

Health Care Social Media: Getting Executives on Board



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Among health care marketing/communications professionals, there is a gut-level recognition that social media are an important part of a marketing mix. Yet, when it comes to pitching social media to the “c-suite,” it can be challenging to clearly quantify impact and return on investment (ROI).

If you are still in the early stages of implementing your social media strategy, tracking the number of “likes” and followers may get you by. However, soon the time will come when your chief executive officer (CEO) or chief financial officer (CFO) will ask how all of your efforts are impacting the bottom line. Failure to clearly articulate a case for a robust social media program, whether in financial or other beneficial terms, could result in fewer resources, poor market position, and potentially missing opportunities to provide timely care to those who need it.



SO, HOW DO YOU MAKE THE CASE TO THE C-SUITE THAT SOCIAL MEDIA ARE WORTH THE EFFORT?

Before you even consider discussions with your c-suite, you should be able to answer the following questions:

1. How Will Social Media Support Your Business Objectives?

Feeling the pressure to “get on social media,” many health care marketing professionals have decided to open up accounts and “wing it.” While this experimental approach can yield the occasional victory, it is much easier to obtain executive support if you can show that your efforts will align with your facility’s core business objectives.

“You have to establish your objectives; they have to be measurable objectives that support a strategy, that support a business goal,” says social media expert Shel Holtz. “By starting off with the identification of the business goal, you’re able to produce the metrics that show you’ve supported that goal.”¹

Howard Luks, an orthopedic surgeon in Westchester County, New York, has used social media to grow business and create more efficient visits with patients.

“15% to 17% of patients are there because they have ‘seen me online,’” says Dr. Luks. “They see my videos and they get comfortable with me. We can just sit down and start talking. Patients can be awkward and quite fearful in initial meetings, and that causes them to forget what they were going to ask or not focus on the reason they are there. Social media allows you to humanize your organization.”

“Why would you spend money on anything unless you knew what outcome you wanted to get out of it?” says John Luginbill, CEO of [The Heavyweights](#) marketing firm. “Why would you put the effort into any piece of marketing unless you knew what you wanted to have happen? If you don’t know what you’re getting out of social media, but you have this random idea that you ought to put wellness information out, quit wasting your time and money and focus on doing what you understand.”

“IF YOU DON’T KNOW WHAT YOU’RE GETTING OUT OF SOCIAL MEDIA . . . QUIT WASTING YOUR TIME AND MONEY AND FOCUS ON DOING WHAT YOU UNDERSTAND.”

~John Luginbill
Chief Executive Officer,
The Heavyweights

At the very least, social media should be used to support goals related to customer service and reputation with your key stakeholders. At best, it should be used to drive patient volume, increase revenue, or produce savings.

2. What Channels Are the Best Fit?

There are a dizzying number of social networks available, and even within “the big four” of Facebook, Twitter, YouTube and LinkedIn, there are demographic hot spots you will want to understand and monitor, to make sure you are using resources efficiently. Looking to reach seniors? Twitter may not be the right place. Want to ease patient fears about certain procedures? YouTube videos might do the trick.

“Rather than shoot for the moon, and say ‘let us use any social media that we want at Albany Medical Center,’” says Nicole Pitaniello, Assistant Vice President for Communications, “we did an analysis of what social media would be most advantageous and the one that we could manage. For us, that was Facebook.”

Health care social media have evolved to the point where mistakes can be avoided by looking at the successes and failures of others. Many facilities, systems, and national organizations are using creative strategies with limited resources to strengthen their ties with their key communities and/or produce positive business outcomes. **Select the network where your audience is, and that will best support your goals. Start by visiting the more popular social networks and see what people are saying about your industry, your facility, and your employees. Search on each platform for keywords associated with your business to find interest groups and content related to your business goals.**

3. Are You Able to Commit to Making It Succeed?

“Before presenting to our executive staff, we did probably six to eight months of research,” says Ms. Pitaniello. “We took an inward look at whether or not we were willing to do what needed to be done to make it a success for all of our constituents.”

How much time you will need to plan, execute, and measure the effectiveness of your social media strategy depends on what business goals you have chosen.

