

## NSW Health Public Communication Procedures

**Summary** The Policy Directive outlines the processes for consultation with the media. There is no material change on how health services will interact with the media, rather the policy assists in clarifying respective roles, particularly in relation to patient privacy.

**Document type** Policy Directive

**Document number** PD2017\_012

**Publication date** 01 June 2017

**Author branch** Strategic Communications and Engagement

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**Review date** 01 June 2023

**Policy manual** Not applicable

**File number** H16/85913-1

**Status** Review

**Functional group** Clinical/Patient Services - Governance and Service Delivery  
Corporate Administration - Communications  
Personnel/Workforce - Conduct and ethics

**Applies to** Affiliated Health Organisations, Board Governed Statutory Health Corporations, Cancer Institute, Chief Executive Governed Statutory Health Corporations, Local Health Districts, Ministry of Health, NSW Ambulance Service, NSW Health Pathology, Private Hospitals and day Procedure Centres, Public Health System Support Division, Public Health Units, Public Hospitals, Specialty Network Governed Statutory Health Corporations

**Distributed to** Ministry of Health

**Audience** Administration; All staff; Clinical; Allied Health; Nursing; Emergency Departments

## **POLICY STATEMENT – Public Communications Procedures**

### **PURPOSE**

This Public Communication Policy has been developed to support NSW Health organisation staff and contractors in managing communication activities. This new Policy Directive replaces:

- PD2005\_633 - Advertising
- PD2005\_276 - Film Making Guidelines
- PD2007\_022 - Website Style Directive

The expected outcomes include that:

- staff have consistent guidance on best practice use of all communication channels, including social media, to support better health outcomes for patients.
- requests for patient condition reports, legal matters, suspected suicide, visits by Members of Parliament and making public comment are managed appropriately.
- all media related requests are directed in the first instance to the public health organisation media unit (or equivalent) for review, management and approval
- privacy and confidentiality of patients, their families and staff is a priority
- communications which identify, or reasonably identify patients comply with the NSW Health Privacy Manual for Health Information.

### **MANDATORY REQUIREMENTS**

The Policy Directive outlines the processes for consultation by NSW Health organisation representatives with the media to assist in clarifying roles, particularly in relation to patient privacy.

### **IMPLEMENTATION**

NSW Health organisations are required to appropriately authorise all media requests prior to release. They are to ensure that:

- the executive and local media units authorise all written/verbal media responses
- health and safety risk assessment and management strategies associated with any media or community related visit are implemented
- all filming complies with relevant NSW Health legislation/policies and local protocols
- all legislative, NSW Government and NSW Ministry of Health requirements in relation to the development of advertising campaigns are met
- the use of social media is monitored for appropriate use.

NSW Health staff and contractors involved in communication activities are required to ensure:

- that facts are appropriately sourced and verified
- responses reflect the organisational position
- privacy and confidentiality are maintained
- information is only provided in consultation with local organisational media staff who will consult the chief executive as required
- behaviour complies with the NSW Health Code of Conduct Policy Directive which reflects the CORE values of Collaboration, Openness, Respect and Empowerment
- they are aware that communication (eg letter, email, social media) within NSW Health is subject to the Government Information Public Access Act and privacy legislation
- they avoid conduct that could bring NSW Health, or any of its staff, patients or clients into disrepute, including when using social media.

## REVISION HISTORY

Version	Approved by	Amendment notes
June 2017 (PD2017_012)	Deputy Secretary, Governance Workforce and Corporate	New Policy Directive. Replaces PD2005_633, PD2005_276, PD2007_22.

## ATTACHMENTS

1. NSW Health Public Communication Procedures.

## Public Communication Procedures – NSW Health



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**Issue date:** June-2017

PD2017\_012

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## 1 BACKGROUND

### 1.1 About this document

This Policy Directive has been developed to support staff/contractors of the NSW Ministry of Health, local health districts, board governed statutory health corporations, chief executives of governed statutory health corporations, specialty network governed statutory health corporations including St Vincent's Hospitals Network and affiliated health organisations, to manage communication activities by NSW Health.

The following communication procedures apply to all staff/contractors managing or participating in any communication activities, including media requests; development of communication materials; advertising campaigns; external requests for visits, or requests for information; comment; interviews; photographs or filming within NSW Health facilities or property. These procedures apply to any communication medium, such as print, radio, internet or television, and provide guidance for staff wishing to initiate communication activities, generate proactive media coverage, or use advertising to raise awareness of a health issue, service or event (for example overseas visits or major infrastructure announcements).

### 1.2 Expected Outcomes

- Privacy and confidentiality of patients and their families is maintained as a priority. Release of patient information for the purpose of filming, interviews or photographs will only occur with the patient's prior express *written* consent consistent with the NSW Health Code of Conduct, and the patient's fundamental right to be treated with dignity and compassion<sup>1</sup>.
- Communications which identify, or could reasonably identify, individual patients will comply with the requirements of the NSW Health Privacy Manual for Health Information.
- Staff privacy and confidentiality is maintained. Release of personal information relating to staff for the purposes of filming, interviews or photographs, media or advertising campaigns should only occur with the staff member's prior express *written* consent before proceeding. If it is not reasonable and practicable to obtain written consent, verbal consent may be obtained and documented. However best practice is to obtain written consent where practicable.
- All media related requests are, in the first instance, directed to the public health organisation media unit (or equivalent) for review, management and approval.
- The appropriate communication channels are used to support the provision of important public health or health promotion messaging.
- Advertising campaigns comply with relevant legislation and government requirements and are consistent with best practice and community standards.
- NSW Health staff have guidance on appropriate and best practice use of all communication channels, including social media, to support better health outcomes for patients. *Note that separate guidance for Justice and Forensic Mental Health is available*

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<sup>1</sup> Consent should always be in writing and based on information at Appendix 1. An example Multi Media Consent Form is at Appendix 2.

at <http://www.justicehealth.nsw.gov.au/about-us/publications/guidelines-disclosure-medical-records.pdf>

### 1.3 NSW Health organisational responsibilities

All NSW Health organisations have a responsibility to provide meaningful, accurate and helpful advice to the community about important public health issues. NSW Health organisations are required to:

- Ensure that without exception, patient privacy and care remains the first consideration in all communication activities, media and visit related requests.
- Appropriately authorise (by local manager/relevant executive as required) all media requests to supply comment or information on behalf of the organisation's facilities or services prior to release of any information.
- Ensure that all written and verbal media responses are accurate and timely with spokespeople appropriately authorised (by local media unit and relevant executive as required).
- Assess and implement appropriate work, health and safety risk assessment and management strategies associated with any media or community related visit.
- Ensure that all filming complies with relevant NSW Health legislation/policies and local protocols.
- Meet all legislative, NSW Government and NSW Ministry of Health requirements in relation to the development of advertising campaigns.
- Monitor the use of social media to ensure it is used appropriately by authorised staff members to communicate and engage with the community.

### 1.4 NSW Health staff/contractor responsibilities

NSW Health staff and contractors involved in communication activities, proactive media or responding to media requests are required to ensure:

- that facts are appropriately sourced and verified
- responses reflect the organisational position
- privacy and confidentiality are maintained according to statute and the NSW Health Privacy Manual for Health Information.
- information is only provided in consultation with local organisational media staff who will consult the chief executive as required.

