

Relevance of social media to nurses and healthcare: 'to tweet or not to tweet'

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EBN Opinion

Title: The relevance of social media to nurses and healthcare: ‘to tweet or not to tweet’

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This month’s opinion will draw on an Evidence-Based Nursing (EBN) twitter chat hosted by Kirsten Huby and Joanna Smith that focussed on ‘to tweet or not to tweet’ in the context of social media and healthcare. Read the associated blog at <http://blogs.bmj.com/ebn/2016/06/12/to-tweet-or-not-to-tweet-2/> and the Storify of the discussion, which can be found at <https://storify.com/josmith175/to-tweet-or-not-to-tweet>.

Background

Online social media tools and platforms such as Facebook, MySpace, Tumblr, Blogger and Twitter are increasingly being used by nurses and health professionals for professional development, to share health information to global communities and as a way of providing personalised care to individual patients.¹ Twitter is probably the most recognised of the online microblogging platforms, launched in 2006 (<https://about.twitter.com/company/press/milestones>) now has approximately 310 million monthly active users (<https://about.twitter.com/company>). Over the last 10 years Twitter has been used in many different ways by individuals, professional bodies and organisations, and there is a developing evidence base supporting the use of Twitter professionally.^{2,3} The potential value and opportunities for using social media tools and platforms in healthcare has resulted in guidelines and policies on how to use social media professionally beginning to emerge.^{3,4} Although for many nurses the use of social media is part of everyday life, with individuals choosing how to engage with online tools and platforms, and use and share information, there can be challenges to ensure personal and professional boundaries are not blurred. For others the value and connectivity of the social world lacks relevance and therefore many health professionals remain sceptical about the usefulness of

social media within health and educational settings. In order to ensure the use of social media tools and platforms add benefit to both patients and professionals, consideration must be given to the benefits and risks associated with social media. Our Twitter chat was certainly engaging with nearly 400 tweets, and over 60 participants.

Key messages from the Twitter Chat (#ebnjc)

Value of Twitter as a means of communication

There was consensus that Twitter was a valuable way of communicating and connecting with others (Figure 1). An attraction of Twitter was that information, thoughts and ideas could be shared concisely within 140 characters, which enables followers to gain an overview of nursing and healthcare issues and information quickly, with the option to request further information or access the links shared. While some Twitter chat participants struggled to share ideas within 140 characters for others this brevity meant they thought carefully about what they wanted to share. It was evident that exposure to brief summaries of information meant Twitter users had access to content that they may not have found using more traditional search methods, enabling information and resources to be shared more widely. The ability to access information and bookmark links from a range of online platforms was identified as an advantage to using social media. In general participants of the Twitter chat valued the information and resources shared, perceiving that the majority of health professionals using Twitter and other social media platforms were supportive and generous when sharing resources.

Figure 1: Extracts about the value of Twitter as a means of communication

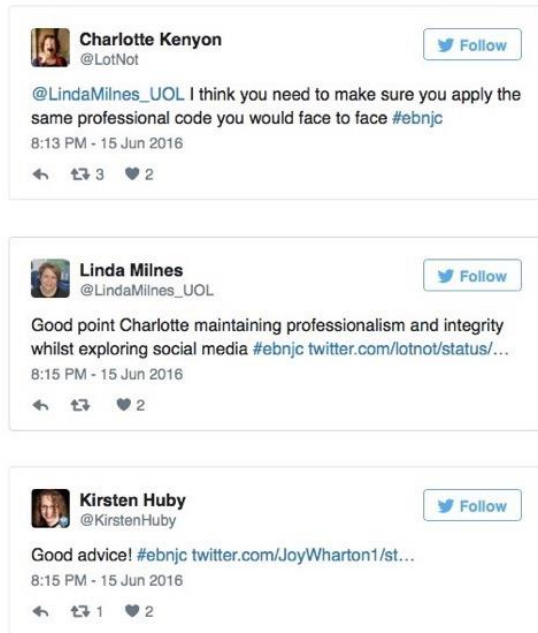
<https://storify.com/josmith175/to-tweet-or-not-to-tweet>



Professional boundaries

The need to ensure professional behaviour and standards were upheld, was highlighted by participants during the chat (Figure 2). Participants were clear that maintaining professional standards was essential in both real and virtual worlds. Although the potential for blurring professional boundaries was considered, participants likening Twitter to having a conversation in a room full of people; consideration should always be given to professional identities and maintaining codes of conduct. This analogy helped participants contextualise the risks and benefits of using social media for professional exchanges and was used when discussing the use of social media with students and colleagues. Concerns were raised during the chat about being linked to online content or chats that were contentious or that did not represent their personal views or beliefs. Strategies were shared including considering whether the views being presented reflected your own, and if not refraining from commenting or retweeting, and if uncertain checking unfamiliar links prior to retweeting. Engaging with patients via online tools and platforms was considered as potentially problematic, particularly if the purpose of the interaction was unclear or ground rules were not established. For example developing a shared understanding of the specific issues that could be addressed through online interactions, the format of the interactions and establishing a timeframe for responses. Good role modelling, and taking personal responsibility for online exchanges were highlighted as central to ensuring high standards of online communications and upholding professional standards.

