

# Major Incident Communications Plan

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1.0	New document		Tom Grove	August 2021

# Major Incident Communications Plan

**This plan sets out the arrangements for both preparing in advance and managing communication systems during an emergency situation to ensure that the right people receive the right message(s) at the right time.**

**It forms part of the CCG's overall communications and engagement approach and supports the organisation's warning and informing responsibilities.**

## Equality Statement

Herefordshire and Worcestershire CCG aim to design and implement policy documents that meet the diverse needs of our services, population, and workforce, ensuring that none are placed at a disadvantage over others. It takes into account current UK legislative requirements, including the Equality Act 2010 and the Human Rights Act 1998, and promotes equal opportunities for all. This document has been designed to ensure that no-one receives less favourable treatment due to their personal circumstances, i.e. the protected characteristics of their age, disability, sex, gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy, and maternity. Appropriate consideration has also been given to gender identity, socio-economic status, immigration status and the principles of the Human Rights Act.

In carrying out its functions, Herefordshire and Worcestershire CCG must have due regard to the Public Sector Equality Duty (PSED). This applies to all the activities for which Herefordshire and Worcestershire CCGs are responsible, including policy development, review, and implementation.

## 1 Introduction

### 1.1 Background

- 1.1.1. Good public communications is one of the most vital elements to get right when an emergency / major incident occurs. The key communications objective must be to deliver accurate, clear, well informed and timely information so that the public are aware of what is going on and they feel confident and safe.
- 1.1.2. Communicating with patients, members of the public and partner agencies is also a requirement outlined in the Civil Contingencies Act (2004) which places a duty on Category 2 responders to warn and inform members of staff and the public.
- 1.1.3. This plan contains the management process for NHS Herefordshire and Worcestershire Clinical Commissioning Group (CCG) before, during and after an emergency, whether a business continuity, critical or major incident has happened. Please also refer to the CCG Business Continuity Plan, EPRR Policy and Incident Management plan for further guidance.
- 1.1.4. Communications during a regional emergency will follow the regional communications protocols.

## 1.2 Aim

- 1.2.1. The aim of this plan is to outline the procedures to provide a coordinated and controlled response to the media following the declaration of a major incident.

## 1.3 Objectives

- 1.3.1. To communicate with patients, members of the public, staff, partner agencies, other organisations and the media before, during and after an emergency / major incident.
- 1.3.2. To communicate accurately, clearly, and timely so all stakeholders feel safe and well informed.
- 1.3.3. To identify key roles and responsibilities.
- 1.3.4. To ensure agreement is reached between partner organisations prior to the publication of any information to the media.
- 1.3.5. To ensure all partner organisations take responsibility to communicate promptly with their internal stakeholders involved in the incident.
- 1.3.6. To identify clear channels of communication between partner organisations who are involved in the incident.

## 1.4 Definition

- 1.4.1. An emergency / major incident is an event or situation that requires the implementation of special arrangements by one or all of the Category 1 responders for:
  - The initial treatment, rescue and transport of a large number of casualties
  - The involvement either directly or indirectly of large numbers of people
  - The handling of a large number of enquiries likely to be generated both from the public and the news media, usually to the Police
  - The need for the large-scale combined resources of two or more of the emergency services
  - The mobilisation and organisation of the emergency services and supporting organisations, e.g. local authority, to cater for the threat of death, serious injury or homelessness to a large number of people
- 1.4.2. For the NHS, a major incident is any occurrence which presents a serious threat to the health of the community, disruption to the service, or causes (or is likely to cause) such numbers or types of casualties as to require special arrangements to be implemented by hospitals, ambulance services or health authorities.
- 1.4.3. If it is considered that any one of the criteria outlined in the major incident definition given above has been satisfied, then a major incident may be declared by:
  - An officer from one of the Emergency Services
  - A Local Authority or Health Service Chief Executive, or nominated deputy.
- 1.4.4. Not all incidents will be regarded as a major incident to all organisations and there may also be occasions where this plan needs to be activated without an emergency being declared as it is scalable and adaptable.

