CRISIS COMMUNICATION SUPPORTING MATERIALS

Crisis Communication Guidance and Tools

It is essential that clinics incorporate effective crisis communication into their emergency management activities. Crisis communication may serve many different ends, depending on the event: clinic staff and patients may need to be informed about the clinic's response to a natural disaster, such as an earthquake or flood. Patients and the community may need clear instructions and recommendations to stay safe during a communicable disease outbreak. A number of crises may require that the clinic actively defends and maintains its reputation to the community and public at large. The tools and guidance in this packet are designed to help prepare clinics to communicate in a crisis.

What's Included

1. Crisis Communication Training (PDF)
2. Background Materials
   a. Basic Media Training
   b. The 77 Most Frequently Asked Questions by Media Following Crisis Incidents
   c. Risk Perception Factors
   d. RACE Communication Approach
3. Incident-Specific Communication Guidance Sheets
   a. Bomb or Terrorist Threat
   b. Criminal Activity
   c. Earthquake

       d. Evacuation

       e. Fire

       f. Flooding

       g. Hazardous Materials Release

       h. Infant/Child Abduction

       i. Infectious Disease Outbreak

       j. Noteworthy Medical Emergency

       k. Radiological/Chemical Exposure

       l. Shelter-in-Place

       m. Utility Outage

       n. Workplace Violence

4. Communication Guidance Template
5. Communication Plan Template
6. Crisis Communication Wallet Card (sample)
7. News Release Template

Before a Crisis Occurs

Like any element of your emergency management plan, crisis communication requires planning and practice. To prepare to communicate in a crisis, we recommend that you:

1. Review all materials in this packet
2. Tailor the tools in this packet for your facility
    a. Incident-Specific Communication Guidance Sheets
    b. Communication Plan Template
    c. Use the Communication Guidance Template to create additional Incident-Specific Communication Guidance Sheets, if you anticipate events other than those provided for currently
3. Keep a printed copy of all materials with your facility's emergency management plan
    a. Print out multiple copies of the Communication Plan Template for use during a crisis

    b. Make a personal copy of the Crisis Communication Wallet Card and keep it available for quick reference

4. Incorporate crisis communication activities into your facility's disaster exercises – develop communication plans and associated press releases, practice answering media questions, etc.

When a Crisis Occurs

When a crisis occurs:

1. **Review** the Incident-Specific Communication Guidance Sheet that most appropriately addresses the crisis occurring.

2. **Create a communication plan** using the Communication Plan Template. Refer to:

    a. The appropriate Incident-Specific Communication Guidance Sheet

    b. Risk Perception Factors

    c. RACE Communication Approach

3. **Implement your communication plan**.

    a. Use the news release template when developing news releases.

    b. Ensure that any identified media spokespersons have reviewed Basic Media Training and The 77 Most Frequently Asked Questions by Media Following Crisis Incidents before doing media interviews.

4. **Revise your communication plan during the crisis** as necessary, based on feedback and changes to the situation.

5. **Revise your communication protocols after the crisis**, incorporating key lessons learned into your emergency management plan.

Basic Media Training

- **Key Messages:**
  - No more than three key messages and three supporting facts for each key message.
  - Can be in bullet-point format:
    - Message
      - Supporting information
  - Stay "on-message" throughout the interview.
    - Saturate the interview with your key messages. Take every opportunity to repeat your points.

- **What to wear:**
  - A dark suit jacket is ideal.
    - Do not wear a plain white shirt with no tie, unless you have a tan or have a dark complexion.
    - Keep ties simple in color and print.
  - Make sure, if you have long hair, that it is arranged away from your face.

- **How to prepare:**
  - Don't drink milk, caffeine or alcohol before the interview.
  - Practice key messages and bridging with your PIO before the interview. Know your points inside and out.

- **Delivery Tips:**
  - Maintain eye contact with the reporter. Don't look directly at the camera.
  - Try to speak fluidly and with composure. Avoid saying "um," "uh," "like" and other "filler" phrases.
    - Don't ramble.
  - If you feel nervous, focus on breathing deeply from your diaphragm.
  - Deliver information "inverted pyramid"-style:
    - Deliver most important, "high-level" information first, followed by supporting details in descending order of importance.
  - Speak in sound bites.
    - Say your message in a 5-to-10-second sound bite. Say any more, and run the risk of having your message edited, or left on the cutting room floor.
  - Be conversational, confident, concise and patient. Never get defensive or let a reporter get "under your skin."

