NOTTINGHAM UNIVERSITY HOSPITALS NHS TRUST

Documentation Control

Social Media Policy

Reference	GG/CM/053
Approving Body	Chief Executive
Date Approved	14 February 2019
Implementation Date	14 February 2019
Version	3
Summary of Changes from Previous Version	This policy has been updated to include the requirements of the General Protection Data Regulation (GDPR) which came into effect in May 2018.
Supersedes	GG/CM/053 – Social Media Policy Version 2 (April 2016)
Consultation Undertaken	Communications Team ICT Head of Equality & DiversityStaff Side Management Board Patient Experience Team Equality & Diversity Lead Patient representatives (via Patient Partnership Group) Research and Innovation Information Governance Committee Ward Managers and Matrons
Date of Completion of Equality Impact Assessment	October 2018
Date of Completion of We Are Here for You Assessment	October 2018

Date of Environmental Impact Assessment (if applicable)	October 2018
Legal and/or Accreditation Implications	Public Records Act 1958 Data Protection Act 1998

	Freedom of Information Act 2000 Equality Act 2010 GDPR 2018
Target Audience	All staff who use online social media. In particular those using social media as part of their role at the Trust.
Review Date	February 2021
Lead Executive	Chief Executive
Author/Lead Manager	Laura Skaife-Knight Director of Communications and External Relations Extension 51026
Further Guidance/Information	Communications Team extension 61975

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1.0	Introduction

1.1	1.1.1 Using Social Media is a cost-effective, method of connecting with a large, interested audience. It offers individuals and organisations the opportunity to engage directly with family, friends, interested parties and other key stakeholders. It gives NUH the ability to collect real time feedback and reply to that feedback instantly. It allows staff and volunteers/PPI representatives the opportunity to share good practice, celebrate success stories and have professional conversations with peers across the NHS and further afield. 1.1.2 This policy sets the standards to be followed by all NUH staff when publishing content to any Social Media channels. This includes through accounts approved for use for work-related subjects or an account used for personal use.

2.0	Executive Summary

2.1	2.1.1 This policy covers the publication of posts and submissions either in the form of the written word, photograph, video or any other medium to a publicly or privately available Social Media channel approved for use for work-related subjects as well as those for personal use. 2.1.2 This includes but is not limited to: • Social Media channels such as Twitter and Facebook • Online video or picture channels such as YouTube and Instagram. • Blogs and microblog tools such as Wordpress, Tumblr. • Externally managed discussion boards such as Care Opinion. • Internally managed blogs, discussion boards.
2.2 2.3	Employees are supported in their use of Social Media on behalf of the Trust provided they meet with the requirements of this policy. Dos and Don'ts:

Do
- Complete and submit the request form to set up a new social media channel. You will need authorisation from the Communications Team before undertaking any Social Media activity which uses an official Trust branded account or onewhich relates to NUH (appendix 2)
- Understand and abide by this policy and the attached guidelines (appendix 1)
- Ensure activity is consistent with your role at NUH

Don't

- Publish fraudulent, harassing, embarrassing, sexually explicit, profane, obscene, intimidating, defamatory or otherwise unlawful or inappropriate information or footage that would be offensive to readers of the submission or would otherwise breach any Trust Policy or break the law.

  NOTE: some exceptions are suitable, such as sexual health service messages that have a health promotion/prevention aim

- Publish confidential information, business or personal, about or acquired from the Trust (including patient confidential information)
- Criticise or cause embarrassment to the Trust, its patients, healthcare partners, other stakeholders or staff in a public post (including any website)
  Use social media to share training materials or footage unless they have been correctly signed off by clinical governance and meet all the necessary legal requirements
  Retweet or repost information which you would consider libelous or a breach of our Social Media Policy – even if you did not write the original content you are still liable if you share or repost/retweet

3.0	Policy Statement

3.1	Achieving our vision requires a workforce that actively participates both professionally and personally in collaboration and innovation with colleagues, partners and suppliers on the web using Social Media.
3.2	Social Media access is available to all staff from NUH devices and is used for professional purposes. This includes keeping up-to-date with developments and contributing to the conversations that are taking place about NUH (including sharing learning and best practice) internally and externally. This includes access to video sites such as Vimeo and Youtube which are being used increasingly by the Trust and wider NHS.
3.3	The Trust's identity is largely formed by what we do and how we do it. Our reputation must be protected online, including in Social Media. What is written in blogs, forums, discussion boards affects what people think and feel about the Trust.
3.4	This policy sets the standard to be followed by all NUH staff when publishing content to any Social Media. This includes through accounts approved for use for work-related subjects or an account accessed for personal use.
3.5	Our online communications must be presented and managed in a way that expresses the same values and behaviours and professionalism and quality that we expect of all NUH staff.

