## COMMUNICATIONS POLICY

<table>
<thead>
<tr>
<th>Version:</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratified by:</td>
<td>Policy Committee</td>
</tr>
<tr>
<td>Date ratified:</td>
<td>11&lt;sup&gt;th&lt;/sup&gt; December 2012</td>
</tr>
<tr>
<td>Approving Committee/Group (Date)</td>
<td>None</td>
</tr>
<tr>
<td>Date Approved by Medicines Management Committee:</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>(NB: All Procedural Documents which include details of drugs or their management must be approved by the Medicines Management Committee)</strong></td>
<td></td>
</tr>
<tr>
<td>Name and Title of originator/author:</td>
<td>Clare Martin Head of Communications</td>
</tr>
<tr>
<td>Date issued:</td>
<td>December 2012</td>
</tr>
<tr>
<td>Review due date:</td>
<td>December 2015</td>
</tr>
<tr>
<td>Target audience:</td>
<td>All staff, stakeholders, partner organisations, prospective members and governors, patients and carers</td>
</tr>
<tr>
<td>Superseded documents</td>
<td>Communications and Engagement Policy version 2 Nov 2010</td>
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<tr>
<td>Relevant Standards(e.g. NHSLA, CQC, HSE)</td>
<td>None</td>
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<td>Acknowledgements</td>
<td>None</td>
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<td>Key Words</td>
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1 INTRODUCTION

The Trust is an integrated care organisation with a vision:

“Excellent integrated care for you and your family, when and where you need it”

Our vision is underpinned by the values of the 5 patient promises and captured by the strap line “Here for You”.

We promise everyone in Croydon, whether you are in hospital, in the community or at home, we will do our best to ensure:

1. You feel cared for by helpful and welcoming staff, who respect you as an individual
2. You feel in safe hands with highly professional staff who work well together in clean clinics and hospitals
3. You feel confident in your treatment from skilled teams of compassionate clinicians who listen to you and keep you informed
4. You feel we value your time with convenient appointments, minimal waiting and care closer to home.
5. You feel it’s getting better all the time as we continue to improve our services

This policy supports the Trust’s Reputation Management and Communications Strategy (October 2012) and is based on the NHS Confederation’s Principles of Accountability (2008) and reflects the Trust’s vision set out in above.

Communications Principles

All Croydon Health Services’ communications and engagement activities will be:

- **Clear, accessible and transparent.**
- **Inclusive**
- **Responsive**
- **Sustainable**
- **Proactive**
- **Focused on improvement**

The following key groups have been identified as priorities

- “hard-to-reach” groups to ensure that the services delivered are appropriate and sensitive to the different needs of the communities the Trust serves
Potential FT members and governors to listen to the views of our members and to use them to develop Trust strategy in the best interests of our patients.

GPs and GP commissioners to work in partnership to shape services around the needs of patients not organisations

Tone of voice:

It is important that whatever communications method we use, the “tone of voice” remains consistent.

Our tone of voice has three interdependent characteristics – personal, professional and clear.

Personal
Personal means being approachable and encouraging in the way we communicate. It’s about being courteous, friendly and supportive. It means talking in a way that’s sensitive to the feelings of others.

It supports the Promise “you feel cared for”

Professional
Professional means speaking with assurance and authority and not too informal or over-familiar.

We want people to know they are in safe, dependable hands and that we always talk with conviction and confidence.

It supports the Promise “you feel in safe hands”

Clear
Clear is about using straightforward, everyday language.

It mean thinking carefully about what we need to say, and then saying it as directly and simply as we can, clarifying anything that might be hard to understand.

We talk openly, honestly, and in a way that’s accessible to everybody

This policy is designed to ensure the Trust’s communications are developed and managed in a consistent and effective way.

It supports the Promise “you feel confident in your treatment”.

2 PURPOSE

This policy supports the delivery of the vision, five promises and corporate objectives of the Trust.

It provides guidance and support for all staff involved in any communication and engagement activity and clearly identifies the standards for all such activity.

It also provides communications advice and support for delivering the NHS Constitution, specifically:

- To inform patients about healthcare services available to them nationally and locally
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- To provide easily accessible, reliable and relevant information to help people make choices, including information on the quality of clinical services, where robust information is available
- To communicate clear and transparent decision-making
- Empower all staff to suggest ways to deliver better and safer services for patients and their families

2.1 SCOPE

This policy applies to all staff.