- There is no such thing as "off the record." Never tell a reporter anything you would not like to see on the front page of the New York Times.
- **Answering Questions:**
  - Have prepared ahead of time answers to the 5 most likely and 5 toughest questions the reporter could ask. Remember, for every question, no more than three key messages and three pieces of supporting information per key message.
  - Do not repeat negative information (spoken by the reporter when framing the question) when giving your answers. It could be used out of context.
  - Do not speculate or answer questions outside of your responsibility.
  - Never say, "No comment." If you don't know the answer to a question, say so. Tell the questioner that you will get back to him/her with the answer. Get his/her name and number, and follow up.
  - Follow this format: **Answer-transition-key message**. Don't let the reporter take the interview in a direction that is not relevant to your messages.
    - Bridging (Transition) Techniques
      - Always respond to the question that you are asked, then, within your response, you can use a transitional phrase to make another key point or to redirect the session back to one of your key messages.
        Here are some examples of possible transitions that will get the discussion back in the direction you want it to go:
        - "The bottom line is..."
        - "The key thing to remember is..."
        - "The point that is really important in all this is..."
        - "I do want to make a point..."
        - "I can't speculate on that but what I can tell you is..."
        - "On the contrary..."
        - "And that is just a reaffirmation of..."
        - "I'm not the right person to answer that question, but I can refer you to the expert. What I can tell you is..."

Some materials in this guide were accessed from Firefyi.org—a free resource for the firefighting industry:

Media training. (n.d.). Retrieved from http://www.firefyi.org/training/

The 77 Most Frequently Asked Questions
by Media Following Crisis Incidents

Recent research conducted by the Center for Risk Communication and other groups indicates that questions and concerns raised by stakeholders in emergency situations can be identified in advance.

The following is a list of the 77 most frequently-asked questions by journalists during a crisis. The list was generated by researching a large database of questions posed by journalists at news conferences immediately following a disaster and distilling the larger list into 77 questions. This is an excellent resource for identifying potential questions for which message maps should
be developed.

1. What is your name and title?
2. What are your job responsibilities?
3. What are your qualifications?
4. Can you tell us what happened?
5. When did it happen?
6. Where did it happen?
7. Who was harmed?
8. How many people were harmed?
9. Are those that were harmed getting help?
10. How certain are you about this information?
11. How are those who were harmed getting help?
12. Is the situation under control?
13. How certain are you that the situation is under control?
14. Is there any immediate danger?
15. What is being done in response to what happened?
16. Who is in charge?
17. What can we expect next?
18. What are you advising people to do? What can people do to protect themselves and their families – now and in the future – from harm?
19. How long will it be before the situation returns to normal?
20. What help has been requested or offered from others?
21. What responses have you received?
22. Can you be specific about the types of harm that occurred?
23. What are the names of those that were harmed? Can we talk to them?

24. How much damage occurred?
25. What other damage may have occurred?
26. How certain are you about damages?
27. How much damage do you expect?
28. What are you doing now?
29. Who else is involved in the response?
30. Why did this happen?
31. What was the cause?
32. Did you have any forewarning that this might happen?
33. Why wasn't this prevented from happening?
34. Could this have been avoided?
35. How could this have been avoided?
36. What else can go wrong?
37. If you are not sure of the cause, what is your best guess?
38. Who caused this to happen?
39. Who is to blame?
40. Do you think those involved handled the situation well enough? What more could/should those who handled the situation have done?
41. When did your response to this begin?
42. When were you notified that something had happened?
43. Did you and other organizations disclose information promptly? Have you and other organizations been transparent?
44. Who is conducting the investigation? Will the outcome be reported to the public?
45. What are you going to do after the investigation?
46. What have you found out so far?
47. Why was more not done to prevent this from happening?
48. What is your personal opinion?
49. What are you telling your own family?
50. Are all those involved in agreement?
51. Are people over-reacting?
52. Which laws are applicable?
53. Has anyone broken the law?
54. How certain are you about whether laws have been broken?
55. Has anyone made mistakes?
56. How certain are you that mistakes have not been made?
57. Have you told us everything you know?
58. What are you not telling us?
59. What effects will this have on the people involved?
60. What precautionary measures were taken?
61. Do you accept responsibility for what happened?
62. Has this ever happened before?
63. Can this happen elsewhere?
64. What is the worst-case scenario?
65. What lessons were learned?
66. Were those lessons implemented? Are they being implemented now?

