

Moderator: Hello and welcome to today's webinar, *Online Presence, Offline Impact: Social Media Risks for Psychologists*. This topical webinar is paid for by American Professional Agency, the sole authorized and preferred provider of professional liability insurance for APA members. Some important points before we get started. Allison Funicelli and Cara Staus, two of today's presenters, have a working relationship with Allied World, underwriter for the American Professional Agency.

As such, they both have a financial and intellectual interest in the webinar content. The purpose of this presentation is to provide a balanced view on social media risks and psychological practice. APA does not endorse any products or services. The content was created by American Professional Agency and does not reflect the views of APA or its editorial staff. Email advertising@apa.org to learn more.

Next, this program does not offer CE. However, we will email everyone watching live today a certificate of attendance. Certificates will only be issued to those who watch for a minimum of 45 minutes. A recording of this presentation will be emailed to everyone in two weeks' time. The recording will include the presentation slides. During our time together, you will be on mute. You can communicate with us using the Q&A box located on your webinar screen. The Q&A is enabled for attendee interaction with submitted questions. Attendees can view all submitted questions and upvote those they find important. This helps the presenter identify questions that many attendees want answered.

A link to the presentation slides will be posted in the chat box of your webinar screen. If you miss them, don't worry. We will email them to you with the recording. Now, let me introduce our presenters. First, Allison Funicelli. She is Assistant Vice President, Risk Management Group, AWAC Services Company, and a member company of Allied World. Cara H. Staus, also an Assistant Vice President for the Risk Management Group of AWAC Services Company, a member company of Allied World. Welcome, Allison and Cara.

Allison Funicelli: Thank you. I'm Allison, just so you know who all you can see on the slide. First thing I'm going to do is, we are required to just read our disclaimer. If we could switch to the next slide, that would be great. This material is provided as a resource for informational purposes only. It's not intended as legal or other professional advice. We always recommend that you consult your own professionals, whether it's a legal advisor or an insurance professional, for you to figure out what is best for your practice and your needs.

What we talk about today will not address all potential risks. The information we discuss may be somewhat time-sensitive. This material cannot be reproduced or redistributed without the express written permission of Allied World, which is a Fairfax company. Next, we're going to talk about our objectives for the presentation. We're going to be examining the ways to engage with patients and the community on social media. We're going to be identifying the risks and challenges using social media and then reviewing best practices. What can we do in a psychology practice to try to mitigate our risk?

The first objective really is going to be talking about supporting education. The middle objective is talking about those ethical, confidentiality, privacy, professional boundaries, some cybersecurity we'll talk a little bit about, and reputational

management. Then, again, that last objective, we're going to be focusing on the risk management stuff, like the stuff that Cara and I do, and provide advice to psychologists on how to reduce their risks of malpractice claims or licensing board complaints.

Engaging with patients and then the community on social media. Again, this is just a transition slide. Again, it's a powerful tool, social media. We know it can do a lot of good things. We know it can do a lot of not-so-good things. We're going to be focusing today on how social media intersects with a psychology practice and the treatment of patients for mental health and mental health awareness.

Social media is not meant to ever replace something. It doesn't replace a provider. It doesn't replace proper treatment. What it's meant to do is complement the professional clinical relationship between you and your patient. Social media is deeply integrated certainly into our personal and professional lives. We all have social media. We have things like LinkedIn, where we might be communicating on a professional basis, and other similar type sites. Certainly, we know about the personal sites.

People also use Facebook and Instagram and TikTok and all these other things to also incorporate into their professional lives. We're going to talk a little bit more in detail about not any particular social media platform, but how using these platforms in a professional way could have some pitfalls and some positive things, and then also keeping those boundaries from our personal lives and our professional lives when we're using a particular platform for both of these reasons.

What is social media? You see there's a definition here. I think we all know what it is now. Basically, we know it allows people to create and share and interact with each other in real time. Unlike traditional media, information can spread quickly; it can spread widely, sometimes without verification. I know when I'm just personally using, or even professionally using, social media, sometimes people will be sharing things, and I think, "Is that something that's true or not?"

I sometimes fact-check things before I share things. The unfortunate side is people will read things, they share things without fact-checking, and making sure that the information they're sharing has some sort of evidence-based to it before we perpetuate, potentially, misinformation. Again, that can be both personally and professionally. I know for me, when I'm doing presentations, I'm researching stuff for articles and stuff, I can go into the internet. I can Google things. Now, the first option, instead of it giving you specific places to go, is an AI prompt. We're going to talk a little bit about AI mixed in with the presentation.

