Electronic Communication and Social Media

College of Licensed Practical Nurses of Manitoba 463 St Anne's Road Winnipeg, MB R2M 3C9



Practice Direction

Practice directions assist practical nurses in understanding their responsibilities and legal obligations, enabling them to make safe and ethical decisions within their practice. Practical nurses are expected to comply with the information disseminated in practice directions. Failure to do so may result in investigation for misconduct and/or an audit of the nurse's practice.

Purpose

The purpose of this practice direction is to provide nurses¹, employers and the public with information regarding the expectations of CLPNM registrants using electronic communications² and social media³ in both their personal and professional lives.

Introduction

The CLPNM recognizes that technology can aid in the delivery and promotion of health-related information. Despite its potential, technology can also present risks if not used appropriately. "The ease of posting and the commonplace nature of sharing information via social media may appear to blur the line between one's personal and professional lives. The quick,

easy, and efficient technology enabling use of social media reduces not only the time it takes to post content and simultaneously, the time to consider whether the post is appropriate and the ramifications of inappropriate content" (NCSBN, 2011).

When engaging with social media and other forms of electronic communication, the nurse is required, at all times, to comply with CLPNM's Standards of Practice and Code of Ethics related to communication, ethics, and professionalism. Nurses will be held accountable for conducting themselves in a professional manner that respects the nurse-client relationship, fosters trust, promotes respect for the profession and protects clients' rights to privacy and confidentiality. Failure to do so may result in a referral to the CLPNM Investigation Committee regardless of whether the use of technology occurred on personal or employer time.

Professional Boundaries

Professional boundaries are defined as "limits that protect the space between the professional's power and the client's vulnerability. Maintaining appropriate boundaries safeguards both the patient/client and the nurse by controlling or limiting this power differential. This boundary setting allows for a safe connection between the nurse and the patient based on the patient's needs" (Holder, 2007). The nurse is expected to maintain professional boundaries when using

³ Social media, for the purpose of this document, is defined as the use of the Internet to post or publish information and/or to participate in discussions. Some methods include, but are not limited to: websites, blogging, social networking, online forums, and chat rooms.





¹ For the purpose of this document, the term nurse includes all three types of CLPNM registrants: licensed practical nurses (LPNs), graduate practical nurses (GPNs), and student practical nurses (SPNs). ² Electronic communication, for the purpose of this document, is defined as a passing of information from one individual or group to another. Some methods include, but are not limited to: text, email, fax, phone, or video chat.

social media and electronic communications, just as the nurse would in the physical world.

Establishing and maintaining appropriate boundaries is a professional standard, set out in both CLPNM's Standards of Practice (Practice Standard IV) and Code of Ethics (Ethical Standard V). The nurse's duty is to respect and enforce all professional boundaries while maintaining the therapeutic nurse-client relationship to ensure the delivery of safe, competent, and ethical care.

Some ways to safeguard the boundaries between a professional therapeutic relationship and a non-professional personal relationship would be:

- not posting pictures of yourself in a clinical environment
- not revealing personal contact details to your clients (cell or home phone number, e-mail addresses, etc.), and
- not accepting or requesting friend requests from your clients on Facebook or other social media sites.

It is important to note that "nurses are personally accountable for their actions at all times, including the behavior and values that they demonstrate in their personal life" (Carlowe, 2009). Online videos, pictures, comments and text messages can be taken out of context or misconstrued in a manner that would reflect negatively on the nurse and the profession. Unprofessional images, breaches of boundaries and defamatory comments are extremely difficult to remove from the public domain once posted or disseminated electronically.

Confidentiality and Privacy

The Personal Health Information Act (PHIA) is a provincial privacy law enacted to ensure that government organizations and health care providers are held to a high standard of confidentiality with respect to all client information. PHIA ensures that clients feel comfortable discussing sensitive issues with their health care provider without fear that the information will be released inappropriately. The CLPNM's Standards of Practice (specifically Practice Standard IV and VII) and the Code of Ethics (specifically Ethical Standard II) also address the client's right to confidentiality and privacy.

Failure to uphold these rights, even inadvertently, damages the nurse-client relationship and can lead to disciplinary action. Examples include making comments about a client in enough detail that the client could be identified, sending demeaning or degrading communication about a client, or posting videos or photos of a client.

Impacting Health Care

Social media sites are in the public domain and most information can be viewed by anyone with access to the Internet. Personal communication devices may also be lost or stolen and communications that were intended as private could become public. Nursing is a trustworthy profession and in order to "maintain a high level of public trust and credibility, nurses must be mindful of the ethics surrounding issues of patient privacy and confidentiality, both while at work and during personal time" (CNA, 2012). Inappropriate nursing judgment in both the physical and the virtual world does not just affect the public; it also affects colleagues, the employer, and most certainly the entire profession.

High-quality care requires an interdisciplinary team approach. A well-functioning team is built on mutual respect and appreciation. Online harassing and bullying, or making negative comments to or about coworkers and employers (even on personal time), causes dysfunction within a team. Team dysfunction jeopardizes the client's access to safe and



effective collaborative care. According to the CLPNM's Standards of Practice (Practice Standard VII and VIII), a nurse must always display the characteristics and attributes of a professional, act as a role model, and promote a positive image of nursing. By doing so, the nurse maintains a respectful professional relationship with colleagues, which in turn, ensures better client care and a quality practice environment.

