Northern Lincolnshire and Goole Hospitals NHS Foundation Trust actively seeks to promote equality of opportunity and good race relations. The Trust seeks to ensure that no employee, service user, or member of the public is unlawfully discriminated against for any reason, including their religion, beliefs, race, colour, gender, marital status, disability, sexual orientation, age, social and economic status or national origin. These principles will be expected to be upheld by all who act on behalf of the Trust, with respect to all aspects of this document.
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1.0 Introduction and Purpose

1.1 Northern Lincolnshire and Goole Hospitals NHS Foundation Trust provides acute hospital services for around 440,000 people across the main population bases of Grimsby, Scunthorpe and Goole and the surrounding areas and also provides services for many Lincolnshire residents.

1.2 It has two district general hospitals – The Diana, Princess of Wales Hospital in Grimsby and Scunthorpe General Hospital as well as Goole & District Hospital.

1.3 The Trust is at the leading edge of developments in hospital services and is committed to modernising health services for the population it serves, as well as providing services for a wider population.

1.4 With thousands of patients accessing our services every year – and with three sites in three distinct and different geographical locations – communication with our staff, patients, stakeholders and public is key to every day business.

1.5 The Trust is committed to developing its communications plan continually. Good communications should be a part of everyday hospital business. As a NHS Foundation Trust good communications are crucial to the success of the organisation and must play a strong role in its future. The Trust simply cannot pay lip service to the idea but must commit time and resources in order to realise what it set out as the main benefit of being a Foundation Trust – to be driven by the local community so that services are developed to meet local needs, as well as national requirements.

1.6 This plan provides a framework within which our successes can be maximised and negative publicity can be handled positively. It also acknowledges the strengthened position that local involvement affords the Trust and seeks to capitalise on the opportunities this brings.

1.7 The Trust employs 5,500 people on three hospital sites so it is vital that communications internally are timely, coherent and consistent. It is also essential that this approach is adopted and embraced when communicating externally to our 10,000 Trust Members, our Council of Governors, the general public (patients and visitors), external stakeholders and the media.

1.8 Communication activities should inform and educate. We will seek feedback from our local communities as to how we can develop and improve services.

1.9 As the Trust enters a phase where it is competing for its patients with other healthcare agencies and organisations, it is also vital that the Trust uses every opportunity to make itself the hospital of choice for the people of Northern Lincolnshire and Goole and beyond. This will help towards safeguarding local services for local people – a key aim of the South Humber Acute Services Review. Therefore, this Communications Plan should be read in conjunction with the Marketing Strategy adopted by the Trust.

1.10 This plan therefore seeks to provide a positive approach to communication and a framework within which it can be effectively carried out. The policy is built upon the values of the Trust and seeks to bring these into reality, leading to improved relationships and mutual understanding with staff, members, governors, GPs, commissioners, patients, the public, staff and other stakeholders.
1.11 The reason why this is so important is that we can:

- Keep people regularly informed of what is happening within the Trust
- Ensure the development and improvement of services through feedback
- Maintain a healthy and robust Trust membership
- Position the Trust as the first choice for hospital care
- Raise awareness of the quality and excellence of our services
- Continue to raise awareness and understanding of what it means for Northern Lincolnshire and Goole Hospitals NHS Trust to be a NHS Foundation Trust

2.0 Area

2.1 This policy applies to all areas and sites across Northern Lincolnshire and Goole Hospitals NHS Foundation Trust and relates to communication activities.

3.0 Duties

3.1 The duties and responsibilities of the personnel relating to this policy are detailed in section 4.0.

4.0 Internal Communication

4.1 The need for effective internal communication

4.1.1 Communication is key to all we do within the Trust. Internal communications (within the organisation) and external communications (with our patients, public and stakeholders) should be two-way, transparent and carried out in a timely manner.

4.1.2 The people who work for the Trust are the organisation’s greatest assets as they are the day-to-day ambassadors of the services we provide. All other assets diminish in value over time. There is a wealth of expertise, ideas, enthusiasm and potential contribution within the Trust, at all levels and across all functions which should be deployed effectively in the improvement and development of services.

4.1.3 Effective staff involvement, participation, partnership and communication involve effort from everyone who works for the Trust. Everyone has both rights and responsibilities in ensuring its success.

