

Major Incident COMMUNICATIONS STRATEGY AND PLAN

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Consultation Groups	Communications team, on-call Directors
Approved by (Sponsor Group)	AEO (Edwin)
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Services	Applicable
Trustwide	X
Mental Health and LD	
Community Health Services	

Version Control Summary

Version No.	Date	Author	Reason
1.0	25 April 2012	Jane Connor	Based on NHS London SHA best practice document
2.0	1 st May 2013	Petra Nittel/Janet Flaherty	Review and evaluation of the strategy. To reflect changes in relation to the Health and Social Care Act 2012. To include a more detailed approach. To include the Major Emergency Communications Plan. To include details of an emergency email inbox and the number for a helpline. To include mutual aid arrangements for support with communication during an emergency
2.1	21 July 2014	Carrie-Ann Wade Williams	Updates to reflect the capacity of the Communications team.
2.2	8 Sept 2014	Carrie-Ann Wade Williams	As above
2.3	16 May 2016	Carrie-Ann Wade	Updated following Operation Kanikul regional Exercise in April. Changes to contact details to include Luton and Beds and also update to NHSE contacts. References added to VIP visitor policy and external stakeholder briefings.
2.4	18 January 2018	Janet Flaherty	1.1 Bedfordshire Community Services added to description. 8.1 Clarification to setting up helplines for the public. Appendix A: Contacts and email addresses updated. New NHS England media team details updated.
2.5	21 December 2018	Janet Flaherty	Updated Comms team contact details
2.6	13 March 2020	Janet Flaherty	Updated Comms team contact details <u>Trust description updated</u>
2.7	12 October 2021	Janet Flaherty	Review, evaluated and updated the strategy to acknowledge and reflect on the COVID pandemic major incident which has tested this policy <ul style="list-style-type: none"> • Updated Staffing Numbers • Inclusion of texting and Pando as a channel to communicate with staff • Inclusion of social media platforms as a channel to inform and communicate with the public • Updated Communication team contacts

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1. Introduction

1.1 East London NHS Foundation Trust (ELFT) was first established as a mental health trust in 2000 to cover East London, but have been broadening our remit for some time. Our core area includes City of London, Hackney, Newham and Tower Hamlets. In April 2015, we started to provide mental health services and addiction services in Bedfordshire and Luton. In February 2011, we integrated with community health services in Newham making us a healthcare provider of both mental health and community health services. In 2016, the Trust took over the management of adult community health services in Tower Hamlets, and in April 2018, community services Bedfordshire. We also deliver numerous services to many other people further afield. They include specialist services in north east London, Hertfordshire and Essex; psychological therapies in Richmond; and an award-winning specialist mother and baby psychiatric unit in Homerton that receives referrals from all across the south east. From 1 April 2018, the Trust integrated with adult community health services in Bedfordshire.

1.2 The Trust's Headquarters are located at 9 Alie Street, Aldgate East in Tower Hamlets and for Luton and Bedfordshire the main base for corporate services is Charter House, Alma Street, Luton. The Trust's clinical services operate from over 100 sites and the Trust employs more than 6,300 staff. We cover a population of approximately 1.5 million across the localities we serve.

1.3 A major incident may affect all parts of the NHS often with little or no warning and can occur at any time of the day or night. East London NHS Foundation Trust has a duty to protect its staff and service users and support other providers in safeguarding the health of the community. Every member of staff plays a vital role in ensuring a professional NHS response to a crisis. As such, it is essential that staff are familiar with how the Trust will operate during such an event, what role staff may play and what other organisations the Trust will be working with. The COVID pandemic has tested the Major Incident Communications Strategy and Plan.

1.4 Good communication is vital to the successful handling of any Major Incident. The key communications objective must be to deliver accurate, clear and timely information and advice to staff, service users and the public so they feel confident, safe and well informed.

1.5 The Civil Contingencies Act gives two main communication responsibilities to Category 1 responders:

- (a) Planning: warning and informing the public of the likely risks and threats that NHS organisations are preparing to address and examples of the types or responses planned
- (b) Responding: communications arrangements should be appropriate to the message and the kind of audience.