Duty to Report

The CLPNM's Standard of Practice IV identifies that a nurse must identify, respond to, and report situations of professional misconduct to appropriate authorities. This expectation extends beyond the physical work environment and also applies to online behaviour.

Professional Integrity and Dignity

Nurses are expected, at all times, to display the characteristics and attributes of a professional and to conduct themselves in a manner that enhances public confidence and presents a positive image of nursing. This expectation applies both offline and online. Before sharing information and images through social media or electronic communication, the nurse must consider the potential impact. A momentary lapse of judgment can forever impact the public's opinion of both the nurse and the nursing profession. Before posting, replying, or sending any information, a prudent nurse will ask:

- Can this be taken out of context?
- Can these images or words reflect negatively on me personally and professionally?
- Am I in breach of a professional standard or expectation of the profession?

If a nurse replies 'yes' to any one of these questions, the content is not appropriate and should not be released.

Electronic Communication and Social Media A CLPNM Practice Direction Approved September, 2014 Page 3 of 4

Common Misunderstandings

A lack of knowledge does not excuse a nurse from being held accountable for a breach of his or her professional standards. A professional will always use caution when communicating online and will consider the following factors:

- Widespread distribution once information is posted, the person who posted it has no control over what is subsequently done with that information.
- Information permanence information posted, even if quickly deleted, can be retrieved and viewed by an unknown or unwelcome audience.
- Privacy settings privacy settings vary and are rarely 100% secure.

Examples and Consequences

Some examples of inappropriate and unacceptable use of electronic communication and social media, regardless of the nurse's intent or purpose, include:

- unauthorized sharing of client information, such as conditions, concerns, locations, or identifying characteristics
- unauthorized sharing of client-related pictures or videos
- venting about an employer, a client, a coworker, or an employer-related concern
- publicly whistleblowing,⁴ and
- participating in or responding to posts that would be considered inappropriate, offensive, or in breach of the standards and/or ethics of the profession.

Potential consequences of the above-mentioned examples include:

employer disciplinary action

⁴Oxford Dictionaries define a whistleblower as "a person who informs on a person or organization regarded as engaging in an unlawful or immoral activity." In cases where the nurse has a duty to report, the matter should be reported directly to the appropriate authorities, not publicly.



- **CLPNM** disciplinary action
- personal liability or a defamation suit, and/or
- civil and/or criminal penalties.

Conclusion

Nurses must be mindful of legislation, the CLPNM's governing standards, and of employer policies to ensure they are not advertently or inadvertently publishing, displaying, or participating in forms of communication that could be a violation of a client's right to privacy or the standards of the profession. By being conscientious and prudent, and by using professional judgment, the nurse ensures that the positive, productive and enjoyable benefits of electronic communication and social media are shared by everyone.

For More Information

Contact us with questions at 463 St. Anne's Road Winnipeg MB R2M 3C9 Phone: 204-663-1212 Toll Free: 1-877-633-1212

Email: info@clpnm.ca Website: www.clpnm.ca

About the CLPNM

The CLPNM is the governing body for the licensed practical nursing profession in Manitoba, Mandated to govern its members in a manner that serves and protects the public interest, the CLPNM establishes practice requirements for the provision of safe and effective nursing care.

References

The following documents were consulted during the development of this practice direction.

CLPNM (2003 and 2014). Code of Ethics.

CLPNM (2004). Standards of Practice.

Canadian Nurses Association (2012). Ethics in Practice - When Private becomes Public: The

Ethical Challenges and Opportunities of Social Media. Retrieved from http://www.cna- aiic.ca/~/media/cna/page-content/pdfen/ethics_in_practice_feb_2012_e.pdf.

Canadian Nurses Protective Society (2010). Social Media – infoLaw. Retrieved from http://www.cnps.ca/index.php?page=147.

Carlowe, J. (2009). How to Use Social Networking Sites Safely. Retrieved from: http://www.nursingtimes.net/nursing-timesthis-weeks-issue/how-to-use-social-networkingsites-safely/1981799.article.

College of Licensed Practical Nurses of Nova Scotia (2012). Practice Statement – Electronic Communication and Use of Social Media. Retrieved from: http://clpnns.ca/wpcontent/uploads/2013/04/Social-Media.pdf.

Government of Manitoba (2001). The Licensed Practical Nurses Act of Manitoba

Government of Manitoba (1997). The Personal Health Information Act.

Holder, K. and Schenthal, S. (2007). Watch Your Step: Nursing a Professional Boundaries. Retrieved from:

http://www.nursingcenter.com/lnc/pdf?AID=69 6090&an=00006247-200702000-00009&Journal ID=54013&Issue ID=696076.

National Council of State Boards of Nursing (2011). White Paper: A Nurse's Guide to the Use of Social Media. Retrieved from: https://www.ncsbn.org/Social media guideline s.pdf.

Oxford Online Dictionaries. Retrieved from: http://www.oxforddictionaries.com/definition/e nalish/whistle-blower?a=whistleblower

Raso, R. (2010). Social media for nurse managers: What does it all mean? Retrieved from:

http://journals.lww.com/nursingmanagement/F ulltext/2010/08000/Social media for nurse ma nagers What does it all.5.aspx.



