



# NEL Sustainability and Transformation Plan (STP) Communications and engagement plan (phase 2)

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## 1. Aims

### 1.1 Purpose

This document sets out the arrangements for communicating the development of the Sustainability and Transformation Plan (STP) for north east London (Barking and Dagenham, City and Hackney, Havering, Newham, Redbridge, Tower Hamlets and Waltham Forest). It builds on the previous plan which covered March to September 2016.

It sets out how communications with staff, patients, the public, partners and other stakeholders will be managed and delivered. It focuses on the six month period from October 2016 to April 2017. A further communications and engagement plan will be developed for any subsequent phases, or in light of any significant changes.

The STP programme communications team is responsible for coordinating work that needs to be done across all CCGs, developing a core narrative, coordinating activity. Local communications teams are responsible for local delivery – understanding local issues and working at a much greater detail to develop local solutions; and engagement on plans that sit under the STP. All communications teams are responsible for (and have) links with local authority communications teams.

### 1.2 Out of scope

This plan does not include communications regarding the implementation of schemes of work contained in the STP or any specific consultation required. In future we will need to review existing local arrangements on patient participation to ensure they are fit for future purpose, e.g. increasing self-care; using expert patients, self-help groups etc. There will also need to be communications resource dedicated to support implementation e.g. workforce recruitment and retention, GP comms, and shared care records.

## 2. Background

On 30 June 2016, the north east London (NEL) health and care system (known as a 'footprint') submitted a draft sustainability and transformation plan (STP) to NHS England. This set out how local health and care services will transform and become sustainable over the next five years, building and strengthening local relationships and ultimately delivering the vision of the 5YFV. While the sign off of the STP lies with health partners, local authorities are integral to its development, and have an important role to play in ensuring its success.

For the NHS to meet the needs of future patients in a sustainable way, we need to close the gaps in health, finance and quality of care between where we are now and where we need to be in 2020/21. This means making changes around how local people live, how they access care, and how care is delivered. It doesn't mean doing less for patients or reducing the quality of care provided. It means more preventative care; finding new ways to meet people's needs; and identifying ways to do things more efficiently.

### The Five Year Forward View

The [NHS Five Year Forward View \(5YFV\)](#) sets out a shared vision for the future of the NHS based around the new models of care. It considers the progress made in improving health and care services in recent years and the challenges that the NHS faces leading up to 2020/21. These challenges include:

- the quality of care that people receive can be variable
- preventable illness is common
- growing demands on the NHS means that local health and care organisations are facing financial pressure
- the needs and expectations of the public are changing. New treatments' options are emerging, and we rightly expect better care closer to home.

The 5YFV proposes to:

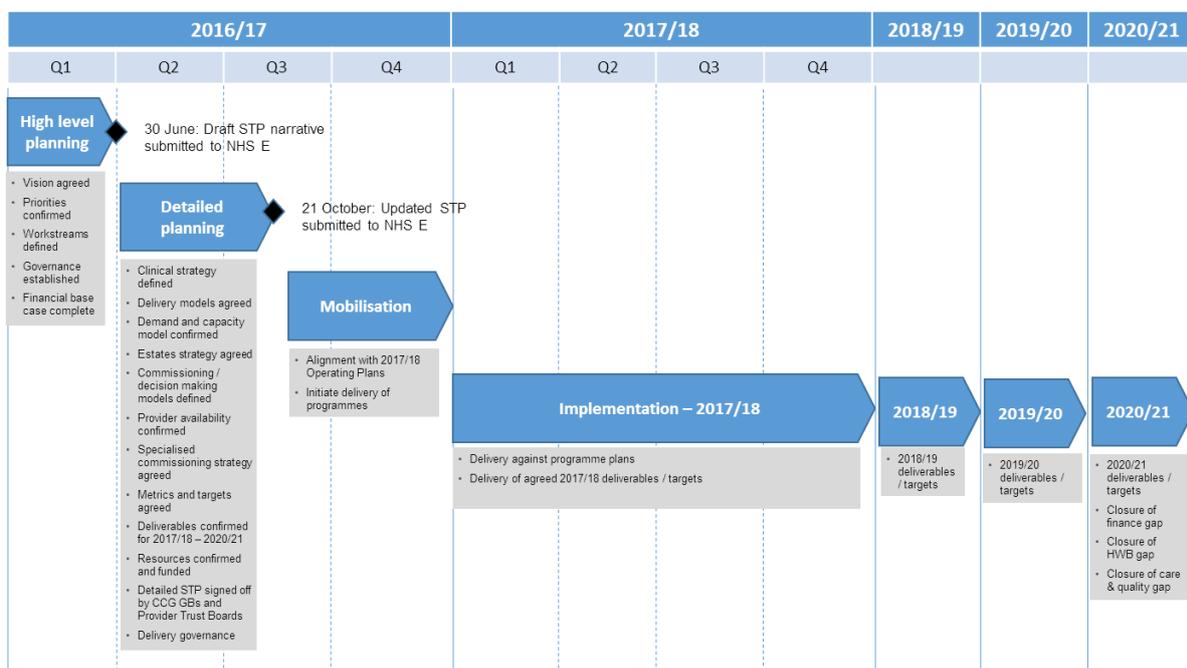
- Redesign urgent and emergency care services to integrate between A&E departments, GP out-of-hours services, urgent care centres, NHS 111, and ambulance services. Smaller hospitals will have new options to help them remain viable, including forming partnerships with other hospitals further afield, and partnering with specialist hospitals to provide more local services. Midwives will have new options to take charge of the maternity services they offer. The NHS will provide more support for frail older people living in care homes.
- Invest more in primary care, while stabilising core funding for general practice nationally over the next two years. GP-led Clinical Commissioning Groups will have the option of more control over the wider NHS budget, enabling a shift in investment from acute to primary and community services.

