Policy for Appropriate Use of the Internet, Electronic Networking and Other Media

These guidelines apply to all resident physicians and resident dentists enrolled in a program administered by the West Virginia University School of Medicine. Use of the Internet includes but may not be limited to posting on blogs, instant messaging [IM], social networking sites, e-mail, posting to public media sites, mailing lists and video-sites. These guidelines apply whether using public or private devices and computers.

Background: Social and business networking Web sites or on-line communities are being used increasingly by faculty, students, residents and staff to communicate with each other, and to post events and profiles to reach external audiences. As part of the sponsoring institution's commitment to building a community in which all persons can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation, resident physicians and resident dentists are expected to act with honesty, integrity, and respect for the rights, privileges, privacy, sensibilities, and property of others.

The capacity to record, store and transmit information in electronic format brings responsibilities to those working in healthcare with respect to privacy of patient information and ensuring public trust in our participating hospitals, institutions and practice sites. Significant educational benefits can be derived from this technology but physicians need to be aware that there are also potential problems and liabilities associated with its use. Material that identifies patients, institutions or colleagues and is intentionally or unintentionally placed in the public domain may constitute a breach of standards of professionalism and confidentiality that damages the profession and our institution. Guidance for resident physicians and resident dentists in the appropriate use of the Internet and electronic publication is necessary to avoid problems while maintaining freedom of expression. The sponsoring institution is committed to maintaining respect for patient privacy. Compliance with these guidelines help our residents obtain skills with the ACGME competencies of Interpersonal Communication Skills (ICS), Professionalism (P), and Systems Based Practice (SBP).

Resident physicians and dentists will be required to review annually the Health Sciences Center Information Technology Security Awareness Training which includes but is not limited to the appropriate usage of information technology resources and various forms of electronic media.

General Guidelines for Safe Internet Use:

These Guidelines are based on several foundational principles:

- The importance of privacy and confidentiality to the development of trust between the physician and patient,

- Respect for colleagues and co-workers in an inter-professional environment,

- The tone and content of electronic conversations should remain professional.

- Individual responsibility for the content of blogs.

- The permanency of published material on the Web, and

- That all involved in health care have an obligation to maintain the privacy and security of patient records under HIPAA (Health Insurance Portability and Accountability Act of 1996)

a) Posting Information about Patients

Never post personal health information about an individual patient. Personal health information has been defined in the HIPAA as any information about an individual in oral or recorded form, where the information identifies an individual including but not limited to name, medical record number, birth date, and demographic data.

These guidelines apply even if the individual patient is the only person who may be able to identify him or herself on the basis of the posted description or image. Residents should ensure that anonymous descriptions do not contain information that will enable any person, including people who have access to other sources of information about a patient, to identify the individuals described. Photographs of patients should not be posted on the internet. Even completely de-identified information about patients should not be posted on any public site.

There is a legitimate public perception that open listings on any private health information, no matter how disguised, lacks professionalism.

b) Posting Information About Colleagues and Co-Workers

Respect for the privacy rights of colleagues and coworkers is an important part of an inter-professional working environment. If you are in doubt about whether it is appropriate to post any information about colleagues and co-workers, ask for their explicit written permission. Making demeaning or insulting comments about colleagues and co-workers to third parties is considered unprofessional behavior. Such comments may also breach the University's codes of behavior regarding harassment.

c) Professional Communication with Colleagues and Co-Workers

Respect for colleagues and co-workers is important in an inter-professional working environment. Addressing colleagues and co-workers in a manner that is insulting, abusive or demeaning is considered unprofessional behavior.

d) Posting Information Concerning Hospitals or other Institutions

Comply with the current institutional policies with respect to the conditions of use of technology and of any proprietary information such as logos or mastheads. Postgraduate trainees must not represent or imply that they are expressing the opinion of the organization. Residents should consult with the appropriate resources such as the Public Relations Department of the sponsoring institution, Graduate Medical Education Office, or their program director who can provide advice in reference to material posted on the Web that might identify the institution.

e) Offering Medical Advice

Do not misrepresent your qualifications or offer medical advice through electronic means listedin these guidelines.

f) Use of social networking sites and blogs

Residents should keep all web postings professional and in accordance with the standard ethical practices of being a resident physician or a resident dentist. Residents should:

> 1. Not report or confirm official medical activities or personal health information of patients,

> 2. Not require patients to participate in these activities to influence or maintain the patient-physician relationship,

> 3. Not electronically friend patients even if they make the request,

> 4. Not review patient profiles,

> 5. Not participate in groups with explicit sexual content or opinions that might offend or compromise the patient-physician relationship,

> 6. Use appropriate discretion for posting personal communications for friends, colleagues, or family knowing that these may be viewed by patients,

> 7. Not present their opinions or themselves as agents of West Virginia University or the School of Medicine.

Penalties for inappropriate use of the Internet

The penalties for inappropriate use of the Internet include but may not be limited to:

- Remediation, probation, suspension, dismissal or failure to promote or renew by the sponsoring institution

- Prosecution by law enforcement under the requirements of HIPAA.

Enforcement

All professionals have a collective professional duty to assure appropriate behavior, particularly in matters of privacy and confidentiality. A person who has reason to believe that another person has violated these guidelines should approach his/her immediate supervisor/program director for advice. If the issue is inadequately addressed, he/she may complain in writing to the DIO (Designated Institutional Official) for Graduate Medical Education (or Dental equivalent) with the sponsoring institution. Appeals of actions taken for violation of these guidelines shall follow the standard academic grievance processes approved by the GMEC of the sponsoring institution.

All other questions should be directed to Information Technology Services at ITS@hsc.wvu.edu, 304.293.4683.

 To view the "HSC ITS Social Networking Sites, Blogs & Instant Messaging Policy" please visit: http://its.hsc.wvu.edu/policies/hsc-its-social-networking-sites-blogs-instant-messaging-policy/

Drafted July 2009

Revised April 2010

Approved by GMEC May 2010