67. What can be done now to prevent this from happening again? What steps need to be taken to avoid a similar event?
68. What would you like to say to those who have been harmed and to their families?
69. Is there any continuing danger?
70. Are people out of danger? Are people safe? Will there be inconvenience to employees or to the public?
71. How much will all this cost?
72. Are you able and willing to pay the costs?
73. Who else will pay the costs?
74. When will we find out more?
75. Have these steps already been taken? If not, why not?
76. Why should we trust you?
77. What does this all mean?

This resource was accessed from the U.S. Environmental Protection Agency Web site (http://www.epa.gov/nhsrc/news/news040207.html):

Covello, V., Minamyer, S., & Clayton, K. (2007). *Effective risk and crisis communication during water security emergencies: Summary report of EPA sponsored message mapping workshops*. Retrieved from http://www.epa.gov/nhsrc/pubs/600r07027.pdf

Risk Perception Factors

1) **Voluntariness:** Risks perceived to be involuntary or imposed are less readily accepted and perceived to be greater than risks perceived to be voluntary.

2) **Controllability:** Risks perceived to be under the control of others are less readily accepted and perceived to be greater than risks perceived to be under the control of the individual.

3) **Familiarity:** Risks perceived to be unfamiliar are less readily accepted and perceived to be greater than risks perceived to be familiar.

4) **Equity:** Risks perceived as unevenly and inequitably distributed are less readily accepted than risks perceived as equitably shared.

5) **Benefits:** Risks perceived to have unclear or questionable benefits are less readily accepted and perceived to be greater than risks perceived to have clear benefits.

6) **Understanding:** Risks perceived to be poorly understood are less readily accepted and perceived to be greater than risks from activities perceived to be well understood or self-explanatory.

7) **Uncertainty:** Risks perceived as relatively unknown or that have highly uncertain dimensions are less readily accepted than risks that are relatively known to science.

8) **Dread:** Risks that evoke fear, terror, or anxiety are less readily accepted and perceived to be greater than risks that do not arouse such feelings or emotions.

9) **Trust in institutions:** Risks associated with institutions or organizations lacking in trust and credibility are less readily accepted and perceived to be greater than risks associated with trustworthy and credible institutions and organizations.

10) **Reversibility:** Risks perceived to have potentially irreversible adverse effects are less readily accepted and perceived to be greater than risks perceived to have reversible adverse effects.

11) **Personal stake:** Risks perceived by people to place them personally and directly at risk are less readily accepted and perceived to be greater than risks that pose no direct or personal threat.

12) **Ethical/moral nature:** Risks perceived to be ethically objectionable or morally wrong are less readily accepted and perceived to be greater than risks perceived not be ethically objectionable or morally wrong.

13) Human vs. natural origin. Risks perceived to be generated by human action are less readily accepted and perceived to be greater than risks perceived to be caused by nature or "Acts of God."

14) **Victim identity:** Risks that produce identifiable victims are less readily accepted and perceived to be greater than risks that produce statistical victims.

15) **Catastrophic potential:** Risks that produce fatalities, injuries, and illness grouped spatially and temporally are less readily accepted and perceived to be greater than risks that have random, scattered effects.

These materials adapted from:

Covello, V. T., Peters, R. G., Wojtecki, J. G., & Hyde, R. C. (2001). Risk communication, the West Nile Virus epidemic, and bioterrorism: Responding to the communication challenges posed by the intentional or unintentional release of a pathogen in an urban setting. *Journal of Urban Health: Bulletin of the New York Academy of Medicine, 78*(2), 382-391.

CRISIS COMMUNICATION BACKGROUND MATERIALS

RACE Communication Approach

#1. Communication Goal and Target Audiences

#2. Research
- Issues
    - What information is publicly known about the situation?
    - Who is affected by the situation?
    - What conflicts, controversies, or problems exist within the situation?
- Audience characteristics
    - What are this audience's current attitudes and concerns about the situation?
    - How has this audience been/will this audience be impacted by the situation?
    - What challenges does this audience face in the situation?
    - What communication variables exist within this audience?

#3. Action Planning
- Message construction
- Message delivery channel(s)

#4. Communication
- Execute action plans
- Address feedback
    - Message construction
    - Message delivery channel(s)

#5. Evaluation

- Did your message get across?

- Did you present your main points?

