



# **Communication and Engagement Strategy 2025 - 2027**

Version.	Communication and Engagement Strategy 2025 - 2027.
Strategic Lead.	Chief Officer.
Date Approved.	30 April 2025
Date for Review.	April 2027.

## Contents

1. Introduction.....	3
2. Strategic Context .....	3
3. Background .....	3
3.1. The Public Bodies (Joint Working) (Scotland) Act 2014.....	3
3.2. Community Empowerment (Scotland) Act 2015.....	4
3.3. National Health and Wellbeing Outcomes.....	4
3.4. National Health Service Reform (Scotland) Act 2004.....	4
3.5. NHS Staff Governance Standard .....	4
3.6. OIC Staff Consultation Protocol .....	4
3.7. Co-production.....	5
3.8. National Standards for Community Engagement .....	5
4. How will the IJB Communicate and Engage? .....	5
5. Our Communications and Engagement Activity.....	6
5.1. Newspaper and Radio.....	6
5.2. Social Media.....	6
5.3. Websites .....	6
5.4. Video .....	7
5.5. Audio-casting .....	7
5.6. Staff Engagement and Communication.....	7
5.7. Orkney Opinions .....	7
5.8. Joint Consultations.....	8
5.9. Campaigns .....	8
5.10. Digital Accessibility and Inclusion.....	8
6. Summary .....	9
7. What Happens Next?.....	9

**Note:** Links are included to several websites where you can find more information. They are highlighted in blue, [like this](#).

# 1. Introduction

In 2014, the Scottish Government [introduced an Act](#) that required local Councils and NHS Boards to work much more closely together, delegating some of their services, such as social work and community health services, to a new organisation, called an Integration Joint Board (IJB).

IJBs are responsible for planning what community health and social care services the area needs, and how those services can be better delivered, making sure they are more “joined up”.

The IJB here in Orkney wants to make sure that everyone, especially the most vulnerable, are heard. This means working with our partners who deliver services, Orkney Islands Council (OIC) and NHS Orkney (NHSO), making sure they are involving people who need to use services, their families, their carers, staff, the Third Sector, and other key partners, to help us make decisions about community health and social care services.

We know that people who better understand services, how those services are delivered, and who feel their voice is heard, are far more likely to feel satisfied with services.

Making sure that everyone has a voice is known as **Communication and Engagement**, and this Strategy is designed to guide the work of the IJB over the next two years in how it communicates and engages with all its partners, especially the wider Orkney community.

## 2. Strategic Context

This strategy sits alongside the Communication and Engagement Strategies of our delivery partners, OIC and NHSO, as well as [The Orkney Partnership Board](#), who are Orkney’s Community Planning Partnership.

It also supports delivery of OIC’s [Council Plan 2023 - 2028](#) and NHSO’s [Corporate Strategy 2024 – 2028](#).

## 3. Background

There are several Acts, passed by the Scottish Government, that tell IJBs, as well as many other public authorities, how and when they should communicate and engage with their partners and the wider public. Please click on the links below if you wish to read more about these acts and how they affect communication and engagement.

### 3.1. The Public Bodies (Joint Working) (Scotland) Act 2014

This is the [Act](#) referred to in the Introduction, above, which led to the formation of the IJB. This Act describes how health and social care services should be planned more effectively and includes aspects of communication and engagement.

There are several other Acts, local and national policies, and official guidance, which tell IJBs to communicate and engage with the public.

### **3.2. Community Empowerment (Scotland) Act 2015**

This [Act](#) gives community organisations the power to own and control some land and buildings that were previously owned by local councils and other public authorities. It also strengthens their voices in decisions about public services.

The [Orkney Partnership Board](#) leads on this work. They have produced a [Local Outcomes Improvement Plan](#) (LOIP), a document that describes what the member organisations of the Orkney Partnership Board aim to achieve by working in partnership, over-and-above what could be achieved by working as individual organisations.

### **3.3. National Health and Wellbeing Outcomes**

The [National Health and Wellbeing Outcomes](#) are Scottish Government's description of what health and social care partners should be attempting to achieve through the integration and, ultimately, improvement of services.

There are nine Outcomes, in total. Outcome 8 concentrates on engagement: 'People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide'.

### **3.4. National Health Service Reform (Scotland) Act 2004**

This [Act](#) describes how NHS Boards must engage with local communities when shaping local health services. This applies to every part of NHSO, including those areas of NHS services that are not the responsibility of the IJB.

