

## Another post on my thoughts on the role of #FOANed.

What tricks do you have to get nurses involved in #FOANed?

There are no tricks! First look at what FOANed actually is. FOANed is the discussion in the hallway about something that interested a group of people. Nothing more, nothing less. It's not earth shattering, revolutionary or anything like that. It IS evolutionary. It's the logical evolution of behaviors and technology.

I consider myself one of the 1% or 5%. The group of people who tend to be at the forefront of change. Because I'm a geek I'm always playing with tech as soon as I can get my hands on it. But the tech is only part of it. Back in the 80s I wrote letters to authors asking about things in their papers, that led to phone calls. I save money and went to conferences and talked to people in the hallway. When the Internet kicked in, I started emailing people, mother that progressed to Listservs. Listservs allow you to send out an email, many automatically have it available to anyone who wants it. Sounds a lot like Twitter doesn't it. Then I used compuserver AOL and Yahoo groups. I just about flipped over RSS feeds, it came to me and I didn't have to remember to check web sites frequently. Somewhere in there Adobe came up with a file format called a Portable Document File or PDF. This allowed us to share documents. Now that was a game changer.

The point of all this, is to point out that I a geek, and I use #FOAMed and FOANed every day. Well I use the components of it. I constantly see people pushing this as a GAME CHANGER. I disagreed with people on Twitter last night and 149 characters at wasn't adequate to get my point across.

None of this is new! That term FOAMED that came about over a pint did something. It gave a name to the current evolution of a concept. It allowed us to use one phrase to describe something, and not have to get bogged down in phrasing. Like every "new" concept it had to happen at the right time with the right technology. The key player here is the technology and not the concept. By giving it a name it merged the tech and the concept.

So these is my personal thoughts.

There are a lot of things going on that are being pushed under the FOANed FOAMED banner. There is a lot of overlap here.

Open source - people are tired of paying \$\$\$\$. Just like people are tired of paying the cable company and are dropping their cable and using technology to get their media over the Internet, people, are tired of paying for research, journals, etc. They want it free and open to all.

Open source also means that people are producing their own content and sharing it. Because it open source, if you find something interesting, you can share it with others legally. Remember in most cases it's not legal to take a PDF of an article and share it with everyone. There are specific rules.

Communication - Mobile operating systems I.e. IOS and Android combines with the current evolution of hardware allows me to communicate with people. I could communicate and share before, but the affordability and ease of use, now makes it say for me to chat and share with people all over the world and not just in my little limited neck of the woods. This communication in lived Twitter of course, but somewhere along the line you need more than 140 characters.

Curation - storing and sharing the things that interest you. This is producing anything. But it is an important part of the open source movement. You can find things anywhere. YouTube, Pinterest, Google, PubMed, RSS feeds.

Sharing - just sitting at home sucking up information is only a small part of this movement. It's strength is that smart people share.

What makes Scott Weingart, and Amal Mattu, and

Ian Miller so great (this is by no means an inclusive list)? They are sharing, they blog, they podcast, they tweet. They encourage discussion. And if you contact them offline, they will respond and share.

My issues with the current state of affairs. As nurses those of us who use the Internet and its communication tools to advance our professional development are the 5% right now. We are the people who at a conference, stick around and ask the presenter questions, we are the nurses who picked up the doctors journals when they left them laying around and read them. We looked stuff up in the old edition of Rosen or Tintinalli that was there in the ED. We made sure we were standing close by when teaching rounds were being held. Those same options were there for every other nurse, they just weren't utilizing them.

Just telling nurses to use FOANed isn't going to change anything. Without addressing an underlying behavior change, FOANed isn't going to change anything. I've already seen it. Nurses and doctors picking up on FOANed and FOAMED and going gang ho and then getting busy and distracted and falling off the wagon.

My problem with the discussion I had last night wasn't the other people involved, it was my inability to verbalized my thoughts in 140 character bursts.

Is the open source movement important. You bet your bippy it is. But by focusing on one word, an important word mind you, but

one word, we are doing our fellow nurses an disservice. The choir is already on board, it's time to change a basic nursing mindset. We need to start pushing one basic concept, and that is **WE ARE RESPONSIBLE FOR OUR OWN PROFESSIONAL DEVELOPMENT**. Just repeating the same day over and over again will not make us an expert nurse. We have to do like Bill Murray in Groundhog Day. We have to learn something everyday. The cost of conferences, and journals and now time are just an excuse. We need to get our peers interested in life long learning. We need them to **WANT** to read beyond the abstract and conclusion. We want them to think critically about things they see and read  
The advantage of the current tools is that they can be customized to fit just about any need. Curation and sharing is just as important and producing original content.

So what am I proposing. A multi phase assault on nursing. Only part of it is online. It starts by leaving interesting articles laying around the nurses station, then discussing them with coworkers and docs. Then show them RSS feeds. Show them NursePath, and then any specialty blogs or podcasts. Get a discussion going face to face at work on things **YOU** find. If you get to the point where others are finding things before you do, then bring in Twitter, show them that can discuss things with people all over the world. That way you can bring others in along the adoption curve.

FOANed without face to face interaction with our peers is putting the cart before the horse. You need both.

Open Source is important, sharing online is important, FOANed is important. But changing behavior is even more important.

So to those I offended last night, does this rant make my point clearer? I should never have tried to carry on that conversation at work, at 0300 hours. Although I had issues with that one NursePath post this is one I really like.

<http://thenursepath.com/2015/10/04/changing-the-model-to-more-affordable-access-medical-education/>

p.s. My thesis is on using Web 2.0 to support professional development.