

# Using Twitter effectively to communicate your research

**Dan Richards-Doran MCIPR**  
Senior Communications Manager,  
Nuffield Department of Primary Care Health Sciences

@\_DanRichards | @OxPrimaryCare



## Your challenge

1. Get yourself on Twitter
2. Tweet during today's meeting.

## Why be a “scientist on social media?”

- Connects you with your research community
- Supports the generation of impact\*
- “Scientists need to: be more prominent communicators, communicate more strategically”\*\*

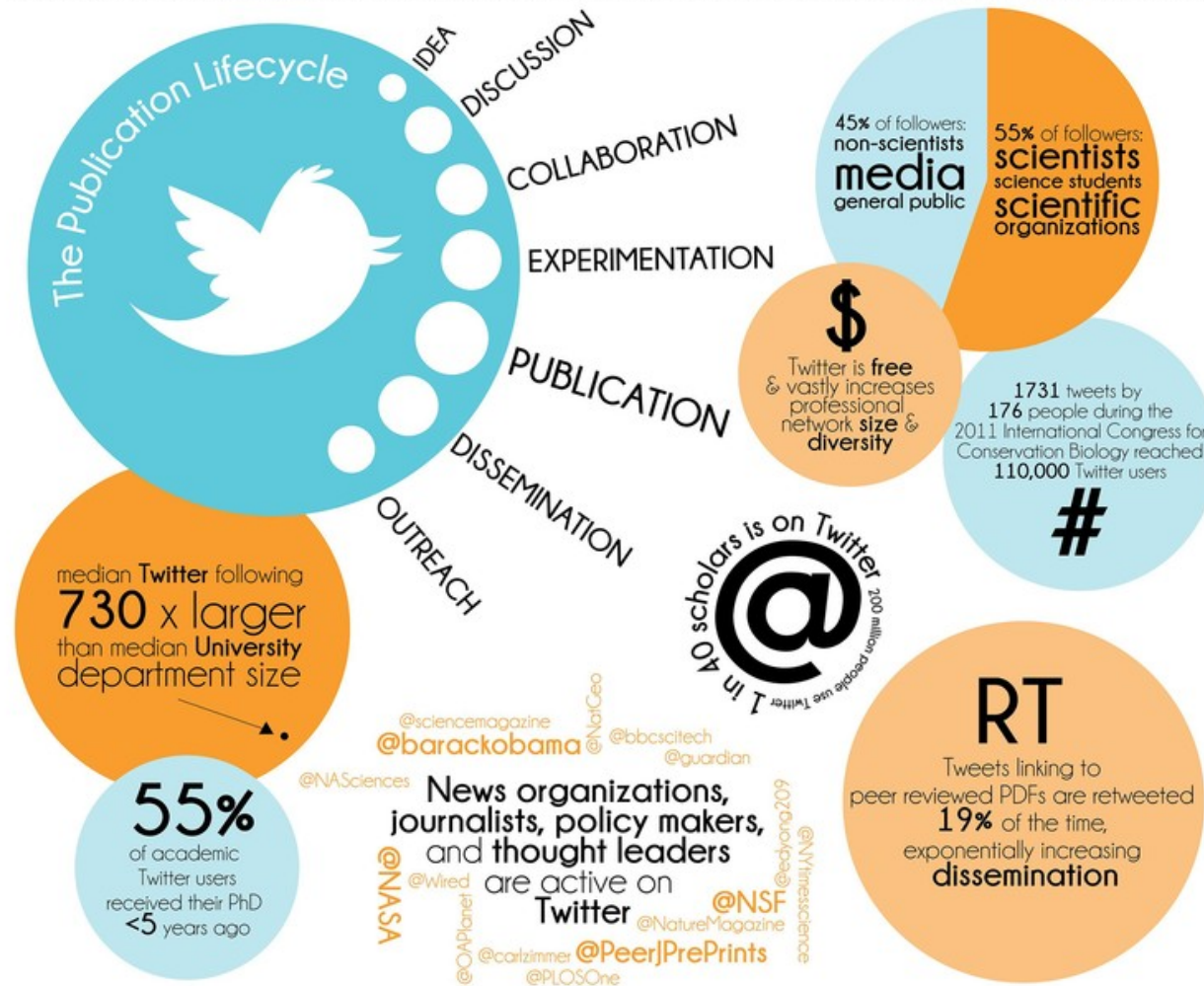
\*Liang X et al (2014). Building Buzz: (Scientists) Communicating Science in New Media Environments. *Journalism and Mass Communication Quarterly*.

\*\*UK House of Commons Science & Technology Committee

# The role of **Twitter** in Science Publication and Communication

Based on the work of Emily S. Darling, David Shiffman, Isabelle M. Côté, & Joshua A. Drew\*

A survey of 116 marine scientists actively using Twitter highlighted the value of this social networking and microblogging site to science and scientists.

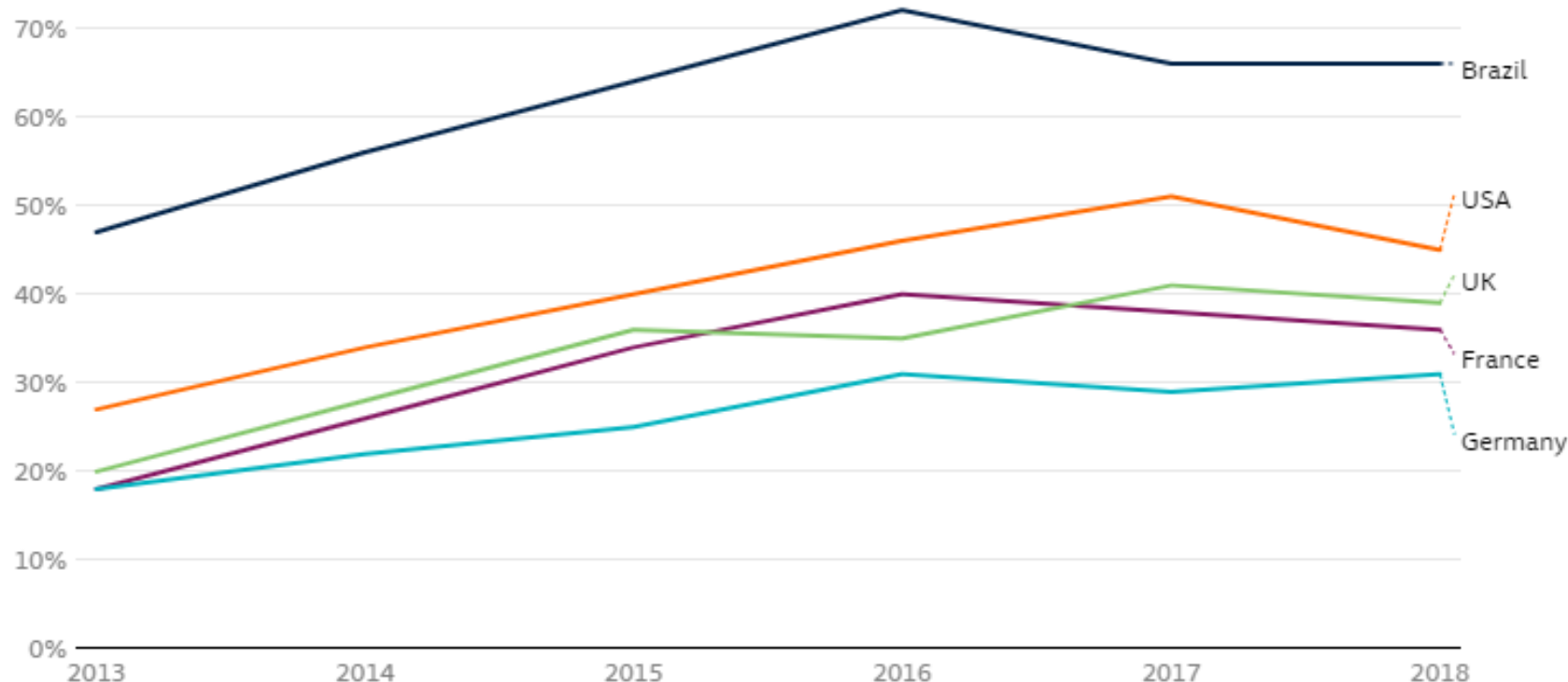


\*Infographic compiled using data from Darling et al, 2013, PeerJ PrePrints before publication in Ideas in Ecology and Evolution, and references therein, by KatiePhD.com.