Incident-Specific Communication Guidance Sheets

GUIDANCE: BOMB OR OTHER TERROIST THREAT

General Communication Issues
Your facility's communication role • Communicate regarding the facility's preparation for and response to terrorism and terrorist threats • Communicate the facility's ability to provide services in light of the terrorist threat • Communicate the facility's role in terrorist threat investigation (cooperating with authorities; internal investigation)

Coordination with/referrals to outside entities
 	
• Law enforcement
 	
    o Communicate about response to and investigation of the terrorist threat
 	
    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication? • The facility is supporting investigations and is committed to doing all it can to ensure that terrorist acts do not occur at the facility • The facility is a responsible employer • The facility responded to the terrorist threat competently • The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means
Five likely questions 1. Is the situation under control? 2. What are you advising people to do? What can your staff, clients and the community do to protect themselves and their families – now and in the future – from harm? 3. What is being done in response to the terrorist threat? 4. When will the facility be able to provide normal services? 5. What are you going to do after the investigation?

Communicating with target audiences

1. **Facility staff**
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

2. **Facility patients**
Communication goal(s):

- Patients feel safe at the facility

- Sense of "clinic community" is fostered/maintained between clients and facility

- Patients understand the impact of the terrorist threat on facility services, and return to receive care at the facility when appropriate

3. **Community**
Communication goal(s):

- Community feels the facility responded to the terrorist threat appropriately

- Community feels that the clinic provides effective patient care

- Community feels that the clinic is a responsible employer

- Community understands the impact of the terrorist threat on facility services

GUIDANCE: CRIMINAL ACTIVITY

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to criminal activity

- Communicate the crime's impacts to the facility's ability to provide services

- Communicate the facility's role in crime investigation (cooperating with authorities; internal investigation)

Coordination with/referrals to outside entities

- Law enforcement

    o Communicate about response to and investigation of the crime

    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility is a responsible employer
- The facility is supporting investigations and is committed to doing all it can to ensure that the crime does not happen again
- The facility responded to the crime competently
- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

6. Why wasn't the crime prevented?

7. What would you like to say to those who have been harmed and to their families?

8. What is being done in response to the crime?

9. When will the facility be able to provide normal services?

10. What are you going to do after the investigation?

Communicating with target audiences

4. Facility staff
Communication goal(s):

- Staff feels safe at the facility
- Staff understands how quickly the facility will resume normal services
- Sense of "clinic community" is fostered/maintained among facility staff and leadership

5. Facility patients
Communication goal(s):

- Patients feel safe at the facility
- Patients return to receive care at the facility when appropriate

6. Community
Communication goal(s):

- Community feels the facility responded to the crime appropriately
- Community feels that the clinic provides effective patient care
- Community feels that the clinic is a responsible employer
- Community understands how quickly the facility will resume normal services

GUIDANCE: EARTHQUAKE

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to the earthquake
- Communicate the impacts of the earthquake on the facility's ability to provide services

Coordination with/referrals to outside entities

- Local emergency management office (if earthquake is widespread or has major impacts on the community) – may include representatives from public health, law enforcement, fire, public works, water/sewer districts, transportation agencies, care and shelter agencies and the American Red Cross

    o Communicate about earthquake's impacts on the community and response efforts

    o Communicate information using news releases, media interviews, public alerting systems

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility handled the earthquake competently, regarding staff/client safety above all else
- The facility is committed to doing all it can to mitigate impacts from future earthquakes
- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

11. How did the earthquake impact the people at the facility (injuries, etc.)?
12. How did the earthquake impact the facility (damage, other losses, etc.)?
13. When will the facility be able to provide normal services?
14. Could this have been avoided?
15. Did those involved handle the earthquake well enough? What more could/should those who handled the earthquake have done?

Communicating with target audiences

7. Facility staff
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

8. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Patients understand how to receive care during the facility's recovery from the earthquake

- Patients return to receive care at the facility when appropriate

- Sense of "clinic community" is fostered/maintained between patients and facility

9. Community
Communication goal(s):

- Community feels the facility responded to the earthquake appropriately

- Community understands how quickly the facility will resume normal services

GUIDANCE: EVACUATION

General Communication Issues
Your facility's communication role • Communicate regarding the facility's preparation for evacuations and its evacuation response • Communicate the evacuation's impacts to facility's ability to provide services

Coordination with/referrals to outside entities
 	
• Local law enforcement/fire department
 	
    ○ Communicate about evacuation response
 	
    ○ Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication? • The facility handled the evacuation competently, regarding staff/client safety above all else • The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means
Five likely questions

16. What necessitated the evacuation? Was it preventable?

17. Were there any injuries, damage or other losses associated with the evacuation?

18. When will the facility be able to provide normal services?

19. Did those involved handle the evacuation well enough? What more could/should those who handled the evacuation have done?

