

 Council on Licensure,  
Enforcement and Regulation



2012 Annual Educational Conference - September 6-8  
**San Francisco, California**

**Social Media  
Pre-conference  
Workshop**

Leanne Worsfold, iComp Consulting

Presenters: **Barbara Worth,**  
College of Occupational Therapists of Ont.

**Carol Bock,**  
College of Audiologists and Speech-Language  
Pathologists of Ontario

*Promoting Regulatory Excellence*

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**Agenda**

- Introduction to Social Media
- Literature Review: regulating professional behaviours
- Social media and the regulatory role
- Usages survey results - COTO
- Social media collaborative education initiative
- Usage survey results - CASLPO

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**What is Social Media**

- a broad term used to define internet-based applications that help individuals, like-minded groups, micro-communities and the masses communicate and connect.



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**Audience Survey**

What social media platforms do you use for personal use?

- A. I do not use social media
- B. facebook/twitter/LinkedIn
- C. Google +/drop-box
- D. YouTube/Podcast/Webinars
- E. Skype / ooVoo

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**Audience Survey**

Does your organization have a social media policy, guideline or practice standard for members.

A. Yes  
B. No  
C. NA

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**Audience Survey**

Has your organization received a complaint against a member regarding social media?

A. Yes  
B. No  
C. NA

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**Audience Survey**

Have your organization moved this complaint to a disciplinary process?

A. Yes  
B. No

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### Audience survey

Which is your main concern(s) with using social media for professional purposes?

- A. Upholding professional image
- B. Maintaining professional boundaries
- C. Regulating use of social media
- D. Ensuring confidentiality and privacy

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### Canadian Stats

- According to the Information and Privacy Commissioner of Ontario, Eighty -six (86%) of Canadian Internet users have a facebook profile.
- 261 Canadian hospitals represent 91 facebook pages, 57 twitter accounts, and 48 YouTube channels.

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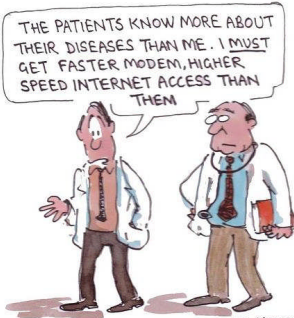
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### USA stats

- 82.3% of U.S. residents surveyed who used social media trusted the information at a level of 3 or greater (on a scale of 1 to 5, with 5 being the highest).
- 78.8% assigned a level of 3 or greater to the likelihood that social media would influence how they make their health care decisions.

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### USA stats

- 965 health systems, in the USA responsible for :
  - 3,289 social media listings
  - 486 YouTube channels
  - 777 Facebook pages
  - 714 Twitter accounts
  - 469 LinkedIn accounts
  - 723 foursquare accounts
  - 120 blogs

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### UK Stats

- Almost two thirds (65%) of the UK online population have used facebook within the last month
- YouTube - 50% of all UK internet users using the site within the last month
- Twitter (23%), Windows Live (14%), LinkedIn (13%), Google + (12%) and

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### Practice Examples in healthcare

- Healthcare organizations use social media to increase their capacity to reach patients and families.
- Clinical case-studies promote the development of peer-to-peer communalities and reflection of practice.



16

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### Marketing tool

- As of March 2011, the American Cancer Society had more than 228,000 'likes' on its facebook page.
- The Centers for Disease Control and Prevention had 82,000 'likes'.
- the American Diabetes Association had more than 72,000 'likes'.

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"She never clicks 'like' when I post something on Facebook!"

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### Practice Examples in healthcare

- Educator /research role use platforms to disseminate educational information and surveys to patient, client and colleagues.
- Twitter was used to answer questions posed during a “live” surgery video-feed.

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### Practice Examples

- “Using YouTube, the Nebraska Medical Center (NMC) shared the experience of a patient who had surgery for a rare carcinoid cancer. This social media experiment generated many requests for the surgery, prompting NMC to open a monthly clinic for the condition”.

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### Literature review

- The major concerns focus on professional behaviours; and
- Lack of understanding to maintain a separate professional and personal image.



21

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### Literature review

- In a 2010 study published in the Journal of American Medical Association (JAMA) the researchers analyzed 5156 tweets from 27 self-identified physicians who had 500 or more followers between May 1 and May 31, 2010.

