



IHTSDO Communication Strategy

2008

Date 20080205
Version 0.03



Document Properties

Filename:	IHTSDO Communication Strategy_v0-03.doc
Title:	2008
Creating Author:	Russel Craig, John van Beeck, Ulrich Andersen, Knut Bernstein
Subject*:	Communication, Strategy

* Subject should be filled in as 3 keywords. The first keyword should be a structural or organizational entity, e.g. "IHTSDO". The second keyword should be the process the document is related to, e.g. a "Meeting". The third keyword should be an object, e.g. an "Agenda".

Amendment History

Version	Date	Editor	Comments
0.01	20080103	Russell Craig	First draft for review by other authors
0.02	20080104	Knut Bernstein	Formatting and minor updates
0.03	20080205	Russell Craig	Version approved by Management Board on 4 February 2008.

© International Health Terminology Standards Development Organisation 2008. All rights reserved.

SNOMED CT® was originally created by the College of American Pathologists.

This document forms part of the International Release of SNOMED CT® distributed by the International Health Terminology Standards Development Organisation (IHTSDO), and is subject to the IHTSDO's SNOMED CT® Affiliate Licence. Details of the SNOMED CT® Affiliate Licence may be found at <http://www.ihtsdo.org/our-standards/licensing/>.

No part of this document may be reproduced or transmitted in any form or by any means, or stored in any kind of retrieval system, except by an Affiliate of the IHTSDO in accordance with the SNOMED CT® Affiliate Licence. Any modification of this document (including without limitation the removal or modification of this notice) is prohibited without the express written permission of the IHTSDO.

Any copy of this document that is not obtained directly from the IHTSDO [or a Member of the IHTSDO] is not controlled by the IHTSDO, and may have been modified and may be out of date. Any recipient of this document who has received it by other means is encouraged to obtain a copy directly from the IHTSDO [or a Member of the IHTSDO]. Details of the Members of the IHTSDO may be found at <http://www.ihtsdo.org/members/>.



Table of Contents

1. Purpose.....	4
2. Communications principles.....	5
3. Communications environment.....	6
4. Audience requirements	7
5. Communications goals	7
5.1 External Communications	8
5.2 Internal Communications.....	8
5.3 IHTSDO communications capability	9
6. Delivery	9
7. Outcomes	10



Purpose

The International Health Terminology Standards Development Organisation (IHTSDO) communicates with a wide variety of stakeholders and interested parties. To be effective this communication must support the IHTSDO's activities in ways that reflect and enable achievement of the Purpose, Objects and Principles of the IHTSDO as set out in its [Articles of Association](#).

Success of the IHTSDO will be measured in many ways. Points of particular relevance to this strategy are that the IHTSDO:

- Wishes to grow its membership.
- Has a strong focus on increasing international awareness of, contribution to and uptake of SNOMED CT® as quickly as possible.
- Is a global organisation that must operate in a collaborative and networked way.
- Is a young organisation that is still developing all the capabilities it needs to succeed.

Effective communications are essential to achieving this. This document sets out the IHTSDO's first communications strategy. It provides the overall vision for IHTSDO communications, articulates communications principles, outlines the IHTSDO communications environment and audience interests, and establishes high-level communications goals.

The strategy will be used in the following ways:

- By **IHTSDO Members** to judge the success of the IHTSDO's communications efforts.
- By the **IHTSDO Management Board** to guide and monitor the communications activities of the Association and its executive.
- By the **IHTSDO executive** and **IHTSDO business partners and service providers** as the point of reference for planning and delivery of all communications activities.
- By **other parties** to understand why and how the IHTSDO communicates with them.

The strategy is approved and owned by the IHTSO Management Board. It will be reviewed annually by the Board and IHTSDO executive and updated as required. The strategy does not include plans for its implementation. These will be developed and delivered by the IHTSDO executive with the assistance of a range of other parties including contractors and outsourced service providers.

Vision

High-quality communication enables achievement of the Purpose, Objects and Principles of the International Health Terminology Standards Development Organisation and supports its performance as a networked and collaborative organisation.



Communications principles

The principles that guide IHTSDO communications are:

Openness

The IHTSDO will provide access to appropriate information about its products, services, activities and performance and enable effective communication with those responsible for governing and managing the Association.

Transparency

Communications will enable clear understanding of how the IHTSDO is governed, how its products and services are developed and delivered, and how decisions about these things are made.

Fairness

IHTSDO communications will enable all parties that have a right to be involved in or influence the decisions or activities of the Association to be engaged in those decision-making processes in a fair manner and regardless of their location.

Collaboration

IHTSDO communications and their supporting processes and platforms will be designed to give maximum support to collaboration.

Responsiveness

IHTSDO communications will account for, and respond to, differing audience needs and capabilities (e.g. financial, technical cultural and linguistic) as far as is feasible. The approach to communications will be evolutionary, being constantly reviewed and adjusted to keep pace with the changing needs of the Association and its stakeholders.