20. What lessons were learned through this experience?

Communicating with target audiences

10. Facility staff
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

11. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Patients understand how to receive care during the facility's response to the evacuation

- Patients return to receive care at the facility when appropriate

- Sense of "clinic community" is fostered/maintained between patients and facility

12. Community
Communication goal(s):

- Community feels the facility evacuation was appropriate and performed effectively

- Community understands how quickly the facility will resume normal services

GUIDANCE: FIRE

General Communication Issues

Your facility's communication role

- Communicate the fire's impacts to facility's ability to provide services

- Communicate facility's role in fire investigation (cooperating with authorities; internal investigation)

Coordination with/referrals to outside entities

- Fire Department

  - Communicate about fire response and investigation

  - Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility handled the fire competently, regarding staff/client safety above all else

- The facility is supporting investigations and is committed to doing all it can to ensure that a facility fire does not happen again

- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

21. What caused the fire? Was it preventable?

22. How did the fire impact the people at the facility (injuries, etc.)?

23. How did the fire impact the facility (damage, other losses, etc.)?

24. When will the facility be able to provide normal services?

25. What are you going to do after the investigation?

Communicating with target audiences

13. Facility staff
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Staff understands the impacts of the fire on work schedules

14. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Patients understand how to receive care during the facility's recovery from the fire

- Patients return to receive care at the facility when appropriate

15. Community
Communication goal(s):

- Community feels the facility responded to the fire appropriately

- Community understands how quickly the facility will resume normal services

GUIDANCE: FLOODING

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to flooding
- Communicate the impacts of flooding on the facility's ability to provide services

Coordination with/referrals to outside entities

- Local emergency management office (if flooding is widespread or has major impacts on the community) – may include representatives from public health, law enforcement, fire, public works, water/sewer districts, transportation agencies, care and shelter agencies and the American Red Cross

    o Communicate about overall flooding response, including:

        ▪ Evacuation of impacted populations

        ▪ Impacts on water supply and sewer systems

        ▪ Impacts on transportation systems

        ▪ Impacts on utilities

    o Communicate information using news releases, media interviews, public alerting systems

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility handled the flooding competently, regarding staff/client safety above all else
- The facility is committed to doing all it can to mitigate impacts of future flooding
- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

26. How did the flooding impact the people at the facility (injuries, etc.)?

27. How did the flooding impact the facility (damage, other losses, etc.)?

28. When will the facility be able to provide normal services?

29. Could this have been avoided?

30. Did those involved handle the flooding well enough? What more could/should those who handled the flooding have done?

Communicating with target audiences
16. Facility staff Communication goal(s): • Staff feels safe at the facility • Staff understands how quickly the facility will resume normal services • Sense of "clinic community" is fostered/maintained among facility staff and leadership **17. Facility patients** Communication goal(s): • Patients feel safe at the facility • Patients understand how to receive care during the facility's recovery from the earthquake • Patients return to receive care at the facility when appropriate • Sense of "clinic community" is fostered/maintained between patients and facility **18. Community** Communication goal(s): • Community feels the facility responded to the flooding appropriately • Community understands how quickly the facility will resume normal services

GUIDANCE: HAZARDOUS MATERIALS RELEASE

General Communication Issues
Your facility's communication role • Communicate regarding the facility's preparation for and response to the hazardous materials release • Communicate the facility's role in investigation of the hazardous materials release (cooperating with authorities; internal investigation) • Communicate the facility's ability to provide services in light of the hazardous materials release

Coordination with/referrals to outside entities
 	
• Law enforcement/fire department
 	
    o Communicate about response to and investigation of the hazardous materials release
 	
    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication? • The facility is a responsible employer

- The facility responded to the hazardous materials release competently

- The facility is supporting investigations and is committed to doing all it can to ensure that hazardous materials releases do not happen again

- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

31. Why wasn't the hazardous materials release prevented?

32. What would you like to say to those who have been harmed and to their families?

33. What is being done in response to the hazardous materials release?

34. When will the facility be able to provide normal services?

35. What are you going to do after the investigation of the hazardous materials release?

Communicating with target audiences

19. Facility staff
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

20. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Patients return to receive care at the facility when appropriate

21. Community
Communication goal(s):

- Community feels the facility responded to the hazardous materials release appropriately

- Community feels that the clinic provides effective patient care

- Community feels that the clinic is a responsible employer

- Community understands how quickly the facility will resume normal services

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to the abduction

- Communicate the abduction's impacts to the facility's ability to provide services

- Communicate the facility's role in abduction investigation (cooperating with authorities; internal investigation)