NSW Health staff are expected to comply with the NSW Health Code of Conduct Policy Directive which reflects the CORE values of Collaboration, Openness, Respect and Empowerment and builds upon the public sector core values of Integrity, Trust, Service and Accountability. The Code values apply to all persons employed by NSW Health (either in an ongoing, casual or temporary capacity) as well as to visiting practitioners.

Staff should be aware that communication by any method (eg letter, email, social media) within NSW Health is subject to whole of government requirements relating to the Government Information Public Access Act and privacy legislation. All staff are to avoid conduct that could bring NSW Health, or any of its staff, patients or clients into disrepute, including when using social media.



## 1.5 Key Definitions

Item	Definition
<b>Advanced Care Directive</b>	An advance care directive contains instructions that consent to, or refuse, the future use of specified medical treatments. It becomes effective in situations where the patient no longer has the capacity to make treatment decisions.
<b>Authorised representative</b>	<p>If a person does not have the capacity to make a decision relating to access to, or disclosure of, health records, an “authorised representative” can give consent on their behalf. Most commonly, a patient’s authorised representative will be:</p> <ul style="list-style-type: none"> <li>• Someone who has an enduring power of attorney for the individual. Note: power of attorney ceases on death. Legal authority is then transferred to the executor or administrator of the deceased estate</li> <li>• A guardian or enduring guardian appointed under the <i>Guardianship Act 1987</i></li> <li>• For a married person, a spouse (including a de facto spouse)</li> <li>• If there is no guardian or spouse, a carer, defined as a person who has the care of the patient, for example if they have provided, or have arranged to be provided, domestic services and support otherwise than for remuneration</li> <li>• If there is no guardian, spouse, or carer, a close relative or friend may act as the Authorised Representative provided they are not receiving remuneration for any services provided</li> <li>• For a child under 18, the parent or guardian</li> </ul> <p>For full details refer to NSW Health Privacy Manual for Health Information (Capacity and Authorised Representative)</p>
<b>Capacity</b>	A person cannot give consent, or make other decisions under privacy law if they do not have the necessary capacity to do so. The <i>Health Records and Information Privacy Act 2002</i> sets out a specific test for capacity, as well as the persons who may be an “authorised representative” to give consent to disclosure of health information on behalf of a person who lacks capacity. For full details refer to NSW Health Privacy Manual for Health Information.
<b>Consent</b>	<p>Consent for the purposes of this document refers to consent to information sharing (and not consent to medical treatment which is dealt with separately by NSW Health Policy Directive on Consent to Medical Treatment – Patient Information).</p> <p>Terms marked with (*) are further defined in this section.</p> <p>Consent for the use and/ or disclosure of personal information* and health information* is always required for media and communications related activities given such activities do not constitute primary or secondary uses</p>

Item	Definition
<p><b>Consent</b> (cont)</p>	<p>for which personal information and health information are generally collected by NSW Health within the terms of the <i>Privacy and Personal Information Protection Act 1998</i> and the <i>Health Records and Information Privacy Act 2002</i>.</p> <p>The key elements for consent relevant to media and communications activities can be summarised as follows:</p> <ul style="list-style-type: none"> <li>• Consent should be informed and therefore reasonably specific. Sufficient information should be provided to allow the person to make an informed decision.</li> <li>• Consent should be freely given. That is the person should not be coerced, pressured or intimidated. They must not feel they have no choice or that they do not have enough time to make up their mind.</li> <li>• Consent should only be sought from a person who has capacity* to consent, or from their guardian or other Authorised Representative where the person does not have capacity to consent.</li> <li>• Consent should be timely. The validity of the consent is dependent on the person's expectation based on the information provided. For example, a consent may remain valid for up to 12 months if the person is consenting to involvement in a health promotion initiative which is to be rolled out over this period of time. Alternatively, a consent for a one-off media release may remain valid until the day of publication and not beyond.</li> <li>• The validity of consent is more likely to be questioned where a lengthy period of time has passed or the person's personal situation has changed so markedly that there are grounds to suggest their views may have changed.</li> <li>• Consent can be obtained in writing or verbally. Generally consent by patients, their guardians or Authorised Representatives to filming, interviews or photographs should always be in writing, preferably on a consent form based on information at Appendix 1. An example Multi Media Consent Form is at Appendix 2. In exceptional circumstances where it is impracticable to seek written consent beforehand, it may be acceptable to seek verbal consent from the patient (to be documented in the patient health care record) with subsequent written consent obtained using a consent form based on the relevant information at Appendices 1 &amp; 2. Obtaining documented written consent by patients is important given the highly sensitive nature of health information, ensuring there is clarity regarding the nature of the publication, and the scope of the consent that is given.</li> <li>• It should be explained to the patient (or their guardian /Authorised Representative) that if they decide not to consent, their decision will not impact on their ability to continue to receive health services from the health facility.</li> </ul> <p>Further guidance regarding consent to information sharing can be found in the NSW Health Privacy Manual for Health Information. Further guidance regarding consent to medical treatment can be found in the Policy Directive on Consent to Medical Treatment – Patient Information.</p>

Item	Definition
<b>De-identified information</b>	<p>De-identified information is information or opinion about a person whose identity cannot be ascertained from the information or opinion.</p> <p>If a person's identity can reasonably be ascertained from the information, it cannot be classified as de-identified. Clearly, whether information can be considered de-identified will be dependent on the specific circumstances which arise in any disclosure.</p> <p>Privacy rules do not apply to de-identified information. For details refer to NSW Health Privacy Manual for Health Information.</p>
<b>Government advertising</b>	<p>Government advertising for the purposes of the <i>Government Advertising Act 2013</i> is defined to mean the dissemination to the public of information about a government program, policy or initiative, or about any public health or safety or other matter, that:</p> <ul style="list-style-type: none"> <li>• is funded by or on behalf of a Government agency, and</li> <li>• is disseminated under a commercial advertising distribution agreement by means of radio, television, the internet, newspapers, billboards, cinemas or other media.</li> </ul> <p>Other media includes, but is not limited to, internet search marketing, mobile device marketing (text, audio and video), posters, mobile billboards and signage on buses, trains, boats, aircraft and taxis. See the <a href="#">NSW Government Advertising Handbook</a> for more information.</p>
<b>Health information, or personal health information</b>	<p>Health information is defined in the <i>Health Records and Information Privacy (HRIP) Act 2002</i>. This Act sets out 15 Health Privacy Principles which govern all aspects of its collection, security, use and disclosure.</p> <p>Health information is personal information (see definition below) that is information or opinion about:</p> <ul style="list-style-type: none"> <li>• a person's physical or mental health or disability</li> <li>• medical history</li> <li>• health services provided or to be provided</li> <li>• a person's wishes about the future provision of health services to them.</li> </ul> <p>It also includes any personal information collected for the purposes of the provision of health care.</p> <p>For full details on what is covered by health information refer to NSW Health Privacy Manual for Health Information section 5.1. The <i>HRIP Act</i> uses the term 'health information' to mean information that identifies or could potentially identify an individual. The Manual however adopts the term "personal health information" to emphasise that neither the <i>HRIP Act</i> or the Manual regulates the collection, use or disclosure of other health related but non-identifying information such as de-identified and statistical data.</p>
<b>LHD/N</b>	Local Health District/ Specialty Health Networks

