



A report prepared for *Te Kaunihera Tapuhi o Aotearoa* | *Nursing Council of New Zealand*.

A consultation with Young People on *Te Kaunihera Tapuhi o Aotearoa* | *Nursing Council of New Zealand's Code of Conduct and Boundaries Review*.

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The key messages to come from this consultation were that nurses play an important part in young people's positive experience of health care.

The young people spoke about the need for respect, about being informed about their health needs and their information being kept confidential when receiving health care from nurses.

They would like nurses to build relationships with them to get the best health outcomes for young people. They want to be consulted and included in all decisions to do with their health needs.

Young people stressed how important it is that the information they receive is clear, easy to understand, non-judgemental and has a good dosage of patience and warmth.

This report offers valuable insights from young people around nursing practice. We would like to thank them for taking the time to contribute. Your consideration of their opinions and perspectives is appreciated.

Introduction

Article 12 of the United Nations Convention on the Rights of the Child (UNCROC) directs adults to respect children's views, or at the very least, consider them respectfully. However, this is not always easy or straightforward and the UN Committee on the Rights of the Child (CRC) noted with regret:

... that the views of children are not adequately represented within the family, in schools and in the community. The Committee also regrets that there are no means by which children can express their views in the public domain, that the State party does not systematically take into consideration children's views when formulating laws and policies that may affect them ... (CRC, 2011, p. 5)¹.

The Children's Commissioner has a statutory obligation as the primary advocate for children, who has regard for UNCROC. The Children's Commissioner Act 2003 specifies *'the principle that the Commissioner should give serious consideration to the views of children and take those views into account'* (Children's Commissioner Act, 2003, S11(b)).

To comply with the above principle, the Office of the Children's Commissioner (the Office), in partnership with Te Kaunihera Tapuhi o Aotearoa/Nursing Council of New Zealand supported consultation with diverse groups of young people from throughout New Zealand/Aotearoa around nursing practices. This consultation supports efforts to include young people's voices in the review of Te Kaunihera Tapuhi o Aotearoa/Nursing Council of New Zealand Code of Conduct and wider aspects of nursing professionalism.

This report provides insights into young people's perspectives about what matters to them when they are receiving health care from a nurse and what they consider professional practice, working within a Code of Conduct and appropriate boundaries.

These views have been summarised by Rebecca Blaikie, Advisor at the Office who, with Pam Doole, Director of Strategic Policy recorded the consultation. Direct quotes are written in italics and quotation marks. A full copy of the feedback gathered during the process is available on request from the Office.

The Office and Te Kaunihera Tapuhi o Aotearoa/Nursing Council of New Zealand consulted with young people from four sites and identified potential youth groups where a pre-existing relationship existed. Our intention was to capture as much diversity, and as many different perspectives as possible.

Four different youth groups contributed to this report. Group sizes of young people varied from seven to 22 participants. The groups were:

- a mixed group of young people from throughout New Zealand
- a group of peer support workers from two different Youth One Stop Shops
- two mixed groups of young people who are consumers of nursing services.

¹ United Nations Committee on the Rights of the Child (2011). 56th session; Consideration of reports submitted by States Parties under Article 44 of the convention; Concluding observations: New Zealand.

Young people were invited to take part in one or all of the following activities:

- Participation in a group discussion facilitated by the recorders from both the Office and Te Kaunihera Tapuhi o Aotearoa/Nursing Council of New Zealand
- Participation in small focus group discussions facilitated by recorders from both the Office and Te Kaunihera Tapuhi o Aotearoa/Nursing Council of New Zealand
- Participation in a group discussion that was recorded by the facilitators from the Office.

Large group facilitation was used to generate discussion of the general questions. This helped stimulate the deeper discussion that followed. Both the boundaries and Code of Conduct questions were done in smaller groups, utilising recording devices, post-it notes, and the self-recording of young people comments on butcher paper.

The views expressed in this report are those of the young people who took part in the consultation.

General questions

When you get health care from a nurse, what is it like?

“Listen to me, because I am a young person they think I don’t know anything. I need help to understand and they need to understand me”

The majority of young people spoke positively about the health care they received from nurses. They spoke of the importance of being professional. They want nurses who are qualified, well informed, skilled and connected to other professionals they may need to access. They spoke about the need for a balance between warmth, openness, and professionalism.

