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HIPAA Violations on Social Media

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HIPAA Violations on Social Media

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Health Informatics and Information Management

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Abstract

With the rise of social media networks such as Facebook and Twitter, healthcare professionals and students pursuing healthcare careers communicate, collaborate, and network on an array of websites and apps. With the use of social media, the users can reach a large audience in a matter of seconds, with this ease; users can transmit information and has presented challenges in the form of unauthorized disclosure of patient's health information on social media sites. The purpose of this study is to see if the number of HIPAA violations increased due to the use of social media and what steps are healthcare companies taking to monitor HIPAA violations. I chose to use the survey research method to reach my participants. The population for my research is health information management professionals across the country employed at LifePoint Health. Web-based surveys with structured and unstructured questions, electronic databases, as well as Journal articles based on the subject of HIPPA violations on social media were used to access data. I used a statistical analysis to analyze the survey study data and interpretive analysis was used to identify patterns and relationships in the electronic databases and journal articles.

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Chapter 1

Introduction

Social media in health care has reshaped the way patients and professionals interact. These technologies such as Facebook, Twitter, Youtube , and IHealth just to name a few, are tools that can be used for a variety of purposes: to instantly debate issues, discover news, conduct research, network with peers, crowd source information, seek support, and provide advice. However, the ease with which users can transmit information to the masses has presented challenges in the form of unauthorized disclosure of patients' health information on social media sites. The increase of patient privacy violations on social media has healthcare and academic leaders struggling to find ways to combat the problem. After all, HIPAA (Health Insurance Portability and Accountability Act) training is a staple in allied health programs and the healthcare industry; yet unauthorized disclosure of protected health information on social media continues to make headlines. (Bouldrick, 2015).

In 1996, the Health Insurance Portability and Accountability Act also known as HIPAA was endorsed by Congress. The HIPAA Privacy Rule, also called the Standards for Privacy of Individually Identifiable Health Information, provided the first nationally recognized regulation for the use and disclosure of an individual's health information. Essentially, the Privacy Rule defines how covered entities use individually identifiable health information or the Personal Health Information (What's HIPAA?). The biggest risk healthcare facilities are facing with social media is that many healthcare employees do not realize that posting stories or pictures about unidentifiable patients is still a HIPAA violation.

Background

HIPAA is the acronym for the Health Insurance Portability and Accountability Act. President Clinton signed HIPAA into law on August 21, 1996. The Privacy Rule was issued by the U.S. Department of Health and Human Services to implement the requirement of the HIPAA law. The Privacy Rule assures that an individual's medical record is properly secured. An individual's medical record can also be referred to as "protected health information" or "PHI". Under the Privacy Rule, only those with a legitimate and necessary need to know an individual's medical history are legally allowed to access this information (What is HIPAA & why we need it). HIPAA ensures privacy rules that give patients control over the use of their health information. The privacy rule defines boundaries for the use/disclosure of health records by covered entities, establishes national-level standards that healthcare providers must comply by. It also helps to limit the use of PHI and minimizes chances of its inappropriate disclosure; it strictly investigates compliance-related issues and holds violators accountable with civil or criminal penalties for violating the privacy of an individual's PHI. Lastly, the privacy rule supports the cause of disclosing PHI without individual consent for individual healthcare needs, public benefit, and national interests (What is HIPAA).

The definition of "social media" is broad and constantly evolving. The term generally refers to Internet-based tools that allow individuals and communities to gather and communicate; to share information, ideas, personal messages, images, and other content; and, in some cases, to collaborate with other users in real time. Social media is also referred to as "Web 2.0" or "social networking." Social media sites provide a variety of features that serve different purposes for the individual user. They may include blogs, social networks, video- and photo-sharing sites, wikis, or a myriad of other media, which can be grouped by purpose, serving functions such as (Lee, 2014):

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- Social networking (Facebook, Google Plus, Twitter)
- Professional networking (LinkedIn)
- Media sharing (YouTube, Flickr)
- Content production (blogs [Tumblr, Blogger] and microblogs [Twitter])
- Knowledge/information aggregation (Wikipedia)
- Virtual reality and gaming environments (Second Life)

With the ability to access social media, it can pose many risks for health care organizations that could potentially affect the safety and security of patient information, employment practices, and other ethical issues. It would be beneficial for health care organizations if they have not already to establish employee guidelines regarding the appropriate use of social media.

