



west midlands
ACADEMIC HEALTH SCIENCE NETWORK

Communications and Engagement Strategy 2016/17



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1. Executive summary

The key aim of this strategy is to ensure that effective, timely and appropriate communications and engagement enables the West Midlands Academic Health Science Network (WMAHSN) to deliver its business plan objectives in 2016/17, involving the organisation's principal partners in the areas of health and social care commissioning and provision, public health, other NHS organisations, academia, industry, the third sector, local authorities and patients, carers and the public.

The communication tasks from the 2016/17 business plan are:

- Identify and exploit high value promotion opportunities for commercial and reputational gain across all forms of media
- Monitor all AHSN and WMAHSN media coverage and advise the Managing Director and executive team on the media implications of all relevant developments in the region or for the wider NHS, academic and commercial sectors
- Act as the primary point of contact for any Freedom of Information requests and co-ordinate timely responses
- Support the Membership Co-ordinator in maintaining regular dialogue across the WMAHSN and through the continued use of monthly newsletters
- Ensure the membership receives timely copies of the WMAHSN annual report and is regularly provided with up-to-date infographics to demonstrate the commercial and health and care improvements that are attributable to the WMAHSN
- Assist the Opportunities and Programmes Co-ordinator by maintaining a relevant log of metrics.

The situational analysis examines the national and regional healthcare context and how AHSNs, and WMAHSN in particular, contributes to improvement impacts, as well as the current strengths, weaknesses, opportunities and threats to the WMAHSN from a communications and engagement perspective and mapping the AHSN's stakeholders against the influence/interest matrix.

The messages that will be consistently communicated and approaches to be taken include the following:

What we did	<ul style="list-style-type: none">• Our innovation impacts (including all innovation pipeline activity)• Our economic impacts (including activity around the seven point growth plan)• Our improvement impacts (including activity around education and skills, the West Midlands Genomics Medicine Centre and patient safety)
How we did it	<ul style="list-style-type: none">• Our services (including Meridian)• Our networks• Our programmes (including case studies)
What we are going to do	<ul style="list-style-type: none">• For our population (improve access experience and outcomes, reduce variation and make a difference)• For our members (digital/data enablement, support the development of Person-centred Care services, provide proven innovative solutions and technologies to drive up efficiency and improve outcomes)

	<ul style="list-style-type: none"> • For the Office of Life Sciences and the Accelerated Access Review (encourage and support engagement with the NHS at multiple levels to reduce the time to market for medical technologies, diagnostics, digital and pharmaceutical industries) • For NHS England and NHS Improvement (deliver on the innovation and improvement components of the Five Year Forward View, Francis Review and Carter Review) • For regional providers and commissioners of health and social care (support organisations in the adoption of innovation at scale and pace) • For academics (encourage greater collaboration between academic institutions, the NHS and industry to boost research and innovation in healthcare and life sciences) • For industry and the private sector (generate economic opportunities through industry collaboration and attracting inward investment)
How we are going to do it	<ul style="list-style-type: none"> • Develop our networks and service offer (develop Meridian as <i>the</i> single innovation membership service for the NHS, academia and industry in the West Midlands and create a Meridian citizen capacity) • Develop and support New Models of Care (support Sustainability and Transformation Plans, devolved authority, vanguards, GP federations, accountable care organisations, acute provider groups, digital roadmaps and social economy providers and investors) • Develop and support Living Labs and Testbeds (develop the next generation of regional, national, European and global innovation collaboratives) • Gather stories on successes and achievements via metrics, clinical leads, Membership Innovation Councils, Meridian, Genomics Medicine Ambassadors and networks
How we communicate these messages	<ul style="list-style-type: none"> • Keep it simple and concise (infographics, stories, quotes and talking heads to storify successes and achievements) • Use metrics but bring them to life • Prioritise <i>what over how</i> (multiple communications channels available, but we will always lead with what we have done or are doing, rather than how we are organised) • Timely (events and communications planned well in advance, with clear deadlines and responsibilities, to ensure full engagement with stakeholders, including members, potential sponsors, speakers and contributors) • Push communications via existing online and offline channels, including “champions” such as the clinical leads and ambassadors, enhanced members, networks, partner communications teams, Meridian and national channels such as the AHSN Atlas

The strategy covers the communications and engagement workstreams for the period June 2016 – June 2017, in essence the greater use of graphics and case studies to “storify” WMAHSN successes and achievements. It is envisaged that this will be a flexible document that will be continually updated and refreshed, particularly the action plan, in response to communications and

engagement developments. There is a range of metrics which will inform the quarterly assurance process and evaluate the effectiveness of this strategy, and lessons learned will feed into the communications and engagement strategy for 2017/18.

