

# Lincolnshire ICB EPRR Communications and Media Handling Plan

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## Table of Contents

1. Background .....	3
2. Communication Team Structure & Responsibilities .....	4
2.1 Roles and Responsibilities .....	4
3. Response to Incidents.....	5
3.1 Command and Control Functions .....	5
3.2 ICB Communications on-call arrangements .....	6
3.3 NHS Communications Cascade .....	6
3.4 Key Stakeholders .....	7
4. Multi Agency Warning and Informing .....	8
4.1 NHS Lead Health Incident .....	9
4.2 Multi Agency Incident.....	9
4.3 Spokespeople.....	9
4.4 Social Media.....	10
4.5 Staff Communications .....	10
Appendix 1 - Communications Lead Action Card .....	12
Appendix 2 - Media Holding Statement .....	14
Appendix 3 – Cyber Attacks/Incidents .....	16
Appendix 4 – Communications in terrorism related incidents.....	20

# 1. Background

Effective communications form an essential part of any incident response. They ensure that patients and the wider public are well informed about NHS services and what is expected of them. Retaining public confidence depends on the organisation's ability to manage the situation and ensure NHS staff are aware and informed.

Effective communication with staff and the public about an incident will minimise its wider impacts and increase confidence in the NHS response. This involves identifying specific audiences and the appropriate communication methods and messages to achieve this.

During any incident, the Integrated Care Board (ICB) will be required to communicate with agencies both internal and external to the NHS, and with the media. Historically, within a short period of time following the report of a Major Incident, the media is likely to focus, possibly in large numbers, on the scene of the incident or at Survivor Reception Centres, mortuaries etc. It is therefore important to ensure that communications are coordinated to ensure that messaging is consistent across all organisations.

It is vital that communications specialists in NHS organisations deliver:

- **Joined-up communication.** A managed and co-ordinated communication and media response across responding NHS bodies and aligned to the multi-agency response, DHSC and UKHSA, via NHS England regional and national communications teams.
- **Accurate and timely statements to staff and media.** NHS England and NHS funded organisations should provide regular statements, where appropriate, to both the public and staff. These should include situational updates and reliable, useable information about accessing services, facilities and other aspects of the incident response.
- **Sharing key information to warn and inform the public.** The NHS has a duty to provide timely information, warning and informing the public, in coordination with partner organisations, if an emergency has occurred or is likely to occur.
- **Ensure websites and other digital channels are kept up to date.** The public, media and staff will use digital media to find out about an incident and the response to it. Websites and other NHS digital media must be regularly updated to give clear, accurate, consistent and reliable information about the situation. This should include ensuring that any press statements are put on the relevant organisations' websites and disseminated more widely using social media sites such as 'X' and Facebook.
- **Support designated spokespeople.** The modern media landscape means there is around-the-clock demand for information during an incident. Responder organisations will need a cadre of trained and informed spokespeople to take part as required. Support for any nationally led communications strategy in response to a Level 4 incident, or similar declaration will be advised via national NHS England communications.

## 2. Communication Team Structure & Responsibilities

In an emergency the purpose of the communications team is to work with the Strategic and Tactical commanders who will be based at the ICB Incident Co-ordination Centre (ICC) or the County Emergency Centre (CEC), to ensure that appropriate messages are delivered, and key stakeholders are communicated with.

- Primary location - ICB Incident Co-ordination Centre (ICC), Bridge House, Unit 16, The Point, Sleaford, NG34 8GG
- Secondary location - ICB Incident Co-ordination Centre (ICC), Welton House, Lime Kiln Way, Lincoln, LN2 4WH
- County Emergency Centre (CEC), South Park Avenue, Lincoln, LN5 8EL

This role will be filled by the relevant communications manager on-call but during a protracted incident, further support may be required from additional communications staff from across the Lincolnshire system.