The following organisations have been working together on the STP:

- Clinical commissioning groups: Barking and Dagenham, City and Hackney, Havering, Newham, Redbridge, Tower Hamlets and Waltham Forest.
- Local authorities: Barking and Dagenham, City of London Corporation, Hackney, Havering, Newham, Redbridge, Tower Hamlets and Waltham Forest.
- Providers: Barking, Havering and Redbridge University Hospitals Trust, Barts Health NHS Trust, East London NHS Foundation Trust, Homerton University Hospital NHS Foundation Trust, North East London NHS Foundation Trust.
- Colleagues from NHS England, Health Education England, UCL Partners, GP federations, professional bodies, health and wellbeing boards and NEL Commissioning Support Unit with input from patients and the public.

As we move forward we will ensure a much greater role for a wider range of stakeholders.

### 3. NEL STP main objectives



## 4. Communications objectives

### 4.1 Our objectives

Good communication and engagement will be at the heart of the development of the STP. There has already been interest and potentially concern from stakeholders, staff, patients and the public. Some of these concerns will be around the future of services and the perception of increasing financial pressure on the NHS impacting on the ability to deliver quality timely services. There also are concerns around the interface with local plans currently underway or in development (Transforming Services Together (TST) in Newham, Tower Hamlets and Waltham Forest; the development of an accountable care system in Barking and Dagenham, Havering and Redbridge; devolution in Hackney). We aim to address these concerns through our communications activities.

#### **NHS England guidance - What does communications success in 2020/21 look like?**

NHS England guidance sets out the key communications messages nationally:

- Communication continues to be meaningful, evidence-based, clear and collaborative – with good evaluation.
- A vision between all stakeholders for where we want to be in 2020/21 has been developed, and is clearly understood and recognised by local people – both in the organisations within the footprint, and the public.
- Communications leads across the footprints have been actively involved in developing and implementing communications and engagement activity, and speak as one.
- STP leaders, including clinicians, politicians and managers, take an active role in listening to, responding to and communicating and engaging with local stakeholders and communities.
- A diverse range of communication and engagement approaches have been used to engage different people and community groups.
- STPs and their constituent organisations are responsive, open and honest in their communications.
- Key messages contain identifiable ‘golden threads’ from local community views.
- STPs align with existing communications strategies and priorities, including individual organisational plans, joint health and wellbeing strategies or local transformations such as developing new care models.

If these goals are achieved, delivery of the STP will be easier, risks will be reduced and services will be of a higher quality and more focused on what patients need.