Item	Definition
<b>Media organisation</b>	Any external organisation that publishes, compiles, edits, produces or distributes any publication, whether real or proposed, that is intended to be placed in the public domain. Publications may include newspapers, newsletters, magazines, television programs, radio programs, external video productions, websites, posters, brochures, literature, books, billboards and public spaces.
<b>Media representative</b>	Any person acting on behalf of any media organisation or acting as an individual operator. Such a person may be involved in any of the following activities: <ul style="list-style-type: none"> <li>• Research</li> <li>• Writing, editing</li> <li>• Filming or recording or interviewing</li> <li>• Compiling or updating information</li> <li>• Photography, illustration or graphic design</li> <li>• Blogging</li> </ul>
<b>NSW Health</b>	NSW Health comprises the following organisations: <ul style="list-style-type: none"> <li>• Minister for Health, Minister for Medical Research</li> <li>• Minister for Mental Health, Assistant Minister for Health</li> <li>• Secretary, NSW Health</li> <li>• Ministry of Health</li> <li>• Local health districts</li> <li>• Agency for Clinical Innovation (ACI)</li> <li>• Bureau of Health Information (BHI)</li> <li>• Cancer Institute NSW</li> <li>• Clinical Excellence Commission (CEC)</li> <li>• eHealth</li> <li>• Health Infrastructure</li> <li>• Health Protection NSW</li> <li>• HealthShare NSW</li> <li>• Health Education and Training Institute (HETI)</li> <li>• Justice Health and Forensic Mental Health Network</li> <li>• NSW Ambulance</li> <li>• NSW Health Pathology</li> <li>• Sydney Children’s Hospitals Network</li> </ul> St Vincent’s Health Network is recognised as a Network for the purpose of the National Health Reform Agreement.
<b>NSW Health staff</b>	Includes NSW Health employees and those contracted by NSW Health to provide individual services
<b>Personal information</b>	The <i>Privacy and Personal Information Protection (PPIP) Act 1998</i> defines personal information as “information or an opinion (including information or an opinion forming part of a data base and whether or not recorded in a material form) about an individual whose identity is apparent or can reasonably be ascertained from the information or opinion”.

Item	Definition
	<p>Information already contained in a publicly available publication, including information available via the media and via the internet, is not personal information and privacy rules will generally not apply. For full details refer to NSW Health Privacy Manual for Health Information.</p>
<b>Public domain</b>	<p>The state of belonging or being available to the public as a whole, and therefore not subject to copyright, e.g. <i>the photograph had been in the public domain for 15 years.</i></p>
<b>Public health organisation</b>	<p>Refers to any NSW Health organisation</p>
<b>Social media</b>	<p>User-generated content that is shared online through mobile and web-based technologies that promotes engagement, sharing and collaboration. It transforms users from content readers into publishers.<sup>2</sup> Social media channels vary widely and take many forms, including:</p> <ul style="list-style-type: none"> <li>• online forums and chat rooms</li> <li>• social networking, such as Twitter, Facebook and LinkedIn</li> <li>• blogs and micro blogs</li> <li>• online crowd sourcing</li> <li>• wikis</li> <li>• virtual worlds.</li> </ul>

<sup>2</sup> NSW Government Social Media Policy and Guidelines

## 2 PRIVACY AND CONFIDENTIALITY

### 2.1 Patient information

All communications, filming or photography must comply with legal obligations of confidentiality and privacy requirements in respect of all patients. These requirements are summarised in the NSW Health Privacy Manual for Health Information.

Key points of relevance are:

- Information relating to health services provided by NSW Health that identifies a patient, or where the patient's identity may reasonably be ascertained from the information, is "health information" for the purposes of the *Health Records and Information Privacy Act 2002* and is subject to restrictions on disclosure. Such information may only be released with the consent of the patient, guardian or Authorised Representative, or otherwise in accordance with the Act.
- Health services and individual health professionals also owe a common law obligation of confidentiality to patients in respect of information obtained in the course of providing health services.
- A range of other Acts also set out specific confidentiality obligations, including the *Health Administration Act 1982*, *Mental Health Act 2007* and *Public Health Act 2010*. These requirements are summarised in the NSW Health Privacy Manual for Health Information.
- Specific guidelines apply to the release of information by the Justice Health and Forensic Mental Health Network (refer to *Guidelines on the use and disclosure of inmate/patient medical records and other health information* issued by the Chief Executive of Justice Health and Forensic Mental Health Network, in section 11 of this document).

To ensure NSW Health complies with these legal requirements, information provided in the context of media enquiries or other communication activities by a public health organisation should only include health information about a patient where that patient has consented<sup>3</sup> to the release of the information. In circumstances where the patient lacks capacity, consent to the release of information may be provided by the patient's legal guardian or Authorised Representative.

Consent should always be in writing and based on information at Appendix 1. To ensure ready access it is good practice to keep a copy of the written consent in the patient health care record and in the local media/communication unit.

An example Multi Media Consent Form is at Appendix 2. Where there is any uncertainty about whether the requirements of the *Health Records and Information Privacy Act* for release of information have been satisfied, legal advice should be sought.

Particular care must be taken where information provided to an external organisation includes anonymous information. It is sometimes possible to constructively identify an individual by identifying their circumstances.

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<sup>3</sup> Refer to *Definitions* for more information about consent.

Information about patients that is de-identified (that is, it does not identify an individual or contain information from whom an individual's identity may be reasonably ascertained) may be provided at the discretion of the health care service.

**Example:**

*Information is sought on the number of appendectomies undertaken at a local hospital. There have only been five procedures done over the last two years. The identity of an individual could reasonably be ascertained by the release of the date of the procedures or similar information and therefore such information should not be released without patient consent.*

Where appropriate consent has been obtained to release identifying health information about a patient, release should occur only with the approval of the local media officer/communications officer or his/her delegate or another person authorised by the chief executive to provide such information.

As the primary concern of NSW Ambulance is emergency care, it is acknowledged that the public nature of this treatment means that personal health information may be incidentally disclosed at an accident site, given the potential involvement of multiple services, members of the public and/or media. However, when responding to any requests from the media, including at an accident scene, NSW Ambulance staff should be led by the above considerations. Additionally, any non-identifying information that is already in the public arena (and known to media outlets) is not subject to privacy law.

## 2.2 Staff information

The privacy and dignity of staff must be protected when dealing with media or in advertising campaigns. Staff have the right to decline participation in a photo shoot, filming or media interview. Staff being photographed or filmed must provide consent. For further details regarding consent, refer to Definitions in this policy. Consent should always be in writing and be based on information at Appendix 1. An example Multi Media Consent Form is at Appendix 2.

## 2.4 Organisational information

NSW Health workers must not access, use, disclose or release any internal organisational documents obtained in the course of official duties, unless they are authorised to do so (including when they cease to work in NSW Health).

Consistent with the NSW Health Code of Conduct, workers must also maintain the security of confidential and/or sensitive organisational information, including any information stored on communication devices.

# 3 PATIENT/VISITOR REQUESTS FOR FILMING/PHOTOGRAPHY

## 3.1 Filming or photography with mobile devices

It is expected that patients and visitors to health facilities will respect patient and staff privacy when taking photographic images and other recordings on hand held mobile devices, including smartphones. Patients and visitors should only take photographs and

voice recordings with the agreement and/or appropriate consent of any individual whose image/voice is captured by such devices.

It is expected that the taking of photographs/videos by family/friends will not include:

- (i) Other patients or staff who have not consented or agreed to be included in the photographs
- (ii) Names of staff, including identification badges
- (iii) Documentation of patient information
- (iv) Video recording of consultations or meetings.