2. What is a Major Incident?

2.1 A **major incident** is any event whose impact cannot be handled within routine service arrangements. It requires the implementation of special procedures by one or more of the emergency services, the NHS, or a Local Authority to respond to it. For the NHS, a major incident is defined as:

“Any occurrence which presents a serious threat to the health of the community, disruption to the service or causes (or is likely to cause) such numbers or types of casualties as to require special arrangements to be implemented by hospitals, ambulance trusts or primary care organisations”

2.2 For NHS organisations, major incidents are defined in terms of a level. These are:

- **Level 1** - Each individual NHS organisation must plan to handle incidents in which its own facilities – or neighbouring ones – may be overwhelmed. Planning successfully for these wider disruptive challenges will require more than simply scaling up the current plans of individual agencies.
- **Level 2** - much larger scale events affecting potentially hundreds rather than tens of people, possibly also involving the closure or evacuation of a major facility (e.g. because of fire or contamination) or persistent disruption over many days; these will require a collective response by several or many neighbouring trusts.
- **Level 3 incidents** - events of potentially catastrophic proportions that severely disrupt health and social care and other functions (power, water etc) and that exceed even collective capability within the NHS.

2.3 Mass casualty incidents are defined as *“A disastrous event or other circumstances where the normal major incident response of NHS organisations must be augmented by extraordinary measures in order to cope.”*

3. Communications during a major incident

3.1 During a major incident, internal and external communications will be co-ordinated

by the Communications team and the Incident Response (Gold) Team. Key methods are set out in section 7 below. A member of the Communications Team (Head of Communications or nominated deputy) will attend the Incident Management Team meetings to provide regular updates and feedback. The Major Incident Communications Plan shows details of members of the Communication team.

3.2 The Communications team will use the key communication methods (section 7) and templates (stored on the Trust Intranet in the Corporate folder of the Templates and Forms section) to reach staff and the public. As major incidents vary in nature and are often unpredictable the key communication methods and templates are flexible and are intended only as an outline.

3.3 Public messages for service users and carers and visitors will be accessible on the Trust website and through social media.

3.4 Staff and multi-agency partners may be asked to direct all emails to: elft.emergencies@nhs.net which will be accessed by the Incident Response (Gold) Team.

4. Local and national media

4.1 The Communications team are responsible for all media enquiries and will issue regular press statements both during and after the Major Incident proactively and on request. Media briefings will be co-ordinated by the Communications team. The Director of Communications or nominated deputy will identify appropriate spokespeople and liaise with the Incident Response (Gold) Team's Incident Director regarding communication messages and timings.

4.2 The Trust may need to nominate a Media Centre during an incident where the focus is on the Trust itself rather than a multi-agency incident. This would be set up and supported by the Communications lead during the incident. Any of the meeting rooms on the ground floor or basement of ELFT HQ would be used as a designated media Centre. Any members of the press discovered anywhere other than the designated media area should be directed and if necessary escorted to the appropriate location. Security staff may need to be put in place if the media do not co-operate and return to the Media Centre or attempt to access Trust facilities or interview staff and service users without prior permission.

4.3 Staff should be reminded that discussing the details of the Incident with the media without authorisation may be liable for disciplinary action.

5. VIP Visits

5.1 Following a Major Incident, it is possible that VIPs may wish to attend sites affected by the incident, or speak to staff and service users. Any VIP or requested visits will be co-ordinated by the Communications team in line with normal procedures. Please ensure the [Policy for Accessing Clinical Areas for VIP Visitors](#) is referred to as appropriate.

6. Local and national media during a multi-agency major incident

6.1 During a multi-agency incident, public information may be co-ordinated by a Joint Media Group, convened by the Gold Co-ordination Group (GCG) at pan-London or Borough level. The ELFT Communications team is the main channel of communication from the ELFT Incident Response (Gold) Team into the Joint Media Group or via NHS England (London) where necessary. The communication for major incidents with significant local impact will be handled by NHS England (London) Communications team.

6.2 The Joint Media Group will advise and assist in communicating with external news organisations through the News Co-ordination Centre (Central Government Department, remotely located) who will be linked direct to the Cabinet Office Briefing Room (COBR) (if established). NHS London SHA will represent ELFT at the Gold Co-ordinating Group and the Department of Health represents the NHS at COBR level.

6.3 The Trust's Incident Response (Gold) Team may receive requests from NHS England (London) regarding information for media briefings including the number of staff and service users affected, availability of services (business continuity measures) and opportunities for VIP visits.

