



Mountain Plains ATTC (HHS Region 8)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Introductory Webinar
**New Ethical Dilemmas:
Developing Professional
Competency in the Digital Age**

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At the time of this presentation, Elinore F. McCance-Katz, served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of Christina Boyd and Gary Wareham and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

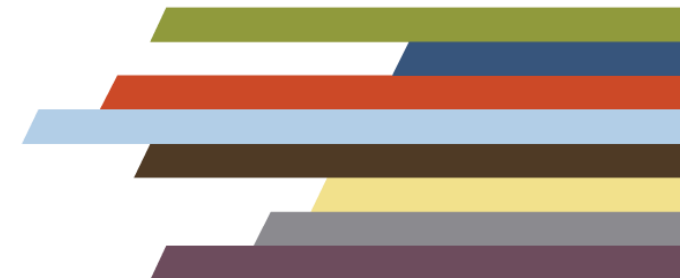
12-9-2019



Mountain Plains ATTC (HHS Region 8)

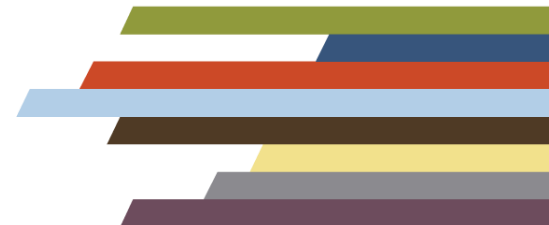
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Agenda

- 1. *Current Use of Technology***
- 2. *Digital Types***
- 3. *Social Media***
- 4. *Ethics – Self Disclosure and Boundaries***
- 5. *Email/Text/Videoconferencing – Privacy & Security***
- 6. *Safe Technology Practices***
- 7. *Social Media Policies for Individuals and Agencies***



Objectives



1) Name three ethical concerns related to the use of technology and social media



2) Discuss two elements that behavioral health providers must consider before posting content online



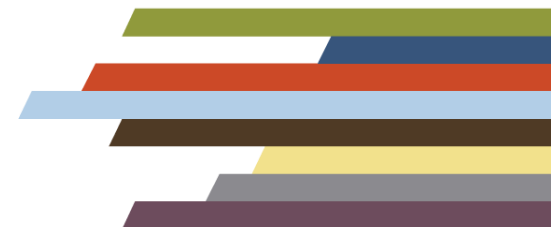
3) Recall three social media policy issues that may put organizations at risk if not addressed appropriately



4) Identify two concerns providers must keep in mind when addressing critical online reviews by clients



2nd DISCLAIMER



It is always important to get consult!

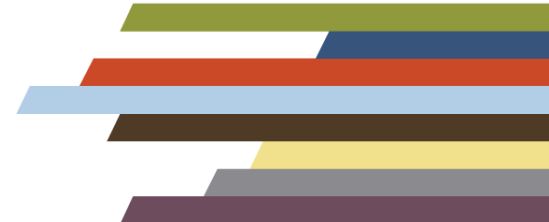
We are not attorneys



We do NOT have I.T. degrees

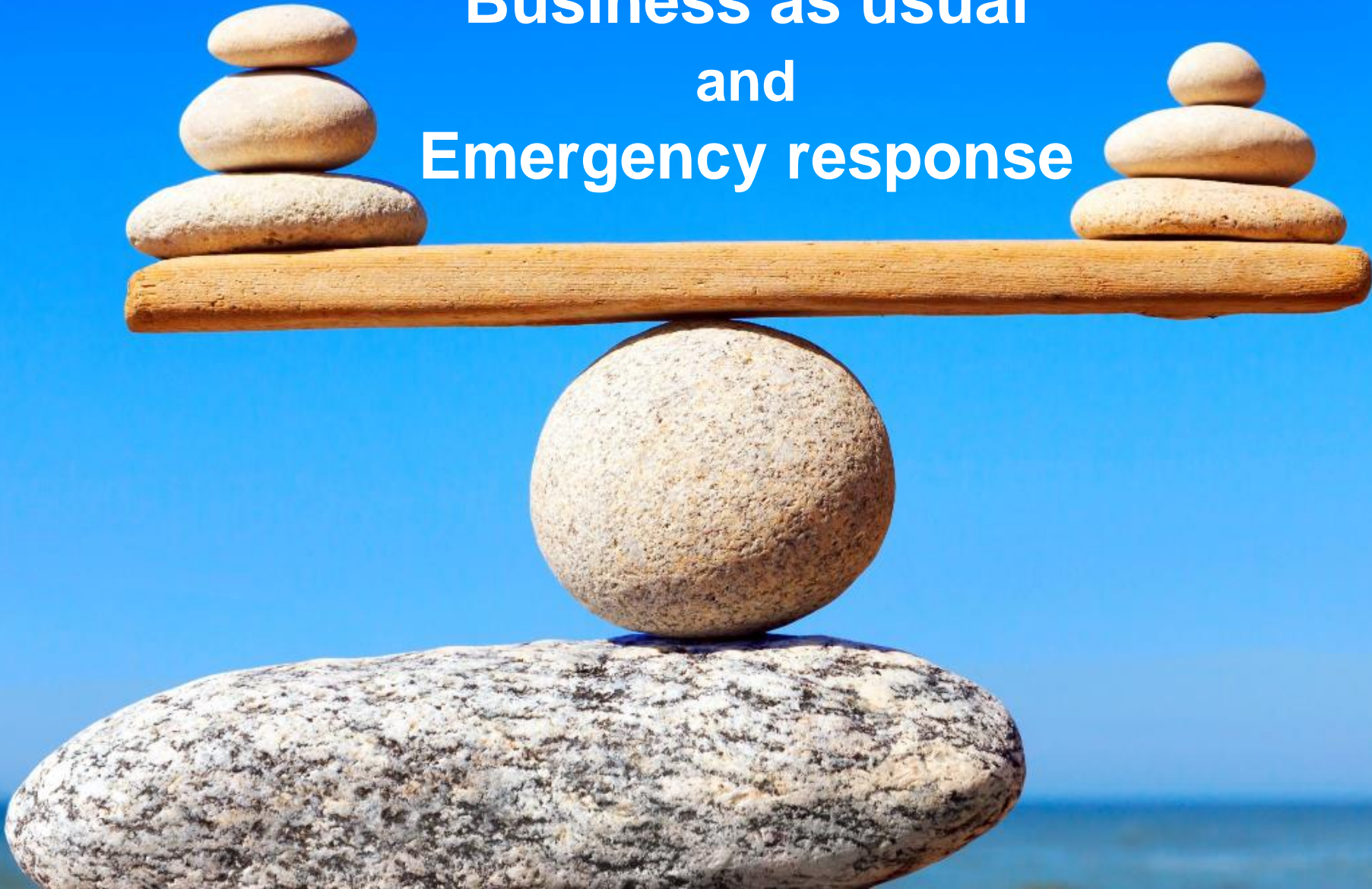


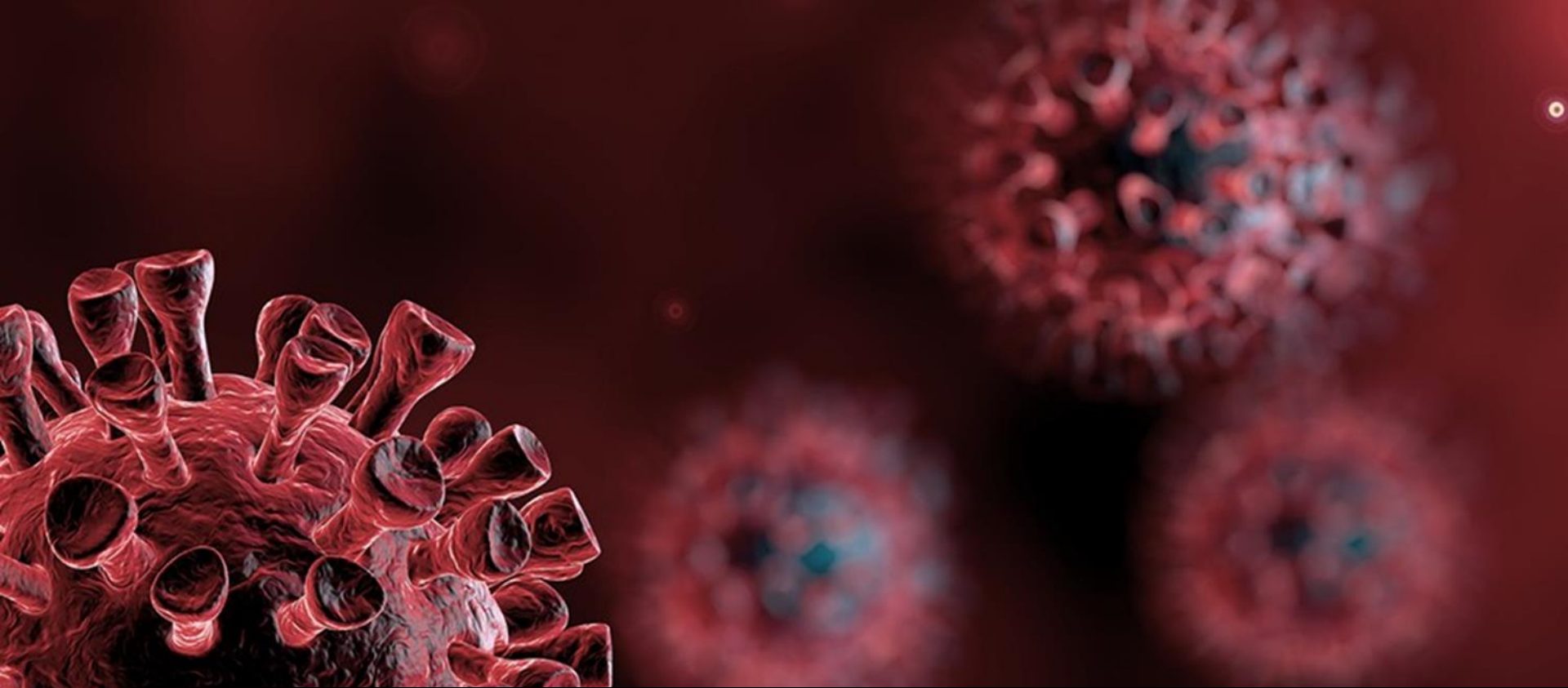
“Have you tried taking the battery out?”