2. Introduction

The key aim of this strategy is to ensure that effective, timely and appropriate communications and engagement enables the West Midlands Academic Health Science Network (WMAHSN) to deliver its business plan objectives 2016/17, involving the organisation’s principal partners in the areas of health and social care commissioning and provision, public health, other NHS organisations, academia, industry, the third sector, local authorities and patients, carers and the public.

The communication tasks from the 2016/17 business plan are:

- Identify and exploit high value promotion opportunities for commercial and reputational gain across all forms of media
- Monitor all AHSN and WMAHSN media coverage and advise the Managing Director and executive team on the media implications of all relevant developments in the region or for the wider NHS, academic and commercial sectors
- Act as the primary point of contact for any Freedom of Information requests and co-ordinate timely responses
- Support the Membership Co-ordinator in maintaining regular dialogue across the WMAHSN and through the continued use of monthly newsletters
- Ensure the membership receives timely copies of the WMAHSN annual report and is regularly provided with up-to-date infographics to demonstrate the commercial and health and care improvements that are attributable to the WMAHSN
- Assist the Opportunities and Programmes Co-ordinator by maintaining a relevant log of metrics.

The messages that will be consistently communicated and approaches to be taken include the following:

Fig 1 – Communications messages and approach

What we did	<ul style="list-style-type: none"> • Our innovation impacts (including all innovation pipeline activity) • Our economic impacts (including activity around the seven point growth plan) • Our improvement impacts (including activity around education and skills, the West Midlands Genomics Medicine Centre and patient safety)
How we did it	<ul style="list-style-type: none"> • Our services (including Meridian) • Our networks • Our programmes (including case studies)
What we are going to do	<ul style="list-style-type: none"> • For our population (improve access experience and outcomes, reduce variation and make a difference)

	<ul style="list-style-type: none"> • For our members (digital/data enablement, support the development of Person-centred Care services, provide proven innovative solutions and technologies to drive up efficiency and improve outcomes) • For the Office of Life Sciences and the Accelerated Access Review (encourage and support engagement with the NHS at multiple levels to reduce the time to market for medical technologies, diagnostics, digital and pharmaceutical industries) • For NHS England and NHS Improvement (deliver on the innovation and improvement components of the Five Year Forward View, Francis Review and Carter Review) • For regional providers and commissioners of health and social care (support organisations in the adoption of innovation at scale and pace) • For academics (encourage greater collaboration between academic institutions, the NHS and industry to boost research and innovation in healthcare and life sciences) • For industry and the private sector (generate economic opportunities through industry collaboration and attracting inward investment)
<p>How we are going to do it</p>	<ul style="list-style-type: none"> • Develop our networks and service offer (develop Meridian as <i>the</i> single innovation membership service for the NHS, academia and industry in the West Midlands and create a Meridian citizen capacity) • Develop and support New Models of Care (support Sustainability and Transformation Plans, devolved authority, vanguards, GP federations, accountable care organisations, acute provider groups, digital roadmaps and social economy providers and investors) • Develop and support Living Labs and Testbeds (develop the next generation of regional, national, European and global innovation collaboratives) • Gather stories on successes and achievements via metrics, clinical leads, Membership Innovation Councils, Meridian, Genomics Medicine Ambassadors and networks
<p>How we communicate these messages</p>	<ul style="list-style-type: none"> • Keep it simple and concise (infographics, stories, quotes and talking heads to storify successes and achievements) • Use metrics but bring them to life • Prioritise <i>what</i> over <i>how</i> (multiple communications channels available, but we will always lead with what we have done or are doing, rather than how we are organised) • Timely (events and communications planned well in advance, with clear deadlines and responsibilities, to ensure full engagement with stakeholders, including members, potential sponsors, speakers and contributors) • Push communications via existing online and offline channels, including “champions” such as the clinical leads and ambassadors,

The communications workstreams for 2016/17 are:

