

An Influencing Toolkit for CSP Members





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Section 1

Influencing, engaging and lobbying

This toolkit has been designed to help you secure time with local healthcare decision makers to champion community rehabilitation. CSP members are our most effective advocates in communicating to decision makers the key issues affecting the profession and your everyday work. Writing to, meeting with or petitioning your local decision makers will help raise the profile of physiotherapy as a profession and improve outcomes for your patients. The engagement that you undertake will help build relationships, influence and momentum. Do not doubt that this can lead to positive change.

Influencing, engaging and lobbying is about communicating with decision-makers to change their minds on an issue or to request their assistance to help achieve a particular demand. The pandemic has brought to the forefront how important physiotherapy services are and we need this momentum to continue as the Governments within the four countries start to plan for recovery and reshape what the future healthcare landscape looks like. It is critical that we maintain pressure to remind politicians, planners and funders of community services of the importance of physiotherapy.

We understand that influencing can seem daunting and perhaps out of your comfort zone. However, the chances are you are already engaged in influencing activity through your networks, social media activity and conversations with colleagues. No matter whether you have been involved with physiotherapy and the profession for one year or thirty, you are in a strong position to influence key decision makers through your local and professional expertise. Utilising local politicians, key stakeholders, the media and partner organisations to affect change can have powerful results.

There are many voices competing for the attention of Government and healthcare decision-makers. Now more than ever, the physiotherapy workforce needs to make the case for the profession and for patients' right to rehabilitation services. Every day, decision-makers are faced with hundreds of letters, emails and phone calls about all sorts of issues. To be an effective campaigner, your approach needs be organised and thought through. This toolkit is designed to help you communicate effectively. These resources can be used in a number of different ways, from copying and pasting them directly, picking and choosing which parts you use, or creating your own material.





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Section 2

The case for investment in community rehabilitation

As someone involved with physiotherapy and the profession, you know there is a strong and growing demand for quality rehabilitation. Yet, too often, people access services too late or not at all, resulting in a postcode lottery for support. This means that too many of your patients have a lower quality of life, are not able to live their normal lives and bring greater costs to the NHS and social care services.

Our priorities are:

- To gain political commitment to delivering universal access to rehabilitation to meet needs
- To improve the quality of rehabilitation through better commissioning, planning and delivery
- To create public awareness of an individual's entitlement to rehabilitation, and also the need to increase the understanding of the importance of rehab.

To help achieve these aims, the CSP is calling on decision-makers to:

- 1. Develop a national strategy for quality rehabilitation, making it an integral part of the healthcare system.
- Expand and modernise rehabilitation services to meet the scale of need for both COVID-19 and non-COVID-19 related cases, with a focus on delivering in the community.
- 3. Grow the multi-disciplinary rehabilitation workforce, with the right skills and staff needed.
- 4. Learn from the impetus and changes needed to respond to the pandemic and use it to shape the future of rehabilitation.
- 5. Measure the needs and impact of rehabilitation through data and case studies.

This messaging can help structure your interactions with key stakeholders, ensuring that you get your point across, seeking their commitment to taking action on your behalf.



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Section 3

Who are the decision-makers and how do you reach them?

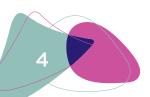
The first thing to consider is who the decision-makers and opinion-formers are that can help push forward the case for community rehabilitation in your locality. It is worth thinking about your existing network – colleagues, people you have met at conferences or training days or even people that you follow on Twitter. If you already have a relationship with someone who can push forward the case for community rehabilitation, then it is worth using that link. However, do not worry if you have not yet built up your network.

It is also important to remember that you do not necessarily need to go about influencing alone. Depending on your local situation, it may make the case even more powerful to work in partnership with others, such as members of your multi-disciplinary team (MDT), patient groups and Healthwatch, for example. The Campaigns and Regional Engagement (CRE) team can put you in contact with local patient

organisations that are part of the Community Rehabilitation Alliance. The Alliance was initiated by the CSP and it is made up of national charities and professional bodies who are all committed to improving commissioning, planning and delivery of rehabilitation.

Do some research and find out who you think would be the most influential player in your local area — this may be your Hospital Trust or service planner, a councillor who holds the health and social care portfolio or your local MP/MSP/MS/MLA. Once you have identified whom you want to contact, start by getting in touch with their office. Explain that you work in the local area and that you would like to discuss issues affecting community rehabilitation, ideally by inviting them for a service visit. You can use the template letter below for this. If you do not receive a response within a couple of weeks, follow up until you do*.