I look to see, like, "Okay, AI, you've shared information with me, and it looks like it's on point to what I'm looking for." Then I look at what are the sources it grabbed it from? Because sometimes it's a good, legitimate source, like, "Okay, that's great. I'm going to go read that source and look at what's there, and maybe there's information I can use." Other times I've looked, and I say, "There's nothing in this source it's using that has anything to do with what I asked it. It's not a good, credible source." Again, we want to just be mindful of when we're using social media: what are we using it for, and are we making sure that the information we're using is legitimate and not perpetuating that misinformation? Cara?

Cara Staus: Thanks. I like this graphic here because it probably could be updated with all the new forms of platforms that exist out there. In reality, social media is one of the most powerful online platforms. The scale of use in social media is quite remarkable. Patients will actually discover you as providers; they will evaluate your credentials. They're going to take a look at you first before probably selecting you as a potential provider, or a good fit for them. People form impressions really by that digital footprint and what they're finding out on the internet.

As Allison indicated, reputable sources. People could find personal blogs or personal websites, and we'll go into that information, personal pages, before they really come and sit in the room with you, whether it's virtual or in-person. This really focuses on the impact of what your online presence and how effectively that becomes an extension of your professional reputation. Keep that in mind. In everything that you do, when you are making a click or commenting on platforms, those comments are out there for most individuals to see, unless it's a private, secured social media platform. What's posted, shared, liked, commented on really can leave lasting professional implications.

I know myself utilizing social media, both professionally and personally; when I'm on my personal page, I might see content of people that I'm not even associated with, but they're commenting on a page, and I'm like, "Oh, wow, they might be a friend of a friend." I am not, by any means, a technological expert, but I am aware of the impact that technology and social media platforms can have.

As we talk and we incorporate the utilization of AI, this presentation is not about AI; it's about social media, but we can't ignore that AI exists, and it is being increasingly utilized to generate social media content. While we recognize that AI can certainly improve efficiency, that we really need to be careful, as Allison suggested, about what is real information that's being shared.

As we move into the presentation, these are, I'm sure, the most familiar uses of social media. We've got social and professional networking, information sharing, obviously entertainment, news, education. There's advocacy that's going on. Marketing is utilized quite heavily to attract individuals towards a certain product or service. Also, it's not unique. In healthcare in general, inclusive of what you do in the practice of psychology, you're often asked to participate in a lot of these activities, both professionally and personally. How do we maintain that balance of our ethical and professional obligations that do require sometimes a pause and additional caution when we're interacting online?

This slide, or pie chart, really reflects the uses that you, as providers in the practice of psychology, are going to utilize social media. You may use it for professional networking, that continuing education. Obviously, we're on a social media platform here today for educational purposes. Zoom is known as a social media platform. Research and marketing. A lot of us are doing research online. Gone are the days, I think, of going to the library. Everything is online. You can get digitalized books and resources and libraries. Like I said, marketing is huge to market the services that we're providing.

Also, education. You might be utilizing it for a means of patient education, directing your patients to a certain platform or page that may be beneficial depending upon

the therapeutic treatment plan that they're on. It is a possibility that you may incorporate social media into discussions with your patients regarding mental health and wellness. That certainly is definitely a tool and how it's used in the practice of psychology. However, I think it's important that we don't blur any of the distinctions between general education content, we're directing you that this might be a benefit, versus that individualized therapeutic treatment plan. Allison,

Allison: Thanks, Cara. First, I'm going to talk a little bit about provider-focused use of social media. Here are some ways a psychologist might use social media in relation to their professional practice. Certainly, patient engagement. You may have a website for your office practice. It's ways for potential patients to find you, fill out intake paperwork, see if it's somebody you might want to make an appointment with, et cetera. It also gives you an opportunity to share real-time information. You may use it to connect with peers.

I know Cara and I, we man a helpline for our mental health professionals that can come and call us with scenarios or questions that are risk management-related. I get questions of, "Hey, I bounced this scenario off of some folks that I'm on a listserv or a blog. This is what they said. I just want to get a risk management perspective." We know that folks are using it for that.

Community outreach. There might be community outreach reasons, especially in places where mental health resources may be more scarce. Again, with any time that we're using any of these ways to use social media, we want to just balance that between the risks and the benefits. Just like we talk about informed consent with patients, same thing when we're using technology. If you choose not to use social media, that's fine. That's a personal choice. You don't have to use it.

Just like some people choose or not to choose to use texting or emailing or ways that they may communicate with patients, it's an option that you have. It's not inherently dangerous if you choose to use it. It's not an inherent disadvantage if you don't. Again, you want to see what is your practice, what do you want to use it for, and figure out what's the best fit for you.

Again, we're going to talk about, if you are using it, some of those risk management considerations. Now, one thing you want to consider that we always recommend from a risk perspective is having policies and procedures in place. You want to make sure that you have a social media policy. Again, is your staff aware of it? You want to make sure they're following it.

