

## Social Media Policy

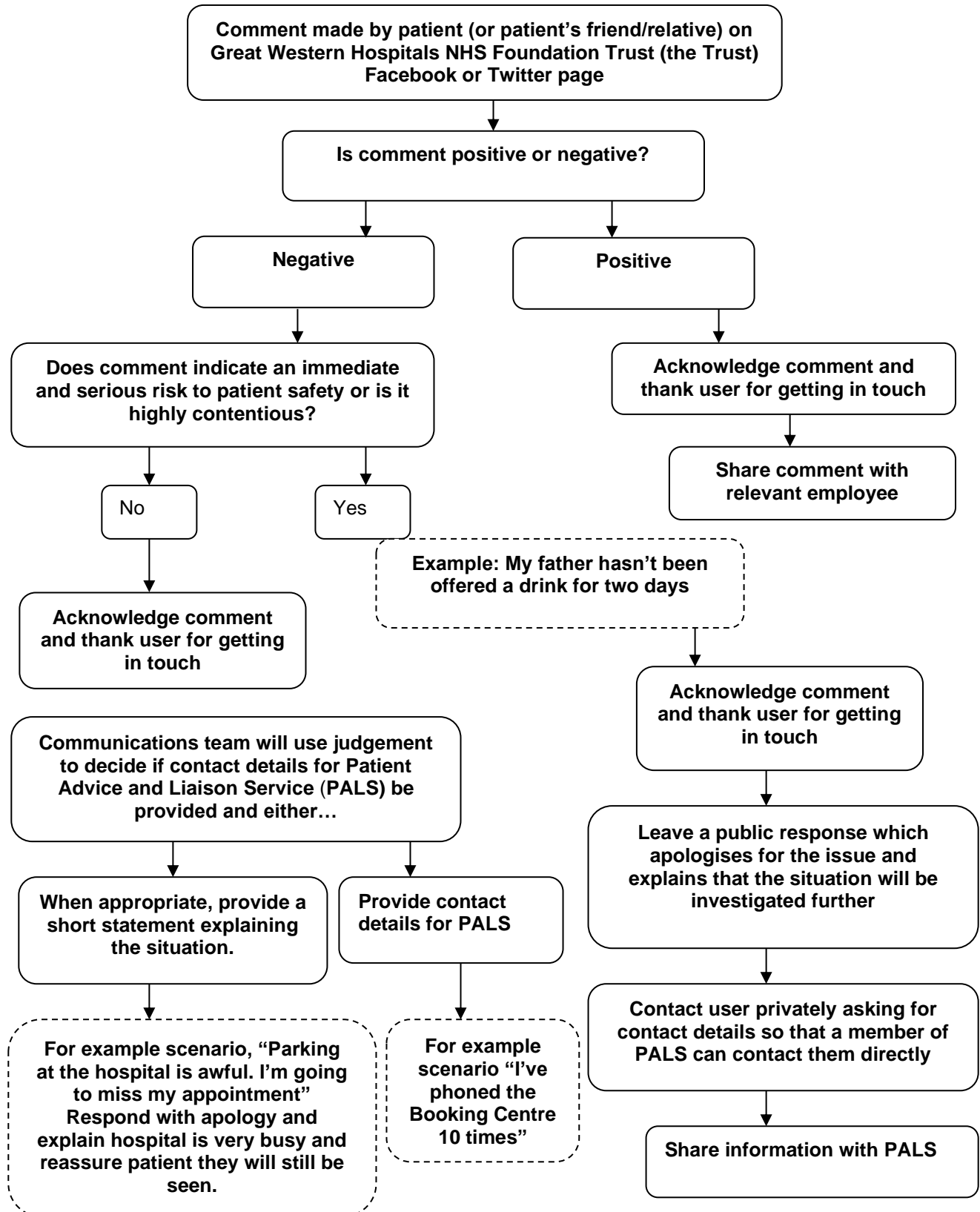
<b>Document No</b>	Corp - 00015	<b>Version No</b>	2.0
<b>Approved by</b>	Policy Governance Group	<b>Date Approved</b>	23/06/2021
<b>Ratified by</b>	Policy Governance Group	<b>Date Ratified</b>	23/06/2021
<b>Date implemented (made live for use)</b>	01/07/2021	<b>Next Review Date</b>	23/06/2024
<b>Status</b>	LIVE		
<b>Target Audience-</b> who does the document apply to and <u>who should be using it</u> . - The target audience has the responsibility to ensure their compliance with this document by:	<ul style="list-style-type: none"> <li>• Ensuring any training required is attended and kept up to date.</li> <li>• Ensuring any competencies required are maintained.</li> <li>• Co-operating with the development and implementation of policies as part of their normal duties and responsibilities.</li> </ul>		
<b>Special Cases</b>	All employees directly employed by the Trust whether permanent, part-time or temporary (including fixed-term contract). It applies equally to all others working for the Trust, including private-sector, voluntary-sector, bank, agency, locum, and secondees. For simplicity, they are referred to as 'employees' throughout this policy		
<b>Special Cases</b>	This policy applies to all, there are no special cases where this document does not apply.		
<b>Accountable Director</b>	Chief Executive		
<b>Author/originator</b> – Any Comments on this document should be addressed to the author	Head of Communications and Engagement		
<b>Division and Department</b>	Communications and Engagement Team		
<b>Implementation Lead</b>	Head of Communications and Engagement		
<b>If developed in partnership with another agency ratification details of the relevant agency</b>	N/A		
<b>Regulatory Position</b>			
<b>Review period.</b> This document will be fully reviewed every three years in accordance with the Trust's agreed process for reviewing Trust -wide documents. Changes in practice, to statutory requirements, revised professional or clinical standards and/or local/national directives are to be made as and when the change is identified.			