<https://theconversation.com/its-time-for-scientists-to-tweet-14658>

# PROPORTION THAT USED SOCIAL MEDIA AS A SOURCE OF NEWS IN THE LAST WEEK (2013–18)

*Selected countries*



Q3. Which, if any, of the following have you used in the last week as a source of news?

*Base: Total 2013–2018 sample in each market.*

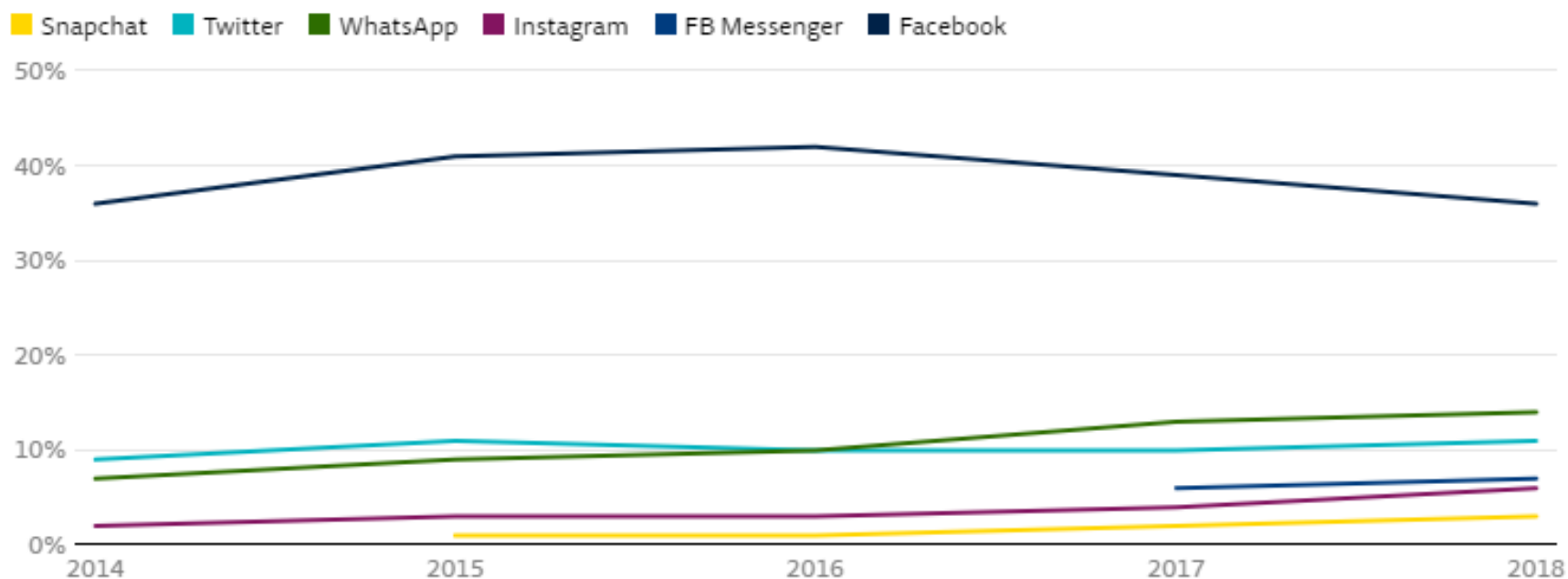


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# PROPORTION THAT USED EACH SOCIAL NETWORK FOR NEWS IN THE LAST WEEK (2014–18)

Selected markets



Q12B. Which, if any, of the following have you used for finding, reading, watching, sharing, or discussing news in the last week?

Base: Total sample in selected markets

Note: From 2015–18, the 12 markets included are UK, US, Germany, France, Spain, Italy, Ireland, Denmark, Finland, Japan, Australia, Brazil. In 2014, we did not poll in Australia or Ireland.

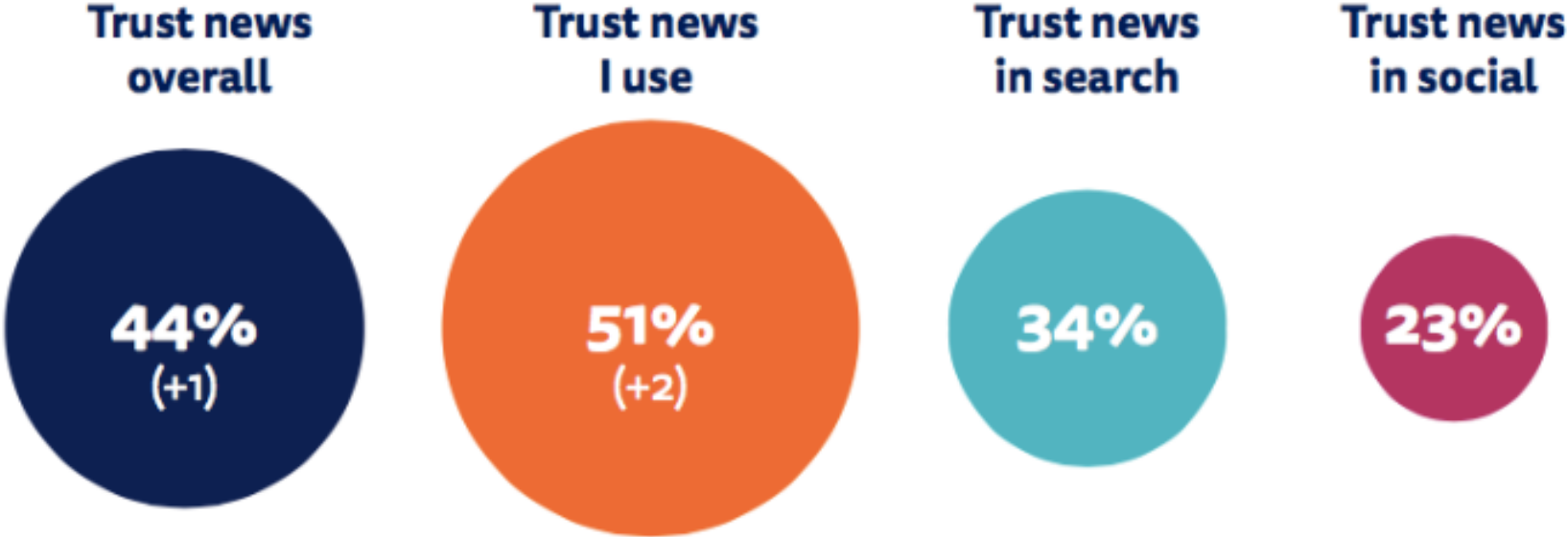


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# PROPORTION THAT SAY THEY TRUST NEWS FROM EACH SOURCE

*All markets*



Q6\_2018\_1/2/3/4. Please indicate your level of agreement with the following statements. I think you can trust 'most news'/'news I consume'/'news in social media'/'news in search engines' most of the time.