It outlines the processes and channels (Appendix C) the Trust uses to communicate with a wide range of audiences.

This policy also supports the delivery of the patient experience, staff engagement and patient and public involvement and marketing strategies and further guidance is available in the following:

- ABC policy
- Speak Up Policy
- Being Open policy.
- Corporate Identity Policy
- Patient Information Policy,
- Media Policy
- Social Media Policy
- Communications Toolkit

All of the above are available on the staff intranet and public website.

3 DEFINITIONS

No definitions required.

4 ACCOUNTABILITIES AND RESPONSIBILITIES

4.1 Corporate level responsibilities

Responsibility for corporate communications rests with Chief Executive who discharges this responsibility through the Executive Management Group supported by the Communications team.

4.2 Directorate level responsibility

It is the responsibility of the executive directors (ED), clinical directors (CD), associate directors of operations (ADO) and associate directors of nursing (ADN) to ensure that their staff are aware of this policy and how to access support.

4.3 Responsibility of line managers

It is the responsibility of line managers:

- To seek advice and support from the Communications team
To provide support for colleagues in planning any communication activities

Ensure their teams are given sufficient time and support to fully utilise communication channels relevant to their role (see Appendix C).

4.4 Communications team

To provide advice and support on a wide range of communication issues including reputation management, media handling, communications training and staff and stakeholder briefings.

To directly manage media relations

To directly manage the Trust’s public website and oversee its development to meet the organisation’s objectives

To directly manage specific sections of the staff intranet and provide support for staff in managing other areas of the site

To directly manage the range of staff and public facing communications channels, including social media and facilitate feedback.

To maintain and continuously evaluate a list of available communication channels

To ensure corporately produced information meets the standards set out in the above policies.

To support the production of information to key stakeholders

To provide professional advice on the wording and visual content of patient and public-facing communications

4.5 Responsibility of all staff

To make best use of the available communications channels to promote high quality communications whether written, electronic or face-to-face

To respond to any requests for information or feedback from colleagues, patients, visitors and partner organisations in a timely manner

To seek advice and support of Communications team for any media, social media or public facing activity which has the potential to impact on the Trust’s reputation.

5 PROCEDURE/COURSE OF ACTION REQUIRED

Any member of staff planning communication activity such as a public event, media campaign, VIP visit etc should seek the support of the Communications team early in the planning stages and use the guidance available in the Communications Toolkit on the staff intranet.

Particular attention is drawn to the guidance on communicating with people who are traditionally described as “hard to reach” and who may need additional support for any communications.
This includes, but is not limited to, guidance on "Making text accessible" and the translations request form.

Templates for communications activities are available in the Communications Toolkit on the intranet and can be used for most projects and promotions. They encourage staff to consider the purposes of the communication, the audiences, the relevant stakeholders (see stakeholder map below) and identify key messages for each target audience before embarking on any communications campaign.

A list of available communications channels, and how to make best use of them, is available in the Communications Toolkit on the intranet.
Stakeholder Mapping - examples given below are for guidance only

**HIGH**

**High power/Low interest**

- Other SW London Trust staff
- Department of Health
- NHS London Patient and Public Advisory Group
- All London Local Councillors
- Health media
- London Assembly Members
- London MEPs
- NHS Confederation
- NHS Alliance
- Care Quality Commission
- Mayor’s Office/Greater London Authority
- London Health Improvement Board
- London regional media

**High power/High interest**

- Trust Board
- Trust staff
- Trade Unions and Staff Side bodies
- Royal Colleges
- NHS London
- SW London Cluster
- Monitor
- Health and Wellbeing Boards
- London MEPs
- London Health Programmes
- London Specialised Commissioning Group
- Clinical Commissioning Groups
- Networks for specific services (stroke, trauma, paediatrics, cancer etc)
- London Medical Committee
- London GP Council
- Patient Assembly/Patients and Carers Groups
- FT members
- Croydon Healthwatch (previously Local Involvement Networks)
- Local Council Cabinet Members with Health portfolio
- Local Council Chairs/Members of Health Overview & Scrutiny Committees/officers
- Third/Voluntary Sector (specific for certain projects)
- Local media

**LOW**

**Low power/Low interest**

- Other health stakeholder organisations

**HIGH**

**Low power/Low interest**

- Other health stakeholder organisations

**LOW**

**High interest/Low power**

- Out of London NHS Acute Trusts, PCTs, SHAs, Networks etc
- Suppliers
- Prospective Parliamentary/London Assembly/Local Council candidates

**Low interest**

- Monitor
### How can I keep them informed/engaged?