4.0	**Definitions and Glossary** 4.0.1 Social Media can be defined as forms of electronic communication (such as websites for social networking and microblogging) through which users create online communities to share information, ideas, personal messages, and other content (such as audio, still images, video). 4.02 Social Media is a general term used to describe a suite of channels and tools which have some or all of the following characteristics:

- Mostly free to use
- Simple to use and requiring no prior training or technical knowledge
- Are web-based and therefore require no additional software installed on the user's computer
- Support global collaboration and sharing of opinions, insights, experiences and perspectives often with strangers.

4.0.3 Below are links to online definitions of the most common social media tools. These links will take you to an external website called Wikipedia, an online, collaborative encyclopedia:

- Blogs
- Wiki
- Social networking service
- Microblogging
- Podcast

5.0	Roles and Responsibilities

5.1	**Management Board**
	To ensure relevant colleagues are aware of this policy. To review any issues regarding the implementation of this policy as directed by the Director of Communications and External Relations.

5.2	**Individual officers using social media**
	5.2.1 It is the responsibility of all Trust staff who want to publish information about the Trust either in a personal or professional capacity to social media of any description to adhere to this policy.
	5.2.2 Before using Social Media for corporate purposes an applications should be made through a line manager using the online Social Media site request form (Appendix 2 or available

	online here).
	5.2.3 When information is posted on any website that can identify the Trust, its employees or patients, it must be done in a manner that is consistent with the existing NUH policies and procedures and the Trust's values and behaviours.
	5.2.4 If a member of staff is concerned that something on a blog or a website could give rise to a conflict of interest and in particular concerns issues of impartiality or confidentiality required by their role then this must be discussed with your line manager in the first instance.
	5.2.5 If a member of staff is concerned that their role at the Trust is compromised by the postings of another person, then this must be reported to your line manager or the Communications Team on Extension 61975 or by email to nuhcommunications@nuh.nhs.uk.
5.2	**Line manager roles and responsibilities**
	5.2.1 Line managers are asked to ensure staff considering using Social Media understand this policy.
	5.2.2 Before approving and submitting an application, line managers should carefully consider the appropriateness of any applications to use Social Media for corporate purposes using the **online social media site request form** (appendix 2 or available online here).
	5.2.3 Line managers should also take an active role in any Trust approved programme of work involving social media and work with colleagues to ensure quality of content is in keeping the Trust's values and behaviours expectations and managers' standards.

6.0	Policy and/or procedural requirements

6.1	6.1.1 The Trust supports the use of Social Media to inform, connect and collaborate with other people or organisations, provided this adds value to the Trust or our immediate stakeholders and adheres to this policy. 6.1.2 To ensure consistency, before using Social Media for corporate purposes, an application for approval must be made to the Communications Team. This should be made through a line manager using the online Social Media site request form (Appendix 2).
6.2	**Requesting a new Trust approved Social Media accoun**t 6.2.1 Any member of staff can apply to start a NUH approved social media account or to formally contribute to an existing NUH approved social media on work-related subjects. All applications must be made through their line manager using the **online Social Media site request form** (appendix 2 or available online here). Completed copies should be submitted to the Communications Team via nuhcommunications@nuh.nhs.uk and will be responded to within 10 working days. 6.2.2 Requests should clearly illustrate the potential benefit to patients and/or colleagues both within NUH and the wider healthcare community and/or the organisation as a whole. They must also be able to illustrate team and departmental commitment to the project. Starting a blog or Twitter account and only submitting a handful of posts will be seen in a poor light and may lead to approval being rescinded and the site being closed down. 6.2.3 Consideration must also be given to the deletion of any content created in any NUH approved Social Media site when a specific activity is completed.

