

# Blackpool Teaching Hospitals

NHS Foundation Trust

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## 1 PURPOSE

The Trust is responsible for raising a general awareness to staff of the associated risks of blogging, instant messaging and social networking that may potentially affect the reputation of the service. This document issues guidance around publishing information through these applications.

## 2 SCOPE

This policy applies to all staff working within Blackpool Teaching Hospitals NHS Foundation Trust (the Trust), including volunteers, third party contractors or students.

## 3 POLICY

### 3.1 Personal Use of Social Networking sites / blogs

Staff should not attempt to access social networking sites for personal use during working hours as per [CORP/POL/175](#)

The Trust monitors the use of the network and is legally entitled to do so in accordance with the Lawful Business Practice Regulations 2000. Staff found not adhering to these guidelines may face disciplinary action.

Staff using a web-enabled mobile phone are not permitted to access these applications during work hours unless approved by their line manager.

### 3.2 Individual use of Social Networking sites as a professional

Your relationship with social media changes as soon as you identify yourself as a Trust employee, speak in any kind of professional capacity or seek to deploy social media on Trust business.

- Social media may be used in a professional context during working hours where there is a specific NHS business requirement or it can be shown as a benefit to the work of the Trust or to the patient.
- The use of social media should be seen as an extra to the core responsibilities and be kept to a minimum. It must in no way interfere with any core responsibilities such as patient care.
- All employees using social media in a professional capacity must acknowledge within their profile, in such a way that can be easily seen, that their comments are their own and not that of the Trust as an organisation.

Staff are reminded to consider the security of their personal information and that of others. Upon agreeing the terms and conditions of social networking tools, the site may be given 'ownership' or 'third party disclosure' of your details.

Whilst you are not in work 24/7, by being an employee of Blackpool Teaching Hospitals NHS Foundation Trust and the NHS you are indirectly representing both by your actions in and outside of work.

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Posting comments about the Trust, the work of the Trust or about your work in general that is critical, could bring the Trust into disrepute or could raise questions about your own professionalism could result in disciplinary proceedings.

Remember that there is an official whistleblowing policy for any grievances [CORP/POL/214](#) about the Trust and the procedure for raising them. This must not be done via Social Media.

By posting information on social media you are making this information open to the public and should therefore be willing for this information to be shared more widely. You are also bound by the information governance policy [CORP/POL/107](#)

The professional governing bodies each have their own social media policy and you should make yourself aware of the policy of your own regulatory organisation as well as that of the Trust.

Further guidance is available in Appendix 2.

### **3.3 Using Social Media as a Blackpool Teaching Hospitals NHS Foundation Trust employee (including volunteers and agency staff) or service.**

The Trust has an official presence on the most popular social media. Posts are made regularly about the work of the Trust to promote services and enhance the reputation of the Trust.

- Employees should not create social media profiles or pages for the purpose of raising the profile of a service without agreement from their line manager or service manager and prior reference to the Communications Team. The Communications Team will support development of a social media presence.
- The use of social media should be seen as an extra to the core responsibilities and be kept to a minimum. It must in no way interfere with any core responsibilities such as patient care.

A suitable business case for the use of social media as a team / department will need to fulfil one or more of the following criteria which will be assessed by the Communications Team:

- The service / initiative cannot be promoted by the corporate social media profiles either through a group, discussion forum or, in the case of Twitter, a unique hashtag or reference.
- You understand and have the resources available to undertake your activity and to maintain an effective presence in your chosen social media site.
- This activity contributes to a Trust business objective.
- Social media is appropriate for the activity and, when necessary, can be incorporated in to other activity. For example when encouraging customer feedback.
- You have taken into account equality and accessibility issues when undertaking this

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activity.

- All social media pages / profiles must be registered with the communications team to ensure robust monitoring and cross promotion of services; thereby increasing the reach and reputation of the Trust.

The Trust will share posts made by staff and teams if it feels they will add to the Trust's reputation through association to an influential commentator on a subject.

Posting comments that could bring the Trust into disrepute or could raise questions about your own professionalism could result in disciplinary proceedings.

