

pause  
before you  
post

A Social Media Guide for Physical Therapists







# Social media is integral to today's society

Social media has both personal and professional uses. Personally we connect with friends and family, share photos and videos, and connect with like-minded online communities to share ideas and give/seek support. Organizations, businesses, and campaigns use social media professionally to promote products, services, and ideas. Social media can be understood as software applications (web-based and mobile) that allow for creation, engagement, and sharing of new or existing content, through messaging or video chat, texting, blogging, and other social media platforms<sup>1,2</sup>. Today most of us are familiar with Facebook, Twitter, Instagram, and LinkedIn; there are many other applications, and new platforms appear all the time.

As registered physical therapists, we are bound by our Code of Ethical Conduct and Values<sup>3</sup> and our Standards of Practice.<sup>4</sup> This commitment requires us to always be conscious of our professional presence at work, at home, and in public. Being active on social media introduces one more environment where we must be mindful of our professionalism. While in most social-media-related situations the “correct” way forward will be obvious, sometimes situations arise where it’s more difficult to know what is appropriate and what is not.

This guide presents a series of scenarios which might arise personally or professionally for physical therapists in relation to their use of social media. While there are many benefits to using social media, there are also risks and challenges, and it’s important to understand these. We hope these scenarios will make you stop and reflect about whether you are clear about professional boundaries, security of information, confidentiality (yours and that of others), and privacy (yours and that of others) when in the online world.

We encourage you to discuss these scenarios with your colleagues and to contact CPTBC’s Practice Advisor ([practicequestions@cptbc.org](mailto:practicequestions@cptbc.org)) if you have any questions, if you need clarification, or if you would like advice about a specific situation that has arisen.



College of Physical Therapists of BC  
November 2018





# social media scenarios

## Scenario

### 1

You are a sole charge physical therapist in a rural hospital and make a comment on a social media platform about an adverse outcome for one of your clients. You are careful not to name the client or the hospital. However, you mentioned the name of the hospital you are working at in a post last week. A cousin of the client searches the internet for the hospital's name to find its contact phone number. In the search results, the client's cousin finds your post mentioning the hospital. The cousin then sees the subsequent post regarding the adverse outcome and recognizes it is about her cousin.<sup>5</sup>

## Scenario

### 2

You are a community-based paediatric physical therapist and you contribute blogposts to a local newspaper's webpage. One day, you make reference to providing care to a client, and mention a wheelchair and the child's age. There was no specific information provided, but anyone who knew you, the client, or the family could identify who the post was about.

