The promise of a fully realized electronic health record—that is, a single, complete, and accurate record of a patient’s health information—puts clinicians in a position to do their best work. But the growing role of health information technology (HIT) comes with challenges. Come explore the ethical issues of privacy, confidentiality, and data usage that are commonplace in the HIT realm. Speakers will define a truly ethical healthcare environment, which requires thoughtful and deliberate debate. Oncology nurses in this environment must also have the ability to identify and promote ethical behavior independently of punitive and/or legal action. Discussion will focus on the bioethical framework in the context of clinical exemplars, with deliberation on the ethical challenges related to oncology care and HIT.

Content Area: General Content

Content Level: Intermediate

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Objectives:
At the end of this session, participants will be able to:
1. Identify ethical issues related to non-maleficence and the electronic health record.
2. Discuss the meaning of data integrity and fidelity.

Content Outline:
I. Nonmaleficence
A. Loss of privacy
B. Compromised security
C. De-identified data
D. Data integrity and fidelity
II. Autonomy
A. Right to self-determination
B. Improved access to personal health data
C. HIPAA’s privacy rule—secondary use of de-identified data
III. Justice
A. Equal access to expensive technology
B. Ownership of the information
C. Genomic information—significance and special consideration

Bibliography:


Thursday, May 1

Concepts / Precepts
- Autonomy
- Beneficence / Non-maleficence
- Justice
- Fidelity / Veracity

It’s A New World...
- Privacy vs. Security
- Who owns the information?
- Data mining
- Email Communication – is it privileged?
- There is no “terminal delete”

Health Information Security Mantra
Get the right information about the right patient in the right location to the right health care provider while protecting the patient’s right to privacy

The Importance of “Trust”
Without trust, there will be no disclosure of data;
Without data, no information;
Without information, no knowledge translation to patient care

Is Privacy Important?
[Privacy] protects the solitude necessary for creative thought. It allows us the independence that is part of raising a family. It protects our right to be secure in our homes and possessions, assured that the government cannot come barging in. Privacy also encompasses our right to self-determination and to define who we are. Although we live in a world of noisy self-confession, privacy allows us to keep certain facts to ourselves if we so choose. The right to privacy, it seems, is what makes us civilized.

Alderman & Kennedy, The Right to Privacy (1997)

Confidentiality and Privacy
- Confidentiality- includes protecting information about a client that is critical in the health care context but should not be revealed to others outside this context
- Privacy- includes protection of the client from having to reveal personal information that is not needed in the health care context and protection of the client from viewing by others

What is Protected Health Information?

- Anything that can identify a patient
  - Paper and electronic records
    - Faxes, emails, texts, etc
  - Oral communication
    - Phone conversations, hallway conversations

Ethics and Social Media

- Ethics addresses issues about “whether an action” is
  - good/bad, right/wrong,
  - appropriate/inappropriate, praiseworthy/blameworthy
- Although well intended, caution should be inferred for posting on social media
- What was the minimum necessary? What guided your action? How did we safeguard privacy of individuals?

Nurses’ Role in Ethics and Technology Today

- Electronic medical information has many important advantages
  - Streamline patient care
  - Cut costs
  - Improve accuracy
  - Prevent errors
  - Keep caregivers informed in a quickly evolving field
  - Bring the latest most specialized care

Examples to illustrate what NOT to publically post on social media

- Patient identifiers
- Inappropriate images or comments that you would not display in any other public forum
- Pictures of yourself or others at work if patient or business information can be identified in the picture either through casual viewing or through image enhancement
- Statement that you cared for a “Philadelphia Phillies” Player or other identifying message
- Insult your patients, clients, or co-workers

Disclosure of Medical Information

- Who can disclose?
- Who can give permission?
- "Right to know"
- "Need to know"

Challenges We Face

- Obligation to not disclose up against the necessity to share with the team (ex. Patient tells you they want to stop treatment)
- Legal obligation to disclose in some situations (ex. Suicide, Abuse)
- Often we know information about the patient that they have not explicitly given us permission to know
- Everyone calls us for advice
When thinking about Confidentiality and Privacy....

- Nurses need to be clear that patient confidentiality and privacy does not trumps other ethical values and concerns.
- Like any other of the principles, it must be weighed against other ethical concerns and obligations
  - Patient modesty is protected
  - Environment protects from unintentional disclosures
  - Use only the minimum necessary patient information
  - Abstain from discussing identifiable patient information in public areas
  - Electronic protected health information is sent with appropriate encryption

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When thinking about Confidentiality and Privacy....

- Nurses should recall acronym: (POST)
  - Privacy- am I protecting this person?
  - Outcome- what will happen if I post this?
  - Sharing- would the person want this information shared with________? Should this information be shared?
  - Technology- Should I use technology to communicate this information?

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Audience Participation using Audience Response System:
Case Studies

- Confidentiality
- Social Media
- Breach of medical information
- EMR Downtimes