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Assistant Vice President for
Communications, Albany
Medical Center, Albany, NY

“This idea of social media being free is a myth,” says William Van Slyke, Vice President, Communications, Public Relations, and Marketing for the Healthcare Association of New York State (HANYS). “The tools may be free, but it can take significant staff time to get started—and there’s a cost associated with that, even if it’s the cost of having staff not working on other projects.”

Ms. Pitaniello says part of Albany Medical Center’s commitment was making sure that when a public relations staff person is on call, he or she is automatically e-mailed updates from Facebook when comments are posted—providing around-the-clock service through their Facebook page.

“That was another promise we had to make,” she says. “When you take on a social media tool that is open 24/7, you have to be available to support it.”

Using RSS feeds and tools like [Google Alerts](#) and [HootSuite](#) can reduce the time needed to create and distribute content. However, depending on your goals, audience size, and the nature of your content, you still may need to commit serious resources in the form of staff time to actively engage your audience—for example, shooting and editing video for a dedicated YouTube channel. **Presenting a manageable program using existing resources will make your pitch more palatable.**

4. How are Social Media Being Used by Others?

There are certain business challenges that every hospital is trying to meet: increasing patient volume, improving outcomes, providing excellent customer service, and maintaining their reputation. So it is certainly worth understanding how an organization with ample resources is using social media, and considering how you might adapt its tactics to meet your own goals. However, keep in mind that duplicating outright what another or larger facility or system is doing could backfire because its strategy is unique to its particular business goals.

Examples from organizations your c-suite holds in high regard, or even from your competition, may wind up being some of the most effective tools in making your case.

OVERCOMING OBJECTIONS

C-suite objections to social media are as varied as the communication tools themselves. Below are some frequent objections:

1. It is a Waste of Time

If your CEO still thinks social networking is for college kids to post photos of themselves binge drinking, you may have a problem. It has matured into a powerful communications medium that is not going away anytime soon—and neither are the health care consumers who use it.

“Folks can argue that MySpace came and went, and the same will happen with Facebook and Twitter, and there might even be some truth to that,” says Chris Bevol, President of the health care marketing firm [Interval](#). “The tools may come and go, but the idea of social networking is not going away—and people will start to become noticeable by their absence.”

A recent report by the research organization [YouGov](#) suggests it is already happening. Eighty-one percent of consumers believe that if a hospital has a strong social media presence, it is likely to be more cutting-edge, and 57 percent said that a social media connection with a hospital was likely to have a strong impact on their decision to seek treatment at that hospital. ²

The following data points may be helpful in showing just how seismic the shift in online communication has been:

Social Media in General

- Half of American adults use social media sites. ³
- The increase in the use of social networking has been most pronounced among those who are over the age of 35. ⁴
- For those 65 and older, usage has gone up 154% since 2010. ⁵
- 52% of Facebook users and 33% of Twitter users engage with the platform daily. ⁶

Facebook

- Facebook is the most popular site on the Internet, with more than 800 million users. ⁷

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of consumers said a social media connection with a hospital was likely to have a strong impact on their decision to seek treatment at that hospital.

- If Facebook were a country, it would be the third most populous, behind China and India. ⁸
- The average user is 38 years old. ⁹

Twitter

- Averages 460,000 new accounts every day. ¹⁰
- More than 100 million users send more than 140 million tweets per day. ¹¹
- The average user is 39 years old. ¹²

YouTube

- More video is posted on YouTube in one month than ABC, NBC, and CBS have produced in the past 60 years. ¹³

LinkedIn

- Growing by two new accounts every second. ¹⁴
- There are 900,000 interest groups on LinkedIn. ¹⁵
- The average user is 44 years old. ¹⁶

So half the country is using social networking to show photos of their kids' dance recital. Big deal, right? Not so fast. Empowered health care consumers are using these networks to educate themselves, make decisions about where they will receive care, and comment on the care they receive. Social media is increasingly where your customers are.

“In every surgery waiting room, there are people with open laptops and smartphones and they're telling their community what's happening,” says Mr. Luginbill. “There's someone who's tweeting or posting or reviewing on someplace like [Yelp](#) or [Google Plus](#) about the kind of care that mom or dad are getting. Or we're sitting here while our baby's getting surgery and this is who's treating us and this is how we're being treated.”

