CoRIPS study 117: Mammographers’ on-line communication with service-users: changing attitudes, developing capability and improving practice

Interim Report

The principle aim of this study was to enable mammographers to communicate on-line with clients in order to offer them support and promote breast screening. To do this we intended to:

Primary Research question
Determine what actions are required to enable mammographers to communicate on-line with clients

Secondary Research questions
Explore the potential barriers to, and enablers for, radiographers to use on-line approaches to engage with the public

The methodological approach chosen was action research which enables participants to arrive at solutions which overcome barriers that exist within their own local context of practice.

Method
85 participants were recruited to one of four workshops held in London, Manchester, Nottingham and Leeds between Dec 2015 and March 2016.

Participants came from a wide geographical spread representing 50 different breast screening units. They also comprised a range of roles including: administrators, assistant practitioners, practitioners, unit managers, BSP QA leads, educationalist and the National Programme Manager for Breast Screening.

A nominal group technique (NGT) was used to elicit views on a ‘group’ basis, which exploits the advantage of constructing ideas in teams. These groups were asked to identify barriers to using SoMe as a professional communication tool. There were 19, 23, 20 and 30 barriers listed at each of the four workshops. These barriers were then ranked by participants acting as individuals; this negates the problems that can arise through ‘group think’, enabling each individual to voice their beliefs. The top four barriers, by rank, were then reflected back to the group for identification of potential solutions.

The project team amalgamated all four workshop barriers and solutions to arrive at a final list of ranked barriers and solutions.

Initial Findings
The barriers appear to fall into one of two broad categories: (i) Working within boundaries and (ii) Support from the Trusts.

The top four ranked barriers were:
• Making sure information is correctly presented and factually correct
• Accountability and responsibility of individuals posting on the site, and legal and professional implications
• Support from Trusts and discrepancies between the social media policies of different Trusts
• When would we do it? Would there be time to do it in work?

Solutions to these problems were identified by the practitioners as:
• Finding out what the professional and statutory body guidelines say about using SoMe in this way
• Undertaking on-line communications skills training (the use of platforms and tools but also the nuances of how to make the message clear in virtual communication, such that they are not misunderstood)
• Finding out what individual Trust-specific communication policies permit
• Working with those responsible for Trust communication policies where the policies are prohibitive
• Working with managers and other members of the team to disseminate how SoMe can enhance the service

Initial Observations
• Some of these solutions will be easier to implement than others, e.g. the College of Radiographers has clear SoMe guidelines which are easily accessed, and there are also many ‘how-to’ training packages. Others, depending on local context, are more difficult as they require changing culture and attitudes:
  o Practices varied greatly across the breast screening unit in terms of how SoMe was viewed with some embracing this fully and others avoiding it completely. Avoidance appeared to be due to anxieties on behalf of the practitioner but more generally because it was perceived that managers and employers would not be supportive.
  o There is a need to explore the influence of SoMe on the traditional time boundaries of the working day: some could see how blurring these boundaries reflects the new era of communication whereas others felt this to be invasive, constraining their ability to see how SoMe could be used in a creative way to support the service and service-user experience. These people felt there needed to be a dedicated person rotated for doing this work during the day which raised concerns from others in terms of staff resource.
  o A spin-off project was undertaken by several of the project team which involved auditing North West Trust communication policies to determine whether these were discouraging, encouraging or enabling. This confirmed the participants’ concerns that there was variation in support and some policies were prohibitive.
• The workshop format was very successful in generating discussion and raising awareness of SoMe use in health care. All attendees thoroughly enjoyed the events and the opportunity to talk about SoMe and learn how to use some of the platforms. We have been asked to run further events for those who could not attend.

Work outstanding
The team is currently working on

• Helping practitioners implement solutions
• Analysing the data further to produce the final report and recommendations
• Preparing for Symposium Mammographicum where 2 project papers have been selected for the poster tour on Social Media
• Writing an article for the peer-reviewed Radiography journal

Additional Outcomes
• 26 practitioners have joined the practitioner forum of the WoMMeN hub
• Several practitioners at each workshop requested help with opening Twitter accounts so that they could engage in professional conversations about mammography, mainly through the @wemammographers group (created and curated by a number of the project team)
• Two practitioners requested materials to disseminate and run the workshop within their own departments. They both reported success in their aims to achieve a better understanding across their teams. Other practitioners have emailed for advice about setting up their SoMe patient websites.
• Two Welsh breast screening units have contacted us to run workshops with their staff (for financial reasons, initially the bid confined workshops to English breast screening and training centres). A staff development workshop on SoMe has therefore been scheduled for the 8th of July in Llandudno and some funding is available from the project budget to cover this.
• The Patient Opinions team have asked us to help them deliver a development workshop in July (Birmingham) where they will be exploring how staff across a range of health disciplines can best engage with and respond to on-line patient comments.
• We have been working with the North West AHP network to explore how the problem of unsupportive Trust Communication policies might be addressed to encourage the use of SoMe for professional purposes.

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