Staff are entitled to request patients and visitors not to take photographic images or other recordings where this may result in a breach of privacy, or where, in the view of the treating clinician, it interferes with, or compromises, patient care.

Public health organisations may at their discretion implement local policies to give further effect to the expectations set out in this section.

### **3.2 Filming or photography by patient/family appointed contractors**

The requirements specified in this policy also apply where a patient or family contract a private person to undertaking filming or photography within a public health service (as an example during delivery in maternity services).

## **4 MEDIA ENQUIRIES AND REQUESTS**

Where a NSW Health staff member receives an enquiry from the media, be it print, radio or television, this should be raised with their local media unit staff as soon as possible. Local media unit staff will determine how to deal with the enquiry in consultation with local managers and advise the organisation's chief executive.

All media enquiries, including requests for public comment, should be referred without delay and prior to giving media comment, to the public health organisation's media unit.

After hours media enquiries should be referred to the on-call media officer/executive in the first instance.

Requests by television stations, photographers, or film production companies to film television series, documentaries, promotional videos and other such material may require special consideration and conditions. These matters must be referred to the local media manager who will determine if the NSW Ministry of Health should be advised.

Journalists, photographers, television crews and local media representatives are expected to advise the local media officer or executive (senior manager) of their wish to film/photograph/interview patients or film/photograph other areas inside a health care facility.

Filming/photography/interviewing may take place within a health care facility, but only with permission from the local media officer following discussion with the NSW Ministry of Health, where considered relevant. Any request for access should be received prior to the media arriving at the health care facility site. No unauthorised photography or filming is to take place during a media visit to a health facility.



Media representatives are not allowed to enter a NSW Health facility or property unless accompanied by a local media officer or his/her nominated delegate. The local media officer will remain in attendance until the conclusion of interviewing/filming/photography.

Any unauthorised attendance by a media representative at a NSW Health facility at any time should be reported immediately to security and to the local media unit (or on call media officer/executive). The local media officer will determine whether the NSW Ministry of Health should be advised.

The local media unit should liaise with the relevant local executives and advise the NSW Ministry of Health where the following matters arise:

- Issues that may affect more than one NSW Health organisation, e.g. statewide matters, major disease outbreaks
- Issues relating to Ministerial or Ministry of Health announcements, e.g. policy changes or strategies
- Issues relating to industrial action
- Media vision requests of a serious nature
- Specific media enquiries about patients or requests for expert medical information which may have broader implications for NSW Health.

### 4.1 Requests for patient information

Where a staff member receives a request for information regarding a patient, the staff member must first obtain the full name of the person enquiring and the nature of their relationship to the patient (e.g. spouse, family member, friend, insurance agent, legal representative, name of media organisation, etc.).

If the staff member suspects that the enquirer is not who they say they are, they should confirm the caller's name and contact details and advise that a supervisor or a media officer (where relevant) will return their call. For further information relating to non-media enquiries refer to the NSW Health Privacy Manual for Health Information.

For media enquiries, the staff member may neither confirm nor deny the current or past presence of a person in the health facility. All media enquiries must be referred to the relevant media officer, who may only confirm the current or past presence of a person in a health facility with consent from the patient or their Authorised Representative.

### 4.2 Media requests for patient condition reports

Where there is a request for a condition report for any patient (identified or non-identified) from a media organisation, the request should immediately be referred to the organisation's media unit.

If there is a request for a condition report for an identified person from a media organisation, information should only be released with the consent of the patient or the patient's Authorised Representative or guardian.

If there is a request for a condition report for an unidentified person from a media organisation, the local media officer should be the only person to provide a patient condition report and this will be limited to de-identified information only. A condition report should be limited to the age and sex of the patient together with a condition report in the form of:

- stable
- critical
- serious
- serious but stable

In some circumstances additional non-identifying information may also be released, such as the location of the accident/event and the hospital to which the patient has been transported..

**Example:**

*“A 23 year old woman has been admitted to St Elsewhere Hospital following a reported accident on the Anzac Bridge. She is in a serious but stable condition.”*

Any decision to respond to media requests for condition reports should be considered on a case by case basis, particularly in circumstances where close relatives, spouse or partner have not been notified of the admission or where the identity of the patient is known or in the public sphere. The circumstances of some accidents are so unique that any release of information (however brief) will not be de-identified (see the NSW Health Privacy Manual for Health Information for guidance on de-identified information).

Any information that identifies a patient, or may reasonably identify the patient, should only be released with the consent of the patient, the patient’s Authorised Representative or their guardian.

As the primary concern of NSW Ambulance is emergency care, it is acknowledged that the public nature of this treatment means that personal health information may be incidentally disclosed at an accident site, given the potential involvement of multiple services, members of the public and/or media.

However, when responding to any requests from the media, including at an accident scene, NSW Ambulance Service staff should be led by the above considerations.

In circumstances where close relatives or a partner/spouse of the patient proactively request that information is not released to the media, such requests should be complied with (even where the information proposed to be released is de-identified). If a patient’s family has requested that no information be released to the media, it is suggested that the following be advised upon any media requests for condition reports:

**Example:**

*“The patient’s family have requested that no information be released to the media.”*

### 4.3 Requests for confirmation that a patient is deceased

As privacy rules continue to apply to deceased persons for thirty years following their death, requests by media representatives for confirmation as to whether an identified patient is deceased should only occur with the consent of the patient’s close relatives, a partner/spouse or the Authorised Representative (see NSW Health Privacy Manual for

Health Information)<sup>4</sup>. This approach should also be applied where the media request is in the context of a request for a patient condition report regarding an unidentified patient to avoid the risk of the family becoming aware via the media, that the patient was deceased (see section 4.2) given the sensitive nature of the information.

Any decision to disclose material held on a deceased client/patient should also have due regard to any view expressed by the client/patient to health workers prior to death, either in writing, or as recorded in the client/patient's health record. This would include any advanced care directive made by the client/patient<sup>5</sup>.

If asked to confirm if a patient is deceased and express written permission has not been provided by the patient's close relatives, a partner/spouse or Authorised Representative, it is suggested that the following be advised:

**Example:**

*"The health service is not permitted to release information about patients without consent from their Authorised Representative, which on this occasion has not been provided. If you are a close relative, you may seek access on compassionate grounds."*

It is acknowledged that the public nature of NSW Ambulance treatment means that confirmation that a patient is deceased may be incidentally disclosed at an accident site, given the potential involvement of multiple services, members of the public and/or media.

However, when responding to any requests from the media, including at an accident scene, NSW Ambulance staff should be led by the above considerations.

#### 4.4 Requests for comment related to Coronial or other legal proceedings

Media requests for comment on current legal proceedings are often directed to the NSW Health organisation which is a party to the proceedings. These requests should be considered by the local media unit in the first instance.

The default position should be not to comment on current proceedings, due to the potential for comment to prejudice or influence a matter that is currently before the a court. In some cases, there may also be specific non-publication orders in relation to the proceedings or the names of those involved.

If the health facility is a party to the proceedings, those within the NSW Health organisation who are instructing external lawyers or managing the proceedings on behalf of the health facility, as well as the organisation chief executive, should be consulted.

Sometimes a request for comment may be directed to NSW Health organisation personnel and/or the legal representative while they are attending the proceedings. In such cases the media should be referred to the organisation's media unit.

Where a NSW Health organisation wishes to provide comment to the media on coronial proceedings or other litigation they are party to, the Ministry of Health Legal Branch should be contacted for advice prior to any comment.