*Base: Total sample in all markets = 74194.*



# The public are *publics*





## 8 top tips to win with social media

1. Getting started – have a plan
2. Consider your platform
3. Post about lots of things
4. Have dynamic, sharable content
5. Boost your audience reach with hashtags and images
6. Familiarise yourself with social media guidelines
7. Be smart, listen and understand your audience
8. Engage your research community

## 8 top tips to win with social media

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## 1. Getting started – have a plan

1. What do you want to get out of social media?
2. Who are you trying to reach?
3. What are you going to talk about?
4. How can social media help boost your impact or feed into your own research?

# 1. Getting started – have a plan



## Nathan Davies

@NathanDavies50 FOLLOWS YOU

UCL NIHR School for Primary Care Research Post-doc Fellow. Carers, dementia and palliative care. F1 and tennis fan! views my own. Hampstead.

📍 London

🔗 [iris.ucl.ac.uk/iris/browse/pr...](https://iris.ucl.ac.uk/iris/browse/pr...)

📅 Joined August 2012



## Andrea Smith

@AndreaD\_Smith FOLLOWS YOU

Public Health/Epi PhD student | UCL | Identical twin (and no: we can't read each others minds)

📍 London

📅 Joined June 2013



## Trisha Greenhalgh

@trishgreenhalgh FOLLOWS YOU

Doctor, academic, Europhile. Featured lecture: [youtube.com/watch?v=qYvdhA...](https://youtube.com/watch?v=qYvdhA...)

📍 Oxford

🔗 [phc.ox.ac.uk/team/researche...](https://phc.ox.ac.uk/team/researche...)

📅 Joined January 2012

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## 2. Consider your platform

# SOCIAL MEOWDIA EXPLAINED



I LIKE  
MY CAT



I'M PLAYING  
WITH MY  
CAT



WATCH THIS  
VIDEO OF  
MY CAT



I'M VERY  
SKILLED  
AT TRAINING  
CATS



HERE'S A  
HIPSTER  
PICTURE  
OF MY CAT



HERE IS  
HOW TO  
TRAIN YOUR  
CAT TO  
DANCE



I FREAKIN'  
HATE THIS  
CAT FOOD



I WORK  
FOR GOOGLE  
AND I HAVE  
A CAT



I AM  
LISTENING  
TO THE SONG  
"SOFT KITTY"



THIS IS  
WHERE I  
GOT MY  
CAT HOODIE





## 2. Consider your platform

### **LinkedIn – “the interview room”**

Great for job hunting and connecting with industry.  
Check out the groups.

### **Twitter – “the coffee lounge”**

Follow discussions, post content, engage with other academics.

### **Facebook – “the bar on Friday night”**

Non-professional, maintain friendships. Used less for news.

### **Instagram – “the art gallery”**

Post beautiful photos, microblog your research.

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### 3. Post about lots of things

- Publications, website updates or blog articles
- Invite feedback on new ideas
- New developments in your area i.e. government policy change, a think tank report, new journal article
- Tweet quotes from speakers at conferences using the conference hashtag
- Is your research in the news? Recycle your content.

## 20 minutes a day

- Listen to what others are saying
- Be social: liberally share (retweet), comment and get involved in conversations
- Find new followers
- Create and schedule in some posts e.g., upcoming events

Now and then (monthly?) reflect on what's working

## Publications:

Include:

- Name of journal
- Name of paper or finding in laymen's terms
- Mention your department and other collaborators
- A hashtag or two
- Direct link to paper
- An image



**Quynh Pham**

@qthipie



Follow



WE PUBLISHED A PAPER! Grateful to  
[@JosephCafazzo](#) for sharing my vision of a  
brave new [#mHealth](#) world beyond the RCT.

**J Med Internet Res** @JMedInternetRes

JMIR #mHealth: Beyond the Randomized Controlled Trial: A Review of Alternatives  
in mHealth Clinical Trial Met... [bit.ly/2cIKzrR](http://bit.ly/2cIKzrR)

RETWEETS

12

LIKES

28



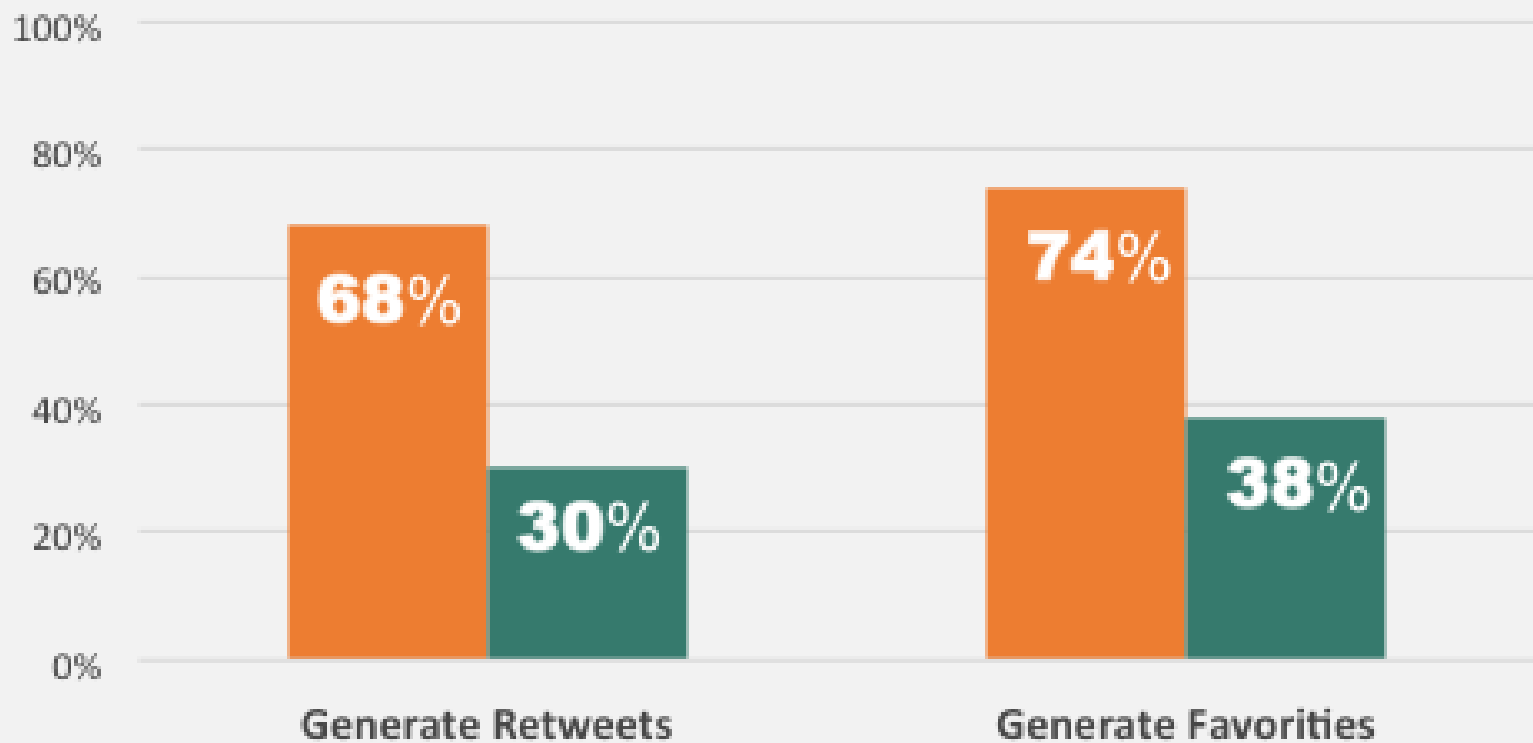
5:47 PM - 9 Sep 2016



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**Tweets with Images**      **Tweets with No Images**

© Stone Temple Consulting, Inc.  
Social Authority as defined by Followerwonk



**19 TOOLS TO CREATE SOCIAL MEDIA CONTENT**

www.SocialMediaExaminer.com

This graphic features a red background with a repeating geometric pattern. At the top, there is an illustration of a brown toolbox with a silver handle, a white smartphone, and a yellow hard hat. The text '19 TOOLS TO CREATE SOCIAL MEDIA CONTENT' is written in a bold, white, sans-serif font. At the bottom, the website 'www.SocialMediaExaminer.com' is listed.