4.1.4 Communication is not a “bolt-on-extra” - it is at the heart of the organisation, and is a key task particularly for everyone who has a responsibility for the supervision and management of staff, including both clinical and non-clinical staff. The most effective communication and co-operation is achieved when staff are involved in decision making seeing beneficial results from their input, skills and abilities and thus gaining their commitment, understanding and support to enable the Trust to operate more effectively.
4.2 The role of management in internally communicating with staff

4.2.1 The Trust aims to create and maintain an internal culture in which staff feel able to raise ideas and suggestions, and to ask questions and have them answered. Managers must wherever possible provide swift and full answers, and to respond positively and constructively to ideas for improvement.

4.2.2 Responsibility for the implementation of effective staff communications strategies lies with Directors, with support from the PR & Communications Manager, the HR/OD Director, the Training & Development Manager and the lead Trust Director.

4.2.3 Each Director / Senior Manager / Consultant should be responsible for establishing and maintaining effective communication systems and practice within and from his/her department, including regular face-to-face discussions with staff. This includes encouragement of views and ideas from within the group, and acting upon them. This communication responsibility is an important and integral part of every Manager’s / Consultant’s job in order to deliver first class patient and other services. All have responsibility for two-way communication, not only with their staff but also with their internal and external customers.

4.2.4 Directors / Senior Managers / Consultants will adopt a high visibility, walking the patch, and they and the organisation will communicate by their actions and behaviour as well as by their words.

4.2.5 A range of mechanisms will be employed to ensure effective involvement and communication with staff. These are set out in paragraph 2.5 below. Verbal, electronic and written communications should be used in a complementary way to allow two-way open and responsive communications to continue to develop across the organisation.

4.2.6 Communication with staff will be:
   - Credible, open and honest
   - Two-way
   - Timely

4.2.7 By achieving these goals staff will feel informed, trust the information given and feel able to contribute ideas and opinions about issues and decisions.

4.2.8 Messages will be:
   - Consistent with the Trust’s values
   - Give clear direction
   - Up-to-date, relevant and consistent
   - Clearly presented, in a straightforward manner
   - Available in appropriate formats and places which staff use including multiple formats if needed to be available for different staff types
4.2.9 The Trust will involve staff in issues and decisions affecting their work and working environment, and in the planning and development of services, recognising that this improves the quality of the resultant decisions, significantly increases commitment to any change, and improves people’s sense of feeling valued and motivated. Any significant change affecting individuals or groups should be discussed face-to-face with the individuals concerned, and feedback provided on the views/ideas prior to implementation (except in emergencies). A useful way to gauge staff opinions is the Intranet and consultation on major change affecting large numbers of staff should always be consulted upon using this and other established methods, such as consultation with the Hospital Consultants Committee, the Medical Advisory Committee and the Joint Staff Consultative Committee etc.

4.3 Staff contribution to communications

4.3.1 Staff are also the Trust’s greatest ambassadors externally, as well as being members of the public themselves.

4.3.2 Staff can play a vital role in explaining overall messages to patients, visitors and the wider public. Effective communication is therefore an essential part of the Trust’s approach to developing robust staff and public/stakeholder involvement and partnership.

4.3.3 All staff have a prime responsibility for good operational communications and for ensuring their Manager / Consultant knows their views and ideas. They should also ask for relevant information if they are not receiving it, including raising the matter with a more senior manager if problems continue.

4.4 Role of the PR & Communications Team

4.4.1 The Communications Team – made up of a Manager, Deputy, Web Development Officer and secretarial support, will take the lead in facilitating and promoting effective staff communications strategies, and will offer advice and support to the Management Team and Trust Board.

4.4.2 The team is responsible in ensuring internal communication is effective. Anyone wanting information or advice about how to communicate within the organisation should speak to the PR & Communications Team.

4.4.3 Anyone who receives a request to give a media interview MUST liaise with the PR & Communications Teams before speaking to any journalist.
4.5 How we communicate internally

4.5.1 Managers / senior staff role in communicating internally:

- It is recognised that staff value leaders and managers who are visible and accessible, and are familiar with operational pressures. All staff should, therefore, have the opportunity of seeing and having a face-to-face informal discussion with their immediate manager at least once a month. This may occur as part of a group, and in most cases would happen as part of normal day-to-day contact and work.