6.3	**Content Management**
	6.3.1 The approving line manager is expected to conduct a monthly review of any NUH approved Social Media venture overseen by them. This review is to check for regular and relevant submissions that add value. Regular reviews will also be carried out by the Communications Team.
	6.3.2 The Communications Team keeps a register of all NUH approved social media sites. This list is reviewed on a bi-annual basis to ensure sites are providing regular and relevant content that adds value. The bi-annual review consists of a member of the Communications Team accessing the NUH approved Social Media and reviewing in detail the posts and threads published by the member of staff. Any areas for concern will be brought to the attention of the manager who approved the NUH approved Social Media. The regularity of posts is not pre-determined and will change from one approval to the next. Any sites falling short of agreed standards will be reported to the line manager who approved the initial site. Approval may be rescinded and the site closed if a secondary review within an agreed time period shows little or no improvement.
	6.3.3 As the administrator of Trust related Social Media content, the employee is responsible for ensuring that: • The use of Social Media has been approved by the Communications Team following the completion and approval of the Online social media request form (appendix 2 or available online here) • The editorial guidelines set out in appendix 1 are observed • Members/audience can easily tell whether the group is open to all or only to invited individuals be they NUH staff or members of another stakeholder group. • The purpose of the blog/social media group is clearly laid out.

- A disclaimer is displayed prominently on the site, for example: **The views expressed in this (group/blog/website/forum etc..) are those of the members and do not necessarily reflect the views of Nottingham University Hospitals NHS Trust**
- The Communications Team is fully aware of the blog/social media group/site, have an up-to-date link to the group/site, know who the current administrator and backup administrators are and are made aware of any significant changes to its administration and/or purpose.
- The Communications Team has a record of the administrator's login username(s) and password(s). For this reason any username(s) or password(s) used for a Trust approved blog/Social Media group/site must be unique to that account.
- The employee hands over ownership of the blog/social media group/site to another appropriate NUH staff member if they choose to leave the group or the Trust. If no staff member is available you must hand over full ownership to the Communications Team who will have the account managed elsewhere or shut down the account completely.
- For all clinical research and innovation-related Social Media it remains the employee's responsibility to update the NUH R&I department on online content and maintain the right ethics and NHS permissions for online recruitment tools. The NUH R&I department conducts periodic audits/searches for any online material which may be in breach of regulatory requirements.
- Any passwords used to administer an external group/site are changed if a former administrator leaves the Trust.
- The NHS lozenge or the NUH logo is not used as a way of identifying the association to the Trust without the explicit permission of the Communications Team.
- The line manager and HR are immediately made aware of accusations of any racist, sexist, homophobic, sexually explicit, abusive or otherwise objectionable posts/comments made through your group be they made by a member of staff or an external contributor.

6.3.4 Assistance in setting up access to Social Media can be

	provided by the Communications Team please email digitalcomms@nuh.nhs.uk or call Extension 61975.
6.4	**Data Protection Act and the Freedom of Information Act** 6.4.1 Use of Social Media sites must comply with the Data Protection Act 1998 (relevant for any sites which have the potential to collect or handle personal information), the Freedom of Information Act 2000, the Public Records Act 1958 (relevant where internal Social Media sites and external social media, social media sites are potentially used for business purposes) and the General Data Protection Regulation (GDPR) (2018). GDPR extends and enhances the protections for an individual's data. This includes an expanded definition of what constitutes "personal data". An individual's Social Media profile, including their name, handle and all of the information they publish about themselves is considered personal data under GDPR. It is therefore important that both in your personal capacity and in a professional capacity you are fully aware of all of the consequences of making your personal data public on social media. For GDPR purposes, it is important that you are familiar with the personal data policies of all of the channels/sites that you are proposing to use, and that users of these channels will be required to agree to these terms individual as part of creating their accounts. For some platforms, such as websites, where users are not required to create an account in order to participate, then you must ensure that the use and storage of their personal data by the content management system behind the website, is either covered by the NUH Privacy Policy or that a bespoke privacy policy is produced and approved by the NUH Data Protection Manager. This policy must be published and users made

		aware that their participation is covered by the privacy policy.
		6.4.2 The Trust has responsibility for employees' activities and an individual has responsibility for their own activities when using Trust IT equipment. This means the Trust and an individual can both be at risk of litigation resulting from the actions of any individual on any Social Media site.
6.5		**Posting content in a professional capacity** 6.5.1 When submitting content on a work related subject to NUH approved Social Media an NUH employee must always identify themselves as working for NUH. They should ensure that any content published is consistent with their role in the organisation and does not compromise their own reputation or that of the Trust and must not breach patient, staff or the Trust's confidentiality. 6.5.2 Employees must be careful how they represent themselves in **any** Social Media when submitting content on a work related subject. They should ensure there is a clear distinction between a site used to share thoughts, opinions or accounts of events as an NUH employee and one used privately. 6.5.3 Further guidance on writing appropriate content can be found in appendix 1.
6.6		**Uploading of photographs and other multi-media (of patients and staff)** 6.6.1 Photographs, short films and podcasts (multi-media) are an everyday part of social media. Mobile phones and digital cameras make taking and uploading multi-media content extremely easy. 6.6.2 As the voice of the Trust, employees are responsible for ensuring that any multi-media content posted is appropriate and is in keeping with Trust's values and behaviours. Staff

should not post photos of other staff or patients without appropriate consent to do so. Consent for patients should be written consent (see Media & PR Policy for consent form) and verbal for staff consent.

