A new website and discussion groups for the British Pain Society and the use of Monkeys? Results of the consultation of the BPS Council and Membership

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I hope that many of you took the opportunity to participate in the online survey considering the future of the web presence of the British Pain Society (BPS). The BPS Council was becoming increasingly concerned that the website was not adequately fulfilling the needs of the membership and the secretariat staff who had to maintain it. The special interest groups (SIGs) wanted more interactive sections on the website, including the ability to upload documents and to facilitate discussion between members.

In addition, it was suggested that the application process to become a member of the BPS, renewal of membership and registration for meetings were all rather slow and cumbersome; this could perhaps be streamlined and automated by a more efficient online process.

The calls from the membership for the setting up of online discussion groups win the most part, driven following the setting up of a group (by myself) for consultants in pain medicine a couple of years ago. This group now has over 350 members and by any standard has proved to be exceedingly popular and helpful both for clinical and related issues.

The BPS Council authorised a working party chaired by myself and ably assisted by a number of individuals who freely gave up their valuable time to meet in London. I reported the setting up of this group and membership in a previous issue of *Pain News* (Autumn 2011, p. 36). We came up with proposals that were examined by the Council and other interested parties. I decided that I would set up a survey to try and gauge the overall opinion of the Council about the website's priorities. I decided to try my hand at setting up a SurveyMonkey and found it exceedingly easy to do. Importantly, it would analyse the results in a basic fashion and produce some pretty pictures of the findings. I set up an online SurveyMonkey initially to gauge the views of all those Council members who had contributed to the initial document and then created a similar survey for all the members.

The questions asked and the results of the final survey are given in Figure 1. 112 people took part and probably reflects those who are particularly interested in online activity. Accepting the fact that the results will be biased by who took part, we also have to accept that these are exactly the people who will probably use an updated website. We decided that certain things had to happen including ease of maintenance and adaptability of the website by the Secretariat; however we had to brainstorm other items that we need to put to the membership because each extra item would cost extra finance. Putting aside the basic issues like ease of maintenance, it was clear that Council and the membership wanted very similar features as seen below.

The results of the survey are in Figure 1. For convenience the questions are displayed above the graphs.

Professional perspectives

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The British Pain Society has a membership of over 1,400 and is involved in all aspects of pain and its management through the work of the Council, Committees and Working Parties. Further information can be found within this 'About us' section.

There are many points to highlight, but what struck most of us on looking at the results of the responses to the first question is that as well as wanting accessibility from slow internet connections and mobile phones, many of you wanted regular email updates from the BPS to its members telling them what is happening in the world of pain. Interestingly, these content-rich email updates are relatively easy and cheap to set up and it does look like the Council may well institute this fairly promptly as it does not require the website to be revamped.

In addition, the Council and members of the BPS desired some form of discussion group activity. There are two ways to have these: one where you have to log in and then see what discussions have taken place; and the other is what is known as 'push e-mail', where as discussions happen, the emails come to your inbox. The latter can mean that your inbox can be rapidly bombarded by dozens of emails if there is a particularly vibrant discussion; however, one can modify this by having a once-daily email or summary of discussion sent.

Setting up of this type of system can be expensive but there is actually completely free software in the form of

Google groups, which has been used successfully by the pain consultants for their own group. I originally set up and run this pain consultant Google group and I also troubleshoot it; so far the system seems to run surprisingly well. However, there are very valid issues that need to be addressed, for example:

Who will moderate the discussion group?

What happens when somebody posts an inflammatory comment?

Do the posts get screened before they are put online or does this happen in real time?

What about legal liability of anything said on the group?

How do you know who everybody is?

Have the email addresses been verified?

How private are the discussions?

These are very important points that had to be addressed when the consultant discussion group was set up. From this experience, I hope that the setting up of the BPS discussion groups will be a much smoother experience. To

address some of these issues, there was a desire expressed to integrate such discussion groups into the website, so that when one logs in to the website as a member, one will automatically be known when one then logs in to the discussion groups. However, this would prove more expensive and leads to the second question (Figure 2).