Purpose of the Study

The primary purpose of this study is to determine if the use of social media have impacted HIPAA violations and what actions are taking place to prevent and monitor possible and or actual HIPAA violations. By analyzing the data provided from the survey, it will measure how the use of social media can increase HIPAA violations if healthcare professionals and students are not aware of what is a HIPAA violations. Additionally, the study seeks the healthcare facility or practice preventable steps to social media postings of patient information.

Significance of Study

The importance behind this study is coming to terms that social media is not going away, but what steps is the healthcare industry going to take to prevent patient privacy issues. Healthcare professionals are not only delivering quality of care and services, but also protecting patients' rights. It is healthcare professional's responsibility to have a professional and ethical behavior at all times. Unauthorized disclosure

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of patient information on social media is not only a HIPAA violation; it is a violation of trust between the patient and healthcare professional (Bouldrick, 2015).

This study has the potential to provide healthcare facilities and practices the data to increase monitoring for social media HIPAA violations. This in turn will highlight the need for social media policies and continue education on what is considered HIPAA violations and think before you post measures. These steps may not stop social media HIPAA violations, but it can decrease the numbers over the course of time.

Research Questions

The research paper will answer multiple questions such as, how often HIPAA violations are reviewed pertaining to social media postings? What are hospital management actions when a HIPAA violation has occurred verses when a HIPAA violation is caught and corrected before affecting the patient? Nevertheless, the direct question is, have the number of HIPAA violations increased from the use of social media. The data from the survey will be analyzed by computing response rates. Statistical analysis will be used to analyze the survey study data and interpretive analysis will be used to identify patterns and relationships in the electronic databases and journal articles.

Definitions of Key Terms

The research was conducted using relative terms such as

- AHIMA- American Health Information Management Association; National organization of HIM professionals.
- Health care - The prevention, treatment, and management of illness and the preservation of mental and physical well-being through the services offered by the medical and allied health professions

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- Health care professionals - A health care professional is a trained person who delivers medical care and follows protocols, policy and procedures.
- HIPAA- Health Insurance Portability and Accountability Act, a US law designed to provide privacy standards to protect patients' medical records and other health information provided to health plans, doctors, hospitals and other health care providers.
- Policy - a definite course of action adopted for the sake of expediency, facility, etc.
- Privacy - freedom from damaging publicity, public scrutiny, secret surveillance, or unauthorized disclosure of one's personal data or information, as by a government, corporation, or individual.
- Social media - Social media is the social interaction among people in which they create, share or exchange information and ideas in virtual communities and networks.

Limitations

There are several limitations of this study to consider.

- During the literature review, there were a limited amount of literature around the topic of HIPAA violations and social media. The literature that was available had the same concerns of HIPAA violations, but no specifics of how a HIPAA violation with the use of social media is affecting the hospital.
- IRB approval took a lot longer than expected. Because of the timing of IRB approval, I was delayed in sending out my surveys. In turn I had to reduce my expected time that I allocated for participants to complete the survey.
- Directions of questions were directed only to individuals that work within the scope of privacy and security. Had I open the survey to all hospital personal my sample size would have been larger.
- Implementation of ICD-10 on my timeline. I wanted to send out the surveys at the beginning of September. With the unexpected delay from the IRB process the survey was sent out days prior to ICD-10. With several of the facility Privacy Officers being the Health Information Management

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Director as well they may have set the survey aside to complete at a later time and never got around to completing it. In turn, it limited the number of responses from the survey.

- Changing my research topic, when I was in the research methodology course I did a literature review on if social media is a valid data source for detecting or predicting diseases or conditions. By changing my topic I had to conduct a new literature review verses adding literature onto what I previously researched.
- Participants only being Lifepoint employees and having a standard social media policy.

Chapter 2

Review of Literature

A comprehensive search of relevant literature was performed using Google, PubMed, American Medical Technologist Journal, Journal of American Health Information Management, and Compliance Today. In addition, articles pertaining to HIPAA violations on social media were searched using the internet. Using the key words HIPAA violations, patient privacy, social media and internet with a combination of words related to the topic were used to search literature for this research. This literature review sought to include articles published in between the years 2009 and 2015.