7. Key Methods for Communication Messages

Method of communication	Audience	Who does it	Out of hours or if Communications team not available
Internal			
Email (to staff)	Staff	Communications team IT if Comms not available	Not available
Email (to target group)	Staff	Communications team IT if Comms not available	On-call Director to assign Incident Response (Gold) Team member

Email (from staff to Incident Response (Gold) Team)	Staff	elft.emergencies@nhs.net This address is ready and set up and access to Incident Response (Gold) Team has been allocated.	Incident Response (Gold) Team access dedicated email: elft.emergencies@nhs.net
Intranet homepage	Staff	Communications team IT can make changes if Comms not available	Not available
Text messaging	Staff	Communications team/People and Culture team	Not available
Pando – a Whatsapp style app for staff	Staff	Communications team	Not available

Telephone calls (target audience only)	Staff	On-call Director to assign Emergency Management Team member	
Notices to all areas (hand delivered)	Staff	Communications team to produce notices. Email to services or Man in Van to deliver	Incident Response (Gold) Team to produce notices and email to services.
External			
Website homepage and Latest news page	Public Media	Communications team IT can access if Comms not available	Not available
Switchboard message	Public	Communications team to compose message. Telecoms helpdesk (IT) to change message on switchboard	
Helpline	Public	Communications team to manage helpline and agree messaging	Incident Response (Gold) Team members
Social media	Public	Communications team	Not available

Notices/posters on doors to main entrances and wards/departments (hand delivered)	Staff Patients Visitors	Communications team to produce notices. Email to sites. Man in Van to deliver. Available on intranet	On intranet. Email to staff/Man in Van Service to deliver to all sites. Receptionist/Porter to put up posters.
Press release or verbal statement	Local media National media Public	Communications Team	On-call Director (with NHS England (London or Midlands and East of England) Communications team)
Letters for Service Users	Service Users / Carers, Relatives	Communications Team to compose letters. Service leads to distribute	On-call Director to assign Emergency Management Team members to co-ordinate with Services
Public Health Information	Service Users, Staff, General Public	Communications Team (with Cluster / HPA)	On-call Director with NHS England (London) or HPA Public Health on-call

8. Helpline

8.1 In the event of an incident requiring the establishment of a helpline, the Communications Team will work with the Incident Response (Gold) Team or any Silver Team at Service Directorate level, and the Digital team to agree the nature of the helpline and type of information or support to be provided. The Trust has several community-based services which may be involved in providing information to service users rather than establishing a central helpline. The training/ meeting rooms at Trust HQ may be used as a helpline facility. A dedicated phone line will be identified with telecoms and the number communicated to the public via online, social media and the media.

9. Further information

9.1 Further information including action cards for the Incident Management Team can be found in the ELFT Incident Response Plan which is available on the Trust intranet or from Richard Harwin, Trust Emergency Planning Lead or from the Communications team, Trust HQ.

10. Major Incident Communications Plan

10.1 Declaring an Alert

In the health service, organisations are most likely to be alerted to a major incident by the Ambulance Service who have specific responsibilities and procedures for this. In this situation, the on-call Director should assess the situation and make a decision as to whether the situation constitutes a major incident for the Trust. The following Trust staff can declare a major incident:

- Chief Executive
- Director or On-call Director
- Manager on Call out of hours if the On-call Director cannot be contacted

10.2 Communications Team

Communications during an incident should be handled by a member of the Trust's Communications team, see appendix A. Out of office hours, the Communications contact for the Trust is the On-call Director who can access support from NHS England if required for media related issues.

10.3 If the Director on-call is contacted out of hours about a media enquiry that is likely to be published prior to involvement of the communications team the Chair, Mark Lam, needs to be briefed (see emergency contact details list in emergency folder on k-drive or green incident box).

10.4 Once briefed, the Chair will take a decision as to briefing the Non-Executive Directors (NEDs). The main basis of the decision to brief NEDs will be likelihood of publication out of hours e.g. a media call on Friday evening for publication on Sunday. If the Chair agrees a short briefing is required this should be emailed directly to the NEDs (contact details in emergency contacts list on emergency folder on k-drive or green incident box).

10.5 If unable to contact Trust staff, the Incident Response (Gold) Team Director should contact the Communication Leads from neighbouring Trusts as part of mutual aid (contact details in appendix A). If this is not successful then the Communications Team from NHS England (London) should be contacted for media management assistance (contact details in appendix A). All staff should follow the Trust's communication policy and do not speak directly to the media.

10.6 Trust Spokesperson

The Incident Management Team Director should nominate a staff member to act as Trust Spokesperson. The role of spokesperson will take up considerable time during an incident and should therefore not be carried out by the Incident Management Team (Gold) Director or Directorate/Silver Team Managers. The Spokesperson should be regularly briefed on the current situation by the Incident Management Team (Gold) Director and where possible, issued with a written statement to read to the media during an agreed press conference. During office hours, the Trust spokesperson normally is the Chief Executive or Medical Director.

10.7 Communication Recipients

The Communication team should support the Incident Management Team (Gold) Director or Team and shape communications from the Trust for the various audiences – staff, service users and patients, statutory organisations, partner organisations and the public.