- Regularly communicate the key messages above across all forms of media, including press releases, website, newsletter, social media, Newsflashes and partner channels
- Monitor all AHSN and WMAHSN media coverage through the use of Meltwater, developing a list of appropriate key words and producing a regular media briefing that can be shared with the executive team and enhanced members
- Continue to act as the primary point of contact for any Freedom of Information requests and co-ordinate timely responses
- Support the Membership Co-ordinator to deliver the membership recruitment and retention strategy by maintaining regular dialogue across the WMAHSN and through the continued use of monthly newsletters and other channels
- Deliver the WMAHSN annual report and a communications campaign to promote it
- Develop a suite of infographics showing innovation, economic and improvement impacts, promoted through a communications campaign
- Maintain a relevant log of metrics, including publications achieved, subscribers to AHSN newsletters, unique website visitors and attendees at events
- Support the development and promotion of services and networks, including newsletters, marketing materials, web presence and events
- Develop suite of case studies around WMAHSN programmes, promoted through communications campaign
- Support the Innovation and Adoption Manager in developing and promoting a Meridian citizen capacity
- Support the West Midlands Genomics Medicine Centre communications lead in the promotion of the GMC, in order to raise levels of recruitment to the 100,000 Genomes Project.

This communications and engagement strategy covers the period June 2016 – June 2017. It is envisaged that this will be a flexible document that will be continually updated and refreshed, particularly the action plan, in response to communications and engagement developments.

There is a range of metrics which will inform the quarterly assurance process and evaluate the effectiveness of this strategy, and lessons learned will feed into the communications and engagement strategy for 2017/18.

3. Situation analysis

3.1 National context

The government identified life sciences and healthcare as important sectors to generate new economic growth, as well as increasing the quality of care for patients within the NHS.

AHSNs were established to deliver a step-change in the way the NHS identifies, develops and adopts new technologies and are predicated on partnership working and collaboration between the NHS, academia, the private sector and other external partners within a single AHSN context and across AHSNs. They present a unique opportunity to align education, clinical research, informatics, innovation, training and education and healthcare delivery. Their goal is to improve patient and population health outcomes by translating research into practice, and developing and implementing integrated healthcare services. They support knowledge exchange networks to build alliances across internal and external networks and actively share best practice, and provide for rapid evaluation and early adoption of new innovations.

AHSNs are system integrators which link different parts of the health ecosystem to ensure that a range of aspects to improve health outcomes are considered, using proven methodology and improvement in science to lead large scale, sustainable transformational change across traditional boundaries.

All AHSNs have an agenda to drive adoption and spread of innovation across all areas of healthcare provision and population health, each AHSN also has the remit to bring together the resources and assets in their geography to create a synergy between researchers in universities, industry and entrepreneurs, and the local NHS to identify, exploit and commercialise innovations that will have national and international significance. With an ageing population, pressure on healthcare services and an increasing proportion of the population struggling with long term conditions in an increasingly fragmented landscape, there is an even greater need for AHSNs.

The core objectives for all AHSNs are:

1. Focus on the needs of patients and local populations: support and work in partnership with commissioners and public health bodies to identify and address unmet medical needs, whilst promoting health equality and best practice.
2. Build a culture of partnership and collaboration: promote inclusivity, partnership and collaboration to consider and address local, regional and national priorities.
3. Speed up adoption of innovation into practice to improve clinical outcomes and patient experience – support the identification and more rapid spread of research and innovation at pace and scale to improve patient care and local population health.
4. Create wealth through co-development, testing, evaluation and early adoption and spread of new products and services.

In order to report on progress against these objectives, each AHSN reports on outcomes against a number of metrics in the quarterly assurance process with NHS England.

3.2 Regional context

The prime purpose of the WMAHSN is to improve health outcomes and generate wealth across the West Midlands through collaborative innovation and the subsequent adoption at scale and pace on behalf of our stakeholders. The WMAHSN is pivotal to the development and maintenance of a

healthier region in which there is equitable access to high quality, efficient, effective, person-centred care that delivers the best clinical outcomes and patient satisfaction.

This has been achieved in a collaborative environment in which member organisations are supported and in which the technology-rich West Midlands' health care and life sciences community is fully integrated and generating additional investment. Through its programmes, the WMAHSN has played an increasingly influential role in improving healthcare and creating the conditions to generate wealth for the West Midlands' population. Proven innovation has been spread at scale and pace regionally and nationally, making the West Midlands healthier and more productive.