## Scenario

### 3

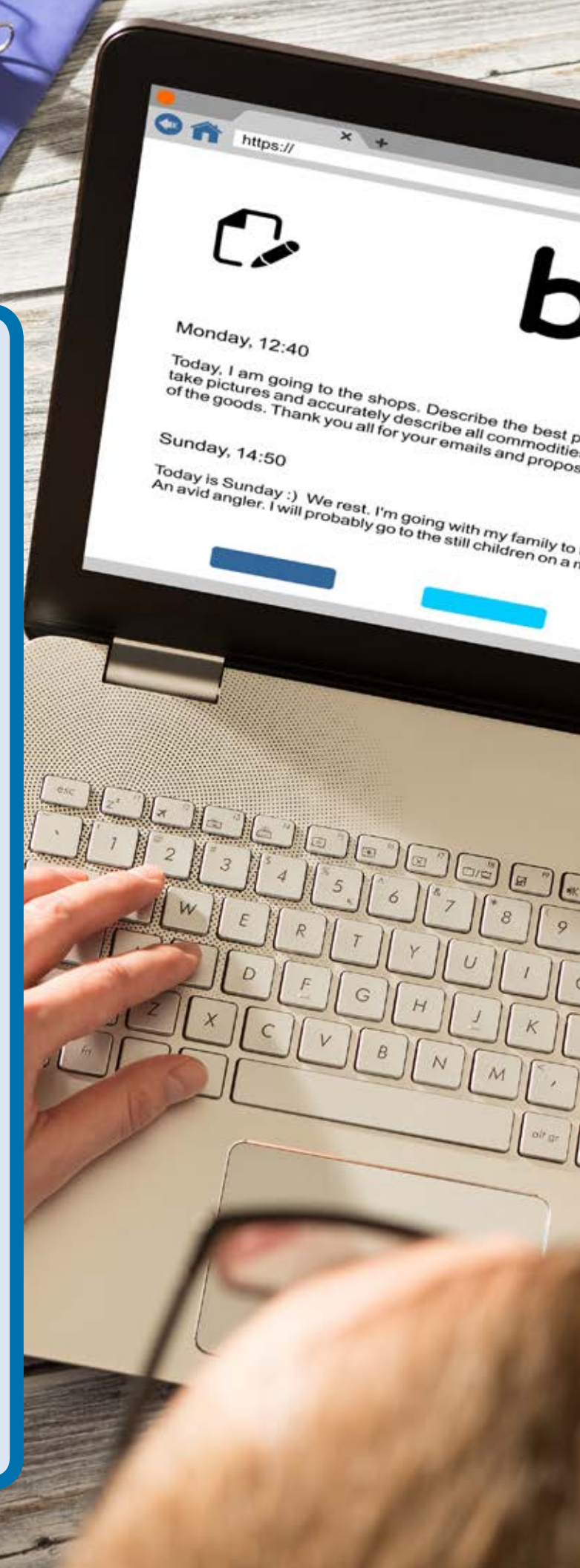
You are a physical therapy clinic owner. Your clinic has a website and an Instagram account. One of your clients is a 14-year-old elite athlete who has been attending physical therapy following a knee injury which could have prevented her from attending the upcoming Olympic games as a member of the Canadian gymnastics team. She has worked hard and made great progress. She and her parents give consent for you to post (without including her name) before-and-after pictures of her on the clinic's website and its Instagram feed to show the changes made over the three months of therapy. In the pictures she is wearing a lycra sports bra and lycra shorts.

## Answers

*These examples are breaches of privacy and confidentiality which are clearly unintentional.*

*Scenario 3 adds another layer for consideration as the client is a minor, her face is shown, and she is only partially clad. Even with parent consent, the decision to post may not be the appropriate one.*

*Remember the CPTBC Standards of Practice<sup>6</sup> require you to protect your clients' privacy and personal information at all times. Unintentional breaches occur in part due to a mistaken belief that it is acceptable to discuss or refer to clients if they are not specifically identified. However, as we can see from these examples, identification is possible in unexpected and unanticipated ways.*





## Scenario

### 4

You receive a friend request on a social media platform from someone whose name sounds very familiar, but they only have a photo of a dog as their profile picture. You accept the request. After looking through their profile page, you realize that it belongs to one of your former clients who has been re-referred and is on your waitlist. The client sends you a Facebook message to let you know that they need an appointment as soon as possible, and they would like some information about how to manage their injury until the first visit. They also comment about how much fun you and your family were having in the photos from your last vacation.<sup>7</sup>

## Answer

*This situation is all about professional boundaries. It's likely clear to you that this is an inappropriate connection between you and a client, but this example demonstrates how easily this can happen. Not only is the client asking work-related questions of you within the platform where others can see them (and your response), but also your own privacy (and that of your family) has been compromised. Think carefully about requests you receive! The CPTBC Standards of Practice<sup>8</sup> require you to end any therapeutic relationship with a client if professional boundaries cannot be maintained or re-established, by transferring care as required.*

## Scenario

### 5

You are a physical therapist working in a palliative care ward. One of your clients with whom you have developed a strong bond uses a Facebook page to keep friends and family updated on her health. You know she has been struggling with pain relief and one day she posts on her site about this challenge. To offer support, you respond to her post with a comment that you hope the new pain medication will help. The next day, you run into a colleague at the gym who has worked with this client in the past, and who no longer works at the hospital. He mentions that he saw your post and hopes that your client is feeling better on the new medication. You realize you've breached confidentiality and immediately remove your post and apologize to your client when you next see her.

