

<b>Council of Governors</b>	<b>Item: Media and social media policy</b>
<b>Date: 12<sup>th</sup> October 2021</b>	<b>Enclosure: G</b>
<b>Purpose of the Report:</b> The purpose of this policy is to give all staff including Non-Executive Directors, Governors and hospital volunteers clear guidance on: <ul style="list-style-type: none"> <li>• Managing media attention</li> <li>• Social media</li> <li>• VIP visits to the organisation</li> <li>• Pre-election guidance (Purdah)</li> </ul> The policy has been approved at EMC and is presented to Governors for noting and following.	
<b>For: Information</b> <input type="checkbox"/> <b>Assurance</b> <input type="checkbox"/> <b>Discussion and input</b> <input type="checkbox"/> <b>Decision/approval</b> <input checked="" type="checkbox"/>	
<b>Sponsor (Executive Lead):</b>	Tara Ferguson-Jones, Director of Communications and Engagement
<b>Author:</b>	Tara Ferguson-Jones, Director of Communications and Engagement
<b>Author Contact Details:</b>	Email: tara.ferguson-jones@nhs.net
<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	N/A
<b>Legal / Regulatory / Reputation Implications:</b>	N/A
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input type="checkbox"/> <b>Effective</b> <input type="checkbox"/> <b>Caring</b> <input checked="" type="checkbox"/> <b>Responsive</b> <input type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Corporate Objective:</b>	
<b>Document Previously Considered By:</b>	None.
<b>Recommendations:</b> To note the updated policy.	

## **Contents**

1. Introduction
2. Purpose
3. Duties
4. Managing media attention
5. Social media
6. Filming requests
7. VIP visits
8. Pre-election guidance (Purdah)

## **1. INTRODUCTION**

Kingston Hospital NHS Foundation Trust is a publicly funded body and so it has a duty to be accountable for and open about the care it provides, its performance, decisions, policies and actions.

We use a number of channels to communicate with staff, patients and the public. This includes face to face briefings, using print, online and broadcast media as well as a range of social media platforms, including YouTube, Twitter, LinkedIn, Facebook and Instagram.

Positive and informative media and social media coverage can have a powerful impact on staff, patients, their carers, and local people, as it increases public understanding of the services delivered and boosts the morale of staff and volunteers.

Conversely, negative and inaccurate media coverage can damage staff morale and can worry patients. It is therefore vital that all Trust communication with the press and social media is well-managed, consistent and monitored.

## **2. PURPOSE**

The purpose of this policy is to offer clear guidance to all staff including non-executive directors and governors, for managing media attention, social media issues, filming and VIP visit requests to the organisation, as well as guidance for staff on managing Purdah.

The Trust is committed to being an open and transparent organisation and all information issued by Kingston Hospital NHS Foundation Trust is honest, appropriate, informed, accurate, consistent and timely.

## **3. DUTIES**

The Director of Communications and Engagement, reporting to the Chief Executive, has overall responsibility for the effective operation of this policy, including all liaison with the media, internal communications, the Trust's website and a range of Kingston Hospital social media channels.

In addition, there are some Kingston Hospital social media feeds for which responsibility has been delegated to a named individual within a team, and it is their responsibility to ensure that the content is compliant with the Trust's policy.

All staff are responsible for their own compliance with this policy and for ensuring that it is consistently applied. Any breach of this policy must be reported to the line manager, as well as the Director of Communications and Engagement.

The Trust does not routinely monitor social media platforms for evidence of staff activity. However, if it is brought to the attention of the Trust that inappropriate information, images or comments have been posted, then the allegation will be investigated.

#### **4. MANAGING MEDIA ATTENTION**

All media-related issues – whether a member of staff has been approached by a journalist or a staff member would like to approach the press with a story – should be managed by the Communications team.

The Communications team are professionals who can provide media, social media and filming advice and support to staff throughout the Trust. The team is also responsible for ensuring that staff and patient confidentiality is maintained when liaising with the media and that patients and staff are represented fairly.

By managing all media requests, the team can protect staff, patients and visitors from unwanted media intrusion and minimise the impact of adverse media attention.