10.8 National Communication (Gold)

In the event of a major incident, a Gold Co-ordinating group will be established led by NHS England (London) in partnership with the cabinet. They will co-ordinate message and communication at a national or pan London level. The Communications team will act on instructions from them and communicate actions taken at Directorate and Trust level to them as requested or instructed by Incident Management Team (Gold) Director.

10.9 Directorate wide Communication (Silver)

A Directorate may also set up a multi-agency Silver group with representatives from local responding organisations meeting on a regular basis to co-ordinate the incident response. The Silver Directorate Group will report to the Incident Response (Gold) Team. If required, the Silver Group can be advised by the Communications Team on communicating with staff or the media.

10.10 Local Communication (Bronze)

Bronze is an operational control and usually refers to people who are actively involved in responding to the incident, i.e. Community-based staff may have been instructed to carry out certain duties and the member of staff instructing them (e.g. Service Lead) will become the 'Bronze Controller'. If a major incident team has been convened, it is important to make sure that people operating a Bronze level are able to feed in in relation to communication with staff, service users and other stakeholders.

10.11 Communications Team Planning and Role in a Major Incident

- Annual leave to be co-ordinated so that a member of the Communications team is always available Monday to Friday during office hours.
- Communications lead to liaise with the Incident Management Team (Gold) Director regarding situation updates. Agree key messages and information which can be released to the public
- Liaise with NHS England media team about media enquiries/proposed statements
- Compile a list of Frequently Asked Questions by the media/public
- Agree answers/response with Incident Management Team (Gold) Director for use by Spokesperson
- Limit media statements to numbers and general statements
- NHS England to support out of hours
- Provide information and guidance for staff
- Issue guidance for staff on how to inform service users of the incident.
- Notice templates (to be) available on the Intranet for staff to download to publicise information at Trust sites
- Provide regular Communications Bulletins for staff, service users, stakeholders and the media
- Update Trust website and intranet
- Use social media platforms to inform local people of incident and impact
- Ensure website and all relevant pages are updated to reflect impact of incident. Consider with partner agencies the use of local radio to disseminate key messages
- Co-ordinate helpline if needed
- Activate helpline to deal with general public and media enquiries if necessary
- Ensure Incident Stand-down is communicated. Ensure all staff have opportunity to participate in debrief process. It is important that any parts of the organisation alerted to a major incident are also informed when the incident has been stood down.
- Lessons Learnt. Assist with information for use in the Incident Report and arrange for publication
- Liaise with Incident Management Team Director and Data Co-ordinator regarding ending or handing over any records which need to be kept. Appendix A: Communication Lead Contact Details
- Liaise with multi agency communications personnel
- Co-ordinate media response with local responding organisations NHS England to support out of hours

- Brief key local stakeholders as per Trust's incident briefing protocol e.g. MPs
- Trust Communication Team – if not available request mutual aid assistance from neighbouring Trust, see below.

Appendix A – Accessing Communication Team Support

Trust Communication Team Members

Name	Job Title	Contact numbers Office and mobile	Email
Steve Gladwin	Director of Communications	020 7655 403807584189390	steve.gladwin1@nhs.net
Janet Flaherty	Head of Communication	020 7655 4066/ 07971657703	janet.flaherty@nhs.net
Glenn Mitchell	Deputy Head of Communications Manager (Luton and Bedfordshire lead)	07940 467055	glenn.mitchell@nhs.net
Sean Delaney	External Communication and Stakeholder Manager	0207 655 4029/ 07946 782605	sean.delaney@nhs.net
Francesca Basili	Internal Communications Officer	020 7655 4245/07825900163	francesca.basili@nhs.net
Taiye Aro	Marketing Manager	020 7655 4160/07930139741	taiye.aro@nhs.net
Aira Manguiat	General Communications Officer	020 7655 4049/07825900164	Aira.Manguiat@nhs.net
Nina Biddle	Digital Communications Officer	07772127837	nina.biddle@nhs.net
Sara Marsili	Primary Care Communications Offcier	07426310086	sara.marsili@nhs.net

Mutual Aid – Neighbouring Trust Communication Leads – if not available, request assistance from NHS England (London or midlands and East of England) see below