Our key objectives are:

- To inform and involve all stakeholders (including professional bodies and committees, staff representatives, local authorities, staff, partners, patients and the public) in the development of the STP and our emerging vision for health and care in north east London so that the plan is the best it can be for patients (see section 7 for a fuller list)
- To build awareness of the STP amongst local voluntary and community sector organisations so that they can add value and contribute positively
- To reassure all audiences that this is a piece of work which will make a positive impact on local people’s lives and the quality of care they receive
- To clarify how the STP will interface with other plans/planning levels (e.g. local area and CCG) and thus reduce confusion and increase efficiency, deliverability and productivity

- To help staff to understand the STP, what it means and how they can contribute through clear internal staff communications
- To maximise efficiency by utilising a core communications function to co-ordinate individual communications activity and avoid unnecessary repetition

All our communications and engagement will be planned, clear and informative.

We are committed to openness, transparency and participation and want to establish a reputation for this through our communications and engagement. We want local people to trust that we listen to them and that we design local healthcare with them, and that they are directly involving in developing new models of care and improving and delivering services.

#### **4.2 Draft key messages**

- North east London is facing many health challenges: a growing population, areas of high deprivation and some of the youngest, oldest, most diverse and most transient populations in the country. This all has an impact on the health of local people and what health and care services they need.
- In order to take advantage of new opportunities and create a better future for patients, we have to adapt the way we do things. This doesn't mean doing less for patients. Doing things better and more efficiently usually means a better experience and outcomes for patients.
- We must take advantage of the expected increase in budget and use the funds wisely.
- Across north east London, different organisations in health and care system are working together to develop a Sustainability and Transformation Plan (STP), which sets out how local services will evolve to deliver improved health and wellbeing, care and financial sustainability over the next five years, built around the needs of local people.
- We want input from patients, residents and communities to make sure the STP is truly representative of local people and responsive to local needs.
- The STP is a plan for working together across north east London where it makes sense to do so. Underneath it are a number of different specific plans, to address certain challenges, such as Transforming Services Together / vanguard / devolution pilots and accountable care systems / cancer / mental health.
- Patients will be healthier, need to visit their GP or hospital less often. Patients will live longer and have a better quality of life. When patients get sick they will recover more quickly and be treated in better surroundings – often in their own home. Services will be easy to access and patients will need to travel less to get the care they need. Services will be safer and more efficient. Our staff will be better trained and more able to do their job.

#### **4.3 King George Hospital changes**

The STP includes the safe and timely transition of the A&E at King George Hospital to a 24/7 urgent care centre. All communications about this has been very clear that the decision to make changes to A&E services locally has already been made and endorsed by the

Secretary of State for Health. Before any of the planned changes can be made the local health service must show that it's safe to do so. It is now looking at how to do that and how to implement the decision.

BHRUT and BHR CCGs have developed a robust, detailed communications plan setting out how the communications around the transition of the work at King George Hospital A&E will be managed. The plans will need to be revisited, given the move of the north east London acute reconfiguration programme board to a STP-level project board. Robust systems are in place to manage any media and stakeholder interest in this piece of work and there are strong relationships between BHRUT, Barts Health and CCGs' communications teams. We will work with local authorities and other stakeholder to address any issues that arise.

## 5. Communications and engagement approach

### 5.1 Engagement

NHS England is clear that all footprints should be engaging with local people to discuss and shape their STP proposals – understanding what matters to local people, and how services might be improved.

In NEL, there are several phases to engagement.

#### **July – October 2016**

Situation and handling:

- Website developed and launched
- Newsletters published
- Full draft STP and summary draft STP published
- Key partners and representative organisations engaged around the broad principles and some specifics
- Specific details of the STP, and how these might impact on individuals is unclear
- MPs offered briefings or meetings on the STP and how it fits with local plans

#### **21 October – March 2017**

Situation and handling:

- Next iteration public facing summary and full STP to be published and debated at boards (from November)
- Core messages for staff will be developed
- Need for wider engagement of public and key stakeholders (e.g. Health and Wellbeing Boards) to assess of impact of plans on local people, staff and communities
- We recognise and value the crucial role that local authorities are playing in developing the STP and the key role they can play in achieving the aims of the STP, in particular, helping to prevent ill health and emergency admissions to hospital as well as supporting people in the community. Local authority engagement and endorsement to be clarified e.g. through health and wellbeing boards or cabinets.
- Healthwatch organisations have successfully bid to engage at a borough level on the NEL STP in its draft format, and prepare a report on its findings – be that from public events, desk-based research, or existing reports/knowledge – see section 6
- Formal public consultation on elements of the STP to be considered from 2017 onwards.

#### **Longer term (April 2017 onwards)**

Implementing the STP.

