



Exploring the use of social media to encourage better discussions around health and social care in West Yorkshire and Harrogate



February 2018

Contents

1.0	Executive summary	5
1.1	Context	
1.2	Summary of our key learning	
2.0	Background	8
2.1	Agreed approach	
2.2	Staff resources	
3.0	Social media channels	10
4.0	Content types	11
4.1	Patient stories	
4.2	Local positive stories	
4.3	News and campaigns from other organisations and influential people	
4.4	Stories that challenge misconceptions about the NHS and social care	
5.0	Schedule of work	13
6.0	Impact of the approach	17
6.1	Understanding social media engagement	
6.2	Impact	
7.0	Mapping / tracking options	19
7.1	Facebook analytics	
7.2	Twitter analytics	
7.3	Bluenod	
7.4	Audiense	
7.5	Hootsuite	
7.6	Talkwalker	
7.7	Monitoring / tracking of individuals and organisations we engage with	



8.0	Key learning points in detail	29
8.1	Create strong and reciprocal relationships with social media assets in our communities	
8.2	Target audiences with appropriate content	
8.3	Utilise technology to establish trends and data	
8.4	Use accurate, easy to understand and straight forward campaigns, brands and hashtags	
8.5	Commit to working in partnership	
8.6	Ensure that campaigns are appropriately resourced	
9.0	Proposed methodology for engaging using social media	32
9.1	Planning	
9.2	Daily tasks	
9.3	Evaluation	
10.0	Next steps	34



For many people in West Yorkshire and Harrogate, health and wellbeing conversations are inextricably linked to the future design of NHS services. When we talk about health and wellbeing, we talk about hospitals, GPs, and A&E waiting times.

At the same time, our partners in Public Health will tell us that although we spend nearly 90% of all NHS funding in our hospitals, access to medical care only contributes to 10% of our overall health and wellbeing. Public Health tell us that 20% of what makes us healthy is genetic, that 20% is drawn from where we live, and the jobs that we do, and that 50% of our health comes from the decisions that we make on how to live our lives. What we eat, smoke and drink, the friendships that we make, and the exercise that we do are as important to our health as everything else put together.

This work explores whether we can use social media to start a set of different conversations with our communities, to recognise that on its own, the NHS is not the answer, and is never going to close the financial, quality and inequalities gaps that we face. It is part of an argument for a different relationship with our communities, where people are active partners in their own health, and not just consumers of healthcare services. It explores how we might use social media to start new conversations about the NHS in West Yorkshire and Harrogate, about wellbeing in all of our communities, and about what really makes us healthy.

What Makes Us Healthy



What We Spend On Being Healthy



Rory Deighton, Director of Healthwatch Kirklees

1.0 Executive summary

1.1 Context

The idea of a changed conversation and relationship with people, patients and carers in our communities has been raised across our partnership in the last 18 months.

In the summer of 2017 we invited Cormac Russell (Managing Director of Nurture Development) to deliver a number of training sessions around harnessing the power of communities. As part of this he urged us to start to see communities as assets that can generate their own health, as opposed to consumers that need to be provided with services and solutions. Cormac advised us to focus on understanding the community assets that exist in our local communities. He wanted us to understand what's important to people, because it is the notion of community itself that will support resilient and healthy behaviours amongst people, patients and carers.¹

West Yorkshire and Harrogate Health and Care Partnership (HCP) members like Leeds GP, Andy Sixsmith called the changed relationship between patients, communities and the NHS "the most important transformation - we will just keep adding sticking plasters until it happens."

In October 2017, the York Health Economics consortium noted in their advice to our partnership that "Recognition that changing how patients and the public access services and manage their health conditions is a fundamental element of the change needed but (there is) no clear plan to address this."

In January 2018, HCP lead Rob Webster asked us to "stop organising on the premise that people are visitors to our institutions who bend to our will, and start seeing we're one of many guests in people's lives. Doing so quickly gets us to see people as assets and engage with our partners in the charity and third sectors, as well as within the NHS and local authorities, to harness the knowledge and expertise of all the people involved in someone's care."²

In January 2018, The Kings Fund wrote that "Future models of community-based care should support people to take control of their own health as far as possible. This might involve encouraging people to lead healthier lifestyles, improving their understanding of their health or supporting them to manage long-term conditions."³

This work is a contribution to that discussion. It recognises that our partnership has finite resources, and explores how we might use social media as a tool to contribute at scale and pace to a changed discussion on the future of health and wellbeing in West Yorkshire and Harrogate. It aims to be part of our partnerships approach to seeing our communities as assets, about a new relationship with people, patients and carers, and about what really makes us healthy.

1.2 Summary of our key learning

The partners involved in the Power of Communities work stream understand it is critical that the conversation with the public around health has a different focus; that we start a more proactive

¹ <http://tedxexeter.com/2016/05/13/cormac-russell-sustainable-community-development-shifting-the-focus-from-whats-wrong-to-whats-strong/>

² <http://www.nationalhealthexecutive.com/Comment/hidden-in-plain-sight-rob-webster-on-his-stp>

³ <https://www.kingsfund.org.uk/publications/community-services-assets>

and positive discussion about protecting our personal wellbeing to maximise our health, which simultaneously protects the NHS by managing our own demand on the health and care services.

Working in partnership with Kirklees Council Public Health team, Healthwatch Kirklees has explored using social media to influence the way that people talk about health. This 3-month trial has produced significant amounts of learning around the most effective ways to reach people, encourage them to engage with the content, and influence the discussion. Our work has been tied together using the brand/hashtag #changetheconversation, and below we document our learning through trialling this social media campaign.

We are asking the Partnership to consider whether it wants to invest resource in this area, in the same way that it would any other priority workstream.

1.3.1 Impact in numbers

From October to December 2017, the #changetheconversation posts shared by Healthwatch Kirklees and Calderdale reached over 250,000 people in West Yorkshire and Harrogate. Over 11,000 people reached by these posts engaged with them by reacting, sharing, or commenting on them. These figures are the result of 126 posts shared through Facebook and 158 posts shared on Twitter.

Key figures are:

- Facebook posts generated a reach of 91,484 people.
- Twitter posts generated a reach of 158,767 people.
- Twitter posts on a daily basis were seen by an average of 2,200 people per day.
- The campaign received 352 retweets and 522 likes on Twitter.
- The campaign produced week by week increases in the number of social media followers for Healthwatch Kirklees and Healthwatch Calderdale, increasing the organic reach of the #changetheconversation posts.

1.3.2 Six key learning points

We completed week by week reviews of the campaign resulting in a series of key learning points about how to deliver a meaningful and engaging social media campaign on health:

1. Create reciprocal relationships with social media assets in our communities

- Building a map of local influential stakeholders helped us to understand who we should be targeting our messages to for maximum engagement. These accounts were not always those with the biggest social media footprint.
E.g. The local upcycling charity, Streetbikes, were much more proactive in sharing our content than Huddersfield Town FC, a large football club with 135k Twitter followers.
- Local community organisations proved to be vital for connecting with active members of the community. Local organisations most typically have an active following because communities have chosen to follow the particular organisations because of their interests so they provide a network of people willing to share messages. The combination of working with people who are both local and interested is more likely to create engagement with a campaign.
- To maintain these local relationships, we need to reciprocate and help partners to share their messages as well.

2. Target audiences with appropriate content

- It's critical to ensure that there are frequent posts of good quality, new content. The quality and relevance of the posts is the first priority; sharing large quantities of national messages/existing content does not equate to greater reach.
- Innovative and newly created content were the most successful social media posts.
- Videos proved to be more successful than images in terms of both reach and engagement.
- It's important to understand and build on your existing local assets. Promoting a topic that your community is involved with enables your audience to act as an asset, and secure significant additional exposure.
E.g. The national loneliness work completed by the Jo Cox Foundation and Age UK.
- A library of resource, videos, images and knowledge of local groups is useful in the preparation stage before the work begins.

3. Utilise technology to establish trends and data

- Online technologies allows you to identify key assets, and to measure the reach, engagement and impact of the work. The project tested a variety of types of subscription based technologies, costing around £30 a month.
- Having access to more sophisticated software and keyword searches for geographical areas could provide the WY&HHCP with the ability to track and delve into the conversations within the West Yorkshire and Harrogate area. With the ability to target key messages around real time conversations on 150 media platforms. This would cost the partnership c£5000 per year.

4. Use accurate, easy to understand and straight forward campaigns, brands and hashtags

- We built a brand #changetheconversation for this project. Providing people with a short, user friendly hastag which they could make use of worked well for our project.
- On reflection we considered whether this brand was right and whether place based brands #positiveleeds, #healthyyorkshire, #changepalderdale or #+veWY would be more effective in the future.

5. Commit to working in partnership

- We need to fully utilise the assets we have in our partnership. We work with leaders, Trusts, CCG's and organisations across West Yorkshire and Harrogate with significant and diverse followings, and we have seen examples of their involvement in sharing and retweeting significantly increasing the impact of a social media post. e.g. Social media reach from the unpaid carers Event in December 2017 was the highest of the campaign as it was actively supported by our partnerships system leaders.
- In contrast the Arthritis video in week 11 was advertised but not picked up by partners, and partners did not sign up to the "Thunderclap" planned for December 2017. We can leverage better results if we all work together.

