Social Media
Toolkit for Ontario Public Health Units

February 2014
Social Media & Technology Project Team

A Locally Driven Collaborative Project

Acknowledgements and Sourcing

Table of Contents

Introduction

The first Ontario public health units to use social media took up the reins in 2008 or 2009; many spurred on by the H1N1 pandemic. In some ways we're still playing catch-up, but in others we're learning to leverage this new way of communicating to meet the mandate of the Ontario Public Health Standards.

On one hand, social media is just a new way to talk to the public, partners, and stakeholders. On the other, it requires a mental shift from the way we traditionally communicate, choosing what we want to talk about, when and how we're going to talk about it. Social media is about building conversations and relationships. Using social channels allows us to enter the conversation; gaining the trust of our audiences lets us begin to influence. If we're slow to respond, the conversation will go on without us.

Our hope is that this toolkit helps public health units at every stage of using social media take their efforts to the next level.

Because the social media environment changes quickly, we have chosen not to include platform-specific advice. Instead, we created a flexible framework you can adapt and apply to your unique audience and environment. In doing so, we hope to reduce the duplication of work across public health units, to start building a shared knowledge base and to liberate staff time to investigate the more nuanced facets of social media for public relations, client service, surveillance and health promotion.

Despite aiming for longevity, we also recognize the need to keep the toolkit up-to-date. The term of this Locally Driven Collaborative Project is complete, but we hope this toolkit will evolve as the knowledge base around social media in public health grows.

Ultimately, a collaborative approach will benefit us all.

Sincerely,
The 2012 LDCP Social Media & Technology Team
Jill Davies, Lead

Methodology

This toolkit is the result of an investigation into the current, past, and prospective uses for social media at Ontario public health units (PHUs).
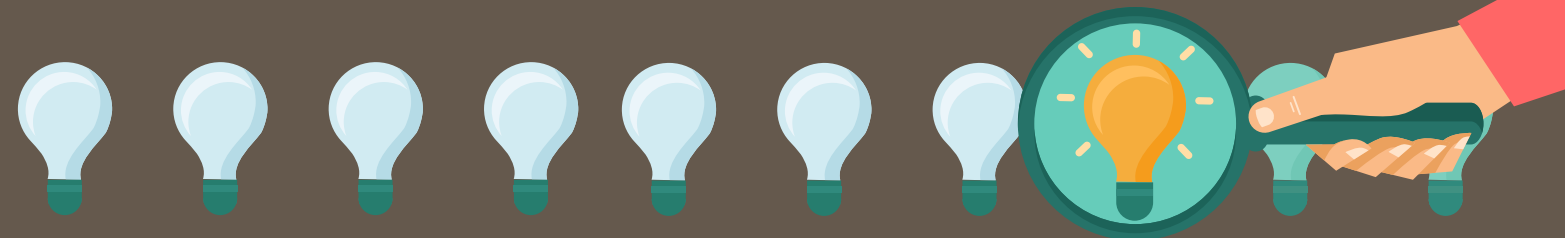
Background on the LDCP program

In January 2012, Ontario PHUs were invited to complete a survey to identify topics areas of interest for the 2012 cycle of the Locally Driven Collaborative Projects (LDCP) program, funded and supported by Public Health Ontario (PHO). "Social Media and Technology" was one of seven selected priority areas. Five PHUs (Wellington-Dufferin-Guelph Public Health, Simcoe Muskoka District Health Unit, Middlesex-London Health Unit, North Bay Parry Sound District Health Unit and Toronto Public Health) committed resources to the project, which began on October 1, 2012 upon acceptance by and funding from PHO. The City of Hamilton – Public Health Services joined the project in 2013.

Research question

To address the broad research question "How can social media facilitate and complement public health comprehensive programs and strategies at health units across Ontario?" four objectives were identified:

1. To identify and describe existing social media models in public health and other sectors to assess their applicability to the Ontario Public Health Standards (OPHS)

2. To determine barriers, facilitators, challenges and benefits to implementing social media at health units in Ontario

3. To analyze the evaluation strategies at health units in Ontario through three case studies

4. To identify best practices for implementation and evaluation based on case study evaluation

A preliminary, limited review of the literature unearthed several gaps in the topics relating to social media in the context of public health. These gaps suggested the potential need for:

1. A toolkit or guide for implementing social media at public health units in Ontario;
2. Research into models of social media management;
3. Best practices for evaluation in public health; and
4. Knowledge around whether public health messages are reaching the right audience.

Research plan

Focusing on the first three identified gaps, the Project Team integrated three phases of data collection into their methodology in order to explore social media use, experiences, and approaches at Ontario PHUs.

- **Phase 1:** Environmental scan[1] (interviews with PHU staff and international agencies, completed between June and August, 2013) and a literature review[2] (completed between February and March, 2013).
- **Phase 2:** Case studies of three PHUs in Ontario using social media[3] (completed between July and August, 2013).
- **Phase 3:** Development of a toolkit (between November 2013 and January 2014).

Results of the environmental scan, literature review and case studies are available from Wellington-Dufferin-Guelph Public Health's website.

Evidence-informed guidance

This toolkit was created based on evidence available as of December 2013, including:

- Environmental scan report1 (Phase 1 of this project)
- Literature review on social media in public health2 (Phase 1 of this project)
- Case study reports[3] (Phase 2 of this project)
- Peer-reviewed literature (published after March 2013)
- Grey literature4,5 and trusted online resources
- Templates and examples provided by Ontario PHUs[6,7]
- Feedback and shared experiences from the Ontario Association of Communicators in Public Health (OACPH)[8]

Chapter One: How to Use This Toolkit

This toolkit is designed for public health professionals in Ontario, Canada who play a role in planning, implementing or managing social media at their organizations. Whether you navigate social media nimbly or have never created an account; whether your agency is cutting edge or conservative; this toolkit will help you leverage social media to meet your goals.

This toolkit is focused on the local landscape; the result of research and investigation into our unique conditions and regulatory environment. However, we hope it will be useful outside provincial boundaries as well.

Social media defined

Social media refers to Internet-based tools that are used to develop and share content and engage with others.[2]

The channels through which people access social media can include social networking websites (SNS, where people with similar interests can interact in a community[9]), interactive "apps", video- and photo-sharing services, texting and more. New platforms and tools for these channels are being developed every day. The Glossary (Appendix A) provides more precise definitions for "channel", "platform", and other common social media terms.

Social media emphasizes relationships, co-creation of knowledge, and rapid response.[10] – Dr. Cameron Norman, Developing a Social Media Strategy, 2013, p.4

The toolkit will help you:

Plan your strategy

Manage your accounts

Engage with your audience in a public forum

Leverage social media for human resources, surveillance and emergency management

Evaluate and improve your efforts

Overcome challenges

Social media and the Ontario Public Health Standards

Social media is one implement in the Public Health toolbox. Far from a stand-alone strategy, it can – and should – be integrated into your plans to achieve the outcomes outlined in the Ontario Public Health Standards (OPHS).

Specifically, it may help us meet the following standards:

- Foundational Standard: Surveillance (collecting and collating health-related data)
- Foundational Standard: Research and Knowledge Exchange (raising awareness among the public and partners about ongoing and completed research; facilitating online learning)
- Foundational Standard: Program Evaluation (reaching out to current, past or potential program participants)
- Program Standards: To increase public awareness (for example, around immunization, rabies prevention and sexual transmitted infections), risk and emergency communication, communication with healthcare partners.

Why public health units should use social media

The evidence is clear: there are many ways public health can benefit from social media.

1. Improve loyalty, trust and confidence in your organization[11]; be seen as accessible, approachable and current[1]
2. Strengthen brand awareness, allowing a PHU to be a trusted voice[1]
3. Capture public sentiment on health topics[2] and correct misinformation
4. Increase interactions and build relationships with others, including the public and partners[12]
5. Improve reach and accessibility[2]; increase access to health information[12]
6. Support healthy behaviours6 and provide peer/social/emotional support[12]
7. Tailor messages to specific audiences[11,12]
8. Influence policy[12]
9. Respond in an emergency[2]
10. Surveillance[11,12]
11. Raise awareness of the breadth of topics and activities public health is involved in[1]
12. Amplify messages[1]
13. Educate within each interaction[1]

Briefing Note: Social Media Use in Public Health

Ontario public health units (PHUs) are using social media. Until now, research was often duplicated and no coordinated approach existed. A toolkit developed through the Locally Driven Collaborative Project (LDCP) program (funded by Public Health Ontario) centralizes the knowledge, tools and examples needed to overcome challenges and drive social media forward.

Social media

Internet-based tools that are used to develop and share content and engage with others.

Examples: Facebook, YouTube, blogs

Potential benefits

- ✓ Help meet OPHS Foundational and Program Standards (knowledge exchange, program evaluation, public awareness)
- ✓ Improve loyalty, trust and confidence
- ✓ Strengthen brand awareness
- ✓ Capture public sentiment
- ✓ Correct misinformation
- ✓ Increase interactions and build relationships with public and partners
- ✓ Increase access to health information
- ✓ Support healthy behaviours
- ✓ Tailor messages to specific audiences
- ✓ Influence policy
- ✓ Respond in an emergency
- ✓ Perform surveillance

Number of PHUs that have used or are using social media:

Yes: 34   No: 2

Platforms used

- Twitter (Corporate account) – **28%**
- Facebook (Corporate account) – **26%**
- YouTube – **19%**
- Facebook (Campaign or program account) – **13%**
- Facebook ads – **10%**
- Twitter (Campaign or program account) – **7%**
- Blog – **5%**
- Pinterest – **3%**
- Misc. (LinkedIn, Yammer, Flickr, Instagram, etc.) – **5%**

To realize these benefits:

Planning > Piloting > Staking a claim > Emerging > Integrating > Strategic

← Engagement & interaction increases →
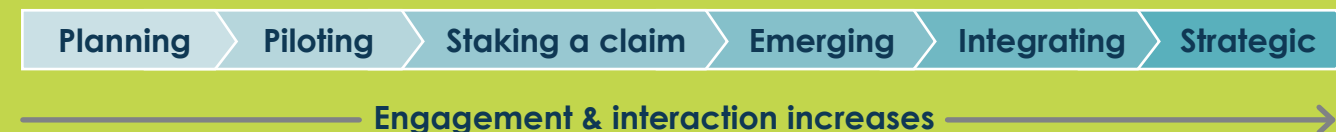
*Source: Social Media Toolkit for Ontario Public Health Units, 2014, available from www.WDGPublicHealth.ca/?q=ldcp.

Where are you now?

Most Ontario public health units (PHUs) have used social media. Some have full-fledged strategies; others have piloted internally. Most are somewhere between these two levels.[1] This toolkit will help you move from lower engagement to higher engagement and from a piecemeal approach to a coordinated one.

Stages of social media engagement

Social media is about engagement: a conversation, not an opportunity to hand out a business card or read a fact sheet. Social media engagement can be framed as a "multi-way interaction between and among an organization and digital communities that could take many forms, using social media channels to facilitate that interaction".[13] It's some type of action beyond exposure; some interaction.[14] True engagement is **broad** and **deep**, requiring increasing levels of interaction and organizational commitment (staffing, funding and infrastructure).[8] Engagement is someone interacting with you,[14] generally on a channel or platform you manage.

Below is a loose classification system based on current research.[1,3,15,16] Try to identify where your organization is sitting today. This will support your next steps.

— **Planning step**
Not using social media yet. Interest is piqued and the organization is progressing toward using it.

1 **Step 1: Piloting**
Social media is used to "listen" and gather information. Policies and standards may or may not exist.

 • If you're at Step 1, consider using this entire toolkit from Planning to Evaluation.

2 **Step 2: Staking a claim** (Low engagement)
Agency is moving from planning to action, securing handles and setting up accounts. Presence may be formal or informal; policies and standards have not been fully developed. PHU is attempting to recruit followers and might experiment with one-way messaging of existing content (e.g., media releases). Little or no evaluation is occurring; may measure number of messages posted, number of followers, number of second-level followers (potential reach).

 • If you're at Step 2, consider using this entire toolkit from Planning to Evaluation.

3 **Step 3: Emerging** (Medium engagement)
Agency has committed to social media. Policies and procedures are developed or in development. Dialogue is beginning; the audience is beginning to respond. Content is created specifically for social media and is compelling enough to share. Evaluation considers metrics like retweets, mentions, questions asked on the platform, number of private messages. Goals include reaching a critical mass of followers.

 • If you're at Step 2, you might want to start with Chapter 3: Managing Social Media.

4 **Step 4: Integrating/ Formalized** (Medium engagement)
Social media is being incorporated into a strategy or strategies, complementing traditional communication plans. Conversations are developing in at least one program or corporate area. The internal workflow is clear and processes run smoothly. Response times are short. Social media has increased trust with stakeholders and helps strengthen the overall agency brand. Evaluation incorporates qualitative, quantitative, online and offline measures.

 • If you're at Step 4, you might want to jump ahead to Chapter 4: Evaluation.

5 **Step 5: Strategic** (High engagement)
Agency is becoming a "social business". Social media is being used in multiple program/corporate areas and is being "woven into the fabric of an evolving organization".[15] Social media is used to improve customer service and employee experiences. Evaluation is connected to PHU goals. Audience takes action to help the organization reach its goals; they **participate**.

Checkpoint: Before you get started

✓ Normalize social media internally. Avoid buzzwords; make it accessible even to those who haven't used it.[17]

✓ Consider organizational training or education throughout the process to increase buy-in and excitement.[1]

✓ Start small. Consider a pilot or "baby steps".

✓ Think about how to integrate social media into your existing business, operational and communications plans.

✓ Gather information about what social media strategies your agency has tried so far (if applicable). What's worked? What hasn't?

Further reading

- Social Media Engagement and Public Heath Communication: Implications for Public Health Organizations Being Truly "Social".[13]
- Altimeter Group's The State of Social Business 2013: The Maturing of Social Media Into Social Business.[15]
- Neiger BL, Thackeray R, Van Wagenen SA, Hanson CL, West JH, Barnes MD, et al. 2012. Use of social media in health promotion: purposes, key performance indicators, and evaluation metrics. Health Promotion Practice, 13 (2), 159-164.[16]

Chapter Two: Planning for Social Media

Overview

This section is for public health units (PHUs) planning to use social media at the agency (corporate) or campaign level, including those who are doing so already but want to strengthen their processes or policies.

In this section:

Build your team
- Sample Terms of Reference for a social media committee

Get buy-in from the top

Create a policy

Integrate social media into a communications plan/strategy
- Identify goals and objectives
- Identify audience and platforms
- Learn from others
- Outline parameters
- Plan to evaluate

Train staff and management

The enthusiasm and interest of PHU staff is one of the key facilitators for successfully implementing social media.[1] Make sure you have people on your social media team who are passionate about the topic.

Build your team

Consider a committee: more than half of Ontario PHUs have a social media working group or committee. In general, a social media committee or working group is responsible for[1]:

- Laying the framework for social media: drafting a business case, seeking approvals, specifying roles and responsibilities, developing policies/procedures/guidelines
- Developing a strategy
- Ensuring infrastructure is in place
- Assessing training needs

See Appendix B for a Sample Terms of Reference for a Social Media Committee.

Consider including representatives from the following areas:

- Communications
- Strategic initiatives
- Management team
- Program staff (e.g., public health nurse; health promoter)
- IT

Several PHUs have also employed consultants to help research and plan for social media.

> You might also need to check in with your:
>
> - Records management team
> - Privacy officer
> - Executive committee
> - Legal team
> - Board of Health

Consult IT

Bringing the Information Technology (IT) team into the planning process early can help mitigate threats that could harm networks and equipment.

Potential IT concerns fit into two main security risk categories identified by the CDC[18]:

1. Risks associated with organizational content hosted on a social media platform (password management, malicious applications, etc.)
2. Risks to the organizational network from staff using social media platforms for personal or work use (e.g., preventing harm to the network via vector attacks)

Specifically, they could include:

- Keeping up with technology (e.g., old browsers may not support new technology)
- Internet connectivity (especially in rural districts)
- Managing records and passwords
- Bandwidth
- Upgrading equipment to meet social media platform needs
- Security of information
- Capacity to scan for and respond to fraudulent/malicious downloads or viruses
- Monitoring access to platforms on work computers; staff productivity

Further reading:

CDC's Social Media Strategy Mitigations[18] outlines steps to assess risk for specific platforms and provides recommendations on how to manage these risks.

Get buy-in from the top

Requesting management approval to move forward with social media is more than just a sign-off; it means recognizing the need for organizational norms to shift in a direction that can be seen as murky, challenging and untested.

Some of the hesitations expressed by Ontario PHUs when implementing social media include[1]:

- The capacity to build and maintain social media channels
- Losing control (by opening up social media sites to staff, allowing staff to engage in conversation/post messages without approval, etc.)
- A need for guidelines and evidence, both internally and from external credible sources
- Staff confidence with social media (i.e., knowing how/when to respond, especially to negative comments; how to use various platforms)
- Role of staff in relation to their current responsibilities
- Lack of comfort around new, less formal tools
- Ability to keep up with technology
- Addressing privacy, confidentiality and security requirements

During the planning stage, you'll justify the request for **trust**, **tools** and **time** to management. Securing buy-in and approval is crucial. To that end, below is one suggested course of action.

1 **Step 1:** Request a meeting with management.

2 **Step 2:** Create a brief, 15-minute presentation to "pitch" integrating social media into your existing communications.

The pitch could include:

i.   Statistics on social media engagement in Canada, especially for your target group (see "Identify your audience", page 23)

ii. Names of health-related organizations currently using social media

iii. Success stories of how social media is being used at other PHUs

iv. Reference to drafted documents, including:
     a. Process to facilitate the approval and set-up of new social media platforms
     b. Social media policy

v.   Examples of how evaluating outcomes and impact is possible

vi. Intent to consult privacy officer and IT department

vii. Plan to address the concerns listed above (staff time; protocol for responding, especially to negative comments; approvals, evaluation/return on investment)

3 **Step 3:** If possible, review presentation as a "pilot" with one manager. What do they feel is missing? Are any of their concerns unaddressed? How do they respond to the tone of your presentation?