### 3.3.1 Branding of social media pages / profiles

Blackpool Teaching Hospital NHS Foundation Trust is a brand and your posts should enhance, not damage, the image and reputation of the Trust. Any posts that bring the Trust in to disrepute could result in disciplinary proceedings.

- All Social Media presence must adhere to corporate guidance:
  - Brand must be consistent and include the Trust logo where possible.
  - Updates must be professional. Always remember that you are an ambassador for the organisation. Anything you publish will reflect directly on the Trust.
  - Posts must add value, providing worthwhile information and perspective.

### 3.3.2 Complaints made on social media

Social Networking is about interaction with those engaging with you. However some of this interaction may be negative and may be in the form of a complaint.

The Trust has a complaints management policy which must be adhered to. See [CORP/PROC/633](#).

- If a comment made in social media is intended as a formal complaint the details of the comment and the person making it should be referred to the Patient Experience Team so the complaint can be handled correctly.
- Members of staff should not request more information from the person making the post so as not to risk breach of confidentiality.
- The complaint should be acknowledged and information given that it has been referred to the Patient Experience Team.

## 3.4 Risk

The use of social networking, blog sites and instant messaging by employees can expose the organisation to information risks. The Trust requires all staff to act responsibly when sharing information through these channels in line with Information Governance policies.

Before sharing information you must consider that what you are going to say may be perceived differently once in the public domain and must mitigate the risk of offending or upsetting others.

- Any information, report or conversation that is not already in the public domain

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should only be published with the knowledge and consent of the individuals involved.

As in all publishing, you should be aware of issues such as libel, defamation and slander.

Ensure you understand the potential risks around vulnerable people, e.g. children, accessing your social media outlet. You must remember to adhere to the Trust's Safeguarding Policies.

- No videos or photographs of patients or visitors, where that person can be identified may be used without prior signed permission from the patient or their parent / guardian or representative. It is assumed that members of staff will be notified before they are photographed or filmed and if they request not to be included in any pictures or footage their wishes must be respected.
- You must continue to monitor your social media outlets and report any risks as soon as you become aware of them. You must have plans in place to manage and mitigate them.

The Trust has produced a guide for handling comments made on social media. This can be found in the guidance document. (Appendix 1)

You should also be aware that you may attract media interest in yourself or the organisation. If you have any doubts, take advice from your line manager and / or the Communications Team.

### 3.5 Confidentiality

Staff have a duty of care to protect the confidentiality of personal information relating to any individual. This includes but is not limited to patients, staff and visitors. This is in accordance with the Trusts Confidentiality Code of Conduct Policy (CORP/POL/107) and Guidance (CORP/GUID/140). Any breach of confidentiality, including through social media, will be dealt with via the Trust Disciplinary Procedure (see Section 7).

- Never share confidential or sensitive information.
- Staff must not share information about patients without explicit consent (refer to [CORP/PROC/102](#), Consent to Examination or Treatment).
- In order to reduce risk of confidential information being added to social media accidentally no photographs or videos of workspaces / computer screens, where person identifiable information may be on view, may be used unless all such information has been removed before the picture is taken.

### 3.6 Safeguarding – Patient Access

The Trust has no right to prevent patients or visitors accessing social media through the use of their smart phone and mobile web services or through the hospital wi-fi provided by 'Wireless Blackpool.'

However, the Trust has a duty of care to protect patients, particularly young people or vulnerable patients, from the dangers associated with social media.

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- Effort will be made to limit the access of young people to social media.
- Internet access provided through the Trust will have robust content filters to prevent access to adult material.
- When young people are using Internet enabled equipment, provided by the Trust, they should be supervised.
- When possible, young people should be supervised when using IT equipment or checks made that they are not:
  - Accessing chat rooms where they may be in danger from contact with predatory individuals.
  - Sharing private or intimate photographs of themselves or other patients with others.
  - Discussing or sharing private information about themselves or other patients or staff members.
- When this is not possible every effort should be made to promote parental responsibility so that parents are aware of the sensitivity of the hospital environment and the dangers faced by young people when accessing the internet unsupervised.
- Information for parents on where to seek guidance on this subject will be made available.
- **All patients and visitors** should be reminded that they are not permitted to take photographs or share information about others on social media.
- If someone is found to be doing this or a member of staff suspects the patient is putting themselves at risk they should first approach the parent / guardian / carer of the patient to make them aware of the concern and if necessary seek further advice from the Trust's Safeguarding Team.