15 WAYS TO CREATE

## Shareable Content

*That Will Explode Your Traffic*

This graphic has an orange background. At the top, it says '15 WAYS TO CREATE' in white. Below that is the main title 'Shareable Content' in a large, white, sans-serif font, followed by the subtitle 'That Will Explode Your Traffic' in a smaller, italicized white font. At the bottom, there is an illustration of two laptops connected by a dashed line.

THIS IS HOW TO

## Make Your Content More Social Media Friendly

This graphic has a light blue background. On the left, there are several circular icons representing social media platforms: an envelope, a pin, a laptop, a Facebook 'f', a Twitter bird, and a LinkedIn 'in'. To the right of these icons, the text 'THIS IS HOW TO' is in a small white box, followed by the main title 'Make Your Content More Social Media Friendly' in a large, dark blue, sans-serif font.

*How to Create*

# GREAT

SHAREABLE CONTENT

BIGEYE

This graphic has a dark grey background. At the top, it says 'How to Create' in a white, cursive font. Below that is the word 'GREAT' in a large, white, bold, sans-serif font, followed by 'SHAREABLE CONTENT' in a smaller, white, sans-serif font. At the bottom, there is a white, stylized infinity symbol and the word 'BIGEYE' in a white, sans-serif font.

HOW TO CREATE

## *Insanely Shareable* CONTENT

KIM GARST  
kimgarst.com

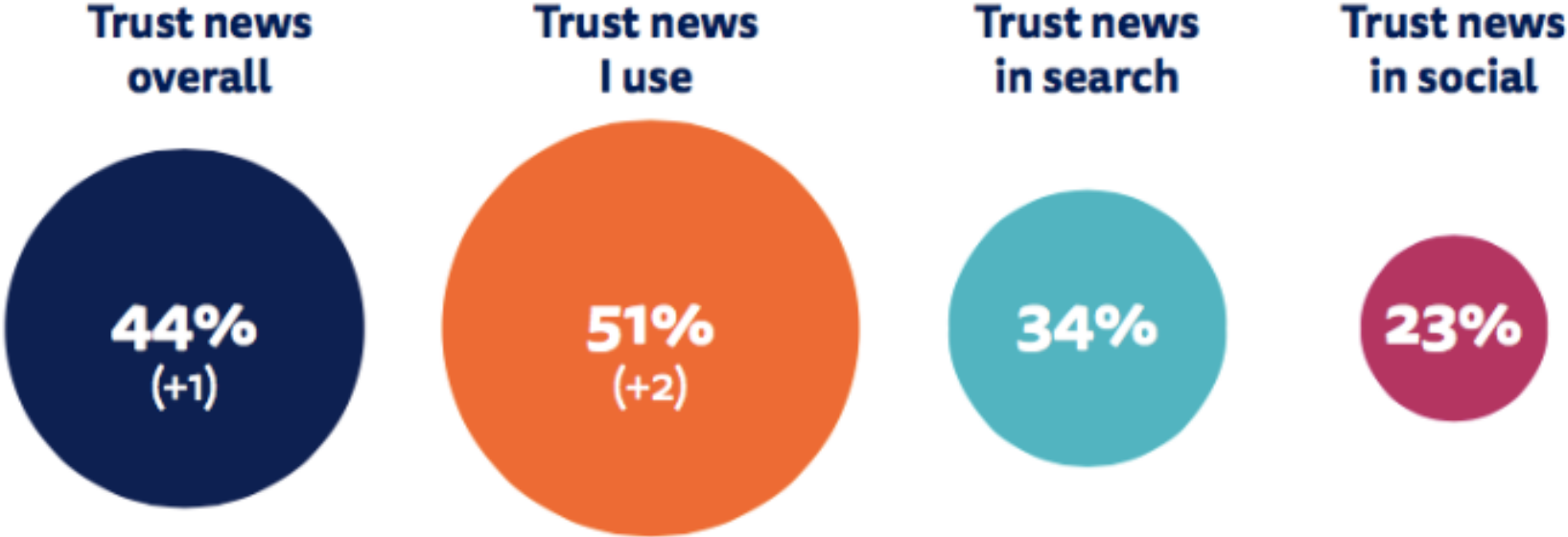
This graphic has a light purple background with a hexagonal pattern. At the top, it says 'HOW TO CREATE' in a small, white, sans-serif font, followed by the main title '*Insanely Shareable* CONTENT' in a large, white, cursive font. Below the title is an illustration of five people (three men and two women) standing and using various mobile devices like smartphones and laptops. At the bottom left, there is a small logo for 'KIM GARST' and the website 'kimgarst.com' at the bottom right.

1. **Visually appealing**
2. **Targeted to your audience**
3. **Evidence-based**



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THE NAKED SCIENTISTS PODCAST 18 September 2018

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**Give a quick talk or demo**

Record a video abstract or live stream



**Are you talking about real people?**  
Include a photo in your tweet



Home Moments Notifica



**Sheffield Hallam Uni** ✓  
@sheffhallamuni

Sheffield Hallam University, right in the beating heart of the Steel City. It's nice here. Yes, we do Snapchat and Instagram too: sheffhallamuni. See you there.

shu.ac.uk

Joined February 2009



**Sheffield Hallam Uni** ✓

@sheffhallamuni

Follow

Scientists celebrate after securing £244K from @NC3Rs to develop tech to reduce animal-testing [goo.gl/65TOUY](http://goo.gl/65TOUY)



RETWEETS

24

LIKES

17



11:59 AM - 29 Apr 2014

4 24 17



Reply to @sheffhallamuni @NC3Rs




**NationalCentrefor3Rs** @NC3Rs - 29 Apr 2014

@sheffhallamuni congratulations! We look forward to working with you #3Rs

2 1

X



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## RESEARCH SUMMARY

# Speed bumps and appendicitis

The presence of pain while travelling over speed bumps has been found to be associated with an increased likelihood of acute appendicitis.

### Why is the research needed?

Diagnosing appendicitis can be challenging, particularly in the early stages of the condition. Several different tests exist, but appendicitis can sometimes be easily missed and can only be properly confirmed once the appendix has been removed. It is important not to miss it, but it's also important to make sure a patient does not have a diagnosis of appendicitis, since between 5–42% of patients who have their appendix removed do not have appendicitis.

Sometimes patients report a worsening of their pain when they travel over speed bumps, and some doctors routinely ask about this as part of their initial conversation with the patient. Researchers at the University of Oxford and Stoke Mandeville Hospital carried out a study to find out whether there is any evidence to support the use of speed bumps as a tool to diagnose acute appendicitis.

### How was the study conducted?

101 patients aged 17–76 years, who had been referred to Stoke Mandeville Hospital for surgical assessment by their general practitioner or an A&E doctor, were enrolled into the study. They were asked to complete a questionnaire about their symptoms within 24 hours of arriving at the hospital; this included four specific questions about their journey:

- How did they travel to the hospital?
- Did they travel over speed bumps?
- Had they experienced pain on the journey?
- Did that pain get worse when they went over a speed bump?



