



Draft Position Statement

Irish Nurses and Midwives Organisation

Guidance on the Use of Instant Messaging in the Workplace

For Consultation, May 2019



Irish Nurses and Midwives Organisation
Working Together



Nursing now
Ireland

Table of Contents

Abbreviations	3
1.0 Introduction	4
2.0 INMO Position	4
3.0 Background	4
4.0 Employer Policy	5
5.0 What should nurses' and midwives' be aware of?	5
5.1 Professional Conduct	5
5.2 The Patient Record	6
5.2.0 Privacy and Security	6
5.2.1 GDPR Regulations	7
5.2.2 Freedom of Information	7
6.0 Personal Devices	7
7.0 Cost and Network Availability	7
8.0 Trustworthiness of software	7
9.0 Top Tips for the Usage of Instant Messaging:	7
10.0 Recommendations	8
11.0 References	8

Abbreviations

ABA	An Board Altranais
GDPR	General Data Protection Regulation
HSE	Health Service Executive
IM	Instant Messaging
INMO	Irish Nurses and Midwives Organisation
NHS	National Health Service (UK)
NMBI	Nursing and Midwifery Board of Ireland





1.0 Introduction

Communication technology continues to evolve at an ever-increasing pace. Many nurses and midwives joining the professions have not known a world in which mobile and electronic communication has not been a central feature of their lives.

Instant Messaging (IM) can be a useful tool in supporting and enhancing the delivery of direct care, particularly in an acute context. Used appropriately, it has the ability to connect people and can foster an environment which allows the creation and sharing of information in different formats quickly. Healthcare should reflect the culture and development in society and nurses and midwives are 'expected to move with the times' (Scott, 2018) to ensure IM can be used to enable safer and better care for patients.

It is important to highlight that hospitals and health care facilities have a legal responsibility and obligation to protect the information of patients and staff. At an individual level, nurses and midwives are professionally accountable for their actions or omissions as outlined in the *Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives* (NMBI, 2015). This code also provides important guidance in relation to the ethical duties of nurses and midwives, and expected standards of conduct, which in turn impact on the use of IM.

This document outlines the INMO's position on the use of IM for nurses and midwives and outlines some key areas for consideration as well as offering recommendations.

2.0 INMO Position

The INMO broadly welcomes technology which can enhance the workflow of nurses and midwives and the delivery of effective patient care. IM is a useful social media tool, one which if utilised correctly, can bring many benefits.

However, there are a number of challenges with IM platforms and the INMO would advise its members to be vigilant and cautious with its use particularly when it comes to confidentiality, privacy and data protection.

3.0 Background

The modern workplace is inherently collaborative and professional interaction relies on effective communication among co-workers. The use of IM in the workplace is less intrusive than the use of phone or beeps, more immediate than email and has an added advantage in its ability to detect presence (Maina, 2013).

IM can connect people regardless of where they are located. Not only does it allow people to send messages to selected groups of people, but it also allows users make virtual conference calls without all the related users being physically together in the same meeting room. It can enable knowledge creation in allowing those using it to share ideas, information and draw conclusions from multiple people quickly.

A recent study in University of Limerick found 80% of the interns at UHL confirmed that:

"instant messaging systems are already informally integrated into modern medicine in Ireland" (O'Sullivan, et al. 2017).

As part of the consultation process, the INMO will conduct a survey of IM use by nurses and midwives within their professional practice.

In a multi-centred UK study that examined ownership and clinical use of smartphones by doctors and nurses:

"53.2% of nurses found their smartphone to be 'very useful' or 'useful' in helping them to perform their clinical duties" (Mobasheri et al, 2015).

The use of IM to exchange and communicate patient and client information presents a number of challenges related to confidentiality,



privacy and security. Scott (2018) reported that staff surveyed in the NHS have admitted to sharing photos of patients without permission, sharing x-ray images and revealing confidential information about patients. Equally, another emerging challenge has been reported in over-cautious use of IM. Fully protecting patient data by anonymising it could lead to miscommunication and confusion about patient identification. (Dean, E., 2019).

4.0 Employer Policy

The INMO urges the Health Service Executive (HSE) and all other health care employers to ensure that they have a policy in place to address the issues surrounding the use of IM in their workplace.

The employer should also consider offering a more appropriate IM platform, one which is secure and encrypted, recognising that this is a useful and important tool for communication amongst all health professionals. Any policy or new platform put in place must also be followed by education around the use of IM for its staff.