### 3.7 Crisis Communications

In the event of a major incident where the Trust needs to provide up to the minute advice and guidance, social media can be used as a primary channel alongside our corporate website.

The Communications Team will be responsible for this through the corporate social media pages.

Staff must not use their own or service's profiles to provide information about an emergency incident unless it is to re-post information already given via the official corporate social media pages and it is done in a timely manner.

4 ATTACHMENTS	
Appendix Number	Title
1	Trust Social Media Guide
2	Equality Impact Assessment

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<b>5 ELECTRONIC AND MANUAL RECORDING OF INFORMATION</b>
Electronic Database for Procedural Documents
Held by Policy Co-ordinators/Archive Office

<b>6 LOCATIONS THIS DOCUMENT ISSUED TO</b>		
<b>Copy No</b>	<b>Location</b>	<b>Date Issued</b>
1	Intranet	26/05/2015
2	Wards, Departments and Service	26/05/2015

<b>7 OTHER RELEVANT/ASSOCIATED DOCUMENTS</b>	
<b>Unique Identifier</b>	<b>Title and web links from the document library</b>
CORP/GUID/140	Confidentiality Code of Conduct <a href="http://fcsharepoint/trustdocuments/Documents/CORP-GUID-140.docx">http://fcsharepoint/trustdocuments/Documents/CORP-GUID-140.docx</a>
CORP/POL/107	Confidentiality Code of Conduct <a href="http://fcsharepoint/trustdocuments/Documents/CORP-POL-107.docx">http://fcsharepoint/trustdocuments/Documents/CORP-POL-107.docx</a>
CORP/POL/171	Use of the Internet <a href="http://fcsharepoint/trustdocuments/Documents/CORP-POL-171.docx">http://fcsharepoint/trustdocuments/Documents/CORP-POL-171.docx</a>
CORP/POL/175	Staff Responsibility Regarding IM&T <a href="http://fcsharepoint/trustdocuments/Documents/CORP-POL-175.doc">http://fcsharepoint/trustdocuments/Documents/CORP-POL-175.doc</a>
CORP/POL/525	Disciplinary Policy <a href="http://fcsharepoint/trustdocuments/Documents/CORP-POL-525.docx">http://fcsharepoint/trustdocuments/Documents/CORP-POL-525.docx</a>
CORP/PROC/043	Use Of Mobile Communication Devices Within Blackpool, Fylde And Wyre Hospitals NHS Foundation Trust <a href="http://fcsharepoint/trustdocuments/Documents/CORP-PROC-043.doc">http://fcsharepoint/trustdocuments/Documents/CORP-PROC-043.doc</a>
CORP/PROC/102	Consent to Examination or Treatment <a href="http://fcsharepoint/trustdocuments/Documents/CORP-PROC-102.docx">http://fcsharepoint/trustdocuments/Documents/CORP-PROC-102.docx</a>
CORP/PROC/451	Disciplinary Procedure for Medical And Dental Staff in Blackpool Teaching Hospitals NHS Foundation Trust <a href="http://fcsharepoint/trustdocuments/Documents/CORP-PROC-451.docx">http://fcsharepoint/trustdocuments/Documents/CORP-PROC-451.docx</a>
CORP/PROC/474	Safeguarding and Protecting Children Guidance and Procedures <a href="http://fcsharepoint/trustdocuments/Documents/CORP-PROC-474.docx">http://fcsharepoint/trustdocuments/Documents/CORP-PROC-474.docx</a>
CORP/PROC/636	Disciplinary and Appeal Procedure <a href="http://fcsharepoint/trustdocuments/Documents/CORP-PROC-636.docx">http://fcsharepoint/trustdocuments/Documents/CORP-PROC-636.docx</a>
CORP/PROC/633	Complaints Management <a href="http://fcsharepoint/trustdocuments/Documents/CORP-PROC-633.docx">http://fcsharepoint/trustdocuments/Documents/CORP-PROC-633.docx</a>
CORP/POL/214	Whistleblowing policy <a href="http://fcsharepoint/trustdocuments/Documents/CORP-POL-214.docx">http://fcsharepoint/trustdocuments/Documents/CORP-POL-214.docx</a>

