



## Ethics – Social Media Boundaries

Tom Erickson, MA, CSP, NCC, LMHC

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## Disclosures


**Credits:**

- 5 CE days
- funding still a work in progress ...

**Conflicts:**

- None

The human brain is a wonderful thing. It starts working the moment you are born, and never stops until you stand up to speak in public.



SWAGCARS


**All slides will be made available on the NAP website**

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## Objectives

- What is Social Media?
- Are Social Media postings safe and secure?
- Social Media Boundary issues
- 10 things you should know about Social Media
- Vignettes
- Q & A

In the not too distant future, YouTube, Twitter & FaceBook will merge to form one giant, idiotic, super-sized, time-wasting, non-productive, time-stealing, mind-dumbing, do-not-need-to-know website called




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## Boundary Issues & Social Media

**Who uses Social Media (SM)?**

- Facebook, LinkedIn, SnapChat, Twitter, etc.

**Do you have a Social Media account?**



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## Boundaries & Social Media

**What is Social Media (SM)?**

**social media**  
*noun* (usually used with a plural verb) "websites and other online means of communication that are used by large groups of people to share information and to develop social and professional contacts"  
<http://dictionary.reference.com/browse/social+media?#t>

**How is SM different than:**

- Website
- Email
- Fax
- Letters
- Phone calls



**SM is specifically a "broadcast" format while the others tend to be more individualized.**


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## Boundaries & Social Media

**What is Social Media (SM)?**

**SM uses mass multi-directional communication – it is not one-to-one communication**

**It is the multi-directional function that is both appealing as well as detrimental.**



**Imagine your med record being handled this way ...**

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## Social Media

### Are SM postings safe and secure?

**With SM you cannot control what others do with your information or the information of others – yet you can be held liable for it!**

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## Social Media

Everything on your Social Media account is discoverable by your:

- Patient,
- co-workers,
- supervisor/employer,
- law enforcement,
- taxing authority,
- criminals,
- credentialing board(s) ... *this includes the BCP (E.g., LinkedIn – NAP/BCP)*
- sociopaths/predators,
- divorce attorneys,
- spouses,
- ex-spouses and disgruntled lovers, etc.

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## Social Media Boundary Violation

- Have you ever “friended” a Patient or have you had contact with a Patient outside of your professional role as a Psychometrist?

**If you answer Yes you are at risk of a Boundary Violation**

**“Friending” is outside the professional role.**

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## Social Media Boundary Violation

**NOTHING** on the Internet is permanently deleted

**EVERYTHING** is archived somewhere (*Google is more than a SE – it is a permanent directory*)

Disclosing PHI is harmful – even if the Patient name or other demographics is not used, or is on a private website/email

**NEVER** repeat a Patient’s self-report posting ...  
**YOU can be held liable for it**

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## 10 things you should know ...

1. Avoid cross-posting any professional boundary items with Patients through **ANY SM** – complaints of professional boundary violations by physicians using social media have resulted in disciplinary actions negatively impacting their careers.
2. Resist using SM to find information about your Patient – this is probably not a professional boundary violation ... however, using such technology for any other reason runs the risk of disciplinary action.

Source: Washington State Medical Association: [wama.org/social-media](http://wama.org/social-media)

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## 10 things you should know ...

3. Is there a really really **REALLY** good reason for you to post something on SM? – SM has a very wide audience, especially since others can repost/re-tweet what you wrote = you have no control over how your information is used, will be used – against you or others
4. If you do use SM you really need to be actively monitoring what is said about YOU – your reputation needs to be protected; if there is negative content do not reply or respond – you should contact the site administrator directly and ask to have the information removed ... and you may have to be persistent ... very persistent.

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## 10 things you should know ...

5. Everything you post on SM is discoverable – **EVERYTHING** – in SM information you post can be traced back to you, even if you use an alias or post it “anonymously”

*Recommendation = never post anything you would not say to someone in person.*

6. Don't think that using some cryptic communication style is enough – it's not – masking your communication can be deciphered – even if you de-identify individuals you are referring to ... perhaps family members or friends recognize the details and figure out who you are talking about

## 10 things you should know ...

7. If you must, be transparent and accurate – how you write is not necessarily how others read it

- Statements can have more than one meaning. Avoid ambiguous statements and be clear in your writings to avoid harming your reputation or your relationship with your employer.
- State your affiliations you have with others including employers and professional organizations and the views you state are your own and not those of others.
- Avoid exaggerations and distortions of your qualifications and professional achievements.

**Sometimes it's not what you said but how you said it.**

## 10 things you should know ...

8. Respect your employer's SM and Internet use policies – remember, every employee works at the convenience of the employer – no matter how important you think you are

- Do you know your employer's Internet and SM policies?
- Have they changed in the past couple of years? – if you think not you need to revisit those policies
- Ask your HR or IT department about these policies
- The information should include information about your online behavior, policy, code of conduct, anti-harassment, privacy and security policies

## 10 things you should know ...

9. If you own a practice/business, make sure you have a SM policy for everyone in the business

- Prohibiting against all use of SM may violate labor laws and speech protections
- Include a website disclaimer – this will not entirely “protect” but help to “deflect” – you are able to show you took steps to avoid pitfalls.