## Answer

### True or False?

*"I've deleted my post or comment. It's no longer accessible."*

### FALSE

- *This content will always exist on a server that could be discoverable in a court of law. Even if the situation doesn't reach court, your content could have been seen and shared by others. Or a screen shot could have been taken and shared by other methods.*
- *As soon as you post or hit "send", you no longer control dissemination of, or access to, that content.*

## Scenario

### 6

You are scrolling through Facebook one evening and see a shared post from a friend which describes an innovative new toilet safety rail. You 'like' the post from your clinic's business Facebook account, and comment that this new equipment might be perfect for some of your clients. Two weeks later, you conduct a home visit to a long-term client and they are excited to show you the same safety rail installed in their bathroom. They comment that they purchased it based on the recommendation they saw from you on Facebook.

## Answer

*Before 'liking', posting, and/or commenting on social media, pause to consider what a client or the public might interpret from your actions. Would the general public consider this an endorsement from you? The CPTBC Practice Standards<sup>9</sup> state that you must not endorse products for financial gain. The Practice Standards of course allow you to make a specific recommendation for a particular product to a patient which is supported by clinical rationale. But before you click 'like', consider your motives for doing so, and the possible repercussions.*



LIKE

TWEET

FOLLOW

### Answer

Personal privacy (of clients, of employees and even of candidates) must be considered as described in the Personal Information Protection Act (PIPA) of British Columbia.<sup>10</sup>

There are also Canadian laws that govern privacy such as the Privacy Act<sup>11</sup> and the Personal Information Protection and Electronic Documents Act (PIPEDA).<sup>12</sup> The Office of the Information and Privacy Commissioner for BC (OIPCBC)<sup>13</sup> is clear that “any information collected about individuals is personal/employee personal information and is subject to privacy laws, whether or not the information is publicly available...or...subject to limited access as a result of privacy settings...”.<sup>14</sup> Before accessing anyone’s social media information, you must be sure that you can defend why you have chosen to do so.

It’s important to know how privacy laws in BC can limit collection of information, even publicly available information. Be sure to review the OIPCBC<sup>13</sup> document to understand more.

### Scenario

7

You are recruiting a new physical therapist, and interviews with the five shortlisted candidates have been scheduled. In preparation for the interviews, you take some time to review their social media profiles to learn more about them, their interests, and to get a sense of whether they might be a good fit for your team.

### Scenario

8

As a physical therapist in a long-term care home, you ask for verbal permission from a resident to use your cell phone to take his picture as he completes an activity. You want to use the picture in a newsletter that the care home publishes each month. That weekend, you travel to visit a friend and you accidentally leave your cell phone on the ferry.<sup>14</sup>

### Scenario

9

You are a physical therapy student on a clinical placement in the oncology ward of a paediatric hospital. You’ve been working with a three-year-old who is undergoing chemotherapy for leukemia, and understandably have become quite attached to this brave boy. Toward the end of your placement you ask the boy if you could take his picture and he is happy to be photographed. In the photo, his room number is visible in the background. You attach the picture to a text that you send in response to your partner when they ask how your day went.

When you are home that weekend, you describe how proud and excited you are to be a physical therapist and show your parents the boy’s picture as an example of the types of clients you’ve been working with.<sup>15</sup>

### Answers

Using personal cell phones to take pictures of clients (with or without consent – note that the three-year-old boy is not old enough to give consent in scenario 9) presents a risk to confidentiality. Such pictures are a part of the client record, as are therapy-related texts and emails with clients. Consider using a second phone for business purposes, or using the clinic or facility’s camera for pictures to be used for business or client-related purposes.

The Personal Information Protection Act (PIPA) of British Columbia<sup>10</sup> (section 34) requires that we make reasonable security arrangements to protect personal information from unauthorized access, use, or disclosure.

Additionally, the Standard of Practice: Privacy and Record Retention requires you to “Protect the privacy of personal information in all environments and in all formats of collection” and “prevents unauthorized access or use of a client’s personal information through the appropriate use of physical, technical, and electronic security mechanisms”. (e.g. passwords, encryption, locked offices/file cabinets) to protect the privacy of patient information.<sup>16</sup>

If you use devices (laptops, phones, iPads etc.), ensure that all of them are secure to the level required by regulation.



**Scenario**  
**10**

A friend of yours sends you a link to a post on a social media platform made by a current physical therapist colleague in which she accuses you of being incompetent and a bully.

