

Social media toolkit: Appendices

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Appendix A

A public-facing social media policy

The [NHS Organisation] Twitter account (@[NHS Organisation]) is managed by ______, on behalf of colleagues across the organisation.

Please note that we are unable to offer medical advice or diagnoses on Twitter. If you, a friend or family member are feeling unwell, please call either your GP surgery or NHS111 on 111 (free from mobiles and landlines).

Insert here a short biography explaining in plain English what your organisation does, for whom.

[NHS Organisation] uses the following social media platforms to communicate with patients, the public and the media:

- Twitter username [hyperlink]
- Facebook page [hyperlink]
- YouTube channel [hyperlink]
- LinkedIn group [hyperlink]
- Blog [hyperlink]

Availability

Our social media accounts are monitored during office hours: 09:00–17:30, Monday – Friday, excluding public holidays. Occasionally we may cover events outside of these hours live on our social media platforms.

From time to time, social media services such as Twitter may be unavailable and we accept no responsibility for lack of service due to social media service downtime.

Content

We may use some scheduling tools to help us ensure content is spread across the week. Our followers can expect between [10–25] tweets a week.

This may increase if we hold a tweet chat or in the case of an emergency, for instance.

We will update our Facebook page around five times a week.

We aim to publish a new blog post every two weeks but may increase this at certain points in time.

By sharing other social media users' content, our organisation does not endorse the information or others' views of that organisation or individual. We aim to share information which adds to any debate or topic we are involved in.

Our social media content will cover some or all of the following:

- Alerts about new content on our digital channels, for example, news, publications, videos on YouTube, blog posts or health campaigns
- Sharing content from organisations we follow, such as other NHS organisations, the emergency services and public sector organisations
- Information on public health topics and campaigns
- Occasional live coverage of events
- Occasional live Twitter chats with members of [NHS Organisation] staff.

Following us on Twitter

If you follow [NHS Organisation] we will not automatically follow you back. This means you can easily identify other key Twitter users that we think are relevant by seeing who we follow. However, being followed by [NHS Organisation] does not imply endorsement of any

kind. If we need to direct message you or you direct message us, we will follow your profile and may unfollow it afterwards. Our profile's settings allow you to direct message us if we don't follow you already.

You can find a list of all the staff who tweet as part of their role at the organisation here: http://twitter.com/[NHSOrganisation]/lists/employees

Talking with us online

We welcome feedback and ideas from all our followers. However, we may not be able to reply individually to all the messages we receive via our social media profiles.

We read all comments to and about us on social media platforms and ensure that any emerging themes or helpful suggestions are passed to relevant people in the organisation.

When we reply to questions it may include us asking for an email address in order to give you a full response outside of the character limits on some social media services.

We cannot engage on issues of party politics.

Other ways of contacting us are detailed in the contact us section of our website [hyperlink]. If you would like to make a compliment or complaint, please see our feedback section [hyperlink].

Media enquiries

If you have a media enquiry and would like to contact our press team, please email press@[NHS Organisation] or call [01234 5678 900].

Appendix B

Making a complaint on social media policy

We monitor some social media platforms for mentions of our organisation and will offer help to those who would like to make a complaint or a comment.

The NHS Constitution ☑ explains your rights when making a complaint. You have the right to:

- have your complaint dealt with efficiently, and properly investigated
- know the outcome of any investigation into your complaint
- take your complaint to the independent Parliamentary and Health Service Ombudsman ☑ if you are not satisfied with the way the NHS has dealt with your complaint
- make a claim for judicial review if you think you have been directly affected by an unlawful act or decision of an NHS body, and
- receive compensation if you've been harmed.

Source: NHS Choices

The first step of this process is to complain to the organisation that cared for you or to complain to the organisation that funded your care.

When we see or receive a complaint on a social media platform we will help the person to find the right organisation to complain to.

When we find a positive or negative comment we will share that with the ward, team or individual concerned so that we can continue to improve.

For more information on how to make a complaint, visit *NHS Choices' 'Making a complaint'* 2 page.