Findings

HIPAA Violations via Social Media are on the Rise! Reports of privacy breaches through Facebook, Twitter, Instagram and other platforms are increasing. A California nurse posted on his Facebook wall a patient's picture and chart, along with his comments on her sexual health concerns (because, he said, 1.) it was "only Facebook," and therefore not "real," and 2.) He thought it was "funny — and that if you didn't get the joke, then too bad). Other incidents include an ER personnel posting pictures on the web of a man dying from knife wounds, and a physician in Oklahoma treating a patient via Twitter. Extreme examples? Perhaps. But few will argue that the concept of privacy in a social-media world does not square with privacy as demanded by HIPAA (Becker's Health IT & CIO Review, 2012).

In Chicago a woman who was treated for alcohol poisoning in an emergency room is suing her physician and the hospital after photographs taken of her while admitted were posted to social media sites. June 2012, a 22-year-old patient, was admitted to Chicago's Northwestern Memorial Hospital for excessive alcohol consumption, and says she and a friend requested that a mutual friend, a physician completing a fellowship at the hospital stop by for moral support, according to local media reports. Although the patient had never met the physician, Dr. Puppala, in person, the two were in each other's network on Facebook (Butler, 2013).

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Dr. Puppala was on duty that night and according to the lawsuit, allegedly he took photos of female patient without her consent and posted them to the social networks Instagram and Facebook. The photos allegedly showed her unconscious and connected to intravenous medication, and included mocking commentary about her condition. The then patient is seeking damages of \$1.5 million from Dr. Puppala, Northwestern Memorial Hospital, and Northwestern's Feinberg School of Medicine. According to the complaint filed by the patient, Puppala also allegedly violated HIPAA privacy rules by accessing her medical records even though he was not her attending physician, a violation the hospital confirmed in a letter to the press (Butler, 2013)

Angela Dinh Rose, MHA, RHIA, CHPS, FAHIMA, a director of HIM practice excellence at AHIMA, says that if what the patient alleges is true, Puppala broke the cardinal rule of doctor-patient confidentiality, as well as HIPAA privacy laws, by accessing her medical information, taking, and distributing photos without her consent (Butler, 2013). Figure 1. shows a few cases of HIPAA violations via social media across the country. The figure shows the name of the institution where the violation took place and a brief overview of the case.

Consequences for Violators. Healthcare facilities that do not comply with HIPAA regulations can be excluded from participation in the Medicare/Medicaid programs, disciplinary action by the hospital board, and other professional licensing and certifying agencies. The unauthorized disclosure of protected health information knowingly or unknowingly on social media or any other form can result in civil and criminal penalties with fines and possible imprisonment (Bouldrick, 2015, pp25). Penalties are:

- \$100 per violation, up to a \$25,000 maximum per year for repeat offenders
- \$50,000 per violation; 1.5 million dollar maximum
- Certain offenses can result in up to 5-10 years in prison if the information obtained is found to be used for personal gain or commercial profit.

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A survey conducted to understand social media trends in US health care provider institutions was performed in 2012. The survey consisted mostly of questions related to employee use of social media and provider institutional use. Most (67%) were from hospitals with the remaining respondents from physician offices and other patient care settings. One third of the respondents were IT professionals. 84% of the sample used social media for personal reasons and 75% used it for professional reasons. Personal use of social media is non-work related and includes activities such as monitoring one's Facebook page or texting for one's own benefit. The reasons for professional use (those activities sanctioned by the employing institution) were social networking, accessing their own institution's social media and Internet forums. One third reported they did not have access to social media from their workplace.

Seventy-six percent reported that electronic communication policies were in place at their institution. The result of this study speaks to the lack of access to social media in health care institutions. The increased usage was also "in conflict with other larger market trends outside of this small survey indicate that the use of social media within healthcare provider institutions is still in its infancy. In fact, most institutions are still struggling with patient privacy and security challenges. According to this report, "the strict rules related to patient privacy drive a lot of current policy around the use – or lack of use – of social media among healthcare providers." These concerns are markedly different from other industries that have social media issues related to market competition, intellectual property management and branding (Barton & Skiba, 2012).

