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Citation: McBride, M. (2025). Understanding professional boundaries and social media. *British Journal of Community Nursing*, 30(11), pp. 542-543. doi: 10.12968/bjcn.2025.0193

This is the accepted version of the paper.

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Permanent repository link: <https://openaccess.city.ac.uk/id/eprint/36448/>

Link to published version: <https://doi.org/10.12968/bjcn.2025.0193>

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Professional Boundaries and Social Media Policy for Community Nurses

Key words:

Social Media. Community nursing. Policy. NMC. Professional Boundaries. Networking.

There is no question that social media is an integral part of contemporary nursing and has the power to enable nurses to share their research findings and network with colleagues (Geraghty, Hari & Oliver, 2021). There are also significant benefits for patient care and the wider health community, and the available platforms provide access to professional resources and create an inclusive environment for nurses to thrive (Nursing and Midwifery Council, NMC, 2023; Thrumble & Gunowa, 2022). The variety of platforms ensure that every audience is catered for, and the diversity enables individuals to select a tool that suits their individual requirements (Ogunsola et al, 2025). However, alongside these benefits comes risk and limitations; often challenging the boundaries between professional and personal relationships. For nurses working in the community, these boundaries are sometimes blurred, and extra caution is required if private and professional social media accounts are combined (McBride, 2025).

Regulatory bodies

Many of the professional organisations and regulatory bodies have published guidance and recommendations for social media use (NMC, 2019; Royal Society for Public Health, 2019; Royal College of Nursing, 2020), which set out broad principles and advice for nurses to follow to ensure they know how to use social media responsibly, maintain public trust and uphold their reputation (Geraghty, Hari & Oliver, 2021). The NMC Code (2018) provides clear guidance relating to all forms of communication which includes social media and networking sites, ensuring its registrants are aware of their responsibilities and privacy of others. The code also emphasises the consequences of posting inappropriate information and the risk to registrations status. Nurses must always be mindful that many platforms are unmoderated, and

one might even question how unregulated networks can be suitable for a profession that values such high standards of privacy and confidentiality (Thrumble & Gunowa, 2022).

In addition to the NMC code (2018), the NMC (2019) has provided additional guidance for nurses, midwives and nursing associates-*Guidance on using Social Media Responsibly*- which addresses various forms of existing and emerging social media applications, tools and platforms such as Instagram, WhatsApp, TikTok and Facebook. This information covers the use both professional and personal accounts and reminds registrants that they could put their registration at risk or if a student, could jeopardise the ability to join the register, if their behaviour is unprofessional or unlawful (NMC, 2019). See box 1. below for the statements provided by the NMC (2019). There is also a reminder to all registrants that they have a professional duty to raise concerns if they are aware that another nurse, midwife or nursing associate has used social media in any of the following ways.

Box 1.

- sharing confidential information inappropriately
- posting pictures of patients and people receiving care without their consent
- posting inappropriate comments about patients
- bullying, intimidating or exploiting people
- building or pursuing relationships with patients or service users
- stealing personal information or using someone else's identity
- encouraging violence or self-harm
- inciting hatred or discrimination

Nursing and Midwifery Council. Guidance on using social media responsibly. 2019

For community nurses, particularly those working outside of the confines of a bedded unit, the physical boundaries between work and private lives are often less established and this can potentially be mirrored in the use of social media. The NMC (2019) guidance is very clear that if a registrant is to refer to their work or study, they must demonstrate respect and professionalism towards all service users and maintain confidentiality. It is noted that sharing

confidential material online can be potentially more damaging due to the speed in which it can be shared and the potential audience; workplace institutions or organisations should have guidelines and policies in place to avoid subjective interpretation of these boundaries (Geraghty, Hari & Oliver, 2021). In addition, it has been noted that many nursing and allied health education programmes endeavour to address the concept of 'digital professionalism' using a number of pedagogical approaches that help guide appropriate communication on social media which influence behaviour, confidence and information literacy (O' Connel et al, 2021). It is reassuring to know that the future nursing workforce has this guidance integrated into their education programmes to foster a culture that is safe, respectful and aware of potential challenges. However, on occasions this instillation of fear at undergraduate levels, can be counterproductive and registrants adopt a level of apprehension of the professional safety of using social media platforms.

The Royal College of Nursing (RCN 2019; Jones 2023) also supports the appropriate use of social media to learn from leaders, encourage engagement, discover opportunities and get networking. It provides some user friendly guidance around ensuring you have your privacy settings set correctly, ensuring your online conduct remains as professional as your offline behaviour and the terminology and language used. There is also some cautionary advice about thinking carefully about what you are posting, considering which posts you are 'liking', never sharing photographs of patients or service users or oneself in a nursing uniform (Jones, 2023). Additional policy also reminds us that comments might be taken out of context and be interpreted as bullying, harassment, threatening or exploiting and that if you post anonymously, there is no guarantee that material will not be traced back to you (Social Care Wales, 2019).

Social relationships

Nursing in the community is one of the most rewarding professions and requires an ability to build therapeutic relationships with patients and service users. Delivering care within the home

of the individual facilitates genuine engagement, empathy and respect, and the development of a unique rapport and trust (Allan, Henderson & Hay-Higgins, 2024). This relationship means that person-centred care is the backbone of community nursing provision, however self-awareness of the challenges this poses must be considered. Within the community, sometimes nurse-patient relationships can be prolonged with many conditions being long term, and patients disclose very private information that might make them feel vulnerable. Patients often feel as if the community nurse has become part of their family and they may have a sense of curiosity that leads to searching for their profile on social media; even attempting to add them as a contact or pose questions about their care. Community nurses finding themselves in this situation need to address it with tact, sensitivity and compassion, but ensure they clarify professional boundaries have been crossed and signpost the patient or service user to the appropriate communication channels (Social Care Wales, 2019).

Additional Points

It has been suggested that the actual use of social media platforms whilst at work should purely be for improving patient care and not leisurely purposes, therefore requiring nurses to self-regulate and use appropriately (Geraghty, Hari & Oliver, 2021). Whether this is an easy phenomenon to mandate or not remains to be seen, but it is likely there could be an impact on situational awareness and critical thinking in the moment (Demiray et al, 2020). As Geraghty, Hari & Oliver (2021) highlight, there are also some concerns around the lack of clarity on patient confidentiality and consent when nurses think they are participating in a closed group and data is subsequently used for research and policy. This aspect requires some additional guidance going forward. However, what is clear, is that community nurses can feel supported, share wisdom and use platforms as a tool to campaign and make change, in a world where they might feel excluded and marginalised due to the nature of their work. If community nurses use social

media for networking in a considerate and cautious manner, applying diligence, they can reap the rewards, thus improving patient safety and enhancing professional connections.

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