

Social Media Marketing for the Medical Industry:

Best Practices to Avoid Legal and Ethical Issues

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ABSTRACT

This study analyzes the best social media practices for medical industry professionals and the proper and ideal uses for social media. It analyzes the public relations functions of social media—relationship building, reputation management, and crisis communication. With the constant rise of social media as a widely-used medium for marketing comes increased potential for damage to a medical business' reputation, loss of medical licensing, or lawsuits if practitioners do not act within the lines of legal and ethical standards. Medical offices must have an online presence to remain relevant and build and keep relationships with new and current patients. This study investigates the most common areas that get medical industry professionals in trouble along with the proper tactics to avoid any legal or ethical issues with their social media usage.

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Chapter 1

Introduction

Statement of the Problem

The steady increase of social media usage over the last decade has made information exchanges faster, cheaper, and more convenient. Businesses flock to social media marketing because it allows them to collect real, current but actionable data of all types of consumers so they can strategically plan how to reach their target audience. Businesses also use social media for recruiting, customer service, and brand management (Peterson, 2014). From the marketing aspect, social media is used for engagement marketing, buzz marketing, and building customer relationships. Research shows that more than 81% of businesses are using social media or are planning to use it to further their marketing efforts (Sarabdeen, 2014).

While social media offers many benefits to healthcare providers and patients, organizations are starting to realize its use comes with legal, ethical, and security risks. Some possible risks and violations in the medical industry include violating industry

codes of ethics, violating HIPAA or HITECH, security breaches, and releasing PHI (HIMSS Privacy and Security Committee, 2012).

Background of the Problem

Social media started as a personal tool to interact with friends and family over the Internet. Businesses later jumped on the bandwagon to utilize social media as a new means of communication to their current and potential customers (Investopedia). Social media has become an important communication channel for marketers. Current research shows that more than 81% of businesses are using social media or planning to use social media for marketing purposes. Social media marketing encourages and creates a platform for two-way communications between marketers and users to take place. It is easy for users consider content generated in social media to be trustworthy and reliable (Sarabdeen, 2014).

Social media websites allow patients to take control of their health and healthcare or join communities to improve their health or receive support. Social media is creating

multiple new opportunities for businesses as it continues to advance, however, it is also raising privacy and security challenges (HIMSS Privacy and Security Committee, 2012).

Purpose of the Study

By bringing patient privacy issues in social media marketing to the forefront, we can see the risks and how to prevent any possible litigation issues. Knowing the risk factors and the laws and regulations will educate patients and practitioners alike and bring awareness. Patients will be able to distinguish good and bad medical companies to fully protect their patient privacy and personal information. Social media marketers and users should know the legal and ethical risks along with social media along with methodology for how to prevent any litigation issues. Marketers will come away from this study with actionable steps to maintain compliance with medical marketing laws and ethical guidelines.

Setting for the Study

This study will take place as data collection and research for a senior project at California State Polytechnic University, San Luis Obispo. Interviews will be done with a

social media manager, online marketing agency CEO, hospital marketing manager, and a lawyer specializing in healthcare law. These varying industry specialists will give insight into their own personal experiences with patient privacy as well as situations they've encountered with legal and ethical issues.

Research Questions

This study is structured around research questions created based on literature and articles focused around social media marketing, laws regulating social media, healthcare laws, patient privacy laws, and social media marketing for the medical industry. Each question was written to give insight on how social media is used in the medical industry and what practitioners and patients must do to avoid legal problems.

1. How can using social media help medical companies build and maintain relationships with current and potential customers?
2. How can using social media help medical companies manage their reputation?
3. How much should a medical company invest in social media?
4. How can medical companies measure the ROI of their social media strategies?

5. Which social media outlets are appropriate for use in the medical industry?
6. What topics should medical companies discuss on social media?
7. What laws regulate what medical companies can post on social media?
8. What medical-specific social media platforms are there?
9. What problems does social media cause for medical companies?

Definition of Terms

Brand Management: A function of marketing that uses techniques to increase the perceived value of a product line or brand over time (Investopedia).

Buzz Marketing: This work instigates conversations between small groups of friends and larger scale discussions through social-media platforms, such as Facebook and Twitter. It keeps the conversations going by responding to consumers through these tools, and kick starts that conversation by organizing events to gain attention (Marketing-Schools.org, 2012).

Engagement Marketing: Businesses staying connected to gradually build stronger relationships and turn those relationships into new opportunities to grow (Pinkham, 2013).

HIPAA: Privacy Rule giving individuals important controls over whether and how their protected health information is used and disclosed for marketing purposes. This Rule requires an individual's written authorization before a use or disclosure of his or her protected health information (PHI) can be made for marketing. So as not to interfere with core health care functions, the Rule distinguishes marketing communications from those communications about goods and services that are essential for quality healthcare (U.S. Department of Health & Human Services, 2003).

HITECH: This act was created to stimulate the adoption of electronic health records (EHR) and supporting technology in the United States. It stipulates that beginning in 2011, healthcare providers will be offered financial incentives for demonstrating meaningful use of electronic health records (EHR). Incentives will be offered until 2015, after which time penalties may be levied for failing to demonstrate such use. The Act also

establishes grants for training centers for the personnel required to support a health IT infrastructure (Rouse, 2009).

PHI: Individually identifiable health information held or maintained by a covered entity or its business associates acting for the covered entity, which is transmitted or maintained in any form or medium (including the individually identifiable health information of non-U.S. citizens). Includes identifiable demographic and other information relating to the past, present, or future physical or mental health or condition of a person, or the provision or payment of healthcare to an individual that is created or received by a healthcare provider, health plan, employer, or healthcare clearinghouse. According to HIPAA's Privacy Rule, genetic information is considered to be health information (U.S. Department of Health & Human Services).

Social Media: Internet-based software and interfaces that allow individuals to interact with one another, exchanging details about their lives such as biographical data, professional information, personal photos and up-to-the-minute thoughts (Investopedia).

Target Audience: Deals with the specific market segment a company targets with its products, services and brands. Refers specifically to the group of consumers targeted by

advertisements. It can also refer to the specific group of people targeted by television shows, movies, and music products (Ingram).

Organization of the Study

The study will be organized into five chapters to help guide the reader through background information on social media in medical marketing to the data collected and interpreted in this study. Chapter One states the problem of the study and gives information on what it is about. Chapter Two is a literature review overviewing social media marketing and its use in the medical industry. Chapter Three explains the methodology used during the data collection and interview subjects. Chapter Four includes the research questions, the data that was collected for each research question, and a comparison of all the recipients' responses. The final chapter, Chapter Five, summarizes the results of the study and gives recommendations for social media practice in the medical industry.

Chapter 2

Literature Review

The review of literature focuses on the existing literature on social media marketing for medical companies including laws and regulations, advances, topics for discussion and campaigns, and suggestions for use.

Building and Maintaining Relationships with Current and Potential Customers by Utilizing Social Media

Avery, Lariscy, Amador, Ickowitz, Primm, and Taylor (2010) explain the necessity for social media in public relations: “Social media, like the very basis of public relations itself, build relationships” (p. 337).

According to Sarasohn-Kahn (2008) the Internet plays a central role in providing health information and is also becoming a platform for convening social networks and creating health information (p. 3). According to surveys from Fox (2006) and iCrossing (2008) about 60 to 80 percent of Americans have used the Internet to find health information; as of January 2008, the Internet rivaled physicians as the leading source for

health information. In 2013, a new study showed that for adult Internet users, social media is still a primary source of health information, second still to physicians (Harris, Meuller, & Snider, 2013).