As the number of patients, health care professionals and students using social networks increases, the evidence to support the benefits of social media on health is beginning to grow. The research as well as anecdotal accounts highlight the usage, benefits and health outcomes but also identified some of the challenges. One such challenge is the lack of social media policies to guide the development and usage both in education and health care. As noted by Skiba, the "placenta incident in the USA" was a wake-up call for many academic institutions, particularly schools of nursing to address the issue of a social media policy. The incident involved nursing students that posted a picture of a placenta on their Facebook after receiving implicit permission from her instructor. The student sued the school for her dismissal with the judge

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recognizing that if the student believed she had her instructor's permission, the college could not establish that the student violated professional conduct (Barton & Skiba, 2012).

In 2011, a study examined the legal and ethical parameters of protected health information on social networking sites. Facebook pages from medical students in 2007 and 2009 were examined for potential violations of "protected health information such as portrayals of people, names, dates, or descriptions of procedures." There was a dramatic increase from the 2007 (44%) to 2009 (84%) in terms of the number of medical students with Facebook pages. The 2009 medical students were more likely to make their profiles private. The potential violations that were discovered were photos of clinicians providing care, with many photos showing students providing care while on a medical mission in a developing country. Although teaching about patient privacy was paramount in medical education, there was relatively little education about the use of social media, particularly social networking sites (Barton & Skiba, 2012).

While this literature review is over different cases of HIPAA violations, healthcare facilities and intuitions policies statements are important not only to guide behavior, but also to serve as an educational tool for employees. Social media offers collaboration between users and is a social interaction mechanism for a range of individuals. Although there are several benefits to the use of social media for health communication, the way social media is used at the workplace needs to be monitored for quality and reliability, and the users' confidentiality and privacy need to be maintained to protect not only the patient, but also the healthcare company.

Chapter 3

Methodology

Within this chapter, you will read the specifics of the survey. The design method used and why I chose this particular method for this survey, the background on my selected population and how I analyzed the data collected. After reading this chapter, you will know the stats used for the population, to test the reliability of scales as well as stats that are used to analyze each of the research questions.

Research Design

A survey questionnaire (Figure 2) was developed using Survey Monkey to collect information to examine if HIPAA violations have increased because of social media capability and how upper management responds to it. The final data collection tool contained the following variables:

1. What is your age?
2. Are you male or female?
3. What is your ethnicity?
4. In what state or U.S. territory do you currently work?
5. What is the highest level of education you have completed?
6. Which of the following best describes your job role?
7. What department do you work in?
8. How often do you work with patient privacy and security issues?
9. Which of the following social networking websites do you currently have an account with?
10. In a typical day, how likely are you to use social media networking websites?
11. Hospital management provides a work climate that promotes HIPAA and Privacy Security?
12. When a post to social media is made, but is caught and corrected before affecting the patient, how often is this reported?
13. How often do you work with patient privacy and security issues

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14. In a typical day how likely, are you to use social networking websites?

15. Hospital management seems interested in patient privacy and security, only after an adverse event happens?

Population and Sample Design

Hospital employees of Lifepoint Health were chosen to receive the invitation to participate in the survey. These particular employees were selected because they worked within the Health Information Management Department or the Privacy office. I chose the two departments because of the scope of the survey. Both department works together on HIPAA violations and privacy issues. The sample size is based on the number of hospitals within the Lifepoint Health organization.

Data Collection Procedures

An e-mail was sent using my lpnt.net e-mail. In the email was a link to survey monkey to complete the survey that was built. On September 25, 2015 the e-mail was dispersed to the 60 Lifepoint Health employee sample population. A second reminder e-mail was sent October 9, 2015 with a deadline of October 16, 2015.

Data Collection Instrument

The data collection used a questionnaire with structured questions. I chose this instrument because I wanted to get direct responses to my questions verses receiving open-ended responses. I used categorical items when I had questions with response that were in categories or grouped. The U.S. National Library of Medicine National Institutes of Health was a database that I used to build the variables into the questionnaire.

Data Analysis

The received survey data was transferred to excel to analyze the data. Initially, I wanted to use the IBM Statistical Package for Social Science software to create frequency tables, but I did not have updated software's like Chrome 28+, Firefox 31+, IE 11 + on my computer, so I decided to create my tables and graphs using Excel.