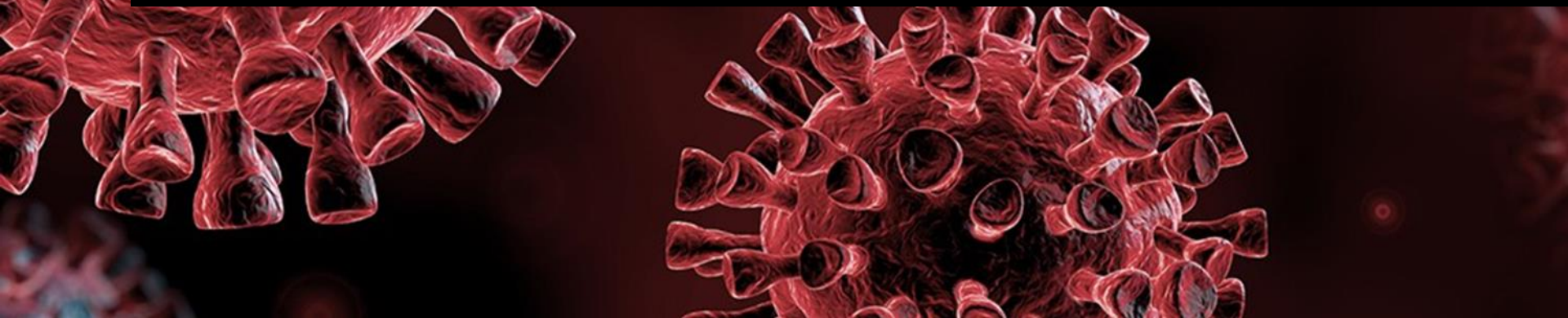
Very hard to balance right now...

**Business as usual
and
Emergency response**





How is COVID-19 affecting all of these policies?

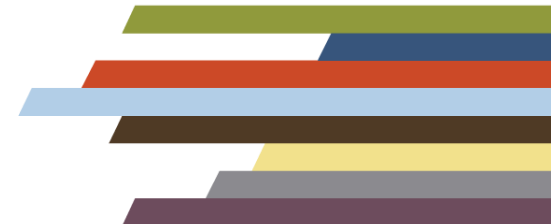


COVID-19 Special Accommodations

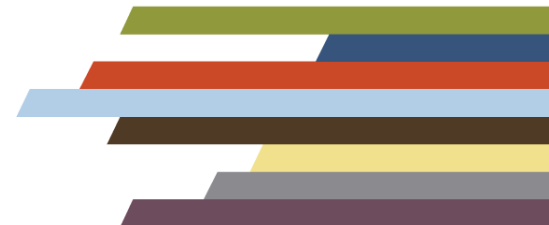
CMS Guidelines



<https://www.cms.gov/newsroom/press-releases/cms-sends-more-detailed-guidance-providers-about-covid-19>



Just because we CAN...
should we?

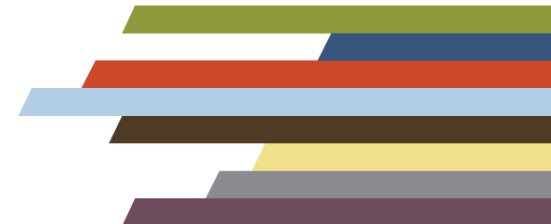


Digital technologies create four major ethical challenges:



- 1. managing clinical boundaries**
- 2. maintaining privacy and confidentiality**
- 3. establishing realistic expectations regarding digital communications**
- 4. upholding professional ideals**

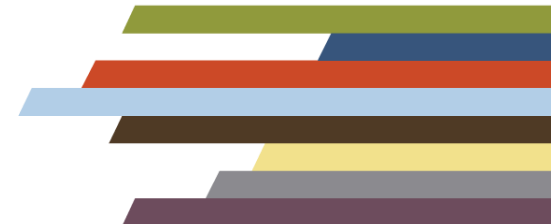
Sabin & Harland, 2017



Current use of TECHNOLOGY



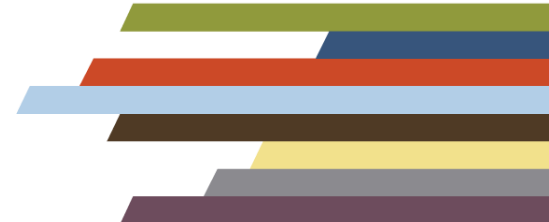
Not really *Creeping into Practice* any longer... It is here!



Practitioners are vulnerable to being
blindsided
by **NEW** ethical dilemmas



Crowley & Gottlieb, 2012



Some professionals are ...

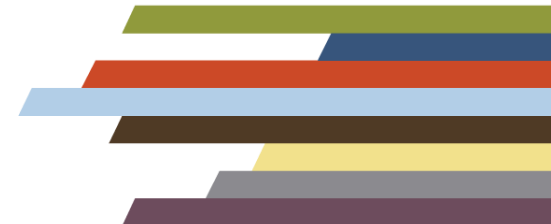
... ethically astute but struggle to keep up with the technology.



UNETHICAL
UNETHICAL
UNETHICAL
ETHICAL

... comfortable with technology but less familiar with ethical codes.

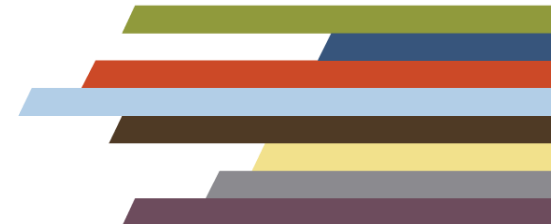
Lannin & Scott, 2013



‘Adapting to the new culture wisely will necessarily involve both
understanding the ethical principles
themselves as well as
developing competence in the technology
of the burgeoning digital culture.’



Lannin & Scott, 2013



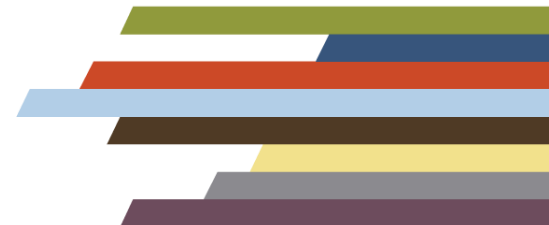
Digital Types





Digital Immigrants

Zur, 2012; Prensky, 2001

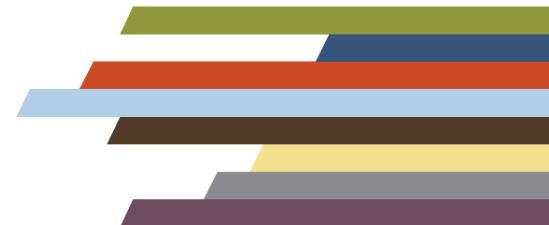


Digital Immigrants

**... people born before or about 1964 and
who grew up in a pre-computer world**



Zur & Zur, 2011



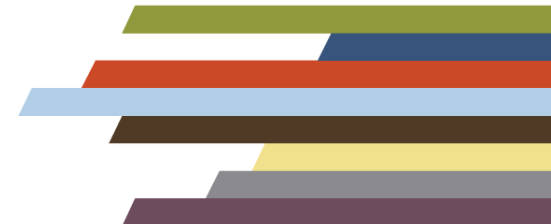
Comparison of Digital Types

Digital Immigrants

- Prefer to talk in-person or on the phone
- Don't text or only sparingly
- Prefer synchronous communication
- Prefer receiving information slowly: linearly, logically & sequentially
- Prefer reading text (i.e., books) to processing pictures, sounds and video

Digital Natives

- Prefer to talk via chat, text or messaging thru social media
- Text more than call
- Prefer asynchronous communication
- Prefer receiving information quickly & simultaneously from multiple multimedia and other sources
- Prefer processing/interacting with pictures, graphics, sounds and video before text



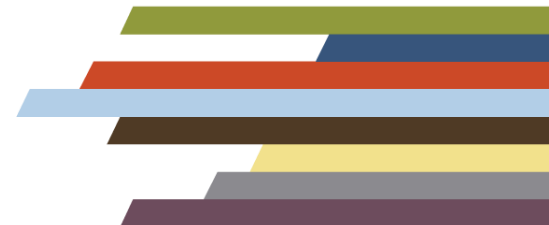


Other Digital Types

Ways to sort people other than age

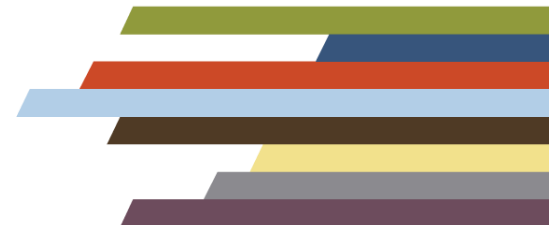
- **Attitudes**
- **Comprehension**
- **Relationships**
- **Practices**
- **Comfort with Technology**

Feeney, 2010; Toledo, 2007



75% of the SUD treatment workforce is over
40 years of age

Knudsen, 2003

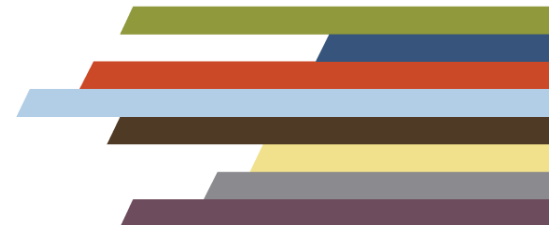


Average age of Clinical Directors is 52 years...

