

**BIRMINGHAM AND SOLIHULL MENTAL HEALTH NHS FOUNDATION TRUST**

**TRUST BOARD TO BE HELD ON WEDNESDAY 25 MARCH 2015**

<b>DRAFT MEDIA POLICY</b>
<b>Strategic or Regulatory Requirement to which the paper reports</b> - Develop strong, effective, credible, sustainable relationships with key stakeholders, building the Trust's reputation.
<b>ACTION:</b> Trust Board members are requested to ratify the policy.
<p><b>Executive Summary</b></p> <p>Birmingham and Solihull Mental Health NHS Foundation Trust recognises that effective media relations is essential for any publicly funded organisation as it will rightly be the subject of considerable media scrutiny.</p> <p>Following discussion between the Executive Director of Resources and Senior Marketing and Communications Manager, and subsequently with the Governance team, it was agreed that it would be beneficial for there to be a formal Trust media policy within the suite of Trust policies, the purpose of which is to provide staff with information and guidance on how the Trust deals with the media while ensuring adherence to other trust policies, and wider legislation relating to patient consent and data protection. It defines the clear processes which ensure the Trust provides timely, appropriate information to the media, which is both accurate and consistent.</p> <p>The policy provides a structured approach across the Trust for liaising with the media and ensures staff are aware of what they should do if they receive a call from the media.</p> <p>The policy was placed on Connect for consultation on 9<sup>th</sup> January and issued specifically to Executive Directors, Associate Directors of Operations and Clinical Directors by email. The consultation period ended on 10<sup>th</sup> February.</p> <p>Following this, minor amendments were made to section 9 of the policy (Audit and Assurance) following feedback from the Head of Compliance.</p> <p>The Executive Director of Resources, as the policy's Executive Director, has advised that the policy should come to Trust Board for ratification.</p> <p>Once ratified the policy will be communicated widely within the Trust through our usual internal communications channels.</p>
<b>BOARD DIRECTOR SPONSOR:</b> Sandra Betney, Executive Director of Resources
<b>REPORT AUTHOR(s):</b> Louise Butler, Senior Marketing and Communications Manager
<p><b>APPENDIX:</b></p> <ol style="list-style-type: none"> <li>1. Draft Media Policy (policy number CG10)</li> <li>2. Media policy equality analysis</li> </ol>
<b>PREVIOUSLY DISCUSSED:</b> N/a



## Appendix 2

### Equality Analysis Screening Form

<b>Title of Proposal</b>	<b>Media Policy</b>			
<b>Person Completing this proposal</b>	<b>Louise Butler</b>	<b>Role or title</b>	<b>Senior Marketing and Communications Manager</b>	
<b>Division</b>	<b>Corporate</b>	<b>Service Area</b>	<b>Communications and Marketing</b>	
<b>Date Started</b>	<b>16 March 2015</b>	<b>Date completed</b>	<b>16 March 2015</b>	
<b>Main purpose and aims of the proposal and how it fits in with the wider strategic aims and objectives of the organisation.</b>				
<p>The purpose of the policy is to provide staff with information and guidance on how the Trust deals with the media while ensuring adherence to other trust policies, and wider legislation relating to patient consent and data protection. It defines the clear processes which ensure the Trust provides timely, appropriate information to the media, which is both accurate and consistent.</p> <p>This supports the Trust's strategic requirement to develop strong, effective, credible, sustainable relationships with key stakeholders, building the Trust's reputation.</p>				
<b>Who will benefit from the proposal?</b>				
<p>The policy provides a structured approach across the Trust for liaising with the media and ensures that all staff are aware of what they should do if they receive a call from the media.</p>				
<b>Impacts on different Personal Protected Characteristics – Helpful Questions:</b>				
<p><i>Does this proposal promote equality of opportunity?</i>  <i>Eliminate discrimination?</i>  <i>Eliminate harassment?</i>  <i>Eliminate victimisation?</i></p>		<p><i>Promote good community relations?</i>  <i>Promote positive attitudes towards disabled people?</i>  <i>Consider more favourable treatment of disabled people?</i>  <i>Promote involvement and consultation?</i>  <i>Protect and promote human rights?</i></p>		
<b>Please click in the relevant impact box or leave blank if you feel there is no particular impact.</b>				
<b>Personal Protected Characteristic</b>	<b>No/Minimum Impact</b>	<b>Negative Impact</b>	<b>Positive Impact</b>	<b>Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.</b>



<b>Age</b>	<b>No impact</b>			
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your proposal? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
<b>Disability</b>	<b>No impact</b>			
Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability? Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families?				
<b>Gender</b>	<b>No impact</b>			
This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your proposal?				
<b>Marriage or Civil Partnerships</b>	<b>No impact</b>			
People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?				
<b>Pregnancy or Maternity</b>	<b>No impact</b>			
This includes women having a baby and women just after they have had a baby Does your service accommodate the needs of expectant and post natal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?				
<b>Race or Ethnicity</b>	<b>No impact</b>			○
Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language?				
<b>Religion or Belief</b>	<b>No impact</b>			
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				



<b>Sexual Orientation</b>	<b>No impact</b>			
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				
<b>Transgender or Gender Reassignment</b>	<b>No impact</b>			
This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your proposal or service?				
<b>Human Rights</b>	<b>No impact</b>			
Affecting someone's right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position?				
<b>If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)</b>				
	<b>Yes</b>	<b>No</b>		
<b>What do you consider the level of negative impact to be?</b>	<b>High Impact</b>	<b>Medium Impact</b>	<b>Low Impact</b>	<b>No Impact</b>
				<b>No Impact</b>
If the impact could be discriminatory in law, please contact the <b>Equality and Diversity Lead</b> immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.				
If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the <b>Equality and Diversity Lead</b> before proceeding.				
If the proposal does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the <b>Equality and Diversity Lead</b> .				
<b>Action Planning:</b>				
How could you minimise or remove any negative impact identified even if this is of low significance?				



N/A
How will any impact or planned actions be monitored and reviewed?
N/A
How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.
1. Ensure that the policy is applied to all media activities where relevant
Please save and keep one copy and then send a copy with a copy of the proposal to the <b>Senior Equality and Diversity Lead at <a href="mailto:EqualityAnalysis@bsmhft.nhs.uk">EqualityAnalysis@bsmhft.nhs.uk</a></b> . The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.

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