



# Communicating in a crisis


**(Warning and Informing plan)**

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**Remember to destroy all unnecessary drafts and unneeded correspondence, once the final version of this plan is agreed.**



## Contents

	Section of plan
<a href="#">Introduction</a>	
<a href="#">Aim</a>	1
<a href="#">Context</a> <ul style="list-style-type: none"> <li>• Civil Contingencies Act 2004 requirements</li> <li>• The definition of 'emergency'</li> <li>• Strategic aims</li> </ul>	2
<a href="#">Response Plan</a> <ul style="list-style-type: none"> <li>• Activation Protocol</li> <li>• Post incident debrief and review</li> <li>• Plan revision schedule, training and awareness</li> </ul>	3
<a href="#">Communicating with the public</a> <ul style="list-style-type: none"> <li>• Categories of duties under CCA (2004)</li> <li>• Public awareness (pre-event)</li> <li>• Public warning (at the time of an event or when one is likely)</li> <li>• Informing and advising the public (immediate and long-term post event)</li> </ul>	4
<a href="#">Effective communications</a>	5
<a href="#">Audience types</a> <ul style="list-style-type: none"> <li>• Casualties and other possible victims</li> <li>• Local people, friends and relatives</li> <li>• The wider audience</li> <li>• Vulnerable Groups</li> </ul>	6
<a href="#">Communications channels</a>	7
<a href="#">General guidance for dealing with the emergency</a>	8
<a href="#">Lead agency for communications</a> <ul style="list-style-type: none"> <li>• Establishing the lead agency</li> <li>• Responsibilities of the lead agency</li> </ul>	9
<a href="#">Other roles and responsibilities</a>	10
<a href="#">Media liaison facilities</a> <ul style="list-style-type: none"> <li>• Establishing a Media Centre</li> <li>• The Strategic Co-ordination Centre (StratCC)</li> <li>• Media liaison facilities – Police Headquarters</li> <li>• Alternative locations for media liaison facilities</li> <li>• Media at the scene - initial stages of the incident/emergency</li> <li>• SILVER/BRONZE - Relationship with the Media Cell at GOLD</li> <li>• Joint media handling between agencies</li> </ul>	11
<a href="#">Media handling – best practice checklist</a>	12
<a href="#">Working with other agencies</a> <ul style="list-style-type: none"> <li>• The NHS</li> <li>• Government communications support – COI</li> <li>• Other key agencies</li> <li>• The voluntary and community sector</li> <li>• Suffolk Businesses</li> </ul>	13
<a href="#">Command structure during an emergency</a>	Annex A
<a href="#">Community Risk Register, identification of lead agencies, holding statements and FAQs</a>	Annex B
<a href="#">Quick reference guide</a>	Annex C
<a href="#">Mutual Aid Protocol</a>	Annex D

<a href="#">Protocol and check-list for the Lead Agency</a>	Annex E
<a href="#">Protocol for distribution of information</a>	Annex F
<a href="#">Job descriptions</a>	Annex G
<a href="#">Major incident media enquiry form</a>	Annex H
<a href="#">Categories of responders and other agencies as defined by the CCA (2004)</a>	Annex I
<a href="#">Checklists for Category 1 Communications Officers</a>	Annex J
<a href="#">NHS Suffolk Pandemic Flu communications plan</a>	Annex K

## Introduction

Recent experience here in Suffolk and the rest of the UK has proved that any major incident or emergency will attract an immediate, and probably large-scale, media response.

While professionals from the emergency services and other agencies are responding to the major incident, local, regional, national and international media will also be arriving at the scene, be that one location or many.

Dealing effectively with the media is therefore critical to the effective handling of any major incident.

The public will turn to the media immediately for information during an incident. The media may also be a critical communications channel in getting information to people which may be important to their safety during an incident.

Agencies will need to ensure that the information they provide is accurate, timely, and delivered through easily accessible channels to the media. Otherwise, the media will go elsewhere for information, and turn to less reliable sources.

This plan is designed to underpin the principles set out in the Suffolk Resilience Communicating in a Crisis strategy. It replaces the SRF Media plan issued in 2005.

It is designed to give communications professionals, and people who may be drafted into communications roles during a major incident, the information and guidance required to provide an effective service to the media and the local community on behalf of the agencies they work for.

The plan is informed by the experience of senior press offices who oversaw the response to the national and international media during the Suffolk murders in 2006.

The series of incidents resulted in arguably the most challenging major incident in recent times, with unprecedented media demand. Communications specialists and press officers from across Suffolk teamed up to meet this demand – and the way in which the media operation was conducted is now considered best practice nationally.

We would like to acknowledge the Hampshire and Isle of Wight, Hertfordshire, and Humberside resilience plans in helping to draft this document

*Communicate Suffolk*  
*June 2009*

# 1 Aim

This document details the Communicate Suffolk's method for ensuring clear and timely information is delivered by the appropriate means to members of the public of Suffolk during an incident and for dealing with the media effectively to ensure they assist in the delivery of accurate and timely information to the public.

This document details how to activate the multi-agency plan, how we might communicate with different audiences to meet the warning and informing requirements of the Civil Contingencies Act 2004 and how the media cell will operate in an emergency situation. It contains a number of annexes which provide technical information for communications professionals to help them effectively deal with an emergency situation, including checklists for Category One responders, job descriptions for the media cell representatives and the Mutual Aid protocol for communications. It also includes the NHS Suffolk Pandemic Flu communications plan, which is the agreed pandemic flu communications plan for Communicate Suffolk.

## 2 Context

### 2.1 Civil Contingencies Act 2004 requirements

The Civil Contingencies Act (CCA) 2004 places requirements on responding agencies in relation to media and communication issues. These are to:

- Work with the media.
- Provide assistance to the media during an incident.
- Establish a co-ordinated approach to communications.
- Ensure consistency in public information.
- Arrange for the publication of risk assessments and plans.
- Maintain warning and informing arrangements.
- Develop public awareness and preparedness before an incident.
- Communicate during and after an emergency.
- Exercise and review plans and procedures.

A nationally recognised three tiered command and structure is used during a major emergency, details of this are given in Annex A.

### 2.2 The definition of 'emergency'

An emergency is: "An event or situation which threatens serious damage to human welfare in a place in the UK, the environment of a place in the UK, or war or terrorism which threatens serious damage to the security of the UK"  
*(from Emergency Preparedness Guidance on Part 1 of the Civil Contingencies Act 2004, its associated Regulations and non-statutory arrangements)*

### 2.3 Strategic aims

Suffolk Resilience's High Level Communications Strategy, Communicating in a Crisis, sets out a multi-agency approach to communicating risk before an incident or emergency, and communications in the event of a crisis.

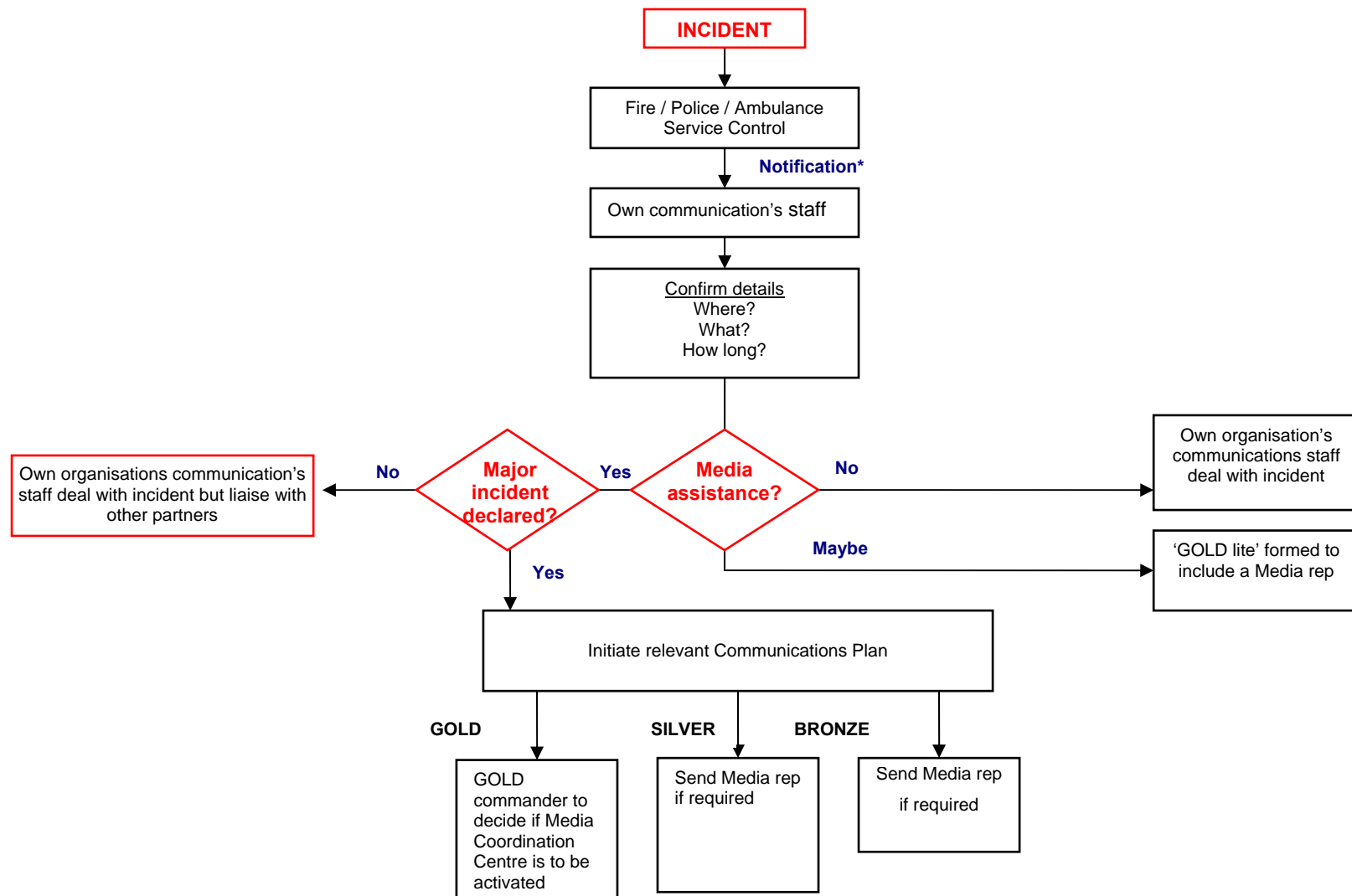
The strategy sets out the principles, objectives, stakeholders and channels which will define the multi-agency response to dealing with communications in a major incident.

The ultimate strategic aim of communication during an emergency, set out in the strategy, is to ensure that, through the media and other communications channels, the public are kept well informed and up to date with the emergency, how it affects them and their communities, and what, if any, the longer term impacts and implications will be.

### **3 Response Plan**

#### **3.1 Activation Protocol**

This flowchart explains when to activate this multi-agency communications plan



### **3.2 Post incident debrief and review**

Once an incident is over it is important to review the response to the emergency. As well as each organisation holding its own internal de-brief, it is important that all of the press and communications professionals involved meet to discuss how we work together as the Communicate Suffolk group.

We can all learn lessons from such a response and this document will need to be reviewed - and possibly revised - in light of experiences. The standard SRF incident and exercise debrief agenda should be used as a basis for discussion and the lessons identified recorded on the SRF Lessons Identified spreadsheet.

### **3.3 Plan revision schedule, training and awareness**

To ensure this plan remains as useful and as relevant as possible, a revision will take place annually.

Communicate Suffolk will:

- Review the text of the plan every 12 months
- Facilitate awareness sessions on an on-going basis
- Run an exercise to fully test the plan at least every two years as part of one of the planned Suffolk Resilience Forum exercises.

## **4 Communicating with the public**

### **4.1 Categories of duties under CCA (2004)**

Under the Civil Contingencies Act (2004), the Category 1 responders have a duty to engage with the public giving timely information on emergency situations. This falls into three categories:

### **4.2 Public awareness (pre-event)**

Informing and educating the public about risks and preparedness.

The public will need:

- General information on what to do during an emergency. This can be disseminated on the Suffolk Resilience Forum website or on 'Z' cards.
- Issue-specific information. For example for COMAH, REPPiR, flooding, oil pollution incidents.

#### **4.3 Public warning (at the time of an event or when one is likely)**

Alerting by all appropriate means the members of a community whose safety is at imminent risk. This needs to happen immediately when an emergency occurs and preferably again during the first hour when more information is known.

The public needs:

- Basic details of the incident – what, where, when (and who, why and how if possible)
- To know the implications for health and welfare
- Advice and guidance (e.g. stay indoors, symptoms, preparing for evacuation)
- Reassurance (if necessary).

Initial communications templates will be available for the major identified risks in Suffolk, these will be issued as part of annex B in due course.

The public wants to know:

- Other practical implications such as the effect on traffic, power supplies, telephones, water supplies, etc
- A helpline number
- What is being done to resolve the situation?