## 1.5 Stakeholders

1.5.1 The CCG have many stakeholders that it will need to communicate with if a major incident occurs. These are identified as:

- Staff including those from shared services and partnership working
- Patients, families and carers both in the community and acute settings
- Members of the public even if they are not in direct receipt of services at the time
- Associated organisations such as:
  - Service user support groups
  - Carer support groups
  - Advocacy groups
  - Voluntary Sector Community
  - Worcestershire Health Overview and Scrutiny Committee
  - Herefordshire Adults Health and Wellbeing Scrutiny Committee
  - Herefordshire and Worcestershire Health and Wellbeing Boards
  - Local Authorities (including district councils)
  - Social Care Services
  - Neighbouring Clinical Commissioning Groups
  - Worcestershire Acute Hospitals NHS Trust
  - Wye Valley NHS Trust
  - Herefordshire and Worcestershire Health and Care NHS Trust
  - Taurus Healthcare
  - SW Healthcare
  - Primary Care Networks (PCNs)
  - West Mercia Police
  - Herefordshire and Worcestershire Fire Service
  - West Midlands Ambulance Service NHS Foundation Trust
  - NHS England
  - MPs / local Councillors
  - Herefordshire and Worcestershire Healthwatch organisations

(list not exhaustive)

## 1.6 Activation

1.6.1. The term 'emergency / major incident' must not be used until it is designated as such.

1.6.2. When an emergency / major incident is declared, the initial stages are often chaotic, and depending upon the location and the time of day, it is likely that the media will hear of the incident at the same time as those agencies responding to it.

1.6.3. The decision to activate this plan will be taken by either the Chief Executive or the Accountable Emergency Officer.

1.6.4. The Associate Director of Communications and Engagement or Head of Communications and Engagement will act as the lead and will issue an initial holding statement as soon as possible following the incident being declared.

- 1.6.5. The communications leads from other agencies will ensure that all key stakeholders are identified.
- 1.6.6. The exact content of the holding statement will be determined by the nature of the emergency / major incident but will include, as far as possible, the following:
- Exact location
  - Exact time
  - What is happening
  - Type of incident
  - Level of emergency service response
  - Emergency contact number (if appropriate / available)
  - Any urgent warning or advice to public or media
  - Site of media liaison RV point if appropriate
  - Media enquiry telephone number if available or details of arrangements being put in place for media enquiries and likely timescale
  - Arrangements for a media centre if appropriate
  - Whether a TCG/SCG has been initiated and lead agency
- 1.6.7. On-call officers from each organisation are responsible for contacting their senior communications lead in line with their own internal procedures.
- 1.6.8. The Communications Team will work with the Emergency Accountable Officer or EPRR Lead to establish a systematic process for tracking information flows which will inform the Media Briefing Centre and any additional cells.

## **1.7 Plan maintenance and Review**

- 1.7.1. The Communications Team will take responsibility for reviewing this plan and ensuring it is kept up-to-date with the correct information.
- 1.7.2. The plan will be reviewed half yearly or earlier if a change in circumstances or procedures takes place.

# **2 Management Functions**

## **2.1 Roles and Responsibilities**

- 2.1.1. Executive Directors on Call will hold emergency contact information for all other Executive Directors.
- 2.1.2. Senior Management Team / General Managers / Team Leaders will:
- Hold emergency contact information for all team members within their service area or department
  - Nominate a deputy who can also access this information.
- 2.1.3. CCG Communications Team will work closely with the Executive Director on call during a local emergency or major incident.
- 2.1.4. A member of the CCG Communications Team will act as the senior media advisor

and will be responsible for issuing all media briefings.

2.1.5. All CCG staff must:

- Inform their line manager of any changes to their contact details held by the CCG
- Report any incident they feel may present a local emergency to their line manager or the appropriate manager on call.

## **2.2 Media Liaison**

2.2.1. The senior media advisor will identify media spokespeople within the organisations involved in the major incident.

2.2.2. Depending upon the location and the size of the incident, the senior media advisor may set up a central press office.

2.2.3. The senior media advisor will ensure the timely and effective dissemination of key messages to the media and all organisations involved.

2.2.4. Assistance in staffing the central press office may be required depending upon the level of incident. This support may need to come from other organisations involved.

2.2.5. Consideration will need to be given to ensure there are sufficient resources to cater for the following:

- Incoming media enquiries
- Dissemination of media statements
- Regular contact with control centres of the emergency services, local authorities, and other organisations involved.