Coordination with/referrals to outside entities

- Law enforcement

    o Communicate about abduction response and investigation

    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility responded to the abduction competently

- The facility is supporting investigations and is committed to doing all it can to ensure that an abduction does not happen again

Five likely questions

36. Why wasn't the abduction prevented from occurring?

37. What would you like to say to those who have been harmed and to their families?

38. What is being done in response to the abduction?

39. When will the facility be able to provide normal services?

40. What are you going to do after the investigation?

Communicating with target audiences

22. Facility staff
Communication goal(s):

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

23. Facility patients
Communication goal(s):

- Patients' parents and guardians feel their children are safe at the facility

24. Community
Communication goal(s):

- Community feels the facility responded to the abduction appropriately

- Community feels that the clinic provides effective patient care

GUIDANCE: INFECTIOUS DISEASE OUTBREAK

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to the infectious disease emergency

- Communicate the impacts of the infectious disease outbreak on the facility's ability to provide services

- Advise patients and community members on how to protect themselves and their loved ones from infection

- Advise patients and community members on appropriate actions if they think they have become infected

Coordination with/referrals to outside entities

- Local emergency management office (if outbreak is widespread or has major impacts on the community) – may include representatives from public health, law enforcement, fire, public works, water/sewer districts, transportation agencies, care and shelter agencies and the American Red Cross

  - Communicate about outbreak's impacts on the community and response efforts

  - Communicate information using news releases, media interviews, public alerting systems

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility is handling the infectious disease outbreak competently, regarding staff/client safety above all else

- The facility is committed to doing all it can to mitigate impacts from future infectious disease outbreaks

- The facility provides effective patient care

- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

41. What are you advising people to do? What can people do to protect themselves and their families – now and in the future – from harm?

42. What is your facility doing in response to the outbreak?

43. Are those involved handling the infectious disease outbreak well enough? What more could/should those who are handling the infectious disease outbreak do?

44. Is the situation under control? How long will it be until the situation returns to normal?

45. How certain are you about this information?

Communicating with target audiences

25. Facility staff
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

26. Facility patients
Communication goal(s):

- Patients take appropriate protective actions against the infectious disease outbreak

- Patients feel safe at the facility

- Patients understand how to receive care during the infectious disease outbreak

- Sense of "clinic community" is fostered/maintained between patients and facility

27. Community
Communication goal(s):

- Community feels that the facility is responding to the infectious disease outbreak appropriately

- Community feels that the facility provides high levels of patient care

GUIDANCE: NOTEWORTHY MEDICAL EMERGENCY

General Communication Issues

Your facility's communication role

- Communicate the facility's role in responding to the medical emergency

Coordination with/referrals to outside entities

- Other healthcare providers (e.g., local hospital)

  - Communicate about response to the medical emergency

  - Uses news releases and media interviews

- Other entities connected to the noteworthy medical emergency (may be connected through the patient, service provider, etc.)

  - May communicate about the patient, about the medical devices used, etc.

  - Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility's response to the medical emergency was appropriate

- The facility provides a high level of patient care

- The facility coordinates effectively with other partners in the healthcare system

Five likely questions

46. What is being done in response to the medical emergency?

47. Is the situation under control?

48. Who is in charge?

49. Did you have any forewarning this might happen?

50. If you are not sure of the cause, what is your best guess?

Communicating with target audiences

28. Facility staff
Communication goal(s):

- Facility staff feel connected to the facility

- Facility staff support the facility's response to the medical emergency

29. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Patients return to receive care at the facility

- Patients feel that the facility coordinates effectively with other partners in the healthcare system

30. Community
Communication goal(s):

- Community feels the facility responded to the medical emergency appropriately

- Community feels that the facility provides a high level of patient care

- Community feels that the facility coordinates effectively with other partners in the healthcare system

GUIDANCE: RADIOLOGICAL/CHEMICAL EXPOSURE

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to the exposure

- Communicate the facility's role in exposure investigation (cooperating with authorities; internal investigation)

- Communicate the facility's ability to provide services in light of the exposure

Coordination with/referrals to outside entities

- Law enforcement/fire department

    o Communicate about response to and investigation of the exposure

    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility is supporting investigations and is committed to doing all it can to ensure that exposures do not happen again

