

1. RACGP Spokespersons Policy

- 1.1 Policy number: CO-O-010.2
- 1.2 Category: Organisational
- 1.3 Approval date: October 2014
- 1.4 Revision date: October 2016
- 1.5 Unit responsible: Communications and Media Unit

2. Policy declaration

This policy describes for members and staff the protocols and procedures for the development of media releases and statements. This policy also describes how RACGP staff and members may, or may not communicate on behalf of the RACGP via 'RACGP-owned-and-operated' traditional and social media channels.

3. Background

The Royal Australian College of General Practitioners (RACGP) is Australia's largest professional general practice organisation and represents over 28,000 members working in or towards a career in general practice.

The general practice leadership role played by the RACGP is reflected in the RACGP's public image as a credible and ethical professional organisation. The purpose of the RACGP Media Policy is to ensure this is maintained when the RACGP, or its spokespeople, provide information and comment via traditional or social media.

3.1 Objectives

The objectives of this policy are to:

Ensure that the RACGP produces high quality media materials and statements to external audiences

Protect the RACGP from risk in public forums

Provide staff and members with guidance regarding who can and cannot speak on behalf of the RACGP across both traditional and social media channels.

3.2 Specific aims

The specific aims of this policy are to define rules and procedures for:

Risk analysis in relation to media content

Synthesising accurate and relevant information for media content

Sign off on media content and determination of RACGP spokespersons.

4. Body of Policy

Responsibility for the implementation of this policy lies with the Chief Executive Officer or the Deputy Chief Executive Officer (upon delegation).

This policy applies to all members and staff, at national and faculty levels.

4.1 Quality of media statements

Statements by all RACGP spokespersons to the media or staff authorised to use RACGP social media platforms must be factually accurate and reflect the RACGP's core role, values, responsibilities and strategic direction. All statements must be ethically sound and morally appropriate, and within the RACGP's policy framework.

Statements by all RACGP spokespersons to the media or staff authorised to use RACGP social media platforms must not comment on or disclose confidential RACGP information. If staff or members require clarification about what RACGP information is or is not in the public domain they should confirm with the Corporate Affairs Manager or Communications and Media Manager.

4.2 Responsibility for media statements

It is the delegated responsibility of the RACGP President to provide comment to the media regarding national issues on behalf of the RACGP. The President articulates and promotes RACGP policy and national activities, and if necessary, defends the RACGP against criticism.

The President can delegate responsibility for speaking to the media on particular national issues to members of Council or other RACGP members (for example NSC Chairs). This includes delegation of comment on national clinical issues to members with special areas of expertise.

The delegation of comment on state and local matters typically falls to State Faculty Chairs, and on national rural or Aboriginal and Torres Strait Islander matters to the National Rural Faculty Chair or National Faculty of Aboriginal and Torres Strait Islander Health Chair respectively. Faculty Chairs should liaise directly with the Communications and Media Unit in relation to media contacts or content.

All RACGP spokespeople must be RACGP members and if possible, practicing GPs and Fellows. Ideally, all RACGP key spokespeople will have completed media training organised by the RACGP.

The RACGP Communications and Media Unit have the responsibility to:

Field all RACGP media enquiries

Assess the level of risk associated with each enquiry, including the risk category and the level of risk (please see RACGP "Risk Management Policy") – risk analysis will include analysis of both the nature of the information involved and the nature of the media outlet

Identify a potential spokesperson or spokespersons

Advise the Chief Executive Officer or Deputy Chief Executive Officer (upon delegation) on details of a media response, including:

- the identity of the media outlet and journalist
- the detail of the brief the spokesperson will speak to.

For routine and/or expected media enquiries, the RACGP Communications and Media Unit will seek sign off from the Chief Executive Officer or Deputy Chief Executive Officer (upon delegation) before finalising the brief, arranging for a spokesperson, and before contacting the

journalist involved. The President is the key spokesperson of the RACGP and works to ensure that the objectives, views, and interests of the RACGP are pursued, promulgated, and advanced.

Please note that for high risk media activity, including both political and clinical media enquiries, sign off is required by both the President and the Chief Executive Officer or Deputy Chief Executive Officer (upon delegation).

4.2.1 Proactive media

A way that the RACGP pursues its objectives is through proactively pitching and participating in medical and consumer media. It is the role of the RACGP Communications and Media Manager to liaise with CMT and SLT members to determine the issues on which proactive media activity will be developed and to action this within the RACGP Communications and Media Unit. All RACGP media activity should promote the specific work of our members, and therefore, wherever appropriate, expert RACGP members should be quoted. However, interview opportunities should be offered to the President in the first instance.

