

Media and social media policy

Status (draft/ratified):	Ratified
Date ratified:	10 January 2018
Version:	Version 1.0
Ratifying Board:	Executive committee
Approved sponsor group:	Executive committee
Type of procedural document	Policy
Owner:	Gillian Francis -Musanu
Job title:	Director of corporate affairs
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Equality analysis completion date:	January 2018
Date issue:	January 2018
Review date:	January 2021
Replaces:	Media policy V2
Unique document number:	2018/001

Equality statement

This document demonstrates commitment to create a positive culture of respect for all individuals, including staff, patients, their families and carers as well as community partners. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity; race; sexual orientation; religion or belief; marriage and civil partnership.

It is also intended to use the Human Rights Act 1998 to promote positive practice and value the diversity of all individuals and communities. This document is available in different languages and formats upon request to the head of corporate governance.

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Policy summary

It is important that all staff are aware of how to access this policy either via SASHnet or their line manager in the area they work. All staff need to be aware of their responsibilities regarding the *media and social media policy*.

This summary sheet highlights the key things you need to know:

Action	Policy page
Theme/issue	
Media: management	5
Social media: responsibilities and confidentiality	8
Mobile devices: use of mobile phones and other devices	9
Major incidents: management and information sharing	10
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1 Introduction

This policy is based on professional best practice and provides information and guidance to Surrey and Sussex Healthcare NHS Trust (SASH) employees, volunteers, bank and agency staff in responding and working with the media and on the use of social media in a business or personal capacity.

The media and social media policy aims to enable SASH staff to:

- Understand their role and responsibilities when responding to media interest or using social media
- Convey information about the Trust and its work to the media accurately and in the most appropriate way
- Be aware of the potential impact of their actions when using social networking sites or any other new media in a professional or personal capacity
- Achieve fair and balanced media coverage
- Help raise the profile of SASH and the high quality care it provides
- Promote the positive achievements and successes
- Put difficult or complex issues in context
- Respond to incidents or emergencies in order to inform patients, staff and public and to maintain or restore public confidence in SASH and its services

2 Scope

This policy applies to Surrey and Sussex Healthcare NHS Trust (SASH) employees, volunteers, bank and agency staff based at East Surrey Hospital and all other sites, including patient's homes, where SASH provides services.

3 Media

News media is available through digital; broadcast and print platforms. Each has the power to influence and offers SASH an opportunity to raise awareness of the organisation and its successes and achievements.

Journalists and editors have to make judgements about what is in the public interest, based on the information available to them, their editorial policy and their target audience. They have the right to make those judgements within the bounds of the law. We should therefore consider the media both as a channel to get our information across to the general public and also as an important target audience in their own right.

3.1 Proactive media

The NHS is a publicly funded service and is accountable to its public. As a public service, the NHS is expected to be open and transparent in its dealings with those who use its services and with the general public. Proactive media relations are part of that openness and transparency.

The communications team maintains relationships with mainstream and specialist media, both local and national and will seek opportunities to place stories of interest about SASH; its people and the high quality care it provides. All members of SASH staff are encouraged to contact the communications team with suggestions for stories or features items.

3.2 Reactive media

The media approaches SASH for comment on a range of topics. Sometimes their interest has been triggered by a patient/relative who have approached the media directly with a complaint. Other times the media may be seeking a response to a national issue or something that has happened locally – for example, an outbreak of norvirus or a condition check on someone involved in a road traffic collision.

All media enquiries are dealt with by the communications team. Any member of staff who becomes aware of a situation that might attract media interest must let the communications team know immediately and share all relevant information (see 8 Contacting the communications team). The information will not be released in its entirety to the media however it is critical that the communications team are aware of all the details to ensure that any statement issued is informed by the full details and counteracts further enquiries and clarifies any potential misunderstanding.

3.3 Media statements/interviews

All media statements are approved by the chief executive or a member of the executive team or their nominated deputy.

Only staff requested or authorised by the communications team and/or member of the executive committee is permitted to talk to the media; take part in media interviews or contribute to a media statement.

3.4 Media relations

It is vital that all calls from the media are handled in a professional, consistent and appropriate way. The communications team should be alerted to any media interest and will manage all media enquiries and deadlines.

