

Confidentiality and Privacy

Case Studies

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The College of Nurses of Ontario presents: Confidentiality and Privacy – Case Studies



Introduction

- This is the second of two webcasts
 - Chapter 1: Overview
 - Chapter 2: Case Studies



This presentation is the second of two webcast chapters about privacy and confidentiality. The first chapter was an overview of your obligations and accountabilities related to maintaining the privacy and confidentiality of clients' personal health information. In this chapter, we will review some case studies and reflect on how to apply the concepts we learned in the first chapter to situations that could result in privacy breaches.



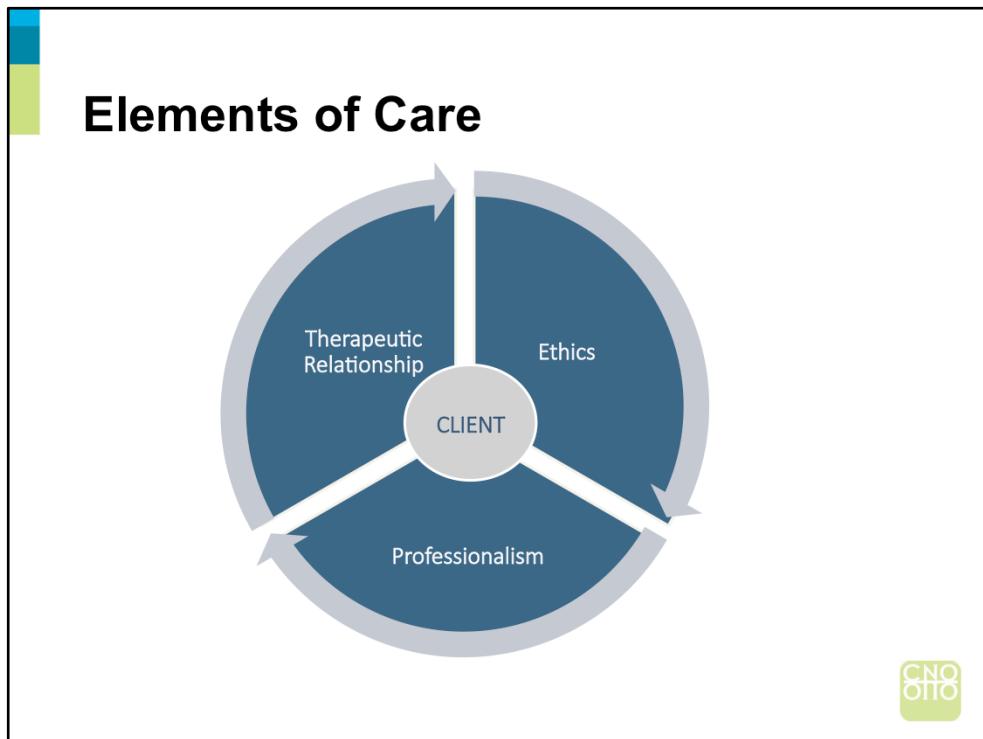
Learning Objectives

- Reflect on your practice in relation to confidentiality and privacy
- Apply principles of confidentiality and privacy to your practice
- Apply the elements of care to your practice



After listening to this webcast you should be able to:

- Reflect on your practice in relation to confidentiality and privacy
- Apply the principles of confidentiality and privacy to your practice
- Apply the elements of care to your practice



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As identified in Chapter 1, privacy breaches are serious offences that negatively affect the trust between nurses and their clients. To maintain this trust, nurses need to keep their clients as the focus of care by always applying the three elements of care: professionalism, ethics and therapeutic relationships.

When you apply these three elements, you make the client the centre of your nursing care.

As you review the case studies in this webcast, consider how the absence of these elements when dealing with clients' health information can lead to privacy breaches and erosion of trust.

Case 1 – Social Media Post

Could you identify this client?

Let's review the first case study.