The media will require:

- Well thought out and joined-up reporting arrangements between the emergency services, local authority and other organisations, capable of providing agreed information at speed
- An immediate telephone contact
- A media rendezvous point at the scene.

#### **4.4 Informing and advising the public (immediate and long-term post event)**

Providing relevant and timely information about the nature of the unfolding event:

- Immediate actions being taken by responders to minimize the risk to human or animal health and welfare, the environment or property
- Actions being taken by responders to assist the recovery phase
- Actions the public themselves can take to minimise the impact of the emergency

## **5 Effective communications**

Effective communications ensure the right information is provided at the right time in the most appropriate manner. The audiences listed below will not be homogenous. They will be a mosaic of diverse groups and what works for many may not work for all. For example loud hailer messages will not directly reach the hard of hearing, and so we would need to consider a different form of communication.

Effective communications are also consistent. Information provided indirectly through the media has a broad reach but it is counterproductive if messages conflict or issues are sidelined.

Emergency communications have three functions:

- Warning
- Informing
- Re-assuring

All communications should be worded so as not to alarm the public unduly.

## **6 Audience types**

Category 1 responders should plan to be able to meet the needs of many different audiences.

## **6.1 Casualties and other possible victims**

**Group A:** Survivors – those in the immediate vicinity and directly affected, possibly as casualties.

Initially survivors will get information from the immediate responses. They can also be a source of information for the media, through eye witness accounts etc.

**Group B:** Those close by who may need to take further action to avoid further harm.

All sections of the community should be considered when choosing communications channels. Local knowledge will be important.

## **6.2 Local people, friends and relatives**

**Group C:** Those in the area who may be disrupted by the consequences of the emergency and the clear up process.

The numbers of people are likely to be greatest here, and it may be that groups emerge who need targeted information.

**Group D:** Those who are not affected directly but know or are related to those who might be.

These people need two way communications to get specific information in the short term – i.e. they will want to ask questions about friends and relatives as well as being provided with information on the situation.

## **6.3 The wider audience**

**Group E:** Those who are not affected but are concerned, or alarmed about wider implications, or simply interested.

This group will get its information through the broadcast media and by visiting websites, and by word of mouth.

**Group F:** The news media

Plays an important role in getting information out to the public, but also have their own public interest agendas.

## 6.4 Vulnerable Groups

There may be some groups of people who will require emergency communications to be produced in a different way in order for communications to be effective.

For example, some communities in Suffolk do not have English as their first language. Therefore, in order to ensure that communications in an emergency are easily and quickly understood, we may need to produce information in different languages.

Currently, the most common community languages in Suffolk are: Arabic, Bengali, Chinese, Gujarati, Kurdish, Polish and Portuguese. Translations can be organised through Language Line (via CSD tel: 08456 066 067) and the Translation and Interpreting Service in Ipswich (tel: 01473 400082, email: [tipiscreorguk@btopenworld.com](mailto:tipiscreorguk@btopenworld.com)).

## 7 Communications channels

		Audience groups					
		A	B	C	D	E	F
<b>Direct communications</b>	<b>Indirect communications</b>						
Person to person		●	●				
Door to door/loud hailer			●				
SMS/Website			●	●	●		
	<ul style="list-style-type: none"> <li>▪ Media Liaison</li> <li>▪ Media briefings</li> <li>▪ Photo/Film opportunities</li> <li>▪ Interviews</li> </ul>						● ● ● ●
Broadcast media			●	●	●	●	●

Door to door leaflets, posters, notices				●			
Telephone call centre				●	●		
Visiting officers/community workers e.g. social care staff and benefits officers				●	●	●	
Well briefed staff					●	●	
	Voluntary sector			●	●	●	●
Public buildings				●	●	●	
Humanitarian Assistance Centre				●	●	●	
Family and Friends Reception Centre					●		
Survivor Reception Centre		●					
Rest centres		●	●				

## 8 General guidance for dealing with the emergency

- Establish which agency is leading external communications
- Issue information to the media as quickly as possible, as a way of informing the public. Holding statements and FAQs for specific incidents are given in Annex B.
- A Toolkit for dealing with the media during a crisis is given at Annex C.
- Try to establish how long the incident will continue and plan staff cover as appropriate. (Annex D is a copy of the Mutual Aid protocol between the Communicate Suffolk partners.)

## **9 Lead agency for communications**

### **9.1 Establishing the lead agency**

It is critical to establish which agency is leading communications in the event of an emergency or major incident. Annex B contains information on the Community Risk Register, identification of lead agencies and holding statements for specific incidents.

The officer in charge at an incident scene may either verbally or via news release the initial communications on the incident/emergency

The communications team of the lead agency will begin communication with stakeholders and the media as soon as is practicable. If it is unclear as to who is the lead agency then GOLD will decide on the lead agency and if the Media Coordination Centre should be activated.

The lead agency will take on the role of coordinating the media response and developing other communications on behalf of other organisations involved.

A Protocol and Check list for the lead agency is given at Annex E.

As the incident develops and eventually moves into the recovery phase, the lead agency will change and be passed on to another or other agencies.

Recovery from an emergency or incident is normally led by the relevant Local Authority.

### **9.2 Responsibilities of the lead agency**

The lead agency will:

- Confirm its lead role on warning and informing and media communications through GOLD
- Inform other key stakeholders (emergency services, county council, local authorities, GO East etc) of its lead role
- Establish key spokespeople from the lead organisation and/or others as appropriate
- Coordinate on-going activity and briefing, in liaison with GOLD - this will include:
  - Writing, approving and issuing media materials (statements, news releases etc, Taking responsibility for and managing (including keeping records of calls taken) telephone contact from journalists.

- In liaison with GOLD, establishing key spokespeople.
- Liaising with communications professionals who are dealing with media at SILVER and BRONZE.
- Organising and timetabling face-to-face media briefings and press conferences.
- Updating websites (eg onesuffolk).
- Setting up press conference venues etc.
- Disseminate high level briefs as appropriate to all partners.
- Monitor information being released by other agencies.
- Answer questions from other agencies.
- In liaison with GOLD, handing over lead agency responsibility as and when necessary.

## **10 Other roles and responsibilities**

It is important to establish roles and responsibilities quickly.

This should be the responsibility of the lead agency, in conjunction with the mutual aid co-ordinator (see mutual aid protocol at Annex D).

If there is more than one agency heavily involved in responding to the incident, a joint media cell will need to be set up. This group will act as a focal point for agreeing joint responses to the media on behalf of all agencies.

Once a media briefing centre has been established, communications professionals and volunteers will need to adopt roles to deliver the appropriate response to the media and service to the general public.

For job descriptions, see Annex G.

## **11 Media liaison facilities**

### **11.1 Establishing a Media Centre**

Following the initial stages of an incident or emergency, a media centre should be established.

The location of the centre will depend on the nature of the incident, and its location. It is the responsibility of the lead agency to establish the media centre.

There are various venues around the county where such a centre could be located; they will be close to the GOLD command (Strategic Co-ordination Centre (StratCC)) and initially staffed (until hand-over) by the lead agency.

The media centre should meet a number of simple criteria. It should:

- include a desk-based area working area where journalists can file copy;
- provide telephone and data-point ports/wireless network facilities;
- have whiteboards (or similar) where information and updates can be posted;
- be close to but not impinge on the work of GOLD;
- provide joint facilities for press officers and spokespeople;
- be adjacent to a hall or other room suitable for staging press conferences in;
- be close to other rooms which can be used to brief spokespeople before press conferences etc;
- provide a suitable backdrop for TV interviews and an area suitable for radio interviews both live and pre-recorded.

Both Police HQ at Martlesham and Suffolk County Council's Headquarters at Endeavour House can provide such facilities. Both venues have a radio studio with ISDN links and are accessible for TV satellite trucks.

## **11.2 The Strategic Co-ordination Centre (StratCC)**

The Strategic Co-ordination Centre (StratCC) is situated at Police Headquarters, Martlesham Heath. It provides purpose-built facilities from which to co-ordinate a multi-agency response to a major incident. Police staff will set up and run the StratCC in the event of a major incident being declared.

Agencies involved in the response to the major incident would send representatives to the StratCC. In the event of a major incident, a 'GOLD' command group would be set up, comprising Chief Executive/Officer representatives from each agency involved.

The StratCC is divided into three main rooms: StratCC Room 1 is used by the police; StratCC Room 2 is used by all other agencies and StratCC Room 3 is used for GOLD Command strategic meetings.

Facilities within the StratCC include toilets, a kitchen and showers.

If the StratCC is activated, a reception will be set up where identification of agency representatives attending will be checked before permission is given to enter the building.

Staff from agencies who are helping with media liaison should also report to this reception facility where they will have their identity checked, be signed in and directed to the joint press office.

## **11.3 Media liaison facilities – Police Headquarters**

Media liaison accommodation is situated in the main block at Police Headquarters, a short walk from the StratCC building.

### *Media Briefing Centre*

This facility is set aside for the media to work in and contains facilities for press conferences, desks, chairs and telephones.

The room set aside for the media room at Suffolk Police Headquarters is the Assembly Hall.

### *Media Coordination Centre*

This is an allocated room in the main block at Police Headquarters. This is staffed by multi-agency press officers.

The room contains phones, a fax, flipcharts and other useful equipment to enable press officers to take calls, plan press releases and press conferences, and respond to communications needs of GOLD Command and individual agencies.

The media cell has the ability to allow press officers to connect to a special wireless network, with their own wireless enabled laptops.

#### **11.4 Alternative locations for media liaison facilities**

##### **11.4.1 Ipswich**

Suffolk County Council's Endeavour House Headquarters, in Russell Road, Ipswich, can also host a multi-agency response to a major incident. The County Emergency Centre would be set up on the ground floor of Endeavour House. Media liaison facilities can be established on the same floor if required.

##### **11.4.2 Mildenhall**

Council Chamber, Forest Heath District Council Offices, College Heath Road, Mildenhall, Suffolk IP28 7EY. Tel: 01638 719000

##### **11.4.3 Needham Market/Stowmarket**

Amenity Block, Mid Suffolk District Council Offices, 131 High Street, Needham Market, IP6 8DL. Tel: 01449 720711  
Mid Suffolk Leisure Centre, Gainsborough Road, Stowmarket IP14 1LH. Tel: 01449 674980

##### **11.4.4 Bury St Edmunds/Haverhill**

West Suffolk House, Western Way, Bury St Edmunds, IP33 1YS. Tel: 01284 763233  
Haverhill offices, Lower Downs Slade, Haverhill, CB9 9EE. Tel: 01440 702271

##### **11.4.5 Lowestoft**

Waveney District Council Offices, High Street, Lowestoft, Suffolk NR32 1HS. Tel: 01502 562111  
Waveney Sports and Leisure Centre, Water Lane, Lowestoft, Suffolk. Tel: 01502 569116  
The Marina Theatre, The Marina, Lowestoft, Suffolk NR32 1HH. Tel: 01502 533200

Media facilities may also be required at other locations.

#### **11.5 Media at the scene - initial stages of the incident/emergency**

The media will arrive at the scene of any major incident or emergency - assuming there is a scene - shortly after the emergency services and other agencies. Cordons around the incident will normally be established by the police and/or fire and rescue service.

A media liaison point will need to be set up close enough to the incident for the media to film the scene and interview with it as a backdrop but far enough away from the scene for the emergency services and other agencies to work unhindered.

The lead agency will need to assess the situation on a regular basis to see if a media liaison officer should be present at SILVER or BRONZE. This may involve activating the mutual aid protocol (see Annex D)

### **11.6 SILVER/BRONZE - Relationship with the Media Coordination Centre at GOLD**

The lead agency in the Media Coordination Centre will have the responsibility for issuing news releases and retaining overall control of communication and messages to media audiences and the general public.

Messages and media briefings at SILVER or BRONZE should relate only to the immediate operational work of the emergency services.

Communications professionals at SILVER/BRONZE should be liaising constantly with colleagues in the Media Coordination Centre to ensure consistent lines are given to the media and ensure confusing or contradictory information is not issued or articulated.

Media briefings at SILVER/BRONZE should be based on information issued by or cleared with the Media Coordination Centre.

### **11.7 Joint media handling between agencies**

Joint working facilities for communications professionals and spokespeople are essential within the Media Coordination centre.

This will enable communications professionals from different agencies to liaise with one another, agree messages/lines to take, brief spokespeople and communicate effectively with GOLD on strategic approaches.

## **12 Media handling – best practice checklist**

Wherever the incident occurs:

- Organise media facilities – rendezvous points and vantage points
- Consider setting up an accreditation system – press cards – to ensure that only genuine journalists are given access
- Ask the media to nominate pools to cover restricted facilities

Hold regular media briefings, the first as quickly as possible after the start of the incident.

Put up spokespeople, who are as senior as possible, clearly identified as such and who have been trained. Spokespeople should be identified at an early stage, and properly briefed before any press conference to enable lines to take to be agreed and to decide how and who will deal with the questions.

Compile a list of third parties – health, science experts – who can be deployed to give expert advice to the public and the media.

