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| **Document Type:**  **Policy** | **Unique Identifier:**  CORP/POL/194 |
| **Document Title:**  **UHMBT Media Policy** | **Version Number:**  2 |
| **Status:**  Ratified |
| **Scope:**  All UHMBT colleagues and Governors | **Classification:**  Organisational |
| **Author / Title:**  Sarah Jones, Corporate Communications Manager | **Responsibility:**  Corporate Communications |
| **Replaces:**  Version 1.2, UHMBT Media Policy, Corp/Pol/194 | **Head of Department:**  Louise Jones, Director of Communications and Engagement |
| Does this document refer to and account for the prescribing, supply, storage or administration of medication (especially via electronic media)? **No** | |
| **Validated By:**  Corporate Communications Team | **Date:**  08/01/2025 |
| **Ratified By:**  Trust Procedural Documents Group Chair’s Action | **Date:**  07/04/2025 |
| **Review dates may alter if any significant changes are made** | **Review Date:**  01/01/2028 |
| * Does this document meet the requirements under the Equality Act 2010 in relation to age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation? **Yes** * Does this document meet our additional commitment as a Trust to extend our public sector duty to carers, veterans, people from a low socioeconomic background, and people with diverse gender identities? **Yes** | |
| **Document for Public Display: Yes** | |

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| SUMMARY |
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| The NHS is a publicly funded and publicly accountable service that almost without exception, impacts on everyone.  NHS colleagues deal with public health, injury, sickness, medical breakthroughs and personal tragedy – all topics of great human interest. For these reasons, the NHS is of ongoing interest to the public and constantly in the news with issues such as funding, performance, medical advances and access all being regular topics of political debate.  The Trust’s approach is to be open and co-operative with the media at all times, whilst bearing in mind the duty to observe and maintain patient and colleague confidentiality. The requirement to balance the needs of accountability and openness with the needs of patients and colleagues is best discharged if a professional and mutually beneficial working relationship exists between the Trust and the media.  It is part of the role of the Corporate Communications Team to ensure this exists and is maintained. The media are important to the Trust in helping us to convey news and information to the population we serve – including colleagues and their families, as well as patients.  We need the media as much as they need us, and it is in both our interests to maintain good, open relationships. However, they are not duty bound to publish anything we give them or to guarantee any sort of prominence of a story such as the front page. Offering to purchase advertising in a newspaper does not influence or guarantee favourable coverage and is not a strategy that the Trust pursues. |

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| PURPOSE |
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| This document sets out the policy for liaising with the media, handling media requests and monitoring and reporting on coverage. It aims to ensure that all colleagues know what to do if they are contacted by a media representative in their capacity as a Trust employee or wish to share news via the media. It also covers filming of Trust services and on Trust premises. The guidance contained within is designed to help protect and support you as a UHMBT employee. |

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| SCOPE |
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| This policy applies to all colleagues employed by UHMBT, volunteers, and Governors. It also applies to colleagues working for contracted or partner organisations/charities who wish to liaise with the media about Trust services or arrange media interviews on Trust premises. |
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| Roles and Responsibilities |
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| |  |  | | --- | --- | | **Role** | **Responsibilities** | | Director of Communications and Engagement | Accountable for the processes and guidance set out in this policy and supporting the Corporate Communications team to carry out the necessary activities. | | Corporate Communications team | Responsible for using the processes and guidance in place to support colleagues when dealing with the media. | | * All colleagues employed by UHMBT * Volunteers * Governors * colleagues working for contracted * Partner organisations / charities who wish to liaise with the media about Trust services or arrange media interviews on Trust premises | To be aware of and follow the advice and guidance within the policy when dealing with the media in a Trust capacity. | |

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| POLICY |
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| Key Points to Remember |
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| * The Trust is a publicly funded organisation and part of the NHS which belongs to us all. There is a duty upon all colleagues and volunteers to be publicly accountable and transparent at all times * Our approach is to be open and co-operative with the media, whilst bearing in mind the duty to observe and maintain patient and colleagues' confidentiality * A professional and mutually beneficial working relationship between the Trust and the media helps us to balance the needs of accountability and openness with the needs of patients and colleagues * All media requests should be directed through the Corporate Communications team as they have the expertise in liaising with the media and will support colleagues and all other parties as identified above in working with the media * Colleagues and all other parties as identified above who are contacted directly by a journalist should contact the Corporate Communications team and pass the enquiry to the Corporate Communications team as a first point of contact * Colleagues wishing to secure media coverage should contact the Corporate Communications team to discuss how best this can be achieved before progressing * Where we know the media are talking about a patient or current colleague, we will always use best endeavours to give the individual the opportunity to explicitly consent for the Trust to respond about their ‘personal matters’ * At times such as during major or critical incidents, the final approval to contact the media or to agree to interviews might require wider approvals, such as NHS Lancashire and South Cumbria Integrated Care Board and NHS England and Improvement. This will still be arranged via the Corporate Communications team * All requests to film about services and/or within Trust premises for specific purposes should be agreed with the Corporate Communications team prior to filming starting * Colleagues wishing to film for personal use, e.g. recording a colleague’s leaving speech, must first seek the permission of other colleagues when doing so and do not breach patient or colleague confidentiality when taking photographs or filming. They should also be aware of who/what is featured in the background of any personal filming. No patient or personal identifiable information should appear in filming and photography. Look out for patient name boards, wrist bands, charts, white boards, computer screens and ID badge for example. If this footage is then placed on social media it is then classed as ‘being published to the world’ and the press are free to use it in their work |

