Social Media: To Engage Patients Across the Continuum of Care

The Beryl Institute
April 2013
Learning Objectives

• Recognize the contributions of social media to the engagement of patients and their family caregivers

• Identify opportunities to include social media in clinical and operational initiatives and processes

• Learn techniques to manage the risks of social networking technologies
@msbluebells

I feel the same way about hospital gowns as I do using social media... I am never sure what I might be showing... :)

3:02 PM - 16 Feb 12 via web · Embed this Tweet
Agenda

• Social media defined
• Trends and drivers
• Social media applications across the care continuum
• Managing the threats and risks
Social Media Defined

Electronic tools that enhance communication, support collaboration & enable users to generate and share content

- At least bi-directional
- Dialogue and collaboration in building content
- Easily accessible – anywhere, anytime -- on a mobile device, laptop or desktop computer
- Immediate – *right now*
Patient Experience: 100% of the Time

Patients are only onsite a small percentage of the time. How do we keep them empowered and engaged 100% of the time?
# Social Media Across the Care Continuum

<table>
<thead>
<tr>
<th>Worried Well</th>
<th>Pre-Treatment</th>
<th>Active Treatment</th>
<th>Post Treatment</th>
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</thead>
<tbody>
<tr>
<td><strong>Create a sense of trust that this is the provider of choice by beginning to deliver a smart and personalized experience</strong></td>
<td><strong>Educate and prepare for the what, where, how and why of treatment</strong></td>
<td><strong>Provide the right support at the right time in the right way to improve the patient’s treatment experience</strong></td>
<td><strong>Support a positive ‘return to life’ experience</strong></td>
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### Patients & Family

- Engaging disease/condition information
- Self-management tools
- Physician blogs
- Maps & directions
- Virtual tour
- Health tips
- Following tweets
- Clinical trial recruiting

- Self assessments
- Social support & networking
- Campus & indoor navigation
- Interactive learning
- Multidirectional information sharing
- Text reminders

- Journaling
- Social networking
- Interactive learning
- Messaging
- Bookmarking & organizing information
- Care coordination
- Patient generated data and information
- Caregiver support

- Reminders & monitoring
- Self-care tools
- Messaging
- Social support & networking
- Sharing story & feedback
- Ways to give back
- Ongoing engagement
DRIVERS & TRENDS
Hospital Use of Social Media

1501 Hospitals
- 1264 Facebook
- 1116 Twitter
- 967 YouTube
- 695 LinkedIn
- 651 Blog
- 185

Source: HCSML
## Social Media Experience

<table>
<thead>
<tr>
<th>Use</th>
<th>All Hospitals</th>
<th>Most Wired</th>
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</thead>
<tbody>
<tr>
<td>Community Engagement</td>
<td>80%</td>
<td>93%</td>
</tr>
<tr>
<td>Healthcare Tips</td>
<td>68%</td>
<td>87%</td>
</tr>
<tr>
<td><strong>Patient Education</strong></td>
<td>48%</td>
<td>63%</td>
</tr>
<tr>
<td>Crisis Communications</td>
<td>32%</td>
<td>48%</td>
</tr>
<tr>
<td>Care Management Messages</td>
<td>23%</td>
<td>31%</td>
</tr>
<tr>
<td>Chats with Physicians</td>
<td>14%</td>
<td>27%</td>
</tr>
</tbody>
</table>

Source: Hospital and Health Networks “Most Wired” Survey, 2012
• 81% of U.S. adults use the internet
• 69% of online adults use social networking sites
• 88% of family caregivers look online for health info
• Caregivers are more likely than other internet users to take advantage of social tools related to health
Consumer Preferences on Social Media

- 50% prefer a health provider social networking site
- 14% prefer an integrated approach of hospital websites and social media
- 57% say a hospital's social media connections would strongly affect their decision to receive treatment at that facility
- 81% feel a strong social media presence indicates a hospital's clinical functions are cutting edge
Social networking site use by age group, 2005-2012

% of adult internet users age 18+ who use social networking sites

Online *Customer* Experience Priority

- Link established between online satisfaction and financial success
- Highly satisfied visitors report being:
  - More likely to return (177%)
  - Recommend site to others (185%)
  - Use as their primary resource (234%)
- Average satisfaction score for hospitals & health systems is 74 (100 point scale)
Consumer Satisfaction with Websites