- In addition, managers should take time to walk their ‘patch’ and speak to their frontline staff. This makes people feel valued and included. Contact does not have to be on a formal basis and can be just a very brief ‘pop-in’ for a quick chat with staff.

- All Directors should also spend at least two days each year working in operational areas.

4.5.2 Visits to departments by Non Executives / Trust Management Team:

- Non-Executive Directors and members of the Trust’s Management Team should make every effort to make regular visits to services/departments. The intention is to walk the shop floor, to see and be seen, to encourage open and informal discussions on matters of interest, and to help develop mutual understanding of each other’s roles and issues.
4.5.3 Team briefings:

- All staff should be able to participate at least once a month in two-way team briefing on relevant issues within the Trust and Department

- Such team briefings will be undertaken following a briefing by the Chief Executive to Senior Directors. The team briefing will be limited to three or four core messages, together with any departmental information, and will be verbally cascaded through the organisation by line managers to staff, who will put the information in a department/service context, strengthening its relevance to staff. This process should be completed within four working days. Questions and issues raised by staff, which are unable to be answered by the line manager, will be cascaded back through the organisation until an answer is confirmed. This will ensure that all staff receive the information first-hand from their manager, and have the opportunity to ask questions and to raise issues

- Team briefing could be undertaken through teleconferencing, if appropriate. The core brief will be placed onto the Trust Intranet, available to be printed for staff unable to hear the brief first-hand. However, managers will make every effort to ensure the brief is verbally given to all staff so that it can be explained and discussed as necessary

- Staff with responsibility for team briefing will be given the opportunity to attend in-house training on team communications

- The possibility of providing staff with a short filmed briefing from senior staff or Trust-wide or divisional issues will be explored

4.5.4 Update – monthly newsletter for staff:

- While meetings of the Trust Board are held in private, matters which are relevant and useful in a communications context do arising. The Public Relations and Communications Manager and or Deputy will therefore receive copies of the papers and use them as a base for a written newsletter – Update. It will be circulated to staff the day following the Trust Board meeting to ensure Trust staff hear about Trust Board decisions first hand and at the earliest opportunity

- The information will also be made available on the Trust's Intranet service

4.5.5 Governor meetings:

- These are held in public four times a year and are open to members of the public and the media to attend. The Public Relations Manager or deputy will attend and ensure that any items discussed, which may be reported by the media, are reported to staff via the trust intranet in a timely fashion
4.5.6 Keeping staff informed about unexpected or adverse stories in the media:

- There is also a need for a recognised communication method to deal with unexpected or adverse stories about the Trust likely to appear in the media. The Trust’s Intranet service and the telephone system, as well as the e-mail systems, will be used to rapidly communicate messages about information likely to appear in the media.

4.5.7 Staff magazine:

- A staff magazine, called The Messenger, will be published every two months to include staff news, features on individual departments, behind the news features, and general stories on matters of interest for all Trust staff. Articles will be written by Trust staff to encourage a sense of ownership.

4.5.8 Intranet:

- The Intranet is a key communications tool within the organisation. It is the place where information, policies, guidelines, meeting documentation etc are located. Updates, news, magazines, annual reports, business plans, news releases, Board minutes, the team brief, newspaper cutting summaries and updates about news affecting all Trust staff appear on the service. It includes the Trust’s telephone directory, departmental information, and all Trust policies as well as other useful information and services. It allows swift communication of information likely to appear in the local media. The Intranet site is used to share evidence-based practice in line with the Trust’s Clinical Governance policies and for training purposes.

- The intranet can be accessed from any networked PC in the Trust (almost all PCs are networked) and no passwords are required except to access secure areas. Staff who do not have ready access to a PC in their work area can use the PCs in the Trust’s Education Centres to access the intranet.

4.5.9 E-mail:

- E-mail is rapidly expanding to cover a large percentage of Trust computer systems and all staff now have an e-mail account. It can be used to rapidly disseminate messages and information to those staff who have access. Guidelines for the correct use of E-mail are included in the trust Information security policy.

- Urgent messages may be e-mailed to staff, but this should be limited to avoid over-exposure to e-mail, meaning fewer people use the system. A small group of people throughout the organisation will be identified who can access the all-staff e-mail facility. This will be policed by the PR and Communications Team.