<table>
<thead>
<tr>
<th>Power</th>
<th>Interest</th>
<th>HIGH power/Low interest</th>
<th>Manage closely</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIGH</td>
<td>LOW</td>
<td>Keep satisfied&lt;br&gt;❖ Use existing meetings and committees to explain developments, issues, plans, future consultations etc. and respond to questions and concerns&lt;br&gt;❖ Presentations at local health, community or voluntary groups/events&lt;br&gt;❖ Regular update item on agendas</td>
<td>❖ Frequent face-to-face tailored briefings&lt;br&gt;❖ Proactive risk and issue awareness – likely to be first point of contact for media&lt;br&gt;❖ Visits, seminars, workshops, information events to develop involvement and learn from knowledge and capabilities&lt;br&gt;❖ Presentation to key groups such as Overview and Scrutiny Committees, executive teams</td>
</tr>
<tr>
<td>LOW</td>
<td>LOW</td>
<td>Monitor&lt;br&gt;❖ No specific targeted communication needed&lt;br&gt;❖ Receive information through newsletters, publications, website/online etc&lt;br&gt;❖ Monitor publications, news releases and events</td>
<td>❖ Regular face-to-face briefings&lt;br&gt;❖ Risk and issue awareness&lt;br&gt;❖ Conference attendance and other networking opportunities</td>
</tr>
<tr>
<td>HIGH</td>
<td>HIGH</td>
<td>High interest/Low power&lt;br&gt;Keep informed</td>
<td>❖ High interest/Low power</td>
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</table>
6 TRAINING

Training will be provided through existing training provided by the Trust and modules provided by the Communications team, HR or outside agencies.

Directors and senior managers
- Here for you standards
- Media training
- Reputation management
- Communications in a major incident

FY1/2 and medical students
- Why reputation matters

Other training will be provided as appropriate and will include, but not be limited to:
- Customer care
- ABC policy
- Equality and Diversity in the workplace
- Complaints
- NHS Constitution
- Making your point – a communications master class
- Communications in a major incident
- Intranet editor training

6.1 Equality Impact Assessment

The Equality Impact Assessment for this policy is attached in Appendix A.

7 MONITORING COMPLIANCE

The Trust Board receives regular updates of the Trust’s corporate objectives, business and clinical strategies which this policy supports.

The Communications team produces a monthly reputation report which highlights key areas where this policy has an impact. This is circulated to key stakeholders every month and reviewed at the following groups where appropriate corrective action is decided.

- Directorate Quality Boards
- People and Organisational Development Committee
- Reputation Management and Communications Group
- Access, Equality and Diversity Group and related workstreams

Specifics of the policy will be monitored as listed below

<table>
<thead>
<tr>
<th>Element to be monitored</th>
<th>Lead</th>
<th>Tool</th>
<th>Frequency</th>
<th>Reporting arrangements</th>
<th>Action Lead(s)</th>
<th>Change in practice and lessons to be shared</th>
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<tbody>
<tr>
<td>Media relations</td>
<td>Head of Communications</td>
<td>Media analysis</td>
<td>Monthly</td>
<td>Head of Communications to Reputation Management and</td>
<td>Chief Executive or relevant Director</td>
<td>Media relations policy revised</td>
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</table>
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<table>
<thead>
<tr>
<th>Patient information</th>
<th>Head of Patient Experience</th>
<th>Review</th>
<th>Annual</th>
<th>Patient Information Group to Patient Issues Committee</th>
<th>Director of Nursing</th>
<th>Policy revised, leaflets updated and templates amended</th>
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<tbody>
<tr>
<td>Feedback from Trust briefings and Blogs</td>
<td>Communications</td>
<td>In Team Briefings</td>
<td>Monthly</td>
<td>To CEO and relevant directors</td>
<td>CEO</td>
<td>Executive Management Group and individual discussions</td>
</tr>
<tr>
<td>Attendance at team briefings</td>
<td>Line managers</td>
<td>Local arrangements</td>
<td>Monthly</td>
<td>Part of PDP</td>
<td>Line managers</td>
<td></td>
</tr>
<tr>
<td>Attendance at Croydon Senior Medical Staff Committee</td>
<td>Medical Director</td>
<td>Register and notes</td>
<td></td>
<td></td>
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</tr>
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</table>