The INMO advises that nursing and midwifery staff must adhere to their employer's policy on the usage of IM as well as the broader social media policy in the workplace as well as that of the Nursing and Midwifery Board of Ireland (NMBI) (2013), and the NMBI Code.

5.0 What should nurses' and midwives' be aware of?

Nurses and midwives are expected to maintain the same professional standards of conduct when they use social media and electronic forms of communication as with any other form of communication (NMBI, 2012). Although IM can offer a number of opportunities within the workplace, its use has also raised a number of key concerns that must be considered. The

INMO urges its members to be familiar with the concerns around IM and social media in general.

5.1 Professional Conduct

The Code of Professional Conduct and Ethics for Registered Nurses and Midwives (NMBI, 2014) includes principles, values and standards of conduct that all nurses and midwives must adhere to. Each nurse and midwife has a responsibility to uphold the values of the professions to ensure their practice reflects high standards of professional practice and protects the public.

The Code is based on five principles and all five must be upheld when communicating through IM. Each principle outlines a number of standards which must also be recognised and adhered to. The most relevant are outlined below.

Principle 1. Respect for the dignity of the person.

Standard 3. Nurses and midwives respect and maintain their own dignity and that of patients in their professional practice. They believe that this respect is mutual with patients.

Principle 2. Professional responsibility and accountability.

- *Standard 3. You are responsible and accountable for your decisions and actions (including inactions and omissions) in your practice.*
- *Standard 4. You should be aware of your professional responsibility when using social media.*

Principle 3. Quality of practice.

- *Standard 1. You must report any safety concerns you have about the healthcare environment and help to find solutions through appropriate lines of authority (such as your manager, employer or relevant regulatory body).*

- *Standard 3. You should actively participate in good clinical governance to ensure safe, quality care.*

Principle 4. Trust and confidentiality.

- *Standard 2. Honesty, integrity and trustworthiness must underpin your dealings with patients and colleagues.*
- *Standard 4. You must behave in a way that strengthens the public's trust and confidence in nurses and midwives. You should respect and uphold a patient's expectation that their personal information will remain private. You should use your professional judgment and act responsibly when you have to disclose and share information. There may be exceptional circumstances where you might need to share confidential information.*
- *Standard 5. You should tell patients (unless this could cause them serious harm) if you intend to share confidential information about them with others who are outside the immediate care team.*
- *Standard 7. Your role in safeguarding confidentiality extends to all forms of record management including appropriate use of information technology and social media.*

Principle 5. Collaboration with others.

- *Standard 2. Your documentation and communication of care should be carried out in a clear, objective, accurate and timely manner within a legal and ethical framework. This includes the appropriate use of information technology and social media.*
- *Standard 4. If the safety or wellbeing of a patient or colleague is affected or put at risk by another colleague's actions, omissions, or incompetence, you must first take appropriate action to protect people from harm. You should then immediately report the conduct to your manager, employer and, if necessary, the relevant regulatory body.*

5.2 The Patient Record

The NMBI requires nurses and midwives to record and maintain good patient records and this is something which underpins professional practice.

“An individual nurse/midwife should establish and maintain accurate, clear and current client records within a legal, ethical and professional framework.”
An Bord Altranais, 2002.

The existence of IM platforms does not change the responsibility to maintain a comprehensive nursing/midwifery record. For example, any information or advice given over the telephone, should be recorded as such by the nurse/midwife taking the call and equally, the nurse/midwife providing the information or advice must be clearly identified. Similarly, any advice received via IM platforms to the nurse/midwife must be transcribed and attributed in the record.

5.2.0 Privacy and Security

One of the core values as stated in the NMBI Code is that:

“Confidentiality and honesty form the basis of a trusting relationship between the nurse or midwife and the patient. Patients have a right to expect that their personal information remains private.” (2014). Nurses and midwives are obliged to be aware of the issues surrounding data privacy and security and managers of nursing and midwifery services must ensure appropriate systems are in place to support staff in this aspect of their work (ABA, 2002). Collecting, or storing patient records or data using IM platforms raises serious concerns around this obligation. There are key areas underpinned by legislation which must be taken into consideration when using any IM platform.