6.6.3 We discourage patients from using mobile devices to take and/or post videos or photographs of other patients or members of staff. Patients should get appropriate consent (see above for what constitutes appropriate consent) from the patient and/or clinician concerned before recording/photographing on mobile devices.

Staff are advised to review the following guidance from the Care Quality Commission (**www.cqc.org.uk/content/using-hidden-cameras-monitor-care**) when they are informed or become aware that patients/family members intend to make an audio/video recording/photo in our hospitals.

Staff are asked to have the right conversations with patients/families – following these steps (as referenced in the above CQC guidance):

- ask patients/relatives/carers if they have any concerns about their care that has made them wish to make a recording and try to address any such concerns with the patient and/or their family/carer;

- talk to patients/ their family/carer about how they can make an official complaint, if they wish to do so;

- let them know that the use of recording equipment is likely to affect the privacy and rights of those recorded and may lead to legal action. Therefore they should:

    a) Make sure that the recording equipment avoids recording shared areas of the hospital outside of the patient's private room or area.

    b) Make sure that the equipment, and any

recording made, is used only for the purpose of monitoring and protecting the patient's welfare and safety.

c) Think carefully about who may be recorded and the effect on others.

d) Keep recordings secure and make sure they are not tampered with or shared with anyone who does not have a good reason to see them.

e) Seek the prior consent of the patient whose care is to be recorded.

f) Take independent legal advice before sharing the recordings with any third party.

Where clinicians do not consent to such videos/audio/photographs (which may in turn be posted on social media). Good Medical Practice (2013) sets out the circumstances in which doctors may refuse to treat a patient. This is supplemented by the following guidance 'Ending your professional relationship with a patient' (2013) (the "Explanatory Guidance"). The guidance is very clear that a professional relationship with patients should end only when breakdown of trust between patients and clinicians occurs and clinicians cannot provide good care to patients.

Prohibiting the use of mobile devices for recording/photographing in certain clinical environments to ensure patient safety

Requests from patients/relatives to record treatments or appointments should be considered in the context of what is in the patient's best interests. Where recording could distract clinicians (eg: concentration/interference) and in turn could risk patient safety, it is appropriate to prohibit the use of such devices. This includes anaesthetics rooms and theatres, for instance. This is a case by case decision for individual

	clinicians (please refer to paragraph 63 of the Good Medical Practice [2013]). The same considerations apply to doctors and nurses (and wider clinical colleagues).

Please also refer to the Use of Mobile Communication Devices on NUH Premises Policy and the Photography and Video Recordings of Patients: Confidentiality, Consent, Copyright and Storage Policy

Action NUH can take against inappropriate Social Media posts.

The Trust can take a number of steps to protect staff where there has been inappropriate social media posts. It can contact hosts of the website involved and request the content to be removed. Facebook (and other social media sites) have 'take down' policies and procedures that enable requests of this nature to be made and processed.

The misuse of electronic communications may also be a criminal offence and as such the local Police may be able to help NUH in having any inappropriate content removed from social media platforms.

For advice: please contact the Communications Team on extension 61975 (in-hours) and 07976 190 031 out-of-hours.

Further guidance on uploading appropriate multi-media content can be found in appendix 1. |
| 6.7 | **What not to do**

6.7.1 Submissions to any Social Media site must not contain fraudulent, harassing, embarrassing, sexually explicit, profane, obscene, intimidating, defamatory or otherwise unlawful or inappropriate information that would be offensive to readers of the submission or would otherwise breach any Trust Policy or break the law. |