## **2.3 Media Briefing Centre**

2.3.1. In a major incident, thought must be given to setting-up a media briefing centre. The location of this ideally should be close to the incident site but not where it will hinder rescue or jeopardise safety.

2.3.2. In the event of the need for a media briefing centre, the key criteria will include:

- Space to accommodate journalists
- Easy access to key road networks
- Suitable parking facilities
- Good power and telecommunications connections.

2.3.3. The media briefing centre will be managed by the senior media advisor and will take the main burden of dealing with the media. The centre will provide a regular flow of information to alleviate media speculation.

2.4.3. Once the centre has been established, the senior media advisor will ensure notification is given to the media officers of other organisations involved. Other media officers may be asked to attend the centre.

2.4.4. The media briefing centre will require the following areas:

- An area for media representatives to prepare their reports and receive

- information from media briefing centre staff
- Briefing area for formal press updates and / or conferences
- Room for internal staff

## **2.5 Liaison with Central Government**

2.5.1. A major incident will result in requests for ministerial briefing and statements. The Communications Team will be responsible for handling any ministerial briefings through the usual channels with NHS England.

## **2.6 Media Debriefing**

- 2.6.1 Where there has been a considerable amount of media attention, there will be different viewpoints on how this should have been handled.
- 2.6.2. Some weeks after the major incident, all communications representatives involved in the incident will meet to discuss how the media was managed and to identify any lessons to be learned, particularly in relation to future incident response communications.

# **3 Information Management**

## **3.1 Communicating with Staff and Stakeholders**

- 3.1.1. It is important staff are updated as soon as possible, using the most appropriate method. More than one method may be used, but it is important that the message remains consistent. The options are:
- Mass email to all CCG employees
  - Limited email to a number of staff e.g. Governing Body Members, Executive Team using a distribution list or group.
  - The Hub updated with new information regularly for all staff to log on to
  - Face to Face briefing from a member of the Executive Team
  - Message cascade within teams via WhatsApp
- 3.1.2. Depending upon the nature of the major incident, some methods of communication will be more preferable than others.
- 3.1.3. To avoid the risk of misinforming staff with incorrect information, all communication to staff must be approved by the Associate Director of Communications and Engagement or the Head of Communications and Engagement.
- 3.1.4 All staff are required to adhere to the CCG Social Media Policy (see: Appendix 1) at all times, even during a major incident.

## **3.2 Communicating with the Media**

- 3.2.1. An emergency situation where there are casualties or where there is a human-interest story will attract newspaper, radio and television. To ensure factual messages are disseminated through the media, the Communications Team will follow an approval process.
- 3.2.2 The Communications Team holds a list of local and regional contacts for issuing

information and press release as appropriate.

- 3.2.2. Any media statements will be sent out by the senior media advisor once they have been approved.
- 3.2.3. After the initial holding statement has been issued confirming the major incident, there will be numerous press enquiries asking for further information such as number of casualties. The following information should only be released to the media after full consultation between all organisations involved in the major incident:
  - Casualties – number and types of injuries
  - Dead – numbers and causes of death
  - Incident cause
  - Persons involved – may have criminal / security implications
  - Specific advice to public
  - Specialist assistance / personnel
  - Security issues
- 3.2.4. The media will welcome any factual statements, particularly from eyewitnesses – it is essential that all staff from all organisations involved are aware of their individual media protocols when dealing with journalists.
- 3.2.5. There will be great pressure from journalists to obtain interviews with staff involved with the incident and also survivors / relatives. All interviews should be managed through the media briefing centre and interviewees should be supported and advised on how to prepare a statement.
- 3.2.6. It is important to develop good relationships with media personnel and set out how they will be updated from the outset of any major incident.
- 3.2.7. All media enquiries will be recorded by the media briefing centre.
- 3.2.8. All statements released must be recorded with date / time / issued to so the Communications Team can monitor what has been issued.

### **3.3 Websites**

- 3.3.1. The CCG Communications Team will post any information on the CCG website, providing regular updates about the major incident. Any press releases and additional information given to the media will also be updated on the website.
- 3.3.2. Any press releases and information updates will need to be shared with partner organisations and uploaded to their websites to maximise the flow of information being provided to the public.

