



Document name:	Policy on media management, including social media
Document type:	Policy
What does this policy replace?	Update of previous policy and incorporates Trust's approach to use of social media
Staff group to whom it applies:	All staff within the Trust
Distribution:	The whole of the Trust
How to access:	Intranet
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Next review:	March 2017
Approved by:	Executive Management Team Date
Developed by:	Head of Communications and Customer Services
Director leads:	Director of Corporate Development
Contact for advice:	Head of Communications and Customer Services

Policy on Media Management

1. Introduction

The Trust recognises that media management is a key component in managing organisational reputation and brand, and is a vehicle for service promotion. Adopting a planned approach to proactive media, linked to the Trust's key agendas and also responding in a timely and effective manner to enquiries and comment is essential.

The Trust is committed to the following in support of good communication:

- To publicise the Trust and its services through a range of channels appropriate to the intended audience
- To celebrate and promote the things we do well and to learn from others
- To market services in line with the commercial strategy
- To offer information to GPs, Clinical Commissioning Groups, local authorities and other stakeholders to promote understanding of the service offer and outcomes for service users.
- To champion Trust services and act as a focus for community, learning disability and mental health issues.
- To ensure clear information is available to people who use services, their carers, members and the public, in order to improve understanding of the services offered by the Trust.
- To balance any negative media coverage and prevent inappropriate coverage and content where possible.

The Trust acknowledges that the media can be an extremely effective and useful mechanism for communicating with a wide audience, quickly and simultaneously. It is essential that the Trust develops and maintains positive working relationships with media outlets and acts responsibly and efficiently in all its dealings with the media and in its use of social media platforms.

The Trust recognises the media's influence on people's opinions and will proactively seek positive media coverage - publicising the achievements of staff, services and service users and the organisation. There is also potential for media interest when things go wrong. This will be handled as constructively as possible, ensuring that the Trust's position is fairly represented and that reputation and brand is maintained.

2. Purpose and scope of the policy

The purpose of this policy is to provide clear guidance to all Trust staff on:

- Handling enquiries received from the media
- Dealing appropriately with issues or incidents which may attract media interest.
- Obtaining media coverage for positive news stories
- Strategic use of social media using the Trust's IT infrastructure.

The Trust will work to the following principles in managing its relationship with the media:

• Being co-operative, open, honest and accessible at all times

- Communicating across all media in a jargon free, clear, consistent and timely way
- Working to develop understanding and maintain public confidence in services by promoting the work of the Trust and by responding to criticism through a variety of media channels
- Working to challenge the stigma and misunderstanding that surrounds people with mental health problems and learning disabilities
- Protecting the rights of service users and staff and comply with legislation such as the Data Protection Act, Human Rights Act and the Freedom of Information Act.
- Media contact must not detract from the primary purpose of care delivery and the duty of care must not be detrimentally affected by any media activity
- Ensuring no pressure is put on staff or people who use services to participate in media activity.

3. Definitions

Media includes newspapers, news websites, TV, radio, specialist journals. Social media includes channels such as Twitter, Youtube, Facebook and LinkedIn.

Media interest in the Trust, or interest generated by the Trust, can be on any issue, but generally falls into a number of categories, including:

- Specific Trust issues, for example policy, performance, service change, service development, on-going promotion of a recovery focus through service examples.
- Opinion / reaction to regional or national health issues, for example local implementation of health policy, statistics, survey findings, debates about care or treatments.
- Issues concerning people who use services, for example comments or complaints about care, incidents, issues not directly related to Trust services but already reported in the media.
- Issues concerning individual members of staff, for example research or good practice, praise or complaints, issues affecting professional registration

4. Duties

4.1 The Executive Management Team is responsible for approval of this policy.

As a general rule, directors should sign off media responses pertinent to their areas of responsibility. However, the level at which decisions are taken and formality of the procedures followed should be proportionate to the complexity of the media activity involved.

- **4.2 The Director of Corporate Development** is the lead director for this policy and responsible for its development, dissemination and implementation.
- 4.3 All members of staff (including Non-Executive Directors and members of the Members' Council)

Teams should discuss service promotion with the Communications Team, including use of the media to support this.