Close co-ordination with other agencies' communications teams is essential to ensuring that an appropriate agency leads on any statement. This may be formalised through the establishment of a Communications Cell which may be held physically at one of the above mentioned locations or virtually.

### 2.1 Roles and Responsibilities

- The role of the ICB is to liaise with system partners and agree a consistent comms message for all partners
- Liaise with ICB Strategic and Tactical commanders
- Ensure wider communications team aware of the incident
- Attend strategic and tactical meetings as required
- Identify key messages for internal/external/social media and ensure they are released in a timely manner – try not to delay
- Identify and communicate with key stakeholders including Lincolnshire County Council, Police, Local Authorities, and elected members
- Contact LRF colleagues who may be able to offer support if the incident is protracted
- Monitor media and social media
- Consider the resilience of the team
- If necessary, hold a press briefing
- Continue with communications support during recovery
- Participate in any debrief process
- Be a conduit with regional or national communications teams as required

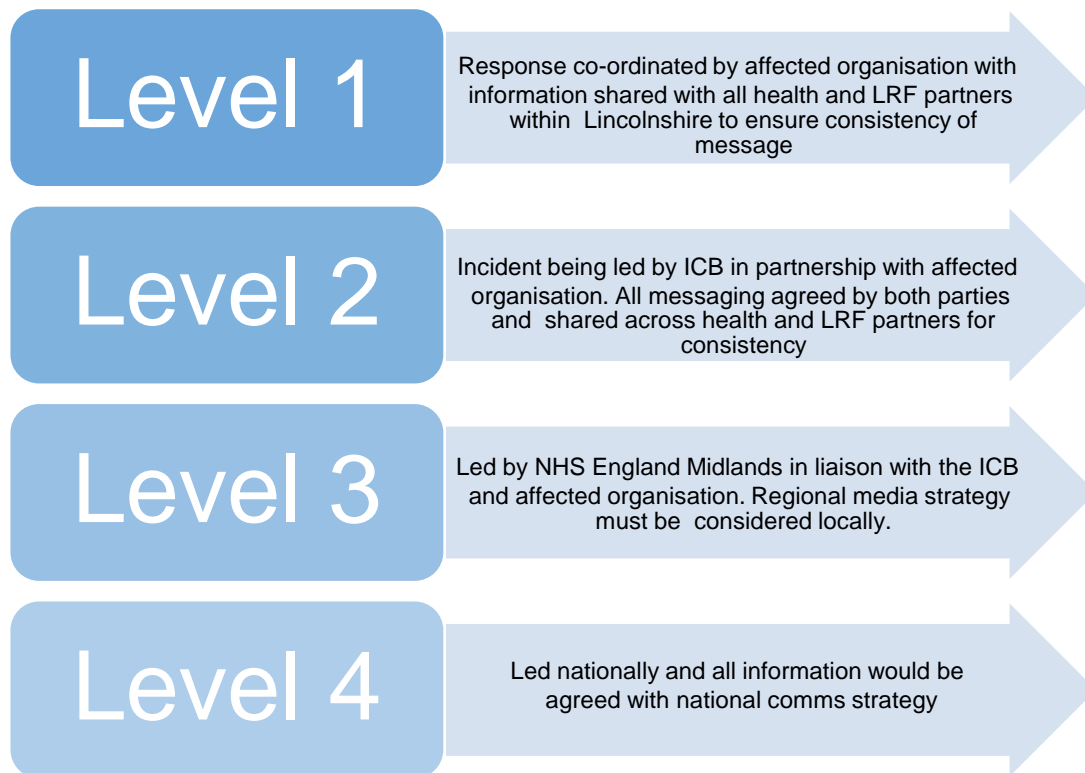
An Action card for the Communications Lead is attached at Appendix 1.

### 3. Response to Incidents

Within the NHS, incidents are categorised as either Business Continuity, Critical or Major Incidents. Each of the incident types will affect service delivery, which may require the implementation of contingency plans and coordination functions to ensure the response and recovery to the incident is managed effectively and doesn't undermine public confidence in the NHS.