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7 OTHER RELEVANT/ASSOCIATED DOCUMENTS	
Unique Identifier	Title and web links from the document library
GMC Social media policy	<a href="http://www.gmc-uk.org/guidance/ethical_guidance/21186.asp">http://www.gmc-uk.org/guidance/ethical_guidance/21186.asp</a>
NMC social media policy	<a href="http://www.nmc.org.uk/standards/guidance/social-networking-guidance/">http://www.nmc.org.uk/standards/guidance/social-networking-guidance/</a>

8 SUPPORTING REFERENCES/EVIDENCE BASED DOCUMENTS	
References In Full	
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YouTube. (2014). Available: <a href="http://www.youtube.com">http://www.youtube.com</a> . Last accessed 17/09/2014.	

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<b>10 DEFINITIONS/GLOSSARY OF TERMS</b>	
Social Media (Socmed)	Social media (socmed) is the term commonly given to web-based tools which allow users to interact with each other in some way – by sharing information, opinions, knowledge and interests online. As the name implies, social media involves the building of online communities or networks to encourage participation and engagement. This includes blogs, message boards, social networking websites (such as <a href="#">facebook</a> and <a href="#">twitter</a> ), content sharing websites (such as <a href="#">flickr</a> , <a href="#">YouTube</a> ) and many other similar online channels.
Blogging	Regular entries of commentary, description of events or material maintained by an individual. Interactive media allowing readers to leave comments.
The Trust	Blackpool Teaching Hospitals NHS Foundation Trust

<b>11 AUTHOR/DIVISIONAL/DIRECTORATE MANAGER APPROVAL</b>			
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## Appendix 1: Trust Social Media Guide



Blackpool Teaching Hospitals **NHS**  
NHS Foundation Trust

# SOCIAL MEDIA How-to guide

**T**he NHS started to see the potential of social media via Twitter as a result of the Swine flu epidemic in 2009. It was used to communicate to the general public who were desperate for day to day developments and information.








Its usage to date by the NHS is linked directly with the growth in online patient communities, for example 'Patients Know Best' which connects patients to other patients and encourages comment on the care they receive. Health charities also use Twitter / Facebook for chats between users and qualified nurses.

The requirement for transparency, patient participation and service improvement are all reflected and link in directly to the Francis Report recommendations. The very nature and ethos of social media is collaborative therefore sharing information and opening up for discussion can help build relationships and reputation.

Social media platforms are critical to enabling the NHS to **listen** and use patients' concerns and ideas to provide a clinically excellent and sustainable NHS.




**S**ocial media (socmed) is the term commonly given to web-based tools which allow users to interact with each other in some way – by sharing information, opinions, knowledge and interests online. As the name implies, social media involves the building of online communities or networks to encourage participation and engagement.

### Examples of social media platforms

- Microblogging – Twitter 
- Social sharing – Facebook 
- Blogging – WordPress and Tumblr 
- Video sharing – YouTube and Vimeo 
- Picture sharing – Flickr and Instagram 
- Social bookmarking – Reddit and StumbleUpon 
- Professional sharing – LinkedIn 

All employees embarking on social media activity either personally or in a professional capacity should make sure they follow and adhere to the social media policy along with other related policies governing IT use and codes of conduct.



-  [www.facebook.com/blackpoolhosp](http://www.facebook.com/blackpoolhosp)
-  [www.twitter.com/blackpoolhosp](http://www.twitter.com/blackpoolhosp)
-  [www.youtube.com/BFWHospitals](http://www.youtube.com/BFWHospitals)

### What good is social media really?

We've already said it: **Engagement**. Getting people involved. It's not just the patients but the NHS as a whole can be inspired to learn better techniques

and create campaigns for others to get behind.

Take a look at the success of the "hello my name is..." campaign

and NHS Change Day. They have both become successful international campaigns and they both started with one person sending a simple tweet!

