Social Media Policy for all UND SMHS Residents/Fellows

POLICY STATEMENT

This policy describes expected residents/fellows behaviors when using social media sites.

REASON for POLICY

The School of Medicine and Health Science faculty recognize the role social media plays in today’s society. However, as healthcare professionals in training, SMHS residents/fellows are held to a high standard when it comes to the presentation of themselves in the community and on social media sites. As residents/fellows enter their professional careers, it is important that they carefully consider what they are posting on social media sites, who they are asking to network with them, and how they respond to others on social media sites. Information placed on social media sites must not violate the University’s Code of Conduct.

WEB SITE REFERENCES

GME Policy Page: https://med.und.edu/policies/medical-residents.html

Professionalism Considerations for Online Social Networking Usage. Creighton University School of Pharmacy and Health Professions. https://spahp.creighton.edu/current-students/office-academic-and-student-affairs/policies-procedures


PRINCIPLES

I. The School of Medicine and Health Science faculty recognize the role social media plays in today's society. However, as healthcare professionals in training, SMHS residents/fellows are held to a high standard when it comes to the presentation of themselves in the community and on social media sites. As residents/fellows enter their professional careers it is important that they carefully consider what they are posting on social media sites, who they are asking to network with them, and how they respond to others on social media sites. Information placed on social media sites must not violate the University's Code of Conduct.

II. Overview

a. Social network sites should not be considered as “private.” Residents/Fellows should assume that what they post on a social media site is permanent. Archival systems may save information even if someone deletes a post, and search engines can retrieve posts years after the publication date. When using social networks, the lines between public and private, personal and professional are indistinct. Mixing social, academic and professional networking may create problems. Because comments can be forwarded or copied, a person authorized to post on a resident’s/fellow’s social media page can pass it on to others. Friends may post something to a resident’s/fellow’s site regarding their social life which may prove to be embarrassing to the resident’s/fellow’s academic or professional life. Posting media that portrays residents/fellows or their peers participating in what could be perceived as unprofessional behavior such as inappropriate sexualized behaviors, binge drinking, drug use and illegal activity is not advised. Residents/Fellows are encouraged to check their privacy settings on social media sites to limit who can and cannot read and post to their sites. Residents/fellows should also consider conducting an Internet search of their name to discover what is in cyberspace that others can see about them. If residents/fellows have any social media posts that are questionable, they should remove them from their site immediately.

Employers, faculty, clinical preceptors and patients may access information on resident’s/fellow’s social media sites that may negatively influence them regarding the resident’s/fellow’s professionalism. Many potential employers go to these sites to see what residents/fellows have posted and often determine if they are interested in having that resident/fellow as an employee. Residents/fellows have been reprimanded by clinical rotation site supervisors for social networking practices such as becoming electronic “friends” with site co-workers, interns, volunteers or patients. To promote respectful discussion, residents/fellows should be courteous and productive. With due regard for lawfully protected speech and forms of expression, residents/fellows should strive to avoid comments that are profane, obscene, defamatory, offensive, harassing, disruptive, sexually explicit, inappropriate, inflammatory or otherwise objectionable. Harassing speech that is severe, persistent, or pervasive, and is objectively offensive, is never permitted.

Residents/Fellows should not use their personal e-mail address for professional correspondence. Residents/Fellows must recognize that they are a representative of their professional program and are expected to act professionally in all correspondence. Residents/Fellows should remember that North Dakota has an open records law which means that all SMHS e-mail is potentially subject to open records. As such, residents/fellows should consider setting up a private email account with a different
provider than the SMHS for personal correspondence.

III. Academic Integrity and Professionalism

a. Discussion or posting information regarding content of examinations, tests, quizzes or assignments could be considered a violation of academic integrity. It is the resident’s/fellows responsibility to read their resident/fellow handbook regarding academic integrity and professionalism as defined by their department. The use of social media or personal devices to threaten, intimidate, ridicule, humiliate, insult, or harass someone may constitute cyberbullying and must be reported to the Program Director, and the Office of the Dean.

SMHS residents/fellows have a responsibility to help maintain public trust and confidence in their professions. Residents/fellows should refrain from posts that use institutional intellectual property, copyrights, trademarks or logos without explicit written permission. Such care should also extend to the unauthorized dissemination of copyrighted material, such as lecture notes and recordings. Residents/Fellows should not represent themselves as official representatives of the University or clinical facility in public forums. Consent obtained for educational purposes does not extend to consent for public dissemination. Even when appropriate consent is obtained for public posting and the media-containing posts are sufficiently anonymized, public perception remains an important consideration. An individual viewing a sensitive picture posted online by a SMHS resident/fellow will not assume consent has been obtained and may therefore come to think less of the resident/fellow, their profession and the institution. The separation between personal and professional online profiles should be made explicit.

