EXTERNAL COMMUNICATIONS STRATEGY DOCUMENT 2017-2022

For the NIHR Imperial Patient Safety Translational Research Centre (PSTRC)
1.0 BACKGROUND TO THE PSTRC

The National Institute for Health Research (NIHR) Imperial Patient Safety Translational Research Centre (PSTRC) is a partnership between Imperial College Healthcare NHS Trust (ICHNT) and Imperial College London (ICL). It has been funded by NIHR for 10 years and was awarded a further £7 million to carry out research in 2017-2022. It is a multidisciplinary group of researchers and healthcare professionals work together, with patients, carers, public members, industry, policymakers and other stakeholders, to carry out research with the aim to improve the quality of healthcare services and make care safer. Patient safety science looks to prevent risks in the delivery of healthcare and reduce avoidable harm caused by clinical mistakes.

1.1 PSTRC aims

The PSTRC aims to advance the scientific understanding of patient safety, address safety challenges as healthcare evolves and make a real difference, by improving patient experience and outcomes. We work with local, national and international partners to support the translation of our ideas and evidence into policy and practice.

1.2 PSTRC research

The PSTRC carries out research across six broad themes:

1. Safer systems across the continuum of care
2. Partnering with patients for safer care
3. Avoiding deterioration and delays in the care of patients with complex needs
4. Enhancing the safety of medication and technology
5. Improving diagnostic accuracy and decision-making
6. Ensuring value for money in patient safety

For example, in one of our research projects we worked with patients and carers to design My Medication Passport, a passport-sized booklet (with an electronic version) for patients to keep a record of their medicines together with other information about their health, to try to reduce medication errors. In a study to assess the value of the passport, more than half of respondents found it useful in some way e.g. through sharing details from it with others (most frequently family members, carers or doctors) and one third carried it with them at all times.

2.0 PURPOSE OF THIS DOCUMENT

This document outlines the draft external communications strategy for the PSTRC from 1st August 2017 – 31st July 2022. This is a working document, which is currently under review with patients, carers and public members. Our internal communications strategy is also being reviewed, which is not included in this document.

We strive to communicate clearly about our research and activities to a wide audience. We think this will allows us to:
• Show results and impact to the public, healthcare professionals, policymakers, industry and funders to help ensure our research is translated into policy and practice;
• Help ensure research is not duplicated unnecessarily and we are complementing other research;
• Allow potential partners to be aware of our activities so they may approach us to collaborate;
• Advertise opportunities to work with us, including patients, carers and members of the public to be involved in our research and activities.

2.1 Background to this document

This document has been informed by a small survey and an event on 30th May 2017, whereby various stakeholders (patients, carers, public members, researchers, healthcare professionals and communications experts) came together to discuss in groups about successful and novel ways for communications and co-design this strategy.

Although we have various audiences, the event mainly focused on how the public like to receive information. Key take home messages from the event were that:
- There are barriers to communicating about patients safety research, such as “patient safety” could be a difficult term and concept for the general public to understand;
- The PSTRC is not known in the general public and more could be done to promote it;
- Different audience like to receive information in different ways, so to ensure we use a variety of methods and hold events at different times of day (e.g. lunchtime Café Scientific);
- Information should be clear, concise, up-to-date, honest and informative;
- Videos and infographics are a good way to explain complicated topics;
- Usually you have seven seconds to capture somebody’s attention, so the first part of the communications is very important;
- The PSTRC could do more outreach to communities to get engagement with seldom heard groups (e.g. those where English is not their first language), this engagement could increase the diversity of public members involved in research;
- Maximise existing platforms e.g. other partners who could promote the PSTRC's work.

3.0 EXAMPLES OF CURRENT COMMUNICATIONS ACTIVITIES

We will continue to build on the communications and learnings from previous years.

3.1 Online

The PSTRC website includes information about our vision, aims, staff, research, events, news, publications, and patient and public involvement opportunities. We also have videos highlighting our research, events and involvement opportunities for patients, carers and the public. We have a PSTRC blog and twitter account (@Imperial_PSTRC). We have over 1000 followers on twitter and across 14 blogs there has been 1,717 views since December 2016 (215 views/month). We publish academic papers, press releases and write in various newsletters such as the Imperial and White City community newsletter, which goes out to 20,000 people.

