# **Education and Training Committee 11 September 2019**



# Social media guidance updates

## **Executive Summary**

In 2018 we became aware of issues relating to live tweeting by an ambulance trust, both through our social media monitoring and through concerns raised in enquiries to the Policy and Standards department.

Our Executive Director of Policy and External Relations liaised with the Trust's Director of Communications to explain the HCPC standards and the principles set out in the HCPC Social media guidance. She also attended a round table event hosted by the Chief Allied Health Professions Officer, NHS England, which explored the matter.

In September 2018 we published a <u>blog post</u> highlighting the Social media guidance, the benefits of social media, and the importance of confidentiality. Earlier this year we made revisions to the Social media guidance to elevate the text on confidentiality, and outline some further key considerations around various social media tools. We have shared this with key stakeholders, including:

- The Chief AHP Officer for each of the four nations.
- The Allied Health Professions Federation.
- The Allied Health Professions Federation Scotland.
- Employer contacts.

We received three responses to our proposed changes, and have made the following updates in light of comments made:

- Outlined, in our top tips, the need to follow employer policies as well as HCPC guidance, not instead of.
- Clarified, in our top tips, that identifiable information relates to service users.
- Highlighted that 'a service user who is anxious, distressed or in pain may be unable to give informed consent to anything other than immediate care.' Outlining that this is of particular relevance in instances of live social media posts.
- Updated text on declining friend requests to include follows and invitations, to cover all forms of social media.
- Included reference to Instagram in our definition of social media.
- Highlighted the need to take account of the guidance for both private and professional use.

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There are two areas of feedback we have not addressed in the revisions to the guidance:

- One respondent suggested our language in the guidance should be firmer, and move from indicating registrants 'should' to 'must'. Legal advice has confirmed that this would mislead registrants as to the status of the guidance, and that if we were to impose any mandatory requirements, this would need to be through our Standards, which have a sound statutory basis.
- One respondent felt explicit reference to social media platforms would be helpful in the guidance. We have been careful to future proof the guidance, and as social media evolves so quickly, we have decided not to take this forward.

The proposed revisions to the Social media guidance can be found at Appendix A.

An equality impact assessment can be found at Appendix B

Previous consideration	SMT considered these updates and approved on 13 August 2019	
Decision	ETC is asked to discuss and approve the proposed amendments	
Next steps	The proposed amendments will be taken to Council for approval	
Strategic priority	<b>Strategic priority 3</b> : Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment.	
Risk	No risks identified by these changes	
Financial and resource implications	No financial or resource implications	
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# Guidance on social media

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#### About this document

We have written this document to provide guidance to registrants who use social media. It explains how to use social media in a way which meets our standards.

This document cannot address every issue that might come up. We have instead focused on the issues registrants and other stakeholders told us they came across most frequently.

This guidance is focused on our standards. Some professional bodies publish social media guidelines to support their members to get the most from this technology. If you are employed, your employer may also have relevant policies or guidance that apply to you.

#### How this document is structured

This document is divided into four sections.

- Section 1 provides information about the HCPC.
- Section 2 contains some top tips for using social media.
- Section 3 provides guidance on how our standards relate to the use of social media, and some relevant issues you may come across.
- Section 4 contains information about how to find out more.

#### Language

Throughout this document:

- 'we' and 'us' refers to the Health and Care Professions Council (HCPC);
- 'registrant' refers to a professional on our Register;
- 'you' or 'your' refers to a registrant; and
- 'social media' refers to websites and applications that enable users to create and share content, and to interact with other users. This includes – but is not limited to - websites such as Facebook, Twitter, <u>Instagram</u>, and YouTube, as well as online forums, and blogs.

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#### **Section 1: About us**

We are the Health and Care Professions Council.

We are a regulator and were set up to protect the public. To do this, we keep a Register of professionals who meet our standards for their professional skills, knowledge and behaviour. Individuals on our Register are called 'registrants'.

We currently regulate 16 professions:

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Social workers in England
- Speech and language therapists

#### About the standards

We set standards of conduct, performance and ethics, which set out the high level principles of how we expect registrants to behave. We use the standards when a concern has been raised about a registrant, to help us decide whether we need to take action to protect the public.

As a registrant, you must make sure you are familiar with the standards and that you continue to meet them at all times.

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## **Section 2: Top tips**

The following are some top tips for using social media in a way which meets our standards. You can find information about how to put these into practice in the next section of this document.

