

## Staff Social Media Policy Title

Issue Date	Review Date	Version
September 2017	Extended to June 2021	2.2

### Purpose

This guidance has been prepared to help you, as members of staff and volunteers, consider whether you wish to use social media and offer advice in how to do so in a safe and professional capacity.

### Who should read this document?

Members of staff and volunteers.

### Key Messages

Social media is increasingly a part of many of our personal and professional lives. There are no hard and fast rules about how to use it, but there are some considerations. Overall, the way you behave on social media, whether you use it personally, professionally or a combination of both, is simply an extension of your values and behaviour in the real world.

**At all times you must respect and uphold patient confidentiality, respect your colleagues and act with dignity and professionalism when using social media, even in a personal capacity.**

If you need advice and support, the Communications Team is here to help. Please call us on ext 39883 or email us on [communications.phnt@nhs.net](mailto:communications.phnt@nhs.net) or call into the Communications Office on Level 7 of Derriford Hospital. The team is very happy to give training and advice where needed.

### Core accountabilities

<b>Owner</b>	Head of Communications
<b>Review</b>	Trust Management Executive
<b>Ratification</b>	Director of Corporate Business
<b>Dissemination</b>	Head of Communications
<b>Compliance</b>	Head of Communications

### Links to other policies and procedures

Staff Media Policy

Confidentiality Policy

Major Incident Policy

Speaking Up - Whistleblowing Policy

Acceptable Internet Use Policy

Performance and Conduct Policy

Version History		
1.1	June 2011	Sent to HR staff, Deputy Director of Nursing and Associate Director of ICT, Information Governance Officer
1.2	June 2011	Following feedback from the Deputy Director of Nursing
1.3	July 2011	Following feedback from the Information Governance Officer
1.4	July 2011	Following feedback from HR Business Partners
1.5	October 2011	Following discussion with Richard Miles re: JSNC policy sub-group delay
2	October 2014	Reviewed by Head of Communications and inserted into new policy template
2.1	September 2017	Reviewed by Head of Communications, inserted into new policy template and information regarding messaging apps added
2.2	April 2021	Extended to June 2021 by Ann James

*The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.*

**An electronic version of this document is available in the Document Library. Larger text, Braille and Audio versions can be made available upon request.**

## Contents

<b>Section</b>	<b>Description</b>	<b>Page</b>
1	Introduction	
2	Purpose, including legal or regulatory background	
3	Definitions	
4	Duties	
5	Main Body of Policy	
6	Overall Responsibility for the Document	
7	Consultation and Ratification	
8	Dissemination and Implementation	
9	Monitoring Compliance and Effectiveness	
10	References and Associated Documentation	
Appendix 1	Dissemination Plan and Review Checklist	
Appendix 2	Equality Impact Assessment	

## 1 Introduction

Social media is increasingly a part of many of our personal and professional lives. This guidance has been drawn up to support staff in using social media well.

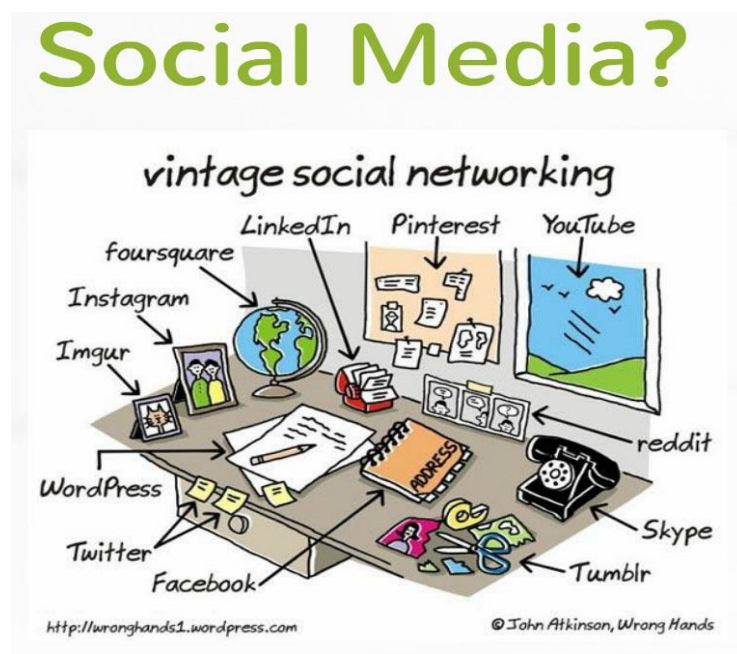
## 2 Purpose

This policy has been written to assist all staff in understanding social media and the Trust's approach to social media. It aims to advise and support staff in fulfilling their responsibilities when using social media, personally, professionally or as a combination of both.