## Contents

Instant Information 1 – Flow Chart for Managing Concerns.....	2
1 Introduction & Purpose.....	3
1.1 Introduction & Purpose.....	3
1.2 Glossary/Definitions .....	3
2 Main Document Requirements.....	4
2.1 How Social Media is Managed in the Trust .....	4
2.2 The Importance of Social Media.....	4
2.3 Using Social Media While at Work .....	5
2.4 Rules for Using Social Media .....	5
2.5 Using Social Media during a Major Incident .....	7
2.6 Non Compliance with this Policy .....	7
2.7 Creating a Facebook Group .....	8
2.8 Requests to Create and Social Media Account in Association with the Trust .....	8
2.9 How the Communications and Engagement Team manages Concerns Shared on Social Media	9
2.10 Professional Codes of Conduct.....	10
2.11 Reporting Inappropriate Use of Social Media .....	10
2.12 Accountability.....	10
3 Monitoring Compliance and Effectiveness of Implementation.....	10
4 Duties and Responsibilities of Individuals and Groups .....	11
4.1 Chief Executive .....	11
4.2 Ward Managers, Matrons and Managers for Non Clinical Services.....	11
4.3 Document Author and Document Implementation Lead .....	11
4.4 Information Technology Team.....	12
4.5 Line Managers .....	12
4.6 Governance and Membership Officer.....	12
5 Further Reading, Consultation and Glossary.....	12
5.1 References, Further Reading and Links to Other Policies .....	12
5.2 Consultation Process .....	13
6 Equality Impact Assessment .....	13
Appendix A - STAGE 1: Initial Screening For Equality Impact Assessment.....	14

## Instant Information 1 – Flow Chart for Managing Concerns

Below is a flow chart for managing concerns raised through social media. Note this is for use by the Communications and Engagement team only.



Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

# 1 Introduction & Purpose

## 1.1 Introduction & Purpose

This policy defines Great Western Hospitals NHS Foundation Trust's (the Trust's) approach to social media use for all employees and governors.

Social media is the term commonly used to describe websites which allow users to interact with each other in some way, by sharing information, opinions, images, knowledge and interests.

Some of the most common platforms include Facebook, Twitter, Instagram, YouTube and LinkedIn. Other channels such as TikTok and Snapchat are more popular with other demographic groups. There are also a range of social opportunities on traditional websites and blogs. It's important to note that social media channels evolve and achieve popularity very quickly, so the list of social media channels detailed in this policy will not be exhaustive for the lifetime of the policy.

