



New Zealand
**Medical Radiation
Technologists Board**
Te Poari Ringa Hangarua Iraruke

POLICY AND GUIDELINES:

Social Media and Electronic Communication

May 2020

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Policy Title	Social Media and Electronic Communication
Reference Number	2020-May-V2-MRT Social Media
Scope	This policy applies to all practitioners registered with the Medical Radiation Technologists Board

Associated Policy Documents	

Revision Schedule			
Version Number	Version Date	Approved By	Next Review
One	April 2017	Medical Radiation Technologists Board	2019
Two	May 2020	Medical Radiation Technologists Board	2022

Purpose

The Medical Radiation Technologists Board (the Board) under the Health Practitioners Competence Assurance Act 2003 (the Act), is the responsible authority that governs the practice of medical imaging and radiation therapy practitioners in New Zealand.

Registered health practitioners have a responsibility to ensure their use of social media meets good practice standards. These guidelines have been developed to assist medical imaging and radiation therapy practitioners in their use of social media and electronic communications with patients, colleagues, employers, and any other interested third parties.

Medical imaging and radiation therapy practitioners should ensure that they comply with and read this policy in conjunction with the Board's policy on the [Code of Conduct](#).

Practitioners should also be familiar with the [Health Information Privacy Code 1994](#) and the Board's [Competencies and Standards for the Practice of Medical Imaging and Radiation Therapy in Aotearoa New Zealand](#).

Definitions of Social Media and Electronic Communications

Social media are internet technologies and online applications that enable users to connect, communicate and interact to share and exchange information.

Social media includes (but is not limited to):

Facebook, Twitter, LinkedIn, Reddit, Snapchat, instant messaging, content sharing websites such as YouTube and Instagram, and blogs.

It can also include dating apps such as: Tinder, Bumble, and Hinge.

Electronic communication includes (but is not limited to):

Texts, photographs, images, video, and audio files.

Principles

The internet and other methods of electronic communication can be a useful tool for medical imaging and radiation therapy practitioners to communicate with each other, find information, network, and participate in nationwide or international discussion groups. When using social media, the Board expects that you will:

Follow your employer's social media policy

Healthcare organisations utilising electronic and social media typically have policies governing employee use of such media in the workplace, and you need to be aware of, and follow these policies.

Remember to maintain professionalism

While you have the right to use social media in your personal life it is important to remember you are responsible for maintaining the same standards of professional behaviour on social media as would occur if the communication is face-to-face.

Consider how your online post and/or electronic communication contributes to the impression that others may form of you and the profession of medical imaging/radiation therapy, and how this may influence how others will interpret your online and off-line behaviour in the future.

When posting on social media:

- Consider what you post on your social media account may influence how the public sees you, or the medical imaging/radiation therapy profession.
- Remember that commenting on professional matters in your personal capacity does not excuse you from your professional obligations as a registered health practitioner.

Respect privacy and confidentiality

Whatever medium you use to communicate health information or information of a private matter you must address issues of privacy, security, and the sensitivity of the information. You need to take on board that patients have expectations of privacy and may choose to not disclose information to you in a clinical setting – even when that information is accessible online.

Remember that your professional obligations to respect the confidentiality and privacy of patients applies to social media and electronic communications just as they do to other forms of professional and personal interaction.

If you consider that it is medically necessary to view a patient's online profile or site, seek permission before accessing it.

Ensure that any social media and electronic communication with others, including colleagues and stakeholders, complies with professional and ethical standards.

Act with integrity

As a registered health practitioner you must practice ethical behaviour in your use of social media and electronic communication:

- Act responsibly to uphold the reputation of medical imaging/radiation therapy practitioners and the profession, ensuring that your interactions with colleagues and stakeholders are polite and respectful so that public trust and confidence is maintained and the reputation of the profession is enhanced.
- Be mindful of maintaining professional boundaries between yourself and a patient and/or other people nominated by a patient to be involved in their care.
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- Be mindful of Principle 4 in the Board's *Code of Ethical Conduct* when considering whether to 'like' or otherwise recommend or endorse individuals or products, brands, or services in social media or by electronic communication.

Good Practice

When using social media or electronic communications, check that you are engaging in good practice:

- Uphold the principles outlined in the Board's *Code of Ethical Conduct*, with particular attention to Principle 4 whether communicating in person or online.
- You are personally accountable for your professional practice and behaviour.
- You must always be prepared to explain your decisions and actions.
- You have an ethical and legal responsibility to maintain patient confidentiality.
- You are responsible for entering into and maintaining a professional relationship with colleagues, employers and other interested parties.
- Keep your professional and personal life separate. Carefully consider who you accept as a friend online.
- Consider the personal information you post online as it could influence how you or the profession is seen.
- If in doubt, do not post it, or seek advice from a senior colleague before doing so.
- Permanence: remember that once something is posted online it can be very difficult to remove it.
- Try "Googling" yourself: are you comfortable with the results that are shown?