... **60%** are over the age of 50 years

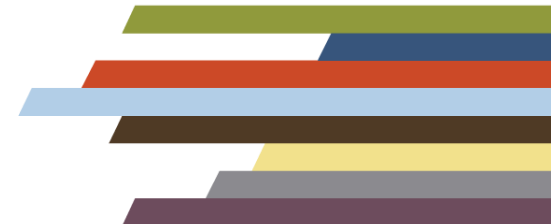


Ryan, Murphy, & Krom, 2012

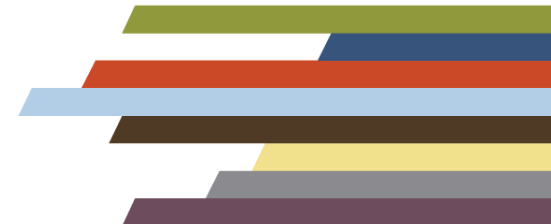


Almost **70%** of individuals who received SUD services were under the age of **40 years old.**

TEDs Data; SAMHSA, 2011



DIGITAL DIVIDE



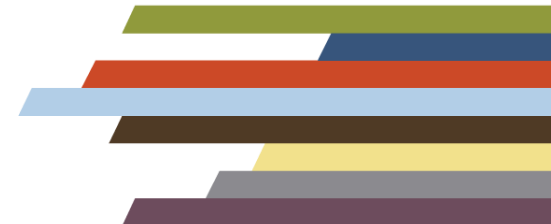
Social Media





Social media is a broad term that refers to online forms of communicating that any individual can employ as opposed to ‘industrial media’ which refers to professionally-produced radio, television, and film.

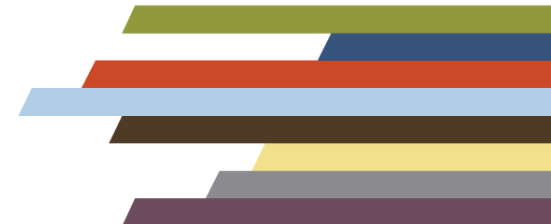
Kaplan & Haenlein, 2010; <http://www.pcmag.com/encyclopedia/term/61162/social-media>





Examples of Social Network Sites

- **Facebook**
- **LinkedIn**
- **Instagram**
- **Pinterest**
- **Virtual Worlds**
- **Blogs**
- **Micro Blogs-Twitter**



Since patients are likely to use networking sites (SNS) it may be helpful for clinicians to understand the phenomena of SNS, even if they do not participate themselves.

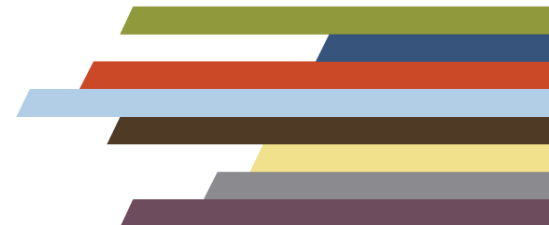


Working with Adolescents



Clinicians have an ethical responsibility to explore technology use with teen patients.

Sussman, 2018



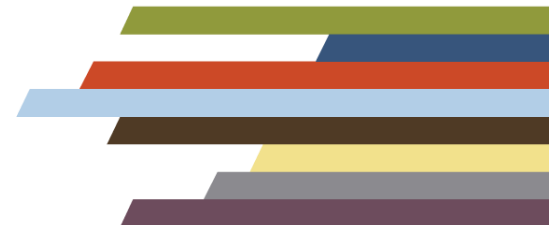
Social Workers for Example..

NASW, ASWB, CSWA, CSWE

Standards for Technology and Social Work Practice-2017

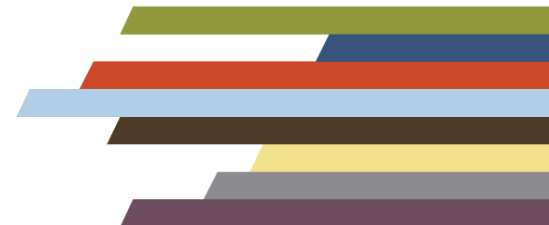
Standard 2.10: Social Media Policy

Social workers who use social media shall develop a social media policy that they share with clients.



Some would take the position that information about social media should be included in social work curricula.

Ricciardelli, 2020



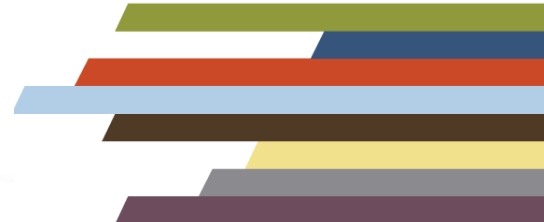
Ethics & Boundaries

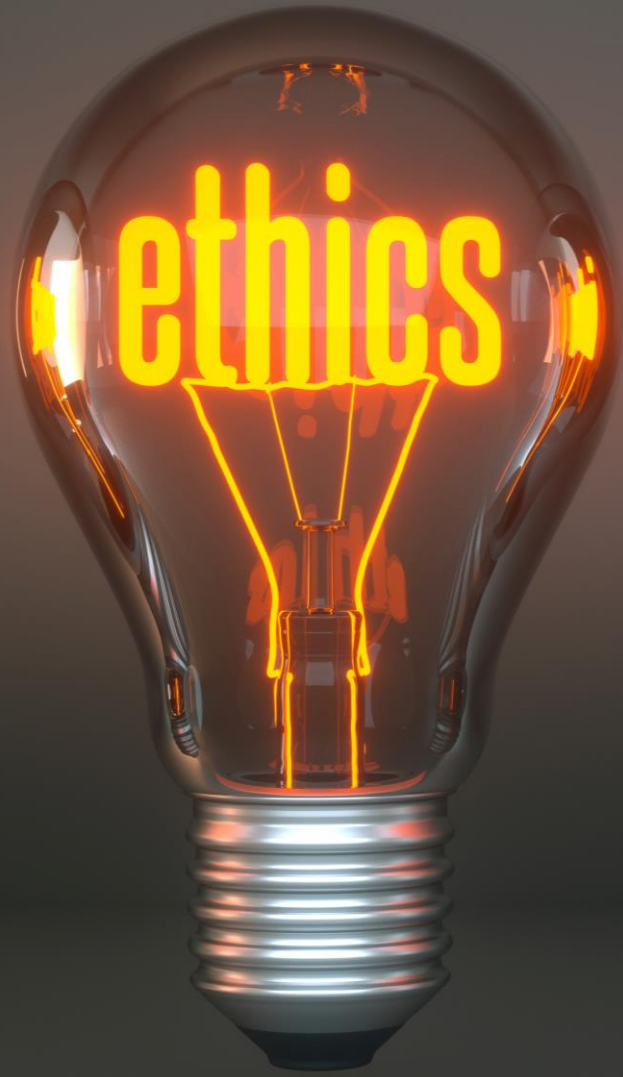


KEY POINT

**Ethics don't change, the context
in which they are applied may.**

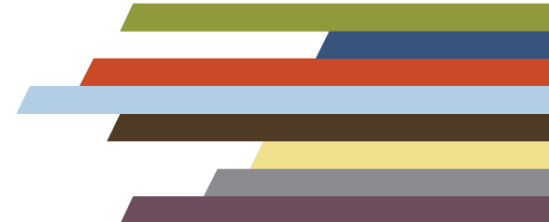
Meyers 2012





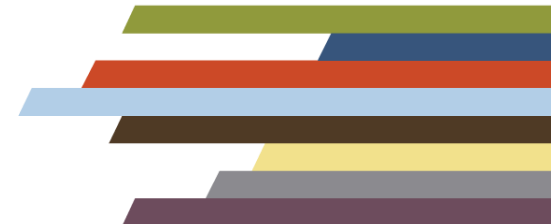
Ethical Codes and Licensing Boards are trying to catch up with the **TECHNOLOGY**

**In some cases ...
provide little guidance...
but they are getting there!**

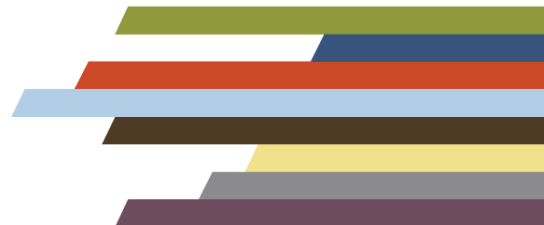


Other boards may use existing laws and investigate complaints on the grounds of:

- **Unprofessional conduct**
- **Unethical conduct**
- **Moral turpitude**
- **Mismanagement of patient records**
- **Revealing a privileged communication**
- **Breach of confidentiality**

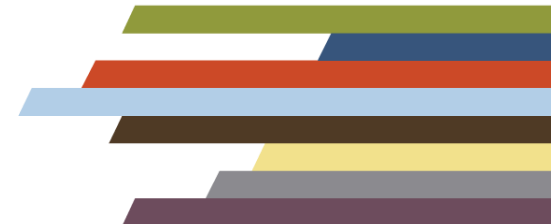


Self-Disclosure



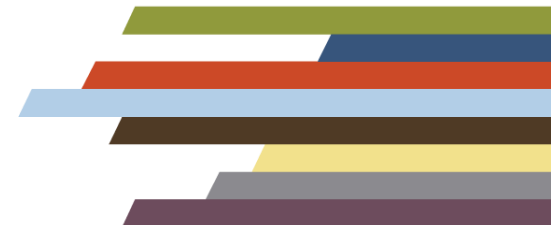
Self-disclosure in psychotherapy is defined as the revelation of personal rather than professional information by psychotherapist to a client.