“Well educated”

“Qualified and experienced”

“Tidy and professional”

“They need to know what they are doing, don’t talk sh&. They need to know what is wrong (diagnosis) not just pretend or make stuff up.”*

“Good when they are looking at case notes so they have an idea of your needs – so there is no need to explain health needs and issues again and again”

“Professional – make you relax”

“Good information - to provide good service”

“Want top-notch service from nurses – need to be skilled”

“You need to feel comfortable – not them pointing out mistakes”

“Embarrassing – awkward if they don’t like their job”

“Want to be able to trust their skill – want them to be good”

“Professional – right time & place”

“To have knowledge about different options and what suits you best”

“What benefits you around medication (what fits with you)”

“They will do their absolute best to help you”

“Good connections with other professionals who can help you out”

“Need to have appropriate equipment”

“Good service always”

“Need to be aware if they can’t help you”

Young people expressed the need to have positive relationships with nurses. That nurses should aim to be helpful, easy to approach, and respectful of young people. It is helpful if the nurses are interested in their whole well-being. Young people spoke about positive, accessible, non-judgemental and neutral communication from nurses as being important. Many of the young people indicated how important it was that nurses listened and asked the young people about their health needs.

“Respect – treating you as if you are important”

“Informing you of what they are doing”

“Explain things in a way that you understand”

“They know what subjects to push and what to stay away from”

“Not baby you”

“Smiley – happy to see you”

“Here to help you”

“Good at sorting out your needs”

“First impressions count”

“Respectful”

“Honest and neutral”

“I like to be told what is wrong, they need to be direct”

“Really nice, relaxed, comfortable”

“Sensitive, reassuring”

“Approachable, friendly, kind”

“Sometimes patronising”

"Mean, unhelpful – should be neutral"
"Treat you the same as others – no judgement"
"Sometimes it is hard to understand their accents"
"Sometimes they can misinterpret care needs"
"Nurses are sometimes grumpy – especially old ones"
"Don't care about you"
"Need good customer service"
-relaxed
-kind to you
-talk to you about your day
-treat you equal"
"Not listening"
"Mindful of what you are saying"
"Welcoming when they know who you are"
"Friendly"
"Focused on your needs"
"Easy to talk to"
"Non-judgemental"
"Interested in you as a person – you are not just another number"
"Assumption 'they know'"
"Medical terms – but they don't explain"
"Need to explain better"
"Change the language – break it down into steps, you want the nurse to know what you are talking about"
"Option of having parent in the room"
"Being compassionate to you as an individual - no belittling"
"Can ask questions"
"Didn't listen, nurse had made up her mind"

It was important for the young people that nurses are patient, accessible, compassionate, and sympathetic. They spoke about feeling comfortable talking about more personal health needs with the same gender of nurse. For some young people having a nurse of the same culture was important, or one who made an effort to understand their culture.

"Need more time, sometimes they rush you"
"Because not used to people touching you"
"Because you hardly know them"
"Free is good"
"Sometimes they look at you like you are a scum bag, judgemental"
"Gender does matter"
"Male for male - Guy nurse (for male patient) makes us feel confident"
"Can ask too many questions"
"Female for female"
"Culture of nurse can contribute to how comfortable I feel"
"But if they do the same job it is OK"
"Same culture- can relate"
"Samoan – culture matters"
"But no mothering – motherly quality is nice without babying-just kindness"

And of course they mentioned.....

"Not accurate at doing needles – drawing blood etc"
"Sympathy. e.g. needles"

Are they easy to talk to?

"We are not idiots – we will understand some stuff, but not all of it"

The young people expressed the need for nurses to connect with them as people. They wanted nurses to take the time to relate to them on a personal level – but not too much. Accessibility was important and cost was mentioned; free health care makes it much easier for young people to see a nurse.

"Show they are making an effort to connect"
"Smiling face"
"Compassion"
"Help first - build the relationship"
"Nurses' personality –you notice if they are interested"
"Sincere"
"Sharing some of themselves"
"Building a friendship"
"Working around you – making it easier to talk about sensitive things"
"Makes them more human"
"We need to be able to relate"
"On a personal level – feel more comfortable discussing things"
"Don't be patronising e.g. ..." how do you not know that! "
"Don't take advantage"
"Common sense to ask how they are, then go into health stuff"
"Use language that young people understand"
"Need to explain stuff – no jargon"
"Vibe nurses – friendly – same nurses that go to school"
"Access can make it hard"
"Cost"
"Depends on the young person -not open & honest about problem"
"Face to face – not looking at a computer"
"Need to have good boundaries – so service not abused"
"Younger nurses can be easier to identify with"

They expressed the need for nurses to be clear and use language they can understand. Nurses who are mindful and respectful are really important to the young people. Open questions were seen as useful to ensure all health needs were met.