The Communications team is available 24 hours a day, seven days a week, and as such, is available for media support at any time. In addition, the team is one of the Trust's major incident responders and will manage external and internal communications during times of major incident.

##### **Media enquiries**

The Communications team is the first point of contact for members of the media enquiring about Trust policies, procedures, personnel matters, services, patient care and treatment, activities and anything else that is related to the organisation.

The only exception to this is when a journalist submits a Freedom of Information request, which is dealt with by our Corporate Governance Team.

The Communications team will either answer the enquiry directly using information supplied by relevant members of staff, or ensure that the appropriate member of staff is supported to respond on behalf of the Trust.

Staff and governors are not permitted to make contact with the media to pass on information or to express opinions in relation to any patient or other matter related to the Trust. The only exception to this requirement is when they have obtained prior permission from the Communications team.

Contacting the media outside of this arrangement would be a breach of this policy. Staff will be aware of the Trust's Freedom to Speak Up: Raising Concerns (Whistle-blowing) policy which is available on the intranet should anyone feel the need to raise or highlight an issue.

Staff will be made aware of the Trust's Raising Concerns at Work Policy (which is available on the intranet) should they feel the need to raise or highlight an issue.

Should staff be approached by the media to comment – 'on' or 'off the record' – they must decline the request and redirect the journalist to the Communications team (via switchboard if out of hours). This is standard practice and journalists will be aware of this requirement but may still make approaches in the hope someone will provide them with the information they require.

The Trust has a duty of care to its patients and its staff. This also includes observing and maintaining patient and staff confidentiality in line with the NHS Code of Confidentiality and the Data Protection Act 2018.

Under normal circumstances there will be no basis for disclosure of confidential and identifiable information to the media. Permission to discuss the care and treatment of patients and staff, including the taking of pictures, filming and recording of audio must always be obtained before any media involvement.

This needs to be approved by the Communications team who will provide a consent form that must be signed by the patient or visitors involved and sent back to the Communications team. If consent cannot be obtained because of incapacity or death or they are a young person unable to consent, a close relative (personal representative) must consent before any patient details are disclosed to the media.

There will be occasions, however, when NHS organisations and staff are asked for information about individual patients. Where information is already in the public domain, placed there by individuals or by other agencies such as the police, consent is not required for confirmation or a simple statement that the information is incorrect. This situation should be managed in full by the Communications team.

Where additional information is to be disclosed about a patient, e.g. to correct statements made to the media, patient consent must be sought in writing.

### **Filming and photography**

Should you see a film crew or photographer onsite or if a journalist arrives at the hospital without prior permission, please contact Security and the Communications team – journalists know that they need to seek permission from the press office / Communications team.

### **Preparing for possible media interest**

The Communications team must be told at the earliest possible opportunity about any issue (positive or negative) which could lead directly, or indirectly, to media interest.

This might include serious incidents, complex complaints, enquiries from MPs or local councillors, changes to facilities or staffing issues which might reach the public domain via tribunal or union action.

### **Speaking to the media about work outside of the Trust**

Staff members have the right to make their personal views known to the media if they wish and they have the right to act as spokespeople for professional associations or trade unions of which they are a member.

However, staff who are speaking to the media in a private capacity or as a representative of a professional body or another organisation (such as a private hospital) should ensure that their views, or the views of the body they are representing, are not misinterpreted as those of the Trust.

Staff are advised to discuss any media work they are doing for other organisations with the Trust's Communications team. Having spoken to the communications teams about media work on behalf of another organisation in a private capacity, they should not be interviewed on Trust premises or in uniform (unless this has been agreed by the communications team). If emailing on an issue in a private capacity, staff should use their private email address.

If the professional press (e.g. British Medical Journal, Nursing Times or Health Service Journal) contact staff directly, they should refer the journalist to the Communications team in the first instance. The team will coordinate any appropriate response to the journalist and may be able to achieve further positive local media coverage to follow the specialist article.

Journalists sometimes seek conflict between public sector bodies. Staff should avoid criticising other NHS organisations to the media. If a journalist asks about an issue which has implications for another NHS organisation, please contact a member of the Communications team who can work with other organisations to develop a coordinated response.