- Adding Path Links staff working on sites other than Grimsby, Scunthorpe and Goole to our all staff e-mails will be explored.
4.5.10 Speaking out policy:

- Procedures are laid down for staff to raise any concerns, and staff should be free of any fears about raising those concerns. In the Trust’s Speaking Out policy, nominated contact points for staff to raise concerns arising out of their day-to-day duties are given

4.5.11 Question and Answer boards:

- The Question and Answer Board on the Intranet has been a useful and well-used area of the Intranet and a good opportunity to explain controversial policies and procedures. In 2008, between January to December, staff asked around 1,500 questions. All of them received an answer. The PR and Communications Team source the answers. Directorates and Divisions should nominate a lead for answering questions. The aim should be to provide a response within three working days of a question being asked

4.5.12 Other notice boards:

- Notice boards across the Trust will be managed to ensure consistency of messages across all sites. Managers will have responsibility to ensure the information shown is up-to-date and relevant. The PR and Communications Team will monitor compliance with this

4.5.13 Keeping staff representatives informed:

- Staff will also be kept informed of Trust activities/issues via a meeting of their accredited staff representatives with Trust management on a monthly basis (or more frequently if the need arises)

4.5.14 Informing Non-Executive Directors / Trust Board / Directors / Senior Management Staff:

- Directors, Senior Managers, Non-Executive Directors and the Chairman will receive a written summary of news items printed in the local media which features the Trust

- A summary of press stories which have appeared in the papers are also available on request from the PR & Communications Manager

- News releases when sent to the media will also be sent to the Trust Board members

- If the Trust should face any adverse or unexpected media attention, the PR & Communications Team will ensure that the Chairman, Non-Executive Directors and external stakeholders are informed of the Trust's position and likely media attention, by fax, e-mail or phone call to home/mobile telephone numbers
5.0 External Communications

5.1 The need for effective internal communication

5.1.1 Hospitals play a major role within their communities. Each year they are visited by hundreds of thousands of people seeking care, and they provide employment for large numbers of staff.

5.1.2 Northern Lincolnshire and Goole Hospitals NHS Foundation Trust employs about 5,500 staff at three sites and has a Council of Governors as well as in the region of 10,000 Members it needs to communicate with.

5.1.3 In addition to this, the Trust communicates with a raft of other external bodies and organisations including GPs, commissioners, local authorities, Strategic Health Authorities, Monitor, Healthcare Commission, MPs, Department of Health, Public and Patient Involvement Groups, statutory and voluntary sector and the media.

5.1.4 Effective external communication is therefore an essential part of the Trust’s approach to developing robust public and stakeholder involvement and partnership.

5.1.5 External communication, like the internal process, needs to be:

- Credible, open and honest
- Two-way
- Timely

5.1.6 Having agreed how it wishes to be perceived, the Trust will adopt a positive, realistic and professional approach to news, information dissemination and communications.

5.1.7 Responses to requests for information from external sources must be consistent with the Trust’s values, highlight good work, engender a positive reputation and inform patients and the public.

5.1.8 Key audiences will be identified and PR activities will be targeted by the PR & Communications Team.

5.1.9 The Trust will also aim to improve performance at the direct interface between staff and the public (for example, the way staff interact/work with people, or how the Switchboard deals with callers). Managers will set, maintain and monitor standards to improve performance. Training to support improved customer relations is available.

5.1.10 Other means to improve the perception of the Trust in the eyes of the public will also be targeted, including reviews of signage and patient information literature.

5.2 Informing Trust Members

5.2.1 The Trust aims to create and maintain a culture in which Members feel able to raise ideas and suggestions, and to ask questions and have them answered. The Trust will endeavour to provide swift and full answers, and to respond positively and constructively to ideas for improvement.
5.2.2 The Trust will inform Members of the Trust’s developments and matters that affect our hospitals and encourage them to contribute to the achievement of our objectives and plans.

5.2.3 By effectively communicating with Members, the Trust wants these groups to accept ownership of the issues, which face the Trust by providing them with appropriate information about our developments and plans.

5.2.4 The Trust aims to include Members in celebrating our successes.

5.2.5 The Trust acknowledges that communication is key to stimulating and active membership.

5.2.6 A range of mechanisms will be employed to ensure effective involvement and communication. These are set out below in section 3.3. Verbal, electronic and written communications should be used in a complementary way to allow two-way open and responsive communications to continue to develop across the organisation.

