

**Policy covering Digital Communications outside of Trust Networks  
(including the use of Social Media and other communication platforms)**

*(Previously known as: Social Media Policy)*

***Solent NHS Trust policies can only be considered to be valid and up-to-date if viewed on the intranet. Please visit the intranet for the latest version.***

Purpose of Agreement	The aim of this policy is to provide a standard framework for the use of social media and External Web-based communication platforms by Trust employees and services, including contractors, non –executive directors and people associated with the Trust. It ensures that the Trust, staff and service users are not brought in to disrepute, as a result of the inappropriate use of social media.
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**Amendments Summary:**

Please fill the table below:

Amend No	Issued	Page	Subject	Action Date
1		Various	Various amendments made to policy throughout document. The policy now also includes a specific reference to the setting up of Trust/ service social media accounts.	May 2017
2		Page 6 & 8	Minor amendments to wording	September 2017
3		Page 7	Addition of guidance for use of social media during purdah	June 2019
4		Page 7 & 8	Additional guidance on managing patient feedback via social media.	January 2021
5		Appendix B	COVID-19 social media guidance	January 2021

**Review Log:**

Include details of when the document was last reviewed:

Version Number	Review Date	Lead Name	Ratification Process	Notes
V1	2018	Lauren Riddle	Policy Steering Group	
V2	May 2020	Andrea Hewitt		
V3	TBC	Andrea Hewitt		
V4	January 2021	Bex Tarrant & Jonathan Prosser (CCIO)	Policy Steering Group – January 2021 Policy Steering Group –April 2021 (represented) Clinical Executive Group	Minor changes to existing policy to reflect updated information and COVID-19 pandemic guidance. <u>Representation:</u> Major revision in collaboration with Andrea Hewitt, Bex Tarrant, Sadie Bell and Rachel Cheal

## Summary of policy

The aim of this policy is to provide a standard framework for the use of online communication platforms outside of Trust controlled networks. It seeks to ensure that the Trust, staff and service users do not contravene GDPR rules, and that the organisation is not brought into disrepute as a result of inappropriate use of online communication platforms.

It covers the use of digital communication platforms outside of Trust networks including:

- Formal Solent centrally controlled and managed communication channels
- Informal channels which have been endorsed by the organisation for specific uses, around which there are specific governance processes.
- Informal channels which have not been endorsed, but which nevertheless contain reference to Solent business
- Channels for personal use in a private capacity

For queries relating to this policy please liaise with:

- Head of Communications (Policy owner)
- Digital Communications Lead (Policy co-owner)
- Corporate Support Administrator (Policy Steering Group administrator and maintains the Policy Register)
- Chief of Staff and Corporate Affairs (Policy Steering Group Chair)

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**Policy covering Digital Communication outside of Trust Networks  
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Staff are expected to adhere to the processes and procedures detailed within this policy. During times of national or 'Gold command' emergency Solent NHS Trust may seek to suspend elements of this policy in order to appropriately respond to a critical situation and enable staff to continue to work in a way that protects patient and staff safety. In such cases Quality Impact assessments will be completed for process changes being put in place across the organisation. The QIA will require sign off by the Solent NHS Ethics Panel, which is convened at such times, and is chaired by either the Chief Nurse or Chief Medical Officer. Once approved at Ethics panel, these changes will be logged and the names/numbers of policies affected will be noted in the Trust wide risk associated with emergency situations. This sign off should include a start date for amendments and a review date or step down date when normal policy and procedures will resume.

**1. INTRODUCTION & PURPOSE**

- 1.1 The aim of this policy is to provide a standard framework for the use of online communication platforms outside of Trust controlled networks. It seeks to ensure that the Trust do not contravene GDPR rules, and that the reputation of the organisation is not damaged as a result of inappropriate use of online communication platforms.
- 1.2 It sets out the standard that should be followed by all Solent NHS Trust employees; this includes apprentices, contractors, volunteers, non-executive directors. It covers both personal and organisational online platforms, when being used to conduct Solent Trust business, directly or indirectly, or when individuals are identifying themselves as Solent employees within their online accounts.
- 1.3 Solent NHS Trust has a duty of confidentiality to all patients and staff and in some circumstances this would extend to a patients personal social media when taking images or when making posts relating to other patients or staff. Therefore, Solent has a duty to address such situations and support patients whose data may be affected.
- 1.4 There are four categories of digital communication which may be used by individuals who are Solent employees, three which may be used to transact Solent related material, whether directly or indirectly, and a fourth for private use in a personal capacity.