## 3 Definitions

Social media refers to web-based applications that allow people to create and share content. There are many different types of social media and networking sites now available. A list of the main players is available on Wikipedia – itself a social media platform: [http://en.wikipedia.org/wiki/List\\_of\\_social\\_networking\\_websites](http://en.wikipedia.org/wiki/List_of_social_networking_websites)

A helpful visual guide to popular social media platforms and how they relate to more traditional forms of recording and communicating is shown below:



## 4 Duties

As a member of staff or volunteer, you have a duty to always uphold the confidentiality of patients and colleagues and ensure that you act in a way that aligns with our Trust values:

- Putting patients first
- Taking ownership
- Respecting others
- Being positive
- Listening, learning and improving

In recognition of the importance of good communications, the Trust employs a small team of communications professionals. As part of its role, the Communications Team, situated on Level 7 at Derriford Hospital, is responsible for co-ordinating and facilitating the Trust's media relations, including social media.

Office hours are 9am to 5pm. Out-of-hours, the On-Call Manager deals with urgent media calls.

*External*

Communications Team 01752 432666 or [communications.phnt@nhs.net](mailto:communications.phnt@nhs.net)  
Out of hours on-call manager 01752 202082

*Internal*

Communications Manager ext 31149

### **5.1 Use of social media**

The [Ofcom Communications Market Report](#) (2017) reported "the most popular social media site to belong to, or use, is Facebook, with seven in ten (72%) UK adults claiming that they either use and/ or have a profile on this site. This is followed by WhatsApp and YouTube (both at 42%), Twitter (35%), Instagram (23%) and LinkedIn (21%)."

Social media is a part of many people's lives and in this Trust, we respect and encourage, where you wish to, your responsible use of social media in both a personal and professional capacity.

### **5.2 Benefits of social media**

- Connecting with friends and family  
Social media gives us as individuals the opportunity to connect with family and friends, share information, images, video and so forth.
- Connecting with other professionals  
In the same way, as healthcare professionals and members of staff, social media gives us great opportunities to listen and interact with colleagues, to share our own best practice and learn from others.
- Connecting with patients  
On an organisational level, when people write, record and share their experiences of our services, this can be a rich source of information and learning, which we can use to help shape and improve what we do.

### **5.3 Recommendations for Practice**

#### **How people perceive you**

There is no set of rules that can cover all eventualities on social media. Social media has blurred the boundaries between personal and professional, for example, you may have one Twitter account and use it to communicate with professional colleagues, take part in tweet chats about your profession, and also share your personal views and keep up with friends.

But there are some things we need you, as employees of this Trust, to consider and take into account when using social media. The way you behave on social media is simply an extension of your values and behaviour in the real world. It reflects on you, impacts on those you engage with and also impacts on how people view you as a healthcare professional and, in turn, the organisation you work for.

### **Be sensible**

Standards of professionalism don't change because of the medium you are using. If you wouldn't wear it on a t-shirt or be quoted in a newspaper saying it, you probably wouldn't want to say it publicly on social media.

Think carefully if you say it 'privately' too: Remember that when using social media, communications intended for friends and family may become more widely available, either now or in the future. Posts you make in 'closed' groups can be photographed/screenshot and shared more widely by other members of that group and though those groups may be closed now, they may not always remain that way. This is dependent on the administrator and the social media company offering the service.

Be respectful of your colleagues and their right to privacy. You may want to use social media to support them or congratulate them, but make sure this is welcomed and once again, act as you would in real life. The Nursing and Midwifery Council (NMC) gives a good example in their social media guidance:

"Manipulated photos that are intended to mock individuals would be considered offensive if printed and pinned on workplace noticeboards, and are no less offensive when shared online, even when privately shared between friends."<sup>1</sup>

### **Act with professionalism and dignity**

- Maintain professional boundaries between you and your patients on a personal profile. Do not use personal social media to build or pursue relationships with patients and families, even if they are no longer in your care.
- Maintain high standards of personal conduct.
- Be aware of and abide by your own professional guidance for the use of social media. Links to these are given at the end of this policy.
- Behave with honesty and integrity and make sure that your behaviour upholds the public's confidence in you, your profession, group of staff you belong to and our Trust.
- When commenting about individuals or organisations online, please be aware that what you say is subject to the same laws of defamation and copyright as written or verbal communications.
- You are reminded that you should not access social media in a personal capacity during work time when your patients and colleagues are depending on you.
- Identify yourself – this means disclosing your name and role – when discussing Plymouth Hospitals NHS Trust or NHS-related matters. This means you will be acting in a transparent and honest manner when altering online sources of information such as Wikipedia.
- Respect copyright, fair use and data protection laws. These all apply to social media too.