“Besides marketing and branding services, social media helps manage public relations and offers opportunities to share relevant healthcare news. It also can be an educational tool, such as when surgeons at Henry Ford Hospital provided real-time updates from the operating room and took questions as a form of patient education” (Moses, Chaitt, & Jones, 2014).

Facebook and Twitter are great resources to reach the general public and spread information. “Web-based social media sites, such as Facebook and Twitter, can facilitate direct, one-to-many communication with a large audience at little to no cost” (Harris, et al., 2013).

Reputation Management and Risk and Crisis Communication With Social Media

According to NASDAQ, "consumer trust is increasingly determined by online reputation--which is why more and more companies are finding it beneficial to enlist the online reputation management services" (2012).

Social media monitoring can help reinforce a hospital's reputation. Timely responses to complaints voiced over social media can help hospitals demonstrate that they are devoted to their communities and patients (Baldwin, 2011).

Research by Mark Reffert (NASDAQ, 2012) states that companies' online reputations aren't entirely within their own control; they can encounter attacks in the form of a negative review from a customer or a libelous attack from a rival. "All a consumer must do is type the name of your brand into Google, Yahoo, or Bing, and any negative reviews will likely be right there at the top of the page," he says. "From there, it's not difficult to search for rival companies. It's never been easier for consumers to find negative reviews and take their business elsewhere." Duboff and Wilkerson (2010) say "it is vital for all marketers to be cognizant of what is being said or shown about their brand on social media or networks" (p. 34).

According to Shay (2014) practices should encourage patients to share their positive experiences in online communities to help boost their online reputation. Shay emphasizes medical practices should also take caution with their responses to negative comments: “any public response should be courteous. As with any other public communications, a response to negative comments is part of the practice’s public face, and should remain professional. Second, the response should not include any PHI (*Protected Healthcare Information*).”

According to Wendling (2013) social media allows for businesses to respond to criticism and attacks as quickly as possible. It also presents the opportunity to respectfully correct inaccurate information to prevent the spreading of rumors.

“Social media risk and crisis communication are useful tools to build trust... Social media [has] the potential to bring beneficial change in risk and crisis communication” (Wendling, 2013).

Investment in Social Media for Medical Marketing

“Social media adoption and use may have some cost associated with it in terms of time to setup and maintaining social media accounts” (Harris, Mueller, & Snider, 2013).

According to TotalSocialSolutions (2014), to be successful in social media, businesses need to invest in skilled copywriters versed in writing for marketing, researchers to keep up with strategies, and compelling content. TotalSocialSolutions also stresses the necessity for constant monitoring of social media, professional visual design and graphics, and strategic and legal advice for each different platform.

Russell Faust (2011) says investment in social media comes down to investment in technology and time. “The technology investment in social media is minimal. Unlike traditional marketing channels, your social media presence is ‘free’” (Faust, 2011).

According to Faust the largest expense with social media marketing is taking the time to strategize and optimize social media channels to get the most out of them.

The Return on Investment (ROI) of Social Media for Medical Marketing

According to Duboff and Wilkerson (2010), measuring the return on investment (ROI) of social media is the fastest growing concern in marketing (p. 33). MindStream

Creative defines ROI as: the measure of the effectiveness of a marketing strategy, represented as a percentage of positive or negative growth. In a traditional marketing model, ROI would be measured by a formula subtracting the amount of marketing expense from the gross amount of a company's profit ("return") and then divides it by the marketing expense ("investment"). However, the case of social media is different:

"The efficacy of a social media campaign often cannot be defined in such substantial terms, because a social media marketing strategy in a healthcare setting involves more than a simple exchange of money. It's true that as a part of your medical marketing strategy, social media can help increase patient visits and generate leads" (MindStream Creative).

The value of each social media channel differs based on how companies utilize them, what industry they're in, and what their goals are. ROI from social media can be tracked by recording data from leads, new patients, sales, revenue, and changes in brand image. While sales can be used to measure ROI, it should not be the number one reason for joining any social media platform as a medical practice because social media is "first and foremost about branding" (Clifton, 2013).

A lot of marketers measure ROI based on objectives such as creating dialogue, however, Duboff and Wilkerson (2010) say ROI measurement must eventually lead to “bottom-line economic results” (p. 35). “Returns should be measured in dollars and cents, not in percentages, reach, or frequency” (Duboff & Wilkerson 2010, p. 35).

Companies like Buffer, Bitly, and Moz have created tools that display in-depth details about the analytics of certain social networks (Stefoglo, 2014). Stefoglo predicted a push for accessible analytics on platforms like Facebook, Twitter, and Pinterest in 2014.

Appropriate Social Media Outlets for the Medical Industry

Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland (2011) say an organization they recommend embracing “wholeheartedly” is the Mayo Clinic. They have a Center for Social Media with the mission to “lead the social media revolution in healthcare, contributing to health and well being for people everywhere” (Mayo Clinic). They recommend using Facebook, Twitter, YouTube, and blogs because these are the most used platforms and are also the most valuable for brand development and identity.

According to Arce (2014) Facebook is reportedly developing its own healthcare platform. “An exclusive report by Reuters cites three Facebook insiders who requested anonymity and said that the social network has plans of building a platform for developing health-related apps and establishing online communities where users who share common health problems can interact and provide support for one another.”

Facebook already has a lot of potential for medical businesses including: raising awareness about opportunities, improving reputation, expanding professional networks, and connecting with other influencers, professionals, and organizations (Bernhardt, Alber & Gold, 2014). “Social networks such as Facebook or Hi5 are used by hundreds of millions of people to communicate about a huge range of topics, including health” (McNab, 2009).

“Organizations use Twitter to share information on products and services, gather real-time market intelligence and feedback, and build relationships” (Backman, Dolack, et al., 2011). Bernhardt, et al. (2014) add that Twitter is the greatest tool for professional development. They strongly encourage all health promotion professionals to join Twitter for “professional productivity and advancement.”

According to Price (2014) Twitter helps the healthcare industry reach a wider audience, gives the opportunity for direct communication with followers, allows for promotions through campaigns, creates a new support channel for charitable causes, and promotes community through hashtags. According to McNab (2009) Twitter opens doors for new contacts, networks, and information. It also has become an “invaluable resource” for organizing disaster relief in emergency situations. Price gives the example of the aftermath of typhoon Haiyan in the Philippines where people used social media to organize relief efforts, find family and friends, and discover the scale of damage (Price, 2014).

“Users can follow health conferences, a developing health story, search for information or share web links instantly from their desks or mobile devices” (McNab, 2009).

Bernhardt, et al. (2014) find that LinkedIn offers many opportunities for marketers. It lets users follow organizations and companies, keep up to date on industry news and advances, have discussions with multiple like-minded professionals, and engage with other professionals in the same industry to grow a professional network. They advise

getting the most out of LinkedIn by joining groups related to the health industry and actively contributing to discussions to demonstrate expertise and credibility.

“Experts say some physicians have been slow to adopt LinkedIn because it doesn't connect them directly with patients” (Dolan, 2011). LinkedIn is a difficult social media platform for physicians to see value in if they aren't looking for a new job or looking to move because the platform seems geared towards finding employment. Dolan's research reinforces the necessity of LinkedIn to keep an ear on industry news and actively join discussions.

“YouTube has become the most compelling social site for video sharing” (Redsicker, 2012). Redsicker states that YouTube is a great resource for content marketing and should be used to tell compelling stories and provide relevant information. However, she cautions “make sure that the content you provide is relevant and based on topics that interest your audience and can spark interesting discussions around it.”

“Visuals of unusual health events can be published minutes after they've occurred on YouTube” (McNab, 2009).