Establish a dialogue with the media, not only to discover their needs and requests, but also to provide the means for dealing with problems and the dissemination of public information. That will require a focus: first the rendezvous point mentioned above and then some form of Media Briefing Centre.

The media briefing centre needs to be:

- Easily accessible
- Capable of holding a large number of journalists and their vehicles equipped with IT – notably ISDN/ telephone lines/ wireless network
- Staffed as long as possible, probably 24/7

(See media liaison facilities for more information)

Establish a flow of credible information that is timely and consistent.

Key messages must be signed off by GOLD. The Media Coordination Centre will liaise with journalists and organisations on GOLD's behalf, and may suggest what these messages are.

Media statements must be logged in Media Coordination Centre. If individual organisations are issuing statements on their area of expertise, they must ensure that GOLD is aware of this, and a copy must be provided to the Media Coordination Centre straight away once it is issued.

All media enquiries and outcomes must be logged in the Media Coordination Centre on the forms at Annex I.

The Media Coordination Centre should log and record all information which is released, and ensure that all those providing information (such as HQ press officers) are kept up to date. All news releases and supporting material should be posted on the web site to which inquirers can be referred.

Ensure that the media check their facts with official sources.

Agree both a communication and media strategy with clear objectives and review progress regularly.

Establish a collection plan for interesting, non controversial information and good news stories which can fill in the gaps between the releases of hard information about the event. Stories of individual endeavour, swift thinking, initiative and hardship or selflessness will always be available, and will play a valuable role in managing the focus of the media on official sources and on facts.

Remember – never leave vacuums – they will be filled with speculation and material that could be harmful.

Deal with poor media behaviour swiftly and directly, not only with the journalist concerned, but also with the most senior editorial executive who can be contacted. This should be carried out by the lead agency.

Arrangements for VIP visits should be considered at an early stage, so that the inevitable disruption is kept to a minimum, and the benefits are maximised. VIP briefing must aim to ensure that the VIP has plenty of information from which to brief the media and others on the efforts and needs of all involved.

The Media Coordination Centre must consider briefing needs for others as well as the media, to ensure we follow “warning and informing protocols” e.g. staff briefings, councillor briefings, direct communications with the public.

The question of casualties is very sensitive, especially bearing in mind the speed of the media in responding to incidents and the fact that in the very early stages relatives are unlikely to be aware. The police will make it a priority to release accurate information regarding casualty numbers, but no statements will be made about casualties, numbers of dead or their identities without reference to the overall Incident Commander.

## **13 Working with other agencies**

Effective liaison with other agencies during a major incident is critical to a well-managed response to media interest.

Generic contact details for all key partner agencies can be found in the SRF Alerting Directory available on the SRF extranet site or via the Suffolk Joint Emergency Planning Unit.

Checklists for Category 1 Responder Communications officers are given in Annex J.

### **13.1 The NHS**

If there are casualties, the NHS will be involved with the East of England Ambulance Service NHS Trust and NHS Trusts.

For incidents involving public health, the key agencies will be the Health Protection Agency, Strategic Health Authority and Primary Care Trusts.

### **13.2 Government Communications Support - Central Office for Information (COI)**

COI works for government departments out of 12 regional offices. It can provide press officer support for public sector organisations facing a major civil incident or emergency.

Assistance can range from helping staff a press centre to acting as liaison officers with lead Whitehall departments and handling VIP visits.

In the event of a major disaster or incident, COI assistance is offered free of charge for the first 24 hours. Thereafter, COIs continued attendance would be at the discretion of the lead department which would be expected to pay for the services provided.

COI has set up a 24-hour contact service for emergencies on 020 8938 3560. This is a 24-hour telephone answering service which contacts the regional COI office once you have provided details including name, contact number, organisation, nature of emergency and location.

Callers need to make it clear that their message is for the nearest COI office. For Suffolk, this office is based at Cambridge and covers all of East Anglia (Bedfordshire, Cambridgeshire, Essex, Hertfordshire, Norfolk and Suffolk).

COI has also been involved in setting up and providing support for a Regional Media Emergency Forum (RMEF) in each English region.

RMEFs were initiated in May 2003 and bring together media, government and emergency planners to deliver the best public information and news service in an emergency.

COI  
Eastbrook  
Shaftesbury Road  
Cambridge  
CB2 2DF

### **VIP visits**

VIP visits are likely to be handled by GO East in liaison with the lead agency.

The media centre is likely to need to provide full briefing and assist with identifying venues and other key elements of the visit.

### **13.3 Other key agencies**

The Environment Agency, the armed forces including the USAF, and Magnox (Sizewell A), British Energy part of the EDF group (Sizewell B), transport companies and central government departments (e.g. DEFRA, CLG) are all potentially key partner agencies.

### **13.4 The voluntary and community sector**

The role of the voluntary and community sectors cannot be underestimated. Groups such as the WRVS, churches, community groups and the voluntary sector have a major role to play in the immediate aftermath of a major incident (e.g. evacuation) and in the recovery stages.

### **13.5 Suffolk Businesses**

Liaising with key Suffolk businesses can help to communicate with a wider audience in emergency situations – using their internal communications methods to reach staff, who are Suffolk residents. This may be particularly important in the recovery stage of an emergency, when we would need to communicate a variety of recovery messages. Some businesses are members of Communicate Suffolk; others may be communicated with through Business Link, which has a representative on the Communicate Suffolk group.



## Command structure during an emergency



### **GOLD (Strategic)**

This is a strategic decision making forum made up of senior representatives of all the organisations involved.

It is made up of people who may not be the highest in their relative organisation, but can make decisions without referring up.

As an incident progresses GOLD may move between organisations. It is usually the lead communications officer of the lead agency that sits at GOLD.

### **SILVER (Tactical)**

Usually based near the scene, these are senior representatives of all the organisations involved, who will meet regularly at SILVER control to make tactical decisions.

### **BRONZE (Operational)**

These are the hands-on people based at various locations, usually around the scene and other sites (for example. mortuary, reception centre, roadblocks).

They take decisions under the direction of SILVER.

The BRONZE communications lead is usually a communications officer within the lead organisation, supported by other staff as necessary.

Staff at each level must share information to ensure that decisions are made with all the relevant facts to hand.

**Community Risk Register, identification of lead agencies, holding statements and FAQs for specific incidents.**

Under the CCA (2004) the Suffolk Resilience Forum has to assess the risks in its areas and publish its findings. The assigned risk rating dictates what actions by the multi-agency partnership.

Where a multi-agency plan exists, a media holding statement and further information to support the incident will be drafted as part of that plan. This will provide help for the incident officer or first press officer at the scene, to be able to quickly start communicating effectively.

Incidents can happen at any time although for some, such as tidal flooding, there may be a significant lead time before the event. These are called ‘rising tide’ incidents as opposed to ‘immediate’ incidents such as an explosion. The communications response for both of these incidents will be slightly different.

The Community Risk Register will be developed to show the lead agency, where this is easily defined, alongside the lead government agency. This will enable easy identification of lead communications people in an emergency situation.

The Community Risk Register for Suffolk is available on the Suffolk Resilience website – [www.suffolkresilience.com](http://www.suffolkresilience.com)

The Risk ratings are defined below for reference.

Risk Rating	Definition
Very High Risk	Primary risks requiring immediate attention due to potential consequences. Risk reduction or mitigation strategies should be developed. Hazard specific multi-agency contingency plans required, exercise and training for hazards in place. Risk monitored regularly.
High Risk	Sufficiently serious to warrant appropriate consideration after Very High Risks. Consider developing risk reduction or mitigation strategies. Generic multi-agency contingency plans required, exercise and

	training for hazards in place. Risk monitored regularly.
Medium Risk	Less significant but may cause upset or inconvenience in the short term. Consider being managed under generic emergency planning arrangements. Risk monitored
Low Risk	Managed using normal or generic emergency planning arrangements. Minimal monitoring and control unless risk assessment changes to move to a higher rating.

Lead agency work still to be completed.

**MEDIA HOLDING STATEMENT FOR AN INCIDENT AT SIZEWELL NUCLEAR POWER STATION**

At xxxAM/PM today, an incident occurred at Sizewell (insert which station) Power Station in Suffolk.

Emergency services are currently at the scene, assessing the situation with staff from the station.

More information will be issued promptly to the public by the authorities, once this assessment is completed.

Residents are advised to tune into local radio, television or monitor local news websites for further information in relation to this incident.

ENDS

## **BASIC Q&AS FOR A NUCLEAR EMERGENCY (SUPPLIED BY HPA)**

### **Q How can I reduce my health risk from radiation after a serious nuclear incident?**

**A** Go in, stay in, tune in. In other words go indoors, close the windows and doors and shut down ventilation devices, and put out or dampen down fires. Listen to your local radio or TV which may broadcast more specific instructions. Do not leave the area unless advised to do so and take potassium iodate tablets if told to do so by the emergency services. Do not try to telephone the emergency services unless it is absolutely necessary.

### **Q More detail please. How can I reduce my exposure?**

**A** The three basic ways to reduce your exposure are by using the following:

**TIME:** Decrease the amount of time you spend near the source of radiation.

**DISTANCE:** Increase your distance from a radiation source.

**SHIELDING:** Increase the shielding between you and the radiation source. Shielding is anything that creates a barrier between people and the radiation source. The amount of material to provide effective shielding depends on the type of radiation and can range from ordinary clothing to several feet of concrete. The best advice is to stay inside a building with closed doors and windows, turn off heating and ventilation systems.

### **Q I was outside when the accident occurred. How can I decontaminate myself and my family?**

**A** If you have been out of doors during a radiation release or otherwise contaminated, you can reduce possible radiation dose by decontamination involving simply removing clothes, showering, taking care not to get washings into eyes or mouth and getting dressed in clean clothes. Contaminated clothes should be put in two sealed plastic bags and stored out of the way until it is decided if monitoring of these items is needed.

### **Q I am feeling unwell and think it is radiation sickness. What can I do?**

**A** It is very unlikely that a radiation accident will lead to public doses that are large enough to produce acute effects (radiation sickness and radiation burns). The initial symptoms of high doses of radiation resemble those of 'flu and gastro-enteritis. People who may have been exposed to radiation who develop these symptoms should seek help.

### **Q What do Potassium Iodate/stable iodine/ PITs tablets do?**

**A** Radioactive iodine can be released into the environment from accidents involving nuclear reactors. Potassium iodate (stable iodine) contains a salt of iodine that can protect against thyroid cancer due to radiation exposure. Stable iodine fills the thyroid gland with the stable iodine and

prevents absorption of radioactive iodine by the thyroid gland from. A single adult dose contains sufficient iodine to block the absorption of radioactive iodine for several days.

**Q Where can I get iodine tablets?**

**A** In the event of a leak of radiation PITs tablets will be delivered by the emergency services on a door-to-door basis to all homes in the affected area. The tablets and a set of instructions will be given to all those people who might be affected in the event of an accident. Even if you are told to take them you should remain indoors.

**Q When should I take the iodine tablets?**

**A** The tablets are most effective if taken before exposure to radioactive iodine but they are also very effective if taken a number of hours after a one-off exposure. The tablets will be given out as soon as possible after an accident occurs and/or a release is expected.

**Q My children are at school. Will they be protected?**

**A** As part of the local emergency plan, schools in the area have already got bulk supplies of potassium iodate tablets. If there was a release of radioactivity during the school day, teachers would be given permission to give the tablets to the children.

**Q Can I give an iodine tablet to a very young infant?**

**A** Instruction for taking the tablets are included with the tablet packs. Babies and small children who are unable to swallow tablets should have their dose crushed up in a teaspoon of jam or yoghurt, or have the tablet dissolved in a small quantity of milk formula or juice.

**MEDIA HOLDING STATEMENT FOR AN INCIDENT AT A COMAH SITE**

At xxxAM/PM today, an incident occurred at (insert name of COMAH site).

Emergency services are currently at the scene, assessing the situation with staff from the station.

More information will be issued promptly to the public by the authorities, once this assessment is completed.

Residents are advised to tune into local radio, television or monitor local news websites for further information in relation to this incident.

ENDS

**MEDIA HOLDING STATION FOR AN INCIDENT INVOLVING A MAJOR PIPELINE.**

At .....am / pm an emergency occurred on a major natural gas pipeline  
situated at.....  
.....

Include exact location, local information, landmarks

This incident resulted in (*delete as appropriate*)

A large release of natural gas / an explosion of natural gas / a fire involving natural gas.

The emergency services and pipeline operators are responding to the emergency.

Natural gas is flammable, lighter than air and will normally disperse safely into the atmosphere. If ignited natural gas could cause an explosion.

In the interest of safety the emergency services are requesting everyone in the area to comply with the following instructions;

**Go in** – go indoors and stay indoors.

**Stay in** - Stay away from windows. Switch off any ventilation and heating appliances. Extinguish all flames, do not smoke. If you are in a vehicle, do not use the roads around the scene. Closures will be put in as soon as possible. Follow the instructions of the emergency services. Please do not use the telephone, keep lines free for emergency use only.