If the patient had experienced worsening pain while travelling over a speed bump they were defined as "speed bump positive." If their pain had stayed the same while travelling over a speed bump, improved or they were unsure, they were defined as "speed bump negative."

Participants were followed by the researchers through their hospital admission to determine the outcome of their visit, and whether their suspected appendicitis diagnosis was confirmed after they had been taken to theatre.

### What do the results show?

Of the 101 patients enrolled, 68 had travelled over speed bumps, 64 of these were included in the main analysis after four patients' results had been excluded.

## Research Summary: Speed bumps and appendicitis

| Pain over speed bumps | Positive diagnosis of appendicitis | Negative diagnosis of appendicitis | Total |
|-----------------------|------------------------------------|------------------------------------|-------|
| Positive              | 33                                 | 21                                 | 54    |
| Negative              | 1                                  | 9                                  | 10    |
| Total                 | 34                                 | 30                                 | 64    |

The results show that the speed bump test is **highly sensitive** (97%) towards correctly diagnosing acute appendicitis. However, the test is **not very specific** to acute appendicitis alone (only 30% specific) – so a high proportion of people reporting pain over speed bumps did not have appendicitis, but had other abdominal conditions that were aggravated by the impact of the speed bump, or their pain just got better of its own accord.

### What does this mean?

Speed bumps can be used as a **strong rule-out test** for appendicitis – it is **highly unlikely** for a patient reporting **no pain** while travelling over speed bumps on their way into hospital to then receive a **positive diagnosis** for appendicitis.

However, the speed bump test is a **poor rule-in test** for appendicitis, since many patients experiencing pain may have another abdominal condition or no condition at all.

So the speed bump myth is untrue with respect to appendicitis alone, but due to its strong rule-out value the researchers suggest that questioning about speed bumps may be useful (when available) and should form a routine part of the assessment of patients with possible appendicitis. It can help to better identify those who don't need an operation.

### Why is there a link between speed bumps and appendicitis?

One of the reasons for pain with appendicitis is due to inflammation of the peritoneum – this is a membrane that lines the whole abdominal cavity. It is possible that the impact of going over a bump irritates the peritoneum.

### Where is the study published?

The research was published in the Christmas 2012 edition of the *British Medical Journal*.

Pain over speedbumps in diagnosis of acute appendicitis: diagnostic accuracy study.  
Ashdown HF, D'Souza N, Karim D, Stevens RJ, Huang A, Harden A.  
*BMJ* 2012;345:e8012 doi: 10.1136/bmj.e8012

*This research summary has been developed by the Nuffield Department of Primary Care Health Sciences, University of Oxford.*  
Last updated: 14 September 2015  
Photo credit: Shutterstock

### Who are the researchers?

- **Helen Ashdown**, General Practitioner and Clinical Researcher, Nuffield Department of Primary Care Health Sciences, University of Oxford, UK.
- **Nigel D'Souza**, Trainee in General Surgery, Wessex School of Surgery, UK.
- **Diallah Karim**, Trainee in General Practice, Kings College NHS Foundation Trust, London, UK.
- **Abdel Kader Allouni**, Specialist Registrar in Diagnostics and Interventional Radiology, Oxford University Hospitals NHS Trust, UK.
- **Simon Knechtler**, Consultant Vascular Surgeon, Addenbrookes Hospital, Cambridge UK
- **Richard Stevens**, Medical Statistician and Deputy Director of the Medical Statistics Group, Nuffield Department of Primary Care Health Sciences, University of Oxford, UK.
- **Andrew Huang**, Consultant Laparoscopic and Colorectal and General Surgeon, Buckinghamshire Healthcare NHS Trust, UK.
- **Anthony Harden**, Academic Clinical General Practitioner and Professor of Primary Care, Nuffield Department of Primary Care Health Sciences, University of Oxford, UK.

There was no formal funding for this research. All researchers were independent from funders and sponsors.

### Find out more:

BMJ talk medicine podcast  
Christmas 2012: The Speed bump test  
<https://soundcloud.com/bmjpodcasts/sets/bmj-podcast-2012>

Pain over speedbumps in diagnosis of acute appendicitis: diagnostic accuracy study.  
BMJ 2012;345:e8012 doi: 10.1136/bmj.e8012  
<http://www.bmj.com/content/345/bmj.e8012>

Nuffield Department of Primary Care Health Sciences, University of Oxford:  
[www.nphc.ox.ac.uk](http://www.nphc.ox.ac.uk)

### Contact the researchers:

Corresponding author:  
Helen Ashdown, Nuffield Department of Primary Care Health Sciences, University of Oxford.  
[helen.ashdown@nphc.ox.ac.uk](mailto:helen.ashdown@nphc.ox.ac.uk)

Inform other professionals  
Produce a clinical factsheet or CPD/CME resource




(3) The OPTIMISE Study - Yo... x

https://www.youtube.com/watch?v=bllU-Ko9l7A

Apps MSD Image Library Home — HaikuHQ Plan On Home - AMEC Integr primarycare - NDPC Google Analytics Altmetric it Logos, stationery ten The Situational Theo Updating your Web The Healthcare Hash Other bookmarks

YouTube Search



The OPTIMISE Study

608 views

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Oxford Primary Care

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@CebmOxford

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Why trial outcomes fail to turn into benefits for patients [@carlheneghan](#) [@krmahtani](#) [@bengoldacre](#) [@MedicalEvidence](#)  
[goo.gl/1vLHIC](http://goo.gl/1vLHIC)

'We highlight problems with trial outcomes that make evidence difficult or impossible to interpret and that undermine the translation of research into practice and policy.'

RETWEETS

45

LIKES

22



2:03 PM - 15 Mar 2017



45



22



**OxPrimaryCareSci**

@OxPrimaryCare



Can #PatientExperience be incorporated into online health info to aid choice & decision-making in healthcare? #ptexp  
[ncbi.nlm.nih.gov/books/NBK40119](https://ncbi.nlm.nih.gov/books/NBK40119) ...

The internet has seen an explosion of websites featuring people's accounts of their experiences of health and illness, through, for example, blogs, patients forums, online ratings sites and voluntary organisation websites. These are popular, but are of uncertain benefit. We explored how we might best understand how online patient experience influences health.

A series of studies included a review of the published literature and a new questionnaire. We observed and talked to people about how they looked for online information about giving up smoking, having asthma or caring for someone with multiple sclerosis. We used these studies to help us understand how best to include video, audio and written clips about people's experiences of these conditions on a website.

We developed three experience-based websites and three comparator websites and invited people to participate in a randomised exploratory trial to compare their use. We recruited 148 people with asthma, 87 people who wanted to give up smoking and 42 carers of people with multiple sclerosis. The participants had 2 weeks' access to a website. The participants, who ranged in age from their twenties to their late seventies, found it easy to take part, and over three-quarters completed questionnaires after 2 weeks. We interviewed 30 trial participants, who highlighted the value of facts, figures and experience. We conclude that it is feasible and acceptable, but probably not useful nor a good use of public money, to run a larger trial comparing such websites. In real life, individuals seek and combine individual information sources to suit preferences that shift over time.

RETWEETS 17  
LIKES 7



9:17 AM - 3 Feb 2017

👤 Sue Ziebland, Louise and Nikki Newhouse





GP referral to a weight loss group is effective & takes 30 seconds #obesity #primarycare  
po.st/NDm54e thelancet.com/journals/lance ...