### **3.5. NHS Staff Governance Standard**

This is the [NHS policy](#) that describes how NHS staff should be managed and, importantly, how they feel they are managed. The policy specifies that all staff are entitled to be:

- Well informed.
- Appropriately trained and developed.
- Involved in decisions which affect them.
- Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued.
- Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients, and the wider community.

### **3.6. OIC Staff Consultation Protocol**

This is the agreed Protocol between OIC and the Trade Unions, setting out how OIC will consult with their staff and what they will consult on, and was developed in consultation with all the recognised Trade Unions.

It explicitly states the circumstances under which a consultation with staff and the Trade Unions will occur, how the consultation will be undertaken, who will perform the consultation, and for how long the consultation should last. There is also a step-by-step process for how to conduct the consultation.

### 3.7. Co-production

Co-production is where professionals, like the NHS and the local council, and people share power to plan and deliver support services, recognising that both partners have a vital contribution to make. Further information on co-production can be found at the [Scottish Co-production Network](#).

### 3.8. National Standards for Community Engagement

The Orkney Partnership Board has written [guidelines](#) for how local organisations should communicate and engage with people here in Orkney; all IJB consultations are based upon these guidelines.

Included in the guidance are the [National Standards for Community Engagement](#), a description of how public organisations, such as the local council or the NHS, should communicate with their local community. Here are the seven standards:

**Impact:** We will assess the impact of the engagement and use what we have learned to improve our future community engagement.

**Communication:** We will communicate clearly and regularly with the people, organisations and communities affected by the engagement.

**Methods:** We will use methods of engagement that are fit for purpose.

**Working together:** We will work effectively together to achieve the aims of the engagement.

**Planning:** There is a clear purpose for the engagement, which is based on a shared understanding of community needs and ambitions.

**Support:** We will identify and overcome any barriers to participation.

**Inclusion:** We will identify and involve the people and organisations that are affected by the focus of the engagement.

## 4. How will the IJB Communicate and Engage?

Several years ago, a set of principles were put together which would be at the heart of our communication and engagement activity and continue to be as relevant today as they were a few years ago. Those principles are:

- Good communication is everyone's responsibility: from the Chief Officer to their respective front-line staff.

- This needs to be a two-way process: it is important to seek and listen to the views and opinions of the public and staff.
- Communication and engagement activity will be focused, targeted and relevant.
- Communication should be timely, with information quickly communicated once available.
- Communication will be proactive, open, and transparent.
- The language and format used to communicate and engage will be right for the target audience. In most cases this means in plain English and jargon free.
- Written materials will be made available in formats that are accessible to all.
- Staff have a right to be well informed and have the opportunity to provide views, ideas, and other feedback.

## **5. Communications and Engagement Activity**

The way we communicate and engage needs to evolve over time, reflecting changes in the way people expect to be informed, find information for themselves, and provide us with feedback.

### **5.1. Newspaper and Radio**

Traditional media, such as newspapers and the radio, remain important, perhaps more so in Orkney than elsewhere. We work closely with the Communications Teams at both NHS Orkney and OIC and will continue to look for opportunities to issue press releases, undertake interviews, and promote the work of health and social care services, in The Orcadian and on Radio Orkney.

### **5.2. Social Media**

Increasingly the first choice for communicating with people in Orkney, the Council's Facebook and X platforms have the highest number of followers, per head of population, in Scotland! The IJB uses the Council's social media channels, as well as those of NHS Orkney, to reach folk of all backgrounds, throughout the county.

Whilst Facebook and X (formerly Twitter) remain the favourite apps for many people, the increasing popularity of the likes of Tik Tok, Instagram, and WhatsApp, means there is a need to stay ahead of the apps and channels that people prefer to use.. That said, any adoption of other apps, channels, or platforms, will also consider, first-and-foremost, our duty of care to service users.

### **5.3. Websites**

The IJB has a dedicated section on both the [NHS Orkney](#) and [OIC](#) websites. Both the NHS Orkney and OIC websites are undergoing a process of upgrading and improvement that will make it easier for people to get information on services, as well as the latest news, something that is especially useful and popular during periods of bad weather, which might affect services.

These planned improvements include making the website easier to navigate, making sure there is more up to date information, and even looking at new tools such as live chat.

## **5.4. Video**

Feedback shows that people are much more likely to watch a quick video rather than read a piece of text, which means more people can be reached this way. But not only this, videos let people see and hear those who make decisions about services and, most importantly, those who are delivering services.

