



# Digital communications strategy

## BSW Partnership

September 2021 – September 2022

### Vision:

The BSW Partnership presents appealing, insights-driven digital communications that complement individual member organisations' activities, offer opportunities for engagement, and are viewed as a trusted source of information.

### How we'll get there:

BSW Partnership communications and engagement colleagues will share resources, assets and plans to ensure their shared audience hears and sees one source of truth about local health and care services.

The Partnership will operate on a digital-first – but not digital-only – approach to communications and engagement with the BSW population. This will be mindful of the needs of vulnerable and hard-to-reach communities and individual organisations' organisational priorities.

### Context:

The CCG Communications and Engagement team has been managing the Partnership's digital communications activities and will continue to do so in the run-up to 1 April 2022. This will involve managing re-branding and possibly re-launching the CCG's channels as BSW Partnership/Integrated Care Board channels, in line with statutory and legislative changes.

The CCG's current channels include Facebook, Instagram, Twitter, YouTube, LinkedIn and Next Door. The Partnership has its own Twitter feed (see Appendix 1 for audience size correct as of August 2021) with a small but engaged audience who will need to be prompted to 'move' to follow the re-branded CCG account from 1 April 2021.

During the pandemic, BSW partner organisations have worked together more closely than ever before. We want to capitalise on the relationships and interdependencies we have built to make sure our shared BSW audience hears and sees our messaging in the most effective and efficient way.

Understandably, some partner organisations' accounts have much larger followings than others (e.g. acute Trusts and Council's) and we envisage those larger accounts will continue to support messaging from the main Partnership account, to build its reputation and public following.



## Aims:

To use digital communications channels including social media, website and e-publications to **explain** and showcase the BSW Partnership and its work to residents of BSW, health and social care colleagues and beyond.

To **encourage** residents of BSW to engage with the Partnership via its digital channels, **motivate** those individuals to take action that will help them stay well and use health and care resources appropriately, and **support** them to lead their best lives.

To **build** the Partnership's online presence so it achieves a trusted status akin to that of its membership organisations.

To **analyse** digital engagement data to build insight-driven campaigns that are supported, shaped and shared by organisations across the Partnership, and to **measure** and **evaluate** the effectiveness of those campaigns.

## Method

### Campaign approach

To ensure our content remains relevant to organisational objectives, allows us to prioritise our workload and leads to coordinated campaign evaluation, we have created 'umbrella' categories for all content.

The categories align to organisational objectives and will help achieve measurable communications objectives. There will be occasions when it is beneficial to respond to/cover content that does not directly relate to a campaign umbrella but is important or urgent. For example, crisis situations and partnership relationship management.

Umbrella categories include (but are not limited to):

- Covid-19 response including vaccination programme
- Workforce
- Mental health
- Urgent and emergency care
- Primary care

Our vision for campaigns and content across the Partnership is underpinned by three core principles:

- **One collective voice** – working together as a collaboration and one whole system
- **Healthy communities** – empowering people to lead their best lives by taking the lead with their families, communities and health professionals
- **Stories and strengths** – holding people's strengths, stories and experiences and what matters to them, at the heart of our system



## Measuring success

Before beginning any digital campaign, we decide what the objective is, to allow for effective measurement of success. Here are our broad principles for measurement:

Content objective	Metric
Raising awareness	Reach – impressions, webpage hits
Increasing engagement	Engagement rate – likes, comments, shares, surveys returned
Drive action/behaviour change	Conversion - number of appointments made, vaccines given, admissions avoided

## Coordinated campaigns

In as many circumstances as it makes sense to do so, we will coordinate our digital campaigns activity with partners in BSW, especially as we continue through the Covid-19 pandemic response, support the recovery of health and care services and the Covid-19 vaccination roll-out.

Other campaigns that would benefit from a joined-up approach to ensure maximum impact might include:

- Flu vaccination
- Winter (Help Us Help You: Stay Well This Winter)
- Health awareness campaigns that align with the Partnership's priority to enable people to lead their best lives e.g. mental health awareness, Stoptober, One You, diabetes prevention
- Campaigns that explain the function and purpose of the Partnership including reducing health inequalities and increasing staff wellbeing.

In practice, this means discussing emerging priorities as part of the Strategic Communications Advisory Group (SCAG) and then contributing to task and finish/regular meetings that 'fall out of' SCAG with representation from relevant partners.

## BSW Partnership Campaign Resource Centre

To aid this activity and encourage sharing of assets including imagery, video, social media content and campaign plans, we have launched the BSW Partnership Campaign Resource Centre via MS Teams. Representatives from the communications and engagement teams at each Partnership organisation can up- and download campaign assets such as imagery and videos, which can then be used by and localised by other organisations.



This platform can also be used to share communications and engagement plans, campaign plans and social media calendars – especially where a coordinated approach to messaging on a particular topic makes sense.

To support this shared space, see the Terms of Reference in Appendix 2.