Quality

The quality of IHTSDO communications will be assured and judged by their accuracy, clarity, completeness, relevance, authority, consistency, timeliness, accessibility and reliability.

Responsibility

Effective communications will enable the IHTSDO enhance its economic, social and environmental sustainability.

Accountability

Communications will enable effective accountability of the Management Board and IHTSDO executive to the Members of the Association.

Effectiveness

Communications will support achievement of the Purpose, Objects and Principles of the Association and enable stakeholders to participate in that achievement in ways that are appropriate, timely and fit-for-purpose. Communication with and within the IHTSDO will be made as easy as possible.

Efficiency

IHTSDO human and financial resources applied to communications will be used as efficiently as possible. Costs faced by other parties in communicating with the IHTSDO will be kept to the minimum that is feasible.



Communications environment

The IHTSDO engages in a wide variety of communications. These are grouped into two categories:

1. **External communications:** communications aimed at audiences that are not directly involved in the governance of the IHTSDO or the development and/or use of its products and services. Typically, these communications will be either of a relatively general nature (e.g. promoting awareness of the IHTSDO and understanding of what it does) or be very specific (e.g. attraction of new members or licensees, positioning of IHTSDO products and services in the ‘health informatics universe’ etc.).
2. **Internal communications:** communications specific to the governance of the IHTSDO, to the development and delivery of its products and services or to the conduct and co-ordination of its internal business processes. These types of communications will be specific and will typically involve IHTSDO Members (and their SNOMED CT® operations personnel), the IHTSDO Management Board and executive staff, IHTSDO Affiliates (e.g. SNOMED CT® licensees), members of the IHTSDO ‘internal community of practice those collaborating in the governance, development and/or delivery of IHTSDO products and services (e.g. members of Committees or working groups, contracted service providers etc.) or those who are involved in a strategic relationship with the IHTSDO (e.g. harmonisation bodies, other health information standards organisations etc).

The IHTSDO will use a judicious mix of channels for both external and internal communications. These will include:

- **Public websites:** these will be used as a primary channel for external communication of generic or relatively ‘static’ information about the IHTSDO and SNOMED CT®. The IHTSDO will continue to develop its own website (www.ihtsdo.org) and also produce information for dissemination through other appropriate websites.
- **Print media:** the IHTSDO will use print media to supplement its use of public websites.
- **Public events:** the IHTSDO will ensure that duly authorised and appropriately knowledgeable representatives attend and participate in relevant conferences, workshops and seminars etc.
- **Participation in related health information standards:** duly authorised involvement in other health information standards will support IHTSDO communication goals.
- **Face-to-face and personal networks:** the IHTSDO will make appropriate use of face-to-face communications and personal networks to achieve its goals.
- **Regular IHTSDO meetings:** the IHTSDO will ensure that sufficient regular meetings are scheduled to allow its community of interest adequate opportunity for face-to-face networking, collaboration and participation in SNOMED CT® governance and development processes.
- **Web-based communications tools:** the IHTSDO will use web-based tools to support its communications as effectively as possible – especially in support of collaboration.
- **Voice:** Voice services will be used alongside web-based collaboration tools to enable internal communications. Voice and web-based communications will be as unified as feasible.
- **Web 2.0:** Web 2.0 technologies such as [blogs](#), [social bookmarking](#), [wikis](#), [podcasts](#), [RSS feeds](#) (and other forms of many-to-many publishing), [social software](#), and web [application programming interfaces](#) (APIs) that provide enhancements over read-only websites will be used as appropriate.



Audience requirements

There are several main audiences (or stakeholder groups) for IHTSDO communications. They are identified in the table below, along with initial analysis of their principal communications requirements.

Audience	Principal communications requirements
IHTSDO members	<ul style="list-style-type: none"> • Timely access to high-quality governance information. • Good IHTSDO reputation. • Expansion of IHTSDO membership. • Expansion of SNOMED CT® licensing/increased SNOMED CT® uptake. • Information to support their own SNOMED CT® adoption. • Protection of IHTSDO intellectual property and trademarks.
Members' SNOMED CT® operational personnel	<ul style="list-style-type: none"> • Accurate and timely SNOMED CT® technical information. • Appropriate engagement in SNOMED CT® development and delivery processes and decisions. • Effective exchange of information with other national users of SNOMED CT® (esp. via Members' Operational Liaison Forum).
SNOMED CT® contributors – Committees and Working Groups	<ul style="list-style-type: none"> • Effective and appropriate access to IHTSDO governance and management processes and information. • Communications channels and tools that suitably support involvement in SNOMED CT® development processes.
SNOMED CT® Affiliate licensees	<ul style="list-style-type: none"> • Accurate and timely SNOMED CT® licensing and technical information. • Access to/engagement in SNOMED CT® governance via Affiliate Forum.
Health informaticians (including health informatics associations and media)	<ul style="list-style-type: none"> • Detailed information about IHTSDO and the design and delivery of SNOMED CT®. • Easy access to appropriate technical information to support SNOMED CT® use. • Support for “community of interest” activity. • Access to IHTSDO Board, officers and experts.
Health providers	<ul style="list-style-type: none"> • Awareness of the purpose, design and benefits of SNOMED CT®.
Strategic ‘partners’ (harmonisation bodies, other health information standards etc).	<ul style="list-style-type: none"> • Clear understanding of IHTSDO objectives. • Detailed information about SNOMED CT® • Appropriate engagement in IHTSDO activities.
IHTSDO Management Board	<ul style="list-style-type: none"> • Achievement of IHTSDO communications goals. • Management information to support governance and accountability processes.
IHTSDO executive	<ul style="list-style-type: none"> • Operational information to support IHTSDO business processes. • Ability to effectively co-ordinate all areas of IHTSDO activity.

