**SOCIAL MEDIA POLICY**

*Please be aware that this printed version of this document may NOT be the latest version. Please refer to the internet for the latest version.*

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| **Accessibility**  This document can be made available on request from the communications department in other styles, formats, sizes, languages and media in order to enable anyone who is interested in its content to have the opportunity to read and understand it. These alternatives include but are not limited to:   * Alternative languages and dialects * Larger and smaller print options (font 8 to 18) * Simplified versions including summaries and translation into symbols * Audio or read versions * Web-based versions that can be zoomed into or shrunk on screen |

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| **Document Manager:** | Tamsin May, Deputy Director of Communications and Engagement | **Document Sponsor:** | Julie-Anne Wales, Director of Corporate Affairs |

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| Purpose: | The CCG strongly supports the use of social media as a positive communication channel to not only enable a dialogue with the public, but also as a means for providing members of the public with information about what it does and the services it commissions. This policy provides guidance for all NHS BSW CCG colleagues on the use of social media. |
| Key information: | Use of the CCG social media accounts is reserved for the Communications and Engagement Team and follows strict parameters.  The Communications and Engagement Team routinely monitors CCG social media accounts and responds to comments during working hours.  Comments that raise issues of concern are taken offline where possible, with reference to the PALS and Complaints service. Freedom of Information requests are identified and passed to the FOI Team.  No official CCG posts/comments/blogs endorse or appear to endorse external organisations or products except those working closely alongside the CCG e.g. NHS institutions and local partners.  No Personal Confidential Data or commercially sensitive data is posted on CCG social media accounts.  Colleagues are encouraged to interact with CCG’s social media accounts but must be aware they are responsible for the content. Colleagues discussing matters related to the CCG must be clear that although they are an employee, they are not speaking on behalf of the organisation.  No contacts from media organisations are responded to using social media and the Communications and Engagement Team are notified if any colleague is approached.  All instances of the CCG being cited negatively in personal social media posts/blogs identified by colleagues are reported to the Communications and Engagement Team. |
| Specific colleagues/  teams: | Applies to colleagues employed directly by the CCG, but also covers those people who may be associated with or represent the CCG, such as Governing Body members, colleagues on temporary contracts, those on secondment, students, graduate trainees and independent contractors. |
| Tables/  Flowcharts: | Section 3.2 provides guidance for colleagues when using their own social media accounts. |

# CONTENTS

[1.0 INTRODUCTION & PURPOSE 6](#_Toc45809103)

[2.0 SCOPE & DEFINITIONS 7](#_Toc45809104)

[3.0 PROCESS/REQUIREMENTS 7](#_Toc45809105)

[4.0 ROLES & RESPONSIBILITIES 1](#_Toc45809106)1

[5.0 TRAINING 11](#_Toc45809107)

[6.0 EQUALITY AND DIVERSITY 1](#_Toc45809108)2

[7.0 SUCCESS CRITERIA / MONITORING EFFECTIVENESS 1](#_Toc45809109)2

[8.0 REVIEW 1](#_Toc45809110)3

[9.0 REFERENCES AND LINKS TO OTHER DOCUMENTS 1](#_Toc45809111)3

[10.0 REVIEW HISTORY 1](#_Toc45809112)4

[11.0 ACKNOWLEDGEMENT OF EXTERNAL SOURCES / ASSISTANCE 1](#_Toc45809113)4

[12.0 LINKS WITH OTHER CCG DOCUMENTS 1](#_Toc45809114)4

[Appendix A – How to deal with persistent and repetitive comments 1](#_Toc45809115)5

[Appendix B – Social Media Flow Chart 1](#_Toc45809116)6

[Appendix C – Evaluation Standard 1](#_Toc45809118)7

**SOCIAL MEDIA POLICY**

# 1.0 INTRODUCTION & PURPOSE

1.1 This policy should be read in conjunction with the following policies and strategies:

* Information Governance Framework
* Confidentiality and Safe Haven Policy
* Freedom of Information Act Policy
* Communications and Engagement Strategy
* Acceptable Use of IT Policy
* Freedom to Speak Up Policy

1.2 This policy provides guidance for all NHS Bath and North East Somerset, Swindon and Wiltshire (BSW) Clinical Commissioning Group (CCG) colleagues on the use of social media.   
  