3.2 Events
We run various events, such as workshops, research seminars, and conferences. A notable event in 2016 was the Patient Safety Global Action Summit, where policy makers and safety experts from across the world came together to discuss the future of patient safety. We also partake in events run by other institutions to talk about our research and engage. We interact with a diverse range of stakeholders to collaborate on research and translation of research. We had an successful interactive stand and workshop at the 2017 Imperial Festival, where members of the public engaged with various games and discussions about our research.

### 3.3 Education

The PSTRC has a Master’s in Patient Safety and also offers short courses and postgraduate diplomas for higher education in patient safety. We also have a PhD programme (Doctor of Philosophy) to help deliver our ambitious research programme.

### 3.4 Partners

We also work with multiple academic, clinical, and industry partners for our research projects where we communicate with them on a personal and institutional level. We also have an established network of patients, carers and public members, which involves interactions through online, telephone and face-to-face meetings. A partnership with the James Lind Alliance for a Priority Setting Partnership for safe care for adults with complex health needs, is an example of how we engage with patients, carers, public members and healthcare professionals to learn about their priority areas for research, which in turn, will influence our research strategy.

### 4.0 SCOPE OF THE COMMUNICATIONS STRATEGY

#### 4.1 Objectives

Our top level short-term objectives are to:

1. Ensure our communications material is in plain English to ensure it is easy to understand for the general public;
2. Have a clear message about what the PSTRC does and what its vision is;
3. Provide the most up-to-date information about our research and events;
4. Ensure the results from our research are disseminated widely and appropriate for different audiences (e.g. concise for busy healthcare professionals);
5. Learn from others to ensure we are delivering communications through successful, practiced methods;
6. Ensure we are aware of our partners Imperial College London and Imperial College Healthcare NHS Trust communications strategies and tone of voice, so that we can learn from each other and align where appropriate;
7. Improve transparency of our work by:
   - Communicating about our ongoing projects
Communicating non-sensitive Executive Board \(^1\) and Management Board \(^2\) minutes/executive summaries

- Providing contact details where audiences can request more granular details;

8. Retain our current audience and outreach to new audiences, building our network with researchers, healthcare professionals, patients, carers, members of the public, industry partners, policymakers and other stakeholders;

9. Where appropriate, deliver and receive information in novel ways;

10. Monitor and evaluate the effectiveness of our communications and be flexible to change and improve and evolve the strategy based on learnings.

Our long-term objectives are to:

1. Ensure a variety of our communications are easy to understand for people with disabilities or where English is not their first language;

2. Make patient safety a more accessible topic (e.g. “rebrand” patient safety);

3. Be known internationally for patient safety research;

4. Potentially, be leaders in communicating about patient safety news.

Details of our long-term objectives have not been defined at this stage and will depend on progress with our short-term objectives.

### 4.2 Audience

Our key stakeholders are:

- Patients
- Carers
- Members of the public
- Healthcare professionals
- Policymakers
- Funders
- Researchers
- Partners e.g. industry

We want to reach out to a more diverse group of patients, carers, members of the public and healthcare professionals, to involve them more in our research. They could be involved in identifying research priorities, designing and implementing research. This will help us ensure our research is relevant for those audiences and that projects are designed in the best way. The public can learn from research and make behavioural changes, which, we hope, will ultimately improve safety and their wellbeing. They could also help to disseminate information and lobby the government for positive change.

We want to communicate about our research to policymakers, funders, researchers and other partners (e.g. industry), to help build collaborations and translate results into policy and practice for positive impact.

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\(^1\) The Executive Board is the key oversight body for the PSTRC. It will meet twice a year and receive regular updates. It will provide feedback on outputs and provide input on future plans and strategic direction. It includes: the PSTRC Director, the ICHNT Medical Director, the Vice Dean of the ICL Faculty of Medicine for research, a representative from NHS Improvement and the Co-Chairs of the PPIE Advisory Board

\(^2\) The Management Board is responsible for overall management of the Centre and for major operational decisions and direction. It includes: the PSTRC Director, PSTRC Manager, Scientific Theme Leads and PPIE Manager
4.3 Mediums of communications

We propose that our communications will involve a combination of in-person, digital media and other communication mediums. Please see Figure 1 (below) for a list of potential communication mediums and activities.