## **4 Appendices**

Appendix 1 - Social Media Policy

# Appendix 1 - Social Media Policy

## 1. Introduction

NHS Herefordshire and Worcestershire Clinical Commissioning Group (CCG) strongly supports the use of social media as a positive communication channel to provide members of the public with information about what we do and the services we commission.

This policy, which has been extracted from the NHS England social media policy and tailored for the CCG provides guidance for all Herefordshire and Worcestershire CCG staff on the use of social media and attributed digital content. For the purpose of this policy, the definition of social media is websites and applications that enable users to create and share content or to participate in social networking. This should be broadly understood, for the purposes of this policy, to include Twitter, Facebook, Instagram and LinkedIn, however the same principles can be applied to other social media and digital platforms such as blogs, forums, online articles and online surveys. It seeks to give direction to CCG staff in the use of these tools and help them to understand the ways they can use social media to help achieve business goals.

The CCG uses social media to provide opportunities for genuine, open, honest and transparent engagement with stakeholders; giving them a chance to participate and influence decision making. These tools are used to build online communities and networks in which the CCG plays the role of facilitating peer to peer interactivity. We are keen to support and facilitate our staff to use social media to promote the work of the CCG and to encourage patient, public and stakeholder involvement in our work.

## 2. Purpose and scope

The purpose of this policy is to:

- Provide guidelines for using the CCG's corporate social media accounts.
- Provide advice for CCG staff using their own work-related social media accounts.
- Be clear about the CCG's stance on the use of social media for professional use.

The objective is to make sure that everyone connected with Herefordshire and Worcestershire CCG can use social media in a way that protects them and the reputation of the CCG.

The aims of this document are to:

- Provide clarity to staff on the use of social media tools when acting independently or as a representative of the CCG and give them the confidence to engage effectively
- Ensure that the organisation's reputation is not brought into disrepute and that it is not exposed to legal risk; and
- Ensure that audiences are able to distinguish official corporate CCG information from the personal opinion of staff.

### 3. Duties and responsibilities

This policy should be read in conjunction with the Information Governance Handbook, which is available on the CCG website and sets out acceptable use of social media for all CCG employees.

This policy applies to all staff employed by Herefordshire and Worcestershire CCG or who are associated with, or represent the CCG; including Governing Body members, those on temporary or honorary contracts, on secondments, bank staff, students and independent contractors.

This document is not a social media strategy, or guidance on how to use individual social media tools and platforms. Each business area should assess the value of using these tools in an official capacity and follow this policy if they decide to do so.

### 4. Principles for use

The CCG will use social media platforms such as Twitter and Facebook to communicate clearly, quickly and in an engaging manner to people interested in our work.

The CCG's Twitter account will be managed by the Communications Team. CCG staff, following agreement from their line managers and the Communications Team, can also tweet about the CCG using their own professional twitter accounts. A professional account is defined as a social media account whereby the user identifies themselves as a member of CCG staff and publishes posts about their work. The purpose of a professional account would be to raise the CCG's profile, engage with a specific professional or public audience or increase transparency around CCG work. Each application for a CCG professional account will be considered individually by the Communications Team.

The CCG Facebook account will be managed and updated by the Communications Team. CCG Staff can follow and 'like' the page and share posts.

The Communications Team will update and monitor the CCG social media accounts in accordance with guidelines agreed with the CCG.

Content delivered will include (but is not limited to):

- Links to news releases, blog posts, videos, guidance and other approved, publicly available NHS materials.
- Links to relevant information produced and published elsewhere (work of other NHS organisations, patient organisations, researchers, news organisations and others). This can include videos, blog posts, and retweets (RTs) or shares from other social media users. (See below for our policy on RTs).
- Prompts for people to complete CCG or NHS surveys.
- Interesting facts, quotes or observations related to our work.
- Topical questions related to our work intended to provoke discussion.
- Live updates from CCG and NHS events.

- Links to vacancies within the CCG.

## 5. Participating in online activities

Staff are our best ambassadors. Many already use social media, interactive and collaborative websites and tools, both in a personal and professional capacity. Rather than try to restrict this activity, the CCG wishes to embrace it as a demonstrable element of our commitment to a culture of openness. The Communications Team will provide guidance and training to empower staff to interact online in a way that is credible, consistent, transparent, relevant and safe.