6. Ensure that campaigns are appropriately resourced

- The project was resourced by Healthwatch in Kirklees as a contribution to the wider work of the Partnership. Two dedicated staff members (marketing and media creator) enabled this work and allowed for additional creativity, immediacy, and a willingness to try things out. Without their commitment and dedicated time, the reach, engagement and impact would have been significantly less. This type of work requires dedicated resource.
- Paid advertising even with a very small budget is a great benefit to a campaign. It increases reach and can be targeted to demographics and locations.

2.0 Background

The Power of Communities work stream for the West Yorkshire and Harrogate Health and Care Partnership (WY&HHCP) looks to value and support the contribution that patients, carers and voluntary groups make to health and wellbeing in our area.

The work stream identified four areas of work to explore a changed relationship between patients, carers and communities, and the NHS and social care.

- Build capacity across West Yorkshire and Harrogate Health and Care Partnership in Asset Based Community Development approaches
- Involve the voluntary sector in the work of the WY&HHCP
- **#Changetheconversation to explore the use of social media in talking to communities**
- Develop an approach to better support unpaid carers

Initial discussions on #changetheconversation involved WY&HHCP communications staff and meetings with Public Health to discuss overlaps and shared opportunities. This led to a set of aims for the project.

The main aims of #changetheconversation were to use social media;

- To explore how the West Yorkshire and Harrogate Health and Care Partnership might use social media to start new conversations with communities in West Yorkshire and Harrogate about Health and Wellbeing
- To develop a broader debate about the future of the NHS and social care services in West Yorkshire and Harrogate, beyond the traditional narrative of cuts, privatisation, rationing and service closures
- To help broaden the discussion of the role individuals can have in their own health and wellbeing
- To raise awareness of the opportunities available to help people; to improve their health and wellbeing, and celebrate the difference these are making in our communities on a regional and national level

#changetheconversation explores the idea that we can use social media to build relationships with thousands of people quickly, enabling us to share a different vision for health and wellbeing in West Yorkshire and Harrogate.

2.1. Agreed approach

Initial discussions with Public Health included Ian Cameron (Director of Public Health Leeds,) and Emily Parry-Harris (Consultant in Public Health Kirklees) with Rory Deighton (Director of Healthwatch Kirklees) and Helen Wright (Director of Healthwatch Calderdale). There was an obvious overlap with Public Health messages that we wanted to explore as part of this project. It was agreed that one of the objectives should be to create a proposed methodology for engaging using social media that could be replicated in different organisations across the partnership.

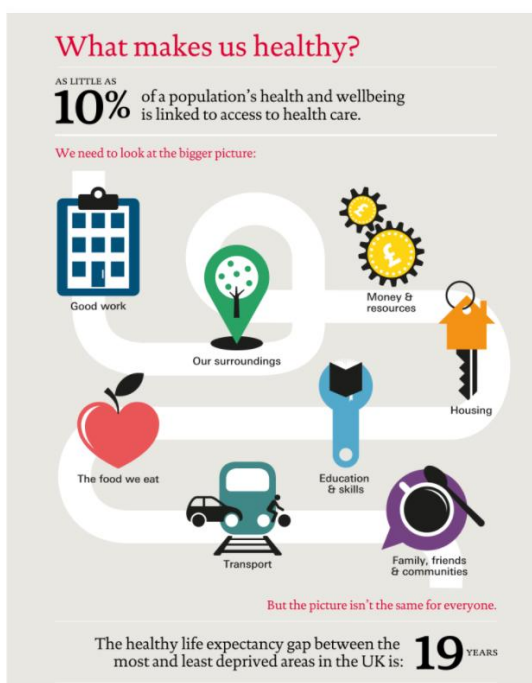
Each week different approaches, themes and subjects were trialled to try to learn lessons on the best methods for starting conversations with communities. We used a variety of software to understand the social media assets in communities, to track messages, and to evaluate the success of different styles of message.

There is an obvious overlap between the content of this programme and the messages that Public Health want to promote. We have developed a way of working that builds a different kind of reciprocal relationship with assets in our community, working with them to promote “good” messages rather than prescribing the message.

Change the Conversation was trialled during October to December 2017 in the Kirklees and Calderdale areas. Throughout this time, Healthwatch in Kirklees and Calderdale shared positive health and wellbeing messages, specific to their local authority areas. Messages included;

- Motivational patient stories, encouraging others to take a more active role in their own health and wellbeing.
- Positive stories and organisations within the local area who are providing services to inspire people in West Yorkshire and Harrogate to become more active or take better care of themselves.
- News and articles from other organisations and influential people to broaden people’s understanding of health and wellbeing.
- Stories which challenge misconceptions about NHS and social care, provide data and figures to inform the public that the biggest impact on their health isn’t the NHS but how they live their lives.

Whilst we rely on hospitals, GP’s, care homes and dentists to look after us, the thing that has the biggest impact on our health is how we live our lives.



A page on the Healthwatch Kirklees website was also created to hold all content and stories we released <https://healthwatchkirklees.co.uk/change-the-conversation/>

2.2. Staff resources

Much of the work programme and social media content was designed by Stacey Appleyard (Communications Healthwatch Kirklees) supported by Rio Kisjantoro (Animation/Designer Healthwatch Kirklees). Rio and Stacey created the branding for #changetheconversation. Weekly programmes of activity were signed off by a project team comprising Rory, Rio, Stacey, Emily and Helen. A week by week programme of the work and key learning points are available to view in the appendix document.

The more that we resource this kind of work the better results we will get, but there is a clear need to invest quality staff time and resource to make this idea work.

3.0 Social media channels

The content was collected, created and shared via:

- Healthwatch Kirklees and Calderdale websites: content was shared on Healthwatch homepages and also a dedicated #changetheconversation webpage
- Social media accounts such as Facebook, Twitter and Instagram.
- Volunteers and staff also used outreach sessions within the local area as an opportunity to source motivational patient stories.
- WY&HHCP partners were provided with particular posts and dates for which they could share content using their own communication channels.

The project used Twitter, Facebook and Instagram to share content, ideas and stories. Stories were shared from the Healthwatch accounts and all used the #changetheconversation branding.

We used Facebook and Twitter as two established and different social media channels for simplicity, and researched their advantages and restrictions.⁴

We also worked with WY&HHCP partners to encourage them to share messages across their networks. With 11 CCG's, 6 Councils, large Hospital Trusts as well as system leaders across the region we have the potential to work as a partnership to achieve significant reach into our communities.

The planned release of the Arthritis hip and knee operations video <https://youtu.be/TMZdp3q5o9k> in week 11 was promoted in the Partnerships weekly newsletter where partners were asked to retweet and share widely. We need to leverage the support of the whole whole partnership to get messages out to our communities. Significant social media footprint is an asset that we are not exploiting. If we could sign 100 partners to a Twitter "Thunderclap" (A Thunderclap is an online tool that allows the same social media message to be shared at the same time, which can significantly increase the reach of a post and improve engagement) we would have an estimated reach in West Yorkshire of 135,000 people per message.

⁴ <https://sproutsocial.com/insights/facebook-vs-twitter/>

4.0. Content types

4.1 Patient stories

Patient stories were collected via outreach events, volunteers, Healthwatch Kirklees website and social media users.

An online form was available on the Healthwatch Kirklees website which consisted of four questions to collate the information required to create case studies, GIFs, videos and/or animations. People were also able to tell their story in multiple formats such as audio recordings and video if they wished, which was organised via the website form and staff members arranging meetings to take recordings of stories and experiences.

These stories and experiences were used throughout the change the conversation campaign on websites and social media mediums. WY&HHCP partners helped share the stories and content on social media to help increase exposure of the key messages.

This strategy produced some real, local vibrant content.

e.g. <https://healthwatchkirklees.co.uk/allysons-story/>

4.2 Local positive stories

Local communities offered a range of different positive stories. We identified issues that contained a health and wellbeing element and shared them widely. This included promoting BeBe Beauty in Roberttown when they offered free beauty treatments for patients undergoing cancer treatment. We also filmed the Co-Operative Nursery in Dewsbury visiting a care home in their local area as part of a story on social isolation <https://healthwatchkirklees.co.uk/nursery-visit/> which led to our most successful piece of news content.

4.3 News and campaigns from other organisations and influential people

Creating links with other organisations and their news/articles provided additional content. The types of organisations we shared content from were:

- WY&HHCP work streams, partners and leads
- Voluntary and community organisations - such as Streetbikes CIC in Kirklees
- Public Health England - e.g. Stoptober campaign
- NHS England - NHS 70 information
- The Guardian - new ideas for health and wellbeing
- BBC News - new ideas for health services such as using virtual reality with patients

A full breakdown of the resources we used from each of the organisations can be found in the appendix document.

Having a stock of resources such as those above reduces the need to find suitable content on a daily basis. However, stock external communications must be used alongside targeted local messages or your local social assets will lose interest.

4.4 Stories that challenge misconceptions about the NHS and social care

To support the change in conversation, we sourced news articles and stories, which challenged misconceptions about the NHS and social care in our local area. Such as that being in hospital is the best place to be; that only a GP can provide the right level of care and advice.

