



Communication and Media Protocol

Title: Communication and Media Protocol Safeguarding Alerts

Date: 30.06.2011

Author: Helen Robinson-Gordon, Head of Communications, RUH.

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Approved by Cabinet 10.08.11

1. Introduction

This Communication and Media Protocol for those involved in the safeguarding of adults, is the result of communications specialists drawing upon the expertise and experiences of those involved in safeguarding issues.

This Protocol is designed to provide specialist advice and guidance to those involved in protecting adults' at a time of public and/or media interest in a given case. It seeks to detail the training needs of staff in line with the stages identified in the Safeguarding Adults Procedure stipulated by the Bath and North East Somerset Local Safeguarding Adults Board (B&NES LSAB). **This Policy and Procedure can be found in full at www.bathnes.gov.uk**

This Protocol provides the communications and media advice and guidance for the seven stages as identified in the above document, and also provides an outline of the type and duration of training that is needed, when and by whom.

2. Background

By its very nature a safeguarding alert can attract a high level of public interest, particularly if the subject of the alert is an adult at risk or if the conduct of a particular organisation is in doubt or under scrutiny. Alerts can involve some of the most vulnerable people in society and can challenge an organisation's procedures, systems and training during a time of intense public focus. Whilst the majority of journalists will adopt a challenging but fair approach to a given alert, press and media attention can be intrusive, hostile and sensational – particularly national papers or broadcasts. To satisfy public appetite, the media will often look for an organisation to blame or for an individual failing in their duty of care. Poorly managed communications will certainly fuel a critical media approach and shake public confidence. A slick, skilful and consistent approach to media handling is vital to mitigate against these effects. It will be a primary contributing factor to how the management of the alert is perceived by the media, public and colleagues and how the organisation's reputation is preserved or otherwise. The power and influence of the media must never be underestimated.

3. Purpose

The purpose of this protocol is to identify the potential media and communications issues which may arise when a safeguarding alert is raised; the procedures that need to be followed at each stage and identify the media and communications training needs of relevant staff involved.

4. What Can a Communications Leads Offer?

Communications experts can provide strategic and practical advice to health and social care colleagues in terms of managing the immediate and longer term aspects of communications and media handling. They are also likely to have experience of dealing with communications aspects of major and untoward incidents.

5. Managing Communications

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5.1 When Will a Safeguarding Alert Attract Media Attention?

Every alert is different but there is one overriding question, to which, if the answer is 'possibly yes', or 'probably yes', then the relevant communications department must be informed. That question is:

"If details of this case or potential case were to be in the public domain, would there be public interest, comment or criticism?"

If the answer is yes or even possibly yes, then the following must also be taken into consideration:

- How serious is the incident?
- Do we have a duty to protect other people at risk?
- How damaging are the circumstances now, or potentially, to the reputation of the organisations involved?

A quick assessment needs to be made against the above criteria and a decision taken as to whether communication leads need to be involved. It is however always better to inform the relevant communications leads as a precaution if nothing else, than to not inform them and be left facing an escalating crisis in terms of reputation management and public outcry.

5.2 First Steps – Agency Engagement and Training

At the very least, senior staff (including the Safeguarding Commissioner) who may be involved in a safeguarding alert, should establish a good working relationship with their respective communications leads and keep them engaged at all stages of an alert or possible alert (the type of alert that will attract media attention is discussed in 5.1 above). The communications departments of the statutory and independent / voluntary and private sector LSAB partners provide an important professional function towards the effective management of safeguarding alerts. Specifically, the communications staff at the two local police forces, Wiltshire and Avon and Somerset, should also be involved in managing the media during an alert as they are also likely to have a role to play if the alert is within the public domain and subject to legal proceedings. Proactive engagement with these respective departments as an integral part of the safeguarding procedures will benefit the overall safeguarding alert process. **See Appendix 1 for contact details.**

Where ever possible the media and communications training for safeguarding alerts should be done as part of either induction or ongoing training as it is important to ensure as many staff as possible are trained to the appropriate level. This protocol identifies the level of advice and guidance to those involved in protecting adults', young people and children at a time of public and/or media interest in a given case. It seeks to detail the training needs of staff in line with the stages identified in the Safeguarding Adults Procedure stipulated by the B&NES LSAB.