5.2.7 Communication will be:

• Credible, open and honest
• Two-way
• Timely

5.2.8 By achieving these goals members and governors will feel informed, trust the information given and feel able to contribute ideas and opinions about issues and decisions.

5.2.9 Messages will be:

• Consistent with the Trust’s values
• Give clear direction
• Up-to-date, relevant and consistent
• Clearly presented, in a straightforward manner avoiding jargon, acronyms and profession-specific words
• Available in appropriate formats and places
5.3 How we will communicate with Members

5.3.1 Bond between patients and the Trust:

- Patients are at the heart of what every hospital does, for without them the wards and departments would be empty and there would be no need for a hospital. It is recognised that by becoming a NHS Foundation Trust we have further tightened this bond between patients and the Trust.

- By striving to become a Foundation Trust we have clearly demonstrated that we want to be driven by the local communities that we serve so that our services are developed in line with local needs as well as national requirements.

- In order for us to achieve this, it is essential we develop robust two-way communication channels between the Trust and governors and members. They need to be kept informed of developments, which are being undertaken within the organisation, and also some of the challenges, which may face the Trust.

- The Trust will adopt a range of methods to communicate with governors and members. These will be reviewed on an annual basis.

5.3.2 Newsletter:

- A Members Newsletter named Foundations for Health will be produced by the PR and Communications Team. This will be issued to governors and members at least four times a year. The newsletter will contain relevant news and developments, and will also highlight any key challenges facing the Trust.

- It will also contain general human-interest stories, such as profiles on staff members and news about successes staff have achieved, as well as information about the Governors.

- It will be produced in the most cost-effective way. The issuing of the newsletter as an e-communication, to those members who wish it in this format, will be explored.

5.3.3 Website:

- A section of the Trust's website and intranet site relates specifically to the Foundation Trust which allows Members, staff, members of the public and key stakeholders to access information about who the Governors are.

- It will also be used to publish key news stories about what the Governors have been doing. This will be managed and populated by the PR and Communications Team.
5.3.4 Notice Board:

- A notice board in a prominent position within the Trust’s three hospitals will be allocated to the Governors. This will be used to display the pictures and names of each Governor and the area they serve
- The notice boards can also be used to display news on initiatives that the Council of Governors has been involved in. The content and maintenance of these Boards will be the responsibility of the PR and Communications Team

5.3.5 Other Governor committee meetings:

- Where relevant the PR and Communications Manager / or Deputy will attend committee meetings and assist governors in their communications with members

5.4 Informing external stakeholders, e.g. commissioners

5.4.1 Commissioners:

- Individual staff members have regular dialogue with staff of Strategic Health Authorities (SHAs) and Primary Care Trusts (PCTs) during their day-to-day Trust activities. As well as these communication channels, other recognised mechanisms will be used, particularly in relation to GPs, so the Trust is recognised as an organisation which is prepared to listen and where appropriate act on issues raised
- Meetings held with PCTs will contain a regular agenda item for the PCT to raise secondary care issues from a Primary Care perspective. The representatives from clinical areas able to respond to service issues raised should attend meetings
- The possibility of a joint Trust / Primary Care newsletter published every two months and/or a specific newsletter directed at GPs will be explored
- The PR & Communications Team will liaise with PR contacts in all stakeholder organisations (particularly the Strategic Health Authority, PCTs and other Trusts) concerning media issues
- The PR & Communications Team will attend PCT board meetings and report back as appropriate
- Clinical staff within primary and secondary care should be encouraged to communicate in a variety of settings about the care they offer

5.4.2 MPs:

- Regular meetings involving the Trust’s Chairman and Chief Executive will be held with local MPs, in order to discuss matters of mutual interest and keep MPs abreast of current issues
5.4.3 Local Councils – Scrutiny Committees:

- Regular meetings between representatives of the Trust and local Councils will ensure good understanding of the issues facing the organisations and the direction each is taking, as well as encouraging partnership.

- The Scrutiny Committee meets in public and regularly invites Trust staff to discuss issues with it. These are invariably attended by representatives of the local media and the PR and Communications Team should be informed of all contact with the committee.

