

National Student Nurses' Association, Inc.

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Recommendations For: Social Media Usage and Maintaining Privacy, Confidentiality and Professionalism

Introduction

Student nurses have a responsibility to understand the benefits and consequences of participating in social media; NSNA recommendations encompass personal and professional social media use. Healthcare organizations and Universities that utilize electronic and social media typically have policies in place to govern employee or student use of such media in the workplace. The policies often do not address the nurses' use of social media outside of the workplace, or outside of the clinical setting. It is in this context that the nurse or student nurse may face potentially serious consequences for inappropriate use of social media.

Definitions

Social media in this context is defined as web-based and mobile platforms for user generated content that create interactive and highly accessible, and often public, dialogues.

Types of Social Media

Social media platforms may include (but are not limited to) the following:

- Blogging – Blogger, LiveJournal, Xanga
- Microblogging – Dailybooth, Foursquare, Google Buzz, Posterous, Tumblr, Twitter
- Postcasting - Blubrry
- Social networking – Bebo, Facebook, Google+, LinkedIn, MySpace, Orkut
- Social news sharing – Digg, Reddit
- Social bookmarking/social tagging – Delicious, Diigo, Google Reader, StumbleUpon
- Video hosting – Vimeo, YouTube

Image of Nursing and Social Media

As student nurses and student leaders, we maintain the awareness that we are contributing to the global image of nursing, as we are always representing NSNA and the nursing profession through intended or unintended outcomes of our social media usage. Photographs, videos and any other digital media, whether created by NSNA constituent school chapters, state associations, individual NSNA members, or any third party, should demonstrate individual professionalism and be consistent with NSNA's mission and values.

Privacy and Confidentiality

Elected/appointed officials or others in leadership positions in NSNA constituent school chapters and state associations at all times should maintain strict adherence to standards of professionalism. Student nurses all carry the responsibility of adhering to privacy and confidentiality standards and should be familiar with the Health Insurance Portability and Accountability Act (HIPAA), including, but not limited to, the HIPAA Privacy Rule (45 CFR Part 160 and Subparts A and E of Part 164). HIPAA regulations protect patient privacy by establishing how individually identifiable information may be used, including any information relating to the physical or mental health of an individual, or any information that may be used to identify an individual.

Student nurses have a responsibility to promptly report an identified breach of confidentiality or privacy to a school authority—including, but not limited to, an instructor, staff person, or dean.

Examples of Confidentiality/Privacy Breach

Inadvertently or intentionally breaching patient confidentiality/privacy can occur through a variety of situations and circumstances. Student nurses and nurses breach confidentiality or privacy by posting information through social media tools, such as: commenting on someone else's post that displays any information that may identify a patient; referring to patients or their care; or posting videos or photos of patients or anything that may identify a patient.

The following scenarios are case examples excerpted with permission from the August 2011 white paper, *A Nurse's Guide to the Use of Social Media* by the National Council of State Boards of Nursing. These are based on reported events to Boards of Nursing, and depict inappropriate usage of electronic and social media. The outcomes varied from jurisdiction to jurisdiction.

Scenario 1

Bob, a licensed practical/vocational (LPN/VN) nurse with 20 years of experience used his cell phone to take pictures of a resident in the group home where he worked. Prior to taking the photo, Bob asked the resident's brother if it was okay for him to take the photo. The brother agreed. The resident was unable to give consent due to her mental and physical condition. That evening, Bob saw a former employee of the group home at a local bar and showed him the photo, as well as discussed the resident's current condition. The administrator of the group home learned of Bob's actions and terminated his employment; the matter was also reported to the Board of Nursing. Bob told the Board of Nursing that he thought his behavior was acceptable, because he has consent from the resident's brother prior to taking the photo. He also thought it was acceptable to discuss the resident's condition with the former employee because that person is now employed at another facility within the same company, and has previously worked with this resident. The nurse acknowledged that he had no legitimate purpose for taking or showing the photo, or for discussing the resident's condition. The Board of Nursing imposed disciplinary action on Bob's nursing license requiring him to complete continuing education on patient privacy and confidentiality, ethics, and professional boundaries.

This case demonstrates the need to obtain valid consent before taking client photographs; the impropriety of using a personal device to take a patient's photo; and that confidential information should not be disclosed to persons no longer involved with the care of the patient.