2012 ForeSee Healthcare Satisfaction Benchmark

- Health Information: 77
- Hospitals & Health Systems: 74
- Health Insurance: 56
Impact of *Customer Experience*

- 86% of customers are willing to pay more for a better customer experience.
- Those discontinuing business with a company after a negative customer experience climbed from 68% in 2006 to 89% in 2011.
- 79% of consumers who shared complaints about poor customer experience online had their complaint ignored.
- 50% of consumers give a brand only one week to respond to a question before they stop doing business with them.
Accountable Care

• Manage demand, at-risk populations and networks with tools:
  – Enhance discharge and aftercare processes for fewer hospital readmissions
  – Self-management tools for chronic disease
  – Disease prevention tools for the population of individuals who could become the future source of medical costs
MU: Engage Patients & Families

- **Online/electronic access** – core objective for meaningful use
- **Messaging** - *preferred communication medium* (multi-channel)
- **Self-management tools** for *patients with high priority health conditions*
- *Patient-specific educational resources*
- **Online reporting** of *experience of care measures*
- *Upload & incorporate patient generated data into EHR & clinician workflow*
Enhancement to EHR

• Can’t anticipate every question
• EHR information is rarely written in way understandable and actionable for patients with basic or below basic health literacy (90M)
• Too often include long text and use of medical terms
• Estimates of 77M people with a poor understanding of basic medical vocabulary and health concepts (at greatest risk for poor outcomes and readmissions)
Patient/Physician Education

In the exam room 37% of the physician’s time is spent on patient education

- Patients failed to report 68% of problems
- Physicians report 54% of patients missed their most important health problem
Caregivers of Young Children

- 47.8% made dosing errors after standard medication counseling and 38% did not adhere to all instructions.

- A plain language, pictogram-based intervention resulted in a much lower dosing error rate of 5.4% and only 9.3% did not adhere to all instructions.
Evidence-Based Communications

Customized to the learning and language needs of the individual patient

- Patient is part of the team
- Advocate for patient
- Engage patient
- Closed-loop communications
- Handoff
Longitudinal Health

A virtual care team approach

- Continuous/ubiquitous interaction between the care team & patient (home, mobile, care facility)
- Integration into EHR/PHR/patient portal
- Use of remote monitoring and social support networks
Motivators

28% of hospitals will include social media strategies to engage ePatients

- Patient Experience/Satisfaction is the #1 priority for Health Leaders
- CMS Value-Based Purchasing - ties portion of reimbursement to HCAHPS scores - 30% at-risk for Patient Experience
- Pressure & penalties to reduce readmissions, HAI, etc.
Readmissions

- California’s goal is to reduce readmissions by 20%
- The average readmission costs $8000 to $13,000
- Common drivers identified for readmissions:
  - Lack of standard discharge processes
  - Lack of engagement or activation of patients and families
  - Patients call 911 or return to emergency room instead of accessing a different type of medical service
  - Ineffective or unreliable sharing of relevant clinical information
  - Patients did not understand/did not correctly take medications.
Readmissions Opportunities

• Causes
  – Heart Failure and Pneumonia (50%)
  – COPD (16%)
  – Diabetes (13%)

• 51% of discharges *did not have timely follow-up* within 30 days*
  – 10 times more likely to be readmitted
Staff Use Social Media Already

- 87% of physicians use social media for personal use
  - 67% of physicians apply it to their work
- 48% of health professionals access social sites for networking
- Practice platforms that help doctors communicate, document, and transact with their patients online
APPLICATIONS ACROSS THE CARE CONTINUUM
Patient Online Information Needs

• When questions arise (not always in the exam room)
• Relevant, contextual information on their condition preferred
• Provider endorsement of information preferred
• User-friendly tools to document and transmit
Legitimate Uses

Communications

Sharing

Consumers

Experience

Networking

Executive

Tour

Caregiver

Outreach

Staff

Expertise

Support

Engaging

Monitoring

Feedback/Satisfaction

Fundraising

Community

tools

Self-management

Peer-support

Peer-Collaboration

Organizing

Crisis

Connecting

Recruiting

Trial

Stories

Wayfinding

Information

Entertainment

Enhance

Clinicians

Reputation

Clinic

Journaling

Conferences

Education

Virtual

Patient

Recruitment

TOWER
Engaging with Social Media

• Audio, visual and spatial media – simulation, gaming, directions, etc.

