Hi-Touch Healthcare: The Critical Six Soft Skills

Grab-N-Go Independent Training Module:

Social Media and Technology

Social Media and Technology

Grab-N-Go
Independent Training Module

Competency Domain:
Workplace Ethics and Professionalism

Social Media and Technology Use

Competency Domain: Workplace Ethics and Professionalism
"GRAB--GO" Independent Training Module

Background Information

The ever-expanding use of digital technologies and social media is significantly impacting the way that people communicate, both publically and privately.[i] Although the use of social media did not start in healthcare, computer-mediated tools have become necessary in our daily lives and their role has far-reaching implications for the delivery of quality patient care.[ii] As an effective means for promoting timely communication between practitioners and patients, digital technology provides easy access to healthcare information, enhances patient and practitioner education, and supports professional connections.[iii]

As a consequence, social media is becoming embedded in the healthcare industry and is transforming the nature of healthcare communication.[iv] To provide high quality patient care in the digital age, the healthcare industry must adapt to meet the changing methods of communication.[v] The effort to adapt and to capitalize on the power of social media is no more evident than on the Joint Commission's Social Media Page. There you will find links to blogs, Facebook, Google+, Infographics, LinkedIn, Pinterest, R S S Feeds, Twitter, Vimeo, and YouTube.[vi] (https://www.jointcommission.org/social_media.aspx). With the expanding use of

social media and healthcare informatics, more patients and providers are joining online networks to communicate data, information, and knowledge.[vii]

At this cross-section of online networks, it is often difficult for healthcare employees to separate public and private selves.[viii] The increased opportunities for both healthcare employees and the public to communicate with one another can blur the boundaries of what constitutes a professional or a personal relationship.[ix] The blurring of these lines is exacerbated by the "illusion of privacy due to the solitary use of online communication." [x] The 2015 American Nurses Association's (ANA) "Privacy and Confidentiality Statement" notes that the ubiquitous use of social media is leading to the "increased likelihood of potential and unintentional breaches of private/confidential health information (para. 1).[xi] The ANA's concerns make evident that healthcare employees must be educated on the appropriate and ethical uses of social media in their professional and private lives. To ensure that the Health Insurance Portability and Accountability Act (HIPAA) and patient confidentiality are never violated, this module will focus on the benefits of using social media to enhance healthcare communication, the dangers of using social media, and the importance of boundary management.

Training

Overall Goal: Participants will learn how to engage in professional online boundary management to ensure that their public and the private use of social media uphold HIPAA standards and do not lead to violations.

WIIFM: What's in it for me? Social media is embedded in our professional and personal lives and is revolutionizing the way we communicate. If health care professionals blur the distinction between the public and private use of social media, patient privacy violations can result. This session helps participants understand the far-reaching implications of how use of social networks can maintain or violate a patient's privacy.

Materials Provided:

1. Social Media and Technology Module PowerPoint (60 - 90 minutes)
2. Activity #1: Gallery Walk (15 - 20 minutes)
3. Gallery Walk statements
4. Activity #2: 6 Degrees of Separation (15 - 20 minutes)
5. "6 Degrees of Separation" worksheet
6. "6 Degrees of Separation" answer key
7. "6 Degrees of Separation" explanations
8. Activity #3: Social Media Meet & Greet (10 - 15 minutes)

Directions for the Trainer: Activity preparation information is included in this document and/or within the PowerPoint presentation notes. Each PowerPoint slide, as appropriate, includes detailed explanations and instructions for the trainer. As with all Grab-N-Go Modules, you can use it all for a more detailed training, or simply use oneor two of the many Activities—a la carte style!

Goal: Participants will learn to recognize the common misperceptions associated with the appropriate and ethical use of social media.

Materials Needed:

☐ A room large enough to display 12 statements and permit participants to walk around the room to review and vote on the statements

☐ Six sheets of paper

☐ A roll of tape

☐ 12 round stickers for each participant

☐ PowerPoint Slides #7 - 8

Procedures:

• Copy the Gallery Walk statements (see the next page), placing two statements on each piece of paper. (It is recommended to use a 36 point size font.)

• Cut each paper in half, making 12 statements— each one on a one-half sheet of paper.