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### Literature review

- Of these tweets, one hundred forty-four tweets (3%) were categorized as unprofessional
- Thirty-eight tweets (0.7%) presented potential patient privacy violations
- 33 (0.6%) contained profanity
- 14 (0.3%) included sexually explicit materials

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### Literature review

- Of the 27 users (10%) in the sample responsible for the potential privacy violations
- 92% (25 of the 27) were identifiable by full listed name on the profile, profile photograph, or full listed name on a linked web site

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### Literature review

- 12 possible conflicts of interest, such as making unsupported claims about a product they were selling on their web site or repeatedly promoting specific health products
- 10 statements about medical therapies that were counter to existing medical knowledge or guidelines.

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### Literature Review: Regulatory Themes

- Upholding professional image
- Maintaining professional boundaries
- Confidentiality and privacy issues
- Documentation and record keeping
- Conflict of interest
- Advertizing



27

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### Literature Search- Regulatory Themes

- Change in communication skills and style
- Ensuring client / patient centred-care



28

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### Practice guidelines

- Use professional, clear and audience appropriate terminology.
- Face-to-face interaction or voice-to-voice interaction is superior in most circumstances.
- Customize your messages.
- Recognize and avoid conflict of interest.

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### Practice Guidelines

- Know your social media platform.
- Use "Professional filters".
- Err on the side of caution.
- Monitor social media and internet presents.
- Consideration when broadcasting your professional designation.
- Maintain professional communications.

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### American Medical Association

“When physicians see content posted by colleagues that appears unprofessional they have a responsibility to bring that content to the attention of the individual, so that he or she can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the physician should report the matter to appropriate authorities”.

31

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### Resources

- *Using Social Media to improve healthcare quality. A guide to current practice and future promise:* June 11, 2011 Change Foundation
- *Physicians on Twitter.* Katherine C. Chretien, Justin Azar, Terry Kind. JAMA February 9, 2011 – Vol 305, No. 6 (reprinted).

32

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### Resources

- *Social Media in Canadian Healthcare -* SMICH.ca , Ann Fuller, Director of Communications for the Children’s Hospital of Eastern Ontario.
- *Pharmacy Students’ Facebook Activity and Opinions Regarding Accountability and E-Professionalism,* American Journal of Pharmaceutical Education 2009; 73 (6) Article 105; J Cain, D. Scott, P. Akers

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[www.icompconsulting.com](http://www.icompconsulting.com)

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34

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**Social Media  
One College's  
Experience**

Presenters: Barb Worth, *Registrar,  
College of Occupational Therapists of  
Ontario*

September 6, 2012

*Promoting Regulatory Excellence*

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### Presentation Outline

- Social media use by healthcare professionals
- Benefits and risks of healthcare professionals using social media
- The Process for formulating Guidelines including survey results
- Recommended Guidelines for OT practice

37

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### Social Media use by healthcare professionals is all over the news...

- In 2010 4 nursing students expelled from university for posing with human placenta on facebook
- In 2008 a group of dental nurses were reprimanded by their bosses for establishing a social networking group called "I'm a dental nurse and I hate patients because..."  
(Fox News, 2011; British Broadcasting Corporation, 2011; [British Broadcasting Corporation, 2009](#))

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### Social Media use by healthcare professionals is all over the news...

- In 2009 a group of doctors and nurses were suspended for posting pictures of themselves lying down in unusual places around a hospital.  
(Fox News, 2011; British Broadcasting Corporation, 2011; [British Broadcasting Corporation, 2009](#))

39

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**Social Media use by healthcare professionals is all over the news...**

Facebook Flirts:

- *A female GP sought advice from the Medical Defence Union recently after being asked out by a 30 year old man she treated for whiplash after a car accident*
- *Following the consultation, he sent her favourite flowers, lilies*
- *He then turned up with a travel book he thought she would like*

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**Social Media use by healthcare professionals is all over the news...**

- *It became apparent that he was finding this information from her facebook site*
- *She was advised to improve her security settings and told to let other GPs at the practice treat the patient in the future*

•British Broadcasting Corporation 2009

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**Social Media use by healthcare professionals is all over the news...**

- *More than 40% of nurses say a colleague has inappropriately posted details of patients or colleagues on social media sites.*

(Nursing Times, 2011)

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**Social Media use by healthcare professionals is also on TV...**