Scenario 2

A Board of Nursing received a complaint that a nurse had blogged on a local newspaper's online chat room. The complaint notes that the nurse bragged about taking care of her "little handicapper," and because they lived in a small town, the complainant could actually identify the nurse and the client. The complainant stated that the nurse violated "privacy laws" of the child and his family. It was also discovered that there appeared to be a debate between the complainant and the nurse on the blog over local issues. These debates and disagreements resulted in the other blogger filing a complaint against the nurse.

A check of the newspaper website confirmed that the nurse appeared to write affectionately about the handicapped child to whom she provided care. In addition to making notes about her "little handicapper," there were also comments about a wheelchair and about the child's age. The comments were not meant to be offensive, but did provide personal information about the client. There was no specific identifying information about the client on the blog, but if you knew the nurse, the client, or the client's family, it would be possible to identify who was being discussed.

The board investigator contacted the nurse about the issue. The nurse admitted that she is a frequent blogger on the site; she explained that she does not have a television and blogging is what she does for entertainment. The investigator discussed that as a nurse, she must be careful not to provide any information about her home care patients in a public forum.

The Board of Nursing could have taken disciplinary action for the nurse failing to maintain confidentiality when posting on blogs, discussion boards, etc. The site used by the nurse was not specifically associated with her, like a personal blog; nonetheless the nurse posted sufficient information to identify herself and the client.

Scenario 3

Nursing students at a local college had organized a group on Facebook that allowed the student nurses' association to post announcements and where students could frequently blog, sharing day to day tips and arranging study groups. A student-related clinical error occurred in a local facility and the student was dismissed from clinical that day, pending an evaluation of the error. That evening, the students in the program blogged and posted about the error, perceived fairness and unfairness of the discipline, and began to speculate on the student's future. The clinical error was described, and since the college only used two facilities for clinical experiences, it was easy to discern where the error took place. The page and blog could be accessed by friends of the student, as well as by the general public.

The students in this scenario could face possible expulsion and discipline. These pages can be accessed by the public, and patients identified because this is a small community. It is a myth that the information can only be accessed by a small group; once data is posted online, it is forever embedded into that server and can be retrieved. Someone could also have taken a screenshot of the situation and posted it on a public site. This is a violation of employee/university policies.

Developing Social Media Guidelines

NSNA constituent school chapters and state associations are encouraged to adopt a social media policy for its own members. When developing policies or guidelines, elected leaders should working with their faculty advisor to first reference the rules and regulations of their college/university, as well as the school of nursing, which may have additional policies. To further develop the guidelines, they should then consider utilizing the American Nurses Association and National Council State Boards of Nursing social media resources and recommendations.

Consequences

NSNA constituent school chapters and state associations are encouraged to adopt a social media policy for its own members and educate student nurses about potential consequences of a breach of privacy/confidentiality. For consequences and/or disciplinary actions regarding the potential breach of any social media policy adopted by NSNA constituent school chapters and state associations, NSNA recommends looking to school regulations or state boards of nursing regulations/policies for guidance, as well as the NSNA Bill of Student Rights and Responsibilities, and the NSNA Code of Ethics.

Suggestions

It is important to acknowledge that inappropriate social media behavior occurs. The following suggestions are intended to minimize the risks of using social media:

- Student nurses should be cognizant of the potential impact of each post made, with the understanding that patients, classmates, instructors, employers, and other personal or professional contacts may view an individual's online activity as a reflection of the individual's career as well as the nursing profession in general.
- Student nurses should stay informed about the privacy settings of the social media sites they utilize, as privacy settings often change.
 - For example, Facebook previously offered a privacy setting that restricted anyone (even friends) from viewing photos that you are tagged in. This was discontinued.
- Student nurses who utilize social networking sites should actively maintain an awareness of how their professionalism may be affected by friends' and peers' usage of the same sites.
 - For example, Jane posts photos from a weekend party and tags Dave in several of them. Dave immediately untags himself to maintain his professionalism. However, Jane has set her privacy settings for the photo album so that "friends of friends" may view them. Even though Dave is no longer tagged, all of Jane's friends—and everyone connected to each friend of Jane—can view photos of Dave that Jane uploaded.
- Student nurses who are elected/appointed officers should restrict their personal activity to family and friends, and maintain a second option for their "public face" for colleagues, classmates and peers while in office. This is also recommended for student nurses who want to maintain a separation of their personal lives from their professional lives.