*Please note that COVID-19 safety guidance may limit the way you go about your influencing activity. Please adhere to the latest guidance to ensure that you take the necessary precautions.





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Section 3 (Part 1)

Arranging a meeting template letter



Dear [NAME]

I am writing to you as [INSERT ROLE/ SPECIALITY] working in [INSERT HOSPITAL/ PRACTICE]. [Include a bit of information about what your work entails: for example, if you work with stroke patients, mention this].

As you will be aware, the COVID-19 pandemic has brought to the forefront how important physiotherapy services are to our healthcare systems [insert, if appropriate, experience of working during COVID-19]. Physiotherapy services continue to be vital in ensuring people recovering from COVID-19 can regain their independence and resume normal life as soon as possible. However, the need for better access to rehabilitation services extends beyond COVID-19, it is also about meeting the unmet need that existed before the pandemic with people recovering from or living with a wide range of conditions, such as stroke, COPD and arthritis.

There is a clear need to learn from the pandemic and shape rehabilitation services for the future, addressing the weaknesses of this under-developed element of the healthcare system. Rehabilitation services, including those in the community, were already overstretched before the pandemic, and so are not currently equipped to meet the needs of patients. Access to community rehabilitation drastically improves a patient's quality of life by allowing them to retain as much of their independence as possible. On top of this, from a financial standpoint, it reduces demand on the most expensive parts of the NHS. Making community rehabilitation available to people before they are in crisis cuts demands on emergency care and reduces reliance on an already struggling social care system. Rehabilitation is not just important for fractures and falls but also other conditions, such as heart disease, brain injuries and people with sight impairment.

[Include some information about your specific role, the patients you work with and the benefits that community rehabilitation brings].

We know that access to community rehabilitation services is not equal. Many people pay for community rehabilitation services to support their recovery or to manage their condition because they cannot get what they need from the healthcare system. But many people cannot afford to pay and they should not have to. The services that are offered to people are often not timely or well-suited to their needs. Improving access to high-quality rehabilitation, free at the point of contact, is a clear way to improve our public health and wellbeing, and to reduce inequalities in health and other areas.

I would be delighted to invite you to visit a local community rehabilitation service to see for yourself how important these services are and how we can work together to improve universal access to rehabilitation services. I look forward to hearing from you.

Yours sincerely, [NAME]

*Please note that at the time of writing, service visits do not comply with current COVID-19 safety arrangements. Please bear the current guidance in mind when you write to a stakeholder, and arrange an online meeting if safer.



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Section 3 (Part 2)

Top Tips For a Successful Meeting

Whether you have arranged a phone call, an online meeting or a service visit with a decision-maker, you are likely only to have a short amount of time to put your concerns across. With COVID-19 restricting face-to-face meetings, why not think creatively about how you can best make the case for community rehabilitation? Is there an outdoor gym that you can show them in use? Can you take a video of a case study to show them? Can you send them a CSP video as follow-up after the meeting?

Before the meeting

- 1. Preparing an agenda ahead of time can help to ensure that you get all your points across despite time limitations. Think about what you are going to show them if you have arranged a service visit, think about what facilities you are going to show them. If you are using a CSP audio-visual resource, make sure this is ready to go. If you have come ready to present some data or share a case study, make sure you have prepared this ahead of time. A draft agenda for a meeting or a service visit could be:
 - Introduction to your work specifically
 - The case for community rehabilitation and issues affecting the profession
 - Any videos/ printed material/ patient and service case studies
 - How they can help
 - Offer to answer any questions or provide any further information.
- Do not worry about being too polished you are the expert in your field and the decision-maker will be most interested in hearing about your experience and work.
- 3. Do a little bit of research on their background. For example, if they have a health background, try to find out what their experience is so that you can adapt and tailor your approach depending on how much they are likely to know about community rehabilitation.

At the start

- 1. Make sure you introduce yourself properly. Explain who you are and what you do.
- 2. Make sure you are clear and concise about what the campaign around community rehabilitation is about. You can use the messaging on page 3 to help with this.

What are you asking them to do?

