

PA Professional

Heart Disease

Innovations and
Treatment Trends

Social Media
for Health
Professionals

Avoiding the Pitfalls

PAYMENT MATTERS

Accountable Care
Organizations



American Academy of
PHYSICIAN ASSISTANTS
Connecting PAs, Transforming Care

BY CHRISTOPHER DOSCHER

Electronic Networks Raise Question of What's Appropriate to Share

Social-ized

WEB SITES AND MOBILE APPS that allow us to instantly share various aspects of our lives with the world are a part of day-to-day life for millions of people. And while stories of people losing their jobs after making negative comments online about their employer or boss are not uncommon, posting information about your personal life can be just as damaging in the health care field, where professionals are often held to a higher standard of behavior.

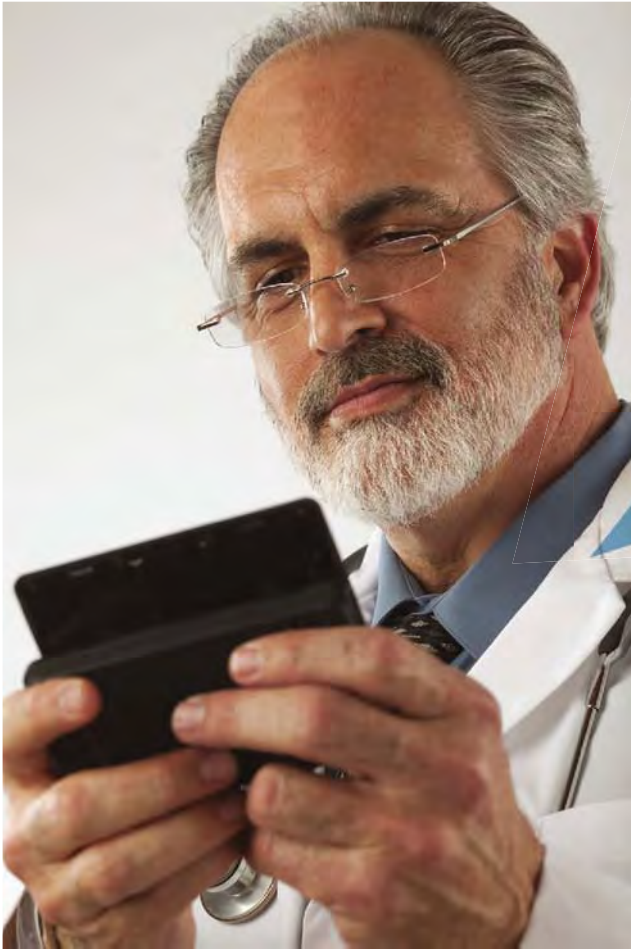
It should go without saying that information protected under HIPAA shouldn't be shared online. But where should PAs draw the line in posting information about themselves unrelated to their work? And how much, if any, should they interact with patients online?

The rapid rise in popularity of social media tools makes it easy to forget that they haven't been around very long. "It's still early in the game," said David Harlow, an attorney who owns the Harlow Group LLC in Newton, Mass., and is the author of the health care law blog www.healthblawg.com. "The early adopters have found social media to be a useful tool to engage patients, potential patients and potential referral sources. This is the way people are getting their information now, and it's getting to the point where it's a liability to not be involved."

SHUTTERSTOCK / BONDOR STUDIO

Medicine





FREQUENCY OF “UNPROFESSIONAL” INCIDENTS

Sixty percent of deans who responded to a study published in the Sept. 23, 2009 *Journal of the American Medical Association* reported that incidents of students posting unprofessional content online had occurred at their institutions. The frequency of incidents was as follows:

- Fewer than five incidents, 78 percent
- Five to 15 incidents, 7 percent
- Some incidents, unsure how many, 2 percent
- Incidents involving violation of patient confidentiality, 13 percent

WHAT MEDICAL SCHOOL DEANS DO ONLINE

According to a study published in the Sept. 23, 2009, issue of the *Journal of the American Medical Association*, 99 percent of medical school deans who responded reported “daily” Internet use for e-mail and other communications, and 71 percent reported visiting Web sites. Most said they “rarely or never” used social networking sites, read blogs, posted information on blogs, read wikis, or wrote on wikis.

