

# Social Media Strategy

The use of social media enables people to be more electronically connected than ever before. This is aided by the rapid changes in new technologies and new marketing approaches worldwide. While social media allows real time communication with the world, it requires strategies by which this communication is managed effectively. In producing this strategy, it is acknowledged that decisions have been made regarding how the Doctorate in Clinical Psychology Programme (the DClInPsy hereafter) is represented via social media and that these decisions have been made with the agreement of the programme’s Directors. This strategy aims to provide a framework for managing the social media profile of the DClInPsy.

## 1. Objectives

The objectives of the DClInPsy social media strategy appear below:

<b>Objective 1</b>	Raise DClInPsy public profile
<b>Objective 2</b>	Promote the professional interests of clinical psychologists across the UK
<b>Objective 3</b>	Research evidence dissemination – knowledge transfer
<b>Objective 4</b>	Communicate with our audience (new job opportunities, opportunities for research participation, staff achievements, trainees achievements, events)
<b>Objective 5</b>	Highlight news stories that are relevant to clinical psychology
<b>Objective 6</b>	Increase participant recruitment figures for staff and trainees research
<b>Objective 7</b>	Promote widening access/participation agenda
<b>Objective 8</b>	Raise awareness of current issues in clinical psychology
<b>Objective 9</b>	Promote research related events
<b>Objective 10</b>	Network building
<b>Objective 11</b>	Support mental health anti-stigma campaigns

These objectives are also in keeping with the aims of the Division of Clinical Psychology of the British Psychology Society:

“A strong voice, based on psychological science, informing policy, standards and workforce issues in the new political climate

To lead the way on standards for psychological services

Support to members in accessing CPD, both clinical and leadership/managerial, and support in developing/showcasing psychological research

As part of the BPS, a consolidated high-profile UK-wide professional body with significant user and carer engagement, which promotes psychology and the work of psychologists”

## 2. Audience

The audience segments that the media strategy aims to reach appear below:

Segment	Description	Objective
Target Audience 1	Clinical psychology trainees (both at Lancaster and beyond)	All objectives are relevant to our targeted audiences
Target Audience 2	DClinPsy applicants	
Target Audience 3	Clinical psychologists	
Target Audience 4	Service users with personal experience of mental health difficulties	
Target Audience 5	Relatives – people close to anyone with mental health difficulties (partners / spouses, parents, siblings, friends)	
Target Audience 6	Health professionals	
Target Audience 7	Academics	
Target Audience 8	General public	

## 3. Content Integration

Content is expected to be produced from internal research, educational activities, and external sources. External source material can be repurposed, remixed, recycled or further disseminated as long as it is consistent with the programme’s values and vision statement (<http://bit.ly/1aWtjh0>) and in keeping with this strategy. Our social media accounts provide third party links (reposting, retweets) only as a convenience and the inclusion of any link to such sites does not imply endorsement by the DClinPsy of those sites.

Content sources	Description
Website	Local, national and international websites with relevant material
Newsroom platforms	Press releases in electronic or print format from LU or other external relevant sources
Events	DClinPsy’s, LU’s, or other external relevant events
Video	DClinPsy’s, LU’s, or other external relevant video material
Meetings	Materials discussed in internal meetings
Staff	It is the responsibility of all staff members to provide relevant information in the appropriate format for further dissemination

## 4. Tool Selection and Techniques

The tools used to implement this media strategy appear below.

Tool	Yes/No	Why - Comment
Twitter	Y	Directed primarily to professionals
YouTube	Y	Offers alternative effective format for communication with audience ( <a href="https://www.youtube.com/user/lancasterdclinpsy">https://www.youtube.com/user/lancasterdclinpsy</a> )
DClin forum	Y	Useful method of communicating with prospective and current applicants
Blog	N	Use of the LU blog
Facebook	N	Users often use it for posting personal sensitive information
LinkedIn / Instagram / Flickr / Google+	N	No available resources to develop

## 5. Measuring success

Several metrics for success will be monitored. These include buzz/conversation, brand awareness, traffic to website and YouTube Channel, subscribers/followers/fans, audience insights. Google Analytics, and YouTube Insights will be used as tracking tools. Due to limited resources no data analysis will be performed on these data.

## 6. Staff and responsibilities

Information on staff and task descriptions appears below:

Task	Staff	Description
Leading	Any member of staff	Develop, review and update media strategy + oversee implementation + measure success (5) + communicate with LU Press Office and other local and national media + respond to negative media commentary in consultation with DCLinPsy's Directors
Implementation	DCLinPsy's Admin team	Provide content
	The member of staff responsible to maintain / update DCLinPsy's website	Provide content + posting + provide quantitative data on measuring success (5)
	All members of staff	Provide content + develop communications materials
	Trainees	Provide content

Implementation should be reviewed at staff meetings.

## 7. Ethics in use of social media

It is the personal responsibility of each member of staff to use social media in keeping with guidelines produced by their representing professional bodies. When such do not exist (or staff are not represented by a professional body), staff are expected to comply with those published by the British Psychological Society.

For more information contact [researchethics@bps.org.uk](mailto:researchethics@bps.org.uk) or check

[http://www.bps.org.uk/system/files/images/2012\\_ethics\\_committee\\_social\\_media.pdf](http://www.bps.org.uk/system/files/images/2012_ethics_committee_social_media.pdf)

## 8. Crisis Management

Successful engagement with the public via social media is based on open communication and interaction. However, not all audience communications are always positive. In effect, moderation is necessary to protect both our media channels and potentially vulnerable individuals from inappropriate content. Any comments containing profanity, vulgarity, sexist, bigoted, derogatory, prejudicial or racist language or spam is not to be tolerated. Also, every DCLinPsy social media account must have a plan for what will happen in each of these eventualities:

- the account is hacked by an unauthorised person
- a message is posted which is factually incorrect, or turns out to be
- something editorially inappropriate is inadvertently posted

In any of the above cases, it is advised not to delete 'problematic' posts, as this could potentially lead to more difficult interchanges than leaving them live. It is recommended that in such circumstances the DCLinPsy uses the social media platforms to apologise or clarify the issues as quickly as possible afterwards.

Exceptions to the "don't delete" approach would involve 'problematic' posts that have legal ramifications (e.g. defamation, contempt). Such incidents should be reported to the DCLinPsy's directors who will decide whether other key contacts should be informed from Lancaster University (e.g. Faculty Dean, HoD, FHMREC, UREC, compliance team) or the Lancashire Care NHS Foundation Trust (where relevant).

In any case, Lancaster University's press office should be informed of any incidents which are likely to attract interest from the press/Twittersphere/bloggers etc.

## **9. Budget**

The Social Media Strategy is developed, implemented and monitored using Programme's internal resources.