

## COMMUNICATIONS PLANNING OVERVIEW

### What is communications?

Communications is a strategic and practical function that helps you achieve your MSA goals. It's the process of exchanging information in numerous ways between audience groups and individuals, to create awareness, understanding, and often, to inspire action. It involves:

- *Planning*: identifying what you need to communicate for specific audiences – as it aligns with your operational plan and priorities – and how you will go about doing so.
- *Creating content*: messages, newsletters, articles, social posts, website content, presentations, videos and other visual communication.
- *Sharing through channels*: one-way and two-way: E-mails, websites, meetings, events.etc.

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### Why communicate?

Consulting and collaborating with representatives from across the health care spectrum is important to the success of your work. By communicating effectively with a plan, you ensure the right information is shared with the right people at the right time, and in the right way, to:

- Create understanding of an initiative.
- Set expectations.
- Foster support for your activities.
- Attract, retain, and engage participants.
- Support priorities for your site that influence positive change.
- Build consensus and form partnerships.
- Address and/or support major changes.
- Support quality improvement goals through knowledge sharing.

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## The communications plan

A strategic communications plan directly supports and aligns with the goals and priorities of the organization. The plan may be for a defined period of time or for a specific, significant, initiative.

A communications plan helps you to identify key communications opportunities and better manage the flow of information.

It can be more effective to provide a planned, regular stream of communications that aligns with your strategic goals rather than overwhelming your audience (especially doctors) with too much information. Not all initiatives and issues require the same type or level of communications support, and the planning process will reveal what is needed.

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## Components of a communications plan

**Goals** – The goals for communications efforts to support your MSAs' goals. (e.g. Inform to build understanding, increase participation, share feedback to build relationships, amplify successes to increase support and participation.)

**Objectives** – Specific, measurable, outcome-oriented actions to achieve the goals. (e.g. distribute 6 x newsletters/yr. that are opened by >50% of the intended audience by end of year, to ensure medical staff are well-informed about engagement activities and opportunities.)

**Audiences** – Who needs to receive communications.

**Challenges** – What might stand in the way of achieving communications objectives.

**Strategies** – Approaches to overcome challenges and achieve objectives.

**Key messages** – The most important information your audiences needs to know. What, who, when, how – and importantly, why?

**Tactics/activities** – How you will communicate your messages to your target audiences.

**Timeline** – Dates for communications activities, mapped against operational timelines and priorities.

**Measurement** – Ways to track the success of your communications efforts.

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## Choosing how to communicate

How you communicate can be as important to success as what you have to say. Common communications vehicles include:

**Face-to-face meetings** – In-person communication is the most effective way to build relationships.

**Pros:** Little cost beyond time involved; ultimate collaborative vehicle; supports engagement; very effective when discussion required/desired.

**Cons:** Scheduling can be challenging; large meetings may require special venues to be rented.

**Events** – Special events include everything from mixers to physician dinners to workshops. Anything that requires an invitation, sourcing a venue, and developing a multipart agenda qualifies as an event.

**Pros:** Face-to-face vehicles build relationships; promote two-way communication and collaboration; demonstrate commitment; are memorable; can be effective for launching initiatives or celebrating milestones.

**Cons:** Time consuming to organize; can be expensive; must be appropriately timed and held in a place convenient to target audiences.

**Presentations** – Most effective when there is a lot of information to share on a specific topic.

**Pros:** Organized, visually stimulating way to communicate; easily repurposed and adapted for multiple uses and audiences; can be low cost; persuasive means of delivering a message; can be delivered live or hosted online for convenient access.

**Cons:** If used outside a meeting, must have sufficient information to make sense.

**Email** – Effective for introducing an initiative and for providing updates and information to a group.

**Pros:** Instant delivery, free, easily shared, invites response; if personalized to a degree can make recipients feel more connected to the organization/project; lists for group dissemination easily generated.

**Cons:** Easily shared; can be overlooked or trashed by spam filters.

**Sources:** Societies can build their own lists for physicians or ask for access to other lists, such as those managed by the site's administration department, the health authority's MSA, or medical departments. In these cases, physicians already on another list should be asked if they agree to the email being used for facility engagement updates. Societies can usually access email lists for the health authority site executive, directors, and manager through the site's administration team.

