SOCIAL MEDIA
AND THE
PHARMACY
PROFESSION

A practical guide to online professionalism for pharmacists and pharmacy students.

A joint initiative of the Pharmacy Council of New Zealand, the Pharmaceutical Society of New Zealand (Inc.), The University of Auckland School of Pharmacy, New Zealand’s National School of Pharmacy (Te Kura Mātauraka Wai – whakaora), University of Otago, and the EVOLVE Intern Training Programme
A recent international pharmacy practice journal noted that the ‘rapid emergence and exploding use of social media (also called Web 2.0) presents pharmacists with new professional, ethical and time management challenges’. (1) While most time online is spent surfing, communicating and socialising, the internet and social media is increasingly being seen as an essential business tool. It has also changed the way many people receive or seek information about health issues and health care.

Although pharmacists should be free to take advantage of the many professional and personal benefits that social media can offer, it is equally important to be aware of the potential risks involved. This guidance provides practical and ethical advice on issues that pharmacists, intern pharmacists and pharmacy students may encounter when using social media.

**Key Points**

- Social media can blur the boundary between an individual’s public and professional lives; to maintain appropriate professional boundaries, consider separating personal and professional content online.

- Ensure the content you are posting is appropriate for the audience and the venue where it is being posted.

- Pharmacists should be aware of standards of patient privacy and confidentiality that must be maintained in all environments, including online, and must refrain from posting identifiable patient information online without consent.

- Do not post informal, personal or derogatory comments about patients, colleagues, peers or employers on public internet forums.

- Maintain a healthy scepticism about privacy settings and assume that settings can be changed without notification or that privacy technology may be compromised or breached by hackers (2).

- Be conscious of your online image and take ownership of your online activities.

- Always remember - You are never ‘under the radar’.
As social media becomes more sophisticated and widely adopted in the healthcare arena, it is probable that pharmacists will also increasingly utilise it for professional and educational purposes. (3)

Although social media applications can reach large audiences, they offer message-tailoring capabilities that can effectively target specific populations. Implementing health interventions via social media poses challenges but the example below illustrates the potential for pharmacists to use social media in health initiatives.

**Example:** In the event of a public health emergency, pharmacists could use social media to remind patients of what constitutes appropriate preparations, inform patients about local relief and shelter options, and educate patients regarding the importance of proper storage and administration of medications. (4)

Despite the slow growth of social networking in pharmacy, pharmacist involvement in social media communities has the potential to be highly beneficial. (4) Public familiarity with social media, the economical nature of using social media, and the ability to disseminate information rapidly through social media make these applications ideal for pharmacists wanting to provide innovative health care.
Online health care

Pharmacists have long played a role in educating patients on matters influencing health care, and many pharmacies now have both a website and a business Facebook page. Extra care must be taken if providing specific, personal medical care or advice online.

Pharmacists should:

- abide by any regulatory requirements governing the profession and the Pharmacy Council of NZ Code of Ethics;
- protect patient’s confidentiality;
- clearly disclose any sponsorships, financial incentives, or other information that would likely affect the patient’s or customer’s perception of the professional’s role or the services offered; and
- clearly disclose what fees, if any, will be charged for the online consultation. (5)

Consumers using the internet to make informed decisions about their health care expect sites to provide accurate, well-supported information, and products and services of high quality. Information and services must be easy for consumers to understand and use, but users must accept that it also has limitations. Pharmacists using these tools should clearly and accurately:

- identify themselves and their professional credentials
- make good faith efforts to understand the patient’s or customer’s particular circumstance and help them identify appropriate healthcare resources
- clearly and accurately describe the constraints of online diagnosis and treatment recommendations
- help “e patients” understand that online consultations have limitations and should not take the place of face-to-face consultations, and
- give clear instructions for follow-up care when appropriate or necessary. (5)

Health information, products and services have the potential to improve health or to do harm. Pharmacists providing health information on the internet or via social media therefore have an obligation to adhere to standards of best practice for online professional services.

1 Pharmacy Services Standard NZS 8134.7:2010 provides guidance on the expectations of pharmacists who provide online pharmacy services. See also the Pharmacy Council statement Promotion and Supply of Medicines over the Internet www.pharmacycouncil.org.nz/cms_show_download.php?id=210
Confidentiality

Health care professionals have a legal and ethical duty to protect patient confidentiality. Social media, through blogs and web forums, can provide pharmacists and pharmacy students with a space to discuss experiences and clinical dilemmas. While discussion amongst colleagues (students), tutors or employers about patients and clinical situations can have both educational and professional benefits, informal discussion about patients on public internet forums and pharmacy chat sites should be avoided.