- Two physicians on “House” stumped by a particularly difficult case ask for help on a blog
- They receive a wide range of opinions, including one that resolves the case
- The physicians do not disclose to the master clinician, Dr. House, the source of their brilliant diagnosis.  
(American Medical News, 2010)

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**Social Media use by healthcare professionals is all over the news...**



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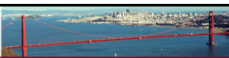
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**Benefits of Social Media use by Healthcare Professionals**

- Increased opportunities for professional consultation
- Improved continuing clinical education and professional development
- Improved client care

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### Risks of Social Media use by Healthcare Professionals

- Privacy and confidentiality breaches
- Crossing professional boundaries
- Negative publicity
- Reputational damage
- Reduced trust and confidence in the profession

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### What does this have to do with public protection?

- College protects the public interest by setting standards for practice and having programs in place so that OTs practice safely and effectively (College of Occupational Therapists of Ontario, 2011)
- College needs to provide guidance for OTs for social media because of the high risk to the public

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### Process of Formulating Guidelines for Social Media in OT Practice

The environmental scan revealed:

- Specific guidelines have not yet been published by any regulatory organization for OTs in Canada
- Other professional Canadian regulatory organizations have released official guidelines
- Internationally, OT regulatory organizations and Associations have released official guidelines

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### Process of Formulating Guidelines for Social Media in OT Practice

The purpose of Survey:

- To understand the opinions of Ontario OTs in their personal and professional use of social media
- What are OTs beliefs and attitudes on social media
- What is their current usage personally and professionally
- To obtain information to inform development of guidelines

49

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### Survey of Ontario Occupational Therapists

- An electronic survey was sent to all 4,926 registrants on their use of social media
- Skip logic option was used to advance respondents to specific questions after answering "Do you use social media?"
- Survey was conducted to obtain demographics, use of social media, privacy measures taken and concerns with using social media
- 892 completed the survey (18%)

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### Survey Results

- 61% of respondents used social media more for personal reasons as opposed to professional use
- Majority of respondents were concerned on protecting personal privacy
- Most felt confident in ability to navigate privacy settings
- Some respondents felt unsure or had never used privacy settings

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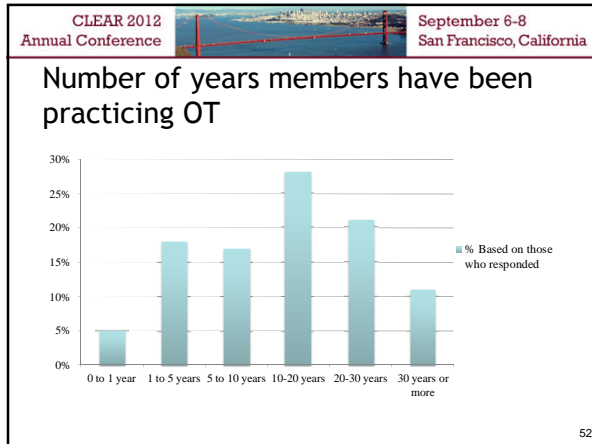
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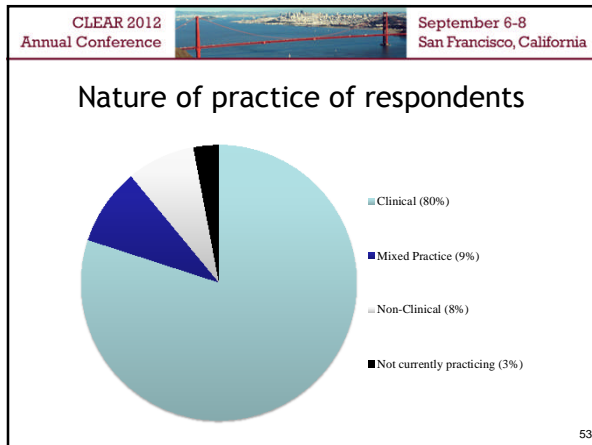
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### Primary practice setting of respondents

Setting	# of respondents	% Based on those who responded
Community (e.g. homecare, school setting, family health team, auto sector)	378	43%
Inpatient	229	26%
Outpatient clinics	141	16%
Other	52	6%
Educator role (e.g. professor, university faculty member)	29	3%
Consulting	23	3%
Association/Government/Regulatory Organization/Non Government Organization	20	2%
Health Related Business Industry	10	1%
Skipped question	10	

