Continuing Education—July 2010
Boundaries Refresher—Social Networking

(In January we issued a Continuing Education essay on “Setting Healthy Boundaries.” This update addresses the problem of social networking in the hospice setting.)

Among the many “small world” categories that seem to divide the tech-savvy from the … non-tech-savvy are the “Facebookers” and the “non-Facebookers.” The points made in this essay about social networking sites such as Facebook may also pertain to e-mail communications with your patients and families. (Terms in quotation marks, such as friend, like, ignore, are Facebook terms. Similar terms may apply to other social networking sites.)

THE QUESTION: As a hospice volunteer can I "friend" a patient or a patient's family member or communicate with them in some other social networking manner such as personal e-mails or texting?

ANSWER: Plain and simple, the answer is NO to all of the above—no Facebook/My Space, no texting, no personal e-mails.

THE RATIONALE: The reason we avoid social networking with our patients is the same reason you are careful about giving out your home phone number, address, or personal information. You are no longer just the hospice volunteer, you now are now also the Facebook friend, someone who texts them and/or sends personal e-mails. So when you come to the door the next time, your patient might feel differently about you, you may have altered your credibility related to your skills or you ability to be fully present to them because they have seen what sites you have "liked" on your Facebook account or because they have seen postings that are out of the realm of your hospice care. Additionally, it may affect how you relate to them as well.

WHAT YOU CAN DO TO PREVENT THIS: If a patient or family asks you if they can sign up for your Facebook page, please tell them it is against our rules to do so. If you received a "friend request" from a patient or family member, "ignore" it. If you need to discuss it with the person, please do so. Make sure your privacy controls are set so that only the information you wish others to see is visible to the people you want to see it. Remember this will help you keep a healthy volunteer / life balance.

A WRINKLE: E-mail to a patient/family member can be a very effective form of communicating with families and patients about care related matters. It helps you speak clearly because you have time to write exactly what you want to say and it also serves to document your communication with patients and families.

Be mindful however that
1. e-mails need to reflect the professional relationship you have with the patient,
2. they should not include personal identifying information about the patient that could identify him/her to someone else (address, name, phone number, ID number, etc.), and
3. they are part of the patient’s permanent medical record and may be subpoenaed.
It would not be appropriate to carry on a personal conversation (unrelated to care) in these e-mails. The key to remember is this: **Is this communication something that would be appropriate to be seen in the medical record?** Would you want a personal e-mail related to matters outside of the care of the patient to be in the medical record?

Keep that in mind and you will be fine.

Here’s a troublesome hypothetical e-mail to a patient's daughter:

*Jane,*

*It was nice to meet you at your mother's house last week. She is doing as we would expect at this point in time.*

*I remember us discussing that you had a house at the beach that you rented and wondered if you could tell me what the process is for renting your house. We might like to take a vacation there this fall.*

Obviously this e-mail would not be appropriate to put in the patient’s medical record and as such is an inappropriate communication between a volunteer and the patient’s daughter.

If you have any questions on these or other boundary issues (such as those identified in the January 2010 Continuing Education essay), please contact a team member or Carolyn Colsher.

(Many thanks to April Perry, Clinical Educator, Duke HomeCare & Hospice for this information)