8 REFERENCES

Not applicable

9 ASSOCIATED DOCUMENTATION

- Operational Procedures for communications activities
- Advertising and sponsorship guidance
- Ambient Communications and poster guidance
- Communications and engagement planning
- Five steps to effective consultations
- Dealing with media enquiries
- Dealing with patient condition checks
- Guide to translating corporate information
- Guide to ministerial and VIP visits
- Planning an event
- Making text accessible

All available in the Communications Toolkit on the intranet

10 VERSION HISTORY TABLE

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Author</th>
<th>Ratified by</th>
<th>Comment/Reason for change</th>
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<td>16/12/09</td>
<td>Clare Martin</td>
<td>POD</td>
<td>New</td>
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<tr>
<td>2</td>
<td>11/11/10</td>
<td>Clare Martin</td>
<td>Management Team</td>
<td>Revised to take into account new integrated organisation</td>
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|   | December 2012 | Clare Martin | Policy Committee | Title change with Engagement elements remove.  
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## APPENDIX A – EQUALITY IMPACT ASSESSMENT

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<tr>
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<th>Yes/No</th>
<th>Comments</th>
</tr>
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<tr>
<td><strong>1.</strong> Does the policy/guidance affect one group less or more favourably than another on the basis of:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Race</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Ethnic origins (including gypsies and travellers)</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Nationality</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Gender</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Culture</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Religion or belief</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Sexual orientation including lesbian, gay and bisexual people</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Age</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Disability - learning disabilities, physical disability, sensory impairment and mental health problems</td>
<td>No</td>
</tr>
<tr>
<td><strong>2.</strong> Is there any evidence that some groups are affected differently?</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>3.</strong> If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?</td>
<td>No</td>
<td></td>
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<td><strong>4.</strong> Is the impact of the policy/guidance likely to be negative?</td>
<td>N/A</td>
<td></td>
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<tr>
<td><strong>5.</strong> If so can the impact be avoided?</td>
<td>N/A</td>
<td></td>
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<td><strong>6.</strong> What alternative are there to achieving the policy/guidance without the impact?</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>7.</strong> Can we reduce the impact by taking different action?</td>
<td>N/A</td>
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APPENDIX B – CONSULTATION TEMPLATE

<table>
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<td>Procedural Document Author:</td>
<td>Clare Martin, Head of Communications</td>
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<tr>
<td>3.</td>
<td>Group/Committee Consulted:</td>
<td>Staff side Policy Group, POD, JSCC, Operations Committee &amp; Health &amp; Wellbeing Directorate</td>
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<td>4.</td>
<td>Date of Consultation:</td>
<td>11 October 2012</td>
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<td>5.</td>
<td>Comments Received:</td>
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<td></td>
<td></td>
<td>Minor typographical changes</td>
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6. Highlight where policy changed following consultation or state reasoning why comments not incorporated:
APPENDIX C – COMMUNICATIONS AUDIT FORM

APPENDIX C - Communications Audit Form

This is a checklist of the various communication channels you can use to promote your service/project/ or good news.

The Communications team is happy to advise you on which channels will be most effective, based on your objectives.

Online

☐ Intranet
☐ Website
☐ What's New
☐ Trust Briefings
☐ GP portal
☐ GP Newsletter
☐ NHS Choices
☐ NHS Alerts

Social Media

☐ Facebook
☐ Twitter
☐ Linked In

Print

☐ Annual report
☐ Trust Magazine
☐ FT Newsletter
☐ Talk 2 Croydon
☐ Ambient Communications

Media

☐ Local
☐ Regional/National
☐ Specialist