## **Social media**

The way the CCG uses social media varies according to platform and is informed and updated by regular analytics and audience profiling. We aim to engage with our audience as much as possible, replying to all direct (private) messages and direct questions asked via comments and tweets in a timely way, unless they are defamatory, abusive or otherwise negative. In this case, they will be ignored – to avoid censorship of our channels – and anything abusive or violently aggressive will be removed and reported, if necessary.

See Appendix 3 for the CCG's social media policy, which contains guidance about how and when we respond to social media comments.

## **Accessibility**

So that our social media content is as accessible as possible, we adhere to these principles:

- Add descriptive text to imagery
- Include all necessary information in a caption
- Do not convey important information via graphics alone
- Use camel case for hashtags e.g. #StayWellThisWinter (not #staywellthiswinter)

We also endeavour to represent a broad and diverse range of ages, gender, ethnicities and abilities in our content.

## **Facebook**

Our largest following is on Facebook (see Appendix 1 for follower data) and this is where we disseminate the bulk of our content. Our audience mainly consists of women between the ages of 35 and 44 years, so our tone of voice and content targets this demographic i.e. messaging about looking after elderly parents/young children, health awareness, service updates, how to manage health 'for a family'.

We publish a minimum of three posts per day, using Sprout Social's 'Optimal timing' scheduling function to ensure our posts appear at the times our audience is most likely to be online. We always include a graphic or image in posts and try to post owned video content at least once per month with other video content shared more regularly.

We also post in Facebook community groups about hyperlocal issues, for example the [Swindon Community Notice Board](#) and would like to expand this approach.

## **Instagram**

Our Instagram account is the 'youngest' in our portfolio but the fastest growing and with the youngest audience profile. Our most creative graphics and localised content



is shared on Instagram, with timeless content (e.g. alternatives to ED) posted to the grid and time-sensitive content (e.g. a walk-in clinic) posted as stories.

We post a maximum of once per day to the Instagram grid but anything up to five or more stories depending on what is happening that day. We try to post a 'what's going on' summary via stories at the beginning of very busy or newsworthy weeks e.g. when there have been updates to Covid-19 restrictions, new walk-in vaccine dates launched, an awareness day or week or the launch of a new service.

We have found that including a set of researched hashtags as a separate caption under grid posts increases their likelihood of being found and shared via Instagram's algorithm.

We use Linktree to house our links, referring to 'link in our bio' in post captions.

During the Covid-19 vaccine roll-out we have had some success working with local Instagram influencers on collaborations including a Q&A with members of the BAME community, with a CCG pharmacist and a 'takeover' in partnership with Bath University. These activities boost engagement and result in an increased following. For example, during the week of the student takeover – our Instagram following increased 600 per cent compared with the previous week and our likes and comments increased by 12 and 18 per cent, respectively.

### **Twitter**

We have a high level of engagement on Twitter (2.4 per cent average between January and August 2021 vs non-profit industry standard 0.1 per cent) with a mainly corporate, NHS staff and health and care-focused audience. We have a limited understanding of our overall audience composition due to the lack of demographic data available on the platform.

We post short and concise content, with a graphic or video, a minimum of twice per day and use Twitter to 'live' capture events such as our Governing Body meetings and AGM.

### **LinkedIn**

We predominantly use LinkedIn to advertise roles at the CCG and across the Partnership, where we know of them. We also post about events, policy and statutory developments – especially about the Partnership – and know that our following mainly consists of health and care professionals (lots of NHS colleagues).

We also use LinkedIn as a portfolio of noteworthy achievements met by the organisation, alongside successful campaigns and milestones. We anticipate that the BSW Academy will launch its own dedicated LinkedIn page.

### **Next Door**

We have three separate accounts on Next Door for each of our localities, and these can be used to segment and target audiences at specific 'neighbourhood' level. We



publish information and updates relating to the pandemic, service availability and changes, aiming to dispel misinformation wherever possible.

Next Door's 'Emergency' function allows time-critical information to be shared for example responding to an emerging crisis situation (e.g. adverse weather), a sudden change in service provision (e.g. closure of MIU's) or cancellation of a service or activity (e.g. a walk-in clinic).

### **YouTube**

Our YouTube channel hosts public campaign videos that can be embedded into the CCG or Partnership website. We do not share YouTube links via social media as they do not autoplay and are therefore unlikely to be watched or generate much engagement as natively posted videos.

We also host webinar/meeting recordings that need to be shared, for example in the Primary Care Bulletin, but are stored 'unlisted' so they do not appear in searches.

### **Paid social**

We have a budget of £500 per year for paid social advertising. We spend this on Facebook and Instagram for paid advertising in the form of boosted posts and ad campaigns.

The type of content we would consider spending money on could include launching a new campaign, public consultations, publicising events, and encouraging or motivating certain behaviours or actions when there is extreme pressure on health and care services.