Appendix C

HR social media policy

- There are a large range of social media platforms available, such as Facebook, LinkedIn and Twitter. Many staff use these in their own time, using their own computers and smartphones. In addition to personal use, for many, this is an important channel for professional communication, learning and gaining a work profile.
- [NHS Organisation] understands the value social media platforms can bring to its employees. This policy documents that every staff member has permission to use social media at work for work purposes. It sets out our expectations of you when you do so and what you can expect from us.
- Please remember that whenever or however you may be using these sites, as [NHS Organisation] employees, you are encouraged to maintain standards of professionalism and may be held to account for any inflammatory, derogatory, slanderous or abusive statements. Just as we don't tolerate bullying and harassment in real life, we will not tolerate it online.
- It is important that you do not give the impression that your comments represent the views of [NHS Organisation] unless specifically authorised.

- The following social media
 websites are accessible from [NHS
 Organisation] workstations. You
 may use these sites and associated
 services in work time. Personal
 smartphones also allow access. You
 should use social media websites
 to benefit your role within [NHS
 Organisation]. If you have any
 concerns, please seek clarification
 with your line manager.
- You can follow a list of employees that use Twitter here: http://twitter. com/[NHSOrganisation]/lists/ employees

If you would like support to use social media as part of your role, the communications team offers help and guidance. They can help you get set up and provide help with how to evaluate your work on social media. Email communications@[NHSOrganisation]. nhs.uk or call 01234 5678 900.



Appendix D

IT social media policy

NB: Guidance on overcoming the technical barriers to accessing the internet and social media is covered in the Government Digital Service's Social media guidance for civil servants [https://www.gov.uk/government/publications/social-media-guidance-forcivil-servants] [7]

At [NHS Organisation] we allow all staff access to social media platforms such as Facebook and Twitter.

Staff should be aware that as part of this access the IT team has the ability to monitor how long and when staff use social media websites. At times, we may need to limit access to these and other sites, for example when demand on our network rises to levels that could affect patient care.

Appendix E

Social media during a crisis policy

Our use of social media during a crisis:

If there is a crisis that affects our NHS services, we will provide the latest NHS information we have to our followers using the most relevant hashtag(s) on Twitter. We will also retweet (RT) information from other official sources, such as the [Anywhere] Ambulance Service ([@Anywhere_Ambulance]), local Police ([@LocalPolice]) and local Fire Brigade ([@Local_FireBrigade]).

During an emergency we ask you to retweet our tweets to ensure that proper and correct information about the crisis is promoted across Twitter.

Appendix F

Social media and professionalism – existing guidance for clinicians

Social media guidance for different professions across the NHS has been published. In general, the guidance across all professions states:

- professional or personal use of social media by clinical staff is not banned by any of their professional bodies
- caution in using social media professionally is advised particularly around:
 - patient confidentiality
 - maintaining appropriate relationships with patients
 - upholding the profession's values
- caution should be taken to avoid making any potentially libellous statements about others.

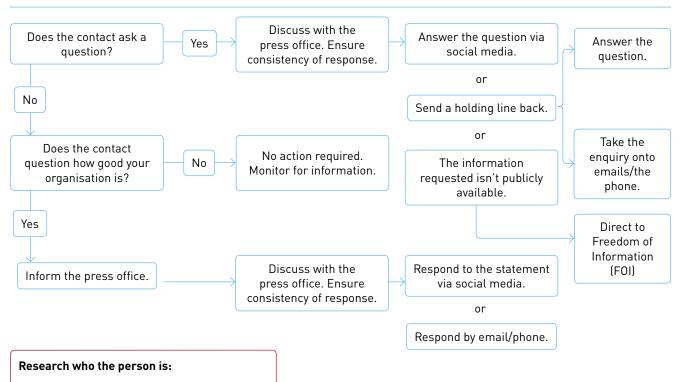
The guidance from all of these professional bodies can be found at http://nhsemployers.org/your-workforce/need-to-know/social-media-and-the-nhs/social-media-guidelines

Incorporating an element of promotion for these sets of guidance in any internal communications about social media is best practice and will help staff understand social media in the context of their profession.