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Response Rate

Out of the 67 hospitals, the survey was sent to 82 employees. Of the 82 surveys e-mailed a total of 74 completed surveys were returned and 8 surveys were unaccounted for. With 74 out of 82 surveys completed, my response rate was 90%.

Profile of Population

Descriptive statistics will be used to describe the population. I chose descriptive statistics to verify the accuracy of the data entered and to provide an overview of the respondents. The descriptive statistics is the best choice for this population because it is a straightforward process that describes and summarizes the data set, but does not correlate data or create any type of statistical modeling relationship that might lead to inferred conclusions or a hypothesis.

Research Questions

To analyze the research questions I will use descriptive statistics. Using the descriptive statistics is the best choice for analyzing these research questions because they are directly from the population that was selected to participate. With limited research on HIPAA violations on social media, I made the choice to leave the scope of analyzing the research question limited to descriptive statics.

Level of Significance

The significance level also known as the alpha level (α) tells how the observed results must be in order to reject the null hypothesis of a significance test. Since most alpha levels are .05 and .01, I chose to go with .05. I chose alpha level .05 because I want to minimize any chances of erroneously rejecting the null hypothesis when it may actually be true.

Summary of Chapter

In concluding this chapter, it describes and explains the methodology in this study. This chapter goes into detail information regarding my research approach, methods of data collection, sampling and ethical considerations. Lastly, detail in what level of significance was discussed to minimize rejection of the null hypothesis when it may be true.

Chapter 4

Results

In this chapter I will present the findings of the study in tables and written text.

Response Rate of Population

Out of the 67 hospitals, the survey was sent to 82 employees. Of the 82 surveys e-mailed a total of 74 completed surveys were returned and 8 surveys were unaccounted for. With 74 out of 82 surveys completed, my response rate was 90%.

Profile of Population

The tables below present the statistics of the participating population. Tables 1 through 7 gives a breakdown for each questions presented in the survey that built the population sample. Table 1 shows the respondents by age, with 1% of respondents 35 to 44; 1% 65 to 74; 7% 55 to 64; 9% of the population age 18 to 24; 20% 45 to 54 and 61% age 25 to 34. In table 2 85% of the population were female and 15% were male. In table 2 85% of the population were female and 15% were male.

Table 3 breaks down the population by ethnicity with 1% American Indian or Alaskan Native; 1% Asian or Pacific Islander; 3% prefer not to disclose their ethnicity; 4% were Hispanic or Latino; 20% were Black or African American and 66% White / Caucasian .

Table 4 shows the statistics on the state of where the respondents are employed. 1% of the respondents work in Kansas. At 3% the respondent's worked in Colorado, Georgia, Mississippi, Nevada, New Mexico, Pennsylvania, and Wisconsin. 4% works in Arizona, Louisiana, Michigan, and Utah. 5% are employed in Indiana, Texas, West Virginia, and Wyoming. 7% of the respondents are employed in hospitals in Alabama. Kentucky and Virginia had respondents of 8% and North Carolina and Tennessee had 9% of respondents.

Table 5 shows the stats of education was also a variable in the population. 3% of the population has an education level of 1st -11th grade. 7% of the population has an education level of 3 years of college and some graduate school. 9% has completed college, 14% graduated from high school and 61% graduated from

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Table 1

Age

Respondents age	No. of Respondents	Percent of Total Respondents
18 to 24	7	9%
25 to 34	45	61%
35 to 44	1	1%
45 to 54	15	20%
55 to 64	5	7%
65 to 74	1	1%
75 or older	0	0%
Total	74	100%

college. Lastly in table 6 is the job role of the respondents. 5% of the population had a job role of HIPAA

Table 2

Gender

Respondents gender	No. of Respondents	Percent of Total Respondents
Male	11	15%
Female	63	85%
Total	74	100%

Privacy Officer, 16% of the respondents has a job role of Director of Privacy and Security, 32% had job roles of Manager of Health Information Management and 46% .