- Example: A school president creates a public Facebook page that followers can “like” to maintain professional networking and communications with the school chapter Board.
- Alternate example: After thoroughly reviewing the privacy setting options, a student chooses a customized setting so that anyone in their “Restricted” group may only view their profile photo and contact information. When a new professional contact requests friendship, the student adds the new contact to their “Restricted” group and accepts the request. If the student would like to post a healthcare related article, she/he may change the settings for that particular post so that all friends can view it.
- Student nurses should not share, post, or otherwise disseminate any information, that can identify a patient, or in any way violate a patient’s rights or privacy. Limiting access through privacy setting is not sufficient to ensure privacy of patients.
- Student nurses should never refer to anyone in a disparaging manner, even if the person cannot be identified with the information stated.
- Student nurses should not make threatening, harassing, sexually explicit, or derogatory statements regarding any person’s race, ethnicity, gender, age, citizenship, national origin, sexual orientation, disability, religious beliefs, political views, or educational choices.
- Student nurses should not make disparaging remarks about any college, university, or school of nursing, including the students, faculty members and staff.
- Student nurses should not post content or otherwise speak on behalf of any college, university, school of nursing, or other student nurses association unless authorized to do so.
- NSNA constituent school chapters, state associations and individual members should refrain from social media usage that individually represents—or attempts to represent—the voice of NSNA, or create any reasonable impression of official representation of NSNA. An example of inappropriate representation would be a website, social media website, or other social media tool that utilizes the NSNA logo or FNSNA logo. These logos may not be used by anyone, including members of school or state chapters. The name National Student Nurses’ Association, Inc. (NSNA)[®] may be used only by official NSNA school and state constituents with the following wording: “[insert name of school or state association] is an official constituent of the National Student Nurses’ Association, Inc.[®]”

Common Issues

Drawing the lines:

- “I prefer to accept friendship requests from only close family members and friends. After networking at a conference, a professional contact requests me as a friend on Facebook. I am reluctant to accept because I want to keep my account personal and private, but I do not want to squander my chances of maintaining a professional relationship with this person. Should I accept?”

- Possible solution: Create a LinkedIn account (if one has not already been created). Respond to the initial request, thanking the person for initiating a connection. State that your personal preference is to keep Facebook limited to family and that you would very much like to connect with them through LinkedIn.

Blurring the Lines

- “My personal life is my personal life. It bears no reflection on my competence in providing the best possible patient care that I know I am capable of. So why should I be held accountable in my professional life for something I do or say in my personal life?”
 - The reality is: Facebook, Twitter, and other social media sites are public forums. Those who use these forums privately for personal purposes may not realize the degree to which their activities are visible to the general public. It is advised to refrain from making any statement on social media sites that you would not be comfortable saying out loud in public.
 - The reality is: Employers and recruiters are looking for social media activity when reviewing résumés for job opportunities.

Benefits of Social Media

Social media allows student nurses to interact with colleagues when separated by geography or other factors. Student nurses can build on relationships, and develop a professional presence online. Social media can benefit NSNA in a variety of ways, including fostering professional connections, promoting timely communication between peers, and educating and informing NSNA members and future members about the role of NSNA as the only professional nursing organization for nursing students.

Examples of Benefiting from Social Media Use

- Social media provides an outlet for professional networking, building new relationships and fostering existing relationships.
- Social media can be an excellent tool for exchanging knowledge among peers and classmates.
- New dialogues and the sharing of nursing or healthcare information, including research and best practices, can be more fluid through social media platforms.
- Social media use is an efficient way to bring nursing and healthcare issues to individuals who are not familiar with current nursing and healthcare trends.
- Social media presents an opportunity to fine tune one’s online professional presence, while contributing to a continued positive image of the nursing profession.

Conclusion

Because social networking offers the potential for both positive and negative consequences, nurses and student nurses should consider a number of principles when functioning within the virtual world of social media in order to maintain their own reputation, and that of nursing as the most trusted profession.

References/Resources

American Nurses Association (2011). Navigating the World of Social Media.

<http://bit.ly/tkVRri>

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<http://ana.nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/NursingStandards/ANAPrinciples.aspx>

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