

WONCA Europe Communication Strategy: 2017-2019

Primary health care is increasingly recognised as an essential part of all health systems in Europe. WONCA Europe has huge communication and engagement potential due to its long history, strong brand, and experienced and influential members. Moreover, the established journal is an effective platform for publishing research, and the annual conference supports networking and the dissemination of new knowledge.

However, WONCA Europe is a volunteer organisation with limited time and knowledge of executing coordination and communication activities. Our messages related to our activities and scientific works often do not reach their targeted audience, whether they are our Member Organisations (MOs) or important other stakeholders, external to our organisation (e.g. UEMO, EFPC, WHO). There is a lack of content creation and content curation (i.e., the process of gathering high quality information relevant to a particular topic, and sharing it through the established proper channels, including social media and newsletters); poor communication between and within the Council, networks, special interest groups (WESIGs), MOs and individual members; and no established shared measurement and feedback system, which is fundamental for supporting effective leadership at all levels.

Networks and WESIGs frequently operate using an isolated impact approach, oriented towards finding and funding solutions embodied within the boundaries of their organisation. As a result, networks and WESIGs invest in independent solutions, often working at odds with each other, hence increasing the resources required to make meaningful progress exponentially.

To shift from isolated to collective impact and encourage more collaboration and partnerships across networks / WESIGs, a systemic approach is required. A focus on the relationships, synergies and progress toward shared objectives is essential.

WONCA Europe could benefit greatly from investing in communication and engagement as a crucial enabler and supporter of the strategy delineated in the WONCA Europe Future Plan.

It can catalyse educational development, stimulate synergy among networks, WESIGs, and MOs as well as promote advocacy for family medicine, primary care and policies, through mass and direct marketing with patients, scientists, key health opinion leaders, policy and decision makers among others. It can also contribute to recruitment, engagement and retention, as well as to prevention of volunteer burnout.

WONCA Europe has the opportunity to augment the perception of its brand and increase its impact on other emerging networks and stakeholders relevant to primary health care with strong research and policy influence.

To enable such a shift it is critical to ensure continuity and quality, by strengthening the WONCA Europe Secretariat with skills and resources. It all begins by emphasising the execution of coordination and communication activities.

WONCA Europe Communication Goals

The primary reason for prioritising communication activities is that they are able to actively support the realisation of goals in the WONCA Europe Future Plan. The following goals are based on the Future Plan 2013-2016 (Table 1); an updated version of the goals will be prepared to reflect the changes of the 2016-2019 Future Plan.

Table 1. WONCA Europe Future Plan goals.

INTERNALLY	Collective activity
Identify members in need of support	<ul style="list-style-type: none"> • Clarification of expectations and general accessibility • Ensure members have opportunities to communicate their needs within the organisation • Manage expectations and build an internal reputation of trust, quality and support • Ensure that the communications individuals receive are relevant to them and received in a timely fashion
Review organisation functioning of WONCA Europe	<ul style="list-style-type: none"> • Effectively communicate our vision, mission and strategies to all the structures of WONCA Europe and ensure all-embracing alignment • Simplify structure of internal communication plans, channels and messages • Introduce communication standards across WE, introduce communication etiquette • Adopt an integrated approach to internal/external communications • Develop a desire amongst all members to contribute towards the successful implementation of the change and the delivery of the benefits • Ensure trends and opinions are captured and referenced systematically for prompt forward planning • Create focused, timely and consistent internal communications to encourage confident, clear and succinct contact and promote a sense of continuity • Develop and constantly review measurement indicators to identify gaps and best practices • Ensure policies and procedures are known across WE • Review and update the training support available to those with communications' responsibilities
Recruit trainees and young doctors	<ul style="list-style-type: none"> • Promote a sense of continuity between young doctors and other WE structures • Showcase successes stories

	<ul style="list-style-type: none"> • Empower trainees and young doctors to contribute in WE early on • Promote collaborative projects • Promote two-way feedback and regularly respond to feedback received • Involve students
Strengthen EJGP	<ul style="list-style-type: none"> • Establish inbound communication to engage with readers and retain them • Establish a community and strengthen engagement • Systematically monitor the needs and opinions of the targeted audience, and provide more relevant content accordingly when necessary
Improve quality of WONCA Europe conferences	<ul style="list-style-type: none"> • Systematically collect and analyse feedback from organisers and participants • Promote outcomes to non-participants; consider local legacy • Promote synergies of networks and WESIGs • Promote the mission of WE; promote equity and patient-centeredness • Make the conferences a platform of interaction with external stakeholders • Open the conference to other stakeholders (incl. patients), involve them in the planning and organisation, and provide special content for them
EXTERNALLY	Collective activity
Develop a plan for wider engagement with academic departments	<ul style="list-style-type: none"> • Ensure stakeholders have the opportunity to communicate back to us and encourage them to do so • Call for strategic partnerships • Disseminate the results effectively
FM content in undergraduate and postgraduate training	<ul style="list-style-type: none"> • Provide the communication means to support the development of the criteria • Disseminate the results effectively
Improve and sustain collaborations with UEMO, EFPC, WHO, etc.	<ul style="list-style-type: none"> • Provide a regular flow of information to key stakeholders • Support scaling up of successful partnership actions and increase the dissemination of their outcomes

- Advocate for new partners

Stakeholder Analysis

In all areas of communications the use of new media is paramount; adoption of cross-organisational standards, good-practices and policies.