- Think before you post. Assume that what you post could be shared and read by anyone.
- Think about who can see what you share and manage your privacy settings accordingly. Remember that privacy settings cannot guarantee that something you post will not be publicly visible.
- Maintain appropriate professional boundaries if you communicate with colleagues, service users or carers.
- Do not post confidential or service user identifiable information.
- **Do not post inappropriate or offensive material**. Use your professional judgement about whether something you share falls below the professional standards expected of you.
- If you are employed, you will also need to ensure you follow your employer's social media policy.
- When in doubt, seek advice. Appropriate sources might include experienced colleagues, trade unions and professional bodies. You can also contact us if you are unsure about our standards. If you think something could be inappropriate or offensive, refrain from posting it.
- **Keep on posting!** We know that many registrants find using social media beneficial and do so without any issues. There's no reason why registrants shouldn't keep on using it with confidence.

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## Section 3: Using social media

#### Benefits of social media

Registrants have told us that using social media helps them to:

- develop and share their skills and knowledge;
- engage with the public about what they do;
- network with other professionals nationally and internationally; and
- raise the profile of their profession.

The vast majority of registrants who use social media already do so responsibly, in line with our standards, and without any difficulties at all. However, we know that registrants sometimes have questions or concerns about using social media because they want to make sure that they always meet our standards.

This guidance explains what our standards mean when using social media, both privately and professionally. We have structured the guidance below under the areas of our standards which apply to the appropriate use of social media. It is important that you follow this guidance, and any guidance issued by your employer.

#### Respect confidentiality

Our standards of conduct, performance and ethics say:

'You must treat information about service users as confidential' (5.1)

Confidentiality is an essential consideration in all areas of a professional's practice, and is particularly important in the context of social media.

When you post information about another person on social media, think about whether it is appropriate to share that information. If the information is confidential and/or could allow a service user to be identified, you should not put it on a site without their consent. This could include information about their personal life, health or circumstances, or images relating to their care.

For consent to be valid, it must be voluntary and informed, and the person giving consent must have the capacity to make the decision. They must understand and not object to:

- the information being disclosed or shared;
- the reason for the disclosure;
- the people or organisations the information will be shared with; and

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#### how the information will be used.

Your primary focus should be on delivering the best possible care to meet the service user's needs.

A service user who is anxious, distressed or in pain may be unable to give informed consent to anything other than immediate care.

Even if you have the highest level of privacy settings, something you share online can quickly be copied and redistributed to a much wider audience. This means a post can stay in the public domain after you delete it. Try to stay up to date with any changes to the privacy settings of the social media platforms you use. If you are unsure whether to post, stop and seek advice first from an experienced colleague, professional body or trade union.

For further information, please see the HCPC's Guidance on Confidentiality.

## **Communicate appropriately**

The standards of conduct, performance and ethics say:

'You must use all forms of communication appropriately and responsibly, including social media and networking websites' (2.7)

You should apply the same standards as you would when communicating in other ways when using social media. Be polite and respectful, and avoid using language that others might reasonably consider to be inappropriate or offensive. Use your professional judgement in deciding whether to post or share something. Remember that comments or posts may be taken out of context, or made visible to a wider audience than originally intended.

#### Be honest and trustworthy

Our standards of conduct, performance and ethics say:

'You must make sure that your conduct justifies the public's trust and confidence in you and your profession' (9.1)

This means you need to think about who can see what you share. Make sure you understand the privacy settings of each social media channel that you use. Even on a completely personal account, your employer, colleagues or service users may be able to see your posts or personal information. It is best to assume that anything you post online will be visible to everyone.

Our standards of conduct, performance and ethics say:

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'You must make sure that any promotional activities you are involved in are accurate and are not likely to mislead' (9.3)

If you use social media to advertise or share information related to your professional practice, you must make sure it is fair and true to the best of your knowledge. You may choose to include a disclaimer on your profile that your views are your own, and that they do not represent the views of your employer or those who contract your services.

#### **Respect confidentiality**

Our standards of conduct, performance and ethics say:

'You must treat information about service users as confidential' (5.1)

When you post information about another person on social media, think about whether it is appropriate to share that information. If the information is confidential and/or could allow a service user to be identified, you should not put it on a site without their consent. This could include information about their personal life, health or circumstances, or images relating to their care.

Even if you have the highest level of privacy settings, something you share online can quickly be copied and redistributed to a much wider audience. This means a post can stay in the public domain after you delete it. Try to stay up to date with any changes to the privacy settings of the social media platforms you use. If you are unsure whether to post, stop and seek advice first from an experienced colleague, professional body or trade union.