### **Proactive media work**

Media releases can help to publicise matters of interest, decisions that have been made, events and achievements etc. The Communications team issues all of the Trust's media releases and maintains a database of everything that is issued. All news releases are loaded onto our website.

### **Monitoring media coverage**

Broadcast, print and online media is monitored daily, with briefings created and shared regularly with Trust's non-executive and executive directors, relevant managers, senior leaders and the staff involved.

Any unofficial media coverage, or coverage which is incorrect or biased, is followed up by the Communications team.

### **Training**

The Communications team recommends that very senior managers receive media training in anticipation of media interviews. The training is arranged by the Communications team. All other staff put forward for interviews will be fully supported before, during and after the interview by the Communications team.

## 5. SOCIAL MEDIA

The Trust recognises the importance of social media in shaping public thinking about the Trust and its services, employees, partners and patients, and runs established profiles on Twitter, Facebook, LinkedIn, Instagram and YouTube. These channels are all managed by the Communications team.

### **Departmental social media accounts**

When a Trust department or service is considering the creation of a social media account they must first consult the Communications team. The Communications team holds a list of approved social media accounts and the named 'owner' of the account.

The person proposing the introduction of this social media presence must put forward a plan detailing the reason and need for this project, the methods which will be used to manage the channel and how the security of the channel will be maintained. Please contact the Communications team for more information.

When the need for a Trust approved social media account or page no longer exists, for instance following the closure of a service or initiative, the account should be removed from the public domain.

Where an image, photograph, video or audio recording of any individual is to be published via a Trust approved social media account or site, the consent of the individual must be obtained. For patients and families, a 'photo consent form' must be completed by the patient (if the patient is under the age of 18, a parent or guardian should complete and sign the consent form). Completed consent forms must be sent to the Communications team for storage.

General guidance for the content of posts or publications via Trust approved social media accounts or by individuals employed by or associated with the Trust, includes:

- Do not upload, post, forward or post a link which does not comply with the terms and conditions of the social media platform
- Any member of staff who feels that they have been harassed or bullied, or are offended by material posted or uploaded by a colleague onto social media should inform their line manager who will contact the Communications team
- Never disclose commercially sensitive, anti-competitive, private or confidential information. If you are unsure whether the information you wish to share falls within one of these categories, you should discuss this with your line manager. Advice can also be sought from the Director of Communications
- Do not upload or post any content belonging to a third party unless you have that third party's consent – doing so may be a breach of copyright laws
- Before you include a link to a third party website, check that any terms and conditions of that website permit you to link to it. All links must be done so that it is clear to the user that they have moved to the third party's website

- Be honest and open, but be mindful of the impact your contribution might make to people’s perceptions of us as an organisation. If you make a mistake in a contribution, be prompt in admitting and correcting it
- You are personally responsible for content you publish on social media – be aware that what you publish will be public for many years, and could appear in the media. Always assume that whatever you post will be archived, copied and distributed beyond your initial target audience, even if you attempt to delete the original post. Your social media comment could make the cover page of a newspaper.
- Do not escalate heated discussions online. Try to be conciliatory and respectful. Always aim to get sensitive personal situations offline
- Do not discuss colleagues, patients, competitors, customers or suppliers without their prior approval and written informed consent
- Always consider others’ privacy and avoid discussing topics that may be inflammatory e.g. politics and religion

### **Personal social media accounts**

When posting on your own personal websites or social media accounts, members of staff are advised to add the text “All views are my own” to their profile or visible account details, to ensure other users are aware that any content posted or shared, does not represent the views of the Trust.

