

**Healthwatch Brighton and Hove
communications strategy, April
2024 – March 2025**

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Healthwatch Brighton and Hove

Healthwatch Brighton and Hove is your local health and social care champion.

If you use GPs and hospitals, dentists, pharmacies, care homes or other support services in your area, we want to hear about your experiences. We are independent and have the power to make sure NHS leaders and other decision makers listen to local feedback and improve standards of care. We can also help you to find reliable and trustworthy information and advice.

We are here to listen to the issues that really matter to people in Brighton and Hove and to hear about their experiences of using local health and social care services.

Our vision

Is that Healthwatch Brighton and Hove is a place where people's experiences improve local health and care services.

Our mission

Is that by offering all people of Brighton and Hove a strong voice, we will improve the quality of local health and social care.

Our approach

In everything we do, we are transparent, non-judgemental, and independent. We aspire to be inclusive, dedicated to co-production, and strive for continual improvement. We adhere to the Nolan Principles, also known as the Seven Principles of Public Life. This means that we carry out our work with selflessness, integrity, objectivity, accountability, openness, honesty, and leadership.

About us

- We are independent and impartial.
- We are here to listen to what you like about services and what you think could be improved. No matter how big or small the issue, we want to hear about it.
- Sharing your feedback with us helps influence positive changes to local health and social care services.
- We make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care.
- We listen to diverse groups and take measures to ensure we reach those who may be seldom heard or seldom listened to. This is part of our commitment to reduce health inequalities and measure the availability and quality of services for everyone.

The purpose of our communications

This strategy sets out how Healthwatch Brighton and Hove use our communications to achieve our vision, mission and strengthen our approach to achieving them.

This strategy provides a framework for the delivery of effective communications which are clear, appropriate and help the organisation achieve its goals.

The purpose of our effective communications is to:

- Increase awareness of Healthwatch Brighton and Hove and its work, enabling us to hear from more people and engage with the different communities across our city.
- Increase Healthwatch Brighton and Hove's reputation as an independent, professional and credible organisation which listens to people and acts on their feedback (demonstrating our impact that comes from people who share their stories with us).
- Continuously build meaningful two-way communication with the public, patients and carers to ensure they have the knowledge and understanding to share their views which will help influence the shaping of health and social care services in Brighton and Hove.
- Ensure that we work closely with seldom heard groups to champion their voices and enable them to be heard.
- Ensure we work closely with commissioners and providers of services so that services are designed around the needs of people in Brighton and Hove.

1. Principles underpinning our approach to communication.

Accessibility

For the public to trust us, engage with us, and support the work we do, it is vital that we convey not just what we do but what we do not do. For example: we will share public feedback with NHS/social care leaders and decision makers, but we will not share personal details without consent.

In our communications, we are committed to using plain English, explaining acronyms, and offering accessible forms of communication in our emails, letters, reports, and publicity materials as far as it is within our means to do so.

We will make social media posts and website content accessible using tools such as alt text and image descriptions.

Our website is fully compliant with the Web Content Accessibility Guidelines version 2.1 AA standard. We have upgraded to Drupal 9 in 2023 which brought our websites in line with new Healthwatch brand guidelines.[check this]

We are committed to using accessible venues for events and meetings. Where possible, we will offer alternative means of communication e.g., by post, phone, face-to-face and online meetings, with the benefit of a sign language interpreter or other interpreter. We will translate materials into other languages other than English and offer publications in large type where requested. We endeavour to record online meetings where possible and where we have consent to do so and we email a summary of what has been discussed.

Equality and diversity

For us, this is about putting people at the heart of the work we do. We are committed to being inclusive, fair and equitable to all. Equality and Diversity is about:

- How we engage, communicate with, and respond to people.
- How we communicate, listen to, treat and engage with our staff and volunteers; and
- How we hold providers to account to ensure services are personal, fair and diverse.

