

Appendix 2

Social media business case

I. Primary content controller	
Name:	Date:
ivallie.	
Department:	
Secondary content controller: who will take of	control when primary controller is absent?
Name:	Department:
Moderator: who will monitor site for offensive or	r negative posts?
Name:	Department:
All officers using social media for business p before using social media tools on behalf of 2. Project details	ourposes must have completed the social media training course ⁵ Medway Council.
Platform: (e.g. Facebook page or group, I	Myspace page, Twitter channel)
Proposed URL or page name:	
Purpose/Objective: What is your objecti	ive and how will your choice of social media help you achieve it?
Strategic fit: How does the proposed use service plan objectives does it help you me	e of social media contribute to your area's service plan? Which eet?



Target audience: Who are you targeting with your social media communications? Which specific groups and geographical areas are you trying to reach?									
What makes yours different? Is anyone else already using your chosen platform in a similar way? How is yours different? Not just within Medway Council - much wider. Have you researched relevant groups? How will people interact with your social media vehicle — what do you want them to do?									
3. Using socia	ıl me	dia							
 Using social media This section will determine how you plan to use your chosen social media platform. 									
Frequency of use: How often will you update your chosen platform? (please tick)									
3 times daily:		Once a day:		Once a week:		Once a month:			
Moderation: How often will you moderate the site for offensive or negative posts? (please tick)									
3 times daily:		Once a day:		Once a week:		Once a month:			
Moderation proces	s: Ho	w will you respond to o	offens	ive or negative posts?					
1 Evaluation									
4. Evaluation									
Measures: How will period in mind?	you e	evaluate the success of	your	social media communio	cation	s? Do you have a trial			



Evaluation report date: 3 months from desired launch of social media – report on usage and success to be submitted to communications and marketing				
5. Approval or sign-off				
Name: Service manager responsible for proposed site/service	Date:			
Name: Communications and Marketing	Date:			
Name: Assistant Director	Date:			

Please return to:

Head of Communications and Marketing

Direct and Digital Marketing Manager