Boosted posts achieve significantly more reach and engagement for as little as £20 spent over 2-4 days and an ad campaign with 1-3 ad sets could potentially reach our entire footprint for around £200.

### **Graphics, design and video**

The CCG subscribes to Canva Pro to allow in-house design of graphics and imagery to support, promote and advertise our content. Canva Pro also allows us to upload branding elements like colours and fonts, which we have done for the CCG and Partnership branding.

We also regularly use the SWCSU design team to support with graphic design and video editing and Unstuck – the design agency in Salisbury we developed the BSW Partnership identity with.

The [Partnership-wide 'One Year On' covid-19 anniversary](#) video was made by the NHS production company Blue Light Creative based at the RUH.

### **Website**

Our vision is to present integrated campaigns content across all digital channels, including the CCG and Partnership websites. Some of the ways we use our websites to house content include:



- Campaign landing pages with linked homepage banners
- Embedded YouTube videos within campaigns pages
- Publicising engagement opportunities
- Showcasing case studies, news and best practice from the Partnership
- 'Live' content e.g. Covid-19 vaccination FAQ pages, updated daily with changes to locations, eligibility criteria etc. This is also our tactic in an emerging crisis scenario e.g. adverse weather, to have a live 'rolling' newsfeed collating partner organisations' information.

We launched a new website for the BSW Partnership in April 2021 and envisage that this will 'take on' the current CCG website content from 1 April 2022. This new website is a bespoke environment, displaying the BSW Partnership branding and identity, and includes branch sites such as maternity, prescribing information and the BSW Academy.

### Accessibility

All CCG-commissioned websites, intranets and mobile applications are subject to the requirements of the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.

This means including an accessibility statement on all sites as well as meeting the international WCAG 2.1 AA accessibility standard so that as many people as possible can access the content without needing to adapt it, and supporting those who do need adaptations.

As with social media content these are some of the principles we adhere to:

- Embed hyperlinks into the text that explains where the user will be taken to. I.e. do not embed a hyperlink into phrases like '[click here](#)' or '[read this](#)'. Instead, embed the link into a descriptor: '[our policy on IT use](#)' or '[NHS diabetes guidance](#)'.
- Add descriptive (sometimes called 'alt' text) text to imagery
- Do not convey important information via graphics only
- Use camel case for hashtags e.g. #StayWellThisWinter not #staywellthiswinter

We also endeavour to represent a broad and diverse range of ages, gender, ethnicities and abilities in our content including on websites.

## Evaluation and analytics

### AMEC evaluation framework

The CCG communications and engagement team use the International Association for the Measurement and Evaluation of Communications (AMEC)'s Integrated Evaluation Framework to evaluate campaigns activity.

The framework provides a clear way to ensure evaluation and measurement is at the heart of any campaign, from beginning to end. See Appendix 4 for an example of the



AMEC framework. From aligning objectives and setting targets, to naming activities and charting audience response, it means any communications and/or engagement activity can be measured and checked against organisational objectives to prove efficacy.

The framework is available to all BSW Partnership communications and engagement colleagues via the MS Teams BSW Partnership Campaign Resource Centre along with an explanation of how to use it. CCG digital communications colleagues will act as experts and champions for this approach to evaluation and can answer queries and support colleagues with using AMEC.

### **Sprout Social**

In 2021, the CCG invested in the social media scheduling and analytics platform Sprout Social. Sprout not only allows content scheduling across all of our social media platforms (except Next Door), it contains a sharable, integrated content calendar with a content tagging system, plus cross-platform analytics.

Sprout helps us to complete a cycle of monthly and quarterly reporting on our social media performance via our digital dashboard, in addition to using Google Analytics to extract website and intranet data.

### **Dashboard reports**

Each month we compile a report on the engagement we have generated via digital channels including a review of:

- Our follower base
- Engagement rates per platform (benchmark for non-profit organisations is: 0.13 per cent for Facebook, 1.41 for Instagram and 0.05 per cent for Twitter<sup>1</sup>)
- Most and least engaging content, including both organic and paid
- What sort of content we appear alongside, and what searches we appear in
- Most popular website content

This data is presented to and discussed by the CCG communications and engagement team to review what has gone well and what needs adapting.

On a quarterly basis, the monthly data analysis includes an update of our audience profiling data to see whether our follower base has changed and identify gaps we might want to target in the following quarter.

Using Sprout's content tagging system, it is possible to group content and perform analysis on BSW Partnership-wide campaigns, for example the flu campaign. This could be an opportunity for greater collaboration and closer alignment of partners' social media activity as Sprout can track tags used against content provided by our partners as well.

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<sup>1</sup> [Data from Rival IQ's 2021 Social Media Industry Benchmark Report](#)



## Audience profiling

In 2021, we began analysing the composition of our online audience to improve our understanding of their needs and behaviours, increase their reach and engagement with our content and gain further insight into our communities.