The media may approach any member of the Trust's staff, or those believed to be its representatives. All staff have a responsibility to be aware of this policy and to know what to do if approached by the media. No member of staff should contact the media directly, on behalf of the Trust. However, staff who represent the Trust externally may be subject to media interest or enquiry and should offer a response appropriate to role. All staff obviously retain the right to speak to the media as an individual, but in doing so should be clear they are not speaking on behalf of the organisation.

IT access to social media is routinely barred on the Trust's computer network. This is to maintain the performance of the computer network and prevent any impact on business continuity. Staff who can evidence a valid work related reason to access certain sites can request access via IT. Staff can, of course, access social media sites for personal use, in recognised breaks from work, via personal devices.

Teams using social media to engage service users and communities must follow the guidelines set out by the Trust, which are available on the intranet, and advise the communications teams that they have a social media presence.

Teams considering using social media should ensure the following is in place:

- There is a rationale for the social media presence
- Any risks have been anticipated and plans are in place to mitigate (as much as possible)
- There is a documented admin process i.e. who will write the content, respond to issues, monitor postings etc
- There is a process to regularly monitor social media presence (including cover arrangements for periods of leave).
- The communications team must be alerted to anything potentially damaging to the organisation's reputation.

The Trust's visual identity, as set out in the branding policy, must be applied on all social media outlets that belong to the Trust - for example Twitter profiles, Facebook pages and LinkedIn groups. This includes any projects where the Trust is the lead partner, regardless of how many other partners are involved.

Any Trust service, campaign or initiative that has a social media profile must use one of the provided branded cover images/profile pictures/backgrounds. Bespoke images can also be provided on request and will incorporate an appropriate image alongside the Trust's visual identity.

The communications team can provide support and advice about social media, but it is the responsibility of the service to 'run' the account, page or group.

4.4 Service leads in BDUs and support services

Senior staff have a responsibility to ensure that this policy is available, understood and adhered to in their area of responsibility and to assist the communications team in responding guickly and effectively to the media.

Senior staff should be alert to any social media presence for services in their area of responsibility and ensure accounts are run in accordance with Trust guidelines.

4.5 Communications Team

The Trust's communications team will lead on dealing with the media on a day-today basis, this includes both proactive and reactive liaison. This responsibility includes:

- Leading on a planned approach to media management using media platforms to increase understanding of the Trust and its services and as a vehicle to promote the Trust to a range of audiences to enhance reputation.
- Taking enquiries from journalists and managing the response from the Trust
- Developing an on-going positive relationship with the media
- Promoting positive stories and seeking positive publicity opportunities across all platforms
- Ensuring an integrated approach to communications, forward planning where possible, and co-ordinating media interest with internal communication and with that of partner organisations as appropriate.
- Managing the Trust's corporate social media accounts sharing news, promoting initiatives, targeting messages and sharing partner news pertinent to the Trust's agenda.
- Advising staff at all levels on media issues
- Managing realistic timescales while recognising media deadlines
- Identifying experienced spokespeople to be used when interviews are required (if appropriate) and identifying the most appropriate person to be quoted in press releases and on platforms
- Monitoring Trust media coverage across all platforms and briefing Trust Board members on media interest, issues and coverage
- Liaising with communications colleagues in partner organisations to ensure a coherent response on issues that cross organisational boundaries
- Judging the complexity of media requests and referring upwards as appropriate
- Keeping relevant bodies (for example Monitor and CQC) informed of significant media issues via liaison with directors as appropriate.
- Organising training and support in appropriate media skills if deemed necessary by directors
- Escorting or arranging appropriate escorts for journalists on Trust sites, especially photography and camera crews
- Supporting arrangements for service visits by external visitors policy to be determined in light of the Kate Lampard QC lessons learned report following the Savile investigation.

5. Principles

The following actions are determined by this policy:

5.1 Procedures for dealing with the media

All media contact should be routed through the Trust's communications team – to facilitate a professional, accurate, consistent response, aligned with other key agendas. This includes any requests from the media to react to an enquiry and sharing any proactive news. All output (news releases, statements, letters intended for publication) will be managed through the communications team in conjunction with the relevant director.