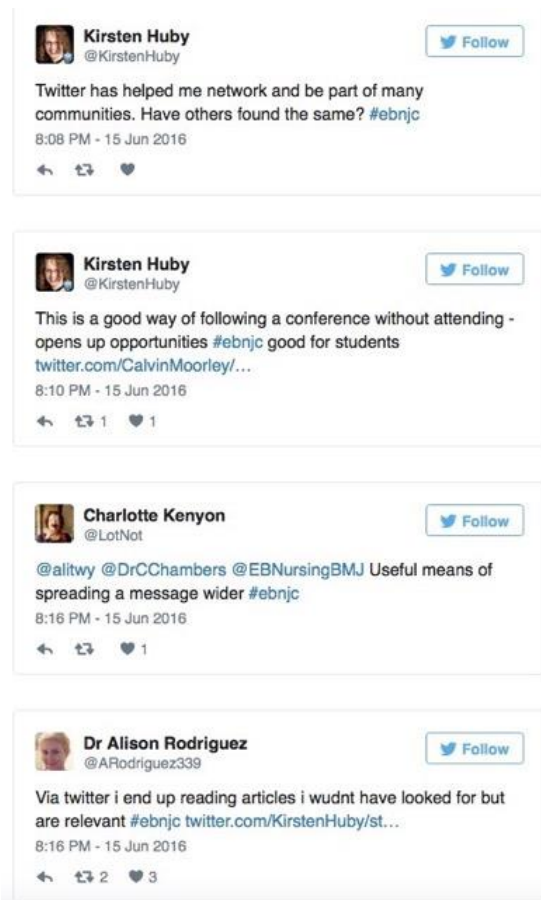
Figure 2: Twitter extracts about maintain professional boundaries <https://storify.com/josmith175/to-tweet-or-not-to-tweet>



Networking Opportunities

Networking was highlighted as a key attraction of Twitter (Figure 3). Networking occurred purposefully through searching specific areas of interest, research or practice communities but also informally as connections are made during Twitter chats or discussion threads. The ability to connect virtually opens endless possibilities to connect; this global connectivity is more restricted in non-virtual ('physical' or 'natural') environments. Virtual communities are likely to be more diverse than non-virtual communities enabling researchers, research participants, health professionals and students to connect and share information from a range of perspectives and give a voice to people who may not usually be heard. There was recognition that this diversity brings an additional responsibility for professional and respectful communication. Participants of the Twitter chat were keen to support colleagues to engage with social media and outlined strategies to help those who may be anxious about using the different online platforms available. Participants either signposted colleagues to available resources or took a more direct approach with practical demonstrations of using online platforms. There was acknowledgement that online communication and networking is not for everyone and there is a need to listen and value to people's concerns and viewpoints.

Figure 3: Twitter extracts about networking opportunities <https://storify.com/josmith175/to-tweet-or-not-to-tweet>



Conclusion

The benefits of using Twitter in healthcare highlighted in our chat are reflected in the literature. These include increased engagement with students, colleagues and patients,^{5,6,7} developing networks and communities,⁵ enabling the ‘real-time’ sharing of information and discussion during conferences,^{2,8} and making research data, findings and publications available and accessible to the public.^{2,8} As with all social media platforms there are concerns and these were also discussed. There is recognition that Twitter enables us to have conversations with no restrictions on who can engage which may lead to a blurring of personal and professional personas and there is the potential to feel overloaded by the volume of information available.⁹ Whilst the Twitter chat included people who described themselves as new to Twitter as well as individuals who were confident in using social media the views expressed did not include those who are sceptical, anxious or ambivalent to communicating online. In the United Kingdom, National Health Service employers guide is clear that being coerced to engage in social media activities is the only reason not to engage.¹⁰ Ultimately social media tools and platforms are becoming embedded into society and offer opportunities to

broaden horizons, learn and connect with patients, students, colleagues, and develop potential research collaborations, and in the context of our Twitter chat have fun with like minded people.

References

- ¹Ventola, CL. Social Media and Health Care Professionals: Benefits, Risks, and Best Practices. *Pharmacy and Therapeutics* 2014; 39: 491-520.
- ²Ferguson C, Inglis SC, Newton PJ, et al. Social media: A tool to spread information: A case study analysis of Twitter conversation at the Cardiac Society of Australia & New Zealand 61st Annual Scientific Meeting 2013. *Collegian* 2014; 21: 89-93.
- ³Royal College of General Practitioners. *Social Media Highway Code*. 2013; Royal College of General Practitioners: London.
- ⁴Nursing and Midwifery Council. *Guidance on using social media responsibly*. 2015; Nursing and Midwifery Council, London.
- ⁵Moorley CR, Chinn T. *Nursing and Twitter: Creating an online community using hashtags*. *Collegian*. 2014; 21: 103-109.
- ⁶Ferguson C. *Editorial. It's time for the nursing profession to leverage social media*. *Journal of Advanced Nursing*. 2013; 69: 745-747.
- ⁷Sinclair W, McLoughlin M, Warne T. To Twitter to Woo: harnessing the power of social media (SoME) in nurse education to enhance the students's experience. *Nurse Education in Practice*. 2015: 507-511.
- ⁸Lupton D. *Feeling Better Connected: Academics' Use of Social Media*. 2014; University of Canberra: Canberra.
- ⁹Eggers RM, McGonigle D. *Are nurses challenging social media? Online Journal of nursing Informatics* 2012; 16.
- ¹⁰National Health Service Employers. *A Social Media Toolkit for the NHS*. 2014; NHS Confederation Publications: London.