## 10 things you should know ...

10. Keep your professional and personal use of SM separate

- Do not become Facebook friends with Patients
- Do not post pictures or descriptions of activities that may make you appear unprofessional – even if this has nothing to do with your work.
- Enable the privacy controls for your SM & internet pages to limit what public visitors can see.
- Check the sites of others you know as they may have taken your private information and placed it on their public pages – and ask to have them remove/protect your content (BCP and NAP have had something similar happen)
- Keep your personal info separate from your professional info – have 2 separate accounts (do not friend yourself!)
- Do not post neuropsych measures/stimuli or respond to open-source communications (PBS, 60 Minutes, etc.)

## Social Media

**Everything is confidential till there is a really REALLY good overriding reason why it should not be.**

Just like medical records

## AMA position on SM use

### Opinion 9.124 - Professionalism in the Use of Social Media

The Internet has created the ability for medical students and physicians to communicate and share information quickly and to reach millions of people easily. Participating in social networking and other similar Internet opportunities can support physicians' personal expression, enable individual physicians to have a professional presence online, foster collegiality and camaraderie within the profession, provide opportunity to widely disseminate public health messages and other health communication. Social networks, blogs, and other forms of communication online also create new challenges to the Examinee-physician relationship. Physicians should weigh a number of considerations when maintaining a presence online:

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## AMA position on SM use

(a) Physicians should be cognizant of standards of Examinee privacy and confidentiality that must be maintained in all environments, including online, and must refrain from posting identifiable Examinee information online.

(b) When using the Internet for social networking, physicians should use privacy settings to safeguard personal information and content to the extent possible, but should realize that privacy settings are not absolute and that once on the Internet, content is likely there permanently. Thus, physicians should routinely monitor their own Internet presence to ensure that the personal and professional information on their own sites and, to the extent possible, content posted about them by others, is accurate and appropriate.

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## AMA position on SM use

(c) If they interact with Examinees on the Internet, physicians must maintain appropriate boundaries of the Examinee-physician relationship in accordance with professional ethical guidelines, just as they would in any other context.

(d) To maintain appropriate professional boundaries physicians should consider separating personal and professional content online.

(e) When physicians see content posted by colleagues that appears unprofessional they have a responsibility to bring that content to the attention of the individual, so that he or she can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the physician should report the matter to appropriate authorities.

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## AMA position on SM use

(f) Physicians must recognize that actions online and content posted may negatively affect their reputations among Examinees and colleagues, may have consequences for their medical careers (particularly for physicians-in-training and medical students), and can undermine public trust in the medical profession. (I, II, IV)

Source: <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion9124.page>

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## Social Media

### Core Principles of SM Protections – same as in medicine/health profession:

- Do no harm;
- Place your Patients' interests above your own;
- Always adhere to the same principles of professionalism online as offline;
- Maintain professional boundaries at all times;
- Do not misuse information gained through the Psychometrist/Patient relationship or from PHI records;
- Do not do anything which you would hesitate to note in an Patient's chart or to explain to the Patient, their family members, your colleagues, the news media, or your credentialing review board (the BCP, et. al.)

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## Social Media

**The early years of the first 2 generations of the NAP websites, nearly every posted picture of Psychometrists showed Psychometrists**

**Could NAP be liable?**

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## Vignettes

Would you say the following vignettes are:

1. **Appropriate or inappropriate?**
2. **Ethical violation or not?**
3. **If unethical, is it also unlawful?**

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## Appropriate or Not?

**Example:** Is searching for a Patient on the Internet out of personal curiosity a boundary violation even if the Patient never learned it had occurred?

Yes or No

1. **Appropriate or inappropriate?**
2. **Ethical violation or not?**
3. **If unethical, is it also unlawful?**

**Principle: Not related to clinical care violation:** A professional boundary crossing or violation can occur whether a Patient gains knowledge of it or not.

*Remember when Britney Spears was admitted to a psych unit?*

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## Appropriate or Not?

**Example:** Prior to testing, the Psychometrist looks up the referral information (in the electronic medical record) of their assigned Patient.

Yes or No

1. **Appropriate or inappropriate?**
2. **Ethical violation or not?**
3. **If unethical, is it also unlawful?**

While they have a moment, the same Psychometrist looks up the referral information of the Patient of their co-worker Psychometrist. The first Psychometrist mentions to the second Psychometrist, "Looks like you will have an interesting patient today."

Yes or No

**Principle: Need-to-know violation + boundary violation + PHI/HIPAA violation (part 2 above only)**

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## Appropriate or Not?

**Example:** You are asked to test a Patient that you have never met before on a day when the PhD and other staff are out. The Patient arrives alone, has no ID, is confused (delirious) and essentially untestable due to the confusion. Is it acceptable to look up the Patient online to find a contact number or family member to pick up the Patient?