**Tune in** - Please stay tuned to local radio for further instructions.

## **ADVICE FOR PUBLICATION IN A HEAT WAVE**

### **How to stay cool and safe in the predicted hot weather**

With a weekend of predicted very hot weather, it is important not to underestimate the effect of heat and the strength of the sun, so NHS Suffolk is encouraging people to stay cool and safe by following some simple advice.

The heat can affect anyone, but some people run a greater risk of serious harm. These include older people, babies and young children, and people with a serious chronic condition, particularly breathing or heart problems – so looking out for other people is important at this time.

Dr Brian Keeble, NHS Suffolk Consultant in Public Health said: “In terms of advice to stay cool as the high temperatures hit the county, it’s a matter of common sense. Listen to your local weather forecast, and plan ahead to reduce the risk of ill health from the heat. Also, keep out of the heat – avoid going out in the hottest part of the day (11am – 3pm) and if you must go out, stay in the shade.

“Wear a hat and light, loose fitting clothes, preferably cotton. And if you’ll be outside for some time – think ahead – and take plenty of water with you.”

### **Tips for staying cool and safe:**

A loose, cotton, damp cloth or scarf on the back of the neck, or spraying or splashing your face and the back of your neck with cold water several times a day can help keep you cool.

If you do go out remember to apply sufficient sunscreen – regularly - preferably with a minimum SPF of 15. Do not be tempted to use out of date sunscreen as it loses its protective properties. Wear good quality sunglasses.

Try to stay inside, in the coolest rooms in your home, as much as possible.

Reduce heat from sunlight coming through the windows. External shading, e.g. shutters, is best. Metal blinds and dark curtains may absorb heat and make the room warmer – it is best to use pale curtains or reflective material.

Keep windows closed while the room is cooler than it is outside. Open them when the temperature inside rises, and at night for ventilation.

If you are worried about security, at least open windows on the first floor and above.

Indoor and outdoor plants will help keep your home cool due to evaporation and the shading from trees and bushes.

Take cool showers or baths.

Drink regularly even if you do not feel thirsty – water or fruit juice are best.

Try to avoid alcohol, tea and coffee. They make dehydration worse.

Try to eat more cold food, particularly salads and fruit, which contain water.

Seek advice if you have any concerns:

Contact your doctor, a pharmacist or NHS Direct on 0845 46 47 if you are worried about your health during hot weather, especially if you are taking medication, if you feel unwell or have any unusual symptoms.

Watch for cramp in your arms, legs or stomach, feelings of mild confusion, weakness or problems sleeping.

If you have these symptoms, rest for several hours, keep cool and drink water or fruit juice. Seek medical advice if they get worse or don't go away.

### **Websites**

The Met Office <http://www.metoffice.gov.uk>

## **ADVICE FOR PUBLICATION IN SEVERE WINTER CONDITIONS**

### **Helping Suffolk stay safe in bad weather**

Members of the Suffolk Resilience Forum, including Suffolk County Council, Suffolk Constabulary, NHS Suffolk, and district and borough councils, are working together once again to ensure the county's residents stay safe during the current adverse weather conditions.

The Forum is issuing a series of key messages and top tips to let people in the county know what's being done to deal with the bad weather and how they can keep safe in the snow and ice.

### **Suffolk Police's top tips for winter driving include:**

During wintry weather conditions:

Ask yourself – is your journey essential?

Check the local and national weather forecasts.

Listen to local and national radio for travel information.

Tell someone at your destination what time you expect to arrive.

Adjust your driving to the conditions, as hail, heavy snow and rain reduce visibility.

Use dipped headlights and reduce your speed.

Dazzle from winter sun can be dangerous. Keep a pair of sunglasses handy and slow down.

Make sure you are equipped with warm clothes, food, boots and a torch. In snowy conditions, take a spade.

Clear your windows and mirrors before you set out and carry a screen scraper and de-icer.

## **Vehicle condition**

In winter it is even more important to check your vehicle is well maintained and serviced.

Keep the lights, windows and mirrors clean and free from ice and snow.

Keep your battery fully charged.

Add anti-freeze to the radiator and winter additive to the windscreen washer bottles.

Make sure wipers and lights are in good working order.

Check that tyres have plenty of tread depth and are maintained at the correct pressure.

## **Gritting information from Suffolk County Council**

Nearly three weeks of sub zero temperatures in Suffolk has put unprecedented pressure on the winter maintenance team at Suffolk County Council.

From (insert date) Suffolk County Council will salt its priority 1 routes, which includes A and B roads in the county and routes to main hospitals and fire stations and routes with more than 4,000 movements a day, but will not salt other roads.

The priority 1 routes cover almost a third of the county's roads (1232 miles out of 4272 miles of road in the county)

We will continue to fill grit bins in the county on request from parish councils so local people can treat local trouble spots on minor roads, which otherwise would not be treated.

Supplies of salt are now being diverted to local authorities in the north whose stocks are completely exhausted. With this in mind we need to make sure we use the salt we have in the most effective and efficient way. We have stocks of salt at present, but we need to be prudent to ensure that we are able to continue to grit the priority routes.

People need to take care on roads, pavements and in parks – even if places have been gritted, or appear clear of snow, there may still be icy patches.

### **NHS Suffolk advice for keeping healthy, particularly for older people**

Dress warmly with several light layers of clothing and thermal underwear.

Wear a hat, as a large percentage of the body's heat is lost through the head.

Wear warm, dry, flat, non-slip shoes or boots, especially in icy conditions.

In bed use several light layers.

Move your bed or chairs away from cold exterior walls.

It is a good idea wear bed socks, a night cap, thermal underwear and pyjamas in bed.

Eat at least one hot meal a day and have regular warm drinks and soup.

Stock up on essential foods in case of an emergency.

Stay as active as you can.

For round the clock healthcare enquiries your first contact should be NHS Direct on 0845 46 47.

Look out for vulnerable people.

If you have any concerns at all about an elderly or vulnerable person living nearby, please knock on the door and check they are OK.

Please check to see if older people can get to the shops and have what they need in the house.

Encourage people to use their heating, drop in some essential supplies or extra blankets if you can, and make sure that driveways and steps are ice free.

If you have serious concerns, contact the emergency services.

### **East of England Ambulance Service urges public to use 999 wisely.**

Operational bosses at the East of England Ambulance Service are calling on the public to use common sense and only call 999 for a true emergency need.

Please use the most appropriate service for your needs. If you have any doubt about whether you need a 999 response please call NHS Direct on 0845 4647 and seek advice. Advice is also available from pharmacies and you can see a doctor without an appointment at the GP led health centres across the region and minor injury units.

You should call 999 for an ambulance when it is obvious that you or another person is seriously ill and in need of immediate emergency care. Here are some examples of situations when you should call 999:

- Someone is unconscious.
- Someone is suffering stroke symptoms.
- Someone is bleeding heavily.
- Someone may have broken bones.
- Someone has a deep laceration.
- Someone has chest pain.
- Someone is having difficulty breathing.

### **Take fire safety precautions – advice from Suffolk Fire and Rescue Service**

Portable heaters, open fires and candles can be dangerous, so please take care when using them.

Keep space heaters and candles away from curtains and other material that could catch light easily, and never leave them unattended.

Keep lighters and matches away from children. Store these securely when not in use.

If you have an open fire, protect your home from sparks by using a fire screen.

Burn only seasoned wood, and don't burn rubbish. Add wood carefully; sparks can escape into the room while the screen is open.

### **School closures – information from Suffolk County Council**

When bad weather or other emergencies force schools to close, headteachers are encouraged to make an early decision, and inform Suffolk County Council. This means that websites and the media can be updated as quickly as possible so that parents and carers know what's happening.

School closures on the Suffolk County Council website: <http://www.suffolk.gov.uk/EducationAndLearning/Schools/SchoolClosures>

Radio station frequencies:

Local radio stations will also broadcast school closure messages. For details of all Suffolk schools:

- BBC Radio Suffolk - 95.5 / 95.9 / 103.9 / 104.6 FM
- Gold - 1170 / 1251 AM
- Heart Ipswich - (formerly SGR FM) 97.1 / 96.4 FM

For details of schools in specific areas in Suffolk:

- Heart (north Suffolk and Norfolk) - 102.4 FM
- The Beach (Waveney area) - 103.4 / 97.4 FM
- Dream 100 (north Essex and south Suffolk) - 100.2 FM
- Kiss 105-108 (central Suffolk) - 106.4 FM
- Heart Cambridge (Newmarket, Haverhill and Mildenhall) - 103 / 97.4 FM
- Town 102 (Ipswich) - 102 FM

It is the responsibility of the Headteacher to decide if their school should close. Pupil and staff safety is a key factor in making the decision.

As well as identifying if conditions to get to school are safe the headteacher also considers the weather conditions for the rest of the day to ensure journeys home can be completed safely and in a reasonable timescale. This also includes checking to make sure the necessary transport arrangements can be fulfilled.

School specific factors such as heating and power also form an important part of the schools decision making process.

### **Refuse collections – advice from borough and district councils**

During the bad weather, bin collections may be disrupted, as vehicles are not able to get round.

For advice on what to do in your area, look at your local borough or district council website:

[www.babergh.gov.uk](http://www.babergh.gov.uk)

[www.forest-heath.gov.uk](http://www.forest-heath.gov.uk)

[www.ipswich.gov.uk](http://www.ipswich.gov.uk) [www.midsuffolk.gov.uk](http://www.midsuffolk.gov.uk)

[www.stedmundsbury.gov.uk](http://www.stedmundsbury.gov.uk)

[www.suffolkcoastal.gov.uk](http://www.suffolkcoastal.gov.uk)

[www.waveney.gov.uk](http://www.waveney.gov.uk)

ENDS

## **ADVICE FOR BEFORE AND DURING A FLOODING INCIDENT.**

### **Simple Ways To Protect Your Home From Flooding**

Flooding happens quickly and often when you least expect it. Preparing an Emergency Flood Plan will help you through a serious situation. Creating the plan with your children, explaining what to do, and even practising the plan will prepare you all for the time when you may need it.

Follow the checklists below to ensure you have taken the most basic steps in protecting your home from flooding.

#### **What To Do Before A Flood:**

The person who can do the most is you. In a flood, you may find you're without lighting, heating or a telephone line so the better prepared you are, the better you'll cope if it happens to you and your family.

Be Aware, Be Prepared - The time to think about it is now – don't wait until it happens.

Make sure you have adequate insurance. Flood damage is included in most building's insurance policies but, check your home and contents are covered.

Make up a flood kit – including key personal documents, torch, battery or wind-up radio, rubber gloves, wellingtons, waterproof clothing, first aid kit and blankets.

Keep details of your insurance policy and the emergency contact numbers for your local council, emergency services and Floodline quick dial number somewhere safe – preferably as part of your emergency flood kit.

Get into the habit of storing valuable or sentimental items upstairs or in a high place.

Buy some sandbags or flood boards to block doorways, air vents and airbricks.

Make sure you know where to turn off your gas and electricity at the mains. Find out where these are well in advance of any flood.

### **Making An Emergency Flood Plan**

You should consider what actions you may need to take in a serious flood, what items you would need if you lost electricity, gas, and water supplies to your property, and who you would need to contact in such an emergency in order to create your own Emergency Flood Plan.

Consider the following:

List of useful numbers: Local council, emergency services, insurance company, Floodline 0845 988 1188, family and/friends or neighbours.

Flood Kit: Key personal documents like insurance details, torch and spare batteries, wind up or battery radio, mobile phone, first aid kit, blankets, rubber gloves, warm clothing, wellington boots, dustbin liners, food and drink, toilet paper etc.

Childrens' Essentials: For example, baby food or milk, sterilised bottles, nappies and wipes, spare clothing, favourite toy as a comforter

Medication: Do you or your family need to take any medication?

Valuable and Sentimental Items: Get into the habit of storing them upstairs or in a high place downstairs.

Have flood boards prepared to block doorways, air vents and air bricks if you live in a flooding area.

Gas and Electricity: Do you know where to turn them off at the mains supply? Even in the dark?

Car: Are you able to move your car to higher ground?

Evacuation: If the flooding is severe, you may be evacuated. What would you need to take with you and what provision can you make for family pets? If you choose to leave the house do you know where you would go and how would you get there? If you decide to stay in the upstairs of your house, make a list of all the things you will need.

Don't wait for a flood to happen.....think about it, and make your plan now!

### **What to Do During A Flood, Or When You Hear A Warning:**

Act Now! - Do as much as you can in daylight, it will be much harder in the dark especially if the electricity fails.

Call Floodline on 0845 988 11 88 any time – night or day – for real-time flood warnings and advice.

Listen out for warnings on radio and TV, continue to watch water levels.

Alert your neighbours, particularly the elderly, and move pets and valuables to a safe place.

Try and keep warm and dry. Take some warm clothes and blankets, hot drinks, food, medication, a torch and battery radio upstairs or to a safe place.

Co-operate with emergency services and local authorities – you may be evacuated to a rest centre.

