

A word with Colin Douglas “

Director of NHS Communications



Colin Douglas, the Director of NHS Communications is a man with clear goals who wants communications to be as strong on the ground as it possibly can be. AHC News meets the man who is taking communications to the heart of NHS thinking.

It's 10 months since Colin Douglas took up his appointment at the Department of Health. He's settled well into the job he started in January 2008; he's enjoying the role, recognises the positive energy across NHS communications but is aware that 'there's still lots to do'.

Early impressions are positive. "There's a great deal of good communications across organisations and I've met a lot of people who are passionate about the NHS and the role that communicators can play in delivering the services and improvements the NHS is driving towards."

But the challenges for NHS communicators have never been greater. According to Colin, there are three main challenges. The first is to ensure local organisations are adequately resourced and skilled in communications so that the impact on the ground is as strong as it needs to be. In NHS speak, we're talking 'capacity' and 'capability'. This is an issue not just for professional communicators, but also leaders locally and the NHS as a whole. The second challenge is to engage with the workforce. "Rather than seeing internal communications as just an add on after media relations, marketing and stakeholder engagement," says Colin "it needs to be an integrated function of communications." The third challenge is for all involved in NHS communications to take responsibility for managing and defending the NHS brand. "I'm not talking about being hyper-sensitive and defensive or not trucking any counter views," says Colin, "but what I am saying is let the NHS put its side of the story in terms of responding to negative stories, being proactive about the good news and selling the vision and benefits of the service that makes up the NHS today."

Colin is well placed to look at the way these challenges can be met head on. He's aware that the Next Stage Review, which puts quality firmly at the heart of the NHS, means good communications will have a crucial part to play in empowering both staff and patients.

Targeting the wider NHS community to drive up capacity and capability in communications is increasingly seen therefore as the best means to lift standards and allow NHS organisations to engage with a variety of stakeholders. Colin makes no secret that this is a big priority for him over the next two years. "I want to make it clear that I don't see it as the role of the centre to say to NHS organisations that this is what you need in terms of size and communications resource. But we do need to be clear about what local NHS communicators should be doing so that they have the quality and calibre of staff to meet those demands. I'm talking here about the range of skills that are essential for today's communicators, such as social marketing, media and stakeholder engagement, research skills to name just a few. I know that the communications picture is variable across the country. No doubt some organisations will need to recruit extra people. But we can't micro-manage that at the DH; however, what we can do is set a clear definition of what good communications can provide and what it should look like so that local organisations can make sure they're up to the job."

So how can local communicators play a part in this process? "There are several ways," he says. "One is through recognising the part they play already – as communicators you are on the front line of NHS



communications. You are telling the NHS story to patients, the public, the media and other stakeholders. You are managing the NHS brand”.

Another is to realise that NHS communicators are in a role that will only become more and more important. “Communications is the way in which an organisation listens to and speaks to audiences it wants to connect with. To be successful, organisations need to join up their communications activities and be focused about the messages all parts of the organisation are putting out. So a good Communications Department will make links with all the departments it needs to in order to ensure communications are consistent and coherent. We all need to ask ourselves whether we’re up to the task. Do we have the skills and the ability to do the job well? How can we improve?”

And are communicators getting the support they need in their day to day work? Colin’s experience is mixed. While he’s seen some fantastic connection, understanding and support between Executives and communicators in some Trusts, he’s also seen examples where that’s far from the case. “This might be because some executives have a lack of understanding of what good communications is or they have a very narrow view of communications just being media relations,” says Colin. He argues that organisations need to see what they are missing in the absence of well supported communications. And he’s not sitting idle. “I and my SHA colleagues are speaking to Chief Executives and leaders across the NHS to make the point that communications has a critical part to play in where they want their organisation to go.”

He’s also involved in a piece of work around defining what good communications for the NHS should look like, which he feels will be hugely important. “We will be setting a standard that shows the leadership of local NHS organisations what good communications looks like. The work in PCTs around World Class Commissioning has already started this process and raised awareness of the issue but we need to do much more.”

So, is Colin driven purely by devising strategy at some remote DH centre? “Far from it, I want to measure what I do by the success of professional communicators on the ground.”

So, it’s not trial by media but trial by communicators! The next phase of NHS communications looks distinctly interesting . . .

Colin Douglas – a profile

Age:	45	“
Born:	Stockwell in London	
Educated:	School in Brixton. A degree in Philosophy, Politics and Economics at Oxford University.	
Lives:	In south east London	
Family:	Married, with two young sons	
Career:	Started in local government followed by five years as a Director of the PR Agency, Citigate Communications. He undertook a number of director of communications roles, including Director of Sport England and Director of Communications at the Audit Office and then the Health and Safety Executive. For 10 years (1996-2006) he was also a non-executive director of the London Ambulance Service.	
Current position:	Colin was appointed Director of NHS Communications in January 2008	

