Social Networking by Emergency Nurses

Description

Social media are collective forms of electronic communication such as websites and applications for social networking. Online interactions through social platforms allow users to create online communities to share information, engage in discussion, discuss ideas, post personal messages, and other content. Social networking can benefit healthcare workers in a variety of ways; social networking can build, maintain, and enhance professional relationships through support networks and create possibilities for discussion, research, and exchange of experiences with other healthcare professionals. Social networks also provide opportunities for rapid exchange of knowledge. Conversely, the unregulated nature of social media allows for the possibility of unintended self-disclosure by emergency nurses which may result in violations of hospital confidentiality policies and federal laws. Detrimental effects may occur unless emergency nurses are cautious with their postings and are compliant with confidentiality and privacy obligations. Thus, emergency nurses are obligated to adhere to institutional policies or sign confidentiality agreements to not share any information including photographs, or specific details that could possibly identify a patient, a co-worker, or a specific patient scenario.

ENA Position

It is the position of the Emergency Nurses Association (ENA) that:

1. Emergency nurses respect each individual’s right to privacy and confidentiality and do not transmit or post any information online or through social networks that could identify a patient or a specific patient event.

2. Emergency nurses take part in the development of institutional policies regarding the use of social media and social platforms.

3. Emergency nurses adhere to institutional policies, and legal and ethical obligations, regarding the use of social media to protect the privacy of individuals, whether online or offline.

4. Emergency nurses who are aware of potentially unethical, illegal or incorrect content posted or shared by a colleague on any social network or platform, have an ethical duty to follow their institution’s policies and their professional code of conduct, regarding the reporting of breaches of patient confidentiality.

5. Nurses who interact with patients on social media observe the patient-nurse boundaries that are prescribed in their professional code of ethics. Guidelines in these matters are no different online than in person.
Background

The use of social media is expanding rapidly as individuals and organizations increasingly embrace user-generated content. The diversity of social media platforms and methods of posting enables a new level of connection between patients, healthcare workers, and professionals. Social media has also influenced the manner in which nursing education is being delivered. In fact, the high usage rate of social media by 18 to 29 year olds has motivated the adaptation of clinical curricula to reflect the changing habits and culture of adult learners. If used responsibly and appropriately, social networks and platforms can offer several benefits for nurses and nursing students including:

- Building and maintaining professional relationships
- Establishing or accessing nursing support networks
- Discussing specific issues, interests, research, and clinical experiences with other healthcare professionals, national and globally
- Accessing resources for continuing professional development

The ease with which information can be distributed presents challenges to both privacy and professionalism. Healthcare professionals have an ethical duty to maintain professional standards and be aware that their postings may end up in the public domain and remain there, regardless of the privacy of the initial posting or the poster’s intent. Posting may include information that seems anonymous on the surface but which, when connected with other publicly accessible information, can be used to identify a patient. Posting sensitive information or negative comments about a patient or an employer online poses hazards for the poster, even if the posting does not seem to breach regulations set by law. Nurses have been disciplined for healthcare associated social media posts that were technically within the bounds of privacy laws but which breached other contractual agreements set forth by their institutions.

It is equally important that clinical information found on social media be verified via a reliable source. Social media can be easily distributed, created by anybody, and effortlessly accessed. Misinformation can spread quickly and widely. Multiple sources may be necessary to verify authenticity of facts and emergency nurses have the ability to decipher what sources are deemed trustworthy. The nursing profession is one of the most trusted professions and it is essential that emergency nurses be reminded that their profession and place of employment can easily be effected by posting negative of patients, colleagues, and the healthcare organizations.

Resources


References


Authors

Authored by
Joop Breuer, RN, CEN, CCRN, FAEN

Reviewed by ENA 2017 Position Statement Committee Member
Melanie Crowley, MSN, RN, CEN
Kim Grant, BSN, RN, CEN
Capt. Katherine Mallett, MSN, RN
Elizabeth Stone, MSN, RN, CPEN
E. Marie Wilson, MPA, RN
Justin Winger, PhD, MA, BSN, RN, Chairperson

Follow Us
Position Statement

ENA 2017 Board of Directors Liaison
Sally Snow, BSN, RN, CPEN, FAEN

ENA Staff Liaison
Monica Escalante Kolbuk, MSN, RN, CEN

Developed: 2011.
Approved by the ENA Board of Directors: February, 2012.
Approved by the ENA Board of Directors: March 2018.


This position statement, including the information and recommendations set forth herein, reflects ENA’s current position with respect to the subject matter discussed herein based on current knowledge at the time of publication. This position statement is only current as of its publication date and is subject to change without notice as new information and advances emerge. The positions, information and recommendations discussed herein are not codified into law or regulations. In addition, variations in practice, which take into account the needs of the individual patient and the resources and limitations unique to the institution, may warrant approaches, treatments and/or procedures that differ from the recommendations outlined in this position statement. Therefore, this position statement should not be construed as dictating an exclusive course of management, treatment or care, nor does adherence to this position statement guarantee a particular outcome. ENA’s position statements are never intended to replace a practitioner’s best nursing judgment based on the clinical circumstances of a particular patient or patient population. Position statements are published by ENA for educational and informational purposes only, and ENA does not “approve” or “endorse” any specific sources of information referenced herein. ENA assumes no liability for any injury and/or damage to persons or property arising out of or related to the use of or reliance on any position statement.