

Influencing health policy audiences

Why communicate with a health services policy audience?

Many researchers are motivated by driving improvement – to see the evidence from their studies contribute to better policy and practice in health services. To influence any issue at scale, it is often necessary to engage with policymakers: those that set, develop or influence the practice, regulatory, legislative and political frameworks for health services.

Who to engage?

There are a range of policymakers associated with health services. Who you engage with as a **priority** will depend on the nature of your study.

Health is a devolved issue within the UK. The UK Parliament legislates for England's NHS. The Welsh Assembly, Scottish Parliament and Northern Ireland Assembly are all responsible for health legislation within their own country.

Policymakers draft policy under direction from the government of the day. However, policymaking is informed by a wide range of stakeholders or 'influencers'. The following provide a brief overview of some of the main policy audiences associated with health care.

Politicians and political parties

Politicians can sit at a local, regional or national level. In the case of both councillors and Members of Parliament (including Members of the Scottish Parliament (MSPs), Assembly Members (AMs) and Members of the Legislative Assembly (MLAs)), not only can they fulfil their role as local representatives but they can also take on positions of policy influence through specialist

committees or in party policy formulation, such as by developing manifestos and policy commitments. Politicians with an existing role or interest in health or the area of your study are a key entry point to engaging with policymakers.

Civil servants

Civil servants tend to move portfolios less than MPs and may have been working in the broad area of health for a number of years. They are tasked with developing and implementing workable policy. As such, if they are developing policy in an area that relates to your study, they are likely to be interested in hearing detailed evidence.

Ministers

Although visible and influential, government ministers can be difficult to reach and require a highly targeted approach. A large department like the Department of Health will have several ministers who split the portfolio among them. Understanding who has the closest interest in your study, and targeting specifically them, is important. Special advisers can be a good conduit of information and intelligence for a minister. Their role means they should be on top of the latest thinking and developments, so they may be open to approaches by external experts/sources of information.

Statutory bodies

Statutory arms-length bodies (regulatory bodies such as NHS England, Healthcare Improvement Scotland, the Care Quality Commission, Healthcare Inspectorate Wales and NHS Improvement) do not set national policy, but have a key role in implementing it. They may also influence national policymakers and set their own sector-specific policies and procedures (eg around inspection) to enable them to fulfil their statutory functions.

Professional sector bodies

These do not set national policy, but can influence it. Some professional bodies have a regulatory role and set standards and procedures that their members must meet in order to legally practise – for example, the General Medical Council (GMC) and the Nursing and Midwifery Council (NMC). Other professional bodies – such as the Royal College of Nursing (RCN), the British Medical Association (BMA) and NHS Professionals – have a role in representing their members' interests and may deliver educational support.

Third sector organisations and other influencers

Although not policymakers in a strict sense, think tanks and third sector bodies (such as Diabetes UK, the British Heart Foundation and the Alzheimer's Society) can be highly effective influencers of policy and amplifiers of evidence if they feel that it serves the interests or needs of their audiences and beneficiaries. As effective routes to policymakers, they are worth considering when thinking about your audiences. Some think tanks operate across the political spectrum, while others may have strong associations with a particular political party.

Some routes to engaging politicians

The following are practical routes through which you can try to reach politicians.

- Identify the parliamentarians and politicians that are already interested in health or your area of study, Google is an obvious but helpful tool. Seeing which posts they have held and which committees they have sat on is a useful starting point. Paid-for tools such as **Foresight News** provide a weekly parliamentary round-up, news of forthcoming events and a useful search function, but can be a significant long-term investment.
- Searching via keywords on Twitter is also a useful means of identifying interests.
- You can contact councillors, MPs, AMs, MSPs, MLAs and Peers direct via Twitter, email or post.
- Submit ideas for inquiries or present evidence (written or verbal) to relevant **Commons or Lords committees**. Every inquiry will issue an open call for submissions and evidence/contributions. This is often done via press release or can be found on the parliament.uk website. The House of Lords Select Committee on Science and Technology has frequently covered health issues in recent years. Its subsequent reports are regularly debated in the House of Commons.
- Devolved parliaments/assemblies have their own influential committees. The Welsh Assembly has a range of **health advisory committees**, Scotland has its **Health and Sport committee**, and Northern Ireland has the **Committee for Health**.
- **All-party parliamentary groups** are informal, cross-party groups that coordinate around a specialist area. There are several covering specific aspects of mental and physical health. The speakers invited are generally relevant to the topic under discussion.