Appendix G

Media process

Member of the media contacts you or your organisation on a social media platform

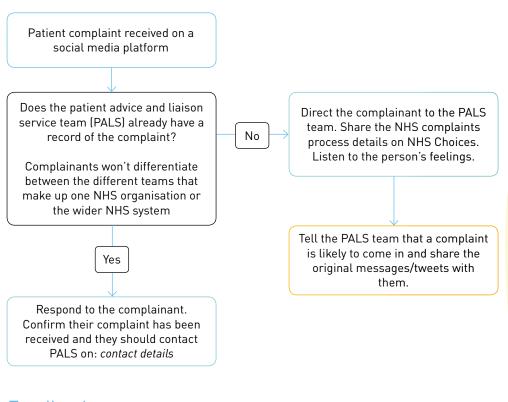


- What they recently tweeted about?
- Do they have a blog you could read?
- Who are they connected to online?
- How influential are they on and offline?

Appendix H

Complaints process and feedback

Complaints process:



Feedback process:

Positive patient feedback received on a social media platform.

Respond saying that the feedback will be shared with the ward/team/individual and thank them for taking the time to feed back

How could this feedback be fed into the wider organisation? See our 'Increasing staff engagement with social media' briefing for the answers.

Appendix I

Draft crisis process

All of the information and advice below relies on you and your organisation having formed the appropriate networks with other crisis time organisations.

Hospital Commissioner Intelligence gathering phase **Example** Call comes in, a gas main has exploded 0-10 minutes in a dense residential area. It's 17:30. As the crisis unfolds, monitor social media platforms for mention of the explosion. Tweet your holding Collect the relevant information. Give it to the Tweet your holding lines. These might executive. lines. These might include: include: Proactive response phase You are on standby Create or validate a hashtag. · Directing enquirers to receive casualties to the hospital 10-20 minutes Twitter accounts No numbers yet RT timely and accurate information from reliable • RT'ing the hospital You'll provide an sources such as the local police, ambulance and lines. update in 30 mins fire Twitter accounts Place your full holding Tweet a link to the statement on your Quickly correct any false information you see hospitals holding tweeted. Quash rumours. website. Tweet a link statement on their to it. website. Continue to monitor the other emergency organisations, mentions and relevant search terms. Feed in the intelligence you have gathered to the Monitoring and media response phase executive and other relevant staff. Provide regular 20-60 minutes Continue to RT the Target influential Twitter users to spread your updates without message(s). Local journalists, MPs, bloggers, hospitals lines and breaking patient councillors etc. help quash rumours confidentiality. Update the website with the latest lines. Decide on social media staffing requirements for the next hours/days

Appendix J

Questions to consider when responding to a complaint on social media

- How can you maintain patient confidentiality and be open about the complaints received?
- What can you do to open up the number and nature of complaints your organisation has received?
- How can you maintain a balance between sharing positive feedback and openly acknowledging negative feedback?
- As recommended in the Francis report, does your organisation publish on its website the number and nature of complaints received? If not, why not?

Appendix K

Questions to consider when responding to a media enquiry on social media

- Is this the first time the media has contacted you about this subject on or off social media?
- What has the media already said on the subject?
- Will a quick response help stop an incorrect story or exacerbate the situation?
- What information that is of interest to the media is on your website? Can you proactively promote where it is to them?

Appendix L

Questions to consider when organising your crisis response on social media

- Who has access to the corporate Twitter account? Can they work late?
- What holding tweets can you have ready before a crisis even occurs?
- Who has the authority to send the holding tweets?
- Who has the authority to sign off the latest lines to tweet?
- How can you ensure the executive understands what information is being circulated on social media platforms?
- Have you got a Twitter list of your local influential tweeters?
 - media
 - MPs
 - councillors
 - other emergency response organisations
 - influential local bloggers.

This publication was produced by the NHS Confederation publications team: 2 publications@nhsconfed.org