



NBAOT Guidelines for the Use of Social Media

Members of the New Brunswick Association of Occupational Therapists are accountable for the practice they provide to the public. The aim of these guidelines is to assist the occupational therapist in the decision-making process for the use of social media both in professional and personal use, suggesting strategies considered good practice to minimize risk. They are intended to support, not replace, the exercise of professional judgment by therapists in particular situations. The use of these strategies will ensure protection of the public and minimize professional liability.

Background and Definition

Social media refers to technologies, platforms and practices that enable people to create, use and share content, opinions, information, experiences and perspectives, build relationships and promote discussion. Social media's content and interaction are user-generated. Examples include but are not limited to: Facebook, Twitter, LinkedIn, Drop Box, Pinterest, YouTube, Instagram, Snapchat, blogs, and message boards. For this document's purpose, email is not considered social media; members are directed to the NBAOT Practice Guidelines: Records Keeping for more information about the use of email in practice.

With the increased use of social media for personal and professional purposes, there have been increasing concerns and incidences of professional misconduct. Occupational therapists are expected to maintain reasonable conduct at all times. They may be held responsible for comments or behaviours outside the work environment as they may reflect poorly on the profession as a whole. Any use of social media must abide by the NBAOT code of ethics. Occupational therapists are also required to follow employer policies where they exist.

Benefits and Risks

Social media may afford certain benefits to occupational therapists. It can foster collegial relationships and professional consultation, dissemination of information, allow for continuing education and professional development and coordination and improvement of client care. However, social media also imposes possible risk to the professional and the public. Risk may include:

- Crossing of professional boundaries: therapeutic relationships should be the same online as they are in person

- Conflict of interest: clients or therapists posting testimonials on a social media page may be viewed as support for a particular product or company; this may be deemed as a potential conflict of interest.
- Breach of confidentiality and privacy: the sharing of client identifiable information constitutes a breach under the Personal Health Information Privacy and Access Act (PHIPAA) of New Brunswick. Identifying information is defined in PHIPAA as “information that identifies an individual or for which it is reasonably foreseeable in the circumstances that it could be utilized, either alone or with other information, to identify an individual.” Under this definition, a professional posting on a professional social media page may constitute a breach if it identifies the individual as a client.
- Trust and confidence in the professional or the profession as a whole: unprofessional behaviour that can be attributed to the member reflects poorly on the Association and the profession as a whole. Occupational therapists are expected to maintain reasonable conduct at all times in their professional and private lives. Use of social media that does not reflect this may be deemed as professional misconduct. Whenever a member uses a professional designation online, they are viewed as acting in a professional capacity.

Risk Mitigation Strategies

Listed below are strategies considered good practice for occupational therapists to minimize risk:

Professional boundaries

- Keep your personal and professional social media pages separate to clearly establish and maintain professional boundaries.
- Do not “friend” or accept “friend” requests from clients on your personal social media accounts.
- As with face-to-face relationships, set and communicate these boundaries with clients online.
- Use social media’s privacy settings to restrict access and use on personal accounts.

Conflict of Interest

- Do not post or like third-party suppliers, vendors or other private companies’ pages; do not post information from these companies on your professional page.
- Advise clients not to post testimonials before engaging them on social media; if a client posts a testimonial, review with that client and request that it be removed.
- All communications must be factual, accurate and transparent.

Confidentiality and Privacy

- Obtain informed expressed consent before engaging clients on social media; consent must outline the risk and benefits and foreseeable consequences.

- Do not post personal health information or identifiable information on social media.
- Do not use testimonials as they identify a client.
- Assume information posted is public and accessible.
- Communicate face-to-face or voice-to-voice with clients where possible; consider taking the conversation offline after three online interactions.
- Read all privacy and confidentiality agreements with social media sites prior to agreeing to terms of use.

Trust and Confidence

- Whether on a personal or private page, use the principle “pause before you post, check before you click.” Before you save, send or post a photo or comment, take a brief moment to review the content and only post what you are willing to make public.
- Use privacy settings to restrict access and use.
- Review what is out there frequently; complete an online search for yourself and review the content online.
- Assume information posted is accessible to the public.
- Maintain a risk file: keep records of events of potential risk and steps taken for a paper trail.
- Avoid plagiarism when posting content.

CONCLUSION

By following the guidelines within this document, occupational therapists take steps to protect the public while reducing risk of professional misconduct for themselves.

REFERENCES

Adapted with permission and thanks from the COTNS Practice Guideline: Social Media, College of Occupational Therapists of Nova Scotia, September, 2017

NBAOT Code of Ethics, April 2014.

Personal Health Information Privacy and Access Act (PHIPAA), S.N.B. 2009