According to an online survey of 107 healthcare, pharmaceutical, and life sciences marketing executives, when assessing the appropriateness of social media sites for the medical industry, YouTube ranks as most acceptable.

"When assessing channel appropriateness, video sharing YouTube ranks as the most acceptable (68%). Social networks LinkedIn (62%) and Facebook (60%) follow, with less than half of the sample agreeing that micro-blogging Twitter (42%) and photo sharing Flickr (30%) are acceptable" (Popovic, 2013).

The term blog is short for "Web logs," meaning a website offering commentary and allowing for comments from readers. From a corporate standpoint, blogs deliver news and build consumer relationships. (Backman, et al., 2011)

"Blogs enable users to record text, graphics, and video and to share them with others" (Sarasohn-Kahn, 2008). Backman, et al. (2011) give the example of Mayo Clinic's blog to show one use of blogging for marketing: telling a brand story through stories from patients, families, friends, and Mayo Clinic staff.

Yelp is a review website with a collection of customer reviews. It has recently expanded to include virtually all local businesses including medical and other health practitioners (California Bank & Trust).

Topics Medical Companies Should Discuss on Social Media

Healthcare organizations should and already do utilize social media to spread their mission and vision, describe the services they offer, and provide health education. “Many organizations use social media to encourage philanthropy. By publicizing their services, promoting patient advocacy, displaying credentials, and describing the tangible and intangible community benefits they provide, organizations can encourage benefactors to invest in their mission.” Some healthcare companies also utilize social media for recruitment by advertising open job positions and to evaluate potential candidates’ social media presence (Backman, et al., 2011).

“According to a report in the American Medical News, rather than remain silent on social media, health plans are posting health advice to support wellness, ‘tweeting’

about diseases, and talking about healthcare reform, as well as rising healthcare premiums, and other ‘hot topics’” (Kaufman, 2011).

Healthcare organizations today use their social media platforms to: “promote employee and community activities, communicate opportunities for better health, introduce new and advanced medical procedures, spotlight employee volunteer efforts, and keep employees and patients up-to-date on the impacts of weather-related events or emergencies” (Norton & Strauss, 2013).

A new avenue for healthcare companies to explore with social media would be allowing patients to make appointments through social media. According to a study, 72 percent of consumers surveyed said they’d like to make doctor appointments through social media channels (Mayer, 2012).

Social media should be used to share information to increase recognition and improve reputation (Bernhardt, et al., 2014). Miller and Tucker (2013) say that social media can feature employee-generated content. Employee-generated content can help with employee motivation, recruitment, or retention, but healthcare businesses should

keep in mind that social media should not be funded or managed exclusively as a marketing function.

When using social media for health communication, McNab (2011) says, “be strategic and choose wisely” and identify the what, where, when, and why. She advises to focus efforts on the social media audience and be consistent to help increase credibility. Health professional should be on social media to join discussions, not just pass down information to their audience. “Global social media community expects to be able to add value to the conversation, to help correct rumours or misinformation, provide feedback or offer personal experience.”

Laws and Regulations on Medical Industry Use of Social Media

There are many legal and ethical rules regulating social media in the medical industry. Companies must keep in mind the burdens of compliance, ethical, and litigation issues that come with social media usage. “Social media must be viewed through a legal lens, recognizing the accompanying burdens of compliance, ethical, and litigation issues” (Moses, et al., 2014).

There are two federal legislations regulating social media use in the industry: HIPAA and HITECH. HIPAA is the Health Insurance Portability and Accountability Act. A violation of HIPAA could constitute a medical practice or practitioner releasing information where an individual is not identified by name within the information they used or disclosed and “there is a reasonable basis to believe that the person could still be identified from that information” (Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland, 2011). HIPAA was enacted in 1996 and protects information that healthcare providers put within a patient's medical record, along with conversations between doctors and nurses about patient care and treatment. This act also contains the Privacy and Security rule to keep up with patient privacy in the constantly advancing Digital Age.

The privacy rule states that patient PHI can only be disclosed when needed for patient care. The security rule lists the specific “administrative, physical, and technical safeguards for covered entities to use to assure the confidentiality, integrity, and availability of electronic PHI.” The Department of Health and Human Services Office for Civil Rights enforces these rules (Moses, et al., 2014).

The Health Information Technology for Economic and Clinical Health (HITECH) Act was put in place to set uniform standards for electronically transmitting clinical data. It also sets standards to strengthen privacy and security protections for the transmission of PHI. “HITECH offers financial incentives for implementing information technology (IT) infrastructures, including electronic health records (EHRs) and training...HITECH imposes rigid violation and reporting requirements.”

The American Medical Association (AMA) Code of Medical Ethics is known as the most comprehensive ethics guide for physicians. It recommends “doctors should not ‘friend’ their patients and ‘pause before posting’ to allow cooler thoughts to prevail and not overstep the boundaries between professionalism and inappropriate behavior. Certain

tweets, posts, and other forms of communication can veer from professionalism into forbidden territory” (Moses, et al., 2014).

Educating employees on the laws and regulation and instating office and industry-wide policies are the first steps to avoiding these legal issues (Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland, 2011).

Medical-Specific Social Media Platforms

There is a wide-range of social platforms available that are specific to the medical industry; some are specific to a certain company and business and others are industry-wide. The wide array of areas in the medical industry makes for a large variety and number of social networks. I will list the most important and popular. There are patient-to-patient, patient-to-doctor, and doctor-to-doctor networks.

An example of a patient-to-patient network is CureDiva. This website helps breast cancer patients and survivors connect. It allows users to control the level of privacy and the amount of content that they share. It also sells items like wigs, bras, and radiotherapy wraps.

Patients Like Me is a free patient-to-patient network for users share information on their conditions, give and receive support, and discover and contribute to research into treatments and cures (Diana, 2014).

WebMD is a patient-to-doctor resource for people to check symptoms, get questions answered, and learn about diseases from professionals. They pride themselves in being timely, accurate, credible, and trustworthy (WebMD).

According to Vecchione (2012) “the MayoClinic has been in the forefront of social media ever since it began podcasting in 2005.” It began its journey on social media for media relations and eventually expanded to sharing medical information from its expert researchers, scientists, and physicians.

Doximity is a doctor-to-doctor network that makes it easy for doctors to connect and communicate across teams, hospitals and entire health systems (Empson, 2014).

“Doximity's 250,000 members represent about 40% of all doctors in the US, according to the company”. According to Empson (2014) this website is free and is HIPAA compliant. Discussion focuses on business challenges or diagnoses. It allows “physicians

to connect with their peers, securely collaborate on patient care, and find career opportunities” (Diana, 2014).

Sermo is another doctor-to-doctor network that provides physicians with clinical tools, resources, and discussion forums (Empson, 2014).

Problems with Social Media Use in the Medical Industry

According to Shay (2014) social media is a useful tool physicians can use to: advertise their services, disseminate general health information, and interact with their patients. Shay cautions readers that there risks involved in using social media that medical practices must understand and avoid such as: posting inappropriate pictures, posting things infringing on patient privacy, and negative feedback on review sites.

Moses, et al. (2014) find that doctor-to-doctor networks such as store electronic medical records and allow medical professionals to transfer medical records among themselves, which brings some risks with security breaches.

According to Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland (2011) risks with social media for the medical industry include inappropriate usage by

employees of personal and business profiles, inability to control conversations from customers, and improper descriptions or discussions by a physician of a patient case could violate privacy—even without the mention of names or the intention of harm.

“Privacy, security, and data breach concerns exist where telemedicine uses commercially and publicly available devices or communication services” (Moses, et al., 2014). According to the American Telemedicine Association, telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve a patient’s clinical health status and includes a growing variety of telecommunication technology such as services using two-way video, email, smart phones, and wireless tools (American Telemedicine Association).