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| Who is the Corporate Communications Team? |
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| The Corporate Communications team for the Trust is responsible for coordinating and facilitating the Trust’s media relations, including social media.  The team is the first point of contact for journalists during office hours - 8.30am-5pm, Monday to Friday.  The team operates a blended working approach and therefore, is not always present on site. The best way to contact the team is to email [communications.team@mbht.nhs.uk](mailto:communications.team@mbht.nhs.uk) or contact switchboard on 01539 732288 (or by dialling ‘0’ internally) and ask to be put through to a member of the Corporate Communications team.  There is no formal out-of-hours communications service in place. Out-of-hours, the Trust’s Senior Manger On-Call deals with **urgent** media calls. If any colleague is contacted by the media out of hours, they should contact the Senior Manger On-Call via the main switchboard on 01539 732288 (or by dialling ‘0’ internally).  There is an escalation process where the Director of Communications and Engagement can be contacted out of hours for specialist advice and/or support in an emergency or urgent situations that cannot wait until the next working day. The Senior Manger On-Call is responsible for escalating to the Director of Communications and Engagement as appropriate.  Flow charts to show the processes for colleagues if they receive contact from the media can be found in Appendix 1. |

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| Responding to Enquiries |
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| Every year, the Corporate Communications team deal with hundreds of media enquiries. When a journalist makes an enquiry, the Corporate Communications team contacts the relevant department for information, and in most cases, will work with relevant colleagues to agree a written statement response which is approved by the of the Director of Communications and Engagement and the relevant Executive Director before being issued to the journalist. This agreed statement can then be sent to other media outlets who request the same information.  There are times when it may be useful and appropriate for a relevant colleague to be interviewed by a member of the media or speak to the journalist to provide background information. In these cases, the Corporate Communications team will coordinate arrangements and support and prepare colleagues beforehand.  Colleagues, Governors and all other parties identified in this policy who are contacted directly by a journalist should pass the enquiry directly to the Corporate Communications team as soon as possible during office hours. This includes journalists contacting colleagues via social media.  Staff side / trade unions representatives are free to liaise with the media in their roles.  However, in the spirit of partnership, we would ask that those staff side / trade union  representatives who are also employees of the Trust inform the Corporate  Communications team if they are undertaking any media activity.  The Corporate Communications team has oversight of what is happening locally, regionally and nationally and can co-ordinate all enquiries and responses both within the Trust and with other partners such as NHS Lancashire and South Cumbria Integrated Care Board, Lancashire and South Cumbria Provider Collaborative Board or NHS England (regionally and nationally).  The Corporate Communications team will let the colleague/departments concerned know if there are any other similar requests from other journalists, whether this is related to a Freedom of Information request or any relevant announcements or guidance from, for example, the Department of Health, NHS England or commissioners.  There may be times when it is inappropriate to respond with a comment or interview, for example, during an inquest, if legal proceedings are underway or if we do not have patient consent. In these circumstances, the Corporate Communications team will work with relevant teams or partners to respond as appropriate. |

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| Duties |
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| When communicating with the media, the Corporate Communications team will:   * Recognise the importance of patient confidentiality. Explicit consent of the patient or their legal representative must be sought and given before the release of information or images, in accordance with the NHS Code of Practice on Confidentiality3 and stored in line with DPA / GDPR principles * Respect patients’ right to privacy and dignity * Respect the right of colleagues to privacy and to work without unwarranted interruption and intrusion * Take an inclusive approach to who and what is promoted by the Trust, in line with the Trust’s commitment to equality, diversity and inclusion * Challenge factual inaccuracy in any reporting, once it has been brought to the attention of the Corporate Communications team with evidence * Act ethically, adhering to high standards of ethical public relations, as defined by the Chartered Institute of Public Relation (CIPR) Code of Conduct and ensuring all other colleagues acting as spokespeople also act ethically and speak honestly * Facilitate the provision of training for any colleagues being asked to give a media interview on behalf of the Trust * NOT provide advice in any format on what a colleague should say in an inquest or court of Law. This is the colleague’s professional and legal responsibility   We expect the media to adhere to the standards laid down by [The Independent Press Standards Organisation (IPSO)](https://www.ipso.co.uk/editors-code-of-practice/)1,4 or [The Ofcom Broadcasting Code](https://www.ofcom.org.uk/tv-radio-and-on-demand/broadcast-codes/broadcast-code),2 and will take appropriate steps to seek redress when it is perceived that these standards are not met. |