**Letters** – More traditional and often considered more formal, letters are official vehicles for communicating important information. Must be short to be effective, usually delivered by e-mail.

**Pros:** Less frequently used personalized letters warrant attention as they signal the information they contain is important; inexpensive to produce and deliver.

**Cons:** One-way vehicle; limits the amount of information shared; overt formality not conducive to building warm relationships.

**Newsletters** – Helps keep broader audiences aware of your activities. Can bring your initiatives to life by featuring individuals, interviews, success stories, and images.

**Pros:** Effective way of communicating with large and multiple audiences; permits discussion of several topics; e-versions easily generated for posting to web. Web-based email systems (such as Campaign Monitor) can help you keep track of who opens your newsletters and what they click on, so you know if your content is effective for that audience.

**Cons:** Can be time consuming to produce; someone needs to be dedicated to ensuring it is produced on a regular and timely basis; can be costly, although cost of printing and mailing can be mitigated if only an e-version produced (but some people still prefer print).

**Sources:** You can create your own newsletter, or you can post in existing health authority and site newsletters for broader internal audiences. Contact your site leadership for information.

**Web pages** – Information available 24/7 from any location to audiences.

**Pros:** Can be quick to update; cost-effective repository for information on a variety of topics; easily accessible by most audiences.

**Cons:** Unless well maintained, sites can go stale and no one will visit, so information will not get seen; one-way vehicle. Due to time restrictions, physicians prefer to visit websites that are up-to-date, have practical value, and are relevant to their work.

**Sources:** Exercise caution when thinking about spending time and resources to build a website for physician audiences. As an alternative, the provincial Facility Engagement team is working to have physician society pages added to health authority physician web channels. If you wish to have a web page dedicated to your Facility Engagement work, please contact your Facility Engagement Partner (EP).

**Surveys** – More of a research tool than a communications vehicle, but effective for the planning portion of a project/communications plan.

**Pros:** Provides important insight into audience perspectives; demonstrates a commitment to listening; creates an expectation of follow-up; opens the door for future communications.

**Cons:** Can be time consuming; must be strategic about what is asked and how the survey is conducted so respondents' time is not wasted; builds an expectation of action and follow up, so the intention to act must be there.

**Sources:** If you wish to set up a survey, we recommend [Checkbox.com](https://checkbox.com) or [SurveyMonkey.com](https://surveyMonkey.com). Please contact your EP if you need assistance.

**Brochures, flyers, posters** – Best suited for promotional initiatives.

**Pros:** Easy to scan; can contain information on multiple aspects of a topic; portable; can be printed and posted in e-version online; shareable.

**Cons:** Require time and production costs; one-way communications; hard to evolve.

**Sources:** Brochure, flyer, and poster templates developed by the Facility Engagement Initiative can be quickly customized for local use.

**Social media** – Platforms such as Twitter, Facebook, and LinkedIn are best suited for informing/engaging wider public-facing audiences in non-confidential topics – not typically recommended for MSA communications. Signal or WhatsApp chats are useful for doctors to engage in private, secure information and discussions on their devices.

**Pros:** Instant communication; two-way vehicles; free.

**Cons:** Not usually suitable for internal communications, unless on a physician-specific, password-protected channel. Resource must be assigned to respond in a timely manner.

**SharePoint** – SharePoint is an information and knowledge-sharing vehicle, effective for site teams to share documents in a confidential way.

**Pros:** Confidential and designed for sharing and collaboration; easy to access 24/7; available from all computers.

**Cons:** Requires setup by an administrative person on your team, and some minimal training for participants who are not familiar with it.

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## How many people do you need to reach?

Very often, it makes sense to use a different communications vehicle for different sizes of audiences. Are you trying to reach 5 people, 500 people, or 5000 people? For a small audience, try email, letters, and meetings. For a medium to large audience, try email, surveys, newsletters, brochures, presentations, events, and websites. For a large, multifaceted audience, try a website.

## Do you just want to share information, or do you want feedback?

For one-way communications, letters, newsletters, website updates, flyers, or newspaper articles may be most effective. Where input is being sought, surveys, emails, meetings, and events work best.