Organisation	Name	Job Title	Contact numbers Office/mobile	email
Barts Health NHS Trust	Jon Hibbs	Director of Communications	020 7092 5453	jon.hibbs@bartshealth.nhs.uk
Homerton Hospital NHS Trust	Mark Purcell	Communications Lead	020 8510 5035/ 07721 621204	mark.purcell@homerton.nhs.uk
Luton and Dunstable Hospital NHS Trust	Mariane Covington	Communications Manager	01582 718043 Out of hours: 07714 728035	Mariane.covington@ldh.nhs.uk communications@ldh.nhs.uk
Bedford Hospital NHS Trust	Louanna Lubega	Head of Communications and Engagement	01234 792687 Out of hours: 01234 355122	communications@bedfordhospital.nhs.uk
London Borough of Tower Hamlets	Kelly Powell	TH Communications team	020 7364 4754/ 07852 273 984	kelly.powell@towerhamlets.gov.uk
London Borough of Newham	Gary Bird	Senior Communications Manager	020 8430 6259/ 07769 912510	gary.bird@newham.gov.uk
London Borough of Hackney	Polly Cziok	Head of Communications and Consultation	020 8356 3323/ 07985 692964	Polly.cziok@hackney.gov.uk
Luton Borough Council and Luton CCG	Lisa Levy	Communications & Marketing Account Manager	01582 546178/ 07713 083034 Out of hours: 01582 547402	lisa.levy@luton.gov.uk
Central Bedfordshire Council	Georgina Stanton	Chief Communications Officer	0300 300 4438 Out of hours: 07825 034787	georgina.stanton@centralbedfordshire.gov.uk
Bedford Borough Council	Keiron Fletcher	Head of Communications	01234 276277/ 07867 523271	Keiron.fletcher@bedford.gov.uk

Appendix A ctd.

NHS England

NHS England (London) Communications team during office hours: 020 3182 4984 and email england.lsmedia@nhs.net

Out of hours, the inbox is monitored by the on-call person. They can be contacted via a pager.

Call **0844 822 2888** quoting pager reference **LON01**. Ensure that you leave your name, organisation and contact number(s). Your message should be 160 characters or shorter to be read on the Pager.

NHS England (Midlands and East of England) Communications team during office hours: **0113 825 3433** and email: england.memedia@nhs.net and england.mecomms@nhs.net. Both are monitored throughout the working day and messages will be forwarded on to the relevant people to action.

Out of hours the NHS England (Midlands and east of England) communications leads are accessible via **07623 503829**

Communications Lead - Action Card

Role Overview:

- Support the Director on-Call in managing communications across the Trust, with partner responder's Communications Leads and with the media

Upon arrival at the Incident Co-Ordination Centre

Assist with the set up the Incident Co-ordination Centre

All Actions and Decisions MUST be logged – start your Incident Log NOW

- Consider your likely response (Ensure you understand the situation)
- LONDON: Establish contact with NHS England Communications Lead via pager 0844 822 2888 (ask for call sign LON01)
- BEDFORDSHIRE: Establish contact with NHS England (Midlands and East of England) Communications team during office hours: 0113 825 3433 and email: england.memedia@nhs.net and england.mecomms@nhs.net Out of hours call 07623 503829

Following first team meeting/ situation report

Establish contact with the appropriate external agencies Communications Leads (i.e. Acute Trusts, Local Authorities etc.)

- Agree which agency will take the lead on Communications

Involving external agencies

- DO NOT release, without consultation, information or advice which covers the areas of responsibility of partner organisations
- If the Trust is not the lead Communications agency, ensure that the lead agency has all of the relevant Trust media information
- Attend any central meetings to obtain information

Public communication

- Ensure (as far as practicable) that patients, their relatives (and carers), and staff

are kept informed about the incident, before the media

- Cater for the provision of interpreters if required. Liaise with Manager on-Call for specific requirements (the Trust has contracts with the Newham Language Shop)

Media handling

- Provide the Director on-Call with professional media advice
- If a health incident, draft a press release, as appropriate, in liaison with NHS England or the relevant Commissioning Support Unit.
- Draft press releases on behalf of the Director on-Call and get them approved before release
- Organise and manage media briefings (as necessary), including provision of area to locate media representatives if required. Task a Team Assistant to set up the room

Communicating with staff

- Provide staff who may come into direct contact with the public, e.g. receptionists, security, people entering premises with media personnel, staff at the incident with at least a basic level of information so they can handle inquiries confidently
- Publish updates on the Trust's internet site after liaising with NHS England/ CCG Communications Lead and clearing them with the Director on-Call
- Release regular update bulletins for staff after gaining Director on-Call's approval

Handover to Director on-Call at the end of your shift

In your handover you should cover the following:

- The nature of the incident
- Communication actions that have already been taken with the media/ public and staff
- Any tasks that should be considered a priority
- Contact details for those that you have been liaising with in your incident role - names, role, telephone numbers
- Sign over your Incident Log to the on-coming staff - make an entry to this effect giving the names, time and date

Major Incident Stand-down

- Complete your incident log and hand to the Emergency Planning Manager (if present) or to the Manager on-Call