The EPRR Framework, (Emergency Preparedness, Resilience and Response), provides a criterion which sets out the point at which an incident could be escalated internally within the NHS to regional and national teams as required. The response escalation can be found in the ICB Incident Response Plan which this aligns to.

The graphic below shows this escalation in a response and where the responsibility for communications processes and messaging sits.



#### 3.1 Command and Control Functions

The ICB has a designated Incident Coordination Centre (ICC) (refer to Section 2). Any media enquiries would be dealt with at this location, or a designated media centre may be set up depending upon the incident.

There may be some instances where the ICC would operate virtually/remotely.

In addition, if activated, the County Emergency Centre (CEC) (refer to Section 2) has media facilities including the BBC having a dedicated telephone line and media room located there. Any media centre would be where the media would be briefed by members of the command team and the ICB communications team.

A member of the communications team will be embedded within Strategic/Tactical Command tiers to provide advice and support for these processes.

There may be occasions, dependent upon the incident, where a Media Reporting Centre may need to be set up or a requirement for on scene media briefings. This will be inside the outer cordon and provide a centralised location for the media to congregate.

### 3.2 ICB Communications on-call arrangements

The ICB Comms Team operate a 24/7 on call rota and should be contacted via the comms on call pager number: 07623 515290.

The on-call arrangements can be activated by the ICB Strategic Commander in response to a declared incident and/or a significant disruptive event of reputational issue affecting a commissioned service or the wider NHS.

During an incident the ICB Incident Commander will contact the on-call Communications Lead via pager. If it is deemed not necessary to contact them by telephone, an email should be sent with high priority to [licb.communications@nhs.net](mailto:licb.communications@nhs.net). This mailbox is NOT monitored at weekends or bank holidays or between 4.30pm and 8.30am weekdays. Therefore, if an email is sent during these times, your email will not be read until the next working day.

All enquiries would be directed to the ICB communications inbox [licb.communications@nhs.net](mailto:licb.communications@nhs.net) and a folder would be created to keep all media enquiries, this will be monitored by the communications lead or another designated member of the communications team.

A monitoring system is available which would log all the requests for media interviews or statements and track the responses. The ICB subscribes to Cision, a media monitoring company who, once given any specific key words, would monitor all coverage both print and broadcast together with social media activity. Cision is available Mon-Fri 07:00-18:30, excluding bank holidays. The ICB Communications Lead would contact Cision to provide them with any key words that require monitoring. Cision would send through a daily report to the ICB Comms Team, which would then be shared with the Communications Director, Senior Communications Manager, Media Briefing Officer and Strategic commander for any further action.

Should the incident be prolonged it may be necessary to call upon the wider LRF team to help support – this would involve not only other health colleagues but also those from Local Authorities, Police etc.

### 3.3 NHS Communications Cascade

The on call communications team have the contacts to contact provider communication teams in and out of hours. In any incident, contact will be made with the on-call NHS England communications team via [england.midlandscomms@nhs.net](mailto:england.midlandscomms@nhs.net) or their dedicated-on call number 01332 916 044.

The contacts for the providers in Lincolnshire are:

Organisation	Contact email (these inboxes are only monitored during normal office working hours)	Out of Hours Contact
United Lincolnshire Teaching Hospital NHS Trust (ULTH)	<a href="mailto:ulth.lchscommunications@nhs.net">ulth.lchscommunications@nhs.net</a>	Via Lincoln County Hospital switchboard: 01522 512512
Lincolnshire Community Health Services NHS Trust (LCHS)	<a href="mailto:ulth.lchscommunications@nhs.net">ulth.lchscommunications@nhs.net</a>	Via Lincoln County Hospital switchboard: 01522 512512
Lincolnshire Partnership NHS Foundation Trust (LPFT)	<a href="mailto:lpft.communications@nhs.net">lpft.communications@nhs.net</a>	Via SPA: 0303 123 4000
EMAS	<a href="mailto:emascommunications@emas.nhs.uk">emascommunications@emas.nhs.uk</a>	<a href="#">Media Enquiries :: East Midlands Ambulance Service (emas.nhs.uk)</a>

### 3.4 Key Stakeholders

The relevant stakeholders for an incident will be identified using the table below and communications will be developed tailored to the audience. The Comms Team have a detailed list of these contacts and the relevant .