Social media is used to communicate and support engagement with a range of stakeholders via the Trust's Communications and Engagement Team.

It is a valuable tool for campaigns, public engagement and customer service, as described in the Government's Digital Service's Social Media Playbook (Ref 13). It is also used in a personal and professional capacity by many employees, volunteers and governors.

The purpose of this policy is to help protect the interests of the Trust, its employees, volunteers and governors.

It also advises of the consequences of certain behaviour on social media websites, whether acting in a personal or professional capacity.

This policy aims to:

- Provide guidance to employees and governors on the use of social media and encourage positive usage.
- Ensure the Trust's reputation is not brought into disrepute and that the Trust is not exposed to any legal risk.
- Ensure that members of the public are able to distinguish between corporate information from the Trust and the personal opinion of an employee or governor.

Social media is a rapidly developing area of Communications and Engagement and this policy will therefore be updated as the Trust's Communications and Engagement Strategy evolves.

## 1.2 Glossary/Definitions

The following terms and acronyms are used within the document:

<b>CQC</b>	Care Quality Commission
<b>Derogatory Content</b>	Any content used that is intended/perceived to detract, disparage, belittle, or be intentionally offensive.
<b>Discriminatory Content</b>	Any content which makes or implies of an unfair or prejudicial distinction between different categories of people or things, especially on the grounds of any of the protected characteristics – age, religion/belief, sexual orientation, disability, sex, gender reassignment, race, pregnancy/maternity, marriage/civil partnership.
<b>EIA</b>	Equality Impact Assessment
<b>HR</b>	Human Resources
<b>IP&amp;C</b>	Infection Prevention and Control

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

<b>IT</b>	Information Technology
<b>NHS</b>	National Health Service
<b>PALS</b>	Patient Advice and Liaison Service

## 2 Main Document Requirements

### 2.1 How Social Media is Managed in the Trust

The Trust has a number of corporate social media accounts representing the Trust (Facebook, Twitter and YouTube) which are managed by the Communications and Engagement Team.

The management of social media requires a professional, consistent and considered approach. Messages are strategically planned in terms of context, timing and relevance to the audience, with the aim of attracting maximum engagement with posts.

The team uses a friendly, professional and informative tone to deliver key messages and engage with key stakeholders. It also always responds directly and promptly when communication is initiated by others.

The Communications and Engagement Team manages social media between 9am-5pm, Monday-Friday. During this time they will usually respond to messages, posts and comments as soon as possible. Messages, posts and comments made on a weekday evening will be responded to the next morning, while those shared at weekends and on bank holidays will be responded to by the next working day. Hours of monitoring the channels are detailed where this is possible on the Trust's social media channels.

In addition to the Trust's corporate social media accounts:

- The Trust has LinkedIn and Twitter accounts dedicated to recruitment, which are managed by the Human Resources (HR) Team in conjunction with the Communications and Engagement Team.
- The Trust's charity (Brighter Futures) has Facebook and Twitter accounts which are managed by the Brighter Futures Team.

The Communications and Engagement Team retains ultimate responsibility for the content published on the Trust's social media channels.

### 2.2 The Importance of Social Media

The importance of social media as part of the Trust's communications and engagement strategy cannot be overstated, and it is now the primary method of communicating with the public.

Social media plays a crucial role in connecting people and developing relationships with a range of stakeholders including employees, patients, the public, media and partner organisations, among others.

Facebook and Twitter are the Trust's most powerful and cost-effective communications channels, alongside the Trust's own website, with the opportunity to communicate real-time updates to a mass audience and respond to issues faster than ever before.

Social media plays a critical role in the Trust's response to managing a major incident or crisis situation and is the most important channel in any such situation.

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

Complementing communications and engagement activity with a proactive approach to social media gives the Trust its own digital media platform, rather than relying on established media outlets and allows for a 'social media first' approach to publishing our own news and information.

As well as reputation management, social media provides an effective way of collecting feedback and monitoring issues of importance to the Trust's local population, providing a real-time view of how the Trust can improve its services.

Social media is constantly evolving, so it's important that the Trust stays on top of trends, is open-minded and considers the value of new and emerging social media channels.

Alongside the benefits, employees and governors must be aware of the responsibilities that come with using social media.

