



# Staff engagement, communication and equality checklist

September 2019





## Guidance only: Staff engagement, communication and equality checklist

This guidance has been produced to offer useful information on how to engage and communicate with the workforce and staff union representatives during any change within an organisation.

If a change affects more than one organisation you need to co-ordinate communications and engagement for staff and consider briefing the West Yorkshire and Harrogate Area Partnership Group.

This guidance does not replace your organisations change policy for managing organisational change consistently and equitably to all staff.

### Overarching principles

When engaging and communicating with staff members you should consider the following principles:

<p><b>Work with HR for advice and guidance</b></p>	<p>Staff will want to know what it means for them in their working environment:</p> <ul style="list-style-type: none"> <li>• Produce FAQs with HR</li> <li>• Set up an intranet page</li> <li>• Consider a staff blog on the change proposal</li> </ul>
<p><b>Involve your engagement, communications and equality teams</b></p>	<p>Speak to your engagement and communication teams at the earliest opportunity so that you can assess the scale and impact of the change, and plan to manage any potential issues. Make sure your press officer is aware and you know who to talk to for up to date information.</p>
<p><b>Work with the unions from the very beginning</b></p>	<ul style="list-style-type: none"> <li>• Ensure regular meetings are set up with Staff Side (union representatives) via HR through the social partnership forum (SPF).</li> <li>• Invite them to meetings to meet with their members ahead or after briefings.</li> </ul>
<p><b>Work with your governance lead from the beginning for decision making processes</b></p>	<p>Any decisions needed will need to follow your organisation's governance routes:</p> <ul style="list-style-type: none"> <li>• Produce flow charts / timeline for decision making</li> <li>• Prepare briefing papers to agreed timelines.</li> </ul>
<p><b>Leave enough time</b></p>	<p>The length of time you need to plan, deliver and report on your engagement will depend on;</p> <ul style="list-style-type: none"> <li>• The scale of the change</li> <li>• The impact on staff members (especially working carers)</li> <li>• Other factors such as involving unions and internal staff support services.</li> </ul>

<p><b>Consider levels of influence</b></p>	<p>Be clear about what is changing and what staff can actually influence, and how they can do this. Provide an opportunity to share their views anonymously if helpful.</p>
<p><b>Engage managers first so they can ask questions which affect their teams and help be communication advocates</b></p>	<ul style="list-style-type: none"> <li>• Consider manager briefings</li> <li>• Produce manager communication toolkits with guidance for cascading through their teams (produce key messages, FAQs, CEO/director film of why change is needed and consider team WhatsApp groups for those working out of office hours or in other sites).</li> </ul>
<p><b>Making the engagement accessible – with channels in place to support staff working offsite or out of office hours</b></p>	<ul style="list-style-type: none"> <li>• You will need to demonstrate that you have made your engagement accessible to all staff members.</li> <li>• Provide information in alternative formats when requested such as easy read / BSL.</li> <li>• Use different methods to engage such as drop-ins, paper surveys, and online surveys.</li> <li>• Think about all communication channels available and where best you can tell them about the change, for example staff rooms and equipment pick up points.</li> </ul>
<p><b>Produce a communication toolkit for managers (and keep it current with regular feedback)</b></p>	<p>Consider:</p> <ul style="list-style-type: none"> <li>• Presentations, Blog and Vlog links</li> <li>• People stories, case studies – what would be different for those accessing care, as well as staff delivering the service.</li> <li>• Messages from the front line</li> <li>• Key messages for cascading</li> <li>• Help line number for further info</li> <li>• CEO/director messages from the top</li> <li>• Manager briefings</li> <li>• Walk the floor opportunities.</li> </ul>
<p><b>Regular feedback ‘you said, we did’</b></p>	<p>Feeding back the findings of the engagement and demonstrating what difference staff feedback has made is an essential part of the engagement process. Consider ‘You said we did’ formats.</p>

## Outline your plans for engaging and communicating with staff about the change

**Project lead:**

Name and contact details of person leading the project

**HR lead:**

Name and contact details of person from the HR team overseeing the engagement (if applicable).