**“While you’re here, I just wanted to talk about your weight...”**  
said the doctor to their patient.

The BWEL (Testing a Brief intervention for WEight Loss in primary care) trial tested the effect of GPs advising people who are overweight about losing weight. At the end of a consultation about another health problem, GPs spent just 30 seconds advising their patient that the best way to lose weight was to attend a weight loss programme and offered an NHS referral to a weight-loss group in their local community.



**SECONDS**

to carry out this brief opportunistic intervention.

**ATTENDED**

the weight management programme they were referred to.

**WEIGHT LOSS**

on average after 1 year compared with 1.04kg in the control group.

**LOST 5%**

of their bodyweight over 12 months.

**PATIENTS AGREED**

that the conversation with their doctor was appropriate and helpful.



NUFFIELD DEPARTMENT OF  
**PRIMARY CARE**  
HEALTH SCIENCES

Screening and brief intervention for obesity in primary care: a parallel, two-arm randomised trial. Aveyard P et al. *Lancet* 2016; DOI: 10.1016/S0140-6736(16)31893-1

RETWEETS  
**68**

LIKES  
**46**



9:06 AM - 25 Oct 2016

2 68 46



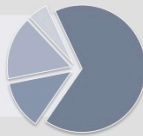
# GLOBAL STATUS OF NON-COMMUNICABLE DISEASES

**38** MILLION DEATHS EVERY YEAR  74% (28 MILLION) OF WHICH OCCUR IN LOW AND MIDDLE INCOME COUNTRIES



 **HALF OF NON-COMMUNICABLE DISEASE (NCD) RELATED DEATHS ARE CAUSED BY CARDIOVASCULAR DISEASES (CVD)**

**CANCER, DIABETES & CHRONIC RESPIRATORY DISEASES, IN ADDITION TO CVD, ACCOUNT FOR 82% OF THE GLOBAL ANNUAL NCD DEATHS**



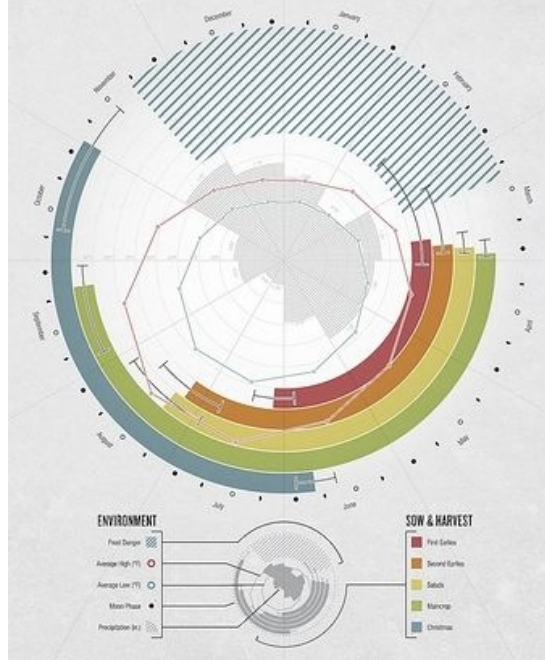
**4** **SHARED RISK FACTORS**   
TOBACCO • PHYSICAL INACTIVITY • DIET • ALCOHOL

 **THE WORLD HEALTH ORGANIZATION HAS CALLED FOR A 25% REDUCTION IN PREMATURE DEATHS FROM NCDs BY 2025**



## THE POTATO LIFECYCLE

A Comprehensive Timetable For Planning, Planting And Monitoring Your Own Crop Of The World's Most Resilient Tuber



AN ACUTE, INFECTIOUS AND OFTEN FATAL DISEASE CAUSED BY THE VARIOLA VIRUS

# SMALLPOX

This ancient disease probably emerged in Egypt or India about 3,000 years ago, and was one of the most devastating and feared diseases in human history.

**1157 BC** 

Pharaoh Ramses V dies in Egypt. In 1979, researchers discovered lesions consistent with smallpox on his body, the earliest human evidence of the disease.

**1763** 

In an early case of bioterror, British Gen. Joseph Amherst delivers smallpox-tainted blankets to Delaware Indians in Pennsylvania.

OVER THE CENTURIES, SMALLPOX STRUCK WITH VERY LITTLE REGARD FOR CLASS, STATUS OR LOCATION, CLAIMING THE LIVES OF AT LEAST SIX EUROPEAN MONARCHS, AND EXACTING A PARTICULARLY HEAVY TOLL ON CHILDREN.



As European explorers pushed across the oceans, they introduced smallpox to new communities that had no natural immunity with devastating consequences.



**1796**

English physician Edward Jenner showed that inoculation with cowpox—a similar, but less harmful virus—could protect against smallpox infection. This discovery was the first indication that the spread of smallpox could be controlled.

100-150 MILLION CASES OF SMALLPOX

**1950**

The WHO reports there were an estimated 10 million cases of smallpox around the world for the decade.

**1967**

The WHO intensified a coordinated global eradication campaign aimed at stepping out smallpox once and for all.

TODAY: ERADICATED




**1977**

The first naturally-occurring case of smallpox was found in Somalia in 1977.

**1980**

The World Health Organization declared that the disease had been erased from the planet.

Bioterrorism experts are concerned that smallpox could be used as a particularly lethal weapon in a terrorist attack, since the successful eradication campaign meant the end of widespread vaccination, leaving most humans vulnerable to the virus.

| RAISED BUMPS  | AIR TRANSMISSION  | SECURE LABS   |
|---|---|---|
|    |    |    |
| After exposure, a person will first exhibit typical flu-like symptoms, such as fever and body aches, as well as nausea. A rash will then appear which eventually develops into raised bumps filled with a thick, opaque fluid—the hallmark of smallpox infection, and the source of its name. | Smallpox can be transmitted through the air, much like the common cold. It can also be spread through contaminated bed linens and clothing, as well as bodily fluids. Because smallpox is highly contagious, victims must be completely isolated once they show symptoms. | Today, the only place on the planet where you can still find smallpox is in two government-run secure storage labs in the U.S. and Russia. Governments have been fighting for decades over whether to destroy these remaining samples and continue to kick the can further down the road. |

THE NUMBERS

NO TREATMENT FOR SMALLPOX HAS EVER BEEN FOUND

IT KILLED AS MANY AS **30%** OF THOSE INFECTED

## **8 top tips to win with social media**

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- 5. Boost your audience reach with hashtags**
6. Familiarise yourself with social media guidelines
7. Be smart, listen and understand your audience
8. Engage your research community

## 5: Boost your audience reach with hashtags

# #science

**2X**

Tweets with hashtags receive 2X more engagement than those without hashtags.