	6.7.2 The following matters are so serious that even the first breach may be treated as gross misconduct and could result in dismissal without notice and in some circumstances lead to prosecution. • Publishing confidential information, business or personal, about or acquired from the Trust in a public post. This might include for example, revealing confidential information relating to patients, staff members, the Trust or contractors. This list is not exhaustive. Staff must consult their line manager if they are unclear about what information might be confidential. • Criticising or causing embarrassment to the Trust, its patients, other stakeholders or staff in a public post (including any website). • Advertising or selling information about or acquired from the Trust for publication by others. Full guidance on writing appropriate content can be found in appendix 1.
6.8	**Use of other languages in Social Media sites** 6.8.1 There is no legal requirement for the Trust to provide information published through a Social Media site in any specific language, however on request the Trust does have a legal obligation to provide a translation of any publically published information in a prompt and timely fashion. If asked to provide information in another language please contact the Equality and Diversity Team or PALS Team for further advice (giles.matsell@nuh.nhs.uk/pals@nuh.nhs.uk). 6.8.2 Improving access to published content by providing it in multiple languages should be thought through when considering the purpose of and the audience for a proposed social media site. If providing multilingual versions of Twitter microblogs, Facebook comments or blog submissions is

		deemed a necessity then it should be done professionally. Please do not refer to online translation tools such as Google translate as a quick fix. Such tools can be useful but without proper proof reading by a professional translator can lead to errors in communications and serious misunderstandings. 6.8.3 Some flexibility will be shown when the administrator of a Ssocial Media site can provide evidence that posts written in a language other than English have been written by a member of staff who has recognised multilingual abilities. Such posts must also be written in English and made available either online in a Social Media tool that mirrors that of the non-English version, or as a digital record stored within the Trust IT systems.
6.9	**Unsuitable links** 6.9.1 Links must only go to suitable websites. A web page is classed as unsuitable if it contains, or directly links to, material which is: **offensive:** • Pornography and sexually explicit content • Text and images likely to offend • Hate sites (on grounds of race, religion, gender or sexual orientation) • Gratuitous violence **unlawful:** • Condones or encourages unlawful acts • Breaches copyright law or encourage others to do so • Defamatory and/or in contempt of court • Hacking or other technical disruption to online services **high risk – creates virtual or real risk to the user of your group:** • Sites which might compromise a user's computer, for example a site which initiates a download without prior	

	confirmation.
	- 18+ sites, for example gambling, alcohol, tobacco related or any other site deemed contrary to the core values of the NHS.
	- Pay-to-view or other subscription sites.
6.10	**Hacked or fake accounts** 6.10.1 Always notify your line manager and the Communications Team if you suspect your Trust approved Social Media account has been 'hacked'. That is if you think the username and password for the site have been compromised and/or unexplained contributions to the site are coming from someone pretending to be from the Trust. 6.10.3 You should also notify the Communications Team if you come across or hear of any social media group or account which you suspect is falsely claiming to be from the Trust.
6.11	**Contact by the press or other media group** If employees are contacted directly or indirectly by the press about a post in a group or other social media environment, they must notify their line manager as soon as possible and contact the Communications Team on extension 61975 or by email at nuhcommunications@nuh.nhs.uk.

7.0	Training and Implementation

7.1	Training The Communications Team will ensure staff across NUH are aware of this new policy. It will be communicated via Trust Briefing and available on the intranet (as well as on the public website) and in the policy library.

7.2	Implementation

	The Communications Team will continue to monitor Social Media and oversee the administration of this policy.

7.3	Resources No additional resources are required.

8.0	Trust Impact Assessments

8.1	Equality Impact Assessment An equality impact assessment has been undertaken on this draft and has not indicated that any additional considerations are necessary.

8.2	Environmental Impact Assessment An environmental impact assessment has been undertaken on this draft and has not indicated that any additional considerations are necessary.

8.3	Here For You Assessment A Here For You assessment has been undertaken on this document and has indicated the need for additional considerations which have been duly incorporated.

9.0	Policy / Procedure Monitoring Matrix

Minimum requirement to be monitored	Responsible individual/ group/ committee	Process for monitoring e.g. audit	Frequency of monitoring	Responsible individual/ group/ committee for review of results	Responsible individual/ group/ committee for development of action plan	Responsible individual/ group/ committee for monitoring of action plan
No online social media content being published in the name of NUH without prior approval	All staff	Daily Monitoring using specialist software	Daily	The Communications Team	Already in place – Communications Team	Laura Skaife Director of Communications and External Relations
Approved social media is being managed in accordance with policy	All staff and Digital Communications Team	Bi-monthly review	Monthly	Digital Communications Team	Already in place – Communications Team	Laura Skaife Director of Communications and External Relations
Approved	All staff and their line managers	Monthly review by	Monthly	The Communications	Already in place –	Laura Skaife Director of

social media is being updated regularly		communications team		Team	Communications Team	Communications and External Relations
All social media related to NUH is meeting with the requirements of this policy	All staff	Daily Monitoring using specialist software	Daily	The Communications Team	Already in place – Communications Team	Laura Skaife Director of Communications and External Relations