We recognise that there is an increasingly blurred line between what was previously considered 'corporate social networking', which could be useful to the business, and 'social networking', which is for personal use, to an extent where it may no longer be possible, or desirable, to make that distinction. For example, there is a tendency for people to maintain just one Twitter account, which is used to post a mixture of business related and personal content.

However, posts made through personal accounts that are public can be seen, and may breach organisational policy if they bring the organisation into disrepute. This includes situations in which an individual could be directly or indirectly identifiable as a CCG employee whilst using social networking tools; or occasions when an individual may be commenting on CCG related matters on Twitter.

Staff should exercise caution when posting any content on social media using their private accounts even if there is no direct reference to their employment with the CCG on either their profile or the content they have posted. Employees should be mindful that any behaviour that may damage the reputation of the CCG, is defamatory or brings the organisation into disrepute may result in an investigation and subsequent disciplinary sanction under the CCG Disciplinary Policy.

## 6. Guidance

Staff should use their own discretion and common sense when using social media tools. The following guidance gives some general rules and best practices which should be abided by at all times:

- Know and follow standards and conduct that are expected of all CCG staff. These same principles and guidelines that apply to staff activities in general also apply to online activities.
- Employees are personally responsible for the content they publish on social media. Staff should be mindful that what they publish will be public for a long time. When online, staff should use the same principles and standards that they would apply to communicating in other media with people they do not know.
- Staff should identify themselves by giving their name and, when relevant, role at the CCG if they are discussing the CCG or CCG related matters. Staff should write in the first person and must make it clear that they are speaking for themselves and not on behalf of the CCG.
- Be aware that followers may be colleagues, clients, journalists or suppliers. It is also

possible that people may not be who they say they are and staff should bear this in mind when participating in online activities.

- Respect copyright, fair use, data protection, defamation, libel and financial disclosure laws.
- Do not provide the CCG or another's confidential or other proprietary information on social media. Do not publish or report on conversations that are private or internal to the CCG.
- Do not cite or reference partners or suppliers.
- Do not publish any patient information in accordance with the Data Protection legislation and the Health and Social Care Act 2012.
- Do not give any individual health advice, instead signpost people to official sources such as the CCG, NHS111 or their own GP.
- Respect the audience. Do not use personal insults, obscenities, or engage in any conduct that would not be acceptable in the workplace. Staff should also show proper consideration for others' privacy and for topics that may be considered objectionable or inflammatory, such as politics and religion.
- Don't use social media in any way to attack or abuse colleagues. The same principles and guidelines of the CCG's Dignity and Respect at Work policy also apply to online activities. This policy is available on The Hub.
- Staff should be aware of their association with the CCG when using online social networks. If staff identify themselves, or are identifiable, as an employee of the organisation, they should ensure their profile and related content is consistent with how they wish to present themselves to colleagues and stakeholders. Staff should be aware that they may be identified as an employee by any public use of their NHSmail email address.
- Staff should refrain from entering any online social networking activity for commercial gain when using their professional account.
- If staff are contacted by a representative of the media about posts they have made, they should contact the Communications Team in the first instance via [hw.comms@nhs.net](mailto:hw.comms@nhs.net). Out of hours please call the on-call manager for advice.
- If staff have made a mistake, they should not be confrontational, but aim to be the first to correct it.
- Try to add value. Provide worthwhile information and perspective. The NHS brand is well respected and enhanced by its people. What staff choose to publish may reflect on the CCG's reputation or the NHS as a whole.
- Staff who have concerns about their position on any of the issues covered by this policy should contact the Communications Team via [hw.comms@nhs.net](mailto:hw.comms@nhs.net).

## 7. Establishing an official presence on social media

It is important that the time and effort staff spend on social media is justified by the value to the business. Social networking platforms can offer many opportunities to reach specific audiences but there are also potential pitfalls which staff must be careful to avoid.

If a member of staff wishes to establish a CCG presence on Twitter they must seek approval from their line manager and discuss the proposal with the Communications Team in the first

instance. The Communications Team will provide advice on the types of things they will need to consider, such as: time and resources needed to implement, timeframes, risks and issues, exit strategy and how to link this activity to the overall business plan for a programme or business area, and stakeholder consultation and approvals.

