

Education and Training Committee – 3 March 2016

A proposal for Health and Care Professions Council (HCPC) guidance on the appropriate use of social media and networking websites

Executive summary and recommendations

Introduction

The HCPC recently published revised standards of conduct, performance and ethics. The standards require registrants to use all forms of communication appropriately and responsibly, and for the first time specifically refer to social media and networking sites.

Over the last number of years we have frequently received requests for advice and guidance from registrants and other stakeholders on the use of social media and networking, including ethical considerations and how this area interacts with the standards we set. This a significant growth area with registrants increasingly engaging with social media and networking in their personal and professional lives. Furthermore one of the recommendations of the professional liaison group (PLG) tasked with reviewing the standards of conduct, performance and ethics was to develop separate guidance for social media and networking use by our registrants. We now believe that it is appropriate to consider producing specific guidance in this area.

The enclosed paper outlines the purpose of the proposed guidance, provides a draft work plan and highlights some of the evidence – including recent fitness to practise (FTP) cases – which supports producing this new guidance. We are also proposing to trial a new crowdsourcing tool for engaging stakeholders to identify what issues should be included in the draft guidance prior to the public consultation phase. This would mark an innovation in our policy making process.

Decision

The Education and Training Committee is invited to discuss and approve the proposal and accompanying work plan for producing HCPC guidance on the appropriate use of social media and networking websites.

Background information

• The revised standards of conduct, performance and ethics published in January 2016 (<u>www.hcpc-</u>

uk.org/aboutregistration/standards/standardsofconductperformanceandethics/

• Existing registrant facing information on use of social media and networking websites (<u>www.hcpc-uk.org/registrants/standards/socialnetworking/</u> and <u>www.hcpc-uk.org/Assets/documents/100035B7Social_media_guidance.pdf</u>)

Resource implications

The resource implications for developing guidance on the appropriate use of social media and networking websites have been accounted for in departmental planning for 2016-17.

Financial implications

The financial implications include identifying and contracting a third party to carry out the crowdsourcing activity to engage with registrants and other stakeholders. The financial implications have been accounted for in departmental planning 2016-17.

Appendices

Appendix 1: Draft work plan for the development of social media guidance for HCPC registrants.

Appendix 2: Sample of fitness to practise cases relating to the inappropriate use of social media and networking websites by our registrants.

Date of paper

27 January 2016



health & care professions council

1. Introduction

- 1.1 The HCPC published revised standards of conduct, performance and ethics on 26 January 2016. The revised standards contain a requirement for registrants to use all forms of communication appropriately and responsibly, now including a specific reference to the use of social media and networking websites.
- 1.2 We frequently receive requests for advice and guidance from registrants and other stakeholders about the appropriate use of social media and networking websites including wider ethical considerations and how this area interacts with the standards we set. Furthermore one of the recommendations of the professional liaison group (PLG) tasked with reviewing the standards of conduct, performance and ethics was to develop separate guidance for social media and networking use by our registrants. We believe that it is now appropriate to consider producing specific guidance in this area.
- 1.3 This paper outlines our rationale for producing specific guidance on the use of social media and networking websites for our registrants; outlines the purpose of the proposed guidance; provides a draft work plan to deliver this work; and highlights some of the evidence which supports the need for this new guidance.

2. Context

- 2.1 Social media and networking has transformed how we see and use the internet. It is increasingly being used by our registrants in both their personal and professional lives.
- 2.2 Some commentators have argued that social media and networking has played a part in transforming the way people communicate around the world and providing instant and borderless information which elevates electronic communication to near face-to-face. This has allowed anyone whether specialist or non-specialist to become a content creator and communicator on the internet.¹
- 2.3 Health and care professionals are increasingly using social media and networking to provide timely, accessible and credible health information to improve public health outcomes. For example, writing blogs on health topics; using social networks such as Facebook to communicate about a range of

¹ Some of the above content has been paraphrased from Christine McNab's article 'What social media offers to health professionals and citizens' which was published in the *Bulletin of the World Health Organisation* (2009), p. 566 (www.who.int/bulletin/volumes/87/8/09-066712/en/)

topics including health issues; using social messaging services such as Twitter to follow various health conferences and developing health news stories; searching for information or sharing web links; building new contacts and networks; and enabling health institutions to communicate instantly and directly with the public.²