"They need to check if we know/understand"
"Might need to explain in a different way so we understand"
"Call out your name and walk off – you have to follow"
"Relate to the patient – the age of the person – their maturity"
"Use references to young people – can relate to their culture, humour"
"Customer service taken to next level – personal"
"Important that we understand what is going on. e.g. balance between medical & formal /age appropriate"
"Not patronising"
"Use language I can understand"
"Open ended conversations - is there anything else I can help you with"
"Sometimes would like to talk about other stuff"
"School nurse – good to talk with, -comfortable talking to school nurse"
"Gender is important"
"School nurses need to be really friendly"
"Can be hard to describe pain"
"English Second Language don't understand you – or you them"

They understand that nurses are busy people, but need this balanced with patience.

"Patience needed"
"Nurses are people too – they need a break"
"A& E is hard; there is time pressure – understaffed"
"Need to focus on clients"
"Confidential environment"
"Not enough time sometimes with GP"
"Some are- some are not"
"Depends on personality"
"70% are ok – 30% not so easy to talk to"
"Depends on circumstances"
"If personal can be difficult"
"Need more time"

Do you think young people should be able to participate in shaping the way nurses provide services e.g. planning, delivery and evaluation? Why?

"Better delivery because you are providing what needs to be delivered"

The young people thought that by including them in service planning, delivery and evaluation would ultimately create better services and ensure that young people's health needs were better met.

"Especially how to relate to young people"
"YES!"
"Makes it better"
"Young people actually have opinions!"
"If it is for them it is good for them – makes the service better"
"Improves service for young people"
"Mechanism to have a say – important"

Young people have opinions and are happy to share them. Including young people in decision-making processes is important as they are high service users.

"Is it relevant to young people?"
"Good to be included in services"
"Big population of young people use the service"
"Through evaluation forms"
"Checking in that options are OK"

For young people, participating in their own personal health care was critical and they were aware that this was not about needing the final say but contributing to the health care process.

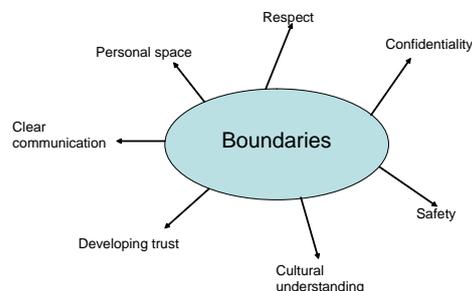
"Given options for care plans (individual)"
"Having input – not necessarily the final say"
"Meeting reasonable expectations"
"Get as close as possible to pleasing lots of people"
"Suggest but not dictate"

The young people suggested that all service users should be included in shaping what services are delivered.

"Do everybody"

Nurse Boundaries

“Not asking about personal issues in your life that are completely irrelevant to why you are seeing them”



What does a nurse having good boundaries mean to you?

The young people spoke clearly about having a relationship with nurses. Many young people spoke of the importance of respect and trust. Young people need nurses who are observant about young people’s body language and responsive to the health care they are providing.

“Need to be friendly”

“Make sure right people get the right information”

“Respectful, confidential”

“Know how to react, how well they know you, everything gets talked about”

“Asking if it is ok to be touched (if opposite sex)”

“Recognising when I am uncomfortable”

“Professionalism”

“Clear communication (so both know boundaries)”

“Earn trust”

“Without respect we won’t trust nurses”

“Needs to be earned”

“OK to offer (e.g. unpleasant procedures)”

“Need to be given a chance”

“Nurses need to do this first and then the clients will follow”

“If I have understood and I say no – respect that”

“Making it clear that you don’t have to accept treatment”

“Tone is important”

“Need to be able to relate”

“Respect is key”

“Respect for privacy”

“Feel like friends but not like same age friends”

“Focus on our health – they need to care”

“No unnecessary touching”

“Bad boundary – being distant”

Open honest communication was important. So is appropriate language use, which is accessible and friendly but still maintains a professional element.