• Display the Gallery Walk statements in random order around the room prior to the arrival of participants (initial arrival or during a break).

• Inform the participants that 12 statements about social media are displayed around the room.

• Instruct them to walk around the room and review each of the 12 statements. If they believe the statement is a true statement about social media, they should place one of their round stickers on the statement (in lieu of stickers you can ask participants to mark a large X on each statement with a pen).

• After the participants have returned to their seats, read the statements that have been marked fact (6 of the statements are facts and 6 are myths).

• Review the myths and realities on PowerPoint slide 8. If none of the myths were marked as fact, congratulate them on their social media knowledge and then ask them to identify the problems they have experienced or observed with the use of social media in their public and/or private lives. What improvements can or should be made?

Gallery Walk Statements

Myths

Privacy settings are adequate to protect communications.

If you send information marked as confidential, you are protected.

If you delete a photograph or post, it will no longer be available.

You will not be liable for a breach of confidentiality if you do not identify patients.

If you use humor in your blog post or communications, everyone will know that your intention is not serious.

If you think it is appropriate to post or communicate information then it is okay to do so.

Facts

Privacy settings can be changed without a person knowing it.

Anyone can resend information to anyone.

Deleted material can be copied or transmitted by others before it was deleted.

You can be held accountable for identifying patients through the use of pseudonyms.

Even though humor may be your intent, others may be offended by your comments.

You should check with a colleague or supervisor before sending work-related information.

Goal: Participants will learn to exercise extreme caution when sharing any patient-related experiences on social media. Even a small amount of information can be combined with information posted by others which may lead to the identification of a specific patient and a violation of that patient's privacy.

Materials Needed:

- 6 Degrees of Separation Activity sheet

- Social Media Post Scenarios

- PowerPoint slides 11 - 16

Procedures:

1. Distribute the "6 Degrees of Separation" worksheet to each participant.

2. Instruct them to complete the worksheet individually.

3. After everyone has completed the worksheet, ask the participants the following questions (*write down how many raise their hands for each of the questions so you can discuss any important observations such as how many did not classify every statement as a **violation***):

   - Raise your hand if you found ALL the statements to be **safe** to post on social media.

   - Raise your hand if you found ALL the statements to be **questionable** to post on social media.

   - Raise your hand if you found ALL the statements to be a **violation** of the patient's privacy and therefore should not be posted on social media.

4. Instruct the participants to partner up and to come to a consensus.

5. After the partners have reached a consensus, ask the same questions (*note how many people raised their hands for each of the questions*):

- Raise your hand if you found ALL the statements to be **safe** to post on social media.
- Raise your hand if you found ALL the statements to be **questionable** to post on social media.
- Raise your hand if you found ALL the statements to be a **violation** of the patient's privacy and therefore should not be posted on social media.

6. Explain that all of the statements are violations of a patient's privacy.

- Ask them if they are surprised by any of the statements and why.

7. Provide an explanation for why each statement is a violation of a patient's privacy. (Explanations can be found on the next page.)

- If all of the partners concluded that all of the statements are violations of a patient's privacy, lead a discussion in which they explain why they believe each statement to be a violation.
- Then congratulate them for being social media savvy and continue to the discussion of proceeding with caution when using social media.

Instructions: Read each post below and circle "**S**" if the post can be **safely** posted to the internet, "**Q**" if the post is **questionable**, and "**V**" if the post is a **violation** of a patient's privacy.

1. S Q V <u>Karen posts</u>: My elderly dementia patient hates to take showers! She makes my job so difficult. I definitely don't enjoy this part of my job.

2. S Q V <u>Bill posts</u>: When will young people learn not to drink and drive? It is so sad to see the devastating injuries.

3. S Q V <u>Linyu posts</u>: Here's me in my new scrubs. I absolutely love them and got a great deal on Amazon!

4. S Q V <u>Teresa posts</u>: Here is a picture of me with my one of my night shift pals. She is so awesome because she brought me chocolate for my birthday unlike my insensitive supervisor who has not even acknowledged that it is my birthday!

5. S Q V <u>Susan posts</u>: My 3-year-old leukemia patient is bravely receiving chemotherapy! He is the reason I am so proud to be a nurse!