<sup>4</sup> 15.7 *Media and Other Enquiries about Hospital Patients* - NSW Health Privacy Manual for Health Information

<sup>5</sup> 15.10 – *Deceased Patients* - NSW Health Privacy Manual for Health Information

#### 4.5 Requests for photographs or interviews with patients

Patients may be asked to consider media requests if the clinical staff caring for the patient assess that the request will not affect the patient's or their family's wellbeing. If deemed clinically appropriate the local media unit or senior clinical staff may approach patients with media requests for interviews, filming or photographs. Patients should be advised that it is entirely their choice as to whether they agree to any media requests.

If a patient agrees to a media request, a member of the local media unit will liaise with the nursing unit manager, or equivalent, to obtain written patient consent using a media consent form. The client/patient should be informed about the specific purpose of the interview, recording or image. Consent should always be in writing and based on information at Appendix 1. An example Multi Media Consent Form is at Appendix 2.

The local media unit will seek approval from relevant local management prior to confirming agreement to proceed with the request. The local media unit will advise relevant security staff of the time and location for filming or photographs.

It should be explained to the patient (or their guardian /Authorised Representative) that if they decide not to consent, their decision will not impact on their ability to continue to receive health services from the health facility.

#### 4.6 Out-of-hours media requests for comment or for non-patient related information

Any staff member who receives a media enquiry or filming request should note the following details without making any response (on or off the record):

- Name, contact details and media organisation making the enquiry
- Brief summary of the nature of the enquiry or issue being pursued.

After hours media enquiries should be directed to the local on-call media officer/ executive. The on-call local media officer will initiate an appropriate media response in consultation with the out-of hour's executive.

#### 4.7 Filming requests related to matters of public interest/incidents

The local media unit will consult with the NSW Ministry of Health before approving any response or media attendance at a health facility in relation to major incidents.

Where filming is requested for commercial or other matters, the local media unit should consult the NSW Ministry of Health, where considered relevant.

#### 4.8 Media invitations and alerts

All requests for media attendance at any NSW Health facility should be directed to the local media unit for approval and management.

Staff and volunteers are not permitted to issue an invitation to the media to attend an event, function or for any other reason. Guests who are participating in an event, function or meeting on a NSW Health facility are not permitted to invite the media to attend.

## 5 PROMOTIONAL OPPORTUNITIES

The NSW Government has set clear objectives for all public sector agencies to ensure quality and better value health care for the community. Communicating important health messages to both targeted and broader community groups is a key strategy of NSW Health. Advertising allows NSW Health to communicate with large numbers of the public in a short time-span and to impact and promote high recall with health consumers.

### 5.1 Advertising by NSW Health organisations

The Strategic Communications and Engagement Branch, NSW Ministry of Health is responsible for managing statewide campaign advertising for the NSW Ministry of Health and has oversight of NSW Health Cluster campaign management to ensure compliance with the Government Advertising Act 2011 and the Government Advertising Regulation 2012, and related Government processes. In addition to this policy staff responsible for advertising within their organisation should also consult the [NSW Government Advertising Handbook](#) which sets out the State Government policies and processes that apply when developing and managing a Government advertising campaign.

Recruitment advertising is separate to campaign advertising and can be managed internally by NSW public health organisations (refer current NSW Health policy directives on Recruitment and Selection of the NSW Health Service).

#### *Generating revenue through permitting third party advertising*

Opportunities may arise from time to time for NSW Health organisations to generate revenue by selling advertising space on NSW Health property, infrastructure or equipment.

This may include:

- outdoor media such as billboards, banners, building facades, bus shelters and outdoor seating
- equipment and vehicles, such as wheelchairs and medical equipment
- facility lifts
- communications material such as newsletters, publications, internal television networks, intranets, and email.

The following procurement advice is provided for levels of potential revenue from advertising:

- Up to \$30K requires a single proposal
- \$30K - \$250K requires three proposals
- >\$250K requires an open expression of interest.

Procurement should be open and transparent and allow interested proponents access to opportunity. Procurement should be considered on merit, promote good health, and align with the objectives of NSW Health. Refer to relevant NSW Health policy directives and manuals on goods and services procurement for more information.

### 5.2 General Filming and Photography

Requests for filming or photography by film-makers or commercial/private operators should be coordinated by the local communications team in consultation with the Strategic Communications and Engagement Branch, NSW Ministry of Health, where considered relevant. Standardised filming and location agreements are required prior to commencing

one-off filming including television commercials, advertising and photo shoots. A formal filming licence should be used for any television series or documentaries. Media organisations or production companies will usually seek to use their own standard agreement, which should be carefully reviewed to ensure the interests of NSW Health are appropriately protected and advice should be sought from the NSW Ministry of Health Legal Branch, where appropriate.

### 5.3 Requests from public relations or marketing companies

From time to time, public relations or marketing companies involved in the launch or promotion of a range of health care, medical or pharmaceutical products seek approval to use NSW public hospitals or health care facilities for filming or other marketing purposes. Where filming is envisaged, standard licencing agreements are required. Advice should be sought from the Strategic Communications and Engagement Branch, NSW Ministry of Health on drafting of any such agreements.

In addition, a public health organisation has an obligation to ensure that individuals who undertake any work within a public health facility are made aware of their privacy obligations. It is recommended that individuals sign a privacy undertaking. Refer to Appendix 3 provided in the [NSW Health Privacy Manual for Health Information](#).

Approaches by companies seeking to promote goods, products or services made directly to hospitals or health facility management should be referred to the local communications unit (or executive) who will consider and approve the use of facilities following discussion with Strategic Communications and Engagement Branch, where relevant.

NSW Health organisations should be aware of the potential perception of bias that may arise as a result of supporting the promotion of healthcare, medical or pharmaceutical products.

## 6 GUIDE TO REPORTING ON SUSPECTED SUICIDES

Advice for consideration when reporting suspected suicide deaths can be found at the [Australian Press Council](#) website.

Coverage should include contacts for helpline and support services to provide support for those who may have been distressed, or prompted to act, by the story. Further information on mental health and suicide can be obtained at <http://www.mindframe-media.info/for-media>.

## 7 PUBLIC COMMENT

### 7.1 General public comment

Public comment includes public speaking engagements, comments using communication channels including social media (such as web forums and blogs), views expressed in letters to newspapers, or in publications. Official comment or submissions may also be requested from Parliamentary Committees or Inquiries. Comment in staff memos and other internal communications can also be made public.

A key function of the public health system is to promote healthy behaviours and support information for communities on health matters. NSW Health organisations are encouraged to use communication channels, including social media, in an open, collaborative, responsive, reliable and appropriate way.

Staff and contractors have the right to express personal views in their capacity as private citizens through public comment on political and social issues, as long as it is clear they are not speaking on behalf of NSW Health or any NSW Health organisation.

Any public comment that implies views represent a NSW Health position, should comply with this protocol and all policy directives which cover code of conduct and business/communication technologies. See Section 9 References.

### 7.2 Public comment by health workers

Staff may not be interviewed by the media by phone or email without prior approval from the local media officer who will liaise with their manager and/or the NSW Ministry of Health's Media Unit when considered necessary.

Unless there is prior approval, staff and contractors must at no time:

- make statements on behalf of any NSW Health organisation
- use organisational letterhead or titles that would indicate that comment was authorised by the local service or management, or
- imply or indicate that their views are those of NSW Health when making public comment on a particular issue or participating in political or industrial activities.

