Social Networking and Professionalism: Issues for Nursing Faculty

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Use of Social Networking Sites

- Over 800 million people are on Facebook (2011); 50% log in daily (2011)
- Decrease in professional content exchanged (Breeding, 2009)
- News goes viral in minutes, worldwide—over 70% of Facebook users are outside the United States (2011)
- Two (2) billion postings responded to daily (2011)
- Average person has over 130 “friends” (2011)—the concept of friends is being redefined by its usage in this context
- 250 million photos posted daily (2011)
- Available in 70+ languages (2011)
- >350 million utilize Facebook on mobile devices (2011)
Introduction

- Technology and media such a part of everyday life.
- Use for credit agencies/divorce lawyers
- Traditional ideas of privacy and professional conduct are just now being defined in the online world (Foulger, et. al, 2009)
- ANA (September, 2011) *Principles for Social Networking and the Nurse*—DVD just out
- Little definitive case law re the issues
- Perception of privacy—yet it doesn’t exist (Popkin, 2010; Breslin, 2009; Greenwood, 2009; ANA, 2011)
- Twittering their every move
- Positive for networking and career building (Breeding, 2009)
Convergence with Ethical Issues

• Increased issues in ethical dilemmas—
  – more plagiarism than ever;
  – students fabricating experiences and written assignments
  – feel it is okay to copy:
  – everybody shares everything, why not work/homework/private information

• Privacy is also being redefined

• Minimal definitive case law re these issues
Convergence with Ethical Issues

• Crary of AP (2010)
  – 64% of high school students have cheated on tests
    • 38% two or more times;
    • 30% have stolen from a store;
    • 36% plagiarized;
    • 42% lie to save money;
    • yet 93% satisfied with personal ethics and character
  – Whole new world in terms of perception
  – Opportunities increased to cheat
  – Pressure to perform is greater
  – Poor role models
  – Fewer consequences and less accountability
  – Generational issues--Perception
  – Too busy
Scenario/Nursing Students

- foul language; patient discussion;
  - “bashing” clinical site; “dissing” instructors and fellow students;
  - inappropriate photos

- Actions taken
  - Affirmation statement
  - Removal from program
  - Social Networking Policies

- Result
  - re-instatement of student, following appeal
Case Law

• Minimal Judges have little case law on subject with which to judge cases
  – U of Louisville (Chronicle of Higher Education, 2009)
  – Mississippi Case pending
  – Wisconsin nurses posted patient X-Rays (WISN, 2009)
  – Virginia—Internet-based communication does not substitute for in-person exam—MD issue (Hawn, 2009)
  – Free speech issues (Breslin, 2009)—employees can be disciplined for off-duty behavior if reputation of employer is damaged by the posting or co-workers are being harassed
  – Dayton High School—banning Facebook and texting
  – Other new cases

• Most cases have resulted in reinstatement of students necessitating a need to educate law makers and the judicial system about professional standards
Implications for Faculty

- Affirmation statement
  - with caveat at beginning
  - Done each semester. Additional scenario development for professional issues
- Role modeling by faculty
  - electronically as well as personally
- Should faculty and students “friend” each other?
- Blur lines between professional and personal (NursingTimes, 2009)
- Students must assume personal accountability and disciplinary actions must reflect the serious nature of these professional issues
Implications for Faculty

– Two approaches
  • Rule compliance approach—discipline –based strategy
    – Legalistic and adversarial in nature
  • Integrity approach—developmental perspective
    – students choose to act with integrity (Bart, 2009; Gallant, 2009)

– Need to re-assess current policy to create a culture of academic integrity

– Choose a strategy that is best for institutional structures and cultures and includes an educational component to teach the meaning of ethics and integrity (Gallant, 2009)
Implications for Faculty

– Assist students in understanding how this impacts them in workplace
  • Internet searches before hiring and during employment to check what has been said
  • Can be fired for speaking “ill” of job
  • Violation of HIPAA if talking about patients
  • More than ½ of employers check before hiring
  • Any expectation of privacy is lost when you post on sites.**
Implications for Professionalism

• Nursing
  – HIPAA; no specific guidelines address blogging or electronic media/social networking (McBride, 2009)
• Professional Standards—must be maintained
• Nurses most trusted profession multiple years by Gallup
• “Public judges nurses, not by their demeanor at work but also by the behavior and values that they demonstrate in their personal lives”-(NursingTimes, 2009)
• Should not be used for professional communications (Jannsen, 2009)
Implications for Professionalism

– Knowing a nurse’s personal views could have the potential to affect how patients are treated or how they perceive how they are treated

– Erosion of trust—professional versus personal (McBride, 2009)

– Use discipline about the topics discussed on sites, including Twitter

– Definitions of Standards of Care will need to be adapted to reflect the use of social networking media (Hawn, 2009)
ANA Principles

• Overview
  – Provides avenue for exchange of knowledge and dissemination to many
  – Professional obligation re: nature, benefits and consequences of social networking
  – Provides networking with colleagues, globally
  – Vehicle for educating public
ANA Principles

• Overview
  – Information has the ability to “propagate itself”
    • Fallacies become fact
  – Nurses’ poor judgment have “unintended consequences”
  – Judgment’s are made about a nurse’s professional “suitability”
  – Possible HIPAA violations
ANA Principles

• Overview
  – Common misconception of postings
  – All postings are public and private
    • “Just about anyone can, with a little effort, view postings.”
ANA Principles

- Principles for Social Networking
  - 1. “Nurses must not transmit of place online individually identifiable patient information.”
    - Know responsibilities
    - Removing patient name is not enough
  - 2. “Nurses who interact ... on social media... must observe ...boundries.”
    - guidelines are no different online than in person
ANA Principles

• Principles for social networking
  – 3. “Nurses should evaluate postings as if patient, colleague, educational institution, or employer could...view postings.”
    • Content can benefit or harm career and the profession
  – 4. “Nurses should take advantage of privacy settings...”
    • Does not guarantee information will not be repeated
ANA Principles

• Principles for social networking
  – 5. “As the patient’s advocate, nurses are obligated to take appropriate action regarding instances of questionable healthcare delivery.”
  • The nurse is obligated to report unethical or illegal standards
  – 6. “Nurses are encouraged to participate in the development of policies and procedures.”
Rules to Live By

– Assume any post will be read by everyone
– If there is something you do not want another party to know, don’t write it.
– Don’t write anything you wouldn’t want your mother, spouse, children or employer to read.
– Restricting access is NOT a guarantee that the wrong person will not read it. What you post can be read long after you post it
– Use judgment and common sense (Breslin, 2009)
– Conduct an Internet search of yourself frequently and manage your image.
– Mark online profiles as private.
– Be careful with visuals and content you post and avoid stating personal views; keep it clean and avoid scandalous statements and material
Rules to Live By

- An online social network like LinkedIn and highlight work history and network with others
- Use e-mail very carefully—grammar and spelling correct; professional; avoid slang
- Make sure your e-mail address and voice mail messages are professional, (Jannsen, 2009)