

STAFF USE OF SOCIAL MEDIA POLICY

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1. Introduction

The use of the internet and social media has become an integral part of everyday life. The NHS must embrace the opportunities this presents, but also carefully manage its use to ensure appropriate protection for all users.

Social media is all about engagement, participation and relationship-building. Every platform encourages its users to take part by commenting on what they see and getting involved in conversations with others. This makes it a particularly useful vehicle both for informing stakeholders, in particular students, patients and service users, and for gaining their feedback. Social media can be part of collaborative working, co-production and building up communities of practice.

When done well, contributions to the internet and social media can improve the way we share information, can empower patients and service users and staff, can build relationships between health and care staff and organisations and can improve openness and transparency around how we work.

When done badly, contributions to the internet and social media can cause upset and distress among our patients and service users, students, staff, and the wider public. Furthermore, much of the internet is archived in various ways, and damaging material can persist indefinitely even if deleted by the original author.

The internet is a blended space, where official Trust channels, staff channels that mention Trust activity, and staff channels that are purely personal, coexist. Distress among service users and reputational damage can occur even if a staff member is not explicitly discussing Trust activity.

We have an obligation to ensure those using the internet and social media are clear about Trust expectations regarding professional behaviour, protecting patient confidentiality and safeguarding.

2. Purpose

This policy sets out our expectations for internet and social media use for Trust employees. It outlines the ways in which staff can ensure that they have a positive presence online. It is intended to help staff make appropriate decisions about the use of social media.

This policy outlines the standards we require staff to observe when using social media in both a personal and professional capacity. The policy also covers when the Trust may engage formal action in line with the Trust's Disciplinary Procedure.

This policy complements other Trust policies and procedures such as, but not limited to, the Policy on Academic Freedom and Freedom of Speech, the Acceptable Use Procedure, the Data Protection Policy, and the Information Governance Policy.

This policy does not form part of any contract of employment and it may be amended at any time following approval from the responsible board.

3. Scope

This policy applies to all Trust staff, including those directly employed via an employment contract and those engaged on a self-employed basis as a contractor, volunteer, apprentice and those carrying out business at the Trust whether paid or unpaid, including Visiting Lecturers. For the purposes of this policy, the term “staff” will be used to describe all the above groups.

The scope of this policy includes use of both Trust and personal resources to access social media, including outside of working hours. All staff are expected to maintain a professional approach to work, patients and service users, students and colleagues at all times, and must not bring the Trust into disrepute.

This policy is not intended to account for every situation that may arise; it aims to outline a number of important principles which reflect the standards of behaviour required by staff.

All staff using social media must read and understand this policy to be clear about the general standards of conduct required when using the internet or social media. This policy will be flagged during induction as part of the introduction to communications at the Trust. If any employee of the Trust has any uncertainty about the meaning of the examples listed, they should speak to their line manager or the Communications Team for clarification.

This Policy does not restrict the right of elected staff side representatives of recognised trade unions to express their views through social media or to the media directly. Elected staff side representatives of recognised trade unions are fully entitled to make comment on behalf of their trade union, but not on behalf of, or when representing the Trust.

4. Definitions

Social media is the generic term given to any internet-based platform which enables online interaction and communication between users. Social media can include text, audio, video, images, podcasts, and other multimedia communications. Common forms include but are not limited to:

- Microblogging e.g. Twitter
- Blogging e.g. platforms like WordPress, Tumblr, Medium, and also websites with blogs or thinkpiece/news areas
- Public newsletters e.g. Substack, Tinyletter
- Walled-garden (i.e. where you must have an account to see much of the content) social networking and sharing e.g. Facebook, LinkedIn
- Open sharing e.g. Reddit
- Video and audio sharing e.g. YouTube, Vimeo, Tiktok, Soundcloud, Twitch
- Image sharing e.g. Instagram
- Networking/professional sharing e.g. LinkedIn
- Group messaging, e.g. WhatsApp and Snapchat (although these can be private spaces, groups can differ in size, be administrated by others, and might include staff, students, and service users known or unknown to staff members covered by this policy)
- Discussion boards, e.g. Mumsnet

- Online public and private discursive spaces e.g. Discord

Social networking is the use of social media sites, allowing individuals on-line interactions that mimic some of the interactions between people with similar interests that occur in offline life.

