

Social media in healthcare: A 360-degree view

What to do when patients record you working

By Maude McGill, PhD, MSN, RN-BC; Bobbie Loveless, DNP, MSN-ED, RN, CNE; and Marzell McGill, MDIV, BA, LPN

AFTER a long day of work, Bethany logs on to Facebook and begins scrolling down her timeline. She sees a video that's received over 5,000 views. As Bethany watches the video, she realizes that it's of a pediatric assessment she conducted earlier in the day. She doesn't remember seeing a phone in the room, and she wonders who gave permission to record it. Bethany's not sure what she should do.

Social media use continues to grow. Twitter, Facebook, Snapchat, Instagram, and blogs are among the popular social media platforms that have become vital to both personal and professional communication. Because of the desire to stay connected and share information via instant communication and social media, many healthcare workers have found themselves in precarious situations with regard to patient privacy and confidentiality. Social media misuse has been the root of many ethical and privacy violations related to patients, and its inappropriate use by healthcare workers has been addressed in the literature and by healthcare regulators and associations, such as the National Council of State Boards of Nursing (NCSBN) and the American Nurses Association (ANA). What hasn't been sufficiently addressed is what to do when patients, family members, or colleagues expose healthcare workers via social media.

Misuse of a platform like Facebook occurs when users post information that isn't their own, is derogatory, or invades someone else's privacy. Many schools of nursing and organizations have created policies to protect patient privacy and provide guidelines for personal social media use in the workplace. NCSBN states that "Privacy is the patient's expectation to be treated with dignity and respect. Confidentiality is safeguarding patient information."

Nurses and other healthcare professionals are taught to protect patient information and respect patient privacy. However, patients sometimes provide personal information on their own. In Bethany's case, no violation of patient rights occurred, but Bethany feels exploited and wants to know what she can do. Unsolicited exposure of healthcare professionals on social media may

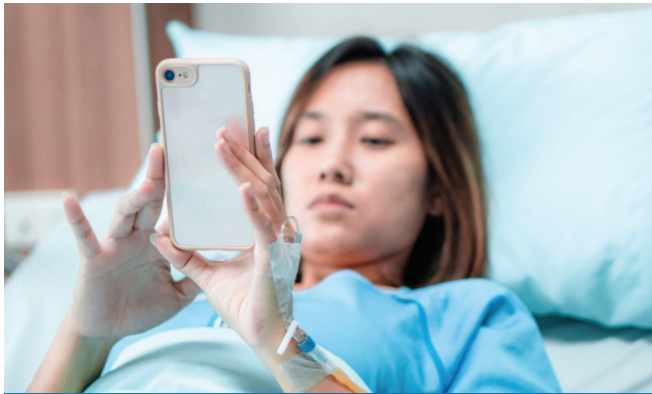
result in issues such as nurse embarrassment, employee retention challenges, unwarranted legal actions, and direct and indirect nurse safety concerns. What is the process to protect your rights as a clinician?



Social media use in healthcare

Unsuitable use of social and electronic media by nurses can be reported to the appropriate board of nursing (BON). Laws governing disciplinary action by a BON for these violations vary between jurisdictions, but an investigation can be based on:

- unprofessional conduct
- unethical conduct
- moral turpitude (conduct that's contrary to community standards of justice, honesty, or good morals)
- mismanagement of patient records
- revealing privileged communication
- breach of confidentiality.



Personal experiences with social media violations

In 2018, nurses in seven states (Alabama, Louisiana, Maryland, Mississippi, North Carolina, Texas, and Virginia) were surveyed to identify unsolicited exposure of nurses on social media. In this qualitative study with 52 participants (conducted via online survey), several nurses confirmed unapproved posting of their professional presence on various social media platforms. Some nurses were alerted to the posts and others found them by chance. Many of the participants felt “violated” and “disrespected” or as if their rights had been “breached.” None of them knew how to address the situation. Here’s what some of the nurses had to say:

- “It just felt wrong. It is just the audacity. I am trying to work and if we would have recorded them, it would have been a lawsuit.”
- “People just don’t understand all the legal issues we go through as nurses. This just adds wood to the fire.”
- “Luckily, my assessment was on point. It still violates my right to work without being publicly critiqued.”
- “It is wrong on so many levels, but what can I do?”

So how can this relate to inappropriate disclosures of healthcare workers on social media by patients or colleagues? Essentially, the reporting process is similar to inappropriate disclosure of patients, but the consequences would vary depending on whether the unsolicited exposure is by a patient or a colleague. To protect healthcare workers, many organizations have policies against cellphone use in examination areas and clearly post the prohibition throughout the area.

Social media violations by patients

Preventing and addressing social media violations by patients and family members requires nurses to pay attention to their surroundings, to speak up when they suspect a violation, and to be familiar with reporting processes.

Survey the room. Before you start your assessment, survey the room. Does the patient or a family member have a cellphone or a tablet? Notice the placement of these items and use your assessment skills to identify

whether a violation is occurring or might occur.

Say something. Each conversation between the patient and clinician is private and important. Part of your role during patient care is to minimize distractions. If you see a cellphone or tablet causing unwarranted distractions, politely and professionally say something like, “Mr. Jones, I’d like to talk to you about how to care for your wound. Would you mind if I placed your cellphone on the counter to give us more space?” Many facilities have rules regarding cell phone use in the examination areas, so if you see a patient or family member with a cell phone, remind him or her about the rule and explain why it’s important.

Stay familiar with the process. Most social media platforms have a process for reporting inappropriate or unsolicited posts. For example, to report a Facebook post, select the three dots at the top right-hand corner of the post, click “report this post,” and choose from a selection of options to identify why you’re reporting. Record or take a screenshot of the post before reporting it in case you need it for evidence. You also want to be familiar with your organization’s policies, which may include providing evidence to the compliance officer or director of nursing along with a written statement. If necessary, the legal department may intervene with a cease-and-desist letter or a restraining order.

Limit distractions, prevent privacy violations

Privacy and confidentiality are crucial to the healing process and are expected from both the clinician and the patient and family. In addition to providing care, nurses also act as managers of the healthcare environment, which includes limiting distractions and preventing privacy and confidentiality violations. Provision five of the ANA *Code of Ethics for Nurses with Interpretive Statements* emphasizes nurse self-care and how to safeguard professional presence and practice. Remember, you have the right to provide patient care without fear of public disclosure. ★

Maude McGill is a clinical professor of nursing for Southern New Hampshire University in Manchester. Bobbie Loveless is the manager of evaluation faculty for the MSN education program at Western Governors University in Salt Lake City, Utah. Marzell McGill is the health fair coordinator for McGill Ministries, Inc.

Selected references

American Nurses Association. Code of Ethics for Nurses With Interpretive Statements. 2015. nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/

National Council of State Boards of Nursing. *A Nurse’s Guide to the Use of Social Media*. 2018. ncsbn.org/NCSBN_SocialMedia.pdf

Reiner G. Social media and young nurses could be bad combination. *Case Management Advisor*. 2018. reliasmmedia.com/articles/142874-social-media-and-young-nurses-could-be-bad-combination

Ventola CL. Social media and health care professionals: Benefits, risks, and best practices. *P T*. 2014;39(7):491-9, 520.