Staff/contractors may make an official comment only when authorised to do so.

Where a staff member or contractor is asked to provide public comment in another capacity (i.e. as a member of an external organisation such as a university or as a spokesperson for a college or other professional organisation) the staff member or contractor may only do so on the basis the comments do not indicate or imply that the staff member or contractor's views are those of NSW Health (see PD 2012\_018 NSW Health Code of Conduct for more information). The professional's appropriate title in relation to the external organisation being represented should always be used, e.g. Professor of Surgery, University of NSW. Permission is not required from NSW Health organisations where comments are made on behalf of external organisations though staff/contractors are encouraged to advise their local media officer in advance where appropriate.

Where staff have developed internal reports for publication, these should be approved by the local organisation for release prior to publication and meet NSW Health standards of accuracy, quality and style.

### 7.3 Public comment by Chief Executives and Members of Boards

When contacted directly by media representatives, chairpersons, board members and chief executives should contact their local media unit, as soon as possible, to outline their preferred approach.

Similarly, chairpersons should be made aware of media statements issued from the office of the chief executive to ensure the board chair, members and chief executives can be briefed and prepared, prior to going on the record. The exception is where a chair or chief executive has a pre-existing arrangement with specific media representatives who have been invited to contact the chair or chief executive directly.

### 7.4 Providing expert opinion on health matters

Health care professionals have a responsibility to properly inform the community on health matters within their area of specific expertise. Where expert medical opinion is required by the media, the local media unit will assist in providing information wherever possible providing that:

- the health professional is in agreement and feels comfortable with the arrangement
- requirements in regard to confidentiality and privacy contained in the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002*, have been complied with in accordance with the NSW Health Privacy Manual for Health Information.

In some instances, the media may directly contact a medical specialist or other health professional. In these cases, the local media officer should be informed. Consistent with this protocol, media should be advised to obtain approval from the local media officer before entering a health care facility to film, photograph or conduct interviews.

### 7.5 Professional journals and specialist health publications

Reporting of innovative and excellent work occurring across the health system is encouraged. Staff who receive enquiries from professional specialist journals on general professional issues should immediately contact their local media unit. Copies of articles accepted for publication should be sent to the local media unit before the publication date to ensure media officers are prepared for any follow-up media enquiries. An appropriate media trained spokesperson should be identified at this time. Where considered relevant an In Brief should be forwarded to the NSW Ministry of Health prior to publication.

### 7.6 Providing submissions to Parliamentary Inquiries

NSW Health organisations may occasionally be invited to make official submissions or appear in an official capacity before a Parliamentary Inquiry. These include, but are not limited to, NSW Parliamentary Committees and Federal Government Senate Committees. Where a staff member has been contacted to make a submission, Strategic Communications and Engagement Branch, NSW Ministry of Health should be advised in the first instance and relevant documentation forwarded by email to [emsmail@doh.health.nsw.gov.au](mailto:emsmail@doh.health.nsw.gov.au)



In instances where an official submission is made, a single response representing the consolidated views of NSW Health or NSW as a state may be preferred. In these cases comment will be coordinated by the NSW Ministry of Health.

## 8 MEMBERS OF PARLIAMENT/VIPs

### 8.1 Visits to health facilities and information requests

Attendance at any health facility by a Member of Parliament (MP), whether or not accompanied by media representatives, is subject to the Department of Premier and Cabinet [Premier's Circular 2006 – 46](#).<sup>6</sup> Members of Parliament seeking information on particular issues or requesting to visit a health facility outside their local electorate must contact the Office of the NSW Minister for Health.

The Circular outlines the requirement for a Member of Parliament to direct their verbal or written request to the relevant Minister's office. Where a NSW Health organisation receives a direct request the Member should be referred to the Premier's Circular and the organisation should take no further action.

The Circular does not apply to State Members of Parliament in respect of their local electorate. Requests for information or visits relating to a Member's own electorate may be directed to the chief executive of the local health district or specialty network.

Following approval by the relevant Minister's Office, Members of Parliament are welcome at health service facilities when:

- the visit is administratively and clinically appropriate, as confirmed to the Ministry of Health by the local chief executive
- individual patients' rights to privacy are respected
- patients are not photographed without their specific consent
- health services ensure that the visits are properly managed and do not disrupt normal activities

The NSW Ministry of Health Media Unit should be advised where an elected MP arrives unannounced at any NSW Health facility.

### 8.2 Visits during 'Caretaker' conventions and other pre-election practices

Unless otherwise advised the information at 7.1 applies during pre-election periods. Staff are to refer to the applicable Premier's Circulars issued from time to time for guidance on management of requests by Members of Parliament to undertake visits to a health facility or to use health facilities for electioneering purposes during any caretaker or pre-election periods.

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<sup>6</sup> This Circular was current at December 2014.

### 8.3 Visits by other VIPs

From time to time very important persons (VIPs) visit health services for a variety of reasons. VIPs can include governors/governors general; members of royal families, and famous local or international personalities.

Where a VIP requests a visit, early advice should be provided to the NSW Ministry of Health through the in-brief system (refer to the PD on Incident Management). Where a visit is proposed by the health service early advice in the form of an In-Brief should also be provided. Where appropriate, approval from the NSW Ministry of Health should be sought before confirmation of the visit.

Where the NSW Government invites a VIP to visit the State, the Department of Premier and Cabinet Protocol and Hospitality Unit will manage arrangements for the visit. This Office can also be contacted for advice in relation to other dignitaries on a case by case basis.

## 9 COMMUNICATION CHANNELS

NSW Health organisations have a variety of communication channels to interact with the community and staff to provide important health messages. These can include:

- broadcast media and recordings, including audio recordings and films
- print media such as newspapers, books, pamphlets, fact sheets, flyers and posters
- outdoor advertising and promotion including billboards, signs or placards
- digital media and online channels such as mobile applications, social media, email, websites, blogs, and internet based radio and television
- advertising.

### 9.1 Corporate Websites

#### 9.1.1 NSW Health intranet

The NSW Health intranet is an internal web-based communication channel that provides staff with access to internal information, such as corporate news, internal policies, and employment conditions. It is managed by the NSW Ministry of Health and can be accessed by all NSW Health local health districts and networks.

The intranet is best used for non-urgent communication where the audience is primarily desk-based or has regular access to a computer. Content published to the intranet does not require an immediate call to action, and should provide staff with links to more information and contact details where relevant.

#### 8.1.2 NSW Health public websites

NSW Health public websites aim to communicate community messages on public health in NSW. NSW Health public websites generally include:

- access to priority campaigns, alerts and public announcements
- gateway to services, directories and related websites
- accessible content compliant with industry standards for a wide audience
- transparent information to inform the community on government activities.

Staff managing public websites should consult the Premier's Circular [C2012-08 NSW Government Website Management](#) to ensure the website complies with NSW Government requirements. NSW Health organisations are expected to undertake ongoing reviews of existing websites, close sites that are no longer needed, and streamline websites to focus on customer needs.

Therefore, new public websites should only be developed where there is a significant community need to create a website separate to an existing site.

Before creating a new website the following must be considered:

- The genuine user need for a new site which is supported by research as part of a broader communication strategy.
- The best communication channel to achieve objectives.
- Any existing service or website available to meet the need
- The existence of a resourced plan for ongoing management of any new website including design, maintenance, technical support, evaluation, and plan for decommissioning.