Table 2. WONCA Europe communication methods and stakeholder analysis.

STAKEHOLDER (INTERNALLY)	METHODS OF COMMUNICATION & ENGAGEMENT
Member organisations	<ul style="list-style-type: none"> • Dedicated part on website • Newsletters • Communications from the Secretariat • Surveys and national reports to map needs, ensure quality and capture new trends
Networks, WESIGs	<ul style="list-style-type: none"> • Dedicated part on website • Newsletters • Well-orchestrated campaigns on Social Media to promote their content (e.g., meetings, webinars, publications) • Online surveys • Open and free content-sharing
Collaborative organisations	<ul style="list-style-type: none"> • Newsletters • Press releases and ad-hoc communications from the Secretariat • Social media campaigns
Academic departments	<ul style="list-style-type: none"> • Project newsletters • Call for projects • Surveys
STAKEHOLDER (EXTERNALLY)	
Family doctors	<ul style="list-style-type: none"> • Curate content from high-quality resources, pushed through our website, social media and newsletter, and proactively seek engagement (e.g., raising challenging topics to be addressed on social media by followers) • Call for content creation, promotion of storytelling • Educational offering (e.g., platform for webinars) • Proactive monitoring of communications on media • Monitoring and profiling of audience on website and social media • Brand recognition
Trainees, juniors and medical students	<ul style="list-style-type: none"> • Recruitment campaigns • Call for support

	<ul style="list-style-type: none"> • Newsletters • Social media involvement • Promotion of bursaries
Public and patients	<ul style="list-style-type: none"> • Dedicated content on a WONCA Europe “for patients” site • Extensive use of new media (photos, videos) • Public health campaigns • Promotion through partnerships with patient networks • Content co-creation and engagement on selected key public media • “Patient-included” conferences

Proposed Solution

The proposed solution include:

- Establishment of the communication facilitator position;
- Establishment of a communication advisory board;
- Redesign of the WONCA Europe website.

a) communication facilitator

One single professional person acting as coordination and communication facilitator could handle the needs for compiling WONCA Europe newsletters, supporting the website and social media: **Communication Facilitator**. This key person would be responsible of coordinating the sharing of news and information across all networks and SIGs, keeping a consistent communication style and design. He/she will be also collaborating with the WONCA Europe Conference Committee.

Table 3. The tasks and estimated hours of the WONCA Europe communication facilitator.

Newsletter production* including collect & organise news, proofreading, copyediting, photo editing, pagination.	4 hours per week = 16 hours per month
Social Media* including posting news on Facebook and Twitter, curating and content management, campaigns creation for tailored targets, and community management & moderation.	4 hours per week = 16 hours per month
Website curation* including content management, content curation from other sources (e.g., MOs, networks, WHO), keeping content up-to-date, quality assessment.	2 hours per week = 8 hours per month
Coordination , including facilitation among the networks & SIGs, supervision, QA.	6 hours per week = 24 hours per month
Total	16 hours per week = 64 hours per month

* In all three categories, there is a content creation & curation part which is expected to be carried out in a synergetic way (i.e., content from one source will be adapted and published in another medium).

Desired skills for the Communication Facilitator:

- Background in medical writing
- Fluency in English language (IELTS Academic, band 7 and above or equivalent TOEFL/CEFR score)
- Excellent interpersonal skills
- Proven leadership and team-building skills
- Previous work on social media; ability to post messages with multimedia content in a variety of media & networks; ability to manage and engage with communities; good knowledge of how to assess the work (including KPIs such as the cost per user acquisition)
- Ability to use an image editor (such as Photoshop)
- Basic skills in vector & layout editing (vector editing such as, Illustrator; layout editing such as, InDesign) and ability & willingness to learn and improve his/her skills on such software

b) communication advisory board

The Communication Facilitator would work in close collaboration with the **Communication Advisory Board** (Figure 1). The Advisory Board would consist of four elected members coming from the WONCA Europe networks, and an appointed WONCA Europe Executive Board member who will chair it. Members will be elected for a three-year period by the WONCA Europe Council.