The contents of this policy mainly apply to the use of Facebook, Twitter, Instagram and LinkedIn, however, colleagues should still refer to this document when using other social media platforms.   
  
It seeks to give direction to CCG colleagues in the use of these tools as a member of the organisation, while also helping them understand how social media can help achieve BSW CCG’s vision.

1.3 Social media is now a recognised part of everyday life, with the vast majority of people and organisations now having some sort of online presence.   
  
It gives the CCG excellent options for fast, dynamic and no- or low-cost engagement with our people and communities, while supporting our values, including innovation, collaboration, accountability and inclusivity.

1.4 Regular activity on social media provides the CCG with the opportunity to raise its profile among the people we buy healthcare services for.

We can spread and share messages quickly with our partners and stakeholders, build ‘communities’ of followers, sit within and listen to communities that already exist, and ultimately offer our local populations the chance to help shape local health services.

Social media can also allow us to reach out to and engage directly with some traditionally harder-to-reach groups in the community.

1.5 The CCG is keen for colleagues to be proud advocates of their work and to share and celebrate organisational successes with as many people as possible.

Social media provides an effective channel for this to happen.

1.6 The CCG strongly supports the use of social media as a positive communication channel to not only enable a dialogue with the public, but also as a means for providing members of the public with information about what it does and the services it commissions.

This can be especially important during a major event, crisis or other occurrence that involves rapidly changing situations.

1.7 The goal of this policy is to make sure that everyone connected with the CCG feels comfortable using social media in a way that protects them, while maintaining and, wherever possible, enhancing the reputation of the organisation.

1.8 The aims of this document are:

* To provide colleagues with clarity on the differences between using social media in a personal capacity and using it as an employee of the CCG.
* To ensure that the organisation’s reputation is protected and that it is not exposed to legal risk.

# 2.0 SCOPE & DEFINITIONS

2.1 This document gives guidance and rules for colleagues using social media on behalf of BSW CCG (i.e. creating or posting content directly to the organisation’s corporate accounts) or if they have self-identified as an employee of the organisation.   
  
It specifically applies to colleagues employed directly by the CCG, but also covers those people who may be associated with or represent the CCG, such as Governing Body members, colleagues on temporary contracts, those on secondment, students, graduate trainees and independent contractors.

2.2 This document is not a social media strategy, nor a ‘how-to’ guide for specific social media platforms.

Colleagues wishing to learn more about how to use specific social media sites, how to set up a professional social media profile or improve an existing one, should speak to the Campaigns and Digital Manager: [sarah.pritchard6@nhs.net](mailto:sarah.pritchard6@nhs.net)

# 3.0 PROCESS/REQUIREMENTS

**3.1 How the Communications and Engagement Team will use social media**

3.1.1 The Communications and Engagement Team are responsible for managing BSW CCG’s public-facing social media accounts, including Facebook, Twitter, Instagram and LinkedIn.  
  
This includes generating engaging content that highlights the work of the CCG, while encouraging our people and communities to ‘converse’ with us across these platforms.

The Team also monitors and responds to comments and messages submitted to its social media channels, with the support of other CCG teams that have the relevant expertise.   
  
The Team will also use social media to support our partner organisations with campaigns and promotions that align with the CCG’s interests and values, such as health awareness days and winter flu campaigns.

Regular analytics and analysis will be performed on each of the CCG’s social media platforms to review performance, audience size and provide feedback to BSW colleagues that demonstrate our commitment to digital communication.

3.1.2 All CCG social media accounts will be managed exclusively by the Communications and Engagement Team.

3.1.3 CCG colleagues are encouraged to interact with the CCG’s online activities by liking and following the corporate accounts.

3.1.4 When an issue of concern is raised through social media, the Communications and Engagement Team will attempt to resolve the matter quickly by liaising with relevant CCG colleagues for advice and guidance.   
  
Where this is not possible, people raising concerns will be advised to contact the Patient Advice and Liaison Service, as this not only ensures the concern is logged and recorded in the appropriate way, but it prevents any back-and-forth conversation between the CCG and the individual, which is visible to other members of the public.

Some general advice about dealing with persistent and repetitive comments is included as Appendix A. A flow chart, which illustrates the process, is included as Appendix B.