The Equality Act 2010 introduced Public Sector Equality Duties for nine protected characteristics, often referred to as equality groups or protected groups. The protected characteristics are, Race, Sex, Age, Disability, Gender reassignment, Religion or belief, Sexual orientation, Pregnancy and maternity, Marriage and civil

partnership. In addition to the groups protected by the Equality Act 2010 we will also proactively consider other vulnerable and seldom heard groups.

These values will underpin not only how we reach people but how we their collect feedback and what we do with this. We will apply an Equality and Diversity approach when:

- Collecting demographic information and comparing this with historic data to identify any trends.
- Using this information to target our work on the groups/areas that we hear from least.
- Collaborating with organisations and community/voluntary groups.
- Working to reach those who are digitally excluded and offering face-to-face workshops offering the opportunity to develop key digital skills.

2. Communication mechanisms: where we are now.

Healthwatch Brighton and Hove consists of a small team of six staff members and we do not have the resources to employ a dedicated Communications Lead. The whole team however is actively involved in how we plan our communications with our audience, and collectively we decide our approach. We also work with our dedicated team of volunteers who deliver many of our face-to-face or in-person communications.

We have mapped the skills of our staff team and volunteers and utilise those skills to help us with our communications. For example, our skills include:

- Presenting at public events.
- Hosting focus groups, one-to-one interviews (online, by phone and in person).
- Designing images to support our communications, using tools such as Canva.
- Writing interesting and detailed report of our projects.
- Writing attention-grabbing press releases.
- Technical skills which mean we can use Mailchimp to write interesting newsletters and bulletins and Smart Survey to deliver patients polls and surveys.
- Connections with external companies to help us e.g. using local design and print companies to produce leaflets, posters and postcards.

Healthwatch Brighton and Hove use a wide range of communication methods in our work, and each has a distinct use and function for our organisation.

1. Social media

We currently have accounts delivering messages across several digital platforms including 'X' (formerly Twitter), Facebook and Instagram. We also have a YouTube Account. [check this] The CEO has a LinkedIn account which he uses to publicise Healthwatch.

Our social media fulfils five main objectives:

1. To collect feedback by directing people to our website's 'Share your views' form.
2. To disseminate our research and engagement work.
3. To share information about upcoming engagement events.
4. To involve the public in workplan projects / commissioned work, and
5. To communicate public health messages or health and social care news, including changes to services.
6. To advertise opportunities to volunteer or work for us.

Content is posted on Facebook and Twitter every week. Some content is created and adapted to reflect the unique needs of the people we are trying to reach or engage. Which communications we issue are discussed in a weekly team meeting.

Each social media platform serves a different purpose, and content is adapted to fit this. For example, Facebook and 'X' connects us with members of the public, other organisations, the media and those responsible for making decisions about health and care. We use LinkedIn for recruitment and wider promotion. Instagram has helped link us to a younger age group.

2. Websites

We have a Healthwatch Brighton and Hove website and we update the content multiple times each month. The website is where we share:

- Publications such as our reports.
- Details of our project work.
- Information that we must share with the public such as our Board meeting and policies.
- Content from other organisations that will be of interest to the local population
- News articles, and
- Advice and information.

People can also find sources of trusted advice and signposting information on our websites.

We also host information and publications for other organisations to increase their presence.

We collate feedback after our engagement activities and regularly author reports which set out evidence-based recommendations for services or commissioners. We track these recommendations using our Impact Tracker and report back to the public where their experiences have had a direct impact on improving local services.

Reports are shared via our websites, often with a concise summary of our research and findings and the option of downloading the full report. Our reports include responses from key stakeholders such as the Integrated Care System, local hospital trusts, and local councils. Reports are also sent to partners such as the Care Quality Commission, NHS England, voluntary (VCSE) sector, and Healthwatch England.

3. Email newsletters.

We send out a monthly newsletter using Mailchimp to our 1400+ subscribers. Our email newsletters help us stay connected and share news and information with our volunteers, staff, and Board.

We encourage all people we contact to sign up for our newsletters. We also ask our partners to promote this. This is done to increase our audience and ensure we attract more signups from the public as well as professionals and organisations.