#### Maintain appropriate boundaries

Our standards of conduct, performance and ethics say:

'You must keep your relationships with service users and carers professional.' (1.7)

Some professionals find using social media a valuable way of communicating with service users and the public. However, social media can blur the boundaries between the personal and the professional. It is just as important to maintain appropriate boundaries when using social media as it would be if you were communicating through any other medium. You must always communicate with service users in a professional manner.

You might decide to set up a separate professional account where you provide general information for service users and the public. If you are employed and plan to use this account to have direct contact with service users, you should first agree whether this is appropriate with your employer.

Keep in mind that service users may still be able to find and contact you via your personal account. If this happens, we recommend that you decline <u>invitations</u>, follows or friend requests. If appropriate, indicate that you cannot mix social and

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professional relationships. If you wish to follow up any contact you receive, consider using a more secure communication channel, such as your professional email account.

If you include content relating to your professional role on a personal account or vice versa, think about whether you would be happy for these different audiences to see the material you post. Think carefully about what you share and who can see it.



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#### **Benefits of social media**

<u>raise the profile of their profession</u>We know social media can help our Registrants in a variety of ways:

- Some use social media messaging services to help them communicate quickly and effectively with colleagues across hospitals to ensure service user care is the best it can be; checking approaches with supervisors, and considering complex cases in a time effective way. In doing so, registrants should be mindful not to share personal details, and take care to follow employer policies.
- A great deal of learning is carried out through social networking platforms,
  where colleagues undertaking weekend CPD activities come together to
  discuss specialist areas of practice, making use of a wider pool of individuals,
  available at any time. Registrants should be mindful to maintain appropriate
  professional boundaries and not to post inappropriate material.
- Some registrants use news and social networking services to raise the profile of their profession and reach out to the public. This can be a quick and easy way to show people how dedicated and hardworking our registrants are, show the public what they do, and highlight the services they provide. When sharing live information in order to raise the profile of the profession, registrants should take care to only share information required to achieve that objective, and they should act in accordance with relevant employer policies. They should post in a modest manner; only providing the information the public needs to understand the role, and they should ensure any additional information, in particular service user identifiable information, isn't included. Your primary focus should be on delivering the best possible care to meet the service user's needs. It is important to remember that a service user who is anxious, distressed or in pain may be unable to give informed consent to anything other than immediate care, such as participation in live social media tweets.

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# Section 54: More information

#### Contact us

You can contact us if you have any questions about this guidance or our standards. Please be aware, however, that we cannot offer legal advice. Our contact details are below:

The Health and Care Professions Council Park House 184 Kennington Park Road London SE11 4BU.

Tel: +44 (0)300 500 6184

You can download copies of our standards documents and other publications from our website at www.hcpc-uk.org.

#### Other sources of guidance

We recognise the valuable role professional bodies play in representing and promoting the interests of their members. This often includes guidance and advice about good practice which can help you meet the standards that we set.

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## **Equality, Diversity and Inclusion Impact Assessment (EIA)**

For background information on how to complete this form, read **Appendix 2**. Delete guidance text as you complete the form. Guidance text is suggested (not required) content.

## Section 1: Project / Policy overview

Project / policy title: Social media guidance updates 2019			
Name of impact assessor: Katherine Timms	Date EIA agreed: TBC		

#### What are the intended outcomes of this work?

Update the Social media guidance to provide further clarity on issues of confidentiality.

#### Who will be affected?

Registrants are likely to feel the most significant impact of this work. They will have more detailed guidance available in relation to their use of social media.

Service users will also feel the impacts of this work; benefiting from increase awareness by registrants of issues of confidentiality in relation to social media.

Employers will be able to rely on this guidance for further clarification about the expectations of the HCPC in relation to any employees registered with us.

## **Section 2: Evidence and Engagement**

Lack of data should not prevent a thorough EIA. Be proactive in seeking the information you need.

#### What evidence have you considered towards this impact assessment?

Engagement activity with key stakeholders; when presenting the draft changes to the guidance we asked if respondents felt there could be any unintended consequences from our changes. No respondents raised any concern about impacts on protected groups.

#### Have you engaged stakeholders in gathering or analysing this evidence?

Yes, see above for evidence considered towards this impact assessment.