6. S Q V <u>Ileana posts</u>: I am so tired of working with nurse to patient ratios that are in violation of our patient care standards.

7. S Q V <u>Tom posts</u>: It's so frustrating when patients do not know how to monitor their blood sugar levels and end up making several visits to the emergency room.

8. S Q V <u>Jose posts</u>: People think football is a dangerous sport, but indoor soccer is just as bad. We just saw goalie with broken eye socket. Tell me why soccer is not as dangerous as football!

9. S Q V <u>Christina posts</u>: Here's a picture of my brother home on leave from the Navy and surprising me at work. I came around the corner to find him standing at the nurse's station ready to take me to dinner. I am so happy he is home!

10. S Q V <u>Lynne posts</u>: I love being a member of the Helivac team. We were able to successfully transport another patient having an MI, although it was touch and go for a while.

<u>Instructions</u>: Read each post below and circle "**S**" if the post can be **safely** posted to the internet, "**Q**" if the post is **questionable**, and "**V**" if the post is a **violation** of a patient's privacy.

1. S Q **V** <u>Karen posts</u>: My elderly dementia patient hates to take showers! She makes my job so difficult. I definitely don't enjoy this part of my job.

2. S Q **V** <u>Bill posts</u>: When will young people learn not to drink and drive? It is so sad to see the devastating injuries.

3. S Q **V** <u>Linyu posts</u>: Here's me in my new scrubs. I absolutely love them and got a great deal on Amazon!

4. S Q **V** <u>Teresa posts</u>: Here is a picture of me with my one of my night shift pals. She is so awesome because she brought me chocolate for my birthday unlike my insensitive supervisor who has not even acknowledged that it is my birthday!

5. S Q **V** <u>Susan posts</u>: My 3-year-old leukemia patient is bravely receiving chemotherapy! He is the reason I am so proud to be a nurse!

6. S Q **V** <u>Ileana posts</u>: I am so tired of working with nurse to patient ratios that are in violation of our patient care standards.

7. S Q **V** <u>Tom posts</u>: It's so frustrating when patients do not know how to monitor their blood sugar levels and end up making several visits to the emergency room.

8. S Q **V** <u>Jose posts</u>: People think football is a dangerous sport, but indoor soccer is just as bad. We just saw goalie with broken eye socket. Tell me why soccer is not as dangerous as football!

9. S Q **V** <u>Christina posts</u>: Here's a picture of my brother home on leave from the Navy and surprising me at work. I came around the corner to find him standing at the nurse's station ready to take me to dinner. I am so happy he is home!

10. S Q **V** <u>Lynne posts</u>: I love being a member of the Helivac team. We were able to successfully transport another patient having an MI, although it was touch and go for a while

Note: Make the point that all of these healthcare employees have completed an online profile that identifies their occupation and the organization in which they are employed. This information provides the context for their comments and can be the first step in piecing information together across intertwining social networks.	
1. Karen posts	My elderly dementia patient hates to take showers! She makes my job so difficult. I definitely don't enjoy that part of my job!
	• Karen believes using pronouns "my" and "she" makes the comment general enough to be safe. However, Karen is friends with John, and John is friends with Chaz. This is a problem because Karen has posted this comment in response to a post by John. Consequently, Chaz sees Karen's post. Because Chaz has read Karen's posts to John, Chaz has learned that Karen is a nurse at Sherwood Healthcare Center. Chaz's mother is a resident at that facility and he knows his mother does not like to take showers. He begins to wonder if his mother is receiving the best possible treatment.
2. Bill posts	When will young people learn not to drink and drive? It is so sad to see the devastating injuries.
	• Bill believes his post is safe because he is responding to his friend David's posts about how upset he is to read another article in the newspaper about injuries sustained from teenage drinking and driving. The problem is that he was also one of the nurses on duty when the teenagers were brought to the hospital by the ambulance and David's network of friends (Sharon, Amanda, and Kayla) connects Bill to Amanda. Amanda's son is best friends with Steve, who was one of the teenagers in the car accident. Kayla is a nurse that works with Bill and she posts in response to Bill's comment that she hopes he is doing well after dealing with such a stressful experience. • Although Amanda is not friends with David, she puts the comments together and realizes that Bill's comment was about Steve's accident. She correctly concludes that has been severely injured and contacts Steve's mother.
3. Linyu posts	Here's me in my new scrubs. I absolutely love them and got a great deal on Amazon.
	• A violation because Martha doesn't realize that there's a patient in the background and since she works in the oncology ward she has revealed that the patient in the picture has cancer.
4. Teresa posts	Here is a picture of me with my one of my night shift pals. She is so awesome because she brought me chocolate for my birthday unlike my insensitive supervisor who has not even acknowledged that it is my birthday!
	• A violation because nurses must not make disparaging remarks about employers or co-workers (NCSBN, n.d., p. 13).
5. Emily posts	My 3-year-old leukemia patient is bravely receiving chemotherapy! He is the reason I am so proud to be a nurse! (NCSBN, n.d., p. 8).
	• A violation since the patient's age and treatment are mentioned.