### 2.3 Using Social Media While at Work

Many employees and governors use social media, either in a personal or professional capacity.

Rather than restrict activity, the Trust wishes to embrace social media as part of its commitment to a culture of openness and honesty.

Employees and governors are therefore able to access social media through Trust equipment and are encouraged to use social media to stay up-to-date with Trust news, both during authorised breaks and during working hours.

Activity must not:

- be excessive in terms of frequency or duration and must be up to an amount considered reasonable by their line manager
- impact on the individual's performance, the work of others or the quality of patient care.

Employees and governors are responsible for their own behaviour and are to always be aware of how their behaviour might be perceived by visitors and patients. Therefore during working hours, whether using social media on Trust or personal devices, employees and governors must act discreetly and where possible out of sight of visitors and patients.

If an individual's behaviour does not comply with this policy or social media use exceeds an amount considered reasonable by their line manager, appropriate action will be taken by their line manager in accordance with the Trust's Conduct Management Policy (Ref 1).

### 2.4 Rules for Using Social Media

The principles covering the use of social media in both a professional and personal capacity are the same as those that apply to any other communications channel, such as speaking in public or writing a letter.

Employees and governors are to be aware that all social media activity, whether in a professional or personal capacity, may be monitored by the Trust.

Although the Trust has no way of controlling what employees post on their own social media accounts, action will be taken in accordance with the Trust's Conduct Management Policy (Ref 1) should any posts/activity seen by the Trust which breach this policy.

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.



Employees and governors are responsible and liable for all content they publish on social media, whether in a private or public setting.

When using social media, the boundaries between professional and personal lives are often more blurred so it's important to be particularly careful.

Staff should be mindful that posts they put on social media may be picked up by journalists, which could lead to media coverage or media enquiries which the Trust would need to respond to.

It may be more appropriate not to list your employment with the Trust on your social media profile – if you choose to list your employment, you should make clear that your views are your own rather than the Trust's, and be very careful about you post as you will be creating an association with the Trust which may be interpreted as being in a position to present official views.

Staff should not post patient-identifiable information on their social media channels, or photographs which may identify patients in a hospital setting. Care should be taken when taking and photographs which may inadvertently capture colleagues who may not wish for their photograph to be shared on social media.

Everybody, including, but not limited to patients, staff, carers, visitors, family members and volunteers, has a basic right to confidentiality. You must be very careful when capturing images or making posts as it is possible to identify people without seeing their faces or using their names. Please refer to the Information Governance Policy for information on consent, disclosing information and code of practice covering confidentiality.

During an election period the Trust must always act in a politically neutral manner; this is particularly relevant to senior managers active on social media, who do need to share their job title for their name to be associated with the Trust.

The following guidance should be considered by employees and governors at all times:

- Content must not be derogatory, discriminatory or likely to bring the Trust into disrepute.

This includes content which could impact on the Trust's reputation or cause offence or embarrassment to the Trust, its employees, patients or the public, even if they are not named.

- Social media must not be used in any way to damage working relationships with colleagues through harassment, bullying, or by making derogatory or abusive comments.

Should an employee or governor experience bullying or harassment from another employee or an external party e.g. ex-colleague or patient, they must report this to the social media provider e.g. Facebook and / or their line manager or HR.

- Employees and governors must be mindful that content published on social media accounts may remain in the public domain indefinitely. Even if it is deleted, there may still be copies of content elsewhere online.
- Employees and governors must be mindful that content published may be used or re-posted by other parties and other channels without consent. e.g. Facebook posts or Twitter comments could be used by established media outlets without consent and in a different context.
- Employees and governors must be mindful about the information they choose to disclose on social media and consider their security and privacy settings. e.g. It has been known for NHS employees to have to resort to restraining orders against obsessive patients.