5.2 Media presence at Board meetings / media enquiries about Board business

Media representatives are entitled to attend public meetings of the Trust Board if they so choose and to ask questions about agenda items. Papers for Board meetings are made available on the Trust website for ease of accessibility and Trust Board members should be aware of issues likely to be of interest.

Immediate response to media questions at Board meetings should be given if possible. However, in circumstances where more information or investigation is required, issues should be referred to the communications team and a response complied with the appropriate director. Social media may be used to share messages from public meetings, for example annual members meetings.

5.3 Responding to enquiries

The media operates 24 hours a day, 7 days a week. All local media should be aware that the first point of contact for media enquiries at the Trust is the communications team. Journalists may not always follow this route and staff should direct any enquiries to the communications team.

If staff are approached by the media they should not offer immediate response or reaction to the inquiry, nor should they confirm or deny any information about individual people using Trust services. They should either:

• Redirect the enquiry to the communications team or offer the appropriate contact details

or

 Take the journalist's name, organisation and telephone number and let them know that someone will call them back promptly and pass this information immediately to the communications team.

Most enquiries are received in office hours and received direct to the communications team via email or telephone. However, any enquiries received by telephone out of hours (including weekends and bank holidays) should be referred to the appropriate on call manager who will then decide whether to contact the director-on-call. The communications team will make sure that directors are fully briefed about any known likely media interest. Mobile telephone contact details for the Head of Communications and Customer Services will be included in the director on call information pack.

5.4 Identifying areas of potential adverse media interest

As soon as any member of staff becomes aware of an incident or issue which may attract adverse media attention, on any platform, they should inform their immediate manager and the communications team. (See also policy on incident reporting and management (including serious untoward incidents)).

5.5 Initiating proactive media contact

Proactive media contact will be subject to a strategic approach, with planned and coordinated activity linked to the Trust's key agendas. Additional ideas for positive media coverage are always encouraged and should be discussed with the communications team who will advise and assist in bringing initiatives to the attention of relevant media. News releases and social media posts will be produced by the communications team, and approved in partnership with staff involved. The communications team will also liaise with local media in supplying supporting images or arranging photography opportunities for media outlets. To avoid adverse impact on people who use services and on staff, photographers must not to be invited to Trust premises without prior consent from the communications team.

5.6 Media filming/photos/interviewing

The media are not allowed to interview, film or take photos on Trust premises without permission, which must be obtained via the communications team, in conjunction with the appropriate director. Appropriate escort arrangements will be made. If the media want to interview, photograph or film people who use services, or their carers, on Trust premises, appropriate consent must be obtained. The communications team will advise, but pressure must never be applied to comply with media requests.

5.8 Serious Untoward Incidents

A serious untoward incident may generate large amounts of media interest, which must be handled in accordance with this policy. The media will seek accurate, regular and timely information, accessible through a variety of channels.

All media requests for information will be handled by the communications team who will be responsible for issuing statements, arranging spokespeople and, if appropriate, organising media briefings.

5.9 Sub Judice/Coroner's Court/Inquiries

Media enquiries that relate to issues which are sub-judice, due to be heard in a coroner's court or that are the subject of an internal or external inquiry need to be handled sensitively. Statements will be issued by the communications team if appropriate (in consultation with the appropriate director) without offering detail or further information which might prejudice proceedings.

5.10 Working with the media at times of political sensitivity

The Trust must demonstrate no bias towards one political party over another and if media enquiries are received relating to politically sensitive issues the Trust must remain impartial. Where requests are received to visit Trust premises, fair and equal

access must be afforded and managed through the communications team. The Trust must ensure that politicians do not use visits to Trust premises as part of any political campaigning, or do not use the Trust in political campaigning using the media.

Guidance is issued by the Department of Health when a general election is called and the Trust must adhere to this.

5.11 Confidentiality

The Trust will, at all times, respect the privacy of people who use services, their carers and staff. Any breach to confidentiality in respect of media activity on any platform may result in disciplinary action.