The key stakeholders can be wide ranging depending on the incident however, it is good practice to ensure the following are included:

- Staff – to include board members, senior management team and all staff.
- NHS partner organisations.
- Relevant stakeholders including all ICS members.

Audience	Channel
Board members	Email – ICB Corporate Office hold these details
All ICB Staff	Email - <a href="mailto:licb.icbstaff@nhs.net">licb.icbstaff@nhs.net</a> Delphi, closed Facebook group, Team Talk News
Primary Care	Email <a href="mailto:licb.primarycarelincs@nhs.net">licb.primarycarelincs@nhs.net</a>
Lincolnshire Resilience Forum (LRF)	Email - <a href="mailto:lincsep@lincolnshire.gov.uk">lincsep@lincolnshire.gov.uk</a>
Lincolnshire health partners	Email  <a href="mailto:ulth.lchscommunications@nhs.net">ulth.lchscommunications@nhs.net</a> <a href="mailto:ulth.lchscommunications@nhs.net">ulth.lchscommunications@nhs.net</a> <a href="mailto:lpft.communications@nhs.net">lpft.communications@nhs.net</a> <a href="mailto:emascommunications@emas.nhs.uk">emascommunications@emas.nhs.uk</a> <a href="mailto:csc_socialcare@lincolnshire.gov.uk">csc_socialcare@lincolnshire.gov.uk</a>

Official

NHS England	<a href="mailto:England.midlandscomms@nhs.net">England.midlandscomms@nhs.net</a>
CQC	Email through Director of Nursing
Healthwatch Lincolnshire	<a href="mailto:Info@healthwatchlincolnshire.co.uk">Info@healthwatchlincolnshire.co.uk</a>
Media	Email via distribution list held by ICB Comms Team
MPs	MPs will be contacted via Lincolnshire County Council – <a href="mailto:news@lincolnshire.gov.uk">news@lincolnshire.gov.uk</a>
City of Lincoln Council	<a href="mailto:communications@lincoln.gov.uk">communications@lincoln.gov.uk</a>
South Kesteven District Council	<a href="mailto:communications@southkesteven.gov.uk">communications@southkesteven.gov.uk</a>
North Kesteven District Council	<a href="mailto:Communications@n-kesteven.gov.uk">Communications@n-kesteven.gov.uk</a>
West Lindsey District Council	<a href="mailto:Communications.team@west-lindsey.gov.uk">Communications.team@west-lindsey.gov.uk</a>
Boston Borough Council	<a href="mailto:communications.unit@boston.gov.uk">communications.unit@boston.gov.uk</a>
South Holland District Council	<a href="mailto:communications@sholland.gov.uk">communications@sholland.gov.uk</a> is the inbox monitored by all three councils, and the other two comms addresses auto-forward into there
East Lindsey District Council	<a href="mailto:communications.communications@e-lindsey.gov.uk">communications.communications@e-lindsey.gov.uk</a>
Lincolnshire County Council	<a href="mailto:news@lincolnshire.gov.uk">news@lincolnshire.gov.uk</a>
Greater Lincolnshire Combined County Authority (GLCCA)	<a href="mailto:Marianne.marshall@greaterlincolnshire-cca.gov.uk">Marianne.marshall@greaterlincolnshire-cca.gov.uk</a>

## 4. Multi Agency Warning and Informing

NHS Lincolnshire ICB is a Category 1 responder and as such is required under the Civil Contingencies Act 2004 to maintain arrangements to warn and inform the public if an emergency is likely to occur or has occurred. The Lincolnshire Local Resilience Forum is the principal mechanism for multi-agency coordination in an incident response and recovery.