5. Duties and responsibilities

5.1 Managers

Managers are responsible for ensuring that staff know how to access current Trust policies and, where these are not being adhered to, discussing the standards and expectations required with staff concerned. All managers must understand this policy and how to escalate concerns that cannot be locally resolved.

5.2 Staff

- Staff are required to adhere to this policy
- Staff have a responsibility to report inappropriate use as outlined in this policy to their line manager in the first instance or to the Communications Team.

5.3 Communications Team

- The Trust Communications Team will regularly provide communications materials both internally and externally to make staff aware of this policy and its guidance, including at Trust inductions.
- This policy will be accessible via the Communications Team page on our staff intranet.

6. Principles, behaviours and approaches when using of social media

6.1 Interactions with others online

Do not engage in any activity online that could be construed as abusive, bullying or harassment. This applies regardless of whether the target(s) may be colleagues, students, patients and service users, or the wider public. We do not tolerate bullying or harassment face-to-face, nor will we tolerate it on social media or other online channels. Abusive, bullying or harassing behaviour may be subject to formal action being taken in line with the Trust's Disciplinary Procedure.

Criticising colleagues online, by name or in a way that allows them to be identified, is not acceptable. This behaviour may be subject to formal action being taken in line with the Trust's Disciplinary Procedure.

Be mindful of professional boundaries: Do not use social media to build or pursue relationships with service users, students, their families or carers even if they are no longer in your care. If you receive a friendship request from a current or former patient or their relative, please do not accept. Some platforms like Facebook allow you to ignore the request without the person being informed, avoiding unnecessary offence.

Many forms of social media generate networks of people with similar opinions, leading to 'echo chambers'. Many peers within a group can react strongly online to an event, text or post, generating momentum that leads to more extreme reactions. Posts to these networks also exist publicly in the wider network and can appear elsewhere stripped of context.

6.2 Sharing material

Consider carefully any material you share online. Have you read the article in full, including introductions and footnotes? Are you aware of the wider reputation and standing of the author? Is an article likely to cause anger, offense or distress, in particular among those communities which we serve? Does the article include any associated imagery that might cause anger, offense or distress? If you are not sure, confer with a colleague about the benefits of sharing something vs the potential harm. Sharing content likely to cause harm may be subject to formal action being taken in line with the Trust's Disciplinary Procedure.

Do not share internal documents online.

6.3 Maintain confidentiality at all times

Staff have a responsibility to maintain and protect service user, student, colleague and organisational confidentiality. Under no circumstances should you identify service users or students/learners, or post information that may lead to the identification of the individual (including to them being able to identify themselves) or post information that is stigmatising or derogatory to any patient group or condition. This includes never disclosing material that may be any of the following:

- Sensitive
- Confidential
- Subject to a non-disclosure agreement

Staff using social media for work purposes can be only held liable for a breach under the DPA if the breach is wilful (S55); otherwise the Trust is liable as Data Controller.

If you do disclose any such information, then you interfere with privacy and breach the law on confidentiality, and may be in breach of your employment contract and/or your professional Code of Practice.

6.4 You are an ambassador for the Trust and your profession

Your online behaviour not only reflects on you, but also on the Trust and your profession. While there is often a focus on the negative impact of social media on an organisation and its reputation, remember that you have the potential to act as a positive and respected ambassador for the Trust and your profession.

Never post a comment, photo or video online that you would not be willing to share with people in "real" life (i.e. in a face-to-face setting).

You should refrain from any action or activity which may bring you, your colleagues, your profession, the Trust or the NHS into disrepute. This not only includes the posts/content themselves, but also associated content such as biographies on blogs and websites and usernames or handles for staff accounts.

This may include posting on any social media (whether text, images, video or audio) that expresses defamatory, derogatory or offensive comments or attitudes (whether explicit or implied) towards:

- Service users, their relatives, carers or visitors
- Your colleagues, direct reports or managers
- The Trust, or its contractors.

Union representatives and members and our wider staff group staff are at liberty to use social media to publicise views and campaign in ways that may on occasion be critical of the Trust. Even in these cases they should not aim to bring the Trust into disrepute, and still be in line [with the Trust's stated values](#).

As a Trust we have stated that we are working to become an anti-racist organisation, and staff behaviour on social media should reflect this.

