# How do pharmacists at MFT use information technology platforms/applications to access information about medicines?

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## Background

The growth of social media has significantly changed the way people communicate. It allows us to share resources easily and disseminate latest information rapidly. It is used as a platform for communication and education purposes by both the NHS and at MFT. Healthcare professionals can respond, comment, and ask and answer questions on these platforms instantly.

## Aims and objectives

This project aims to evaluate how the Medicines Information (MI) service can utilise social media to provide better services and disseminate information to pharmacists in MFT effectively.

- To identify the best potential social media platforms to disseminate different types of information about medicines.
- . To determine the feasibility for MI to reply to simple enquiries on social media.

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Results

#### **A**Information dissemination via apps

Participants indicated that they may be more likely to read information on social media as "people" tend to spend so much time on their phones" and the information is not "forced up on you and you can go on at your own leisure, have a look [to] see what's updated".

However, emails should still be the standard to get information out to everyone, with one participant stating "if you send a departmental email out....everybody will receive that email, whether they read it or not is a different question".

It was acknowledged by participants that one single social media platform could not be relied on for dissemination as "not everybody is going to necessarily have Twitter or Instagram or Facebook or whatever the platform is".

#### Answering simple MI enquiries via social media platforms

"Very simple enquiries, yes that would be really good" Advantages:

3. To investigate what apps pharmacists use for work purpose and review the benefits of MI recommending apps as additional resources.

### Method

An online questionnaire was designed and sent to all pharmacists across all sites. Data collection was set to two weeks and responders had an option to express interest in participating in the focus group.

Participants for the focus group were selected based on a variety of specialities and banding. Data from the questionnaire was analysed and helped guide the topics of discussion in the focus group. The focus group, which was recorded with consent, further explored the opinions on the use of social media platforms and applications for work purposes and other associated issues around them. Thematic analysis was performed on a verbatim transcription.



	"It would be interesting to see how much the enquiries would increase"
Disadvantages:	"undue pressure on a MI pharmacist to reply to an instant message with an answer"
	"more people would be messaging you (MI) asking about maybe not as important questions. I
	feel like MI should be reserved for more important questions"
	"you need to employ another pharmacist to man that"
Social media	at work- pros and cons
The use of V	VhatsApp in work dominated discussion as one of the most frequently used platforms.
There were c	differing views on its use, alongside generalisable pros and cons of social media application
in the work p	place.
Support system	"it can feel like a safety blanket knowing that hopefully if you've got a group of us colleagues and
	someone might be available"
	"you're part of the group, so you know they're there to help you"
Convenience	"very helpful oncall from a 'has anyone seen this before?' perspective"
	"one message goes out to everyone you can contact multiple people at the same time"
Work-life	"Whatsapp thing really affects my work life balance when I am on annual leave because I could
balance	get 3,5 (messages) a week on separate days about stuff that's happening at work my mind's
	thinking about work and I'm automatically flipped onto work"
	"I can switch off quite easilyit doesn't affect me too much. I like problems to be resolved quite
	immediately"
Confusion	" original question can be a bit muddled and a bit confusing"
	"messages did get muddled quite quickly when lots of people came in with different ideas that
	weren't necessarily"
Professionalism	"Whatsapp message to handover a patient in your professional career doesn't look appropriate.
	Would you be able to stand up and defend a Whatsapp message handover in court"
	"I used to think it was unprofessional, but I think it's become so commonplace now that I'm

None

91% of pharmacists used WhatsApp daily for personal purpose, and 50% used it daily for work purposes, which had a higher preference than all other apps. 53.3% used Twitter for personal use, but only 35% used it for work purposes



Majority (90.3%) of the responders would find it beneficial for MI to recommend useful apps for medicine related resources after assessment.

more comfortable doing"

"I wouldn't feel confident discussing specific patient information in particular because of not Patient **confidentiality** | being sure of security of it"

"I know that it says messages are encrypted, but I don't know what that means"

## Discussion

Social media is an accessible platform for healthcare professionals on receiving help and exchanging information, but there are mixed responses with regards to utilising this in a work environment.

Results showed that the majority of pharmacists use technology platforms, such as WhatsApp and Twitter for personal use, but there was a relatively low usage for work purposes. WhatsApp was used more regularly by shift-working pharmacists, which may be as a support system during out of hours. The low usage of Facebook, Snapchat and Instagram reported may be because they are not commonly considered work-related platforms.

The focus group discussions highlighted various pros and cons of using social media, but discussion was dominated by the use of WhatsApp which was the most widely used platform. The convenience of chat conversations can seem to overshadow the need for appropriate communication via phone or email. Staff considered the support network as a benefit but acknowledged that enquiries can become confused on these types of platforms.

There were generalisable concerns highlighted about breaches of patient confidentiality and professionalism, including the need for ground rules and appropriate administration. There were also considerable concerns about intrusion into work-life balance.

58.4% of responders would consider using social media platforms to access MI service if available.

#### **FOCUS GROUP**

Four pharmacists took part in the focus group, of varied bands and specialties, to further explore the use of apps in the work place:

#### Using social media apps at work

- The participants indicated preferences for use of BNF, BNFc, MDCalc and the Microguide apps. Other apps that were used included: BMJ Best practice, HIV drug interactions, iChart, Induction, Lexicomp Drug Reference, Medscape, Micromedex, NICE.
- Participants agreed that it would be useful for MI to produce a list of recommended resource list for apps, as this would help instil confidence on the use of reliable, locally approved resources:
- "It would be really nice to know what is recommended as well, because if you actually go and look on the app store, there's heaps of stuff out there"
- "...having that confidence, am I definitely using a reliable resource?"

With regards to information dissemination via social media, such as Twitter, only half of the questionnaire responders considered that this would benefit their work practice. Certain responders preferred email communication and considered it process duplication if other methods were used in conjunction. There was a consensus that one single platform could not be relied on solely for disseminating information. There is still a preference for using telephone, emails and in person are still the major methods of communication.

Half of the questionnaire responders would consider using social media to contact MI. The focus groups indicated some issues with implementation including limiting to simple enquiries and the potential for inappropriate and significant rise in MI enquiries. Participants agreed that it would promote accessibility, especially for information from resources that they did not have access to on the ward. It is unlikely that traditional contact methods would be entirely replaced.

The development of a list of suitable information technology applications was noted as a useful development for MI services to assist with. Direction on the assessment and validation of IT apps by UKMI clinical governance would be beneficial for local centres. Further work may be required in terms of ensuring good governance around the appropriate use of applications.