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Table 3
Ethnicity

Respondents ethnicity	No. of Respondents	Percent of Total Respondents
American Indian or Alaskan Native	1	1%
Asian or Pacific Islander	1	1%
Black or African American	15	20%
Hispanic or Latino	3	4%
White/ Caucasian	49	66%
Prefer not to answer	2	3%
Other(Please specify)	3	4%
Total	74	100%

Table 4
State currently working in

State currently working in	No. of Respondents	Percent of Total Respondents
Alabama	5	7%
Arizona	3	4%
Colorado	2	3%
Georgia	2	3%
Indiana	4	5%
Kansas	1	1%
Kentucky	6	8%
Louisiana	3	4%
Michigan	3	4%
Mississippi	2	3%
Nevada	2	3%
New Mexico	2	3%
North Carolina	7	9%
Pennsylvania	2	3%
Tennessee	7	9%
Texas	4	5%
Utah	3	4%
Virginia	6	8%
West Virginia	4	5%
Wisconsin	2	3%
Wyoming	4	5%
Total	74	100%

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Table 5
Level of Education

Highest level of education	No. of Respondents	Percent of total respondents
Did not attend school	0	0%
1st grade - 11th grade	2	3%
Graduated from high school	10	14%
1 year of college	0	0%
2 year of college	0	0%
3 year of college	5	7%
Graduated from college	45	61%
Some graduate school	5	7%
Completed graduate school	7	9%
Total	74	100%

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Table 6
Job Role

Best description of Job Role	No. of Respondents	Percent of total respondents
Director of Privacy and Security	12	16%
Director of Health Information Management	34	46%
Manager of Health Information Management	24	32%
HIPAA Privacy Officer	4	5%
Other	0	0%
Total	74	100%

Research Questions

Tables 7-15 reflects the results of statistical analyses for the remainder of the survey questions regarding social media and HIPAA privacy.

Table 7
What department do you work in?

Departments worked in	No. of Respondents	Percent of Total Respondents
Compliance	7	9%
Health Information Management	56	76%
Privacy and Security	11	15%
Total	74	100%

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Table 8

How often do you work with patient privacy and security issues?

Patient Privacy and Security Issues	No. of Respondents	Percent of Total Respondents
Always	25	34%
Most of the time	12	16%
About half the time	15	20%
Once in a while	17	23%
Never	5	7%
Total	74	100%

Table 9

Which of the following social networking websites do you currently have an account with?

Social Media Sites	No. of Respondents	Percent of Total Respondents
Facebook	24	32%
Google +	5	7%
Instagram	14	19%
LinkedIn	19	26%
Twitter	9	12%
Snapchat	1	1%
Does not apply	2	3%
Other		
Total	74	100%

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Table 10

In a typical day, how likely are you to use social networking websites

Likely Hood of Using Social Media	No. of Respondents	Percent of Total Respondents
Extremely likely	10	14%
Very likely	2	3%
Moderately likely	30	41%
Slightly likely	12	16%
Not at all likely	20	27%
Total	74	100%

Table 11

Hospital management provides a work climate that promotes HIPAA and Privacy Security?

HIPAA and Privacy Security Work Climate	No. of Respondents	Percent of Total Respondents
Strongly disagree	5	7%
Disagree	10	14%
Neutral/ Neither agree nor disagree	12	16%
Agree	32	43%
Strongly agree	15	20%
Total	74	100%

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Table 12

When a post to social media is made, but is caught and corrected before affecting the patient, how often is this reported

Reporting Social Media Postings	No. of Respondents	Percent of Total Respondents
Extremely often	19	26%
Very often	15	20%
Moderately often	12	16%
Slightly often	20	27%
Not at all often	8	11%
Total	74	100%

Table 13

How Often do You Work With Patient Privacy and Security Issues ?

Working With Patient Privacy and Security	No. of Respondents	Percent of Total Respondents
Daily	25	34%
Weekly	22	30%
Monthly	10	14%
Yearly	2	3%
Other (please specify)	15	20%
Total	74	100%

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Table 14

In a Typical Day How Likely are You to Use Social Networking Websites?

Daily Use of Social Networking Sites	No. of Respondents	Percent of Total Respondents
0-3 hours	34	46%
4 - 7 hours	12	16%
8 - 11 hours	10	14%
Not applicable	3	4%
Other	15	20%
Total	74	100%

Table 15

Hospital Management Seems Interested in Patient Privacy and Security, Only After an Adverse Event Happens?