### **Gas, electricity and water:**

- Fill bottles, or flasks with a supply of fresh drinking water.
- Make sure radio, and phone batteries are fully charged.
- Be ready to turn off gas and electricity (get help if needed).
- Put plugs into sinks and baths and weigh them down with something heavy, and put a sandbag in the toilet bowl to prevent back flow.

### **Furniture and appliances:**

- Move as much furniture and electrical items as you can upstairs. Alternatively raise them up on bricks or blocks - this may be very helpful for large appliances such as fridge/freezers.
- Move furniture away from walls, as this helps when drying your property later.
- If you can, roll up carpets and rugs and put them upstairs.
- Tie curtains up, or hang them up over the rail so they are kept above flood water.
- Leave internal doors open, or ideally, remove them and store them upstairs.

### **Reduce flood water getting into your home:**

- Silicone sealant - open doors and windows, smear a layer of this around the frame, then shut and lock the door/window.
- Ideally, cover doors, windows and airbricks with plywood or metal sheeting.
- Put flood boards in place – but make sure your property is ventilated.

### **Protect Personal Items:**

- You cannot replace sentimental items. Think about permanently moving these upstairs, so you do not forget to move them in the case of a flood.
- Keep important personal documents in a sealed bag and in a location safe from floodwater.

### **Outside the house:**

- Move anything not fixed down into a safer location, e.g. dustbins, garden chemicals car oil and similar.
- Move your car to higher ground to avoid damage.
- Weigh down manhole covers outside the house to prevent them floating away and leaving a hazardous hole.

### **How To Stay Safe In A Flood**

Floods can kill. Don't try to walk or drive through floodwater – six inches of fast flowing water can knock you over and two feet of water will float your car. Manhole covers may have come off and there may be other hazards you can't see.

Never try to swim through fast flowing water – you may get swept away or be struck by an object in the water.

Don't walk on sea defences, riverbanks or cross river bridges – they may collapse in extreme situations or you may be swept off by large waves. Beware of stones and pebbles being thrown up by waves.

Floodwater contains sewage and other contaminants. Do not eat food that has come into contact with the water. Wash your hands with disinfectant if you come into contact with the water directly. "Ready-to -eat" foods which have or may be contaminated with flood water should be discarded. Sealed tinned foods are likely to be safe to eat if washed down thoroughly with detergent and clean water before opening.

Move your family and pets upstairs or to higher ground. If the flooding is severe the authorities may move you to temporary accommodation.

Switch off water, gas and electricity supplies at the first sign of flooding to your property.

Gas pockets, oil and contaminants can build up in and around floodwater. Turn off the gas supply at the mains and do not attempt to operate any gas appliances until a certified gas engineer has checked them. Be careful with naked flames.

Floodwater conducts electricity. Turn off the electricity at the mains with a wooden stick, do not attempt to operate any damaged electrical goods until they have been checked by a certified electrical engineer.

Do not drink, clean your teeth or cook with your water supply until the environmental health officer has pronounced it fit for human consumption again. Your full system needs to be flushed through to remove any possible contamination.

Septic Tanks will need to be emptied when the water level has dropped enough to allow the normal drainage system to function. Paying to empty the septic tank too soon will only mean it acts as a sump for the local area.

Floodwater can be fast moving. If water is still around your home do not walk through fast flowing water in the home or outside – 6 inches of water can knock you off your feet. Be careful of holes and dips when moving around. Use a stick to gauge depth.

Phone your insurance company's 24 hour Emergency Helpline as soon as possible. They will be able to provide information on dealing with your claim, and assistance in getting things back to normal.

### **What to Do After A Flood – Cleaning Up:**

Call your insurance company's (24 hour) Emergency Helpline as soon as possible. They will be able to provide information on dealing with your claim, and assistance in getting things back to normal.

Take photos of any flood damage to your property in order to assist with your insurance claim.

Find out where you can get help to clear up. Check with your Local Authority or Health Authority first or look under 'Flood Damage' in Yellow Pages for suppliers of cleaning materials or equipment to dry out your property.

The Citizen's Advice Bureaux may also be able to offer advice on how to obtain money in an emergency and deal with insurance queries.

Open doors and windows to ventilate the house, but take care to ensure your house and valuables are secure. It takes a house brick about a month per inch to dry out.

Contact you gas, electricity and water company. Have your power supplies checked before you turn them back on. Wash taps and run them for a few minutes before use.

Throw away food which may have been in contact with flood water – it could be contaminated. Contact you Local Authority Environmental Health department for advice.

Beware of bogus traders. Always check references and if possible get recommendations. Contact Local Authority Trading Standards department for advice.

Further information can be found on the Environment Agency website at:

<http://www.environment-agency.gov.uk/homeandleisure/floods/default.aspx>

## Annex C

### Toolkit - Quick reference guide

This checklist is designed to be a quick-reference guide to the basic points that will need to be covered in dealing with the media during a crisis.

In the event of a crisis or major incident:

Initially:

- Decide first and foremost which organisation is leading. This is critical if communications are to be effective and strategically led.
- Establish where the crisis will be handled from, and where the GOLD (Strategic) SILVER (Tactical) and BRONZE(Operational) command points are.
- In light of where GOLD is based, decide where your media centre will be. Within Suffolk, Police HQ in Martlesham, and Endeavour House can serve as media centres. Other centres around the county are identified elsewhere in the plan.
- Establish how many media professionals you have available and how many you will need to deal with the incident.
- Estimate duration of the incident and rota staff, ask for mutual aid if necessary.

Then:

- If more than one agency is involved in coordinating the response to incident, establish a Media Coordination Centre. While agencies may have different roles, it is critical to speak with one voice.
- Establish key spokespeople from the agencies involved.
- Establish when and where media briefings/press conferences will take place. If possible establish time slots (eg every half and hour) when media can be updated.
- If the centre of media attention/activity is SILVER or BRONZE, ensure communications staff are there to deal directly with media.
- GOLD command should always lead on the dissemination of messages to media.
- GOLD should issue news releases and updates. If the majority of journalists are at SILVER or BRONZE, then messages should be relayed from the strategic command to the operational command before being given to the media to ensure consistency.
- If a helpline has been set up, make sure that number is disseminated to the media as soon as the service is operational. Remember to check it first – you don't want to be giving out the wrong telephone number
- If appropriate, set up an information board at the Media Coordination Centre where situation reports and updates can be posted as and when.
- Establish mechanisms for briefing key staff on how the media are receiving information, what coverage is saying, and what key messages are being picked up/ignored.

- Post information on appropriate websites)

Finally:

- Make sure that media enquiries are logged and recorded.
- Post information on appropriate websites.
- Establish a 'fact-file' of useful information. This will help to plug gaps in the newsflow at all stages of the incident.

## **Mutual Aid Protocol**

The definition of a Major Incident is any emergency that requires implementation of special arrangements by one or all of the emergency services, the NHS or the local authority for:

- the rescue, treatment and transportation of a large number of casualties;
- the involvement either directly or indirectly of large numbers of people;
- the handling of a large number of enquires likely to be generated both from the public and the news media, usually addressed to the police;
- the need for the large scale combined resources of two or more of the emergency services; and
- the mobilisation and organisation of the emergency services and supporting services, e.g. local authority, to cater for the threat of death, serious injury or homelessness to a large number of people.

In the event of a major incident that challenges a partner authority's/organisation's ability to manage significant media and public interest, the Chair or Administration Officer for Communicate Suffolk will:

1. Liaise with the relevant officer within the affected authority/organisation and offer mutual aid and support.
2. Allocate a mutual aid co-ordinator to manage the aid on behalf of the authority/organisation requiring support.
3. The authority/organisation leading on the major incident will at all times remain in charge of the media/communications strategy. The mutual aid agreement is in place to provide support, resilience and guidance, as required.
4. Authorities/organisations providing mutual aid will make available the most relevant, well-trained and appropriate individuals, depending on the circumstances/requirement.

5. Any mutual aid agreement will be reviewed at least weekly by the mutual aid co-ordinator to ensure the correct level of support is in place.
6. This protocol is drawn up on the understanding that Communicate Suffolk members will initially offer their support on a voluntary basis. However, if the incident concerned becomes protracted (more than one week's duration), the mutual aid co-ordinator will facilitate discussion about finance between the lead authority/organisation and the authority/organisation providing the mutual aid support.

The mutual aid co-ordinator will (on the agreement of the authority/organisation concerned):

- Scope the likely requirement.
- Plan a mutual aid strategy.
- Recruit and place mutual aid personnel (see below).
- Plan further contingencies and support as required.

For the purposes of this protocol, 'mutual aid personnel' could refer to:

- GOLD media and communications back-up/resilience/support
- Media officers and managers.
- Web officers/technical support.
- Media call handlers and general media office/media centre support.
- Marketing and PR officers.
- Staff for monitoring and reporting.

- Volunteers.

Private companies who are members of Communicate Suffolk will support the communications effort by working with all organisations involved to ensure consistent messaging, and helping in other ways where practical and relevant to their business.

## Toolkit - Protocol and check-list for the Lead Agency

In the event of an incident the lead agency co-ordinating the Media Coordination Centre should complete the following to share with other communications officers:

Nature of incident:
Location(s) of incident:
Time incident occurred:
Known/expected casualties:
Who is the lead agency:
Has a major incident been declared and has GOLD been set up:

Is the information for a call-out, being on standby or for information only:	
Rendezvous points for press officers:	
Contact numbers:	
Information received from:	Time:
Who has the information been passed to:	Time:

**Protocol for distribution of information**

Aim

This protocol is drafted to ensure that members of Communicate Suffolk receive the relevant information as the incident occurs so that a consistent message can be put out.

Incident specific procedure

1. The lead agency for distribution of information to members of Communicate Suffolk is *Insert lead agency* . *Insert lead agency* may nominate a second lead authority to assist with this.
2. *Insert lead agency* is the point of contact to clarify any information received by Communicate Suffolk members from other sources. *Insert lead agency* will also clarify what information is releasable to all or part of Communicate Suffolk.
3. The following regular briefing documents and press releases are being received and distributed by *Insert lead agency*:

e.g

<b>Releases</b>	<b>Frequency</b>	<b>Restrictions on release</b>
Top line Briefs	Daily	Cat 1 and 2 only*

4. All Communicate Suffolk members are asked to pass copies of all their press releases to *Insert lead agency*.

5. Communicate Suffolk members receiving information or questions that they feel are relevant to all should forward them to *Insert lead agency* for distribution.

\* Category 1 responders – Police, Fire, Ambulance, Environment Agency, Primary Care Trusts, Maritime and Coastguard Agency, Local Authority, Health Protection Agency, NHS Acute Trusts, Port Health.

Category 2 responders – HSE, utility companies, transport operators, Highways Agency and Strategic Health Authority.

## Toolkit – Job descriptions

### Job Description 1 - LEAD COMMUNICATIONS OFFICER

Postholder: Senior communications officer from lead agency.

Aim: To take a leading role in advising on the formulation of a media strategy.

Responsibilities:

1. To advise the lead spokesman on media matters, including policy.
2. To attend GOLD Command, advising on the formulation of a media strategy.
3. To ensure that GOLD Command has public information priority on it's agenda
4. To liaise with Information Co-ordinator and other press officers, especially immediately prior to press conferences. NB The lead communications officer will be the main link between GOLD Command and the Media Cell.
5. To help and advise other authority spokespersons where necessary.
6. To deputise for the lead spokesperson.
7. To liaise with the Facilities Manager.

### Job Description 2 - PRESS OFFICER

Postholder: Press Officer, or those appointed to act as press officer, representing each agency. Based in the Media Coordination Centre or Media Briefing Centre.

Aim: Ensuring the media strategy is implemented and information is co-ordinated and released.

Responsibilities:

1. Researching and compiling the latest information into press releases.
2. Researching reporters' specific requests.
3. Responding direct to the media based in the Media Briefing Centre
4. Feeding information to the media through the Information Co-ordinator.
5. Liaising with the Media Coordination Centre to ensure the media strategy is implemented.
6. Advising own spokesperson on latest situation.

7. Preparing good news and other informational press releases.

### **Job Description 3 – MEDIA LIAISON OFFICER**

Postholder: An experienced press officer on location..

Aim: To act as a focal point, handling media inquiries, prior to the media centre being set up thus allowing those dealing with the incident to get on with the job, without interference from the media.

Responsibilities:

1. Deal with the media at the scene and ensure initial press releases are authorised and issued.
2. Reduce pressure on the Incident Commander by becoming a focal point for all media enquiries and releasing routine information, as necessary.
3. Liaise with the Incident Commander to gain an accurate picture of the situation and negotiate controlled media access, where appropriate. This should be done in consultation with the Lead Communications Officer and Information Co-ordinator.
4. If appropriate, organise initial press conference at scene.
5. Keep the Information Co-ordinator informed of what is going on, including a summary of any information released at press conferences.
6. Establish liaison with press officers from other agencies at the scene – and co-ordinate the work of all press officers there.
7. Establish any good news stories from the location point to pass to the media cell press officer.

The Incident Commander may need to appoint an officer to begin establishing links with the media until the liaison officer arrives. In the first 2-3 hours the Media Liaison Officer may be supported by press officers from other agencies.