3.1.5 Content includes, but is not limited to:

* Promotion of and links to CCG news releases, projects, consultations, surveys, public meetings and other CCG-led activities
* Information and updates about health and care services across the region, including any crisis/serious issues or events
* Links to news releases, blog posts, videos, guidance and other approved, publicly available NHS and Public Health England material
* Links to relevant information produced and published elsewhere (work of other NHS organisations, our stakeholders and partners, patient organisations, researchers, news organisations and others)
* Interesting facts, quotes or observations related to the CCG’s work including specific information or updates from teams within the CCG;
* Topical questions related to the CCG’s work intended to answer public queries and/or provoke discussion;
* Live tweets from key events such as the AGM, and other events as suitable.

**3.2 Guidelines for personal accounts**

3.2.1 Colleagues should use their own discretion and common sense when using social media.

Colleagues are welcome and encouraged to identify that they work for BSW CCG in their personal profiles. This is a helpful way of showing the different ‘faces’ of the CCG and humanises the work we do. This does not mean that colleagues are automatically ‘representing’ the views or the work of the CCG, however, it does mean that some inferences about their content can be made.

These points should be borne in mind by anyone who acknowledges their employment at BSW CCG:

* You are responsible for the content you publish on social media and should bear in mind that all content posted online is likely to remain in the public domain indefinitely;
* If you are discussing matters related to the CCG, you should use you real name and make it clear that although you are an employee, you are not speaking on behalf of the organisation;
* Do not break copyright, fair use, data protection, defamation, libel and financial disclosure laws;
* Do not publish any information which could identify a patient;   
    
  This includes, but is not limited to: NHS numbers, names, email and physical addresses and details of care or treatment.
* Do not publish any commercially sensitive information;   
    
  This includes, but is not limited to: details of business transactions, details of privately held conversations and information about organisational plans and ventures.
* If an Information Governance breach does occur, e.g. commercially sensitive or patient identifiable information is posted on social media, remove it and then fulfil your duty to report the incident in line with the CCG’s IG Incident Reporting Procedure. Guidance on this can be found on the CCG intranet [Information Governance page](https://intranet.bswccg.nhs.uk/about-bsw-ccg/information-governance).
* Please remember that you are ultimately responsible for what you publish online and that there may be serious consequences including disciplinary action, if the CCG’s policies are not complied with. The actions you take online could be considered to be in breach of your contract of employment and could in some cases constitute harassment.
* Be mindful that in sharing another user’s post, doing so does not create the impression of CCG endorsement or recognition;
* Do not provide any kind of health advice or information, even if qualified to do so. Instead, you should signpost to official sources such as NHS Choices, NHS 111 or an individual’s own GP;
* Never use obscene, offensive or derogatory language, regardless of whether it is directed toward another user or not;
* Be mindful that the content you post under your name has the potential to be seen by colleagues and other stakeholders;
* If a member of the press tries to make contact on social media about a matter relating to the CCG – its work, employees or any other issue, you should refrain from responding and inform the Communications and Engagement Team as soon as possible.

**3.3 Social media as a source of official policy**

3.3.1 Social media posts should not be considered as the authoritative source of new policy from the CCG.   
  
While the CCG may use social media as a supplementary means of advertising change, official announcements will continue to be made through more traditional channels, such as a statement on the CCG website or an article in a CCG-branded newsletter.

3.3.2 The CCG’s decision to follow a particular account or user does not imply endorsement of any kind.

**3.4 Managing prolific and/or consistently negative posts or users**

3.4.1 The CCG reserves the right not to respond to any users, particularly those who are prolific, consistently negative or known to use offensive language.   
  
Communicating with users such as these can have a detrimental impact on the CCG’s on and offline reputation.

3.4.2 Colleagues who have concerns about their position on any of the issues covered in this policy should contact the Campaigns and Digital Manager.

3.4.3 If any colleague feels they are being targeted online and/or need support with online abuse or negative comments or attention, please contact a member of the Communications and Engagement team for advice. You can also refer to the CCG’s wellbeing resources, which can be found [here](https://intranet.bswccg.nhs.uk/hr/health-and-wellbeing/my-wellbeing-and-available-support) on the CCG intranet. Equally, the [Employee Assistance Programme](https://intranet.bswccg.nhs.uk/hr/health-and-wellbeing/employee-assistance-programme-eap) is available to colleagues for anonymous, impartial advice and counselling services.