4 **Step 4:**

- Consider pitching a "pilot" with limited scope and staff involvement. Agree to evaluate the experience in an identified timeframe and consider the possibility of expansion.
- Be positive and optimistic while maintaining sensitivity for the role of management and their sense of accountability.
- Approach the presentation using their lens.

Create a policy and procedures

A social media communication strategy is only one part of a larger communication effort, and should be integrated into your overall communication planning, activities and data collection".[9]

– CDC's The Health Communicator's Social Media Toolkit, 2011, pg. 5

A social media policy should help staff manage their social media use, both as professionals with personal accounts and as representatives of their PHU. The distinction may not always be clear, such as in the case of professional networking sites like LinkedIn. Over half of Ontario PHUs have developed, are currently developing, or intend to develop a social media policy. Most have not formally approved it yet.[1] For sample policies, see Appendix C.

A social media policy should[19]:

- Communicate values and expectations
- Keep the organization in compliance with legislation
- Document and implement best practices appropriate to the organization
- Support consistent treatment of staff (fairness and transparency)
- Help management to make decisions that are consistent, uniform and predictable
- Protect individuals and the organization from the pressures of expediency

Writing a social media policy

When drafting a policy and procedures, or in the absence of a policy, consider the following:

1 **Step 1: Define social media**
Use the definition from this toolkit or other sources (e.g., Wikipedia, CDC).

2 **Step 2: Goals for using social media**
Be purposeful about using social media – what are you hoping to accomplish at the agency level?

3 **Step 3: Accountability**
Who is responsible for what happens on social media?

4 **Step 4: Separating personal from professional use**
- Distinguish between personal and professional use and how staff members should identify themselves on each.
- If professional qualifications or connections are mentioned on a personal account, consider a disclaimer (e.g., "Opinions expressed on this account are mine only").
- Outline when it is appropriate to use the agency brand/logo.
- Include a code of conduct for staff members (e.g., be cautious when posting about work on social media; never post confidential information about work, including details about clients; consult professional/regulatory bodies for guidance).
- Who is authorized to "speak" on social media on behalf of the organization?

5 **Step 5: Protecting the privacy of clients and staff members**
- Identify what types of content can be shared via social media and which can't (due to confidentiality, legalities, personal health information, etc.)
- Identify the requirements/processes for staying up-to-date on the privacy settings of each platform.
- On personal accounts: use the highest level of privacy settings on personal accounts to protect personal information.
- On professional accounts: use the lowest level of privacy settings so that they are accessible to the target population.
- Include a sample Terms of Use to deploy on social media platforms.

Remember: there's no such thing as absolute privacy or anonymity. Online activities, including social media, have the potential to be seen by others, copied and saved.

6 **Step 6: How platforms are created, approved, and maintained**
- What type of management model will you use?
- What is the process for requesting a new account? Who must be consulted?
- How will passwords and account information be stored and accessed?
- Standard response times and considerations (e.g., comment policy or decision tree)
- Disclaimer for deployment on social media platforms outlining response times, monitoring, etc.
- Process for identifying and removing inappropriate comments

7 **Step 7: Repercussions for breach of the policy**
What would happen if someone creates an unauthorized account or otherwise breaches the policy?

8 **Step 8: Provisions for emergency communication**
How will social media be used during a crisis?

9 **Step 9: Cross-references to other policies and regulated professional requirements:**
- Code of Conduct
- Communications
- Computer systems/Email
- Copyright
- Privacy/PHIPA
- Records Management

Scenarios to consider:

- A client or community partner approaches a staff member on social media and requests to be "friends".
- A family member asks a staff member, on their personal account, how they feel about a public health issue.
- A former colleague approaches a staff member on LinkedIn and asks to connect or provide a recommendation.
- The agency wants to use a platform that requires a business account to be created by an individual with a personal account.
- A staff member wants to post a video taken at work on their personal YouTube channel.

Colleges

- College of Dietitians of Ontario (CDO)
  Pause Before You Post: Social Media Awareness[20] (webcast; pages 10–13)
- College of Nurses of Ontario (CNO)
  Social Media: Reflect Before You Post[21] (webcast)
- College of Physicians and Surgeons of Ontario (CPSO)
  Social Media – Appropriate Use by Physicians[22]

Further reading

- Guidelines for Using Electronic and Social Media: The Regulatory Perspective[23] (The Online Journal of Nursing)
- HRCouncil: Steps in Policy Development[24]
- Social media policies and strategies from Ontario municipalities[25] (Redbrick Communications)
- Web 2.0 Governance Policies and Best Practices wiki[26]
- Appendix C: Sample Social Media Policies

Integrate social media into a communications strategy

Before diving into social media, develop a communications strategy or business plan that includes the goal of social media projects, identifies target audiences, estimates time and resources to sustain it, and includes references to best practice documents to create messages in an ethical manner.[27,13] How PHUs approach social media strategy varies: some have been directed by senior management to integrate social media into existing communication plans or create agency-wide strategies; others are treating it as a component of individual or program-specific communications strategies as needed.[1]

According to Norman (2013),[10] the three orders of eHealth interventions also apply to social media campaigns.

First Order: Stand alone
Strategies rely on social media as the sole source of engagement with your audience (e.g., Tweet-ups, YouTube video contests).

Second Order: Complementary
Strategies use social media to complement activities being done as part of a larger campaign (e.g., using Facebook to distribute a link to your website).

Third Order: Integrated
Strategies embed social media into other activities (e.g., an in-person rally where you encourage participants to tweet their peers and advocate to policy makers).

Building a social media strategy

1. Identify goals and objectives
2. Identify audience
3. Identify channel and platform
4. Research: Learn from others
5. Outline parameters
6. Plan to evaluate
7. Have an exit strategy

For an easy-to-use project plavnning checklist, see Appendix D.

1. Identify goals and objectives

Sample goals for program-level strategies:

- ✓ Inform the audience (provide general information) [10]
- ✓ Advocate for an issue [10]
- ✓ Form a community of practice [10]
- ✓ Gather insights to improve service delivery or reach

Sample goals for organizational strategies:

- ✓ "CDC uses social media to provide users with access to credible, science-based health information when, where and how users want it". [29]
- ✓ Monitor the conversation, participate in the conversation, initiate the conversation, share content, include social media in all marketing initiatives [11]
- ✓ Position organization as authority [28] or establish a brand [3]
- ✓ Keep staff informed of health promotion best practices and latest news [28]
- ✓ Increase the organization's web presence [28]
- ✓ Disseminate critical information [3]
- ✓ Foster engagement and partnership [3]

If engagement is one of your goals, consider incorporating these seven principles into your objectives [13]:

1. Listen to social media conversations
2. Engage with influencers and their conversations
3. Respond to questions or comments received via social media channels
4. Create opportunities for users to engage with your organization, and for your users to engage with each other
5. Welcome and solicit user-generated content
6. Create opportunities to integrate online and offline engagement
7. Leverage social media for community engagement

2. Identify audience

Who are you trying to reach? Identify your audience and their needs to determine whether social media is the right tool in each situation. Even though the ability to target a specific audience is a known benefit of using social media, Ontario PHUs are not generally doing so. [3]

Audiences to consider:

- "The general public"
- Media
- Community partners or stakeholders
- For specific campaigns: your segmented target audience (e.g., teens ages 16 and up not currently attending high school)
- Staff

Here is a basic checklist for identifying your audience for a corporate social media presence. For a detailed checklist specific to health promotion campaigns, refer to the Public Health Ontario training module: Overview of social media in a public health context. [28]

- Demographics (including age and cultural characteristics); how many people comprise your audience?
- Where they get their health information
- How they access the Internet (connection speed; device)
- What channels and social media platforms they use
- How they prefer to receive information
- What information they want to receive (heat alerts? parenting updates? notification of new reports?)
- The health equity impact of using social media

3. Identify channel and platform

Once you've identified your target audience(s), find out where and how they go online. This will help you choose the appropriate **channels** (e.g., blog, social networking site) and **platform** (e.g., WordPress, Facebook). Some PHUs refer to this as a "needs assessment". Keep your strategic goal in mind: does it align with the capabilities of the chosen channels?

How do you find out?

- Focus groups or consultations[28]
- Surveys[28]
- Questionnaires (mail, telephone, online)[28]
- Website analytics[28]
- Environmental scan of local social media landscape (e.g., identify key local parenting blogs)
- Statistics (see below)

After deciding on a channel and platform, determine:

- Risks of the platform
- What niche your platform will fill; why would your target audience use your platform over another?
- Time commitment for the platform

> Among Ontario PHUs, the most-used platforms as of summer 2013 were Facebook, Twitter and YouTube.[1]

Internet and social media statistics

General demographics for social media and Internet use are available as a starting point. Try these sources:

- Statistics Canada
- Ipsos Reid Canada
- Pew Internet & American Life Project (American statistics)
- Mashable (a consumer site that reports on the "importance of digital innovation")

4. Research: Learn from others

The research phase is for gathering information about the effectiveness of, and best practices for, social media in public health or about your specific topic. This toolkit is a great starting point. For the most up-to-date information, consider the following research methods.

Review the literature

The social media environment changes rapidly; studies from past years might not be relevant today. Before beginning a literature search, check with your librarian and professional networks to see what has recently been completed. Build on what exists rather than starting from scratch. Remember to share your results internally and with your PHU networks!

Existing reviews of social media in public health

- Davies J, Brankley L, Williams M, Mai D, McColl K, Dhaliwal M. Literature Review: Analyzing the Effectiveness of Social Media Planning, Implementation and Evaluation at Heath Units in Ontario (2013).[2]
- Newbold B, Campos S. Media and social media in public health messages: A systemic review (2011).[27]
- Schein R, Wilson K, Keelen J. Literature review on effectiveness of the use of social media: A report for Peel Public Health (2010).[30]

Grey literature

- Bergeron K, Davies J, Hahn S, Brankley L, Dhaliwal M, Williams M, Mai D, McColl K. Case Study: The Adoption of Social Media at Three Ontario Public Health Units (2013).[3]
- Brankley L, Davies J. Environmental Scan of Social Media at Ontario Public Health Units. Wellington-Dufferin-Guelph Public Health, Guelph, ON. Environmental Scan of Social Media at Ontario Public Health Units (2013).[1]
- CDC's guidelines for use of social media: CDC Social Media Tools, Guidelines & Best Practices

Library resources (great sources for topic- or campaign-specific resources)

- OPHLA Public Health Grey Literature Sources[4]
- Ontario Public Health Unit Reports: A Grey Literature Repository Compiled by OPHLA[5]
- OPHLA Custom Search Engine for Canadian Public Health Information[6]
- OPHLA Custom Search Engine for Ontario Public Health Unit Websites[7]

Ask your colleagues/conduct an environmental scan

Reaching out to other PHUs for guidance and lessons learned during this stage can be valuable, but be mindful of others' time. PHU staff regularly receive requests for information as part of "scans" or "surveys" relating to social media. Before sending out a request to another PHU, check to see what already exists.

Before re-inventing the wheel, tap into existing professional networks, like the Ontario Association of Communicators in Public Health[8] [OACPH].

Also be sure to check with other internal departments that have run pilot projects already.

Review internal/college documents

- Existing policies and guidelines
- Registered profession/college guidelines
- Agency and department strategic plans

Miscellaneous sources

- Contact organizations that have created similar social media accounts to find out what they learned and to establish benchmarks.
- Advanced Google searching
- Explore the work of social media researchers/experts (start with Cameron D. Norman,[10,27,31] Jennifer Keelan,[11] Centers for Disease Control and Prevention[9,29,18])
- Seek out conference proceedings (Public Health Ontario events,[32] TOPHC,[33] alPHa,[34] Sheela Basrur Centre[35])
- Market research and digital research firms (e.g., Redbrick Communications,[25] Ipsos Reid,[36] comScore[37])
- The Cochrane Collaboration[38]
- Conference Board of Canada[39]
- Pew Internet & American Life Project[40]
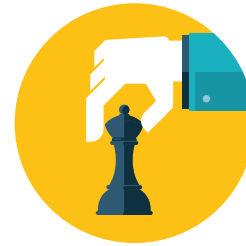
5. Outline parameters

The purpose of this step is to work out the details of your strategy, logistics and day-to-day maintenance. You might find it helpful to use a project planning document (see Appendix D) or create a formal workflow or business case that outlines each of the parameters below. Remember to consult your social media policy and other relevant internal documents as well.

Time

- What is your timeline for implementation? How does this fit with other departmental initiatives?
- How much time will you dedicate to daily monitoring? Responding? Proactive engagement? Message development? Record-keeping?
- What is your standard response time?

Capacity

- Do you have an appropriately trained team available?
- What supports do you need from IT and other teams?
- Do you have the technology you need?
- Have you identified a management model and workflow?

Accountability

- Who is responsible for writing, posting, responding, monitoring, evaluating and approving?
- Have you identified back-ups for key positions?

Moderation

- What will users be able to contribute?
- How will you monitor and deal with content?
- How will you refer followers to programs and services (including emergency response)?

Messaging and branding

- Have you identified your platform's design, avatars and tone?
- Have you appropriately connected to the corporate brand?
- What links need to be made from other accounts or websites?
- How will content be developed and scheduled?
- Which topics are approved? Which should be avoided?

Legal considerations

- Is the platform's Terms of Use acceptable?
- Are there concerns relating to vulnerable populations?
- What type of records must be kept? Are there special requirements for members of registered professions?
- Do you have a Disclaimer and/or End User Terms of Use?
- Are there any remaining internal barriers?

Budget

- Is there a cost to use the platform you've selected?
- Is there a cost for the dashboard of monitoring software you've selected?
- Are funds needed for offline or online advertising?

Promotion and development

- How will you build your community?

6. Plan to evaluate

Evaluation should accompany social media development.[27] Make sure your goals are measurable. Goals can be scalable to accommodate growing levels of engagement. Don't wait until the end to measure progress – include ways to gauge progress along the way.

Find out how to integrate ongoing evaluation into your plan in the Evaluation section.

7. Plan your exit

Social media content can (and will) live forever online. Some messages are "evergreen"; others are not. To avoid users taking your posts out of context and to preserve your online reputation,[30] craft an exit strategy before you need it.

When will you know it's time to close the account and move on?

- Objectives are no longer being met
- Resources required to maintain the account outweigh the benefits
- The account has outlived its purpose (e.g., a campaign is over; success was achieved; an event has passed)
- Levels of traffic and engagement have declined
- Priorities have changed

Steps to include in your exit strategy:

- Should items be removed after a certain time period? How long will items be archived, even on a live site?
- Who makes the decision to remove an account?
- What kind of records need to be kept? How will you access/make a copy of them?
- Will the platform you're using affect your exit strategy? For example, Facebook maintains an archive copy of accounts even when they are "deleted" by users.

Recommendations from the communicators at the 2013 OACPH meeting include to:

1. Publish a final post explaining the reason for closing the account. Thank the followers/contributors for their participation. Celebrate success.
2. Include a link to your website or a related site.
3. Use a website redirect to the new campaign site, social media page or official web property to connect followers with content that's current.
4. Persuade followers to switch to the new websites/accounts/pages while you're still connected.
5. Don't rely on various social media service providers to remove or delete accounts/pages for you.

Further reading: social media strategies

- Seminar: Overview of social media in a public health context[41]
- Developing a social media strategy[10]
- Presentation: Social Media for Public Health Communications[11]
- CDC Social Media Toolkit[9] (includes a list of popular social media platforms)
- Social media and health promotion[42]
- Social media policies and strategies from Ontario municipalities[25]

Train staff and management

Over one-third of Ontario PHUs identified the need for training and education related to social media.[1] Training is one way to get staff familiar with using social media, and helps them feel more comfortable using it.

Training can be used to:

- Introduce policies and procedures
- Share best practices
- Share opportunities
- Identify and avoid pitfalls
- Alleviate staff and management concerns

> PHUs that provided education or training said it resulted in a change in buy-in, staff excitement and competency.[1]

Craft your training

1 **Conduct an assessment**
  ✓ Determine the base level of competency at the organization
  ✓ Identify training goals

2 **Determine what to include**

3 **Determine training frequency**
  ✓ Platforms change privacy settings often; training on this topic may need to be more frequent

4 **Use real-life examples**
  ✓ Focus on the positive

For training support, contact:

- In-house consultants (others who have used social media; communications staff)
- External consultants
- Webinars and training sessions from Program Training and Consultation Centre (PTCC),[43] Public Health Ontario[44]

Further reading: training

- Building a Social Media Training Program For Your Organization in 7 Steps[45]
- Infographic: Social Media 2013[46]

Table 1: Sample Training Plan[1]

Audience	Goals	Training topics	Channels
All staff	Ensure all staff members are aware of social media policy/procedure and also respect personal/professional boundaries.	• Basic training (i.e., "social media 101") • Awareness of policies, procedures and guidelines • How to be effective ambassadors for the organization and good social media citizens • Personal and professional boundaries/privacy	• Orientation package • Videoconference • Internal memo or staff newsletter • Intranet • In person
Day-to-day users/moderators	Ensure staff responsible for using social media at work are comfortable with: • Each platform • Managing the content cycle from creation to record-keeping • Responding in a public forum	• Advanced/in-depth training on specific platforms • Content creation and management • Record-keeping • Risks/benefits to working with social media • Terms of use • How to use a specific platform (e.g., Facebook 101) • Establishing tone and "voice"	• In person • "Cheat sheets" • Hard-copy binder • Online folder/shared space
Management	Keep informed and ensure buy-in.	Overview of social media and current activities	• Memo • Email • Management team meeting

Checkpoint: Planning for social media

Have you:

- ✓ Identified the individuals at your organization who need to be involved (Communications, IT, etc.)?
- ✓ Formed a committee and solidified its Terms of Reference?
- ✓ Designated a lead or project manager for this phase?
- ✓ Connected with the relevant internal departments for advice and approvals?
- ✓ Created a policy to guide staff social media use?
- ✓ Decided on the scope of your project?
- ✓ Created a project plan, creative brief or business case?
- ✓ Incorporated a training plan?