Zur et al., 2009





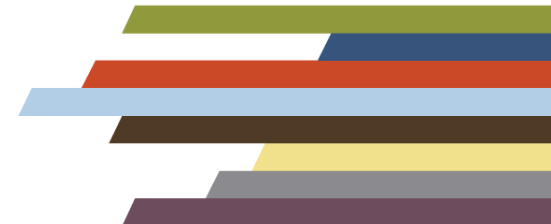
"All disclosures reflect decisions about the boundaries between the private self and the outer world." Farber, 2006



Self Disclosure

- **Benign**
- **Appropriate**
- **Inappropriate**

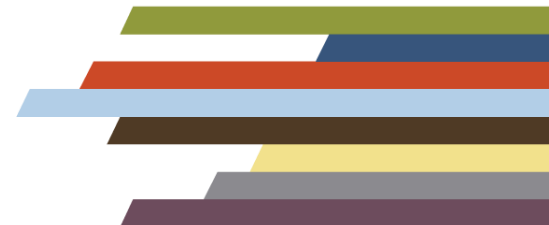
Zur et al., 2009





Technology has redefined the process of Self-Disclosure

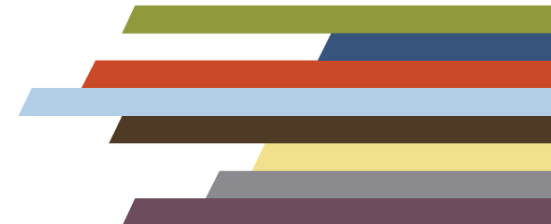
Zur, 2008





“Nothing that enters cyberspace is
ever completely secure”

Collins, 2007



Research found that **60%** of medical schools in the sample had posted unprofessional online content, including:

disclosure of patient confidentiality

profanity
discriminatory language

depiction of intoxication

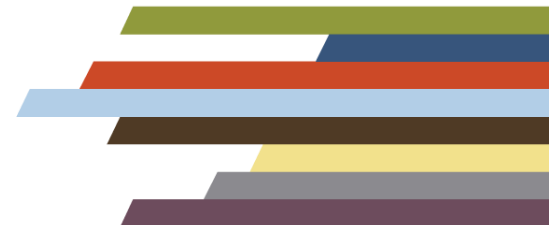
sexually suggestive material

Chretien & Kind, 2009



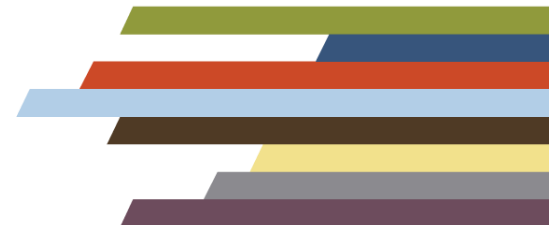
Behavioral Health Professionals must be aware that all of their online postings, blogs, or chats may be viewed by their clients and will stay online, in some form, forever.

Zur et al., 2009



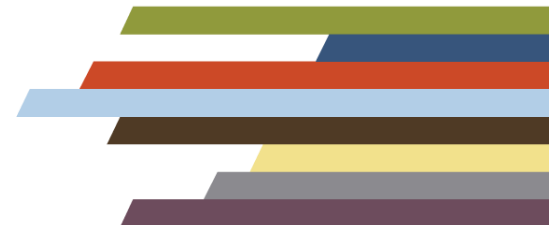
Need to examine clinicians' personal use of SNS outside of the therapy hour & its impact on clinicians' reputation and credibility

Van Allen & Roberts, 2011



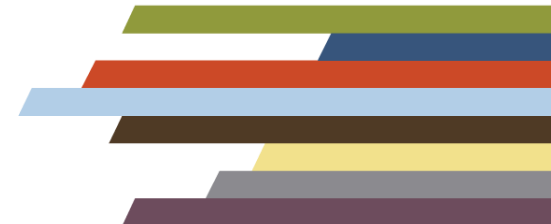
Polling Question

Should Behavioral Health professionals participate in social network sites as private citizens?

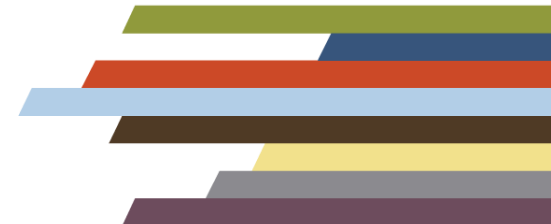


Many citations present the opinion that engaging in **friending** and **following** those whom we serve, supervise, teach, or collect research data from, crosses appropriate boundary lines because it implies a personal relationship.

Kaplan, Wade, Conteh, & Martz, 2011



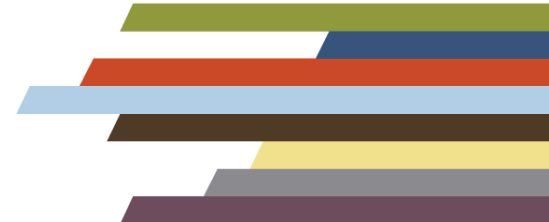
**If a client friends you and you accept them,
they have access to your pictures**



Things can be taken out of context ...



That can go both ways ...

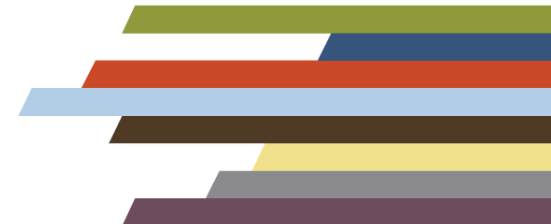
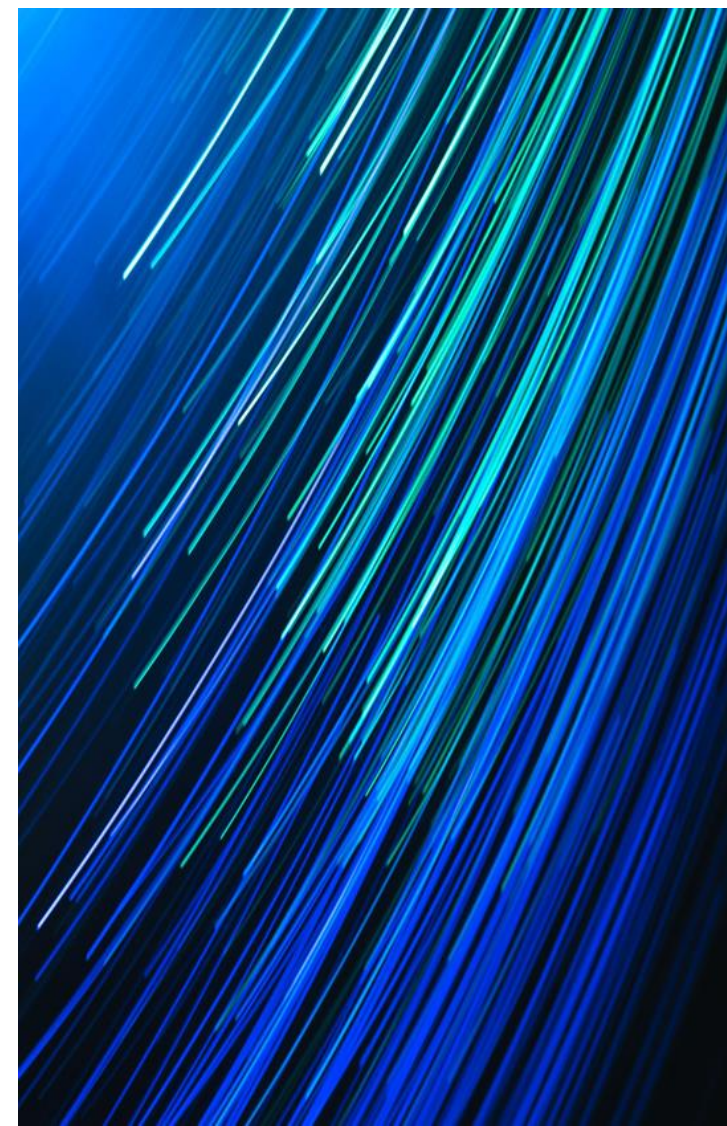


“The Online disinhibition Effect”

Clinicians use of public digital platforms can result in a tendency to blur professional and private boundaries. A recent survey of medical students revealed:

- **18% reported posting scenes of intoxication**
- **14% reported posting profanity**
- **4% reported posting sexually suggestive material**