We defined our audience as individuals – creating a set of personas that mimic our followers using demographic data available on Facebook and Instagram. See Appendix 5 to meet three of our personas – designed using April 2021 follower data.

Audience profiling also includes ‘social listening’ to identify content trends and themes that our followers are interested in (or not) and helps shape the strategy for each of our social media platforms. For example, speaking ‘directly’ to followers on Instagram about a topic that directly affects a young people, versus speaking to potential ‘parents’ of that younger cohort on Facebook, versus speaking to professionals who might support that cohort on Twitter.

It also allows an understanding of practical considerations like when our audience is online and most likely to see our content.

Our goal is to compare our audience profiling and personas data against the profile of our Citizens Panel, to see whether there are any under- or unrepresented groups from our communities. We would also like to encourage members of our Citizens Panel to follow the Partnership social media channels and act as champions for messaging. We champion and share our social media handles at every available opportunity.



## Appendix 1

### Follower data, engagement rate – August 2021

CCG Twitter, Facebook and Instagram profile report from Sprout Social.



#### Profiles

Review your aggregate profile and page metrics from the reporting period.

Profile	Audience	Net Audience Growth	Published Posts	Impressions	Engagements ▼	Engagement Rate (per Impression)	Video Views
<b>Reporting Period</b>	<b>8,763</b>	<b>124</b>	<b>242</b>	<b>337,234</b>	<b>12,513</b>	<b>3.7%</b>	<b>270</b>
Aug 1, 2021 - Aug 25, 2021	↗ 2.1%	↘ 33.3%	↘ 27.3%	↘ 67.3%	↗ 5.5%	↗ 222.8%	↘ 86.4%
<b>Compare to</b>	<b>8,579</b>	<b>186</b>	<b>333</b>	<b>1,031,556</b>	<b>11,856</b>	<b>1.1%</b>	<b>1,987</b>
Jul 7, 2021 - Jul 31, 2021							
  <b>NHS Bath and North East Somerset, Swindon and Wiltshire CCG</b>	3,584	24	64	195,603	8,845	4.5%	125
  <b>@NHSBSWCCG</b>	4,168	62	103	127,823	3,451	2.7%	145
  <b>nhsbswccg</b>	1,011	38	75	13,808	217	1.6%	0



## Appendix 2

# Terms of Reference for BSW Partnership MS Teams Campaign Resource Centre

August 2020

### 1. Introduction

These terms set out the intentions for a shared BSW Partnership communications and engagement MS Teams space.

Please note that the use of MS Teams for this purpose is covered by the CCG's Data Protection Impact Assessment June 2020.

### 2. Purpose and Scope

- To allow communications and engagement colleagues from across the 16 BSW Partnership organisations to collaborate on system-wide campaigns.
- To facilitate efficient sharing of information, graphics, video, campaigns and social media plans and content without relying on email/WeTransfer links.

### 3. General principles

- To use the space as a collaboration platform, only sharing materials that are already in or planned to be in the public domain.
- To consider copyright when sharing content, especially video and photos.
- Not to share any kind of sensitive, commercial or patient/identifiable information.
- BSW CCG communications and engagement colleagues will manage the Team, adding and remove participants and monitoring content for sensitivity.
- To keep in mind that all content shared on the platform is subject to Freedom of Information/Subject Access Requests.
- That this platform will not act as the main repository/file storage for content as it will be deleted automatically after an extended period of time.
- To be courteous and respectful – unprofessional comments or content will not be tolerated.

### 4. Membership

Any communications and engagement colleagues from the BSW Partnership organisations will be welcome to join, as well as other colleagues involved with campaigns work – for example, public health colleagues.

### 5. Administration



BSW CCG communications and engagement team will manage the Team, adding and removing participants and monitoring content for sensitivity. The team will also be responsible for housekeeping, folder management and removing out-of-date content, where necessary.

