

## Social Media Policy

### Background

Nottingham and Nottinghamshire ICB has the following channels:

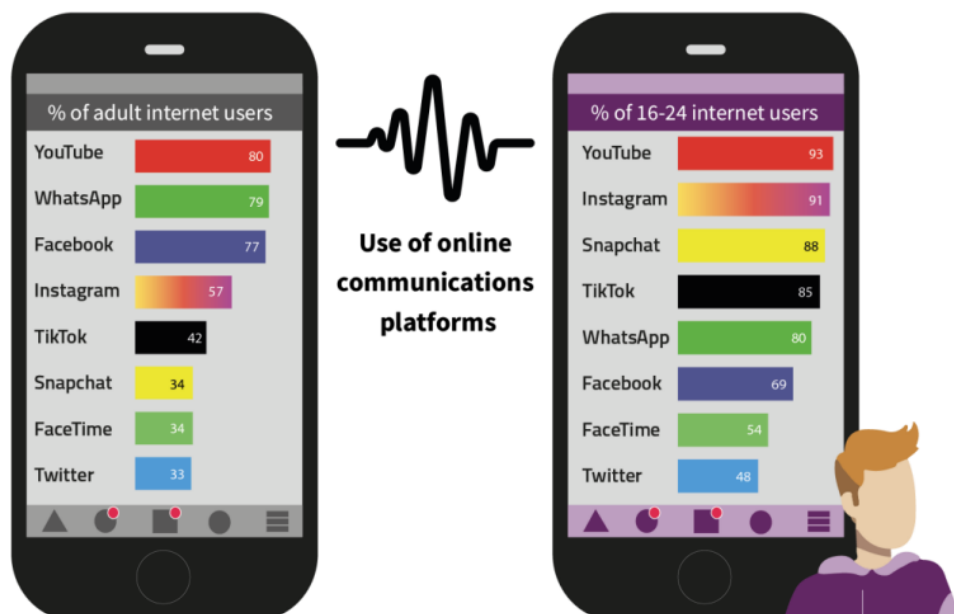
- Twitter (12.4k followers) Set up 2010
- Facebook (6.6k followers) Set up before 2017
- Instagram (2.7k followers) Set up before 2017
- LinkedIn (310 followers) Set up 2022
- YouTube (258 subscribers) Set up before 2017
- Soundcloud (<100 followers) Set up 2023

Nottingham and Nottinghamshire ICS has the following channels:

- Twitter (1.1k followers) Set up July 2022
- Facebook (<100 followers) Set up July 2022
- Instagram (<100 followers) Set up July 2022

### Audience

Knowing the audience for each channel is key to differentiating which kinds of content to promote on which channel.



*\*Figures from Ofcom March 2023*

The growth of online audiences and use of social media channels enables us to work more effectively in three ways:

### **Communication**

Directly communicate important and timely messages news and information, promote events and improve awareness of services by providing direct digital access to them.

### **Engagement**

Seek opinions, share conversations and better engage with residents. We can help to improve residents' knowledge and correct misconceptions.

### **Collaboration**

Find more efficient ways of working together and sharing information across strategic partners which can enhance partnership working and demonstrate the effectiveness of working together.

It is therefore essential that our social media accounts are:

- Properly researched
- Well planned
- Effectively managed
- Regularly monitored, and
- Closely evaluated

### **Use**

We will be strategic in our use of social media to focus time and effort on the areas which best help us to meet our organisational and ICS objectives and help promote health and wellbeing in Nottingham and Nottinghamshire. Any messages, whether organic or shared, will conform to our aims and principles as set out in the Integrated Care Strategy.

In addition to using social media for day-to-day publicity and campaigns, our social media channels will be used for the following:

- **Broadcasting and sharing information** – services, events, public safety
- **Campaigns** – local, national, and those of partner agencies
- **Emergency communications**
- **Engagement and consultation**
- **Form part of our public image** – used to improve corporate reputation and build public trust

- **Responding to customer service requests and enquiries** – including private and direct messaging

The ICB and ICS's social media accounts **will not be** used to:

- **Offer opinion** on events and public affairs
- **Promote individuals or organisations** unless they are reasonably linked to ICB / ICS activity
- **Fundraise** for commercial gain
- **Promote or engage in local or national political activity**
- **Share messages which conflict with our aims and principles**

The ICB and ICS does not pay for verification on any accounts, as per NHSE guidance.

## Principles

We will strive to ensure all content on our social media channels is:

### Accessible and approachable

- We will be honest, human, friendly, helpful, professional and fun (where appropriate)
- We will use the most appropriate tools for the intended audience. Consideration will be given as to the platform(s) most suited to the message
- We will ensure that our tone of voice is friendly, active and approachable e.g. the use of 'we' rather than NHS Nottingham and Nottinghamshire
- We will consider how to tailor content to meet the needs and preferences of particular groups
- We will make content engaging – using emojis, real stories, photos, infographics and videos.
- We will make text and visual content accessible, using subtitles and alt text image descriptions where possible

### Clear and consistent

- We will ensure that posts across multiple channels are co-ordinated, consistent and collaborative and avoid unnecessary duplication
- We will be clear and concise and **avoid** the use of acronyms, abbreviations and jargon
- We will write in plain English and use short words.