Sabin, 2017

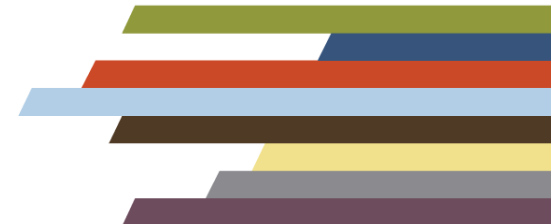


Questions to Ask Yourself Before Posting

- **What are the costs and benefits of posting the information?**
- **Is there a high probability that clients will be significantly and negatively affected?**
- **How will the disclosure affect my relationship with my clients?**
- **Does the disclosure threaten my credibility or undermine the public's trust in my field?**



Gabbard et al., 2011

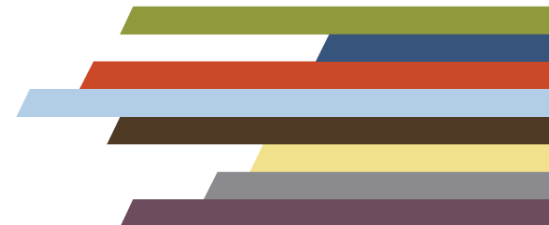


Behavioral health professionals Should Not POST

- **Client information**
- **Disparaging comments about colleagues or client groups**
- **Unprofessional media (e.g., photographs and/or videos that undercut the reputation of psychological practice)**
- **Comments about litigation in which one is involved**

CASE STUDY

A MSW student working at a well-known hospital in the emergency department encounters a patient with a severe injury that occurred while the patient was intoxicated. Part of the student's posting on Facebook includes "Note to everybody: don't get drunk and fall asleep on train tracks..."



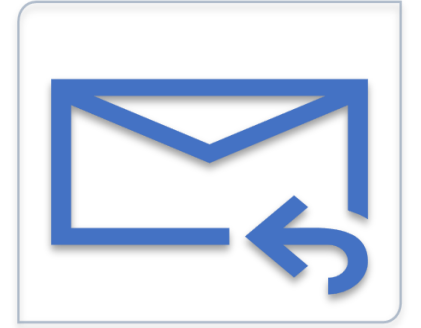
Best Practices for Promoting e-Professionalism

- **Do not share any clinically related information about patients, families, working conditions, staff, colleagues, or incidents at clinical settings.**
- **“Off-duty” conduct is just as likely to be scrutinized and evaluated against professional standards.**
- **Know and follow explicit agency policies and restrictions for cell phone use, photography, and electronic communications.**
- **Always consider your audience and the context of your postings — others may misinterpret your meaning.**

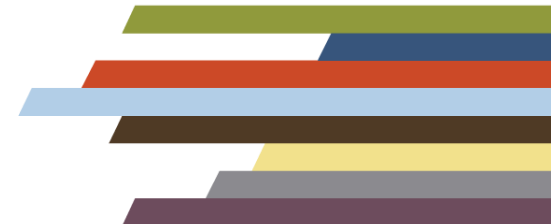
Emailing, Texting, & Videoconferencing-Privacy & Security



Security of Email

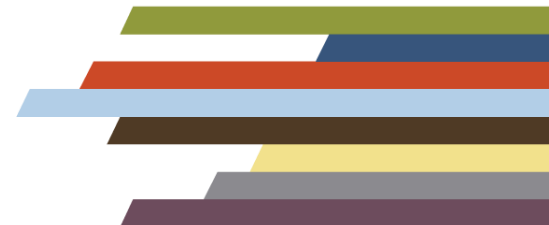


- **Emails are stored at multiple locations: the sender's computer; your Internet Service Provider's (ISP) server; & the receiver's computer**
- **Deleting an email from your inbox doesn't mean there aren't multiple other copies still out there**
- **Emails are also vastly easier for employers and law enforcement to access than phone records**
- **Finally, due to their digital nature, they can be stored for very long periods of time**



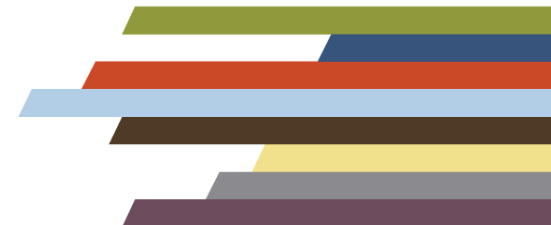
HIPAA New Rule Regarding Email

- **Privacy Rule allows providers to communicate electronically with patients**
 - **Reasonable safeguards**
 - **Checking email for accuracy**
 - **Sending an email alert**
 - **Limiting the amount or type of information disclosed**
- **Must be compliant with 45 CFR Part 164 Subpart C**
- **Health care providers can provide email reminders to patients if they consent**
- **Patients can initiate email communications with providers using email**



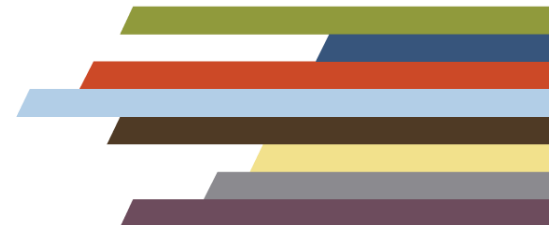
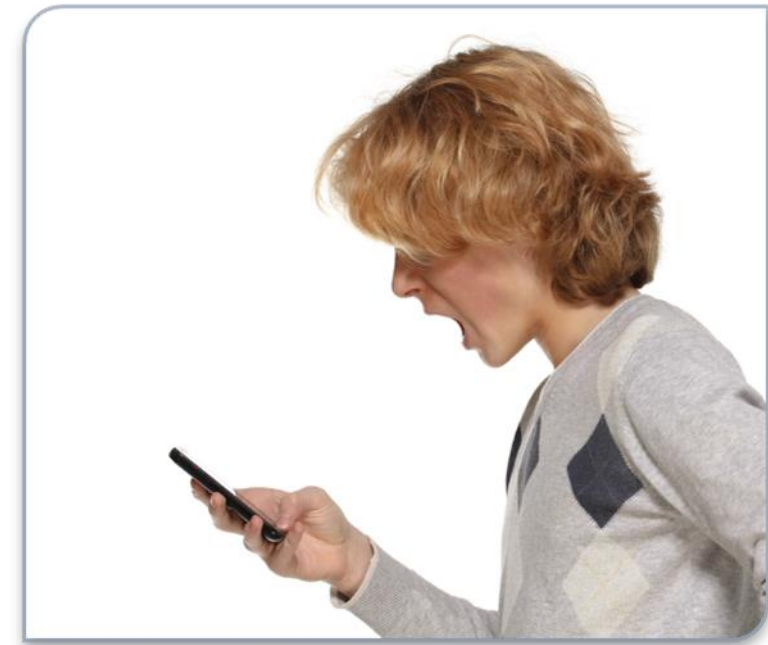


Do you or
your staff
TEXT
clients?



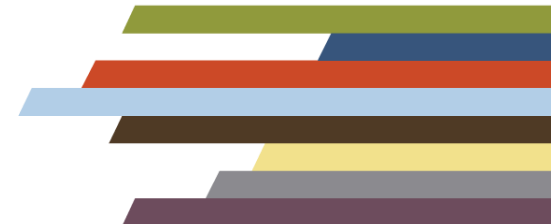
More than one-third of cell phone users:

- **have sent a text message to the wrong person (38%)**
- **report that a text they sent was misunderstood by the reader (37%)**



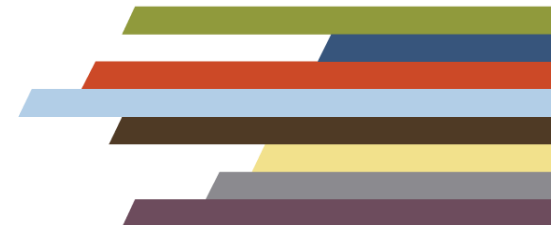


Text Messages can be saved, sent to an email account, and posted online all without the other person's permission



“Traditional Short Message Service (SMS) text messaging is non-secure and non-compliant with safety and privacy regulations under the HIPAA. Messages containing ePHI can be read by anyone, forwarded to anyone, remain unencrypted on telecommunication providers’ servers, and stay forever on sender’s and receiver’s phones.”

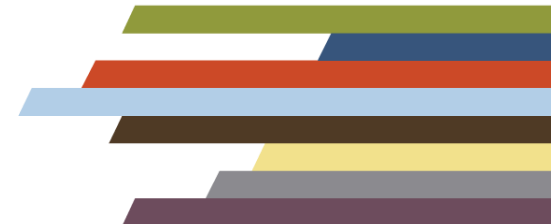
American Academy of Orthopedic Surgeons, August 2012



Issues to be Aware of with Videoconferencing

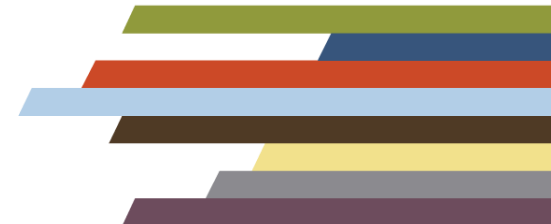
- **Using a HIPAA compliant platform *****
- **Jurisdictional and licensing Issues *****
- **Proper training in use of technology and setting environment**
- **Professional training to gain competency regarding the ethical use of this newer modality with clients**
- **Elements of informed consent and risk management when using video therapy with clients**