If a member of staff receives an unplanned call from a journalist they should

- take a note of the journalist's name and phone number
- confirm that someone will phone them back promptly
- contact the communications team immediately and share the details

Occasionally, when responding to media enquiries, there may be times when it is not appropriate for the Trust to provide information. Reasons for declining to provide a statement or a request for a spokesperson for interview include:

- patient confidentiality
- because information is being prepared for publication at a later date (for example a strategic document or the report of an inquiry)
- because taking part will impact adversely on the reputation of the organisation

3.5 Media spokespeople

SASH aims to be open and transparent and it is important that all communication with the media is managed so that patients, staff and SASH are protected as much as possible from adverse media attention.

The communications team in consultation with the chief executive and executive team will agree individual spokespeople in response to requests for interview. Only these agreed spokespeople are authorised to speak to the media on behalf of SASH. If other members of staff wish to speak to the media they must contact the communications team in the first instance.

Any staff member who is considered to have potentially threatened the reputation of the organisation or who provides inaccurate information is in breach of Trust guidelines and may be subject to disciplinary proceedings. To ensure this does not happen the communications team must always be informed and involved before any contact is made with the media.

The communications team will provide clear guidance and support to any staff member authorised to speak to the media.

It is recognised that staff have other roles in public life that may require them to provide media statements e.g. a local councillor. However, as members of SASH staff it is essential that the advice of the communications team is sought to avoid any possible conflict of interest.

3.6 Confidentiality

Under normal circumstances there will be no basis for disclosure of confidential and identifiable information to the media. However, there will be occasions when NHS organisations and staff are asked for information by the media about individual patients or, in response to particular circumstances where it is felt that disclosure with the patients' consent is justifiable.

There may be some occasions when disclosure without the patient's consent may be permitted with the authority of the chief executive or member of the executive committee who may need to seek legal advice. For example:

- requests for updates on the condition of particular patients who are consenting to information being given
- in distressing circumstances, eg following a fire or road traffic accident when the patient is known to be in the hospital; their identity is already known to the public and where consent has been obtained

Only the communications team are permitted to respond to condition check requests from journalists and this will be done in agreement with the chief executive or a member of the executive team.

The explicit consent of the individual patient(s) concerned should be sought prior to disclosing any information about their care and treatment, including their presence at Surrey & Sussex Healthcare NHS Trust. . Where a patient is not competent to make a decision about disclosure, the views of family members should be sought and decisions made in the patient's best interests.

No details of injuries should be provided or confirmed. Examples of condition definitions include serious, satisfactory and stable.

In circumstances where a patient or a patient's relatives are complaining publicly and unfairly about the treatment and care provided and if they have put confidential information in the public domain, and thus it has lost the element of confidentiality, then a response from the organisation might be justified. For example, to correct wrong information and to ensure that NHS staff and organisations are not unfairly and publicly maligned.

However, disclosures need to be justified on a case by case basis. Disclosure should be limited to the minimum necessary and information should only be permitted to be disclosed by an authorising manager after discussion with the chief executive or appropriate member of the executive team who may need to seek legal advice.

3.7 Working in partnership

The communications team works in partnership with health and social care providers and with other organisations e.g. charities to provide content and comment for new releases and media enquiries.

No member of staff should agree to liaise with the media or provide quotes, comments or endorsements through another organisation that will be used in a media statement or media campaign without first contacting the communications team.

SASH will work with partner organisations to develop a shared, corporate and cohesive approach and response to media enquiries to ensure responses are consistent and unified to ensure public confidence in its services and in the wider NHS.

SASH will not make public statements that might undermine public confidence in itself or, by implication, in partner organisations or the NHS as a whole.

4 Social media

Social media is a powerful tool and is an important way for people to share opinions, information and knowledge. It also offers everyone the opportunity to be a 'journalist', and say anything to a public audience. Often these authors are offering only their personal views without any research or right to reply.

This policy covers all current and future social media platforms including

- Twitter
- Facebook
- LinkedIn
- You Tube
- Instagram
- Snapchat

along with other social media blog and podcast sites.

4.1 Responsibilities

The communications team has lead responsibility for the overall strategy; programme; content; messages; posts and tone of all the SASH corporate social media sites.

The policy makes staff and Trust contractors aware of their personal and corporate responsibilities when using social media, in private and when at work.

Staff are encouraged to engage online with SASH by following, liking, subscribing, etc. to SASH social media channels and by sharing updates posted on SASH pages.