NB Access to the site would have to be organised in co-operation with GOLD/SILVER Command, the Information Co-ordinator, Facilities Manager and the on-site commander.

If the incident involves the military, there may be security implications. In these cases, close liaison is required with the MoD to ensure all classified material has been removed/cover prior to allowing access.

### **Job Description 4 - INFORMATION CO-ORDINATOR**

Postholder: Senior admin officer who will be based in the Media Coordination Centre.

Aim: To ensure all media information is co-ordinated and provide a central point of contact for all agencies.

Responsibilities:

1. Collate information to be released to ensure conflicting messages are not given out.
2. Ensure all official information is fed through to the: Telephone Bureau, Public Information Bureau, Media Briefing Centre, GOLD Command, Media Cell and Media Liaison Officer(s) at SILVER and BRONZE Commands, if operating.
3. Monitor press and media output and alert the Lead Communications Officer if incorrect or damaging information is being published.
4. Receive press releases from other agencies.
5. Act as the Media Coordination Centre manager to ensure the smooth running of the cell.

Keep Media Coordination Centre up to date with media requests and deadlines.

### **Job Description 5 - SPOKESPERSON**

Postholder: Chief officer or senior officer, who will speak only on behalf of his/her own authority, this may be a senior politician in the case of the Local Authorities.

Aim: To be the spokesperson for the authority thus keeping the public informed of what is going on and building confidence in the organisation/authority's ability to cope with the situation.

Responsibilities:

1. To be the main focus for media attention, liaising with the Media Coordination Centre, to agree responses to media enquiries.
2. Attend and speak at joint press conferences, where required. NB these would normally be chaired by the lead agency spokesperson.
3. Give personal interviews on behalf of the authority.
4. Feed information through GOLD Command, and attend meetings as required.
5. Ensure information from that authority/organisation is authorised for release to the media, a copy then needs to be given to the Media Coordination Centre.

### **Job Description 6 - TELEPHONE BUREAU SUPERVISOR**

Postholder: A manager, not necessarily from the lead agency, but preferably with experience of dealing with the media.

Aim: Oversee the running of the Media Telephone Bureau reducing pressure at the scene, media briefing centre and individual authority HQ's.

Responsibilities:

1. Ensure the Media Telephone Bureau operates efficiently, with all calls logged and unanswered questions directed to the appropriate people for reply.
2. Liaise with the Information Co-ordinator to ensure Media Telephone Bureau staff have access to all information, authorised for release – including copies of all press releases and key points from press conferences.
3. Provide support for the Media Telephone Bureau staff, offering advice, and taking particularly difficult calls, where necessary.
4. Liaise with the Media Coordination Centre to obtain replies – answers should be fed back through the Information Co-ordinator and then issued to the press.
5. Ensure those with outstanding queries are kept up to date.
6. Encourage staff to remain courteous, even in the face of sustained media pressure.
7. Update the Information Co-ordinator on the mood of media and areas of difficulty.
8. In consultation with the Facilities Manager, ensure all staff receives refreshments/meal breaks/relief.

### **Job Description 7 - TELEPHONE BUREAU STAFF**

Postholder: Anyone with a good telephone manner and the ability to work under pressure.

Aim: Reduce pressure on the scene and media briefing centre by answering queries with authorised information and noting new enquiries for which answers have to be sought.

Responsibilities:

1. Work, under the direction of the Telephone Bureau Supervisor, on dedicated media telephone lines.
2. Issue information, from press releases/written press conference records – as provided by the Telephone Bureau Supervisor.
3. Log all calls received.

4. Record all queries which cannot be answered from authorised information, and pass to the Telephone Bureau Supervisor.
5. Make Telephone Bureau Supervisor aware of any particularly difficult queries or members of the press.
6. Remain fully updated about latest authorised information.
7. Provide a courteous and efficient service.

### **Job Description 8 – FACILITIES MANAGER**

Postholder: A senior manager with experience of facilities management, this should be held wherever possible by someone from the site where the Media Coordination Centre is established.

Aim: To establish a Media Coordination Centre, giving a central point of information for the press and taking pressure away from operational officers.

#### Responsibilities:

1. In consultation with GOLD Command, select the site for the Media Coordination Centre.
2. Establish the Media Coordination Centre, complete with necessary equipment and once this is done ensure all media at the scene are directed to attend the centre.
3. Liaise with the Lead Communications Officer, Telephone Bureau Supervisor and Information Co-ordinator to ensure all their requirements are met.
4. Call in support staff, in consultation with Lead Communications Officer, and brief them on their role and deploy them to areas where needed.
5. Arrange, through the , mutual aid co-ordinator, if required.
6. In consultation with the COI, organise the practical side of VIP and Royal visits transport etc.
7. Arrange transport for media parties to be bussed to the scene, or any other sites of interest, for controlled access and approved briefings.
8. Oversee staffing levels, including the provision of officers at supplementary site of media interest.
9. Set up a shift system to ensure 24-hour cover, where necessary. This would be done in consultations with Lead Communications Officer, Telephone Bureau Supervisor and Information Co-ordinator. In the immediate aftermath of disaster staff will willingly work long hours. However, where media interest is expected to be sustained over a long period, a 12-hour shift system is suggested to ensure a steady stream of rested staff.
10. Ensure staff are given rest periods and are provided with refreshments.
11. Ensure all staff in the Media Briefing Centre have name badges.

12. Security of the Media Coordination Centre site.
13. Ensures press and broadcast media is monitored and cuttings service provided.

### **Job Description 9 - TECHNICAL ASSISTANT**

**Postholder:** Someone with an engineering/broadcasting background. Essential skills – technical expertise in operating and playing back all types of recording equipment, including video cameras, tape recorders, video recorders etc. Working to the Facilities Manager.

**Aim:** Ensure press conferences and media coverage of the event is recorded.

**Responsibilities:**

1. Ensures all press conferences are recorded, video/audio and ensures copies are available, on request, i.e. for the Media Coordination Centre.
2. Provide live visual link, if possible, of press conferences to GOLD Command
3. In the absence of a photographer, takes and organises developing of stills photographs.

### **Job Description 10 – ADMIN/CLERICAL ASSISTANT**

**Postholder:** Any employee trained in essential skills such as shorthand/typing. Must also be articulate and have strong organisational skills.

**Aim:** To provide general support to communications staff dealing with a major incident, including those assisting under the mutual aid protocol. To provide general clerical support, under the direction if the Facilities Manager.

**Responsibilities:**

They may vary but are likely to include:

1. Arranging for meals/refreshments to be delivered to the media cell/media telephone bureau.
2. Arranging accommodation for communications offices unable to travel home.
3. Where necessary, drafting shift rotas, including rest days.
4. Taking notes at press conferences and briefings to ensure transcripts are always available.
5. Transcribing key points for use in press releases.
6. Providing support by compiling and passing out outstanding queries from journalists, press conferences/briefings and personal approaches.
7. Copying press releases and ensuring stocks are available in the Media Coordination Centre, Telephone Bureau, GOLD Command, Media Briefing Centre and Public Information Bureau.

8. Obtaining newspapers and providing a cuttings service.
9. Helping with broadcast media monitoring.

NB: The following posts are most likely to need permanent clerical assistance: Lead Communications Officer, Facilities Manager; Information Co-ordinator; Telephone Supervisor. GOLD Command will also need a permanent 'runner'.

**Toolkit - Major incident media enquiry form**

<b>Date</b>	<b>Time</b>
<b>Media organisation</b>	<b>Journalist name</b>
<b>Name of programme</b>	<b>Contact number</b>
<b>Where are they based now</b>	<b>Email</b>
<b>Live or pre-record interview request</b>	
<b>Deadline</b>	<b>Enquiry taken by</b>
<b>Enquiry</b>	

<b>Notes/Who contacted</b>
<b>Response</b>
<b>Follow up required</b>

**Annex I**

**Categories of responders and other agencies as defined by the CCA (2004)**

**Category 1 responder**

These bodies are likely to be at the core of the response to most emergencies. As such, they are subject to the full range of civil protection duties.

### Category 2 responder

These are co-operating responders who are less likely to be involved in the heart of multi-agency planning work, but will be heavily involved in preparing for incidents affecting their sectors. They are required to co-operate and share information with other Category 1 and 2 responders.

### Suffolk Category 1 responders

Agency	Organisation
Police	Suffolk Police
Fire	Suffolk Fire and Rescue
Ambulance	East of England Ambulance Service NHS Trust
Local Authority	Suffolk County Council
	Ipswich Borough Council
	St Edmundsbury BC
	Babergh DC
	Mid-Suffolk DC
	Waveney DC
	Suffolk Coastal DC
	Forest Heath DC
PCTs	NHS Suffolk
	NHS Great Yarmouth and Waveney
Maritime and Coastguard Agency	
Health Protection Agency	
Port Health Agencies	
Environment Agency	
Acute Hospital Trusts	

### Suffolk Category 2 responders

Strategic Health Authority	
Health and Safety Executive	
Rail operators	Network Rail
	National Express East Anglia
	Freightliner
Harbour Authorities	Harwich Haven Authority
Communication providers	BT
Water and sewage companies	Anglian Water
	Essex and Suffolk Water
Energy companies	National Grid
	EDF

**Toolkit - Checklists for Category 1 Communications Officers**

**Action lists - Media Coordination Centre**

The Media Coordination Centre will be assembled and managed by the lead agency. In most emergency situations this will be Suffolk Police, but it may be another agency. This set of action cards assumes the Police are lead agency.

To ensure a standardised approach, members of the Media Coordination Centre may include senior press officers from the following organisations:

- Suffolk County Council/ Suffolk Fire and Rescue Service
  - East of England Ambulance Service NHS Trust
  - NHS
  - District/Borough Councils
  - Other relevant organisations
- 
- Liaise directly with Strategic (GOLD) Command and co-ordinating groups.
  - Establish (and staff) Media Liaison Points based on nature of incident, for example hospital, reception centres, scene of emergency, temporary mortuary.
  - Liaise with the Central Office of Information (COI).
  - Organise call out of sufficient staff to meet requirements.
  - Assign press officers to handle media telephone enquiries, and to fulfil other roles in the job descriptions (Annex F).
  - Decide on location of Media Briefing Centre.
  - Set up Media Briefing Centre.
  - Request any additional equipment needed.

- Notify press of Media Briefing Centre location.
- Establish lines of communication with the scene and other relevant sites to ensure regular two-way flow of accurate information.
- Receive and supply information to and from Information Cell.
- Arrange for spokespersons and set time for press briefings.
- Organise and manage press conference(s) as appropriate.
- Notify press/relevant personnel of arrangements.
- Estimate length of media cover and draw up staff rota. Use the Mutual Aid Protocol if required.
- Ensure stringent media monitoring is carried out.
- Look at communications methods required to respond to the incident and provide additional information e.g. by newsletters.

## Action Lists - Suffolk Police

- Receive initial advice of major incident from operations room.
- Confirm incident details (see checklist).
- Assess level of support needed.
- Establish location of Media Briefing Centre or rendezvous point for support press officers.
- Instigate call-out procedure and report incident details (see checklist).
- Organise phone/fax lines for Media Briefing Centre.
- Establish Media Cell:
  - Suffolk County Council/ Suffolk Fire and Rescue Service
  - East of England Ambulance Service NHS Trust
  - NHS
  - District/Borough Councils
  - Other relevant organisations (such as Network Rail, airline, utilities, etc.)
- Turn to Media Cell Action List for next procedures.
- Ensure there is a runner and a second press officer at the scene to assist with media management.
- Co-ordinate with other agencies at SILVER and BRONZE.

### **Action lists - East of England Ambulance Service NHS Trust**

The Media Liaison Officer for East of England Ambulance and Paramedic Service is responsible for cascading the information to all relevant personnel within the service.

- Receive initial advice of major incident from Suffolk Police or lead agency.
- Establish incident details and level of response required.
- Establish separate communication link with Ambulance Headquarters via Communications Office and staff accordingly.
- Issue holding statement to press and other agencies.
- Relocate to Liaison Point for further instructions from lead agency.
- Bring designated equipment.
- Alert Regional Press Officer.
- Liaise with other county media/communications leads in other services.
- Brief local and neighbouring hospital media leads.
- Establish contact with Chief Executive and/or location brief accordingly.
- Check key messages with the lead agency/media cell before releasing any information, in the first instance.

### **Action lists - Suffolk Acute NHS Trusts**

The Suffolk Hospitals' communications contacts are responsible for cascading information about casualties and outlining the role and work of the health economy during and following a major incident.

- Receive initial advice from Ambulance or lead agency.
- Establish incident details and level of response required.
- Call-out PRO staff and report basic incident details.
- Prepare and circulate a holding statement.
- Establish a Media Briefing Centre at the receiving hospital.
- Deal with the press/media at the hospital.
- Give regular updates on casualties to the police.
- Organise press conferences at the hospital as necessary.
- Arrange interviews with doctors/senior nursing staff.
- In liaison with the police, arrange interviews at the hospital, with casualties/walking wounded.
- Brief Ministers/VIPs/Central Office of Information and Regional Office involvement.
- Arrange VIP visits to the hospital.
- Establish internal communications.
- Check key messages with the lead agency/media cell before releasing any information, in the first instance.