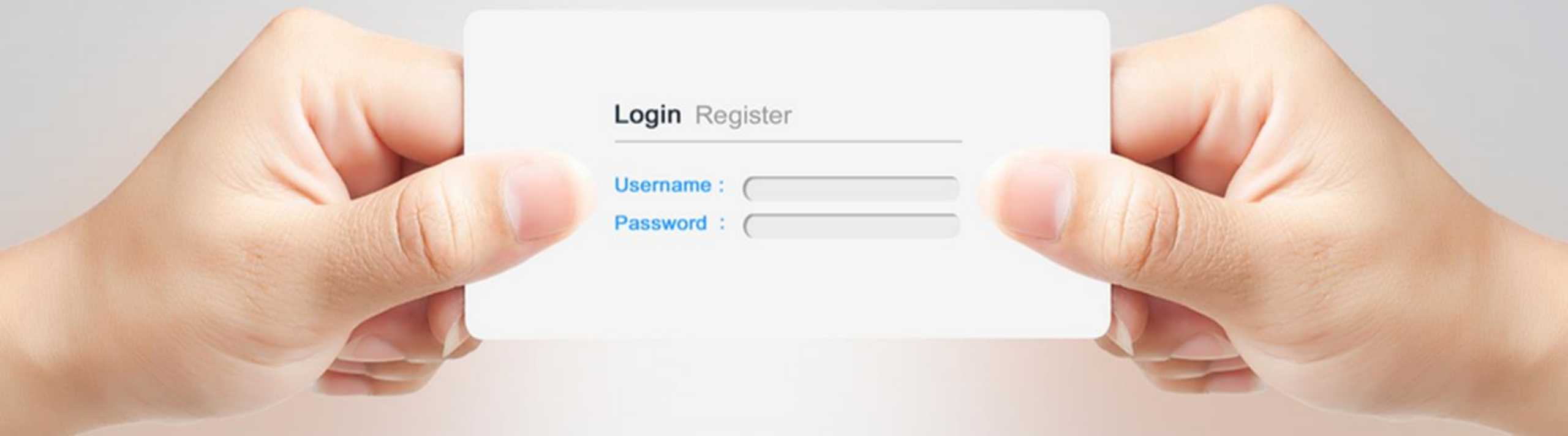
***** Under emergency rules, the government has changed or loosened some requirements ...what is our ongoing ethical responsibility to our clients ???**





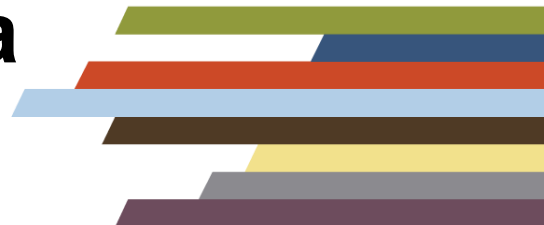
Safe Practices





Messaging

To ensure the client's privacy, behavioral health providers should consider the use of encrypted email systems or portal messaging systems that can be used on a computer, tablet, or smart phone



A photograph of a mobile phone lying on a sandy beach. The phone is partially submerged in shallow water, with waves washing over it. The background shows the ocean and a clear sky.

Maintain physical control of your mobile device/computer

<http://www.HealthIT.gov/mobiledevices>

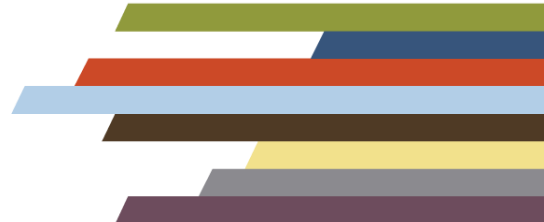
A decorative graphic in the bottom right corner consisting of several horizontal bars of different colors: green, blue, red, light blue, brown, yellow, and purple.

A wooden signpost with a sign that reads "YOU ARE NOW IN A WIFI AREA". The sign is orange with a black border and is mounted on a wooden post. The background shows a grassy area with trees.

**YOU ARE NOW
IN A WIFI AREA**

Unsecured Networks

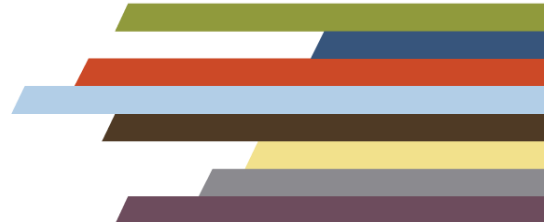
<http://www.HealthIT.gov/mobiledevices>





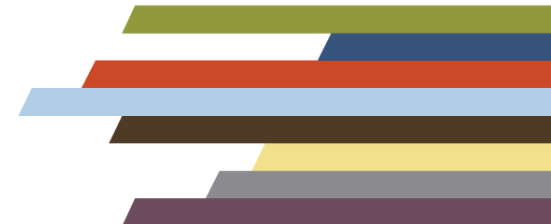
Avoid unintentional disclosure

<http://www.HealthIT.gov/mobiledevices>



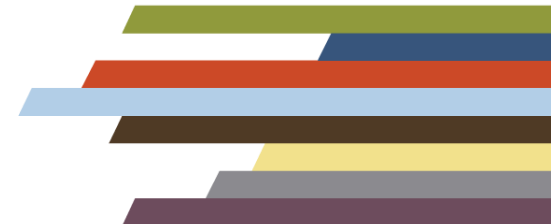
**check out what is downloaded on
your mobile device/computer and
keep the security software updated**

<http://www.HealthIT.gov/mobiledevices>



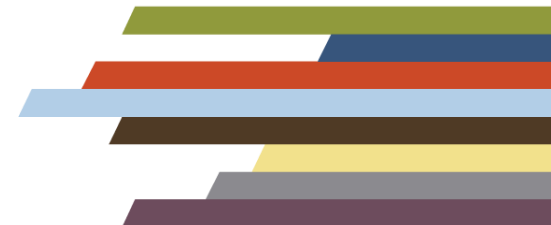
Activate wiping and/or remote disabling

<http://www.HealthIT.gov/mobiledevices>



Implement *policies & procedures* to
restrict access to, *protect the integrity* of, &
guard against unauthorized access to
electronic PHI (e-PHI)

HHS Office for Civil Rights

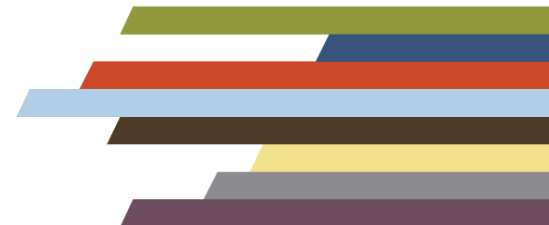


Social Media Policy for Agencies & Individual Therapists



Polling Questions

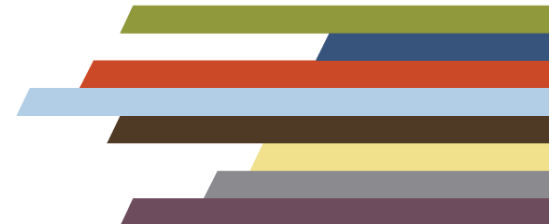
1. Do you or your agency have a social media policy?
2. Do you know what it says?



Does it address whether staff accepts friend requests from social networking sites or be a follower of the staff on Twitter?



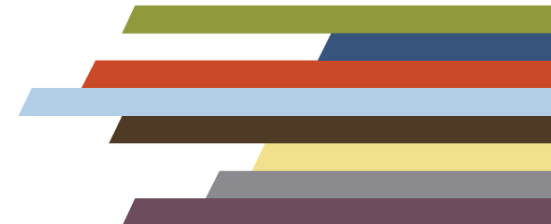
© Keely Kolmes, Psy.D. – Social Media Policy – 4/26/10
Kaplan, Wade, Conteh, & Martz, 2011



Does your agency or department have a designated Facebook/Twitter/Instagram page?



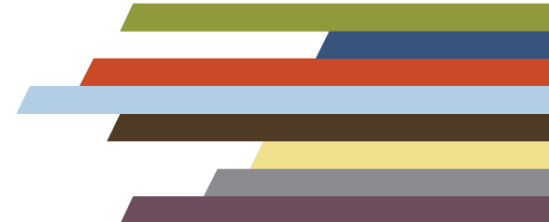
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Kaplan, Wade, Conteh, & Martz, 2011



Whether messaging through social network sites such as LinkedIn or Facebook can be used to interact with the BHP?



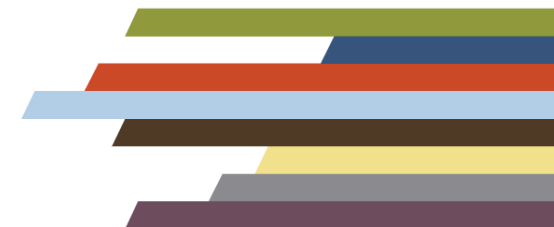
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Kaplan, Wade, Conteh, & Martz, 2011



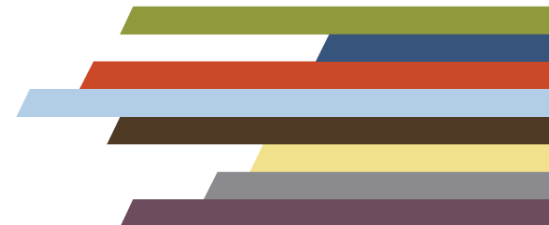


“Clients should know that electronic communications are generally not secure methods of communication and there is a risk that one's privacy/confidentiality could be compromised with their use.”