## **6. Review of Terms of Reference**

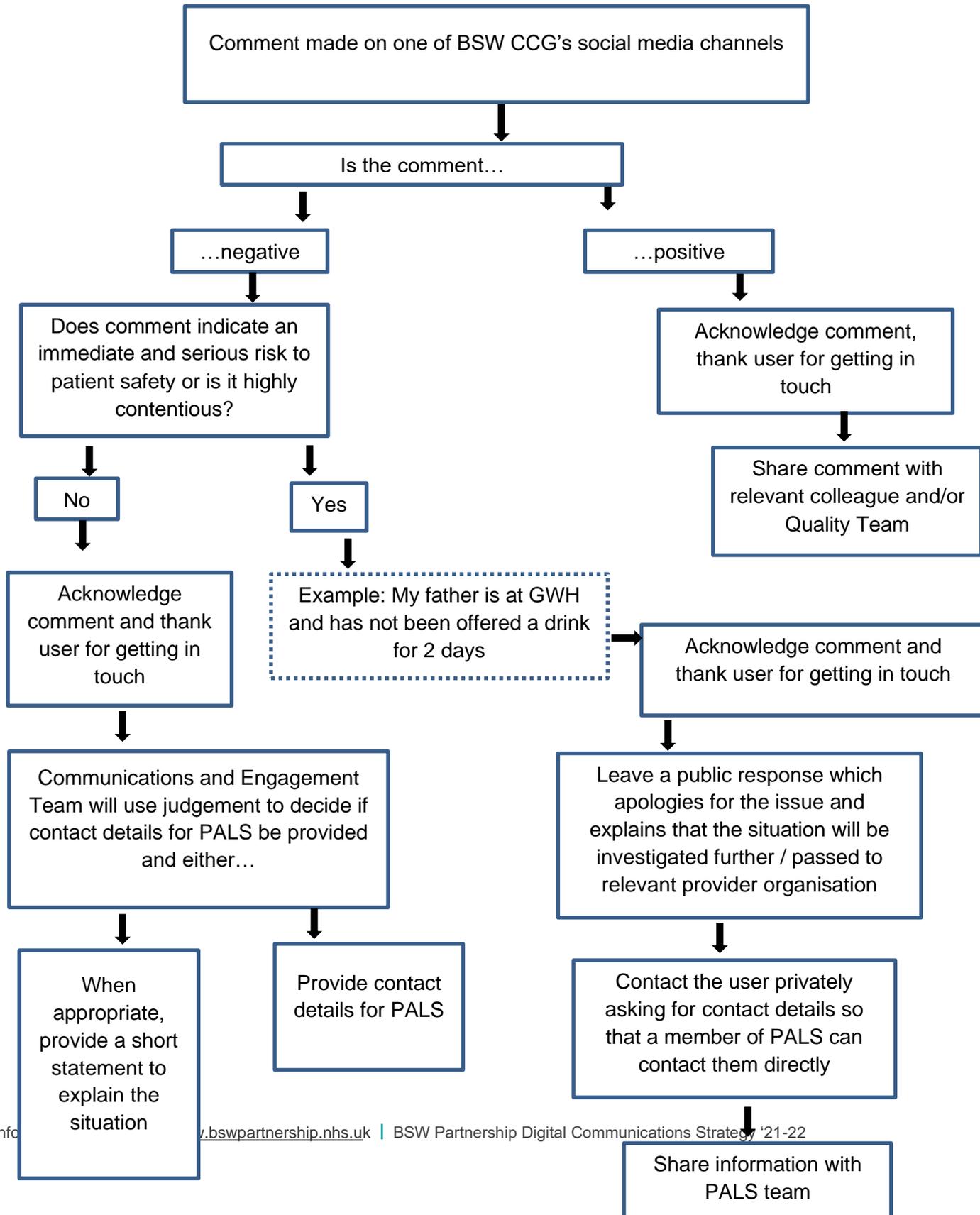
These terms of reference will be reviewed annually. To be reviewed again August 2022.



## Appendix 3

### BSW CCG Social Media Policy

You can read [our social media policy in full on the BSW CCG website](#). Please find an excerpt below re: handling social media comments.





## Appendix 4

### AMEC Integrated Evaluation Framework

This 'explainer' template is available on the [BSW Partnership MS Teams Campaign Resource Centre](#). [The AMEC website](#) also contains information and prompts about how to use the tool.

INTEGRATED EVALUATION FRAMEWORK <small>amec</small>		ALIGN OBJECTIVES		PLAN, SET TARGETS & OTHER INPUTS		
PREPARATION	ORGANIZATIONAL OBJECTIVES	COMMUNICATIONS OBJECTIVES	TARGET AUDIENCE	STRATEGY		
		<p>These should link directly to the Impacts you anticipate.</p> <p><i>E.g. Deliver quality improvements to our local population. Reduce unwanted variations and improve clinical outcomes.</i></p>	<p>When you write these, you need to decide at the same time how you will measure them. They are directly linked to Outcomes. They need to be SMART.</p> <p><i>E.g. Reduce the inappropriate use of antibiotics by families with young children in B&amp;NES by 20% over winter.</i></p>	<p>Be as specific as possible.</p> <p><i>E.g. Not just 'the public' but 'children aged 7 and 8 years old, their parents and families.'</i></p>	<p>What's the current situation? How do you make sure your communications objectives are met?</p> <p><i>E.g. People take antibiotics in situations where they are not effective e.g. colds and flu, which builds antimicrobial resistance. We are at risk of running out of antibiotics.</i></p>	
IMPLEMENTATION	IMPLEMENT	MEASURE ACTIVITY	AUDIENCE RESPONSE & EFFECTS		ORGANISATION & STAKEHOLDER EFFECTS	
	ACTIVITY	OUTPUTS	OUT-TAKES	OUTCOMES		IMPACT
	<p>PESO</p> <p>What are you going to do to achieve the communications objectives?</p> <p>Paid e.g. advertising Earned e.g. media coverage Shared e.g. social media Owned e.g. website</p> <p>Separate the actual activities into chunks according to audience type:</p> <p><i>E.g. social media campaign to target parents of year 3 schoolchildren, press release to target media, radio interviews to give weight to campaign among stakeholders, prize-giving ceremony to encourage schools to want to take part, AGM to target general public and CCG partners/stakeholders.</i></p>	<p>How many people saw what you did?</p> <p>Outputs mirror Activities, but with a number next to them.</p> <p><i>E.g. If you had a social media campaign, how many posts did you issue? If you had a leaflet, how many did you print? If you issued a press release, how many times was it printed?</i></p>	<p>How did people react to your activity? Did they do what you wanted them to?</p> <p><i>E.g. Did anyone share or retweet your social media posts? If you sent an email, how many people clicked on a link? How many people came to the AGM?</i></p>	<p>Outcomes are linked to the Communications Objectives, but can be very hard to evaluate. Particularly if the campaign is to 'raise awareness' with no other specific call to action.</p> <p><i>E.g. have people's attitudes to antibiotic prescribing for colds and flu changed? Do people trust the advice of their pharmacist more?</i></p> <p><i>For awareness-raising campaigns, questionnaires are a good way to test people's understanding of your campaign.</i></p>		<p>The impact should reflect the organisational objective.</p> <p><i>E.g. B&amp;NES has a very low rate of antibiotic prescribing, outcomes for patients with X condition are the same, regardless of individual characteristics.</i></p>