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| Sharing the ‘Good Stuff’ |
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| Much of the work done by our colleagues every day, which they see as ordinary, is often viewed by the public and media as extraordinary. An extremely important part of the Corporate Communication Team’s role is to highlight and profile this excellent work and the high quality care patients receive, as well as the achievements of colleagues.  The team shares news and updates directly with patients and the public in a number of ways, such as media releases, social media and via stakeholder newsletters. If you have a story to tell, please contact the Corporate Communications team and they can help you to reach the right audience in the most effective way.  We accept that depending on the ‘mood’ at the time and general reporting by the press of any issues at the Trust, ‘positive’ proactive stories can be misinterpreted or aligned to a past or current matter, such as Maternity care at FGH, Urology, etc. In these circumstances, the Corporate Communications team will use their expertise to ensure that the news is shared at the right time, in the right way and using the right channel. |

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| Monitoring |
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| The Corporate Communications Team monitors relevant local and regional news outlets and reports this in the weekly UHMBT Communications Team Update. The update is shared via email directly to the Trust Board, Governors and the Trust Management Group. |

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| Approvals and Spokespeople |
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| All interviews, media statements and releases requires the written approval of the Director of Communications and Engagement, as well as the Executive Director who holds the portfolio responsibility for the service in question.  Appropriate approval is vital to ensure that the content is factual, accurate and does not conflict with any other information.  Wherever possible, interviews and statements will be led by an appropriate clinician who has had the relevant media training or the relevant spokesperson or Executive Director. In the absence of these, the Director of Communications and Engagement is the authorised spokesperson for the Trust. |

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| Patient Consent |
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| The NHS issued the following guidance: [Confidentiality: NHS Code of Practice - supplementary guidance: public interest disclosures](https://www.gov.uk/government/publications/confidentiality-nhs-code-of-practice-supplementary-guidance-public-interest-disclosures).3 As the guidance states, we have an absolute duty of care to our patients to observe and maintain patient confidentiality. Permission should always be sought from the patient, or if they cannot give consent due to age or incapacity, their next of kin and documented using the relevant consent form. Information should not be given without the explicit informed consent. |

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| Colleague Right of Reply |
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| Understandably, it can be distressing for colleagues to see their name in print -particularly regarding negative allegations and support is available to colleagues via other routes, such as Occupational Health and Wellbeing, Staff Side, etc.  The Corporate Communications team will use best endeavours to establish from the journalist if a colleague is to be named. If that is the case, the Corporate Communications team will discuss the enquiry with the colleague to be named and their line manager to offer them the opportunity to have ‘right of reply’. The relevant People Services Advisor will also be briefed to provide support when required - especially if the colleague is absent from work.  More information about the support available can be found in section 4.12 of this policy.  The Corporate Communications team would advise concerned employees to contact their union representative, as well as their line manager for further advice if the member of staff feels they need to secure legal advice in respect of the coverage or potential coverage.  The General Medical Council has advice and guidance for medical colleagues on how they could respond to criticism in the press whilst maintaining patient confidentiality. The guidance states that “You should seek advice from your professional or defence body, or from a solicitor, on how to respond to criticism in the media and, if appropriate, any legal redress available to you.” The full guidance can be accessed at: [Confidentiality: responding to criticism in the media - professional standards - GMC](https://www.gmc-uk.org/professional-standards/the-professional-standards/confidentiality---responding-to-criticism-in-the-media) |

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| Defamation |
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| It can be extremely distressing for many people to see details of themselves in the media, particular alleging things that they may or may not have done or said. The Corporate Communications team is not qualified to provide such advice and colleagues are advised to seek immediate advice and support from their Workforce Business Partner and/or union or professional body. Occupational Health and GPs can also assist with medical advice if the matter is causing colleagues to be ill. |

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| What is Door-Stepping? |
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| Door-stepping is an attempt to obtain an interview, or piece to camera, from a contributor without prior arrangement or agreement - typically by confronting them in a public space, such as outside their home, workplace, or courthouse.  This is not illegal or against any journalist ‘rules’ but there is guidance around how to handle it in ‘the moment’ and try to prevent it happening again. The best defence is for the Trust to continue to proactively provide the press with access to enable them an opportunity to ask questions without resorting to such tactics which can be alarming to the individual concerned.  More information on how to deal with such situations can be found in the Trust’s Introduction to the Media guide (see Section 6 for link). |