**Union representatives:**

Name and contact details of person from the union overseeing the engagement (if applicable).

**Engagement lead:**

Name and contact details of person from the engagement team overseeing the engagement (if applicable).

**Communications lead / press officer:**

Name and contact details of person from the communications team overseeing the engagement (if applicable).

**Equality lead:**

Name and contact details of person from the equality team overseeing the engagement (if applicable).

**Provide a background to your project:** Consider including; an outline of the service (who is it for, what does it provide?) Is the project led by National, West Yorkshire and Harrogate Health and Care Partnership or local priorities? Include in this description if the project is also driven by any other priorities i.e. patient views, workforce pressures etc.

**Timescale of project:** Include in this description any key dates, milestones and meetings etc.

**Why are you making the change?** (What impact will it have staff especially working carers)

**Could the project change the way a service is currently provided or delivered?**  Yes  No

If yes, outline of what is changing (what will be different after the change?) give details below e.g. which service, change the location, opening times, facilities or services on offer

**Would the outcome of this change result in?**  An enhancement  Reduction in service  No difference

**Does the information above affect staff from?** (please specify which organisation)

Bradford District and Craven  Calderdale  Harrogate  Kirklees  Leeds  Wakefield

*Give details below if there is variation between areas, how many staff are likely to be affected, and is it likely to specifically affect staff from protected groups<sup>1&2</sup>?*

Age  Disability  Gender reassignment  Marriage & Civil Partnership  Pregnancy and maternity  
 Race  Religion or belief  Sex  Sexual orientation  Other groups<sup>2</sup>

**Could the project directly affect the services received by the public including patients, unpaid carers and families?**  Yes  No

If yes, speak to your engagement, communication and equality team to develop a patient and public engagement plan.

**If none of these questions apply, please describe the nature of the change:**

**Do you have the evidence base to support the project? Give details below;** (please specify which organisation)

Bradford District and Craven  Calderdale  Harrogate  Kirklees  Leeds  Wakefield

Give details below if there is variation between areas:

**To be completed by engagement and equality leads only:** (please specify which organisation)

	Yes	No	Legal duty
Equality impact assessment required	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Equality Act 2010
Engagement activity required	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	<b>Legal duty</b> Section 242 of the Health and Social Care Act, Section 14Z2 - Public involvement and consultation by clinical commissioning groups
Co-production activity required	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	<b>Legal duty</b> Section 242 of the Health and Social Care Act - Section 14U - Duty to promote involvement of each patient
Formal consultation activity required	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	<b>Legal duty</b> Section 242 of the Health and Social Care Act, Section 14Z2 - Public involvement and consultation by clinical commissioning groups
Communication activity required	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	<b>Legal Duty</b> NHS Constitution
Other, for example unions / Staff Side representatives, Health and Wellbeing Boards, Joint Overview Scrutiny Committee, local Overview Scrutiny Committee	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/> Calderdale <input type="checkbox"/> Harrogate <input type="checkbox"/> Kirklees <input type="checkbox"/> Leeds <input type="checkbox"/> Wakefield <input type="checkbox"/>	Union representation Health and Care Act 2012.

No activity required	Bradford & Craven <input type="checkbox"/>	Bradford & Craven <input type="checkbox"/>	
	Calderdale <input type="checkbox"/>	Calderdale <input type="checkbox"/>	
	Harrogate <input type="checkbox"/>	Harrogate <input type="checkbox"/>	
	Kirklees <input type="checkbox"/>	Kirklees <input type="checkbox"/>	
	Leeds <input type="checkbox"/>	Leeds <input type="checkbox"/>	
	Wakefield <input type="checkbox"/>	Wakefield <input type="checkbox"/>	

**Is the project likely to receive national, local media attention?** Please discuss with your communication lead / press officer (please specify which organisation)

Bradford District and Craven  Calderdale  Harrogate  Kirklees  Leeds  Wakefield

Give details below if there is variation between areas:

**Recommendations, team leads and senior officer (SRO) approval:**

<b>HR lead:</b>	Allocated engagement lead:	
	Actions agreed:	
	Date:	
<b>Engagement lead:</b>	Allocated lead:	
	Actions agreed:	
	Date:	
<b>Communications lead:</b>	Allocated lead:	
	Actions agreed:	
	Date:	
<b>Equality lead:</b>	Allocated equality lead:	
	Actions agreed:	
	Date:	
<b>SRO:</b>	Agreement to complete project scope:	Yes <input type="checkbox"/> No <input type="checkbox"/> Other <input type="checkbox"/>
	Allocated clinical lead:	
	Date of approval:	

## **Appendix 1 - Our responsibilities and legal duties**

### **Union representation**

Trade union reps are entitled to paid time off to get training and do their work as reps (as shop stewards, health and safety or union learning reps or other trade union officials). The objective of staff engagement is to promote effective employee relations by providing accredited representatives of the recognised trade unions with reasonable time and appropriate facilities to carry out their functions. We recognise the importance of working, in partnership, with the trade unions and are therefore keen to ensure that the role undertaken by the trade unions representatives is supported.

### **Staff consultation**

Every organisation will have an Organisational Change Policy which must be followed with appropriate advice from HR. Organisational Change refers to a proposed change that will have a significant impact on staff. An organisational change, as it affects an individual employee or group of employees is any change that alters their contracted:

- Work patterns
- Work location
- Grade, pay or other terms and conditions of service;
- Establishment of their post or leads to displacement of post(s) through the reduction of numbers of posts;
- Fundamental nature of their role and main responsibilities / duties;
- Employer – e.g. through TUPE transfers, statutory instrument, enforced secondment

Anyone who identifies the potential need for a change must ensure that any consultation undertaken with staff is meaningful and offers a genuine opportunity to present alternative approaches to the change, identify risks, and provide feedback as to the impact of the change on their personal circumstances. Consultation is the process by which the views of those affected by a proposal are sought, considered and appropriate amendments or alterations made.

### **Section 14P - Duty to promote NHS Constitution**

- (1) Each clinical commissioning group must, in the exercise of its functions—
- (a) Act with a view to securing that health services are provided in a way which promotes the NHS Constitution

### **Section 14U - Duty to promote involvement of each patient**

- (1) Each clinical commissioning group must, in the exercise of its functions, promote the involvement of patients, and their carers and representatives (if any), in decisions which relate to—
- (a) The prevention or diagnosis of illness in the patients, or
- (b) Their care or treatment.

### **Section 14Z2 - Public involvement and consultation by clinical commissioning groups**

- (1) This section applies in relation to any health services which are, or are to be, provided pursuant to arrangements made by a clinical commissioning group in the exercise of its functions (“commissioning arrangements”).
- (2) The clinical commissioning group must make arrangements to secure that individuals to whom the services are being or may be provided are involved (whether by being consulted or provided with information or in other ways)—
- (a) In the planning of the commissioning arrangements by the group,



- (b) In the development and consideration of proposals by the group for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals or the range of health services available to them, and
- (c) In decisions of the group affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact.

### **NHS Constitution (Refreshed March 2013)**

The NHS Constitution produced by the Department of Health establishes the principles and values of the NHS in England. It sets out rights to which patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with responsibilities, which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively. The Secretary of State for Health, all NHS bodies, private and voluntary sector providers supplying NHS services, and local authorities in the exercise of their public health functions are required by law to take account of this Constitution in their decisions and actions.

Seven key principles guide the NHS in all it does. They are underpinned by core NHS values which have been derived from extensive discussions with staff, patients and the public. Principle Four focuses around patient engagement and involvement and is emphasised through the Patient's Rights Section.

#### **Principle four**

The NHS aspires to put patients at the heart of everything it does. It should support individuals to promote and manage their own health. NHS services must reflect, and should be coordinated around and tailored to, the needs and preferences of patients, their families and their carers. Patients, with their families and carers, where appropriate, will be involved in and consulted on all decisions about their care and treatment. The NHS will actively encourage feedback from the public, patients and staff, welcome it and use it to improve its services.

#### **Patient rights - Involvement in your healthcare and in the NHS:**

The public have the right to be involved, directly or through representatives, in the planning of healthcare services commissioned by NHS bodies, the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services.