Some health care providers are concerned about patient confidentiality and potential liability if they offer medical advice online, Harlow said, and they should apply proper offline standards of behavior to what they do online.

“Just as they should not be discussing confidential patient information in a coffee shop, they should not discuss it online,” he said. “Unfortunately, a lot of people post stupid things that they shouldn’t online. In this day and age, people need to be cognizant of the fact that what they post online will likely be archived.”

Many hospitals or other health care organizations either have developed or are developing internal guidelines for social media use. The American Medical Association released its own policy, “Professionalism in the Use of Social Media,” in November. Among its recommendations:

- Maintain patient confidentiality, and refrain from posting identifiable information online.
- Employ settings to protect personal privacy, but be aware that the privacy settings “are not absolute” and that information could be permanently archived. Efforts should also be made to monitor the accuracy of providers’ personal information if it is posted by others.
- Operate within the boundaries of the patient-provider relationship when interacting with patients.
- Any potentially unprofessional information posted online by colleagues should be brought to that person’s attention so that the person may remove the content or take other ap-

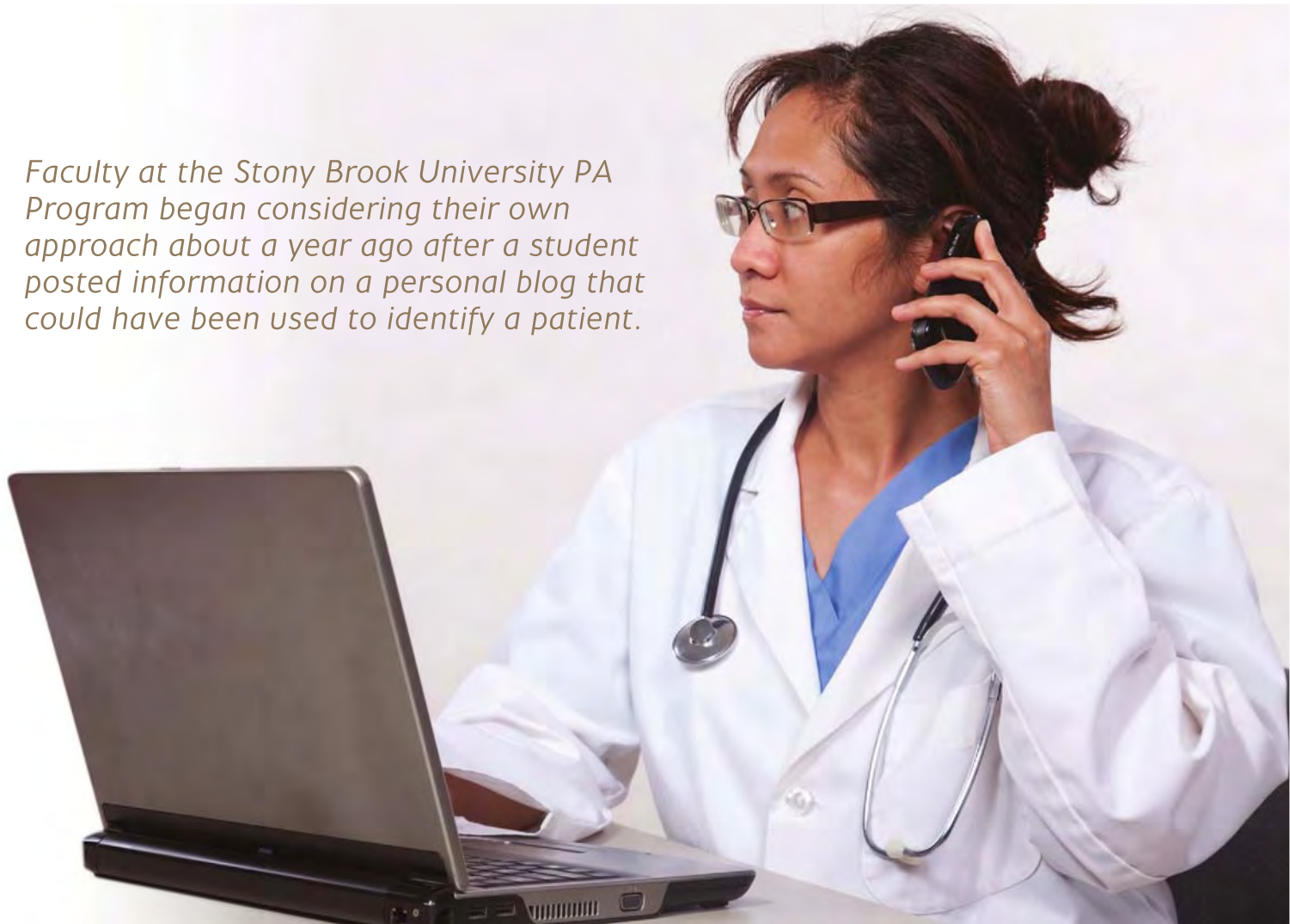
propriate action. If such action is not taken, the appropriate authorities should be notified.