6.5 Consider your privacy

Consider your privacy. Different platforms allow you to set your privacy with different levels of strictness, from making your profile and content totally public, to only sharing material with accounts you approve. Be aware that platforms can update their privacy settings unilaterally, which may share your content more widely than you intend; their security practices may not be infallible so material may become viewable even if the privacy settings are correct; and that contacts that you have approved can copy your content and share it where they please. Which is to say, you should generally assume that anything you post online, including photographs, could become public, even if you have applied the strictest privacy settings. Once something is online, it can be copied and redistributed, and it is easy to lose control of it.

Media outlets have been known to take staff headshots from social media without permission, to use in their coverage. To remove these, the media outlet may demand that the staff member demonstrates that they are the bona fide representative of the purported owner, and also that proof of copyright is provided. If this happens to you, contact the Communications Team and they will advise you further.

Remember that the more of your personal life that is exposed through social media, the more potential it has to impact on you and your professional reputation.

6.6 Principles for Trust-owned, team-owned and staff-owned channels

6.6.1 Trust-owned social media channels

Maintaining an active presence on social media sites allows the Trust to communicate with stakeholders online.

The Trust maintains its own corporate presence across a number of social media channels, including:

- Facebook: <https://www.facebook.com/TavistockandPortmanEducation/>
- Twitter: @TaviAndPort <https://twitter.com/taviandport>
- Twitter: @TaviTraining <https://twitter.com/tavitraining>
- YouTube <https://www.youtube.com/channel/UCdNynuFMfQ1iFnP-saDkgGQ>
- LinkedIn <https://www.linkedin.com/company/tavistock-and-portman-nhs-foundation-trust>
- Instagram <https://www.instagram.com/taviandport/>
- Vimeo <https://vimeo.com/tavistockandportman>

These channels are overseen by the Director of Marketing and Communications, with day-to-day operational delivery sitting with the Communications Team and the Marketing Team.

Content deemed suitable for corporate social media includes:

- News, events and activities that are related to the Trust's business
- Content that provides a direct link back to the Trust's websites
- New developments, awards or achievements in the Trust or by its staff
- Engagement with people who have an interest in the Trust
- Information that enhances the Trust's reputation
- Extending the reach of content which reflects the Trust's values

Any member of staff may submit information to be considered for inclusion on Tavistock and Portman NHS Foundation Trust's social media sites by contacting the Communications Team communications@tavi-port.nhs.uk

6.6.2 Department/service-level social media channels

A team may feel that there would be a beneficial and positive use for social media as a means of communication and engagement with peers, students, service users and/or carers within their service area. For example, they might work with a specific cohort, or undertake a specific activity, and want to run a channel that can focus on that particular aspect of their work on social media and build appropriate relationships rather than rely on the more general Trust-wide channels.

When a Trust department or service is considering the creation of a social media channel, they must first consult with the Communications Team and familiarise themselves with this policy. The person proposing the introduction of this social media presence should discuss their plans with a member of the Communications Team (e.g. Digital Communications Manager or Head of Communications and Engagement), followed by submission of a written plan detailing the reason and objectives for this channel, the methods which will be used to manage the channel, how the security of the channel will be maintained and the expected life span of the channel.

The Communications Team will decide whether or not a department/service-level social media channel is appropriate in each case.

All social media accounts associated with Trust business and activities are expected to adhere to the principles and expectations of this policy.

The Communications Team must be provided with the username and current password for any service-level social channels, in case action needs to be taken on the channel out-of-hours. If/when the password changes, the Communications Team must be informed.

Teams need to understand the benefits and risks and the resource needed to manage these accounts.

The timing of publishing content, and how responses will be monitored, must be considered by the account lead. After work/evenings can be a good time to publish material, as professional peers might be commuting or surfing the web on their commute or in the evening. However, if the account is not monitored when material is published, and the material causes distress or anger, it may be left up for many hours before the situation can

be resolved. On balance avoid publishing material when responses to it cannot be monitored.

All social media accounts managed by service teams will be expected to adhere to this policy and all other relevant Trust policies.

The Communications Team will provide advice, guidance and training to teams on setting up and managing their social media accounts.

The Trust will take steps to remove or suspend any such account or content that falls outside this policy.