Consider the following:

- 83% of Americans have used the Internet to look for health/medical information. ¹⁷

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~John Luginbill

- One in five uses social media to make health care decisions. ¹⁸
- 67% of all prospective elective patients search the Internet before making a provider decision. ¹⁹
- Computer-based patient inquiries have a much higher probability of having a reliable payer than telephone-based inquiries. ²⁰
- 90% of consumers trust peer recommendations; only 14% trust advertisements. ²¹

The combination of these data points dispels the myth that social media are just toys. If 20% of Americans are using the largest and most popular networks in the country to inform their health care decisions, why wouldn't you maintain a presence there?

2. Negative Comments

It can be a difficult pill to swallow, but the bottom line is, negative comments about your facility are going to happen. In fact, they already are.

“Your organization was opened up to negativity when it opened its doors,” says Mr. Bevolo. “These things are out there, on Twitter, on Facebook, on the comments sections of news sites, whether you're there or not. So the question becomes, do you want to try to engage in the conversation and try to help manage that in an appropriate way, or are you going to be completely absent from those conversations? There's a right way to do it, and certainly the wrong way to do it is to not do it at all.”

Mr. Luginbill puts it more dramatically. “People act like ‘well I don't know if we want to be involved in social media’ and man, when you just give them a random sample of the comments that have happened in the last month about them, their facilities, their doctors, the way people have been treated, they'll realize—they're involved in social media up to their eyeballs! They're just not participating in any way to manage those outcomes or conversations.”

3. HIPAA Concerns

One of the biggest factors holding back organizations from using social media is fear of violating HIPAA regulations. The fines can be so hefty that many facilities block access to social media for most staff, putting marketers in a bind. “Fifty-four percent of businesses block employee access to social media

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~Chris Bevolo
President, Interval

while they are at the office,” says Jessica Levco, Editor of *Ragan’s Health Care Communication News*. “I think it’s difficult for hospital communicators to be the advocate of social media if your nurses and doctors can’t even use it.”

David Harlow, lawyer and author of HealthBlawg.com, says that while compliance can be tricky, it is certainly manageable. “The key from a risk management and legal liability perspective is to have really good policies and procedures that are easily found and easy to understand—and that includes terms and conditions, and a suggestion that people think very hard before posting identifiable information. If people want to post about themselves in a public forum, that’s okay. But your hands are tied in terms of responding because of the concern that posting a response that really addresses the core of the issue is going to violate HIPAA by revealing additional information about the patient or their situation.”

The compliance issue extends into the blogosphere as well. Telling patient stories can be a great way to show how your facility provided exceptional care. However, if you’re just changing names and a few identifying details, Mr. Harlow says it may not be enough, and suggests that you obtain patients’ consent, in writing, to use their stories.

“There are 18 elements that have to be stripped out of a story to have it considered de-identified under HIPAA. Number 18 is the tricky one—‘anything else that can be used to re-identify the de-identified information.’” Meaning that you can remove most of the details, but if those details can be found in seemingly unrelated reports or datasets, you can still be found in violation. “As more information is put online, it becomes harder and harder to say that this is something that couldn’t be re-identified by someone else.”

Get Consent

The bottom line is, if you want to discuss patients in any way, get consent.

“HIPAA doesn’t prohibit the use of social media, but there are some rules of the road that you need to live by,” Mr. Harlow says. “And the principal rule is that you cannot disclose protected health information without the consent of the patient. In these times of the empowered patient, it’s not unheard of to have someone share very publicly what we might usually think of as private information. There are plenty of patients who are willing to share their stories online—which is their business. If you want to share their stories, it’s just like any other marketing, you get consent.”

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A question being asked with increasing urgency: What is the ROI of social media?

“A HOSPITAL IS A BUSINESS, AND YOU HAVE TO FIGURE OUT WAYS TO BRING IN PATIENTS—AND ONE OF THE WAYS TO DO IT IS BY USING SOCIAL MEDIA AS A SOFT SELL APPROACH.”