We're getting into some more details about proper use of things like responding to online reviews and things like that, that you want to make sure your staff is properly trained on what your expectations are for when they should or shouldn't be using social media, whether it's your platform or your website, or whether they want to socially or personally comment about your practice on their own websites or their own social media platforms and stuff like that. Certainly, you could use it for marketing.

Just be mindful: if you're going to have a website, or you have a website, make sure that whatever you're putting on that website is not proprietary to somebody else. Just like if we write an article and we use citations, we have to cite the source that came

up with the idea or the concept or whatever of what we're citing or what we're using in the article, same is true for your website. People think, "Oh, I'll just copy and paste this picture off the internet because it looks like a nice, serene picture."

Again, make sure that it's not already copyrighted. Just because it's on the internet and the public can see it doesn't mean that it isn't copyrighted or could be a copyright infringement. I know our claims department have had copyright infringement cases. Again, you want to make sure that you're not infringing on someone else's thought leadership or their trademarked information, et cetera.

The next slide focuses a little bit more about social media and how it intersects directly with patients as related to therapy. Again, it can create better patient engagement depending on what you're using it for and how you're using it. We always want to be mindful of-- and you're going to hear Care and I probably say this multiple times in the presentation, about being mindful of confidentiality, privacy, not disclosing information that is about specific patients to someone other than the patient.

If you don't fall under the definition of a covered entity under HIPAA, all states have privacy laws. You have to follow those. Again, we want to make sure we protect patient privacy, just like protecting your own privacy with your own social media and your personal pages. Communication, again, it may be a way that you can effectively communicate with folks. Online reviews, and you see feedback and reviews, that's something that some people get very bothered by when they read their reviews.

Some people are fine with it. We're in an age where people are giving those five-star reviews or less for everything, where they eat, businesses they establish, places they visit on vacation. People do the same for their medical providers. I always tell folks, if you look at the reviews, you may get some feedback. You might be like, "I'm seeing a pattern; maybe I should change something." If it really bothers you, maybe just don't look at your reviews. We have to be careful when we respond to them so that we're not responding in a way that would violate a patient's privacy.

Just because a patient posts something about themselves or their name or whatever they have to say-- We live in a country of freedom of speech, so they can say whatever they want, but just because they say it doesn't mean that we can respond directly to it and violate, again, their privacy. We're going to talk about some examples of providers that had to pay fines and penalties because of potential violations of their confidentiality and their private information.

Then we also know there's lots of wellness and mental health apps out there. It's important. Talk to your patients, probably even more so, especially ones that are younger folks that might be more prone to wanting to use apps for everything. Ask them, "Are you using anything? What apps are you using?" Is it something that you think is safe for them to use? Is it something that's going to supplement their treatment or be harmful to themselves or treatment, or is it just a place that's just not a good app they should be using for whatever the reason, or maybe it's a better one you could steer them to?

Also, them understanding that by going and using some of these apps, some do, but most do not have. Any promise that they're protecting whatever information that

they're sharing with them. I'm wearing a smartwatch right now. I choose what I want the app to see or share with, but there's information in there about me; most of it, I don't care that they know. Again, when people are sharing personal information, are they aware that organizations may be gathering that information for various reasons, selling it to other marketing companies, using it to help continue to build their applications, et cetera?

Cara: Allison just talked about a little bit how social media. For purposes of this presentation, social media is a very broad term. Like I said, Zoom is a social media platform. Technology in and of itself, we lump into one category because there are various mechanisms that we are electronically transmitting information. Looking at it in totality makes it, I think, a lot easier when we are presenting on this broad topic.

There are challenges. There are definitely benefits. It has created so many benefits. We'd be remiss by not acknowledging the benefits that technology has afforded all of us in both personal and professional lives. It also does introduce risks. Allison did touch upon them. We'll go into detail. Boundaries, confidentiality, misinformation, cybersecurity, so that HIPAA, high-tech cybersecurity, and then the potential for reputational damage. Understanding these are really a solid step forward to assessing your risk tolerance.

Why does social media etiquette matter? Obviously, these areas. Patient privacy and confidentiality is huge. When we are communicating electronically. Email, we could say email or texting is a form of social media. You're socially connecting with people through technology. Understanding and respecting, as Allison indicated, HIPAA still is paramount when we are treating individuals. Maintaining and protecting that privacy is essential. Being aware of your state regulatory requirements for privacy.

Consent: making sure you're obtaining that consent with your patient to communicate by these forms. It's not to say that you can't communicate, but just understand the risks. When we're sending things off to the cloud, what is the cloud? Where does that information go? As Allison says, who has access to that? You may have a HIPAA-compliant email platform or portal that you're using for your practice, but what does the person, the recipient, the patient, where are they receiving this information? They may say, "Yes, I do want you to text or email me information," but your job is to really educate them on the fact that it may not be private, but obtain their consent.

