

Policy on constituency communications with members

Effective Date: Feb. 1, 2023

Review Date: Feb. 1, 2024 (to be reviewed annually)

1. Purpose

The purpose of this policy is to provide an overview of the communication channels physician leaders may use to communicate with OMA members. OMA communications channels have four primary functions:

- 1. Support the role of physician leaders by facilitating efficient, effective communications with constituents.
- Provide accurate, relevant and timely information to OMA members to inform on important issues and protect the reputational risk of members, the profession and the OMA.
- 3. Help to streamline information to reduce the burden of over-communication to the OMA membership.
- 4. Enable peer-to-peer collaboration and networking among the membership, where possible.

2. Scope

This policy includes the terms of use for OMA communications, the features of each communication channel and a guide for sending communications through each channel.

3. Definitions

Physician leader: An OMA member who has been elected or appointed to a leadership role within a constituency group Physician leaders may hold leadership roles within multiple constituency groups. In the context of this policy, physician leader refers to the chair or president in a constituency group (for example, section or district chair).

OMA Connect community platform: An online discussion forum and direct messaging platform for OMA member groups, including OMA-wide groups on specific topics, OMA predefined groups (such as the General Assembly, sections, districts, branch societies, MIGs, fora, etc.) as well as ad-hoc groups.

Constituency group: A group of members defined by similar areas of practice, geography, and/or common interest and include sections, districts, fora, medical interest groups, and branch societies.

4. Policy: Terms of Use

To protect the OMA brand and reputation, the OMA and its physician leaders are responsible for ensuring communication to members is appropriate.

- Physician leaders must adhere to these terms of use and the <u>OMA principles guiding</u> <u>member interaction</u>. Physician leaders assume responsibility for the content of their communications
- Communications that are divisive to the membership will not be tolerated
- Communications that are critical of another constituency group will not be tolerated
- Communications that include potentially offensive, profane and vulgar language will not be tolerated as these can lead to claims of a hostile work environment or harassment, and risk failure to meet CPSO professional standards

The terms of use further establish that the following communications or behaviours are unacceptable on OMA communication channels and will not be tolerated:

- Inflammatory or inaccurate information to the membership
- Information that creates policy on behalf of the organization
- Any communication that is abusive, harassing, or in any way conveys stalking, trolling, threatening or attacking others
- Communications that are defamatory, offensive, obscene, vulgar or that depict violence
- The use of hateful language targeting:
 - \circ Age
 - Ancestry, colour, race
 - \circ Citizenship
 - \circ Ethnic origin
 - $\circ~$ Place of origin
 - \circ Creed
 - Religion
 - \circ Indigeneity
 - \circ Disability
 - \circ Family status
 - Marital status (including single status)
 - o Gender identity, gender expression
 - Receipt of public assistance
 - Record of offences
 - Sex (including pregnancy and breastfeeding)
 - $\circ~$ Sexual orientation
- Fraudulent, deceptive or misleading communications
- The disclosure of restricted records, data or private information, including references to discussions that are bound by confidentiality and/or nondisclosure agreement
- Deliberate disruption of discussion
- "Spam," excessively repetitive or promotional communication to the membership

- OMA communication channels should not be used to solicit member input or participation in products, services or research studies produced externally to the OMA or its constituency groups unless OMA-approved
- OMA communications channels will include the current OMA legal disclaimer and will comply with <u>Canadian Anti-Spam Legislation (CASL)</u> and <u>Personal Information and</u> <u>Protection of Electronic Documents Act (PIPEDA)</u>
- During an election campaign, all OMA communications must comply with the <u>OMA</u> <u>elections communications guidelines</u>

5. Procedure

OMA constituency group communication channels

There are two primary communications channels for OMA physician leaders to reach their constituents: the OMA Connect community platform and constituency group email. OMA News is a secondary channel that may also be considered in some instances.

OMA Connect community platform

OMA Connect features

The OMA Connect community platform is a discussion forum for OMA member groups, including OMA-wide groups on specific topics, OMA pre-defined groups (such as sections, districts, medical interest groups, fora, committees, etc.) as well as ad-hoc general interest groups. OMA Connect is available online via <u>OMA.org</u> or the OMA mobile app.