~**Jessica Levco**
Editor, *Regan's Health Care Communication News*

Mr. Luginbill concurs. “We’ve been using patients and doctors in ads since the late 70’s when we started advertising. There were over 700 hospitals as of the end of 2010 that had ongoing social media programs of some kind, and not one of those marketing departments have been cited for a HIPAA violation. The same way you never get cited for a violation when you use a patient on a billboard. Nobody in a marketing department posts anything about a patient without the patient’s knowledge.”

SHOWING RESULTS

A question being asked with increasing urgency: What is the ROI of social media? As health care reform takes hold and hospitals look for ways to trim the fat, marketers soon will be asked to justify what their efforts have done for the hospital. Whether your desired outcomes are financial (hard conversions) or less cut and dried (soft conversions), setting goals is only half the equation.

“If you’re a hospital communicator, it’s time to start measuring what you’re doing,” says Ms. Levco. “If you don’t, your successor will.”

Hard Conversions

Unfortunately, many struggle with the idea of making the transition from measuring followers to measuring dollars.

“It seems like people get really nervous about ROI as it relates to money,” Ms. Levco says. “But a hospital is a business, and you have to figure out ways to bring in patients—and one of the ways to do it is by using social media as a soft sell approach.”

Even for those who have been running a social media program for several years, tying tweets and status updates to the bottom line is perceived as difficult because of organizational silos, not having the right systems in place, or numerous other reasons.

Mr. Luginbill, who specializes in using social media to drive patient volume, says social media should be treated like any other form of marketing, and success starts by identifying service lines with excess capacity and developing a strategy to fill them.

“You have to decide ‘where are we going to play and how are we going to win?’ That forces people to say ‘who do we want to talk to and how do we define winning?’ Say, for example, a facility has capacity to do 50 knee replacements a week, but they are only doing 15 a week. Now they know how they want to win—they want to go from 15 knee replacements a week to 50. So where are they going to play? What geographic area? What demographic? What type of payer? Who can we target to talk about the value that we have here that would get people into a seminar to explore getting their joint replacement? So it’s very clear what they want to do.”

Easier said than done, right? What if you are a small shop with limited time/staff/support? The path to ROI nirvana is the same, says Mr. Luginbill, and bridging the gap between the traditionally siloed divisions of marketing and finance is the first step. Unfortunately, this is where many falter or just plain give up.

“Those conversations are not easy. It’s a different type of person that goes into hospital finance than one that goes into marketing, generally speaking. They can be highly skeptical of each other. The last thing a finance guy wants is someone from marketing blabbing about ‘hey we make a fortune on knees, we’re going to promote the heck out of that!’ But they need to learn how to speak each other’s language and help each other. We’ve seen it happen. CFOs get really excited about taking the resources in marketing and trying to further their metrics.”

Regardless of what you define as your target, it is critical that you measure and report your success on a regular basis.

“What’s measured grows. What’s measured and reported, grows exponentially,” emphasizes Mr. Luginbill. “There should be no money or effort put into anything that doesn’t have some kind of thought about what you want to be different from when you didn’t put the money or effort into it. You wouldn’t just buy newspaper ads and say, ‘I don’t know, I just feel like we ought to have newspaper ads.’ That’s nuts, but people do that with social media.”

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~John Luginbill

If you can do nothing else, you should at the very least have a system for monitoring online comments about your facility, and a policy in place for how to respond.

Soft Conversions

Even if you are not currently able to measure ROI in terms of the bottom line, there is plenty of non-monetary “low-hanging fruit” along the way that you can measure to illustrate the value of your efforts, including customer service, crisis communication, and reputation management.

Mr. Bevolo says in many cases, it is the cost of doing business. “Do you have people that answer the phone to help people who are looking for information or to schedule an appointment? Do you have folks at the front desk that are there to help provide information or direct people? These are things that are no-brainers, and I have yet to meet a CEO who would say ‘no, we shouldn’t have someone answering the phones.’ Those aren’t specifically high ROI activities, but they’re part of doing business.”

Among the initiatives where you might consider leveraging social media:

Reputation Monitoring—Listening is at the heart of patient satisfaction. If you can do nothing else, you should at the very least have a system for monitoring online comments about your facility, and a policy in place for how to respond.

“If you really feel like you need buy in, get a monitoring program and start telling the c-suite what people are already saying about them,” says Mr. Luginbill. “There’s no executive, there’s no hospital—there’s no one—that isn’t touched by social media.”