Below is an example of a completed template, done for BSW CCG's 'Don't wait and worry campaign' during summer 2020:

INTEGRATED EVALUATION FRAMEWORK <small>amec</small>		ALIGN OBJECTIVES		PLAN, SET TARGETS & OTHER INPUTS		
PREPARATION	ORGANIZATIONAL OBJECTIVES	COMMUNICATIONS OBJECTIVES		TARGET AUDIENCE	STRATEGY	
		<p>To empower our population to live their best life by interacting with the appropriate NHS service at the right time.</p> <p>To reassure our population and communities that the NHS is open for business and ready to treat and care for them in a safe environment.</p>	<p>To see a 'rebalancing' (increase to pre-pandemic levels) in the attendance at outpatient appointments across the three acute trusts in BSW.</p> <p>The public are confident and comfortable to use NHS services and believe services can cope with demand.</p> <p>Public can balance the risk of catching coronavirus with the risk of not attending follow-up appointment for cancer or accessing help with their mental health.</p>	<p>Residents of BSW who:</p> <ul style="list-style-type: none"> <li>may have been referred to out- or inpatient services</li> <li>are worried about their health or the health of someone else</li> <li>have a symptom that could indicate something serious e.g. cancer or an imminent mental health crisis</li> <li>are worried about or unsure how to access NHS services during the pandemic</li> </ul>	<p>People are currently reluctant to attend 2ww referral and other outpatient appointments or access health advice (including diagnostics) because of fear of coronavirus.</p> <p>We need to educate our population about the reasons for the change to services, reassure them that their safety is our number one priority and motivate them to attend any appointments they are invited to before their condition worsens.</p>	
IMPLEMENTATION	IMPLEMENT	MEASURE ACTIVITY		AUDIENCE RESPONSE & EFFECTS		ORGANISATION & STAKEHOLDER EFFECTS
	ACTIVITY	OUTPUTS	OUT-TAKES	OUTCOMES	IMPACT	
	<p><b>Paid</b> Radio advertising with Global (Heart and Smooth FM) and Spire FM (Salisbury) featuring BSW-tailored messaging about cancer and mental health that developed with support and input from GP cancer specialists, cancer commissioner and members of our engagement panel as well as Macmillan. Total spend - £15,000</p> <p><b>Earned</b> Media coverage of our press releases, interviews with press</p> <p><b>Shared</b> Press releases</p> <p>Surveys sent to Our Health Our Future panel members</p> <p>Social media campaigns:</p> <ul style="list-style-type: none"> <li>- sharing national Help Us Help You campaign and 'Open for Business'</li> <li>- supporting partners messaging about outpatient appointments</li> <li>- CCG-driven campaign focusing on cancer and mental health</li> <li>- videos from Dr Andrew Girdher, Dr Karen Sandhu</li> </ul> <p><b>Owned</b> Directory of services on CCG website, dedicated webpage</p>	<ul style="list-style-type: none"> <li>- Radio ads run across Heart FM (Bath, Swindon and West Wilts) and Smooth Radio FM (Wiltshire), with a combined audience of 236,000 listeners</li> <li>- 41 people in Swindon Patient and Public Engagement Forum asked to feed back on proposed radio ad wording for cancer</li> <li>- BSW cancer commissioner and local Macmillan GPs asked to help develop ad wording</li> <li>- Worked with Macmillan and a Cancer Support group to test radio advert wording</li> <li>- Three press releases issued</li> <li>- 850 people from the Our Health Our Future panel were surveyed about their perception of health services during Jul-Aug</li> <li>- Approximately 40 social media posts across Twitter, Facebook and Instagram including 2 videos</li> <li>- Dedicated webpage on CCG website created, with linked homepage banner</li> </ul>	<ul style="list-style-type: none"> <li>- A total of 939 'spots' were filled with our 30 second adverts between 24 August and 2 October across BaNES, Swindon and Wiltshire with Global Radio.</li> <li>- 230 ads aired with Spire FM. <i>[Feedback on radio ads]</i></li> <li>- 1 x clinical lead from MedVivo, 1 x cancer commissioner and 3 x Macmillan GP's fed back on ad wording</li> <li>- 18 individual pieces of feedback from Swindon PPE on ad wording</li> <li>- 9 pieces of feedback from individuals living with cancer</li> <li>- Five online articles, two hits of TV coverage and one hit of radio coverage</li> <li>- 382 responses to the Our Health Our Future panel survey</li> </ul> <p>Social media reach:</p> <ul style="list-style-type: none"> <li>• 11.5k on Twitter</li> <li>• 20k on Facebook</li> <li>• 800 on Instagram</li> <li>- 122 webpage page views</li> </ul>	<ul style="list-style-type: none"> <li>• A survey undertaken by Radiocentre (industry body for commercial radio) shows radio listeners have increased their listening by 38% compared with pre-lockdown. The reasons for this include being able to listen in the background while working from home, mainly in order to 'keep in touch with the outside world'.</li> <li>• Positive media coverage, especially over broadcast platforms, such as TV and radio, can quickly reach hundreds of thousands of people, and disseminate the most important messages in a direct way. Continued coverage over a range of platforms has the ability to raise public confidence and improve CCG reputation.</li> <li>• Feedback from the Our Health Our Future survey shows residents in all areas feel informed. Those in B&amp;NES 61% and Swindon 68% consider themselves less in control of their lives than those in Wiltshire 79%</li> </ul> <p>Social media engagement:</p> <ul style="list-style-type: none"> <li>• 1.5% on Twitter</li> <li>• 2.2% on Facebook</li> <li>• 12.0% on Instagram</li> </ul>	<p>Our communications and engagement channels are growing, with greater interaction from our population and communities as a trusted source of information.</p> <p>Individuals across BSW are aware of the NHS services available to them and are motivated to interact with them at the right time and in the right place.</p> <p>Our population is confident that services are operating safely at a time of challenge.</p> <p>BSW's population and communities feel empowered to live their best life.</p>	