“Awkwardness of friend /also your nurse – open communication”

“No joking about your situation or other patients”

“Keeping it professional”

“Understand difference between personal & private”

“Able to understand personality differences”

“Friends to an extent – know the limit”

“Not taking unnecessary uncomfortable measures”

“Making patients feel safe-not taking unnecessary risks”
“Don’t make you do things you don’t want to do”
“Use appropriate language but not baby terms”
“Maintain professional language”
“Little jokes ok – especially if family and children around”

The young people described boundaries as acting professional, having discretion, being understanding and non-judgmental. Nurses need to be guided by young people around their health needs.

“No physically touching”
“Need to ask if they are going to touch you or do something – ask nicely”
“Know culture-ask about that stuff”
“Know different rules”
“Cultural understanding of patients”

Confidentiality was noted as an important part of nurse/patient relationship. Safety for both the young person and nurse was critical to a good health service and boundaries. They were clear that pressure to do things was an inappropriate boundary to cross.

“Confidentiality”
“Pressure”
“Hassling”
“Don’t invade personal space unless it is requested”
“That they are just there to do their job”
“Non-judgemental”
“Safety for both nurse and patient”

Is it appropriate for a nurse to endorse a product?

“If they are non-medical – then NO because that is not their job”

The young people were clear that products that were non-medical were inappropriate for nurses to endorse. Nurses should never have personal gain from product endorsement.

“Not for anything – that is not related to medicine”
“If they are getting dollars for it – no way!”
“Not if it is just pressure”
“Wrong”
“Stay in job role”
“Don’t need product”
“Recommending is different from endorsement”
“Professional recommendation is ok – but not endorsement”
“If health related OK”
“If someone asks about getting the advice”
“If it might benefit you from previous conversations”
“Can’t offend you -depends on personality”
“Shouldn’t if not related to health needs”
“No if making profit – no way”
“Impairs their judgement”
“False advertising – shouldn’t do it”
“Might not be qualified to endorse the product”
“Is it an OPINION – or a FACT?”
“Funding might be involved”
“Was it the right research?”
“Might not even be relevant to you seeing them”

They thought that there may be certain medical products that nurses may recommend if they were useful for improving the young people's health.

"If it's medical yes – but not if the nurse has personal gain because it is unethical"

"It needs to relate to young people"

"If the product works"

"Need all options"

"Need to listen to clients need"

"Depends on endorsement – what type of product"

"Depends on circumstances- reason behind product"

"Could be for their own benefit"

"Possibly if they think it will help or benefit the lives of other peeps!"

What do you think about nurses involving family/whanau in their health care?

"Reduces any lying or not telling all the information"

The young people were very clear that nurses should and need to seek consent from the young person to involve or include their family/whanau in their health care. Their privacy was very important to them around their health needs.

"Up to you not nurse"

"Consent"

"Confidentiality important"

"Want to have access to safe sex advice"

"Consent needs young person's permission – need to tell them why"

"Feel young person still has a right to say no"

"Sensitive questions – ask the family or whanau to leave"

"Respect the young person"

"Suit the questions to the environment"

"Depends on issue - some things are too private e.g. sexual health"

"Individual choice – ask patient"

"If I meant to include them – I would have"

"Need your permission – my choice"

"Need to keep power in your hands"

"NO– privacy important"

"NO ONLY with CONSENT"

The young people spoke about nurses providing support to them about how they could communicate their health circumstances to family/whanau members.

"Changes all the time"

"Depends on issue, circumstances"

"Asking them how this should be done"

"Nurses doing it"

"Or young people doing it"

"Nurses should encourage young people to talk to their family about health issues"

"They have knowledge to share – make it easy for family and friends to understand"

They were very clear that there may be circumstances where it is important to include family/whanau, when this was around the young person's safety.

"It is necessary if it involves:

- *"Drugs"*
- *Self-harm*
- *Underage pregnancy"*

"If harm to self or others then involve"

"If they take family with them, that is ok"
"Age is big factor"
"If harm – yes"
"Parents responsibility to look after their kids"
"Yes if the issue is dangerous/life-threatening"
"Conversations about religious and cultural aspects important"
"Good – sometimes nurse understand your culture"
"Keep them in the loop about your health issues"
"Young people's safety – if you are in danger or very ill"
"There is an expectation mentally ill and need support"
"Physically ill – might not be your choice"

Is it ok for a nurse to have a personal relationship with a family/or support person they met through a young person?