5.12 Information about people who use services

No information must be given to the media about people who use services without their explicit consent, which will be obtained by the communications team. No service user information will be shared on any social media platform in any circumstance. All staff have a duty to protect the confidentiality of people who use Trust services, including never confirming that an individual is in receipt of services. Trust guidelines which are designed to protect personal confidentiality and data protection must be observed at all times.

5.13 Information about members of staff

No information will be given to the media about any member of staff, including confirmation that they work for the Trust, without the permission of the employee and his/her manager if appropriate.

5.14 Trade union representatives

Staff may be approached by the media to speak in their capacity as representative of a recognised trade union or professional staff body. It is entirely appropriate for staff to respond to such enquiries, but not to speak as a representative of the organisation. Staff speaking in this capacity are requested, as a courtesy, to advise the communications team.

Staff using social media in an official capacity should not purport to represent the views of the organisation.

5.15 Speaking in Public

All staff should be aware that their views may be used by the media in print, broadcast or digitally, for example, when speaking at conferences or local events. Staff should not include information that could result in the identification of an individual who uses services, without their explicit consent, or any information that may adversely affect the reputation of the Trust.

5.16 Grievances and freedom of speech

Staff should not use any media platform to actively pursue a complaint or grievance against the Trust. The Trust works hard to maintain a culture where challenge is welcomed and where issues can be discussed in an open and honest way. The Trust makes available ample opportunities for staff to raise concerns and to ensure that these are properly acknowledged and discussed. Staff are encouraged to raise concerns as soon as they arise so that issues can be resolved wherever possible.

Anyone who has genuine concerns about services, or the care provided to people who use services, can speak out without fear of victimisation, reprisal or reproach from the Trust. Staff should refer to appropriate HR policy (for example grievance and whistle blowing) in this area. However, disciplinary action may result if service user or staff confidentiality is breached through contact with the media or through social media activity.

Staff are, of course, entitled to speak to the media, or use any media platform, as private individuals. Staff must not, however, imply or infer that they are speaking on behalf of the Trust, and must not breach the right to confidentiality of people who use services or other members of staff. Staff should alert the communications team if any activity on media platforms is likely to impact on the Trust.

5.17 Monitoring and Evaluation

The communications team is responsible for monitoring media activity of the Trust and of particular issues, and subsequent coverage / take up. Staff have a responsibility to inform the communications team of any forthcoming coverage, for example features in specialist journals or on websites.

The communications team will provide the Trust Board with regular update regarding media activity and provide monthly media analysis highlighting the Trust position in relation to media coverage and social media activity relating to corporate accounts. Information regarding media activity will feature on the Trust's intranet and website and be included in stakeholder updates.

Media management is a feature of quarterly performance reporting, with a target to achieve >70% positive media coverage about the Trust and its services.

5.18 Contacts for further advice

The Trust communications team are available to offer support and advice on media management. Contact the Head of Communications and Customer Services or the Communications Manager or email comms@swyt.nhs.uk.

6. Dissemination and implementation arrangements

This document will be accessible to staff via the Document Store on the Trust's intranet and website.

Staff will be alerted to the approved policy via the weekly electronic update.

This policy is supported by guidance notes produced by the communications team which are accessible via the intranet.

Implementation of the policy will be the responsibility of staff at all levels, and supported by all managers and directors.

Document control and archiving

This policy will be accessible via the Trust's intranet in read only format.

This policy will be retained in accordance with requirements for retention of nonclinical records.

Revisions / updates to this policy will be stored by the Integrated Governance Manager with previous iterations archived.

Associated documents

This policy is supported by policy and guidance as follows:

- Branding Policy
- HR policy including Whistleblowing
- Acceptable use of Communications Technology
- Management of Serious Untoward Incidents
- Data Protection Policy
- Awards
- Communications guidelines on sharing good news, working with the media and use of social media
- Increasing External Recognition awards entry process

Policy and guidance documents are available on the Trust's intranet.

Review and revision arrangements

This policy will be subject to further review in 2017.

Appendix A - Equality Impact Assessment Tool

To be completed and attached to any policy document when submitted to the Executive Management Team for consideration and approval.