Hospital Management Interest After Adverse Events	No. of Respondents	Percent of Total Respondents
Strongly disagree	22	30%
Disagree	12	16%
Neutral/ Neither agree nor disagree	17	23%
Agree	2	3%
Strongly Agree	21	28%
Total	74	100%

Chapter Summary

Chapter 4 consisted of tables reflecting the statistics of the survey questions. 46% of the populations were Directors of Health Information Management, with 34% of the population working with patient privacy and security issues. With social media in the palm of our hands, majority of the population had a Facebook account at 32% of the population. In a typical day, 41% were likely to use social networking websites. When asked, 43% of the survey participants agreed that hospital management provides a work climate that promotes HIPAA and privacy security and 30% disagreed with the question of hospital management interest in patient privacy and security, only after adverse events happen. Summarizing the questions, 27% of social media posts were caught and corrected before affecting the patient is reported.

Chapter 5

Conclusion and Recommendations

This chapter covers a summary of the research findings, a conclusion of the study, and my recommendations based on the study results findings and conclusion. I chose to conduct a study on HIPAA violations on social media because we live in a world where social media is at the palm of our hands and to a degree it controls every aspect of our lives. In healthcare, competence in technology allows us the ability to remain compliant and protects our patients' privacy.

Summary of findings

From the sample size I chose to send the survey to, I expected the number of participants to work with patient privacy issues often. 7% of the population responded with never working with patient privacy and security issues. A factor that may have influenced their choice was the fact that they may not work directly with patient privacy and security issues, but every healthcare professional work with patient privacy and confidentiality.

The majority of the population has a Facebook account and in a typical day, 0-3 hours are used on social networking sites giving a high percentage of 46%. With majority of the participants using social media throughout an 8-hour workday, the possibilities of HIPAA violations are substantial. With the support of hospital management providing a workplace that promotes HIPAA and privacy security the numbers of HIPAA violations are minimal.

Conclusions

The research question is with the use of social media, are we increasing the chance of HIPAA violations? The HIPAA violation on social media survey provided enough data to observe if hospital management is aware of the challenges and if the personal uses of social media sites by management could reflect numbers of social media users in the hospital staff. A statistical significant relationship was found between hospital staff providing

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a climate that promotes HIPAA and privacy security and hospital staff being aware of potential HIPAA violations.

In 2011 on the PMC US National Library of Medicine National Institution of Health, a study examined the legal and ethical parameters of protected health information on social networking sites. Facebook pages from medical students in 2007 and 2009 were examined for potential violations of “protected health information such as portrayals of people, names, dates, or descriptions of procedures.” There was a dramatic increase from the 2007 (44%) to 2009 (84%) in terms of the number of medical students with Facebook pages.

Implications of study

Healthcare facilities and healthcare professionals can benefit from this study by understanding what can be considered a HIPAA violation and the consequences of not having patient privacy. This information will make you think before you post and make you ask yourself “am I violating HIPAA violation?”. This study can be used to educate staff and students on what is consider a HIPAA violation and asking yourself could this post be harmful to someone before you post. The study will inform hospital management the importance of having social media policies in place, as well as, having job roles to monitor social media usage at the work place.

Recommendations

The survey conducted reflections the population and if and how they use social media. It lets us know how often they use social media and personal opinions on how they feel hospital management handles HIPAA violations. However, the data does not tell us if HIPAA violations have increased over the past couple of years and if it has by what percent and is it because of the use of social media. A subsequent survey could revise some of the questions so the percentage of HIPAA violations are reflected in the study.

Figure 1

Institution	Case Overview
University of Cincinnati Medical Center	Patient claimed a financial services employee posted a screenshot of her medical records including diagnosis and other identifying information on social media
Johnson County Community College	One of four nursing students dismissed from nursing program for posting photos of themselves in a lab with a human placenta on Facebook
Westerly Hospital in Rhode Island	Emergency room doctor terminated, reprimanded by the state medical board, and fined \$500 for posting information online about a trauma patient
St. Mary Medical Centers in California	Four staff members terminated, three disciplined for posting photos of a dying patient on Facebook. Two of the employees involved were nurses

Figure 2

HIPAA Violations and The Use of Social Media

1. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

2. Are you male or female?

- Male
- Female

3. What is your ethnicity? (Please select all that apply.)

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black or African American

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Hispanic or Latino

White / Caucasian

Prefer not to answer

Other (please specify)