When the issue is of significant national, or state, importance the RACGP President or relevant Faculty Chair should be quoted. In the absence of the RACGP President, or in the absence of sign-off from the President, the RACGP Vice-President should provide signoff and be quoted. In the absence of the Vice-President, the Chair of Council (or other delegated Council member) should provide signoff.

It is the role of the RACGP Communications and Media Unit to work closely with RACGP business units and faculties to identify issues and media opportunities for proactive dissemination to medical and consumer media and other stakeholders.

All media activity should be approved by the:

Chief Executive Officer or Deputy Chief Executive Officer (upon delegation),

RACGP spokesperson quoted in the media release, and

The relevant RACGP manager.

4.2.2 Reactive media

Another way in which the RACGP pursues its objectives is through reactive media i.e. when the RACGP responds to political and clinical media enquiries. This process is inherently associated with more risk than proactive media activities, because the RACGP has less control over the timing, the topic or the content.

(i) Risk analysis of political media enquiries

Where a journalist is filming, recording or writing a political story that centres on RACGP governance, on government policy at all levels, or on contentious comments made by other medical spokespeople or organisations, in either the specialist medical or the consumer media, the responsibility for approving an RACGP spokesperson and the content of the brief for that spokesperson lies with the RACGP Chief Executive Officer or Deputy Chief Executive Officer (upon delegation). The RACGP Communications and Media Unit will widely consult with relevant managers and members to ensure accuracy before providing the final brief to the Chief Executive Officer/ Deputy Chief Executive Officer for sign off.

(ii) Risk analysis of clinical media enquiries

Low risk

Where a journalist is filming, recording, or writing a clinical story in either the specialist medical or consumer media, and that story is based on medical evidence and the experience of expert RACGP members in practice, and it is judged by the RACGP Communications and Media Manager that the issue or topic of that story is of medium or low risk, the responsibility for approving who an RACGP spokesperson will be and the content of the brief for that spokesperson lies with the Chief Executive Officer or their delegated authority.

High risk

Where a journalist is filming, recording, or writing a clinical story in either the specialist medical or consumer media, and that story is based on evidence and the experience of expert RACGP members in practice, and it is judged by the RACGP Communications and Media Manager that the issue or topic is of high risk, the responsibility for approving an RACGP spokesperson and the content of the brief for that spokesperson lies with the RACGP Chief Executive Officer or Deputy Chief Executive Officer (upon delegation). The RACGP Communications and Media Unit will widely consult with relevant managers and members to ensure clinical accuracy before providing the final brief to the Chief Executive Officer or Deputy Chief Executive Officer for sign off.

4.3 Managing the media

The first point of call for proactive and reactive media activity and all RACGP media enquires is the RACGP Communications and Media Unit.

Staff receiving media enquiries must refer all media enquiries they receive to the RACGP Communications and Media Unit.

If the RACGP Communications and Media Unit is unavailable, the Chief Executive Officer or Deputy Chief Executive Officer should be notified instead.

4.4 Social media

RACGP social media channels are additional communication channels for the RACGP and the same essential policies apply as they do to use of traditional communications channels.

Only people authorised by the RACGP Chief Executive Officer or Deputy Chief Executive Officer (upon delegation) may represent the RACGP on RACGP social media platforms.

Authorised social media representatives must disclose that they are an employee of the RACGP when engaging on RACGP social media platforms.

Authorised social media representatives must ensure that they do not post material that is obscene, defamatory, threatening, harassing, discriminatory or hateful to another person or entity, including the RACGP, its employees, its contractors, its board or external stakeholders including business related individuals or organisations.

In addition, social media representatives of the RACGP are required to:

Be respectful of all individuals and communities with which they interact online

Be polite and respectful of others' opinions, even in times of heated discussion and debate

Respect copyright, privacy, financial disclosure and other applicable laws when publishing on social media platforms.

Any content that staff or members wish to publish as 'from the RACGP' must be sent to the Communications and Media Unit for approval prior to any public action being taken.

5. PROCEDURES

An outline of the procedures defined by this policy is shown in Appendix 1.

5.1 Access to published policy

All RACGP staff will have access to this policy.