Chapter Three: Managing Social Media

Overview

This section is for public health units (PHUs):

- Using social media in an organized way for the first time
- Wanting to take social media to the next level, encouraging engagement
- Expanding their use of social media to areas like emergency management, surveillance and human resources

In this section:

Management models

Set up a platform and accounts

Choose a dashboard

Manage content

- Write for social media
- Consider accessibility
- Listen first, ask questions later
- Generate ideas
- Move from broadcast to engagement
- Plan for surveillance, outbreak management and emergency response
- Use social media for human resources
- Manage records

Promote your channels
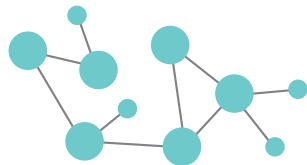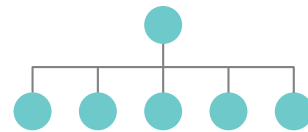
Engage with your audience

Management models

How social media channels are managed is often described as either "centralized" or "decentralized".

A **centralized approach** is one in which one group or person has administrative authority and content is created by or in collaboration with staff from various programs.[1]

A **decentralized approach** is one in which content is created and managed by more than one person or body. In a decentralized model, staff members create their own content.[1]

A third approach, called **hub-and-spoke**, is one in which a small cross-functional core (hub) coordinates from a central position but execution is up to individuals, business units or teams.[15,47]
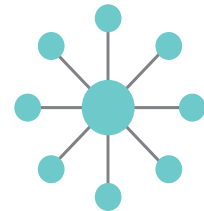
Between 2011 and 2013, the proportion of Ontario PHUs using a model where there is more than one team or area responsible for social media has increased.[1] This finding is echoed in surveys of businesses by Solis & Li who found 35% of companies organize as hub-and-spoke (and increasingly, multiple hub-and-spoke)[15] and Johnson[47], who found that the hub-and-spoke model also dominates among businesses. Of Ontario's 444 municipalities, nearly half (49%) use a centralized approach; just under a third use a decentralized approach (28%); and the rest (23%) use a "mix of a central account, plus a handful of distinct accounts for specialized areas of departments",[25] (i.e., hub-and-spoke).

Table 2: Responsibilities in various management models

Responsibilities	Centralized	Decentralized	Hub-and-Spoke
Strategy and training; deciding on new platforms	Lead department or team	Each department manages their own needs	Lead team or committee
Managing corporate/ flagship account	Lead department or team	Corporate team (if applicable)	Lead team or committee
Creating content (messaging, photos, etc.)	Lead department or team with program staff	Program staff	Program staff
Maintaining and managing channel (e.g., scheduling messages, monitoring, responding)	Lead department or team	Program staff	Program staff
Setting up new platforms	Lead department or IT/ Communications	Program staff	Program staff in consultation with IT/ Communications

Choosing a management model

How your PHU manages its social media activities will depend on its type of governance (regional, municipal, or independent), type/quantity of internal resources and culture. Companies generally start with a model that mirrors the culture of their company.[15] However, the overall trend seems to be towards a decentralized or hub-and-spoke model, away from a centralized one.[15,47] The CDC and NASA also use a hub-and-spoke model.[1]

Benefits of a hub-and-spoke model:

- Program staff can dialogue with the audience directly in their area of expertise
- Voice is more authentic
- Less time lost to "middle men" and approvals
- Provides additional coverage and support for the lead[10]
- Generates more content[10]
- Enables a broader range of times for content and message delivery[10]

Mini case study: NASA[1]

NASA is a recognized leader on social media, managing some 450 channels that range from corporate "flagship" accounts to accounts for individuals, missions and programs. It operates using a hub-and-spoke model, where two individuals – a social media manager and deputy social media manager – act as internal consultants and support others in the agency. They are responsible for strategic direction and ensuring social media supports the organizational goal of "telling the story of NASA".

The two social media managers support account managers, who are responsible for planning and carrying out the day-to-day maintenance of social media accounts. Account managers instigate new accounts. Each field centre (10 in total) has its own social media lead. The leads coordinate with the mission/project/program accounts at their centre. The social media leads also work with the social media managers to coordinate events, such as Google+ hangouts and NASA socials happening at the field centres. Public affairs officers post to the flagship accounts.

The social media managers provide internal support to leads via weekly teleconferences, a listserv, and ongoing internal dialogue.

Table 3: Summary of social media roles and responsibilities at NASA

Role	Responsibilities
(Deputy) social media manager (2)	Strategic direction; training; internal support; post to flagship accounts; receive requests for new accounts
Public affairs officer	Post to flagship accounts
Social media lead	Represent each field centre; coordinate all accounts at that centre
Account managers	Day-to-day maintenance of accounts; request new accounts

Mini case studies: Three Ontario public health units[3]

In 2013 three Ontario PHUs served as case studies to guide the creation of this toolkit. While each used a different management model, they had these aspects in common:

- A committee structure to guide development and implementation
- Allocated (designated) human resources
- Protocol and guidance documents

Get the full case studies and summary report at http://WDGPublicHealth.ca/?q=ldcp

Elgin St. Thomas Health Unit: a decentralized model with no formal communications department and an independent Board of Health
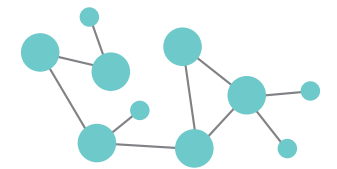
Table 4: Roles and Responsibilities at Elgin St. Thomas Health Unit

Role	Responsibilities
Overall management of social media	Not the responsibility of one specific department
Program staff	Create content
Intake lead	Monitors and responds to posts (or refers to **social media lead**); receives platform alerts; "likes" or follows community pages
Social media lead (and back-up)	Works with program staff to gather content; represents the program area on the social media committee; serves as resource for the **intake lead**
Social media lead	Screens all content before posting
Program manager	Approves content before posting
Program assistant (or back-up)	Posts content

Peel Public Health: a hub-and-spoke model within a regional government

In 2011, the Peel Family Health Division launched a Facebook page called Parenting in Peel, which they considered an extension of their service delivery. This page is a place where PHU staff members are available to answer questions and where parents support each other. The overall management model for social media at the Region of Peel is "evolving and holistic."[1]
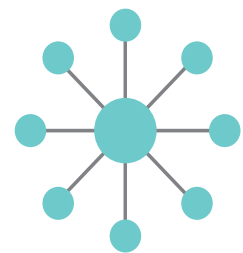
Table 5: Roles and Responsibilities at Peel Public Health

Role	Responsibilities
Overall management of Parenting in Peel social media	Shared among core team of professionals in the Family Health division.
Core team of 2.0 FTE (shared among PHNs, dietitian, health promotion officer)	• Daily management of page • Moderate the page during business hours • Develop content and respond • Dietitian posts weekly nutrition answers
Supervisor	Develop content and respond to fans
Breastfeeding and Family Health Contact Centre staff members	Consultant to core team
Digital Media Committee members	Consultant to core team
Public affairs associate	Consultant to core team
Guest posters from other division	(Monthly) Post content in their area of expertise
Overall accountability for social media use at the Region of Peel	Corporate Communications

Leeds, Grenville, and Lanark District Health Unit: a centralized model with a central communications (creative) department
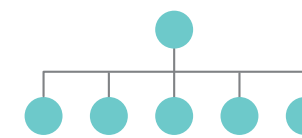
Table 6: Roles and Responsibilities at Leeds, Grenville, and Lanark District Health Unit

Role	Responsibilities
Creative/Communications Services	Overall responsibility for social media
Program staff	Work with **Creative Services** to discuss needs and develop content
Creative Services	Work with **program staff** to discuss needs and develop content. Post messages; monitor, respond, and interact.
Program leadership committee/senior management committee	Approved social media work plan

Time commitment and capacity

Social media needs to be attended to daily. Most PHUs monitor and update their social media accounts during business hours only, though several have after-hours monitoring in place via managers or social media coordinators.[27,1] How much hands-on time you spend managing social media depends on how much time you spend "listening", creating content and engaging in conversation; your goals and strategies; and the size of your organization.

- Some municipalities manage social media accounts with one or two staff members; others dedicate full-time staff or teams; others take an approach between these two extremes[25]
- Cameron Norman[10] suggests budgeting 45 minutes per day monitoring, seven days a week with three hours per week devoted to message development and evaluation[10]
- Check in multiple times daily[10]

> **Tip**
>
> Gauge the amount of time and resources required at your agency via a fixed-term pilot project.

Identifying the time needed to manage social media is difficult to measure and depends on many factors:

- Anticipated longevity of the account (a campaign may be more time-intensive for a short period when preparing messages in advance of a campaign)
- Number of people contributing/management model (influences the demand on each person)
- Level of engagement (depends on the platform and your strategy)
- Interests of target audience (hot topics and contests may drive a period of intense response)
- Platform used (see the CDC list of popular social media platforms and their relative time/cost commitments)

The time commitment per person will be higher in a centralized model than decentralized one. At 2013 levels of engagement, many PHUs were spending one to two hours per day attending to their social media accounts.[1] Peel Public Health, a PHU serving a large, urban population, dedicates 2.0 full-time equivalents (FTE) to daily operation of their Parenting in Peel Facebook page.[1]

Further reading

The State of Social Business 2013: The Maturing of Social Media[15]

Set up a platform and manage accounts

Your social media policy or guidelines should spell out:

- Who is authorized to create accounts and for what purposes
- Who can be "friended" or "followed" on an account
- Where the password and username need to be logged or stored
- What happens if the person running the account leaves the organization
- Whether employees are allowed, expected, or encouraged to use their personal social media accounts and technology (e.g., smartphones) for business purposes.
- The "tone"

Some PHUs use personal "professional" accounts on social media where staff members create an account using their real name and position but limit activity on that account to approved work purposes.[1] Others use shared corporate accounts only. Which approach you use will depend on your organization's policy and what is appropriate on the platform used.

Check in with any professional associations represented at your PHU. Members of registered professions may have to follow particular rules put out by their college; for example, signing each post on a generic account with the poster's initials and credentials.

Terms of use

The terms of use or disclaimer statement tells your users what to expect from interacting with your page. It could include:

- What type of advice or responses users can expect to receive
- What type of behaviour is appropriate and when comments will be deleted
- How to get in touch for urgent issues
- Definition of terms
- Privacy information
- Legal disclaimer around content of the page and advertisements

Humanize your brand. Engaging and displaying human avatars changed sentiment from 65% negative towards QuickBooks to only 35% negative.

–HOW TO: Deal With Negative Online Sentiment About Your Brand, Mashable.com

Examples:

- CDC Social Media Public Comment Policy[48]
- NCHHSTP Social Media Policy[49]
- Parenting in Peel Facebook Legal Disclaimer and Privacy Policy[50]
- Public Health Agency of Canada Facebook Terms of Use[51]
- Public Health England (PHE) Facebook Page Guidelines[52]

Facilitating access to accounts

Some PHUs block access to social media. This approach limits the opportunities for social media, puts a heavy load on the individual who does have access, makes a genuine conversation difficult and limits the ability to respond in a timely fashion.

Checklist for setting up a new platform

✓ Account information is logged and shared as per policy

✓ Personal information (name, position/role, credentials) are shared as per policy and college requirements

✓ Privacy, IT, Communications, Records Management, Management consulted

✓ Risks identified and discussed

✓ Disclaimer statement approved by management/legal (as needed) and posted

✓ Terms of Use statement approved and posted

✓ Platform is branded to agency standards

✓ Launch and maintenance plans approved and ready to implement

Best practice tips:

• Choose a handle (username) that resembles your company name as closely as possible. It will make it easier for clients to find you.[53]

• List your phone number, email address (or contact form), and full website address on all your social media accounts in a visible spot (preferably on "bio" or "about" page).

Choose a dashboard

Using a social media dashboard facilitates:

• Dividing the workload

• Scheduling posts

• Gathering metrics

• Keeping records

There are several social media dashboards available. Some organize a specific platform such as Twitter (SocialBro[54] and TweetDeck[55]); others, multiple platforms (e.g., Sysomos[56] and HootSuite[57]).

HootSuite

HootSuite is a tool that allows an organization to connect to multiple social platforms all from one website. It shows information from your accounts on these platforms in real-time and allows you to post messages to those accounts immediately or schedule them for later. Messages can be scheduled for one account or several, saving time. Analytics (retweets, clicks, etc.) are available, as shown in the screen shots below.

Screenshots from the North Bay Parry Sound District Health Unit HootSuite account

Three streams: wall posts, events, scheduled content
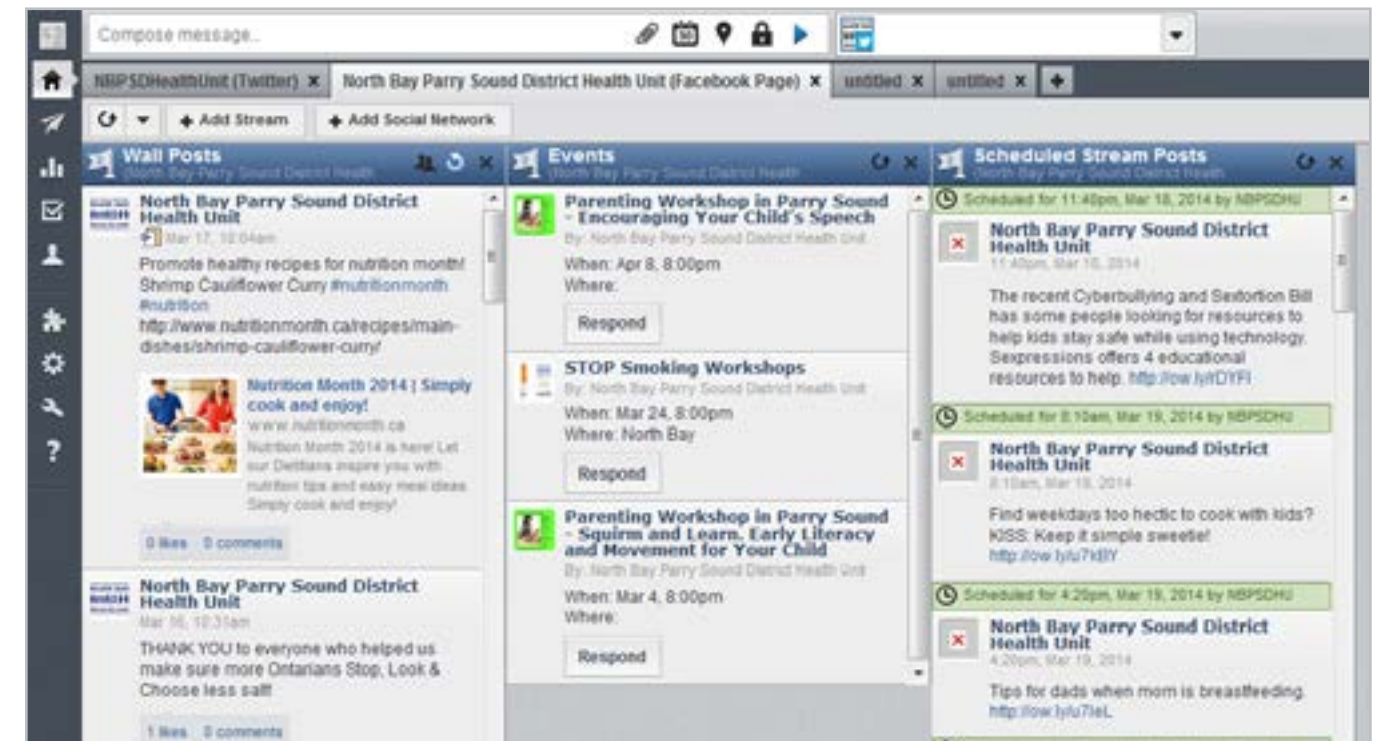
Twitter only: five streams (Home Feeds, Mentions, Direct Messages, Sent & Scheduled)

Reproduced with permission from North Bay Parry Sound District Health Unit.

Manage content

Social media is about creating a conversation, which necessitates a new way of thinking for many organizations. For PHUs, two common challenges with this new way of thinking have been identified[1]:

- Staff confidence using social media
- Responding to the public

Strategies used to overcome these challenges include:

- Training or in-service education specific to the platforms you'll use (see Training section above)
- Thinking of a two-way conversation as an opportunity to listen and educate. Acknowledging the public may have their own opinions and don't necessary follow your agenda.
- Giving staff approval to independently manage social media platforms.
- Planning to deal with issues that could arise, but resisting the urge to jump in at every small flare-up. Several PHUs using social media found their initial concerns unfounded.[1]
- See Appendix E – Daily Flow: Managing a Facebook Page, used with permission from Hamilton.

> A study of how 253 major brands use Twitter found the average number of tweets sent per week to be 30.[53]

Write for social media

Social media is consumed in snippets – people scan, jump around, and make quick decisions about what is worth their time to click, read or watch. It's also visual, relying on images and videos to tell part (or all) of the story. When writing for social media, don't simply copy and paste from other media.

Matching your writing style to the platform and audience takes time and practice. The CDC has a comprehensive guide to writing for social media.[58]

Key points[58]:

- In general, use a friendly tone. Be casual but professional.
- Know your audience: the language they use; where and when they're online.
- Know your platform (and learn directly from the source: best practices are often available directly from the source or platform itself. See Twitter 101[59]; Facebook for Business[60]; YouTube Education[61]; Pinterest for Business[62]).
- Get to the point – tell people what you want them to do.
- Use plain language and active voice.
- Leave room for others to add to your message – don't use the maximum number of characters.
- Include links to more information (pictures, videos, web pages).

Sample screenshot from the Halton Parents Twitter account:

HaltonParents @haltonparents · Nov 20
Loved hearing #LandonPearson talking about every child's Right to Play @OurKidsNetwork #oknamd; ow.ly/r1cqZ ^mh
Expand   ← Reply   ⇄ Retweet   ★ Favorite   ••• More   HootSuite

Strategies to get comfortable using this new "language":

- Pilot social media platforms with staff, allowing (or encouraging!) staff members to practise posting in a safe environment.
- Listen before you talk: read what others are saying before jumping into the conversation. Note their tone and language.
- Don't use jargon or short-hand, unless you're well-versed in it. Stay professional. To do otherwise comes across as inauthentic.
- Don't repeat your advertising messages.

Social media users like to be immersed; to experience things rather than just read a story.[1] –NASA

Consider accessibility

PHUs must comply with the requirements set out in the Accessibility for Ontarians with Disabilities Act (AODA),[63] including the Information and Communications Standard.