As it can be seen, there was a strong desire for the discussion groups. If the cost was too high then we would need to use the independent free software to set this up, if we could address the other issues.

Coming back to the financial issue, the BPS like other charities has experienced a reduction in income and therefore has worked hard to improve its efficiency. The President no doubt will inform you of the decisions that have been made, so the question from my point of view was: Is it actually necessary to revamp the BPS website at all? The BPS Council was very keen to revamp the website and Figure 3 shows its views alone.

Interestingly, when the same question was asked of the membership this was the response (Figure 4).

As can be seen, most of you felt that a general revamping of the website could probably wait until finances improved. Accepting that those who took part would generally be interested in online activity, a significant minority did not feel that revamping the website was very important. The significance of this finding will need to be taken on board by the Council, particularly as there will be a cost implication for revamping the website and for maintaining it at a higher level of 'web presence' then currently.

These findings are still being considered by the Council, but it does seem that so long as we institute well-monitored and moderated discussion groups and send out content-rich emails to inform the membership of current issues, then we will have fulfilled two of the main desires of the membership.

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Figure 1

We as the Council have commissioned a sub group to look at redeveloping the British Pain Society website. We have identified a number of features we think are absolute priorities and will be commissioned on the new website regardless, including ease of updating of the website for the Secretariat, calender of events, council only section and provision on the website of publications from the BPS including the Newsletter and British Pain News. We need to know what other features you would like because every additional feature will involve expense. For explanation if we mention push e-mails that means the e-mails will be delivered actively to your e-mail box otherwise you will have to log in. This is a crucial difference for different types of discussion groups, some of which you need to log in to and others where the discussions will be sent directly to your e-mail box (push emails). Please rank the following items, if you rank something as number one then it will be the highest priority, as you rearra
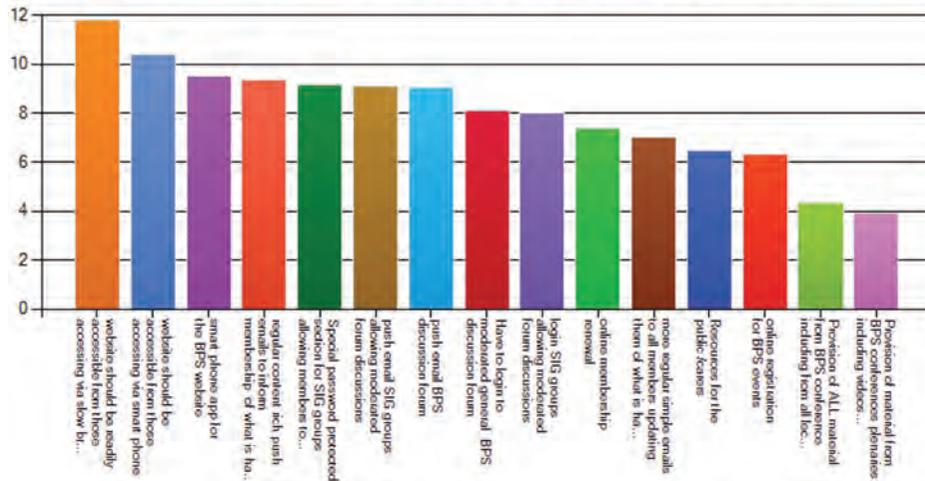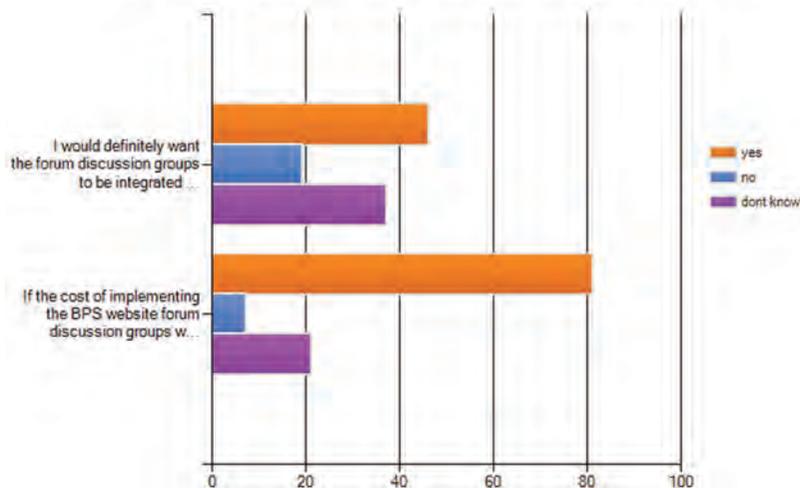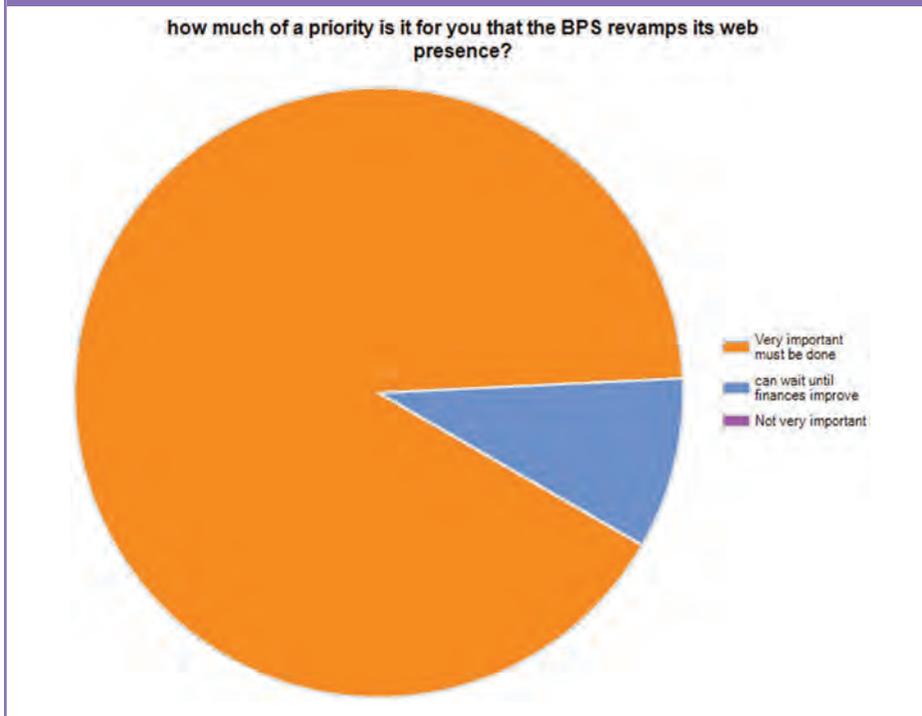