**Scenario**  
**11**

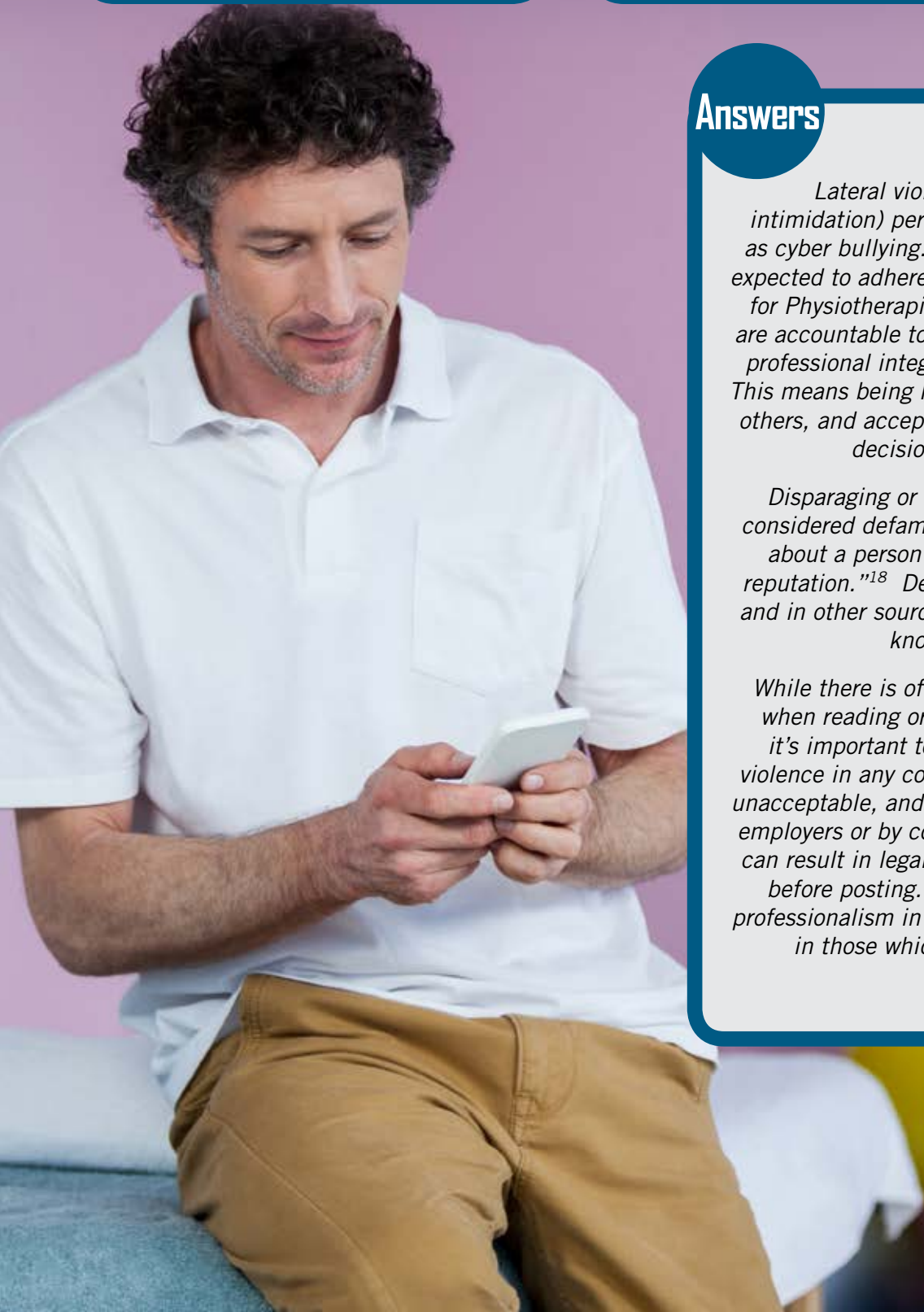
A group of students uses a Facebook page to support their learning and communicate regarding learning issues. When discussing a recent assignment, one of the students makes an off-hand comment that the instructor who marked her assignment must have been drunk at the time. The instructor and the university are identifiable.