DRAFT for core team Feb 2018



5.0 Schedule of work

The work was completed over 13 weeks from October to December 2017. We have summarised each week's activity below. Links to a detailed description of weekly activity can be found in the appendix document.

Week	Content	Notable features
Preparation weeks	In preparation for the campaign, stock resources such as Health and Wellbeing images and videos were collected and stored. This gave us a bank of materials, which could be used throughout the campaign and as a safety net if staff resources were not able to find suitable content for a particular week.	
Week 1	Week one was focused upon finding information and resources that would provide stories and social media posts that the public in Kirklees would be interested in and join in the conversation. We began with a national public health message as it was Stoptober and other organisations were also sharing similar messages, this also worked in favour for Healthwatch as the content and videos were already created.	• Utilising national campaigns with pre-prepared content + Pre-existing resources = less demand on staff to create new content - National message meant less engagement with local communities
Week 2	Week two was investigating a local focus to the campaign such as using patient and staff stories we had gathered and created ourselves in the form of case studies and videos. This was to examine if the local messages were more successful with reach and engagement than the national posts from the previous week. Direct messages were sent to all mother and baby/parenting groups on Facebook to see if this approach would generate message sharing. The demographic profile of these groups often generate good results.	• Focus on local messages and content generated by Healthwatch + Increase in engagement with content, especially when targeted at specific local groups with relevant interests
Week 3	In week three the focus was connecting with Twitter users who had a large follower and influence base such as Huddersfield Giants . This	• Connecting with local Twitter accounts with sizeable following



Week	Content	Notable features
	was to evaluate if we could reach people we had never spoken to previously, identify assets, increase our reach but also form strong community relationships. This week also began the weekly format for the campaign which was a mixture of local and national stories, based upon previous successful posts.	- These accounts often have specific content they are interested in posting, and are less likely to share content that they don't see as relevant to them
Week 4	In week 4, the main focus was local and national loneliness campaigns . This was a focus due to the popularity of the previous social media posts around older people and loneliness in week 1 and 2.	• Revisiting successful content from previous weeks + Maximise on the success of the posts to retain conversation with and influence on the public
Week 5	Week 5 content was focused on topical dates and campaigns such as Halloween and Movember . For this week in particular we tried to find posts which would be approachable, friendly and humorous for users to see if this style of tone of voice was received well. This was to see if the brand could tackle serious subjects but also be engaging with the public.	• Using topical/timely information and introducing it with humour - Lower levels of engagement with the posts
Week 6	In week 6 we did not pre-plan content for change the conversation. We wanted to explore, how engaging in conversations and news, which already existed affected the campaign results. This week was about joining conversations which already existed around positive health messages and how to increase the amount of people we can influence. This week helped us to identify the importance of reciprocity in our approach.	• Joining existing conversations around health based on key topics during that week + 3rd highest week for reach and engagement - making it clear how important it is to be able to take part in existing conversations + Really critical to make sure that those people who you are expecting to re-tweet/share your information feel like you will do the same for them
Week 7	In week 7 both Healthwatch Kirklees and Healthwatch Calderdale released similar messages regarding self-care week , tailored to local audiences and information. We were exploring a new subject, but also	• Testing expanded footprint using Healthwatch Calderdale's social media as well as Healthwatch



Week	Content	Notable features
	expanding messages into Calderdale.	Kirklees
Week 8	Week 8 looked into finding and creating our own content for future social media posts. We believed that we were getting better traction through individual and localised messages . In addition, we continued to release social media messages from Kirklees and Calderdale social media channels.	- Focusing on content that we have created + Realisation that we get a better response to content that is created in-house - Creation of content is time consuming and labour intensive, limiting the amount of active social media work that can be done
Week 9	Week 9 continued to find the correct balance between different types of stories and messages for both Calderdale and Kirklees social media accounts. Using all of the learning we had gathered and applying it to the campaign on a daily basis.	As in Week 8
Week 10	Week 10 was the planning stage for the large nursery filming project we had planned. Due to the allocation of resources social media posts were based upon winter pressures and other organisations content such as “Choose Well” related posts. We worked with Public Health England messages around “Stay Well This Winter” and flu vaccinations as many other organisations were also sharing this content.	- Variety of different posts with allocated time for developing innovative content - Partnership working around Public Health messages - sharing similar messages at the same time + Important to maximise impact of the messages going out by sharing them at the same time as other organisations + Necessary to plan in time to create content
Week 11	Week 11 was paid video week, this was a planned advertising week showcasing all of the videos we had created and shared throughout October and November. This was to investigate the difference between organic and paid posts on all social media channels. Voluntary sector Organisations in West Yorkshire and Harrogate, and WY&HHCP partners were asked to share a video post about hip and knee operations .	- New content being shared through paid advertising and organic reach + Significantly higher numbers of people seeing our content and engaging with it + Different people from those who are already interested in our work



Week	Content	Notable features
Week 12	Week 12's plan was to accumulate all of the previous weeks learning and to produce an ideal week for the change the conversation campaign. The week consisted of a local patient motivational story , a controversial news story around ambulances and paramedics , a national loneliness campaign and the self-created nursery visit to the care home video .	• Full range of different types of post, but without paid advertising + 4th most successful week for reach and engagement
Week 13	Due to the amount of resources which were required for the planning and filming of the nursery visit to the care home , we decided that the video should be shared as widely as possible rather than only being viewable for one day. Paid advertising of this video over the Christmas period was planned and completed.	• Use of paid advertising for new content - Significant amount of time dedicated to creating the content + Highest reach in 13 weeks - both organic and paid reach



6.0 Impact of the approach

6.1 Understanding social media engagement

Throughout the project we measured reach, impressions and engagement.

Reach is the total number of people who see your content. **Impressions** are the number of times your content is displayed, no matter if it was clicked or not. **Engagement** occurs when people respond to or interact with your messages.

“Learning the difference between reach vs. impressions is sometimes a little convoluted, but it’s not impossible to understand. Once you distinguish the two metrics, you begin working toward the most important one of all: [social media engagement](#).”

A common goal behind every social media campaign is increased engagement. If your content isn’t getting likes, replies or shares, something is wrong—either on the creation or targeting end.

Awareness comes before engagement, and reach and impressions drive people to take action. You can’t have one without the other, and you can’t improve one without also tweaking the others. So when you’re thinking about how to increase engagement, do so while also considering how reach and impressions play into it.”⁵

6.2 Impact

From October to December 2017, the #changetheconversation posts shared by Healthwatch Kirklees and Calderdale reached over 250,000 people in West Yorkshire and Harrogate. Over 11,000 people reached by these posts engaged with them by reacting, sharing, or commenting on them. These figures are the result of 126 posts shared through Facebook and 158 posts shared on Twitter.

Key figures are:

- Facebook posts generated a reach of 91,484 people.
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- Twitter posts on a daily basis were seen by an average of 2,200 people per day.
- The campaign received 352 retweets and 522 likes on Twitter.
- The campaign produced week by week increases in the number of social media followers for Healthwatch Kirklees and Healthwatch Calderdale, increasing the organic reach of the #changetheconversation posts.

Six advertising campaigns ran over Facebook and Twitter at a total cost of £140.00.

There was an increase week on week of Facebook and Twitter followers which provides a larger organic base when sharing social media posts. Between week 6 and week 7, Healthwatch Calderdale’s social media followers are added to the figures.

⁵ <https://sproutsocial.com/insights/reach-vs-impressions/>



Measurable	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13
Facebook Reach	4716	1143	2364	1642	1459	1977	1224	1272	1703	932	13723	5512	53817
Twitter Reach	8882	8685	8515	10288	4165	16205	7411	9987	2957	9266	19624	11134	41648
Instagram Reach	0	301	496	130	253	263	0	147	0	444	0	0	0
Total Reach	13598	10129	11375	12060	5877	18445	8635	11406	4660	10642	33347	16646	95465
Facebook engagement	275	96	126	109	63	92	51	72	103	61	694	974	5918
Twitter engagement	146	227	110	275	96	307	234	224	60	119	145	187	150
Instagram engagement	0	17	26	5	19	25	0	16	0	18	0	0	0
Total Engagement	421	340	262	389	178	424	285	312	163	198	839	1161	6068
Total Number of people sharing and retweeting	18	49	25	45	35	74	47	52	56	52	N/A	N/A	N/A
Paid advertising	0	0	0	0	0	0	0	0	0	0	4	0	2
Advertising Costs	0	0	0	0	0	0	0	0	0	0	£40.00	£0.00	£100.00
Facebook Page Followers	525	536	535	536	536	536	747	748	752	752	763	774	776
Twitter Account followers	2184	2206	2226	2241	2256	2280	3564	3579	3595	3595	3644	3699	3706

As the results show the most successful week was week 13, this was partly due to the amount of paid advertising in the final week (£100) but also the organic reach of the Nursery Video was 35,000 views. Which proved this was the most successful piece of content we had produced throughout the trial October to December period. This type of content also collated an engagement of over 1,100 with strong sharing of the ideas.

