



THE STATE HOSPITALS BOARD FOR SCOTLAND

EXTERNAL WEBSITE MAINTENANCE & DEVELOPMENT POLICY

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Revised Date	13 December 2022	
Next Review Date	27 April 2025	
Accountable Executive Director	Chief Executive	

The date for review detailed on the front of all State Hospital policies/ procedures/ guidance does not mean that the document becomes invalid from this date. The review date is advisory and the organisation reserves the right to review a policy/ procedure/ guidance at any time due to organisational/legal changes.

Staff are advised to always check that they are using the correct version of any policy/ procedure/ guidance rather than referring to locally held copies.

The most up to date version of all State Hospital policies/ procedures/ guidance can be found on the intranet: <http://intranet.tsh.scot.nhs.uk/Policies/Policy%20Docs/Forms/Category%20View.aspx>

REVIEW SUMMARY SHEET

No changes required to policy (evidence base checked)

Changes required to policy (evidence base checked)

Summary of changes within policy

April 2022 review

Now includes reference to disclosure protocols.

December 2022 update

As a result of the undernoted Standard Operating Procedures being developed and implemented in November 2022, the policy has been updated to reflect this - point 5, Roles & Responsibilities, page 5 refers.

Standard Operating Procedures

A Standard Operating Procedure (SOP) entitled 'CGC Annual Report Redaction' has been developed in respect of annual reports and 12 monthly update reports presented to the Clinical Governance Committee that are subsequently published on the State Hospital's external website. The SOP outlines redaction requirements and subsequent process undertaken by the Head of Clinical Quality.

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1. POLICY STATEMENT

Effective communications remains a key priority on the Board's agenda. It is understood that an integrated approach to effective communication, as part of an open and honest culture, is essential to the success of the Hospital. There is a duty to keep external stakeholders informed of activity and decisions not only through the Annual Review process but through regular communications that are clear and understandable.

The State Hospital's Website remains a quality key communication tool for external stakeholders. It enables the Hospital to report on performance and ensures legislative requirements are met. In particular:

- Freedom of Information (Scotland) Act 2002.
- Public Services Reform (Scotland) Act 2010.
- Section 149 of the Equality Act 2010 (the public sector equality duty) and The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012.

2. INTENTION

To provide guidance relating to the creation, maintenance and publication of content on The State Hospital's external website – <http://www.tsh.scot.nhs.uk>.

3. SCOPE

This policy and procedure applies to anyone involved with developing or maintaining web pages for The State Hospital's Website. In the main this is the Head of Communications.

The Internet is not a single network, but thousands of individual networks that allow data to pass among them. Generally, any website can be accessed by anyone with a device that has Internet access to the World Wide Web (WWW).

4. DETAILS

The Website offers the general public (including carers / patient visitors, volunteers, official visitors and existing / potential employees) access to a wide range of State Hospital information. For example, dedicated sections include:

- Person Centred, Safe and Effective Care
- Board Business
- Workforce / Jobs & Placements
- Patient Visitors & Carers
- Official Visitors & Contractors
- Freedom of Information
- Consultations
- Latest News & Public Notices
- Public Safety
- Contact Us
- Brexit

The State Hospital's Website has been designed in line with NHS Scotland corporate identity guidelines, local corporate document standards, and complies with Priority 2, level "AA" under the Web Content Accessibility Guidelines - the international standard for accessible websites and content.

The site is supported by a Disclaimer (approved by the Central Legal Office).

5. ROLES AND RESPONSIBILITIES

The Head of Communications is responsible for the operation of The State Hospital's external website as a key e-communications tool for external stakeholders including the general public. This includes responsibility for policy and procedure, design and development of this major information system to meet the specifications of external stakeholders as well as local and national guidance, corporate identity and legislative requirements.

Effective operation of this information system is a major job responsibility, requiring daily use of website software and graphic design software to process, generate, create, update, and store information as a principal activity. Additionally, writing and planning copy, managing contributors and approving content prior to publication as well as driving the e-communications maintenance and development plans, and keeping abreast of technical developments are all key aspects of the role.