- Check your old online posts and blogs to review how you have posted information about a patient or a colleague.
- Check your membership or support of any group that may be considered racist, sexist, or in an otherwise derogatory light. Browse all the groups you are linked to online to consider if these are an accurate reflection of the person you are and the values you hold.
- Do not put photos or videos of yourself online that you would not want your patients, employer and/or colleagues to see.
- Check the privacy settings on all of your social media pages.

Case Studies¹

An example of using social media to network:

Kate – Medical Imaging Technologist

As part of her CPD training, once a year, Kate attends a conference and meets other medical imaging practitioners working in different DHBs across New Zealand. Many of these professional colleagues come from different professional and employment backgrounds. Kate has found meeting other medical imaging professionals useful, as it has helped her to gain a new perspective on some of the aspects of her role and exchange information about best practice and other work matters.

Kate is one of only a small team of medical imaging technologists in her hospital. Consequently, she does not always have other medical imaging colleagues on hand to discuss her work, so she is keen to maintain these professional contacts. Kate has recently made friends on Facebook with several of the other medical imaging practitioners she met at the conference. She is hoping to use Facebook to network with them and continue to share skills and knowledge about her role. However, as her profile contains lots of information about her personal life, she does not think it is appropriate to use this in her professional life.

In order to replicate the environment at her training session, Kate decides to create a private Facebook discussion group with the practitioners she met at the conference. In this group they share updates about their practice, discuss best practice and share professional contacts. The privacy settings for the group mean that she can discuss work freely without this crossing into her personal life or impeding on the sensitive nature of her work. She is mindful of the confidentiality of her service users and does not share identifiable information or facts when referring to her personal experiences. She keeps her interactions on social media within the same professional tone she would use at a professional training or networking event. In addition, Kate makes sure to check any information she receives through the group with reputable sources before applying it to her practice.

As a result of social media, Kate has been able to develop her professional skills and knowledge and build a network of professional contacts to help her in her future work.

An example of when social media use can breach confidentiality:

Daniel – Sonographer

Daniel has recently started using Facebook whilst at work. Primarily he has been posting photos of himself and his colleagues on duty in a clinical setting, but in some instances, he has posted about a patient's injuries and occasionally shared photos of their ultrasounds. These posts do not show the face of the patient but there is otherwise no attempt to hide their identity. Several of the posts contain confidential patient information, despite this not being the focus of the images. Typically, this is in the background of the photo, but has sometimes included their names and / or date of

¹ The case study examples have been adapted by similar case studies published by the HPCP (Health & Care Professions Council UK)

birth. His posts are also geo-tagged, meaning they identify the location in which they were taken (in this instance the hospital in which he works).

Daniel believes he is only sharing these images with his friends on Facebook and does not believe they pose a risk to his patients' confidentiality. However, his Facebook privacy settings are set to public, meaning all his posts are publicly available. Therefore, a member of the public who sees a post and is aware of a patient being treated at Daniel's place of work could identify the patient from his posts.

Eventually a mutual friend of Daniel's – Ben - sees one of Daniel's posts of an ultrasound and believes that this might be of one of his co-workers. Ben tags this co-worker in a comment, asking if the image is his. The co-worker sees the post is of him and considers this to be a breach of his confidentiality. The nature of the injury was something he wanted to keep private, and instead had been now seen by several his colleagues. He makes a formal complaint to the Board which triggers a formal investigation into the matter.

[An example where social media is used to raise the profile of the profession:](#)

Brett – Radiation Therapist

Brett has recently started co-ordinating a campaign with his employer to promote the profession to the public. The aim is to encourage more people to the role and to inform members of the public about what a radiation therapist does. Brett is keen to use social media as part of this campaign, including using blogging and sites such as YouTube to share experiences and demonstrate in interactive ways what members of the profession typically do as part of their role.

Brett has been blogging in his personal life for several years. The blog combines his own thoughts on practice issues, anecdotes from his practice, difficulties he has encountered from working as a radiation therapist and his views on developments to the profession. He frequently refers to particular cases he has worked on, but always keeps these anonymised and changes certain facts to make sure service users cannot be identified. He believes the blog will be a good tool to give a realistic picture of the challenges and rewards of being a radiation therapist.

Brett co-ordinates the campaign's social media accounts and uses these to share key materials. This includes participating in 'Twitter chats' and sharing positive stories and articles about his practice. He does not share confidential information but does share more generally information about his experiences – this spreads awareness of what he does and improves the image of the profession. On YouTube, Brett and his employer create short pieces to camera which respond to questions about the radiation therapy profession and provide examples of an average day in the life of a radiation therapist. Patients are not included in these pieces, with Brett editing the interviews to remove any confidential or identifiable information.

Through use of these more interactive tools, Brett's employers find the campaign gains more traction than it otherwise would have and reaches a wider range of people. Brett also finds his close friends and family have a greater understanding of his role.