5.2.1 GDPR Regulations

The General Data Protection Regulations (GDPR), as laid down in the Data Protection Act 2018, protect an individual's right to privacy with regard to their personal data. Health data or data concerning health is considered in the GDPR as a special category of personal and sensitive data. Nurses and midwives have an obligation to ensure that they understand their responsibilities in relation to the GDPR and as well as seeking out local policies in place for managing patient records.

5.2.2 Freedom of Information

The Freedom of Information Acts allows patients to access healthcare records relating to them by any public sector body which maintains them. Again, nurses and midwives must recognise this and become familiar with local policies within their workplace (ABA, 2002). The number of FOI requests are on the rise as people become more aware of their personal information and what they are entitled to. Using IM as well as other digital communications could be liable under this legislation, so caution is always required.

6.0 Personal Devices

Nurses and midwives must be aware of the issues of using a personal device for work related activity, including IM. Using a personal device in such a manner can lend itself to cyber security issues and data protection concerns for the patient and the workplace.

The cost of using personal mobile devices varies depending on contracts and devices. Employers tend not to reimburse costs, so nurses and midwives should be aware of using their own personal device for work related purposes.

7.0 Cost and Network Availability

The availability of network signals can vary from location to location and there could be inconsistent coverage depending on where the work place is located or where in the work place the nurse/midwife is at any given time. Network availability, therefore, introduces a risk that there may be a delay in the recipient receiving the information or the loss of data. When communications are urgent or require a quick response, this could introduce a potential risk to patients.

Another potential risk arises from the internet connection being used to communicate information through IM. If an unsecure network is being used, the security and data privacy is at risk of being intercepted or corrupted.

8.0 Trustworthiness of software

Identifying an appropriate IM platform, one which is fit for purpose is of vital importance when considering communicating sensitive information. Most modern messaging software, such as WhatsApp (one of the most popular platforms) uses end-to-end encryption. However, questions have been raised over this encryption and how secure it is. This platform was never developed for a workplace environment and has limitations. Utilising an IM platform that is not authorised and secured by the organisation, introduces the potential for a data breach.

9.0 Top Tips for the Usage of Instant Messaging:

- Do not share patient information on IM unless you are using a secure and recognised platform in your organisation or workplace, and thus use complies with your workplace policy and NMBI guidance and standards.



- Do not allow anyone else to use your device.
- Set your device to require a passcode immediately, and for it to lock out after a short period of not being used.
- Disable message notifications on your device's lock screen.
- Enable the remote-wipe feature in case your device is lost or stolen.
- Ensure you are communicating with the correct person or group.
- Switch on additional security settings.
- Unlink the instant messaging app from your photo library.

10.0 Recommendations

- That the NMBI review its current guidance to nurses and midwives on social media and social networking to take account of the development of instant messaging as technology.
- That the HSE and other health service employers review their current policies and guidance to ensure clarity for employees on the use of instant messaging in the workplace and obligations to related legislation.
- That the HSE implement a closed private, secure and appropriate instant messaging technology to assist the communication between and sharing of information amongst health care professionals and other staff.
- That nurses and midwives understand and become familiar with the opportunities and

challenges and concerns surrounding IM and social media in general and that they seek out local policies available to them within their workplace.

11.0 References

An Bord Altranais (2002) Recording Clinical Practice guidance to nurses and midwives. ABA, Dublin.

Dean, E. (2019) Instant messaging: how to use it at work. *Nursing Standard*, 34(2): 36

NHS (2018) Information governance considerations for staff on the use of instant messaging software in acute clinical settings.

Maina, T.M. (2013). Instant messaging an effective way of communication in workplace. *arXiv.org > cs > arXiv:1310.8489*.

Mobasheri MH, King D, Johnston M, et al (2015) The ownership and clinical use of smartphones by doctors and nurses in the UK: a multicentre survey study. *BMJ Innovations*. 1:174-181.

Nursing and Midwifery Board of Ireland (2013) Guidance to Nurses and Midwives on Social Media and Social Networking. NMBI, Dublin.

Nursing and Midwifery Board of Ireland (2014) Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives. NMBI, Dublin.

O'Sullivan DM, O'Sullivan E, O'Connor M, Lyons D & McManus J (2017) WhatsApp Doc? *BMJ Innovation* 3: 238-9.

Scott, G. (2018, March) Editorial. Rules on nurses' use of social media must move with the times. *Nursing Standard*. Online version posted 20 March 2018.