The newsletters typically contain:

- Calls to action for people to share their feedback with us (surveys, polls, how to join focus groups, etc).
- Details of other surveys not being delivered by Healthwatch on health and care issues which people can take part in.
- Details of our latest research, or project work.
- Details of joint work carried out by Healthwatch in Sussex.
- Details of reports produced by Healthwatch England.
- Advice about how people can get involved in our work.
- News and events going on in the local area that people may be interested in.
- We include a spotlight feature to promote another local voluntary and community group.

4. Promotion materials

We are committed to helping our city reach net zero and have therefore limited the amount of hard copy materials that we use. Where we have these, our publications include posters, leaflets, and postcards.

Where possible, we make these available in digital and printed formats. Digital publications are hosted on our websites, often for dissemination through social media.

Our printed publications are used to raise awareness of Healthwatch Brighton and Hove and during face-to-face engagement.

Most of our publications are designed inhouse, using templates provided by Healthwatch England and free image resources such as Canva.

Hard copy promotional materials are printed by a local company.

5. External newsletters and websites

We provide updates on our work and content for inclusion in a wide range of external newsletters, such as those sent out by NHS Sussex and Brighton and Hove City Council and local VCSE organisations. We also provide key information about Healthwatch.

Our staff team regularly connects with other Communications Leads for providers and commissioners in our local areas and we attend meetings with other VCSE groups to learn what they are doing and what events are coming up that we might support/take part in and we also promote these. This ensures we know which messages Healthwatch can help to disseminate about service changes.

4. Internal communications

The staff team discuss the communications plan for the month ahead to determine how our various partners can be kept updated around engagement, research and projects, and any other activities.

This is also an opportunity to discuss ongoing project/research work, our work around co-production and sharing examples of best practice.

Our Volunteer Coordinator sends regular emails directly to volunteers containing information and opportunities that they may be interested in. We also have a WhatsApp group for our volunteers to keep them updated.

Once a quarter we issue a dedicated Volunteer newsletter and hold a Volunteer Connect meeting. All volunteers, including Board members, are invited to attend this meeting. The Volunteer Connect meeting is an opportunity for all volunteers, Board members and staff to come together, either face to face or online, to socialise, build knowledge, and discuss our current work.

5. Media / press releases

Media organisations regularly contact us for comment, case studies, and to request or share information.

We provide case studies and views to local media outlets by gaining the consent from people who have left feedback. Their stories highlight key issues in health and social care.

Local media outlets also invite us to speak about our work and share our expertise on topical issues.

A press release is written to go alongside major reports that we publish and distributed to local media. We routinely update our lists of local media and press contacts and ensure our own contact details are well publicised and freely available.

Looking to the future, we are keen to work with media outlets to achieve more support around our project work and surveys.

3. Our audience and how we reach people.

Our key audiences include:

People living, or working, in Brighton and Hove	Voluntary organisations	NHS Commissioners of health and social care services
<ul style="list-style-type: none"> • Older adults • Children and young people. • Working age adults • Seldom heard groups (including those with protected characteristics) • Potential volunteers • Carers • People living with long terms health conditions. • Users of health and social care services. 	<ul style="list-style-type: none"> • Those doing similar work, (i.e. collating patient voice, involved in health, social care or wellbeing) • Those working with people who Healthwatch Brighton and Hove want to hear from e.g. seldom heard groups • Social groups (i.e. for specific conditions e.g. dementia, or demographics e.g. people under 18, or communities of interest e.g. racially minoritised communities). 	<ul style="list-style-type: none"> • NHS Sussex • Brighton and Hove City Council. • NHS England (Southeast).
Political partners	Media	Staff and Healthwatch volunteers
<ul style="list-style-type: none"> • Local Councillors • Members of Parliament. 	<ul style="list-style-type: none"> • Local and regional broadcast and print. 	<ul style="list-style-type: none"> • Board members • Healthwatch Volunteers.