6.6.3 Staff use of social media

An increasing number of Trust staff are embracing social media and establishing their own social media presence and channels to engage with colleagues, healthcare influencers, students, patients and service users and the public. This is encouraged and the Communications Team can provide support, training and advice.

Personal use of social media should be restricted to agreed breaks (such as during lunch), and should comply with the principles in this policy.

The use of personal accounts for professional purposes, such as posting or re-posting about the Trust's work or discussing related issues with professional peers, is acceptable during working hours within reason.

Whether or not an employee explicitly declares their association with Tavistock and Portman NHS Foundation Trust on social media, they are expected to behave appropriately and professionally at all times, and in a manner which is consistent with the Trust's values and policies and relevant professional codes of conduct.

Individual professional bodies have issued specific guidance to their members in relation to the use of social media, including:

- [British Association for Counselling and Psychotherapy \(BACP\)](#)
- [Royal College of Nursing \(RCN\)](#)
- [Nursing and Midwifery Council \(NMC\)](#)
- [Health and Care Professions Council \(HCPC\)](#)
- [General Medical Council \(GMC\)](#)
- [British Medical Association \(BMA\)](#)
- [British Association of Social Workers](#)
- [British Psychoanalytic Council \(BPC\)](#)

Staff holding professional registration should be aware of their responsibility to uphold the reputation of their profession, and that their conduct online could jeopardise their registration if their fitness to practice is called into question.

The absence of affiliation or registration with a professional body (e.g. where registration is not required for employment), does not exempt staff from appropriate and responsible use of social media.

Staff who are found to breach the Staff Use of Social Media Policy or the Trust's Acceptable Use Procedure may be subject to formal action being taken in line with the Trust's Disciplinary Procedure.

6.7 When and how to respond to comments and criticism online

Social media provides a platform for organisations and individuals to engage with one another, in private, semi-private and public ways. This can include criticism of the Trust, its services, or our staff members.

On public-facing social channels such as Twitter, other site users are able to 'mention' the Trust, along with other stakeholders, in their messages, which sends a notification to those mentioned. This can amplify the criticism, or involve a key stakeholder in the criticism.

Staff who are responsible for social media channels need to be prepared to be criticised. They need to consider whether it is appropriate to respond, and the best way to do this to resolve the critic's issue and maintain the reputation of the Trust.

On encountering criticism of the Trust, its services or any staff member, in the first instance staff outside the Communications Team should report the issue to the Communications Team, who will advise on the most appropriate course of action.

Best practice for dealing with criticism varies from platform to platform and depends on the nature of the criticism. The Communications Team must be mindful that any criticism and any response may be read widely by staff, students, patients and service users, stakeholders and the wider public, so must operate in line with the Trust's values and Information Governance rules.

In many situations, empowering the critical person to submit the criticism through formal Trust channels will be the best way to resolve the issue successfully, and allow the Trust to learn from any given incident or shortcoming.

6.8 Responding to social media users in crisis

Trust, team and staff accounts may be 'mentioned' (or the equivalent function on different platforms) by site visitors who are experiencing a mental health crisis. An up-to-date ['Need urgent help?' page is on public website](#), can be shared with the in-distress visitor on the platform, to direct them to an appropriate form of support.. The matter should then be reported to the Communications Team and any other relevant persons.

7. Raising a concern

Staff who become aware of a breach of this policy have a duty to report it to their line manager. If they are unable to or are uncomfortable doing so, they may report their concerns to the next in line, another senior manager, or to the Freedom to Speak Up Guardian if appropriate.

Line managers who are made aware of a breach of the policy should seek Human Resources (HR) advice and where possible resolve the matter informally and locally. Where it concerns patients and service users or visitors, line managers should seek advice from the safeguarding leads and Caldicott Guardian if required and where possible resolve the matter informally and locally.

Directly employed staff in breach of the policy will be managed via the Trust's Disciplinary Procedure.

If you feel that you are the target of complaints or abuse on social media sites, speak with your line manager and the Communications Team, who will advise you and may be able to monitor the situation and offer advice or support in addressing matters.

Some platforms include mechanisms to report abusive activity and provide support for users who are subject to abuse by others, but these are inconsistent and outside of the Trust's control.

If you have reason to believe that the activity in breach of this policy is originating from a colleague or service user, you should alert your line manager.