"Nurses need to be professional whilst at work – so it should not occur, however the nurse needs to handle it maturely if it does"

The young people were clear that this was not an appropriate thing for a nurse to do.

"When treating a young person, keep privacy - have to have confidentiality"
"Not lead a double life"
"No"
"Unprofessional"
"Unspoken rule"
"No – unprofessional"
"NO. Client should come first"
"As long as they not still a client"
"Gets rid of privacy if nurse & patient know each other well"
"Weird. Could you trust them to keep your information private?"
"Probably wouldn't go back to that nurse"
"Lose rapport with health professional"
"No – can affect your treatment"
"Privacy (The nurse cannot share information)"
- they may share info that is not ok to share
- classified info"
"If met through the professional relationship – NO (Creepy/wrong)"
"Play across mind"

The young people understood that this could potentially occur and wanted to see professional lines maintained or a new nurse providing care.

"Change nurses"
"No – not if they bring it to the workplace"
"Have to maintain professional behaviour if they do have a relationship"
"Need to still treat me like a client"
"It's ok as long as client is not discussed"
"Keep professional and private relationships separate"
"The nurse should no longer be that young person's nurse"
"If it happened could change nurse"

Do you think it is ok for nurses to receive gifts because of their role?

"Might make nurse feel like they owe them"

Young people were clear that receiving a gift should not influence a nurse's ability to maintain professional guidelines. They were conscious that gifts could influence the level of care or information a nurse or organisation provided to clients.

“Not if bribery”
“Not if used for blackmail”
“If they receiving gifts that create inequality – not good”
“If it encourages them to do good”
“Can’t influence their work”
“Depends on extent of gift”
“Guilt – I gave you a gift – you owe me. Works both ways”
“Nurse could give patient the wrong idea”
“Nothing personal”
“Not as a bribe or blackmail”
“Puts nurse in uncomfortable condition”
“Can cause staff problems – jealousy”
“What is intent of the gift?”
“Personal of professional”
“Thank you card ok – not an I love you card”
“Want to show appreciation”
“No – unprofessional”
“Personally would not want gift – in job because you want to help people”
“Make clear gift is for the service – not personal”
“Nurse should only accept as thank you, not anything more – keep it professional”
“Thank but politely decline”
“Not an expensive gift just a little one”

The young people understood that gifts can be a good way to show appreciation, but need to be appropriate, given the power that nurses have in their relationships with young people. Some gifts would be inappropriate for a nurse to accept.

“OK – but depends on why”
“If they did a good job”
“Only from organisation they are working from”
“Good rewards”
“Value work”
“Sex toys – NO”
“Not if expected/demanded”
“Asking for car, wine etc”
“Money inappropriate”
“After treatment is OK”
“Depends on value & situation”
“Gold necklace from 64yr old – no”
“Depends on intention B4”
“How do you know person has wrong expectation of gift?”
“Certain things you can’t accept”

The young people noted that there may be cultural elements in gifts and nurses need to be mindful of this.

“Cultural aspect of gifts? Ok to bring in food”
“Awkward if declined”
“Safe - to accept or not”
“Genuine gift – not asked for”

Do you think nurses should be able to receive gifts from young people?

“Young person’s choice to give the gift – their way of saying thanks”

The young people expressed that giving gifts was a natural way to say thank you. Nurses needed to be mindful of the relationship they have with young people and the

types of gifts that are appropriate. Hand-made gifts were seen as a very appropriate way for young people to say thanks.

"Nurses with young people – it can be appropriate & caring e.g. Chocolates"

"Cards"

"Thanks for great work- in gratitude – not illicit reasons"

"Not if too expensive"

"Small thanks OK"

"Sentimental rather than \$"

"Yes"

"Card"

"Flowers in thanks"

"Lollies"

"Box of chocolates is ok"

Flowers? Who from?"

"Not grandmother's ring"

"Judge case by case"

"A drawing is ok"

Is it ok for a nurse to offer other professional services through their nurse relationship?

"If you are a nurse – that is what you are"

The young people were clear there should be no personal gain from offering other services via the nurse-patient relationship. It was deemed OK if the service was related to health needs, there was no personal gain and they maintained a professional relationship.

