

The College of Physicians & Surgeons of Alberta (CPSA) provides advice to the profession to support physicians in implementing the CPSA Standards of Practice. This advice does not define a standard of practice, nor should it be interpreted as legal advice.

Advice to the Profession documents are dynamic and may be edited or updated for clarity at any time. Please refer back to these articles regularly to ensure you are aware of the most recent advice. Major changes will be communicated to our members; however, minor edits may only be noted within the documents.

Contents

Preamble	1
Public forums.....	3
Public comments	3
Social media.....	4
Public health emergencies	5
Resources.....	6

CPSA’s Advice to the Profession documents cannot capture every potential scenario a member may encounter. Regulated members are expected to consider standards of practice and advice documents in the context of individual patients in each care encounter. Regulated members are expected to do their best to meet the spirit and intent of the standards and advice, while focusing on providing the best quality care possible.

Preamble

Physicians and physician assistants hold a unique position of trust with the public and are often looked to for guidance. They are obligated to provide the highest standard of care in order to foster trust in the profession and the healthcare system. The impact of public statements has the potential to affect the health of both the individual and the population.

Because physicians and physician assistants have such an influential voice, it is important they reflect on and maintain the highest of professional standards. They must be guided by the laws, [Code of Ethics & Professionalism](#), [Code of Conduct](#), [Standards of Practice](#) and Public Health Orders when offering these opinions.¹

CPSA recognizes and supports that member advocacy for patients, the health care system and society at large is an important component of the medical profession. However, there is a difference between advocating to prevent harm to patients and dissenting opinions that could harm the public.

[CanMEDS](#) defines “advocacy” as

“...[requiring] action. Physicians contribute their knowledge of the determinants of health to positively influence the health of the patients, communities, or populations they serve.

Physicians gather information and perceptions about issues, working with patients and their families[†] to develop an understanding of needs and potential mechanisms to address these needs. Physicians support patients, communities, or populations to call for change, and they speak on behalf of others when needed. Physicians increase awareness about important health issues at the patient, community, or population level. They support or lead the mobilization of resources (e.g. financial, material, or human resources) on small or large scales.

Physician advocacy occurs within complex systems and thus requires the development of partnerships with patients, their families and support networks, or community agencies and organizations to influence health determinants. Advocacy often requires engaging other health care professionals, community agencies, administrators, and policy-makers.”

CPSA’s mandate is to protect the public, and public confidence in the medical profession as a whole can be negatively affected by the comments and actions of individual members.

“As Health Advocates, physicians contribute their expertise and influence as they work with communities or patient populations to improve health. They work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilization of resources to effect change.”

Royal College of Physicians and Surgeons of Canada - [CanMEDS](#)

¹ From the Federation of Medical Regulatory Authorities of Canada’s [Physicians and Public Statements](#) (Jan. 28, 2021).

Actions that harm the integrity of the profession are, by definition, unprofessional conduct under Section 1(1)(xi) of the [Health Professions Act](#).

This is just as important when the member offers an opinion in a public forum as it is when they offer an opinion to an individual patient. Our goal is to encourage members to make decisions consistent with the expectations of the medical profession.

Public forums

For the purpose of this Advice to the Profession document, “public forum” includes, but is not limited to, places, situations or groups in which people exchange ideas and discuss issues (e.g., rallies, social media posts, mass mail-outs, etc.).

When sharing their opinions, members must exercise caution. The [Code of Ethics & Professionalism](#) obligates them to recommend evidence-informed treatment options; recognize that inappropriate use or overuse of treatments or resources can lead to ineffective, and at times harmful, patient care; and seek to avoid or mitigate this.

Public comments

Maintaining professionalism is a key tenet of being a physician or physician assistant, especially when it comes to communicating with others. The status and reputation of the profession is also based on their contributions to society and the public good. As individuals, physicians and physician assistants are very fortunate to have the respect of society simply by being a member of an established and respected profession. The respect comes with a responsibility to recognize that the actions of one member, when perceived negatively, can tarnish the view of the profession as a whole. In this sense, the action of one can result in the loss of credibility, respect and influence that extends to other members of the profession. .