Professional conduct. Does the informality of technology change our conduct, how we're handling? We say boundaries and pushing the boundaries. I put those together because when you do incorporate social media, does that open you up to more vulnerabilities? Of course it does, but it doesn't mean that it can't be managed appropriately. It's keeping within your practice standards.

If you are operating or utilizing social media from a business standpoint, again, make sure we're responding through our business account. Make sure we have a separate personal account, because individuals, your patients or potential patients, they may try to push the boundary, get you to respond to things off hours or offline. That's where your role, as Allison said, about having a policy and procedure expectations helps to mitigate the potential for exposure or vulnerabilities from a personal or professional side.

The credibility of information. Obviously, it does matter where we are finding information, what we are citing as sources. Like Allison said, when we're writing articles or we're doing research, we are often citing reputable peer-reviewed sources of information. The same should go if we are sharing any type of links or sites, whether it's an app. Be aware of them before endorsing them. Maybe you're not endorsing them, you're not pushing, it's completely voluntarily, but you, as the psychologist in your professional, you're the expert in what resources would be best for your patients. Again, push that information to them to maintain the integrity of what a patient may be utilizing social media in the practice of therapy.

Then, obviously, your reputation. Your digital footprint is a lasting impact. I'm sure we've all heard this: what you type, those keystrokes, those comments – those last forever. People take screenshots. They do have reputational harm. I think one of the cases, and it has really nothing to do with psychology...

For those of you who have been watching the news with Kelly Clarkson, who's a singer, she's well-known, she went into an art play store in Brooklyn and didn't like the experience she had. She sent this massive tweet that ended up being a firestorm for this small little community. Again, there is reputational harm that does happen when we utilize social media, and it extends beyond the four walls of our practice.

We talked about privacy, confidentiality, reputational harm, ethical dilemmas. We didn't quite touch upon that, but the ethical challenges that you're faced is, again, those boundaries. Is there a potential crossing of the professional code of ethics that you have all gone through and studied and practiced every day? Be aware of how you incorporate that into your practice. As you grow and your practice grows and technology changes and evolves, be mindful of the ethical principles of your professional organizations.

As I said, make those boundaries clear at the start with individuals, especially what you can control. You can control only so much, but be mindful of: "It's in my practice that I don't accept friend requests, whether it's on a personal platform, whether it's on even a professional page such as LinkedIn. It's just my practice that I just don't accept on my personal pages." Have distinctions between your personal and professional pages. There's nothing wrong with people liking your professional as long as it stays in that lane of professional.

Be mindful of regulatory compliance. We talked about HIPAA and privacy. It still exists. You still have to follow that and maintain that. Even if your patient, they signed or they commented something online and they acknowledge that they are working with you for therapy, we wouldn't recommend that you engage in a comment like that because, again, you then would be attesting to the fact that you recognize that there's that professional relationship, that patient-therapist relationship. Be mindful of those regulatory, privacy, confidentiality standards.

Professional conduct. You don't want to be accused or have a board complaint that you violated HIPAA or did something on social media. Be mindful of that. Obviously, legal. Allison touched upon copyright infringement. It does exist, and there have been cases about that. When in doubt, ask the question. Get a professional expert to give you guidance on what you should and shouldn't post on a website or your professional pages.

Then, it's no surprise there's unreliable information that exists out there in the social media web and cloud. Make sure you're validating information. AI is the first response and prompt. Make sure you're validating what AI is spitting out because AI is bias and there are hallucinations, as they call it, that exists. Be aware of that. Allison,

Allison: Thanks, Cara. The next few slides are just examples. You can go and research on the Department of Health and Human Services website. There's a lot of examples, or you can, for free, sign up for the HIPAA journal, and it'll send you information. They publish stuff, information, including when there are various types of fines and penalties that folks are required to pay because of either an impermissible disclosure of PHI, like you see in this first one. Here's a dentist who, in 2022, disclosed information in response to an online review.

Now, as many of you may be a small practice owner, it could be very expensive. \$23,000 is expensive to the average provider to pay a fine for improperly responding to an online review and giving information that should not have been made public, even if a patient makes it public, but by validating what they're saying, maybe as to their care and treatment, et cetera.

Another example. Manassas Health Center, you can see here, paid \$30,000. This is specifically a provider in New Jersey that provided psychiatric services. Again, an impermissible disclosure of protected health information of a patient when the entity was responding to a negative online review. Again, take a pause when you think about, "I want to respond to something, I'm upset,"

Just like we should do with emails and stuff, someone fires off an email to you; it upsets you, it angers you, whatever; we should take a pause, especially if we start firing off an answer back, hold it as a draft, wait a little while, and say, "Let me think through now when I'm a calmer head here; I've got a calmer thought process right now. Should I respond this way when I'm a little less riled up?"