Category of digital communication	Detail	Considerations /links to further policies
1 - Formal Solent centrally controlled and managed communication channels	Data will normally be directly owned or directly managed by Solent. These platforms are referred to in the document as being ' <b>within the Solent Network</b> ' including electronic patient record systems, our organisational email systems, our quality and human resources systems, our intranet and extranet offers, and so on	This category, covering the use of official Solent centrally controlled and managed channels, within the Solent network is covered by the data protection compliance policy, and the records management policy
2 - Informal channels which have been endorsed by the organisation for specific uses, around which there are	These are platforms where data is not owned by the organisation but where the forums are managed or overseen by Solent, as part of its day	The second and third categories are regarded as being outside of the Solent Network, but which have

Category of digital communication	Detail	Considerations /links to further policies
specific governance processes.	to day work, or the achievement of its organisational objectives, such as the Staff Solent Facebook Group, the Solent Twitter account, etc. The communications team maintains the register of such forums which can be found on SolNet, and their use is periodically reviewed and scrutinised.	some connection to Solent business, and are the main subject of this policy. In this context, this policy will refer to such applications as external online communication platforms
3 - Informal channels which have not been endorsed, but which nevertheless contain reference to Solent business	These are platforms where Solent business may be discussed or referred to, but which are not a recognised part of its day to day work, nor instrumental to the achievement of its organisational objectives. They may include informal Whatsapp groups, Twitter conversations, or messages sent or received between private email accounts or groups.	
4 - Channels for personal use in a private capacity	People must not identify themselves as employees and discuss work and where this is the case this do not fall under the policy. These are quite properly outside the scope of any organisational policy, although requirements of professional regulatory bodies for behavioural standards in private may still apply	The fourth category, concerning the use of external online communication platforms (such as social media channels) in people's own time, in a personal capacity, and without identifying themselves as employees of or being associated with the Trust, and without discussing their work in any way that would make Solent identifiable, does not fall under the remit of this or any other Solent policy

- 1.5 When people use external online communication platforms in a professional, or semi-professional capacity, (e.g. through a personal account which also identifies them as a Trust employee and/or is used to comment on professional issues) guidance is required.
- 1.6 External online communication platforms, such as social media sites, have become a popular way of communicating and sharing information and advice. They offer a quick and cost-effective way to reach and be reached by very large numbers of people, including people in communities who tend not to make use of more official or formal channels. Increasingly, people are turning to the internet to discover and share information about their health with each other and with other health providers, and staff who work for them.
- 1.7 Whilst external online communication platforms offer many benefits, there are also inherent risks and misuses to be avoided, including, but not limited to:
- the unauthorised disclosure of Trust information
  - breaches of confidentiality or protectively marked information both intentionally and inadvertently

- legal liabilities from offensive postings
  - personal data being disclosed without consent, constituting a breach of Data Protection Act
  - damage to the reputation of Solent NHS Trust
  - theft of identity
  - breaches of safeguarding arrangements
  - introduction of malicious software infections
  - civil or criminal action relating to breaches of legislation.
- 1.8 The material consequences to individuals or the organisation of breaching this policy can range from minor to very significant, and in line with this, the Improving and Managing conduct policy will be applied to situations where this policy is breached
- 1.9 Professional codes of conduct often include guidance regarding personal social media and other online accounts, and the professional handling of sensitive information in general, and so registered staff will need to comply with their respective professional codes of conduct in respect of social media and web-based communications, in addition to complying with the terms of this policy.

## 2 SCOPE & DEFINITIONS

- 2.1 This policy applies to locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), bank staff, Non-Executive Directors and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust.
- 2.2 As detailed in section 1, the term 'external online communication platforms' refers to any electronic communication tool or platform, hosted outside the Trust, and not formally contracted to the Trust, or where the platform data is not controlled by the Trust, but where Trust related business is transacted.
- 2.3 Such platforms include (but are not limited to):
- social networking channels, including video and picture sharing networks, such as Twitter, Facebook, Google+, Instagram, TikTok, Pinterest, YouTube and Vimeo
  - professional networking platforms such as LinkedIn
  - online news forums, including entries in comments sections
  - interactive training and networking platforms such as webinars, both in terms of recorded audio or video and persistent chat
  - forums hosted on company websites
  - personal blogs and vlogs

## 3 PROCESSES AND REQUIREMENTS

- 3.1 In considering the appropriate use of external online communication platforms, staff must maintain, and be able to demonstrate, a general awareness of the hazards inherent in the use of online communication platforms. They must be aware that anything posted into the public domain generally stays in the public domain. Once published, material cannot usually be taken down, or reliably deleted.

