# SAMPLE POLICY - COMPONENTS OF A SOCIAL NETWORKING POLICY

When developing a social networking policy for inclusion in your practice privacy policy, consider the following:

☑ **Will the practice have its own professional page on a SN site such as Facebook, LinkedIn, YouTube, Twitter, Blogspot or similar online forums?**
*If so:*

Address who will be given access to the site in the office. Designate specific employees to access, monitor, and provide and maintain the content.

Determine whether updates will only be done during working hours via the practice computer system.

Identify who will respond to queries on the practice page, thus representing the practice.

Consider posting only non-patient-specific information on such sites. For example, general information about a specific disease or condition, or general health and wellness information that would be of interest to the entire practice patient community.

Does the practice have dedicated IT personnel or an outside consultant who can set up your initial security, monitor the practice page on a SN site for non-compliant or inappropriate usage by employees and monitor for breaches in security?

Define and address inappropriate use of the site by physicians and employees. For example: any unauthorized disclosure of PHI, including photographs or videos of patients, practice physicians or non-physician staff; unprofessional behavior; any harassing, threatening or disparaging remarks about the practice, its staff or its patients.

Address the ramifications of the above behaviors and/or non-compliance with the practice SN policies specifically. For example: any unauthorized disclosure of PHI or any behavior meeting the policy definitions of inappropriate and/or unprofessional will result in immediate termination of employment by the practice.

☑ **Will the practice policy prohibit the use of electronic devices that could be used to inappropriately text, photograph or video patients, their protected health information, staff or patient areas during normal working hours?**
*If so*:

Identify which situations and who will be affected. All staff and employees, including physicians? Patients, visitors and vendors? In all practice areas, or just in patient care areas? Will they be allowed in specifically designated areas?

Specify to staff and patients, their families and vendors that these policies are applicable practice-wide and *everyone* is expected to comply when within the practice walls. Acceptance and compliance will be much better if that is the case.

Address the specific ramifications of non-compliance. For example, identify what disciplinary actions would be taken for non-compliant staff versus visitors and patient family members.

*Exceptions* to the rule should be specifically stated. For example, in any case where the life, health or safety of patients, staff or visitors are in jeopardy. Or, in special cases, as reviewed and approved by a designated practice member (usually the practice manager or privacy officer).

☑ **Will the practice ban access to social networking sites by the physician, staff, patients, visitors and vendors during working hours?**
*If so:*

Develop a statement to this effect and include it with the new patient practice information brochure, the HIPAA privacy policy and statement and for posting in key areas of the practice. [Note: this is very difficult to enforce without an associated policy prohibiting the use of electronic devices on the premises.]

☑ **Will the practice allow staff and employees to access SN sites for personal purposes during designated breaks or while "at lunch" on the practice premises?**
*If so:*

Determine the situations, devices and locations allowed. Via mobile Internet access using their personal e-devices? Through the practice's computer system? In designated areas? Only on SN sites approved by the practice?

☑ **Will the practice routinely discuss how HIPAA regulations can be breached by SN postings by staff, practice patients and their families?**
*If so:*

Provide specific guidance on what staff should do if PHI breach is suspected or confirmed on a SN site involving a practice patient and/or staff member.

Determine the penalties that will be incurred for unauthorized disclosure of PHI under HIPAA and HITECH and identify these in the practice's staff HIPAA and privacy training programs.

☑ **Will the practice provide information to patients and their families about the practice's commitment to the protection of patient information?**
*If so:*

Identify the practice's stance and policies on social networking and determine the best way to communicate this with patients and their families.



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