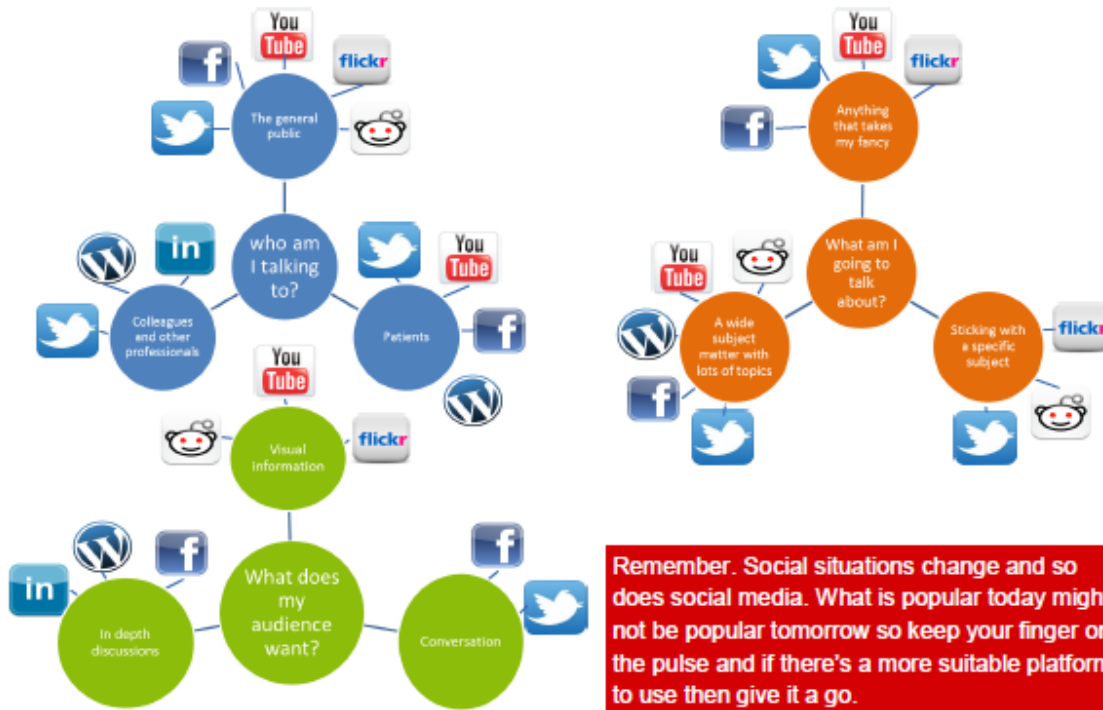


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## Appendix 1: Trust Social Media Guide

### Which Social Media platform is right for me?

You may need more than one platform to meet all your demands but here are some important questions to ask yourself to get started.



**Remember. Social situations change and so does social media. What is popular today might not be popular tomorrow so keep your finger on the pulse and if there's a more suitable platform to use then give it a go.**

**N**o matter which social media platform you're using the principles are the same. The key goal being to encourage engagement and conversation. The only thing that differs is the tone of your posts due to the nature and audience using the media. Specific guidance and advice on using particular social media can be found online but many say the same thing in terms of do's and don'ts. Here's a few...

DOs	DON'Ts
Check your privacy settings	Share confidential information
Share friend's comments or posts and follow those who are following you. It's social etiquette.	Be selfish - don't only talk about yourself
Point out your comments are your own and not that of the Trust.	Say something insulting OR something that makes the organisation look bad.
Add Value - Your goal is to make people crave the content you share.	Gossip - don't give information and claim it to be fact unless you know it is true and can back up your claim.
Keep it simple - This is a conversation with the public so remember jargon doesn't always help.	Start an argument in public - take into private messages.
Know the guidance of your own professional organisation. The BMA, NMC, RCGP and the GMC all have social media guidance as well as NHS England. A quick search online will bring them up.	Be afraid of haters - people are going to say bad things about you or to you. It's great feedback so take it on board and use it. The flow chart below will help.
Remember a picture tells 1,000 words	Post for the sake of it - nobody really cares what you had for dinner.

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## Appendix 1: Trust Social Media Guide



Facebook involves sharing your thoughts and information so that people can comment and others can join in the conversation easily.