**Answers**

*Lateral violence (bullying and intimidation) perpetuated online is known as cyber bullying. As professionals who are expected to adhere to the Competency Profile for Physiotherapists<sup>17</sup> in Canada and who are accountable to CPTBC, we must act with professional integrity and behave ethically. This means being honest, showing respect for others, and accepting responsibility for your decisions and actions.*

*Disparaging or malicious posts may be considered defamation, or "communication about a person that tends to hurt their reputation."<sup>18</sup> Defamation on social media and in other sources of permanent record is known as libel.*

*While there is often a sense of anonymity when reading or posting content online, it's important to remember that lateral violence in any context and on any profile is unacceptable, and should not be tolerated by employers or by colleagues. And defamation can result in legal action. Pause and reflect before posting. Keep the same level of professionalism in your online interactions as in those which are face-to-face.<sup>19</sup>*



# social media code of conduct

Consider creating a social media Code of Conduct, for yourself and/or for your organization or business. This way, you have agreed upon guiding principles for all to follow, and the Code of Conduct can be reviewed for reference and reflection should an unclear situation arise. A Code of Conduct could include some or all of the following points.<sup>15,20,21</sup>



# social media code of conduct

Avoid sharing, posting, or disseminating any client information (including photos/videos) or information gained during a client interaction unless you have client consent or are legally obligated to do so.

Do not assume your social media privacy settings are adequate to allow you to control your own content. Assume that anything you post online will be visible to everyone and forever.

If you see online content posted by colleagues that is unprofessional, you should consider bringing it to the attention of the individual, to their regulatory body, or to the proper authorities.

Recognize that you have an ethical and legal obligation to maintain client privacy and confidentiality at all times.

You are a physical therapist 24/7. Aim to maintain professional boundaries and a professional presence in all interactions at work, at home, in public, and online.

Posting negative comments or inappropriate or offensive material can undermine public trust of the physical therapy profession, and may be considered cyberbullying. Always remember to conduct yourself with honesty, professional integrity, and respect for others.

Develop a strategy to use if you are contacted via social media by a client. Consider how best to decline while preserving the professional relationship.

When considering posting or commenting online, reflect about whether you would discuss the content during an in-person interaction. If it isn't something you'd share with colleagues or with a client in person, then err on the side of caution.





use social media wisely  
**But Use It!**

Social media is here to stay. With some knowledge, some care, and some reflection, it can be used successfully for many purposes. Here are just a few of the benefits.<sup>22,23</sup>