5.3 Who Should Alert the Communications Department?

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Having considered the above criteria (set out in 5.1) it is the responsibility of the Safeguarding Case Coordinator (from either Avon and Wiltshire Mental Health Partnership Trust AWP or Community Health and Social Care Services CHSCS) to inform the appropriate organisation (s) communications leads and the Safeguarding Commissioner as soon as possible. The communications leads should be trusted with all information surrounding any particular incident as they need to understand the full story and background in order to provide appropriate advice and identify the most appropriate response. Communications leads will often come back with a series of queries based on what they know from experience the media will ask.

5.4 Which Organisation Leads on Communications?

B&NES Council have the statutory responsibility to coordinate the response to safeguarding alerts. CHSCS and AWP are contracted to operationalise the Safeguarding Adults Policy and Procedure and the Council have assurance mechanisms in place to retain the statutory responsibility for this.

Given that the Council maintain overall statutory responsibility it is reasonable that the Council's Communications Team are involved in partnership with other communication leads to formulate the plan for media response. There is access to communications advice detailed in Appendix 1, including out of hours via on-call systems.

Depending on the nature of the incident a judgement should be made by the safeguarding coordinator, the Safeguarding Commissioner and the Council Communications Lead as to which communication lead will be involved, once the Council Communications Team has been briefed. This should be based on the nature of the incident, its location and which professionals or organisation have to date been involved in the service user's care.

All communications leads should however be informed of the overall incident and agreed approach at an appropriate time. It's likely that one of the communications leads will then take the lead for the overall media handling and this decision will be taken by the senior communication staff in conjunction with the appropriate safeguarding coordinator and senior managers and the Safeguarding Commissioner.

5.5 Making Information Available

Once a lead has been identified it is critical that they represent communications for **all** the organisations and become an integral partner at meetings and involved in decisions in order to offer advice and guidance on media and communication issues. The focus of the media can shift very quickly indeed and its vital that all involved are aware of the impact the media can have on a safeguarding process and the potential risk to partner organisations reputations.

5.6 Sign- off Process

All statements and briefing material must be signed by the communication lead in conjunction with agreement from relevant senior manager and Safeguarding Commissioner.

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All media responses need to be swift and timely, messages need to be clear concise and simple and agreement must be sought by those agencies implicated in the case. However given that timing is crucial senior staff involved will have to take decisions on behalf of, and in the interests of partner organisations. An example of a statement template is attached (**see Appendix 2**) and this can be held electronically by all relevant communications departments and used as appropriate. Each organisation should add their own title and logo before issue. The example attached carries the RUH logo.

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Communications Guidelines for the Seven Stages of a Safeguarding Alert

1. Introduction

The Safeguarding Adults Procedure is divided into seven stages and the level of media and communications involvement and training relating to this will vary from stage to stage. The role and involvement of a communications specialist will vary from stage to stage.

This Guidance identifies the key personnel involved at each stage and the actions required.

2. Stage 1: Alert

Identify the type of staff who are most likely to have responsibility for raising an alert. (Examples might be a care worker in a residential home, a nurse on a hospital ward, home help, member of Community Learning Difficulties Service, supported living provider. The person that identifies potential abuse will raise an alert in accordance with their organisational safeguarding policy and procedure. The alert will be referred to CH&SCS within the same day.

Communications Actions:

- Ensure staff know how and where to contact communications leads within their organisations
- Ensure staff have an awareness of the potential for media or public scrutiny.
- Decide who will provide the communications support and how – for instance, directly by members of the communications leads from the PCT, RUH, Council etc or via cascade through line managers
- Ensure Communications Teams and senior managers are aware of the relevant ‘whistle-blowing’ policy. This is in case the member of staff making the alert also directly or indirectly informs the media.

Training Required:

- Simple awareness of the potential of media interest is needed for all ‘relevant’ social care, health and other staff involved in directly supporting service users.

3. Stage 2: Referral (within same working day)

Referrals are coordinated by CHSCS.

Communications Actions:

- Ensure staff involved in the referral process receive media training suitable to their post and involvement as part of ongoing training or induction.
- When an alert is referred to CH&SCS and (occasionally) AWP they will assess whether it meets the criteria in 5.1 of the

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Protocol. Where this is the case a senior staff member will notify the communication leads at the Council and the Safeguarding Commissioner that a potentially media sensitive alert has been referred. At this stage, it may be for information only.

- Communications leads involved to establish and agree brief overview of incident and understanding of the respective staff involved from each organisation
- Be aware of the risk of information or rumours beginning to 'leak out' from scene of incident, staff involved and/or family
- Consider requirement for internal as well as external communications activities
- Prepare re-active holding statement if required in response to press and media queries

Training Required:

- Simple awareness of the potential of media interest is needed for all 'relevant' social care, health and other staff involved in directly supporting service users.