- Because you may only have a short time with whoever you meet, it is important to be clear beforehand what you would like them to do.
 - If this is just an introductory meeting, it might be inviting the decision maker for a service visit
 - If you have invited the decision maker for a service visit, it might be raising the case for community rehabilitation with other colleagues or writing to a key stakeholder
 - If it is your MP, you can encourage them to write to the Secretary of State for Health and Social Care or the devolved Minster for Health. Elected politicians can also help in publishing a press release or raising the topic through oral or written questions in Parliament.
- 2. It can be easy to assume that the representative will know what you want them to do but remember that you are the expert and you should be clear about what exactly you are asking for. The information around the case for community rehabilitation will help shape these requests, depending also on your local context.







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Questions to ask

- The majority of questions will undoubtedly be aimed at you, but it is worth asking the decision maker some questions to get a sense of their interest and their existing knowledge. Some example questions could be:
 - Have you ever had physiotherapy? What was your experience?
 - How well do you think community rehabilitation services are working in the local area?
 - Do you think the coronavirus pandemic has changed the way that physiotherapy is viewed?
 - How do you think the pandemic has changed the healthcare landscape, in particular, funding?

Following up

- Immediately after the meeting write or email to thank them, confirm any action discussed and ask them to keep you informed on progress.
- Post on social media (see draft tweets on page 8) and let the Hospital Trust/ Service Provider communications team or the CSP press team know about your meeting. They will be able to advise on how best to share this more widely. If you are using quotes or photos, remember to seek the person's approval.
- 3. In the following weeks and months, follow up on your request for support. If you have not already done so, invite them for a service visit. Consider organising a wider meeting of stakeholders or a roundtable on the issue.
- 4. Tell the CSP about your engagement and your progress. It is useful to know if the representative was supportive, as this will help build future relationships.



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Section 4

Using social media draft tweets

Social media is the easiest way to communicate your message and build your networks. Almost all councillors, elected politicians, journalists, influencers in healthcare will have some form of social media, whether that is Twitter, Facebook or LinkedIn. If you are looking to build your network, following influential decision-makers and engaging with their content will help. Twitter is particularly important and can really help to raise the profile of an issue.

Here are some draft tweets which you can adapt based on your influencing activity. Using photos and videos can help bolster support for your tweets.

Try making a twitter thread with multiple tweets to provide more detail and ensure that followers can easily follow and engage with the conversation.

The CSP has a social media guide for members with more information on how you can embrace social media in a productive, safe and professional manner.

www.csp.org.uk/socialmediaguide



Just met with [insert name/ tag twitter] to show them the community rehabilitation work that we do at [insert hospital/ practice]. Good discussion about the importance of these services and how urgent it is to improve access for all. #RightToRehab @thecsp



I have written to [insert name/ tag twitter] about the importance of community rehabilitation services. Everyone has the right to good quality rehabilitation but more needs to be done to ensure that access is equal and not a postcode lottery. #RightToRehab @thecsp



Delighted to show [insert name/ tag twitter] around our community rehabilitation service in [insert place]. Improving access to community rehabilitation would improve outcomes for patients and save the system money. This must be a priority going forward. #RightToRehab @thecsp



Community rehabilitation is crucial to recovery and improving quality of life. Yet too many are missing out. I have written to [insert name/ tag twitter] to invite them to visit our local service to see the life-changing work we carry out. #RightToRehab @ thecsp



.[insert name/ tag twitter], are you aware of the importance of community rehabilitation services in [insert area]? I would be pleased to show you around our local service and work together to improve access to this life-changing service #RightToRehab @thecsp



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Section 5

Positive media exposure advice on media engagement

Telling your story through the media can help raise the profile of community rehabilitation and physiotherapy in general. It can also influence how an issue is viewed, and, in turn, attract the attention and support of decision makers.

However, it is important that, when you are representing your hospital, service provider or the CSP, you check with the communications or press team before releasing anything to the media. Press teams are always looking for good news stories, so they will

be more than happy to discuss your story with you and how best you can share it. This may be through a newsletter, writing a blog for the website or issuing a press release. Involving the relevant team will ensure that the messaging is coherent, so always discuss with them first to check on the best approach.

The Campaigns and Regional Engagement (CRE) team team at the CSP are more than happy to discuss any influencing activity ideas with you or how best to share any activity, so please do get in touch!



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Section 5 (Part 1)

Key Components for a Newsworthy Story

When approaching the relevant communications team consider the following:

What is the issue?

In this case, it is a lack of investment in community rehabilitation and the devastating impacts that this has on patients in terms of their loss of independence, lower quality of life and, overall, increased cost on our health and social care system.