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## Section 3: Analysis by equality group

The Equality and Human Rights Commission offers information on the <u>protected characteristics</u>. Describe any impact to groups or individuals with the protected characteristics listed below that might result from the proposed project or policy. Draw upon evidence where relevant.

For all characteristics, consider discrimination, victimisation, harassment and equality of opportunity as well as issues highlighted in the guidance text.

Age (includes children, young people and older people)

No impacts are expected to arise from this work for this group.

**Disability** (includes physical and mental impairment. Remember 'invisible disabilities')

No impacts are expected to arise from this work for this group.

**Gender reassignment** (consider that individuals at different stages of transition may have different needs)

No impacts are expected to arise from this work for this group.

Marriage and civil partnerships (includes same-sex unions)

No impacts are expected to arise from this work for this group.

**Pregnancy and maternity** (includes people who are pregnant, expecting a baby, up to 26 weeks post-natal or are breastfeeding)

No impacts are expected to arise from this work for this group.

Race (includes race, colour, and nationality, citizenship, ethnic or national origins)

No impacts are expected to arise from this work for this group.

Religion or belief (includes religious and philosophical beliefs, including lack of belief)

No impacts are expected to arise from this work for this group.

**Sex** (includes men and women)

No impacts are expected to arise from this work for this group.

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**Sexual orientation** (includes heterosexual, lesbian, gay, bi-sexual, queer and other orientations)

No impacts are expected to arise from this work for this group.

## Other identified groups

n/a

## Four countries diversity

No impacts are expected to arise from this work for this area.

## **Section 4: Welsh Language Scheme**

How might this project / policy engage our commitments under the Welsh Language Scheme?

As any information published in this regard would be targeted at registrants, for the purpose of the Welsh Language Scheme (WLS)<sup>1</sup> this would be technical or specialised material aimed at professionals (see para 4.2 of the Scheme). We therefore do not need to translate any materials, but could provide a translation on request.

## **Section 5: Summary of Analysis**

## What is the overall impact of this work?

Through feedback we have sought through our engagement exercise and consideration of the content changes independently, we have not identified any impacts on protected groups arising from the proposed changes to the Social media guidance.

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<sup>1</sup> https://www.hcpc-uk.org/globalassets/about-us/governance/welsh-language-scheme.pdf

#### Section 6: Action plan

Summarise the key actions required to improve the project or policy plan based on any gaps, challenges and opportunities you have identified through this assessment. Include information about how you will monitor any impact on equality, diversity and inclusion.

## Summary of action plan

We intend to monitor any feedback from the revisions to this guidance, and should any impacts be identified for protected groups, we will revisit this impact assessment.

Below, explain how the action plan you have formed meets our public sector equality duty.

## How will the project / policy eliminate discrimination, harassment and victimisation?

The project will not actively eliminate discrimination, harassment and victimisation.

#### How will the project / policy advance equality of opportunity?

The project will not actively advance equality of opportunity.

## How will the project / policy promote good relations between groups?

The project will not actively promote good relations between groups.

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## **Appendix 2: About this form**

## **The Public Sector Equality Duty**

The public sector equality duty (PSED) set out in the Equality Act 2010 requires that the HCPC must, in the exercise of its public functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act:
- Advance equality of opportunity between people who share a protected characteristic and those who do not; and
- Foster good relations between people who share a protected characteristic and those who do not.

The Act does not specify how public authorities should analyse the effect of their new and existing policies and practices on equality, but doing so is an important aspect of complying with the PSED. This form is designed to help HCPC staff meet our equality duties under the Act.

To review the HCPC's 12 Equality, Diversity and Inclusion (EDI) objectives and how we are working to achieve them, please refer to our EDI Policy and current EDI Action Plan. You can find these in the Publications section of our website.

Should you have any queries or suggestions about this form, please contact the Policy and Standards team on 0207 840 9815 or policy@hcpc-uk.org. Your EDI Manager is Katherine Timms.

## How to complete this form

This form is intended for use in **new or major** projects or policies. It is structured to consider the 9 protected characteristics set out in the Equality Act 2010. It is therefore important that you complete every section of the form.

You should consider and document **positive and negative** impacts which might result from the proposed project or policy. Impacts might be **indirect**. If you consider that there will be **no impact** to groups or individuals with a particular protected characteristic, this **should still be documented**. The EDI impact assessment is not intended as a 'tick box' exercise. Instead, it offers a tool to help you embed equality, diversity and inclusion throughout your work planning and delivery. We encourage you to consult with colleagues, stakeholders and where possible, people with protected characteristics throughout this process.

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