5.4.4 Patient information - written and, where appropriate, multi-media:

- The PR and Communications Manager will lead a group with representation from all divisions/directorates to review and develop patient information. Standards will be reviewed regularly and the process to produce cost-effective and high quality material will be investigated on a regular basis.

5.4.5 Public meetings:

- The Annual Members’ Meeting of the Trust will be designed as an event which attracts a wide audience of staff and general public. Governor meetings will be arranged to attract public interest and the possibility of regular presentations by Trust Clinicians about their services should be explored.

5.4.6 Annual report and other Trust publications:

- A user-friendly style will be adopted for the Annual Report and other Trust documents to ensure they effectively convey the Trust's achievements and planned developments to a wide audience.

5.4.7 Strategic Health Authority:

- The Trust will be part of the Strategic Health Authority’s NHS Communications Forum, sharing best practice across the region and learning from others.

5.4.8 Corporate identity:

- Much work has been done nationally to ensure the NHS identity is shown locally in NHS organisations. The PR & Communications Team will continue to liaise with departments to ensure the national standards are met. In addition, guidance will be made available on corporate style for both internal and external publications.
5.4.9 **External website:**

- The PR & Communications Manager is responsible for maintaining information on the Trust’s external website and ensuring it is both up to date and consistent with other messages. The website, located at [www.nlgnhs.uk](http://www.nlgnhs.uk), receives approximately 283 visitors per day, which equates to more than 5,000 per month. Around 90% of traffic is from the UK, with other visitors from countries all around the world. The website has a variety of telephone numbers and e-mail addresses, including a general enquiries e-mail address which regularly receives requests for clinical attachment, nurse adaptation and other employment-related enquiries.

5.4.10 **Other stakeholders / partnership working:**

- The PR & Communications Team will liaise with external stakeholders as appropriate to work in partnership on issues, which affect the Trust.

5.5 **Contact with the media**

5.5.1 The media are a useful means to inform the public and should never be viewed as “the enemy” when something goes wrong (“bad” news will always dominate news agendas). Our priority must always be to promote our hospitals within the communities we serve.

5.5.2 A regular supply of pro-active news releases will be issued on behalf of the Trust each month. The media will also be monitored and appropriate action taken if stories appear, damaging the Trust’s reputation.

5.5.3 The power of the media should never be underestimated and it is essential that all contact with the media should be made through or referred to the PR & Communications Team. They are available through bleep, mobile telephone, email and via the hospital’s switchboards. If under any emergency circumstances direct contact with the media is made or encountered, the PR & Communications Team must be informed of any discussions and their outcome at the earliest opportunity.

5.5.4 No member of staff should speak to the media without first referring to the PR Team or Director on call, other than routine condition checks. This will ensure the Trust’s communications are co-ordinated.

5.5.5 Informal links between senior managers within the Trust and local media decision-makers will be encouraged.

5.5.6 Media spokespeople will be identified for each Directorate / Branch / Department.

5.5.7 Regular provision of media handling skills training and awareness will be provided by the Trust’s PR & Communications Team. The Major Incident Plan media policy will be activated when necessary.
5.6 Consultants’ rights

5.6.1 While acknowledging the terms of Schedule 12 Paragraph 7 of the 2003 Consultant Contract (and the similar paragraph in the pre 2003 terms and conditions), all consultants are strongly advised to liaise with the PR and Communications Team before they speak in their professional capacity to the media. The PR and Communications Team may also be able to give professional advice to consultants planning to speak to the media.

5.7 Selling the Trust’s successes

5.7.1 A steady drip feed of positive aspects of the Trust’s performance as well as reinforcement utilising the Trust Board meetings and other public events is one way to build on the good name of the hospitals.

5.7.2 Efforts should be made to continue the good relationship with the media, especially local media, and all staff will co-operate by informing the PR & Communications Team of any stories of interest to the media.

5.7.3 The Trust will build and develop effective relationships with local, regional and professional media in order to sell the Trust’s successes to as a wide audience as possible. By encouraging regular contact and briefings with the media, the Communications Team will endeavour to gain mutual understanding and respect with journalists.

5.8 Defending the Trust against criticism

5.8.1 With the PR & Communications Team handling all media enquiries and requests for interviews, it ensures a corporate response will always be given. The Team will liaise with news desks through the media organisations regarding media coverage of the Trust.

