG spokesperson briefing document
- Core FAQ (internal and external)
- Event agendas, feedback capture pro forma
- Phase two 'launch' communications materials – newsletter articles, social media content

Key materials will be produced in easy read format and will also be available on request in most common NCL languages other than English, for sharing with these communities. The potential for print and distribution of materials will be reviewed.

### **Communication channels**

The final phase two communications and engagement strategy, and delivery plan, will set out in detail how available communications channels will be employed throughout the engagement period. Promotional materials will be produced through September to support delivery of key messages across all channels.

However, in summary, the channels include:

- Digital - NCL CCG website; CCG intranet; NCL GP website,
- Social media - CCG Twitter and Facebook, Instagram, InMyArea
- CCG stakeholder, resident and clinical newsletters and bulletins
- Paid-for advertising - social media, local newspapers.
- Providers – clinical and patient / service user channels
- Fertility, voluntary and community groups – websites, social media, newsletters etc.

## Engagement Approach

The engagement approach for the second phase of the Review will focus on ensuring:

- Opportunities for stakeholders to contribute to the policy development are maximised through offering a range of methodologies and channels, and using existing links and forums, as well as establishing new links where necessary;
- The range of voices informing our policy development reflects the diversity of our communities, including those from seldom heard groups;
- We work with partners, such as fertility groups and provider communications teams, to reach those affected by fertility issues and our service users (past and present);
- Views of key political (local MPs, Councillors), scrutiny and primary care stakeholders are sought, reflecting our statutory duties and duties as a membership organisation;
- The CCG has effective processes in place to gather and analyse engagement responses to inform the policy development; and
- That our engagement also seeks views on, when the final policy is agreed, the CCG can support ensuring wide awareness and understanding of it across key audiences.

### Role of the Fertility Policy Review (FPR) Steering Group

Two community members sit on the FPR Steering Group and will continue to champion the service user and resident voice throughout the engagement window with members of the group. One community member advocates for service users in their role as a member of Fertility Network UK and the other for residents across NCL, as they are one of the NCL appointed members.

### Establishing an NCL Community Member Readers Panel

Five CCG community members in addition to the community member who sits on the FPR Steering Group will be invited to form a Readers Panel, assisting the communications and engagement team in testing the promotional materials, online questionnaire and reviewing content of the draft single policy before the engagement window opens. This Readers Panel will also help us to promote the development of the single draft policy.

### Face-to-face engagement activity

We are committed to delivering in-person / face-to-face engagement where possible, but will be required to remain in line with national and CCG guidelines on group gatherings. We will ensure we are flexible in our engagement approaches to ensure service users and residents who are not online are not excluded from sharing their experiences with us. In order to mitigate potential digital exclusion, we also hope to work with community organisations to ensure any local opportunities for engagement with groups that may not be online.

### Engagement activity outline

Collating the views of service users and residents across NCL and key stakeholders (e.g. local Healthwatch and the JHOSC) as well as local and national fertility groups will be critical for the policy development. Their contribution and input into the development will be invaluable, and will help shape the approved single policy. For this reason, we want to ensure that the views and feedback we receive are reflective of the diverse communities across NCL, particularly those from LGBTQ+ and ethnic minority communities.

The following section sets out the key elements of the engagement programme of activity that will be implemented. In the final strategy, with accompanying detailed delivery plan, we will ensure that a full programme of activity – with a mix of methodologies and designed with partner input – is in place and that we tailor this as we move through the eight weeks, to we reach the maximum number and diversity of respondents.

### *Service user / resident / stakeholder survey*

We will develop a survey for service users, residents and local groups, inviting their feedback on the draft single policy. We will promote the survey via our communications channels listed below and will enlist the support of our partners to ensure this is widely circulated throughout the engagement window.

#### *Local borough engagement opportunities*

Engagement will also be undertaken via existing patient and public engagement forums and groups in each of the boroughs, for example GP practice-level Patient Participation Group (PPG) networks. This will include presenting to these groups where possible, and inviting participation in other opportunities such as the online survey.

#### *Focused sessions (face-to-face and online)*

We will run face-to-face and focused online sessions that are open to the public. These will take the form of both broad participation sessions (that are promoted via our partners and networks) and smaller sessions within particular communities, should they not be represented appropriately via other engagement activities (for example, people with seldom heard or learning disability groups).

#### *Existing NHS provider patient/service user groups*

The CCG will work closely with local NHS fertility providers, including Foundation Trusts, making use of their existing patient/service user groups to gather views and feedback on the draft policy. This will include presenting to these groups where possible, and inviting participation in other opportunities such as the online survey.

#### *Engaging with seldom heard groups*

North central London is home to communities from a diverse range of backgrounds, with substantial communities from many different ethnicities and nationalities – some long-established – as well as other aspects of diversity, such as sexual orientation, transgender, disability and socio-economic.

Ensuring the views and experiences of our diverse communities and groups are captured is essential to the development of the single policy. To facilitate and maximise feedback from these communities we will work closely with the CCG's existing borough engagement leads, Communities Team and COVID leads, capitalising on and further developing the connections and relationships made as result of the COVID-19 pandemic.

Furthermore, we will work through existing trusted networks, Healthwatch, VCS groups, national fertility groups (e.g. Fertility UK and The LGBT Mummies Tribe) local groups such as faith groups, community associations, particularly those with 'reach' to equalities and seldom heard groups identified as high-priority audiences for the review. We approached 100+ groups across north central London during phase one (the review of the five legacy policies) to enlist their support in cascading information to their members, along with the phase one online questionnaire. Gathering service users' and public views through these organisations and networks represents an important channel to inform the reviews.

To support this engagement activity we will make communications materials available in plain English, easy read versions, plus other formats and community languages where required.

#### *Meetings with local Healthwatch during the engagement window.*

We will offer regular meetings with local Healthwatch groups throughout the engagement activity period, to share emerging themes from the feedback and seek feedback on areas of focus / 'gaps' to fill through tailoring our engagement activity focus.

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