## 5.2 Communications actions and timelines



## 5.3 Channels

We aim to use the most appropriate channels to communicate and engage with our stakeholders, to ensure they are supported and informed to such an extent that they can engage productively. This includes ensuring that there are two-way channels to hear what stakeholders say as well as to inform.

Our communications and engagement plans will be facilitated by utilising the coordinated communications function that already exists across north east London. However we will also be developing new opportunities for patient and public involvement to ensure we listen to and share views from across the whole footprint (rarely done at the present time).

Where possible, we will use existing, effective communications channels e.g.:

- **Digital:** websites, intranets, e-bulletins, video
- **Social media:** Twitter, Facebook, YouTube, LinkedIn
- **Print media:** local, regional, national, trade media
- **Broadcast media:** local, regional and national radio and TV
- **Face-to-face:** 1:1, public and existing meetings, focus groups and workshops
- **Printed materials:** posters, leaflets

Specific channels include:

- **Newsletter:** Continue to use regular programme newsletter to update stakeholders.
- **Website:** A basic website for the STP has been developed – [www.nelstp.org.uk](http://www.nelstp.org.uk) - with the ability to be further expanded once additional content is available. It currently holds issues of the stakeholder newsletter, information on the STP and contact details. All communications materials will include the web address.
- **Weekly update:** We will produce an internal weekly 'postcard' for NEL STP partners and the internal programme team which summarises the highlights from the previous week in a way that is succinct and visually attractive.

## 5.4 Branding

An NEL STP logo has been developed and will be used across all communications materials. We will ensure that common templates are used across all of our materials to demonstrate a consistent approach and to build brand awareness. The NEL STP branding will be used in conjunction with the NHS logo. Consistent use of the NHS logo will reassure patients, carers, public, staff and stakeholders that our services are commissioned in line with NHS values and avoid accusations of privatisation.

## 6. Healthwatch engagement

In order to ensure we develop the STP using all relevant patient and public views, to ensure efficiency and to reach a wide community of public and patients, we have asked local Healthwatch organisations to review the research and comments they have gathered in recent months and to use existing forums to discuss the STP. The following table details the suggested evidence that local Healthwatch organisations will interrogate and the meetings where the STP is likely to be a focus of the discussions.

<b>Healthwatch: membership and regular contacts</b>	<b>Evidence of patient engagement and experience to be interrogated</b>	<b>Future meetings or projects linked to STP information gathering</b>	<b>Specific issues regarding the STP</b>
<b>Healthwatch Newham</b>	<ul style="list-style-type: none"> <li>Regular involvement with approximately 400 people and groups;</li> <li>Currently working on a maternity report which would feed in</li> </ul>	<ul style="list-style-type: none"> <li>Planned public 'Roadshow' of 8 meetings in Nov &amp; Dec</li> <li>Planning independent work with Newham CCG to publicise STP</li> </ul>	<ul style="list-style-type: none"> <li>No specific issues that have not been identified</li> </ul>
<b>Healthwatch City of London</b> <ul style="list-style-type: none"> <li>943 members.</li> <li>13853 unique visits to website last year</li> <li>134 twitter followers</li> </ul>	<ul style="list-style-type: none"> <li>Cancer Care &amp; Support Workshop on 09/08/2016 at Barts Hospital.</li> <li>City of London Annual Conference on 07/10/2016 at the Dutch Centre</li> <li>Have your say on the City's Mental Health Services on 10.10.2016</li> <li>Barts Health &amp; Wellbeing Event on 12/10.2016 at Barts Hospital.</li> </ul>	<ul style="list-style-type: none"> <li>Further events will be planned in partnership with HW Hackney</li> </ul>	<ul style="list-style-type: none"> <li>No specific issues that have not been identified</li> </ul>
<b>Healthwatch Tower Hamlets</b> <ul style="list-style-type: none"> <li>760 members</li> </ul>	<ul style="list-style-type: none"> <li>Feedback from 150 adults and children from our recent Your Voice Counts event (Aug 16)</li> <li>240 comments collected through direct outreach in the past six months. We will review the Community Intelligence Report conducted by 17 voluntary and</li> </ul>	<ul style="list-style-type: none"> <li>Your Voice Counts public event with Health and Wellbeing partners will include engagement on the STP – this should reach 150 people minimum.</li> <li>We will use our Advisory Group meeting to do a workshop on the STP</li> </ul>	<ul style="list-style-type: none"> <li>No specific issues that have not been identified</li> </ul>