The West Midlands region is unique in combining "the population of Scotland with the diversity of London". While the region continues to be a region of multiplicity, with rural and urban landscapes, pockets of affluence and deprivation, distinct health inequalities, with a thriving business location and home to academic excellence it is also one that is rich in potential.

As well as its distinctive population, unrivalled geographical position and excellent transport links, the improved generation and adoption of innovation has benefitted the West Midlands by giving the region's academic institutions and healthcare and life sciences industry a competitive advantage. In addition, the WMAHSN confers other advantages with its strong existing networks, its original ambition to become England's first truly digital health economy, the established focus of commercialisation of opportunities via MidTECH and Medilink West Midlands, and the developing strength of its patient safety work. However, these relative strengths also complement other AHSNs and contribute to the national agenda.

Of the five original NHS England core objectives stipulated for all AHSNs, WMAHSN focuses on the speeding up the adoption of innovation into practice to improve clinical outcomes and patient experience. These are measured using the national AHSN metrics, with a core focus for communications activities on the improvement, innovation and economic benefits of our outcomes. The other four objectives are all outcomes of our core innovation and adoption objective.

3.3 SWOT analysis

As shown by the following SWOT analysis, the WMAHSN has communications and engagement strengths on which to build, and a number of opportunities are open to the organisation which communications and engagement can facilitate. There are also several threats and weaknesses that communications and engagement activities can help mitigate.

Fig 2 - SWOT analysis

<p>Strengths</p> <ul style="list-style-type: none">• Strong brand• Very wide network – range of stakeholders already engaged• Many potential members• Website redeveloped in 2015, with membership and networks sections added• Successful events• Evidence of WMAHSN impacts via metrics• Maturing organisation• Some organisations already recruited into enhanced membership scheme• Development of Meridian• Particular strengths include:<ul style="list-style-type: none">• Digital agenda• Commercialisation of opportunities• Patient safety	<p>Weaknesses</p> <ul style="list-style-type: none">• Poor performance in annual stakeholder survey• Large geographical spread and population size• Small team/capacity• Some engagement poor e.g. commissioners• Asking organisations to pay for enhanced services
<p>Opportunities</p> <ul style="list-style-type: none">• Demonstration of WMAHSN impacts• Promote programme outcomes and successes• Development of membership model• Establish genuine engagement through membership networks• Widen networks – by sector and geography• Marketing of wider West Midlands life sciences and healthcare sector• New programmes• Become self-sustaining organisation	<p>Threats</p> <ul style="list-style-type: none">• Change of government/policy leads to abolition of AHSNs• Failure of programmes• Adverse publicity from failure of programmes• Membership model not sustainable• Information governance issues

The key focus for communications will be on the WMAHSN's strengths and opportunities, as well as those of the West Midlands region and its life sciences and healthcare sector.

3.4 Stakeholder analysis

A key value of the WMAHSN is that of inclusivity. In 2015/16, 1462 organisations were involved with WMAHSN via programmes and events.