Any grievance with the Trust should be channelled through procedures and policies already in place and dealt with in the work environment, and not displayed or discussed via social media.

8. Dissemination and implementation

This policy will be disseminated to staff via email and made available via the Trust's website and staff intranet. It will be flagged in the Staff Induction material.

9. Monitoring compliance

Incidents related to breaches of this policy will be captured in our incident reporting system as part of our quality portal. Dashboards can then be generated if necessary.

10. References

- The British Medical Association's Social Media Guidance (pdf)
- The British Association for Counselling & Psychotherapy Media Guidance
- The Nursing and Midwifery Council's Social Media Guidance
- The Royal College of General Practitioners' Social Media Highway Code
- The Royal College of Nursing's (2011) congress discussion about social networking sites
- Legal Advice for RCN Members using the Internet (2009) (PDF)
- Launch of General Medical Council's "Good Medical Practice" (25/03/13) incorporating Doctors' use of social media (new guidance)
- British Psychological Society (BPS) Supplementary guidance on the use of social media (PDF)
- BPC social media guidance
- The Health and Care Professions Council social media guidance (PDF)
- HR and social media in the NHS: An essential guides for HR Directors and managers (PDF)
- ACAS: Social Networking

11. "How to" guides

A number of comprehensive and user-friendly guides to the use of social media already exist. These are listed below:

[Using Social media to engage, listen and learn Primary Care Commissioning: Smart Guides to Engagement \(PDF\)](#)

[The Digital Engagement Guide: Ideas and practical help to use digital and social media in the public sector \(website\)](#)

12. Associated documents

These guidelines should be read in conjunction with other Trust policies:

- [Social media – common Dos and Don'ts](#)
- [Policy on Academic Freedom and Freedom of Speech](#)
- [Corporate and department of education and training records procedure](#)
- [Health records management procedure](#)
- [Information Governance policy](#)
- [Information Management & Technology Security procedure](#)
- [Data Protection policy](#)
- [Data Sharing procedure](#)
- [Staff Disciplinary Procedure](#)
- [Email, text and internet use procedure](#)

Appendix 1: Equality Impact Assessment

Completed by	Mike Smith
Position	Head of Communications and Engagement
Date	13/09/2021

The following questions determine whether analysis is needed	Yes	No
Is it likely to affect people with particular protected characteristics differently?		x
Is it a major procedure, significantly affecting how Trust services are delivered?		x
Will the procedure have a significant effect on how partner organisations operate in terms of equality?		x
Does the procedure relate to functions that have been identified through engagement as being important to people with particular protected characteristics?		x
Does the procedure relate to an area with known inequalities?		x
Does the procedure relate to any equality objectives that have been set by the Trust?		x
Other?		

If the answer to all of these questions was no, then the assessment is complete.

If the answer to any of the questions was yes, then undertake the following analysis:

	Yes	No	Comment
Do procedure outcomes and service take-up differ between people with different protected characteristics?			
What are the key findings of any engagement you have undertaken?			
If there is a greater effect on one group, is that consistent with the procedure aims?			
If the procedure has negative effects on people sharing particular			

characteristics, what steps can be taken to mitigate these effects?			
Will the procedure deliver practical benefits for certain groups?			
Does the procedure miss opportunities to advance equality of opportunity and foster good relations?			
Do other policies need to change to enable this procedure to be effective?			
Additional comments			

If one or more answers are yes, then the policy may unlawful under the Equality Act 2010 – seek advice from Human Resources (for staff related policies) or the Trust’s Equalities Lead (for all other policies).

Appendix 2: Social media – common dos and don’ts (on following page)

Social media – common dos and don'ts

This document supports our 'Staff use of social media policy'. If you are active on social media you should read that policy in full. [Read or download the policy from our staff intranet.](#)

Our best accounts are recognised as being effective ways for us to engage with our patients, service users, students, and staff, and to promote our services, offers and events.

Social media can help our patients and service users get the information they want quickly.

However, when social media goes wrong it can go wrong spectacularly, and cause problems for patients, service users, staff, students and our Trust.

Doing or say something damaging or inappropriate on an organisational social media account is subject to our existing staff code of conduct.