This Advisory Board would strategically support the Communication Facilitator, who will have the mandate to coordinate day-to-day communication activities, facilitate interactions among the networks and SIGs, produce and curate content and offer guidance regarding communicating effectively to policy-makers.

In particular, the tasks of the Advisory Board will be:

1. Hold regular online meetings (tentatively on a monthly basis) to assess the current progress of the communication strategy (the Communication Facilitator, Secretary and website developer shall be included when appropriate). An agenda shall be prepared by the Communication Facilitator and submitted to the Advisory Board prior to such meetings.
2. Assess the communication needs of the Networks and WESIGs (either directly or via the Communication Facilitator).
3. Assess the progress made according to the evaluation plan of the Communication Strategy and produce an annual report to be submitted to the WONCA Europe Executive Board and Council.
4. Guarantee quality assurance: evaluate the adherence to the standard operation procedures that will be developed (e.g., concerning language, copyrights, patient engagement, equity, crisis management), identify areas that need improvement and propose measures for its improvement.

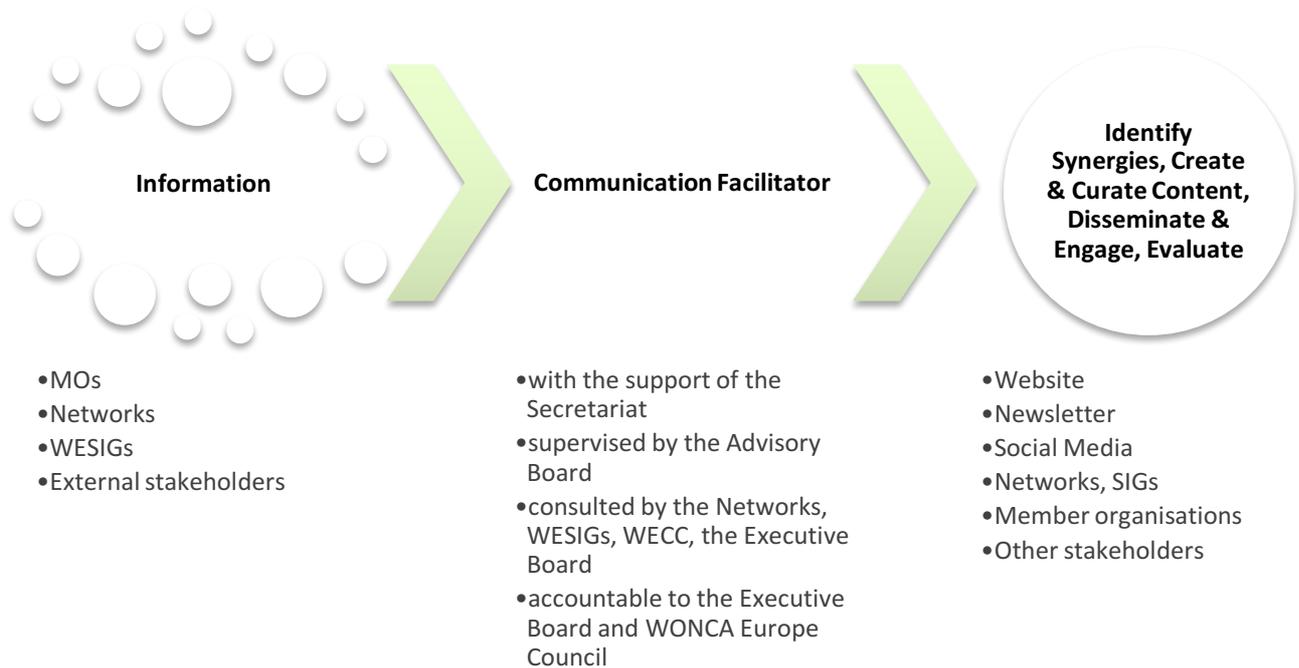


Figure 1. Flow of information and the role of the Communication Facilitator.

c) redesign of the website

To improve our website and the services provided through them, two phases are proposed:

- i. **Redesign its user interface (theme) and restructure the taxonomy of contents**, aligning them with the WONCA Europe Future Plan and Communication Strategy. In addition, the front page will be reworked, registration will be removed, news will be integrated from other networks, and a list of new articles from the EJGP will be featured. This phase will commence as soon as the communication strategy is approved and adopted by WONCA Europe Council.
- ii. **Continue further development**, including improving the websites of the other networks hosted under WONCA Europe. This phase represents a continuous investment in improving the provided services and will start on year II of the communication strategy.