When it comes to social media, the following guidance applies[64]:

- The accessible format and communications support requirement applies to information that an organization **controls** – either directly or indirectly through contractual relationships.
- We have control of information we post on social media sites, so we may be asked to provide it in an accessible format.
- We are not required to restrict our use of social media sites to those that comply with accessibility standards.

Tips for accessible social media content[65]:

- Use plain language.
- Spell out acronyms in full the first time, when space allows, unless the acronym is well-known and sounds the same when we speak it as it's intended to sound (e.g., NASA).
- Use CamelCase (capitalizing the first letter of each word) for multi-word hashtags.
- Place hashtags and @mentions (a public mention of someone else's username) at the end of a message.

For audio, photos and video:

- Always link back to the original video with a full caption/transcript.
- Close-caption all videos. YouTube has a feature that will automatically do this.

Put the following prefixes before posts or tweets that have photos, videos or audio. This allows people using screen readers to know what to expect before it's read out loud. The uppercase formats are for further clarity to sighted users.

- Photos: [PIC]
- Videos: [VIDEO]
- Audio: [AUDIO]

Further reading

- Presentation: Towards an Accessible Ontario: Requirements for Public Health Units under the Accessibility for Ontarians with Disabilities Act (AODA)[64]
- Improving the Accessibility of Social Media in Government[66]
- HowTo.gov checklists[67]

Listen first, ask questions later

Listening or "lurking" is a good first step to get started on social media. Follow key organizations or individuals relating to your account (e.g., local healthcare organizations, WHO, PHAC). Get a feel for the tone they use and what their audience is saying.

Advanced tip

Tools are available to automate social media monitoring. Some dashboards (e.g., HootSuite[57]) let you save a listening "stream" for various topics. Streams are updated automatically and regularly. A stream can contain a search for a specific term (e.g., "MERS-CoV") or a hashtag (e.g., #MERS).

Generate ideas

When you start out on social media it might feel like you're talking to yourself. To build a following, focus on providing valuable information. Ask questions and respond to any questions you receive in a timely fashion. Post regularly to keep your followers engaged and thinking about your organization.

Stuck for ideas? Seek out what's valuable to your readers in activities your PHU is already doing.

For example:

- Pull out useful messages from current campaigns
- Connect your services to current events (e.g., holidays, celebrity events, the newest Time magazine cover)
- Ask a question ("What did you learn as a new parent that you wish someone had told you?")
- Answer a question received through other channels (e.g., call centre)
- Promote a contest
- Highlight new resources (offline or on your website)
- Repackage website content
- Ask people to subscribe to your newsletter or follow your other social media channels
- Spread the word about coming events (e.g., breastfeeding flash mob, holiday office closures)
- Alert job-seekers to your current postings
- Link to or post a photo, video or infographic (make sure you have the appropriate permissions before posting something to your account)
- Cover events
- Retweet partner messages
- Emergency communications

Health-related social media platforms that set a good example:

- #hcsmca (Health Care Social Media Canada)[69]
- National Public Radio Public Health blog[70]
- Top 30 Public Health blogs of 2012[71]

Quick and dirty idea generators:

- How a trash removal company's blog makes junk interesting[72]
- 7 ways to whip up blog posts – fast[73]
- 17 types of content people love to share[74]
- 20 content ideas readers love[75]

Tips

- Consider content part of your social media strategy. The type of information you post should relate to your goals: do you want to be seen as a trusted source of public health information? Are you using social media to forge relationships? Or are you hoping to reach a certain population about a certain topic – beach postings, for example?
- Join in on conversations happening on other channels. Create conversations where they're happening now.
- Once the ideas are flowing, capture them in an editorial calendar.

Move from broadcast to engagement

There is no shortage of research nor advice around how to increase your following on social media. Check out websites like ragan.com[76] and Mashable[77] for the latest.

Peel Public Health staff use a variety of engagement strategies to build the fan base of their Parenting in Peel Facebook page,[78] such as[3]:

- Contests
- Polls
- Advertising
- Direct calls to action such as "like this post"
- Themed subject matter

See also: Promoting your social media channels on page 53.

Asking followers to "like" a post on Facebook can increase interaction from 0.11% to 0.38%. Asking users to "comment" leads to a 0.14% increase.[79]

– Ragan.com, How to get 216 percent more interaction on your Facebook page, 2011

Plan for surveillance, outbreak management and emergency response

Despite the fact that H1N1 drove many PHUs to use social media in the first place, leveraging it for disease surveillance, outbreak management, and emergency response is not common practice.[1] Similarly, although social media activity spikes in emergency situations, relatively few Ontario municipalities have the capacity to use social media in a crisis.[25]

The City of Hamilton – Public Health Services leveraged the City's substantial Twitter following to track down possible contacts during a Red Measles outbreak.

Retweeted by PublicHealth Library
City of Hamilton @cityofhamilton · Aug 26
Additional exposure sites released for #HamOnt Measles case. If concerned, please call Public Health at 905-546-2063. bit.ly/13TKFGh

Collapse   Reply   Retweet   Favorite   More   HootSuite

RETWEETS
9

3:05 PM - 26 Aug 2013 · Details

Use a social media management dashboard to track key terms related to emergency/disaster in your area.

As you integrate social media into your emergency response plans, consider how it can help you[80,81]:

- Find out what's going on at "ground zero" and identify areas of urgent need
- Monitor and correct misinformation in real time
- Predict where outbreaks will happen next
- Connect employees or clients cut off from other means of communication
- Identify and trace disease contacts
- Get emergency messages out quickly and directly
- Mobilize partners
- Mine data
- Build trust and confidence with your audiences

Further reading

- CDC Emergency Preparedness and Response: Social Media[83]
- Health and Safety Watch[84] ("health and safety information anytime, anywhere")
- Healthmap.org[85] (a program that curates various sources of health information, including social media sites, for clues to emerging threats to public health)
- The rise of the digital epidemiologist: Using big data to track outbreaks and disasters[86] (Financial Post, August 10, 2013)
- CDC's Zombie Watch[87] emergency preparedness social media campaign

Use social media for human resources

The cornerstone of public health is the quality of its workforce.[88]
–Ontario Public Health Standards, 2008, p. 14

Why include HR in your social media strategy?

- To target, seek out, or attract candidates with unique qualifications
- To optimize job postings for search and sharing
- Employees can easily share openings with their networks
- Easy analysis of metrics
- Cost-effective versus print

Potential challenges to consider:

- Legal restrictions around privacy and background checks
- Internal policies versus social media reality (e.g., will successful candidates announce they've accepted a position before you've informed the unsuccessful candidates?)
- Employee policy around personal versus professional use
- Resources required to maintain an up-to-date company presence on social networking sites

LinkedIn (a social networking site for professionals) has 8 million members in Canada.[89]

Manage records

Establishing a system to manage a record of your agency's social media interactions is important for security, accountability, platform maintenance and evaluation reasons. What records you keep depends on your individual organization. As identified by OACPH, Ontario PHUs employ a variety of strategies:

• Archive each transaction via email
• Log as nursing records
• Don't keep specific records

Consider:

• Your agency records management policy
• Legal requirements
• College requirements for charting or record-keeping

Table 7: Suggested Type and Format of Social Media Records

Type of record	Suggested format
Passwords and usernames for every platform, dashboard account and analytics program	Access to this record should be limited. Consider who requires access, who will keep it up-to-date, and where it should be kept.
Content and contributors	• Use an **editorial calendar** (created in a spreadsheet or Outlook calendar, for example) to schedule and organize posts. The calendar can be open to select or all staff across the organization (see Appendix F for examples). • Capture events, awareness weeks, and seasonal topics throughout the year • Content to be posted could include links, educational information, photos, videos or events
Interactions	• Capture in a spreadsheet (see Appendix G for sample templates) • Use built-in record-keeping features of platforms or dashboards (e.g., Twitter archive[90])

Promote your channels

If you build it…will they come? Not necessarily – it's time to let your audience know about your social media presence. On most platforms, when someone "follows" or "likes" your page/account, they will automatically start seeing the updates or items you post.

To boost the visibility of your online presence, try these strategies shared by your colleagues at Ontario PHUs[1,3]:

1. Connect all of the organization's social media platforms (e.g., include your Twitter handle on your Facebook page)
2. Place social media channel icons on your website (homepage and sub-pages, if possible)
3. Write a guest blog post or article for sites or newsletters that are popular with the target population
4. Promote social media channels to community partners and clients
5. Place social media channel icons and information on email signatures
6. Place social media channel icons and information on all promotional materials (posters, pamphlets, billboards, print/online ads, newsletters, etc.)
7. Include social media channel information on business cards
8. Include social media channel information on voicemail
9. Include links on media releases
10. Run a contest
11. Try a theme day (e.g., "Nutrition Mondays") with a guest expert
12. Pay for advertising on websites and social media sites (e.g., Facebook ads)
13. Use direct calls to action (e.g., "Share this post")
14. Start a poll or survey

> Nearly a third of PHUs see building relationships as a benefit of using social media.[1]

Engage with your audience

Social media is public. With screen shots, website caching (archiving), and the ability to save/download content, information posted to a social networking site should be regarded as permanent. A significant portion of PHUs have expressed trepidation over posting and responding on such a public medium, especially when the comments could reflect negatively on their organization.[1]

On the other hand, what PHUs say have been their most successful experiences with social media involved interaction and feedback. Many feel that being visible on social networking sites help the public see them as more **human** and **accessible**; not just a government organization.[1]

Several PHUs (as well as NASA) have indicated their initial concerns over "trolls" or negative messages were largely unfounded.[1] Those who have surmounted the anxiety around engaging in a public forum have provided the following tips:

- Give staff approval to independently manage social media platforms; think of it as a communication system, like talking on the phone
- Use social media as an opportunity to educate and inform
- Relinquish the need to follow the organizational agenda
- Don't jump in at every small flare-up; focus on listening
- Consider the value of social media beyond being a tool to disseminate data

Tips for monitoring and responding[17]:

- Monitor sites at least once a day
- Moderate, don't dictate. Engage with the people on the site, but don't try to be one of them
- Use monitoring tools to "listen" and keep track of comments and trends.
- Check links and friends' profiles regularly to ensure they're still within accepted guidelines

Triage comments and questions

One approach to moderating comments is creating a "decision tree" or rubric to guide monitoring and responding. Create a list of issues you anticipate encountering and a recommended action for each. Many Ontario PHUs have adapted the US Air Force Web Posting Response Assessment[91] for this purpose.

Types of responses include:

- Answering a question
- Showing support for a post/comment (includes "liking", "favouriting", and "retweeting")
- When to offer an unsolicited opinion or comment (including commenting on a blog post)
- Taking no action
- Being prepared to respond to a user in crisis

Dealing with negative comments

In most cases it is useful to try to respond rather than delete the comment; this helps to correct public misperceptions and show acceptance of opposing views.[17]

Unless they violate your Terms of Use, resist the urge to block, restrict, or moderate comments before they're posted. This violates the spirit of social media and will turn users off.

Responding and engaging

This algorithm (adapted from the US Air Force Web Posting Response Assessment[91]) works for social media sites you manage as well as those managed by others (e.g., your local newspaper's website). See Appendix H for full-size response tree samples.

Table 8: Algorithm for Assessing and Responding to Social Media Comments

Assess the comment/ question	Potential action if yes
Does it contain content of a crisis nature?	• Advise manager as soon as possible • Direct person to appropriate resources (e.g., local mental health crisis line)
Does it contain material that contravenes the Terms of Use or Disclaimer?	• Delete comment or if possible, edit it • Post a note explaining your actions (e.g., "This post has been edited/removed because it violated our Terms of Use".)
Does it contain sensitive or private (personal health) information?	• Ask the person to connect outside social media • If available on the platform, edit comment to remove identifying details • If comment is about someone else other than the poster, delete comment
Is the person asking for personal health advice?	• Ask the person to contact the PHU by phone
Is it a question?	• If the question relates to your area of expertise/ scope of practice/pre-approved responses, answer it • If the question requires follow-up from another program area, connect with the staff member responsible for the content (or manager) to respond • If answering the question will take longer than your standard response time, let the person know what action you're taking and when to expect a response

Is it a comment or complaint?	If it's positive or neutral:
	• Let it stand or thank/acknowledge the person
	
	If it's misguided (incorrect):
	  • Respond with factual information
	  • Provide evidence/references, if possible
	
	If it's negative:
	• Respond as quickly as possible
	• If this person is a troll, ignore them
	• If other community members have already responded, a response might not be needed
	• If it relates to bad client experience or complaint:
	  » Triage to customer service department and ask poster to connect outside social media to resolve, OR
	  » Thank the client for their feedback and outline the steps being taken to correct it
	• If none of the above, respond with a personalized answer or thank/acknowledge the posting

Adapted from The US Air Force Web Posting Response Assessment,[91] Eastern Ontario Health Unit Guidelines for Moderating and Responding to Comments and The City of Hamilton – Public Health Services Facebook Response Tree. See Appendix H.

Tips

- Responses should be clear, simple, and concise.
- Link to the appropriate PHU web page or other approved partner site (e.g., PHAC, Health Canada) or phone number (e.g., intake line).
- Refer often to your Terms of Use for guidance.

What to "Like" or "Follow"

Consider including guidance in your social media documents (policy, guidelines or process) around when to connect with or "follow" another person or organization. This information is generally public on your profile page, as is the number of accounts following you. The purpose of liking and linking is to engage with clients, build relationships, promote external services to meet client needs, and engage in a reciprocal promotional relationship with agencies that have similar goals.

For sites like Twitter and Facebook, content from the accounts you "like" or "follow" will display in your home news feed.

Some PHUs follow or like every person who follows them; others are more stringent. Connect this decision to your overall strategic plan or social media goals. If you decide to be selective about "following", consider including:

- Local, provincial or government agencies (other PHUs, Public Health Agency of Canada, Ontario Association of Public Health Librarians, etc.)
- Community partners or local non-profits
- Local committees or boards (e.g., city council)
- News media
- Bloggers and new media personalities (e.g., blog writers, curators, independent journalists)
- Health and public health organizations (e.g., WHO, local travel clinics, Bill & Melinda Gates Foundation)

"When public health units follow each other, the advantages are threefold: they receive instant updates on the other unit's activities, they can re-broadcast relevant messages to their clientele, and they can have their message re-broadcast for an exponential reach." [27]

–Newbold & Campos, 2011

When it comes to following individuals and **for-profit** businesses, consider whether they:

- Have a relevant or local scope
- Accept advertising
- Accept funding or direction from companies that don't align with your mandate (e.g., companies that aren't Baby-Friendly)
- Mislead users
- Sell products
- Accept funding or direction from religious or politically motivated organizations
- Otherwise violate your social media terms of use

Further reading

- How to Deal with Online Negative Sentiment About your Brand[93]
- US Air Force Web Posting Response Assessment[91]

Overcome challenges

Table 9: Facilitators to Overcome Challenges with Implementing Social Media

Challenge	Facilitator
Capacity	• Create and follow your management model. Spread out the workload among multiple people. • Check in more frequently, for shorter periods of time (consider using mobile devices or tools to facilitate this).[10] • Use tools to schedule posts and monitor accounts. • Share best practices internally and externally with trusted partners.
Responding to the public	• Use management-approved response matrix or decision tree to guide responses.
Staff confidence with social media	• Provide training and ongoing education; central or external support. • Establish safe environments to practise in. • Establish guidelines for "liking" and following.
Role of staff	• Include scenarios in policy to address staff concerns. • Incorporate guidelines from registered professions. • Generate excitement among all staff.
Social media technology	• Embed IT in the process. • Don't use technology your audience isn't using or can't access.
Need for guidance and evidence	• Frame social media work as policy rather than guidelines. • Pilot a project before determining whether it will exist long-term.[27]
Control	• Pilot a small-scale project. • Have management model and decision tree approved. • Use conversation as an opportunity to educate and inform.

Chapter Four: Evaluate Social Media

Evaluation is about taking stock of your progress and measuring success. It allows you to learn from and adapt to an ever-changing social media landscape.

The Ontario Public Health Standards (OPHS) reference working to a place where a PHU can evaluate its programs, services, approach and strategies. The principles of need, impact, capacity, partnership and collaboration that support the OPHS are intended to guide evaluation.[88]

In general, evaluation questions fall into five groups[29]:

Implementation: Were your program's activities put into place as originally intended?

Effectiveness: Is your program achieving the goals and objectives it was intended to accomplish?

Efficiency: Are your program's activities being produced with appropriate use of resources such as budget and staff time?

Cost-Effectiveness: Does the value or benefit of achieving your program's goals and objectives exceed the cost of producing them?