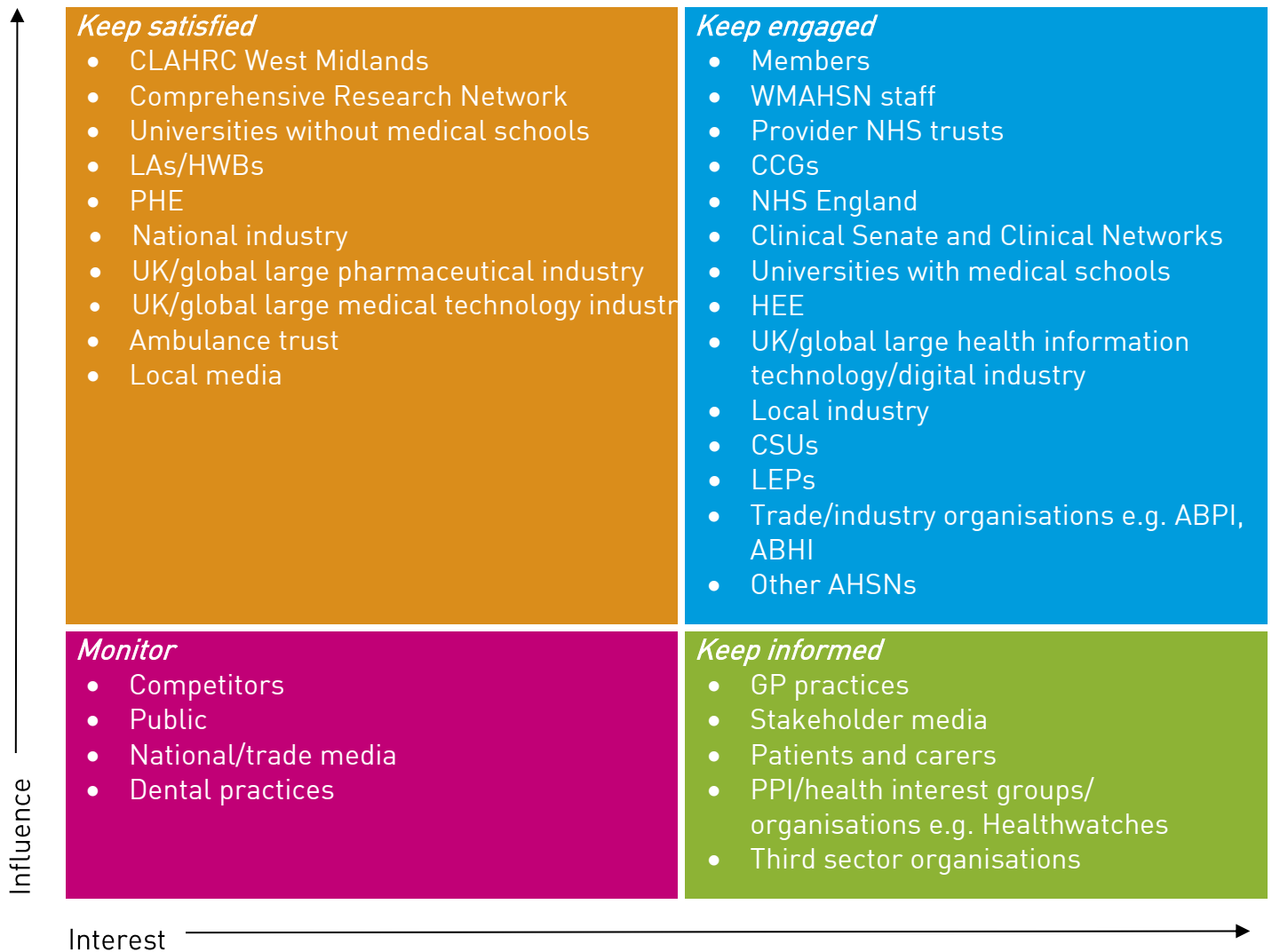
Our existing stakeholders will continue to be engaged, while the membership will be further expanded to encourage the broadest range of stakeholders as possible to contribute to the development and sharing of issues, ideas and solutions.

The West Midlands is rich in potential members, being home to:

- 18 acute NHS trusts (including four specialist trusts)
- Six mental health NHS trusts
- Four community NHS trusts
- 22 NHS Clinical Commissioning Groups (CCGs)
- One ambulance NHS trust
- c975 GP practices
- c700 dental practices
- 14 Health and Wellbeing Boards (HWBs) across 14 local authorities
- One Clinical Senate and Clinical Network
- One Comprehensive Research Network (CRN)
- One NIHR Collaboration for Leadership in Applied Health Research and Care West Midlands (CLAHRC WM)
- One Local Education and Training Board (LETB), covering the Midlands and East
- One regional Public Health England (PHE) team
- Six Local Enterprise Partnerships (LEPs)
- Two Commissioning Support Units (CSUs)
- One NHS England Local Area Team, covering the Midlands and East
- 12 universities with healthcare study provision, three (to be four from 2018) with medical schools
- 1000+ companies associated with the medical and healthcare sector
- 600+ companies in the life sciences sector
- Crucially, there is the West Midlands' population of 5.6 million people, which takes pride in being one of the most diverse in the UK.

Using the following influence/interest matrix, these stakeholders have been prioritised as below, with communications and engagement activity to be focused primarily on those in the Keep Engaged quadrant. Content to these stakeholders will be customised as appropriate. However, there will be communications and engagement activity across all quadrants, with the tailoring of communications activities decreasing with priority down to Monitor.