## Appendix 5

### BSW CCG Digital Personas

Created with demographic data from our Facebook and Instagram accounts in April 2021.

Two of our Facebook personas:



## Jenny Evans

♀
Age - 35
📍 Swindon

PERSONAL INSIGHTS	KEY CHARACTERISTICS & INTERESTS	COMMUNITY INVOLVEMENT	PAIN POINTS & GOALS	DIGITAL HABITS
<p><b>PERSONAL INSIGHTS</b></p> <p>Newly married</p> <p>University educated, studied business administration</p> <p>Receptionist for 2 years, helped her friend with her small business before</p> <p>One child, a girl aged 3 and a pet dog</p>	<p><b>KEY CHARACTERISTICS &amp; INTERESTS</b></p> <p>Family-oriented, easily anxious about her child</p> <p>Enjoys: cosy nights in, drinking wine with her friends</p>	<p><b>COMMUNITY INVOLVEMENT</b></p> <p>Volunteers at her child's pre-school</p>	<p><b>PAIN POINTS &amp; GOALS</b></p> <p>Pain point: mental health</p> <p>Goal: to be a good mum, to cut down on her alcohol and unhealthy snack habits</p>	<p><b>DIGITAL HABITS</b></p> <p>Only views our content on her Android phone</p> <p>FB is her favourite, also has private IG</p> <p>Shares photos of her child, dog, friends, nights out at weekends, celebrations</p>