	<p>community groups in 2015 which listened to over 2,000 residents and covered issues such as cancer care, integrated care, and carers.</p> <ul style="list-style-type: none"> <li>• We will also review the following:</li> <li>• 5 Enter and View Visits conducted to older peoples residential and supported housing.</li> <li>• Feedback from our report on integrated care for children.</li> <li>• Feedback on transport services</li> <li>• Report on access to health and social care services in Tower Hamlets</li> </ul>	<ul style="list-style-type: none"> <li>• Visiting 12 GP Centres and talking to approximately 150 patients</li> </ul>	
<p><b>Healthwatch Waltham Forest</b></p> <ul style="list-style-type: none"> <li>• 1329 local residents on mailing list</li> <li>• 49 trained service user representatives.</li> <li>• In addition we work with a wide network of local voluntary and community groups, as well as patient representative groups such as the Waltham Forest PPG chairs group.</li> </ul>	<ul style="list-style-type: none"> <li>• We can generate reports on all key areas including mental health, maternity, medicines, urgent care etc.</li> <li>• Urgent Care Focus Group, and specifically on experiences taking children to A&amp;E.</li> <li>• Medicines management: In July we ran a Focus Group for deaf people who use pharmacy services – finding out how pharmacies can meet AIS and better cater for deaf people.</li> <li>• GP Mystery shopper report: We carried out Mystery Shopping of Waltham Forest GP practices from December 2015 to September 2016. Recommendations on how local GP's answerphones and websites can be improved to provide the public with useful and up to date information.</li> </ul>	<ul style="list-style-type: none"> <li>• Public meeting: Health &amp; Wellbeing Forum on 24.11.</li> <li>• Planned dementia project in November with Alzheimer's Association: focus groups with Black African and Caribbean members of the community affected by dementia to see how they feel about obtaining a diagnosis and accessing services</li> <li>• We host the monthly PPG Chair meetings – next one 26th October</li> <li>• E&amp;V Project November/December in a Whipps Cross ward, tbc</li> <li>• Possible work with patients involved in the UCLH Cancer Vanguard programme</li> <li>• Diabetic Eye Screening Service: Outreach</li> </ul>	<ul style="list-style-type: none"> <li>• No specific issues that have not been identified</li> </ul>

	<ul style="list-style-type: none"> <li>• Health &amp; Wellbeing Forums, topics included Whipps Cross, LAS, Mental Health services etc. The last Forum (1. September) also included an STP update and we received feedback from residents.</li> <li>• Beginning of this year we published an Enter &amp; View report on Community Phlebotomy services, for which the recommendations were directly taken up for the new service specification.</li> <li>• Outpatients: Whipps Cross Outpatient outreach report published in February 2016</li> </ul>		
<p><b>Healthwatch Hackney</b></p> <ul style="list-style-type: none"> <li>• 1000 members</li> </ul>	<ul style="list-style-type: none"> <li>• Improving hospital Discharge: 6 month patient review of process with comprehensive recommendations for improvement.</li> <li>• Review meetings in 2016: <ul style="list-style-type: none"> <li>• Digital technology</li> <li>• Urgent and emergency care (inc out of hours)</li> <li>• mental health</li> <li>• disability</li> <li>• dementia</li> <li>• GP services</li> <li>• Older people</li> </ul> </li> <li>• Review 2015 public events highlighting: <ul style="list-style-type: none"> <li>• End of Life Care</li> <li>• Menopause</li> <li>• Reablement</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• We will be having a public event on: <ul style="list-style-type: none"> <li>• The self-care agenda</li> <li>• Men's health issues</li> <li>• Maternity</li> <li>• 4 meetings planned on new model of care for out of hospital &amp; community based services including primary care</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Impact on Hackney services on wider NEL risks, in particular Barts and BHR</li> <li>• What is the democratic accountability of NEL STP</li> <li>• How joined up is the STP with LAs Adult Social Care</li> <li>• Lack of financial data or impact on current services by the reconfiguration of services implied by the direction of travel by the STP</li> </ul>