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

## Social Media Policy

- Employees and governors who choose to enter into dialogue or comment on social media on Trust matters must make it clear that their views are their own and they are not speaking on behalf of the Trust.
- Employees and governors must make it clear that their profile represents their views as an individual and not the Trust.
- Employees and governors must not use the Trust's logo or name on social media accounts to give the impression that they are communicating on behalf of the Trust or a group, such as nurses or governors.
- Employees and governors who identify their role in the Trust or who are identifiable as an employee or governor (e.g. by including their job title or place of work anywhere on their social media account) must make it clear that their views are their own and they are not speaking on behalf of the Trust.
- Employees and governors must not reveal confidential information about the Trust, its business, patients or employees. This includes information about grievances, concerns, conduct, safeguarding and performance. This also includes adhering to copyright, data protection and financial disclosure laws.
- Employees and governors have a duty to protect patient confidentiality at all times.
- Employees and governors must not post information which could be used to identify a patient directly or indirectly. This includes a patient's name, address, identification number, health condition, symptoms, celebrity status or any other information which could potentially identify the individual concerned.
- Employees and governors must not use social media channels such as LinkedIn to provide professional references about current or former employees or contingent workers. Employees and governors may provide a personal reference or recommendation for current or former employees or contingent workers providing that the following disclaimer is included:

*"This reference is being made by me in a personal capacity. It is not intended and should not be construed as a reference from Great Western Hospitals NHS Foundation Trust."*

Employees and governors are to contact their line manager, the Communications and Engagement Team or the HR Team for further guidance.

### 2.5 Using Social Media during a Major Incident

During a serious, critical or major incident the media and public will seek information from social media along with official sources of information such as communications or press offices.

If using social media during a crisis or major incident, employees should only retweet tweets or share posts from the Trust's corporate accounts to ensure that correct information about the incident is promoted across Twitter and Facebook.

### 2.6 Non Compliance with this Policy

Employees or governors who breach this policy may be subject to disciplinary action, up to and including summary dismissal, under the Trust's Conduct Management Policy (Ref 1).

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.



In addition the employee or governor may be subject to action against them by a third party under the Defamation Act 2013. (Ref 14).

## 2.7 Creating a Facebook Group

Facebook groups can be used to build a community of like-minded people for free, using a tool that many people are familiar with.

Different levels of privacy can be established, for example, employees or governors may benefit from a closed Facebook group, where anyone can request to join or be invited. Alternatively a private Facebook group can be set up where the group is not visible and members have to be added or invited by an existing member.

Examples of useful Facebook groups could include a support group for patients with a certain condition, a group for a team who find it difficult to communicate collectively due to shifts or a group for junior doctors starting work at the same time who will have similar queries.

If approached, the Communications and Engagement Team will offer advice on setting up a group. They will also advise on the inherent risks and whether the time and resource spent on managing the group is justified by the value to public or patient engagement.

The following conditions apply when setting up a Facebook group in a professional capacity as an employee or governor of the Trust:

- The individual employee or governor who sets up the group is responsible for the group, its content and all related activity.
- The employee or governor who sets up the group is also responsible for effectively managing communication within the group and may be subject to disciplinary action under the Trust's Conduct Management Policy (Ref 1). In addition the employee or governor may be subject to action against them by a third party.
- The employee or governor must consider how the group will be managed on a day-to-day basis.

This can be very time consuming and requires a professional, consistent and considered approach. Once a Facebook group has been established, the employee or governor must remain responsive and deal with questions, concerns and issues raised via the group on a daily basis. If not managed appropriately, the Communications and Engagement Team would advise closing the group.

- Responsibility for managing the group must be written into the job description for the individual's job role. This is so that when an employee or governor leaves the Trust, the group is not abandoned and does not become damaging to the Trust's reputation.
- The Communications and Engagement Team must be consulted before employees proceed with making their group active.

The Communications and Engagement Team are to be contacted with any questions.

## 2.8 Requests to Create and Social Media Account in Association with the Trust

Requests to establish social media accounts in association with the Trust will be rejected in the interest of maintaining a consistent and professional brand.

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

Employees who wish to share news with the public through the Trust's corporate social media channels must contact the Communications and Engagement Team who will share news of public interest on their behalf.

The Communications and Engagement Team will offer advice on additional or alternative corporate channels, both internal and external, which may also be used to share the news.

## 2.9 How the Communications and Engagement Team manages Concerns Shared on Social Media

The majority of messages on the Trust's social media channels are positive and share praise for the Trust's services and employees however naturally people also use these channels to raise concerns.