Responsibility for decisions on access to this policy by any other party lies with the Chief Executive Officer or Deputy Chief Executive Officer (upon delegation).

5.2 Promulgation of published policy

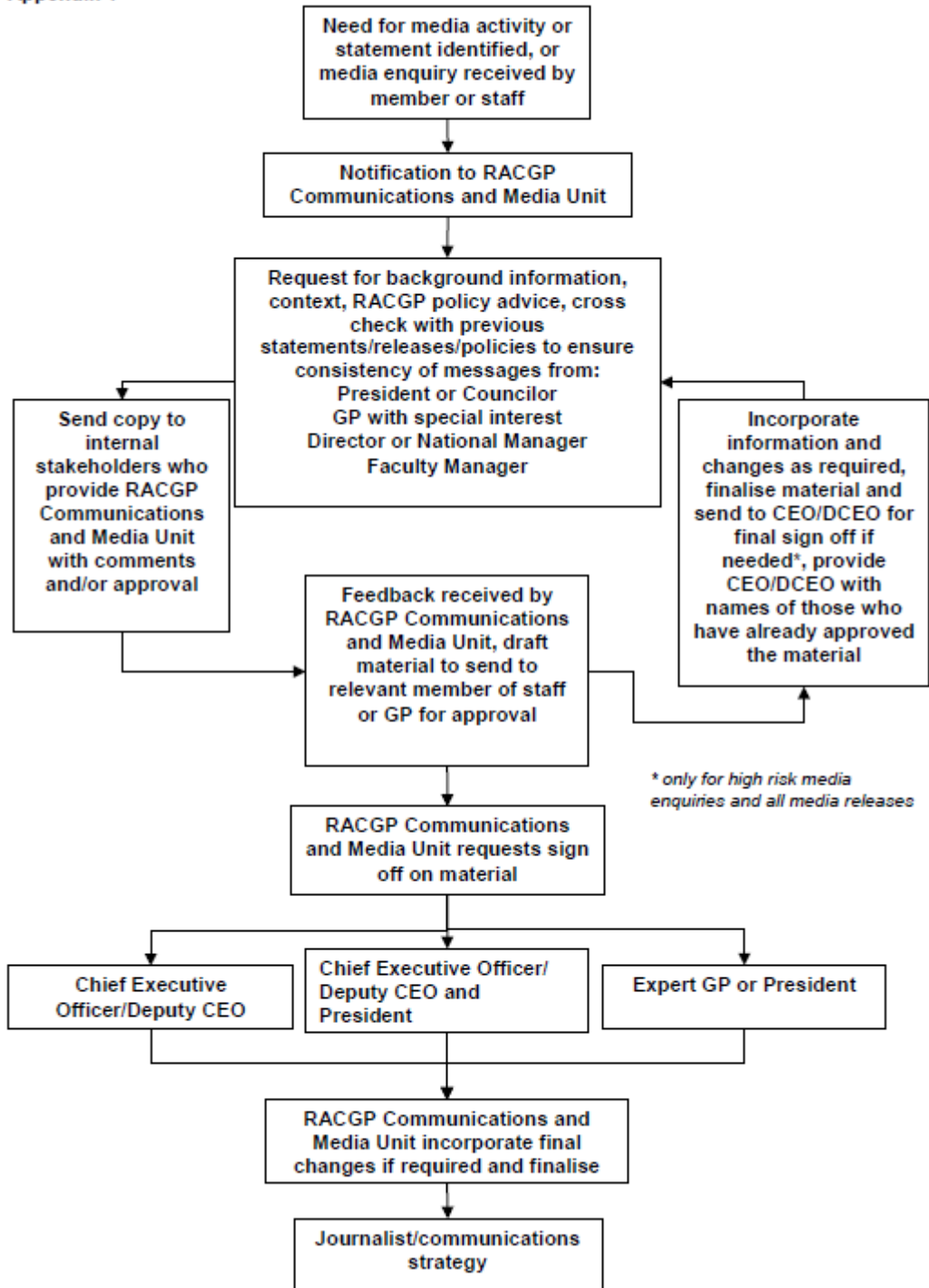
Relevant staff will be sent communications explaining the function and role of this policy. Communications and Media staff will be further trained in how to use and apply this policy.

5.3 Review of this policy

This policy will have a review cycle of two years.

6. Related policies, documents and legislation

Appendix 1



7. Administrative procedures

7.1 Access to published policy

7.2 Review of this policy