Communications goals

Given the IHTSDO communications environment and audiences, the following goals for 2008 have been established as the basis for communications planning:



External Communications

Develop and deliver external communications through an appropriate mix of channels that 1) promote accurate understanding of the purpose of the IHTSDO and the role of SNOMED CT®, 2) attract new members of the IHTSDO and licensees of its terminology products, 3) support development and maintenance of effective relationships between the IHTSDO and other appropriate bodies and individuals and 4) generally protect and enhance IHTSDO Members' interests. Specific activities to achieve these goals will include:

- Detailed analysis and external communications audience (makeup and requirements), and planning and prioritisation of overall external communications activity.
- Development and delivery of communications aimed specifically at prospective IHTSDO members.
- Development and delivery of other key IHTSDO external communications content (e.g. website and print media content, standard presentations for use at conferences).
- Redevelopment of the IHTSDO website to best support audience requirements.
- Prioritised development of strategic relationships with relevant health information standards and industry bodies, and health informatics and clinical associations.
- Active IHTSDO participation in appropriate conferences, exhibitions and events etc.
- Development and/or review and approval of IHTSDO external communication policies, including:
 - Website maintenance and development (including content approval processes and Members' use of IHTSDO website infrastructure and content).
 - External communication rights, roles and responsibilities of Management Board members, executive staff, contributors (i.e. Committee and Working Group members) and contracted service providers.
 - Conference and exhibition attendance.
 - Domain name registration and management.
 - Trademark policy.

Internal Communications

Define, develop and deploy an internal communications environment that best enables the effective governance and operation of the IHTSDO in ways that 1) equitably meet reasonable stakeholder needs and expectations, 2) support the IHTSDO's goals principles of fairness, openness and transparency and 3) are efficient, cost-effective and future-proof (especially regarding scalability). Specific activities to achieve these goals will include:

- Detailed analysis and prioritisation of internal communications audience (makeup and requirements).
- Definition of an internal communications 'architecture' that supports delivery against audience requirements and aligns with overarching goals.



- Assessment, selection and deployment of technical solutions that give effect to the internal communications architecture¹.
- Development and implementation of governance and business processes to support effective operation of internal communications environment.
- Development and/or review and approval of internal communications policies that will address (at least):
 - Access rights, roles and responsibilities.
 - Content creation (roles, responsibilities and approval processes).
 - Information management (including document management).
 - Security.
 - Review, maintenance and development.
 - Costing, budgeting and cost-apportionment.

IHTSDO communications capability

Define, develop and implement internal IHTSDO business processes and capabilities that ensure that:

- Use of communications channels best matches the requirements and capabilities of external and internal audiences.
- Information is produced and communicated internally and externally in a high-quality, efficient, effective and timely manner.
- The human, organisational and technological resources required to support IHTSDO communications are in place and operating effectively.

Delivery

The IHTSDO Management Board is accountable for the delivery of the goals of this strategy, and the IHTSDO Chief Executive is responsible for ensuring that delivery occurs. Delivery will require development and implementation of detailed and fully costed plans to deliver on the strategy within the available IHTSDO budget, development of IHTSDO executive staff capabilities required to achieve the goals of the strategy, use of contracted service providers, and the support of IHTSDO Members and other parties collaborating with or supporting the IHTSDO. The Chief Executive is responsible for specifying, soliciting and/or contracting for these support requirements.

¹ Note: it is likely that this communications architecture will also need to incorporate some aspects of the IHTSDO's external communications environment and related technology requirements.



Outcomes

Achievement of the goals of this strategy will contribute to the following outcomes:

- Growth of IHTSDO membership.
- Expansion of SNOMED CT® licensing.
- Positive publicity about the IHTSDO and SNOMED CT®
- Growing international awareness and acceptance of the value of SNOMED CT®.
- Increased levels of contribution to the development of SNOMED CT®.
- Increased quality of SNOMED CT®.
- Positive relationships between the IHTSDO and other standards bodies.
- Positive feedback from parties collaborating with the IHTSDO about the ease of communications and level of engagement they experience.