

# APAGBI Social Media Policy

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**APAGBI**  
Association of  
Paediatric Anaesthetists  
of Great Britain & Ireland

### 1. Purpose of this policy

This document provides guidance on how social media should be used by the Association of Paediatric Anaesthetists of Great Britain and Ireland (APAGBI). It forms part of our governance framework and complements other organisational policies.

Our reputation on social media is a key element of our public profile. It is therefore essential that both official APAGBI accounts and personal accounts that reference the Association maintain professionalism and consistency.

This policy outlines expectations for how the organisation, staff, Council, committees and members linked with APAGBI should conduct themselves online. It aims to protect the Association's reputation, ensure appropriate communication, and support the sharing of relevant, high-quality content.

### 2. Review cycle

This is a live document and may be updated as needed. It will be formally reviewed on an annual basis to ensure continued relevance.

### 3. Social media platforms currently in use

As of October 2025, APAGBI maintains an active presence on:

- Facebook
- Instagram
- X (formerly Twitter)
- BlueSky
- LinkedIn

These platforms are used to promote excellence in paediatric anaesthesia, highlight events organised or endorsed by APAGBI, and engage with members, colleagues, and the wider public.

### 4. Account management ( 2026)

- **Social Media Lead:** Kate Tabrett
- **Digital & Website Lead:** Dr James Farrant
- **Event & Administration Partners:** Event Management Direct

### 5. Followers and following

APAGBI follows a wide range of relevant organisations, charities, and individuals to remain up to date with current developments.

- Following an account does **not** indicate endorsement; this is clearly stated in our bios.
- Views expressed by followers do not represent APAGBI.
- Similarly, views expressed by APAGBI staff, Council, or committee members on personal accounts are their own, unless explicitly stated otherwise.

### 6. Criteria for following accounts

Before following or subscribing to an account, the following checks are made:

- Is their content relevant to paediatric anaesthesia or our members?
- Do they avoid frequent online disputes or overt political campaigning?
- Do they demonstrate professionalism in their online presence?
- Is their follower-to-post ratio authentic (not inflated or artificial)?
- Do they post regularly and mainly in English?
- Is their content appropriate for a professional audience and workplace settings (i.e., does not contain material that is 'not safe for work')?

If the answer to any of these questions raises concerns, the account will not be followed.

### 7. Personal use of social media by APAGBI representatives

Board members, Council members, committee chairs, and staff may use their personal accounts to support APAGBI and highlight their work.

- They should include disclaimers stating their relationship with APAGBI and that views expressed are their own.
  - Example: *“Views are my own and not those of APAGBI.”*
- Official APAGBI logos or graphics **should not** be used on personal accounts.
- Personal posts may reference APAGBI or use relevant hashtags (e.g., #APAGBI, #PaediatricAnaesthesia) **but must not imply official endorsement**.
- Staff may share or re-post content from official APAGBI accounts. When doing so, it should be clear that this is a re-post and does not necessarily represent a personal statement of policy or opinion.
- They must avoid discriminatory, offensive, or harmful content, and respect confidentiality.
- If in doubt, members should seek advice from either the **Social Media Lead** or **Digital & Website Lead**.

## 8. Content shared by APAGBI

Social media is used to:

- Communicate with members and the wider public.
- Share news, research, events, and educational opportunities.
- Promote APAGBI activities and endorsed events.
- Provide healthcare updates and highlight relevant grants or funding opportunities.
- Ensure that any photos or videos posted from events have appropriate consent from all individuals featured, particularly children, to strengthen GDPR compliance.
- Encourage accessibility in posts, e.g., using alt text for images, captions for videos, and clear language, so content is inclusive for all users.

Re-posts on X are used to share relevant content from members and healthcare organisations. Our account clearly states that re-posts do not equal endorsement.

Corporate sponsors may be acknowledged, but events from external commercial organisers will not be advertised.

No external surveys may be shared without approval from APAGBI.

## 9. Engagement and responses

The **Social Media Lead** monitors conversations and responds to queries in a timely manner (within 3 working days where possible).

- Formal queries should be submitted via email to the contact address found on [apagbi.org.uk](http://apagbi.org.uk)
- Simple queries may be answered with links to our website.

- More complex queries are escalated to the appropriate lead for input before a response is posted.

All messaging must align with APAGBI's brand guidelines and tone of voice. Copyrighted material must only be used with correct permissions and attribution.

## 10. Managing negative feedback

Negative posts may include complaints from delegates, sponsor concerns, factual errors, or inappropriate use of images.

- Any potentially contentious post must be flagged promptly with the **Digital & Website Lead**.
- The issue will be escalated to senior management or Council if required.
- Responses should be issued within 3 working days where necessary.
- All formal complaints will be handled under the APAGBI Complaints Policy.

## 11. Handling trolls and blocking accounts

In most cases, blocking should be avoided, as it can escalate tensions. Negative comments can sometimes demonstrate the professionalism of our response.

Recommended approach:

1. Acknowledge and thank the user for their comment.
2. Offer to take the discussion offline.

If behaviour becomes abusive or persistent, accounts may be reported and blocked as a last resort.

## 12. Evaluating social media activity

The **Social Media Lead** uses tools such as Hootsuite and Google Analytics to monitor engagement. Reports are prepared for Council meetings to review trends and identify opportunities for improvement, with the aim of increasing meaningful interaction.

## 13. Useful references

- BMA: *Ethics of social media use* – [bma.org.uk](http://bma.org.uk)
- NHS Digital: *Social media guidance* – [digital.nhs.uk](http://digital.nhs.uk)
- GMC: *Doctors' use of social media* – [gmc-uk.org](http://gmc-uk.org)
- ICO: *Data protection and social media guidance* – [ico.org.uk](http://ico.org.uk)
- NHS Digital: *Accessibility guidelines for digital content* – <https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/nhs-digital-style-guidelines/accessibility>