• Widgets/Apps – communicating, interactive forms, surveys, self-assessments, access, monitoring, recording, transmitting, etc.

• Blogs – journaling and communications

• Microblogs – reminders, messaging, monitoring, reporting, etc

• Social bookmarking/Wiki- saving, organizing, searching & sharing online information

• Social networking – peer support & self care
Apps (Widgets)

• Product selection and communication with allergist about symptoms and experiences
• Individualizes strategies for managing PTSD, tracking symptoms, finding local support and obtaining anonymous assistance for military & veterans
• Top consumer apps:
  − weight loss & exercise – downloaded & more data
  − pregnancy – actual use
mHealth Apps by Category

Verisoni, 2012
Visual Media

Perioperative Guide (YouTube)

Gabby, Virtual Preconception Care Advocate

Louise, Virtual Discharge Advocate

Did You Know...

- 78
  - 70
  - 20%
  - 116,000
  - 616,000

Heart Disease Prevention Tips

- Eat a heart-healthy diet
- Improve cholesterol levels
- Exercise
- Control diabetes
- Control high blood pressure
- Control weight
- Manage stress
- Quit smoking

Heart Disease Risk Factors

- Inactivity 53%
- Obesity 34%
- High Blood Pressure 32%
- Cigarette Smoking 21%
- High Cholesterol 15%
- Diabetes 11%

Healthy Heart Stats

- Blood pressure: 120/80
- Cholesterol level: <200
- Heart rate: 60-100
- Cardiac output: 5

The Heart in History

Learn More

- American Heart Association
- National Heart, Lung, and Blood Institute
- Centers for Disease Control and Prevention
- American College of Cardiology

Infographic Provided By:

www.SunriseHospitalBlog.com
Pre-Treatment

• Floyd Medical Center Preoperative Patient Guide

• Pre-Conception Assessment – Gabby
  – High risk of poor reproductive health & family planning outcomes
  – Sixth grade reading level & replay aids in comprehension
  – Relevant, contextual communications based upon responses
Active Treatment

- Boston University Discharge Advocate
  - Education & aftercare plan
  - helpful with low literacy
  - 51 min vs. 81 min for live DA
  - preferred by 74% of patients
  - encourages patients to be active participants in their care
Post-Treatment - *Survivorship*

- Social Networking platform for those recovering from addiction(s)
  - Secure access to support 24/7
  - Case managers
    - track across transitions
    - filter activity to assess risk of relapse
    - Prioritize outreach activities
  - 67% reduction in readmission rates for those out of treatment for more than 270 days
  - App for anywhere/time access to support
Treatment & Post-Treatment Phases

- Children’s Hospital Dallas
  - Secure online social networking community
  - Current and former patients and families
  - Personalized security settings
  - Increase communication, support and connections
  - Patients/families create and join communities
Treatment & Post-Treatment Continued

- Northern California Health Centers
  - Private social platform to extend care
  - Patient engagement outside of provider visits
- United Health Centers of San Joaquin
  - Safety-net provider
  - Online and mobile platform for providers and patients to manage chronic disease
Survivorship Research

- Boston Children’s Hospital
  - Social media to augment traditional surveillance methods - hypoglycemia in diabetics
  - Expand knowledge of complications from bi-directional conversations among participants
  - Learn about experiences that may not be severe enough for emergency treatment
  - Impact on behaviors
A Word About Texting

• 90% of text messages are read within 3 minutes*
• Secure, encrypted, protected, traceable texting apps for physicians, nurses and other staff communications
• Bandwidth: 1-minute call = 800 text messages**
• Text 911 by mid-2013
• Preferred by young, minorities & Medicaid beneficiaries
Pre Through Post Treatment

- HIV messaging for military in remote areas
- what to expect & healthy behaviors for young prenatal moms
- reminders of screenings, tests & tips for diabetics
- reminders to opiate addicts on important follow-up appointments
- Pain management for lung cancer patients
- sunscreen use for young dermatology patients
Results: Sunscreen Use

