



# Diversity Charter

Tackling racial inequality in NHS communications requires bold, focused and collective action. We have developed a charter with achievable and measurable actions that can support our aim of developing a diverse communications and engagement profession for the NHS, supported by strong allyship and advocacy.

Our charter has been developed with the ambition of making it relevant to as wide a group as possible. This includes NHS communications professionals, as well as chief executives and other senior leaders.

By signing up to this charter, I will do the following:

**1 I will take personal responsibility to challenge racism and champion diversity.**

We have a problem in the NHS communications profession with racial inequality. This is evidenced by the underrepresentation of ethnic minorities among senior leaders. It is reflected in the experiences reported by professionals from racialised groups. Inequality persists for ethnic minority communicators entering the profession. This affects their experience of working in communications roles and can limit their ability to meet their career potential. We all have a part to play in taking action to tackle this.

**2 I will work to ensure that the percentage of ethnic minorities in the most senior NHS communications professionals is representative of the local population or workforce, whichever is highest, by 2030.**

The State of NHS Communications report published in 2024 shows representation of ethnic minority communicators at Agenda for Change band 9 or above currently stands at 5 per cent. In addition, almost two-thirds (61 per cent) of senior NHS communicators say they do not have a communications workforce that is representative of the communities they serve. The Taskforce for Diversity in NHS Communications makes a number of recommendations on how this representation can be achieved.

**3 I will reflect honestly on what I need to do to improve my knowledge and understanding about the issues people from ethnic minority backgrounds face when working in the NHS.**

Ongoing training and development is good, but it's not enough on its own. It's important to keep being curious. This means challenging personal assumptions and stereotypes. It involves making sure action is underpinned by evidence. It requires us to review the evidence we have, collect data where it doesn't exist and engage with lived experience as often as possible to illuminate the statistics.

**4 I will build and develop my professional networks of people who don't look like me. I will share my knowledge and insights about my own experience and will advocate for others.**

A vital part of anti-racist leadership involves building personal relationships with colleagues from different backgrounds, such as by becoming a mentor to more junior staff. It also includes creating a psychologically safe space where people can share honest reflections about their diverse experiences.



**5 I will make sure my commitment to improving the diversity in the NHS communications profession is reflected in my own organisation's communications practice.**

Building diversity of thought and experience into strategic planning is essential if we want to engage everyone. Rather than viewing this as a 'nice to have' or doing it as an afterthought, it means making sure projects are informed from the start by rigorous research insights (rather than assumptions) about diversity. Creating opportunities for ethnic minority professionals to thrive because of their background – and not in spite of it – is key to ensuring that the profession values all staff equally.

**6 I will help improve diversity in the NHS communications profession by identifying bias where it exists within our recruitment processes and taking action to improve them. I will use every opportunity I have to help bring more people from ethnic minority backgrounds into the profession and develop in-house talent. I will not participate in recruitment panels that are not racially diverse.**

We know that recruitment processes can include bias and discrimination, in a way which presents barriers to candidates from ethnic minorities. The evidence also shows us there are often unspoken requirements for senior roles. Candidates who lack the social capital to be coached or mentored through their application miss out on roles where they meet all of the advertised criteria. Bridging this attainment gap requires a shared commitment to remove biases from our processes and transparency about what is required in a role on a day-to-day basis. I will play my part in developing coaching and mentoring programmes which advocate for communicators from racialised backgrounds.

## I will take the following practical steps:

In signing up to this charter, I will also take personal responsibility to maintain my commitment to diversity in NHS communications by taking the following actions in the year ahead:

- Develop an ambitious appraisal objective and agree this with my line manager.
- Take concerted action to promote NHS communication vacancies in my organisation to candidates from ethnically diverse backgrounds.
- Extend my professional network to include people from ethnically diverse backgrounds.
- Undertake at least one development activity relating to diversity and inclusion in the next year.
- Identify an opportunity to provide mentoring and support to a junior NHS communications professional from an ethnically diverse background.
- Ensure my organisation keeps the NHS Confederation communications team informed of what we are doing, the challenges we have experienced and the outcomes we have achieved.
- Look for opportunities in the organisation where I work to influence senior leaders, in order to influence change about tackling racism.