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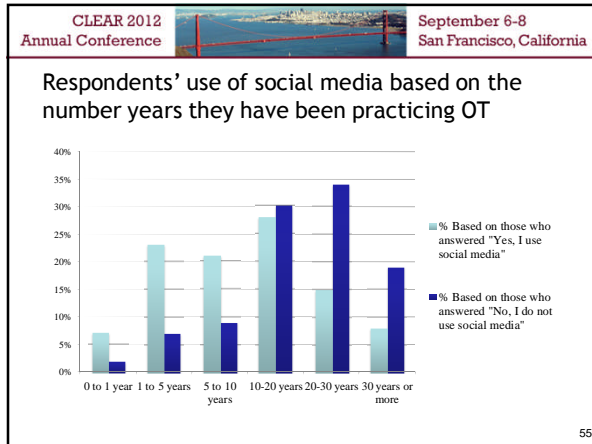
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### Reasons for not using social media

Reason	# of Respondents	% Based on those who responded
Concerned about protecting privacy	173	64%
No interest in social media	171	63%
Concerned about adequately separating their personal and professional lives	97	36%
No knowledge or ability to adequately secure their social media site	95	35%
Concerned with clients being able to contact them	70	26%
Not a 'computer' person	64	24%
Concerned that clients who contact them will inadvertently compromise their own confidentiality	59	22%
Concerned that clients will expect them to be available outside normal work hours	55	20%

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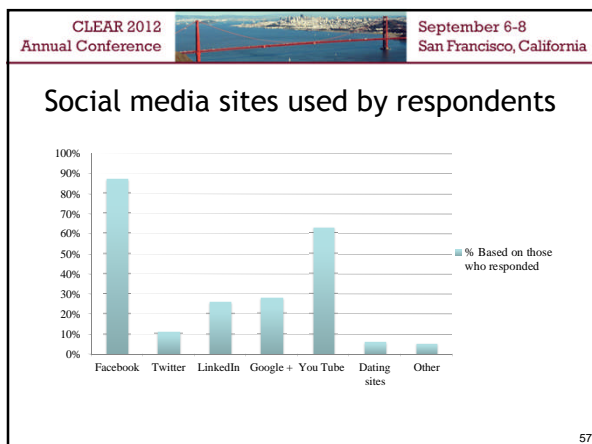
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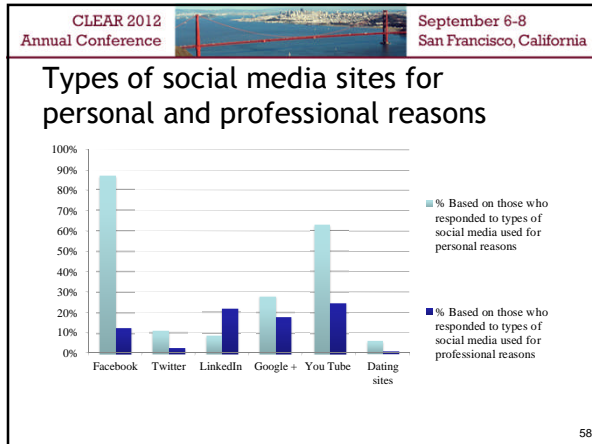
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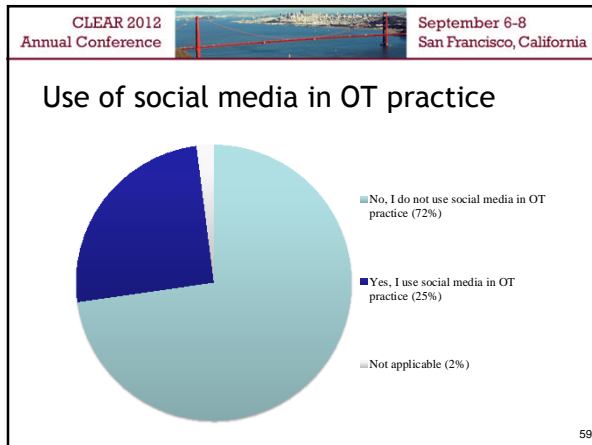
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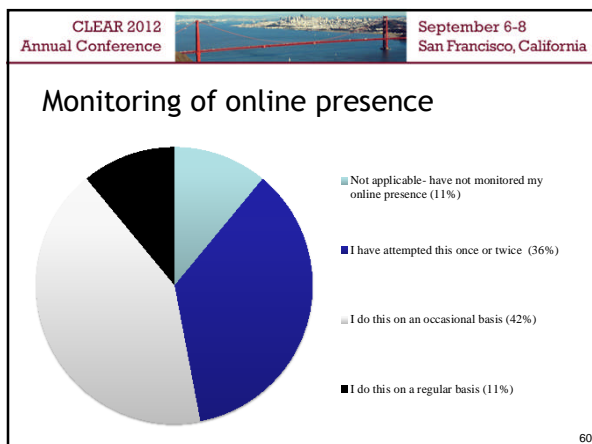
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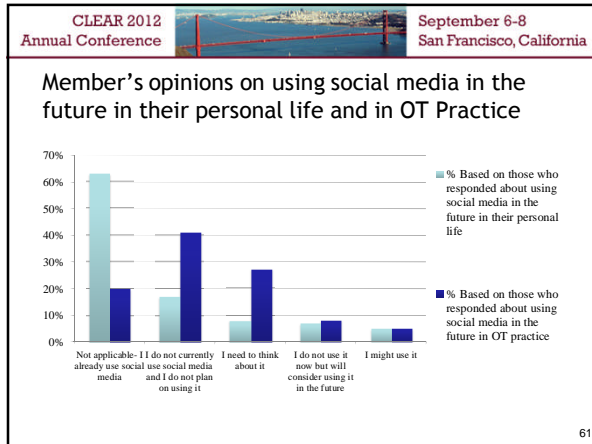
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### Recommendations from the Survey