- 2.4 We already publish guidance to accompany our standards in a number of key areas including standards of education and training guidance, guidance on health and character, confidentiality and continuing professional development, among other areas.³ Therefore there is a precedent for us to produce guidance on particular issues which are relevant to our standards and where we have identified a particular need.
- 2.5 We frequently receive enquiries from our stakeholders including registrants, professional bodies, employers and students via our policy enquiries email inbox about any specific standards or guidance we set for social media and networking use. Some stakeholders including employers have requested guidance from us in preparation for writing their own social media and networking policies. Therefore there is a demand for additional guidance in this area.
- 2.6 We have also published a number of resources and documents which detail our own usage of social media and networking; and provide relevant information to registrants on the appropriate use of social media and networking in their personal and professional lives.
 - Our Communications department regularly uses social media and networking to interact and engage with key stakeholders including registrants via a number of different social media forums and platforms. These include: Facebook, Google+, LinkedIn, Twitter, HCPC Blog, YouTube and HCPC apps. We use social media and networking to promote our work including consultations and the role the HCPC and regulation.
 - Our Communications department has also produced a user policy for HCPC social media pages in order to develop and manage our presence on a range of e-communication channels.⁴
 - We have published an article in our registrant newsletter 'In Focus' which we regularly reference for registrant enquiries on the appropriate use of social media and networking. This places an onus on registrants to ensure that their usage of social media and networking is consistent with the standards we set including the standards of conduct, performance and ethics. The article also outlines some considerations for registrants when posting information, for example, ensuring that there

² Christine McNab, 'What social media offers to health professionals and citizens' which was published in the *Bulletin of the World Health Organisation* (2009), p. 566 (<u>www.who.int/bulletin/volumes/87/8/09-066712/en/</u>) ³ These guidance documents and publications can be accessed here: www.hcpc-

uk.org/publications/brochures/

⁴ The social media user policy can be accessed here: www.hcpc-uk.co.uk/mediaandevents/socialmedia/

are no breaches of service user confidentiality. We have also published an accompanying webpage on our website for registrants which covers the appropriate use of social media and networking.⁵

3. Guidance from other organisations

- 3.1 The policy and standards department have carried out some preliminary research into social media and networking guidance prepared by our stakeholders. For example, a number of regulators and professional bodies already produce social media and networking guidance including: the British Medical Association (BMA);⁶ General Chiropractic Council (GCC);⁷ General Medical Council (GMC);⁸ and Nursing and Midwifery Council (NMC).⁹
- 3.2 Much of this guidance follows a similar format whereby it recognises the benefits of using social media and networking, but also identifies its potential risks including wider ethical considerations.

4. Work plan

4.1 The policy and standards department have prepared a draft work plan, subject to the Education and Training Committee's approval, for developing, consulting on and publishing new social media and networking guidance for our registrants. The draft work plan has been appended to the back of this paper and is labelled appendix one.

Crowdsourcing

- 4.2 Given the nature and subject matter of this guidance, we are proposing a potentially innovative approach to involving our stakeholders including registrants at an earlier point in the policy making process prior to the public consultation phase to identify what areas or issues should be addressed in the draft guidance. One way this could be achieved is by working with a third party to manage and utilise a 'crowdsourcing' mechanism.
- 4.3 Crowdsourcing is a way of obtaining services, ideas, or content (for example, information or input into a particular task or project) by soliciting contributions from a large group of people and especially from an online community rather than using more traditional methods.
- 4.4 In essence we would enable the third party contractor to engage stakeholders with a focus on registrants in an online conversation with regard to identifying

⁵ The webpage and accompanying 'In Focus' article can be accessed here: <u>www.hpc-uk.org/registrants/standards/socialnetworking/</u> and <u>www.hcpc-uk.org/Assets/documents/100035B7Social_media_guidance.pdf</u>

⁶ The BMA's guidance can be accessed here: <u>www.bma.org.uk/support-at-work/ethics/ethics-a-to-z</u>

⁷ The GCC's guidance can be accessed here: <u>www.gcc-uk.org/UserFiles/Docs/GCC-social-media-draft-guidance.pdf</u>

⁸ The GMC's guidance can be accessed here: <u>www.gmc-uk.org/guidance/ethical_guidance/21186.asp</u>

⁹ The NMC's guidance can be accessed here: <u>www.nmc.org.uk/standards/guidance/social-networking-guidance/</u>

the issues which should be covered in the proposed guidance. This feedback would then be used in drafting the guidance. We anticipate using our social media presence to particularly target the involvement of registrants who use social media.

- 4.5 This tool has already been utilised by professional bodies and other regulators. For example, the Royal College of Speech and Language Therapists have used crowdsourcing to identify and develop professional guidance and resources for their members to meet our revised standards.¹⁰
- 4.6 The General Pharmaceutical Council (GPhC) has utilised crowdsourcing to identify the types of peer discussion that are taking place in the pharmacy profession. The GPhC have used this information to produce a tool kit for their registrants to use when undertaking peer discussion and to feed into other associated work in developing their continuing fitness to practise (FTP) framework.