The Communications and Engagement Team works closely with PALS to manage concerns raised on the Trust's social media channels.

The management and response to the concern raised is very much dependant on the nature and profile of the concern, however the below information and the flowchart in section 1 of this policy provide an overview of the principles followed.

The Communications and Engagement Team manages social media between 9am-5pm, Monday-Friday.

During this time they will respond as soon as possible. Concerns shared on a weekday evening will be responded to the next morning, while concerns shared at weekends and on bank holidays will be responded to the next working day.

When a concern is shared via social media the individual receives a response from a member of the Communications and Engagement Team, usually apologising for their experience and providing them with the contact details for PALS.

It is the individual's choice as to whether or not they decide to contact PALS and formally raise their concern or complaint. On occasions the individual may have already made contact with PALS on other occasions they may choose not to escalate their concern further.

On occasions, based on the judgement of the Communications and Engagement Team and the nature and profile of the concern raised, the Communications and Engagement Team may send a private message to the individual, giving them the option to provide their contact details. If they choose to share their contact details, these are passed to the PALS Team, who will attempt to make contact with the individual to address their concern directly.

This process ensures that all complaints and concerns are managed in consistent way, which aligns with the existing complaints process.

It is important that all complaints are managed through a consistent process for audit purposes and to protect the Trust against potential future legal implications.

It is also important that the complaints process is clear, helpful and accessible to the individual.

Therefore responses via social media are managed solely by the Communications and Engagement Team, so communications remains clear and to avoid potential confusion for the individual about where they are in the complaints process.

In addition to concerns and complaints, social media users may also make requests for information using the various Trust platforms. If someone requests information about the Trust then this should be responded to as a 'business as usual' request or if it requires a more formal response then the request must be directed to the Trust's Freedom of Information team (gwh.foi@nhs.net). This should be done

**Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.**

as soon as possible due to the 20-working day deadline. If someone asks for information about themselves, for example someone raises a concern about their care and requests the clinical notes from their treatment then this must be passed onto the Health Records Team (gwh.subjectaccess.requests@nhs.net). There is a one calendar month response deadline for these requests.

Employees and governors must not respond to individuals on behalf of the Trust. This could lead to confusion for the individual concerned. For example they may be given the impression that their complaint is being managed through a formal process, when it is not.

## 2.10 Professional Codes of Conduct

Employees are reminded that professional codes of conduct must be adhered to in respect of social media.

Examples include, but are not limited to, Nursing and Midwifery Council Social Networking Guidance (Ref 5), Health and Care Professions Council and Standards of Performance Conduct and Ethics (Ref 7), and General Medical Council and Doctor's use of social media (Ref 6).

## 2.11 Reporting Inappropriate Use of Social Media

If an employee or governor has concerns regarding any content they have seen themselves on social media they must inform their line manager and/or the HR Team and the Communications and Engagement Team.

## 2.12 Accountability

The Communications and Engagement Team has overall responsibility for the Trust's corporate social media accounts.

Employees and governors are responsible for their own social media activity, in both a personal and professional capacity.

Line Managers are responsible to remind employees of this policy and must take action with the Trust's Conduct Management Policy (Ref 1).

## 3 Monitoring Compliance and Effectiveness of Implementation

The arrangements for monitoring compliance are outlined in the table below: -

Measurable policy objectives	Monitoring or audit method	Monitoring responsibility (individual, group or committee)	Frequency of monitoring	Reporting arrangements (committee or group the monitoring results is presented to)	What action will be take if gaps are identified
To ensure concerns shared through social media are	Analysis of concerns raised by identifying type, timescale and	Communications and Engagement Team will share concerns with PALS who will	Bi-annually	PALS	Dependent on the results of the analysis appropriate action will be taken PALS to

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

Social Media Policy

managed consistently	seriousness of concern	include concerns in their analysis of all concerns.			liaise with relevant services.
Appropriate use of social media by employees and governors	Analysis of social media activity on Trust's corporate channels	Communications and Engagement Team	Daily	Director of Human Resources  Relevant line manager	Where it is identified that social media has been used inappropriately, this will be followed up by the most appropriate team.
To ensure employees and governors are managed appropriately as a result of non-compliance	Breaches of this policy will be reported to individual line managers and HR if observed by the Communications and Engagement Team.	Communications Team	Daily	Director of Human Resources  Individual line managers	Appropriate line management actions to take place when there is a breach of this policy. Line managers will be supported to manage non-compliance through the use of policies and training.