Attribution: Can progress on goals and objectives be shown to be related to your program, as opposed to other things that are going on at the same time?
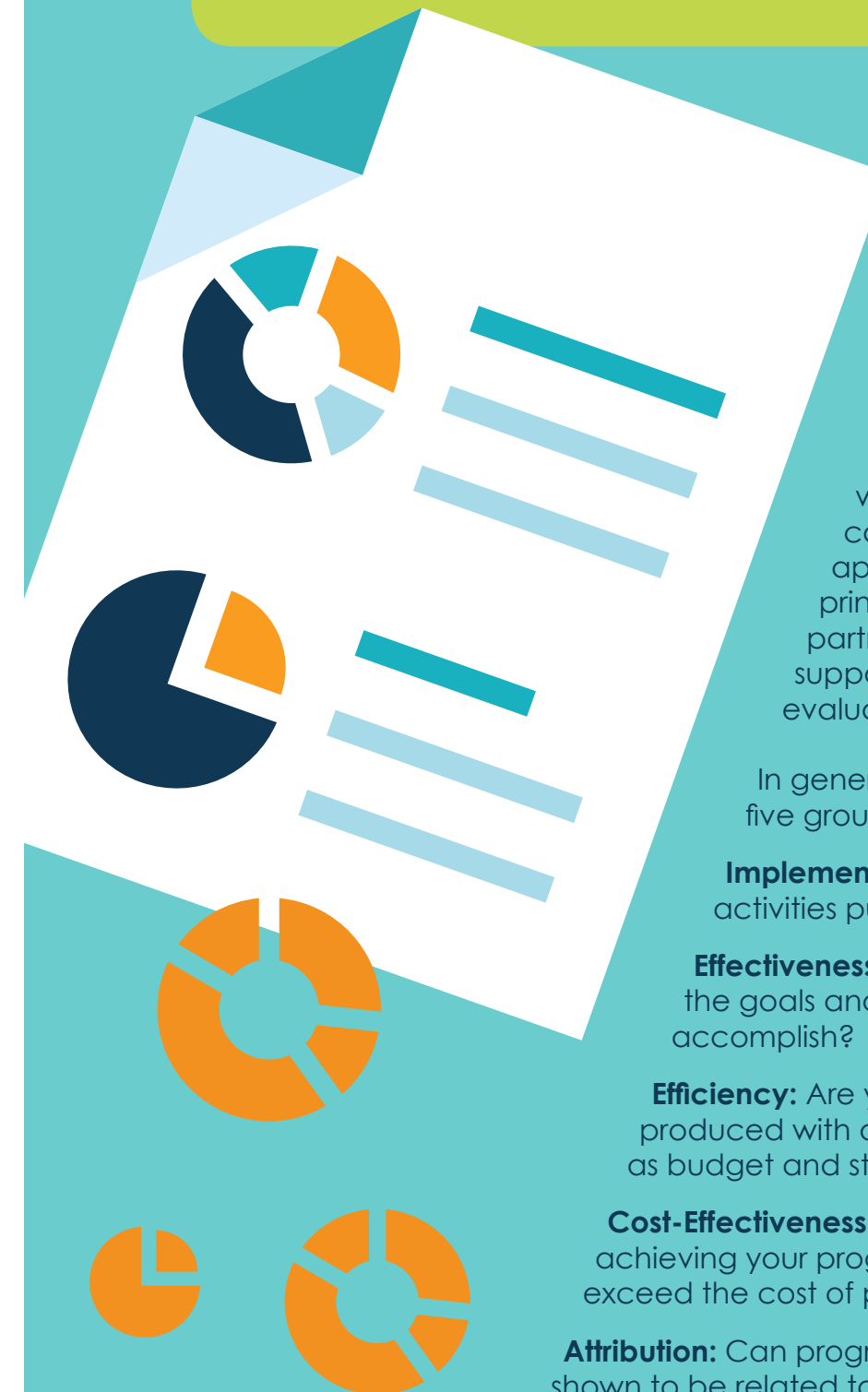
Opportunities stemming from evaluation include[94]:

- More effective distribution of critical information
- More responsive programs
- Better informed strategies

Evaluation strategies

What and how you measure should be associated with your goals and objectives[14] and can occur both online and offline. Evaluation can be qualitative or quantitative in nature.

> *"It takes effort to do social media engagement well, and we need to channel our time and resources effectively by using evidence-based approaches."*[13]
>
> *–Burnett Heldman et al., 2013*

For example, if you run a Facebook page for new moms and one of your goals is to increase acceptance of breastfeeding past six months, you may need to qualitatively analyze the content of conversations or posts. On the other hand, if your goal is to raise awareness of the health information phone line, you could evaluate via a survey or by call volume metrics.

Templates PHUs use to gather, track and analyze data are included as Appendix I.

Metrics: The most common measurements

A social media metric is any single variable (such as a "Tweet") that can be measured. Some platforms have built-in dashboards that summarize metrics.

The US Federal government suggests seven metrics categories that can be analyzed on any platform.[94] Which of these you choose to focus on depends on your strategic goals; for example, if building a community is your goal, you're likely to focus on numbers 3, 4, and 5.

Most PHUs recognize the benefits of evaluating but consider their current approach less than optimal.

Among PHUs using social media:[1]

- Three-quarters use metrics such as hits, followers and retweets
- One-third use tools like HootSuite[57], SocialBro[54] or Sysomos[56] to generate deeper analytics

Table 10: Social Media Evaluation Metrics and Measurements[94]

Metric	Examples of what to measure
1. Breadth (community size, growth)	Fans, reach, followers, subscribers, community members
2. Depth (conversations, viewing)	Conversions (volume of desired actions; e.g., clicks), views, minutes watched, top videos/stories
3. Direct engagement (interaction, volume, responsiveness)	Questions answered, response time, most engaging content, fan mentions, shares, engagements/contributions, likes, followers, time of day leading to most responses
4. Loyalty (return community)	Return users, unique visitors
5. Customer experience (sentiment, indicators, survey feedback)	Sentiment (positive, negative, or neutral tone of comments), top keywords/hashtags, satisfaction survey, feedback survey, demographic information survey
6. Campaigns	Combine appropriate metrics based on the platform and goal (e.g., for a Twitter chat, track hashtag uses, sentiment, volume)
7. Strategic outcomes	Combine appropriate metrics based on the platform and goal (e.g., if goal is to improve customer service, track engagement responsiveness, survey feedback, number of calls to PHU call centre)

Further reading

- CDC Evaluation Worksheet[9]
- CDC Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide[29]
- Web Analytics 101: Definitions: Goals, Metrics, KPIs, Dimensions, Targets[96]
- Social Media Metrics for Federal Agencies[94]
- #SMMStandards[14]
- Digital Analytics Association[97]

How to gather information

From a health promotion perspective, consider engagement as central to outcomes such as increased awareness, knowledge, connection and involvement.[95]

- Conduct a survey with employees who are implementing social media to understand their perspective (employee engagement evaluation)
- Conduct a feedback survey with communities connected by social media (e.g., Facebook fans)
- Use tools (built into the platform or external) or count/capture manually. Many PHUs use management and analytic tools such as HootSuite,[57] SocialBro[54] or Sysomos.[56,1] See Appendix I for sample templates

Studies on social media affecting behaviour change are heterogeneous and ongoing.[2] Keep in mind there are many benefits to engaging on social media besides behaviour change.

> **Advanced tip**
>
> Qualitative means can also be used to analyze conversations and themes.

Social media resources: Stay up-to-date

Other toolkits

- Air Force Social Media Guide, 4th edition[98]
- Social Media at CDC[99]
- CDC's Guide to Writing for Social Media[58]
- CDC Health Communication Science Digest[100] (Published monthly)
- CDC Health Communicator's Social Media Toolkit[9]
- Government of New Zealand's Social Media in Government: Hands-on Toolbox[101]
- HowTo.gov: Helping agencies deliver a great customer experience[65]
- Victoria State Government ICT Strategy[92]

References

1. Brankley L, Davies J. Environmental scan of social media at Ontario Public Health Units [Internet]. 2013 [updated 2013 Oct; cited 2014 Feb 10]. Available from: www.wdgpublichealth.ca/?q=ldcp

2. Davies J, Brankley L, Williams M, Mai D, McColl K, Dhaliwal M, Williams M, Mai D, McColl K. Literature review: analyzing the effectiveness of social media planning, implementation and evaluation at health units in Ontario [Internet]. 2013 [updated 2013 Oct; cited 2014 Feb 10]. Available from: www.wdgpublichealth.ca/?q=ldcp

3. Bergeron K, Davies J, Hahn S, Brankley L, Dhaliwal M, Williams M, Mai D, McColl K. Case study: the adoption of social media at three Ontario public health units [Internet]. 2013 [updated 2013 Sept; cited 2014 Feb 10]. Available from: www.wdgpublichealth.ca/?q=ldcp

4. Ontario Public Health Libraries Association (OPHLA). OPHLA Public Health Grey Literature Sources [Internet]. 2007 [updated 2007 Sept; cited 2014 Feb 10]. Available from: www.ophla.ca/pdf/Public%20Health%20Grey%20Literature%20Sources.pdf

5. Ontario Public Health Libraries Association (OPHLA). Public health grey literature database [Internet]. 2013 [updated 2013 Dec; cited 2014 Feb 10]. Available from: http://ophla.pbworks.com/w/page/35497970/Public%20Health%20Grey%20Literature%20Database%3A%20Overview

6. Ontario Public Health Libraries Association (OPHLA). Custom Search Engine for Canadian Public Health Information [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.ophla.ca/customsearchcanada.htm

7. Ontario Public Health Libraries Association (OPHLA). Custom Search Engine for Ontario Public Health Unit Websites [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.ophla.ca/customsearch.htm

8. Ontario Association of Communicators in Public Health (OACPH). Ontario Association of Communicators in Public Health [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.healthunit.org/oacph/

9. Centers for Disease Control and Prevention (CDC). The Health Communicator's Social Media Toolkit [Internet]. 2011 [updated 2011 July; cited 2014 Feb 10]. Available from: www.cdc.gov/socialmedia/tools/guidelines/pdf/socialmediatoolkit_bm.pdf

10. Norman C. Developing a social media strategy [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.ptcc-cfc.on.ca/common/pages/UserFile.aspx?fileId=119863

11. Keelan J. Social media for public health communications [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Events/Documents/Social_Media_for_Public_Health_Communications.pdf

12. Moorhead SA, Hazlett DE, Harrison L, Carroll JK, Irwin A, Hoving C. A new dimension of health care: systematic review of the uses, benefits, and limitations of social media for health communication. Journal of Medical Internet Research [Internet]. 2013 [cited 2014 Feb 10]; 15(4). Available from: www.jmir.org/2013/4/e8

13. Burnett Heldman A, Schindelar J, Weaver J. Social media engagement and public heath communication: implications for public health organizations being truly "social". Public Health Reviews [Internet]. 2013 [cited 2014 Feb 10]; 35(1): 1-18. Available from: www.publichealthreviews.eu/upload/pdf_files/13/00_Heldman.pdf

14. #SMMStandards. A cross-industry effort to simplify and unify the measurement of social media [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.smmstandards.com

15. Altimeter Group. The state of social business 2013: the maturing of social media into social business [Internet]. 2013 [updated 2013 Oct 15; cited 2014 Feb 10]. Available from: www.altimetergroup.com/research/reports/the_state_of_social_business_2013

16. Neiger BL, Thackeray R, Van Wagenen SA, Hanson CL, West JH, Barnes MD, et al. Use of social media in health promotion: Purposes, key performance indicators, and evaluation metrics. Health Promotion Practice [Internet]. 2012 [updated 2013 Oct 15; cited 2014 Feb 10]; 13 (2), 159-164.

17. Lura Consulting. Simcoe Muskoka District Health Unit social media plan: Best practices overview [Internet]. 2010 [updated 2010 Dec; cited 2014 Feb 10]. Available from: http://dvqlxo2m2q99q.cloudfront.net/000_clients/53739/file/smdhu-social-media-plan-best-practices-overview.pdf

18. Centers for Disease Control and Prevention (CDC). Social Media Security Mitigations [Internet]. 2009 [updated 2009 Dec 3; cited 2014 Feb 10]. Available from: www.cdc.gov/socialmedia/tools/guidelines/pdf/securitymitigations.pdf

19. State Government of Australia. What's the difference between policies and procedures? [Internet]. 2012 [updated 2012 Dec 27; cited 2014 Feb 10]. Available from: www.volunteer.vic.gov.au/toolkit-for-volunteer-organisations/manage-your-organisation/policies-and-procedures/whats-the-difference-between-a-policy-and-a-procedure

20. College of Dietitians of Ontario (CDO). Pause before you post: Social media awareness [Internet]. 2014 [updated 2014 Feb 04; cited 2014 Feb 10]. Available from: www.cdo.on.ca/en/pdf/publications/resume/resumesummer13-Eng.pdf#page=10

21. College of Nurses of Ontario (CNO). Social media: Reflect before you post [Internet]. 2013 [updated 2013 Sept 30; cited 2014 Feb 10]. Available from: www.cno.org/news/2013/09/new-social-media-webcast

22. College of Physicians and Surgeons of Ontario (CPSO). Social media appropriate use by physicians [Internet]. 2013 [updated 2013 May; cited 2014 Feb 10]. Available from: www.cpso.on.ca/policies/positions/default.aspx?id=7874

23. Spector N, Kappel D.M. Guidelines for using electronic and social media: The regulatory perspective. The Online Journal of Issues in Nursing [Internet]. 2012 [updated 2012 Sept 30; cited 2014 Feb 10]; 17 (3). Available from: www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-17-2012/No3-Sept-2012/Guidelines-for-Electronic-and-Social-Media.html

24. HR Council. Hrcouncil.ca [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://hrcouncil.ca

25. Redbrick Communications. Ontario municipalities: Who's on social media? Spring 2013 Edition [Internet]. 2013 [updated 2013 May; cited 2014 Feb 10]. Available from: www.redbrick.ca/resources.asp

26. Social Media Subcouncil. Web 2.0 Governance Policies and Best Practices [Internet]. 2012 [2014 Feb 10]. Available from: http://govsocmed.pbworks.com/w/page/15060450/Web%202%200%20Governance%20Policies%20and%20Best%20Practices

27. Newbold B, Campos S. Media and social media in public health messages: A systemic review [Internet]. 2011 [updated 2011 Dec; cited 2014 Feb 10]. Available from: www.mcmaster.ca/mieh/documents/publications/Social%20Media%20Report.pdf

28. Rosa S. Developing a social engagement strategy [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Events/Documents/SocialEngagementWebinar_2013.pdf

29. Centers for Disease Control and Prevention (CDC). Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide [Internet]. 2011 [updated 2011 Oct; cited 2014 Feb 10]. Available from: www.cdc.gov/eval/guide/CDCEvalManual.pdf

30. Schein R, Wilson K, Keelen J. Literature review on effectiveness of the use of social media: A report for Peel Public Health [Internet]. 2010 [cited 2014 Feb 10]. Available from: www.peelregion.ca/health/resources/pdf/socialmedia.pdf

31. Norman C, Muzamdar P. How can social media support knowledge exchange on the social determinants of health? [Internet]. 2013 [updated 2013 Nov 03; cited 2014 Feb 10]. Available from: nccdh.ca/blog/entry/SDH-social-media-blog3

32. Public Health Ontario (PHO). Public Health Ontario Events [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Events/Pages/default.aspx

33. The Ontario Public Health Convention (TOPHC). The Ontario Public Health Convention [Internet]. 2014. Available from: www.tophc.ca/Pages/home.aspx

34. Association of Local Public Health Agencies (alPHa). The Association of Local Public Health Agencies [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.alphaweb.org

35. Sheela Basrur Centre. The Sheela Basrur Centre [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.sheelabasrurcentre.ca/index.html

36. Ipsos Reid. Media, Content & Technology Research [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.ipsos.ca/en/research/media-content-technology

37. ComScore. Insights [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.comscore.com/Insights

38. The Cochrane Collaboration. Cochrane Reviews [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.cochrane.org/cochrane-reviews

39. The Conference Board of Canada. Measuring Innovation Activities [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.conferenceboard.ca

40. Pew Research Center. Pew Internet & American Life Project [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://pewinternet.org

41. Rosa S. Overview of social media in public health context [Internet]. 2013 [updated 2013 June 13; cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Events/Pages/Seminar-Overview-of-social-media-in-public-health-context.aspx#.UqowDPRDuXB

42. Norman C. Social media and health promotion. Global Health Promotion [Internet]. 2012 [cited 2014 Feb 10]; 19(3): 3-6. Available from: http://ped.sagepub.com/content/19/4/3.full.pdf+html

43. Program Training and Consultation Centre (PTCC). Webinars [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.ptcc-cfc.on.ca/cms/one.aspx?objectId=101859&contextId=97833

44. Public Health Ontario (PHO). Learning & Development [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Pages/default.aspx#.UpSwV9l3uxr

45. Neher K. Building a social media training program for your organization in 7 steps [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.slideshare.net/kristaneher/7-steps-to-building-a-social-media-training-program

46. Digital Insights. Infographic: Social media stats 2013 [Internet]. 2013 [updated 2013 Nov 14; cited 2014 Feb 10]. Available from: www.digitalbuzzblog.com/infographic-social-media-stats-2013

47. Johnson N. The state of corporate social media [Internet]. 2013 [cited 2014 Feb 10]. Available from: http://events.usefulsocialmedia.com/state-of-csm-2013.pdf

48. Centers for Disease Control and Prevention (CDC). Social Media Public Comment Policy [Internet]. 2014 [updated 2014 Jan 22; cited 2014 Feb 10]. Available from: www.cdc.gov/SocialMedia/Tools/CommentPolicy.html

49. Centers for Disease Control and Prevention (CDC). NCHHSTP Social Media Policy [Internet]. 2013 [updated 2013 July 19; cited 2014 Feb 10]. Available from: www.cdc.gov/nchhstp/Social-Media-Policy.htm

50. Region of Peel Public Health. Parenting in Peel Facebook page: Legal Disclaimer and Privacy Policy [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.facebook.com/parentinginpeel/app_190322544333196

51. Public Health Agency of Canada (PHAC). Public Health Agency of Canada Facebook Terms of Use [Internet]. 2012 [updated 2012 Dec 11; cited 2014 Feb 10]. Available from: www.facebook.com/notes/public-health-agency-of-canada/public-health-agency-of-canada-facebook-terms-of-use/10151359477684245

52. Public Health England (PHE). Public Health England (PHE) Facebook Page Guidelines [Internet]. 2012 [updated 2012 Aug 16; cited 2014 Feb 10]. Available from: www.facebook.com/notes/public-health-england/public-health-england-phe-facebook-page-guidelines/424687764235245

53. Brandwatch. Report/Brands on Twitter/2013 [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.brandwatch.com/report-brands-on-twitter-2013

54. SocialBro. SocialBro: Enabling Twitter for business [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.socialbro.com

55. TweetDeck [Internet]. 2014 [cited 2014 Feb 10]. Available from: https://about.twitter.com/products/tweetdeck

56. Sysomos [Internet]. 2014 [cited Feb 10]. Available from: www.sysomos.com

57. HootSuite [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://signup.hootsuite.com/pro-ent/?mkwid=snZXWgRfK_dc&pcrid=36197144254&pkw=hootsuite&pmt=e&gclid=CPSAyL_kxLwCFY1cMgode3kAZQ

58. Centers for Disease Control and Prevention (CDC). CDC's Guide to Writing for Social Media [Internet]. 2012 [updated 2012 Apr; cited 2014 Feb 10]. Available from: www.cdc.gov/socialmedia/tools/guidelines/pdf/GuidetoWritingforSocialMedia.pdf

59. Twitter. Twitter 101: An essential intro to our powerful platform [Internet]. 2014 [cited 2014 Feb 10]. Available from: https://business.twitter.com/twitter-101

