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## Networking in Health and Social Care: The Implementation of On-line Forums for Peer Support

### Student Dissertation

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## MON: Networking in Health and Social Care: The Implementation of On-line Forums for Peer Support (Susan Hobbs)

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Internet forums are a useful method of implementing interaction and of group learning. However, forums within health and social care are currently underutilised for this purpose. Health and social care professionals readily use social media for personal and leisure purposes so this leads to the question:

'Why are internet forums not used more widely for peer support within health and social care?'

Some health and social care organisations now use forums within their websites as a method of widening participation but also implementing Web 2.0 technology to encourage sharing of information, best practice and to seek advice. Examples of these include 'Talking Point' from the Alzheimer's Society which is open to all participants (Alzheimer's Society, 2013), and 'Care Space' from Community Care (Community Care, 2013) for social workers.

Individual health and social care professionals are already encouraged to reflect on their practice and use their own experiences to improve their future performance, as part of their practical training and ongoing professional development. However, reflection and discussion are often permitted only within a close group of work colleagues from the same organisation, and this type of reflection can be termed as intra-reflection. Intra-reflection can be limited in its usefulness, as this restricted group of workers may all have had similar experiences. Therefore, to encourage inter-reflection, or the sharing of experiences in a meaningful way with practitioners from other organisations, the wider use of on-line forums could be implemented. This lack of inter-reflection may, in fact, limit practitioners' opportunities to widen their knowledge or share in the best practice from other but similar organisations. It may also prevent identification of serious failures in care provision.

Implementing the use of online forums appears to be an accessible method of allowing the sharing of ideas and for peer support, but initially it was unclear why it has not been successfully implemented within health and social care. Further investigation revealed a fundamental reason why this might be the case. The concept of confidentiality.

As part of the research for this paper a small-scale survey of health and social care professionals was conducted. This revealed that the majority of respondents viewed any use of social media to discuss work-related issues as a breach of confidentiality. Despite confidentiality being a major concern by employers and regulators, anonymising reflective accounts of practice is permissible within written coursework, so this should not be seen as a barrier to forum use. More importantly professionalism, when using forums, should be of greater concern, as even with codes of conduct, individual offensive or negative posts could bring the profession into disrepute as seen through the eyes of service users.

The assumption that the use of forums somehow breaches confidentiality appears unfounded. If the use of written reflective accounts in care worker education is valid, then similar posts on

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2 February 2014

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specific internet forums for health and social care professionals should be equally accepted. The question remains, can the use of internet forums be made to work?

## Reference List

Alzheimer's Society, 2013. Talking Point. [Online]

Available at: <http://forum.alzheimers.org.uk/showthread.php?36481-Poorly-paid-care-workers>

[Accessed 3 December 2013].

Community Care, 2013. Care Space. [Online]

Available at: <http://www.communitycare.co.uk/carespace/forums/default.aspx>

[Accessed 3 December 2013].

## Extra content

[Prezi](#) Presentation Poster



[Susan Hobbs](#)

13:56 on 2 February 2014

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[Jonathan Vernon](#)

11:01pm 11 February 2014 [Permalink](#)

In a previous module I developed a project on adherence to drugs for asthmatics and got into discussions with in turn the practice nurse, my GP and a specialist. I don't doubt their interest but in particular they would read the paper and report back. Time is precious and reading is effecient. Social forums are sloppy and there is certainly the confidentiality issue. Are lawyers similar, or even more so? Time is money and reading a well written report is faster.



[Deborah Meakin](#)

6:31pm 16 February 2014 [Permalink](#)

Hi, I believe there have been some unfortunate press releases in relation to nursing and the inappropriate use of social networking which might result in a tentative approach to the use of forums. Are there some guidelines for the use of networks which have been produced and which can also be used for forums? Thanks, Debbie.



[Susan Hobbs](#)

8:22am 18 February 2014 [Permalink](#)

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Debbie,

Most forums I have come across have their own code of conduct. Registered professionals such as nurses, midwives and physiotherapists also have their own code of conduct as part of their registration process and sanctions can be applied if this is breached. Health and social care workers are unregistered so it often comes down to the employer to take action.