Another aspect of the campaign that was effective was week 6, which consisted of Healthwatch being reactive to what the public were talking about on social media channels and joining other people's conversations around health and wellbeing rather than concentrating on posts that encouraged the public to join a conversation with us.

Week 6 reach and engagement results provide insight into the benefits of reciprocal relationship between communities and local organisations.

Week 11 was paid advertising week (£40) so produced a much larger reach and engagement than typical. This demonstrates that even a small amount of advertising spend can increase reach and engagement with additional people outside of those who normally see Healthwatch social media posts.

Week 12 was an ideal week in relation to the topics and formats of the social media posts. The posts were extremely well balanced between controversial news topics which were of interest to everyone, motivational local patient stories and the creative media from the nursery visit to the care home. This indicates that when everything from the key learning comes together it can influence people to talk about health and wellbeing on social media channels.

Investing a small budget into social media advertising is beneficial as it allows access to a different audience who might not normally engage with traditional messages.

7.0 Mapping/tracking options

We used a number of different tools to track the social media post performance over the 3-month period. This section explores some of the technologies that we have used or might use to better understand our social media assets.

7.1 Facebook Analytics (free)

Facebook analytics provides valuable insights into numbers of people viewing posts and demographics, it allows for understanding your audience and potential audience.

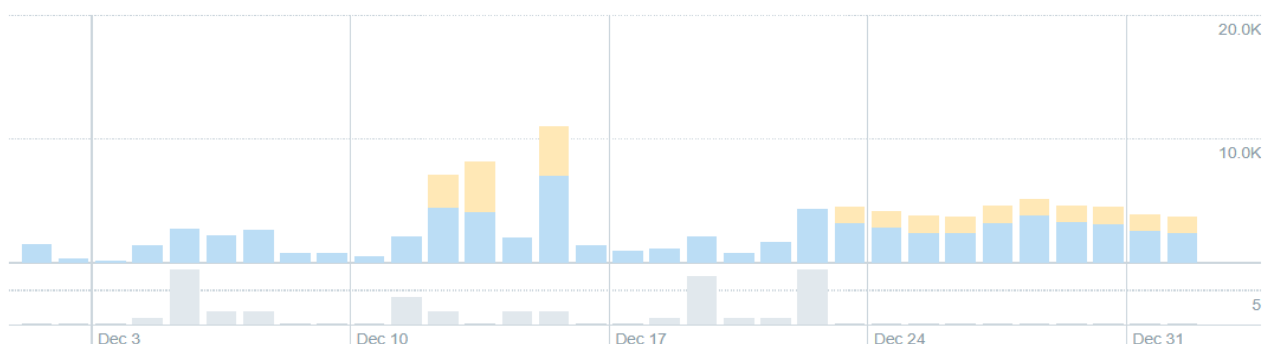
Date	Post	Type	Reach	Engagement
21/12/2017 16:09	 We are so pleased that schemes like this are happening in Kirklees and we are delighted to be able to show you what happens when two generations meet. #changetheconversation #MincePieMoments The Co-		 4.5K	 660 254
19/12/2017 15:28			 329	 4 3
19/12/2017 11:52	 Well done Allyson, on your fabulous weight loss journey. #changetheconversation Peoples health isn't influenced by the NHS but by how they choose to live their lives.		 224	 5 4
18/12/2017 11:27	 To hear Allyson's incredible weight loss story and what motivated her, click here: https://youtu.be/INj-KqA40Fk #changetheconversation		 365	 27 16
15/12/2017 13:42	 Healthwatch Kirklees shared Dentaids post.		 94	 5 0
15/12/2017 09:15	 Do you agree that conversations with patients could be done differently? #changetheconversation		 263	 22 7
14/12/2017 15:12	 Click here: www.kirklees.gov.uk/ksabsurvey to tell us what safeguarding means to you		 103	 5 0
14/12/2017 11:48	 The Dentaids van is in Ravensthorpe at the Greenwood Centre today from 2pm for anyone needing emergency dental treatment.		 126	 4 2

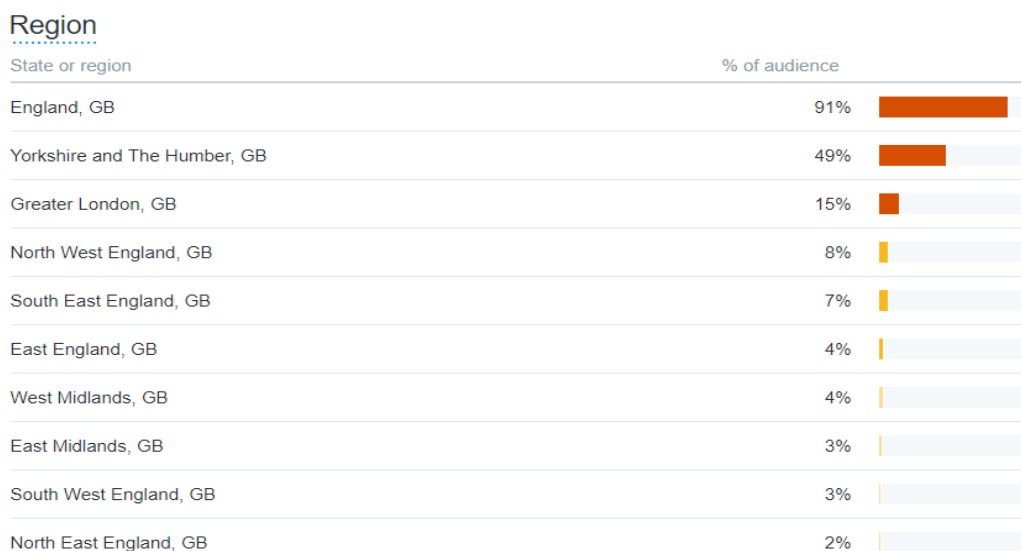
Being able to access the data regarding date, type of post (video or image), details of the posts, reach and engagement, we were able to find out which posts their followers reacted to so that we could continue to release content which was relevant and interesting.

7.2 Twitter analytics (free)

Twitter analytics enabled us to measure engagement and learn how to make our tweets more successful. It also provided the interests, locations and demographics of our followers to further show when we were directly talking to people in our geographical areas about health and wellbeing.

Your Tweets earned **99.1K impressions** over this **32 day** period





7.3 Bluenod (£360 per year)

Bluenod is an online tool which allows users to visualise relationships between Twitter accounts or hashtags. It helps build a picture of online communities and how they relate to one another.

The amount of people engaging with the Change the Conversation hashtag grew significantly over the 13 weeks and the connections between people within the community have integrated.

The close-knit cluster formations show that people who have used the hashtag are connected and talking about the same topics and subjects. If the Bluenod map dots were more spread out, it shows that people who do not typically speak about health and wellbeing were being drawn into the conversation. The larger the circle the more influence the person has over their followers and in this case it also tracked how many times an account had used the hashtag.

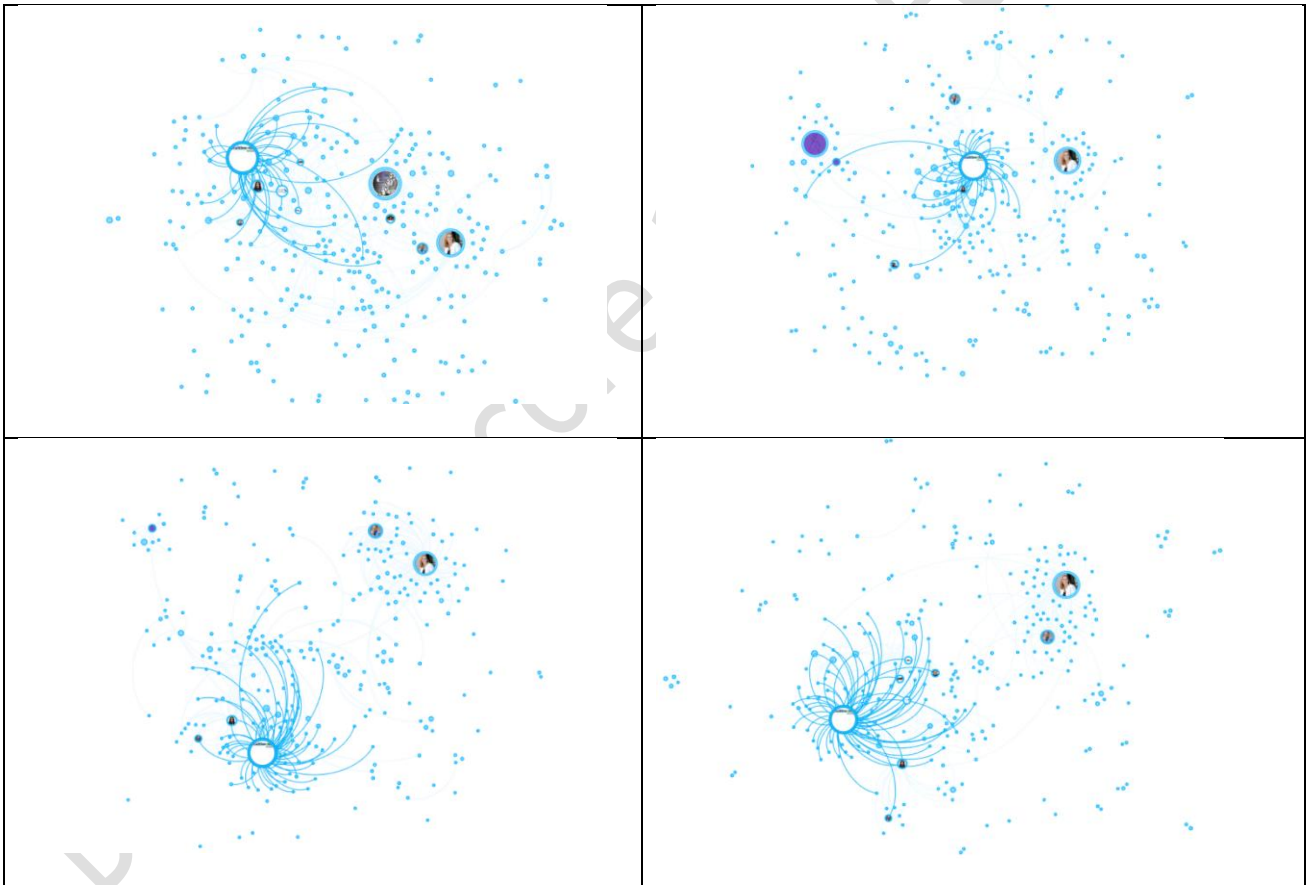
Usually it is extremely difficult to show how much a campaign has grown on twitter other than in reach and engagement however, Bluenod enabled us to visualise how many people were sharing our messages but also to show the growth of the hashtag week by week.