The ICB Comms Team attend LRF Warn & Inform meetings and training exercises, as well as sharing relevant LRF social media content from all partner organisations.

### 4.1 NHS Lead Health Incident

Communications for a localised health incident would be led by the relevant organisation and, dependent on the level of the incident as indicated above, with input from the ICB.

There will be a virtual cell set up by the declaring organisation with representatives from the affected organisations and the ICB, in some instances in the case of a multi-agency response a cell may be set up at the County Emergency Centre, the communications lead would schedule any meetings required. Any communications would be shared with the Strategic/Tactical Commander before being released to health partners, LRF partners and the public. Any information would be released through media briefings, via other direct contact with the media such as a press release, press conference (if required) and use of social media channels from all organisations.

### 4.2 Multi Agency Incident

In a multi-agency response, the ICB will represent the local health economy. The Local Authority is likely to lead in the development of messaging with the input of other partners. This would be shared with the Strategic Coordinating Group before being released.

The local BBC is an intrinsic partner within the LRF in Lincolnshire and co-locates in the County Emergency Centre during a response. This is, in part, due to BBC Local Radio service being recognised as an emergency broadcaster for the UK.

During an incident, partners can utilise a range of mechanisms for communicating with the public including updating website front pages, Facebook and Twitter pages, as well as through regular information cascade via the media.

### 4.3 Spokespeople

We have a range of Directors who are media trained and they would be identified to act as spokespeople following liaison with the Strategic Commander. In addition, we are able to call upon the support of the senior leadership teams across the Integrated Care System to perform this role.

A list of our media trained ICB Commanders can be found [here](#)

## 4.4 Social Media

In line with our current social media policy, which can be found here [NHS Lincolnshire ICB Social Media Policy](#), we will re-emphasise the guidance to senior staff on the effective use of social media whilst the ICB is in the incident response phase. Social media monitoring will be enhanced as part of our communications handling to identify and track information relating to the incident.

If an incident was prolonged it may be necessary to monitor it 24/7 and this would necessitate a rota basis for those on call to be monitoring this, this monitoring would allow us to see fake news, track trends and report to the Incident Coordination Centre, and would ultimately help formulate our response to the incident.

Guidance on handling social media enquiries will enable a consistent and timely response from the ICB communications team who will continue to maintain control of all social media channels, X and Facebook, Instagram, Nextdoor and YouTube.

## 4.5 Staff Communications

During any incident we are able to communicate with our staff either through the EPRR intranet page, their ICB email or via the ICB closed Facebook group. We will ensure that staff are communicated with, with the same information, as public messaging is released.

Should an incident occur out of hours we would use our intranet and closed Facebook group to communicate with our staff. The Communications Team has access to an all user staff email account and following discussion with the Incident Commander, may send an all user email to staff.

We will use a wide range of communications channels to reach staff, with the Communications Lead making the decision on which communications channel will be used:-

Channel	Purpose
All staff email messages	Outlining key updates and supporting information with reassurance and recognition.
Delphi	Dedicated page that is updated with key information, use of FAQ.
Posters	Create printable pdf for local use. Use of LRF or national material if applicable – to be sent to our two locations.
Team Talk Live	All messages to be included in Team Talk Live on a Monday.
Team Talk News	All messages to be included in Team Talk News on a Wednesday.
Staff closed Facebook page	All staff messages to be posted on this page to provide information and to also capture any queries generated/suggestions - these can then be fed back into the FAQ document Live webchat could be hosted at advertised times.

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Text messaging	This could be used in an emergency to all work mobiles. Would need support from IT and could take some time to action.
Whatsapp	Outlining key updates and supporting information with reassurance and recognition.
Screen saver	Could be used during an incident.
Social media	Share information/reassurance messaging via X, Facebook, Instagram. Encourage staff to share with friends and family.
Video	This could be utilised in a prolonged incident.
Teams – Q&A sessions	Could be used to keep staff and colleagues informed of the situation.

