

RNs' Right to Privacy

Nurses don't want personal information to appear on Alaska licensing Web site.

Historically, Alaskans have valued their privacy—so much so that their right to it is plainly spelled out in their state constitution. That's why this "Last Frontier" state seems an unlikely setting for a battle between RNs' right to privacy and the public's right to know.

In mid-April, an RN filed a lawsuit against the Alaska Division of Occupational Licensing in the Alaska Superior Court to prevent her residential address from being made available to the public through the state's Web site and other professional licensing records. Her lawsuit was filed on behalf of all RNs in the state with the assistance of the Alaska branch of the American Civil Liberties Union (ACLU) and a private law firm.

The Alaska Nurses Association (AaNA) has publicized the lawsuit in its newspaper, encouraging nurse members and their colleagues to join the suit as plaintiffs. There is no cost to nurses, and no money would be awarded to those who sign on.

In May, the AaNA board of directors adopted a policy citing the association's opposition to nurses' personal information being available to the public on the state's Web site, noting that "it does not benefit public safety and it creates a potentially dangerous situation for the nurses personally."

"We commonly receive complaints from nurses who are unhappy about having their addresses made public, especially among those who work in settings where they feel particularly vulnerable," said AaNA President

Rebecca Bolling, BS, RN. "The Division of Occupational Licensing believes that people can get that information anywhere, but I don't think it should be made so readily available."

As part of the effort, AaNA also is asking nurses to provide statements, which can be made anonymously, to the ACLU voicing their concerns.

And the ANA has been working with its constituent member associations on privacy and confidentiality issues as they arise, involving both patients' health care records and nurses' workplace information.

"The Alaska licensing division has to do a better job of balancing the public interest in obtaining information about the registered nurses who deliver care and the nurses' right to be free of unwarranted intrusions into their personal lives," said Alice Bodley, JD, general counsel for the ANA. "There is no justification for publishing home addresses of licensees."

WHAT'S AT STAKE

When the state of Alaska started making available on its Web site the home addresses of RNs and other licensed persons, such as architects, accountants, and hair stylists, Maryjane Hinman, RN, took action. Beginning in 2000, she wrote the board several times asking that the practice be halted. She then sought assistance from the ACLU and AaNA.

The Web site, a CD-ROM, and other licensing records, allow public access to information, including nurses' license numbers, the status of their licenses, and the sticking point—their home addresses. Nurses

can use a post office box or their employer's address in lieu of providing their home address, but Hinman's employer reportedly would not allow her to receive mail at work.

"We gave the state ample opportunity to address this issue, but the thrust of the state officials' argument was that licensing information is a matter of public record. And the state fully supports the public's access to that information," said Jason Brandeis, an attorney for the ACLU in Alaska.

"Unfortunately, sensitive, personal information is within that record. The role of the Division of Occupational Licensing is to make sure nurses are qualified to provide services to the public. The public should know if their health care providers are qualified or have had disciplinary actions against them. We're glad the state takes its responsibility seriously.

"But the public doesn't need to know nurses' home addresses."

For Brandeis and many nurses, it's a matter of both privacy and safety.

Nurses work in a variety of settings, and some, such as those employed in correctional and mental health facilities and in EDs, have expressed concerns about patients knowing where they live.

There also are nurses who have been victims of domestic violence and stalking who have gone to painstaking efforts to protect their contact information, according to Brandeis.

He noted that Congress passed the federal Driver's Privacy Protection Act in 1994 to restrict public access to personal information gathered in the process of licensing drivers.

The law was enacted after a series of abuses, including the 1989 murder of actress Rebecca Shaeffer by a stalker who obtained her address through California Department of Motor Vehicles records. And Alaska recently passed a measure that excludes from public disclosure certain information that's required on an application for an annual state program.

Identity theft also is a concern.

"Any time someone can get identifying numbers, like an RN license number and an address, it makes it easier to steal an identity," Brandeis said.

Gloria Craven, RN, who worked with Massachusetts nurses on this issue in 1998, believes that nurses there were "ahead of the curve" in figuring out the potential risks of putting certain licensee information on government Web

sites. Nurses successfully stopped the nursing board from including their home addresses in public licensing information.

However, people can access the town where a nurse lives, along with other information, such as his or her license status.

"We believed that public access to nurses' home addresses did not enhance consumer protection at all, and instead put nurses at potential risk for violence," said Craven, a lobbying consultant with the Massachusetts Association of Registered Nurses (MARN). "And we know that all uses of the Internet are open to fraud and other abuses. So there is no reason that nurses should be at risk because they are licensed."

MARN director of association management Cammie Townsend, MS, MBA, RN, however, acknowledged that

ensuring patient protections and nurses' right to privacy is a balancing act.

"Patients have a right to know if their nurses are licensed and if they have any disciplinary actions against them," Townsend said. "The Web site gives the public and employers up-to-date information on licensure status."

On the other hand, she said the risk of potential violence and identity theft are real concerns for nurses, and something that must be guarded against.

"Access to the home address—even just the city or town—may increase those risks," said Townsend.

The Massachusetts Medical Society also recently weighed in on this issue. The group provided testimony supporting a current state Senate measure that would protect the home

addresses of physicians from the public record.

Sandra Talley, president of the American Psychiatric Nurses Association (APNA), said, “I don’t think where nurses live needs to be known in a public record. Where they practice might make more sense.” (APNA has no formal position statement on this issue.)

Talley said that while she agrees that nurses’ safety can be an issue nowadays, she also worries that some nurses take it too far—such as taping over their last name on ID badges.

“We’re currently experiencing a shortage of psychiatric nurses because people think the role is dangerous,” Talley said. “I think we need to be careful about portraying our patients as being likely to abuse us or that they don’t respect personal boundaries.”

Added Colleen Carney Love, DNSc, RN, FAAN, “Every citizen’s privacy is being compromised with such widespread Web access to personal information. Listing all nurses’ addresses in a state Web site leaves them open not only to risks from anti-social, needy, and delusional patients, but the list can be used for junk mail and other forms of unwelcome solicitation.”

She said staff at her maximum-security, state forensic psychiatric hospital have voiced concerns about their safety because of a number of Web sites that contain a great deal of personal information, including maps with directions to their homes.

“What we psych nurses need to do is work toward forming better alliances with local police, getting access to criminal back-

ground information on our patients, developing better risk assessments, and strengthening protection programs for those who’ve been victims of stalking, terrorist threats, and domestic violence,” said Love, an ANA\California member and chair of APNA’s Forensic Nursing Council, which addresses workplace violence for psychiatric and forensic nurses.

Although safety and privacy are related when it comes to this issue, ensuring one’s right to privacy is also a stand-alone right worth protecting.

“Privacy is an esoteric concept,” Brandeis said. “You might not care about it—unless it’s invaded.”

If the suit is successful, the residential addresses of all licensed professionals in Alaska will, once again, be private. ▼