- All OTs need to be informed on:
  - The risks and benefits to using social media
  - How to protect personal privacy on social media
  - How to use social media in a safe and professional manner

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### The Recommended Guidelines

1. Professionalism
2. Privacy and Confidentiality
3. Risk Management
4. Professional Boundaries
5. Advertising

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**Highlights from the Recommended Guidelines**

1. Professionalism:

- Conduct in accordance with the standards and principles of the profession in *all* forms of communication

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**Highlights from the Recommended Guidelines**

2. Privacy and Confidentiality:

- Ensure social media postings do not reveal personal health information
- Potential for breaching confidentiality by conveying information via an anecdote  
(Cain, 2011; College of Physicians and Surgeons of British Columbia, 2010; Mostaghimi & Crotty, 2011; University of Toronto, 2010)
- Potential for breaching privacy on social media groups

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**Highlights from the Recommended Guidelines**

3. Risk Management:

- Level of risk should be re-assessed on a regular basis
  - e.g. Facebook's updates on privacy policy and settings
- Recognize the potential for all communication on social media sites to be public and permanent

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### Highlights from the Recommended Guidelines

4. Professional Boundaries

- Avoid dual relationships with clients
- Refrain from accepting/initiating invitations to be online friends.

(College of Physicians and Surgeons of British Columbia, 2010)

5. Advertising:

- Social media pages meant for advertising where the public can post freely are a risk
- e.g. Client posts and testimonials

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### Conclusion

- Guidelines should guide OTs to continue to participate in social media while minimizing risk to the public
- Guidelines should not be too restrictive as to inhibit the growth of OT practice with evolving technology, and the potential benefits for clients

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70

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71

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### Social Media



72

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**QUESTIONS & ANSWERS**

73

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Ordre des ergothérapeutes de l'Ontario

74

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 Council on Licensure,  
Enforcement and Regulation



2012 Annual Educational Conference - September 6-8  
**San Francisco, California**

**Social Media: a collaborative project**

Presenters: Carol Bock, College of Audiologists and Speech-Language Pathologists of Ontario

*Promoting Regulatory Excellence*

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**Origins of the Project**

**Alignment with our Regulatory Mandate**  
Objects of the College in the *Regulated Health Professions Act, 1991* (RHPA) :

- To promote inter-professional collaboration with other health profession colleges; and

77

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**Origins of the Project**

**Alignment with our Regulatory Mandate**  
Objects of the College in the *Regulated Health Professions Act, 1991* (RHPA) :

- To develop, establish, and maintain standards and programs to promote the ability of members to respond to changes in practice environments, advances in technology and other emerging issues.