Pharmacists who upload “unusual” prescriptions may de-identify them but patients may still come across them online and recognise them as their own. Even where a post is anonymous and is believed not to breach patient confidentiality, consideration should be given to how such comments will reflect on the profession, and to the potential impact it could have on the public’s trust in the profession as a whole.

**Example:** you are working in a hospital pharmacy and make a comment on a social networking site about an adverse outcome for a patient. You are careful not to name the patient or the hospital; however, you mentioned the hospital you are working at in a post the previous week.

A cousin of the patient searches the internet for the hospital’s phone number. In the search results, they are presented with your posting mentioning the hospital. The cousin then sees the subsequent posting regarding the adverse outcome involving the patient.

In maintaining confidentiality, you must ensure that any patient or situation cannot be identified by the sum of information available online. (6)

Disclosing identifiable information about patients without consent on pharmacy forums, blogs or social networking sites could constitute a breach of the Pharmacy Council Code of Ethics (Obligation 2.7 Safeguard and respect the confidentiality of all information regarding the patient) and the Health Information Privacy Code (Principle 5 Storage and security of health information), and could give rise to complaints by patients.
Online conduct

Professional codes of conduct specify that pharmacists should not engage in behaviours that can harm the reputation of colleagues or the profession. Be mindful about comments made about colleagues (pharmacists or otherwise), employers or work environments. You may not agree with another person’s opinion but you should respect it.

The freedom that individuals have to voice their opinions on forums and blogs is not absolute and should be restricted by the need to prevent harm to the rights and reputations of others.

**Example:** commenting that a continuing education session that you went to was poorly attended and that the attendees wisely chose not to attend a talk by Dr X on topic Y because “Dr X treated a friend of mine and gave them a prescription that caused serotonin syndrome”.

Inevitably, many people choose to interact with colleagues via social media. While you need to be aware of what they see you doing, you may also see colleagues posting information online or behaving inappropriately. Looking after colleagues is an integral element of professional conduct; if you feel that a friend or workmate has posted material online that could be damaging for them, consider letting them know in a discreet way. (4)

**Example:** an intern posted on Facebook how awful her preceptor was. Unfortunately, one of her ‘friends’ worked in the same pharmacy, was loyal to her employer and took exception to the comments so made the employer/preceptor aware of them.
Your online identity

The direct interaction of social media can blur the separation between professional and private roles, causing increasing intrusion into the private life of health care professionals, perhaps more so than the telephone or email. You should consider the following:

- **Privacy settings**: some social media sites have privacy settings that allow users to control and restrict who has access to their personal information. The default setting for some sites permits various types of content to be shared beyond a selected network of friends. You need to actively manage your privacy controls or settings to ensure your content is protected to the extent you would like it to be.

- **Email addresses**: it’s time to mention perception, and why it matters. You’ve got a choice of email addresses so it’s a wise idea to put some thought into making a good choice. Where once upon a time the idea of a ‘wacky’ email address might have seemed like a fun idea, you should use some pragmatism, prudence and professionalism when choosing an email address. With more and more people using their web-based email accounts for important personal subjects such as job applications, or if you are looking for work as a locum, a degree of professionalism is necessary. Interesting examples from pharmacists seen recently include:
  - ur_my_choco_baby@
  - slychic89@
  - cutecutekitten@
  - lovesource20@
  - hansomeboy72@

- **Tagging photos**: even if you are not actively involved using social media, information or photos you are in can still be posted by others. It’s a wise idea to let people know if you don’t want information or photos of you put up on social networking sites. Conversely, advise people before you ‘tag’ them that you are about to do so, as they might not want the photo posted, let alone tagged to them.

- **Personal material**: be aware that the personal material you might share with friends could be accessible to a much wider audience. Once uploaded onto the web, it may not be possible to delete material or control how widely it is shared. Many employers now “Google” prospective employees so remember, information you post can be accessed for a long time. Bad language, extreme or intolerant views, depictions of intoxication or illicit substance use and inappropriate photos are all off-putting to employers and other members within the profession. Any material judged to be inappropriate could have a detrimental effect on your employment opportunities and professional standing.
University regulations

Pharmacy students are not held to any lesser standards of professionalism than pharmacists and interns. There is high social media use among pharmacy students and many may not fully comprehend the issues that arise from being overly transparent in online settings. Research suggests that approximately a third of pharmacy students have posted information that they would not want faculty members, potential employers, or patients to see. A combination of lack of awareness and inappropriate attitudes may contribute to student e-professionalism transgression. (7)

Students are entitled to enjoy an active social life, but remember that online behaviour passed off as ‘youthful exuberance’ at this early stage in your career will still be available later on, and perhaps seen in a less favourable light. You also need to consider whether your online activities violate university policies and regulations (check with your university whether it has a policy relating to online behaviour), as well as those of the organisations you will be seeking to join as a health professional. (4)

Pharmacy students, as with other healthcare professionals are also bound by the Health and Disability Code of Consumers’ Rights. This includes when on externships or if working part-time in a pharmacy while a student.