10.0	Relevant Legislation, National Guidance and Associated NUH Documents

10.1	Media and Public Relations Policy Patient Information Policy and Procedure Information Governance Policy Photography And Video Recordings Of Living Patients - Confidentiality, Consent, Copyright and Storage Policy Email Policy Corporate Records Management Policy Data Protection, Confidentiality and Disclosures Policy Internet acceptable use and monitoring policy National NHS Identity Guidelines 2018 Freedom of Information Act 2000 Public Records Act 1958 General Data Protection Regulation 2018

Editorial guidelines

If NUH employees set up a group on a social media site that is obviously associated with the Trust, the employee effectively becomes the voice of the Trust and administrator for that group on behalf of the Trust. This remains the case even if this is something managed outside of their normal day job. As the voice of the Trust, the employee is responsible for ensuring that their posts:

- Are in keeping with their role in the organisation and do not compromise their reputation or that of the Trust.
- Are not likely to provoke, attack or offend others.
- Are not racist, sexist, homophobic, sexually explicit, abusive, offensive or otherwise objectionable.
- Do not contain swear words or other language likely to offend.
- Do not break the law or otherwise condone or encourage unlawful activity.
- Do not appear to impersonate someone else.
- Do not describe or encourage activities which could endanger the safety or wellbeing of others.
- Are not posted anonymously.
- Are not seen to support any political party, cause or religious view.

DO NOT PUBLISH any content if there is any doubt about its appropriateness. Contact the Communications Team on extension 61975 or by email at nuhcommunications@nuh.nhs.uk if you need advice.

Writing a good online submission

When blogging, tweeting, publishing to Facebook or otherwise on behalf of the Trust, the following guidelines should be followed:

- **Relevance:** content should be relevant to the services provided at NUH or that of the wider healthcare community with which NUH has a direct association. For example, discussion about a particular clinical specialty for which an employee is qualified to comment, research in that field outside NUH and its potential benefits to associated patients which would therefore include NUH patients.
- **Quick read:** ideal article length will be no more than 200-300 words of short sentences. This ensures content is quick to read. Typically web users spend little more than seconds on any given page or article. Producing lengthy submissions takes more time, reduces audience interest and numbers and ultimately reduces the viability of producing the content in the first place.
- **Topical:** contributions should aim to be topical – related to current news, events or research.
- **Avoid negativity:** contributions must avoid posting negative comments or inferences about any party.
- **Related links:** where another online source is appropriate to a post that source should be acknowledged by included a link in the main body of the text. Any other links that are deemed relevant to the story may be included below the main body.
- **Honesty:** the content needs to be honest to encourage others to respond.
- **Received criticism:** critical comments posted about your social media/blog posts should be replied to with facts and actions for resolution rather than ignored.
- **Commercial:** content should not show bias to any specific commercial organisation nor discuss NUH procurement contracts processes or tenders.

Uploading multimedia in a professional capacity

If uploading multimedia content to an external Social Media site, be sure it represents the values and behaviours of the organisation. Everyone in the multimedia content must give their consent for the content to be used within a social media environment.

As the voice of the Trust, employees are responsible for ensuring that any multimedia content posted is appropriate and is in keeping with Trust's values and behaviours. Ensure that content:

- Does not breach an individual's privacy, dignity and confidentiality.
- Is in keeping with your role in the organisation and does not compromise your own reputation or that of the Trust.
- Is not likely to provoke, attack or offend others.
- Is not racist, sexist, homophobic, sexually explicit, abusive, offensive or otherwise objectionable.
- Does not contain swear words or other language likely to offend.
- Does not break the law or otherwise condone or encourage unlawful activity.
- Does not appear to impersonate someone else.
- Does not describe or encourage activities which could endanger the safety or well-being of others.
- Is not seen to support any political party, cause or religious view.

Some Social Media sites allow people to be tagged, or flagged for ease of identification. This should not be done as it may lead to the blurring of boundaries between professional and personal use or the unintentional exposure of an individual's personal information to a wider audience.

DO NOT PUBLISH any multi-media content if you are at all unsure of its appropriateness. Contact the Communications Team on extension 61975 or by email at nuhcommunications@nuh.nhs.uk if you need advice.

Privacy settings

It is important to recognise that any social media privacy settings are determined by that specific social media and are in no way controlled or managed by the Trust. As such they should be seen as useful but not reliable.

Most social media sites enable the holder of the account to change privacy settings within an account to control who can view, access and contribute to the user's site. These settings vary greatly from site to site and as such cannot be detailed in this document. It is important to note that the Trust ICT Helpdesk support team offers **no** assistance with privacy settings for any Social Media sites.