At the event in May 2017, the group agreed that popular ways for people to receive information is through videos with subtitles, social media and e-newsletters. Unfortunately, due to budgetary restraints we do not have a dedicated communications staff member, so an e-newsletter is not feasible at the time of writing, but we will continue to post information in other organisations’ newsletters. The group stated it would be important to have various communications mediums in order to reach a wide range of audiences (see figure 1). We will work with Imperial’s Societal Engagement team and framework to ensure we are reaching out to communities appropriately. One number example is that we are running a free play in the Bush theatre about a young surgeon who makes a mistake in the operating theatre.

Figure 1: List of potential communication mediums and activities34

In person
- In-clinic
- Social care
- Word of mouth
- Research Partners Group3
- Events:
  - Meetings
  - Workshops
  - Conferences
  - Imperial Festival
  - Cafe Scientifique Series
  - Plays
  - Schools
  - Higher education
  - Existing networks and community groups
  - Institute for Global Health Innovation Forum4

Media
- Television
- Radio
- Podcasts
- Our website
- Other websites
- Email and email signatures
- Social media:
  - Twitter
  - Blog
  - Facebook
  - Instagram
  - Snapchat
- Videos
- Webinars/live streaming
- Eventbrite
- Newsletters
- Online journals

Other
- Flyers and posters at:
  - Bus stops
  - Hospital
  - Community Centres
  - Bookmarks
  - Report publications

3 From Figure 1: The Research Partners Group is a diverse group of patients, carers and members of the public who will scrutinise research projects and advise researchers and clinicians on their PPIE plans and how to find appropriate lay partners to involve.
4 From Figure 1: Institute for Global Health Innovation Forum is a monthly forum where researchers across the college present on a select global health topic.
5.0 IMPLEMENTATION PLAN

Our draft communications strategy is currently out for consultation. Once the communications strategy is finalised, we can finalise the budget and implementation plan.

6.0 EVALUATING OUR COMMUNICATIONS STRATEGY

Table 1 shows draft top level Key Performance Indicators (KPIs) to help monitor and evaluate if we are achieving our primary aims. We will report on and analyse our effectiveness on a quarterly basis and edit our strategy and implementation plan accordingly.

We will monitor the growth in our stakeholder audiences and identify if our focus should to be moved elsewhere. We will always keep in mind the PSTRC’s overall vision, aims and the communication objectives when doing any form of communication.

Table 1: Draft top level Key Performance Indicators for primary aims

<table>
<thead>
<tr>
<th>Medium</th>
<th>Primary aim</th>
<th>Type of activities</th>
<th>Key Performance Indicators</th>
</tr>
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<tbody>
<tr>
<td>In person</td>
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| Workshops    | To involve patients and the public in our research | Patient and public involvement and engagement (PPIE) workshops | 1. Attendance  
2. Feedback from attendees  
3. Recurring participation from patients or carers |
| Events       | To disseminate research                          | Annual Symposium; conferences (including posters and talks)   | 1. Attendance  
2. Feedback from audience  
3. Activity online |
| Outreach     | To reach out to new audiences and the local community | Presences and flyers at external events                     | 1. Number of sign-ups to our PPIE network  
2. Number of strong relationships built within the community, who then become involved in our work |
| Digital media|                                                  |                                                             |                                                                                          |
| Website      | To communicate about current activities          | Updates on staff changes, new publications, events           | 1. Visits to the website  
2. Recurrence of updates  
3. Google analytics |
| Blog         | To communicate about interesting current activities | Opinion pieces that are also informative                    | 1. Number of entries  
2. Readership  
3. Tone of comments under blog |
|       | To reach out to wider audiences quickly | Promote our activities and publications; use infographics and #safetyselfie; | 1. Number of followers  
2. Followers from different types of organisations  
3. Number of impressions and engagements |
|-------|----------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Twitter | To reach out to new and different audiences and make information more accessible | Events and videos about research with subtitles | 1. Number of views  
2. Number of likes and tone of comments under Youtube videos |
| Videos | To allow people to engage with information online at various times and locations | Topics of interest | 1. Attendance  
2. Feedback |
| Webinar | Flyers | To reach people who are not online and concise way to give information at events | Publicise events, research and PPIE activities at external events | 1. Number of people who hear about events through flyers – through feedback from at event  
2. Specific link to website on flyer where clicks can be monitored |
| Other | Poster adverts | To reach people who are not online | Publicise events and PPIE activities in public spaces e.g. hospital and bus stops | 1. Number of people who hear about events through poster – through feedback form at event |
|       | Reports/publications | Disseminating research | Research output | 1. Impact factor of journal  
2. Publications sited |