### **Action lists - NHS Suffolk/ Great Yarmouth and Waveney**

NHS Suffolk's/ Great Yarmouth and Waveney's communications contact is responsible for cascading information about public health matters and outlining the role and work of the primary care clinicians (such as GPs, community nurses and pharmacists) during and following a major incident.

Where specific public health related information is required this will be co-ordinated by the NHS Suffolk/Great Yarmouth and Waveney communications lead liaising with the Health Protection Agency and the Directorate of Public Health as appropriate.

- Receive initial advice from lead agency.
- Establish incident details and level of response required.
- Prepare and circulate a holding statement.
- Receive initial public health advice from the Director of Public Health or the Health Protection Agency and where appropriate make this known to other agencies for dissemination.
- Cascade to other participating media/communications leads.
- Upload public health information onto websites.
- Deal with press/media enquiries relating to primary care.
- Arrange interviews with GPs/primary care clinicians.
- Establish internal communications.
- Check key messages with the lead agency/media cell before releasing any information, in the first instance.

## **Action lists - Suffolk County Council / Suffolk Fire and Rescue Service**

Suffolk County Council's (SCC) corporate communications team would be alerted by Suffolk Joint Emergency Planning unit or Fire Control (out of hours) and would support the joint response to the media and public. In some scenarios, they would lead on co-ordinating communications.

- Establish the initial details of the incident
- Establish if GOLD has been activated, including the media cell.
- Establish if County Emergency Centre (CEC) has been activated.
- Decide the level of response required and call out colleagues. The minimum response will be liaison at GOLD and at County Emergency Centre.

### **At GOLD:**

- Make contact with the county council's representative at GOLD (JEPU representative and duty director) and provide advice on communications.
- Make contact with the lead agency communications officer.
- Take a strategic overview of SCC's communications needs.
- Draw up rota for county council communications staff if the incident is likely to be ongoing. This will include assigning a member of staff to the Media Cell.

### **At County Emergency Centre**

- Make contact with the CEC manager.
- Provide assistance at the CEC, if required. This is likely to include ensuring the communications team are briefed and carrying out key tasks, e.g. staff and councillor briefings, holding statements for media, keeping Customer Services Direct (CSD) informed.

### **SCC Communications Team**

- Establish contact with lead agency press office (through SCC rep at GOLD/Media Cell) to receive and contribute to joint press releases/briefings.
- Establish system to ensure only confirmed and cleared information is issued to any audience.
- Handle media enquiries, using information received from lead agency press office (GOLD/Media Cell).
- Arrange for key information to be passed to senior officers as required.
- Arrange for councillors to receive appropriate briefings
- Ensure District/Borough councils receive information for cascade down to councillors, including parish councillors.
- Ensure that CSD are fully informed of public messages, and that appropriate holding statements are given to switchboards and customer service centre staff
- Ensure that key messages are circulated to other public outlets, e.g. libraries and schools, as appropriate
- Ensure that staff are briefed through COLIN news stories/global emails/other briefings as appropriate
- Update the Suffolk County Council website homepage with appropriate public information
- Check key messages with the lead agency/media cell before releasing any information, in the first instance.
- Work with district/borough council communications lead on community recovery communications plan and be prepared to implement.
- Work with Coroner's office and Registrars

### **Action lists - District/Borough Councils**

District/Borough Council press officer contact is responsible for cascading the information to all relevant district/borough personnel.

- Establish incident details and level of response required.
- If incident is in your area refer to emergency plan.
- Call-out as necessary, neighbouring district/borough press officers.
- Check location of Chief Executive and advise of actions.
- Ensure the checklist of information is passed to:
  - Appropriate directors, Chairman/Leader of the council, other relevant members, MPs and other community leaders (with county council communications representative)
- Prepare and issue a holding statement to main switchboard staff, and to service staff if appropriate. Issue further media statements and respond to media enquiries as appropriate.
- Collect equipment from offices, as necessary (see equipment list).
- Relocate to agreed meeting place, Media Briefing Centre or Media Liaison Point as directed by Media Cell.
- Check key messages with the lead agency/media cell before releasing any information, in the first instance.
- Update web site.

Work with county council communications lead on community recovery communications plan and be prepared to implement.

Annex K



## **Pandemic Influenza Communications Plan**

## Contents

		<b>Page</b>
1	Introduction	3
2	Aims and objectives	3
3	Communications responsibilities	4
4	Key audiences	4
5	Key messages	5
6	How to reach audiences	6
7	Goals for outbreak communications	7
8	Post pandemic communications	7
9	Key contacts	7
Appendix 1	Roles and responsibilities of the various organisations	8
Appendix 2	Further reading	13

## **Produced by**

**Isabel Cockayne**

Head of communications and external relations

*With thanks to NHS Norfolk*

## 1. Introduction

The Government's *Pandemic Flu: a national framework for responding to an influenza pandemic* was published in November 2007. It sets the scene and provides the overall framework for the UK's communications and public relations strategy. The response is divided into phases, starting with the work to be done before a pandemic or potential pandemic emerges, followed by an escalating response as a pandemic evolves. The phases, which are described fully in the pandemic flu plan, are:

- Phases 1 and 2: Inter-pandemic period
- Phases 3,4 and 5: Pandemic alert period
- Phase 6: Pandemic period

The current alert (as at January 2009) is phase 3 (human infection but rare and no or rare human-to-human transmission) and has been for some time.

NHS Suffolk is the lead health organisation locally in responding to a flu pandemic.

It is important that this strategy is not read in isolation as it supports a number of other pandemic flu strategies, namely:

- East of England Regional Concept of Operations for Pandemic influenza
- NHS East of England Pandemic Flu Communications Plan
- Department of Health Communications Strategy
- NHS Suffolk Business Continuity Plan

## 2. Aims and objectives of this plan

This document aims to:

- Provide an outline of the communication role and responsibility within NHS Suffolk's area.
- Provide key contact details at national, regional and local level
- Outline a media handling protocol calling on the Mutual Aid Protocol for communications colleagues across Suffolk.

The objective is to communicate accurate, timely and consistent advice to key audiences to aid their understanding of the pandemic and to communicate any behaviour change or action they need to take, supporting delivery of the organisation's emergency plans.

### **3 Communications responsibilities**

#### **3.1 Pandemic alert period**

- Prepare communication strategy and media handling plans, including robust internal and stakeholder communications and all within the Mutual Aid Protocol.
- Identify and document internal and external communications channels
- Update key contacts lists
- Identify and media train key spokespeople
- Identify communications roles and responsibilities (including cover in the event that the communications team are ill).
- Identify and source translated material for those whose first language is not English. Ensure these groups are included in alert system
- Draw up 24 hour communications on-call rota, working with key partners to ensure it is manned.
- Work closely with local authorities in planning communications – discussing with them what their plans are
- Support operational staff/pandemic flu planning groups in raising awareness of pandemic flu amongst staff, particularly frontline.
- Develop mechanisms for alerting the DH media centre and Health Protection Agency to fast breaking local news stories.
- Staff awareness of media policy/protocols
- Ensure Patient Advice and Liaison Service (PALS) has up to date information. This should include Suffolk Mental Health Trust, Suffolk Community Healthcare, West Suffolk and Ipswich hospitals services as well as key partners, such as Suffolk Constabulary and Suffolk County Council.
- 'Hidden' pages set up on extranet with information useful to the public and press in a pandemic event

#### **3.2 Pandemic period**

- Implement communications strategy – making use of internal and external communications channels previously identified and key contacts lists; use of digital media to include video conferencing (see NHS Suffolk Business Continuity Plan).

- Brief staff regularly;
- Communicate and localise central DH messages to key audiences within Suffolk region;
- Handle media enquiries on local issues – putting forward lines agreed with the SRF Communications Cell and/or the Lead Health Agency and using previously identified spokespeople where appropriate (or requested by the command teams)
- Advise NHS East of England on trends in public behaviour, information requests and gaps in service
- Produce reports on communications activity for NHS East of England
- Ensure PALS has up to date information
- Continue working with partner organisations maintaining effective communications
- Reinforce media policy/protocols
- Regular daily broadcast to public on various aspects, including information, such as collection point and GP surgeries. For example, use of parish council networks to distribute information pack.

## 4 Key audiences

In a pandemic influenza outbreak, NHS Suffolk will have a wide range of potential audience groups including:

### 4.1 Internal

- Directly employed staff
- Independent contractors and their staff (GPs, pharmacists)
- Clinical Executive Committee (CEC) members
- Board members
- Agency and contract staff

### 4.2 External

- Members of the general public
- Patients
- Carers
- LINK for Suffolk

- Department of Health
- Other local NHS trusts
- Neighbouring trusts
- Local authorities
- Voluntary, community, church and other religious groups
- Local media
- MPs and councillors
- Local businesses and utilities
- Commissioning partners and consortia
- Education providers – schools, further education colleges, universities etc

In addition, there will be communications requirements with the emergency services, Health Protection Agency, Suffolk Resilience Forum, and Emergency Command and Control centres and teams.

## **5. Key messages**

All local messages should be supportive of and reflect the following key national messages throughout all the phases.

<b>Phase 3</b>	External	<ul style="list-style-type: none"> <li>• Respiratory and hand hygiene (RHH) is important</li> <li>• What good RHH practices are</li> <li>• Everyday risk of poor hygiene practices</li> </ul> <p>Also passive messaging, as appropriate</p>
	Internal	<p><i>All above, plus</i></p> <ul style="list-style-type: none"> <li>• Staff understand proposed operation of the national flu line and Flu Collection Points for antivirals</li> <li>• Need to use current inter-pandemic period to complete and test plans</li> <li>• Staff engaged in local RHH campaigning initiatives</li> <li>• Messages to address likely staff concerns and questions</li> </ul>
<b>Phase 4</b>	External	<p><i>All above plus</i></p> <p>Continue to support national messages</p>
	Internal	<p><i>All above, plus</i></p> <p>Media handling protocols re-iterated</p>
<b>Phase 5</b>	External	<ul style="list-style-type: none"> <li>• Continue to support national messages</li> <li>• Reinforce DH travel advice, messages from national public information film and leaflet being door dropped</li> </ul>
	Internal	<p><i>As above, plus</i></p> <p>Advise where antiviral collection points are</p>
<b>Phase 6</b>	External	<p><i>All above plus</i></p> <ul style="list-style-type: none"> <li>• Continue to reinforce understanding of the nature of pandemic flu and the measures the government has put in place to protect the public</li> </ul>
	Internal	<p><i>As above</i></p>

## 6. How to reach audiences

Examples are included in the DH Communications Toolkit. The following methods have been identified as ways / tactics to communicate key messages to the identified audiences.

### **6.1 Internal:**

- Regular communication in corporate communications mechanisms, including: internal staff newsletters; staff briefings; notice boards; payslip attachments, emails;
- Specific briefing events at NHS Suffolk sites widely published through internal communications mechanisms;
- Q&A briefing sheet: distributed internally as appropriate ;
- Dedicated intranet section, to include: NHS Suffolk contingency plan, Q&A briefing, infection control information, links to Department of Health (DH) Health Protection Agency (HPA) relevant web pages.

### **6.2 External:**

- Use NHS Suffolk website link to extranet ([www.suffolkextranet.nhs.uk](http://www.suffolkextranet.nhs.uk)): to include Q&As, links to relevant DH websites such as NHS Choices and HPA web pages; and anti-viral pages, including national flu number
- Use local authorities (and other partner organisations) websites that are seen as an authoritative local source of local information supplementing the HPS and DH's information sources.
- Poster campaign throughout Suffolk, including the premises of independent contractors;
- DH leaflets made available in public areas;
- Editorial coverage placed in internal and external magazines, e.g. council magazines;
- Close working with the media and briefings over the phone and direct them to information on relevant websites.
- Close liaison with local authorities to ensure that consistent and co-ordinated messages are being communicated publicly;
- Real-time messages on local radio, i.e. Radio Suffolk
- Real-time messages broadcast on TV screens in GP surgeries (if in place)

## **7. Goals for outbreak communications**

- **Trust** – communicate to build, maintain or restore public trust

- **Announcing early** – to prevent potentially frightening rumours and misinformation (the timing of announcements in the event of a pandemic will be determined by DH and NHS Suffolk will be alerted via the SHA communications lead)
- **Transparency** – helps inspire trust. Communication must be honest, easily understood, complete and factually accurate
- **Allaying concerns of the public** – accurate and timely information helps the public overcome concerns and to understand what they can do to protect themselves and their families
- **Planning** – be prepared. Answer questions such as: What needs to be done? Who needs to know? Who is the spokesperson? Which agency has the lead? and Who needs to act?

## 8. Post pandemic

After the first wave there should be a brief respite during which communications strategies can be reassessed. Even if times are difficult, an open and honest approach by NHS Suffolk is likely to reduce post pandemic stress and enable a more speedy return to normality.