[Dr Simon Ball](#)

9:02pm 18 February 2014 [Permalink](#)

Following the live presentations, we asked each speaker to respond to questions posed by audience members. In the short time available, it was not possible to put all of the questions submitted to the speaker for a response. We asked all speakers if they would respond to the unanswered questions here on Cloudworks. Here are all of the questions asked during the session:

- ▶ when i worked with the physiotherapists they were very wary of web 2.0 because of fears of not being "appropriate" theres a an issue here around professionalism i think
- ▶ Confidentiality concerns about online forums are found in other professions as well
- ▶ I work with allied health professionals to develop their web personas its a nightmare and i do it as a hobby - i've got empirical data to show it improves professional practice
- ▶ There are other self-help websites/forums that can be accessed, less about practice and more about information. Might moderated aspects of these be of use indirectly?
- ▶ lots of interesting issues here - getting organizations to feel safe about opening up what is appropriate - and what is not
- ▶ like commercial confidentiality , as well as security, privacy, 'protectionism
- ▶ I think web forums are brilliant for self-management and i think it would be great if health and social care professionals engaged
- ▶ Do current employment contracts prevent openness
- ▶ fear of whistle-blowers
- ▶ Many new contracts are very restrictive since the enquiry
- ▶ I had a restrictive clause put in place when i left a job in the health sector
- ▶ or maybe fear of being sued...



[Susan Hobbs](#)

6:53pm 19 February 2014 (Edited 6:59pm 19 February 2014) [Permalink](#)

Thank you for all of your comments and questions.

I'm not sure who posted which ones, so I have just answered them all here and grouped some similar ones together.

I hope these answers help. I must stress, though, much of this is based on my own experience and that of others may differ. Nevertheless, a good debate.

- ▶ when i worked with the physiotherapists they were very wary of web 2.0 because

**of fears of not being "appropriate" theres a an issue here around professionalism i think**

I agree, this is probably the case. Registered professionals such as nurses, midwives and physiotherapists also have their own code of conduct as part of their registration process and most have a clause about upholding public trust in the profession and not bringing the profession into disrepute. I think there is more trust of restricted forums than open ones.

Health and social care workers are unregistered and do not have a mandatory code of conduct. I wonder if there was a register for them and they felt their occupation was a recognised profession, they would be more inclined to trust restricted forums.

▶ **Confidentiality concerns about online forums are found in other professions as well**

Yes, and I can understand this in regard to open forums, but if a forum was restricted to a certain group, maybe these concerns would lessen. Also I think a professional should be able to anonymise examples sufficiently for them to be beneficial to others without endangering confidentiality.

▶ **I work with allied health professionals to develop their web personas its a nightmare and i do it as a hobby - i've got empirical data to show it improves professional practice**

Your data sounds very interesting. I wonder if the lack of engagement with the web is that some do not see it as a valuable work-related activity. It may also be that health and allied professionals see themselves as 'people' people and prefer that face to face interaction.

▶ **There are other self-help websites/forums that can be accessed, less about practice and more about information. Might moderated aspects of these be of use indirectly?**

Moderation is probably the key. The forums I looked at were often used by members of the public, users of services or those with a particular medical condition wanting advice and information. They did not seem to be used by professionals to share examples of good practice. I also think is those posting to forums has to use their real identity it might reduce the need for moderation, as there would be no hiding behind an on-line identity.

▶ **lots of interesting issues here - getting organizations to feel safe about opening up**

▶ **what is appropriate - and what is not**

▶ **like commercial confidentiality , as well as security, privacy, 'protectionism**

Health and social care in the private sector is quite a competitive business and some organisations may not want to share. This is evident when I try to get organisations to work

together and share training resources etc. Health and social care workers are usually OK about sharing in a face to face environment, but employers are often more guarded.

But my idea for forum use is only about sharing examples of good practice and self-help, it's not intended to expose commercially sensitive information, so this is the message that needs to be put across to employers so that they actually see this as a benefit and a profile-raiser.

▶ **I think web forums are brilliant for self-management and i think it would be great if health and social care professionals engaged**

Yes, so do I.

▶ **Do current employment contracts prevent openness**

▶ **fear of whistle-blowers**

▶ **Many new contracts are very restrictive since the enquiry**

▶ **I had a restrictive clause put in place when i left a job in the health sector**

▶ **or maybe fear of being sued...**

In my experience there will be a confidentiality clause, one on the use of social media, internet use, disclosing commercially sensitive information, bringing the organisation into disrepute .....

As for whistle-blowing, I think the Public Interest Disclosure Act 1998 covers this.

<http://www.legislation.gov.uk/ukpga/1998/23/contents>

Also the Government guidance document 'No Secrets' states there must be protection for whistle-blowers

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/194272/No\\_secrets\\_guidance\\_on\\_developing\\_and\\_implementing\\_multi-agency\\_policies\\_and\\_procedures\\_to\\_protect\\_vulnerable\\_adults\\_from\\_abuse.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/194272/No_secrets_guidance_on_developing_and_implementing_multi-agency_policies_and_procedures_to_protect_vulnerable_adults_from_abuse.pdf)

I also believe restrictive clauses may sometimes be put in place to prevent customers being taken with them to a new organisation when an employee leaves.