Personal use

There are many guides available on safe use of social media, and many of the issues raised are equally applicable to both professional and private use of social media. Other considerations to mitigate risks when using social media include:

- Don’t share personally identifiable information that can be used in identity theft
- Don’t follow links to unfamiliar sites
- Choose applications wisely as many share information with marketers and other sites
- Use up-to-date anti-virus and anti-spy ware
- Use a different, robust password for each online account
- Don’t share passwords
- Be wary of sharing your location as it indicates when you’re not at home or in the pharmacy
- Learn to recognise ‘phishing’ attacks (5)
In a world where relationships are everything, it can be difficult to sort out who you want to connect with. As a pharmacist online, you may encounter patients, colleagues, other health professionals, tutors and alternative health providers.

Don’t make “friends” with people you don’t know and never “friend” patients on a personal site. Don’t “friend” co-workers, tutors, your employer or employees unless you genuinely are good friends. When you receive requests that are inappropriate, have stock responses prepared (rather than ignoring the request) to help manage those awkward moments. (8) For example

- “I don’t really use Facebook – I haven’t been on it for months”.
- “As a matter of course I don’t “friend” patients or students, to protect my privacy and theirs”.
- “I think it’s important to maintain a professional relationship”.
- “I only use my Facebook account to keep up with family”.

**Cyber bullying**

Cyber bullying can take many forms and is a very passive form of bullying. With technology and the popularity of social networking websites, you may come across information posted about you that is demeaning, embarrassing, and hurtful. Because such posts in a public forum can be considered threatening and intimidating, the scenario would be categorised as a form of cyber bullying.

Unlike physical bullying, electronic bullies can remain virtually anonymous using temporary email accounts, pseudonyms in chat rooms, instant messaging programmes, cell-phone text messaging, and other Internet venues to mask their identity. To avoid cyber bullying, consider taking steps to block and verify who contacts you .

- Don’t use your work email address for anything other than work. Set up a different email account for personal use.
- Don’t tell online “friends” (the ones you know through social networking sites) where you work or which university you attend.
- Find out if your email program has a filter that allows only those on your “safe” list to send you emails. They have to be approved by you. Any unknown sender has to first apply to you – you can accept or decline any email address request.
- As far as text messaging goes, you can also block phone numbers, once you identify a bully’s number. Simply call your mobile network provider to arrange the block.
Troubleshooting: Have you ever …?

- Googled yourself? Search for your full name in Google, particularly ‘New Zealand Sites Only’. Do you feel comfortable with the results that are shown?
- Posted information about a patient, another health professional or person from your workplace on Facebook? Have a look through your old online posts and blogs.
- Added patients or people from your workplace as friends on Facebook or MySpace?
- Made a public comment online that could be considered offensive?
- Become a member or fan of any group that might be considered racist, sexist, or otherwise derogatory? Browse through all the groups that you have joined and consider whether these are an accurate reflection of the person you are, and the values that you hold.
- Put up photos or videos of yourself online that you would not want your employers or people from your workplace to see?
- Checked your privacy settings on Facebook or MySpace?
- Felt that a friend has posted information online that may result in negative consequences for them? Did you let them know? (6)

A final reminder

Just like the footprint you leave when you walk on the beach, your online footprint is the trail you leave about yourself when you’re on the net. Anything you do online, including any profiles you have created, the sites you’ve visited and the online conversations you’ve had, add to this trail - even if you think you’ve been doing things anonymously, or have hidden them (for example, deleted them from your computer).
This guide was developed by representatives from PSNZ, PCNZ, EVOLVE Intern Training Programme, University of Auckland School of Pharmacy and New Zealand’s National School of Pharmacy (Te Kura Mātauraka Wai – whakaora), University of Otago. Intern pharmacists and pharmacy students also contributed to content.

Permission was granted by the authors of the Australian and New Zealand Social media and the medical profession guide to view and discuss the guide as a basis for developing a similar pharmacy publication.

References


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