Ensure the site has the appropriate security setting to reflect the intended audience. For example, if you have a site that you want only invited members to access, ensure the privacy settings for the site are set as such. If assistance is needed please contact the Communications Team on extension 61975 or by email at nuhcommunications@nuh.nhs.uk.

Top 10 tips on general principles

- **Be safe** – Never give personal information to others via the internet.
- **Add value** – Make sure the site is doing something positive, provides worthwhile information or is engaging our key stakeholders in worthwhile dialogue.
- **You are personally responsible for anything you publish**, be that in a personal or Trust endorsed social media tool.
- **Good use of time** – Remember your day job. Ensure your Social Media activities do not interfere with your main clinical or corporate commitments.
- **Identify yourself** – Show transparency when writing for a Trust approved social media by letting people know who you are and what you do.

- **Be aware of your personal and private profile** – Do not allow your Trust approved Social Media to become your personal one, if your personal profile is being used professionally then always treat it as a professional profile. Particularly careful consideration should be taken in this area in relation to invitations from patients.
- **Use disclaimers** when publishing to a Trust approved Social Media, such as: The views expressed on this website are those of the contributors and do not necessarily reflect the views of Nottingham University Hospitals NHS Trust.
- **Seek permission** – Always seek permission if citing or referencing someone else's work or website. Where a reference is made, link back to the original source material.
- **Respect your audience**
- **Compliments, comments, criticisms and complaints** – If any of the aforementioned are received through your site, please ask the submitter to either contact the Trust PALS Team on 0800 183 0204 or by emailing pals@nuh.nhs.uk.

Online Social Media site request form

Name:	
Job title:	
Email:	
Contact number:	
Directorate:	
Approving line managers:	
Line manager extension:	
Line manager email:	

Name of site administrator:	
Administrators email:	
Name of 2nd site administrator:	
2nd Administrators email:	
Social Media site, for example, Facebook, Twitter, Wordpress:	
Is this site to be open to all or only to invited parties?	
Intended audience, for example, colleagues, wider peer group, patients:	

Anticipated numbers of people using your Social Media site?
Reason for site? (Please give as much detail as you can.)
Is there another site that provides and similar service already that you are trying to emulate or improve upon?
Please note that the Communications Team will set up your site for you. You are therefore required to supply a choice of possible usernames, a preferred email address for correspondence and confirmation of account set up as well as a password. The password supplied must to unique to you and not used elsewhere. The Communications Team will keep a record of your password.
Preferred username:
Preferred email address:
Preferred password:

Equality Impact Assessment (EQIA) Form

Q1. Date of Assessment: October 2018		
Q2. For the policy and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)		
Protected Characteristic	**a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups experience? i.e. are there any known health inequality or access issues to consider?**	**b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening**	**c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality**
The area of policy or its implementation being assessed:		
Race and Ethnicity	None		
Gender	None		
Age	None	Effective use of social media may help communication and engagement with younger people. This can be harder to achieve when relying on traditional methods alone.	

Religion	None		
Disability	None	Effective use of social media may help communication and engagement with some people with a disability. This can be harder to achieve when relying on traditional methods alone.	
Sexuality	None	None	
Pregnancy and Maternity	None	None	
Gender Reassignment	None	None	
Marriage and Civil Partnership	None	None	
Socio-Economic Factors (i.e. living in a poorer neighbour hood / social deprivation)	None	None	

Area of service/strategy/function

Q3. What consultation with protected characteristic groups inc. patient groups have you carried out?

PPI groups have been consulted as has the NUH Equalities Team.

Q4. What data or information did you use in support of this EQIA?			
NA			

Q.5 As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments?

No

Q.6 What future actions needed to be undertaken to meet the needs and overcome barriers of the groups identified or to create confidence that the policy and its implementation is not discriminating against any groups

What	By Whom	By When	Resources required
Continue to monitor social media usage in a corporate capacity.	Communications Team	Ongoing	Covered by existing work by Communications Team.

Q7. Review date	October 2020

Environmental Impact Assessment

The purpose of an environmental impact assessment is to identify the environmental impact of policies, assess the significance of the consequences and, if required, reduce and mitigate the effect by either, a) amend the policy b) implement mitigating actions.