The Head of Communications will initiate the contract of a Web Designer when technical development work is required, seek support and advice from the Head of eHealth as required, and ensure own content has undergone appropriate disclosure protocols.

The Head of eHealth is responsible for resolving technical issues and is the main liaison with Scottish Health on the Web (SHOW) as website host.

Procedure for Developing Web Pages

The Head of Communications is responsible for developing and maintaining the web pages as well as publishing to the live site, and is therefore the first point of contact for staff. In the absence of the Head of Communications this role will be undertaken by the eHealth Service Desk.

Content is drafted on a development server prior to being published to the live site.

Staff providing content for the website will need to ensure this has undergone appropriate disclosure protocols prior to sending it to the Head of Communications for publishing.

Standard Operating Procedures

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Governance

The Hospital's Board has governance responsibilities for the Website. The Head of Communications provides updates to the Board as appropriate.

A State Hospital Website Statistics Annual Report (1 April to 31 March) is drawn from Google Analytics.

A State Hospital Communications Annual Report (1 April to 31 March) is presented to the Board each year covering all communications activity including the Website.

6. EQUALITY AND DIVERSITY

The State Hospitals Board (the Board) is committed to valuing and supporting equality and diversity, ensuring patients, carers, volunteers and staff are treated with dignity and respect. Policy development incorporates consideration of the needs of all Protected Characteristic groups in relation to inclusivity, accessibility, equity of impact and attention to practice which may unintentionally cause prejudice and / or discrimination.

The Board recognises the need to ensure all stakeholders are supported to understand information about how services are delivered. Based on what is proportionate and reasonable, we can provide information/documents in alternative formats and are happy to discuss individual needs in this respect. If information is required in an alternative format, please contact the Person-Centred Improvement Lead on 01555 842072.

Line Managers are responsible for ensuring that staff can undertake their role, adhering to policies and procedures. Specialist advice is available to managers to ensure that reasonable adjustments are in place to enable staff to understand and comply with policies and procedures. The EQIA considers the Protected Characteristic groups and highlights any potential inequalities in relation to the content of this policy.

Patient pre-admission assessment processes and ongoing review of individual care and treatment plans support a tailored approach to meeting the needs of patients who experience barriers to communication (e.g. Dementia, Autism, Intellectual Disability, sensory impairment). Rapid access to interpretation / translation services enables an inclusive approach to engage patients for whom English is not their first language. Admission processes include assessment of physical disability with access to local services to support implementation of reasonable adjustments. Patients are encouraged to disclose their faith / religion / beliefs, highlighting any adapted practice required to support individual need in this respect. The EQIA considers the Protected Characteristic groups and highlights any potential inequalities in relation to the content of this policy.

Carers / Named Persons are encouraged to highlight any barriers to communication, physical disability or anything else which would prevent them from being meaningfully involved in the patient's care (where the patient has consented) and / or other aspects of the work of the Hospital relevant to their role. The EQIA considers the Protected Characteristic groups and highlights any potential inequalities in relation to the content of this policy".

The volunteer recruitment and induction process supports volunteers to highlight any barriers to communication, physical disability or anything else which would prevent them from contributing meaningfully to patient care and / or engage in other aspects of the work of the Hospital relevant to their role. The EQIA considers the Protected Characteristic groups and highlights any potential inequalities in relation to the content of this policy.

7. COMMUNICATION, IMPLEMENTATION, MONITORING AND REVIEW OF POLICY

This policy will be communicated to all stakeholders within The State Hospital via the intranet and through the staff bulletin.

The Corporate Management Team (CMT) will be responsible for the implementation and monitoring of this policy.

This policy will be reviewed within three years, however may be refreshed prior to that time, should there be a requirement to update the content.

8. STAKEHOLDER ENGAGEMENT

Key Stakeholders	Consulted (Y/N)
Patients	N
Staff	Y
TSH Board	Y
Carers	Y
Volunteers	Y