	<ul style="list-style-type: none"> <li>• Sickle cell</li> <li>• Our Patient User Experience Group meetings on integrated care services – reablement services, intermediate care etc.</li> <li>• Community based Ophthalmology services report</li> </ul>		
<b>Healthwatch Barking and Dagenham</b> <ul style="list-style-type: none"> <li>• 3126 associates</li> </ul>	<ul style="list-style-type: none"> <li>• World Mental Health Day event 10.10.2016</li> <li>• Phlebotomy services in Barking &amp; Dagenham</li> <li>• Urgent &amp; Emergency Care Project – Feb 2016</li> <li>• Mental Health – Morris Ward in Sunflower Court</li> </ul>	<ul style="list-style-type: none"> <li>• World Disability Day – to engage with service users</li> <li>• Health Education England Training Event – Training for service providers regarding services users experience of communication, accessing services &amp; complaints</li> </ul>	<ul style="list-style-type: none"> <li>• Communication Strategy – How will this be communicated to service users?</li> </ul>
<b>Healthwatch Havering</b> <ul style="list-style-type: none"> <li>• 25 active members</li> <li>• 44 contacts (mainly organisations that would forward to their own members - for example, the Over 50s Forum has around 150 members/organisations that would in turn forward onwards)</li> </ul>	<ul style="list-style-type: none"> <li>• Joint Urgent Care Survey</li> <li>• Have your say events (on learning disability and dementia; Listening events with BHRUT; Dying matters week; GP Hubs; Intermediate Care; effects of Francis Report)</li> <li>• 82 Enter and View visits (mainly to care homes but also to GP premises, Queen's Hospital, Goodmayes Hospital and other community facilities)</li> </ul>	<ul style="list-style-type: none"> <li>• Currently conducting a review of local Mental Health Services</li> <li>• 18 Enter and View visits to various facilities over the next few months</li> <li>• Have your say event on patient experience groups</li> <li>• Working with a particular GP practice on their patient participation arrangements</li> </ul>	<ul style="list-style-type: none"> <li>• How the BHR ACS impact on the local health economy in Havering and what specifically will change as a result for patients and carers</li> </ul>
<b>Healthwatch Redbridge</b> <ul style="list-style-type: none"> <li>• 1800 members</li> <li>• Twitter - 804 followers</li> <li>• Facebook - 115 likes</li> <li>• Over the course of the past couple of months</li> </ul>	<ul style="list-style-type: none"> <li>• Deaf Inclusion Project (HENCEL) identifying the barriers Deaf people have accessing health services across North East London – 8 Emergency Departments have been assessed</li> </ul>	<ul style="list-style-type: none"> <li>• Continuing the visits to the remainder of the PPG's and revisiting some for a second time.</li> <li>• Local Forum at the Market Place – service user engagement on 26/10/2016</li> </ul>	

<p>we have reached around 4000 people with our social media</p> <ul style="list-style-type: none"> <li>• Over 40,000 local people have been reached through publicity and promotional material</li> </ul>	<p>including Newham, Whipps Cross, Queens, Royal London, UCH</p> <ul style="list-style-type: none"> <li>• Urgent &amp; Emergency Care Project – Feb 2016</li> <li>• Visits to 31 Patient Participation Groups (PPG) in Redbridge since Jan 2016</li> <li>• Local Forum at the Market Place – service user engagement on 29/06/2016</li> <li>• Intermediate Care Ward visits at King George Hospital on 2.9.2016 &amp; 30.9.2016</li> <li>• Outreach for project around Community Treatment Team &amp; Intensive Rehabilitation Service to different communities and sheltered housing</li> <li>• Accessible Information Standard Project in Care Homes (6 visits) to assess whether the standard is being implemented</li> <li>• CQC patient engagement at Whipps Cross Hospital during the recent CQC inspection in July</li> <li>• NELFT Sports Day – service user engagement in July</li> <li>• Older people’s week events in September 2016</li> </ul>	<ul style="list-style-type: none"> <li>• Accessible Information Standard Project in GP practices to assess whether the standard is being implemented.</li> <li>• Outreach at Queens Hospital to engage with service users</li> <li>• Mental Health &amp; Wellbeing Events planned for November</li> <li>• A series of Focus groups will be developed for Deaf people (BSL users), People with Learning Difficulties and people who require more information and support to engage in STP information, further sessions will be identified as required</li> </ul>	
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## 7. Stakeholders

There are many people and groups who will be interested in the NEL STP. We need to ensure that we keep them informed about its development and engage with them where appropriate.

