



# Australian Institute of Radiography

The national professional organisation representing radiographers, radiation therapists and sonographers.  
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## **AIR Social Media Users' Guide**

**August 2014**



## 1. Social Media

Social media has many definitions but in essence can be defined as 'any tool or service that uses the Internet to facilitate conversations',<sup>1</sup> whether by sharing information, opinions, expertise, images or videos. Social media entails the building of online communities or networks, encouraging participation and engagement.

While many health professionals use social media without encountering any difficulties, instances of unprofessional behaviour online have raised concerns that some health professionals and students may be unknowingly exposing themselves to risk in the way they are using social media and sharing inappropriate personal information online.

There are undeniably many advantages of personally and professionally utilising social media; however, it is important that users are aware of the potential risks.

The AIR has developed this Users' Guide for the mutual protection of the reputation of the AIR, its members and agents of its social media sites. This Users' Guide provides information on common best practice and sets out clear guidelines on how to approach posting on social media sites.

## 2. Professional and ethical responsibilities

The principles of professional behaviour and ethical conduct apply equally in person or online, and this is recognised in the Social Media Policy of the Australian Health Practitioner Regulatory Authority (AHPRA) (available at <http://tinyurl.com/pktpdtt>). In summary, AHPRA has specified that:

*"When using social media, health practitioners should remember that the National Law, their National Board's code of ethics and professional conduct (the Code of conduct) and the Guidelines for advertising regulated health services (the Advertising guidelines) apply.*

*Registered health practitioners should only post information that is not in breach of these obligations by:*

- *complying with professional obligations*
- *complying with confidentiality and privacy obligations (such as by not discussing patients or posting pictures of procedures, case studies, patients, or sensitive material which may enable patients to be identified without having obtained consent in appropriate situations)*
- *presenting information in an unbiased, evidence-based context, and*
- *not making unsubstantiated claims."<sup>2</sup>*

The view of the AIR coincides with this approach - social media in a professional setting is behaviour and practice inevitably linked with professional practice generally. We would make a connection; however between the impact of the internet and our capacity to communicate globally with colleagues and collaborators around the world; and with our professional imperatives to care for the welfare of our patients, their families, the staff we work with and the public generally.

It is imperative that users are aware of their professional obligations toward confidentiality and the respect for privacy for all patients and their families. The AIR emphasises that professional breaches with regard to confidentiality and privacy occur all-too-frequently, and requests that users consider the below issues that may arise unintentionally in their social media practice.

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<sup>1</sup> Solis B (2011) *Engage: The Complete Guide for Brands and Businesses to Build, Cultivate, and Measure Success in the New Web*. John Wiley & Sons, NJ

<sup>2</sup> AHPRA (2014) Social media policy for registered health practitioners. <http://tinyurl.com/pktpdtt> (accessed 19 August 2014)

1. Patient confidentiality

The confidentiality of information concerning patients and their families is a fundamental convention. In particular, users of AIR social media groups are reminded in the strongest possible terms to be cautious and on guard to the possibilities of unintentionally breaching patient confidentiality due to the content of postings about supposedly 'anonymous' patient cases/case studies.

2. Appropriate discussions of patients and practice

We remind all users of their professional obligations to respect the confidentiality and privacy of patients or clients and refrain from discussing patients or clients in a non-professional manner.

3. Privacy, personal information and security

The AIR strongly recommends each individual set up the appropriate security level on the relevant social media site to protect the privacy of their information and posts. The AIR will not be held responsible for any issues relating to social media and security settings/privacy of people signed up to the relevant site.

4. Defamation

Defamatory publications are those that make any false imputation concerning a person, or a member of his/her family, whether living or dead, by which (a) the reputation of that person is likely to be injured or (b) he/she is likely to be injured in his/her profession or trade or (c) other persons are likely to be induced to shun, avoid, ridicule or despise him/her. Publication of defamatory matter can be by (a) spoken words or audible sound or (b) words intended to be read by sight or touch or (c) signs, signals, gestures or visible representations, and must be done to a person other than the person defamed.

5. Professionalism and social media

As is outlined in the AIR Code of Practice, health professionals should at all times take care that their comments are, to their knowledge, truthful and not likely to place the practice of their profession in disrepute. From a personal perspective, AIR encourages all members and users to maintain both their privacy and professionalism by carefully considering what comments, photos, videos or related content they post on a social media site. We also recommend the maintenance of online privacy through use of built-in privacy and safety features and encourage the reporting of any concerns to the social network providers.