## 4 Duties and Responsibilities of Individuals and Groups

### 4.1 Chief Executive

The Chief Executive is ultimately responsible for the implementation of this document.

### 4.2 Ward Managers, Matrons and Managers for Non Clinical Services

All Ward Managers, Matrons and Managers for Non Clinical Services must ensure that employees within their area are aware of this document; able to implement the document and that any superseded documents are destroyed.

### 4.3 Document Author and Document Implementation Lead

The document Author and the document Implementation Lead are responsible for identifying the need for a change in this document as a result of becoming aware of changes in practice, changes to statutory requirements, revised professional or clinical standards and local/national directives, and resubmitting the document for approval and republication if changes are required.

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

#### 4.4 Information Technology Team

Employees and governors are responsible for their own professional conduct. Like any other activity, social media use must not impact on performance, the work of others or any other factor mentioned in this policy.

It is to be noted that the IT team has the ability to monitor how long and when staff use social media on Trust devices (not personal devices), however does not have access to view individual accounts. The IT Team will therefore not routinely accept requests from line managers to monitor activity in this way.

#### 4.5 Line Managers

If a line manager has concerns about an employee's performance or professional conduct, it is their responsibility to remind the employee of this policy and take action in accordance with the Trust's Conduct Management Policy (Ref 1).

#### 4.6 Governance and Membership Officer

The Governance and Membership Officer is responsible for ensuring governors are aware of this policy and advising them of any potential breach of this policy.

Although the Governance and Membership Officer has no way of monitoring what governors do on their own Facebook accounts, action will be taken in accordance with the Governors' Code of Conduct (Ref 15), should any activity be seen by the Communications and Engagement Team or the Governance and Membership Officer which does not adhere to this policy.

## 5 Further Reading, Consultation and Glossary

### 5.1 References, Further Reading and Links to Other Policies

The following is a list of other policies, procedural documents or guidance documents (internal or external) which employees should refer to for further details:

Ref. No.	Document Title	Document Location
1	Conduct Management Policy	T:\Trust - wide Documents
2	IT Equipment Usage Policy	T:\Trust - wide Documents
3	Internet and E Mail Usage Policy	T:\Trust - wide Documents
4	Code of Conduct for Employees in respect of Confidentiality Policy	T:\Trust - wide Documents
5	NMC Code of Conduct and NMC Social Networking Guidance	<a href="http://www.nmc.org.uk/standards/code/">http://www.nmc.org.uk/standards/code/</a>
6	General Medical Council – Doctor's use of social media	<a href="http://www.gmc-uk.org">http://www.gmc-uk.org</a>
7	Health and Care Professions Council – Standards of Performance, Conduct and Ethics	<a href="http://www.hcpc-uk.org">http://www.hcpc-uk.org</a>
8	Data Protection Act 1998	<a href="https://www.gov.uk/">https://www.gov.uk/</a>
9	Freedom to Speak Up Policy	T:\Trust - wide Documents

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.

Ref. No.	Document Title	Document Location
10	Constitution	T:\Trust - wide Documents
11	Governor and Directors Codes of Conduct	T:\Trust - wide Documents
12	Public Interest Disclosure Act 1998	<a href="http://www.legislation.gov.uk">www.legislation.gov.uk</a>
13	Digital Service's Social Media Playbook.	<a href="https://qdsengagement.blog.gov.uk">https://qdsengagement.blog.gov.uk</a>
14	Defamation Act 2013	<a href="http://www.legislation.gov.uk">www.legislation.gov.uk</a>
15	Governors' Code of Conduct	Held by Membership and Governance Officer

## 5.2 Consultation Process

The following is a list of consultees in formulating this document and the date that they approved the document:

Job Title / Department <i>Do not include names of individuals.</i>	Date Consultee Agreed Document Contents
Head of Information Governance	17/5/21
Head of HR & Wellbeing Services	21/5/21
Head of IT Operations	29/4/21

## 6 Equality Impact Assessment

An Equality Impact Assessment (EIA) has been completed for this document and can be found at Appendix A.