No social media sites or pages relating to the Trust or that might be considered and viewed as official SASH corporate social media accounts should be set up by staff, volunteers or anyone working for SASH without prior discussion and agreement from the communications team.

SASH recognises that all staff are entitled to use social media in a personal capacity. However, they should follow the same behavioral standards online as they would in their everyday roles and abide by their legal and ethical duties to protect patient and colleague confidentiality.

Staff who post comments or information online regarding SASH, or the NHS in general, are personally responsible for their actions and the online content they have created.

4.2 Security and privacy

It is important that the potential impact of posting content on social media, both in a personal and professional capacity is always taken into consideration. Information shared on social media is in the public domain and this activity may result in your comments being permanently available to patients, colleagues, SASH, future employers and/or open to being republished in other media.

Staff are encouraged to:

- check their security/privacy settings on personal social networking sites to ensure that information is only visible to the people who they want to see it
- not allow patients or colleagues to post any photographs or videos of them at work without their prior consent.

4.3 Confidentiality

Staff using social media are reminded:

- that libel; defamation; copyright and data protection laws apply. This means that members of staff should not disclose information, make commitments or engage in activities on behalf of SASH without the knowledge of the head of communications and with permission to do so
- not to make any personal, derogatory or abusive comments about patients or colleagues as this could result in legal and disciplinary action against them and SASH
- not to post or share any personal identifiable information about patients or colleagues, including any relatives whilst they are a patient at SASH

without their prior consent.

- not to post or share photographs or videos of yourself in situ at work or in your work uniform unless for legitimate SASH messages and with the consent from others featured in the picture or video

5 Mobile devices

It is recognised that mobile phones and other devices such as tablets are essential to maintain communication with friends, family and loved ones when someone is in hospital. In line with the principles of patient choice, SASH supports the use of mobile phones in East Surrey Hospital and in other public areas where SASH services are delivered as long as this does not affect:

- the safety of patients or other people
- patients' privacy and dignity
- the operation of medical equipment

The use of mobile devices is allowed in the majority of public areas including:

- the hospital entrances, reception areas and main corridors
- communal areas including the restaurant
- day rooms
- non-clinical areas on wards where direct medical care is not given

Signs are in place for areas where the use of mobile phones and devices is not permitted.

Posters are displayed with guidance for patients and visitors on use of mobile phones or devices for filming, photography and social media in respect of the privacy of patients, visitors and staff.

To protect confidentiality, patients and visitors must not take pictures or video of other patients, visitors or SASH staff without their permission.

Patients and visitors must not post personal or medical details about other patients and staff on social media without their permission.

Anyone with any concerns about someone taking photos or videos is encouraged to speak to the nurse in charge or a staff member.

6 Major incidents

Almost any major incident will generate huge media interest on a local, national, and even an international scale.

Comment and details about a major incident may be shared on social media often within just a few minutes of a situation happening although the details shared will be

unverified it may initially be the only source of information for the media, patients and relatives.

Digital and broadcast media are sometimes the only source of information for the public in an emergency. In the early stage the media may well be the source of information for the families of those involved. Media outlets reach millions of people so it is important to ensure they have accurate, timely information.

Media liaison will be co-ordinated through the communications team as part of the *major incident policy*. Usually, in a major incident, statements and interviews will be given by the chief executive and members of the executive committee supported by senior colleagues and advised by the director of corporate affairs, head of communications or communications manager.

During such times SASH will adopt as open and helpful a stance as possible and practical with reporters. We will seek to explain the situation, describe the impact (if any) on services and staff and set out what action is being taken to resolve any outstanding issues.

7 VIP and celebrity visits

Occasionally, SASH will be asked if a high-profile personality, organisation or national charity and representatives can visit our services and meet patients. Although rare, celebrity visits can play a significant role in enhancing the patient experience and motivating our staff.

Although we will aim to accommodate these visits wherever possible, it must not compromise the safeguarding of all adults and children, the privacy and dignity of patients, families and staff, or have a detrimental effect on the delivery of clinical care.

All requests for celebrity visits to wards or individual patients must be made through the communications team. If an individual or team is approached privately by a celebrity or VIP the visit must be approved by, and organised through, the communications team.

The communications team will oversee visits and, if appropriate, enable the media to attend. This could include TV, radio and print media.

All VIP, celebrity, charity representative or groups of visitors will be accompanied and chaperoned at all times by a member of the communications team, a member of the executive committee and chief nurse or their deputy. Visitors must never be left alone unsupervised with a patient, whether the patient is a child or an adult.