Fig 3 - Influence/interest matrix



4. Workstreams

4.1 Regularly communicate key messages across all forms of media

This workstream will build on stakeholder engagement to date, continuing to work in an inclusive manner with a wide variety of partners, demonstrating the innovation, economic and improvement impacts of WMAHSN programmes, changing behaviours and perceptions and continually promoting the WMAHSN's brand, membership benefits, vision, values and vision, mission, purpose and progress to stakeholders and members. This strategy will support the development and the promotion of WMAHSN clinical priority and enabling theme programmes, whether in the early stages of development or the delivery stage, with a strong focus on demonstrating outcomes, and working closely with the Clinical Leads, Business Managers, Innovation and Adoption Programme Manager and Opportunities and Programmes Co-ordinator. The demonstration of WMAHSN impacts will be crucial in ensuring a strong performance in the annual stakeholder survey.

Media

- Maintain and expand database of local, national, trade and stakeholder print, broadcast and online media contacts
- Continue to issue press releases including outcomes and success stories, events, news, input programme milestones etc. to relevant media as required
- Upload to WMAHSN website and promote via WMAHSN channels
- To include perspective of those who have benefited from the WMAHSN programme impact wherever possible, whether clinician, patient, academic or industry representative.

Comms network

- Continue to engage with the West Midlands' heads of communications/marketing in NHS, academic, third sector, local authority and industry organisations, including attendance at the NHS England Area Team communications network
- Share WMAHSN impacts, expertise, innovations, best practice and PR opportunities around clinical priorities, themes and programmes, particularly where these are shared with other organisations
- Encourage flow of information to member organisations via communications teams in NHS, academic, third sector, local authority and industry organisations
- Wider scale marketing of region as the place to invest in healthcare and life sciences.

Website

- Continued development of WMAHSN website, with search feature added and regularly updated content.

Newsletter

- Continue to deliver the WMAHSN newsletter, *Network News*, on the third Friday of every month, and promote via website and social media.

Social media

- Continue to develop social media channels, including Twitter and YouTube, with regular content demonstrating WMAHSN activities and impacts.

Newsflashes

- Continue to deliver Newsflashes to all subscribers as required.

Marketing collateral

- Mugs
- Lanyards
- Pens.

Branding

- Continue to develop suite of templates to ensure consistent consistency across all of the organisation's communications for use by WMAHSN staff
- Continue to produce documents according to style guidance.

Photo library

- Continue to develop library, including images that show real patients that have benefited, programmes, products and partnerships in action
- Encourage WMAHSN staff to take relevant photos when networking/on visits (with consent obtained).

Events

- Support members of the executive team in planning, delivering and promoting WMAHSN events
- Oversee the design and production of delegate packs, along with any other supporting materials as appropriate
- Feedback reports from events published on the WMAHSN website and/or sent to delegates as events.

Video

- Develop suite of videos promoting WMAHSN impacts and benefits, including talking heads from those who have benefited from WMAHSN programmes wherever possible, including clinicians, academics, patients and the public
- Upload to YouTube and promote via WMAHSN channels.

Surveys

- Promotion of Annual YouGov survey in August 2016, with target of at least 100 responses
- Surveys as required by programmes, services, networks or events
- Dissemination of results via web, newsletter, social media, annual report, impact reports, infographics, output reports etc.

The Institute of Translational Medicine

- Official launch event planned for October 2016, with potential opportunities for additional stakeholder specific launch events
- Glass decals on doors, also including EIT Health KIC, MidTECH and Medlink WM
- Support the development of the ITM website
- Marketing flyers – commercial hub, WMAHSN, Medilink WM and MidTECH.

Wealth creation communications

Second Health and Wealth Economic Summit, December 2016

- Obtain sponsors and speakers
- Promotion and PR
- Delegate pack.

Seven point growth plan

- Update artwork
- Update on website.

BQ Magazine Special Report and round table debate

- Distribute hard copies of Special Report 2016 to key stakeholders
- Develop and deliver communications plan for Special Report 2017
- Suggested content for Special Report 2017
- Develop sales brochure
- 20 – 22 sponsors required
- Check content
- Promote digital edition in WMAHSN channels.

Blogs

- WMAHSN staff to write blogs, published on WMAHSN website
- Continue to invite guest bloggers from health and social care, academia, industry and the public at least once every two months.