4. Stage 3: Decision (by end of following working day)

If no further action is being taken – assume stand down procedures.

Communications response:

- To prepare and agree possible reactive holding statements.

If decision taken to proceed:

Communications Actions:

- Consider level of communications input required, which organisations are involved and who is to take the lead.
- Invite communications leads to relevant meetings.
- Communications lead to check what additional communication support or resources that lead organisation may require e.g. from NHS South West.
- Police may be involved at this stage if there are legal or criminal implications. In this instance anticipate that the police would take over as lead organisation including for communications
- If the alert subsequently implicates more than one agency, or several individuals, especially children, expect significant media interest by local and national press and media. Adopt procedures and activities as in major incident plan – communications leads will need to co-ordinate and monitor journalists' behaviour/activities, establish strategy/operational ground rules, prepare responses, take pressure/attention off staff, set aside media facilities.
- Record communications activities as part of the audit trail for handling the alert.

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Training Required:

- Establish media training/support needs. Senior managers/directors should be fully trained to deal with live and pre-recorded media interviews, print interviews and to be able to brief all relevant staff when required. More junior managers should also understand the need to refer to their relevant communications lead and be able to advise on statements and giving local interviews if need be or if no senior manager is available.

5. Stage 4: Strategy Discussion / Meeting (within five working days)

Communications Actions:

- Ensure relevant senior B&NES council staff are briefed. **(see Appendix 3)**
- Communications input essential at team meetings. Results of which need to be shared with other communications colleagues
- Key spokes people identified . (Examples might include Manager of care home, team leader)
- If Police involvement, check that any communications activity does not jeopardise police investigation.
- Anticipate media interest and agree media handling strategy. Prepare agreed statements. (Signed off by appropriate director or if a serious incident the CEO).
- Ensure the response protects the identity/interests of individuals including adult(s) at risk, staff involved with incident and investigating staff. The timing of any internal staff messages/updates need to be carefully co-ordinated with that of external media activity.

Training Required:

- Ensure relevant senior B&NES council staff are suitably media trained. **(see Appendix 3)**
- Training to be provided for all senior staff and middle ranking managers across all agencies involved. To be undertaken as part of induction or ongoing training.

Stage 5: Investigation / Assessment

Communications Actions:

- Depending on nature of incident assess level of ongoing national/regional/local press and media interest.
- Agree likely completion and results of investigation / assessment.
- Prepare communications plan for how this announcement is handled and communicated internally and externally.
Identify spokes-people

Training Required:

If required provide additional media training/support for the spokes-person.

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7. Stage 6: Planning (within 2 weeks of assessment / investigation being completed)

Communications Actions:

- It's important in terms of reputation management, for the organisation involved to make clear any recommendations for actions and outline how these will be effected, what lessons have been learned and what procedures have been instigated to try to prevent such an incident happening again. This is particularly important if an organisation has been under severe criticism.
- Reassuring the staff and public about ongoing commitment to providing high quality safe care is also important at this stage.

Training Required:

- If required provide additional media training/support for the spokes-person ensuring they can communicate effectively the actions taken and reassure staff and public about a safer way forward if appropriate.

8. Stage 7: Review (within 3 months for first review)

It's very likely that the media will return to an incident or alert at regular anniversaries such as 6 months, 1 year, 5 years etc. Therefore, although staff involved at the time of the alert/incident may have left or moved on within the organisation.

Communications Actions:

- Keep a written log of media interest and comment made at the time to ensure continuity and that existing staff will have the background knowledge to hand when facing fresh inquiries.

Note: A detailed training programme for media and communications for relevant safeguarding staff needs to be read in conjunction with this protocol and will form an ongoing training programme involving communication leads in delivery of the training where relevant and required. **(See Appendix 3)**

There will be occasions when due to circumstances these guidelines need to be accelerated rapidly, however the same principles outlined in the protocol eg, having a lead communications officer, obtaining all the back story and liaising with fellow professionals in other agencies still apply.