- The facility responded to the exposure competently

- The facility is a responsible employer

- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

51. Why wasn't the exposure prevented?

52. What would you like to say to those who have been harmed and to their families?

53. What is being done in response to the exposure?

54. When will the facility be able to provide normal services?

55. What are you going to do after the investigation?

Communicating with target audiences

31. Facility staff
Communication goal(s):

- Staff feels safe at the facility

- Staff understands how quickly the facility will resume normal services

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

32. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Patients return to receive care at the facility when appropriate

33. Community
Communication goal(s):

- Community feels the facility responded to the exposure appropriately

- Community feels that the clinic provides effective patient care

- Community feels that the clinic is a responsible employer

- Community understands how quickly the facility will resume normal services

General Communication Issues
Your facility's communication role • Communicate regarding the facility's preparation for sheltering in place and its shelter in place response • Communicate the impacts of sheltering in place to facility's ability to provide services

Coordination with/referrals to outside entities
 	
• Local law enforcement/fire department
 	
    o Communicate about reasoning for sheltering in place and other response elements
 	
    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication? • The facility handled the shelter in place order competently, regarding staff/client safety above all else • The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means
Five likely questions 56. What necessitated sheltering in place? Was it preventable? 57. Were there any injuries, damage or other losses associated with sheltering in place? 58. When will the facility be able to provide normal services? 59. Did those involved handle sheltering in place well enough? What more could/should those who handled sheltering in place have done? 60. What lessons were learned through this experience?

Communicating with target audiences
34. Facility staff Communication goal(s): • Staff feels safe at the facility • Staff understands how quickly the facility will resume normal services • Staff understands the impacts of sheltering in place on work schedules   **35. Facility patients** Communication goal(s): • Patients feel safe at the facility • Outside patients understand how to receive care while the facility is sheltering in place • Patients return to receive care at the facility when appropriate • Sense of "clinic community" is fostered/maintained between patients and facility   **36. Community** Communication goal(s): • Community feels facility responded effectively to the shelter in place order • Community understands how quickly the facility will resume normal services

GUIDANCE: UTILITY OUTAGE

General Communication Issues
Your facility's communication role • Communicate regarding the facility's preparation for and response to the utility outage • Communicate the utility outage's impacts to facility's ability to provide services

Coordination with/referrals to outside entities
 	
• Utility company
 	
    o Communicate about utility outage response and investigation
 	
    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication? • The facility handled the utility outage competently, regarding staff/client safety above all else • The facility is committed to mitigating impacts of any future utility outages • The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

61. What caused the utility outage? Was it preventable?

62. How did the utility outage impact the people at the facility (injuries, etc.)?

63. How did the utility outage impact the facility (damage, other losses, etc.)?

64. When will the facility be able to provide normal services?

65. Did those involved handle the earthquake well enough? What more could/should those who handled the earthquake have done?

Communicating with target audiences

37. Facility staff
Communication goal(s):

- Staff understands how quickly the facility will resume normal services

38. Facility patients
Communication goal(s):

- Patients understand how to receive care during the facility's response to the utility outage

- Patients return to receive care at the facility when appropriate

39. Community
Communication goal(s):

- Community feels the facility responded to the utility outage appropriately

- Community understands how quickly the facility will resume normal services

GUIDANCE: WORKPLACE VIOLENCE

General Communication Issues

Your facility's communication role

- Communicate regarding the facility's preparation for and response to the workplace violence incident

- Communicate the facility's role in workplace violence incident investigation (cooperating with authorities; internal investigation)

- Communicate the facility's ability to provide services in light of the workplace violence incident

Coordination with/referrals to outside entities

- Law enforcement

    o Communicate about response to and investigation of the workplace violence incident

    o Uses news releases and media interviews

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- The facility responded competently to the workplace violence incident

- The clinic provides effective patient care

- The clinic is a responsible employer

- The facility is supporting investigations and is committed to doing all it can to ensure that workplace violence does not happen again

- The facility is committed to ensuring clients receive care, whether through the facility directly or through alternate means

Five likely questions

66. Why wasn't the workplace violence incident prevented?

67. What would you like to say to those who have been harmed and to their families?

68. What is being done in response to the workplace violence incident?

69. When will the facility be able to provide normal services?

70. What are you going to do after the investigation?

Communicating with target audiences

40. Facility staff
Communication goal(s):

- Staff feel as comfortable as possible with returning to work

- Sense of "clinic community" is fostered/maintained among facility staff and leadership

- Staff understands how quickly the facility will resume normal services

41. Facility patients
Communication goal(s):

- Patients feel safe at the facility

- Sense of "clinic community" is fostered/maintained between patients and the facility

- Patients return to receive care at the facility when appropriate

42. Community
Communication goal(s):

- Community feels that the facility responded to the workplace violence incident appropriately

- Community feels that the clinic provides effective patient care

- Community feels that the clinic is a responsible employer

- Community understands how quickly the facility will resume normal services

Communication Guidance Template

GUIDANCE: EVENT TYPE

General Communication Issues

Your facility's communication role

- Facility's role in communicating about the event

Coordination with/referrals to outside entities

- Other agencies/entities that will be communicating about the event
    - Those entities' communication responsibilities
    - Those entities' delivery channels

Overall communication goal(s): What do you want the audience to think or feel based on your communication?

