

Effective Use of Social Media to Promote Your Practice, Part 2

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This Article is the second of a two-part series on the Effective Use of Social Media to promote your practice. The first article, which appeared in the 2018 May/June edition of Triangle Physician, contained an introduction and two recommendations. This article contains two more important suggestions.

Use Social Media Safely to Avoid Inappropriate Disclosures of Protected Health Information (PHI)

The theory behind social media is that participants voluntarily consent to contribute social and personal data to a social media electronic storage system. Depending on the type of social media, there may be ways to restrict access to some of that information so not all users can see it. Medical practices that use social media are not exempt from HIPAA. As Covered Entities, they are obligated to protect the use and disclosure of

the physician and asks a specific question about his/her personal condition. The provider responds, disclosing PHI that should not be shared or viewed by anyone other than the patient.

Here's another situation that occurs frequently and that may be a HIPAA violation. Patients often like the convenience of websites such as www.caringbridge.com or www.carepages.com to communicate with family and friends when they are ill or in the hospital. People sign up to be part of a group that receives blog posts on the patient's condition. All too often, healthcare providers comment on the condition and treatment, mistakenly assuming that the blog post is equivalent to patient authorization to reveal PHI.

Still another common situation arises when someone posts a negative comment about a provider and/or practice. In many instances, the individual physician or practice has a knee-jerk



protected health information (PHI) and to honor the specific patient rights that are identified in the Privacy Rule as amended by the HITECH Act of 2009 and the 2013 Omnibus Final Rule.

Let's examine some real-life situations that we've seen with clients. A patient and provider are Facebook friends. The patient reaches out to

reaction and counters the comment as quickly as possible. Often the provider discloses PHI without even thinking about the potential HIPAA violation.

Social media and HIPAA are related but not incompatible. Providers, not patients, are responsible for maintaining HIPAA compliance. The saf-

est way to communicate with patients is through a secure patient portal. However, if you expect to enter into social media “friendships,” require patients to sign a written authorization regarding online disclosure before entering into the online relationship. Even with the patient’s written authorization, review what you post, making sure not to use or disclose PHI without proper prior authorization. For additional guidance, read the Federation of State Medical Boards’ Model Policy Guidelines for the Appropriate Use of Media and Social Networking in Medical Practice (<http://www.fsmb.org/Media/Default/PDF/FSMB/Advocacy/pub-social-media-guidelines.pdf>).

Select the Appropriate Option(s) for Maintaining Your Social Media Presence

Many practices make the mistake of delegating the responsibility for developing and maintaining social media to an enthusiastic workforce member. When a solid strategy is in place and if that individual understands the big picture – i.e. all that we’ve mentioned above – the decision to select an internal person may be appropriate. But if the individual assuming the responsibility for social media doesn’t understand the context into which social media must be put and doesn’t have the

time to learn new skills, you may be better served by outsourcing the responsibility to a qualified professional.

If you do decide to outsource the responsibility, here are questions to ask of the individuals/companies that you are considering:

- What do you know about healthcare practices?
- How well do you understand HIPAA?
- With what social media platforms do you have professional experience?
- What is your process for planning and content development?
- What reports will you send me?
- How do you measure success?

Visit this link to learn more about getting more from your social media:

<http://www.broadreachmarketingservices.com/blog/seven-steps-to-get-more-out-of-your-social-media-efforts>.

Newest Data Shows Childhood Obesity Continues to Increase

Across all ages, African-American, Hispanic children have highest rates

Despite reports in recent years suggesting childhood obesity could be reaching a plateau in some groups, the big picture on obesity rates for children ages 2 to 19 remains unfavorable.

Three decades of rising childhood obesity continued their upward trend in 2016 according to a new analysis from Duke Health researchers.

The findings, which appear Feb. 26 in the journal *Pediatrics*, show 35.1 percent of children in the U.S. were overweight in 2016, a 4.7-percent increase compared to 2014.

“About four years ago, there was evidence of a decline in obesity in preschoolers,” said Asheley Cockrell Skinner, Ph.D., lead author and associate professor of population health sciences, who is also a member of the Duke Clinical Research Institute (DCRI). “It appears any decline that may have been detected by looking at different snapshots in time or different data sets has reversed course.

The long-term trend is clearly that obesity in children of all ages is increasing.”

The data are based on body-mass index (BMI) data for 3,340 children participating in the National Health and Nutri-

tional Examination Survey (NHANES) in 2015-16, a large database updated every two years. Researchers examined data back to 1999 that includes 33,543 children.