## Appendix 1 - Communications Lead Action Card

<b>Communications Lead Action Card</b>		
	<b>Action</b>	<b>Time Completed</b>
1.	Attend the initial incident coordination meeting and commence personal log. Assign a communications professional for the Incident Coordination Centre (ICC).	
2.	Contact the provider (Incident Levels 1 & 2) communications lead and agree with ICB Strategic Commander who will be leading on media communications on the incident. For incident levels 3 & 4 liaise with NHS England (Midlands) Communications Team.	
3.	Invoke ICC EPRR Comms Response Plan and, with Strategic Command approval, issue a holding statement or pre-arranged public health/safety messages in conjunction with UKHSA and/or any organisation associated with the incident, ensuring all are signed off with the Strategic Commander before release, as well as NHS England (Midlands) if appropriate.	
4.	If leading on the incident media communications assume responsibility for managing all public information and media communications. If provider or NHS England (Midlands) is agreed as communications lead, then liaise and respond accordingly, continually updating incident coordination group.  *If an SCG is established, and it is likely that a media cell will be established to lead on media and communication, then act as the conduit for health incident coordination group and SCG.	
5.	If ICB Comms are leading, rapidly formulate and implement an integrated media handling strategy on behalf of the local NHS response and agree approach with health incident coordination group.	
6.	Deal with all media enquiries/draft statements/organise press conferences and interviews as agreed, with Strategic Commander, in media handling strategy. Identify and brief any "talking heads" and advise media (and stakeholders) on the regularity and timing of future media updates	
7.	Utilise staff within ICB Comms & Engagement Team to log media calls, monitor media and social media, update health incident coordination group, develop rolling question and answer brief, develop comms for staff and undertake ongoing liaison with responding NHS comms leads and partners.	
8.	Create a folder to keep all media enquiries, this will be monitored by the communications lead or another designated member of the communications team.	
9.	Provide regular media and social media monitoring reports to the Communications Director, Senior Communications Manager and Media Briefing Officer, and alert the leads to any significant emerging issues and risks as they happen.	

Official

10.	On stand down, ensure that all original documentation (including notes, flip charts, emails etc.) are kept. Close personal log.	
11.	Attend debriefs and share learning	
12.	Manage any ongoing media interest in the NHS response, including social media.	

## Appendix 2 - Media Holding Statement

The following may be considered as the basis for a holding statement (subject to approval by the ICB Strategic Commander and agreement with the relevant Trust/Lincolnshire Police Communications Team as appropriate.

**\*\*All communications must be agreed with and signed off by the ICB Strategic Commander for the incident:\*\***

NHS Lincolnshire ICB is aware of an incident which occurred earlier at xxx

The incident happened at approximately *[insert time]* and *involved (insert brief factual details as confirmed by the Trust affected or Lincolnshire Police.) NB do not speculate on anything*

We are responding with partners to ensure that those affected receive the help and support that they need. We would like to reassure everyone that we are doing everything possible to restore services as quickly as possible.

A spokesperson for NHS Lincolnshire ICB said:

*“Our first priority is for the safety and welfare of those involved in the incident (and people in the surrounding area). We are working closely with colleagues across the health and care services as well as the emergency services in any way that we can. Once we have more information we will release this via our social media channels”*

ENDS

The following may be considered as the basis for a staff/stakeholder initial briefing (subject to approval by the ICB Strategic Commander and agreement with the relevant Trust/Lincolnshire Police Communications Team as appropriate.

All communications must be agreed with and signed off by the ICB Strategic Commander for the incident:

### **Staff/Internal**

NHS Lincolnshire ICB is aware of an incident which occurred earlier at xxx

The incident happened at approximately *[insert time]* and *involved (insert brief factual details as confirmed by the Trust affected or Lincolnshire Police.) NB do not speculate on anything*

We are responding with partners to ensure that those affected receive the help and support that they need. We would like to reassure everyone that we are doing everything possible to restore services as quickly as possible.