## What resources are available?

Both available personnel and budget are factors in determining appropriate communication vehicles. Communications planning can take place within the society leadership, but you may need someone to carry out the work, such as writing, creating posters and newsletters, and delivering information.

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## Issues management communication

“Issues management” in communications refers to the activities undertaken to defuse a potentially contentious situation before it can escalate. Examples of potential “hot” issues include:

- *Concerns about the way a society operates or how an individual or group is behaving during the execution of society-related activities.*
- *Concerns about the way partners approach collaboration.*
- *Concerns about patient care at a facility.*

While each issue is unique, to successfully manage such concerns you should:

- Have a solid understanding of the issue. Most often, this will require connecting with representatives from both sides of the challenge, which is most effectively done in person, but can also be done via phone or email if necessary.
- Express concern for an injured/wronged party if there is one. Otherwise, be open about examining the issue and taking steps to resolve it.
- Be as transparent in the process as possible to build trust on all sides. It is not necessary to have answers or solutions right away, but it is important to communicate the intention to get them.
- Determine what you can do to address the issue and defuse the situation. If the society is at fault, apologies can go a long way toward healing relationships. If there is simply a difference of opinion or it is a no-fault issue, focus solely on solutions.
- Once a course of action is decided, communicate it to all parties and follow through.
- If appropriate, connect with all parties later on to confirm the situation has been addressed to mutual satisfaction.

The communications tools used for issues management depend on the individual situation.

**For questions and support, contact your FE Engagement Partner:  
[engagement@doctorsofbc.ca](mailto:engagement@doctorsofbc.ca)**

# FACILITY ENGAGEMENT

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## COMMUNICATIONS PLAN TEMPLATE

### Communications plan

(Insert applicable dates or name of initiative it supports.)

### Overview

Insert information about the MSA. What are the organizational priorities for the year? If this is a plan for a specific priority, include a brief overview of the current situation and the desired goals and outcomes from an organizational perspective.

**Goals:** The goals for communications efforts to support your MSAs' goals. (e.g. Inform to build understanding, increase participation, share feedback to build relationships, amplify successes to increase support and participation.)

**Objectives:** Specific, measurable, outcome-oriented actions to achieve the goals. (e.g. distribute 6 x newsletters/yr. that are opened by >50% of the intended audience by end of year, to ensure medical staff are well-informed about engagement activities and opportunities.)

### Audiences

*Examples* (Delete those not applicable or add your own.):

- Physicians with privileges – existing and potential (break down by distinct specialty as communications approaches may have to vary from group to group).
- Other medical staff members as appropriate.
- Board of Directors.
- Health authority partners.
- Site executive directors, executive medical directors, directors, and managers.
- Health care staff at your site (be specific).
- Patients/Families.

**Challenges** (Insert obstacles to achieving communications goal and objectives.) *Example:* Multiple demands on the time of a small staff impede focus on communications.

**Strategies** (Insert approaches you will use to overcome the challenges and achieve communications objectives.)

## Key messages

(Describe, succinctly, the most important information your audiences need to know. These messages will be used in all of your communications materials.)

- **Who** is doing **what**, **where**, and **when**?
- **Why** are you doing this work? Why is it important to this site and these audiences? The “why” is important: the main reason an audience will engage. You can use a problem or solution to support this message.
- **What is in it** for the specific audience you are targeting? What will they gain from their engagement?
- **Call to action: How** do you want the audience to respond, and how?

## Channels

(What communications channels will you use to deliver your messages? Meetings, emails, surveys, SharePoint? Do you have these channels available? By listing them, you will know what you need to create.)

## Tactics

(How will you carry out your communications? Create a table of communications activities and products needed, assign them to someone to carry out, and develop a timeline mapped against your overall strategic/operational goals and priorities.)

## Timeline

(Insert timeline for communications activities, mapped against operational timeline and priorities.)

## Budget

(Insert pertinent information including support to carry out your communications activities.)

## Measurement

(Insert the criteria by which the success of the communications plan will be evaluated.) *Example:* You can measure engagement and awareness success by:

- Conducting a survey before and after your initiative.
- Measuring how many people signed up with their email address to receive regular updates.
- Counting the number of people who came to an event.
- Determining how many filled out a survey.
- Determining how many offered to assist with projects.
- Tracking how many people opened links on your newsletter.

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