6. Ileana posts	I am so tired of working with nurse to patient ratios that are in violation of our patient care standards.
• A violation to make comments about organizational policies without permission to do so (NCSBN, n.d., p. 13).	
7. Tom posts	It's so frustrating when patients do not know how to monitor their blood sugar levels and end up making several visits to the emergency room.
• A violation to make disparaging comments about a patient even if the patient is not identified (NCSBN, n.d., p. 12).	
8. Jose posts	People think football is a dangerous sport, but indoor soccer is just as bad. We just saw goalie with broken eye socket. Tell me why soccer is not as dangerous as football!
• A violation since both the player's position and the injury were both identified.	
9. Christina posts	Here's a picture of my brother home on leave from the Navy and surprising me at work. I came around the corner to find him standing at the nurse's station ready to take me to dinner. I am so happy he is home!
• A violation because included a patient status board is in the background of the picture.	
10. Lynne posts	I love being a member of the Helivac team. We were able to successfully transport another patient having an MI, although it was touch and go for a while.
• A violation because the patient's condition and the medical team were identified.	

Goal: Participants will learn how instantaneous and powerful the transmissions of messages on social media are.

Materials Needed:

- 4 jars of different colors of glitter

- PowerPoint slides 19 - 20

Procedures:

- Number each jar of glitter by placing a numbered sticker (or Post-it) on each jar (red = 1, blue = 2, etc.)

- Divide the participants into four groups of 2 - 4 people per group (depending on the number of participants. *This activity works best with a minimum of 8 participants—the trainer(s) can participate if needed.*

- Each group will have a different discussion topic (display PowerPoint slide 19):

    o Group 1: one of your most challenging experiences working with a patient

    o Group 2: one of your most challenging experiences working with the families of your patients

    o Group 3: one of your most rewarding experiences working with a patient

    o Group 4: one of your most rewarding experiences working the families of your patients

- Give each group a different color jar of glitter and instruct the participants to rub the glitter on their hands.

- After the participants have rubbed the glitter on their hands, inform them that they will have 5 minutes to mingle around the room in a meet and greet format. They must introduce themselves and **shake hands**. They should introduce themselves to people that are not in their glitter-color group and discuss the topic assigned to their group. (If the participants finish before the allotted time, proceed to the group discussion.)

- o Each participant is to share a story in one minute or less based on the assigned topic.

- After the participants have returned to their seats, ask them to note how many different colors of glitter they have on their hands and how quickly the glitter was spread. Note that many of them will have a color glitter on their hand from someone whose hand they did not personally shake. Additionally, have them note that the glitter is everywhere and is not well contained. *We lose control of our messages once they are posted on social media.*

- Explain that the transfer of glitter represents the instantaneous and powerful transmission of messages on social media – much like infectious diseases (display PowerPoint 20).

  - o Social media is a new form of communication that has become an aspect of our everyday lives. Consequently, it is important to note how quickly our online messages can be disseminated and travel based on the reach of our vastly intertwined social networks.

  - o The commonplace nature of information sharing via social media and the ease of posting messages makes it less likely that users will take the time to evaluate the appropriateness of their messages and or the ramifications of those messages (Spector & Kappel, 2012, para. 36).

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