The NHS also commits:

- To provide you with the information and support you need to influence and scrutinise the planning and delivery of NHS services (pledge);
- To work in partnership with you, your family, carers and representatives (pledge);
- To involve you in discussions about planning your care and to offer you a written record of what is agreed if you want one (pledge); and
- To encourage and welcome feedback on your health and care experiences and use this to improve services (pledge).

#### **The Equality Act 2010**

The Equality Act 2010 unifies and extends previous equality legislation. Nine characteristics are protected by the Act, age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.

Section 149 of the Equality Act 2010 states that all public authorities must have due regard to the need to a) eliminate discrimination, harassment and victimisation, b) advance 'Equality of Opportunity', and c) foster good relations. To help support organisations to meet these duties a set of principles have been detailed in case law. These are called the Brown Principles;

- The organisation must be aware of their duty.
- Due regards is fulfilled before and at the time any change is considered as well as at the time a decision is taken. Due regards involves a conscious approach and state of mind.
- The duty cannot be satisfied by justifying a decision after it has been taken.
- The duty must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision.
- The duty is a non-delegable one.
- The duty is a continuing one.

An Equality Impact Assessment (EQIA) will need to be undertaken on any proposals for changes to services that are developed through the programme, in order to understand any potential impact on protected groups and ensure equality of opportunity. Engagement must span all protected groups and other groups, and care should be taken to ensure that seldom-heard interests are engaged with and supported to participate, where necessary.

## Appendix 2 – Engaging and communicating with staff members

### Aims and objectives

- Provide accurate information about the project
- Get staff on board
- Engage all staff
- Make sure feedback and experience from staff inform plans
- Maintain confidence and support
- Be open and honest about what needs to happen
- Lay ground for the new way of working.

### By engaging and communicating with stakeholders effectively we can achieve:

- Better contribution to our work
- More informed decision making
- Better understanding of local needs
- Shared ownership
- Trust and openness
- Change through experience
- Better outcomes

### Build on these existing mechanisms and engage, not just inform

- Work with engagement and communication leads from across departments and organisations to gather information on what staff communications are already in place
- What internal communications mechanisms are already in place
- Pay specific attention to priority groups such as working carers, staff who work unsociable hours, reduced or no access to email or the intranet
- Staff engagement techniques that work well

Detailed stakeholder mapping and prioritisation needs to be undertaken so that engagement and communications can be tailored to the various staff groups in a managed and consistent way.

### Other ideas when planning engagement and communication with staff:

- Identify PR risks, develop managing issues matrix
- Media protocols shared (including social media)
- Change champions - Identify individual staff (clinicians and non-clinicians) that is supportive of change. Work closely with them to provide honest and up to date messages about the changes / project.
- Displays/ roller banners - visual displays of the project
- Chat-rooms - set an area of the intranet where staff can go to raise an issue or talk about project / change in their area
- E-Survey - set up an online survey for staff to understand what they would change in their working area
- Existing meetings and briefings - use established meetings and briefings as a key way to target staff and have a two-way conversation about change.
- Films - develop a series of short films as a means of raising awareness of the review and engaging staff about why change is needed.
- Information/ staff support packs - develop toolkit pack of information and support material to help when discussing programme at team meetings/ briefings.
- Internal branding for staff campaign - to build awareness of the project and credibility
- Intranet - continue to update the intranet and provide staff with up to the minute information about the changes /project and how they can get involved.

- Newsletters and bulletins - produce syndicated content for newsletters and bulletins. Share with partner organisations
- Pledge cards - develop pledge cards for distribution to all staff across all partners
- Roadshows - set up a series of promotional roadshows across all partner organisations to raise awareness of the project and the need for staff to get involved
- Webinars / WebEx / Skype - set up face-to-face presentations through webinars as a way to discuss ideas and raise issues.

For more information contact:

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🐦 @WYHpartnership

A partnership made up of the NHS, local councils, care providers, Healthwatch and community organisations.

**September 2019**

**West Yorkshire and Harrogate**  
**Health and Care Partnership**