IV. Rotations

a. Residents/Fellows must consult with the hospital/ clinic or agency policies or an appropriate leader within the organization for guidance regarding work related social media postings. Rotations are also frequently governed by a legally binding agreement between the host facility and the University. Unless authorized, residents/fellows are not allowed to post or speak on behalf of the clinic, hospital or agency. Residents/Fellows must be aware of and comply with clinical affiliation policies regarding use of computers, cameras and other electronic devices and the use of personal devices at the rotation. Residents/Fellows should not ask their faculty, clinical preceptors, clinical instructors or supervisors to “friend” them during their time in the rotations. This puts the residents/fellows, their faculty and their supervisors in an awkward situation by sharing personal information. If residents/fellows and supervisors mutually decide to do this after the resident/fellow graduates, that is their personal choice. Residents/Fellows are strongly advised to refrain from posting remarks about faculty or clinical site employees and from making comments that are or may be perceived to be threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or otherwise offensive. Harassing speech that is severe, persistent, or pervasive, and is objectively offensive, is never permitted.

V. HIPAA and FERPA

a. Residents/Fellows violating HIPAA, FERPA or other university/hospital/clinic policies may be subject to disciplinary action including dismissal from their professional program, criminal and/or civil charges and fines. Residents/Fellows must not present themselves as independent practitioners, and must be careful about offering medical advice in any non-educational setting, including on social media.
SMHS residents/fellows must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times. Releasing confidential health information is unethical and unlawful and could result in irreparable harm and suffering to the patient as well as fines or imprisonment for the healthcare practitioner. SMHS residents/fellows must not identify patients by name or post or publish information that may lead to the identification of a patient. Residents/fellows must not refer to patients in a disparaging manner, even if the patient is not identified.

SMHS residents/fellows are strictly prohibited from transmitting by way of any electronic media any patient related information or images that may be reasonably anticipated to violate a patient’s rights to confidentiality or privacy. This includes references to family, employment, relatives, conditions, locations of treatment or any circumstances surrounding the patient’s situation. Posting information about, or images of, a research subject is strictly prohibited.

SMHS residents/fellows must follow SMHS clinical affiliation and UND policies for taking photographs or video of patients for treatment or other legitimate purposes using employer-provided devices. SMHS residents/fellows must not share, post or otherwise disseminate any information, including images, about a patient or information gained in the residents/fellows-patient relationship with anyone unless there is a patient care related need to disclose the information or other legal obligation to do so. Online social contact with patients is discouraged, and residents/fellows must use caution when having online social contact with former patients. The fact that a patient may initiate contact with the resident/fellow does not permit the resident/fellow to engage in a personal relationship with the patient. It is unprofessional and inadvisable to form or accept a social media connection with patients or individuals with whom there is an active therapeutic, supervisory or evaluative relationship.

VI. Documented Examples of Inappropriate Social Media Behavior

a. A PT graduate working in a local hospital noticed a patient name on the new admission sheet and confirmed that the patient is a former professor from her PT program. The student, a frequent user of Facebook, wrote a message on her “wall” about the fact that her former professor has been hospitalized. Within minutes she was chatting with several of her former classmates about the professor. Later in the evening the professor’s daughter read about her mother’s hospitalization on the daughter’s favorite social networking site.

A hospital employee was forced to resign after she tweeted the governor of her state regarding a medical exam he had scheduled after regular hours. The tweet indirectly referenced the governor thus revealing he had received care as a patient at that medical center. Although the employee didn’t believe that she had broken any privacy laws, attorneys for the governor said that just because the governor was a public figure it did not mean that his health information could be considered public knowledge.

A student used a cell phone to take photographs of examination questions from a computer screen. The examination questions were passed on via a social network. Since unauthorized release of examination questions occurred, the action was considered misconduct.

A college sophomore was expelled for comments he posted on Facebook. The action marks the first time that college has expelled a resident/fellow for a posting on the
A student took an examination and tweeted the following comments and posted them to Facebook with the caption “Wow! Just finished the exam; it was the hardest exam I have ever taken. Better make sure you study chapter 4 really well!” The student was charged with misconduct.

**PROCEDURES**

I. Disciplinary Action

   a. Violation of the social media policy may result in disciplinary action by the resident’s/fellows department, the SMHS, UND and/or the clinical facility. Faculty reserve the right to monitor resident’s/fellows publicly viewable social media sites.

**RESPONSIBILITIES**

<table>
<thead>
<tr>
<th>Resident/Fellow</th>
<th>Responsible to monitor their professional behavior on social media sites and report violations of HIPAA or FERPA to the appropriate authority.</th>
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<tr>
<td>Department</td>
<td>Provide a link to the Social Media Policy to all residents/fellows in residency contract.</td>
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<tr>
<td>Administration</td>
<td>Violations of the Social Media Policy should be reported to one of the following: Department Chairperson Program Director DIO</td>
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GMEC adapted FAC policy and approved on February 14, 2017
Medical Resident Policies and Procedures

The residency program is designed to provide residents with an extensive experience in the art and science of medicine in order to achieve excellence in the diagnosis, care, and treatment of patients. To achieve this goal, residents agree to abide by certain policies and guidelines. In return, they are given a number of benefits and the training they need to be successful in their careers.

Below is a look at the policies and fair process procedures of the residency program. After reviewing these policies, if you have any questions, please don't hesitate to contact us for help.

Graduate Medical Education

Center for Family Medicine, Bismarck

Center for Family Medicine, Hettinger

Internal Medicine Residency

Surgery Residency

Transitional Year Residency