## **Relevant and timed appropriate**

- We will ensure information is up-to-date and communicated regularly
- We will strive to provide the right information at the right time
- We will be flexible and responsive to unforeseen events or circumstances
- We will ensure that all social media activity follows any pre-election period principles

## **Proportionate and targeted**

- We will tailor our communications to suit each individual platform using updated intelligence about social media algorithms to enhance engagement
  - Facebook: ability to reach a significant number of local communities through organic and paid content. Opportunity to be more informal, engaging and fun.
  - Twitter: ability to reach stakeholders, employees and some of our local community. Ability to create threads and ask questions – encourage interaction.
  - LinkedIn: focus on engaging current employees, prospective employees and partner organisations.
  - Instagram: good quality pictures / engaging graphics. Use of hashtags. Tends to be a female led audience.
- Where appropriate we will include relevant hashtags (for example, linked to a place, organisation, campaign or appropriate trend) and tag (or @mention) any relevant partner organisations
- We will utilise the most cost-effective formats available to us and use paid for/ targeted posts where appropriate to ensure people are getting the information they need and in the correct format.

## **Open and honest**

- We will be open and honest
- All content will have a clearly identified purpose as to whether it is a clear call to action, just for information or whether views are being sought i.e. what do we want people to DO as a result of the post?

## **Accountable and authentic**

- We will be accurate, fair and balanced in order to provide an honest and authentic picture
- All social media communications will be clearly branded, professional and demonstrate pride and credibility in accordance with our ICB and ICS style guidelines

## **Suggested template for posts**

Emoji(s) + headline

Key information

Link – call to action

Tag relevant organisations

Hashtags

Image with alt text / video with subtitles

## Managing social media

We use Hootsuite to schedule social media posts, but we use each individual channels to extract the analytics. The analytics, including engagement, impressions and followers are reported in the Communications and Engagement monthly report and are benchmarked against the previous year.

The Communications and Engagement team can carry out analysis of specific campaigns upon request in advance.

All comments on the ICB and ICS channels are moderated as per the NHSE guidelines below\* so any harmful or abusive comments can be hidden and questions can be responded to.

\*NHSE moderating comments on social media guidelines April 2023.

Type of comment	Details	Action
Harmful, targeted abuse at a person or group of people	This includes anything that breaches social media platform's code of conduct — any comments that promote violence against, threaten, or harass people on the basis of race, ethnicity, national origin, caste, sexual orientation, gender, gender identity, religious affiliation, age, disability, or serious disease.	<b>Delete these comments if the platform allows, if not, hide and report them</b> — this is our non-negotiable red line and we have a zero tolerance policy for abuse on our posts. These posts break the social media platforms' policies too, so they should take action if reported.
Mis- or disinformation	These comments may not technically break the rules of a platform, or be targeted at an individual (so it's unlikely the platform will remove them), but they could spark dangerous conversations (eg spreading anti-vaxx information) or cause people to make decisions that are harmful.	<b>Hide these comments</b> — attempt to prevent the conversation escalating.  On Instagram, delete these posts if they are spam or spreading misinformation (and leave any that are unpleasant), as you can't 'hide' comments.
Anything else	All other content — including comments that are critical of the NHS and NHSEI.	<b>Leave these comments</b> — but take note if key themes are emerging to inform future content.  People can criticise us, even if we disagree, and we shouldn't be silencing these comments.

The ICB and ICS takes abuse on social media seriously and we will remove messages and/or disable comments (where function allows) including reporting and/or blocking users on our social media channels who post messages at us which we believe are:

- Abusive or obscene
- Deceptive or misleading
- In violation of any intellectual property rights, including copyright
- In violation of any law or regulation
- Spam and off-topic content (persistent negative and/or abusive posts in which the aim is to provoke a response)
- Promotional material, including links to external websites and promotions

Anyone repeatedly engaging with us using content or language which falls into the above categories will be blocked and/or reported to the associated social media platform. We will not tolerate or respond to abusive messages.

Please contact [nnicb-nn.comms@nhs.net](mailto:nnicb-nn.comms@nhs.net) if you wish to discuss blocking a social media account.

### **Service-specific accounts**

The ICB and ICS does not support the set-up of service-specific social media accounts/pages unless there are exceptional circumstances. A business case for service-specific accounts/pages will need to be made via the [social media request form on the intranet](#).

The recommended approach is to utilise existing ICB, ICS or Place Based Partnership social media accounts, as these already have established audiences and are managed by the communications team, who can respond quickly to questions and comments.

### **Social media protocol for staff**

The success of our ICB and the overall system that we are part of is dependent on great relationships between ICB staff and our partners, citizens, patients and stakeholders. Social media (e.g. Twitter, Facebook, Instagram, blogs and other web forums) is a powerful way for colleagues to establish, develop and deepen these relationships and also an important tool for us to hear from citizens about what they are finding most positive or more challenging about the services that we oversee.

However, the informal, instant and “always on” nature of social media can sometimes mean that things get posted in haste or there is a blurring of the lines between personal and professional accounts or activities on social media.

Here are some helpful tips to keep us all in the right arena in our social media use:

- If you can be identified as an NHS or ICB employee on your social media (either because you explicitly state it or because of what you post) then your account would no longer be seen as a “personal account” and the same standards that would apply to official business activities would apply.
- What gets posted online has a tendency to stay available for a very long time – don’t post something online that you wouldn’t want to do or say in an official meeting or letter or email or be reported in the local or national media
- Make sure you don’t inadvertently reveal information that should be kept confidential – this could be commercially sensitive information or information about individual patients or citizens
- Keep discussions with partners and colleagues from our health and care system polite and respectful at all times – even when we are working through tensions or difficult issues. This also applies when you might be engaging with citizens or patients.

If you have any feeling or question of, “should I post this” then you probably shouldn’t. Take a step away from the phone or keyboard, have a cup of tea and then look at it again. You can usually refer to the official ICB or ICS social media accounts for answers to questions you might be receiving or discussions you have found yourself involved in. If in doubt then signpost people to the official information available there.

This protocol reflects the ICB Acceptable Behaviours Policy.

If you’ve got any questions on any of this please email [nnicb-nn.comms@nhs.net](mailto:nnicb-nn.comms@nhs.net)