Bluenod mapping can be created for any account or any hashtag, you do not have to be the owner of the social media account.

Our #changetheconversation hashtag started in week one with the map below.



In the second half of our campaign we were regularly generating significant conversations across our online community.



7.3.1 Using Bluenod to benchmark our work

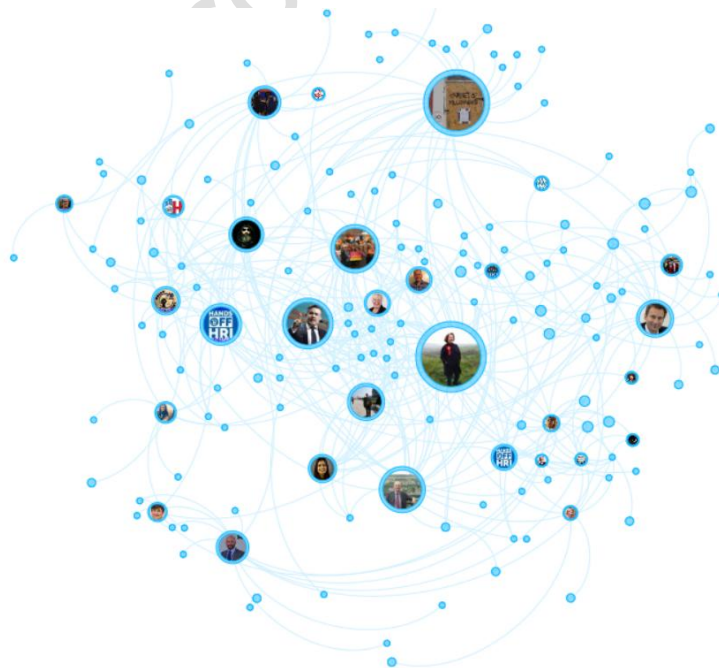
We wanted to benchmark #changetheconversation against another comparable local campaign. This would give us a way to measure the growth of our conversation. We chose to benchmark against “Let’s Save Huddersfield A&E.”

This is a group with over 40,000 members on Facebook. It is a successful example of how to use social media locally in support of a common purpose, building on local assets. The public and local newspapers regularly use one hashtag for their conversations around the subject of the reconfiguration of services at Calderdale & Huddersfield NHS Foundation Trust.

In Spring 2016, their initial “conversation” map looked like this, with a limited number of linked groups and individuals.



By December 2017, the campaigns “conversation” is wider, with a diverse set of organisations and individuals linked together. The maps below are from 4 different weeks over the period October 2017 to December 2017. All demonstrate reach and engagement with their local communities.



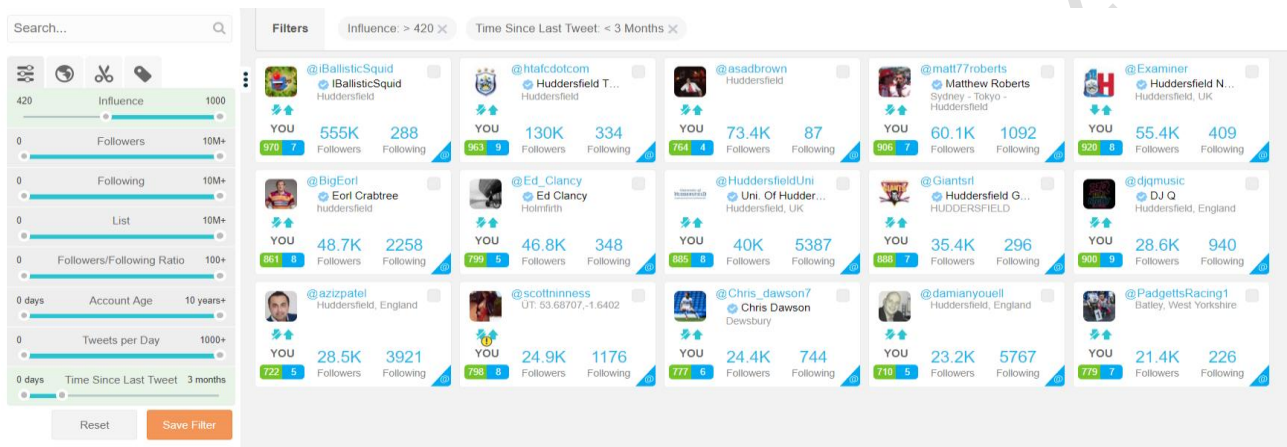
The campaign is consistent in its reach, building significantly in response to local press coverage, and significant announcements relating to the future of the hospital. It is a campaign that

people in the community are passionate about, generating reach and spreading messages organically.

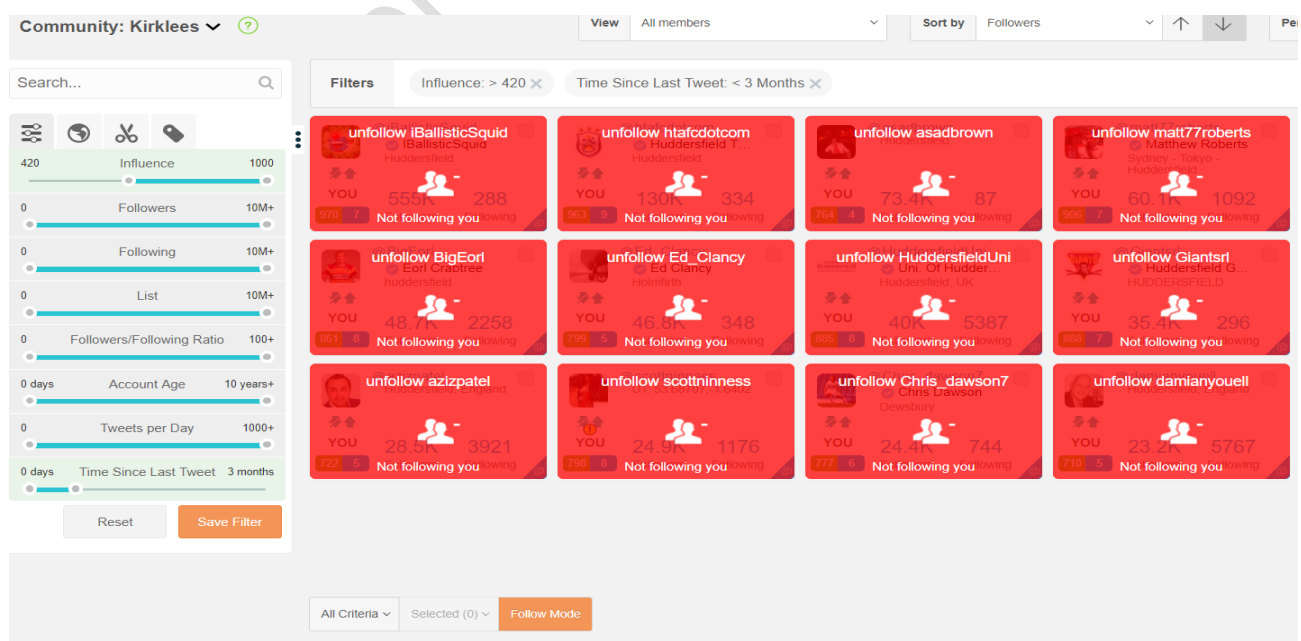
Bluenod provided us with a way of visualising the reach and engagement in the two campaigns, and benchmarking our work against a similar community of interest. Whilst we can reasonably claim that we have grown our campaigns reach and engagement, we could also argue that the maps support Cormac Russell's view that we need to be led by what is important to communities, not the solutions that we want to prescribe.