60. Facebook. Facebook for Business [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.facebook.com/business/overview

61. YouTube. YouTube Education [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.youtube.com/yt/creators/education.html

62. Pinterest. Pinterest for Business [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://business.pinterest.com

63. Accessibility for Ontarians with Disabilities Act (AODA). Accessibility for Ontarians with Disabilities Act [Internet]. 2009 [cited 2014 Feb 10]. Available from: www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_05a11_e.htm

64. Association of Local Public Health Agencies (alPHa). Towards an accessible Ontario: Requirements for Public Health Units under the Accessibility for Ontarians with Disabilities Act (AODA) [Internet]. 2012 [updated 2012 Mar 09; cited 2014 Feb 10]. Available from: http://c.ymcdn.com/sites/www.alphaweb.org/resource/collection/9221E880-473D-46C9-A428-F4F1A67305F8/alPHa_Presentation_Accessible_Ont_090312.pdf

65. HowTo.gov. How to make videos accessible [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.howto.gov

66. HowTo.gov. Improving the accessibility of social media in government [Internet]. 2013 [updated 2013 Apr 23; cited 2014 Feb 10]. Available from: www.howto.gov/social-media/using-social-media-in-government/improving-accessibility#part-1

67. HowTo.gov. Checklists [Internet]. 2013 [updated 2013 Aug 08; cited 2014 Feb 10]. Available from: www.howto.gov/services-tools/checklist

68. MacPhail W. The new conversation: rethinking your message for the social web [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.tophc.ca/Documents/TOPHC%202013%20Presentations/Public%20Health%20Ontario%20Talk%20-%20Wayne%20McPhail.pdf

69. Health Care Social Media Canada. #hcsmca [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://cyhealthcommunications.wordpress.com

70. Public health. 2014 [cited 2014 Feb 10]. In: National Public Radio Public Health blog. Available from: www.npr.org/blogs/health/133188449/public-health

71. Top 30 Public Health blogs of 2012. 2013 Mar 26 [cited 2014 Feb 10]. In: The Best Public Health Schools. Available from: www.bestpublichealthschools.org/top-30-public-health-blogs-of-2012

72. Scott DM. How a trash removal company's blog makes junk interesting [Internet]. 2012 [updated 2012 Dec 17; cited 2014 Feb 10]. Available from: www.ragan.com/Main/Articles/45946.aspx

73. Stewart J. 7 ways to whip up blog posts – fast [Internet]. 2013 [updated 2013 Jan 25; cited 2014 Feb 10]. Available from: www.ragan.com/Main/Articles/46121.aspx

74. Bullas J. 17 types of content people love to share [Internet]. 2013 [updated 2013 Apr 24; cited 2014 Feb 10]. Available from: www.ragan.com/Main/Articles/46572.aspx

75. Bullas J. 20 content ideas readers love [Internet]. 2013 [updated 2013 Jan 16; 2014 Feb 10]. Available from: www.ragan.com/Main/Articles/46056.aspx

76. Ragan. Social media [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.ragan.com/SocialMedia/SocialMedia.aspx

77. Mashable. Social Media [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://mashable.com/social-media

78. Region of Peel Public Health. Parenting in Peel Facebook page [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.facebook.com/parentinginpeel

79. How to get 216 percent more interaction on your Facebook page [Internet]. 2011 [Updated 2011 July 27; cited 2014 Feb 10]. Available from: www.ragan.com/Main/Articles/43363.aspx

80. Davies, J. Social media tech talk: What's out there for outbreaks, Part 1 [Internet]. 2013 [cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Events/Documents/2013%2009%2019%20Social%20media%20tech%20talk%20part%201%20What%27s%20out%20there%20for%20outbreaks%20Jill%20Davies%20Sept%20%2019%202013%20ppt%20(Jill%20Davies).pdf

81. Paget E. Social media tech talk: What's out there for outbreaks, Part 2 [Internet]. 2013 [updated 2013 Sept 19; cited 2014 Feb 10]. Available from: www.publichealthontario.ca/en/LearningAndDevelopment/Events/Documents/Social%20Media%20Tech%20-%20What%27s%20out%20there%20for%20outbreaks%20-%20Part%202.pdf

82. Sofean M, Smith M. A real-time disease surveillance architecture using social networks. Studies in Health Technology and Informatics [Internet]. 2012 [updated 2012 Sept 17; cited 2014 Feb 10]; 180: 823-827. Available from: http://person.hst.aau.dk/ska/mie2012/AllPresentations/144.pdf

83. Centers for Disease Control and Prevention (CDC). Emergency Preparedness and Response: Social Media [Internet]. 2014 [updated 2014 Jan 29; cited 2014 Feb 10].

84. Health and Safety Watch. [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.healthandsafetywatch.com/Dashboard.aspx?AspxAutoDetectCookieSupport=1

85. Healthmap.org. Health map: Global health, local information [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.healthmap.org/en

86. Braga M. The rise of the digital epidemiologist: Using big data to track outbreaks and disasters. Financial Post [Internet]. 2013 Sept 10 [cited 2014 Feb 10]; Available from: http://business.financialpost.com/2013/09/10/the-rise-of-the-digital-epidemiologist-using-big-data-to-track-outbreaks-and-disasters/?__lsa=ab7c-fa3e

87. Centers for Disease Control and Prevention (CDC). Social media: Preparedness 101: Zombie apocalypse [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://emergency.cdc.gov/socialmedia/zombies.asp

88. Ministry of Health and Long-Term Care (MOHLTC). Ontario Public Health Standards [Internet]. 2008 [cited 2014 Feb 10]. Available from: www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/default.aspx

89. LinkedIn. About LinkedIn [Internet]. 2014 [cited 2014 Feb 10]. Available from: http://press.linkedin.com/about/?utm_source=pdf&utm_medium=ebook&utm_campaign=SM-HRJune2012

90. Twitter. Downloading your Twitter archive [Internet]. 2013 [cited 2014 Feb 10]. Available from: https://support.twitter.com/articles/20170160-downloading-your-twitter-archive#

91. Wikipedia [Internet]. US Air Force Web Posting Response Assessment. 2013 [updated 2009 Dec 10; cited 2014 Feb 10]. Available from: http://en.wikipedia.org/wiki/File:US_Air_Force_Web_Posting_Response_Assessment.png

92. State Government of Victoria. Victoria Government ICT Strategy [Internet]. 2013 [updated 2013 July 01; cited 2014 Feb 10]. Available from: www.egov.vic.gov.au/website-practice/web-2-0/social-networks-and-social-media-in-government/beyond-social-media-101-taking-your-digital-communications-to-the-next-level.html

93. Mashable. HOW TO: Deal with negative online sentiment about your brand [Internet]. 2011 [updated 2011 Feb 21; cited 2014 Feb 10]. Available from: http://mashable.com/2011/02/21/negative-brand-sentiment

94. HowTo.gov. Social media metrics for federal agencies [Internet]. 2013 [updated 2013 Apr 19; cited 2014 Feb 10]. Available from: www.howto.gov/social-media/using-social-media-in-government/metrics-for-federal-agencies#part-two

95. Neiger BL, Thackeray R, Burton SH, Giraud-Carrier CG, Fagen MC. Evaluating social media's capacity to develop engaged audiences in health promotion settings: Use of Twitter metrics as a case study. Health Promotion Practice [Internet]. 2013 [updated 2012 Dec 27; cited 2014 Feb 10]; 14(2):157-162. Available from: http://hpp.sagepub.com/content/14/2/157

96. Kaushik, A. Web analytics 101: Definitions: Goals, metrics, KPIs, dimensions, targets. 2010 Apr 19 [cited 2014 Feb 10] In: Occam's Razor. Available from: www.kaushik.net/avinash/web-analytics-101-definitions-goals-metrics-kpis-dimensions-targets/#WAMF

97. Digital Analytics Association. Digital Analytics Association [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.digitalanalyticsassociation.org

98. Air Force Public Affairs Agency. Air Force Social Media Guide, 4th edition [Internet]. 2013 [updated 2013 June 01; cited 2014 Feb 10]. Available from: www.af.mil/Portals/1/documents/SocialMediaGuide2013.pdf

99. Centers for Disease Control and Prevention (CDC). Social Media at CDC [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.cdc.gov/socialmedia

100. Centers for Disease Control and Prevention (CDC). CDC Health Communication Science Digest [Internet]. 2014 [cited 2014 Feb 10]. Available from: www.cdc.gov/healthcommunication/sciencedigest/index.html

101. New Zealand Department of Internal Affairs. Social media in government: Hands-on toolbox [Internet]. 2011 [updated 2011 Nov; cited 2014 Feb 10]. Available from: https://webtoolkit.govt.nz/files/Social-Media-in-Government-Hands-on-Toolbox-final.pdf

102. Health Web Communications Unit, Department of Health. Social Media Action Plan Part 2: Staff Toolkit. Final Version 1.0. Victorian Government Department of Health. 2010.

Appendix A: Glossary of Social Media Terms

Adapted from the City of Hamilton – Public Health Services and #SMMStandards.[14]

Alerts – search engines allow you to specify words, phrases or tags that you want checked periodically, with results of those searches returned by email.

Avatar – an image or username that represents a person online within forums and social networks.

Bitly – a free URL shortening service that provides statistics for the links users share online. Bitly is popularly used to condense long URLs to make them easier to share on social networks such as Twitter.

Blog – a word that was created from two words: "web log". Blogs are usually maintained by an individual or a business with regular entries of commentary, descriptions of events, or other material such as graphics or video. Entries are commonly displayed in reverse-chronological order. "Blog" can also be used as a verb, meaning to maintain or add content to a blog.

Blogosphere – describes the totality of blogs on the Internet, and the conversations taking place within that sphere.

Browser – used to view websites and access all content available onscreen or by downloading. Browsers may also have features including the ability to read feeds, write blog items, view and upload photos to photo-sharing sites. Browsers have become the central tool for using social media as more and more tools previously used on our desktops are becoming free online.

Channel – a medium for communication (e.g., blog, social network).

Chat – refers to any kind of communication over the Internet but traditionally refers to one-to-one communication through a text-based chat application commonly referred to as instant messaging applications.

Comment – is a response that is often provided as an answer or reaction to a blog post or message on a social network. Comments are a primary form of two-way communication on the social web.

Connections – the LinkedIn equivalent of a Facebook "friend" is a "connection". Because LinkedIn is a social networking site, the people you are connecting with are not necessarily people you are friends with, but rather you met in brief, heard speak, or know through another connection.

Content – describes text, pictures, video and any other meaningful material that is on the Internet.

Conversation – some sort of discussion through blogging, commenting or contributing to forums. It is the currency of social networking. A conversation happens about you (as opposed to with you). Compare with Engagement.

Crowdsourcing – refers to harnessing the skills and enthusiasm of those outside an organization who are prepared to volunteer their time contributing content and solving problems.

Engagement – some action beyond exposure that implies an interaction between two or more parties. Social media engagement is an action that typically occurs in response to content on an owned channel – i.e., when someone engages with you. Compare with Conversation.

Eventbrite – a provider of online event management and ticketing services. Eventbrite is free if the event is free. If tickets are sold for the event then Eventbrite collects a fee per ticket.

Facebook – a social media site that connects people with friends and others who work, study and live around them.

Flash Mob – a large group of people who assemble suddenly in a public place, perform an unusual and pointless act for a brief time, then quickly disperse. The term flash mob is generally applied only to gatherings organized via telecommunications, social media, or viral emails.

Flickr – a social network based around online picture sharing. The service allows users to store photos online and then share them with others through profiles, groups, sets, and other methods.

Follower (Twitter, other sites/blogs) – on most social networking sites (assuming unrestricted privacy settings) anyone can follow anyone else. When you follow an account, it usually means that account's content shows up in a home feed (so you see activity of all accounts you follow).

Forums – are also known as a message board, a forum is an online discussion site. It originated as the modern equivalent of a traditional bulletin board, and a technological evolution of the dialup bulletin board system.

Foursquare – a social network in which friends share their locations and connect with others in close physical proximity to each other. The service uses a system of digital badges to reward players who "check in" to different types of locations.

Friends – specifically, Facebook friends, are individuals whom users consider to be friendly enough with them to see their Facebook profile and engage with.

Google+ – Google's social network. It differs in that it promotes social sharing that is more similar to how people share in real life by providing features such as one that limits who you are talking to, creating 1-on-1 conversation.

Hashtag – is a tag used on the social network Twitter as a way to annotate a message. A hashtag is a word or phrase preceded by a "#". Example: #yourhashtag. Hashtags are commonly used to show that a tweet, a Twitter message, is related to an event or conference, online or offline. It is also available on Facebook.

HootSuite – a social media management system that helps brands streamline campaigns across social networks such as Twitter, Facebook, LinkedIn, and Google+ pages. Teams can collaboratively monitor, engage, and measure the results of social campaigns from one secure, web-based dashboard.

Impact – the effect of a social media campaign, program or effort on the target audience.

Impressions – represent the number of times an item has an opportunity to be seen and reach people. It counts the same individual multiple times, if that person is exposed to the item more than once. This metric is comparable metrics gathered through traditional media.

Instagram – a photo sharing application that lets users take photos, apply filters to their images, and share the photos instantly on the Instagram network and other social networks like Facebook, Flickr, Twitter, and Foursquare. The app is targeted toward mobile social sharing, and is owned by Facebook.

Instant messaging (IM) – a form of real-time, direct text-based communication between two or more people. More advanced instant messaging software clients also allow enhanced modes of communication, such as live voice or video calling.

Item (of content) – a post, micro-post, article, or other instance appearing for the first time in a digital media. Examples include a comment, photo, etc.

"Like" (Facebook) – Instead of writing a comment for a message, video, photo, status update, etc. a user can click the "Like" button as a quick way to show approval and share the message.

LinkedIn – a business-oriented social networking site. It is mainly used for professional networking.

Lurker – a person who reads discussions on a message board, newsgroup, social network, or other interactive system, but rarely or never participates in the discussion.

Meme – is used to describe a thought, idea, joke or concept to be shared online. It is typically an image with text above and below it, but can also come in video and link form.

Mention – refers to a brand, organization, campaign or entity that is being measured.

Networks – are structures defined by nodes and the connections between them. In social networks the nodes are people, and the connections are the relationships that they have. Networking is the process by which you develop and strengthen those relationships.

News Feed – is a feed full of news. On Facebook, the News Feed is the homepage of users' accounts where they can see all the latest updates from their friends. The news feed on Twitter is called Timeline.

Platform – software, tool or program used to access a channel (e.g., HootSuite, Facebook).

Podcast – a series of digital media files, either audio or video, that are released episodically and often downloaded through an RSS feed.

Profile – the information you provide about yourself when signing up for a social networking site. As well as a picture and basic information, this may include your personal and business interests, a "blurb" about yourself, and tags to help people search for like-minded people.

Reach – the total number of unique individuals who had the opportunity to see an item.

Retweet – when someone on Twitter decides to re-share a message with their followers. A retweet button allows them to quickly resend the message with attribution to the original sharer's name.

RSS (Really Simple Syndication) Feed – a family of web feed formats used to publish frequently updated content such as blogs and videos in a standardized format. Content publishers can syndicate a feed, which allows users to subscribe to the content and read it when they please, and from a location other than the website (such as reader services like Google Reader).

Search engine optimization (SEO) – the process of improving the volume or quality of traffic to a website from search engines via unpaid or organic search traffic.

Sentiment – the feeling the author is trying to convey, often measured through context surrounding characterization of the object.

SlideShare – an online social network for sharing presentations and documents. Users can "favourite" and embed presentations as well as share them on other social networks such as Twitter and Facebook.

Skype – is a free program that allows for text, audio, and video chats between users. Additionally, users can purchase plans to receive phone calls through their Skype account.

Social media monitoring – is a process of monitoring and responding to mentions related to a business that occur in social media.

Technorati – is a popular blog search engine that also provides categories and authority rankings for blogs.

Threads – strands of conversation. On an email list or web forum they will be defined by messages that use the same subject. On blogs they are less clearly defined but emerge through comments and trackbacks.

Timeline – the new Facebook form.

Twitter – a free microblogging service that allows users to send out information in the form of 140 character tweets.

Vine – a mobile app owned by Twitter that enables its users to create and post short video clips (7 seconds).

Widget – a stand-alone application that can be embedded in other applications, like a website or a desktop. They can help do things like subscribe to a feed, do a specialized search, or even make a donation.

Whiteboards – online are the equivalent of glossy surfaces where you can write with an appropriate marker pen and wipe off later. They are tools that enable you to write or sketch on a web page and as such are useful in collaboration online.

Wiki – a web page, or set of pages, that can be edited collaboratively.

YouTube – a video-sharing website owned by Google where users can upload, view and share videos.

Appendix B: Sample Terms of Reference for a Social Media Committee

Social Media Committee Terms of Reference
Adapted with permission from Northwestern Health Unit and the City of Hamilton – Public Health Services.

Type of Committee	Internal
Goals	• To create a long-term strategy for using social media within Public Health programs and services. • To provide input and recommend activities to engage and mobilize staff in the implementation of this strategy. • To contribute to organizational learning and activities that will strengthen our knowledge base and understanding of the use of social media in public health. • To develop Public Health branding to transmit credible and relevant information to the community.
Objectives	• To act as a Community of Practice to share insights, develop expertise and foster good practice through the exchange and creation of knowledge in social media. • To develop and maintain guidelines around social media use.
Membership	• Communications Specialist • Social Media Manager • Strategic Initiatives Manager • Program representative from each division Ad hoc members • IT Specialist • Privacy Officer • Human Resources Specialist
Reports to	Director, Strategic Initiatives
Meetings	Monthly
Minutes	Responsibility for minute-taking rotates throughout membership. Minutes are posted and shared once approved.
Decision-making	The team will strive for decision-making by consensus. Majority vote of members present may be used when consensus cannot be reached.
History	Version 1, November 2013 Terms of Reference to be reviewed at the first meeting of every calendar year.