Appendix 1

RUH

Helen Robinson Gordon

Head of Communications

Dir Line: 01225 825849

Mobile: 07734 300376

Pager: 07623 114391

Tim Edmonds

Communications Manager

Dir Line: 01225 826230

Mobile: 07805 201726

Pager 07623 114391

Anita Houlding

Senior Communications Officer

Dir Line: 01225 825799

Mobile: 07803 642404

Pager: 07623 114391

Bath and North East Somerset Council

Jonathan Mercer

Communications and Marketing Manager

Dir Line: 01225 477449

Mobile: 07977228186

James Hinchcliffe

External Communications Manager

Dir Line: 01225 477283

NHS

NHS South West

Centralised out-of-hours contact number for on-call Communications Manager and on-call Director: 0844 5449633

NHS BANES

Derek Thorne

Assistant Director of Communications

Dir Line: 01225 831861

Out of hours mobile: 07594 919733

Craig MacFarlane

Communications Manager

Dir Line: 01225 831414

Mobile: 07515 191918

NHS Wiltshire

Out of hours Duty Communications Officer: 0769 907 51809

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NHS Somerset

Paul Courtney
Communications Manager
Mobile: 0794 118 2175

North Bristol NHS Trust

Out-of-hours – call main switchboard: 0117 970 1212
Contact on-call site manager, who escalates to on-call Executive

University Hospitals Bristol NHS Trust

Out of hours: 0117 923 0000

Avon and Wiltshire Mental Health Partnership

Ray Chalmers
Head of Communications
Dir Line: 01249 468099
Mobile:: 07909 000157
Out of hours communications contact: 01249 468088

Royal United Hospital for Rheumatic Diseases**NHS Foundation Trust**

Emma Mooney
Marketing & Communications Manager
Dir Line: 01225 465941 ext 211

Ambulance Service**Great Western Ambulance Service**

Victoria Eld
Out of hours Head of Communication
Mobile: 07824 626312

South Western Ambulance Service

Lynne Paramor
Director of Corporate Services:
Dir Line: 01392 261509

Melodie Juste
Senior Communications Manager
Dir Line: 01392 261506

Dave Rogers
Communications Assistant
Dir Line: 01392 261649

Out of hours, call Duty Manager in control room: 01392 269621

Police**Police HQ, Portishead**

Out of hours media mobile: 07919 693752
Press office in hours:01275 816350

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This is the main number to ring for Avon & Somerset, Wiltshire and Gloucester Police in the event of major incident

Wiltshire Police 24/7 number: 0845 408 7000

Fire and Rescue

Avon Fire & Rescue Service HQ

Main number (also for out of hours): 0117 926 2061

James Bladon
Media & Communications Manager
Dir Line: 0117 926 2061 ext. 390

Stephanie Mounsey
Media & Communications Officer
Dir Line: 0117 926 2061 ext. 216
Out of hours duty press officer mobile: 0707 746 7634

Wiltshire Fire & Rescue Service

Main number: 01380 723601 (direct to control room)

Louise Knox
Media & Communications Manager
Dir Line: 01380 731126
Mobile: 07841 951 111
Out of hours: 01380 731 130 to the control room who identify senior duty manager – media is part of their remit

Gloucestershire Fire & Rescue Service

Main number (diverts to control room out of hours): 01452 753333

Date

Media Statement

The **(insert name of organisation)** has been made aware that an incident has occurred on **(insert day and date)** and that a vulnerable adult/young person/child **(delete as appropriate)** may be involved.

Specially trained staff from our organisation are working with their counterparts in health/social services and the police/emergency services **(change or delete those involved as appropriate)** to further investigate this incident. The welfare of any vulnerable person is our priority and will remain so throughout the course of any investigation.

Ends

Lead agency to ensure all relevant communication contact details are placed at the bottom of all press communications

Appendix 3

Outline of Media Training Plan

The following is a summary only of the main points of teaching for media training.

Stages 1 – 3

For staff involved in the earlier Stages of an alert a single training or awareness session, lasting about 2 hours will be sufficient. This could be provided by members of the Communications Teams, particularly those who were previously employed as journalists.

The session would be interactive and cover the basics of media relations, how to deal with a media call, where they can find support and what to say and not say.

Stages 4 and above

For those staff involved in these later stages, the training session would ideally need to be at least half a day, extending to a full day if all aspects of interview technique and crisis management are required. External contractors for broadcast would also be brought in.

It would include:

Telephone Interview Training

A phone call from a journalist/trainer who will conduct a fifteen minute interview with you on a subject of your choice. Within an hour they'll deliver the copy they would have written were they doing it for real.

One-on-one Interview Training

Manage the interview to make sure your messages are heard. How best to control the agenda by giving the journalist news they can use.

Press Conference Training

Preparation for the sort of questions and format you can expect to face in real life at a press conference and what to provide in press kits and background briefing
Ending the encounter gracefully!

TV Interview

Preparation of core messages and how to hone them to suit your target audience. How to appear on screen, dress, body language, addressing tricky questions etc.

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