Chapter 3

Methodology

In this chapter, we will discuss the methodology used to collect data for this study with interviews with professionals in the medical and marketing industries, as well as a medical law professional, and data presentation.

Data Sources

The data collection for this study comes from four different test subjects. One source is a lawyer who takes cases dealing with healthcare directives. The second source is the CEO and president of an online marketing agency. The third is a social media manager for the same online marketing agency. The fourth is the marketing manager of a hospital. The interview questions were crafted to create responses that would bring to the surface issues social media can cause with patient privacy along with the value of social media in the medical industry.

Participants

Participants include Guy Murray, Ryan Miller, Ashley Williams, and Shannon Downing. Guy Murray is a lawyer practicing in San Luis Obispo County. He specializes in civil suits as well as healthcare directives. Ryan Miller is the CEO and president of Etna Interactive, an online marketing agency specializing in the medical and medical aesthetics industry. The third participant, Ashley Williams, is the social media manager at Etna Interactive. The fourth participant, Shannon Downing, is the marketing manager at Sierra Vista Regional Medical Center, a local San Luis Obispo hospital.

Interview Design

The following questions were given to each participant, with exceptions and additions based on each source's specialty (law, practitioner, marketing). The questions were focused around the study's research questions to understand the values, methods, and risks of social media use in the medical industry. The answers will further explain and give different perspectives on social media medical marketing and litigation.

Questions

1. As an expert in the medical industry, how do you think social media can help medical practices build relationships with their current and potential consumers?

Any particular experiences you can share?
2. In what ways do you think social media can help medical practices manage their reputation? What are some best practices for reputation management with social media?
3. How much do you think a medical company should invest in social media to be successful in their marketing efforts? What factors does that depend on?
4. What are some ways medical practices can measure the ROI of their social media?
5. Which social media outlets do you think are most appropriate for the medical industry? Which do you think are most effective for marketing in general?
6. What are some topics you think are most effective for medical companies to discuss on their social media properties?
7. Have you had any experience with the legislations pertaining to social media marketing and patient privacy?

8. Do you know of or have you had any experience with medical specific social media platforms?
9. Have you experienced a time where social media caused a legal or ethical issue with a medical company?

Data Collection

The data collection methodology for this study will be four separate interviews taking place at the offices of each source. The four interviews will be in person. The interviews will ask general questions and personal opinions about marketing for the medical industry and also ask for specific anecdotes dealing with social media marketing for medical businesses.

Data Presentation

Communication will all take place in person. A few of the sources also provided previous articles they've written that pertain to the topic of the study. The interviews will be recorded using a digital voice recorder and transcribed during and after the interviews

to document any additional information that could potentially clarify the responses. This method of data collection and presentation ensures that it will be presented in the most complete and objective way possible.

Limitations

There are some boundaries in the study out of my control. The first is this is a 10-week study. Due to the short time, only a few interviews are allowed in the time allotted.

This research study is also taking place during normal school session along with a full schedule of classes, which also places time constraints on the interviews and work that can be done.

Delimitations

There are limitations to this study based on the type of data collected an interview process. The first delimitation is the research and literature that currently exists on this topic. Social media is relatively new but fast growing. Regulations, rules, and best

practices for social media are still being decided and changing daily with the new technology.

Another boundary is the location for the study. San Luis Obispo isn't a large metropolitan area in California. There are only a couple of hospitals in the city and not many lawyers. San Luis Obispo sits between Los Angeles and San Francisco, some of the largest areas of California that have much larger populations and more opportunity for anecdotes with social media marketing.

Chapter 4

Data Analysis

Chapter 4 will provide background information of the experts interviewed in the study and summarize the interviewees' answers to the questionnaire. The data was collected through recorded interviews lasting approximately 30 minutes and will therefore be presented in the form of direct quotations and paraphrased responses. The answers will then be analyzed and compared to the original research questions and the existing literature on social media marketing for the medical industry as presented in Chapter 2.

Description of Participating Experts in Related Fields

Hospital Marketing

Shannon Downing was the hospital marketing expert for the study. Downing has served as the marketing manager for Sierra Vista Regional Medical Center for 6 years. Sierra Vista, the fully accredited and California licensed hospital, is located in San Luis Obispo, California. Currently, Downing is in charge of a 'Mom2Mom' social media campaign for the hospital's birthing center. She has worked in marketing for nine years,

starting as a marketing manager for an eye surgery office, moving to be a community relations and office manager for a local private practice, and then moved to her current position. Before her marketing career, she worked as a producer for local news organization KSBY for two years after graduating from California State Polytechnic University in San Luis Obispo with a degree in Journalism.

Online Marketing

The online marketing expert selected for the study was Ryan Miller, president and founder of Etna Interactive. Miller started the online marketing agency himself over twelve years ago. Since it's birth, the company has received many awards and recognitions for their strides in web design, medical marketing, and search engine optimization strategies. Miller has been directing online marketing strategies for some of the world's most respected healthcare providers for over 15 years. He is a frequent contributor to many industry publications and a guest lecturer for multiple medical societies; he was also

recently featured in the New York Times and contributed to the new text of The Business of Plastic Surgery.

Social Media Marketing

Ashley Williams was selected as the social media marketing expert for the study.

Williams is the social media manager at Etna Interactive. She started as an online marketing intern five years ago following her graduation from California State Polytechnic University in San Luis Obispo with a degree in business in 2010. She was promoted to a social media specialist, then a social media coordinator, then a social media strategist, and on to her position of one year now as the department's manager. Williams volunteers her social media expertise to helping local non-profits such as Collaboration Business Consulting, Woods Humane Society, and the Cancer Support Community with their social media strategy.

Medical Law

The legal expert selected for the study was Steven Simas, the founding member of Simas & Associates, Ltd.—a leading Administrative and Professional Licensing law firm with offices in San Luis Obispo and Sacramento, California. Simas graduated with a

degree in business administration from California State University, San Luis Obispo. He continued on to King Hall and University of California, Davis to attain his Juris Doctorate. Following his degree, he served as Deputy Attorney General in the employment law section of the Office of the Attorney General in Sacramento, Chief Consultant to the Assembly Committee on Labor and Employment in the California Legislature, served a gubernatorial appointment as counsel to the Public Employment Relations Board, and served as a Temporary Judge for the Sacramento Superior Court, Small Claims and Traffic Divisions. He is currently the present Chair of the Sacramento County Bar Association, Administrative Law Section, a member of the San Luis Obispo Bar Association, Vice President for the Sacramento Region of the California Academy of Attorneys for Health Care Professionals, and a member of the Claims and Litigation Management Alliance, and the American Veterinary Medical Legal Association.

His specialty areas include: Healthcare Law, Professional Licensing Law, Administrative Law, Employment Law, Public Contracts Law, Auto Dealer and Repair Law, Gambling Law, Alcoholic Beverage Control Law, and Civil Litigation and Appeals.

Social Media Medical Marketing Questionnaire

Each expert was asked to respond to the following questions and probes regarding social media marketing for the medical industry and patient privacy issues:

1. As an expert in your industry, how do you think social media can help medical companies build relationships with consumers? List an example of your favorite brand or brands building relationships with social media.

Question #1 was asked to gain insight in ways different professionals view social media as a relationship-building tool and how they go about it. The question was designed to discover what ways social media can be used to build and nurture relationships.