Appendix C: Social Media Policies

1. Middlesex-London Health Unit Social Media Policy. Reproduced with permission.

MIDDLESEX-LONDON HEALTH UNIT

ADMINISTRATION MANUAL

SUBJECT:	**Social Media**	**POLICY NUMBER:** 9-030
SECTION:	Communications	Page 1 of 3

Implementation Date:	January 23 2013	Approved By:	Directors
Sponsor:	Manager, Communications	Signature:	

PURPOSE

To provide a framework for the Health Unit's social media program in order to use these communications tools effectively to enhance service delivery, inform the public, raise awareness about health issues, and provide information regarding Health Unit programs and services.

To outline the responsibilities and procedures for the use of social media to support staff in their work, distinguish personal social media use from professional use, and manage the potential risks that could create a financial liability, or damage the Health Unit's reputation.

To ensure brand integrity and corporate identity online.

POLICY

"Social media" refers to a broad range of communications tools that facilitate various levels of public engagement. This includes buttons and badges (which offer limited user engagement) to social networking sites (which offer high user engagement) such as Facebook.

The Online Communications Coordinator is the Health Unit's lead for social media, and a resource for all staff regarding the use of social media.

Information and data shared online using social media tools becomes the property of that given website and represents a permanent and public record of interaction. Furthermore, content shared or posted on password-protected social media tools may be accessed by a wider audience than originally intended. Health Unit staff will exercise professionalism at all times when using social media, with the understanding that any information typed into a social media account may be viewed by the general public. It is essential that Health Unit staff protect personal, private or confidential information when interacting with clients using social media tools.

Staff may be held accountable for posting information and opinions in personal social media accounts if the information or opinions could be reasonably interpreted by members of the public as representing the Health Unit, or contravening professional standards and/or conduct guidelines.

All privacy policies and legislation apply to information shared using social media. Informed consent is required for the posting of any client-related information or content (e.g. client photographs, testimonials, videos, etc.). Health Unit-initiated interactions via social media should provide general information that would benefit a client population as a whole, and not identify specific clients. Where the client has initiated a question about his/her situation on a Health Unit social media account, staff may provide general information as it pertains to the situation without mention of personal, private or confidential client information. However, social

REVISION DATES (* = major revision)**:**

MIDDLESEX-LONDON HEALTH UNIT

ADMINISTRATION MANUAL

SUBJECT:	**Social Media**	**POLICY NUMBER:** 9-030
SECTION:	Communications	Page 2 of 3

media should not be used for this type of communication. If further assessment of the client's situation or personal health information is required, the client will be encouraged to contact the Health Unit in-person, by phone, or via email. Health Unit staff should not use personal social media accounts to engage Health Unit clients online.

PROCEDURE

Official Use of Social Media
To initiate a social media request, submit a Communications Services Request Form

In the case of program-managed "high user engagement" social media tools (Facebook, Twitter, etc.), each program area or team will identify a **Moderator** who is responsible for:
- monitoring user posts, in-box messages and discussion comments at least once per day during regular working hours (8:30 am – 4:30 pm);
- ensuring responses to user posts, in-box messages and discussion comments are made as promptly as possible, preferably within 1-2 business days;
- denying access to users who post inappropriate or offensive comments;
- removing any post that is considered offensive and denigrating such as inappropriate photos, lewd, vulgar or profane comments, ethnic, racial or religious slurs, cyber bullying, abuse, depictions of violence and obscenity.

Where possible, social media tools will display the Health Unit's standardized privacy and content policy disclaimer.

Where the creation of program-managed social media accounts are deemed necessary, all user names and passwords will be created in consultation with Communications.

Where possible, social media tools will be consistent with the guidelines contained in the Health Unit's graphic standards manual.

Where possible, the program, team and/or Health Unit logo will be used as part of a Health Unit social media account to convey a credible, online presence.

Employees shall read the **Terms of Service** or **Terms of Use** for any social media tool they intend to use (e.g. www.facebook.com/terms.php).

The following code of ethics applies to Health Unit employees who use social media in the context of their work:
- Do not publish confidential information (e.g., client information, unpublished project details, financial information);
- Do not disclose identifiable and/or personal information about Health Unit employees or citizens;
- Protect your own privacy. Be mindful to not post information you wish to be kept private;
- Be transparent by identifying who you are and that you work for the Health Unit;
- Link directly to online resources and original source materials;

REVISION DATES (* = major revision)**:**

MIDDLESEX-LONDON HEALTH UNIT

ADMINISTRATION MANUAL

SUBJECT:	**Social Media**	**POLICY NUMBER:**	**9-030**
SECTION:	Communications	Page 3 of 3	

- Respect the audience, the Health Unit and your coworkers. Take into account the diverse set of customs, values and viewpoints held by members of the public;
- Consult your Manager/Director or a Communications staff when controversial public health matters are being discussed on Health Unit social media accounts;
- Delete spam and/or comments that are off topic;
- Delete and ban posts that are offensive and denigrating such as inappropriate photos, lewd, vulgar or profane comments, ethnic, racial and religious slurs, cyber bullying, abuse, depictions of violence and obscenity.

Personal Use of Social Media

The use of social media tools constitutes a permanent and public record of online interactions. Staff should be aware that content including text, images, videos and other data posted using social media tools can be accessed by anyone, from anywhere at any time. This information could draw a link between online interactions and employment at the Health Unit. It is important to keep this in consideration when engaging in online interactions.

Staff must disclose their role at the Health Unit when participating in social media discussions about the Health Unit or Health Unit matters.

Personal social media activities covered above are to be consistent with, and have a positive impact on the Health Unit's reputation or brand.

APPLICABLE LEGISLATION

The laws of privacy, libel, copyright and human rights apply online.

RELATED POLICIES

Staff participating in social media interactions in an official Health Unit capacity shall be familiar with the application of the following Health Unit policies and procedures to situations involving social media:

- Section 5 – Human Resources
  - 5-110 Human Rights Recognition
  - 5-115 Code of Conduct

- Section 6 – Records Management
  - 6-010 Confidential Information
  - 6-040 Security of Confidential, Personal and Personal Health Information

- Section 7 – Computers systems
  - 7-020 Software Installation

- Section 9 – Communication
  - 9-021 Copyright
  - 9-080 Health Unit Logo Usage

REVISION DATES (* = major revision)**:**

2. The Corporation of the County of Lambton Online Social Media Policy. Reproduced with permission.

THE CORPORATION OF THE COUNTY OF LAMBTON

Subject	Online Social Media	Section 200	Policy # 221
Effective Date	November 09, 2010	Approved By: County Council	
Revision Date	October 17, 2012		

PURPOSE

The County recognizes that online social media is an important and ever-growing communications tool. The purpose of this policy is to set guidelines applicable to the creation, use and maintenance of social media communications tools. Further, this policy establishes criteria which outlines the acceptable guidelines for the personal and professional use of social media as it pertains to the Corporation of the County of Lambton.

It should be understood that online resources are not private; information posted on such resources is public. Accordingly, employees:

   a) shall not at any time reveal any sensitive, confidential or unauthorized content;

   b) reveal personal information;

   c) reveal any matters concerning employees, employee relations or labour relations;

   d) use profane language;

   e) enter into an argumentative dialogue with any member of the public;

   f) post content that promotes, fosters or perpetuates discrimination, stereotypes or prejudice on the basis of race, creed, colour, age, religion, gender, marital status, status with regard to public assistance, national origin, physical or mental disability or sexual orientation;

   g) post sexual content or links to sexual content;

Online Social Media Policy - Page 1 of 8

h) post comments or updates not topically related to the site or topic currently being discussed on the site;

i) conduct or encourage illegal activity;

j) promote a candidate for municipal, provincial or federal election or make otherwise blatantly political remarks;

k) violate copyright, trademarks or other legal ownerships of intellectual property;

l) make commentary that they know or ought to know will damage the reputation of the County;

m) post information that they know or ought to know will compromise the safety or security of the County, themselves or any member of the public;

n) advertise or promote any private, for-profit enterprise;

o) modify or delete authorized approved posted content; or

p) comment on behalf of the Corporation or its elected officials unless designated by the Warden or CAO to do so.

POLICY

1. **Application**

This policy applies to all forms of internet-based technologies, the primary purpose for which is interactive dialogue (social media), including, by way of example only, online communities such as Facebook, YouTube, Twitter, Flickr, etc.

2. **Creation**

Employees authorized by their General Managers may create online social media sites (i.e. web pages, Facebook accounts, etc.) for the Corporation, and upload content thereon. Before creating an online social media site, employees shall first complete the Social Media Usage Checklist attached (as Appendix A) and submit a completed copy to their Division's General Manager and to the Corporation's Communications Coordinator for review and approval.

3. **Purpose of Social Media Platforms**

The primary goals of the County's social media usage are to disseminate information quickly, increase awareness of County services and events, public education, monitor, track and evaluate the effectiveness of County communications, allow for public inquiries and constructive commentary, and provide an additional mechanism through which the public can engage with the County. The County's social media platforms are not intended to be a mechanism for political advocacy, or the unqualified promotion of third party organizations, including other orders of government.

4. **Responsibility for Content**

Primary responsibility for the operation of the County's social media platforms rests with the Communications & Marketing Coordinator. It is anticipated that other individuals will also post materials on a periodic basis. Each Division should appoint not more than one person to handle social media postings, and that person should generally co-ordinate their intended posts with the Communications & Marketing Coordinator, so as to ensure consistent messaging and reasonable frequency of posts.

When representing the County of Lambton, employees should write and post about their areas of expertise. Reserve comment and refer questions to knowledgeable staff. Avoid contributions, postings or comments unrelated to the site's purpose including any extraneous hyperlinks to material. Avoid transmitting commercial content, spam, or confusing, misleading or out-of-date information.

Any person who posts material or content on a County social media platform is responsible for the factual accuracy of the posting. Should a person with posting authority become aware of a factual inaccuracy, it is that person's responsibility to correct the information, or see that the Communications & Marketing Coordinator is made aware of said error.

Where links are made to external, third party websites for educational or service purposes, it is the responsibility of the poster to ensure the site belongs to a reputable organization and is in good operational status. Any County employee who posts to a social media platform shall be familiar with the rules of the social media platform and adhere to them in all postings.

Where members of the public include spam, self-promotion or the promotion of specific corporations or economic interests, those posts shall be removed from the County's social media platforms.

5. **Use**

The Corporation's approved online social media sites shall only be used for the purposes of furthering the Corporation's interests in a manner that protects the Corporation's reputation.

Without limitation, any and all content uploaded to any corporate online social media resources shall at all times be consistent with the Corporation's mission, values and corporate brand identity.

6. **Privacy Considerations**

Under no circumstances will County staff publish personal information, pertaining either to themselves or to others, on County social media platforms. Personal information, within the meaning of the *Municipal Freedom of Information and Protection of Privacy Act*, does not include the names and business contact particulars of County Councillors, Warden, Deputy-Warden, Chief Administrative Officer, General Managers or general office administration contact particulars.

Communication in Social Media sites or accounts should always be considered public and permanent. Online communities are not private; postings may be accessed by a wider audience than intended or copied by others and posted elsewhere without the County's permission or knowledge.

7. **No Business Transactions on Social Media**

Because records on social media platforms are not within the control of the County, business transactions on social media platforms must be avoided. Posts and contributions on social media sites or accounts can potentially be considered business transactions and therefore constitute County records. For example, posts that place the County under any obligation or collect personal information are considered County records. However, other posts are not considered business records, such as posts that provide information that is already public or seek public input. County employees approved to use social media are required to recognize business transactions as County records and to take appropriate action for their retention.

8. **Maintenance**

Corporate social media online resources shall be maintained so as to protect the interests of the Corporation.

Specifically:

a) Copies of all material(s)/information posted to the site(s) and material posted from any contributor to the site (subject to the comments below) are Corporate records and, accordingly, shall be retained in accordance with category M07, Publications, Schedule A, of By-law 32- 2004, as amended from time to time.

b) Each site shall be monitored every regular business day, or as close to every business day as resources permit. While fair comment, including constructive criticism or complaints are anticipated, any content which includes offensive, derogatory, inappropriate, or libellous communications posted to the site shall be immediately printed for record-keeping purposes and deleted or otherwise removed from the social media site.

9. **Personal Use of Social Media**

Identifiable County of Lambton employees should make it clear, that if commenting upon County-related matters, they are voicing only their personal opinion, and not an official position. Avoid the appearance of officially representing the County on personal social media sites by not posting County logos, photographs, graphics or other media without the County's authorization.

Employees that post comments on social media sites are prohibited from disseminating any private County organizational information therein, such as internal deliberations regarding how policies or decisions are made, or any negative comments regarding the County of Lambton. Posts involving, but not limited to the following will not be tolerated and will subject the individual to discipline:

a) Content which violates the *Criminal Code of Canada* or the *Ontario Human Rights Code;*

b) Proprietary and confidential County information;

c) Discriminatory statements or sexual innuendos involving County of Lambton or any of its employees, managers, customers and vendors;

d) Threatening, derogatory or defamatory statements regarding the County, its employees, customers, competitors or vendors;

e) Make identify or make commentary upon other County employees without the consent of that other County employee;

f) Content which violates any of the County's policies, found online here.

10. **No Expectation of Privacy**

County employees can have no expectation of confidentiality or privacy in relation to their online activities as they pertain to, and are associated with, the legitimate interests of The County.

The County's legal position is that posting content on social media sites about the County is considered a publication and not a private activity. Employees are personally responsible for the content they publish online as it relates to the County. All employees of the County owe to the County a Duty of Loyalty. The County will consider any factually inaccurate, libellous, slander, damaging remark or offensive speech against the County and its legitimate actions and interests to be a violation of the employee's Duty of Loyalty, which may result in disciplinary action, up to and including potential termination of employment.

11. **Applicable Policies**

This policy and the creation, use and maintenance of online social medial resources are subject to the following corporate policies:

    a) County of Lambton Policy # 209: Internet Acceptable Use;
    b) County of Lambton Policy # 618: Workplace Violence and Harassment Prevention;
    c) County of Lambton By-law: 32-2004, Records Retention, as amended

and all applicable laws, such as:

    a) *Municipal Freedom of Information and Protection of Privacy Act*;
    b) *Personal Health Information Protection Act*;
    c) *Ontario Human Rights Code*;
    d) *Canadian Copyright Act.*

12. **Disclaimer**

Where possible, each social media site shall contain a disclaimer clearly advising third party users or visitors to the site that third party comments are not official communications of The Corporation of the County of Lambton.

To this end, the following disclaimer shall be added to each of the Corporation's social media sites:

Comments made by members of the public are not official communications of The Corporation of the County of Lambton and are not reflective of the Corporation's views, opinions and/or policies. Because this site is only periodically monitored, offensive materials or commentary may be present for which the County of Lambton denies all responsibility.

13. **Breach**

Violations of this policy may result in disciplinary action up to and including termination of employment.

POLICY HISTORY

REVISION	DATE	PREPARED BY
New Document	November 09, 2010	Bev Snobelen
Revision	October 17, 2012	David Cribbs

Appendix A

Social Media Usage Checklist

Prior to creating a new Social Media site, please answer the following questions.

Questions	Considerations/Actions
Have you sought the required approval from your General Manager?	
Which social media tool are you considering? What is the goal of this technology?	
What are your communication objectives? Are they different from information posted to other Corporate websites?	
Who is your target audience? Do they regularly use this medium?	
Do you have previous experience using this type of social media?	
How are you going to evaluate the effectiveness of your social media tool?	
Have you addressed any ownership of intellectual property issues, e.g.: logo, copyright, trademarks?	
What will happen at completion of the event or need for the site?	
Who will maintain the record of material posted to the site and comments from participants?	
Who will monitor the site? Who will take care of the site during vacation, leave of absence, etc.?	
Are other employees or departments mentioned in the site? If so, have you sought approval?	
Have you notified the Communications Officer?	

Appendix D: Project Planning Template

This template is adapted from the Victorian Government Department of Health Social Media Action Plan Part 2: Staff Toolkit.[102] Some PHUs include an abbreviated but similar template or checklist as part of their social media policy.

Item	Details
Project Name	
Project manager	• Include contact details
Team members	
Consultant(s)/Approver(s)	• Have you consulted with Communications, IT, Human Resources, Privacy Officer, others?
Purpose/goal	
Objectives	• Should be measurable and align with the department/agency priorities
Project overview	• Stakeholders • Communication outcomes
Background/ rationale	• What is the context for this project? • How does it fit with other department/agency activities?
Target audience	• Is it sufficiently homogenous? • Which platforms/sites do they use?
Channels/ platforms	• How will you reach your audience? (e.g., blog, social networking site, wiki) • Which software or site/tool is most appropriate? (e.g., Tumblr, Facebook) • Are there risks to your solution?
Research completed	• Could your objective be reached by another solution? • Could include literature review, e-scan, document review
Competitor analysis	• Why would your target audience choose your platform over another? • How are you filling a niche or gap in the market?

Parameters	Details
Timeline	• What are the start and end dates? • Does it fit with other departmental/agency activities?
Management model	• Have you outlined roles and responsibilities? • Who will be responsible for writing, posting, responding, monitoring, evaluating and approving?
Capacity and time commitment	• Are the appropriate team members available? • Have you identified back-ups for key positions? • What time commitment is required? • What training is needed?
Moderation	• What will users be able to contribute? • How will you monitor and deal with content? • Will it be pre- or post-moderated?
Design	• Does the theme/visual design adhere to agency brand and style? • What avatars/photos and personal details (including credentials) will be used?
Integration and branding	• How does this site fit in with the department/agency overall online presence? • Where do links need to be made?
Messaging	• Have you identified the tone? • How will content be developed and scheduled? • Which topics are approved? Which should be avoided? • How will you deal with controversial comments?
Legal	• Is the platform's Terms of Use acceptable? • Are there concerns relating to vulnerable populations? • What type of records must be kept? Are there special requirements for members of registered professions? • Do you have a Disclaimer and/or End User Terms of Use?
Budget	• Is there a cost to implement your plan? Where will funds come from?
Promotion and development	• How will you build a community and promote your platform?
Evaluation plan	• Should occur throughout the project, not just at the end • How will results be reported? To whom?
Exit strategy	• How will you know it's time to move on? • How will you handle archiving and record-keeping?

Appendix E: Sample Daily Facebook Maintenance Flow

Reproduced with Permission from the City of Hamilton – Public Health Services.