5.8.2 Both good news and bad stories will be monitored by the PR & Communications Team and where appropriate, information provided to journalists to defend any criticism made against the Trust.

5.8.3 In the event of negative media coverage, the PR & Communications Team will feed back to the Chief Executive and Chairman.

5.9 Provision of facilities, including interviews, filming opportunities and background briefings

5.9.1 The PR & Communications Team will informally brief reporters before and after Governor Meetings to encourage positive reporting of Trust activities and develop positive news releases around them.

5.9.2 The Team will also facilitate interviews, photographic opportunities, filming opportunities and briefing sessions for journalists.
6.0 Marketing

6.1 The need for effective marketing

6.1.1 In recent years the NHS has responded to profound challenges and change. There have been substantial improvements in services, which have delivered significant benefits for patients and service users.

6.1.2 Patients have a right to determine what type of treatment they receive and people are now embracing the NHS’s philosophy of providing them with choice. Choice and information are a normal part of people’s lives and health services are no different.

6.1.3 Patients have always had a keen interest in their healthcare and patient choice is now a reality in the NHS. In order for people to make an informed choice, the Trust needs to provide them with the relevant information. Referring clinicians will also find the provision of extra information useful in making recommendations to their patients.

6.1.4 Through promotional activity, we will develop a better understanding of the needs and wants of patients and GPs and this will enable us to respond and shape services accordingly and deliver services that better meet those needs.

6.2 Policy

6.2.1 When referring to marketing the Trust, this document should be read in conjunction with the Trust’s Marketing Strategy, which has been drawn up in accordance with the Department of Health’s codes and regulations.

6.2.2 When marketing the organisation, it is important that there are safeguards in place to protect referring clinicians, patients and the public. These will ensure that:

- Information patients receive is not misleading, inaccurate, unfair or offensive
- The identity and reputation of the Trust is protected
- Expenditure on promotional activity is not excessive

6.3 How will the Trust market itself?

6.3.1 The Trust will explore a variety of platforms to market itself – including the production and use of leaflets and brochures, the use of its internet site and advertising in newspapers and on radio.

6.3.2 All marketing will respect the ethical guidance and professional codes of conduct of clinicians and other health professionals and it will be clearly identifiable as marketing.

6.3.3 The PR & Communications Team will be an integral part of the marketing activity – ensuring that no service marketing itself does so in conflict with, or at the expense of another service.
7.0 PR and Communication Team Function

7.1 PR and Communication Team

7.1.1 The PR and Communication Team consist of a Manager, Deputy, Web Development Officer, as well as secretarial support. Together the team manages all internal and external communications across all three of the Trust’s sites.

7.1.2 It places great emphasis on improving internal communication arrangements, recognising that good internal relations are an invaluable springboard for good external relations.

7.1.3 The team works to develop the profile of the Trust in the local community ensuring that an open style of communication is adopted and that the organisation’s reputation and image are progressively enhanced.

7.1.4 The Manager / Deputy act as the contact for all media enquiries and are the public face of the Trust.

7.1.5 The team’s function includes:

- Developing the internet and intranet sites
- Producing staff and Member newsletters
- Writing media comments, media releases
- Writing briefings and speeches for senior staff as and when required
- Providing media training
- Receiving, researching and responding to all Freedom of Information requests
- Ensuring patient information is up-to-date
- Ensuring that the public has access to information on healthcare acquired infections and what the Trust is doing to fight them. See 7.2
- Working to successfully market the organisation as a ‘first choice’ Trust for patients

7.2 Healthcare Acquired Infections

7.2.1 Healthcare acquired infections (HCIs) are a considerable interest to the public. It is a requirement to ensure that the public have access to information on HCIs and what the Trust is doing to fight against them. This plan also notes the need to ensure that patients and the public are encouraged and empowered to participate in appropriate infection control measures. The information provided will explain the organisations systems and arrangements for the prevention and control of HCAI including hand hygiene.

7.2.2 There is also a need to assess whether individual leaflets on HCIs should be provided in different languages to ensure all patients have access to this information.
7.3 How you can help

7.3.1 Whatever your involvement with the Trust, whether as a Director, Senior Manager, Clinician, other staff members, volunteer, Governor or Trust Member the efficient performance and good public image of the organisation is YOUR business. We all have a role to play in acting as ambassadors for the Trust.