- Shannon Downing: “Letting the patients tell their story. The information is coming from their peers instead of from us, which seems to be more credible... people really are craving the social part of social media... it’s just making the hospital look not just as a hospital but... there is a person behind the hospital. You know, and being able to exude that personality and we’re not

just a cold, institutional facility that you go to, but the people that work here are warm, and I think that's what comes across well on social media"

(Appendix A).

- Ashley Williams: "I see the most opportunity with staying top of mind... I also see good opportunities to humanize your practice. The medical industry is obviously very professional, very service-based, but social media allows you to really get to know the people behind the practice... I think word of mouth is really important and social media is basically word of mouth marketing, you trust whatever your friends are going to recommend and you can see that through social media" (Appendix B).

- Steven Simas: "Communication about journal articles and collaboration" (Appendix C).

- Ryan Miller: "The first opportunity that social media represents is obviously the opportunity to connect with new patients... there's an incredible chance for these practitioners to increase awareness for who they are and what they do to share sort of the benefits that they offer... there is a huge opportunity for

patient education and awareness... Probably for me the third big category of the opportunity social media presents for me in medicine is the opportunity for medical companies to listen to and learn from their patient base.

2. What ways do you think social media can help businesses manage their reputation? Can you list an example where social media caused harm to your/a client's reputation?

Question #2 was designed to inquire about the perception of another mechanism of social media—reputation management—across different fields. The question is designed to clarify the different ways medical practitioners can utilize social media to manage their reputation.

- Shannon Downing: “We have to be very careful... We have a process, posts get sent to our risk management team who sends it down to the nursing leadership and then the patient and their family are addressed based on the comment, or question, or complaint. If the patient has already left then the same thing holds true, we follow up with them. It’s just another avenue for feedback that we receive” (Appendix A).

- Ashley Williams: “It’s a good listening tool... Overall if somebody does leave a negative content on your page, that’s such an opportunity to turn that into a positive experience for that person and if you’re responsive and you’re on top of your management its going to turn out to be a good thing in the end.

Showing that you’re there and that you’re available... I think it’s just a faster, more human way to get to people” (Appendix B).

- Steven Simas: “Kill them with good reviews, that just lowers the bad review and that’s the best way” (Appendix C).
- Ryan Miller: “First and foremost a large social footprint is implicitly a strong reputation defense... there’s an element of social proof, simply having a large base of followers suggest to people that you are, there’s a level of trust that comes just by having that fan count... both the footprint, the scale of their connections and social space speaks to their reputation” (Appendix D).

3. How much do you think a medical practice should invest in social media?

Question #3 was created to get a brief idea from each respondent on how much medical companies should invest in social media. It also puts into question the different measurements that can go into investing in social media.

- Shannon Downing: “Depending on the size of the hospital, would warrant the size of the staff... for us, we’ve been talking about bringing on a 20 hour a week person to do social media for a couple years now” (Appendix A).
- Ashley Williams: “Time-wise I say at least 15 to 30 minutes a day... Staff-wise I think that you should have one point of contact on your staff who’s dedicated to social media... that should be a person who’s really integrated in your brand... money-wise you’re going to have to have some kind of budget for advertising... nothing crazy, like maybe 200 dollars a month or something like that. You don’t need to go broke over it” (Appendix B).
- Steven Simas: “It depends on the kind of business. But you need enough to keep the water spigot pouring water” (Appendix C).
- Ryan Miller: “The way I would choose to answer it would be in terms of time... What we see today is most practices on average are struggling and

questioning the value but largely because they're maybe only putting in the equivalent of four hours a week to their efforts. Probably about half the time it takes to be really successful" (Appendix D).

4. What are some ways medical companies can measure the ROI of their social media efforts?

Question #4 was designed to follow the previous question regarding how much investment should be put into social media. It was asked to find relevant ways in which medical professionals and their representative marketing companies measure the success and return on their investments in social media.

- Shannon Downing: "The number of likes... the number of shares is important. That makes me excited when I see people are sharing it. And then just the comment factor. You want to see that people truly see what you are posting as valuable to them and they're interacting with it" (Appendix A).
- Ashley Williams: "There's a lot of opportunity with stats now... key performance indicators like fan growth, engagement growth. When you're looking for an actual dollar ROI on social it's a bit difficult... overall day in

and day out its really not about ROI, I think its more about relationship marketing, brand awareness” (Appendix B).

- Steven Simas: “The feel-good part, the ROI, return on investment part, is how many clients are coming in the door from Google” (Appendix C).
- Ryan Miller: “There’s different values we have to place on social media... the very first one which is reputation management. There is a value in social proof to having a large fan base that’s fairly intangible... we might measure a growth and accumulation of fans and let that be a part of a campaign goal that is a non-financial, measurable outcome of the campaign... creating an awareness of a brand attribute or a selling proposition that’s unique to yourself, your brand, there’s an opportunity in social media that is directly measurable. We can measure it in terms of impressions, engagement, traffic back to specific related pages on the site where we’re clearly getting that message out there” (Appendix D).

5. In your opinion, what social media outlets do you think are most appropriate for the medical industry?

Question #5 was crafted to gain perspective from experts on which social media networks are safe for medical practitioners to use and avoid any litigation or ethical issues.

- Shannon Downing: “I like Facebook... Probably for me it’s comfort. And that’s just where I see people going to... and I think that that’s the biggest one out there right now. And with my limited time, if I’m only able to focus on one, I think that that’s the one right now to be focusing on” (Appendix A).
- Ashley Williams: “Blogging is number one... Blogging is such an important outlet for doctors and medical practices to really dive in to new trends and new procedures and new treatments and answer frequently asked questions and just give more information to potential patients. After that I think Facebook is what we’ve seen the most success with. Facebook, email marketing, and YouTube. Email marketing is your pot of gold... We do use, we dabble in Pinterest, Twitter, Instagram, Google+, I think it’s all part of the mix for integrated promotion but it’s not where you should focus all of your efforts” (Appendix B).
- Steven Simas: “I would say LinkedIn is probably the safest.” (Appendix C).

- Ryan Miller: “The top two on my list would be Facebook and YouTube. And then I think there are a variety of answers that will be of additional options that are completely contextual... I would count, for example, a site like Yelp as a social reviews platform... it’s kind of essential that you have a strategy around Yelp because they’re so influential and guiding people’s buying decisions, inclusive of healthcare today” (Appendix D).

6. Have you or any of your companies utilized any medical specific social media networks that you are aware of?

Question #6 was designed to gain insight into how medical companies and their representative marketing firms perceive and use any medical-specific platforms or patient portals.

- Shannon Downing: “MayoClinic always comes up, its like my favorite one, I love it... they are just really engaging. You know, and the content that they post is relevant and up-to-date. They’re reputation is so strong anyway that it just kind of builds upon that. And they have a lot of resources that they dedicate to it” (Appendix A).

- Ashley Williams: “RealSelf. RealSelf is probably the one I’m most familiar with. There’s a lot of local directories and local search things but I don’t really work with those. RealSelf is interesting because patients really have complete freedom to share whatever on that platform. And doctors are signing in and responding and I always think it borders the line of medical advice and HIPAA compliance. It’s a really interesting site. But a lot a lot of potential patients go to that site to hear real doctors respond candidly and to see before and after photos. They really get to know the doctor on a personal level and we’ve seen a lot of business come from that site. It’s a good tool” (Appendix B).
- Steven Simas: “And then, medical, I was interviewed on WebMD which seems to be—I got phone calls all over the country from the interview that I did about a case that I had handled so I would argue WebMD must be really darn good” (Appendix C).
- Ryan Miller: “I’d say RealSelf is probably going to be the one that is most prevalent. Medical-specific... If we consider the ratings and reviews sites to be

social platforms, then I would say that from there the ones that are really common are going to be HealthGrades, Vitals, RateMDs. At least in the U.S” (Appendix D).