## Official

Information updates will be regularly provided to your line manager to keep you informed of progress and any actions you need to take as individuals.

If you are approached for comment on this matter please direct enquiries to the communications team on [licb.communications@nhs.net](mailto:licb.communications@nhs.net) for a coordinated response.

### **Stakeholders/Partners**

NHS Lincolnshire ICB is aware of an incident which occurred earlier at xxx

The incident happened at approximately *[insert time]* and *involved (insert brief factual details as confirmed by the Trust affected or Lincolnshire Police.) NB do not speculate on anything*

We are responding with partners to ensure that those affected receive the help and support that they need. We would like to reassure everyone that we are doing everything possible to restore services as quickly as possible.

Information updated will be regularly provided to keep you informed of progress and any actions you may be required to assist with.

If you or your organisation are approached for comment on this matter please direct enquiries to the communications team on [licb.communications@nhs.net](mailto:licb.communications@nhs.net) for a coordinated response.

### **Media Secure Holding Area**

In the event of an incident a secure holding area will be identified where the media can remain. The identified area will also act as a briefing point and potential press conference venue. Any security, if required, would be provided by Lincolnshire Police.

## Appendix 3 – Cyber Attacks/Incidents

**Cyber Attacks or Incidents** are a violation or imminent threat of violation of computer security policies, acceptable use policies, or standard security practices.

Examples of incidents include (but are not limited to):

- Violations of an explicit or implied security policy
- Attempts to gain unauthorized access to IT systems or data
- Denial of service to IT systems or endpoints
- Unauthorized use of IT systems or endpoints
- Unauthorized modification of information
- Extortion related to the theft and/or encryption of IT systems or enterprise data
- Loss of sensitive information

### Key Contacts

Senior Information Risk Owner (SIRO) and Exec lead for IT	Matt Gaunt	<a href="mailto:m.gaunt@nhs.net">m.gaunt@nhs.net</a> 07583117492
Deputy to Matt Gaunt	Emma Rhodes	<a href="mailto:Emma.Rhodes12@nhs.net">Emma.Rhodes12@nhs.net</a> 07879111092
AGEM Head of Service Management	Joanne Lewis	Joanne.lewis18@nhs.net
ICB ICT Systems Lead	Steve Pitwell	<a href="mailto:steve.pitwell1@nhs.net">steve.pitwell1@nhs.net</a> Tel 07917 695049
Counter Fraud	Taelor Martin	<a href="mailto:Taelor.martin1@nhs.net">Taelor.martin1@nhs.net</a> Tel 07591989713
Lincs Resilience Forum (LRF)		<a href="mailto:Lincsep@lincoln.fire-uk.org">Lincsep@lincoln.fire-uk.org</a> Tel 01522 843402
NHS England (NHSE)		<a href="mailto:england.businesscontinuity@nhs.net">england.businesscontinuity@nhs.net</a> Tel 0113 825 0670

Methods of communicating:

- Email, though this may be compromised, this may include use of personal email addresses
- Social Media channels
- Website
- Telephone
- Through the media – in particular local BBC

### **Communication Messages Examples, Internal and External**

Initially ensuring that staff across the ICB are fully informed of the incident and its impact must be a key priority for the incident response team. All communications will be undertaken by the communications team using approved channels which will be determined dependent upon the nature of the incident and the impact on the network.

Any public, PR and media queries should be directed to the communications team at [licb.communications@nhs.net](mailto:licb.communications@nhs.net)

Note: Any communication with the media may be required to be escalated to the NHS England Communications Team on 01332 916 044 or [england.midlandscoms@nhs.net](mailto:england.midlandscoms@nhs.net). Please note that the mailbox is not routinely monitored out of hours, so always call the pager number first to notify anything out of hours.