8.0 Monitoring Compliance and Effectiveness

8.1 Regular evaluation of the effectiveness of the different elements of this framework will be undertaken by the PR & Communications Manager, including random questionnaires of staff, and use of the annual staff survey, where appropriate. Changes will be made to improve practice where appropriate.

9.0 Training

9.1 The Trust will ensure clinical and non-clinical managers, and leadership at all levels, receive appropriate training to facilitate their effective performance in implementing this policy.

10.0 References

10.1 None.
Appendix A

House style for Reports / Papers

The NHS adopted a corporate identity during 1998/1999 in an effort to ensure that services were visible and to clarify what was an NHS service. The NHS logo is now spontaneously recognised by more than 90% of the public and has a high level of trust and credibility.

As the NHS is changing, it is increasingly important to use the NHS identity consistently and correctly. This will help patients and the public to navigate a more diverse healthcare system, while maintaining their confidence that services will be delivered in line with NHS standards and values.

This does not just apply to signage, but also documents which are produced for internal and external consumption within the Trust (With the advent of Freedom of Information legislation many documents are now accessible by members of the public).

Therefore, it is imperative that staff who are producing reports/papers/and other such documents ensure they adhere to the NHS corporate identity. Full guidance is available at [www.nhs.uk/nhsidentity](http://www.nhs.uk/nhsidentity)

Use of Logos

The Trust’s logo is available for download from the Intranet and can be found under Downloads. When using the Trust name, it should not be shortened and should be used in full. The logo should be used at the top right of any document. The secondary position is the bottom right. The logo may only appear once on any communications – including when NHS organisations are working together.

When NHS organisations are working together, their logos should only be used once. A list of names or partner organisations should be used elsewhere. Or instead, a description such as ‘The NHS in North Lincolnshire’ can be used.

Use of Fonts (type faces)

Frutiger should be used on all NHS professional printed communications

Arial should be used for work produced internally

You can also use Garamond and Times New Roman

The minimum size is 12 point.

Use of Words

Use plain English

It should be straightforward, clear, accessible and honest

Make sure the tone of voice is appropriate to the audience

Use short sentences.
Appendix B

Code of Practice for the promotion of NHS funded services

In 2008 the Department of Health published a Code of Practice for the promotion of NHS Funded services.

All marketing activities and external communication will be within this code. In summary the code states that:

- Promotional activity must follow applicable laws and industry codes of practice
- Promotional activity must respect the ethical guidance and professional codes of conduct of clinicians and other health professionals
- Promotional activity should not cause widespread alarm, anxiety, distress or offence
- Promotional activity must respect the age, possible disability, gender, ethnicity, religion or belief and sexual orientation of the audience and must comply with all relevant anti-discriminatory legislation. Providers should consider accessibility by different sectors of the population
- Promotional activity should not be directed at children under the age of 16
- Promotional activity must be clearly identifiable as such, in particular when written in an editorial style
- Promotional activity should be appropriate for the intended audience, for example communications aimed at patients should avoid medical jargon
- Promotional activity should not encourage the public to undergo unnecessary treatment
- Promotional material must not imitate the copy, slogans or general layout adopted by other providers in a way that is likely to mislead or confuse
- Reproductions of official documents must not be used for promotional activity unless permission has been given in writing by the appropriate body
- Promotional activity must not contravene the values and brand policy of the NHS
- No promotional activity should be undertaken that undermines the reputation of the NHS, NHS logos or trade marks (or services supplied under those logos or trade marks) or otherwise brings the same into disrepute
- No promotional activity by providers of NHS services should be undertaken that contravenes the use of the NHS logo as defined by the NHS brand policy. The logo is trademarked and may not be used by providers to promote non-NHS services or products
- No promotional activity should be undertaken that undermines the reputation of any individual providers, clinicians or other health professionals or otherwise brings the same into disrepute
• All information, claims and comparisons should present accurate, balanced and fair information about services and make clear any material exclusion, limitation or qualification. They should not mislead either directly or by implication, distortion, exaggeration or undue emphasis.

Responsibility for appropriate promotional expenditure lies with provider organisations’ boards. The expenditure figure should be published in the annual report or other appropriate format when an annual report is not produced.