**Status / posts**

Appear on your "timeline" and you can make them as long or as short as you like, link to other web sites, include pictures or videos.

There's a comments box under your posts where your followers will be able to add their own thoughts. Some good, some not so good but all valuable feedback.

**Like it / Share it**

 If someone likes your status all their friends see it too. It's the best word of mouth going.

If you see other people's posts and you think your followers will be interested in it too you can share it on your own timeline.

**Tip:** It's important to make sure you keep post chatty and friendly. It's all about making friends, building relationships and getting people to like you.



Twitter is what's known as a micro blog. It's a short sentence (only 140 characters) of information or opinion. People tend to post about specific topics.

Follow people who are talking about the same things as you. They will follow you too. The more the merrier.

**Tip:** You can't fit a lot of information in 140 characters so link to a web page with more information on it. You can even use a url shortener like the one Google provides

**@**

Speak directly with someone by including @ and their username (also known as "handle") and get a conversation going.


**Retweet**

Share other people's tweets with your followers. Spread the word.

**# hash tags**

The hash tag (#) makes the word stand out, simple as that. It's a topic; a keyword; a way to identify the subject of the tweet. It means if people search for that topic they find the tags easier and potentially your tweets! It helps you track specific subjects.

**Tip:** You can't fit a lot of information in 140 characters so link to a web page with more information on it. You can even use a url shortener like the one Google provides



Broadcast Yourself

Mostly used to create a repository of videos which you can link together by subject matter. You can then share links to the videos on other sites or embed them in to your web pages.

The Trust has its own YouTube channel where you can upload video content and share it with friends from there. Speak to the web team if you want to get things uploaded.