Providers of publicly funded health and care services	Local organisations	National organisations
<ul style="list-style-type: none"> • Hospital Trusts and NHS Foundation Trusts - (University Hospital Sussex; Sussex Partnership Foundation, Sussex Community Foundation, SeCAMB) • Registered social care providers • Primary Care (GPs, Pharmacist, NHS Dentists, Ophthalmologists). 	<ul style="list-style-type: none"> • Health and Wellbeing Board • Local Primary Care Networks • Patient Participation Groups • Local Dental Committees • Neighbouring Local Healthwatch • Voluntary and Community Groups. 	<ul style="list-style-type: none"> • Healthwatch England • Care Quality Commission.

What do we want our target audiences to do?

Our audiences	What do we want them to do?	How do we reach them?	What will success look like?
Members of the public	<ul style="list-style-type: none"> • Share their feedback on health and social care • Attend focus groups • Participate in 1:1 interviews • Complete surveys/polls • Engage with our social media posts • Visit our website • Engage with us at public events • Sign up for our Newsletter • Join us as a volunteer 	<ul style="list-style-type: none"> • Social media • Websites • Email newsletters • Publications • External newsletters and websites • Media relations. 	<p>A year-on-year increase in:</p> <ul style="list-style-type: none"> • the number of people we hear from • subscribers to our newsletter • visitors to our webpage • interaction with our newsletter (click throughs) • social media impressions. <p>An increase in the number of people we hear from who have been identified as being a priority for us (by an analysis of our equalities data).</p> <p>Healthwatch Brighton and Hove joining a minimum of four external events per year, where we are able to gather the public's feedback.</p> <p>Healthwatch Brighton and Hove hosting 2 public events per year.</p> <p>6 press releases issued per year which generate media interest.</p>
Professionals, decision makers and providers	<ul style="list-style-type: none"> • Be aware of our service • Rate the quality of our work and impact as 'good' or above. 	<ul style="list-style-type: none"> • Email newsletters • Publications • External newsletters and websites • Media relations 	<ul style="list-style-type: none"> • A response is provided to our projects / findings explaining (to the public) how they will act on the feedback we have collated • Recognition of our work and impact at external meeting

	<ul style="list-style-type: none"> • Regard us as a trusted source of patient experience • Approach us to carry out project and commissioned work. • Provide a response to our project work and act on our feedback/ recommendations. 	<ul style="list-style-type: none"> • Representation at meetings • Stakeholder surveys • Holding 1:1 meetings • At wider meetings we attend. 	<ul style="list-style-type: none"> • Our reports/ findings shared with a range of commissioners/ decision-make • Our work referenced in decision-making papers/reports/ strategies e.g. the city's Joint Strategic Needs Assessment • Our work is embedded in re-commissioned service • More – and new – professionals seeking our advice and insight or who want to work with us • More partners who speak up on our behalf / in support of our work • More partners completing our Stakeholder survey.
Volunteers, staff, Board members	<ul style="list-style-type: none"> • Represent Healthwatch at external meetings • Stay with us • Emphasise our impact. • Share their experiences with us • Participate in our projects • Join our Volunteer Connect meetings. 	<ul style="list-style-type: none"> • Social media • Websites • Email newsletters • Publications • External newsletters and websites • Volunteer newsletter • Volunteer Whatsapp group • Media relations • Recruitment websites/channels. • Meetings. 	<ul style="list-style-type: none"> • Our volunteer retention rate is high • We continually attract new volunteers • We attract and recruit Board members which reflects the diversity of the city • Volunteers tell us they are proud to work for us • Staff/volunteers being recognised for their work and achievements by Healthwatch and external partners.

Future goals: Looking ahead – April 2024 – March 2025

Our communication aims:

Aim 1: For the public to be more aware of Healthwatch Brighton and Hove and to see the value of seeking advice from us or sharing their views with us.

- **Objective 1a:** To increase year on year, the number of people sharing their experiences with us, or accessing our advice and information.
- **Objective 1b:** To increase year on year, the number of people we hear from who we have identified as being a priority for us (identified by analysis of our equalities data).

Aim 2: For professionals (commissioners and service managers, senior health and care leaders, front-line staff), to be more aware of Healthwatch Brighton and Hove and our role and see the value in supporting our objectives.