3.2 The following requirements apply:

- Staff must not discuss confidential organisational information on any platform.
- Staff must follow all legal requirements relating to confidentiality, information governance and codes of conduct when using external online platforms.
- Staff must not publish, make comments, forward posts or link to anything that would, in doing so, bring the Trust, staff or services into disrepute (refer to point 3.1.3 below). Such material may include (but not be limited to):
  - pornographic material (that is writing, pictures, films and video clips of sexually explicit or arousing nature)
  - false or defamatory statements about any person or organisation
  - material which is offensive, obscene, abusive, discriminatory, derogatory or which may cause embarrassment to Solent, our patients, or our staff
  - any other statement which is likely to create any liability (whether criminal or civil, and whether for the individual or the organisation)
  - materials in breach of copyright or intellectual property rights, or which otherwise invades the privacy of any person

3.3 Staff must refrain from any online behaviour which could be considered to be discriminatory, or which may constitute bullying or harassment of colleagues or service users. This includes, for example, making offensive comments relating to gender, gender reassignment, race (including nationality), disability, sexual orientation, religion/belief or age; using online platforms to bully another individual (“cyberbullying”) and posting images that are discriminatory or offensive or posting links to such images

3.4 Harassment is defined under the Equality Act (2010) as ‘violating dignity or, creating an intimidating, hostile, degrading, humiliating or offensive environment’. Incidents of discrimination, bullying or harassment, which take place via social media, will be managed in-line with the following policies, where appropriate - Dignity at Work Policy, Grievance Policy and the Disciplinary Policy. The Human Rights Act 1998 states that everyone has the right to privacy and the right to freedom of expression. However, these rights come with responsibilities and neither right provides immunity if the manner in which a person chooses to exercise these rights offends or upsets another person.

3.5 **Using online platforms during a pre-election period**

3.5.1 A pre-election period describes any period of time immediately before elections or referenda when specific restrictions on the activities of civil servants and local government officials apply, previously referred to as ‘purdah’. As public servants, it is important that Solent employees abide by the restrictions imposed by any pre-election period, and apply them to any online platforms they engage in.

3.5.2 During any pre-election period, people who use their online platforms in a work capacity, and who identify themselves as working for the Trust, should remain neutral, refraining from commentary and staying within the guidelines produced by the Trust in relation to this period.

3.6 **Identifying your employer**

3.6.1 If you identify yourself as working for the Trust on an external online platform, even if you are observing all of the guidance detailed above, it must nevertheless be made clear that all comments and opinions you make are done so in your own personal capacity, for example



by clearly stating on your account 'Any views or opinions expressed are my own' (or some such similar statement).

### **3.7 Managing patient feedback**

- 3.7.1 The general public frequently use social media as a way of praising, commenting on, and complaining about public services such as those provided by Solent. Trust social media owners should notify the Communications Team and Patient Experience Team when complaints are identified.
- 3.7.2 The Communications Team, in collaboration with the Patient Experience Team, can provide support regarding how to manage patient complaints and feedback online. Members of the public should be urged to make use of the Trust's Complaints Procedures and Policies.
- 3.7.3 If public dissatisfaction results in targeted online abuse (trolling), account owners should record the initial attack and notify the Communications Team and Patient Experience Team at the earliest opportunity. The Communications Team, in collaboration with the Patient Experience Team, will provide support and advise as to the most appropriate response, and will advise staff, all the way through to consultation with legal partners and referral to the police if necessary.

### **3.8 The creation of local social media platforms, outside of Trust networks**

- 3.8.1 If a service believes that using social media as a communication tool would benefit their service users and the Trust, the Communications Team must be notified in the first instance. The Communications Team will liaise with the Information Governance Team of the intent (prior to launch) to ensure a quality impact assessment is completed. Advice and guidance will be provided by the Communications Team, IG Team and IT as appropriate. The team will provide support and advise to maximise efforts, to ensure appropriate use of social media and to ensure the reputation of the Trust is upheld.
- 3.8.2 In such circumstances, the following principles should be adhered to:
- The service must be committed to maintaining the site. Creating a social media account which is not managed risks presenting the service and by inference the Trust in a negative light.
  - It is best practice to monitor social media accounts every day, responding, when needed, in a timely manner, and providing clear advice on what public contributors can expect in terms of responsiveness and any element of Solent care which may be triggered by any posting.
  - Site owners should assess the risk that their site might inadvertently contribute to patient harm. Aside from avoiding giving potentially misleading or harmful advice, owners should ensure that reasonable precautions are taken to avoid members of the public assuming that urgent needs presented on the platform will be responded to as if presented within the course of normal clinical encounters.
  - Site owners must be aware that information posted online, and outside of Solent's control, should be treated as if it is in the public domain, viewable by any-one at any time, and not securely deletable. Platform data is frequently stored outside of the UK, and is not therefore subject to the protections of UK law.