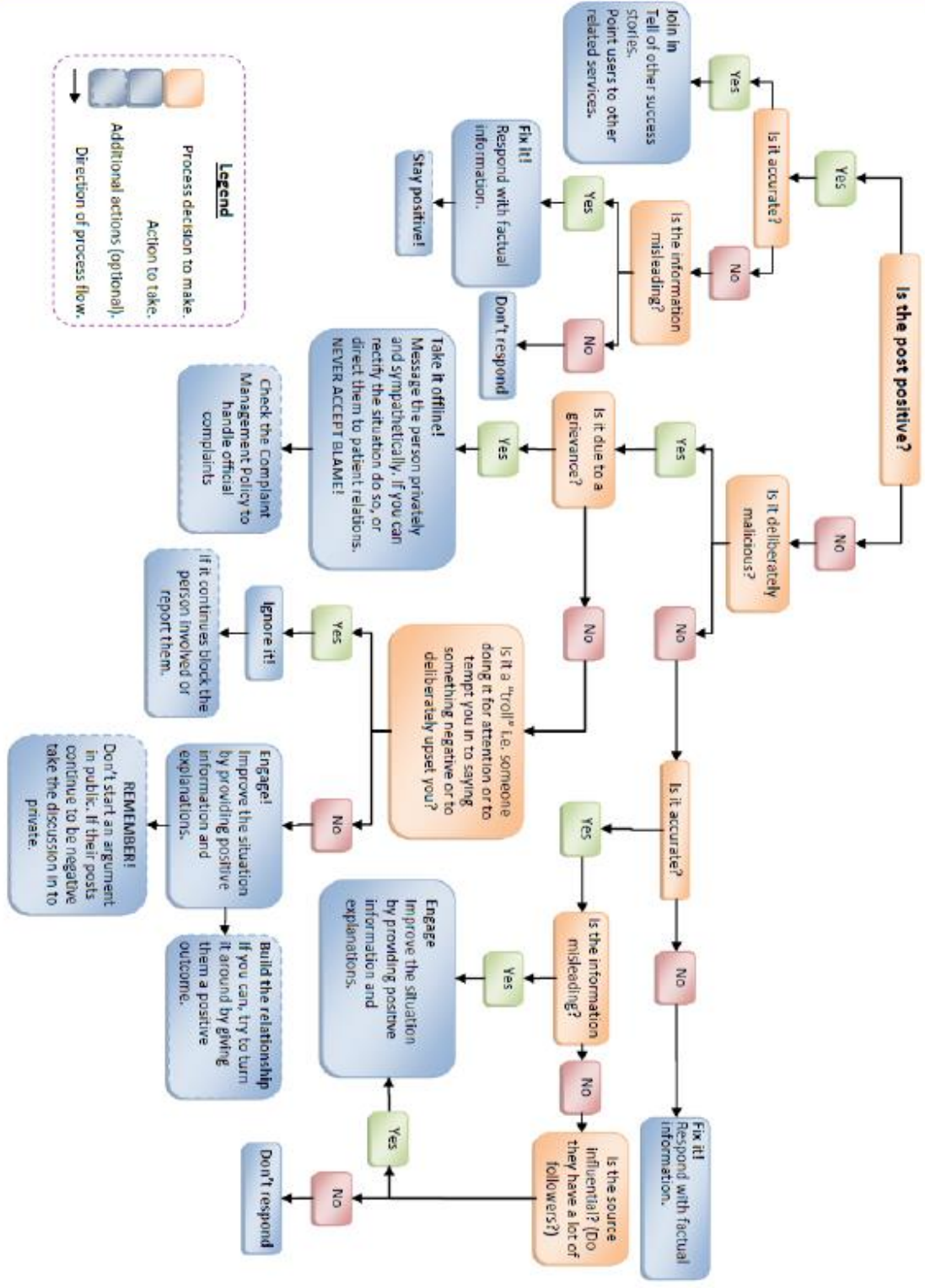
**How do you make time?**

Keeping track of conversations, posting things and finding content can take all day. For some businesses it is a full time job. It's not practical to do it all day but at the same time you need to maintain a presence. There are social media dashboards you can use that link all your networks together. Hootsuite is a great one as it puts all your feeds in one place, you can post to them all at the same time and it also lets you schedule posts for when you're away.

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# Appendix 1: Trust Social Media Guide

**When to respond and when to walk away!**  
 When someone says something about you it's tempting to have a go at them straight away. But do you really want to get dragged in to a debate in public? Is it worth it? Ask yourself these questions first.



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## Appendix 2: Information Governance Guidance for the Creation and Usage of Social Media Groups (Facebook)

This guidance is an attachment to the full Trust policy document 'CORP/POL/220 Social Networking'.

### Guidance for the Administrator

- The group must always have a named administrator, who will be responsible for its management. It is important that the administrator appreciates that this is an active and on-going responsibility.
- Approval for the group must be received from the Communications team, who maintain a register of all Trust approved social media sites and pages. If the group becomes disused then the administrator is responsible for closing the group and notifying the Communications team.
- The group must be a 'secret group', which ensures group content is inaccessible to non-members. Membership should be by invite only. The group should not be visible to non-members by the search function.
- The administrator is responsible for adding and removing group members; if a person changes role or leaves the Trust then they must be removed from the group.
- The administrator is responsible for monitoring the content which is posted in the group, and for reporting inappropriate activity using the usual Trust incident reporting procedure. It is also good practice to contact the Communications Team in the event of such incidences and to save any relevant evidence for future reference.
- The group must be regarded as a supplementary means of communication; all essential correspondence must continue in the agreed form.
- The 'read' function is not auditable, and therefore, cannot be used as proof that an individual has been made aware of information.

### Guidance for Members

While access to social media is often regarded as a leisure activity, **access to a Trust approved social media group is done so in a professional capacity** and all members are expected to act accordingly. Even when off duty, staff represent the Trust. All contribution to the group page is professionally accountable. Online misconduct can result in disciplinary action.

- Group members must not upload, post or link to content which could be deemed inappropriate.
- Group members must not post content which damages the reputation of colleagues, the Trust or associated third parties.
- It is imperative that all group members refrain from posting any content which could

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## Appendix 2: Information Governance Guidance for the Creation and Usage of Social Media Groups (Facebook)

be deemed patient identifiable, without explicit documented consent.