# references

1. Bodell S & Hook A. Developing online professional networks for undergraduate occupational therapy students: An evaluation of an extracurricular facilitated blended learning package. *British Journal of Occupational Therapy* 2014; 77(6):320-323.
2. Ontario College of Teachers. (2017). Professional advisory: Use of electronic communication and social media. Retrieved from: <https://www.oct.ca/-/media/PDF/Advisory%20Social%20Media/ProfAdvSocMediaENPRINT.pdf>
3. College of Physical Therapists of British Columbia (2018). Code of Ethical Conduct. Retrieved from: [https://cptbc.org/wp-content/uploads/2018/12/CPTBC\\_CodeofEthics\\_2018\\_Dec5.pdf](https://cptbc.org/wp-content/uploads/2018/12/CPTBC_CodeofEthics_2018_Dec5.pdf)
4. College of Physical Therapists of British Columbia (2018). Standards of Practice for Physical Therapists in British Columbia. Retrieved from: <https://cptbc.org/legislation-standards/standards/>
5. Adapted from National Council of State Boards of Nursing (2011). White paper: A nurse's guide to the use of social media. Retrieved from: [https://www.ncsbn.org/Social\\_Media.pdf](https://www.ncsbn.org/Social_Media.pdf)
6. College of Physical Therapists of British Columbia (2018). Standards of Practice; Standard of Practice: Privacy and Record Retention. Retrieved from: [https://cptbc.org/wp-content/uploads/2024/03/CPTBC\\_Standards\\_2024\\_PrivacyAndRecordRetention.pdf](https://cptbc.org/wp-content/uploads/2024/03/CPTBC_Standards_2024_PrivacyAndRecordRetention.pdf)
7. New Zealand Nurses Organisation, NZNO National Student Unit, and Nurse Educators in the Tertiary Sector (NETS) (2012). Social media and the nursing profession: A guide to online professionalism for nurses and nursing students. Retrieved from: [https://www.nzno.org.nz/LinkClick.aspx?fileticket=u\\_2S8ci943xc%3d&portalid=0](https://www.nzno.org.nz/LinkClick.aspx?fileticket=u_2S8ci943xc%3d&portalid=0)
8. College of Physical Therapists of British Columbia (2018). Standards of Practice; Standard of Practice: Boundary Violations. Retrieved from: [https://cptbc.org/wp-content/uploads/2024/03/CPTBC\\_Standards\\_2024\\_BoundaryViolations.pdf](https://cptbc.org/wp-content/uploads/2024/03/CPTBC_Standards_2024_BoundaryViolations.pdf)
8. College of Physical Therapists of British Columbia (2024). Standards of Practice: Sexual Abuse and Sexual Misconduct. Retrieved from: [https://cptbc.org/wp-content/uploads/2024/03/CPTBC\\_Standards\\_2024\\_SexualAbuseAndSexualMisconduct.pdf](https://cptbc.org/wp-content/uploads/2024/03/CPTBC_Standards_2024_SexualAbuseAndSexualMisconduct.pdf)
9. Personal Information Protection Act (2018). Retrieved from: [http://www.bclaws.ca/Recon/document/ID/freeside/00\\_03063\\_01](http://www.bclaws.ca/Recon/document/ID/freeside/00_03063_01)
10. Privacy Act (2017). Retrieved from: [www.laws-lois.justice.gc.ca/eng/acts/P-21/index.html](http://www.laws-lois.justice.gc.ca/eng/acts/P-21/index.html)
11. Personal Information Protection and Electronic Documents Act (2018). Retrieved from: <https://www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/the-personal-information-protection-and-electronic-documents-act-pipeda/>
12. "Social Media Use in Physiotherapy," *Physiotherapy Practice*, 7(1), 30-31. Retrieved from: <https://physiotherapy.ca/sites/default/files/socialmediaeng.pdf>
13. Office of the Information & Privacy Commissioner for British Columbia (2017). Conducting social media background checks. Retrieved from: <https://www.oipc.bc.ca/guidance-documents/1454>
13. Adapted from National Council of State Boards of Nursing (2011). White paper: A nurse's guide to the use of social media.
13. College of Physical Therapists of British Columbia (2018). Standard of Practice: Documentation. Retrieved from: [https://cptbc.org/wp-content/uploads/2024/03/CPTBC\\_Standards\\_2024\\_Documentation.pdf](https://cptbc.org/wp-content/uploads/2024/03/CPTBC_Standards_2024_Documentation.pdf)
14. National Physiotherapy Advisory Group (2017). Competency Profile for Physiotherapists in Canada. Retrieved from: <http://npag.ca/PDFs/Joint%20Initiatives/2017%20Competency%20Profile%20for%20PTs%202017%20EN.pdf>
14. 18 Defamation: Libel and Slander. The Canadian Bar Association, British Columbia Branch. Retrieved from <https://www.cbabc.org/For-the-Public/Dial-A-Law/Scripts/Your-Rights/240>
15. International Nurse Regulator Collaborative (2016). Position Statement: Social media use: Common expectations for nurses. Retrieved from: [https://www.ncsbn.org/INCR\\_Social\\_Media\\_Use.pdf](https://www.ncsbn.org/INCR_Social_Media_Use.pdf)
16. Adapted from Chartered Society of Physiotherapy (2014). Social media guidance for CSP members. Retrieved from: <http://www.csp.org.uk/publications/social-media-guidance-csp-members>
17. Adapted from Health and Care Professions Council (2017). Guidance on social media. Retrieved from: <https://www.hcpc-uk.org/globalassets/resources/guidance/guidance-on-social-media.pdf>
18. Chartered Society of Physiotherapy (2014). Social media guidance for CSP members. Retrieved from: <http://www.csp.org.uk/publications/social-media-guidance-csp-members>
19. Physiotherapy Alberta (2017). Social media resource guide for Alberta physiotherapists. Retrieved from: [https://www.physiotherapyalberta.ca/files/practice\\_guideline\\_social\\_media.pdf](https://www.physiotherapyalberta.ca/files/practice_guideline_social_media.pdf)