7.4 Audiense (£420 per year)

Audiense is an online program. It allows users to search Twitter accounts based on certain criteria.



Audiense was key in providing details of which accounts on twitter were influential in Kirklees and Calderdale. Providing details into what topics and subjects these accounts were currently talking about, this would then enable us to tailor messages directly to people who would be interested in our message at a certain time.



Being able to map and target messages towards influential Twitter accounts within the local area was fundamental in the campaign's success.

7.5 Hootsuite (free for limited package or £360 per year for enhanced package)

Hootsuite is an online program which allows users to schedule social media messages from one place. The program will post directly to Twitter, Facebook and Instagram from one platform. This removes daily workload but also allows for social media posts to be pre-scheduled for a date in the future.

Some video and media posts were not posted as a video or image but as a link to the content. We found that to prevent this from happening we were able to daily post messages onto the separate social media accounts.

The cost of posting and scheduling social media posts is free however to gain access to the analytics, bulk scheduling and find audiences tool available the annual cost is £360.

7.6 Talkwalker (£5,340 per year)

Talkwalker is a social media marketing analysis tool that measures in real time the responsiveness of an audience or keywords.

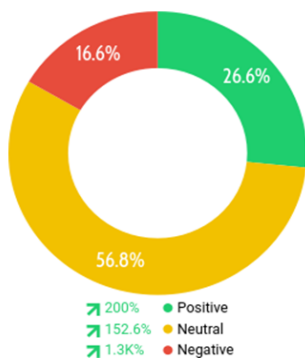
Healthwatch Kirklees did not use Talkwalker due to the high costs, but the analytics that we were presented with as part of the demonstration showed its potential. Talkwalker is able to gather information and content from 150 web based platforms, such as blogs, vlogs, Facebook, Instagram, news stories and YouTube.

The data below shows throughout November 2017 increases in reach, engagement and potential reach around #changetheconversation.

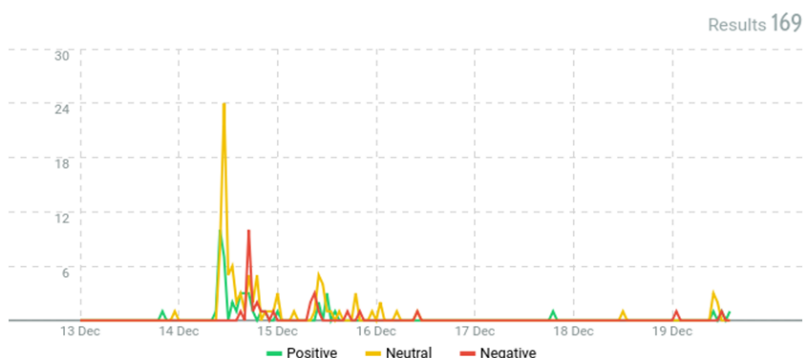


Talkwalker is able to analyse the words being used alongside the hashtag to see if the sentiment of the message is positive negative or neutral. The spike in the graph below is from the West Yorkshire and Harrogate unpaid carers event in December 2017 when the hashtag was being used frequently.

SHARE OF SENTIMENT



SENTIMENT OVER TIME



When all of the campaigns social media tactics, WY&HHCP partners and local community organisations work together, it creates a campaign that the public want to engage with. This is evident from the reach data collected around the 14th December and the West Yorkshire and Harrogate unpaid carers event (approx. 30,000 people). The partnership needs to work together on social media, as it does in any other area.

The software would allow us to identify and map key influencers, and map reach more effectively than our other tools.

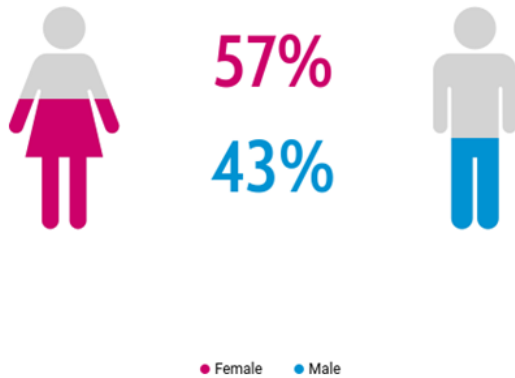
TOP INFLUENCERS

Influencers		Number of Posts	Sentiment	Reach	Reach per mention	Engagement	Engagement per mention
Healthwatch Kirklees @HWKirklees		49		114.9K	2.3K	167	3.4
Simon Whitbread @TBCSimon		27 800% ↑		35.6K 797.5% ↑	1.3K 0.3% ↓	0 100% ↓	0 100% ↓
WYH Partnership @WYHpartnership		23		10.3K	446	102	4.4
Fatima Khan.Shah @shutcake		20		7.5K	376.8	0	0
Healthwatch Calderdale @hwcalderdale		13		16.6K	1.3K	7	0.5

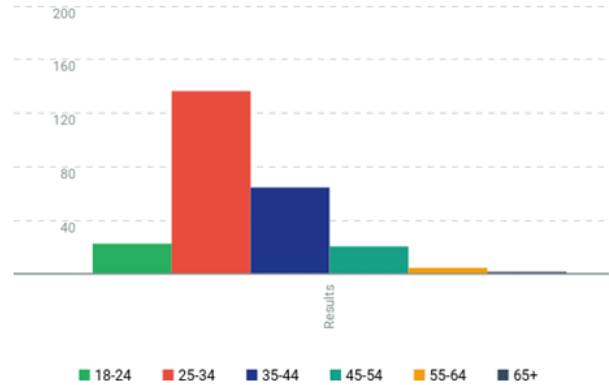
The software can map sentiment, reach and engagement as well as the demographics of the people using each hashtag.