Area of impact	Environmental Risk/Impacts to consider	Action Taken (where necessary)
Waste and materials	- Is the policy encouraging using more materials/supplies? - Is the policy likely to increase the waste produced? - Does the policy fail to utilise opportunities for introduction/replacement of materials that can be recycled?	No
Soil/Land	- Is the policy likely to promote the use of substances dangerous to the land if released (e.g. lubricants, liquid chemicals) - Does the policy fail to consider the need to provide adequate containment for these substances? (e.g. bunded containers, etc.)	No
Water	- Is the policy likely to result in an increase of water usage? (estimate quantities) - Is the policy likely to result in water being polluted? (e.g. dangerous chemicals being introduced in the water) - Does the policy fail to include a mitigating procedure? (e.g. modify procedure to prevent water from being polluted; polluted water containment for adequate disposal)	No
Air	Is the policy likely to result in the introduction of procedures and equipment with resulting emissions to air? (e.g. use of a	No

	furnaces; combustion of fuels, emission or particles to the atmosphere, etc.) • Does the policy fail to include a procedure to mitigate the effects? • Does the policy fail to require compliance with the limits of emission imposed by the relevant regulations?	
Energy	• Does the policy result in an increase in energy consumption levels in the Trust? (estimate quantities)	No
Nuisances	• Would the policy result in the creation of nuisances such as noise or odour (for staff, patients, visitors, neighbours and other relevant stakeholders)?	No

We Are Here For You Policy and Trust-wide Procedure Compliance Toolkit

The We Are Here For You service standards have been developed together with more than 1,000 staff and patients. They can help us to be more consistent in what we do and say to help people to feel cared for, safe and confident in their treatment. The standards apply to how we behave not only with patients and visitors, but with all of our colleagues too. They apply to all of us, every day, in everything that we do. Therefore, their inclusion in Policies and Trust-wide Procedures is essential to embed them in our organization.

Please rate each value from 1 – 3 (1 being not at all, 2 being affected and 3 being very affected)

Value	Score (1-3)
1. **Polite and Respectful** Whatever our role we are polite, welcoming and positive in the face of adversity, and are always respectful of people's individuality, privacy and dignity.	3
2. **Communicate and Listen** We take the time to listen, asking open questions, to hear what people say; and keep people informed of what's happening; providing smooth handovers.	3
3. **Helpful and Kind** All of us keep our 'eyes open' for (and don't 'avoid') people who need help; we take ownership of delivering the help and can be relied on.	2
4. **Vigilant (patients *are* safe)** Every one of us is vigilant across all aspects of safety, practices hand hygiene & demonstrates attention to detail for a clean and tidy environment everywhere.	1

5. **On Stage (patients *feel* safe)** We imagine anywhere that patients could see or hear us as a 'stage'. Whenever we are 'on stage' we look and behave professionally, acting as an ambassador for the Trust, so patients, families and carers feel safe, and are never unduly worried.	3
6. **Speak Up (patients *stay* safe)** We are confident to speak up if colleagues don't meet these standards, we are appreciative when they do, and are open to 'positive challenge' by colleagues	2
7. **Informative** We involve people as partners in their own care, helping them to be clear about their condition, choices, care plan and how they might feel. We answer their questions without jargon. We do the same when delivering services to colleagues.	3
8. **Timely** We appreciate that other people's time is valuable, and offer a responsive service, to keep waiting to a minimum, with convenient appointments, helping patients get better quicker and spend only appropriate time in hospital.	3
9. **Compassionate** We understand the important role that patients' and family's feelings play in helping them feel better. We are considerate of patients' pain, and compassionate, gentle and reassuring with patients and colleagues.	1
10. **Accountable** Take responsibility for our own actions and results	1
11. **Best Use of Time and Resources** Simplify processes and eliminate waste, while improving quality	2
12. **Improve** Our best gets better. Working in teams to innovate and to solve patient frustrations	3
TOTAL	27

APPENDIX

CERTIFICATION OF EMPLOYEE AWARENESS

Document Title	Social Media Policy
Version (number)	3
Version (date)	14 February 2019

I hereby certify that I have:

- Identified (by reference to the document control sheet of the above policy/ procedure) the staff groups within my area of responsibility to whom this policy / procedure applies.
- Made arrangements to ensure that such members of staff have the opportunity to be aware of the existence of this document and have the means to access, read and understand it.

Signature	
Print name	
Date	
Directorate/ Division	

The manager completing this certification should retain it for audit and/or other purposes for a period of six years (even if subsequent versions of the document are implemented). The suggested level of certification is;

- Clinical Divisions- Divisional General Manager or nominated deputies
- Corporate Directorates - Deputy Director or equivalent.

The manager may, at their discretion, also require that subordinate levels of their directorate / department utilize this form in a similar way, but this would always be an additional (not replacement) action.