7. In your experience, what topics do you think are most effective and engaging for medical companies to discuss on social media?

Question #7 was designed to explore experiences experts have had with social media topics and what they’ve found is the most effective. It was asked to gather the broad range of opportunities medical practitioners have to discuss on social media.

- Shannon Downing: “I think employee recognition, personal stories, I like to put up our awards—and some of those get more traction than others depending on what the award is—new commercials that we run” (Appendix A).
- Ashley Williams: “Anything positive, inspirational, anytime you can ask a question and speak with your fans instead of speaking at them, that’s really important. We always say 80 percent of your content should be engaging and

20 percent should be self-promotional... before and after photo galleries do really well” (Appendix B).

- Steven Simas: “Industry news, in a need. We always try to target it towards a need. A need first; try to fill a need, or how we have handled it or dealt with an identical problem or case. People relate to that” (Appendix C).
- Ryan Miller: “The personal side of the people behind the practice we see resonate very very highly with patients overall. I think interrogative content, so content where you’re asking questions and challenging patients’ knowledge is great while providing education. Obviously contests are very very popular in social media that people have a chance to get something for free, drives engagement. I would say content with controversy, whether that’s tying into something that’s happening in the popular press, challenging a common view or opinion, or just coming out with a really strong message, seems to really drive significant engagement” (Appendix D).

8. Have you had any experience with legal or ethical issues with social media marketing for a medical practice? Patient privacy issues? What steps should you take to avoid any legal or ethical issues?

Question #8 was designed to learn from real life experiences with legal and ethical issues with social media and the medical industry. It was asked to see how experts came about and remedied any legal or ethical social media problems, if they have experienced any.

- Shannon Downing: “No... Every year we have to go through training on compliance and privacy and even, there is a marketing review process that we go through, where we can’t write anything or have any information that may be false or misleading. That’s all approved through corporate” (Appendix A).
- Ashley Williams: “I think the biggest thing that we see is them not owning the rights to use images... that’s a huge copyright issue. You just really have to think about it, like if you don’t own the rights to use that content, even though it’s just a Facebook post, it counts. You should really be cautious with those things... We had, in the beginning, a few doctors that would get patient

comments... Just say thank you. Keep it simple. But everything else you can say can get you in sticky water... You want to let them know that you got it but you just don't want to admit to them being your patient, at all" (Appendix B).

- Steven Simas: "Where they get in trouble, and the only way I think to do this is you gotta look at the state individual laws... The issue I'm going to discuss is called 'scope of practice'... What someone's scope of practice is is different than what they're competent to do. For example, an orthopedic surgeon can't really do heart surgery. Specialization. The problem comes in when people represent through social media what they can do for you" (Appendix C).
- Ryan Miller: "We have seen clients who posted photos that contained, like from staff events things like that, where they hadn't previously received consent from those patients... We encourage our clients, all of our clients, to become active on social media to make sure that they've trained their staff in HIPAA and make sure they learn the understanding of what's required to protect patient privacy. We counsel them to be careful when replying to or

acknowledging inquiries in social media and at the end of the day to ensure that they are receiving consent forms, signed consent forms, before they use any images from patients” (Appendix D).

9. What other problems have you seen or do you think social media can cause for the medical industry?

Question #9 was designed to gain insight into any other potential issues caused by social media that weren’t covered in any of the previous research questions. It gives the experts a broad ground to express other potential problems.

- Shannon Downing: “Privacy is the number one big problem. And I think you just have to make sure that you’re up to date and transparent and responsive.

Because any of those could get you into trouble” (Appendix A).

- Ashley Williams: “I think keeping it professional has always been a concern that I hear. Doctors are really concerned about sharing personal photos or really letting their guard down on social media. And I don’t think its necessary to really let your guard down, like you can still be an approachable professional doctor, just like sharing tips or just keeping it really simple like a lot of other

doctors are really worried about giving medical advice when they give a tip”

(Appendix B).

- Steven Simas: “The message has to be, this is what we do and it has to be within your scope, you can’t represent something outside your scope. Okay.

And then the second is, you can’t violate rights and it’s hard to use models and examples and all that without permission” (Appendix C).
- Ryan Miller: “I think we’ve touched on a lot of the potential risks which are the risk of backlash, public declaration that if your service or product isn’t exceptional, accidental or intentional violation of patient rights and expectations, damage to practice reputation” (Appendix D).

Social Media Marketing for the Medical Industry Research Questions

For this study, the following nine research questions were created for the study to determine what current practices and strategies are being used among medical businesses and practitioners, find what issues social media brings to the table, how to remedy those issues, and to collect expert opinions on the issues social media can cause for the medical industry.

Research question #1: How can using social media help medical companies build and maintain relationships with current and potential customers?

- “Besides marketing and branding services, social media helps manage public relations and offers opportunities to share relevant healthcare news. It also can be an educational tool, such as when surgeons at Henry Ford Hospital provided real-time updates from the operating room and took questions as a form of patient education” (Moses, Chaitt, & Jones, 2014).
- “Web-based social media sites, such as Facebook and Twitter, can facilitate direct, one-to-many communication with a large audience at little to no cost” (Harris, et al., 2013).

Research question #2: How can using social media help medical companies manage their reputation?

- “All a consumer must do is type the name of your brand into Google, Yahoo, or Bing, and any negative reviews will likely be right there at the top of the page... From there, it’s not difficult to search for rival companies. It’s never been easier for consumers to find negative reviews and take their business elsewhere" (NASDAQ, 2012).
- “Any public response should be courteous. As with any other public communications, a response to negative comments is part of the practice’s public face, and should remain professional. Second, the response should not include any PHI (*Protected Healthcare Information*)” (Shay, 2014).
- “Social media risk and crisis communication are useful tools to build trust... Social media [has] the potential to bring beneficial change in risk and crisis communication” (Wendling, 2013).

Research question #3: How much should a medical company invest in social media?

- “The technology investment in social media is minimal. Unlike traditional marketing channels, your social media presence is ‘free’... The greatest expense simply becomes time. You may be thinking, “time is not free” — of course not, but there are strategies and technologies that help to optimize it.” (Faust, 2011).
- “It’s labor intensive, so you need people who can devote a good chunk of time into not just writing posts for Facebook, but working on strategies and fitting those posts into the social network they’re being posted to. Additionally, your content needs to be focused on what you do in your practice, so you need someone who is very knowledgeable in what you offer in your practice, not just any writer or social media marketer” (TotalSocialSolutions, 2014).

Research question #4: How can medical companies measure the ROI of their social media strategies?

- “Social media ROI is not a measure of popularity. It’s a measure of efficacy. If you only have a handful of followers, it doesn’t necessarily mean you’ve invested too much time or money into your social media campaign. In order

to track your ROI, you need to consider the desired end – your social media goal. Are you trying to increase the number of patient visits? Are you trying to fulfill patient needs that are otherwise going unmet? Are you offering a better solution to a prominent problem? You must understand your intent before you can attach a value to it” (Mindstream Creative).

Research question #5: Which social media outlets are appropriate for use in the medical industry?

- “Social networks such as Facebook or Hi5 are used by hundreds of millions of people to communicate about a huge range of topics, including health”
(McNab, 2009).
- "Facebook has the potential to help increase your awareness of opportunities, improve your reputation, expand your professional network, and connect to influential people and organizations, but it also carries unintended risks”
(Bernhardt, Alber & Gold, 2014)
- "One organization to embrace it wholeheartedly is the Mayo Clinic, whose Center for Social Media has a stated mission to ‘lead the social media

revolution in healthcare, contributing to health and well being for people everywhere” (Backman, et al., 2011).