The Department of Premier and Cabinet have published website [guidelines](#) on the development and maintenance of NSW Government public websites. These guidelines must be considered during any proposed new development or updating of the NSW Health website, in particular whether the creation of a new URL is necessary. Of note NSW Health is required to reduce URLs over time.

The Guidelines also detail guiding principles for establishing websites which should be followed. These include that any updated or new NSW Health public website should:

1. **Be relevant:** services and content meet user needs
2. **Be simple:** sites make it easy and simple for people to do what they need to do
3. **Be findable:** services and content are easy to find and navigate
4. **Be consistent:** interfaces are consistent across NSW Health, familiar and easy to learn
5. **Be inclusive:** people can access content in the channels/ modes that best suit them
6. **Be trustworthy:** the site can be recognised as authoritative and trusted.

### *NSW Health domain*

To help ensure consistency across the NSW Government, all NSW Health websites should use the NSW Health domain [health.nsw.gov.au](http://health.nsw.gov.au)

Using alternative domains is not encouraged. However there may be some circumstances that require a different domain. For example, to effectively target a very specific key audience, or where the domain name simply becomes too long. Public websites using an alternative domain are still required to adhere to NSW Government requirements for website management.

## 9.2 Social media

Social media is increasingly being used as a key personal and professional communication channel.

### 9.2.1 Official Use of Social Media by NSW Health organisations

NSW Health organisations are encouraged to make greater use of social media as a way of communicating information and engaging audiences to improve customer services<sup>7</sup>.

All local social media channels should have clear governance mechanisms to guide, monitor and evaluate messaging to ensure consistent branding, noting the ongoing effort required to manage accounts and deliver a consistent customer service.

The internet offers many opportunities to interact widely with diverse groups of people and health organisations may develop their own protocols for communicating online (see the [NSW Government Social Media Policy and Guidelines](#) for more information).

Care is required by NSW Health employees when communicating online, as information and views can be communicated widely and can be subject to distortion and misrepresentation. Local protocols should reflect the need for staff to identify themselves as representatives of the organisation if they are posting messages on work related topics.

Staff have a responsibility to report inappropriate behaviour or material published online to their local manager. The following best practice guidelines are recommended when responding to negative or controversial social media conversations:

<b>Social media and blogs</b>	Delete the post and directly message the author to inform them that their comments breach your rules of engagement (ROE) and warn of future blocking. Next time remove and ban user.
<b>Trolls/rager (degrades or rants)</b>	If the comments are not breaking ROE, leave and monitor. The community will likely correct. Report to the appropriate area. Consider blocking or removing inappropriate comments.
<b>Unhappy customer</b>	Review the comments and link to appropriate information. Offer personal contact offline if personal. Consider a holding post if more time is needed to formulate a response.
<b>Misguided</b>	Reply with factual information that is already publically available.

### 9.2.2 Personal use of Social Media by NSW Health staff

There is no such thing as a 'private' social media site, regardless of the privacy settings. Posting information online is no different from publishing in a newspaper. If a staff member makes any comment about NSW Health on a social media site they are making public comment.

NSW Health staff are to be mindful of their private use of social media, particularly if they identify themselves as a NSW Health employee either directly or as part of a user profile, or if they can be identified as working for NSW Health via the content of their postings.

Whether on or off duty the conduct of a NSW Health employee will reflect on the NSW Health system. All staff must protect the reputation of NSW Health through behaving in a lawful and appropriate manner.

<sup>7</sup> NSW 2021 NSW Government Business Plan

Staff must not, *in their capacity as NSW Health employees*, make any comment on social media without prior authorisation. Corporate spokespeople are responsible for representing NSW Health externally to ensure clear and consistent provision of advice to the public on key corporate issues.

NSW Health staff have the right to enter public debates and comment on political, social or other issues in their capacity as private citizens. However, staff should be mindful of their obligations under the NSW Health Code of Conduct. Any personal comments must not be seen to represent the views of any NSW Health organisation.

**Example:**

*A person identifiable as a NSW Health employee who posts offensive, racist or obscene material while off duty on their personal social media site, could be in breach of the Code of Conduct in the same way as if they shouted offensive, racist or obscene material in public while on duty<sup>8</sup>.*

The NSW Code of Conduct and the Policy Directive on appropriate use of technology should also be considered when communicating online. This includes:

- Avoiding conduct that could bring NSW Health staff, patients or clients into disrepute
- Acting in a way which protects and promotes the interests of NSW Health and the staff member's particular NSW Health organisation
- Only providing official comment on matters related to NSW Health if authorised
- Not taking unfair advantage of, or exploiting any relationship with patients or clients, including not engaging in on-line friendships via social media. Staff may accept patients and clients as members of their professional pages that contain information relating to the professional practice of the staff member
- Not acting unlawfully (e.g. breaching copyright). Acknowledging information sources
- Being transparent and identifying oneself when discussing NSW Health related topics or issues. Being polite and considerate
- Not disclosing confidential information obtained through work and which should not be made public
- Being quick to admit /correct mistakes<sup>9</sup>.

### 9.3 Communicating with multicultural communities

NSW Health is committed to providing people from culturally and linguistically diverse (CALD) backgrounds with access to appropriate health information and services.<sup>1</sup>

The NSW Multicultural Health Communication Service [www.mhcs.health.nsw.gov.au](http://www.mhcs.health.nsw.gov.au) works with health services across NSW to provide CALD communities with access to health information and services, and informs non English speakers about the NSW Government's health priorities.

The NSW Multicultural Health Communication Service can assist NSW Health employees with communicating and connecting with CALD communities, including:

- communication and social marketing campaigns
- translation services
- developing multilingual publications, videos and information resources

<sup>8</sup> Adapted from the NSW Police Force Social Media Policy

<sup>9</sup> NSW Government Social Media Policy and Guidelines

- events and health promotion education
- facilitating research projects.

For assistance with multicultural health communication activities contact the NSW Multicultural Health Communication Service on the website:

[<sup>1</sup>NSW Ministry of Health, Policy and Implementation Plan for Healthy Culturally Diverse Communities 2012 - 2016](#)

## 10 REFERENCES:

1. [NSW Health Privacy Manual for Health Information.](http://www.health.nsw.gov.au/policies/manuals/Pages/privacy-manual-for-health-information.aspx)  
<http://www.health.nsw.gov.au/policies/manuals/Pages/privacy-manual-for-health-information.aspx>
2. Privacy Management Plan - [http://www0.health.nsw.gov.au/policies/pd/2015/PD2015\\_036.html](http://www0.health.nsw.gov.au/policies/pd/2015/PD2015_036.html)
3. The NSW Health Code of Conduct - NSW Health (PD2015\_049)  
[http://www0.health.nsw.gov.au/policies/pd/2015/PD2015\\_049.html](http://www0.health.nsw.gov.au/policies/pd/2015/PD2015_049.html)
4. Guidelines on the use and disclosure of inmate/patient medical records and other health information, issued by the Chief Executive of Justice Health and Forensic Mental Health Network pursuant to clause 297 of the Crimes (Administration of Sentences) Regulation 2008, August 2012  
<http://www.justicehealth.nsw.gov.au/about-us/publications/guidelines-disclosure-medical-records.pdf>
5. NSW Dept. of Education and Communities Social Media Policy  
<https://www.det.nsw.edu.au/policies/technology/communication/techguide.pdf>
6. NSW Government Social Media Policy and Guidelines  
<http://www.advertising.nsw.gov.au/strategic-communications/social-media-policy>
7. Electronic Information Security Policy - NSW Health PD2013\_033
8. [Australian Press Council](http://www.presscouncil.org.au/document-search/standard-suicide-reporting/) website. <http://www.presscouncil.org.au/document-search/standard-suicide-reporting/>