## Rose Carter

♀
Age - 44
📍 Swindon

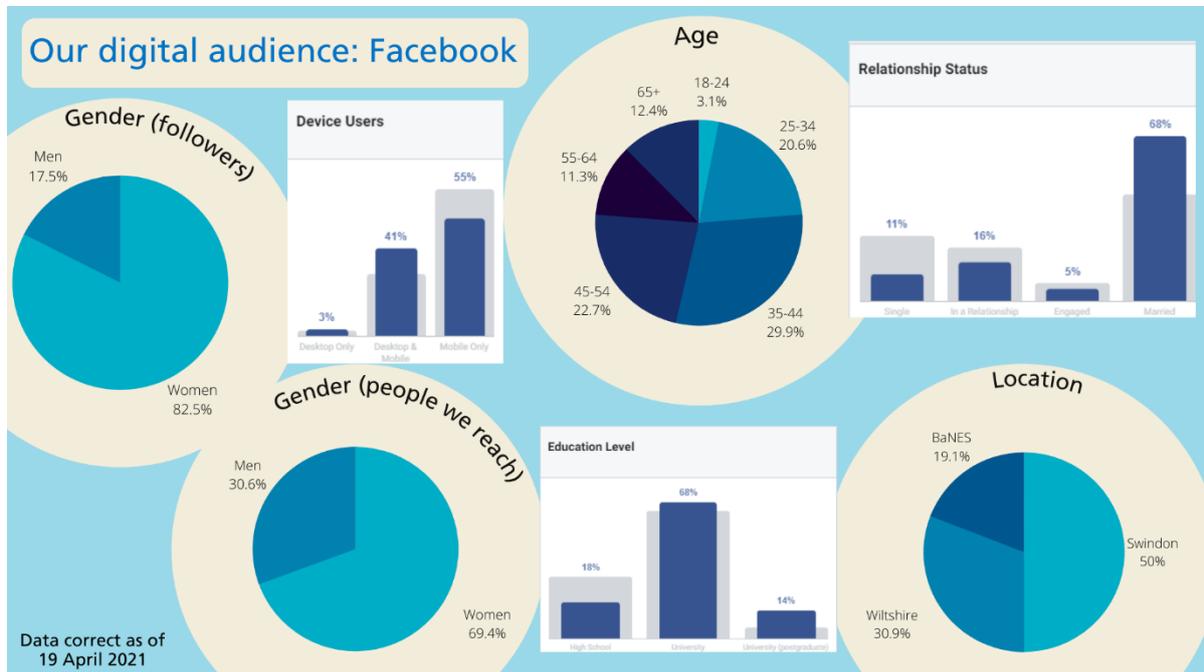
PERSONAL INSIGHTS	KEY CHARACTERISTICS & INTERESTS	COMMUNITY INVOLVEMENT	PAIN POINTS & GOALS	DIGITAL HABITS
<p><b>PERSONAL INSIGHTS</b></p> <p>Married for 10 years</p> <p>University educated, studied education</p> <p>Works as special and educational needs teaching assistant</p> <p>2 children, girl aged 15, boy aged 10, no pets</p>	<p><b>KEY CHARACTERISTICS &amp; INTERESTS</b></p> <p>Environmentally conscious, always up for a challenge, adventurous</p> <p>Enjoys: long walks with her family, visiting National Trust sites, being outdoors, gardening, holidays abroad, hiking with friends, cycling</p>	<p><b>COMMUNITY INVOLVEMENT</b></p> <p>Sponsored walks and runs to raise money for various cancer charities</p>	<p><b>PAIN POINTS &amp; GOALS</b></p> <p>Pain point: lost her sister to breast cancer</p> <p>Goals: to support her children to be healthy and fit and teach them the benefit of living a healthy lifestyle</p>	<p><b>DIGITAL HABITS</b></p> <p>Only views our content on her iPhone</p> <p>FB is the only social media site she uses</p> <p>Shares photos of her family, outdoors, friends' challenges</p>



## One Instagram persona:

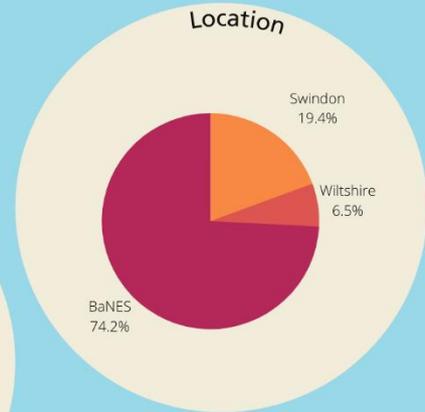
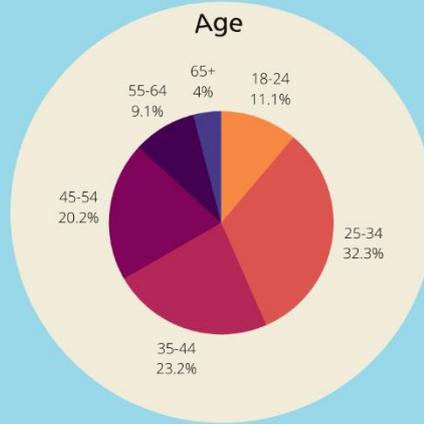
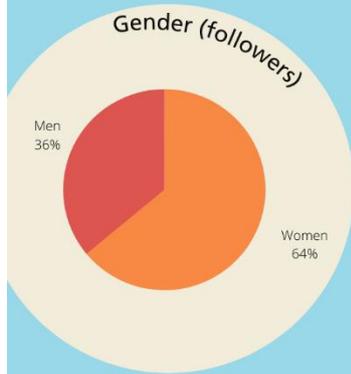


The below charts give more detail about the composition of our Facebook and Instagram audience – compiled in April 2021.





## Our digital audience: Instagram



Data correct as of 19 April 2021