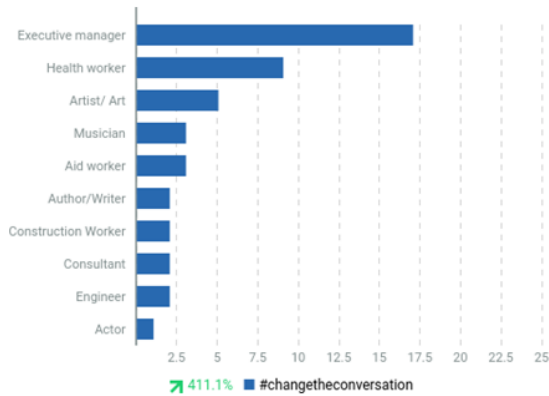
GENDER



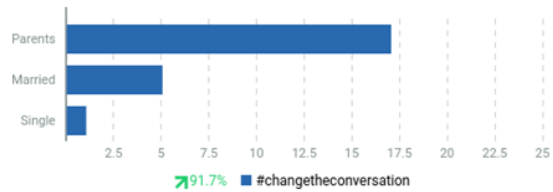
AGE



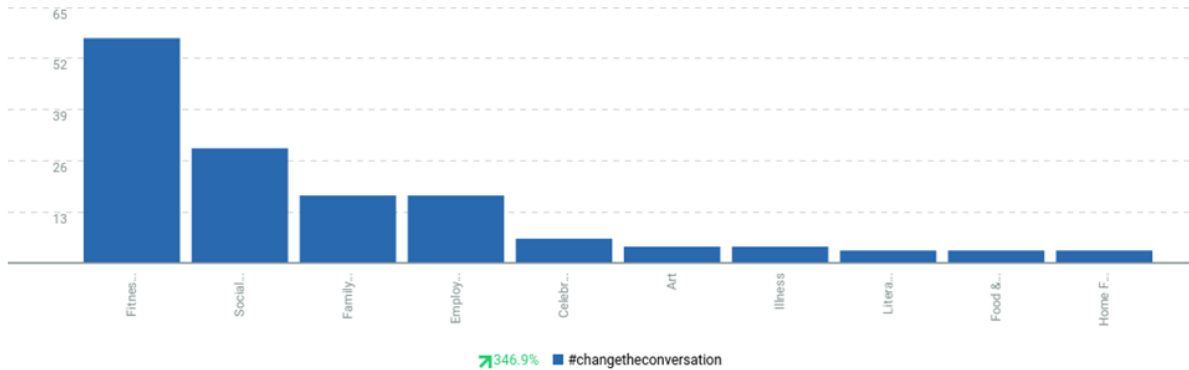
TOP OCCUPATIONS



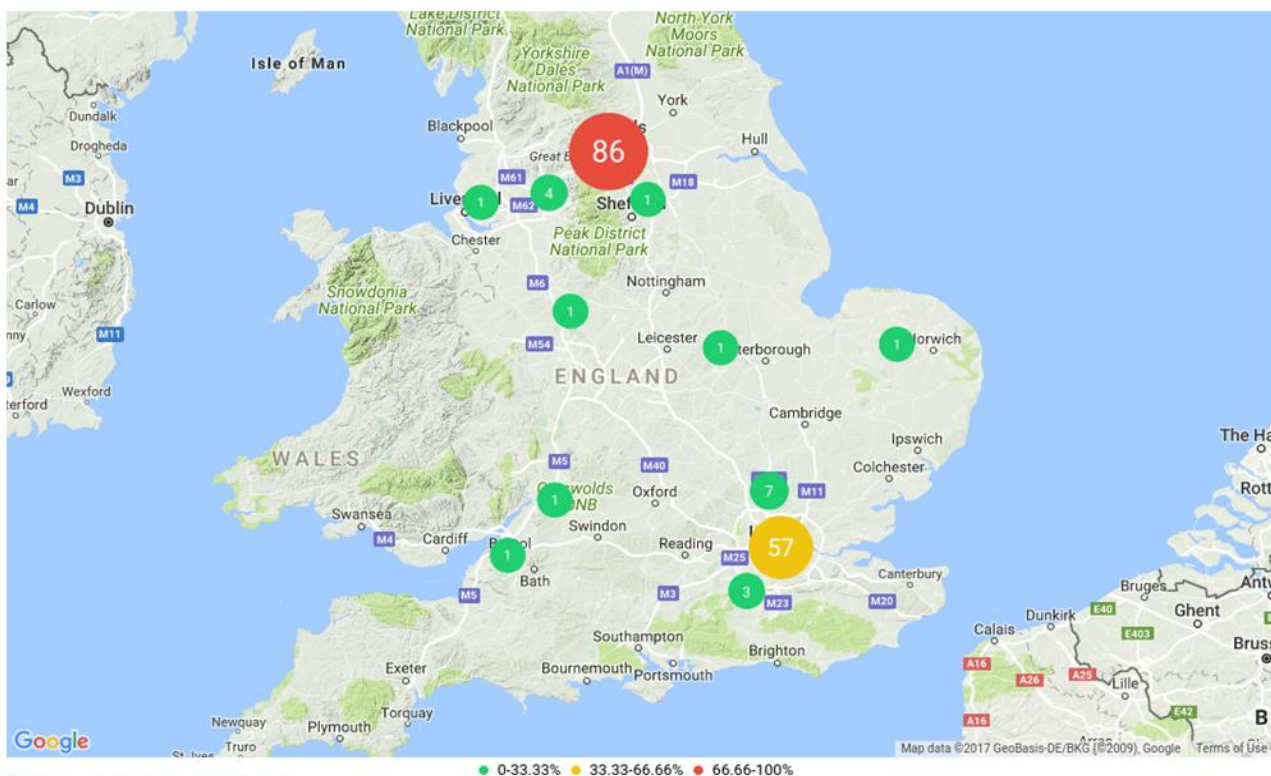
TOP FAMILY STATUS



TOP INTERESTS



Hashtags can also be mapped by location.



The software has the ability to track multiple accounts and hashtags, which could allow us to benchmark our work against that of other STP areas, even if we are not the owners of the accounts.

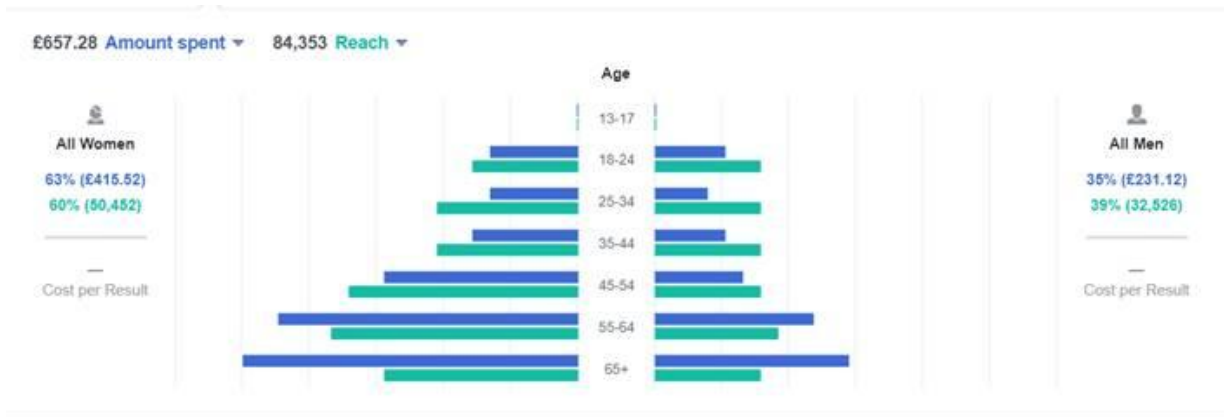
The software can also produce keyword analytics per area, so our partnership could set a geographic area such as West Yorkshire and Harrogate and find out what people are talking about regarding health in a positive and negative way, even including detail such as analysing which emoji's were used in a tweet and their relevance. This information would provide real time insight into patients and what topics are of relevance for conversations.

7.7 Monitoring / tracking of individuals and organisations we engage with

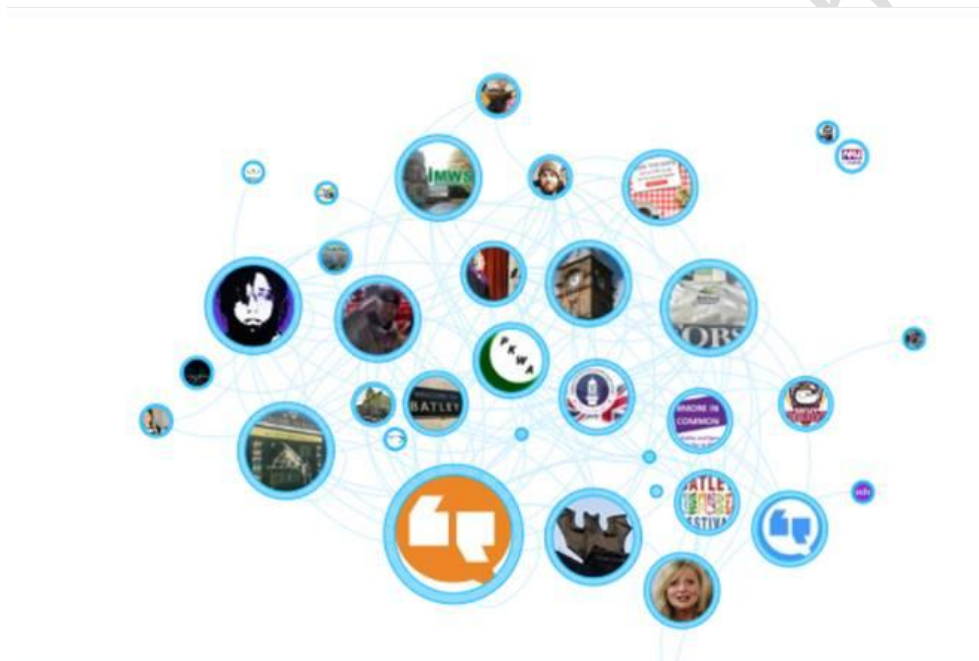
As mentioned above some of the analytics tools available would enable us to map by age, gender, location, occupation, family status and interests of individuals that engage with our messages. Whilst this doesn't provide us data on all nine protected characteristics it would support us in developing an understanding of who we are engaging with using these methods.

The analytics tool would also enable us to do this at organisation level too, supporting us to track which organisations frequently engage with us, and the type of messages that they are interested in. By knowing which individuals and organisations are engaging with us we are then able to identify any gaps and work towards addressing those gaps.

One of the ways to address those gaps is by targeting our messages, for example using Facebook enables us to target messages by age, gender, location and interest.



Whilst having a good understanding of our local Twitter assets like @IMWS_women helped us promote conversations with an active, engaged and connected group of South Asian Women in North Kirklees.



Analytical software like Bluenod Twitter Analytics enabled us to map, understand and reach out to communities and social assets in our area. We should properly investigate the additional reach and potential of systems such as Talkwalker.

⁶ Bluenod map of @IMWS_women activity from November 2017

8.0 Key learning points in detail

8.1 Create strong and reciprocal relationships with social media assets in our communities

- Local community organisations are vital for connecting with active members of the community as they provide a network of people willing to share our messages. Local organisations typically have an active following because the public have chosen to follow the particular organisations because of their interests. Coupling local and interested followers are more likely to create engagement within a campaign.
- Having a map of local influential stakeholder accounts on Twitter helped us to understand who we should be targeting our messages to for maximum engagement.
- High follower accounts such as Huddersfield Town F.C. will have a wider influence but may have followers who do not have a local interest and are less likely to engage with messages, e.g. Direct messaging via Facebook to mum and baby groups in Kirklees was extremely successful, with each group sharing the childrens flu messages to their group pages. This was because of the relevant content (childrens flu), the medium it was provided in (direct message) and the relationships which had previously being established.
- Expanding the campaign into additional geographical areas helped reach more people across all channels. Specialist local knowledge is essential to ensure that the content created is relevant.
- Additional backing from MPs is very dependant on the message. They have to feel the message is relevant to their local constituents. However, MPs do have significant social media followings and can be influential if they are willing to share information.
- An initial drop in followers is expected when deviating from the standard schedule or content when starting a new campaign. This will be counteracted by the influx of followers interested in the new content produced. A boost from paid advertising early on using Twitter and Facebook can also help increase followers initially before organically growing further into the campaign.
- #itsoktotalk is a great example of a message that began in Calderdale and helped us to connect with different groups of people. Using additional hashtags other than #changetheconversation is an easy way to expand audiences.
- Pre-planning the distribution is helpful especially for bigger pieces of work. Contacting relevant networks and ensuring the message will be spread as wide as possible before releasing it will make the message much more successful.
- Media toolkits will greatly encourage voluntary sector organisations to take part in a campaign as many organisations may not have access to the necessary communication resources or staff. This will help us spread our message and create relationships with organisations that might be interested in our campaign but lack the materials or capability to create their own content.