4. In what state or U.S. territory do you currently work?

5. What is the highest level of education you have completed?

6. Which of the following best describes your job role?

Director of Privacy and Security

Director of Health Information Management

Manager of Health Information Management

HIPAA Privacy Officer

HIPAA Compliance Specialist

Other (please specify)

7. What department do you work in? (Optional)

Accounting

Administrative

Clinical Documentation Improvement

Compliance

Marketing

Health Information Management

Human Resources

Finance

Legal

IT

Research & Development

Revenue Cycle

Privacy and Security

Other (please specify)

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8. How often do you work with patient privacy and security issues?

Always

Most of the time

About half the time

Once in a while

Never

9. Which of the following social networking websites do you currently have an account with? (Check all that apply)

Facebook

Google+

Instagram

LinkedIn

Twitter

Snapchat

Does not apply

Other (please specify)

10. In a typical day, how likely are you to use social networking websites?

Extremely likely

Very likely

Moderately likely

Slightly likely Not

at all likely

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11. Hospital management provides a work climate that promotes HIPAA and Privacy Security?

Strongly disagree

Disagree

Neutral/Neither agree nor disagree

Agree

Strongly agree

12. When a post to social media is made, but is caught and corrected before affecting the patient , how often is this reported?

Extremely often

Very often

Moderately often

Slightly often Not

at all often

13. How often do you work with patient privacy and security issues?

Daily

Weekly

Monthly

Yearly

Other (please specify)

14. In a typical day how likely are you to use social networking websites¹¹

0 - 3 hours

4 - 7 hours

8 - 11 hours

Not applicable

Other (please specify)

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15. Hospital management seems interested in patient privacy and security, only after an adverse event happens?

Strongly disagree

Disagree

Neutral/Neither neither agree nor disagree

Agree

Strongly Agree

Figure 3

Cover letter

HIPAA Violation and the Use of Social Media

Dear, (Health professional's name)

You are being asked to participate in a research study in which we will take your response from the survey and determine if the use of social media has affected HIPAA violations at your facility. People invited to participate in this study must be between 18-90 years of age, employed, volunteer are completing an Internship at one of the LifePoint Health facilities.

If you decide to take part in this research study, you will complete a short survey. There is no further procedure required. The investigators will analyze the results.

There are no physical risks associated with this study. Every effort will be made to keep your information confidential; however, this cannot be guaranteed.

Please note that you will likely receive no direct benefit from taking part in this research study. You will not be paid for taking part of this study.

All paper research records will be stored in a password-protected folder and will be accessible only to research personnel. You will not be identified by name in any publication of the research results.

If you have any questions about this research study you may contact Sajeesh Kumar, Ph.D at 901-448-2125. You may contact Holly Herron, CIM, UTHSC IRB Administrator at 901-448-5920 or visit the IRB website at http://www.uthsc.edu/research/research_compliance/IRB/participant_complaint.php if you have any questions about your rights as a participant in this study or your rights as a research subject.

You have read the description of the research study as outlined above. Please click YES below, if you knowingly and freely choose to participate in the study. Otherwise click NO.

Thank you

Tamesha Parris, RHIA

Preparation Date: September, 2015

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Figure 4

January 2014, 74% of all online adults use social networking sites. For adults ages 18-29, 89% of them use social networking sites. For adults ages 30-49, 82% of them do. For adults ages 50-64, 65% of them do, and for adults ages 65+, 49% of them use social networking sites.

Social Media Use by Age Group Over Time

Figure 5

Who uses social networking sites

% of internet users within each group who use social networking sites

All internet users	74%
a Men	72
b Women	76

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Figure 6

Figure 7

HIPAA VIOLATIONS ON SOCIAL MEDIA

Figure 8

Figure 9

HIPAA VIOLATIONS ON SOCIAL MEDIA

Figure 10

Figure 11

HIPAA VIOLATIONS ON SOCIAL MEDIA

Figure 12

Figure 13

HIPAA VIOLATIONS ON SOCIAL MEDIA

Figure 14

Figure 15

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Figure 16

Figure 17

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Figure 18

Figure 19

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Figure 20

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