# 4.0 ROLES & RESPONSIBILITIES

4.1 Updates and monitoring of accounts:

The Communications and Engagement Team will update and monitor the CCG’s social media accounts in accordance with the agreed guidelines as above.

4.2 Direct replies and messages:

The Communications and Engagement Team will read all replies and direct messages sent to the CCG’s social media accounts and, wherever possible, respond to them in an appropriate and timely fashion.

4.3 FOI requests:

FOI requests can legally be made via social media, and any question that appears to be in this vein should be treated as such.   
  
The Communications and Engagement Team will forward any such requests for information to the CCG FOI team as soon as possible after the question has been received.

4.4 Complaints:

The Communications and Engagement Team will advise members of the public that the CCG is not able to manage complaints through social media and suggest that they contact the Patient Advice and Liaison Service.

4.5 Availability:

The CCG’s social media accounts are routinely monitored during standard office hours, which is weekdays between 9am and 5pm.   
  
There may be occasions when the accounts are monitored during the evenings and weekends (for example during crises), however there is currently no formal arrangement in place for out-of-hours monitoring.

Concerns shared outside working hours are responded to at the earliest opportunity, which is usually at the beginning of the next working day.

# 5.0 TRAINING

5.1 There is no specific training requirement associated with this policy for CCG colleagues. The Communication and Engagement Team will receive appropriate training to operate the CCG social media accounts.

# 6.0 EQUALITY AND DIVERSITY

6.1 An Equality Impact Assessment (EIA) has been completed for this policy and no significant issues were identified.

6.2 It is a statutory and moral objective to meet our Public Sector Apology Duty and the use of social media will enable greater outreach to people, not only of protected characteristics, but our wider local population that we may have traditionally found to be harder to reach.

# 7.0 SUCCESS CRITERIA / MONITORING EFFECTIVENESS

7.1 The CCG Communications and Engagement Team will carry out audits on this policy periodically, to monitor compliance and effectiveness.

7.2 The CCG’s policies apply to all forms of communication, whether verbal, in print or online.

7.3 Colleagues should remember that they are ultimately responsible for what they publish online and that there can be consequences if policies are not complied with.

Non-compliance with the policies associated with this document may lead to disciplinary action in accordance with the CCG’s Disciplinary Policy. Any non-compliance with policy should be reported using the form appended to the Policy for the Development, Approval and Management of Policy Documents.  
  
Colleagues are reminded that actions online can be considered to be in breach of their contract of employment and could in some cases constitute harassment.   
  
Please refer to the CCG Disciplinary Policy and the CCG Standards of Business Conduct Policy for further information.

7.4 An Evaluation Standard is available at Appendix C to audit the CCG and departmental implementation of this policy.

7.5 If any content posted on social media by an employee in any context constitutes a breach of information governance, the CCG’s IG Incident Reporting Procedure will apply and the breach must be reported.

# 8.0 REVIEW

8.1 This policy will be reviewed on a two-yearly basis or when there are changes in legislation, CCG arrangements, and/or national guidance may require the policy to be reviewed prior to the agreed review date.   
  
These reviews and revisions will take place as needed.

# 9.0REFERENCES AND LINKS TO OTHER DOCUMENTS

9.1 This policy should be read in conjunction with the following documents:

# 10.0REVIEW HISTORY

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Version | Review Date | Reviewed By | Changes Required?  (If yes, please summarise) | Changes Approved By | Approval Date |
| V0D1 | Apr’20 | T.May |  |  |  |
| V0D2 | Jul’20 | S.Pritchard | Social media during pandemic |  |  |
| V0D2 | Jul’20 | IGSG | IG incident reporting |  |  |
| V0D3 | Jul’20 | Corp Affairs | Format update; evaluation standard added |  |  |
| V0D6 | Sept | S Pritchard | Format update |  |  |
| V0D7 | November ‘20 | S Pritchard | Addition of accessibility statement, reference to Freedom to Speak Up policy, formatting correction |  |  |

# 11.0ACKNOWLEDGEMENT OF EXTERNAL SOURCES / ASSISTANCE

|  |  |  |
| --- | --- | --- |
| Title/Author/Individual | Institution/Organisation | Comment / Link |
|  |  |  |

