

# Use of Social Media in Practice

Over the past two decades, social media has transformed the way that individuals communicate, both personally and professionally. It provides a platform to share thoughts and opinions and to market services in way that was not possible before the digital age. From targeted promotion and education to the streamlining of administrative tasks, many regulated health professionals<sup>[1]</sup> have taken advantage of the benefits that social media can provide to their practice. However, as with any technology, **regulated health professionals must be cognizant that their misuse of social media can impact upon their ability to practice.**

Provincial regulators in Canada are tasked with the protection of the public. This jurisdiction tends to be interpreted broadly by regulators and includes jurisdiction over actions of members in their private lives that may reflect poorly on the profession. In light of this, regulated health professionals must exercise caution when using social media. Any time your use of social media engages the standards of the profession, the broader public interest, or the reputation of the profession in the eyes of the public, a professional regulator's authority to intervene may be engaged.

To that end, many provincial regulators have published practice advice for their members regarding expectations for the use of social media; the main message being that **members are expected to uphold the standards of the profession even when they are using social media.** Where a regulator has not published advice on the use of social media, members of the profession should nevertheless assume that the professional

standards of conduct applicable to them continue to apply to their conduct on social media.

While the use of social media by health care professionals varies, there are two primary uses that attract scrutiny by provincial regulators:

- ✓ The use of social media **as a practice tool**; and
- ✓ The use of social media **to express yourself.**

While there is some overlap between the two uses, each is addressed separately below.

## SOCIAL MEDIA AS A PRACTICE TOOL

Social media can be a valuable tool in your practice. It is a low-cost way to promote the services that you offer and is an efficient way of communicating with current clients. However, if you are not cognizant of the risks and do not take steps to mitigate the risks of using social media, you may find yourself facing a complaint investigation.

Many provincial regulators and professional associations have published guidelines and directives on the use of social media in practice. If you are planning to use social media in your practice, **please ensure you have reviewed the applicable rules and guidelines in your jurisdiction.** For example, the Ontario Psychological Association has published general guidelines to keep in mind when posting on social media on a professional basis, including:

- Maintain the dignity of the profession;
- Be respectful of human rights and human diversity;
- Advocate for the mental health of all;
- Be respectful of other professions;
- Use appropriate and professional language;

[1] This article is addressed to health care professionals who are not medical professionals regulated by medical Colleges in Canada, including the College of Physicians and Surgeons of Ontario.



- Use careful judgment in terms of the relevance and appropriateness of posts;
- Avoid controversy; and
- Link to relevant materials that meet these standards.[2]

**When using social media in your practice, please consider the following:**

- Are your communications professional?
- Are you protecting privacy and confidentiality?
- Are you providing accurate information?

If the answer is “no” to any of these questions, then you should refrain from posting.

Regulated health professionals have found themselves facing complaint investigations in the following situations (this list is not exhaustive):

- Discussing patient-specific information in a public forum, including responding to client reviews;<sup>[3]</sup>
- Using social media to provide “general advice” that is misinterpreted as client-specific advice;
- Providing opinion or advice that is contrary to the prevailing standard within the profession;
- Failing to keep your social media profile current (i.e. to ensure consistency with what is located on your regulator’s public register);
- False advertising;
- Communicating with clients that become too familiar or friendly (boundaries); and
- Using your account for both personal and professional matters.

**You can mitigate against the risk of a complaint by limiting your use of social**

**media for general business tasks** (such as the promotion of your services, etc.). If you are going to communicate with clients through social media, then ensure you have consent to do so, that you maintain confidentiality and that it is in a form that can easily be transferred to the client chart.

**EXPRESSING YOURSELF THROUGH SOCIAL MEDIA**

Social media provides you with a platform to express yourself. However, when you do so while also promoting yourself as a regulated health care professional, you subject yourself to the scrutiny of your regulator. **While regulators recognize the right of health care professionals to express personal views, they consistently stress that this right is not absolute.** The expectation is that professionals will avoid making statements that could undermine public confidence in the profession, spread misinformation, or otherwise contravene ethical obligations.

Discipline Tribunals and the Courts have consistently held that while members do not lose their right to express themselves, being a regulated health care professional also means that they take on obligations and must abide by the rules of their regulatory body that may limit their ability to express themselves.