Yes or No

1. **Appropriate or inappropriate?**
2. **Ethical violation or not?**
3. **If unethical, is it also unlawful?**

– even if it is a safety issue?

**Principle: Pt safety trumps most other things +** With few exceptions, you should not inquire into Patients' lives for reasons unrelated to clinical care or staff safety. If no clinical or academic research reason exists to make such an inquiry, then should not do so.

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## Appropriate or Not?

**Example:** A Patient is running for elected public office and the psychometrist wants to research the Patient's political positions in order to determine how to vote.

Yes or No

1. **Appropriate or inappropriate?**
2. **Ethical violation or not?**
3. **If unethical, is it also unlawful?**

What if the Internet search was done at home?

**Principle: Not related to clinical care violation:** With few exceptions, you should not inquire into Patients' lives for reasons unrelated to clinical care or staff safety. If no clinical or academic research reason exists to make such an inquiry, then should not do so.

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## Appropriate or Not?

**Example:** A well-respected Psychometrist recently started posting comments, views and observations on their personal Twitter, Facebook and blog regarding what he/she felt were poor test administration instructions and procedures as well as scoring difficulties of a newly published measure of dementia. That same month the NIH published a peer-reviewed opinion supporting the wide-spread use of this very same instrument. The Psychometrist hardened his/her position by adding additional negative opinions and comments and disagreeing with the opinions of the NIH. The tweet went viral and was read by professionals, researchers, potential Patients, colleagues, and the public!

Yes or No

1. **Appropriate or inappropriate?**
2. **Ethical violation or not?**
3. **If unethical, is it also unlawful?**

**Principle: Unprofessional Conduct:** The appearance of unprofessionalism may lead patients to question professional competency and should refrain from portraying any unprofessional depictions of themselves on social media and social networking websites.

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## Appropriate or Not?

**Example:** A Patient noted disrespectful language on a Psychometrist's blog when the Psychometrist expressed frustration towards another Patient who had failed consecutive testing appointments. When the Patient did show for the assessment effort measures were often failed or questionable. The Psychometrist referred to the Patient as "a lazy schmo" and "a fat chubbo" on their blog.

1. Appropriate or inappropriate?
2. Ethical violation or not?
3. If unethical, is it also unlawful?

Yes or No

**Principle: Unprofessional Conduct:** The appearance of unprofessionalism may lead patients to question professional competency and should refrain from portraying any unprofessional depictions of themselves on social media and social networking websites.

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## Appropriate or Not?

**Example:** A concerned Patient notes that the Psychometrist she was tested by as part of a longitudinal study (involving multiple assessments across 18 months) frequently describes "partying" on their Facebook page, which is accompanied by images of the Psychometrist intoxicated. The Patient is scheduled to have another assessment in the coming week and begins to question whether the Psychometrist is sober and appropriately prepared to conduct the neuropsychological assessment.

1. Appropriate or inappropriate?
2. Ethical violation or not?
3. If unethical, is it also unlawful?

Yes or No

**Principle: Unprofessional Conduct:** The appearance of unprofessionalism may lead patients to question professional competency and should refrain from portraying any unprofessional depictions of themselves on social media and social networking websites.

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## Appropriate or Not?

**Example:** After several hours of testing the Patient coyly asks the Psychometrist if they can share a secret. The Psychometrist reports the evaluation is confidential. The Patient confides they are only going through the neuropsychological evaluation so they can stay on disability. Later that day the Psychometrist, in their complete disgust of the Patient posts on SM that "as a tax payer I'm fed up with these losers stealing our hard earned dollars." The Patient is described by noting their city, state, as well as disability case manager's name. The Psychometrist adds they want to expose this abuse of tax fraud and medical fraud of those claiming disability when in fact they are not.

1. Appropriate or inappropriate?
2. Ethical violation or not?
3. If unethical, is it also unlawful?

Yes or No

Does the Psychometrist have any rights as a taxpayer?

**Principle: Unprofessional Conduct:** The appearance of unprofessionalism may lead patients to question professional competency and should refrain from portraying any unprofessional depictions of themselves on social media and social networking websites.

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## Appropriate or Not?

**Example:** A Psychometrist comes across the online profile of one of his/her Patients on an online dating website and invites her/him to go on a date with him/her. The Patient feels pressured to accept the invitation because her next appointment with the neuropsychologist and Psychometrist would be awkward if she refuses.

1. Appropriate or inappropriate?
2. Ethical violation or not?
3. If unethical, is it also unlawful?

Yes or No

**Principle: Privacy law violation + Unprofessional conduct:** A health professional may not use information gained from Patient billing or medical records or from conversations with an Patient for reasons not permitted by federal and state privacy laws. Postings to social media sites may violate such privacy laws.

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## Q & A - Thank you

Did you hear they are making a sequel to 'The Social Network'?

It's horror film about people talking to each other face to face.

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