5. Benefits of producing guidance

- 5.1 The benefits of the HCPC producing social media and networking guidance include:
 - being able to deal more effectively with the increasing number of enquiries we receive from our stakeholders – including registrants – seeking additional guidance in this area;
 - recognising that social media and networking is increasingly being used by our registrants in both their personal and professional lives;
 - outlining both the benefits and potential risks of using social media and networking and addressing a potential grey area for registrants;
 - providing a framework for registrants to utilise this useful and powerful tool ethically and responsibly;
 - ensuring a more joined up approach between our use of social media and networking as a regulator and our expectations for registrants in this area; and
 - testing a potentially innovative tool crowdsourcing for engaging our stakeholders at an earlier point in the policy making process in order to develop content for the draft guidance prior to the public consultation phase.
- 5.2 The inappropriate use of social media and networking by our registrants have resulted a number of fitness to practise (FTP) cases in recent years. A

¹⁰ Further information on the Royal College of Speech and Language Therapists work in this area is available here: www.rcslt.org/members/professional_standards/communicating_quality_live

summary of three of these cases is appended to the back of this paper and are labelled appendix two.

5.3 FTP panels have imposed sanctions ranging from cautions to strike off on registrants who have been found to have used social media and networking websites inappropriately. This sample of FTP cases mainly focused on the inappropriate use of social media and networking by a registrant in their professional as opposed to personal lives. Key issues of concern included the disclosure (even inadvertently) of confidential service user information in this forum. The inappropriate use of Facebook and Twitter were also specifically referred to in these FTP cases.

Appendix 1: Draft work plan for the development of social media guidance for HCPC registrants.

<u>Planning</u>	3 March 2016
• ETC paper on the concept of the	
guidance and outline work plan.	
Crowdsourcing campaign	April 2016 (Final dates TBC)
ETC paper on draft guidance and consultation document	9 June 2016
Council paper on draft guidance and consultation document	6-7 July 2016
Consultation	11 July 2016 – 30 September 2016
Consultation period 12 weeks	(TBC)
Post-consultation	17 November 2016
ETC paper on consultation	
response analysis and finalised	
guidance	
Council paper on consultation	7 – 8 December 2016
response analysis and finalised	
guidance	
Publication	First quarter of 2017
Publication of finalised guidance.	

Appendix 2: Sample of fitness to practise cases relating to inappropriate use of social media and networking websites by our registrants

'Paramedic suspended for offensive Facebook remarks about Mid Staffs campaigner', HCPC Press Release, 14 May 2014 (<u>www.hcpc-uk.org/mediaandevents/pressreleases/index.asp?id=771</u>)

- A paramedic was suspended from the HCPC Register in May 2014 by a fitness to practise (FTP) panel for a period of 12 months for posting offensive and derogatory Facebook comments about a campaigner from 'Cure the NHS'.
- The FTP panel heard that the registrant had written several derogatory posts about a NHS campaigner on the 'We support the front line staff at Stafford Hospital' Facebook page.
- The registrant was dismissed by their employer following an internal investigation and disciplinary procedure.

'Radiographer struck off after sending sexually explicit messages on Facebook, HCPC Press Release, 10 August 2015 (<u>www.hcpc-</u> <u>uk.org/mediaandevents/pressreleases/index.asp?id=971</u>)

• A radiographer was struck off from the HCPC's Register by an FTP panel on the grounds of misconduct in August 2015 for sending sexually explicit messages on Facebook.

- The registrant was found to have written and sent comments of a sexually explicit nature regarding work colleagues on Facebook, and taking photographs on duty with confidential service user information in the background. Some of these posts were made whilst the registrant was working.
- The registrant was dismissed by their employer following an internal investigation and disciplinary procedure in June 2014.

Operating department practitioner cautioned after sending inappropriate Tweets, 6 January 2014 (<u>www.hcpc-</u>

uk.org/complaints/hearings/index.asp?id=4077&month=1&year=2014&EventType=H
)

- An operating department practitioner received a caution for three years from an FTP panel on the grounds of misconduct in January 2014 for sending inappropriate Tweets.
- The registrant was found to have written a number of inappropriate Tweets under a pseudonym between August and September 2012 which related to his professional life.
- The Tweets in question included comments referring to service users, the Trust Board and Executive Team, and colleagues, together with a photograph of an ambulance and theatre list containing information that could lead to service user identification.
- The registrant's former employer launched an internal investigation; however, the registrant resigned before an internal disciplinary hearing could take place. The allegation was subsequently forwarded to the HCPC for investigation.