Members making public statements or offering opinions in a public forum must clearly indicate when they are presenting an opinion contrary to current and accepted views and interpretation of scientific knowledge and be clear that the opinions they are expressing are their own. If the topic is not within their usual scope of practice, members should be cautious not to overstep the limits of their knowledge and skills or the limits of medicine.²

² The Canadian Medical Association’s [Code of Ethics & Professionalism](#): Section A, page 2 (2018).

Under clauses 31 and 32 of the [Code of Ethics & Professionalism](#), members must engage in respectful communications in all media and treat all colleagues (e.g., learners, health care partners, and members of the health care team) with dignity and as people worth of respect.

Social media³

For the purpose of this Advice to the Profession document, the term ‘social media’ refers to web and mobile technologies and practices that people use to share content, opinions, insights, experiences, and perspectives online. Prominent social media platforms include Facebook, Twitter, YouTube, LinkedIn, and blogging sites, among many others. The use of social media has expanded enormously in the last decade and has rapidly become an important method of communication, as well as a forum for expressing opinions and debate. Understandably, many members engage in these activities through their use of social media. Members should remain cognizant that the use of social media comes with additional risks.

While it is recommended that members maintain separate professional and personal social media accounts, it can be extremely difficult for social media users to separate the two. For this reason, members should be cautious about all content they post to avoid undermining their professional integrity.

Advocating for patients and an effective healthcare system is important, and members are free to engage in debate online; however, they must continue to maintain respect for patients, colleagues, co-workers and others and be careful not to denigrate anyone. It is important to focus on issues and avoid personal attacks. [Conflicts of interest](#) should be mitigated, and information presented must be accurate and avoid misrepresentation of facts.

A rule of thumb might be to only post content in a manner you would be comfortable being posted about yourself. Everything posted and shared – personally or professionally – can be linked back to an individual’s practice, office or clinic and colleagues. Remember that professionalism includes the responsibility for and ownership of a social media presence, and members retain ultimate responsibility for the content shared under their account(s).

³ From CPSO’s [Statement on Public Health Misinformation](#) (Apr. 30, 2021).

CPSA expects members to hold themselves accountable to standards of professional behavior while posting online, regardless of whether they use their professional identity, a personal identity or post under a pseudonym.

Comments or opinions offered through social media are considered to be offered in a public forum, and the expectations outlined above remain applicable. The information shared must not be misleading or deceptive and must be supported by available evidence and science.

Members who put the public at risk by circulating misinformation may face an investigation and disciplinary action, when warranted.

Public health emergencies

During any health crisis, but particularly during a public health emergency, not only is there a significant risk to the health and well-being of the public, but also a significant risk to the sustainability of the healthcare system. Physicians and physician assistants play an essential role during these times.

The Chief Medical Officer of Health (CMOH) provides public health expertise to support health surveillance, population health and disease control initiatives on issues of public health importance. Members must be aware of and adhere to all Public Health Orders and Guidance (Public Health Orders are those signed by CMOH and Ministerial Orders signed by Members of Cabinet) throughout a public health emergency.

Members must recognize the balance of potential benefits and harms associated with any medical act and act to bring about a positive balance of benefits over harms⁴. Making comments, providing advice or behaving in such a manner that encourages the public to act contrary to public health orders or recommendations is not acceptable, as it puts all members of the public at risk⁵. They must recommend treatment options based on best-available evidence; recognize that inappropriate use or overuse of treatments or resources can lead to ineffective, and at times harmful, patient care and seek to avoid or mitigate this⁶.

⁴ The Canadian Medical Association's [Code of Ethics & Professionalism](#): Section B, page 2 (2018).

⁵ Canadian Medical Association's [Code of Ethics & Professionalism](#): clauses 39 and 41.

⁶ The Canadian Medical Association's [Code of Ethics & Professionalism](#): Clause 6, page 4 (2018).

Resources

CPSA staff is available to answer questions. Please direct inquiries to standardspractice@cpsa.ab.ca.

RELATED STANDARDS OF PRACTICE

- [Code of Ethics & Professionalism](#)
- [Conflict of Interest](#)
- [Practising Outside of Established Conventional Medicine](#)

COMPANION RESOURCES

- CPSA's [Code of Conduct](#)
- CPSA Advice to the Profession documents:
 - [Conflict of Interest](#)
 - [Practising Outside of Established Conventional Medicine](#)
 - [Social Media](#)