# 12.0LINKS WITH OTHER CCG DOCUMENTS

|  |
| --- |
| Document title |
| Communications and Engagement Strategy |
| Information Governance Framework |
| Confidentiality and Safe Haven Policy |
| Acceptable Use of IT Policy |
| Freedom of Information Act Policy |
| Disciplinary Policy |
| Standards of Business Conduct Policy |
| Freedom to Speak Up Policy |

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# Appendix A – How to deal with persistent and repetitive comments

* Generally if someone is complaining, it is wise to acknowledge their dissatisfaction – even simply to say sorry that they are unhappy. Say you would like to help and offer a route to do that, preferably away from the social media platform itself. Offer an email address, for example.
* Be mindful of very specific complaints or issues being raised, carry out internal checks or seek advice from your line manager before responding, in case there has already been offline contact with the CCG e.g. via the Patient Advice and Liaison Service.
* If you are a clinician and a patient is complaining or posting about their health or the health of another individual – do not engage. Patient confidentiality means you must not even confirm that the person is registered at your practice/is a patient of yours.
* If someone is attacking you or your place of employment, unless it is truly offensive ­– in which case, it is best to ignore and in the most extreme circumstances to report to the police – try to be understanding. Offer to pass the comments on to an appropriate person and suggest engaging offline.

It is very unlikely that Twitter will remove content unless you can prove you are a victim of targeted abuse or harassment.

Complaints and concerns are unlikely to be resolved online, in public. The best course of action is almost always to engage in the most minimal way online and carry on a conversation offline.

# Appendix B – Social Media Flow Chart

Comment made on one of BSW CCG’s social media channels

Is the comment…

Leave a public response which apologies for the issue and explains that the situation will be investigated further / passed to relevant provider organisation

Acknowledge comment and thank user for getting in touch

Example: My father is at GWH and has not been offered a drink for 2 days

Yes

No

…negative

Provide contact details for PALS

Acknowledge comment and thank user for getting in touch

Does comment indicate an immediate and serious risk to patient safety or is it highly contentious?

Share comment with relevant colleague and/or Quality Team

Share information with PALS team

Contact the user privately asking for contact details so that a member of PALS can contact them directly

When appropriate, provide a short statement to explain the situation

Communications and Engagement Team will use judgement to decide if contact details for PALS be provided and either…

…positive

Acknowledge comment, thank user for getting in touch

# Appendix C – Evaluation Standard

|  |  |
| --- | --- |
| Policy Name: | Social Media and Attributed Digital Content Policy |

Standard statement

The CCG strongly supports the use of social media as a positive communication channel to not only enable a dialogue with the public, but also as a means for providing members of the public with information about what it does and the services it commissions. This policy seeks to give direction to CCG colleagues in the use of these tools in order to support and achieve business goals, as well as giving advice about the use of personal social media when discussing the CCG.

Criteria - Corporate

1. Use of CCG social media accounts is reserved for the Communications and Engagement Team and follows strict parameters.

2. The Communications and Engagement Team routinely monitors CCG social media accounts and responds to comments between 9am and 5pm on weekdays.

3. Comments raising issues of concern are taken offline where possible, with reference to the PALS and Complaints service.

4. Freedom of Information requests are identified and passed to the FOI Team.

5. No official CCG posts/comments/blogs endorse or appear to endorse external organisations or products other than NHS organisations or partners.

6. No Personal Confidential Data or commercially sensitive data is posted on CCG social media accounts.

Criteria - Departmental

7. All colleagues are aware of and have read the CCG Standards of Business Conduct Policy and understand acceptable behaviours.

8. Any colleague posting or commenting on CCG social media accounts or on their own personal social media accounts is aware that they are responsible for the content.

9. Colleagues discussing matters related to the CCG make it clear that although you are an employee, you are not speaking on behalf of the organisation.

10. Personal Confidential Data or commercially sensitive data is never to be posted on social media accounts and must be deleted immediately if added in error and an IG incident report completed.

11. No contacts from media organisations are responded to using social media and the Communications and Engagement Team are notified if colleagues are approached by the media.

12. All instances of the CCG being cited negatively in personal social media posts/blogs identified by colleagues are reported to the Communications and Engagement Team.

Conclusion

Please explain any discrepancies below:

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| --- |
|  |

Please detail remedial action to prevent re-occurrence, giving details of monitoring arrangements to assess improvement:

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| --- |
|  |

|  |  |
| --- | --- |
| Date of assessment: |  |
| Assessed by: |  |