Incorporating Routine Social Media Screening in Pediatric Primary Care

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Incorporating Routine Social Media Screening in the Pediatric Primary Care Setting

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Conflict of Interest

• I declare that there are no relationships, conditions, or circumstances that present a conflict of interest relevant to the content of this presentation

• This project was not funded
Problem

- Increasing use of media/social media among adolescents
- Numerous potential risks
- Familial media use
Rationale

• American Academy of Pediatrics (AAP) recommends routine social media screening for adolescents age 11-18

• Role of pediatric PCPs
  – Clinic-based counseling
  – Only about 16% regularly inquire about media use
Purpose & Aims

• Develop a routine media screening tool and promote patient-provider conversations about media and social media use

• Specific Aims
  – Educate pediatric providers about media guidelines
  – Develop educational materials for distribution to families
  – Increase frequency of Family Media Use Plan recommendation
Context

• Project Site: Timber Lane Pediatrics (TLP), South Burlington, VT
• 8 pediatric providers (5MDs, 3NPs, 1PA)
• Current media screening procedure at the clinic: Bright Futures questionnaires
• Screening implemented: new recommendation (2018) from AAP
PLEASE TAKE A MOMENT TO ANSWER THESE QUESTIONS PRIOR TO YOUR VISIT

1. Which social media sites, video games, and/or apps do you regularly use?

2. How long do you spend on social media sites, video games, and/or applications in a typical day?

3. Do you think you use social media too much? YES NO

4. Does viewing social media increase or decrease your self-confidence? Why?

5. Have you personally experienced cyberbullying, sexting, or an online user asking to have sexual relations with you?
INTERVENTION
Implementation Details

• Pre-intervention survey
• In-service with PCPs, nurses and MA’s at the practice
• Poster placed in PCP/staff workstation
• Regular check-ins
• Post-intervention survey
Any patient 11 or older who arrives for a well child check is given pre-visit questionnaire

Patient fills out questionnaire in waiting room

Nurse collects questionnaire upon rooming the patient and leaves at desk for provider

Provider sees patient, questionnaire prompts conversation about media/social media use

Provider discusses questionnaire answers and media/social media with patient

Patient/family receives one page handout of information about how to complete Family Media Use Plan at home, and other resources for patients and families

Provider documents discussion in EHR as desired and refers patient to next steps as necessary
Parenting and Media/Social Media Use: Helpful Resources for Parents

1) The American Academy of Pediatrics (AAP) recommends all families complete a Family Media Use Plan. Visit this website to learn more and complete one of your own: https://www.healthychildren.org/English/media/Pages/default.aspx

2) Think about this helpful framework: TECH Parenting to Promote Effective Media Management

- **T**alk to kids about media use and monitor their media-related activities
  - Ask questions in an open and nonjudgmental way: “What is your favorite TV show?”
  - Seek information on media your child consumes: “What do you like to watch when you go over to your friend’s house?”
  - Find out what TV, movies, applications, social media, and video games their friends like: “How do you interact with your friends on social media?”
  - Stay informed about new media sources: “What new applications are you using?”

- **E**ducate your children about media-related risks
  - Describe marketing practices of alcohol, tobacco, food, and cannabis industries: “Do you notice how alcohol companies use partying or sex to promote drinking?”
  - Discuss how media rarely depicts negative consequences of risky behavior: “That show had a lot of drinking in it, but it didn’t show anyone getting sick.”
  - Discuss normative, legal, and safe behavior as it relates to substance use and sexual behavior: “It’s uncommon for children your age to drink alcohol, and most don’t drink at all.”

- **C**o-view and co-use media with your kids actively
  - Watch appropriate, kid-targeted media together: “Let’s watch your favorite show together!”
  - Model turning off inappropriate content and explain why it is not appropriate: “I’m sorry, but this show has too much alcohol use in it; we need to turn it off.” Or, “Wow, that bullying was really mean. What might you have done differently to help?”
  - Learn about your child’s applications, video games, social media, and internet sources: “Tell me about this new application you downloaded; how does it work?”
  - Spend time learning about who funds media sources and what data new media sources collect: “Who sponsors this application? Let’s find out together.”

- **H**: establish house rules for media usage
  - Set clear boundaries on rating level of media allowed and where media is allowed in the house: For example, no R-rated movies; only actively co-view PG13 movies or shows over TV-Y7
  - Use technology to promote house rules (e.g. TV show parental controls): For example, no screened media in the bedroom
  - Set up rules specifically related to industry-sponsored media: For example, no Facebook account until 13 years old
  - Take the “wait until eighth” pledge: no youth smartphone ownership until eighth grade (https://www.waituntil8th.org/)

3) Learn More! Here are some links you can visit for more information about media and social media use in teenagers, and to learn some strategies for how parents and children can navigate the digital age together:

- “Ask the Mediatrician” (https://cmch.tv/parents/askthemediatrician/): A great resource for answers to all your questions, plus a forum to ask questions of your own!
- Common Sense Media (https://www.commonsensemedia.org/parent-concerns): Information and resources for parents with videos, FAQs, and links to the most current research and guidelines.
Measures

• PCP pre- and post-intervention surveys
  – Quantitative data (Likert scale, 1-4)
  – Qualitative data
• EHR Data
• Coding of patient screening forms
Key Findings

• Increased consistency of social media discussions
  – PCP self-report: 77% → 85%
  – Screening questionnaires: 79.3%
  – EHR Data: 48% → 70%

• Significance
Key Findings

• Survey results:
  – Increased frequency of screening, on average (per PCP report)
  – Increased percentage of PCPs recommending FMUP
  – Increased frequency of recommendation of FMUP
Key Findings

- PCP surveys:
  - Increased perception of importance of screening
  - Increased comfort with screening
  - Increased familiarity with up-to-date guidelines
Key Findings

• Anecdotally, all PCPs said the intervention was helpful:
  – “I loved it; important and the information sheet and survey was able to help decipher who needs more support around media use”
  – “helped triage me to talk about it and either praise kid for limited use or talk about ways to limit time”
  – “very important and a topic parents and children like to discuss”
  – “[good to have] qualitative input like what they are using”
Limitations

- Limited existing evidence
- Did not measure effect on patient outcomes in terms of media/social media use and health/behavior outcomes
Conclusions

- Intervention deemed useful by PCPs and found to increase screening rates
- Routine screening is a sustainable practice; PCPs motivated to continue
- Consider incorporating the standard social media screening questions into existing forms
- Next steps
QUESTIONS?
References


• Additional references available upon request