"If it relates to my health needs"

"If it is a referral"

"Only if beneficial to the young person"

"No personal gain through nurse's relationship"

"Yes – if you started the relationship for service outside of the nurse/patient relationship"

Most young people felt it was unprofessional and inappropriate. It was important for young people that nurses were honest about any connection they may have to a product or service they were talking about. They also thought they needed to be neutral and provide all the options that may be available.

"Not for personal financial gain"

"No – should only be a nurse"

"If it gives them an advantage in personal life - not OK"

"NO – weird"

"Not relationship we have"

"Unprofessional"

"Not their job – two separate roles"

"Have to disclose relationship/conflict of interest"

"Provide all the options for professional services – not just their one"

"Nurse has to tell if they have any relationship that could influence result"

Code of Conduct

What does informed consent (giving your permission) mean to you?

"Knowing exactly what they are agreeing to in language that is understood"

The young people wanted to be well informed about their health.

"Need to be properly informed – not just skimmed over."

Could be achieved by:

- asking the patient how much they understand about the treatment after informing them about it*
- asking the patient to repeat (verbally or in writing) what they understand is going to happen*
- document what the nurses have done for the safety of the nurse – it is all case by case it is when you give your permission to receive treatment"*

"Tell you everything – explain thoroughly"

"Spell out options"

"Translator for English as Second Language"

"You need to know what you gave permission for"

"Signed information so it is clear and you can go back and see what you have given permission for"

"Signed & documented"

"Written or spoken"

They expressed the need for time to understand what was happening around their health. They felt that nurses may need to use their judgement around a young person's ability to understand information. The young people wanted to know what's going on and if things change they need to be informed again.

"So they can't step outside what they said they would do and you agreed to"

"If they want to know more they have to ask again"

"Have concern re passing on the information to other family members"

"Student nurses – just get permission, need to learn, get experience"

"Being professional"

"Made you get up when you didn't want to"

"Give you time – give you time to think about it"

"Don't pressure"

"For more serious cases it needs to be written so the nurses have a record of consent should any issues arise?"

"Nurses need to judge if you are in the right position (state of mind) to give your consent"

"If you give consent for one treatment and a similar one is needed to progress the treatment additional consent should be sought"

"Having a say about your care & treatment"

"Knowing what's going on"

How do nurses communicate with you at the moment?

"Depends on the results – might be phone or texts, letter, face-to-face or follow up by other staff"

Below is a snapshot of how nurses were communicating with the young people we consulted with.

"By text reminders"

"Cell phone"

"Through receptionist"

“Follow ups if miss appointment”
“Don’t text any personal stuff”
“Text”
“Call”
“Sometimes emails”
“No Facebook”

What is appropriate sharing on social media sites?

“Whole organisation rather than individual nurse”

The young people expressed that social media is a good way to promote an organisation. They are useful for keeping young people up to date with what is happening. They were conscious of maintaining professional/personal boundaries.

“No names”
“Don’t add patients as friends”
“Know too much about you”
“Nurses don’t need to advertise themselves”

Information was useful in a generic sense, but more detailed information was still needed to be delivered on a one to one basis.

“Pamphlet information”
“Not necessary”
“They could put up links to their health care page”
“They could use it for updates e.g. big health updates or if there are issues which cause problems in hospitals etc”
“Health information – video clips/education”
“Nothing else”
“Not answering questions about personal info/health/conditions”

How should nurses use text to communicate with young people?

“Use as a reminder for appointments – but followed up with results”

Text was a useful tool for nurses to connect with young people to remind them about appointments. They expressed the need for nurses to ask if this was the best way to contact them.

“Reminders are ok”
“Ask young person for permission”
“It can be more private than a phone call”
“They could have an automatic system which texts when results are in or when an appointment is coming up”
“Having a fixed message which can follow up if they can’t contact you by phone call”
“Could have a text asking them to come in for a check up – perhaps a reminder a week before”
“Sometimes they text appointments, sometime I like it as it is a good reminder”
“Sometimes you forget”

Financial constraints for young people require nurses to be mindful that young people may not reply to text and a phone call might be needed. Text was not seen as an appropriate or respectful way to transfer personal information.

“Have to call if it is about personal information. Like test results”
“People can see information on your phone or you might lose it”

“Rather they call as you might not have credit and you could ask questions if you needed”

How should nurses use email to communicate with young people?

“If young person gives permission”

Many young people do not check their emails on a regular basis and do not see it as the most secure form of communication.