The Daily Flow: What to do when you are manning the Healthy Families Hamilton Facebook Page

Time	Topic	Task
Beginning of day - 8:30 am	Introductory post	❐ Post a welcome message that engages the audience. Introduce yourself (first and last name with credentials [RN or RD]), your area of expertise, and the theme of the day if applicable.
Early morning	Responding to posts	❐ Check to see if there have been any new posts since the last business day at 4:30 pm. Respond appropriately using the Response Tree and related protocols. ❐ Consult team on previous day if needed.
	Evaluation	❐ Check the Evaluation Tracking Form - End of Day for any notes from person manning Facebook previous business day ❐ Complete Evaluation Tracking Form – Start of Day for any items posted after 4:30 pm previous day.
	Check PH Hamilton Facebook account	❐ Check PH Hamilton Facebook account to see if there have been any new messages since the previous business day. Respond as appropriate.
	Check schedule	❐ Check staff schedule for any special tasks/updates (e.g., change display picture, Facebook insight stats, etc.).
Late morning/ early afternoon	Creating a post	❐ Create another post to engage audience. ❐ Do not post more than 3 unsolicited (i.e., not in response to anything being posted) program promotions. Promote your team's programs. ❐ Sign your name after your posts and responses to fans' questions. (e.g., ~ Lindsay)
Throughout the day	Responding to posts	❐ Respond to posts using Response tree. Respond to posts within **2 hours** if possible.
	Documenting	❐ Document using log sheet.
	Creating and planning content	❐ Create, plan, refine, or revise current or future content.
	Sharing Tips	❐ Look up or share a tip in the Tip Sheet.
End of the day - around 4:30 pm	Evaluation and communication between staff	❐ Track items in Evaluation tracking form (Staff Reporting - End of Day). Communicate with staff for next day as needed to ensure day-to-day consistency.
	End of day sign off	❐ Post an end of day goodbye message with your designation (RN, RD). Sign off for the day, reference legal disclaimer, and introduce theme and staff member for next day. ❐ Ensure log sheet is in binder and in locked cabinet.

Created June 2013
Modified November 2013

Approved: August 29, 2013

1

Optional when manning Facebook:

Morning	Monitoring news/trends	❏ Monitor regional, provincial, federal and global news sources for relevant and interesting news to share. ❏ Be aware of any major stories with Hamilton-specific or Public Health impact. ❏ Monitor health information and social media trends using liked/linked social media sites. ❏ "Like" or comment on other posters' or liked sites' content: comments, status updates, posts, etc.
Throughout the day	Creating posts	❏ Promote HBHC/NFP as appropriate. Tie in with your team's programs.

Facebook Sign-Offs
All sign-offs **MUST** refer to the legal disclaimer

Before you log off, let the fans of Healthy Families Hamilton know:
- you are done for the day
- about our legal disclaimer
-

Other ideas to add to the sign-off (optional):
- we value their participation and contributions to the page
- when someone will be back on
- who will be engaging with them next and about what topic
- about any events happening in the community

Content of Posts could include:
- Tip of the day
- Promotion of 'special' day/month/event/priority identified in the calendar
  - Information related to the theme/topic of the day
  - May need to be flexible re: daily theme to respond to relevant news or other questions/comments from our followers
- New research
- Reposting/sharing Facebook posts, pictures, videos that are relevant to Family Health that come from organizations/groups/individuals that we "like"
- Product or food recalls
- Comment related to the news – Hamilton news, Canadian, global
- Posting news stories when they are relevant to FHD issues
- Promotion of Health Connections and information on PHS website
- Promotion of credible information, apps, events, resources of community partners or other credible organizations

Your 3-6 posts of the day should be:
- Short
- Use positive language

2

Created June 2013
Modified November 2013   Approved: August 29, 2013

- Engaging
- Fun
- Shareable
- Written in conversational tone
- Easy to read and understand; avoid medical or technical jargon
- Open-ended to allow for 2-way conversation
- Correct for grammar and spelling
- Signed with your name and credentials, for the first and last posts of the day

Engagement technique ideas to increase audience participation include:
- True/false
- Multiple Choice
- "Like my status" (e.g., "Like my status and I will provide healthy breakfast ideas for your family." For each "like," the staff member will provide another idea)
- Polls (can also be used to strategically to gauge our content/posting)
- Fill in the blanks
- Ask for opinions
- Share a photo
- "Like" followers' comments or questions that followers have posted to the FHD page
- Try new tactics and ideas!
- "Spot the problems with the photo"

Pre-scheduling Posts
- If you are required to be at a meeting on the day you are scheduled to man Facebook (e.g., Joint), Facebook's pre-scheduling tool may be used to pre-schedule a post or two
- This tool should only be used occasionally

3

Created June 2013
Modified November 2013   Approved: August 29, 2013

Appendix F: Editorial Calendar Templates

1. Reproduced with permission from North Bay Parry Sound District Health Unit

Corporate Facebook / *Twitter* Submissions								
Name of Program (ex: *Healthy Schools & Families*)								
Topic Area *Example: PARENTING INFO / PARENTING CLASSES*	**Event / Note / Web Link / Video Link / Photo Link with message**	**Program Manager Approval** (include initals)	**Date Posted** on *Facebook* and / or *Twitter*	**Date Specific** Month and / or Day (related to Awareness Day / Event / Clinic?)	**Submitted by** (name of staff)	**Language of Posting** (English or French)		
Head Lice	Not to "nit -pick"...but head lice could be in your future! As school begins, learn how to detect and treat your child: http://www.caringforkids.cps.ca/whensick/HeadLice.htm	SM	Feb.23	Feb. or Mar. (winter months)	J. Smith	English		

2. Reproduced with permission from Halton Public Health

January					February				
One-time Tweets	**Cut off date**	Created by	Posted by	Date Posted	**Time Sensitive Tweets**	**Cut off date**	Created by	Posted by	Date Posted
					Heart Month - Jump rope for heart				
Ongoing Tweets		Created by	Posted by	Date Posted	**Ongoing Tweets**		Created by	Posted by	Date Posted
					What's up Doc?Find a Family Doctor in #Halton at http://bit.ly/gxXGjp				
Events	**Cut off date**	Created by	Posted by	Date Posted	**Events**	**Cut off date**	Created by	Posted by	Date Posted
Is your child on track to achieving milestones specific to their age & stage? If not attend a FREE clinic Jan 25 http://bit.ly/u1yukT	Jan-24	JD			At home alone workshop Feb.15th - http://www.halton.ca/cms/One.aspx?portalId=8310&pageId=49228 **FULL**				
Early Years (0-6)		Created by	Posted by	Date Posted	**Early Years (Pregnancy, Baby, Preschool)**		Created by	Posted by	Date Posted
					Feeling sad or overwhelmed 4 more than 2 wks since ur baby's birth? #Halton FREE Postpartum Peer Support Group			CZ	14-Feb
School Years (6-12, 13-18)		Created by	Posted by	Date Posted	**School Years (Elementary, High School)**		Created by	Posted by	Date Posted
Rexall Pharmacies r offering free UV facial photos http://www.rexall.ca/instore/SunClinics		JD	LB	Jan. 6	Hold a Winter Walk Day on Wednesday, February 9th at your school.		CL	ML	Feb. 6
Specialty Areas (Special Needs, Mental Health)		Created by	Posted by	Date posted	**Specialty Areas (Special Needs, Mental Health)**				
Is ur resolution this yr 2 quit smoking? #Halton offers the STOP Program FREE of charge, inclu. nicotine replacement therapy http://bit.ly/vqfvFZ		CZ	CZ	Jan-09	Feb. 14th - awareness day for the Canadian Congenital Heart Alliance! http://bit.ly/xJdv0I.				

Appendix G: Interaction Tracking Spreadsheet

1. Social media tracking spreadsheet reproduced with permission from Wellington-Dufferin-Guelph Public Health. This spreadsheet, used in a centralized management model, functions as both an editorial calendar and record of interactions and common metrics.

SENT MESSAGES - TWITTER												
DATE	DAY/WK	TOPIC	TIME	MESSAGE	CLICKS	RT	RT REACH	MT	MENTIONS/ @REPLIES	DIRECT MSGS	FAVOURI TED	NOTES

Key:
RT = retweets
MT = modified retweets

SOCIAL MENTIONS				
DATE	PLATFORM	TOPIC	HANDLE	ROLE

FOLLOWERS/FRIENDS							
MONTH	TWITTER FOLLOWERS	% CHANGE	LINKEDIN	G+	FACEBOOK	FOURSQUARE	OTHER
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							

2. Facebook Log Sheet
Reproduced with permission from The City of Hamilton – Public Health Services.

City of Hamilton
Public Health Services – Family Health Division

LOGSHEET

Program: _____ Healthy Families Hamilton _____ Page #: _____ 1/1

Date/Time of Contact	Title of Session & Location of Group	# of People	Listen	Action	Outcomes	PHIPPA	Signature/ Desig. & Date/Time of Charting
Dec. 16/13	Introduction to solid foods/feeding your baby		RD introduced topic of introducing solid foods/feeding your baby Education posted by RD in response to 10 (9 questions, 1 public) questions by posters on the same topic, re: timing of intro of solids, first foods, texture progression, division of responsibility, and making homemade baby food. RD cited info from: PEN (Practice-based evidence in nutrition), Health Canada Nutrition for Healthy Term Infants draft 6-24 months (2013); Food for Baby's First Year (2012 version); Feeding your baby from 6 months to 1 year (2013 version); A Guide to Buying Fish for Women, Children and Families (unsure version year); Making Baby Food is easy (2007 – website link), EatRight Ontario.	See "Listen"	Some clients "liked" the info and 1 thanked RD.		

Appendix H: Sample Response Trees

1. Reproduced with permission from The City of Hamilton – Public Health Services.
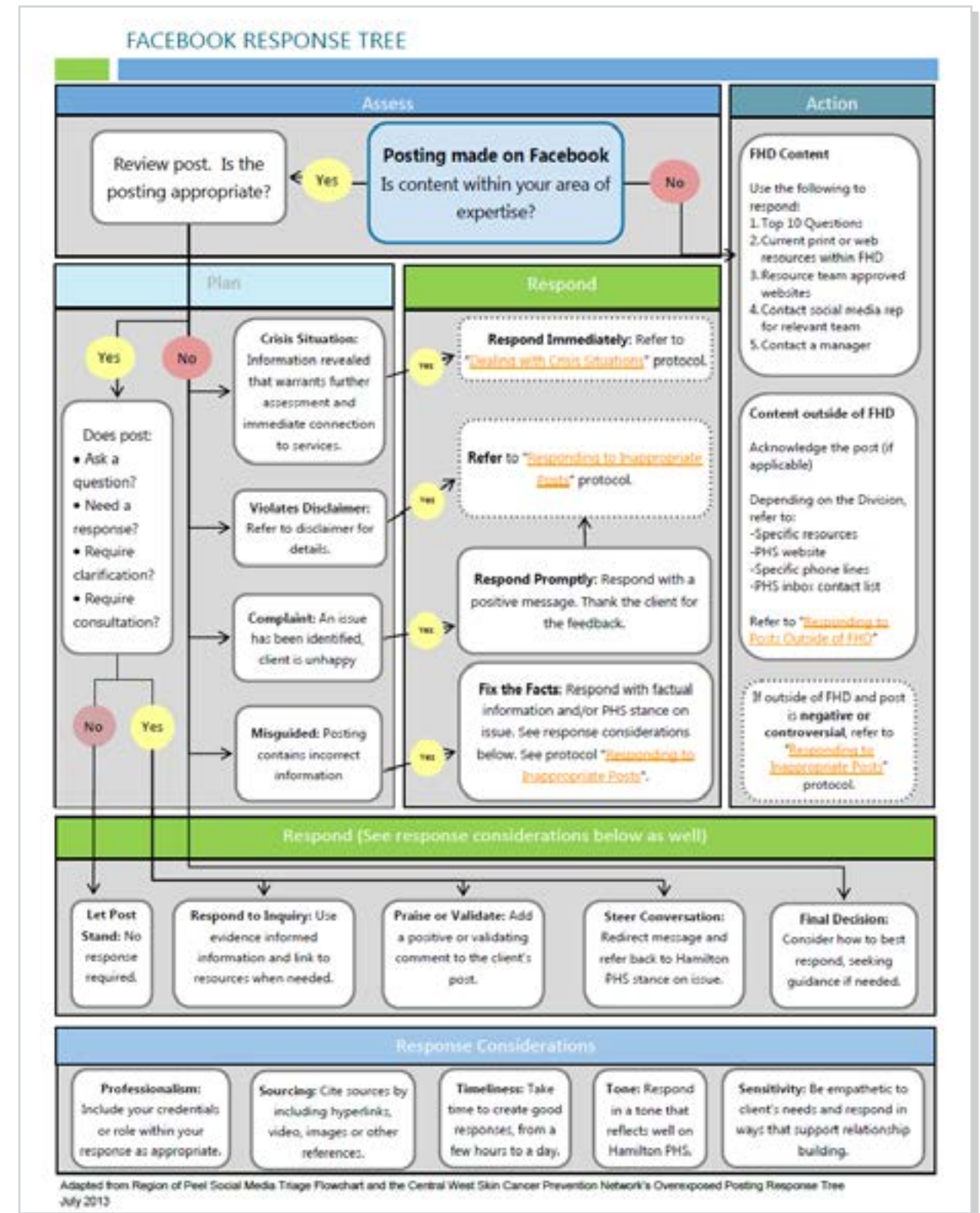
2. Adapted from "Guidelines for Moderating and Responding to Comments on Websites or Social Media Sites" with the permission of the Eastern Ontario Health Unit.

Guidelines for Moderating and Responding to Comments on [*Public Health Agency Name*] Websites or Social Media Sites

The purpose of this document is to provide guidance and help ensure consistency in the moderation of comments posted by outside users to [*Agency Name*]'s websites, Facebook pages or other social media sites. In addition to this document, assigned moderators are expected to use professional judgement in dealing with poster comments and related responses. When uncertain how to respond, assigned moderators should contact the Communications Manager and/or the relevant Program Manager.

Evaluate the Comment/Post
- Is it positive or neutral?
- Does it contain inaccurate information?
- Does it contain sensitive information (e.g. private details)?
- Does it contain inappropriate language or content?
- Does it request personalized health advice?
- Is it negative in tone or content?

Positive or Neutral in tone:
Comment may agree or disagree with [Agency Name] or other user-submitted posts, but it's not negative.

1. **Let comment stand (no response)**
2. **Post a response to comment:** Positively respond with encouragement, appreciation, acknowledgement of poster's position or experience, or to add information or links to information.
3. **Delete or reject for posting:** If comment is irrelevant to topic, or if it's spam.

Contains Inaccurate Information:
Determine degree and importance of inaccuracy

1. **Let comment stand (no response):** Monitor for escalation of misinformation and respond if necessary; other users may correct misinformation.
2. **Post a response to comment:** Correct erroneous information, link to correct information or additional information.

Contains Sensitive Information:

1. **Edit comment and respond (identifying details):** If comment contains identifying information but otherwise merits posting, edit by removing identifying details. Include the following statement at the end of the comment: *Edited to protect privacy. Please do not post private details.*
2. **Post a response to comment (disclosure of abuse, suicidal thoughts, etc.):** Advise manager. Direct commenter to call Kids Help Phone, etc.
3. **Delete or reject for posting:** If comment contains identifying information about someone and does not merit posting.

Contains Inappropriate Language or Content:
Determine degree and importance of inappropriateness.

1. **Edit comment (inappropriate language):** If comment contains inappropriate language but otherwise merits posting, edit the inappropriate language and include the following statement at the end of the comment: *Edited for language.*
2. **Delete or reject for posting:** If comment contains abusive, foul or pornographic language and does not merit editing and posting.

Negative tone or content

COMPLAINTS *about [Agency Name] website or service (Notify appropriate supervisor or manager of complaint.)*
1. **Respond to comment:** Where appropriate, acknowledge and rectify situation (e.g. poster complains that a section of the website isn't working). "Thank you for your input. We hear you and we're working on it/we've fixed the problem."
2. **Respond to comment:** Where appropriate, invite poster to follow up discussion off-line. Provide email contact information to poster.
3. **Delete or reject for posting:** If comment is unconstructive or abusive.

ARGUMENTS
1. **Monitor:** Debate or disagreements can be constructive and informative. Monitor tone for escalation or abusive behaviour and respond if necessary.
2. **Respond:** To correct misinformation (where necessary) or to remind posters of Comments Policy (with link) relating to respectful discussions.
3. **Delete or reject for posting:** Insulting, disrespectful or threatening comments.

ABUSIVE, THREATENING OR DISCRIMINATORY
1. **Delete or reject for posting:** Any abusive, racist, sexist, homophobic, threatening or slanderous comment.

Response Considerations:
- All posts by [*Agency Name*] staff must identify that they are from a [*Agency Name*] moderator.
- Responses should be timely: within 24 hours or early the next business day.
- Responses should use tone consistent with [*Agency Name*] values: respectful, informative, helpful.
- Where appropriate, link to additional information or sources.
- When a user posts information or opinions that another or other posters disagree with, a [*Agency Name*] response is not always necessary (unless there are clear factual errors or there is violation of comments policy). Sometimes responses posted by other users can carry more credibility with peers.

Requests Personalized Health Advice:

1. **Respond to comment:** Remind poster that we do not provide personalized health information online. Direct poster to contact a healthcare professional, or to call [*Agency telephone help line*], Telehealth or Kids Help Phone.

Facebook Evaluation Tracking
Reproduced with permission from The City of Hamilton – Public Health Services.

			Facebook Evaluation Tracking Report on posts received 8:30 am - 4:30 pm today					
			Clients			**Internal Communication**		
Date	**Staff Member Manning Page**	**Theme of the Day**	**# of questions clients posted today related to theme of day**	**# of comments clients posted in response to your posts (total for day)**	**# of off-topic comments or questions clients posted that required a response & their topics**	**Any successes?**	**Challenges?**	**Notes for Person Manning Next Day** (if need to refer to clients use initials only, or, copy & paste the post not including names)
Example: Aug 26, 2013		*physical activity*	*5*	*7*	*2 breastfeeding questions* *1 vaccine comment*	*Fill in the blank got a lot of responses.* *Cute kid video got a lot of likes.*	*A few off-topic questions & comments today - needed to consult with BF team.* *Not much interaction today.*	