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| Wellbeing |
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| It can be a stressful time for many colleagues to be approached by the media, particularly if it is regarding their own personal conduct. The Corporate Communications team will alert the Divisional leadership team or Head of Department and relevant Executive Director for corporate teams to make them aware of the interest to provide them with the information to enable them then support the colleague in whichever way they can.  There are various ways colleagues can access support, including:   * **Speak to their line manager** * **Staff Side colleagues**can offer support and advice. Contact details can be found on the intranet: [Trade Unions](https://nhscanl.sharepoint.com/sites/PeopleOrganisationalDevelopment/SitePages/Trade-Unions.aspx) * **Colleague Networks** are run by colleagues, for colleagues. Each of our networks brings together people from different professions and departments who have a common interest in developing and improving equality in our Trust. If you would like to contact a network for support, visit the intranet: [Inclusion and Diversity - Networks](https://nhscanl.sharepoint.com/sites/PeopleOrganisationalDevelopment/SitePages/Inclusion-and-Diversity---Networks.aspx) * **Freedom to speak up (FTSU):**If you want to discuss a concern with our FTSU Guardians, do not hesitate to get in touch. All concerns are treated confidentially. You can email [freedomtospeakup@mbht.nhs.uk](mailto:freedomtospeakup@mbht.nhs.uk) or contact Wesley Blondel on [wesley.blondel@mbht.nhs.uk](mailto:wesley.blondel@mbht.nhs.uk) / 07818 468363 or [heather.bruce@mbht.nhs.uk](mailto:heather.bruce@mbht.nhs.uk) / 07890587013. More information about the process can be found on the intranet: [How to Raise a Concern](https://nhscanl.sharepoint.com/sites/FreedomtoSpeakUp/SitePages/How-to-raise-a-concern.aspx) * Our **Occupational Health and Wellbeing service** offers a full range of physical and mental health and wellbeing support, advice and guidance. The team can be contacted on 01524 512290 (Ext 42290) or [occhealth.referrals@mbht.nhs.uk](mailto:occhealth.referrals@mbht.nhs.uk) and more information about the services offered can be found on the intranet at: [Occupational Health & Wellbeing Service - Home](https://nhscanl.sharepoint.com/sites/OccupationalHealthWellbeingService) * The **LSCWell website** – a colleague health and wellbeing website that provides a variety of health and wellbeing information, tools and resources 24 hours a day, seven days a week. The website can be accessed at: [Lancashire and South Cumbria Wellbeing Service](https://www.lscwellservice.co.uk/lancashire-south-cumbria-well-service/?wlfrom=%2F) * Speaking to their GP * Speaking to their Professionally Responsible Officer |

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| Bereavement of a Colleague |
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| Sadly, there will be occasions when present or past colleagues pass away. In the vast majority of cases, no statements or comments will be made by the Trust internally or externally without the express consent and involvement of the colleague’s next of kin. Our People Services team act as the lead conduit for this contact.  There may be times where we cannot always adhere to the family’s wishes. An example of this is if the press wanted to corroborate facts and information and not providing a comment could increase the risk of inaccurate reporting. In these circumstances, the approval of the Chief People Officer or the Chief Executive is required.  Colleagues will die for many reasons and sadly, some may be as a result of taking their own lives. Whilst incredibly tragic, this may be of interest to the media. The Independent Press Standards Organisation does have [guidelines for editors](https://www.ipso.co.uk/resources/reporting-suicide-guidance/)4 of reporting in such circumstances, but it is NOT prohibited. |

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| Major Incidents |
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| The Civil Contingencies Act (2004)5 requires **NHS** organisations, and providers of NHS-funded care, to show that they can deal with such incidents while maintaining services. This programme of work is referred to in the health community as emergency preparedness, resilience and response (EPRR). The Trust has robust plans in place to respond to Major Incidents and a Crisis Communications plan is currently under development - both of which would take precedent in such an event. |

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| ATTACHMENTS | | |
| **Number** | **Title** | [**Separate attachment**](https://nhscanl.sharepoint.com/:f:/r/sites/TrustProceduralDocumentLibrary/Attachments/CORP-POL-194?csf=1&web=1&e=Ysar3l) |
| 1 | Step by step process for colleagues if contacted by the media | N |
| 2 | Media Release Template | Y |
| 3 | Photography and filming consent form | Y |
| 4 | Patient consent form | Y |
| 5 | Monitoring | N |
| 6 | Values and Behaviours Framework | N |
| 7 | Equality & Diversity Impact Assessment Tool | N |

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| OTHER RELEVANT / ASSOCIATED DOCUMENTS The latest version of the documents listed below can all be found via the [Trust Procedural Document Library](https://nhscanl.sharepoint.com/sites/TrustProceduralDocumentLibrary/) intranet homepage. | |
| **Unique Identifier** | **Title and web links from the document library** |
| Corp/Guid/051 | An Introduction to the Media |
| Corp/Guid/065 | Social Media Guidelines |