Members of staff are not permitted to share any of the following on their own personal websites or social media accounts:

- Sensitive or confidential information (e.g. any personal information about patients or staff, or any confidential corporate information)
- Information that could potentially identify a patient (e.g. a patient’s name, address, postcode, ID numbers, photograph, voice recording, rare condition, celebrity status, car registration plate)
- Information about patients or other staff which could cause offence, even if their names are not mentioned
- Images that are deemed discriminatory or could amount to bullying or harassment
- Any pictures of staff or patients without their explicit, fully-informed consent
- Information about a work-related grievance. Staff are reminded that any grievance should be raised using the Individual Grievance Procedure

Where a professional code of conduct exists, such as listed below, these must also be adhered to:

- <https://www.nmc.org.uk/standards/guidance/social-media-guidance/>
- <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/doctors-use-of-social-media>
- <https://www.hcpc-uk.org/registration/meeting-our-standards/guidance-on-use-of-social-media/>

## **6. FILMING REQUESTS**

In order to protect the confidentiality of our patients and the reputation of staff, the Communications team should be consulted regarding general plans or requests to film or photograph staff, patients, visitors or facilities.

Any individual should seek permission before filming, recording or taking photos on our hospital sites, and must not capture any other (non-consenting) member of the public, patient or staff. However, all staff should be aware that there is no legislation preventing a patient from recording a consultation or procedure performed at our hospitals, provided that no other patients are intentionally or accidentally included in the recording.

In maternity services, new parents are permitted to film their new-born babies. Filming and photos should not capture any other families or members of the public, and staff who do not wish to be filmed outside of a specific appointment or procedure, have a right not to be filmed.

The Communications team can assist in coordinating any filming and will liaise with those staff that may be affected. Before approving and arranging any filming, the Communications team will discuss any proposals in detail with clinical and managerial colleagues, taking account of how the activity might enhance or pose a risk to patients and staff.

The team will also consider any clinical or ethical issues and coordinate necessary risk assessments before granting consent for filming or photography to take place.

Due regard will always be given to the wishes of staff and patient confidentiality will be robustly protected. Where filming or photography includes patients, their prior permission will always be sought and their wishes respected. In every case the media must be clear about how any footage or photography of patients will be used in the future and signed informed consent obtained on that basis.

The Communications team will in some circumstances refuse permission for filming or photography on Trust property.

## **7. VIP VISITS**

Some celebrity and VIP visits to the Trust can play a role in promoting our services, enhancing patient experience and raising staff morale. Following discussions with the Executive team, the Communications team will attempt to accommodate visits wherever possible if a visit is perceived to benefit patients, staff and the Trust. In doing so however, the Trust recognises that the safety, security, privacy and dignity of patients and staff are paramount.

All requests for VIP visits to the Trust should be discussed in the first instance with the Communications team. This applies equally to any activity organised by our volunteers and hospital fundraisers and charities.

The policy requires that one-off or short-term approved official visitors are always accompanied throughout their visit to the Trust.

Approved visitors in the Trust for extended periods of time, such as a media crews, journalists, charity patrons and celebrities linked with a particular service or cause, should be appropriately checked, authorised and accompanied.

All professional visits by media, VIPs or celebrities are to be handled and managed by the Communications team because of the high profile they can attract.

If a VIP or celebrity attends the Trust without any prior notice, other than on a private visit to see a relative or friend who is a patient, the Communications team must be notified immediately. The visitor should be held in reception or at the ward nursing station and should not be allowed onto the ward until a member of the Communications team is contacted by phone or arrives on site in person.

Where a VIP or celebrity attends for clinical care and is a patient at the Trust, all staff must adhere to the individual's confidentiality. On no occasion should any information about a patient including a VIP or celebrity be shared with anyone unless it is directly related to the provision of their clinical care.

## **8. PRE-ELECTION GUIDANCE - PURDAH**

The pre-election period, also referred to as 'purdah' or 'period of sensitivity', is the period of time immediately before elections or referendums. During this time specific restrictions are placed on the use of public resources and the communication activities of public bodies, civil servants and local government officials. The pre-election period is designed to avoid the actions of public bodies distracting from or having influence on election campaigns.

The pre-election period has implications for all NHS organisations, although it is worth remembering that the NHS should remain politically impartial at all times.

### **When does it start?**

The exact start of the pre-election period is determined by the local authority, who formally declares it. Typically this will be six weeks before the election. The convention is that national organisations observe pre-election period rules in the three weeks before the scheduled local elections.

### **Key considerations**

During this period the Trust needs to ensure that it is seen to behave impartially towards all candidates and political parties, and not seen to be influencing the election and its outcomes, whether inadvertently or intentionally. Not publishing information can be just as influential as publishing it.