Another thing to consider is if you have a practice attorney you can consult that knows the laws in your state; if you have access to a risk manager, either at a facility that you work at or through your malpractice carrier, ask these folks, ask us. The folks like us at your carrier, ask them, "Hey, I have this situation. This is what I want to do. Is that okay, or are there some pitfalls I'm not taking into consideration?" because, again, you don't want to wind up on the wrong end of a fine or a penalty.

Then the third example here: again, you see this was a long-term care facility, but again, a complaint was lodged for impermissible disclosure of a patient's name, photograph, and information pertaining to their health treatment and their medical condition. Although they were trying to use it as a success story to promote the facility, you can see here, again, it resulted in a fine of \$182,000.

Again, especially if you have staff, make sure your staff understands the significant consequences if they decide to post things. I was going to pick up my cell phone, but we all walk around with cameras in our pockets now, and people think, "Oh, this is fun. Let's take a picture." Even if we chop heads off the picture, it doesn't mean that we can still disclose that information on the internet. Again, we want to make sure folks are not posting things about patients. Period.

Cara: Allison touched upon this briefly: a polling question. I know we don't have a polling feature. If you work for a large organization or a smaller practice, do you have online review capabilities through your business? Google has a lot of Google stars. Do you have a process for managing or reviewing and monitoring these? It's just one of those things. Maybe you do, maybe you don't, maybe you're unsure. We like to talk about it because, in the age of technology and customer service, I know, again, I utilize ratings that are online for restaurants, services, many things. I'm going to look at that. This slide, and it may be difficult to look at, are customer review examples.

One of them is very comfortable. It's a five-star review. "Very comfortable and respectful interaction during our meeting." Great. The response from the organization was, "Thank you so much for taking the time to leave such a wonderful review. We're thrilled to hear that you had a great experience with us. It truly means a lot. Our team is dedicated to delivering exceptional service," and it goes on. There's a very neutral response. You're acknowledging the positive review. You're not acknowledging either way that this person really is a patient in your practice or affiliated with your practice at all, but at least you're acknowledging, because some people want to acknowledge.

Then there's the one-star review. That's the one that usually gets the calls to our helpline because we're upset it wasn't truthful. It's talking about charging. They're charging me money because I was late. Now this person has blasted on social media. Our recommendation is you certainly can respond to negative reviews, but we would ask you to take that offline and say that our practice takes information very seriously, and please contact our office for specifics, circumstances related to you. That way, you're still acknowledging it if you feel the need to, but you're not compromising the integrity of your professional reputation or the potential for privacy and HIPAA violations because they do exist.

One thing that, Allison, I can't remember if you touched upon it, though, is talking about that success story, is, can I use patient endorsements? Can I have my patients review or do a patient testimonial? If you do, it has to be optional, and they need to know. They need to know what you're using it for and obtain a consent, just like taking photographs of people. If we go to the convention at APA, there's information about photographs and being photographed. That if you're going to utilize any patient information, again, make sure you have done it appropriately and you are following your ethics and any legal and regulatory responsibilities.

Things to consider regarding online. What's the purpose of the post? Are there benefits? If we're going to be posting ourselves online, whether you have a blog, whether you have a personal website, what's the purpose of it? Understand what the benefits are. If the benefits outweigh the risks and the risks are minimal, and you've done your job and your due diligence, then by all means, you can certainly make that post

How will the message be received by that intended social media audience? Is there an opportunity for them to ask questions or get more information if they need to? When developing any type of post or website, think about how that's going to be monitored and communicated. How is confidentiality maintained? Do you have the ability to maintain and have those parameters and gatekeeping around social

media? Then self-disclosure. What's the limit for you self-disclosing, but also the person that may be commenting for self-disclosure?

Again, we need to be mindful of that, incorporated when utilizing AI. AI can give us a lot of prompts and tools, but it's only as good as the information that we're asking it. Sometimes we have to ask multiple questions to be sure that we are getting the best possible answer to help meet our needs. Ultimately, you remain responsible for any of the information that you put out there. Like Allison said, take the pause before you hit post or send that you really want to make sure that that's the content in your message.

Maintaining personal and professional pages. We always recommend never to combine the two. Some people have done that. It isn't always a good idea because individuals can find you in multiple avenues. It's best to maintain a professional page and also your personal page. Be aware of, I say security, the privacy and security of both professional and personal. You may want to consider locking down your personal pages so that people don't have open access and have access to seeing what you're doing personally because that can lead to other issues. Again, be aware of that.