- Recognize that online postings can affect the provider’s career and “can undermine public trust in the medical profession.”

Harlow said that in addition to being aware of their own actions online, PAs and other medical professionals have a responsibility to see that medical information they and others post is accurate. The speed at which inaccurate information can spread was seen recently in the fraudulent research that suggested a link between autism and vaccinations, he said. “I’m not suggesting [PAs] need to police the Web, but there is the sense that there’s an obligation to act as curators on the Web for good information.”

Social media may be even more ubiquitous among younger PAs and PA students, many of whom have grown up with the technology and may give little thought to sharing aspects of their personal lives online. A 2009 survey of medical deans, published in the *Journal of the American Medical Association*, showed that 60 percent “reported ever having incidents involving students posting unprofessional content” online. The examples included text dealing with “sexually suggestive or explicit content, or inappropriate relationships,” negative or profane comments about the institution, some of which “were reported as discriminatory in nature,” details or photographs related to alcohol or drug use, and postings that put patient privacy at risk.

Faculty at the Stony Brook University PA Program began considering their own approach about a year ago after a student posted information on a personal blog that could have been used to identify a patient.



The challenge facing health care educators, the study said, is defining what constitutes “unprofessional” behavior online. It’s a new issue for many PA programs. Faculty at the Stony Brook University PA Program in Stony Brook, N.Y. began considering their own approach about a year ago after a student posted information on a personal blog that could have been used to identify a patient.

“While a large percentage of our students don’t have a lot of social media experience yet, that is rapidly changing,” said PA Richard Thailer, assistant professor in the Stony Brook PA Program. “In a year or two, that won’t apply anymore.” Stony Brook takes steps early on to make sure students are aware that what they post online could have consequences. They are required to take a course on professionalism, which stresses the importance of how they are viewed by the public.

PA Diane Ranieri, also an assistant professor at Stony Brook, teaches a course on ethics to PA students. “They get the message clearly that they’re a PA 24 hours a day,” she said. “They’re held to a higher standard. It doesn’t matter whether they’re wearing a white coat.”

While awareness of their own online activity is important for PAs and PA students, it’s also important to realize the power of social media to communicate significant information. PA Jim Anderson, who currently works as clinical informatics educator for University of Washington Medicine at Harborview Medical Center in Seattle, is an active blogger and frequent user of social media. As a member of AAPA’s Professional

Practice Council, he has been looking at the benefits and risks of social media for PAs. “I think the risks are the same that have always been there, but there are more vehicles for them now,” he said, adding that greater attention to ethics might mitigate much of the risk. When PAs post information online, Anderson said, they should ask themselves if they’re comfortable with others—including potential employers, patients, co-workers and family members—viewing the posting. “It’s like building a giant TV,” he said. “Everything you put up is out there, sometimes forever, and it’s impossible to get rid of.”

It’s to the advantage of PA programs and medical organizations to develop policies to address social media’s risks and advantages, Harlow said. “It’s not just about marketing. It’s not just about buzz,” he said. “For some, it’s clearly about bringing patients on board. For others, it’s a medium for reaching out to other [providers]. In this day and age, you can’t be patient-centered and promote patient engagement without utilizing social media tools.”

Students at Stony Brook have begun using social media to communicate, even before they start class. Incoming students have their own Facebook page to get to know one another prior to arriving on campus. Current students also visit the page to communicate with the incoming students, sell books, offer housing and find roommates. “About 70 percent of our class is from out of state, so it’s a wonderful tool,” said Audra Perrino, assistant to the chair of the Stony Brook PA Program. “It’s a form of mentoring, and it helps keep the class cohesive before they start.” **PA**