Communications and engagement on a national basis

On behalf of the AHSN Network, AHSNs lead or participate in a piece of communications and engagement work on a national basis; WMAHSN is participating in the national events workstream. In addition, each AHSN contributes to work that is showcased at a national level, including case studies (via the AHSN Atlas of Innovation) and in publications such as reports and brochures. This activity takes place with AHSN Network branding.

Events

- Support presence, presentations and marketing collateral at national events, including:
 - NHS Confederation
 - Patient Safety Congress
 - Expo
 - Pharmacy Show - WMAHSN is co-leading this with Wessex AHSN
 - TEC conference – WMAHSN is leading this.

-
- Contribute to staffing rota
 - Identify opportunities for other events
 - Contribute to the national AHSN Atlas case studies
 - Contribute to publications and other collateral
 - Continue to participate in AHSN Network communications leads forum.

Reports

- Contribute case studies to AHSN impact and patient safety reports
- Distribute printed copies via post and at events
- Contribute to impact report presentation and video
- Promote presence of WMAHSN in reports via WMAHSN channels.

4.2 Monitoring media coverage

- Obtain agent use of Meltwater
- Working with the executive team, develop a list of appropriate key words
- Produce a regular media briefing and share with the executive team and enhanced members
- Include coverage of WMAHSN/other AHSNs/our partners
- Horizon scanning of innovations and developments for WMAHSN executive team
- Offered as added-value benefit of enhanced membership
- Outcomes to inform quarterly assurance process.

4.3 Freedom of Information

- Continue to act as the primary point of contact for any Freedom of Information requests and co-ordinate timely responses
- Develop an FOI policy and share with the executive team
- Develop an FOI page on the WMAHSN website, and include contact details.

4.4 Membership

WMAHSN's continued existence may be dependent on the organisation becoming financially self-sustaining. Mitigating this are the enhanced membership and corporate partnership schemes, which appeal to the diverse needs of organisations of varying sizes. The minimum targeted amount to be raised from enhanced services and corporate partnering is around £1m a year. Working closely with the WMAHSN Membership Co-ordinator, communications activities will support the delivery of the membership strategy by communicating the benefits and advantages of membership and the services offered, as well as by demonstrating the impacts of the work of WMAHSN.

- Support the Membership Co-ordinator to deliver the membership recruitment and retention strategy
- Working with the Membership Co-ordinator, develop and distribute a membership welcome pack and logo to enhanced membership organisations.

Customer Relationship Management (CRM)

- Complete the cleanse and organisation of the existing stakeholder database so that it is accurate
- Validate the data in the existing database so that it is Data Protection Act compliant
- Working with the Business Managers, Programmes and Opportunities Co-ordinator and Membership Co-ordinator, procure a CRM system to capture interactions and manage membership, informing the quarterly assurance process and cultivating membership relationships.

Membership communications offering

The communications offering to members will continue to be developed as below.

Fig 4 Membership communications offering

Level	Benefits	Target organisations
Standard membership	<ul style="list-style-type: none"> • Standard access to Meridian • Access to networks • Access to network newsletters and websites • Monthly newsletter • Newsflash alerts • Sponsorship and exhibition packages (fee payable) 	<ul style="list-style-type: none"> • WM industry • WM academic institutions • WM NHS providers • WM NHS/social care commissioners • WM social enterprises • SMEs • Large industry • Social enterprises • Private sector organisations
Enhanced membership	<p>All above plus:</p> <ul style="list-style-type: none"> • Access to enhanced services: <ul style="list-style-type: none"> ○ Enhanced access to Meridian ○ Access to Innovation and Adoption, Person-centred Care and Digital Health services ○ Access to the EIT Health KIC programme and funding ○ Access to MidTECH Intellectual Property management services • Membership welcome pack • Logo, “WMAHSN enhanced membership” • Regular media round up • Reduced exhibition and sponsorship rates • Advance notice of events and training • Submit material for WMAHSN communication channels 	<ul style="list-style-type: none"> • WM academic institutions • WM NHS providers • NHS commissioners via CSUs

	<ul style="list-style-type: none"> • Joint PR opportunities 	
Corporate partnership	As above plus: <ul style="list-style-type: none"> • Logo, "WMAHSN corporate partner" • Free sponsorship of up to two WMAHSN events per year 	<ul style="list-style-type: none"> • Larger industry

4.5 WMAHSN annual report

- Deliver a printed version of the 2015/16 annual report for the Celebration of Innovation event on 28 June
- Distribute printed copies with letter from CP to key stakeholders, including health and social care providers and commissioners, academia and industry organisations
- Add to website
- Newsflash
- Press release
- Partner channels
- Social media, including impact figures.