A nurse posted the following comment on her social media page: “Can this shift be any longer? It started out with a waiting room full of nagging people that don’t seem to know what “emergency” means. Then I had to deal with the drama of trying to transfer a 400 lbs. (no joke) intubated COPD patient down the hall to the ICU, those ICU nurses are such divas and I wasn’t in the mood for their whining. Anyone around ABC Hospital want to save me with a drink to get me through the next 10 hours of my shift???”

If you read this post, would you be able to identify the client?

Case 1 – Social Media Post

continued

- Privacy setting on your account does not guarantee that other people will not see your post
- Before posting, ask if the information you are sharing could possibly reveal the identity of the client



While you may have a privacy setting on your account, this does not guarantee that other people will not see your post. When posting information on social media sites such as Facebook, ask yourself whether the information you are sharing could possibly reveal the identity of the client, even if you didn't include any names. Reflect on the possible outcomes of posting inappropriate content on social media. Anything that exists on the Internet is there forever and could be retrieved even after you have deleted it.

You must protect any information you learn about clients in your care. Clients need to be confident that their nurse will protect their personal information and basic dignity. As discussed in the previous slide about elements of care, if you breach this trust, even unintentionally, it can damage the nurse-client relationship, co-worker relationships and the general trustworthiness of the nursing profession.

Case 2 – Use of Pictures

A nurse educator from a tropical disease clinic is preparing a presentation poster for an infectious diseases conference. She includes pictures of varying stages of a client's lesions in the poster.

- **What factors does the nurse need to consider?**



Case 2. Use of Pictures.

A nurse educator from a tropical disease clinic is preparing a presentation poster for an infectious diseases conference. She includes pictures of varying stages of a client's lesions in the poster.

In this scenario, what factors does this nurse need to consider?

Case 2 – Use of Pictures

continued

- Pictures can provide information that makes it possible to identify the client
- The conference attendees are not in this client's circle of care, so they should not be receiving this information about the client
- Nurses are accountable for obtaining consent
- Consider whether the client has given you consent to share the photo



Although the client is not directly identified in this scenario, pictures can provide information that makes it possible to identify the client. In addition, the conference attendees in this scenario are not in this client's circle of care; therefore, they should not be receiving this information about the client.

According to the College's *Consent* practice guideline, nurses are accountable for obtaining consent. You must consider whether the client has given you consent to share the photo. Also, organizations often have policies about taking and sharing photos of clients. If the client has consented, make sure you document this consent.

To learn more about consent and the circle of care, view Chapter 1 of this webcast titled *Confidentiality and Privacy: An Overview*.

Case 3 – Sharing Information

Marcus was admitted to the hospital from the long-term care facility. He was diagnosed with dehydration and delirium. He is expected to eventually return to the facility. The charge nurse at the facility calls for an update of Marcus' status.

- **Can the hospital nurse share this information with the long-term care facility?**



Case 3. Sharing Information.

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Can the hospital nurse share this information with the long-term care facility?

Case 3 – Sharing Information

continued

- The long-term care facility and the hospital are considered health information custodians
- Health information custodians or their agents can assume they have a client's implied consent to share their personal health information
- Exception: if Marcus or his substitute decision-maker has specifically requested not to share that information with the long-term care facility



In this scenario, both the long-term care facility and the hospital are considered health information custodians. As we discussed in Chapter 1 of this webcast titled, *Confidentiality and Privacy: An Overview*, health information custodians or their agents can assume they have a client's implied consent to share their personal health information.

The nurse at the hospital can give the long-term care facility updates on Marcus' status because the purpose would be to assist in providing health care to Marcus.

An exception would be if the hospital nurse is aware that Marcus or his substitute decision-maker has specifically requested not to share that information with the long-term care facility.

Case 4 – Family Ties

Adam works on the cardiology unit at the hospital and learns that his grandfather was admitted overnight. He has not been able to get in touch with his grandfather. While on the computer getting results for his client, Adam checks his grandfather's health record to find out what room he is in and why he has been admitted.