Make sure the impact of your social media. That online presence, how does it impact? What are the posts that you're liking? Even if you're on a social media page such as LinkedIn or another professional space, are you liking information that could be perceived or received by an individual in a negative way? Be mindful of information you're liking or sharing if you do have those concerns.

That's why we always recommend to proceed with caution. It does take a lot of time and energy to have a really solid social media footprint, but you also need to be aware and mindful of your personal and professional action. It's just reminders that we place out there. It sounds like we're repeating ourselves, but it is important to be aware. Allison,

Allison: We're going to now segue into the risk management best practice part of this. Fortunately, many social media risks can be mitigated through just following some really good basic risk management best practices and using professional judgment. Again, like I said, when in doubt, consult with a risk management professional. Things we want to think about.

Legal and risk management considerations. We touched on some of these things, but again, privacy and security. We want to make sure that whatever we're using is private, is secure, it is protecting patients' information, protecting your own privacy, that staff, again, are educated on proper use. Staying within the standard of care. Folks sometimes ask, what exactly is the definition of standard of care? It is a legal term. Basically, what it means is that you're acting within what other professionals with similar training, similar type of professional, if they were in the same circumstances as you, would find what you were doing is acceptable.

When you have providers that say, "Oh, that is not normal. That's not the way they should be practicing," then that could be potentially falling outside the standard of care. Now, just be mindful, too, though, not everybody has to do everything exactly the same way. There's many ways to get to the same outcome you want to get to.

Again, it's just making sure that you're staying within line where other professionals would generally find what you're doing is proper.

Informed consent. If we're using anything that may interface with patients' protected health information-- I'm not talking about electronic medical record, but any of these social media things, if we're using them, if you've created your own homegrown app, again, having patient consent. We're touching a little bit on AI. If you're using AI in your practice, again, informed consent.

You may be required in the state that you're practicing in-- AI is a very evolving technology, and more and more states are passing more and more laws related to the use of it in a healthcare environment. Make sure you're familiar with that. Some states say you must disclose if you're using it for scribing or whatever. Again, make sure that you're in compliance with the state and federal laws.

Then, again, just think about whatever you're using it for- for marketing, brand, product promotion, et cetera- that you're not infringing on other people's proprietary information. Then something else you might want to consider too is when it comes to telehealth: if you're using any kind of social media through telehealth, again, making sure that you're using platforms that are HIPAA-compliant, that you're in compliance with the laws in that state, that you're licensed or practicing legally under PSYPACT.

Again, as we've already mentioned a few times, the reliability of the information that you're using. If you're using it, or what you're posting, you're not just potentially perpetuating misinformation. Again, managing that social media preference. We've talked about some of these different things. Again, following whatever employment practices, laws you have to follow, and maintaining those professional boundaries. Sometimes patients think, "What's the harm in us being friends on social media?" or maybe they're feeling more socially isolated, and they feel like you're a confidant to them, and they want to be your friend.

Again, just first having a really good policy and procedure in place as to how the practice views the use of social media, and that friend requests will be respectfully declined. It has nothing to do with what you think about the person. It's just that, again, there's a professional boundary there. You're the professional. They're your patient. It's not meant to be a friendship relationship. We shouldn't be friending patients on social media. I always say it's a good idea to not friend past patients either. Just keep your professional reputation as pristine as you can.

Then medical malpractice defenses. We want to make sure that if there is a claim that's presented, that we've covered these things right in our practice. One is, again, making sure we're maintaining proper regulation, following HIPAA and confidentiality laws. We have clear consent to do whatever it is that we're doing. We also don't want to be recording patients, unbeknownst to them. All the things that we would normally do, we want to apply anytime it intersects with social media.

We want to make sure we're not creating a provider-patient relationship. For example, if you go out onto social media-- I see it all the time- a professional out there saying, "Hi, I'm a--" whatever kind of provider. We'll say a psychologist in this case. "I have information I want to share with you." Now, there's nothing wrong with sharing general information. Not a problem.

It's always a good idea, I say, to have a little disclaimer. You saw we have a disclaimer. A lot of the professional organizations we've worked with have their own disclaimers. Just a little blurb that says, "Hey, I'm going to provide some general information. It's not meant to be professional advice. This doesn't create a doctor or provider-patient relationship," et cetera.

Just a two-second, three-second sentence thing can make all the difference of making sure that people understand that this is not a proper way to get help. You're not there on some social platform saying, "Hey, here's what you could do instead of getting proper therapy," or, "If you have these things happening in your lives or whatever, or you're feeling a certain way." Direct them to where they should be going.

