

# Volume 12, Issue 1 /2010 - PR and Communication

Social Media: An Essential Tool or Passing Trend?

Social media is taking the world by storm. Everywhere people are increasingly communicating online; writing blogs, creating Facebook profiles, sharing videos on YouTube and tweeting on Twitter. I spoke to two leading healthcare social media moguls, Ed Bennett from the US and Lucien Engelen from the Netherlands to find out why exactly social media is so important to healthcare.

Contrary to popular belief, social networking is not just for teenagers planning their social lives. Now even companies have Facebook profiles and Twitter accounts; politicians need to blog and secure a strong online presence to win elections, especially to attract the 18-30 vote. But do hospitals really need to get involved?

Well, Bennett and Engelen are the men to ask. Very passionate about the subject, both are charting the use of social media in hospitals. Ed Bennett started his Hospital Social Network List in December 2008, to monitor hospitals in the US and list those with Facebook, YouTube and Twitter accounts (ebennett.org/hsnl). Inspired by the American list, Lucien Engelen started with a list of Dutch hospitals using social media and then expanded this to a European list (hospitalseu.wordpress.com). Engelen's list focuses less on marketing and communication and more on the use of social media to dialogue with the patient.

# So Why Social Media?

Ed Bennett has been working on the web since 1993 and at the University of Maryland Medical System (UMMS) since 1999. Wary of how slow hospitals were to understand the value of the Internet, he does not want to see the same situation with social media, "When I realised that social media was just as important as the invention of the web- that is how I feel. I feel that the development of social media, its adoption by people, is that fundamental a change. I was concerned that once again, hospitals would be five to six years behind everybody else." He decided that social media was something to be taken seriously and so came the motivation for his list.

Bennett uses social media as an extension of his hospital's normal communication activities, "In addition to press releases and other media we are also making ourselves available on Facebook and Twitter, on YouTube and on our blog and welcoming conversations. I don't see it as being that dramatic a shift, it is simply an extension of what we have been doing." UMMS uses Facebook, Twitter and YouTube. There is also an active blog, "Life in a Medical Center", and an application for the iPhone. Different departments have their own accounts to keep their patients updated on the latest news and developments.

For Engelen, (Health 2.0 Ambassador and Head of Emergency Healthcare Network at Radboud University Nijmegen Medical Centre) social media is less about public relations and more about the care process. It is about how patients can use the tools to gather information and have more say in their care pathway; social media promotes participatory healthcare. He believes that with new technologies and increased patient participation, healthcare delivery is possible in online healthcare networks and importantly that this is happening now and it is not simply something for the future.

Speaking of his professional use of social media at the Radboud University Nijmegen Medical Centre, Engelen cited two examples illustrating the importance and benefits of social media. His colleague, Prof. Dr. Jan Kremer invented the digital IVF Clinic where "IVF couples can interact with each other about their experiences, problems and also just socialise in a chatbox-like environment."

The virtual clinic allows patients to ask questions to the doctor or nurses or other patients in an open or private chat. The benefits of the digital clinic include a decline in the number of appointments needed as within 24 hours the doctor/nurse will respond online. Patient satisfaction also increases as patients have the opportunity to participate in their care. As well as these proven advantages, according to Engelen's colleague, Dr. Kremer, programmes like these make "healthcare more sexy".

Engelen also praised the networking capabilities of social media. When looking for someone to help him programme a website in Google maps and an iPhone app for his project www.aed4.eu he would normally have to ask one of his team to scout the market. Thanks to Twitter, he just tweeted and asked his followers who could be of any help. It was a great success, "Within the hour I had six leads, researched them on the Internet, choose the best two, one didn't pick up the phone but the other one was a catch. Within 3 weeks I had a running beta and we presented at reshape 2009".

Social media incites conversations, promotes discussion. In the same way Engelen and his colleagues discuss technical problems and search for professional advice, patients can communicate directly with hospitals, they can ask questions, make complaints, thank their caregivers and find out more about their diseases.

#### Control vs. Conversation

Social media is a relatively new concept and for many hospital managers a frightening one. An account on a social networking site can have a huge impact in a very short period of time; for example videos posted on YouTube can become overnight successes with thousands of people watching and commenting.

With this open communication comes the opportunity for criticism, which is a daunting prospect for hospitals. Why are so many hospitals wary of social media?