## **4. ROLES & RESPONSIBILITIES**

### **4.1 Chief Executive**

The Chief Executive has overarching accountability for this policy and delegates the responsibility for ensuring this policy is applied consistently and fairly across the Trust, to the executive directors and senior managers of the Trust.

### **4.2 The Head of Communications**

Head of Communications is responsible for ensuring this policy is widely publicised and properly implemented.

### **4.3 The Communications Team**

The Communications Team is responsible for providing appropriate advice and support to staff in the application of this policy, for monitoring the appropriate use of external online communication platforms, and for contributing to the signing off process for the use of online platforms for service reasons. The Team is also responsible for maintaining a list of Trust endorsed online communication platforms. This list will be regularly reviewed on a quarterly basis.

### **4.4 All members of staff**

All members of staff are responsible for their own actions on online platforms and must comply fully with this policy, and their professional codes of conduct, at all times.

If people have a concern that the use of online communication platforms is compromising patient/ staff safety or confidentiality, or that it is bringing the Trust into disrepute, they should speak with their line manager or refer to the Freedom to Speak Up: Raising Concerns Policy.

### **4.5 Managers**

Managers should be aware of the professional use of online communications platforms within their team, and are responsible for the compliance with the policy within their team. Managers must be made aware if their team members would like to use platforms, as part of their role, within working hours for the benefit of the service and service users.

## **5. EQUALITY IMPACT ASSESSMENT AND MENTAL CAPACITY**

- 5.1 An Impact assessment has been undertaken, no adverse consequences have been identified. A full impact assessment can be found in Appendix A.

## **6. SUCCESS CRITERIA / MONITORING EFFECTIVENESS**

- 6.1 Monitoring is only carried out to the extent permitted, or as required by law, and as necessary and justifiable for business purposes.
- 6.2 If there are any concerns which points towards having been breached, the managers involved, and the Communications Team, can request access to view the account in question.
- 6.3 If anyone notices any use of online communication platforms by other people in breach of this policy they should report it to their manager at the earliest opportunity.

- 6.4 If a manager is notified about a breach of this policy, they should report this to the Human Resources Consultancy Team and Communications Team and take into consideration a referral to Solent Safeguarding team.
- 6.5 To determine if there is compliance with the policy the Communications Team will regularly review online communication platforms that are viewable.
- 6.6 The Communications Team will work with the Trust's Associate Director of Corporate Affairs to undertake fit and proper person checks for members of the Trust Board.

## **7. REVIEW**

- 7.1 This document may be reviewed at any time at the request of either staff side or management, but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.

## **8. REFERENCES AND LINKS TO OTHER DOCUMENTS**

- 8.1 Skills for Health (2017) The Social Media Toolkit for Healthcare
- 8.2 Improving and Managing Conduct Policy
- 8.3 Freedom to Speak Up: Raising Concerns Policy
- 8.4 Adult Safeguarding Policy
- 8.5 Safeguarding Children, Young People and Adults at Risk Policy
- 8.6 Equality, Diversity, Inclusion and Human Rights Policy
- 8.7 Data Protection Compliance Policy

### Equality Analysis and Equality Impact Assessment

**Equality Analysis** is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not;
- **foster good relations** between people who share a protected characteristic and people who do not.

**Equality Impact Assessment (EIA)** is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- **considering the current situation**
- **deciding the aims and intended outcomes of a function or policy**
- **considering what evidence there is to support the decision and identifying any gaps**
- **ensuring it is an informed decision**

### Equality Impact Assessment (EIA)

#### Step 1: Scoping and Identifying the Aims

Service Line / Department	Corporate Services, Communications team	
Title of Change:	No change in policy title	
What are you completing this EIA for? (Please select):	Policy	<i>(If other please specify here)</i>
What are the main aims / objectives of the changes	To support COVID-19 and manage reputation of the Trust.	

#### Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: <i>(e.g. adjustment to the policy)</i>
Sex	Yes			
Gender reassignment	Yes			
Disability	Yes			
Age	Yes			
Sexual Orientation	Yes			
Pregnancy and maternity	Yes			

Marriage and civil partnership	Yes			
Religion or belief	Yes			
Race	Yes			

*If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.*

Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document development, did you consult with others, for example, external organisations, service users, carers or other voluntary sector groups?)	Please select	Yes - Communications links with network resource links, community and engagement team and communications team.
Have you taken into consideration any regulations, professional standards?	Yes	<ul style="list-style-type: none"> <li>- Guidance from NHS England on using social media during a pandemic</li> <li>- Information governance policies and procedures</li> <li>- HR policies and procedures</li> <li>- Professional conduct standards</li> </ul>

### Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact / risk to the organisation if no action taken?	Low	Medium	High
	n	<input type="checkbox"/>	<input type="checkbox"/>
What action needs to be taken to reduce or eliminate the negative impact?			
Who will be responsible for monitoring and regular review of the document / policy?	Communications team		

### Step 4: Authorisation and sign off

*I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.*

<b>Equality Assessor:</b>	Bex Tarrant	<b>Date:</b>	8 January 2021
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### Additional guidance

Protected characteristic		Who to Consider	Example issues to consider	Further guidance
1.	<b>Disability</b>	A person has a disability if they have a physical or mental impairment which has a substantial and long term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	<ul style="list-style-type: none"> <li>• Accessibility</li> <li>• Communication formats (visual &amp; auditory)</li> <li>• Reasonable adjustments.</li> <li>• Vulnerable to harassment and hate crime.</li> </ul>	Further guidance can be sought from: Solent Disability Resource Group
2.	<b>Sex</b>	A man or woman	<ul style="list-style-type: none"> <li>• Caring responsibilities</li> <li>• Domestic Violence</li> <li>• Equal pay</li> <li>• Under (over) representation</li> </ul>	Further guidance can be sought from: Solent HR Team
3	<b>Race</b>	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	<ul style="list-style-type: none"> <li>• Communication</li> <li>• Language</li> <li>• Cultural traditions</li> <li>• Customs</li> <li>• Harassment and hate crime</li> <li>• "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic</li> </ul>	Further guidance can be sought from: BAME Resource Group
4	<b>Age</b>	Refers to a person belonging to a particular age range of ages (eg, 18-30 year olds) Equality Act legislation defines age as 18 years and above	<ul style="list-style-type: none"> <li>• Assumptions based on the age range</li> <li>• Capabilities &amp; experience</li> <li>• Access to services technology skills/knowledge</li> </ul>	Further guidance can be sought from: Solent HR Team
5	<b>Gender Reassignment</b>	" The expression of gender characteristics that are not stereotypically associated with ones sex at birth" World Professional Association Transgender Health 2011	<ul style="list-style-type: none"> <li>• Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use.</li> </ul>	Further guidance can be sought from: Solent LGBT+ Resource Group
6	<b>Sexual Orientation</b>	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	<ul style="list-style-type: none"> <li>• Lifestyle</li> <li>• Family</li> <li>• Partners</li> <li>• Vulnerable to harassment and hate crime</li> </ul>	Further guidance can be sought from: Solent LGBT+ Resource Group
7	<b>Religion and/or belief</b>	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs, including lack of belief (e.g Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	<ul style="list-style-type: none"> <li>• Disrespect and lack of awareness</li> <li>• Religious significance dates/events</li> <li>• Space for worship or reflection</li> </ul>	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8	<b>Marriage</b>	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	<ul style="list-style-type: none"> <li>• Pensions</li> <li>• Childcare</li> <li>• Flexible working</li> <li>• Adoption leave</li> </ul>	Further guidance can be sought from: Solent HR Team
9	<b>Pregnancy and Maternity</b>	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	<ul style="list-style-type: none"> <li>• Employment rights during pregnancy and post pregnancy</li> <li>• Treating a woman unfavourably because she is breastfeeding</li> <li>• Childcare responsibilities</li> <li>• Flexibility</li> </ul>	Further guidance can be sought from: Solent HR team

## Appendix: B

### Appropriate use of social media during Coronavirus (COVID-19)

When using social media during the COVID-19 global pandemic, the following guidelines should be adhered to:

- All social media account owners/editors should think carefully before posting or sharing any information relating to Coronavirus (COVID-19) online. All accounts associated with Solent NHS Trust should only provide information and guidance which reassures patients and service users who follow the Trust.
- To ensure fake news is avoided, you should remain vigilant and only share information and advice that has been provided by trusted sources such as the Department of Health and Social Care, Public Health England and other verified NHS organisations.
- The Communications Team will review all content, from alternative sources, shared with Solent for appropriateness before sharing further. The decision to share remains with the Communications Team.
- All social media account holders should consider the sensitivities around Coronavirus (COVID-19) and the impact it is having on lives across the nation. Therefore, users should **think about any videos or content they might be posting in a professional capacity, work environment, in uniforms or PPE.**