Just make sure it's clear to folks that this is not a replacement for therapy. I've had people say to me, even at the Psychological Association Conference, that some patients have come up to them and say, "I'm going to use apps instead of-- I'm not going to need you anymore." Again, they should understand apps are not a replacement for humans. It doesn't have empathy. It's just meant to be a tool in their toolbox for getting help. It is not meant to replace an actual trained professional.

Again, avoid that dual relationship. Again, as I just said, make things general content, not patient-specific. We don't want to be on a social media platform saying, "Oh, I'm treating a patient," and you think by not saying their name that you're good. There are 15 or 16 different qualifiers that using some combination of those could result in a HIPAA violation. Again, not using a name doesn't take it away from it not being potential HIPAA violation. Again, making sure having proper privacy settings. Especially if you have folks filling out information on your website, that other people can't see what they're filling out. Then using really good documentation techniques. Cara's going to take us home now.

Cara: We always say that strong risk management begins with understanding applicable laws, professional standards. Written policies and procedures are huge in risk mitigation. If you have staff in your practice, educate them, as Allison said. Make sure they're aware. Informed consent is always going to be paramount to the work that you do. Making sure that there's those clear professional boundaries, they really do provide that framework for that safe online interaction and engagement.

With the incorporation of AI out there in so many different areas, just be aware of what AI is doing behind the scenes, the information that it's gathering and collecting, the approval, the process, consent, disclosures, and overall monitoring. It does require that ongoing attention. Managing, reviewing. Come up with a process to where you are surfing your own name, your practice name, information, so that you're monitoring what information could be out there on behalf of you. Cybersecurity protections are huge.

Again, how many of you have had your access or your information breached? You've received an email communication or a letter from an organization that says your data has been compromised. How do you mitigate that? Obviously, in the age of deepfakes, as they're called, and phishing attacks that you probably see, "You've just won \$1 million. Click here. Just provide your bank routing information," it is happening in the space of healthcare. We encompass all of our behavioral health,

mental health providers into that healthcare space; there is a large attack that's out there for that information.

That information, your patient demographics – Allison mentioned those identifiers – are huge and sold on the dark web for a lot of money. That is why we take the time to talk about these risks. Again, we know that none of us are IT experts and understand, but what are the steps that you can take immediately to recognize and reduce that risk? That's the ultimate goal, is to just raise your attention to these areas where there could be vulnerabilities within your practice.

As we close, in summary, we don't want to scare you away; social media is a valuable professional tool. Again, no surprise. Protecting patient privacy is one of the best risk management strategies. Also, maintaining those boundaries with it. As technology and social media platforms and AI tools continue to evolve, you just need to periodically review what's going on in your practice. Whether you have policies or a written guideline, make sure you're reviewing that; you're aware of what technology-- As you may be going to conferences and there are vendors in the exhibit hall, ask them about their technology; ask them how they use the information, how they capture and store the data.

Oftentimes, I give the example: we all have a smartphone. Most of us do. When you go to that vendor, who's your supplier for your phone, and you're seeing all that small detail in the fine print, and because we want that cellphone, because it's great and we have that access, we're signing our lives away. None of us are reading those 80, 90 pages worth of disclaimers and disclosures. Those are how you can ask questions when we are utilizing tools. How are you using the data? How is it captured? Is it encrypted? Are you reselling it? Ask those questions. Be aware of the technology vendors that you may be engaging with. That is really the key takeaway.

We've talked a lot about privacy, regulatory standards, boundaries, policies. Monitoring and risk mitigation are going to be huge. Ask the question, do the research. As Allison said, if you have a healthcare practice attorney or your practice attorney, your professional associations are a great resource for all of you to talk to your peers about what works, what doesn't work. That is really our takeaway.

We do see there's lots of questions. Before we get to the questions, I think we have one more slide: our resources that we utilized. Then, lastly, Allison and I, as indicated in the beginning, we are the risk consultants for Allied World who underwrites the policy afforded through American Professional Agency. If you have questions about insurance, certainly reach out to the American Professional Agency regarding professional liability insurance and how the insurance, the risk management team, and consultants can help you in your practice. Thank you.

Allison: I was looking at the questions. The first question, because I was the first person to start talking about professional websites, it says, "Please clarify. You equate websites with social media" or do we do that? They use their professional site. They don't interact with patients on the website. It's just strictly for professional information. If your website is just, "Here's who I am, here's what my training is, here's how you contact me, here's what I specialize in," that's fine. That's not really social media.

Some folks, though, do have professional sites where they're sharing information. Just like I said, some folks will do little videos on social media platforms providing information to the general public that may be mental health awareness-related. Same thing. Your website could be just standalone professional site. It could cross over into social media. It depends on how you're using it. I think I've answered that question.