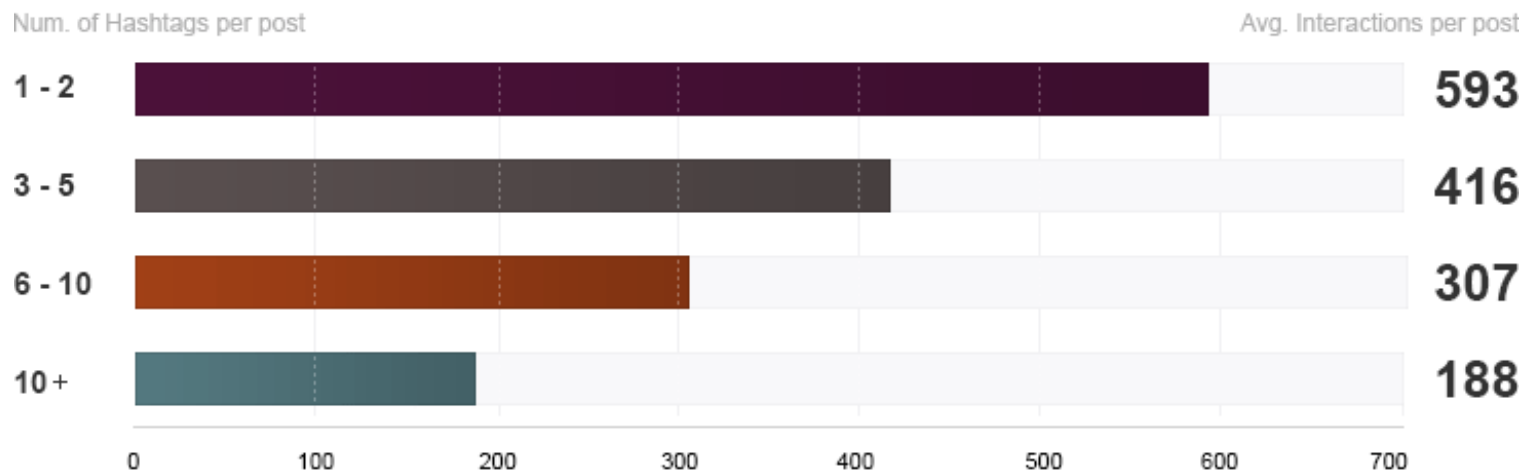
**21%**

Tweets with one or two hashtags have 21% higher engagement than those with three or more hashtags.

**17%**

Tweets that use more than two hashtags actually show a 17% drop in engagement.

## Too Many Hashtags Leads to Less Interactions



Data Range: February 1st to February 28th 2014

Data: The data for this chart was taken from a sample of over 200 000 brand posts on Facebook





#primarycare

#dementia

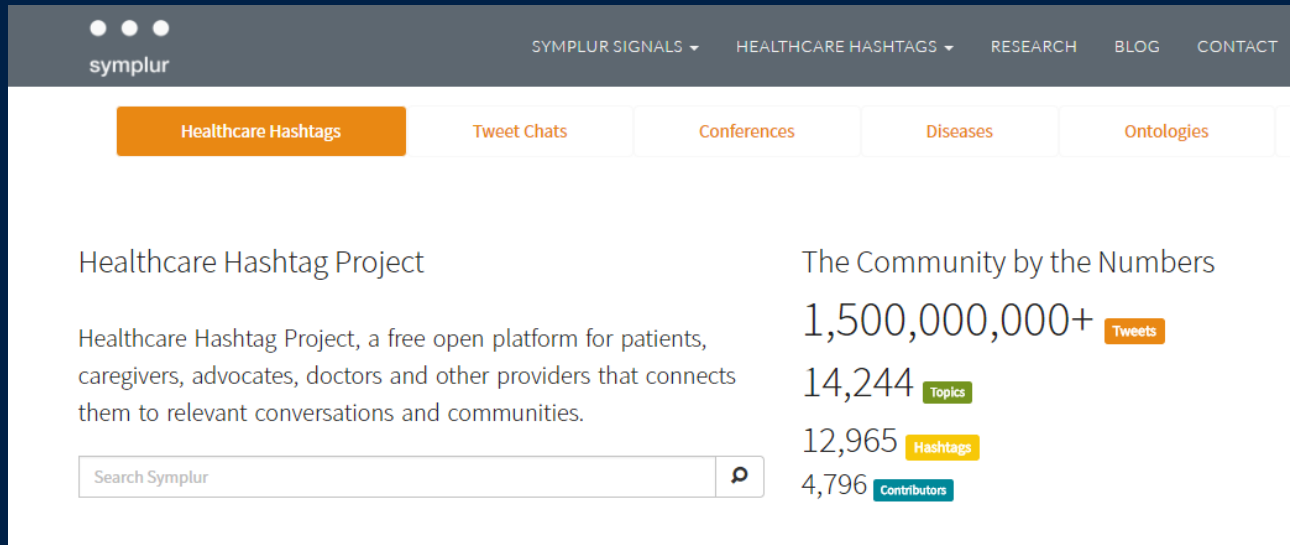
#generalpractice

#dementia

#obesity

**#WhyWeDoResearch**

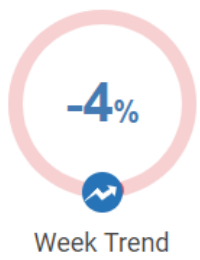
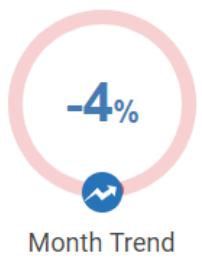
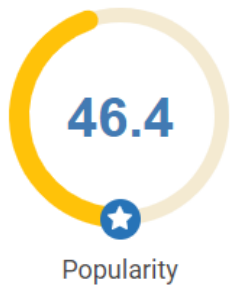
#heartfailure



The screenshot shows the Symplur website interface. At the top, there is a navigation bar with the Symplur logo and links for SYMPLUR SIGNALS, HEALTHCARE HASHTAGS, RESEARCH, BLOG, and CONTACT. Below the navigation bar, there are five tabs: Healthcare Hashtags (highlighted in orange), Tweet Chats, Conferences, Diseases, and Ontologies. The main content area is divided into two columns. The left column is titled 'Healthcare Hashtag Project' and contains a description: 'Healthcare Hashtag Project, a free open platform for patients, caregivers, advocates, doctors and other providers that connects them to relevant conversations and communities.' Below the description is a search bar with the text 'Search Symplur' and a magnifying glass icon. The right column is titled 'The Community by the Numbers' and displays four statistics: '1,500,000,000+' with a 'Tweets' label, '14,244' with a 'Topics' label, '12,965' with a 'Hashtags' label, and '4,796' with a 'Contributors' label.

<https://www.symplur.com/healthcare-hashtags>

Results for: #primarycare [Get Extension](#)



### Related Hashtags

CORRELATION POPULARITY



### Top Influencers

ALL-TIME RECENT

Influence Specialization Followers

|               |  |  |  |  |
|---------------|--|--|--|--|
| @NHSEngland   |  |  |  |  |
| @Philips      |  |  |  |  |
| @TheKingsFund |  |  |  |  |
| @HHSGov       |  |  |  |  |

[See Top Influencers Tweet](#)

**#GPACF18**

**39 PEOPLE**

**119 TWEETS**

**REACHED 32,906!**

## **8 top tips to win with social media**

1. Getting started – have a plan
2. Consider your platform
3. Post about lots of things
4. Have dynamic, sharable content
5. Boost your audience reach with hashtags
- 6. Familiarise yourself with social media guidelines**
7. Be smart, listen and understand your audience
8. Engage your research community

Enter search term

This site  University of Oxford



UAS Home > Personnel Services > During employment > Social Media Guidelines >

- › Latest news
- › A-Z
- › Recruiting staff
- › During employment
  - Hours of work
  - Leave
  - Flexible working
  - Family leave
  - Work-related stress
  - Grievance procedures
  - Disciplinary procedures
  - Training and PDR
  - Management of a reorganisation
  - Sickness Absence Management
  - Social Media Guidelines**
    - Guidelines to consider when using social media platforms
    - Other relevant guidelines
  - Staff-student relationships
  - Overseas work
- › Ending employment
- › Reward
- › Templates and forms
- › Staff Immigration Team
- › HR Information Team
- › Using HRIS
- › Departmental Administrators Project
- › About us
- › Contact details
- › Information for staff

## Social Media Guidelines

### Introduction

The University of Oxford recognises the advantages and the importance of using social media within both [professional and personal](#) spheres. However, with constant developments and changes in the way online interactions occur, it is important to be aware of the potential issues and risks that can arise from its misuse.