## 9. Key contacts

### Key spokespeople

Dr Peter Bradley, Director of Public Health

Dr Brian Keeble, Consultant in Public Health Medicine - health protection

### Media number – 01473 770014

Isabel Cockayne, Head of Communications and External Relations

Jo Davies, media officer

### Staff communications

Carly Wilcock

## Appendix 1

### Roles, responsibilities and relationships of the various organisations

Department of Health (DH)	Health Protection Agency (HPA)	Regional directorate of public health (RDPH)	Strategic health authority (SHA)	PCTs and NHS Trusts (with NHS Suffolk co-ordinating)	NHS Direct
<b>PRE PANDEMIC</b>					
<ul style="list-style-type: none"> <li>- Deliver nationally coordinated comms plan</li> <li>- Work with Cabinet Office, government departments, devolved administrations and HPA</li> <li>- Health information lead prepare and disseminate resources</li> <li>- Media relations lead identify national spokespeople</li> <li>- Brief NHS Direct/ SHAs and other key partners</li> <li>- Provide training materials for use in staff briefings</li> </ul>	<ul style="list-style-type: none"> <li>- Work with DH on nationally coordinated comms plan and to identify national spokespeople</li> <li>- Work with SHAs and RDPHs to identify suitable regional spokespeople and negotiate protocol for how interview requests will be handled</li> <li>- Assist in preparing briefing and communication material</li> <li>- Ensure that national and regional and local HPU spokespeople are media trained</li> </ul>	<ul style="list-style-type: none"> <li>- Work with HPA/SHAs to identify suitable regional spokespeople and assist in preparing briefing and comms material</li> <li>- Manage relationships with Central Office of Information (COI)</li> </ul>	<ul style="list-style-type: none"> <li>- Co-ordinate local comms</li> <li>- Develop SHA comms strategy and media handling plan</li> <li>- Ensure local NHS organisations have comms strategies in place and that communications leads know what is required of them (NB: SHA Heads of Comms can do this through local network meetings)</li> <li>- Ensure that each organisation has adequate comms capacity (including the ability to mobilise backup staff)</li> <li>- Develop strong</li> </ul>	<ul style="list-style-type: none"> <li>- Prepare communication strategies/media handling plan (including robust internal and stakeholder communications, key messages, local Q&amp;As, draft statements) in conjunction with SHA</li> <li>- Brief key staff – especially frontline staff</li> <li>- Identify and media train key spokespeople e.g. local GPs</li> <li>- Draw up robust 24 hour comms on-call rotas - campaign to ensure people know</li> </ul>	<ul style="list-style-type: none"> <li>- Support national communications strategy through website, interactive digital TV and telephone services</li> </ul>

			working relationships with local partners/ networks (HPA, HPUs, local Resilience Forums, emergency and public services, RDPH, COI etc) - Cascade key messages/public health information and Q&As to local NHS	their NHS number to coincide with information on the national flu line information in phase 5 - Radio Suffolk campaign to support door-drop activity in phase 5.	
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<b>Department of Health (DH)</b>	<b>Health Protection Agency (HPA)</b>	<b>Regional directorate of public health (RDPH)</b>	<b>Strategic health authority (SHA)</b>	<b>PCTs and NHS Trusts (with NHS Suffolk co-ordinating)</b>	<b>NHS Direct</b>
<b>DURING PANDEMIC</b>					
<ul style="list-style-type: none"> <li>- Determine timing of announcements</li> <li>- Brief News Coordination Centre (NCC)/ HPA/SHAs and other partners with latest handling strategies, lines to take/rebuttals</li> <li>- Regional desk to send material to SHAs, national and regional HPA and</li> </ul>	<ul style="list-style-type: none"> <li>- Provide daily data to DH</li> <li>- Brief and support local HPU staff in communications activity in conjunction with SHAs/PCTs</li> <li>- Handle requests for interviews with regional HPA staff</li> <li>- Handle media enquiries on specific issues (agreed in</li> </ul>	<ul style="list-style-type: none"> <li>- Handle requests for RDPH staff</li> <li>- Handle media enquiries on specific issues (agreed in advance with HPA/SHAs)</li> </ul>	<ul style="list-style-type: none"> <li>- Act as information link between DH and local NHS and liaise on ministerial visits/briefings</li> <li>- Keep DH informed of significant local or regional media interest</li> <li>- Update local NHS on changes to national media handling/lines to</li> </ul>	<ul style="list-style-type: none"> <li>- Issue information and advice to staff, public, patients and partner organizations</li> <li>- Handle local media enquiries/ requests for interviews</li> <li>- Give early warning to SHA on emerging media stories</li> <li>- Send information to vulnerable people through community</li> </ul>	<ul style="list-style-type: none"> <li>- Support national communications strategy through website, interactive digital TV and telephone services</li> <li>- Provide information on local services, where to go for antivirals etc through telephone helpline and <a href="http://www.nhs.uk">www.nhs.uk</a>.</li> <li>Interactive digital</li> </ul>

RDPH - Produce/ distribute public information materials - National media briefing (with CMO/HPA) - Issue travel advice (with Foreign Office) - Handle requests to interview DH ministers and CMO - Respond to media queries - Run twice daily press briefings - Provide advice on release of data - Evaluate and refine media handling strategy - Liaise with NHS for Ministerial visits	advance with DH/SHAs) - Update HPA regional network on changes in media handling strategies/lines to take		take - Support local NHS on media handling/internal communications	nurses - Send out Collection Point plans (to develop) -Specific details of how flu may affect people with illnesses (list to come) and communicate with families	TV channel could be devoted to providing flu information
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<b>Department of Health (DH)</b>	<b>Health Protection Agency (HPA)</b>	<b>Regional directorate of public health (RDPH)</b>	<b>Strategic health authority (SHA)</b>	<b>PCTs and NHS Trusts (with NHS Suffolk co-ordinating)</b>	<b>NHS Direct</b>
<b>END OF FIRST WAVE</b>					
- Debrief key personnel - Evaluate	- Feed into national and regional evaluation	- Feed into regional evaluation	- Evaluate, review and revise	- Evaluate, review and revise	- Feed into national evaluation

effectiveness of public information materials - Review communications plans in light of lessons learned					
<b>SUBSEQUENT WAVES</b>					
- Implement revised comms plans as for first wave	- Implement revised comms plans as for first wave	- Implement revised comms plans as for first wave	- Implement revised comms plans as for first wave	- Implement revised comms plans as for first wave	- Implement revised comms plans as for first wave

## **Appendix 2 Further reading**

### **Department of Health**

[www.dh.gov.uk/pandemicflu](http://www.dh.gov.uk/pandemicflu)

### **Health Protection Agency (HPA)**

[www.hpa.org.uk/infections/topics\\_az/influenza/Activity0506/flureport.htm](http://www.hpa.org.uk/infections/topics_az/influenza/Activity0506/flureport.htm)

[www.hpa.org.uk/infections/topics\\_az/avianinfluenza/menu.htm](http://www.hpa.org.uk/infections/topics_az/avianinfluenza/menu.htm)

### **World Health Organization (WHO)**

[www.who.int/csr/disease/influenza/en/](http://www.who.int/csr/disease/influenza/en/)

[www.who.int/csr/don/en/](http://www.who.int/csr/don/en/)

### **NHS Direct**

[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

### **Europe**

[www.ecdc.eu.int](http://www.ecdc.eu.int)

[www.europa.eu.int/comm/health/whatsnew\\_en.htm](http://www.europa.eu.int/comm/health/whatsnew_en.htm)

[www.eurosurveillance.org/index02.asp](http://www.eurosurveillance.org/index02.asp)

### **Department for Environment, Food and Rural Affairs (DEFRA)**

[www.defra.gov.uk/animalh/diseases/notifiable/disease/avianinfluenza.htm](http://www.defra.gov.uk/animalh/diseases/notifiable/disease/avianinfluenza.htm)

<http://www.defra.gov.uk/animalh/diseases/notifiable/disease/ai/index.htm>

<http://www.defra.gov.uk/animalh/diseases/notifiable/disease/ai/qanda.htm#questions>

[http://www.fao.org/ag/againfo/subjects/en/health/diseasescards/avian\\_safety.html](http://www.fao.org/ag/againfo/subjects/en/health/diseasescards/avian_safety.html)

### **UK Resilience**

[www.ukresilience.info/risk/annexes/annex\\_a.htm](http://www.ukresilience.info/risk/annexes/annex_a.htm)

[www.ukresilience.info/risk/annexes/annex\\_c.htm](http://www.ukresilience.info/risk/annexes/annex_c.htm)

[www.ukresilience.info/risk/annexes/annex\\_e.htm](http://www.ukresilience.info/risk/annexes/annex_e.htm)

[www.fco.gov.uk](http://www.fco.gov.uk)

### **Devolved Administrations**

Northern Ireland <http://www.healthpromotionagency.org.uk>

Scotland <http://www.scotland.gov.uk/Topics/Health>

Wales <http://www.wales.gov.uk/>

## **Appendix 3**

### **Action cards**

#### **Action card: 1**

### **NHS SUFFOLK COMMUNICATIONS LEAD**

#### **Role**

To establish the organisation as a credible and reliable source of information to the media.

You will provide a local focal point for the media with regular checks to ensure broader national messages are coming from the NHS East of England's communications hub.

Provide factual information about the organisation's role in the incident and what it is doing to respond to its effects.

Provide factual information about the condition and treatment of patients (bearing in mind their right to confidentiality).

Ensure close liaison with the media so that staff are not hindered in their response and patients and relatives are not disturbed.

You must not discuss or speculate how the incident occurred or comment on other people or agencies involved in the incident.

#### **Responsibilities**

- 1) Liaising with NHS East of England, Health Protection Agency, relevant trusts/other agency communications staff and establish a co-ordination procedure.
- 2) Agree with the incident management team the appropriate messages to be communicated.
- 3) Ensure front line staff, e.g. receptionists are briefed.
- 4) Check flu line is operationally and establish a help-line if needed, liaising with Department of Health and NHS East of England.
- 5) Handle telephone, fax and face-to-face media/public enquiries and record actions on media enquiry form.
- 6) Produce press releases.
- 7) Arrange for a media room to be set up if appropriate.
- 8) Brief and support the incident management team spokesperson.
- 9) Arrange regular media briefing sessions.
- 10) Produce key facts for staff about pandemic influenza, e.g. how it spreads, risk of infection and infection control methods and the role of antivirals and vaccines
- 11) Arrange VIP visits if appropriate.

## Action card: 2

# TRUST COMMUNICATIONS LEADS

### Role

To establish the organisation as a credible and reliable source of information to the media.

You will establish good lines of communication to feed relevant information to NHS Suffolk.

If your trust has become a focal point for media, collect and regularly provide facts about what impact it is having on the organisation, ensuring NHS Suffolk and other trusts are fully informed before release.

Provide factual information about the condition and treatment of patients (bearing in mind their right to confidentiality).

Identify as communications officer a clinician whom staff trust and provide appropriate training and support. The person to work closely with the Trust's Communication Team.

### Responsibilities

1. Liaising with NHS Suffolk communications lead
2. Agree with NHS Suffolk appropriate messages to be communicated. These will be checked through NHS Suffolk's incident management team.
3. Ensure front line staff, e.g. receptionists are briefed.
4. Check with NHS Suffolk that flu line is operational.
5. Handle telephone, fax and face-to-face media/public enquiries but where necessary divert to NHS Suffolk.
6. Arrange for a media room to be set up if appropriate.
7. Respond to NHS Suffolk request to activate link on trust website to flu site on NHS Suffolk website.
8. Produce daily brief which updates the situation within the hospital to be posted on the intranet and delivered to all areas by the post room. Copy to NHS Suffolk to ensure lines are consistent with national, regional and local information.

## **Action card: 3**

# **COMMUNICATE SUFFOLK LEADS**

### **Role**

To use Suffolk Communicate to support NHS Suffolk in efforts to produce quality information on how the public should manage in the event of a pandemic flu.

Provide a link on websites and alert staff.

Refer to NHS Suffolk to inform public

### **Responsibilities**

1. Respond to NHS Suffolk request to activate link on website to flu site on NHS Suffolk website.
2. hearing from NHS Suffolk, put out link on websites and staff newsletters
3. Brief reception staff and all those who regularly come into contact with the public on a day to day basis and advise they follow NHS Suffolk's written sheet on what public need to know e.g. flu line number, basic hygiene rules

## Action card: 4

CHECKLIST		
		Complete
Telephone cascade		
Key partners: Police Suffolk County Council Borough councils	To say "Alert your receptions and bring out information on key messages"	
	Alert all comms team members to circulate internally	
	Ask for support under mutual aid protocol	
Email cascade		
Parish councils	Posters should be pinned up in obvious places which attract attention	
	Ensure key messages are clear by re-iterating them in the email	
Utility suppliers	Alert your receptions	
	Alert your comms team members	
	Web link attached	
Web actions		
	Activate hidden pages on the web on extranet	
	Link to hidden pages made clear on the public website	