| SUPPORTING REFERENCES / EVIDENCE BASED DOCUMENTS | | |
| --- | --- | --- |
| Every effort been made to review/consider the latest evidence to support this document? | | Yes |
| **If ‘Yes’, full references are shown below:** | | |
| **Number** | **References** | |
| 1 | Independent Press Standards Organisation (IPSO) [IPSO - The Editors' Code of Practice](https://www.ipso.co.uk/editors-code-of-practice/) (accessed 10/02/2025) | |
| 2 | Ofcom (2020, updated 2023) [The Ofcom Broadcasting Code (with the Cross-promotion Code and the On Demand Programme Service Rules)](https://www.ofcom.org.uk/tv-radio-and-on-demand/broadcast-standards/broadcast-code) (accessed 10/02/2025) | |
| 3 | Department of Health and Social Care (2010) [Confidentiality: NHS Code of Practice - supplementary guidance: public interest disclosures](https://www.gov.uk/government/publications/confidentiality-nhs-code-of-practice-supplementary-guidance-public-interest-disclosures) (accessed 10/02/2025) | |
| 4 | Independent Press Standards Organisation (IPSO) [Reporting on suicide](https://www.ipso.co.uk/resources/reporting-suicide-guidance/) (accessed 10/02/2025) | |
| 5 | [Civil Contingencies Act 2004](https://www.legislation.gov.uk/ukpga/2004/36/contents) (accessed 10/02/2025) | |
| 6 | General Medical Council (2017, updated 2024) [Confidentiality: responding to criticism in the media - professional standards](https://www.gmc-uk.org/professional-standards/the-professional-standards/confidentiality---responding-to-criticism-in-the-media) (accessed 10/02/2025) | |
| 7 | [Lancashire and South Cumbria Wellbeing Service](https://www.lscwellservice.co.uk/lancashire-south-cumbria-well-service/?wlfrom=%2F)  (accessed 10/02/2025) | |

| DEFINITIONS / GLOSSARY OF TERMS | |
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| **Abbreviation or Term** | **Definition** |
| Media | This refers to all news media including newspapers, journals and magazines, broadcast (radio, TV and film), online (including professional bloggers and paid key influencers using online platforms) and news agencies. This policy extends to the social media accounts of the media as well as their own websites. Enquiries may be from local, regional, national and international media outlets. |
| Trust | This refers to University Hospitals of Morecambe Bay NHS Foundation Trust. |
| Colleagues | This refers to employees/staff (including Temporary, agency, Bank and Locum), volunteers, and Governors. |
| Door stepping | An attempt to obtain an interview, or piece to camera, from a contributor without prior arrangement or agreement - typically by confronting them in a public space, such as outside their home, workplace, or courthouse. |

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| CONSULTATION WITH STAFF AND PATIENTS Enter the names and job titles of staff and stakeholders that have contributed to the document | | |
| **Name/Meeting** | **Job Title** | **Date Consulted** |
| Louise Jones | Director of Communication and Engagement | 20 November 2024 |
| Simon Rigg | Communications Manager (Partnerships) | 20 November 2024 |
| Corporate Communications Team | Various | 20 November 2024 |
| Ben Hewes | Head of Communications Blackpool Teaching Hospitals | 28 October 2024 |
| Ben Maden | Staff Side Chair | 19 December 2024 |

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| DISTRIBUTION & COMMUNICATION PLAN | |
| Dissemination lead: | Sarah Jones, Corporate Communications Manager |
| Previous document already being used? | Yes |
| If yes, in what format and where? | Electronic - intranet |
| Proposed action to retrieve out-of-date copies of the document: | Remove outdated version and an article in the Weekly News and on the intranet to ask people to use new version |
| **To be disseminated to:** | * Trust Board * Trust Management Board (for circulation to all teams) * Governors * Trust Headquarters (file copy) * Corporate Communications Team |
| Document Library |  |
| Proposed actions to communicate the document contents to staff: | Include in Weekly News and on the intranet. Share with key groups as above. New documents uploaded to the Document Library. |

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| TRAINING Is training required to be given due to the introduction of this policy? **No**  **If ‘Yes’, training is shown below:** | | |
| **Action by** | **Action required** | **To be completed (date)** |
| **N/A** | **N/A** | **N/A** |