- **Is it acceptable to access the grandfather's health record?**



Case 4. Family ties

Adam works on the cardiology unit at the hospital and learns that his grandfather was admitted overnight. He has not been able to get in touch with his grandfather. While on the computer getting results for his client, Adam checks his grandfather's health record to find out what room he is in and why he has been admitted.

Is it acceptable for Adam to access his grandfather's health record?

Case 4 – Family Ties

continued

- Adam is not in the circle of care for his grandfather
- Before accessing a client's health record, ask: Do I need to know this information to provide health care or assist in providing care to this individual?
- You do not have permission to look up information that is beyond what you need to provide health care, even if the client is your family member



In this scenario, Adam is not in the circle of care for his grandfather because he is neither providing health care nor assisting in providing health care to his grandfather.

This case demonstrates how health care workers can easily cross the line and breach an individual's right to privacy and confidentiality.

Before accessing a client's health record, ask yourself: Do I need to know this information to provide health care or assist in providing care to this individual?

Being an employee of a health facility and even signing a confidentiality agreement upon employment does not give you permission to look up information that is beyond what you need to provide health care to a client, regardless of whether the client is your family member.



Case 5 – Communicating Through Technology

- Dr. Skinner orders a blood test for your patient. She asks you to text the results to her so she can text back a medication order. You need to use your own personal phone to text the physician.

What should you consider to maintain privacy and confidentiality?



Case 5. Communicating through technology

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What should you consider to maintain privacy and confidentiality?



Case 5 – Communicating Through Technology

continued

- Consider how the use of technology may affect the security of the information that is being transmitted
- Ensure measures are in place to protect the information, such as encryption or passwords
- To learn more, read the *Documentation* practice standard at www.cno.org/docs



Using technology to communicate a test result or accept an order does not change the standard for protecting clients' information. You must consider how the use of technology may affect the security of the information that is being transmitted and ensure measures are in place to protect the information, such as encryption or the use of passwords.

Read the College's *Documentation* practice standard to learn more about ensuring the security of information when using personal devices.



Case 6 – Previous Shift

You work part-time for a community agency. On your last shift you took care of David, an older gentleman with renal failure who lives alone. On your next shift, you decide to check David's chart to see how he is doing.

- **Are you still in David's circle of care?**



Case 6. Client from previous shift

You work part-time for a community agency. On your last shift you took care of David, an older gentleman with renal failure who lives alone. On your next shift, you decide to check David's chart to see how he is doing.

Are you still in David's circle of care?

Case 6 – Previous Shift

continued

- Unless you are still providing, or assisting in providing, health care to David, you are no longer in his circle of care
- Curiosity or concern are not professional reasons to access health information, even if it is for a former client



Unless you are still providing, or assisting in providing, health care to David, you are no longer in his circle of care. As we discussed in Chapter 1 of this webcast titled *Confidentiality and Privacy: An Overview*, if you are not in a client's circle of care, then you do not have implied consent to access the client's health record.

Curiosity or concern are not professional reasons to access health information, even if it is for a former client.

Conclusion

- The six case studies show the importance of applying the following when dealing with personal health information:
 - the College's practice documents
 - elements of care
 - consent and the circle of care
- Privacy breaches erode the trust between nurses and clients
- Protecting privacy of personal health information is essential for providing the best care possible



Being a nurse puts you in a position to access clients' personal health information, but you are accountable for knowing when to use, or refrain from using, that access.

The six case studies we reviewed in this chapter show the importance of applying the College's practice documents and concepts such as consent and the elements of care to situations involving personal health information. This will help you maintain the confidentiality of clients' health information and only share necessary information within the circle of care.

Remember: privacy breaches erode the trust between nurses and clients and affect the public's trust in the nursing profession. Therefore, protecting the confidentiality and privacy of personal health information is essential for providing clients with the best care possible.



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