78

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### Origins of the Project

- Born in the spirit of collaboration
- Desire to develop an e-Learning module
- Did not have a pre-determined topic

79

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### Context

- Needed to meet everyone's current concerns
- Wanted to harness the power of single message from Colleges as a whole has
- Needed to be "high concept"
- An educational tool seemed more appropriate, as opposed to a standard or guide

80

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### Process: A Leader

Carole Hamp BA, RRT  
Manager of Quality Assurance & Member Relations  
College of Respiratory Therapists of Ontario

Began in early spring 2011

81

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### Process

- College of Audiologists and Speech Language Pathologists of Ontario
- College of Dietitians of Ontario
- College of Massage Therapist of Ontario
- College of Medical Laboratory Technologists of Ontario
- College of Occupational Therapist of Ontario
- College of Respiratory Therapists of Ontario
- Ontario College of Pharmacists

82

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### Process: Collaborative

- Finding a vendor
- Establishing the goals and content
- Deciding on dates and timelines
- Clear understanding, through a MOU and a “charter” for the project

83

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### Process: Selecting a Topic

- Open discussion
- Distilled to a select few (10)
- Democratic process
- Project “Social Media eLearning Module” was born

84

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**Social Media: Relevance**

“Privacy is dead, and social media holds the smoking gun.”  
(Peter Cashmore)

Reflects the beliefs of many younger people

85

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**Social Media: Relevance**

Considering the nature of social media:  
“As social media, or whatever you want to label it, becomes more prevalent, there will be blunders. We’re in experimental mode right now.”  
(Steve Hall)

86

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**Social Media: Relevance**

- All Colleges have been receiving enquiries about social media
- We were also seeing a demographic divide
- Older members do not understand technology
- Younger members quickly embrace the technology

87

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### Social Media: Relevance

Through these discussions, common conclusions were drawn:

- Social media is a hot topic
- There are significant privacy and professional boundaries issues
- Members need to be educated
- Colleges also needed a method to provide remediation (SCERPs)

88

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### Member's Concerns

- Clearly, the Colleges had common concerns but what did the members think about social media?
- Several of the Colleges were able to quickly tap into the members thoughts through SurveyMonkey

89

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### CASLPO Survey Results: Usefulness?

The survey results revealed that over 75% of members felt social media was somewhat beneficial to extremely beneficial to the patients/clients.

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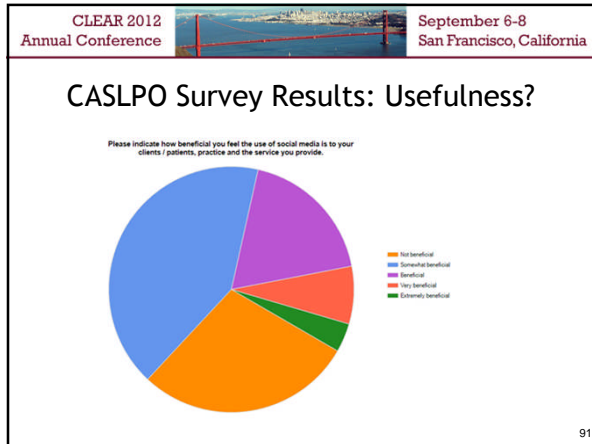
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### CASLPO Survey Results: Products

Depending on the particular type of social medium, the degree of professional use varied but the top three mediums used for professional purposes were Youtube, LinkedIn and Google (in that order).

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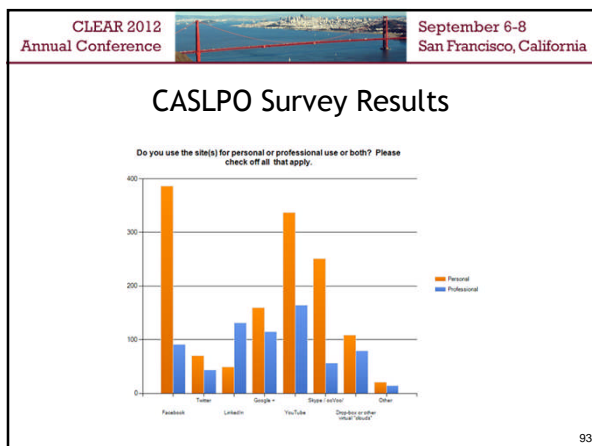
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### CASLPO Survey Results: Purposes

- common professional purposes were not surprising: seeking information, professional development, job searching and networking
- We also noticed many selected “other” for the professional use