Neace , 2011



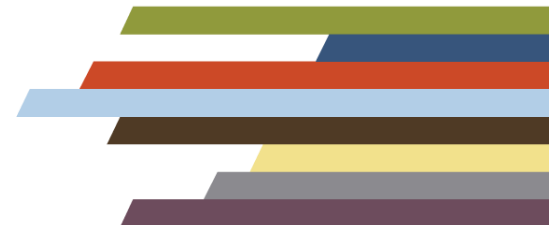
**How are staff trained to use Technology?
Not just passwords but also digital etiquette?**



The conditions under which Google, Facebook, or other search methods may be used to find out information about a client



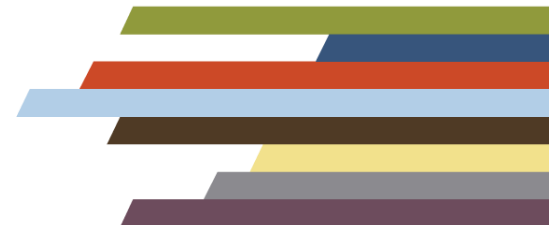
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Kaplan, Wade, Conteh, & Martz, 2011




Patient Targeted Googling or Facebook search...

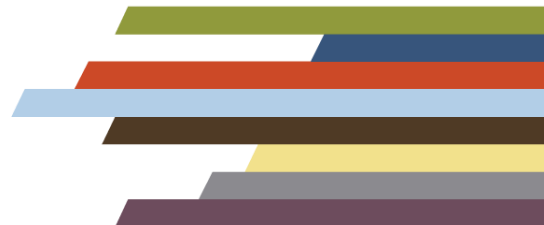
Polling Question:

Is it infringing on a patient's privacy?



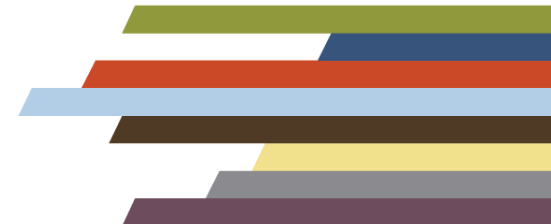
A red car is shown from a side-rear perspective, driving on a dark asphalt road that curves to the right. The background features rolling green hills under a bright blue sky with some light clouds. The sun is visible on the horizon to the right, creating a lens flare effect. A dark blue rectangular box is overlaid on the top right of the image, containing white text.

Would it be okay for a behavioral health provider to drive by a clients' house?



3 Things to Consider Before Conducting Patient Targeted Googling

Consider	consider the intention of the search
Evaluate	evaluate the potential risk to the patient
Anticipate	anticipate the effect of gaining previously unknown information



In depth questions

1. Why do I want to conduct this search?

2. Would my search advance or compromise the treatment?

3. Should I obtain informed consent from the patient prior to searching?

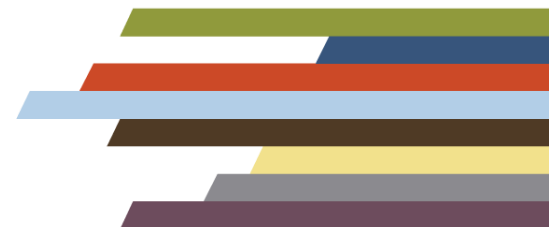
More in depth questions

4. Should I share the results of the search with the patient?

5. Should I document the findings of the search in the medical record?

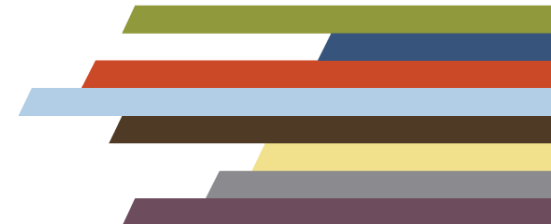
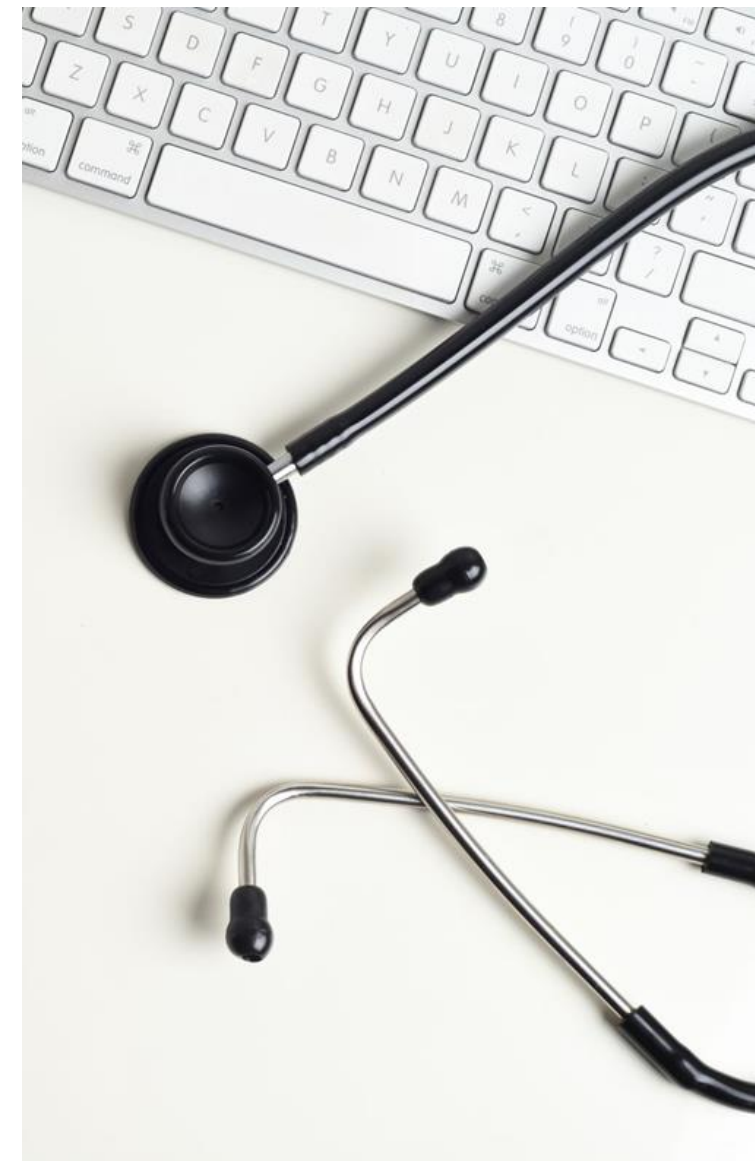
6. How do I monitor my motivations and the ongoing risk-benefit profile of searching?

On the other hand



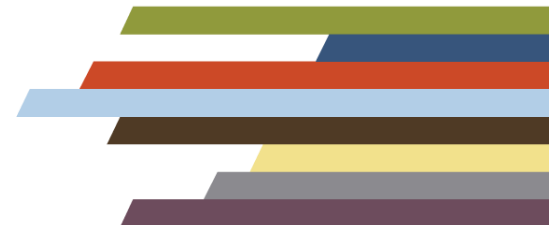
Patient and Client “Googling” as part of their treatment

Information was most helpful when the patient and physician had a prior, positive relationship and the patient discussed the information with the physician.



**With the click of a mouse, clients
can find a wealth of information
on their providers online.**

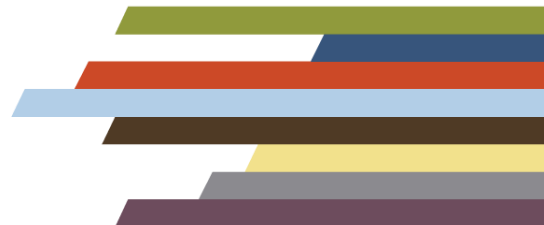
Tunick, Mednick, & Conroy, 2011



Google Trends has shown that since 2004, **70%** of queries on average are health-related.



Luo, 2019

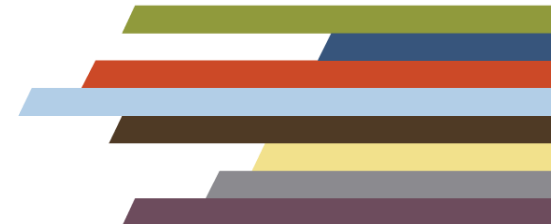


70% of clients reported finding personal information about their psychotherapist on the Internet

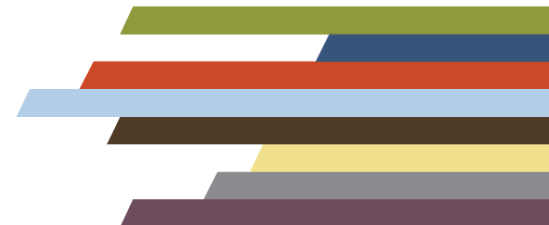
only **28%** discussed it with their psychotherapist



Kolmes & Taube, 2011



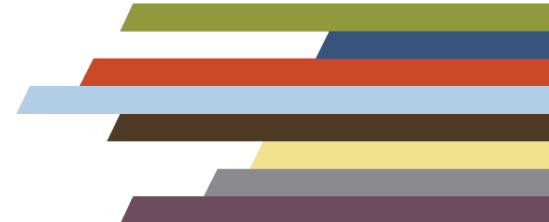
How do you respond if a client tells you that he has “Googled” you or visited your website?