Weekly Adherence Rates (mean +/- SEM)

- Reminder group
- No Reminder Group

% Adherence

Study Period

Week 1  Week 2  Week 3  Week 4  Week 5  Week 6

Center for Connected Health
Partners Healthcare – Texting

• Several studies and findings include:
  – Patients feel more supported and better cared for
  – Improved adherence to care plans
  – Decrease in “no show” rates
  – Sustained behavior changes

• What’s next? Support and feedback improving weight lost and diabetics outcomes
Appointment Reminders (US adults)

- Email: 65%
- Text message: 41%
- Postal mail: 28%

Source: Optum Institute/Harris Interactive
Other Emerging Opportunities

• Social gaming as a motivator of behavior changes
• Social sensors and activation
• Campus/indoor wayfinding (GPS/IPS)
• And, others!
MANAGING THREATS & RISK
Managing Threats & Risks

• Identify legitimate business uses & limit unnecessary risk
• Authority & responsibility
• Enforce existing policies
• Settings to access social media
• Monitor conversations - *manage your reputation*
• Safeguards to protect against viruses, malware, data breaches and malicious attacks
VA Directive and Policy

• *highly encourage* use of Web-based collaboration tools

• *mandatory instruction* for all VA offices & employees regarding the use of emerging Web tools

• *policy on the proper use* of these tools, consistent with applicable laws, regulations, and policies
Risky Tweets

- Posting during surgery, birth or other procedures
- Obtain Informed Consent
- Plan for clinical complications
- Only non-care providers tweet
- Infection Control – sterilizing/disinfecting mobile devices
Mobile Access

- Recognize appropriate business use of personal devices in the workplace
- Establish agreement with owners to:
  - report if the device is lost or stolen
  - allow remote erase (when devices are lost/stolen or upon termination of employment)
  - follow established policies on use of personal devices
  - use an access password on the device
  - *not store patient data on the device*
- Balance usability, preferences, security, & budgetary concerns (BYOD)
Text Messaging Guidance

• Written in an active voice
• Reference the population being targeted
• Recommend specific achievable actions and behaviors
• Don’t exceed more than two messages per day
Draft guidance proposes regulation of apps:

• Used as an accessory to an FDA-regulated medical device - enable a health care professional to view medical images on an iPad and make a diagnosis

• Transform a mobile platform into a regulated medical device - turns a smartphone into an electrocardiography, or ECG, machine to detect abnormal heart rhythms or determine if a patient is experiencing a heart attack
What languages does your community speak?
Social Media Learning & Influencing

- Identify attitudes, perception and behavior about brand and trends
- Social intelligence – listening posts across the spectrum of social media outlets (today’s newspaper clipping service)
- Social customer relationship management (CRM)
- Word of “mouth” promotions
Figure 4: Likelihood of sharing positive and negative health experiences via social media*

- Care received at hospital/medical facility: 44% positive, 40% negative
- Experience with medication/treatment: 43% positive, 38% negative
- Specific doctor, nurse, healthcare provider: 42% positive, 35% negative
- Health insurer customer service: 40% positive, 37% negative
- Cost of health insurance: 37% positive, 35% negative
- Coverage by health insurer: 36% positive, 34% negative
- Cost of care at a hospital/healthcare provider: 36% positive, 35% negative

*Consumers responding likely or very likely to share an experience using social media

Source: PwC HRI Social Media Consumer Survey, 2012

n = 1,060
What patients share….

- “Inefficient process, long wait”
- “…Bring something to do while you wait”
- “Losing your parking stub is a pain in the ass – don’t do it.”
- “Dr. xxx is a miracle worker”
- “Free Wi-Fi!”
- *YouTube Video of staff brushing hair*
"Could you please stop Twittering your friends that I smell like salami? It’s bad for my business."
Patient Experience Improvement Process

- Collect Information
- Engage Top Down & Bottom Up
- Establish Shared Vision
- Build Strategy & Roadmap
- Monitor Performance

TOWER
Best Positioned Hospitals

• Offer social engagement opportunities
• User-centered designs
• Benefit from resulting patient perceptions
• Leverage social media as a care coordination platform
• Change the way care is provided — *esp. post-discharge*
• Use social intelligence and directed networks to advance goals