The next question is, "Can you confirm whether using a company's smartphone app differs from using its desktop app or website in terms of privacy and use of personal data? Many of these companies pressure customers to use their mobile apps, not necessarily in their customers' best interest. Is that a fair conclusion, and what are the implications?"

I know that sometimes I go to look up something on the internet and it wants to drive me to, "You should use our app." Again, I think it depends on what it is I'm doing. I'll be honest with you, I'm not a tech guru. I don't always know if the app version is as secure or not as their website. I think if you have a concern and it's something you want to use, and it may be something interfacing with patients or something with you professionally, you might want to see if you can get that question answered by that particular app or platform.

Cara: If it's your personal device, do you have a personal and professional device that you may be downloading that app to? Again, Allison and I, we would strongly urge you to talk to those software vendors that are selling the product to you to ask about those security features.

Allison: For example, an EHR, if you're using an EHR and you're going to say you have the ability to do it on your phone and document that way, you want to confirm with them. "All the bells and whistles of security, is it also on your app versus if I log in on my desktop?"

Cara: Yes. Think about the same thing with password protection, dual authentication. What are the encryption? What are the security measures? Again, those bad actors, as they're called under HIPAA, they're going to find a way. They're the ones that are educating themselves to trick all of us. Your role is to mitigate to the best of your abilities.

Make sure you're asking the question, and you're aware of the potential risk. Then you make an informed decision. What's best for your practice and your business ultimately? The goal of this presentation is to really just spark the curiosity to be able to ask the questions to these vendors. Make them accountable. Make them explain what they're doing, what privacy protections that they have in place. Where are they storing the data? What are they using it for?

Another question, let me just go down, is we had someone said that I'm going to use this information to educate my students in ethics class. Of course, we love to share risk management best practices. Certainly, it's good information. The more people you can get to students, especially as they are starting out and that generation of students, if they're younger students, technology is all they know. Paper days probably don't exist, and so that technology is really in the forefront. Absolutely, be mindful and aware.

Allison: Can I just say something?

Cara: Yes.

Allison: Sharing the concepts is one thing. Unfortunately, we just can't let you share our specific slides.

Cara: Oh, slides.

Allison: That's all. We want you to take the information, take your notes or whatever, and certainly share that.

Cara: Thanks, Allison, for clarifying that. We were talking, and there was a question about what do you mean by commenting offline? Commenting offline really was just if you had to respond to a review, that you would say to the respondent that instead of engaging in that that's not what happened; what happened was is you didn't pay your bill, and then I ultimately decided to discharge you from the practice, we would just say that we take all complaints seriously. Please contact our office to discuss your matter in private or confidentially. That's what offline means, is direct that person to contact you versus engaging in an online back-and-forth, especially if it is a negative review.

Even though that person might have commented and put it out there that they have a therapeutic relationship with you, by you confirming it, you could be on the hook. They could still file a complaint that you violated HIPAA. That's what we just say: redirect them to contact your office to discuss the matter in detail.

Allison: "I believe in the psychology code of ethics; you can't get specific endorsements from patients." Again, you have to follow your code of ethics, and you also have to follow your state laws. Again, if patients want to freely do it on their own, that's fine, but again, yes, also be familiar with those code of ethics. You don't want to violate those. If the APA says you can't solicit reviews, then don't solicit reviews.

Cara: There was one question about professional liability. Professional liability is another term for medical malpractice. It's a term that's used interchangeable, if that was the question. Then the other one was, "What factors do you look in with cyber liability insurance?" That's something that, again, if you have a question specific to cyber liability, they have to know what your risk is. Are you using an electronic health record? You want to make sure that there's coverage for you in the event there was a HIPAA or a privacy breach.

As Allison shared in the slides, there are fines and penalties that are associated with the potential for breach. The question would be, "What's covered under my policy? Is it covering email if my email gets hacked, or if I send an email to the wrong person and it goes out to an unknown distribution list?" You just want to know what the policy covered. If you do have questions, contact American Professional Agency. They certainly can give you guidance on what's covered. I believe on the website, too, there is information about cyber liability and what the policy covers.

Allison: We'd like to thank everybody. We see we're just about out of time. We want to give APA an opportunity to wrap up. We really appreciate you attending. If

anybody has questions related directly to this presentation, you can reach out to us, and we'd be happy to talk to you. Thank you.

Moderator: Thank you so much for joining us, Allison and Cara. Thank you to all our listeners for your participation. We'd also like to thank American Professional Agency for making this webinar possible. A recording of this presentation will be emailed to everyone in two weeks' time. The recording will include the presentation slides. As soon as the webinar has ended, a short survey will appear on your screen. Please take the survey and give us your feedback. We thank you for your attention and hope you have a great day.