The following process and accompanying suggested wording provide a suitable starting point for communicating during an incident.

All communications relating to any cyber attack would be signed off by the Senior Information Risk Owner and Exec lead for IT or their deputy, in conjunction with the ICB Strategic Commander.

#### **Internal**

We need to ensure that all employees expressly know NOT to speak to the media and should direct any enquiries to the communications team. To support this, the following statement should be used;

"Thank you for your question. I am not a designated spokesperson for the ICB. Please contact the ICB's communications team using [licb.communications@nhs.net](mailto:licb.communications@nhs.net) and someone from the team will be able to assist you. If email is compromised you can call xxxx.

## Staff Message

A [minor/major] incident has occurred at [site] at [00:00] on [date].

The incident seems to have been caused by [xxxxxx] and is now being managed by Arden and Gem CSU as they provide IT support to the ICB.

Information updates will be regularly provided to your line manager to keep you informed of progress and any actions you need to take as individuals.

If your devices are connected to the network using a physical connection/cable you must immediately disconnect them by unplugging them. Wi-fi connection has already been disabled. We will notify you when it is safe to reconnect your devices and the safe methods of doing so.

If you are approached for comment on this matter please direct enquiries to the communications team on [licb.communications@nhs.net](mailto:licb.communications@nhs.net) for a coordinated response.

## External

***Liaison may be required with NHS England for national incidents which require unified communications. We would also consider cross referencing to the Information Commissioner's Office (ICO) [Information Commissioner's Office \(ICO\)](#) and National Security Centre [National Cyber Security Centre - NCSC.GOV.UK](#).***

This is the initial statement that is used by the communications team until all facts have been confirmed:

"We are aware that an incident has occurred and we are currently investigating it and putting measures in place to deal with it. All possible resources are being utilised to manage this event.

NHS Lincolnshire Integrated Care Board takes the security and privacy of our networks very seriously and we have robust plans in place to deal with incidents of this nature. Our top priority is being able to continue to provide high-quality, safe services to our patients during this time.

We will provide additional information at our next briefing at [time] at the [location] or further information will be available from [who] on [phone number]."

## Official

Further proactive statements will be developed as more information is known, timescales for resolution are identified and when systems are back up and running.

### **Sample message for website**

NHS Lincolnshire Integrated Care Board has been the subject of a cyber-attack on some of our electronic systems. As a precaution, some of the software we use has been taken offline whilst we investigate.

We are working closely with xxxxxxxx to restore services and to ensure that we only reconnect systems when it is safe to do so. This is standard practice for a complex incident of this nature, so it may take some time but we are working to resolve this as quickly as possible

As with any cyber-attack, there is an ongoing investigation to fully understand the impact. Both xxxxxxxx and the ICB will comply with the strict requirements around reporting concerns about data.

On behalf of NHS Lincolnshire Integrated Care Board, I apologise for the impact this has had on you. We will provide you with an update as soon as we have more details or the situation is resolved.

## Appendix 4 – Communications in terrorism related incidents

During terrorism related incidents special arrangements exist with regards to the publication of information relating to the incident and subsequent investigations. Counter Terrorism policing will usually take the communications lead in these incidents, with messages also cleared at the highest levels of government.

The term Operation Plato is used by the emergency services during a response to a suspected marauding armed terrorist attack (MTA). This would be declared by the police and advised to other responding agencies. In such operations, specialist Police units would seek to secure the incident scene, enabling other responders to treat any casualties.

During active Operation Plato responses communications will be limited due to the available information and risk to the public of misinformation. All communications to staff and the public should be made by the police, or reflect approved communications issues by the police or multi-agency communications cell.

NHS organisations should not disclose information about their response to the incident, in particular casualty numbers or deceased, as this could make their organisation a target for ongoing terrorist activity. Organisations may need to release information about ongoing access to services, temporary closure of facilities and alternatives, but this should be agreed by the police or multi agency communications cell prior to issue.