## Appendix A - STAGE 1: Initial Screening For Equality Impact Assessment

At this stage, the following questions need to be considered:			
1	What is the name of the policy, strategy or project? Social Media Policy		
2.	Briefly describe the aim of the policy, strategy, and project. What needs or duty is it designed to meet? This policy defines the Trust's approach to social media use for all employees and governors and aims to support correct use of these channels.		
3.	Is there any evidence or reason to believe that the policy, strategy or project could have an adverse or negative impact on any of the nine protected characteristics (as per Appendix A)?		<b>No</b>
4.	Is there evidence or other reason to believe that anyone with one or more of the nine protected characteristics have different needs and experiences that this policy is likely to assist i.e. there might be a <i>relative</i> adverse effect on other groups?		<b>No</b>
5.	Has prior consultation taken place with organisations or groups of persons with one or more of the nine protected characteristics of which has indicated a pre-existing problem which this policy, strategy, service redesign or project is likely to address?		<b>No</b>

Signed by the manager undertaking the assessment	Tim Edmonds
Date completed	17.6.21
Job Title	Head of Communications and Engagement

On completion of Stage 1 required if you have answered YES to one or more of questions 3, 4 and 5 above you need to complete a [STAGE 2 - Full Equality Impact Assessment](#)

## Equality Impact Assessment

### Are we Treating Everyone Equally?

Define the document. What is the document about? What outcomes are expected?

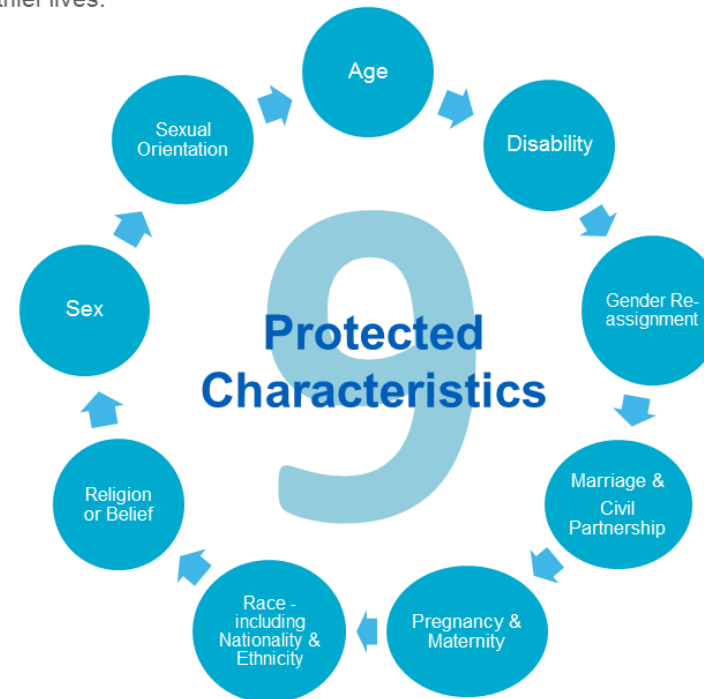
Consider if your document/proposal affects any persons (Patients, Employees, Carers, Visitors, Volunteers and Members) with protected characteristics? Back up your considerations by local or national data, service information, audits, complaints and compliments, Friends & Family Test results, Staff Survey, etc.

If an adverse impact is identified what can be done to change this? Are there any barriers? Focus on outcomes and improvements. Plan and create actions that will mitigate against any identified inequalities.

If the document upon assessment is identified as having a positive impact, how can this be shared to maximise the benefits universally?

### Our Vision

Working together with our partners in health and social care, we will deliver accessible, personalised and integrated services for local people whether at home, in the community or in hospital empowering people to lead independent and healthier lives.



Trust Equality and Diversity Objectives			
Better health outcomes for all	Improved patient access & experience	Empowered engaged & included staff	Inclusive leadership at all levels

Note: This document is electronically controlled. The master copy of the latest approved version is maintained by the owner department. If this document is downloaded from a website or printed, it becomes uncontrolled.