All scheduled visitors will be met at main reception or an agreed location and escorted to the pre-arranged clinical area where the visit will take place.

Requests by VIP, celebrity or charity visitors to bring their children with them on their visit will be considered on a case by case basis.

If the celebrity is under 18 years of age, the visit will be at the discretion of the chief executive or a member of the executive team in consultation with the head of communications and will be chaperoned.

8 Contacting the communications team

The communications team can be contacted Monday – Friday, 8am – 5.30pm on 01737 768511 x6199/6838 or communications@sash.nhs.uk

Outside these times please contact the director on call through the East Surrey Hospital operator on 01737 768511, who will contact the communications team as required.

9 Evaluation

Media and social media evaluation reports are prepared by the communications team and presented at the executive committee each month.

Copies are available, on request, from the communications team.

10 Responsibilities

All staff, volunteers, governors and non-executive directors must adhere to this policy. It is the responsibility of the individual to ensure that they understand it and managers at all levels are responsible for ensuring that the staff for whom they are responsible are aware of and adhere to this policy.

The head of communications is responsible for infrastructure, implementation, monitoring and review of this document.

11 Compliance monitoring arrangements

Monitoring policy implementation

Media and social media monitoring and evaluation reports are prepared by the communications team and presented at the executive committee each month.

Copies are available, on request, from the communications team.

Monitoring approval, amendments and document control

The director of corporate affairs and the head of communications are responsible for ensuring that the policy is approved, that it is in line with the Trust Policy of Policies and includes amendments and strict document control.

12 Training to ensure compliance with this policy

This policy and guidance is available on SASHnet and training sessions are available on request and delivered on the Band 6 ready nurses course.

13 References and associated documents

Organisation-wide policy for Internet usage and security (SASH)

Using mobile phones in NHS hospitals (2009), Department of Health

http://webarchive.nationalarchives.gov.uk/20130105144335/http://www.dh.gov.uk/pr od_consum dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_092812.pdf

14 Document control

This procedural document supports:

Standard(s)/key lines of enquiry	Paragraph/ID no	Standard/title
NHS Litigation Authority (NHSLA)		
Care Quality Commission (CQC)		
NICE Guideline		
Chartered Institute of Public Relations	https://www.cipr.co.uk/content/policy-resources/toolkits-and-best-practice-guides/social-media	Social media best practice guide
NHS England	https://www.england.nhs.uk/nhsidentity/faq/are-there-guidelines-for-digital-communications/ https://www.england.nhs.uk/wp-content/uploads/2016/11/nhse-access-info-comms-policy.pdf	Digital communication s guidance NHS england Accessible Information and Communication Policy

Change history

Version	Date (DD/MM/YYYY)	Author/ Lead	Job title	Details of change	Ratification body	Archiving location
Media Policy 2014 v1	23/04/2014	Eloise Clark	Head of communications		Executive committee	
Media and social media policy v1	Xx/12/2017	Laura Warren	Head of communications	New version	Executive committee	

Appendices

Appendix 1

Equality analysis

By completing this document in full you will have gathered evidence to ensure, documentation, service design, delivery and organisational decisions have due regard for the Equality Act 2010. This will also provide evidence to support the Public Sector Equality Duty.

Name of the policy/function/service development being assessed	Media and social media policy	
Date last reviewed or created and version number	Created 22/01/2018	
Briefly describe its aims and objectives:	To provide guidance on professional best practice to all Surrey and Sussex Healthcare NHS Trust (SASH) employees, volunteers, bank and agency staff in responding and working with the media and the use of social media in a business or personal capacity. And guidance on VIP and celebrity visits and the use of mobile devices by patients and visitors.	
Directorate lead	Gillian Francis -Musanu	
Target audience (including staff or patients affected)	Surrey and Sussex Healthcare NHS Trust (SASH) employees, volunteers, bank and agency staff	
Screening completed by (please include everyone's name)	Organisation	Date
Colin Pink	SASH	22/01/2018

Equality group (or protected characteristic)	What evidence has been used for this assessment?	What engagement and consultation has been used	Identify positive and negative impacts	How are you going to address issues identified?	Lead and Timeframe
Age	National guidance	N/A	Details Trusts stance on use of media based on national guidance including elements of privacy and dignity	N/A	N/A
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					
Carers					