Figure 2

Preamble : If the development of the general BPS and SIG discussion forum could be done free of charge say by utilising free google software, would this be preferable then to having it developed and paid for as part of the BPS website? Please note just because its free doesnt mean we should go for it, implications might include that members would be less likely to login to the website. Aso control of identity and membership of discussion groups could be much more easily linked to BPS membership using our own website. However by using google, it does mean if the BPS website went down, the discussion groups would continue. We have posed two questions below

Figure 3

how much of a priority is it for you that the BPS revamps its web presence?

- Very important must be done
- can wait until finances improve
- Not very important

Figure 4

How much of a priority is it for you that the BPS revamps its web presence? We ask this is because in the current climate there has been a general decrease in the income of the British pain Society as well as a general increase in outgoings. We have to ask the question how much of a priority is it to you that the updatedwebsite including the provision of discussion groups is provided by the British Pain Society?

- Very important must be done now
- Can wait until finances improve
- Not very important

Economically, it is going to make sense to link membership renewal and online registration for the Annual Scientific Meeting, as well as making the website easier to maintain, as we will save a lot of money. I think we will probably end up redeveloping the website in a modular form, but this will be for the technical personnel to tell us how feasible it will be.

Thank you for taking part in the survey, I hope you will notice the benefits of all this activity very soon, and of course we will keep you updated of the developments.