These [guidelines](#) outline the standards the University expects its staff members (including visitors and contractors) to follow when using social media, and engaging in any form of online interaction with the University.

### Scope

These [guidelines](#) apply to all members of staff, including casual staff, volunteers, interns and casual workers, intended to protect the University's confidentiality, and to avoid legal issues.

These guidelines should be read in conjunction with the University's policy on the use of social media provided by [IT Services](#), your department, and all [other relevant policies](#) within this guidance.

#### › What is Social Media?

#### › Professional use of social media

Social media allows members of staff to connect with internal and external networks. The University recognises that some staff use social media as part of their normal work duties.

While participating in any of the above activities, members of the University staff should be aware of representing the University and its reputation.

#### › Personal use of social media

Use of social media at work must be in accordance with the employing department and/or division, and briefed on any such policies or procedures of the division.

Staff members who use social media for work should use a separate, online account/profile, which is intended specifically for such use.

### Relevant links

- › Guidelines to consider when using social media platforms
- › Other relevant guidelines
- › Using social media in pre-employment screening

### Relevant links

- › Using social media in pre-

General Medical Council

Registration and licensing
Ethical guidance
Education
Concerns
About

Home > Ethical guidance > Ethical guidance for doctors > Doctors use of social media

## Doctors' use of social media

This guidance tells you the benefits and risks to consider when using social media platforms such as Twitter, WhatsApp, Facebook, YouTube for patient care or discussing patients and their care.

It includes how to avoid breaching confidentiality. It also deals with other issues like what to do if a patient contacts you through your personal profile. And whether it's ever acceptable to post anonymously.

This guidance came into effect 22 April 2013.

### Related content

Other sources of information

- British Medical Association - Social media - practical guidance and best practice
- Australian Medical Association - Social media and the medical profession – a guide to online professionalism for medical practitioners and medical students
- The Medical Journal of Australia - Social media and the medical profession
- Canadian Medical Association - Social media and Canadian physicians – Issues and rules of engagement
- College of Physicians and Surgeons of British Columbia - Social media and online networking forums

Access our guidance on your phone or tablet with our free app.

## 6. Familiarise yourself with social media guidelines:

Recruiting into a study?  
Are you following ethical guidelines



You could get  
quoted:



**SAY WHAT YOU MEAN  
AND MEAN WHAT  
YOU SAY**

GEORGE S PATTON

---

PICTUREQUOTES.com



- Don't tweet late at night after a few drinks
- Respond to your questions, it could be fruitful!
- An unhappy follower? Being trolled? Try to take it offline
- Tweets *can* be deleted

## **8 top tips to win with social media**

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8. Engage your research community


## 7. Be smart, listen and understand your audience:



### Tweet Activity



**OxPrimaryCareSci** @OxPrimaryCare  
GP referral to a weight loss group is effective & takes 30 seconds  
**#obesity #primarycare**  
<http://po.st/NDm54e>  
[http://www.thelancet.com/journals/lanet/article/PIIS0140-6736\(16\)31893-1/fulltext](http://www.thelancet.com/journals/lanet/article/PIIS0140-6736(16)31893-1/fulltext) ...  
[pic.twitter.com/xY8MaqOfZS](http://pic.twitter.com/xY8MaqOfZS)



**Reach a bigger audience**  
Get more engagements by promoting this Tweet!

**Get started**

|                   |        |
|-------------------|--------|
| Impressions       | 14,987 |
| Total engagements | 468    |
| Media engagements | 216    |
| Detail expands    | 73     |
| Retweets          | 68     |
| Likes             | 46     |
| Link clicks       | 45     |
| Profile clicks    | 13     |
| Hashtag clicks    | 4      |
| Replies           | 2      |
| Follows           | 1      |



## Account home

Dan Richards-Doran @DanRichards

Page updated daily

### 28 day summary with change over previous period



Mar 2017 • 19 days so far...

#### TWEET HIGHLIGHTS

#### Top Tweet earned 225 impressions

Are you a uni press officer/sci comm person? Do you use social media for work? Please do my short survey [#Science](https://www.surveymonkey.co.uk/r/SLXF2LM) [surveymonkey.co.uk/r/SLXF2LM](https://www.surveymonkey.co.uk/r/SLXF2LM)

👤 1 🔄 2 ❤️ 1

View Tweet activity

View all Tweet activity

#### Top Follower followed by 59K people



#### ALL SPORTS

@allsportsfbb FOLLOWS YOU

Offers & all the latest news from all the major sporting events around the world, football, darts, rugby, cricket, snooker, F1, boxing, 18+

View profile

View followers dashboard

#### Enrich your Tweets with Twitter Cards

Using Twitter Cards gives you greater insight into your URL clicks, app installs, and Retweets.



#### Top mention earned 16 engagements



Helen Atherton

@H\_Atherton · Mar 6

Coming to SW SAPC conference? Come join me and @EmilyFletcher1 at the [#phocus](#) lunchtime meeting ☺️ with our guest speaker @DanRichards [twitter.com/sapcacuk/statu...](https://twitter.com/sapcacuk/status...)

🔄 3 ❤️ 1

View Tweet

#### Top media Tweet earned 127 impressions

Please help with my small research project by taking this 10 minute survey [surveymonkey.co.uk/r/SLXF2LM](https://www.surveymonkey.co.uk/r/SLXF2LM) [#science](#) [#PublicRelations](#) [pic.twitter.com/ZhICK04FfK](https://pic.twitter.com/ZhICK04FfK)

❤️ 2

View Tweet activity

View all Tweet activity

#### ADVERTISE ON TWITTER

#### Get your Tweets in front of more people



Promoted Tweets and content open up your reach on Twitter to more people.

Get started

#### MAR 2017 SUMMARY

|                       |                            |
|-----------------------|----------------------------|
| Tweets<br>5           | Tweet impressions<br>1,384 |
| Profile visits<br>243 | Mentions<br>3              |
| New followers<br>12   |                            |

What do science communicators and STEM PR practitioners use social media for?

# What to monitor

- **Audience engagement** – is your audience interacting with your content
- **Impressions:** how many people see your tweets on their timeline
- **Audience profile:** Do you have a relevant audience?
- **Audience size and reach:** What is your follower count and potential reach

## Altmetric: article-level metrics



The screenshot shows the Altmetric interface for a specific article. At the top left is the Altmetric logo. The article title is "Screening and brief intervention for obesity in primary care: a parallel, randomised trial". Below the title is the text "Overview of attention for article published in The Lancet, October 2016". A large, colorful circular graphic on the left contains the number "1433". To the right of this graphic is a navigation bar with tabs for "SUMMARY", "News", "Blogs", "Twitter", "Facebook", and "Google+". Below the navigation bar is a question mark icon followed by the text: "So far, Altmetric has seen 709 tweets from 635 users, with an upper bound of 1,379,736 followers." Below this is a tweet from Richard McManus (@RichardJMcManus) mentioning several other users and a link to the article in GP.

Altmetric

? What is this page?

### Screening and brief intervention for obesity in primary care: a parallel, randomised trial

Overview of attention for article published in The Lancet, October 2016

1433

**SUMMARY** News Blogs Twitter Facebook Google+

? So far, Altmetric has seen **709** tweets from **635** users, with an upper bound of **1,379,736** followers.

 **Richard McManus**  
@RichardJMcManus

@Richard\_GP @DrSdeG @colincoulthard @mellojonny @acestoohigh This worked-Screening & b in GP <https://t.co/Veb7WsXrXC>

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**Go!**  
give  
it a

*If not, ask  
yourself –  
what's  
stopping  
you?*