The Cabinet Office will issue guidance to civil servants, which will also apply to NHS England and NHS Improvement and other arm's length bodies. The guidance does not formally apply directly to local NHS organisations, but the Trust will abide by its general

principles. Prior to any election period the Cabinet Office will issue guidance which the Trust will follow.

Typically this encompasses the following:

- No new decisions or announcements of policy or strategy;
- No decisions on large and/or contentious procurement contracts;
- No participation by NHS representatives in debates and events that may be politically controversial, whether at national or local level.

These restrictions apply in all cases other than where postponement would be detrimental to the effective running of the local NHS, or wasteful of public money.

**Requests for information:** These will always be handled in an impartial manner so that information is made available to all candidates. Information will be factual and candidates responded to in a timely manner.

**Briefing MPs and ministers:** These should be handled as per the usual process, ensuring any information shared is factual.

**Consultations:** No consultations are to be launched during the pre-election period unless they are considered essential. On-going consultations should continue but should not be promoted. Consultation periods can be extended if it is expected that the pre-election period will impact negatively on the quality of the consultation.

**Media handling:** Proactive media work on issues that may be contentious will be avoided. Reactive lines will be factual.

**Events:** Events where the Trust will be asked to respond to questions about policy or on matters of public controversy will be avoided. This may mean withdrawing from previously agreed engagements.

**Visits from politicians:** The same approach must be applied to all visit requests from candidates/parties to avoid any question of bias. This means, if the Trust agrees to a visit from a candidate, all other candidates are to be invited to visit. As usual, any visit should not interfere with the day to day running of the Trust's services and should be mindful of patient privacy and dignity.

**Social media and web:** Nothing contentious is to be posted on the Trust's website or social media accounts. Updates/posts, including blogs, will only convey essential factual information.

**Campaigns:** The Trust will not undertake major publicity campaigns unless time critical (i.e. a public health emergency).

**Appointments of board members and non-executive directors:** Appointments will continue as per the usual process, unless politically sensitive.

**Marketing:** Printed materials, such as posters and leaflets, promoting contentious policy or proposed policy will be retained and issued in small numbers on request. Films and other media produced by the NHS, including the NHS logo, are not to be made available for use by candidates/parties.

**Staff activism:** NHS employees are free to undertake political activism in a personal capacity but should not involve the Trust or create the impression of the Trust's involvement. Communications activities necessary for operational delivery purposes should continue as normal.

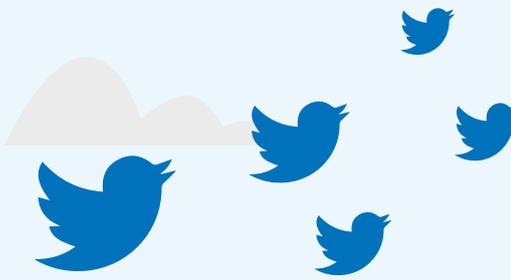
**Contacting the Communications team:**

You can contact the Communications team during normal working hours:

**Telephone: 020 8934 3614**

**Email: [KHFT.comms@nhs.net](mailto:KHFT.comms@nhs.net)**

For urgent matters that need to be dealt with outside of normal office hours, call switchboard to be put through to the team.



# Social media guidelines

Social media is a great way to share our work and stay connected to our community, but it's important that we keep conversations constructive, balanced and in line with our core values.

## Include disclaimers for personal accounts

Your opinions are important, and they're uniquely yours – not necessarily those of Kingston Hospital. When sharing thoughts and ideas online, use a disclaimer such as 'all my own views'.

## Protect patients and confidential information

Never discuss patients or reveal any private or confidential information on social media.

## Be respectful

The things you say online affect real people and your posts should always reflect our values. Avoid anything offensive, demeaning or inflammatory.

## Don't steal

Images from Google, Bing or other search engines may be copyrighted. If you post them, you could be breaking the law.

## Share your good work

Shout about the great things you and your team are doing and share your expertise.

## Ask about corporate accounts

Before setting up a corporate social media account, speak to our Communications Team at [khft.comms@nhs.net](mailto:khft.comms@nhs.net).