Social media dos and donts at a glance

Do

- act in line with [our Trust values](#) when online, as you would when interacting in professional spaces offline
- get approval from the communications team before setting up any new account for your team or service – there has to be a business case for creating and maintaining a separate account rather than using our corporate account. See the section at the end of this guidance about how to do this
- share your team/service account passwords with the communications team, and let them know when you update them
- adhere to existing HR policies as if you were speaking in public
- listen - social media is designed to be a two-way channel, just like any good conversation
- respond to patients and service users, students, staff and others if their requests are reasonable ([see our webpage about reasonable online engagement](#)). And do answer their questions or pass along requests you cannot answer to your Communications Team
- ask your own questions. Seek feedback from your patients and service users and students (but make sure you share the results with them)
- trust your teams and staff to use social media. We trust staff to answer telephones, emails and talk to patients and service users and students in the hallways and social media is another customer service channel now
- be responsible and respectful at all times
- innovate – different approaches work for different people
- be friendly and human – corporate jargon or issuing press releases won't work well on social media
- share other people's helpful content and links
- use hashtags but use them appropriately and strategically – your hashtag should also be your campaign 'call to action', objective or event hashtag

- have a clear plan for how to resource your account – and who looks after it when you are on leave
- credit other people's work, ideas and links
- monitor your accounts daily and respond to questions same day
- consider your social media accounts as customer services channels and be prepared to respond to customer enquiries quickly and effectively in a way which would be happy with if you were the customer
- talk to your communications team – we are here to help you
- learn from others – there is rich learning of good practice social media use across both public and private sector
- use social media in the spirit in which it was intended – to engage, openly and honestly

Don't

- engage in any activity online that could be construed as abusive, bullying or harassment. This applies regardless of whether the target(s) may be colleagues, students, patients and service users, or the wider public. We do not tolerate bullying or harassment face-to-face, nor will we tolerate it on social media or other online channels. Abusive, bullying or harassing behaviour may be subject to formal action being taken in line with the Trust's Disciplinary Procedure.
- say things on social media that you would not say at a public meeting that included our patients and service users and students
- share an article/video/podcast without reading/watching the whole thing. This includes noting associated imagery
- share an article/video/podcast without considering the reputation of the author and the platform on which it is published. Does the author or platform also produce content that diverges widely from our Trust's values?
- identify service users or students/learners, or post information that may lead to the identification of the individual
- broadcast or talk *at* people. Our patients and service users and students will soon spot too many broadcasts and respond accordingly
- try to cover up mistakes. If you make a mistake on social media, get in contact with the Communications Team – they will advise on how to honestly proceed at that stage
- assume that social media will look after itself – you will need to invest time, enthusiasm and energy to make it work. And don't leave your accounts unattended for long spells
- continue with poor performing accounts – sometimes it's best to close an account which is not delivering, effective or active. The communications team has the authority to close such accounts
- assume that social media is 'free'. It isn't – your time costs the organisation. Social media is a time-consuming activity, and you have to consider this against your other work and priorities
- post content which will embarrass the organisation or yourself
- ignore legal advice – it's there to help you
- think that a disclaimer in your bio will save you from potential legal action
- share your passwords with anyone other than your communications team

- forget that social media is 24/7 – if you publish a post at 5pm, people may reply in public throughout the evening and night before you are next able to respond.

Opening an account for your team or service

For some teams or services, it might seem sensible to have a separate social media account, rather than posting to the main Trust account. For example, you might work with a specific cohort, or undertake a specific activity, and want to run a channel to build appropriate relationships rather than rely on our more general Trust-wide channels.

However, more often than not, using our established well-followed and well-resourced main corporate accounts will be the best approach. We have thousands of followers across our Trustwide channels, can get your content in front of many more eyeballs, and already undertake moderation and analytics on these channels.

It takes significant time to create, manage, monitor and grow an effective social media account, and so it shouldn't be undertaken lightly.

If you are considering opening a new account you must first consult with the Communications Team. If they agree that it might be the right approach, you should team submit a written plan about how you will monitor and maintain the account. The final decision on whether a new organisational account can be opened sits with them.

Once the account is live you must share all account passwords for department or service-level social media accounts with the Communications Team, in case the responsible member of your team is on leave or unwell and an issue arises relating to the account.

We want to understand how well our team and service accounts are doing, so will ask for regular analytics data from you. The Communications Team will describe how this works when you approach them about setting up your team/service account.