Three-Year Implementation Strategy

To implement the proposed plan, WONCA Europe needs to reallocate and make more efficient use of some resources from its budget. The current pool of resources in the budget amounts to **€25.400 per year / €76.200 per triennium**; in particular:

- a) Website maintenance, IT support and fixed costs (hosting, domain, installation of security updates): €10.000
- b) IT support for the Secretariat (storage of data and communication software): €1.400
- c) Incentive for networks to be hosted under the WONCA Europe website: €1.000 x 4 = €4.000
- d) Planned budget for the support of communication (incl. Newsletter): €10.000

The budget for the support of communication (item d in the list above) was discussed and preliminarily approved in the WONCA Europe EB meeting in Spring 2016; it was expected to be submitted for final approval to the Council in Copenhagen. However, such expenditure was not inserted in the final 2017 budget. The pooled resources also include the incentive that the networks currently receive for hosting their websites under the WONCA Europe website (item c; €1.000/network/year). Our aim is to reach to the networks and explore whether it is possible to withdraw such an incentive, as the benefits from the services delineated in the present Communication Strategy are long-term and impact all the structures of WONCA Europe.

To attain the communication strategy, the proposed budget should take into account the abovementioned pooled resources. The planned expenses for the next triennium, therefore, amounts to **€75.240 per triennium**, as shown in Table 4. The budget is based on the assumption that we will employ a communication facilitation part-time (4 hours per week for the first year, and eight hours per week the following two years). The expenses for the redesign of the website will incur in the first year, followed by further development in all websites (i.e., including the networks) in the following years.

Table 4. Proposed budget for the communication strategy.

	YEAR I (2017)		YEAR II (2018)		YEAR III (2019)		Total
	units	cost	units	cost	units	cost	cost
WEBSITE							
Redesign (one-off)		6.000		-		-	6.000
Fixed costs (hosting, domain, installation of security updates)		5.000		5.000		5.000	15.000
Further development of the website		-		5.000		5.000	10.000
Total		11.000		10.000		10.000	31.000
IT SUPPORT FOR THE SECRETARIAT							
Storage (Dropbox accounts)		1.050		1.050		1.050	3.150
Communication (GoToMeeting account)		350		350		350	1050
Total		1.400		1.400		1.400	4.200
HUMAN RESOURCES							
Communication facilitator (hours per week; rate: €38,5 euro per hour)	4	8.008	8	16.016	8	16.016	40.040
Total		8.008		16.016		16.016	40.040
TOTAL		€20.408		€27.416		€27.416	€75.240

Evaluation

The evaluation will help revise and if necessary amend the communication strategy on an annual basis. A written report shall be submitted to the WONCA Europe Executive Board and Council yearly by the Advisory Board, assessing the progress that has been made. In preparation for the evaluation, the Communication Facilitator will seek input from all the stakeholders (both internal and external). The performance will be evaluated based on two axes:

- a) Support the WE stakeholders & increase synergies, in line with the action points of the Future Plan:
 - Promote collaborations for content creation among the networks and WESIGs (AP2)
 - Strengthen the WONCA Europe Conferences (AP3)
 - Effectively communicate our vision, mission and strategies to all the structures of WONCA Europe and ensure all-embracing alignment (AP8)
 - Build common identity and find common ground among all parts of the organization (AP9)
 - Develop internal communication, feedback and appraisal systems, making it possible to lead in accordance with common goals (AP11)
- b) Increase visibility and engagement:

- Increase visibility by addressing challenging topics in the public debates and exerting influence where policies are made (AP1)

In particular, the visibility and engagement will be measured by the following key performance indicators:

1. Reach: potential maximum size of audience any given message can reach. To measure reach we will take into account the number of followers, shares, and impressions as well as net follower increase over time.
2. Number of mentions and social shares (e.g., retweets, shares on Facebook of WE messages)
3. Comments: messages, direct messages and feedback left by other users on Facebook & Twitter
4. Referral traffic: measuring the amount of traffic going to WE's website from our social media channels
5. Conversion rate: $\text{interactions/reach} * 100\%$
6. Number of social influencers (key followers): users who can reach a significant audience and drive awareness about WONCA Europe or family-medicine-related topics, and have followed & engaged with our social platforms
7. Cost per conversion (taking into account the budget of the communication strategy)
8. Campaign performance: evaluation of campaigns (e.g., World Family Doctor Day, WE Conference) with similar micro-targets
9. Website indicators:
 - a. new visitor conversion
 - b. recurrent visitors conversion
 - c. bounce rate
 - d. referral / direct / social traffic
 - e. interactions per visit
 - f. conversion and subscriber rates (e.g., a social share of a news item, a subscription to our newsletter)
 - g. cost per conversion (taking into account the budget of the communication strategy)

Acknowledgements

Parts of the strategy were developed based on the feedback of Luisa Pettigrew, Ulrik Bak Kirk, Josep Vilaseca and the chairs / representatives from the Networks, Jo Buchanan, Davorina Petek, Piet Vanden Bussche, Jean- Pierre Jacquet, Claire Marie Thomas, and Mateja Bulc.