- “Organizations use Twitter to share information on products and services, gather real-time market intelligence and feedback, and build relationships” (Backman, et al., 2011).
- “Visuals of unusual health events can be published minutes after they've occurred on YouTube” (McNab, 2009).

Research question #6: What medical-specific social media platforms are there?

- “The MayoClinic has been in the forefront of social media ever since it began podcasting in 2005” (Vecchione, 2012).
- According to WebMD (WebMD), their site is a patient-to-doctor resource for people to check symptoms, get questions answered, and learn about diseases from professionals. They pride themselves in being timely, accurate, credible, and trustworthy.

Research question #7: What topics should medical companies discuss on social media?

- “Many organizations use social media to encourage philanthropy. By publicizing their services, promoting patient advocacy, displaying credentials, and describing the tangible and intangible community benefits they provide, organizations can encourage benefactors to invest in their mission” (Backman, et al., 2011).
- “According to a report in the American Medical News, rather than remain silent on social media, health plans are posting health advice to support wellness, ‘tweeting’ about diseases, and talking about healthcare reform, as well as rising healthcare premiums, and other ‘hot topics’” (Kaufman, 2011).

Research question #8: What laws regulate what medical companies can post on social media?

- “Social media must be viewed through a legal lens, recognizing the accompanying burdens of compliance, ethical, and litigation issues” (Moses, et al., 2014).
- The American Medical Association (AMA) Code of Medical Ethics recommends “doctors should not ‘friend’ their patients and ‘pause before

posting' to allow cooler thoughts to prevail and not overstep the boundaries between professionalism and inappropriate behavior. Certain tweets, posts, and other forms of communication can veer from professionalism into forbidden territory" (Moses, et al., 2014).

- The Health Information Technology for Economic and Clinical Health (HITECH) Act was put in place to set uniform standards for electronically transmitting clinical data. It also sets standards to strengthen privacy and security protections for the transmission of PHI. "HITECH offers financial incentives for implementing information technology (IT) infrastructures, including electronic health records (EHRs) and training...HITECH imposes rigid violation and reporting requirements" (Moses, et al., 2014).
- A violation of HIPAA could constitute a medical practice or practitioner releasing information where an individual is not identified by name within the information they used or disclosed and "there is a reasonable basis to believe that the person could still be identified from that information" (Backman, et al., 2011).

Research question #9: What problems does social media cause for medical companies?

- “Privacy, security, and data breach concerns exist where telemedicine uses commercially and publicly available devices or communication services”

(Moses, et al., 2014).
- According to Shay (2014) medical practitioners should be cautious of posting inappropriate pictures, posting things infringing on patient privacy, and negative feedback on review sites.
- According to Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland (2011) risks with social media for the medical industry include inappropriate usage by employees of personal and business profiles, inability to control conversations from customers, and improper descriptions or discussions by a physician of a patient case could violate privacy—even without the mention of names or the intention of harm.

Social Media Marketing Data

For this study, it was important and necessary to discover what other experts said because of the small amount of existing information on social media marketing for the healthcare industry and the ever-changing nature of the social media industry itself. In order to acquire this data Shannon Downing, a traditional marketing expert, Ashley Williams, a social media expert, Steven Simas, a healthcare law expert, and Ryan Miller, an online marketing expert were interviewed for the study. They were each asked similar questions—some varying slightly to cater to their field of expertise—designed to answer the original research questions in an individual interview setting. The following tables display the interviewees' responses in the form of their individual perspectives on the original research questions.

Research question #1: How can using social media help medical companies build and maintain relationships with current and potential customers?

This research question was studied in order to find out how social media can be used in the medical industry to drive one of the main functions of public relations,

relationship building and maintenance. “Social media helps manage public relations and offers opportunities to share relevant healthcare news” (Moses, Chaitt, & Jones, 2014).

This question was designed to discover the different ways industry experts utilize the social space to connect with potential patients and customers and ultimately build a lasting relationship. The literature and experts concurred with the idea that social media is a more convenient way to connect with consumers.

Table 1

Building and Maintaining Relationships with Social Media

Respondent	Social media can build relationships by...	Example of a brand building relationships with social media
Shannon Downing	Exuding the personality of the person behind the hospital	MayoClinic
Ashley Williams	Staying top of mind	CoolSculpting, NFL
Steven Simas	Communication about journal articles and collaboration	Simas & Associates, Ltd.

Ryan Miller

Connect with new patients, American Express
patient education and
awareness, listening and
learning from patients

All of the answers in Table 1 beg the notion that social media should be used primarily with patient benefit in mind in order to receive a return and engagement. Most of the answers were different but Miller and Simas' comment about journal articles and industry news shared a common theme, patient education.

Research question #2: How can using social media help medical companies manage their reputation?

This question was studied to learn and define the way professionals utilize social media as a reputation management resource. "Consumer trust is increasingly determined by online reputation--which is why more and more companies are finding it beneficial to enlist the online reputation management services" (NASDAQ, 2012). Categories for reputation management usage through social media presented in the literature include:

initial presence and positive reputation, monitoring social platforms, and responding to negative feedback.

Table 2 summarizes the responses to this question that gathered answers closely related to the literature on this topic. All three respondents recognized the value of social media as a reputation management resource. Each had similar takes on how to utilize social media to combat bad reviews.

Table 2

Reputation Management with Social Media

Respondent	Social media can be used as a reputation management source by...	Tactics
Shannon Downing	Being careful, managing feedback	Monitor feedback often and quickly respond
Ashley Williams	Using it as a listening tool, be available and responsive	Check all profiles at least fifteen minutes a day
Steven Simas	“Killing them” with good reviews	Collect feedback through a company created questionnaire
Ryan Miller	Having a large footprint	Encourage cultivation of

and wide scale of connections	positive reviews
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Table 2 shows a variety of answers and tactics with a similar concept, the need for businesses to be attentive and take time to nurture their social media. Miller and Simas' answers mention starting with a strong initial reputation online as a reputation defense by collecting good reviews and connecting with a lot of fans. Williams and Downing both agree that social media should be used as a listening tool to manage feedback and turn negativity into an honest, informative and positive experience for followers.

Research question #3: How much should a medical company invest in social media?

This question was studied to answer a social media industry-wide mystery question—what amount should be invested in social media efforts. The literature suggested that investment in social media isn't necessarily a monetary number, "the technology investment in social media is minimal.

Table 3

Investment in Social Media

Respondent	Medical company investment in social media should depend on...	Idea of how much to spend
Shannon Downing	The size of the hospital	At least 20 hours a week for own hospital
Ashley Williams	Having someone invested in the brand, support from business owners	15-30 minutes per day, one dedicated staff member, \$200 per month advertising budget
Steven Simas	The type of business	Enough to keep the water spigot pouring water
Ryan Miller	The brand, the image, the goals of the practice, as well as where they are on the life cycle, time allotment	Minimum of 8 hours a week, enough time to strategize, monitor, and create content

Unlike traditional marketing channels, your social media presence is ‘free’... The greatest expense simply becomes time. You may be thinking, “time is not free” — of course not, but there are strategies and technologies that help to optimize it.” (Faust, 2011).

Research question #4: How can medical companies measure the ROI of their social media strategies?

This research question was studied in attempt to answer a common, pushing question mentioned in a lot of the literature about methods of measuring the return on investment of social media. It was asked to learn from a variety of experts their idea of how social media success can be measured.

According to Mindstream Creative, in order to successfully measure the ROI of a social media campaign or social media efforts, you must begin with a goal in mind. “Are you trying to increase the number of patient visits? Are you trying to fulfill patient needs that are otherwise going unmet? Are you offering a better solution to a prominent problem? You must understand your intent before you can attach a value to it” (Mindstream Creative).