Patients and the public	Community, voluntary and service user groups	Clinicians, staff, service providers	Local authorities	Representatives	Influencers	Media and campaign groups
<ul style="list-style-type: none"> <li>- Service users</li> <li>- Service users' families and carers</li> <li>- Patient engagement forums (CCGs and trusts)</li> <li>- General public</li> </ul>	<ul style="list-style-type: none"> <li>- Health and social care organisations such as Age UK</li> <li>- Local community and voluntary groups such as CVS, carers' groups and pensioners forums</li> </ul>	<ul style="list-style-type: none"> <li>- Local GPs</li> <li>- GP Federations and/or Co-ops</li> <li>- CCG governing bodies</li> <li>- Trust clinical directors</li> <li>- All clinicians across all care</li> <li>- NHS England</li> <li>- Other providers e.g. PELC and local authorities</li> </ul>	<ul style="list-style-type: none"> <li>- Councillors</li> <li>- Health scrutiny committees (HSC) and Joint HSC</li> <li>- Health and wellbeing boards and Chairs forum/meetings</li> <li>- Council chief executives, directors of adult and children's social services and of public health (and other directors, as appropriate) and their teams</li> <li>- Social care staff</li> <li>- LA STP workstream reps</li> </ul>	<ul style="list-style-type: none"> <li>- Health scrutiny committees</li> <li>- Healthwatch</li> <li>- Trade unions</li> <li>- Professional bodies</li> <li>- Local representative committees               <ul style="list-style-type: none"> <li>• LMCs</li> <li>• LPCs</li> <li>• LDCs</li> <li>• LOCs</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>- MPs</li> <li>- London Assembly members</li> <li>- MEPs</li> <li>- NHS Improvement</li> <li>- Health Education England</li> <li>- NHS England</li> <li>- Department of Health</li> </ul>	<ul style="list-style-type: none"> <li>- Local media</li> <li>- Regional and national media</li> <li>- Trade media (HSJ, LGC etc.)</li> <li>- Campaign groups e.g. Keep our NHS Public, Save our NHS</li> </ul>

See full STP stakeholder database for detailed list of stakeholders

## 8. Risks

Key risks	Impact and mitigation
Local authorities may not engage fully with the STP process and plans are less coordinated	<p>This could lead to the STP not being jointly developed.</p> <ul style="list-style-type: none"> <li>• Regular briefings will be sent to HWBBs</li> <li>• Face to face meetings between NEL STP lead and LA Members</li> <li>• Review governance arrangements and increase local authority representation</li> </ul>
Conflicting priorities of NEL STP and local devolution programmes	<ul style="list-style-type: none"> <li>• Explicit links made in devolution business cases to STP and vice versa to careful consider issues and opportunities</li> </ul>
Health and Wellbeing Boards (HWBBs) not engaged and benefits are not realised	<p>Could mean that work is not coordinated. Aim to keep them informed.</p> <ul style="list-style-type: none"> <li>• Face to face and phone conversations have been held with HWBB leads as necessary to explain the NHS England guidance in relation to the sign off process for the STP</li> <li>• Health and Wellbeing Chairs meetings to ensure that they have an opportunity to contribute to STP development</li> <li>• Reports are being distributed to meet HWBB deadlines</li> </ul>
Healthwatch and patient reps do not engage fully with the STP process	<p>This could lead to the STP not being jointly developed and some stakeholders disengage</p> <ul style="list-style-type: none"> <li>• Healthwatch and patient reps have received a briefing on the STP</li> <li>• A workshop was held for Healthwatch and patient reps, with another planned</li> <li>• Healthwatch and patient reps will be kept updated through an STP newsletter</li> <li>• We will engage with patients and Healthwatch</li> </ul>
Media focus on STP interprets the plan as leading to cuts	<p>This could lead to negative publicity for NEL and stakeholders disengage</p> <ul style="list-style-type: none"> <li>• Develop clear lines – particularly around workforce and finance</li> <li>• Stakeholders have received a briefing on the STP</li> <li>• Workshops and meetings are being held to demystify the STP and ask for input</li> <li>• Stakeholders will be kept updated through an STP newsletter</li> <li>• STP comms leads across London are sharing intelligence and jointly managing media interest</li> <li>• Partners will be provided with information on the STP to share with staff, to demystify it.</li> </ul>
Inclusion of KGH A&E plans as part of STP work could lead people to believe the changes are not confirmed.	<p>Any STP text mentioning KGH A&amp;E is very clear that the decision has been made.</p>