4.6 Infographics

- Produce and distribute infographics showing innovation, economic and improvement impacts, including suite of A5 programme/priority/theme/sector infographics with mini-case studies, plans and priorities for 2016/17, outcomes 2015/16, standard membership, enhanced membership, WMAHSN on a page
- Promote through a communications campaign.

4.7 Metrics

Maintain a relevant log of metrics, including for the NHSE quarterly assurance process, including:

- Publications achieved, including local, national and international consumer and trade media and academic journals
- Subscribers to AHSN newsletters
- Unique website visitors
- Attendees at events
- Twitter impressions
- Facebook likes
- LinkedIn engagements
- YouTube video views.

4.8 Services and networks

- Maintain regular dialogue across the WMAHSN and through the continued use of monthly newsletters and other channels
- Support Clinical Leads, Business Managers, Innovation and Adoption Programme Manager and Opportunities and Programmes Co-ordinator in development of membership networks
- Continue to develop service and network newsletters
- Support networks with web presence e.g. discrete websites, Twitter, content on WMAHSN website
- Support and promote network events
- Support the development of service network marketing collateral e.g. pull up banners for Meridian, priorities, networks and membership
- Further develop and promulgate network branding
- Support MidTECH with communications and marketing activities e.g. flyer, new website, Twitter
- Further development of membership and networks areas of WMAHSN website.

4.9 Case studies

- Continue to develop suite of case studies around WMAHSN programmes, including demonstration of impacts and stakeholder quotes, including demonstration of ROI on enhanced membership where appropriate and added value to members, patients and the public, clinicians and commissioners and academics
- Add to case studies section of WMAHSN website
- Promote through events and communications campaign.

4.10 Meridian citizen capacity

- Support the Innovation and Adoption Manager in developing and promoting a Meridian citizen capacity
- Participate in stakeholder mapping as required.

4.11 West Midlands Genomics Medicine Centre

- With the Midlands Genomics Medicine Centre communications lead, agree and support the delivery of a communications plan to increase awareness, raise levels of clinical engagement and increase recruitment to the 100,000 Genomes Project
- Regular reports for the GMC Management Group
- Reporting against communications and PPI metrics for the NHSE quarterly assurance process.

5. Aim and objectives

5.1 Aim

The key aim of this strategy is to ensure that effective, timely and appropriate communications and engagement enables the West Midlands Academic Health Science Network (WMAHSN) to deliver its business plan objectives 2016/17, involving the organisation's principal partners in the areas of health and social care commissioning and provision, public health, other NHS organisations, academia, industry, the third sector, local authorities and patients, carers and the public.

5.2 Objectives

Supporting this overarching aim is a range of communications and engagement objectives that are SMART (specific, measurable, attainable, relevant and timely) and will act as metrics for evaluating the effectiveness of this strategy:

- Minimum level of enhanced service members by June 2017
- Increase in publications in local, national and stakeholder media by 20% on 2015/16
- Increase in unique visitors to WMAHSN website by 20% on 2015/16
- Increase in attendance/engagement at events by 20% on 2015/16
- Increase in Twitter followers by 20% on 2015/16
- Increase in Twitter impressions by 20% on 2015/16
- Increase in subscribers to newsletter by 10% on 2015/16.

6. Risks

The challenge for the WMAHSN in this financial year will be to convert the stakeholders engaged last year into enhanced members. The notion of free members paying for enhanced provision is a selling task that needs to be approached on a one to one basis with the institutions targeted, giving the opportunity to discuss the level and the return on the investment requested. The membership model will require careful messaging: the marketing and communications needs to neither raise expectations, nor cause alarm among our partners.

In order for shared ownership to be successful, organisations must not feel that there is any bias towards individual parts of the region and its institutions, so WMAHSN's independence must be very clear.

7. Action plan

It is envisaged that this strategy will be a flexible document that will be continually updated and refreshed, particularly the action plan, in response to communications and engagement developments.

The action plan lists the communications and engagement activities against delivery dates with indications of progress. Please see the separate spreadsheet for the action plan.

8. Evaluation

The outcomes of this strategy will be evaluated against the objectives and metrics above and lessons learned will feed into the communications and engagement strategy for 2017/18.