- Backbench committees often hear presentations from experts and are a useful way of gaining profile among parliamentarians in the early stages of formulating policy. Both the Labour and Conservative parties have backbench committees. Contact party offices for details of the officers who serve them.
- The **House of Commons Library** is tasked with providing impartial information to MPs in support of their parliamentary duties. This includes debate packs (briefings on upcoming debates) and an ad-hoc service for MPs to answer any questions confidentially. Academic research may be part of this information provision. The library has a number of subject specialists.
- The **House of Lords Library** produces a weekly **Current Affairs Digest** that includes summaries of journal articles. The digest is grouped by social policy, science, economic affairs, home affairs, international affairs and the Constitution.

How to go about it: tips to engage policymakers and influencers

- **Understand the basics of the parliamentary process:** you'll be able to pinpoint the opportunities for your research to influence policy.
- **Target the policymakers and influencers already interested in the area of your research:** politicians and policymakers are approached by a myriad of groups and individuals. Focus on those that have an interest in health and, ideally, the particular area of your study.
- **Check the UK parliamentary website 'what's on' section:** every Friday the website publishes the next week's debates or committee meetings for both the House of Commons and the House of Lords. If the subject relates to your research, you can submit your findings as evidence to be considered – either to individual MPs or as written evidence for an inquiry or select committee. For the devolved nations you can refer to the **Welsh Assembly calendar**, the Scottish Parliament has **the committees hub**, and the Northern Ireland Assembly has a **business diary**.
- **Pitch your information at the right level:** even sector bodies, versed in the acronyms and language of health services, appreciate succinct, targeted communications about your research. As a rule of thumb, think of your audiences as intelligent but highly time-pressed. This applies equally to politicians and civil servants. Whatever channel you use to approach them, you need to make the link between your study and their existing interests quickly and clearly. Civil servants are generally more willing to engage with detailed evidence but often only when actively working on a piece of related legislation.

- **Try to contain briefing documents to no more than three pages:** and less if possible. Connect the study to the targeted politician's personal, sector, constituency or ministerial interests. Include any accessible facts and figures that convey the context or the issue easily. Be clear and concise about the limitations of the findings.
- **Be clear about where the study sits in the wider research context:** does the study confirm findings from other studies or indicate different outcomes? Is it groundbreaking or is it synthesising knowledge in a particular area?
- **Be prepared to draw out policy implications:** it is important that any briefing aimed at policymakers includes policy recommendations, or at least sets out the implications arising from your study. Many policymakers are familiar with the research process and understand the caution around drawing definitive conclusions from one study. However, your knowledge and thought process has value and, as part of the research team, you are best placed to understand and talk about the consequences of your work for policy.

Influencing policymakers: examples

Funding projections for NHS Wales 2019–2030: engaging policymakers throughout the research process

The Health Foundation's **study of the demand/cost pressures facing NHS Wales** was designed to engage decision makers who could, potentially, reflect and implement the research findings from the very outset of the study. It did this through a carefully planned approach, which included the following.

- One-to-one interviews at scoping stage were able to build understanding around the particular health context in Wales, as well as the language and frameworks used. The relationships forged in this scoping exercise did not compromise the independence of the research but meant that there was a strong understanding of what evidence policymakers actively needed and felt would be helpful.
- Identifying and working with a local partner who knew and was already involved in the policy community in Wales provided an efficient way of identifying and forging that initial connection with key policymakers and influencers.
- As the study progressed, a series of workshops and meetings were held with key influential audiences (medical and finance directors, senior practitioners, etc). It was felt that their view of the work, and their potential support for it, could influence policymakers' decisions once findings were available. Time was taken to ensure that these key audiences were familiar with the work and able to understand its methodology and approach.

- When research was complete, but ahead of any publication or release of results, presentations were made to senior NHS and government officials. Again, this had no material impact on the research itself but meant that key audiences were briefed and able to give a considered response to the findings. Even if that response was critical of an aspect of the research or findings, a view was taken that the goal was to generate informed, thoughtful debate around the study.
- Findings were made available, via a joint press conference with the Welsh NHS Confederation, two days before the Welsh budget was announced. This enabled the budget to reflect the study's findings.
- Interim results were shared, which not only helped identify where improvements to the model could be made, but also helped identify how best to communicate results. For example, where consistent challenges or concerns were raised, the team were able to address these directly in the report.
- Relevant stakeholders were thoroughly briefed, which meant that they felt comfortable using the work for their own discussions and presentations. This led to the results reaching audiences that they would not otherwise have reached.
- The focus and limitation of the work was communicated clearly in order to manage expectations.
- The report was published in Welsh and English, which meant it reached audiences that it may not have otherwise.