[Jonathan Vernon](#)

5:49am 20 February 2014 (Edited 8:02am 20 February 2014) [Permalink](#)

**This has made me think - or to qualify that, to question what I have learnt about sharing our thoughts online and how our reasons and needs to do so have been hijacked by the platforms.**

I can trace back the blogs and forums of today to the years during which they were developed and took shape. I've been prompted to do this by the Guardian Online where twenty years of

blogging is being marked by getting those of us who were 'at it' ten or more years ago to offer up content from that period - or links. I first posted on 24th September 1999 and barely missed a day for three years - this was a daily diary online, which is how they began. Many of us were people who kept or had kept a diary anyway. In these early days no audience was implied, we were writing about our own lives. This changed as we became aware of readers through views and comments. What I wrote about changed radically in order to 'feed' this audience. I called it being a 'BJ'. It was no longer a place to reflect, certainly not a diary and not somewhere to share intimacies. The onus should be on expressing your thoughts as text in a digital format with the default PRIVATE and SECURE. In due course a person may take first thoughts, and rewritten share these to a group. The problem with most platforms, including internal ones, is this bulletin board, noticeboard, instant exposure through publication expectation.

**Without any platforms you did your own HTML coding or partnered with someone online who was eager have content to frame.**

This experimental free for all like, to use an apt metaphor, was like watching clouds form in a clear sky. All manner of things began to take shape. Naming came later - and it was this, and the affordances of certain platforms that resulted in a thing becoming known as, often because it was compared to, a 'log', forum, 'diary ring', list, quiz ...

**My issue is that some of the benefits and wonders of these freer flowing and largely secretive spaces - have been lost.**

No one knew or each other in the real world which provided a kind of sheltered anonymity. What has been lost is that this was more like kids going into the woods and building stuff with whatever came to hand ... only later did such shelters, obstacle courses and sculpture, as it were, take the form of houses, apps and galleries of art.

**With naivety came a natural inclination to share and assist - perhaps a characteristic of 'early adopters'.**

Let me try to express this another way - what happens if you hire a hall and send 80 strangers into it. No furniture. Nowhere to hang coats. And to keep everyone off their gadgets that allow them to communicate away from this space, no signal or electricity either. People will talk to each other. Groups will form. Leaders emerge. Now send this group into a space divided into a variety of cubicles, with stalls p, food, drink, things to purchase, some guardians as it were - it has built into it a thousand comfort zones, interest spots, escape hatches and ways to continue to be everything that you are. There is no need to change your behaviour, to drop your guard, to risk sharing a thing.

**Has the Web lost the qualities of the empty room? The blank sheet of paper?**

I should look at the closed pages of my blog from 2000/2001 as I was working with the DoH on the creation of ways to share online. The inertia of how things were done offline drove me to wonder if the expectation was that we could sprinkle digital pixie dust on what already existed in the corridors and meeting rooms and it would work. On reflection I might have tried to have people imagine we were putting meeting rooms in space - so forget gravity for a start. The answer, not feasible then or even imagined, is the direct one to one link via a smart device. The answer is to take it all down, impossible to go back to those early, inventive days, but at least give people what Chris Pegler has called Lego Technics Bricks .... so that they can create and manage their own spaces, i.e. returning to this DIY approach. I would give people a crash course in using Wordpress and encourage therefore a more organic formation of groups.

'Way back when' we were content when three likeminds do form a microhub where they feel comfortable and can share, interact and do great things - and where other groups, different in

nuanced ways, can form. And acknowledge that for some such hubs will be akin to entering a sauna full of strangers where you are expected to be naked.

### **Has too much emphasis been put on trying to get the majority to engage in something done by a tiny minority?**

If the Neilsen 90:9:1 split is still sound we have to stop expecting the 99 to do as the 1% simply because what they are up to looks so engaging, constructive and fun? If considered to be a learning environment then these forums are just one fraction of the mix, not everyone's cup of tea and if looked at from an anthropological point of view in communities of people, will always only suit a fraction or segment of a society, Which is good. We don't all want to be town councillors or politicians - we elect them, in theory, to attend these meetings in order to take decisions and act on them on our behalf. Nor do we all want to be in the am dram society ... even, or especially, journalists have a role - they filter and interpret. If they are getting it right we feel empathy for whst they say - we don't have to express it ourselves. So bring back the internal communications department and have those who have the skills and inclination to express oponions and tell stories do so for us?

[YikYak](#) looks promising - say what you like as it is anonymous. Though it is canny how people soon spot a tone of voice, or turn of phrase ...



[Susan Hobbs](#)

4:52pm 20 February 2014 [Permalink](#)

Jonathan,

Thank you so much for your comments and very interesting perspective. I have to admit I didn't envisage my presentation creating such interest, but I am really grateful.

Many thanks

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