Engelen cites three reasons why hospitals are wary of social media. Firstly, "the unknown" aspect; it is new and many are unaware of the power and spread of social media and of Internet use. The second reason concerns evidence; in healthcare we look for evidence-based solutions: evidence of success, real numbers, cost efficiency and medical facts. But this is not available for social media, which is only starting to make an impact on healthcare. The third issue is control; healthcare boards and management tend to control information but social media, as Engelen puts it, "has the taste of the uncontrollable". Conceding that this is partially true he does however emphasise that with good policy and strategy it is possible to increase interaction with patients and their informal care without jeopardising reputation.

For Bennett, managers shouldn't be hesitant, "we are simply doing the same thing we have always been doing but now we are utilising new tools that people want". The control issue however, produces a much stronger response. On asking Bennett the control question he went straight to the point, "Get over it! You never had control, it was an illusion". He stressed that the common concern of what happens if someone says something bad about you isn't that important and that people have always been criticising services and staff.

"No one is perfect. There is always someone who is not happy with your organisation or some aspect of it. And up until now they have been able to talk to their neighbours, friends and co-workers...they were always talking about you. Now they are out there on the web talking about you, talking to their Facebook friends and their Twitter friends. So you have a choice as an organisation: you can ignore them and pretend that they are not talking about you, or, you can join the conversation and try to resolve the problem."

Yes, the criticism is out there for everyone to see but so is your response, turning a negative situation into a positive, "If you do that then everyone else in that community is going to see that interaction. They are going to see that someone had a complaint and that you stepped up and said sorry that you have a problem, how can we help you".

Bennett makes a good point, how can we defend ourselves, and our services if we neglect to join the conversation? Facing up to criticism, listening to those who use our services and their opinion can help improve services and increase customer satisfaction. Social media also allows us to see positive comments and success stories that we might not have seen before.

## Finance and Practicalities

So far we have seen a lot of positives: increased communication and interaction with patients, increased visibility and transparency and a wide variety of networking opportunities. But what about the practicalities? Two vital questions must be answered: firstly, how much will it cost? And secondly who will take care of it?

For Ed Bennett the extraordinary thing about social media is that these tools are essentially free, you can set up an account on YouTube, Twitter and Facebook or start a blog for free and reach a worldwide audience. Indeed, because these tools are free and relatively easy to start up and maintain they are often overlooked, their value underestimated.

The main investment is not financial but peoples' time; someone needs to update the blog, post on Twitter and respond to queries. UMMS does not have a specific staff member solely in charge of social media, instead several people in the communications office spend a small portion of their day updating on one of the social media sites. For example one person maintains and monitors the Facebook account. This is just simply one of their duties and not a full time job. Bennett estimates that a half hour a day updating, taking a look at comments, maybe responding to comments or passing them on is all that is needed. The great thing being you can spend as little or as much time as you want but you don't have to invest a lot.

## Outlook for the Future

Social media will only grow in importance, and new, more advanced methods of social networking will undoubtedly be developed. For Bennett, in the next few years it will become expected of hospitals to use social media. While at the minute patients still find it pleasantly surprising to find hospitals on Facebook, in the future the surprise will be not being able to find them on there, "I think you are going to see a very quick change in what the expectations of your community are and the reaction isn't going to be 'oh that's really great they have a Facebook account!' the reaction is going to be 'what is the matter with these people, why don't they have a Facebook account?"

Bennett likens this situation to conversations he had in the late 90s when hospitals were debating setting up websites, a decade later it is unthinkable that a hospital wouldn't have a website, he believes the same thing will happen with social media and the great part is it doesn't involve spending any money!

Engelen is also very sure of the importance and the future of social media in healthcare, not just in PR and communication but also in patient care. I asked him for a few words of wisdom for any hospital managers considering branching into social media, his answer: "Yes. Three things: start, start and start!" He recommends starting small and broadening afterwards instead of diving into social media with a big bang; most of all he stresses not to be afraid.

From talking to Bennett and Engelen it is clear that social media has already made an impact in the healthcare sector and that there is also great potential for further development. Their lists show how more and more hospitals are using social networking sites in both the US and Europe and how it is becoming part and parcel of everyday hospital activity. It would seem that social media is not just a passing trend but an extremely useful, and soon to be essential tool for hospitals and healthcare institutions.

Published on: Mon, 1 Mar 2010