| AMENDMENT HISTORY | | | | |
| --- | --- | --- | --- | --- |
| **Version No.** | **Date of Issue** | **Section/Page Changed** | **Description of Change** | **Review Date** |
| 1 | 14/03/2022 | Page 6 | Added contact details for the Corporate Communications team | 01/02/2025 |
| Page 7 | Added line to make it clear the Trust would take appropriate steps to seek redress when it is perceived that standards are not met |
| Page 9 | Made it clear that the plan is under development and not in place |
| Page 9 | Clarified that statements / comments would not be given in the vast majority of cases without consent as there may be times when it would |
| Page 10 | Added door stepping to glossary |
| 1.1 | 30/09/2022 | Page 5 | Typo amend in bullet point 7 in section 4.1 | 01/02/2025 |
| Page 5 | Clarified process for colleagues who are contacted by the media |
| Page 6 | Removal of ‘Definitions’ as it is included in section 8 |
| Page 6 | Addition of Lancashire and South Cumbria Integrated Care Board and Lancashire and South Cumbria Provider Collaborative |
| Page 8 | Addition of GMC guidance |
| Page 9 | Added more information about support available and relevant links |
| Page 13 | Added Appendix 1 |
| 1.2 | 03/11/2022 | Page 8 | Added the step to brief the relevant People and OD Advisor | 0/02/2025 |
| Page 9 | Added GP and Professionally Responsible Officer to support options |
| 2 | 07/04/2025 | Section 3.1, Page 4 | Updated key points to remember in section 4.1 | 01/01/2028 |
| Section 4.1, Page 4 | Updated the role of Communications Team |
| Section 4.2, Page 5 | Updated and expanded on ‘Who is the Corporate Communications Team?’ |
| Section 4.3, Page 6 | Updated and expanded on Responding to enquiries. Added further information. |
| Section 4.5, Page 7 | Updated and expanded on Sharing the ‘good stuff’ Added further information to  Approvals and spokespeople |
| Section 4.7, Page 8 | Updated and expanded on Approvals and spokespeople. Added the Executive Director |
| Section 4.9, Page 8 | Added People Services advisor to colleague right to reply section. |
| Section 4.12, Page 10 | Added Divisional leadership team or Head of Department and relevant Executive Director to the wellbeing section |
| Section 4.13, Page 11 | Added Chief People Officer |
| Section 10, Page 13 | Changed Dissemination lead to Sarah Jones Communications Manager |
|  |  |  |  |  |
|  |  |  |  |  |

# Appendix 1: Step-by-Step Process for Colleagues if Contacted by the Media

IF CONTACTED DURING USUAL OFFICE HOURS (8.30AM - 5PM, MONDAY TO FRIDAY)

Colleague contacted by the media

v

Communications team liaises with media on the colleague’s behalf unless the individual chooses to do this themselves

Communications team supports colleague to agree actions required - working with relevant members of the leadership team and other professional representatives where needed

Communications team continues to support colleague during any publication or follow up

Colleague asks the media to contact the Trust’s Communications team on [communications.team@mbht.nhs.uk](mailto:communications.team@mbht.nhs.uk)

IF CONTACTED OUTSIDE OF USUAL OFFICE HOURS (5PM - 8.30AM, MONDAY TO FRIDAY, AND WEEKENDS / BANK HOLIDAYS)

Colleague asks the media to contact the Communications team on [communications.team@mbht.nhs.uk](mailto:communications.team@mbht.nhs.uk) and alerts the Senior Manager On-Call (SMOC) on 01539 732288 (or ‘0’ internally). In emergency situations, the SMOC will escalate to the Director of Corporate Affairs or the Head of Corporate Communications

Colleague contacted by the media

Communications team liaises with media on the colleague’s behalf unless the individual chooses to do this themselves

Communications team picks up the next working day and supports colleague to agree actions - working with relevant leaders and professional representatives where needed

Communications team continues to support colleague during any publication or follow up

IF CONTACTED AT HOME OR OUTSIDE OF WORK

Colleague contacted by the media at home

Colleague asks the media to contact the Communications team on [communications.team@mbht.nhs.uk](mailto:communications.team@mbht.nhs.uk), asks them politely to leave and requests that they do not contact them again

Make a note of the name of the journalist and their phone number. If they are in a car, take a note of the registration plate and make and model of the car.

If you believe you are being harassed, the journalist won’t leave, or you or your family feel threatened in any way, you should contact the police immediately and ask for assistance.

If you are personally approached, you may be photographed - with or without consent - depending on the public interest in the story. Do not try to take the camera off the photographer or push them away.

**If any of the above happens, please contact the Communications team on** [**communications.team@mbht.nhs.uk**](mailto:communications.team@mbht.nhs.uk) **so they can offer support**.

Independent Press Standards Organisation (IPSO): <https://www.ipso.co.uk/editors-code-of-practice/> (

The Ofcom Broadcasting Code: <https://www.ofcom.org.uk/tv-radio-and-on-demand/broadcast-codes/broadcast-code>

# Appendix 2: Media Release Template

Link to printable version: [Media Release Template.docx](https://nhscanl.sharepoint.com/:w:/r/sites/TrustProceduralDocumentLibrary/Attachments/CORP-POL-194/Media%20Release%20Template.docx?d=w645a049168464fb6a971f867a6a3f72d&csf=1&web=1&e=J4trMZ)

**MEDIA RELEASE**

|  |  |
| --- | --- |
| Date of release:  Approved by: | XX MONTH YEAR  Name and job title of executive director who signed off the media release |
| Issued by: | Name; email address |
| Reference: | Number to be obtained from the Corporate Communications team |

**MEDIA RELEASE TITLE (UPPER CASE, ARIAL AT POINT SIZE 14)**

Use Arial at point size 12 for body copy.

Name, Job title, University Hospitals of Morecambe Bay NHS Foundation Trust, said: “Quote.”