- **Objective 2a:** To increase year on year the number of our recommendations actioned by services, either by being embedded in service change delivery, included in decision-making report/papers, referenced in strategies and/or in meetings.
- **Objective 2b:** To increase year on year the overall positive rating score given to us via our stakeholder surveys for the positive difference we make.

Aim 3: For stakeholders to be more aware of Healthwatch Brighton and Hove and the service we provide and see the value in supporting our objectives.

- **Objective 3a:** To see, year on year, both more and new professionals seeking our advice and insight, or who want to work with us.
- **Objective 3b:** to see, year on year, more partners who speak up on our behalf / in support of our work, or who reference it as a source of insight.

Aim 4: For our volunteers to value being part of Healthwatch Brighton and Hove and to see the value of working together to achieve our objectives.

- **Objective 4a.** To see, year on year, that our volunteer retention rate remains high and that we continually attract new volunteers.
- **Objective 4b:** To witness, year on year, that our volunteer base reflects the diversity of the city.
- **Objective 4c:** To see, year on year, we see an increase in our volunteers being recognised for their work and achievements by external partners.

Healthwatch Brighton and Hove has built a strong and credible presence with providers and the public, but we recognise there is more to be achieved, especially in the rapidly changing landscape of health and social care.

To help us as we embed wider change and improvements plans, we will focus over the next year on improving our communications across all channels and increasing public engagement participation across all work streams.

We will focus on the following:

Making the messages we issue specific and actionable.

Making it easy for people to act. We will identify and find ways to address the barriers that stop our audiences from interacting with us or taking action. We will identify these barriers by asking the question.

Creating a consistent experience. We will understand how audiences interact with us and build trust using different communication channels and consistent message, tone and service.

Showing the impact we help to make, thereby encouraging more people to share their experiences with us. We will consistently show the difference our audiences are making to prompt other people to act.

Learning and testing. We will continually adapt our approach to take account of the changing environment.

Widening our partnerships. We will continue to expand our working relationships with partner organisations who can help us reach diverse communities, especially those who experience worse health inequalities.

Remembering that people are our brand. We will use people's voices to build trust and confidence in our brand.

Investing in brand content to make more connections with audiences and keep them engaged.

Supporting wider campaigns. We will monitor campaigns being delivered by key partners such as Healthwatch England, the CQC and NHS Sussex and promote these.

How will achieve this.

1. Data collection

Going forward, we will continue to collect demographic information from our projects and use this equalities data to identify the groups we are less successful at reaching. We will explore new ways to engage with these communities using our partnerships to help us.

In addition, we will add a new field asking where people heard about us to our 'Share your views' webform, which we use to collect patient feedback online. This data will help us focus our communications, and ensure we are making the most of popular channels and building on those where we have less of a presence. Our options are:

- Social media
- Google or another search engine
- Through your GP or local surgery
- At a hospital
- In a care home
- At a dental practice
- A poster or leaflet
- Word of mouth
- Other.

2. Evaluating success

Every six months, we will continue to analyse our performance statistics and compare them to the previous period/year. We record:

- For our websites: number of articles published, page views, unique page views, average time spent on page, top performing article, shares.
- For our social media: followers, number of posts, reach, engagement, top performing posts.
- Email newsletters: subscribers, open rate.
- The number and quality of stakeholder responses we receive to our report findings, plus the number of recommendations acted on by local services, indicate the success of our project and commissioned work.

3. Measuring our impact

We continually monitor our outputs, outcomes, and impacts via a tracker tool that can be accessed by all staff. Measuring impact is a key metric for us. It will enable us to better understand the impact we make which in turn can be used to share this with the public, in a better, clearer way that will encourage more people to engage with us.

Outputs and outcomes for all our work are highlighted through our annual report published on 30th June each year. We track and monitor the outcomes, outputs, and impacts from our work, and will highlight these via our communications channels.

4. Exploring new opportunities

We will explore the role of paid promotion, particularly around recruitment (via LinkedIn) and collecting feedback (via 'X' and Facebook). This may involve optimising content for paid promotion and monitoring the success of paid campaigns.