“Not sharing personal information as it can get intercepted, just reminders about appointments”

“Privacy issues”

“Don’t check regularly”

“Yes – if private & confidential”

“Some – it’s their only means”

“Not so good”

“They shouldn’t”

“Emails too easily hacked”

“Text would be more effective”

“Many young people don’t regularly check their emails”

They want nurses to be professional when they use emails as a method of communication. Some young people may not want to share their email address.

“Like professionals”

“Be short, sharp, professional”

“Send health information to read”

“Inappropriate email name – may not want to give out”

What suggestions would you have for nurses when using Facebook to connect and communicate with young people? How should nurses use Facebook to communicate with young people?

“Loses the professionalism of seeing a nurse”

Facebook was seen as a personal communication tool. They felt using Facebook would blur the lines between the professional and personal relationship. The young people indicated that text, calls and face to face were better forms of connecting with young people.

“Nurses seen smoking pot – would not want to be treated by someone doing this”

“Stay off!”

“No clients”

“Too public – no privacy”

“NO!”

“They shouldn’t”

“Inappropriate”

“Takes away seriousness of it”

“Keeping the professional relationship and personal separate”

“They might say something inappropriate”

“Nurses not Facebook friends”

“Rather they called me on cell phone”

Some young people commented that there could be potential privacy issues. Facebook wasn’t seen as a place where young people gathered good information.

“Be careful”
“Avoid gossip pages”
“Be careful-untraceable – only privacy”
“Security issues – partner may have password”
“Private settings”
“Not personal stuff”
“Anonymous”
“Things will be leaked – doesn’t matter how minor it is still important”
“Doesn’t feel like the information is safe on the internet”

Facebook pages could be useful to provide information and links from the health care service provider. Health services have websites that could be linked to a Facebook page.

“Link on to page that has information”
“No personal one, but we could contact”
“They could have an information page i.e. what to do if you have a cold”
“But their website should be their main resource”
“People get catty and intense”
“Limit to an information page”
“Like a page – set up a page and they like message you”

How should nurses use blogs to communicate with young people?

“Not based on people – examples”

Young people commented that blogs could be another way to provide information. Some felt that they would not be meaningful or useful for young people.

“Information”
“Not personalised”
“Link with other websites”
“No one would read it”
“Could be put on website but not on a separate page e.g. Twitter”
“What would blogs say – other than career advice?”
“Not professional”
“NO”

How important is it for a nurse to respect your information?

“Not the nurses information to share – it is ours”

Young people need to be respected when they are receiving health care. They expressed the importance of privacy within the nurse patient relationship.

“Most important thing a nurse can do is make you feel comfortable so you can get info out”
“You trust them with the information you give”
“Separate out sections of life”
“Keep personal perspective out of it”
“Very”
“Patient confidentiality”
“You want to know you can trust them with your information”
“Extremely”
“It is key”
“Very important”

The young people need to be asked about where, who, what and why their information is being used. Nurses can play an important role in supporting young people make good decisions.

“Explain when needs to be shared – risky situation”

“Circumstances”

“Help you with your decision making”

“Interpret information”

“Do not change what you said (be careful how it is written)”

“They need to take what you have said seriously”

“They need to ask if information is ok to tell a Doctor”

“It is case by case – if you don’t want the information to be shared to a doctor or other source (i.e. police) or other sources including a parent - the nurses need to make a judgement call and let the patient know about their decision before they do it”

“Most important part of their job next to helping you”

“Cause all of the stuff you tell them and they need to respect you”

“I don’t want people knowing my personal stuff”

“Would be a really bad experience so young people might not go to that nurse”

How can they ensure this happens?

The young people expressed the need for clear and honest communication. They need to know the boundaries of the health care being provided. They are aware that nurses may need to do things to ensure the safety of young people.

“Let you know at the start that what you say may need to be told to a Doctor”

“Keep things confidential – unless it is very serious (especially if you are under 16)”

“Your state of mind – capacity issues/legal situations”

“Follow the privacy Act”

“Situations when young person at risk”

The Office of the Children’s Commissioner, and Te Kaunihera Tapuhi o Aotearoa/Nursing Council of New Zealand would like to acknowledge all the young people for their contributions to this consultation. We would also like to thank all the people and organisations for assisting this participation. We hope that it will contribute to better health care services for young people.