Simply identifying yourself as a regulated health care professional on the home page of your social media profile or even providing a link to a website associated with your practice is sufficient for a regulator to assume jurisdiction over any comments that you make on that account.

It generally makes no difference if your account is private or public: if the statement(s) come to the attention of your regulator, it will typically investigate.



[2] Guidelines for Best Practices in the Use of Social Media, Ontario Psychological Association, 2015. See also Practice Guidelines: Use of Technology, College of Alberta Psychologists, 2024.

[3] It is important to note that simply omitting a client’s name does not effectively anonymize client’s personal health information. Therefore, if referring to specific case examples in social posts, be wary of including too many identifying details that may facilitate the identification of a client.

The following case examples are instructive of **the types of behaviour on social media regulators deem problematic**:

- Making a series of online posts on a provincial association listserv and publishing an article in which the member expressed his concerns (and criticisms) regarding a former employee's theft of funds from the association, the association's investigation into the theft, and the management of the association.[4]
- Creating and publishing two sexually themed videos to the member's public TikTok account, on which he identified himself as a regulated health professional.[5]
- Sending emails and authoring public Facebook posts that made unprofessional and far-reaching allegations against the health authority that employed him, senior management, and some medical staff. [6]
- Posting online statements that commented on various topics of social and political interest including transgender questions, racism, overpopulation, and the response to COVID-19.[7]
- Taking photographs of individuals without their knowledge or consent and posting them to a public Facebook page and writing defamatory captions under the photos (the conduct had occurred while the member was off-duty and was not related to the member's profession). [8]
- Encouraging a minor patient to take a photo with the member while he was treating her and post it to Snapchat.[9]
- Making various posts on social media expressing intolerant personal beliefs,

same sex relationships, and more.[10]

- Posted personal health information about a patient to a publicly accessible internet page designed to raise money for the patient.[11]
- Taking videos of a patient and photos of a patient's feces and then sharing them, without the patients consent, with coworkers through Snapchat.[12]
- Creating and publishing a series of TikTok videos making negative comments about a friend.[13]
- In the context of the COVID pandemic, making statements that challenged the advice and recommendations from health care authorities and the government.[14] [15] [16]

The easiest way for you to reduce the risk of running into issues with your professional regulator is to **keep your personal and professional social media profiles separate**. If you like to express your opinion, do so on your own personal social media account, with no mention of the fact that you are a regulated health care professional. While doing so may not eliminate the risk of a complaint, it makes it much easier for you to advance a defence that you were expressing your opinion in your personal capacity.

Finally, think before you post, even when you are not on duty. **Taking a moment to consider the possible consequences of posting to social media** may save you from having to navigate an onerous and time-consuming investigation by your regulator.

*This article was prepared and written by Andrew McKenna, Wudassie Tamrat and Athyna Wolf of Gowling WLG in partnership with BMS Canada Risk Services.*

[4] *Svec v Kasperski*, 2022 CanLII 61407 (Ont).

[5] *Chaban v Royal College of Dental Surgeons of Ontario*, 2024 ONSC 1075

[6] *Ontario (College of Physicians and Surgeons of Ontario) v Waddell*, 2020 ONCPSD 9.

[7] *Peterson v College of Psychologists of Ontario*, 2023 ONSC 4685.

[8] *Ontario College of Teachers v Kaprusiak*, 2022 ONOCT 28.

[9] *Royal College of Dental Surgeons of Ontario v Ghandour*, 2022 CanLII 138544 (ON RCDSD).

[10] *Ontario College of Teachers v Hall*, 2022 ONOCT 118.

[11] *College of Nurses of Ontario v Kaufman*, 2012 CanLII 99767 (Ont).

[12] *College of Nurses of Ontario v Proulx*, 2019 CanLII 103283 (Ont).

[13] *College of Alberta Psychologists and Campbell*, (2024).

[14] *JW v BJH*, 2017 CanLII 50748 (Ont).

[15] *Pitter v. College of Nurses of Ontario and Alviano v. College of Nurses of Ontario*, 2022 ONSC 5513 (CanLII)

[16] *College of Physicians and Surgeons of Ontario v Trozzi*, 2023 ONPSDT 22.

