

Attachment 2.3.1 - Communications Strategy

Please provide a detailed Proposal relating to your Communication Strategy including demonstrable evidence of effective communication in complex Service Redesign and the establishment of new services. Furthermore details of how communication will be maintained at regular intervals with GPs, optometrists, hospital and patients throughout the scheme and by what channel. For example – monthly e-newsletter, website FAQs etc.

Complete Ophthalmic Services CIC

Communications Strategy

Communication will be key to our success. We have appointed a communications lead, who will be a member of the management team. A stakeholder management and communication plan has been developed to help ensure the successful mobilisation and delivery of the service. Key communication channels will include electronic newsletters, our website, networks and regular meetings. The stakeholder management and communication plan identifies all key stakeholders and details how we will meet their individual communication requirements. We will ensure that key stakeholders are appropriately informed about our services, how to access them and any service changes or developments. As a minimum, these stakeholders will include:

- Patients
- CCG - GP lead for ophthalmology and service commissioners
- GPs - local practices
- Local Optical Committee
- Optical practices – both subcontractors and non-participating practices
- Community optometrists
- Secondary care - ophthalmology clinicians and specialist nurses with Croydon Hospital and Treatment Centre
- Community ophthalmology clinicians (including any specialist nurses and GPwSI)
- Local Eye Health Network
- Local Medical Committee
- Local Pharmaceutical Committee
- Local Pharmacy Network
- HealthWatch
- Voluntary organisations – eg. Sight Concern Croydon, Age Concern
- Social Services

Patient communication will be designed to integrate seamlessly with the current information already used to signpost the service. This has worked well as demonstrated by the continuing increase in take up of the Community Ophthalmology Service. As well as local signposting (direct and indirect) we will use a web presence, media articles, and communication with local patient groups and patient representative organisations (e.g. local Glaucoma Association meetings). This will be at launch and ongoing.

At mobilisation, we will engage with the CCG and continue to work with Ophthalmology colleagues at Croydon Hospital and Treatment Centre to secure their input into the development of local guidelines for referral and patient management, our mechanisms for referral and the framework for patient management plans.

We plan to run a series of multidisciplinary launch events to which our stakeholders will be invited. These events will provide an opportunity for us to meet with local optical practices, GPs and other healthcare providers as well providing key information about the redesigned pathways and new services e.g. location, patient referrals, inclusion and exclusion criteria. At these events we will seek to understand how the different stakeholder groups wish to engage with the Company on an ongoing basis and we will build this into our communication plan.

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A particular priority will be to forge links with HealthWatch Croydon with a view to developing innovative ways to gather effective patient feedback on our services, which will be used to continuously improve and enhance services for patients. We would also invite HealthWatch Croydon to support us with the development of patient information leaflets to ensure that these are written in language that is patient friendly.

We will work closely with the local professional committees and networks (Local Medical Committee, Local Pharmaceutical Committee and Local Eyecare Professional Network) in order to ensure they are aware of the service; and to consult with them regarding future pathway and services changes, where these have implications for the ways we will work with other professionals. For example, we will ensure the LMC is aware of any changes to referral criteria; and that LPC is aware if we intend to make changes to our formulary of medicines. The Local Eye Health Network for Croydon will be a key forum for communication as it brings together representatives of all the key stakeholder groups.

Through their experience with the Local Optical Committee (LOC) the directors and clinical governance & performance lead have been involved in complex service re-design. These include local pathway redesign work, which has led to the provision of community services for [state services]. They also have experience of service re-design in other areas, notable [areas].

Evidence of the director's effective communication with stakeholders in complex service redesign and the establishment of new services can be demonstrated through the support provided for enhanced service development and delivery. This included providing professional input to inform the redesign of pathways, development of business cases, delivering education and training to support roll out and facilitating engagement with optometry practices. The directors are used to working closely with secondary care ophthalmologists and GPs to agree local protocols and procedures to underpin the safe and effective delivery of enhanced services. The directors also have experience in establishing mechanisms for two way feedback to promote on-going learning and development for optometrists and ophthalmologists.

In addition, they have networked and worked collaboratively with other providers and organisations, including the recently formed LEHN, the LMC and local voluntary organisation, Sight Concern Croydon.

Benefits of the enhanced services include more local and convenient care for patients and an 'easing' of pressure on secondary care clinics to provide greater capacity for those patients who require specialist input. These benefits cannot be achieved without the partnership approach, effective communication and shared care arrangements which will have been established.