Physician leaders may post announcements and information to their respective groups, as well as share materials, post videos and documents, and collaborate with their members. OMA Connect features a calendar for each group where events can be posted. OMA Connect was designed using the following parameters:

- Posts made in online communities are immediate and do not require or receive any OMA staff review
- As no OMA staff review is performed, physician leaders are responsible for ensuring the information they post to their group is accurate, factual and abides by the terms of use set out in this policy
- As no OMA staff review is performed, this channel is not recommended as the primary communication channel of sensitive materials, including but not limited to topics such as billing and fee codes, negotiations, annual general meetings and elections
- Communications posted in the OMA online communities channel allow for members to respond and/or comment and foster two-way communication
- Physician leaders who wish to post in other groups where they are not a member would require a member of that group to post the information on their behalf.

Artificial intelligence (using keywords) and a third-party vendor will moderate the online communities to ensure the OMA terms of use are being met. Members can also flag a communication as inappropriate. OMA staff will review items that are flagged. If the terms of use are breached, the OMA shall be permitted to take actions, which include suspension of participation until the breach is corrected, removal of individual and termination of the group. Such rights are set out in detail in the <u>OMA Connect Terms of Use</u>.

How to use the OMA Connect community platform

Support for how to use OMA Connect can be found in the <u>constituency communications guide</u> <u>for physician leaders</u> and <u>brief introductory video</u>.

Constituency group email

Constituency group email features

Constituency group email communications allow physician leaders to send targeted email communications to their members. All communications the OMA sends on behalf of physician leaders receive the support of internal subject-matter experts who review the content for factual accuracy, consistency, etc. It may take up to three business days for communications to be reviewed and sent to members. Emails are delivered at the same time to the specified members of the constituency group. An OMA staff review ensures the content is factually accurate; as such, the constituency group email channel should be used for distributing communications on sensitive topics including, but not limited to, billings and fee codes, negotiations and elections.

In the case of disagreement between physician leader and OMA subject matter experts regarding email content, OMA subject matter experts will reach out directly to the physician leader for discussion and resolution. The OMA reserves the right to refuse any communication that does not meet the terms of use.

To avoid overloading OMA members, a maximum of two emails related to a single event may be sent to the same member group, within a 10-day period. Additional event promotion is recommended via OMA Connect

Physician leaders may grant permission to another elected leader within their group to draft and approve email communications. If a request is made by someone who is not the physician leader, OMA staff will request written physician leader approval before the communication will be sent. A maximum of four additional constituency groups may be requested per communication (not including the submitter's constituency group).

Communications being sent to more than one constituency group may only be sent between geographic areas or clinical specialties (i.e., section to additional sections, or branch society to additional branch societies). In the event physician leaders want to reach a broader audience

(whether additional groups, or between geographic and clinical specialty), it is recommended they use the OMA Connect community platform rather than a constituency group email.

OMA News

OMA News is an OMA-wide email communication sent to members every Friday morning. The OMA Member Relations, Advocacy and Communications (MRAC) department develops the editorial lineup for OMA News, with senior management team approval. Items included in OMA News must be timely, relevant to most OMA members and related to the profession.

6. SUPPORTING/REFERENCED DOCUMENTS AND TEMPLATES

Use Туре	Document Title
Mandatory	OMA principles guiding member interaction
Mandatory	OMA Connect community Terms of Use
Mandatory	OMA elections communications guidelines
Mandatory	Constituency communications guide for physician leaders
Optional	OMA Connect introductory video
Mandatory	OMA legal disclaimer
Mandatory	PIPEDA and CASL

7. RESPONSIBILITIES

POSITION	ACTIONS
Board (Approver)	Approve policy and/or procedures.
Author (Process / Service Owner)	Include the responsibility information required for the Process/Service Owner of the Policy/Procedure being written.
Knowledge & Records (Custodian)	Review and provide additional metadata as required. Notify Authoring Department when each policy reaches its review date. Maintain original documentation for archiving.
Department Directors	Monitor compliance with this policy by employees. Obtain training for employees if required.
Employees	Acknowledge as required and comply with policies/procedures.

Author: Member Communications & Marketing

Process/Service Owner: Member Relations, Advocacy & Communications

Approved By: OMA Board of Directors Approval Date: February 1, 2023