Unauthorised social media accounts or blogs on behalf of the CCG's services, programmes or individuals will be closed down by the Communications Team.

## **8. Retweets or sharing of posts**

Tweets that the CCG retweet or posts that are shared do not imply endorsement on the part of the CCG. If staff choose to share posts, they need to be aware that this might not be endorsed by the wider organisation.

The CCG may retweet or share news, links and personal observations that are relevant to the work of the CCG. These may be from patients, other NHS organisations, partner organisations, third sector organisations and interested individuals, such as NHS colleagues, partners, health service policy makers and activists, local and national politicians and Department of Health personnel.

Inappropriate messages or content promoting commercial organisations products and services should not be retweeted or shared, and we must not show favouritism to political parties and/or politicians.

## **9. Social media as a source of official policy**

Social media posts should not be considered as the authoritative source of new policy from the CCG. Any change or evolution in the CCG's official position on legislation, guidance, investigations and audits will be communicated through more traditional channels: official publications and statements on the CCG website, speeches, and media releases.

Importantly, our decision to share posts should not be taken as explicit endorsement of any position or argument that may vary from the CCG's current official position, nor should it be taken as an indication of a possible shift in the current official position.

## **10. Following other social media users**

The CCG's decision to follow a particular social media user does not imply endorsement of any kind. The CCG follows accounts on social media we believe are relevant to our work. This could include following the social media accounts of companies and other commercial enterprises (and/or their employees) who comment on CCG related issues.

## **11. @replies and direct messages**

The Communications Team will read all comments, @Replies and Direct Messages sent to the team and, when possible, will respond to them as appropriate following consultation with the respective department.

**Freedom of Information (FOI) requests:** When an FOI request is received via social media, the Communications Team will acknowledge the request by responding with: “Thank you for your enquiry. Please provide your contact details to the following address for a formal acknowledgement and response.” The Communications Team will refer the request to the FOI team and Corporate Governance Manager. The FOI team will respond to the request using the contact details provided and will notify the recipient when the FOI response is completed. The response to the FOI will be published on the CCG website and the Communications Team will inform the individual publicly on the channel they have used that the FOI has been completed and include a link to the published FOI on the website.

**Complaints and contact of a personal and sensitive nature:** The Communications Team will advise members of the public that the CCG is not able to manage complaints or comments that include personal or sensitive information via social media and will request that the individual sends details of their complaint to the Complaints Team. The individual will then be contacted directly by the Complaints Team.

Formal complaints and contact of a personal or sensitive nature can be made to the Complaints Team via the website online form or by writing to or calling the CCG on the contact details listed on the CCG website.

## 12. Dealing with prolific and/or negative users

The CCG reserves the right to not respond should a user be overly prolific, consistently negative, or use abusive or offensive language. If necessary, the Communications Team will also recommend that the account – professional or personal – be closed down.

If concerns are raised about the work of the CCG, the Communications Team will provide a link to any statements the CCG has produced on the discussion topic. Wherever possible, the CCG will also incorporate social media into communications plans to ensure it is being proactively used.

## 13. Monitoring compliance and effectiveness

The Communications Team will be responsible for monitoring compliance with, and the effectiveness of, this policy. Monitoring may include:

- Following or ‘liking’ relevant staff accounts using the CCG’s social media accounts.
- Tracking the use of keywords, such as the CCG’s name or relevant topics, on social media platforms.
- In exceptional circumstances, observing individuals accounts to protect CCG and/or NHS reputation.

The CCG’s policies apply to all forms of communication, whether verbal, in print or online. Staff should remember that they are ultimately responsible for what they publish online and that there can be consequences if policies are broken.

Non-compliance with the policies associated with this guidance may lead to disciplinary action in accordance with the CCG Disciplinary Policy. Staff are reminded that actions

online can be in breach of their contract of employment.

## **14. Countering Fraud**

CCG employees should be aware of the consequences of using social media platforms to post content which conflicts with information provided to the CCG, including their health and fitness to work and secondary employment (for example, posting evidence of undertaking unapproved secondary employment whilst receiving sick pay from the CCG). If an instance such as this occurs, an employee may be subject to criminal or disciplinary proceedings, which could result in dismissal.