Equality Impact Evidence based Answers & Actions:

	Equality Impact Assessment Questions:	Evidence based Answers & Actions:			
1	Name of the policy that you are Equality Impact Assessing	Policy on media management, including social media			
2	Describe the overall aim of your policy and context?	The overall aim of the policy is to describe the Trust's approach to the management of proactive and reactive media activity			
	Who will benefit from this policy?	All staff			
3	Who is the overall lead for this assessment?	Director	Director of Corporate Development		
4	Who else was involved in conducting this assessment?	Head of Communications and Customer Services			
5	Have you involved and consulted service users, carers, and staff in developing this policy?	The Executive Management Team was consulted during the original development of the Policy			
	What did you find out and how have you used this information?	The Partnership Forum Communications Sub Group has reviewed the policy in draft form.			
		Communications staff			
6	What equality data have you used to inform this equality impact assessment?	N/A			
7	What does this data say?	N/A			
8	Taking into account the information gathered. Does this policy affect one	Where Negative impact has been identified please explain what action you will take to remove or mitigate this impact.			
	group less or more favourably than another on the basis of:	If no action is to be taken please explain your reasoning.			
		YES	NO		
	Race		N		
	Disability		N		

	Gender		N	
	Age		N	
	Sexual Orientation		N	
	Religion or Belief		N	
	Transgender		N	
	Carers			
9	What monitoring arrangements are you implementing or already have in place to ensure that this policy: • promotes equality of opportunity who share the above protected characteristics • eliminates discrimination, harassment and bullying for people who share the above protected characteristics • promotes good relations between different equality groups,	This policy aims to ensure a consistent and appropriate approach to media activity and management It aims to protect the confidentiality of people who use Trust services and of staff		
10	Have you developed an Action Plan arising from this assessment?	N/A		
11	Who will approve this assessment and when will you publish this assessment.	Executive Management Team when revised policy is approved by Trust Board		
12	Once approved, please forward a copy of this assessment to the Equality & Inclusion Team: inclusion@swyt.nhs.uk			

If you have identified a potential discriminatory impact of this policy, please refer it to the Director of Corporate Development or Head of Involvement and Inclusion together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact the Director of Corporate Development or Head of Involvement and Inclusion.

Appendix B - Checklist for the Review and Approval of Procedural Document To be completed and attached to any policy document when submitted to EMT for consideration and approval.

appro	vai. -		
	Title of document being reviewed:	Yes/No/ Unsure	Comments
1.	Title		
	Is the title clear and unambiguous?	YES	
	Is it clear whether the document is a guideline, policy, protocol or standard?	YES	
	Is it clear in the introduction whether this document replaces or supersedes a previous document?	YES	
2.	Rationale		
	Are reasons for development of the document stated?	YES	
3.	Development Process		
	Is the method described in brief?	YES	
	Are people involved in the development identified?	YES	
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	YES	
	Is there evidence of consultation with stakeholders and users?	EMT	
4.	Content		
	Is the objective of the document clear?	YES	
	Is the target population clear and unambiguous?	YES	
	Are the intended outcomes described?	YES	
	Are the statements clear and unambiguous?	YES	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	YES	
	Are key references cited?	N/A	
	Are the references cited in full?	N/A	
	Are supporting documents referenced?	YES	
6.	Approval		
	Does the document identify which committee/group will approve it?	YES	
	If appropriate have the joint Human Resources/staff side committee (or equivalent)	N/A	

	Title of document being reviewed:	Yes/No/ Unsure	Comments
	approved the document?		
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how this will be done?	YES	
	Does the plan include the necessary training/support to ensure compliance?	N/A	
8.	Document Control		
	Does the document identify where it will be held?	YES	
	Have archiving arrangements for superseded documents been addressed?	YES	
9.	Process to Monitor Compliance and Effectiveness		
	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	YES	
	Is there a plan to review or audit compliance with the document?	YES	
10.	Review Date		
	Is the review date identified?	YES	
	Is the frequency of review identified? If so is it acceptable?	YES	
11.	Overall Responsibility for the Document		
	Is it clear who will be responsible implementation and review of the document?	YES	