How the BHPs may or may not respond to comments or ratings posted on Internet sites

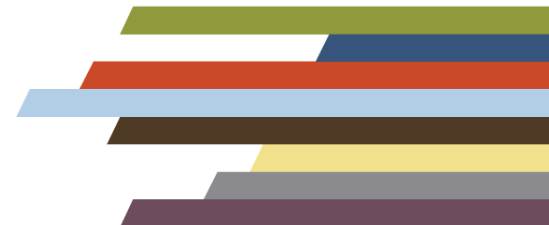


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Kaplan, Wade, Conteh, & Martz, 2011



Employer Social Media Issues

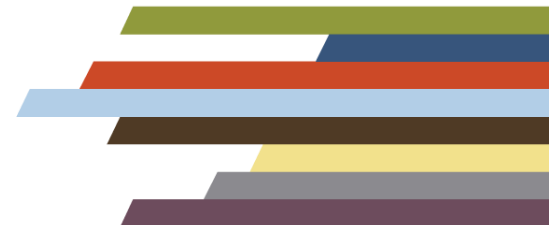
- **Employees Griping on the Web**
- **Shoulder-Surfing**
- **Googling Job Applicants**





So I looked at your Facebook page
...oh man...there's no way you're
getting this job!

Be careful what you post

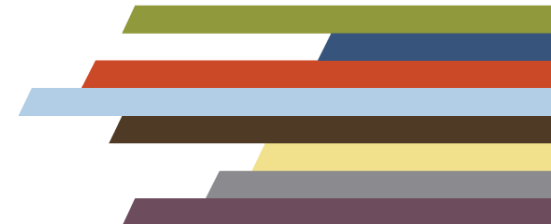


Companies need to be careful when using social media in recruiting employees and researching applicants

Protected Class
(race, religion, & disability)

‘What is learned cannot be unlearned’

Kasarjian, 2013



DON'T EVER:

'SHOULDER SURF'

or

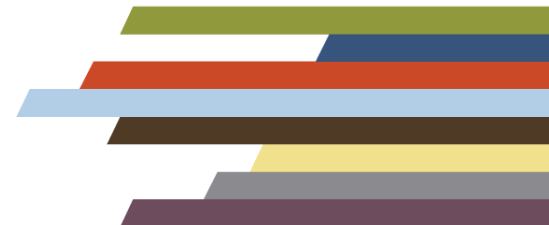
**MAKE AN EMPLOYEE SHARE
THEIR PASSWORD**

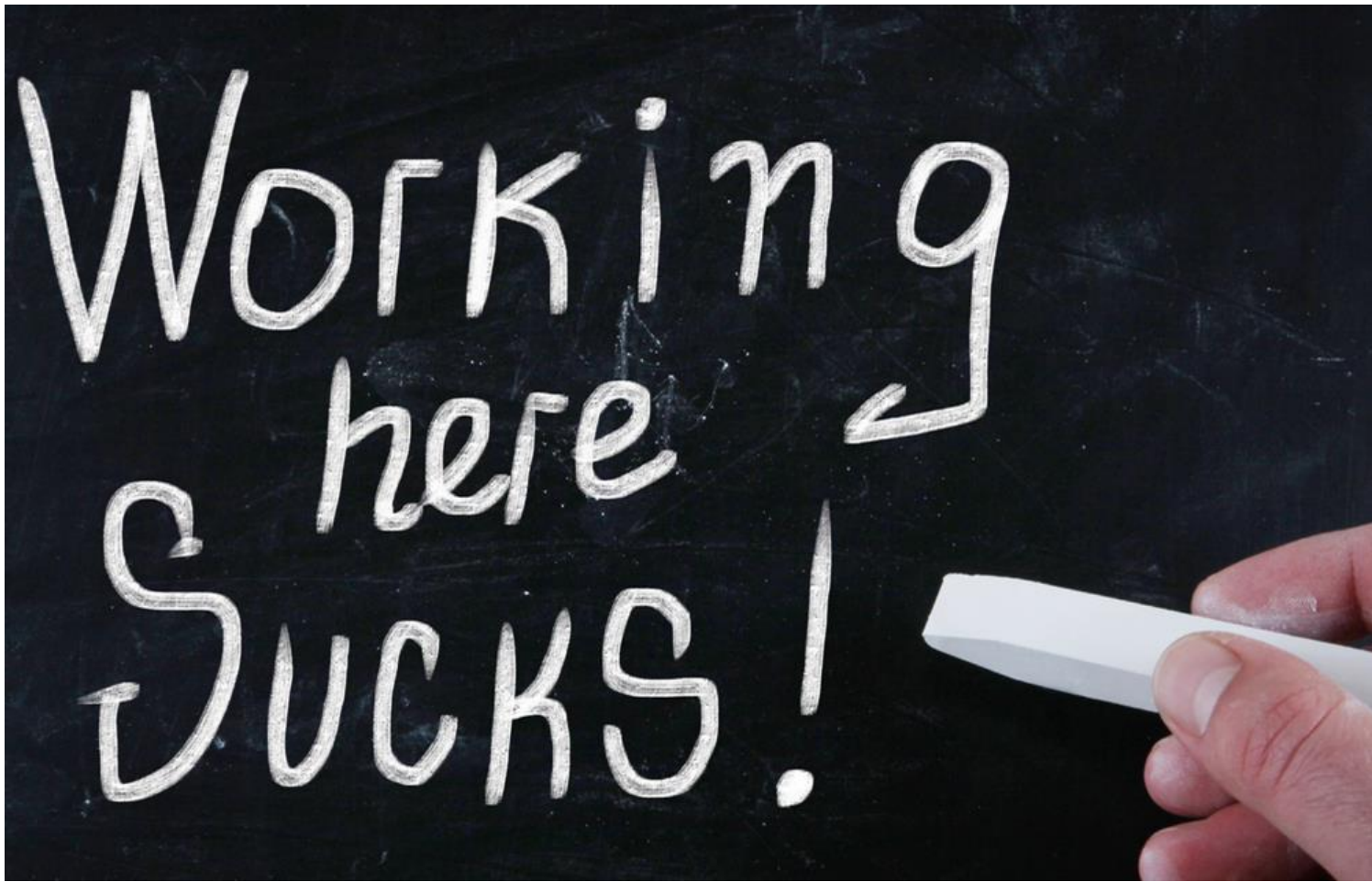
or

ASK THEM to 'FRIEND YOU'

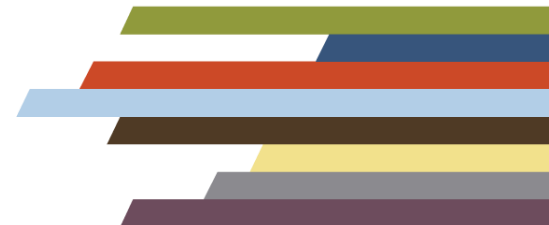


Klemchuk & Desai, 2014



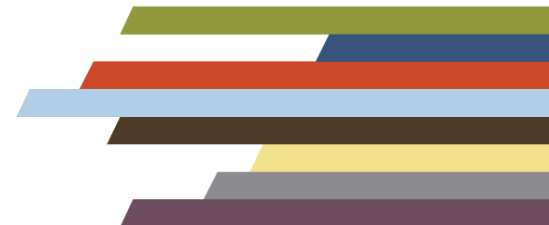


When employees are reprimanded or terminated for statements they make online...



**“Facebook Fired” ...
the growing number
and type of incidents
that have arisen across
all professions**

Hidy & McDonald, 2013

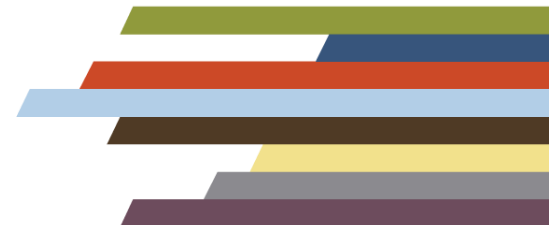


Legal Issues



Practitioners should contact both their professional and personal liability insurance representatives to determine if professional and personal liability insurance policies cover ethical violations related to SNS.

Gabbard et al., 2011





**Use Sample Policy Based on established policies:
example is Walmart's Policy**



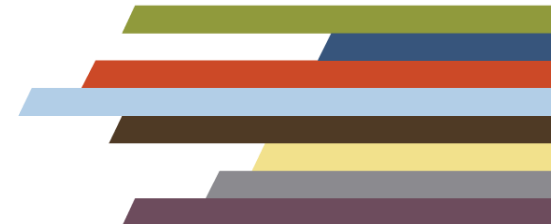
Many case examples - don't become one of them



Review often as technology changes swiftly!

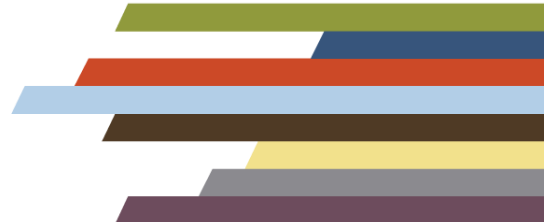
**Form committees
to develop good
policy**

Kasarjian, 2013



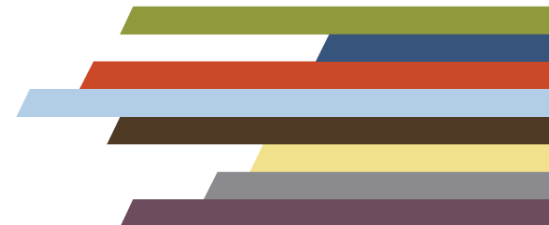


Importance of Conducting Self Assessments



‘Ethical behavior does not arise solely from habit or obedience to patterns or rules but includes intelligently guiding our actions in harmony with the texture of the situation’

Questions





Mountain Plains ATTC (HHS Region 8)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Thank you!

To join the MPATTC mailing list
please visit mpattc.org

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Mountain Plains ATTC (HHS Region 8)

ATTC

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