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<sup>1</sup> NMC Social Networking Sites June 2012: <http://www.nmc-uk.org/nurses-and-midwives/advice-by-topic/a/advice/social-networking-sites/>

- All staff should be aware that the Public Interest Disclosure Act 1998 gives legal protection to employees who wish to whistleblow any concerns. The Act makes it clear that the process of whistleblowing or 'speaking up' normally involves raising the issue internally first. There is a Trust policy on raising issues of concern, entitled *Speaking up – Whistleblowing Policy*. This is available on Staffnet. The policy and leaflet set out a clear procedure for staff to do their best to resolve their concerns using internal processes without resorting to the media or social media. If the internal procedure has been exhausted and, after genuine attempts to have their concerns heard, a member of staff or staff representative is still convinced that something is seriously wrong, there is no Trust restriction on going public with their arguments and in these circumstances, the Trust would expect to present its case publicly at the same time. To facilitate this process, the protocol is that the Chief Executive or the Communications Team should be informed of anyone's intention to 'go public' via the media or social media prior to the act. However, no-one should generate public anxiety by making a public statement on the basis of unresearched or unchecked rumour, or without first checking information and seeking answers through the appropriate Trust management channels.

## 5.4 Privacy

### **Always maintain patient confidentiality.**

- Do not use social media to talk about patients in a way which could breach your duty to maintain their confidentiality. Be aware that although individual pieces of information may not breach confidentiality on their own, the sum of published information could be enough to identify a patient. This is called the jigsaw effect of identification.<sup>2</sup>

### **Protect your own privacy**

- Social media use has blurred the boundaries between public and private life as people talk about both their professional work and their family life. Be aware of the privacy settings on each of the social media platforms that you use. Be aware that social media sites cannot guarantee confidentiality whatever privacy settings are in place and these settings and what they mean may change over time. Once information is published, it can be difficult to edit or remove later, so think before you post.

### **Things to consider before you post**

- Is it appropriate to share this information?
- Who will see it?
- Even if you are posting in a private area, will this always remain so? How could this privacy be changed in the future?
- If you are giving your views, how do they reflect on you?
- Please see Appendix 3 for further information.

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<sup>2</sup> Jigsaw identification: <http://www.holdthefrontpage.co.uk/2011/news/press-watchdog-issues-reminder-about-sex-cases/>

## 5.5 Use of Messaging Apps

There has been a growth in the use of messaging apps such as WhatsApp, Facebook Messenger and Snapchat. Ofcom's 2017 Adults' Media Literacy Report shows that between 2015 and 2016 there was growth in the use of WhatsApp (45% vs. 28%)<sup>3</sup>.

Some staff use these messaging apps to set up groups with colleagues and use the groups to ask for shift swaps etc.

These apps should be used with a note of caution. Such apps do not conform to NHS England governance standards and the NHS England 2015 guidance on the use of WhatsApp is very clear:

*WhatsApp 'to be encrypted'*

*In our November (2014) issue, we warned of the dangers of using mobile apps that lack proper security features and that do not conform to NHS information governance standards.*

*A timely reminder has come with the news that the latest version of the very popular WhatsApp claims to have introduced 'end to end encryption.'*

*(See <http://www.bbc.co.uk/news/technology-30114346>)*

*Whatever the other merits of WhatsApp, it should never be used for the sending of information in the professional healthcare environment.*

*WhatsApp, which is owned by Facebook, is a consumer service, which does not have a service level agreement with users and has no relevant data security certification.*

*There is no valid reason for its use within the NHS. Only apps that have been specifically approved by NHS England should be used. We hope to have an update on this subject in a future edition.<sup>4</sup>*

If you do use messaging apps amongst your team, do not share confidential information on them. Remember that confidential information is not restricted to patient identifiable information – it can include doors codes, passwords and staff contact numbers.