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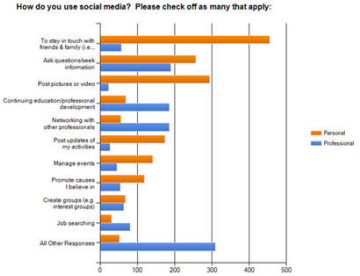
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### CASLPO Survey Results: Purpose

How do you use social media? Please check off as many that apply:



Purpose	Personal	Professional
To stay in touch with friends & family (n=)	~450	~10
Ask questions/seek information	~250	~10
Post pictures or videos	~150	~10
Continuing education/professional development	~100	~150
Networking with other professionals	~100	~150
Post updates of my activities	~100	~10
Manage events	~100	~10
Promote causes I believe in	~100	~10
Create groups (e.g. interest groups)	~100	~10
Job searching	~100	~10
All Other Responses	~100	~300

95

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### CASLPO Survey Results: Purpose

- we looked further and found that the “other” included use of cloud products such as Dropbox, Google Docs, for storing agendas, files, assessment and treatment materials, etc.
- particularly useful for those who are not located in one space or use a variety of computers

96

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### CASLPO Survey Results: Purpose

In addition, frequently mentioned in the "other" category was use of Youtube for segments to view with patients/clients that are related to the therapeutic goals (e.g. use of augmentative and alternative communication).

97

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### CASLPO Survey Results

The top concerns were:

- confidentiality and privacy
- professional boundaries
- professional image
- request for College guidelines

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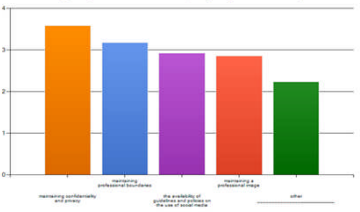
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### CASLPO Survey Results

So we were on the right track

Indicate your top concerns with using social media professionally. List in order from 1-5 (1 being the topic that is of least concern; 5 being the topic of most concern)



Concern	Rank (1-5)
Maintaining confidentiality and privacy	3.5
Professional boundaries	3.2
The ability of patients and clients to understand and use social media	2.8
Maintaining a professional image	2.5
Other	2.2

99

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### CASLPO Survey Results

For Speech-Language Pathologists and Audiologists

- High response rate (short timeframe)
- 20%
- Over 84% use social media in some form for some purpose

100

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### Questions from the professionals

- Should I report a member when I see unprofessional behaviours on a social networking site?
- Can I use facebook for professional advertizing and services?
- Can my name and contact information be listed as a professional contact on a third party site?

101

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### Questions from the professionals

- Can my name and social networking accounts be linked to a third party who is selling products?
- Can I accept a patient / client as a "friend"?
- How do I manage declining a patient / client as a "friend"?

102

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### Questions from the professionals

- Can I use twitter or other services to schedule and cancel patient appointments?
- Can I use video networking platforms (Skype ooVo) for patient interactions?

103

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### Social Media Module: Goals

- Development of a Social Media e-learning module grounded in current literature and relevant to regulated health professionals' practice, utilized by partner Colleges as education resource
- Demonstrate and promote inter-professional collaboration amongst the Colleges.

104

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### Social Media: Goals

Social media is constantly changing, therefore:

- Apply the existing principles to the medium
- Avoid specific practice standards for the use of social media (not the role of this collaborative project)

105

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### Social Media: Content

Focus of content had to then be:

- ethical standards
- principles of privacy and confidentiality
- professional boundaries
- Communication
- Upholding professional image and values
- Conflict of interest/advertising

106

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### Social Media Module: Content

- Define social media
- Role of the College
- Maintaining professional behaviours
- Managing Social Media Use in Practice
- Facts, Figures and Tidbits

107

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### Social Media Module: Format

- Basic information about social media
- Link the related practice standards
- Practice scenarios
- Reflection exercises
- Frequently asked questions
- References and glossary

108

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**Parting Thoughts**

“Don’t say anything online that you wouldn’t want plastered on a billboard with your face on it.” - **Erin Bury, Sprouter community manager**

109

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**and...**

“I hear YouTube, Twitter and Facebook are merging to form a super Social Media site - YouTwitFace.”

**Conan O’Brien, The Tonight Show (June 2009)**

110

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**And finally....**

For those who aren’t embracing social media, a “primer”:

“LinkedIn is for people you know. Facebook is for people you used to know. Twitter is for people you want to know.”

**Author Unknown - Via socialmediatoday.com & Via Jay Baer, Convince & Convert**

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112		

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