We will also commence running a series of short 'market-testing' style polls which are easier and quicker for people to answer. This will help us capture high level insight on emerging issues and on topics which we hear less about. We will publish our results each time and we hope this will stimulate public interest in engaging with Healthwatch as well as helping us to identify new projects, as well as highlight issues we need to bring to the attention of decision-makers.

We will identify opportunities to work in partnership on branded campaigns. Working with trusted partners to reach their service users will support us in our ambition to widen awareness of who we are and what we do. This will also support our targeted outreach and engagement activities with different communities.

5. Public event

COVID-19 restrictions made it difficult for us to conduct face-to-face engagement. We have now recommenced our public engagement work and will continue to maximise the opportunities for this approach which makes it easier for people to share their feedback – we will go out to the people rather than expecting them to come to us.

Link to HWE forward planner

https://healthwatch163.workplace.com/work/file_viewer/936339534714203/?surface=POST_ATTACHMENT

Our plan for 2024-2026

Month/year	Activity
April 2024	<ul style="list-style-type: none">• Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.'• Run HWiSx polls – Memory Assessment Services via social media, bulletin and website and publish results using social media and newsletter and share with key partners.• Promote Health Counts survey.

	<ul style="list-style-type: none"> • Promote patient survey on local GP practice (if the project proceeds). Use practice to share with all patients and/or with the support of the PPG/Resident's Association. • We will promote an external campaign that we identify. • Attend the Health and Wellbeing event and free health check event at Community Base.
May 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Promote Easy Read 'share your feedback with us' using VSCE network. • Promote HWiSx poll on Assistant Practitioners via social media, bulletin and website and publish results using social media and newsletter and share with key Primary Care partners. • Run a HWBH volunteers survey. • Issue a dedicated volunteer newsletter. • Host a volunteer get together. • Attend d/Deaf public event to speak with this community and capture their views
June 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Promote HWiSx poll (topic TBC) • Launch HWBH Annual Report. Promote directly by sharing with Chair of HOSC and HWB, all Councillors, key ICS and NHS partners. Post to website and social media. Share directly with volunteers. Create Canva designs to drip feed our work/impact throughout the month. • Use launch as an opportunity to encourage people to share their feedback with us

July 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Deliver and promote a HWiSx poll (topic TBC) • Host an impact event (in-person) inviting partners and volunteers. Invite guest speakers to speak and media. Promote event as an opportunity to learn more about HWBH. Continue to drip feed our work and impact.
August 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Promote a HWiSx poll (topic TBC)
September 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Promote a HWiSx poll (topic TBC) • Attend public event to raise awareness of HWBH and to collate insight. • We will analyse our performance data, including reach and engagement to determine which campaigns have been more successful and learn from those whilst also responding to those which were not.
October 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Deliver and promote third HWiSx poll (topic TBC)
November 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include

	<p>messages to sign up and 'share your feedback with us.'</p> <ul style="list-style-type: none"> • Promote a HWiSx poll (topic TBC)
December 2024	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Promote HWiSx poll.
January 2025	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Deliver and promote forth short poll (topic TBC)
February 2025	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Deliver and promote a HWiSx poll (topic TBC)
March 2025	<ul style="list-style-type: none"> • Issue monthly HWBH newsletter (Mailchimp) to our subscribers and post to website. Include messages to sign up and 'share your feedback with us.' • Promote HWiSx poll. • Begin analysis of demographic data from previous year

- Increase reach with a broader range of local influencers.
- Cut through with a greater focus on PR, maintain relationships with email marketing.
- Invest more in paid-for social media and physical advertising in services.
- Deepen engagement by supporting user-generated content.

- April - Campaign One.
- May - Put in place a new email marketing system.
- July - Map email customer journey and segment audiences.
- August - Introduce easy email sign-up form.
- September - Campaign Two.
- October - Introduce drip email marketing.
- November - Introduce A/B email testing.
- December - Review search engine optimisation.
- January - Campaign Three.
- February - Introduce new SEO approach.
- March - Set up and pilot Instagram account.

Contact us



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