We have recently used videos, shown in the cinema at the Pickaquoy Centre, as the centrepiece of a recruitment campaign for the Care at Home service, and this has encouraged us to look at other ways to use videos to reach people.

## **5.5. Audio-casting**

OIC has for some time now provided the opportunity for people to [listen to meetings](#), including the IJB and the Performance and Audit Committee, held in the Council Chamber. This is known as audio casting.

Audio casting gives people the opportunity to listen live to meetings, as they happen, helping people to understand the policy and decision-making process, and giving people a greater understanding of the work of the organisation. There is also a listen-again facility available on the Council website, which is available for one year after the original recording.

## **5.6. Staff Engagement and Communication**

Almost all communication with staff across both NHS Orkney and OIC is via email. Some staff may not have regular access to digital communication tools, such as email and social media, so we will make sure that other methods are offered; postal communication or physical noticeboards, for example, are available to allow access for all to our communication and engagement with staff.

## **5.7. Orkney Opinions**

The IJB has been a consistent user of Orkney Opinions, OIC's public consultation group, whose volunteer members are consulted when a range of views is sought on a given topic. Both the numbers of responses, and the quality of those responses, were consistently high.

Unfortunately, Orkney Opinions has been on hiatus for a while, but the IJB has been pushing to reinstate Orkney Opinions, as soon as possible, as it became a 'go-to' method of reaching a wide range of people in Orkney, and will continue to do so.

When it is available again, we will make sure Orkney Opinions includes a broad cross-section of the community, including disabled people, carers, and others who might face barriers to taking part.

## **5.8. Joint Consultations**

It has become clear over recent years that people are increasingly suffering from 'consultation fatigue', where they are tired of being given the opportunity to have their say. To tackle this, some consultations have run alongside those from other services, giving the public the opportunity to contribute to several consultations at the same time.

## **5.9. Campaigns**

Campaigns are often planned to communicate with people about specific services or to tell folk about an upcoming event.

For example, we have heavily promoted the work of unpaid carers in Orkney, helping people to understand the support that is available to unpaid carers, and will continue to do so. Also several schemes to attract people to jobs and careers in caring have been promoted.

## **5.10. Digital Accessibility and Inclusion**

We are committed to engaging with everyone in Orkney, in ways that allow everyone to take part. We know that many of the barriers' people experience in accessing our online and digital content are the result of the way those materials are designed or delivered, not limitations of the person accessing them.

For example, some people might face difficulties due to the design of phones, tablets and computers, or because the information is not presented in an accessible format. Others might lack the digital skills training, or have limited access to broadband, especially in rural and island areas.

To remove these barriers and promote digital inclusion, we will:

- Make sure digital materials (such as our website) meet the recognised accessibility standards, such as WCAG 2.1, to support people with visual, auditory, cognitive, or motor impairments.
- Provide alternative formats — including large print, audio, and British Sign Language — based on people's preferences and needs.
- Use clear and plain language, and avoid unnecessary jargon or acronyms, to make sure our communications are understandable for all.
- Make sure we are culturally sensitive in all our engagement activities. We will make sure we are up to date with the latest and most popular communication channels, keeping pace with people's preferences and the most accessible apps.
- Collect feedback from people who have problems accessing or understanding our website, social media channels, and other engagement material, to make sure we continue to improve how, when, and where, we communicate with people in Orkney.
- Work with the Third Sector and community organisations to expand the support available to help people get online, especially for people in the isles, and for older people.



## 6. Summary

As well as being accessible to all, our communications and engagement activities need to be relevant to people and their lives. They will help people to better understand the arrangements for integrated community health and social care, as well as the differences these arrangements are making, and will reassure people that excellent community health and social care services continue to be provided, throughout Orkney, under the oversight of the IJB.

Through our engagement and communication activities we will:

- Discuss what areas of community health and social care matter most to people.
- Help ensure people are able to influence their own health and wellbeing and contribute to the improvement of services.
- Support measures to ensure people are helped to live at home, or in a homely setting, for as long as they want.
- Explore ways to get people involved.
- Make sure everyone in the community can participate fully –work to identify and remove barriers to engagement, particularly for people from underrepresented or marginalised groups. Provide feedback on the impact of their engagement with us and how their views have been considered.
- Recognise ‘consultation fatigue’ amongst people in Orkney by working with NHS Orkney, OIC, other public authorities and the Third Sector to deliver co-produced consultation and engagement, wherever possible.

## 7. What Happens Next?

This updated Strategy sets out the broad aims for the IJB’s communications and engagement activities. It will be reviewed and updated again in 2027.