Customer Service (negative)—If you can get past the sting of negative comments, you may find them quite useful (assuming they are run of the mill complaints and not the rants of an angry “troll”). They offer customers the opportunity to tell you where you can provide better service, and they offer you the opportunity to make improvements, clarify misconceptions, and convert complainers into brand loyalists.

“We were able to overcome fear of negative comments by joining the conversation and being proactive,” says Ms. Pitaniello. “People are going to have those conversations anyway. It’s an opportunity to let people talk about the care they received and give us the opportunity to address it. It only helps build credibility for your institution.”

If someone complains, do you leave it out there for the world to see, or do you delete it? Leaving the complaint, with your response included in the thread, shows that you are listening and take such complaints seriously.

“Let it be,” advises Mr. Harlow. “Unless there is something clearly over the line in terms of identifying someone else or if it violates the terms and conditions you have set out. In addition, someone who cares enough to post a complaint online is more likely to become a brand ambassador once you fix his or her problem.”

Customer Service (positive)—Lifespan, a large hospital system in Rhode Island, uses Twitter searches to find mentions of their “@names” by people visiting their hospitals. While steering clear of discussing clinical issues or personal health information, they leverage social media to provide another touch point for care and further their mission of improving the health of their community.

“I’ve seen mentions by people visiting someone in the hospital, and I simply send ‘best wishes’ to them, only to get a very personal response, with an update on their condition,” says Lifespan’s Senior Media Relations Officer, Nancy Cawley Jean. “Often that is followed by a thanks for the wonderful care we’ve provided. It’s even led to continuing conversations with former patients! Of course we have to be very careful to not cross the HIPAA lines, but it’s definitely avoidable.”

Since the Mayo Clinic has visitors from all over the world, it has developed a comprehensive, almost news-like series of videos (<http://videotours.mayo.clinic.org/>) that show visitors how to navigate through everything from the airport to their cafeteria.

Crisis Communications/Public Health Alerts—During Hurricane Irene, the Red Cross mobilized volunteers to respond to the individuals and online communities that were reaching out for information. Aside from providing preparedness tips and shelter locations, they searched out communities that had set up Facebook pages to make sure the information being presented was accurate.²²

47%
of journalists
responding to a
survey said they
used Twitter to
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angles.

90%

Physicians who said they use at least one social media site for personal use. More than 65% use them for professional purposes.

Media Relations—A study on journalist usage of social media published in early 2011 by the Oriella PR Network showed that nearly half of respondents (47%) said they used Twitter to source new story angles. Over a third said they used Facebook (35%). Blogs were also highlighted as a key element of this process with 30% saying they used blogs they were familiar with, while 42% also drew from blogs they had not visited before. ²³

Just like in the real world, it is about relationships. Identify the key journalists in your geographic, demographic, or topical area and interact with them on a regular basis. Follow them on Twitter, comment on their stories or “mention” them and, as time goes by, provide them information about your facility that is as easy as possible for them to repurpose. Consistently provide useful, accurate information to foster a relationship that benefits you both.

Recruiting—Social media offer a three-pronged opportunity to attract highly qualified talent. First, its social nature enables you to amplify your message, reaching the widest possible audience in a very cost-effective way. Second, having a robust presence allows you to add greater context to available opportunities by illustrating requirements in more detail than the space allotted by traditional channels. Third, it allows you to set expectations up front, potentially decreasing first year turnover rates.

Nearly 90% of physicians use at least one social media site for personal use, and more than 65% for professional purposes. ²⁴ While much of this is physician communities like [Sermo](#), they are also using LinkedIn and Facebook (a combined 32% for professional purposes), making this fertile ground for your recruiting efforts. LinkedIn alone boasts more than 700 physician related groups.

While YouTube does not technically offer a place to post job openings, creating physician and staff videos can be a powerful supplement that can quickly deepen an applicant’s interest in your facility. [Texas Health Presbyterian Hospital](#), for example, features [several YouTube videos](#) in which current physicians describe everything from working conditions, to hospital initiatives, to life in the community.