8.2 Target audiences with appropriate content

- The Campaign began with national public health messages such as #Stoptober. This worked in favour for Healthwatch as the content and videos were already created. This approach helped associate Healthwatch with positive health and wellbeing messages but it's important to balance local and national content.
- Videos proved to be more successful than images in terms of both reach and engagement.
- Finding a topic that your audience is particularly interested extends the long term potential of communications. E.g. The loneliness work completed by the Jo Cox Foundation and Age UK.
- Content needs to be watched and responded to so that content can be changed to reflect local conversations.
- Reciprocity is key. The campaign needed to join other organisations and people in their conversations on the subject matter to help form relationships.
- It was helpful to set an outline for the tone of voice and branding of the campaign. The tone of voice used throughout the campaign was friendly, human and approachable to ensure that trust was built between the campaign and the public.
- Uploading videos directly to social media channels rather than using a YouTube link enabled the public to see a video based on auto play rather than having to click a link, this increased the chances of people viewing the video.
- A calendar of local and national campaigns and events was achieved by connecting with Public Health Kirklees. This approach could be replicated across the partnership to maximise impact.

8.3 Utilise technology to establish trends and data

- Bluenod mapping helped us to visualise the growth of the hashtag and campaign. Bluenod unfortunately does not track how far the hashtag has travelled but who talks to who on Twitter based on the hashtag. It shows this by sectioning people into different clusters on the map based around their typical interests and conversations. For example, the map grew to show the amount of different people talking about world mental health day, some of which we had not communicated with previously.
- Thunderclap messages can share a message widely but they need planning and commitment from the wider partnership.
- Making use of paid advertising even with a very small budget has significant benefit. It increases reach and the chance of engagement with people who have never seen a post previously.
- Having access to the professional level social media software and keyword searches for geographical areas would provide the partnership with the ability to track health and care conversations within the West Yorkshire and Harrogate area, with the ability to target key messages around real time conversations. Talkwalker software could reduce this time significantly and provide programme leads with reports on a weekly or monthly basis.
- A significant proportion of our key messages were viewed by females aged 25-45 years old. it would be of benefit to further explore how a younger demographic responds to health messages by using different technology such as Snapchat.

8.4 Use accurate, easy to understand and straight forward campaigns, brands and hashtags

- Making use of a hashtag which no one else is currently using for a campaign provides accurate figures to ensure that the growth of a hashtag can be mapped precisely. This provides a visual representation that conversations around the particular subject are growing and evolving. #changetheconversation was picked up by a mental health charity in South Africa and another in Ireland. We should consider what other campaigns we might use in West Yorkshire if we extend this campaign.
- Providing people with a short, user friendly hashtag which they could make use of themselves provides a gateway to expand conversations and reach a larger population of people. We'd use a shorter tag next time.
- We could build different brands (eg#postiveWY) allowing for a whole host of subjects to be discussed. E.g. beauticians offering free treatments to those with cancer

8.5 Commit to working in partnership

- We need to fully utilise the assets we have in our partnership. We work with leaders, Trusts and organisations across West Yorkshire and Harrogate with significant and diverse followings, and we have seen examples of their involvement in sharing and retweeting significantly increasing the impact of a social media post. e.g. Social media reach from the unpaid carers Event in November 2017 was the highest of the campaign as it was actively supported by system leaders.
- In contrast the Arthritis video in week 11 was advertised but not picked up by partners, and partners did not sign up to the "Thunderclap" planned for December 2017. We can leverage better results if we all work together

8.6 Ensure that campaigns are appropriately resourced

- The project was resourced by Healthwatch in Kirklees as a contribution to the wider work of the Partnership. Two dedicated staff members (marketing and media creator) enabled this work and allowed for additional creativity, immediacy, and a willingness to try things out. Without their commitment and dedicated time, the reach, engagement and impact would have been significantly less. This type of work requires dedicated resource.
- Paid advertising even with a very small budget is a great benefit to a campaign. It increases reach and can be targeted to demographics and locations across West Yorkshire and Harrogate.

9.0 Proposed methodology for engaging using social media

As part of this review we have developed a proposed methodology for engaging using social media that could be replicated in partner organisations across West Yorkshire and Harrogate. Some of this methodology will be part of the core skills of many of our communications teams. In other areas however we are advocating a different more reciprocal communications strategy that engages with, listens to, and harnesses the power in communities. It's the same, but a bit different.

9.1 Planning

1. Build mapping of local community assets via Audiense software or similar
2. Begin to build relationships with influential members of the community by following relevant accounts on Twitter and Facebook accounts
3. Share influential account messages on Facebook and twitter
4. Plan content for each month based upon local and national public health, CCGs and WY&HHCP calendars
5. Schedule weekly reviews to ensure reactivity to local weekly conversations of the public.
6. Create content ideas and timetable staff and resources accordingly
7. Investigate whether any influential accounts would be interested in sharing content on a particular day
8. Decide upon the medium in which the influential account may share the message (such as direct messages, Instagram, Tweet etc)
9. If content cannot be uploaded daily then program daily social media posts into Hootsuite or social media management alternatives

9.2 Daily tasks

1. Release content for the general public on all channels
2. Release content for influential accounts via correct mediums
3. Complete social listening on social media channels for relevant news/conversations to use the hashtag and start conversations with the public
4. Search for and release news articles from trusted sources such as BBC and The Guardian
5. Amend scheduled posts based on reactive stories and conversations
6. Respond to conversations from the public on social media to build relationships

9.3 Evaluation

1. Track Twitter and Facebook analytics to assess which type of content the public responded to, this creates an idea of themes and subjects for future use
2. Evaluate keywords, content and hashtags ideally using Talkwalker software but alternatives for top level analytics are available. Alternatively map the hashtag on Bluenod, which can visualise growth and connections between people and topics
3. Report on reach and engagement data of each post
4. Re-schedule content that was popular with the public for a later date
5. Re-work content for other target audiences and other mediums for future use



METHODOLOGY





10.0 Next Steps

This work will go to the partnerships leadership group in Spring 2018 for discussion. In its current form the work provides a useful exploration of how we might more effectively use social media to engage with communities in West Yorkshire at scale and pace. The leadership team will then agree whether they think that this is something that we should be investing in and developing.

Our wider challenge to the leadership team is that NHS organisations often see the biggest risk to wholesale transformation as local government challenge, or the threat of judicial review and so have designed an engagement and communications architecture to mitigate that risk.

Our reflection at the end of the project is that the biggest risk to our partnerships transformation of health and care is that we fail to understand, engage and empower our communities to self-care, to be resilient, and live healthier happier lives. We still lack a coherent strategy for this in our partnership, and this project could be part of that solution. Leeds GP Andy Sixsmith calls this changed relationship between people, councils and the NHS “the most important transformation” adding “we will just keep adding sticking plasters until that happens.”



Andy Sixsmith @AndySixsmith · Jan 23

=the most important transformation-we will just keep adding sticking plasters until it happens



Social media is a tool that we can use to explore a more reciprocal, dynamic and responsive way of communicating and engaging with our communities. By changing the way that we communicate and engage, we could #changetheconversation at scale and pace from a deficit based model of healthcare, to a focus on what really makes us healthy.

DRAFT for core team Feb 2018



TALK ABOUT THE
WIDER
DETERMINANTS

West Yorkshire and Harrogate
Health and Care Partnership



#CHANGE^{THE}
CONVERSATION



WHY
DID
WE
DO
THIS?

10%
OF WHAT
MAKES US
HEALTHY
HOSPITALS
NHS
HEALTH CARE
SERVICES

THE REST?
GOOD WORK
SURROUNDINGS
MONEY AND RESOURCES
HOUSING
EDUCATION AND SKILLS
FAMILY, FRIENDS & COMMUNITIES
THE FOOD WE EAT
TRANSPORT

OVER THE COURSE
OF 12 WEEKS WE
USED THE HASHTAG

#CHANGE THE
CONVERSATION ON

f SOCIAL
MEDIA
You Tube

AS A PLATFORM TO SPREAD POSITIVE MESSAGES
ABOUT HEALTH AND WELLBEING IN THE KIRKLEES AREA



WE'RE ONLY
TALKING
ABOUT THE
10%



OUR AIM WAS TO
SHINE A LIGHT ON
ALL THE OTHER
THINGS THAT MAKE
US HEALTHY!



VIDEOS

WITH OVER 250,000
IMPRESSIONS

IMAGES



Councils and the NHS
in our area are being forced
to cut and ration healthcare services,
because they've not got enough
money.

#CHANGE THE CONVERSATION

GIFS

and we achieved

IT TOOK
SOME
CREATIVITY
SOME
TARGETTING
AND A LITTLE BIT OF
MONEY