Statistics and research

Stories are always stronger with data. The CSP has a wealth of research in this area that can help support your argument but if you have conducted your own research specific to your local area then this will most likely be very welcome. The CSP's Innovation Database or Physioworks are both great places to look for data and case studies

Case study

A poignant case study can help develop the human element of this campaign by connecting people to the issue. Make sure you seek permission from the person whose case study you will be using by asking them to complete a model release/ consent form. The CRE team can help advise on this.

Photo opportunities

Photos can help grab the reader's attention. Make sure it is high-resolution and that you obtain permission from the individuals to be named and photographed (see above). A photo opportunity is particularly important if you arrange a service visit.

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Section 5 (Part 2)

"If we don't influence, who will?"

Your colleagues are valuable resources when it comes to influencing. By sharing your experience or asking for advice, you might inspire someone to take forward influencing activity of their own.

Lorraine Allchurch is a band 4 therapy practitioner at Russells Hall Hospital in Dudley, working on the Frailty /Front door team.

Her role includes assessing patients to see if they are safe to return home, providing mobility aids or other equipment and making referrals for further rehabilitation.

Lorraine attended a CSP training session on influencing and has been putting her learning into practice. She says:

"There has never been a better time to raise the profile of our profession. Even small steps can lead to change that will positively affect your work and the lives of your patients.

"With CSP training and support, I've gained the confidence to realise that I could make connections for the common good and collaborate with others. I've taken CSP campaign messages back to my workplace, spoken to colleagues and managers about them and used social media to promote issues across the wider community, also targeting the third sector and local government.

"When it comes to influencing, never underestimate what you can achieve in five or ten minutes by phone or Twitter with a clear ask!" Jane Holt is a Physiotherapy Team Lead and is currently manager of the HARP Project in Ayrshire, which proactively supports prevention and selfmanagement in an ageing population in deprived and rural communities.

Instead of focusing on a single condition, the HARP project offers a tiered rehabilitation programme which embraces the fact that many of today's patients have multiple morbidities. The project is being credited for slashing emergency bed days and improving patients' quality of life.

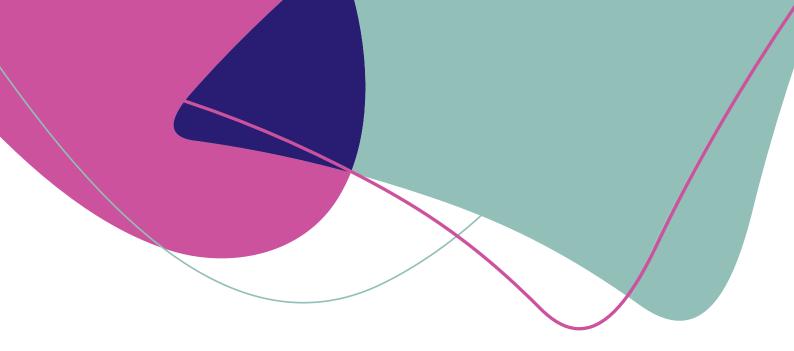
Jane recently attended a CSP session on influencing which has helped her build on her work to date. She says:

"As Physiotherapists, we care deeply about our jobs, patients, services and the decisions that are made at every level that affect us as people, our service users, colleagues and friends. At the heart of that decision making process are people like all of us, who get ill, have families and who have committed part of their lives to public service. Can we positively influence them? Definitely.

"Decision makers like talking to passionate, engaged individuals who want to make a difference. And this is us.

"I'm looking forward to building on the support from the CSP to continue promoting our service. Shaping the future by being influential may not be a hands on treatment but is actually putting the people in your caseload first.

"If we don't influence, who will?"



The CSP can help

We understand that influencing can be challenging, but the Campaigns and Regional Engagement Team is here to help.

We can provide support, tools and resources to help with your campaigning and are on hand to talk through your ideas for local influencing.

Please contact us at cre@csp.org.uk

Alternatively, please visit csp.org.uk for further resources and guidance.

Remember that you are the best advocate, not only for the physiotherapy profession but also for your patients. Influencing activity, such as the suggestions set out in this toolkit, can have a positive impact on you, on the profession and, ultimately, on patient outcomes.

We hope that this toolkit inspires you to move forward with the changes you want to see. If you do carry out any influencing activity, we would love to hear about it, so please let us know!



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is the professional, educational and trade union body for the United Kingdom's 59,000 chartered physiotherapists, physiotherapy students and support workers.