

## Equality and Diversity Council Meeting Paper

20<sup>th</sup> January 2016

### Communications Update Paper

#### Purpose and context

The Equality and Diversity Council provides visible and robust leadership on equality issues across the NHS. Establishing an effective communications approach is essential for the Council. It will provide the Council with a consistent and timely means of communicating its work to the system, reinforcing to the Council its own purpose and added value, and helping to maintain its credibility and momentum across the NHS whilst promoting equality issues and entering the debate where necessary.

The refresh of the work programme and membership of the Council highlighted key recommendations for its future communications element. This paper presents an update on the arrangements in place for the Council's communications workstream.

#### Actions taken to date

Following the 20<sup>th</sup> October meeting of the EDC, a draft Communications Strategy for the EDC has developed in collaboration with the key national organisations represented on the EDC. The draft strategy has been tabled to the EDC for comments.

NHS England has identified a nominated communications lead to take forward the communications element of the EDC. The following national organisations have also nominated specific communication experts to work on the EDC's communication element:

- NHS Employers
- NHS Providers
- NHS Leadership Academy
- Care Quality Commission
- Health Education England
- Health and Social Care Information Centre

The communications subgroup will help in the dissemination of proactive, consistent and timely EDC messages across the sectors. Other EDC member organisations, not cited on the above list, are encouraged to nominate communications leads from their respective organisations. The subgroup will hold its second meeting in early January 2016.

Branding for the EDC has been produced – this will give the Council its own identity, whilst not deviating away from the core focus of the Council, which is upon the NHS. The new EDC branding will feature on all EDC papers from January 2016.

## Current position

Current communication mechanisms for the EDC include:

- An EDC webpage – provides background and information to the Council and its material including minutes and papers of meetings and membership biographies.
- An active EDC twitter account.
- An email account for communicating to EDC members and beyond.
- The EDC communications plan has been developed and will be circulated amongst EDC members for input, contribution and clearance.
- All EDC sub groups and EDC communication leads are supporting the development of specific communication forward planners for each EDC sub group, outlining key messages, good practice, and forthcoming messages from January - April 2016.
- An EDC Forward Plan of communications opportunities has been drafted.
- A one page narrative for use by EDC members has been produced.

## Key risks

The absence of an EDC communications element is likely to have a negative impact upon:

- Keeping equality high on the healthcare agenda.
- Positively positioning the EDC as a body of influence in promoting equality within the NHS and beyond.
- That EDC members are not actively promoting the equality agenda.
- Promoting the key work products of the EDC in a timely and consistent way.
- Improving understanding of how people's differences, cultural expectations and social status can affect their experiences and health outcomes.

## Actions requested and recommendations

- EDC to note the above.
- EDC subgroups to engage with communications subgroup to develop subgroup specific communication forward planners, and to say how they want to be involved.
- EDC members to agree to support a budget for the Communications Subgroup.

## EDC Communications Subgroup January 2016

[Members of the Communications Group are: Stephen Lightbown (NHS England) (chair), Anna Jefferson (CQC), Jacqui Eden-James (NHS Confederation), Caroline Bernard (NHS Providers), Thomas Verity (HEE), Henry Bonsu (Broadcaster), Ruth Passman (NHS England), Habib Naqvi (NHS England), Ranjit Senghera (NHS England), Isabelle Hunt (HSCIC).]