**ENDS**

**Notes to editors:**

1. For further information, please contact the Corporate Communications team by email as indicated above.

SAMPLE

# Appendix 3: Photography and Filming Consent Form

Link to printable version: [Photographic or Filming Consent Form.docx](https://nhscanl.sharepoint.com/:w:/r/sites/TrustProceduralDocumentLibrary/Attachments/CORP-POL-194/Photographic%20or%20Filming%20Consent%20Form.docx?d=w8b53429520984b73a2e5b0e4885d139a&csf=1&web=1&e=v8fIE1)

**PHOTOGRAPHIC OR FILMING CONSENT FORM**

I ……………………………………………………………………………………………...(**full name**)

**D.O.B**………………………………………………………………………………………………………

**ADDRESS**………………………………………………………………………………………………...

……………………………………………………………………………………………………………...

………………………………………………………………………………………………………………

Agree to have my photograph taken/be filmed by UHMBT/ the media

on…………………………………. (**date**) at ……………………...…..………………….… (**location**)

I understand that my picture or recording is being taken for

………………………………………………..……………………………………………….…………….

**I do/ do not give consent to my photo or video/film clip being used as part of Trust materials, such as internal and external newsletters, posters, social media, leaflets, and on the Trust’s websites.**

If you have given consent, your photograph or film clip will be stored in a restricted file for five years. After five years the photograph or video clip will be deleted from the restricted file. After five years the film or image may still be online and searchable via YouTube, social media, etc. There will be no payment for taking part received by either the Trust or yourself. If your photograph or film clip was taken by the media it will be used on their outlets.

SAMPLE

If the person being photographed or filmed is under the age of 19, the parent or guardian must give their consent on behalf of the child.

You can contact the Corporate Communications Team to request a copy or stop your photo/ clip being used. To do so please email [communications.team@mbht.nhs.uk](mailto:communications.team@mbht.nhs.uk).

**SIGNATURE**…………………………………………………………………………..

**For the Corporate Communications Team to complete**

Reference number:

Link to photograph or video:

# Appendix 4: Patient Consent Form

Link to printable version: [Patient Consent Form - Consent to Respond to Media Enquiry.docx](https://nhscanl.sharepoint.com/:w:/r/sites/TrustProceduralDocumentLibrary/Attachments/CORP-POL-194/Consent%20to%20Respond%20to%20Media%20Enquiry.docx?d=w4aa40955328c42369ffaa5f685d55ff0&csf=1&web=1&e=Qp0t8S)

**CONSENT TO RESPOND TO MEDIA ENQUIRY**

|  |  |
| --- | --- |
| **Full name:** |  |
| **Date of birth:** |  |
| **Address:** | SAMPLE |
| **Telephone number:** |  |
| **RTX Number if known**  *NB: This can be found in the top right of your hospital appointment letters* |  |
| **Media enquiry details:** | *ADD DETAILS OF ENQUIRY INCLUDING JOURNALIST NAME, MEDIA ORGANISATION NAME, ALL INFORMATION GIVEN AND QUESTIONS ASKED.* |

By signing this form, I am giving my consent for the University Hospitals of Morecambe Bay NHS Foundation Trust to discuss details of my care with the above stated journalist / media organisation. I understand that this means that details about my care may be published.

Signature: …………………………………………………….

Date: …………………………………………………......

**Data protection**

All of the data in this form is personal information and will only be accessed by authorised people in the UHMBT Corporate Communications team and will not be shared wider. The Data will only be retained (paper and electronic) for as long as is reasonably necessary but for at least three years.

For internal use by the Corporate Communications team only:

|  |  |
| --- | --- |
| Reference number |  |
| Date received |  |

# Appendix 5: Monitoring

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What is to be monitored?** | **Methodology (incl. data source)** | **Frequency** | **Reviewed by** | **Group / Committee to be escalated to (if applicable)** |
| Section 4.6 | We monitor media coverage generated regarding the Trust, by reviewing google alerts. | Daily monitoring  Weekly reporting | Corporate Communications Manager  Press and Stakeholder Communications Officer  Director of Communications & Engagement | TMG or EDG depending on severity of media enquiry and its subject matter. |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