### Related NSW Health Policy Directives and Procedures

- [Communications-Use and management of Misuse of NSW Communications Systems](#) PD2009076
- [Code of Conduct](#) (PD2015\_049)  
[http://www0.health.nsw.gov.au/policies/pd/2015/PD2015\\_049.html](http://www0.health.nsw.gov.au/policies/pd/2015/PD2015_049.html)
- [NSW Health Sponsorship and Fundraising Guidelines](#) (PD2005\_415)
- Advertising Personal Injury Services by Lawyers in Hospitals  
[http://www0.health.nsw.gov.au/policies/ib/2015/IB2015\\_066.html](http://www0.health.nsw.gov.au/policies/ib/2015/IB2015_066.html)
- [NSW Health Branding Style Guide](#) August 2014

## 11 SOCIAL MEDIA RESOURCES

Policies and guidelines from agencies throughout NSW Government and other Australian State Government agencies are accessible online. Examples are listed below:

### NSW Government:

- [NSW Ambulance Service - Social Media Policy \(PDF\)](#)
- [CTTT - Social Media Policy & guidelines \(PDF\)](#)
- [Education and Communities - Policy and Video Guides](#)  
[http://www.police.nsw.gov.au/\\_data/assets/file/0010/261874/Official Use of Social Media Policy.pdf](http://www.police.nsw.gov.au/_data/assets/file/0010/261874/Official%20Use%20of%20Social%20Media%20Policy.pdf)
- [Powerhouse Museum - Internet Policy \(including Social Media\) \(PDF\)](#)
- [Official Use of Social Media Policy - NSW Police Force](#)
- [University of Technology Sydney - Social Media Strategy & Governance Research \(PDF\)](#)
- [Trade & Investment - Social Media Policy, Guidelines and Toolkit](#)

### National Guides and Policies:

- [Australian National Botanic Gardens - Social Media Policy \(PDF\)](#)
- [National Library of Australia - Social Media Policy](#)
- [Australia Public Service Commission - Guidance to participating online](#)  
<http://www.apsc.gov.au/publications-and-media/current-publications/values-and-conduct/employees-as-citizens>

**Other Australian State Resources:**

- [Australian Capital Territory \(ACT\) - Social Media Policy](#)
- Queensland Government - online community engagement guideline:  
<http://www.qgcio.qld.gov.au/products/qgea-documents/547-business/2476-online-community-engagement-guideline>
- [Victoria's Department of Health - Twitter Policy](#)
- [Victoria's Department of Justice - Social Media Policy](#)
- [Social Media Governance](#) lists policies, guidelines and other helpful worldwide social media documents and websites.

## 12 APPENDIX 1 –: Key Elements for Forms for Identifiable Photographic Images/ Audio recordings for Publication

The following information is provided for consideration by health services when designing or evaluating consent forms for identifiable photographic images / audio recordings for publication.

### SUGGESTED KEY ELEMENTS

**1. The individual's personal details (sufficient to identify the individual including**

- if the individual is receiving treatment from NSW Health or is an employee or service provider to NSW Health
- the details of the workplace or facility
- whether approval is required for the individual to participate in this activity and the name of the approver

**2. The individual's agreement to the photographic images/ recordings.**

This may include:

- A statement that the person understands and agrees to the photograph/ recording ((including artistic or creative activity) being collected (recorded); used and disclosed (edited ; reproduced; broadcast; published; disseminated and distributed) the purpose as described
- The name of the parent / guardian / carer if required
- A statement that the photographic image/ recording is not required for patient care or other clinical, management or audit purposes
- The name the type of medium to be used:
  - Photographic image
  - Video recording
  - Audio recording
- The name of the media where the photographic image/ video record / audio record will be published, along with the name of the publisher when known for example:
  - Journal
  - Newspaper
  - Television (series or report)
  - Magazine
  - Promotional advertising
- The name of the hospital / LHD/ Health organisation



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**3. An information section may include wording such as:**

- I agree to the photographs/ images/ recordings being taken and used for the following purposes.....<describe>.( Include the time frame for which the material may be used or add box for ‘in perpetuity’).
  
- I understand and acknowledge:
  - The reasons for collection of these photographs/images/ recordings and the purposes for which they will be used and disclosed as set out above
  - This has been explained to me by the media advisor / treating health care worker
  - That my participation is completely voluntary and I can choose not to participate at all
  - That I may withdraw my consent, in writing, at any time in the future however I understand that this will only apply to future and not past publication of the material.
  - That I assign all rights, title and interest including copyright to NSW Health.

**4. Separate lines for the relevant signatures including the witness and an interpreter, if present, along with provision for the date.**

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## 11 APPENDIX 2 – Example – Multi-Media Consent Form

NAME			
ADDRESS			
PHONE		MOBILE	
EMAIL			
ARE YOU A PATIENT OR RECEIVING SERVICES/TREATMENT FROM NSW HEALTH?			Yes <input type="checkbox"/> No <input type="checkbox"/>
IF "YES", NAME OF THE FACILITY			
ARE YOU AN EMPLOYEE OR SERVICE PROVIDER TO NSW HEALTH?			Yes <input type="checkbox"/> No <input type="checkbox"/>
IF "YES", NAME OF THE WORKPLACE OR FACILITY			
ADDRESS			
DO YOU REQUIRE APPROVAL TO PARTICIPATE IN THIS ACTIVITY?			Yes <input type="checkbox"/> No <input type="checkbox"/>
IF "YES", NAME AND ROLE OF APPROVER			
<p>This consent form authorises the person's likeness and voice, and any activity undertaken by the person in relation to this release (including artistic or creative activity) to be recorded/edited/ reproduced/ broadcast/ published/disseminated/distributed/ via electronic and/or other form, to be shown and/or heard in public via radio, television, newspaper, magazine, Internet or other means, to be used by NSW Health and other agencies of the Crown, subject to these terms and conditions.</p> <p>I acknowledge that I assign all rights, title and interest including copyright to NSW Health, and acknowledge that NSW Health is not obliged to use the multi-media material if it so chooses.</p> <p>I understand and acknowledge the reasons for collection of these photographs/images/recordings, and the purposes for which they will be used and disclosed has been explained to me by the media advisor/treating health care worker. My participation is completely voluntary and I can choose not to participate at all. I am aware I may withdraw my consent, in writing, at any time in the future however I understand that this will only apply to future and not past publication of the material</p>			
AS REQUIRED AND WITHOUT RESTRICTION		INITIAL & DATE	
FOR THE PURPOSE DESCRIBED BELOW			
FOR DISTRIBUTION/PUBLICATION AS DESCRIBED BELOW			
THE MULTI-MEDIA MATERIAL MAY BE USED			
IN PERPETUITY	YES	NO:	FROM:
SIGNATURE OF PERSON GIVING CONSENT			TO
			DATE
SIGNATURE OF PARENT/GUARDIAN/CARER On behalf of a person under the age of 18			DATE
SIGNATURE OF SUPERVISOR OR MANAGER If staff authorisation is required			DATE
SIGNATURE OF WITNESS			DATE
NAME OF WITNESS			
NAME/ SIGNATURE OF INTERPRETER			DATE