- Describe overall communication goal(s) for the event

Five likely questions

1. Top five questions likely to be asked about the event
2.
3.
4.
5.

Communicating With Target Audiences

1. **Target audience**

Communication goal(s):

- List specific communication goals for target audience

2. **Target audience**

Communication goal(s):

- List specific communication goals for target audience

3. **Target audience**

Communication goal(s):

- List specific communication goals for target audience

Communication Plan

Event Name:

_____

Step One: Communication Goal

What is your communication goal?

_____

_____

_____

Who are your target audiences?

    1. _____

    2. _____

    3. _____

Step Two: Research

Issue Analysis

What is known about the issue?

_____

_____

_____

_____

What remains unknown about the issue?

_____

_____

_____

_____

What outside sources will the facility refer its audiences to for additional information?

_____

_____

_____

Communication Plan

Event Name:

_____

Target Audience Analysis

Audience Perception Factors	Audience 1	Audience 2	Audience 3
Current attitudes and concerns			
Impacts on the audience			
Challenges the audience faces			
Communication variables			

Communication Plan

Event Name:

_____

Step Three: Action Planning

	Top Three Key Messages	Delivery Channels (including spokespersons)
Audience 1	1. 2. 3.	
Audience 2	1. 2. 3.	
Audience 3	1. 2. 3.	

Crisis Communication Wallet Card (sample)

Crisis Communication in Seven Steps CPCA
California Primary Care Association

1) Define your target audience
2) Define your communication goal: *What do you want your audience to think or feel?*
3) Research: Understand the issues and how your audience will experience the situation
4) Construct your message using key message attributes
5) Select delivery channels
6) Communicate and address feedback
7) Evaluate the effectiveness of your approach and adjust if necessary

Caring/Empathy

Honesty/Openness Commitment/Dedication

Competence/Expertise
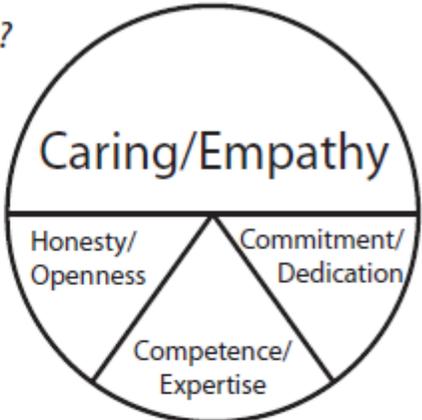
Key Message Attributes

Seven Tips for Media Interviews CPCA
California Primary Care Association

1) Prepare answers to the five most likely and five toughest questions a reporter could ask.
2) Use this format: **Answer-transition-key message.** Do not let the reporter take the interview in a direction that is not relevant to your messages.
3) Say your message in a five-to-10-second sound bite.
4) Use no more than three key messages and three supporting facts for each key message.
5) Never say "No comment."
6) Do not speculate or answer questions outside of your responsibility.
7) Do not repeat negative information (spoken by the reporter when framing the question) when giving your answers.

CPCA
California Primary
Care Association

CirclePoint®
The *whole* view.

CRISIS COMMUNICATION SUPPORTING MATERIALS

News Release Template

News Release For Immediate Release (insert date)	Your name Your organization Phone number FAX number E-mail address

[Insert Headline]

(Insert city, Calif.) – This is the leading paragraph. It should contain the most basic, important information: Who, what, where, when, why and how.

The following paragraphs should flesh out additional/supporting information, in order of importance (greatest-to-least).

A quote from a credible source within your organization will usually be included in the third paragraph, or thereafter. Format quotes should be as follows:
"Quote," said [insert name and title]. "Finish quote, if needed."

-more-
(Signals a continuance of your news release onto the next page. Do not split paragraphs.)

The last paragraph of every news release is called the boilerplate. It should include general information about the purpose and history of your organization (3-4 sentences, maximum) and should be the same for all news releases.

# # #
(Signals the end of your news release)