# Appendix 6: Values and Behaviours Framework

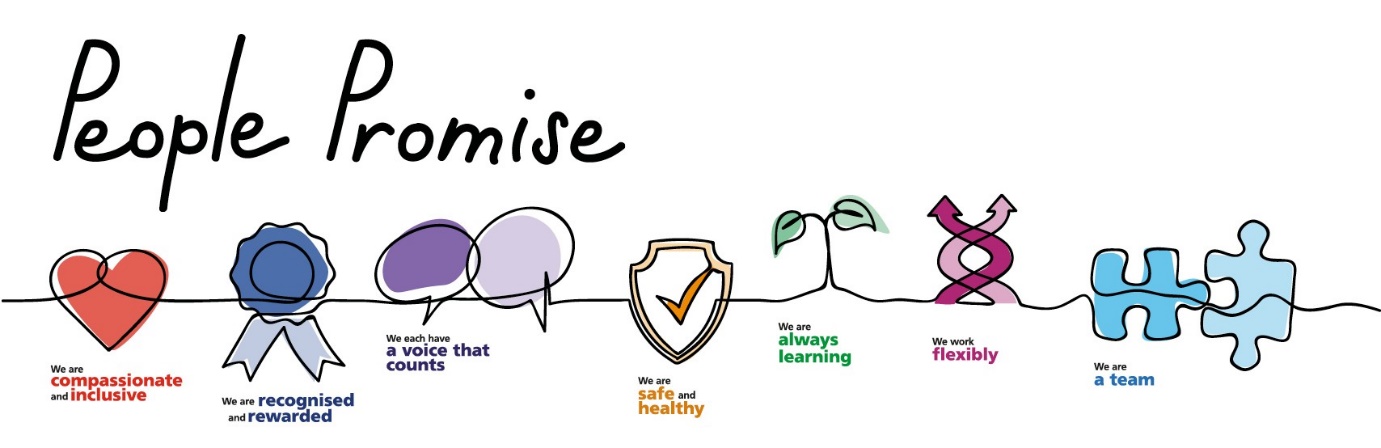
To help create a great place to work and a great place to be cared for, it is essential that our Trust policies, procedures and processes support our values and behaviours. This document, when used effectively, can help promote a positive workplace culture. By following our own policies and with our **ambitious** drive we can cultivate an **open, honest and transparent culture** that is truly **respectful and inclusive** and where we are **compassionate** towards each other.

For further information, you can also refer to Our People Strategy online. This aligns with the NHS People Promise and helps outline our commitments to working together to make UHMBT a great place to work.

A colorful vertical banner with text and symbols

Description automatically generated with medium confidenceA white circle with black text and blue text

Description automatically generated



# Appendix 7: Equality & Diversity Impact Assessment Tool

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| Equality Impact Assessment Form | | | | | |
| Department/Function | | Corporate Communications | | | |
| Lead Assessor | | Sarah Jones | | | |
| What is being assessed? | | UHMBT Media Policy | | | |
| Date of assessment | | 28 November 2024 | | | |
| What groups have you consulted with? Include details of involvement in the Equality Impact Assessment process. | | Network for Inclusive Healthcare? | | | NO |
| Staff Side Colleague? | | | YES |
| Service Users? | | | NO |
| Staff Inclusion Network(s)? | | | NO |
| Personal Fair Diverse Champions? | | | NO |
| Other (including external organisations):  Lead Governor | | | |
|  | | | | | |
| 1. **What is the impact on the following equality groups?** | | | | | |
| **Positive:**   * Advance Equality of opportunity * Foster good relations between different groups * Address explicit needs of Equality target groups | | **Negative:**   * Unlawful discrimination / harassment / victimisation * Failure to address explicit needs of Equality target groups | | **Neutral:**   * It is quite acceptable for the assessment to come out as Neutral Impact. * Be sure you can justify this decision with clear reasons and evidence if you are challenged | |
| **Equality Groups** | **Impact**  **(Positive / Negative / Neutral)** | | **Comments**   * Provide brief description of the positive / negative impact identified benefits to the equality group. * Is any impact identified intended or legal? | | |

|  |  |  |
| --- | --- | --- |
| **Race**  (All ethnic groups) | Positive | Applies to all colleagues in a fair and consistent way. |
| **Disability**  (Including physical and mental impairments) | Positive | Applies to all colleagues in a fair and consistent way. |
| **Sex** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Gender reassignment** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Religion or Belief** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Sexual orientation** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Age** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Marriage and Civil Partnership** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Pregnancy and maternity** | Positive | Applies to all colleagues in a fair and consistent way. |
| **Other** (e.g. carers, veterans, people from a low socioeconomic background, people with diverse gender identities, human rights) | Positive | Applies to all colleagues in a fair and consistent way. |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. In what ways does any impact identified contribute to or hinder promoting equality and diversity across the organisation? | It does not hinder at all, and our management of the media will promote networks, equality and diversity across the organisation, demonstrating our support for them. | | |
|  | | | |
| 1. If your assessment identifies a negative impact on Equality Groups you must develop an action plan **to avoid discrimination and ensure opportunities for promoting equality diversity and inclusion are maximised.**  * This should include where it has been identified that further work will be undertaken to further explore the impact on equality groups * This should be reviewed annually. | | | |
| Action Plan Summary | | | |
| **Action** | | **Lead** | **Timescale** |
|  | |  |  |
|  | |  |  |
|  | |  |  |

This form will be automatically submitted for review once approved/noted by Trust Procedural Document Group.

For all other assessments, please return an electronic copy to [EIA.forms@mbht.nhs.uk](mailto:EIA.forms@mbht.nhs.uk) once completed.