Sodexo uses social media to recruit for hospital positions including food services, facilities management, environmental services, and registered dietitians. **Sodexo's non-traditional approach has reduced its recruitment advertising costs by \$300,000.** ²⁵

Education—With more than 80% of Americans using the Internet to guide their health care decisions, patients are more involved in their care than ever before. ²⁶ **Social media give you multiple platforms, as a trusted authority, to educate your community about symptoms and potential treatments; your facility, service lines, staff, and commitment to quality**—as well as clear up any misinformation they might have gotten from less accurate sources.

During the height of the H1N1 outbreak of 2009, HANYS produced a series of videos clearly explaining the origin of the virus, how it spread, who was at risk, and preventive measures. “At the height of the hysteria surrounding the virus, it gave us an opportunity to leverage our institutional knowledge and present clinical facts in a way that the lay person could easily understand,” says Mr. Van Slyke.

Providing surgical patients with a view into the operating room via YouTube videos can be a great way to show the quality of your surgical team while helping reduce patient anxiety. [Shore Medical Center](#), for example, has a series of “[Inside the OR](#)” videos which feature a thorough, graphic explanation of a variety of procedures, as well as follow-up interviews with both the physician and patient.

Dr. Philip L. Glick, Vice Chairman and Professor in the University at Buffalo's Department of Surgery and Professor of Pediatrics and Obstetrics and Gynecology, encourages his surgeons to use social media as a means to educate future surgeons. “A surgeon's greatest legacy is his or her trainees,” says Dr. Glick. “And a lot of the training consists of passing on information, lessons learned, and wisdom to the next generation. Twitter allows us to dramatically scale up our ability to do this. When I post something on Twitter, all the pediatric surgeons, trainees, and colleagues in the country and the world can see it instantly.” ²⁷

“. . . [THE VIDEOS] GAVE US AN OPPORTUNITY TO LEVERAGE OUR INSTITUTIONAL KNOWLEDGE AND PRESENT CLINICAL FACTS IN A WAY THAT THE LAY PERSON COULD EASILY UNDERSTAND.”

~**William Van Slyke**
Vice President,
Communications, Public
Relations, and Marketing,
HANYS

CONCLUSION

With the explosion of information available on the Internet, health care is no longer a “black box” to patients and their families. Customers expect to be heard—and what’s more, they expect you to respond using the same channels they are using. **A hospital without an engaging social media presence soon may be viewed with the same suspicion as a business that has no Web site.**

Perhaps the best illustration of the power of social media is letting the tools do the talking.

“I USED MY OWN PERSONAL FACEBOOK ACCOUNT TO SHOW HOW QUICKLY WE COULD REACH OUR ALUMNI BASE, OUR DONOR BASE, AND OUR PATIENT BASE. OUR EXECUTIVE WAS FASCINATED BY IT.”

~Nicole Pitaniello

“I used my own personal Facebook account to show how quickly we could reach our alumni base, our donor base, and our patient base. Our executive was fascinated by it,” says Ms. Pitaniello.

Social media are merely extensions of the conversations you are having on a daily basis as you communicate the quality of care your facilities provide.

“They’re no different than any other marketing media,” says Mr. Luginbill. “All of these media are the same. You have precious few resources. Let’s use them where they accomplish your goals the best.”

ABOUT THE HEALTHCARE ASSOCIATION OF NEW YORK STATE (HANYS)



Founded in 1925 by a group of hospital leaders, the Healthcare Association of New York State today is one of the most effective advocacy organizations of its kind in the nation, representing the interests of 500 not-for-profit and public hospitals, health systems, and continuing care providers.

HANYS' mission is simple and strong: to advance the health of individuals and

communities by providing leadership, representation, and service to health care providers and systems across the entire continuum of care. The ultimate goal is to achieve a stronger, more stable health care system in which members can pursue their fundamental mission of providing high-quality, cost-effective care and improving the health of people throughout the communities they serve.

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For nearly 15 years, Michael Pauley has specialized in using the Internet to produce positive business outcomes. Since joining the Healthcare Association of New York State in 2007, Mr. Pauley has been an integral part of a team that won two Gold Awards from the Healthcare Marketing

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Before working in the online world, Mr. Pauley worked in the television industry, including stints at ABC News and NBC. Mr. Pauley holds a Bachelor of Arts degree in Communications from the State University of New York at Plattsburgh.

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