You must also ensure that you have arrangements in place for when someone leaves the organisation and they are required to leave any work-related social media groups.

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<sup>3</sup> Ofcom Communications Report 2017 (p30)  
[https://www.ofcom.org.uk/\\_data/assets/pdf\\_file/0017/105074/cmr-2017-uk.pdf](https://www.ofcom.org.uk/_data/assets/pdf_file/0017/105074/cmr-2017-uk.pdf)

<sup>4</sup> NHS England Information Governance Bulletin: 21<sup>st</sup> Edition  
<http://webarchive.nationalarchives.gov.uk/20160606050915/https://www.england.nhs.uk/wp-content/uploads/2015/01/ig-bull-21.pdf>



**Please remember that a serious breach of this policy will be managed in line with the Trust's Performance and Conduct Policy and could impact on a professional registration you hold.**

## **6 Overall Responsibility for the Document**

The Head of Communications is responsible for the maintenance and development of this policy

## **7 Consultation and Ratification**

The design and process of review and revision of this policy will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be reviewed by JSNC and ratified by the Director.

Non-significant amendments to this document may be made, under delegated authority from the Director, by the nominated owner. These must be ratified by the Director.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

## **8 Dissemination and Implementation**

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document owner will be responsible for agreeing the training requirements associated with the newly ratified document with the named Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

## **9 Monitoring Compliance and Effectiveness**

Compliance with this policy is monitored through The Trust's own use of social networking, through search terms and through reported instances of good practice or abuse.

Learning will be assimilated into presentations used in training given to staff.

It should be noted that the responsibilities in this policy are enforceable and that managers (and employees where applicable) failing to uphold their responsibilities may find themselves in breach of internal disciplinary policies.

- [The British Medical Association's social media guidance \(PDF\).](#)
- [The Nursing and Midwifery Council's social media guidance](#)
- [The Royal College of General Practitioners' social media 'highway code'](#)
- [The General Medical Council's social media guidance](#)
- [The Health and Care Professions Council social media guidance \(PDF\)](#)
- [BMJ's doc2doc forums](#)
- [We Communities](#) (includes wenurses, wedocs, wemidwives, we pharmacists etc)
- [Ofcom Communications Market Report 2017](#)

Dissemination Plan			
<b>Document Title</b>	Staff Social Media Policy		
<b>Date Finalised</b>	September 2017		
Previous Documents			
<b>Action to retrieve old copies</b>			
Dissemination Plan			
Recipient(s)	When	How	Responsibility
All Trust staff		IG StaffNet Page	Information Governance Team

Review Checklist		
<b>Title</b>	Is the title clear and unambiguous?	Yes
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Yes
	Does the style & format comply?	Yes
<b>Rationale</b>	Are reasons for development of the document stated?	Yes
<b>Development Process</b>	Is the method described in brief?	Yes
	Are people involved in the development identified?	Yes
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Yes
	Is there evidence of consultation with stakeholders and users?	Yes
<b>Content</b>	Is the objective of the document clear?	Yes
	Is the target population clear and unambiguous?	Yes
	Are the intended outcomes described?	Yes
	Are the statements clear and unambiguous?	Yes
<b>Evidence Base</b>	Is the type of evidence to support the document identified explicitly?	Yes
	Are key references cited and in full?	Yes
	Are supporting documents referenced?	Yes
<b>Approval</b>	Does the document identify which committee/group will review it?	Yes
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes
	Does the document identify which Executive Director will ratify it?	Yes
<b>Dissemination &amp; Implementation</b>	Is there an outline/plan to identify how this will be done?	Yes
	Does the plan include the necessary training/support to ensure compliance?	Yes
<b>Document Control</b>	Does the document identify where it will be held?	Yes
	Have archiving arrangements for superseded documents been addressed?	Yes
<b>Monitoring Compliance &amp; Effectiveness</b>	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes
	Is there a plan to review or audit compliance with the document?	Yes
<b>Review Date</b>	Is the review date identified?	Yes
	Is the frequency of review identified? If so is it acceptable?	Yes
<b>Overall Responsibility</b>	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes

<b>Core Information</b>	
<b>Date</b>	7 September 2017
<b>Title</b>	Staff Social Media Policy
<b>What are the aims, objectives &amp; projected outcomes?</b>	This policy has been written to assist all staff in understanding social media and the Trust's approach to social media. It aims to support staff in fulfilling their responsibilities when using social media, personally, professionally or as a combination of both.
<b>Scope of the assessment</b>	
<p>All protected characteristics have been considered when developing the policy.</p> <p>Beneficiaries/stakeholders of this policy include all staff covering all protected characteristics.</p> <p>The policy and EIA has been developed by:</p> <p>Head of Communications supported by the Equality &amp; Diversity Lead</p>	
<b>Collecting data</b>	
<b>Race</b>	<p>There is no evidence to suggest that there is a disproportionate impact on race regarding this policy.</p> <p>Reported incidents will be monitored through the Trust's social networking process.</p>
<b>Religion</b>	<p>There is no evidence to suggest that there is a disproportionate impact on Religion or belief and non-belief regarding this policy.</p> <p>Reported incidents will be monitored through the Trust's social networking process.</p>
<b>Disability</b>	<p>There is no evidence to suggest that there is a disproportionate impact on Disability regarding this policy.</p> <p>Reported incidents will be monitored through the Trust's social networking process.</p>
<b>Sex</b>	<p>There is no evidence to suggest that there is a disproportionate impact on gender regarding this policy.</p> <p>Reported incidents will be monitored through the Trust's social networking process.</p>
<b>Gender Identity</b>	Data for this protected characteristic is not currently collected, however, reported incidents will be monitored through the Trust's social networking process.
<b>Sexual Orientation</b>	<p>There is no evidence to suggest that there is a disproportionate impact on sexual orientation regarding this policy.</p> <p>Reported incidents will be monitored through the Trust's social networking process.</p>

<b>Age</b>	There is no evidence to suggest that there is a disproportionate impact on age regarding this policy.  Reported incidents will be monitored through the Trust's social networking process.
<b>Socio-Economic</b>	Data for this protected characteristic is not currently collected, however, reported incidents will be monitored through the Trust's social networking process.
<b>Human Rights</b>	References to the Trust Speaking up – Whistleblowing Policy are made within the policy which give staff legal protection who wish to raise concerns.
<b>What are the overall trends/patterns in the above data?</b>	No trends or patterns identified at this stage

<b>Involving and consulting stakeholders</b>				
<b>Internal involvement and consultation</b>	HR Business Partner JSNC Chair Director of Corporate Business Head of Information Governance			
<b>External involvement and consultation</b>	Informed by national guidance from NHS Employers and professional bodies and unions.			
<b>Impact Assessment</b>				
<b>Overall assessment and analysis of the evidence</b>	Reported incidents will be monitored and addressed through the Trust's social media monitoring.			
<b>Action Plan</b>				
Action	Owner	Risks	Completion Date	Progress update
<b>Specific issues and data gaps that may need to be addressed through consultation or further research</b>				

<b>Trust's Use of Social Media</b>	<b>Appendix 3</b>
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Our Trust uses the following to communicate with patients, the public and followers. To find us:

- Visit our website [www.plymouthhospitals.nhs.uk](http://www.plymouthhospitals.nhs.uk) where you can click on the icons or
- On Facebook we are Plymouth Hospitals NHS Trust

- On Twitter we are @PHNT\_NHS and @Derriford\_Hosp
- On YouTube we are [www.youtube.com/phntnhs](http://www.youtube.com/phntnhs)
- On Instagram we are plymouthhospitals
- On Pinterest we are <http://www.pinterest.com/plymouthhosps/>
- We blog at [plymouthhospitalsblog.org](http://plymouthhospitalsblog.org)
- Our Chairman's blog is <http://chairmanschat.wordpress.com/>

### **Here to help**

- If you want to set up an official social media account for your service or area for work, for example the Recruitment Team run @DerrifordJobs and the Research Team run @RDinPHNT, please contact a member of the Communications Team (details above) who can talk through with you what you are aiming to do, why, how you can make this sustainable and successful and give you any other supporting advice.
- A little note on websites: additional websites must not be created or commissioned without talking to the Communications Team. The Trust website is a well-used resource that is already paid for and available for your services to use. It is visited by hundreds of thousands of people each year and is the first link to appear when you type Plymouth Hospitals into a search engine so it is a well-known and used website for you to use.
- If you find yourself the target of complaints or abuse from patients, relatives or colleagues on social media, you can take action. Please report this to HR.
- If anything you post or share is picked up by a journalist or blogger and you are asked for further information, please do call a member of the Communications Team (details above in Policy).
- If you read or see something on a social media site that you feel is factually incorrect or needs addressing by our Trust, please contact a member of the Communications Team (details above in Policy).