- Any photographs taken on Trust property or in performance of duty, which are uploaded to the group, must have the explicit documented consent of every individual involved. Be aware of the background of photos.
- Do not post unnecessary and unprofessional content, such as jokes and chain mail, or inflammatory topics, such as politics and religion.
- All incidences of bullying and harassment are unacceptable and should be reported if experienced or witnessed in the group.
- If a member of the group is concerned about anything they read on the group, it is their professional responsibility to alert the administrator.
- All group content must be accessible to group members only and must not be shared with non-group members, unless in certain necessary circumstances such as incident reporting. This includes prohibition of wider sharing of group content on Facebook and of reference to group content in conversation with non-group members.
- If the group is used for the communication of incidents to raise awareness, then it is important that this is done in support of, and not instead of, the usual incident reporting procedure.

For further guidance, please contact the Communications team or the Information Governance team, or refer to CORP/POL/220 Social Networking.

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<b>Appendix 2: Equality Impact Assessment Form</b>					
Department	Organisation wide	Service or Policy	CORP/POL/220	Date Completed:	24/09/2014
<b>GROUPS TO BE CONSIDERED</b>					
Deprived communities, homeless, substance misusers, people who have a disability, learning disability, older people, children and families, young people, Lesbian Gay Bi-sexual or Transgender, minority ethnic communities, Gypsy/Roma/Travellers, women/men, parents, carers, staff, wider community, offenders.					
<b>EQUALITY PROTECTED CHARACTERISTICS TO BE CONSIDERED</b>					
Age, gender, disability, race, sexual orientation, gender identity (or reassignment), religion and belief, carers, Human Rights and social economic / deprivation.					
QUESTION	RESPONSE		IMPACT		
	Issue	Action	Positive	Negative	
What is the service, leaflet or policy development? What are its aims, who are the target audience?	The document is designed to outline to policy around the use of social media in various circumstances. Its audience is all staff across the organisation who use this method of communication.	Make staff aware of the policies surrounding the use of social media.	Yes.		
Does the service, leaflet or policy/ development impact on community safety • Crime • Community cohesion	No				
Is there any evidence that groups who should benefit do not? i.e. equal opportunity monitoring of service users and/or staff. If none/insufficient local or national data available consider what information you need.	No				
Does the service, leaflet or development/ policy have a negative impact on any geographical or sub group of the population?	No				
How does the service, leaflet or policy/ development promote equality and diversity?	It encourages and clarifies the use of communications tools enabling wider communication to the public.		Yes		
Does the service, leaflet or policy/ development explicitly include a commitment to equality and diversity and meeting needs? How does it demonstrate its impact?	No				
Does the Organisation or service workforce reflect the local population? Do we employ people from disadvantaged groups	Our workforce is reflective of the population.				
Will the service, leaflet or policy/ development i. Improve economic social conditions in deprived areas ii. Use brown field sites iii. Improve public spaces including creation of green spaces?	No				
Does the service, leaflet or policy/ development promote equity of lifelong learning?	No				
Does the service, leaflet or policy/ development encourage healthy lifestyles and reduce risks to health?	No				
Does the service, leaflet or policy/ development impact on transport? What are the implications of this?	No				
Does the service, leaflet or policy/development impact on housing, housing needs, homelessness, or a person's ability to remain at home?	No				
Are there any groups for whom this policy/ service/leaflet would have an impact? Is it an adverse/negative impact? Does it or could it (or is the perception that it could exclude disadvantaged or marginalised groups?	None identified				
Does the policy/development promote access to services and facilities for any group in particular?	No				

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<b>Appendix 2: Equality Impact Assessment Form</b>				
Does the service, leaflet or policy/development impact on the environment	No			
<ul style="list-style-type: none"> <li>• During development</li> <li>• At implementation?</li> </ul>				
<b>ACTION:</b>				
<b>Please identify if you are now required to carry out a Full Equality Analysis</b>	<b>Yes</b>	<b>No</b>	<b>(Please delete as appropriate)</b>	
<b>Name of Author:</b>	Nathan Skelton	<b>Date Signed:</b>	September 2014	
<b>Signature of Author:</b>				
<b>Name of Lead Person:</b>		<b>Date Signed:</b>		
<b>Signature of Lead Person:</b>				
<b>Name of Manager:</b>	Derek Quinn	<b>Date Signed:</b>	September 2014	
<b>Signature of Manager</b>				

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