[Download a copy of the study.](#)

Research into seven-day working: partnership working and using media coverage to raise awareness among policymakers

A team led by Rachel Meacock and Matt Sutton from [Manchester Centre for Health Economics](#) set out to estimate the costs of the proposed seven-day working week and compare these to the potential health benefits. They also re-investigated the evidence underpinning the policy to explore whether the 'weekend effect' was due to a lack of doctors and specialist staff or the nature of the patients admitted. As the study coincided with a strike by junior doctors and the government's wish to implement seven-day working in doctors' contracts, publication of the findings was time-sensitive. The findings did not support the government's position on seven-day working. Therefore, care was needed not only to ensure that the findings were publicised to add to the body of knowledge around the issue, but also to ensure they were reported accurately.

- Meacock and Sutton undertook pre-publication briefings with practitioners and policy advisers around the research findings. As economists, they were keen to feed their findings into policy and practice to see how they aligned with practitioners' experiences on the ground.
- They took every opportunity to present their findings – both pre- and post-publication.
- Their intention was to seek out other interested parties – identifying the audiences that would have the highest interest in their findings. As a consequence, contact was made with a member of the national junior doctors' network and then the BMA, who were motivated to make the research as widely known as possible. Knowing that the findings were time sensitive, Meacock and Sutton chose journals based on their ability to publish quickly and enable open access to their paper.
- They launched their findings to the media using the media resources of their university's press office.
- They also wrote various blogs and columns about the work, including in the Health Service Journal.
- They used Twitter to amplify traditional media coverage. Their papers ranked top for altmetrics in their respective journals.
- The publications have led to briefings with opposition parties and the Shadow Secretary of State for Health.

Download [details of the research](#) and [details of media coverage](#).

Research into mental health advocacy: using strategic partnerships and innovative approaches to engage policymakers

Senior Lecturer in Health Policy and Management at the Health Services Management Centre (University of Birmingham), Dr Karen Newbigging began building a body of work on mental health advocacy in 2005. Karen and colleagues have, through the course of several studies and outputs, sought to engage policymakers in a deeper understanding of the need for, and organisation of, mental health advocacy. The work has contributed towards increased awareness of advocacy and its role in the promotion and protection of rights, particularly for people detained under the Mental Health Act. Recommendations from this research have been incorporated into inspections by the Care Quality Commission, informed the development of indicators for advocacy services by the National Development Team for inclusion, and been cited by the Department of Health and a House of Commons Select Committee.

- Newbigging and her team formed strategic partnerships with mental health charities and individuals with lived experience of being sectioned under the Mental Health Act. These partners were included throughout the research process (as co-researchers) also in the presentation of findings to policymakers, and have co-authored articles and briefings in a range of formats to maximise the impact of their research.
- The team had a clear view of their target audiences – proactive engagement with policymakers and the opportunity to present to parliamentarians was felt to be key to raising initial awareness of the findings. With policy influencers including the All-Party Parliamentary Group on Mental Health were made a priority.
- In presenting findings, Newbigging and her colleagues (including people with mental health issues), used both traditional and innovative presentation methods. With specific audiences, it was felt that disrupting the normal presentation format would make the findings more memorable and impactful.
- Newbigging secured additional funding for the development of communications resources. An implementation project was led by Dr Julie Ridley from the University of Central Lancashire to promote better understanding among parliamentarians and other stakeholders of advocacy, by people detained under the Mental Health Act.
- The work continues to create high levels of awareness and influence in mental health policy and legislation and has recently been extended to investigate the commissioning of advocacy under the Care Act.

Download [a range of resources](#) including films, briefings and guidelines.

Resources

- Contact the information offices in Westminster, the Scottish Parliament, the Welsh Assembly and the Northern Ireland Assembly for details of committee memberships, forthcoming business, and parliamentary and legislative procedures. Read [information on how local government works can be found](#).
- The Economic and Social Research Council (ESRC) has produced [a guide on influencing public affairs](#).
- the Parliamentary Office of Science and Technology provides [advice on writing a policy brief](#).
- Read [advice on influencing policymakers](#), written from the perspective of a previous government special adviser.
- The National Council for Voluntary Organisations offers [advice on influencing parliamentarians in the devolved nations](#).