All respondents agreed that the question of measuring social media ROI is pressing and difficult to answer and that there is no universal way to measure ROI. Table 4 shows Downing and Simas both answered in terms of online engagement and statistic tracking. Williams and Miller both had similar answers relating to strategic parts of a

medical practitioners' social media plan and initially setting goals for successful measurability.

Table 4

Measuring the ROI of Social Media

Respondent	ROI can be measured in terms of...	Tactics
Shannon Downing	Number of likes, shares, comments	Define valuable content by interactive factor from followers and continue to push that out
Ashley Williams	Statistics, brand awareness	Host social media specific specials, events where clients must RSVP on Facebook, set measurable goals
Steven Simas	Clients coming in the door from Google	Earn clicks to make conversions and in turn get clients
Ryan Miller	Reputation, fan growth, brand awareness, goal outcomes	Set measurable campaign goals

Research question #5: Which social media outlets are appropriate for use in the medical industry?

This question was studied to find what social media networks experts find acceptable and safe for medical practitioners to use. The social media space offers a wide variety of networks for consumers and businesses to choose from. This question was derived from the wide array of social networks the literature presented to get a more narrow view from experts.

According to an online survey of marketing and healthcare professionals conducted by Popovic (2013) when assessing the appropriateness of social media sites for the medical industry, YouTube ranks as most acceptable. "When assessing channel appropriateness, video sharing YouTube ranks as the most acceptable (68%).

Social networks LinkedIn (62%) and Facebook (60%) follow, with less than half of the sample agreeing that micro-blogging Twitter (42%) and photo sharing Flickr (30%) are acceptable" (Popovic, 2013).

Table 5

Appropriate Social Media Networks for the Medical Industry

Respondent	Preferred platform	Reasoning
Shannon Downing	Facebook	Comfort level, popularity
Ashley Williams	Blogging followed by Facebook, Email Marketing, and YouTube	Easy way to give patients information and send updates on your practice
Steven Simas	LinkedIn	Professional network, less personal than Facebook
Ryan Miller	Facebook and YouTube Including Yelp	Essential to have a presence on these influential platforms

Research question #6: What medical-specific social media platforms are there?

This research question was studied to find what medical specific platforms exist, which ones experts are familiar with and use, and their importance. This question lists and defines social networks professionals possibly should be aware of and utilize.

WebMD mentioned many medical platforms, mostly patient portals that foster patient-

to-patient, patient-to-doctor, and doctor-to-doctor interactions, mostly for appointment making and medical advice (WebMD).

Table 6

Medical Specific Social Media Platforms

Respondent	Example	Importance and contribution to the medical sphere
Shannon Downing	MayoClinic	Engaging, strong reputation
Ashley Williams	RealSelf	Offers patient advice, before and after photos, patient freedom, doctor accessibility
Steven Simas	WebMD	Influential, widely used and well-known
Ryan Miller	RealSelf, HealthGrades, Vitals, RateMDs	Most prevalent in the US

Research question #7: What topics should medical companies discuss on social media?

This question was studied to explore expert opinions and experiences on what topics are effective and engaging on social media in the medical industry. The social space

is filled with discussions on every topic imaginable and not all of them are appropriate for medical practitioners.

According to Backman (2011) organizations should use social media to encourage philanthropy, publicize their services, promote patient advocacy, display credentials, and describe the tangible and intangible community benefits they provide and encourage benefactors to invest in their mission.

Table 7

Topics Medical Companies Should Discuss on Social Media

Respondent	Topics	Importance
Shannon Downing	Employee recognition, personal stories, awards, new marketing material	Show the person and personality behind a practice, give patients something or someone to relate to
Ashley Williams	Positive, inspirational content, questions, before and after photos	Humanize the practice, actual results are powerful
Steven Simas	Industry news	Filling a need and providing

		help based on past precedent or similar situations
Ryan Miller	Personal side of the practice, interrogative content, contests, controversy, popular news	Challenges people while providing knowledge, the chance to win something free

Research question #8: What laws regulate what medical companies post on social media?

There are many laws and regulations that practitioners, their employees have to be careful of violating with social media usage. This question was studied to gather personal anecdotes or observations to provide real life examples of litigation relating to social media and the medical industry. It also provides insight into how to avoid and handle legal and ethical issues presented by social media. According to the Moses, “social media must be viewed through a legal lens, recognizing the accompanying burdens of compliance, ethical, and litigation issues” (2014).

Table 8

Laws and Ethical Issues Presented by Social Media

Respondent	Common issues	Steps to avoid and protect from legal and ethical issues
Shannon Downing	Compliance and privacy, employees publishing dissatisfaction	Training employees, having a review and approval process, drafting a company social media policy
Ashley Williams	Not owning the rights to use images, admitting to seeing a patient on social media (disclosure)	Being cautious, making responses on social media simple
Steven Simas	Not staying educated on state individual laws, misrepresenting their scope of practice	Keep eyes on your websites, have a review process, honestly represent yourself and your business
Ryan Miller	Photos including patients or staff without their consent, patient privacy, replying to patient comments on social media	Use consent forms, educate and train staff in how to stay compliant with HIPAA and patient privacy

Research question #9: What problems does social media cause for medical companies?

This research question was studied to pick up and rehash any issues not previously discussed, mentioned, or entertained by the experts and literature. According to Shay

(2014) some of the biggest issues that exist for medical practitioners are posting inappropriate pictures, posting things infringing on patient privacy, and negative feedback on review sites.

Table 9

Problems Social Media Can Cause for the Medical Industry

Respondent	Other important issues	Steps to remedy and avoid issues
Shannon Downing	Privacy	Stay up to date, transparent, and responsive
Ashley Williams	Keeping it professional, over sharing on social media	Keep it simple, don't overthink it
Steven Simas	Scope of practice, using photos without permission or proper tagging	Don't represent anything outside of your scope, make sure you have permission
Ryan Miller	Risk of backlash, public declaration if a service isn't exceptional, accidental or	Have an initially strong reputation, cultivate positive reviews, train staff, counsel

intentional violation of patient rights and expectations, reputation damage	them to communicate with care
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Chapter 5

Discussion and Recommendations

Summary

This study was conducted in response to the need for more credible and expert information on industry-wide questions in the medical industry regarding social media about investment, the processes used to measure success, appropriate topics and platforms for usage in the medical industry, and patient privacy, legal, ethical and other issues that can come about because of social media. In its beginnings, medical and many other professionals shied away from social media because they weren't sure how to utilize it for business. Today, if a business doesn't have a presence in social media, they're missing out on a huge marketing opportunity. With many of the scholarly articles and industry publications just scraping the surface of proper social media usage in the medical industry, it was essential to collect data from experts in the traditional marketing, online marketing, hospital marketing, and medical law spheres regarding their perceptions of social media use for medical practitioners.

To gather information on current industry standards and methods being used by professionals in these disciplines, one expert from each industry was interviewed based on a single questionnaire designed to answer the following research questions for the study:

1. How can using social media help medical companies build and maintain relationships with current and potential customers?
2. How can using social media help medical companies manage their reputation?
3. How much should a medical company invest in social media?
4. How can medical companies measure the ROI of their social media strategies?
5. Which social media outlets are appropriate for use in the medical industry?
6. What topics should medical companies discuss on social media?
7. What laws regulate what medical companies can post on social media?
8. What medical-specific social media platforms are there?
9. What problems does social media cause for medical companies?

Each research question was tailored to cater to the varying expertise of each respondent.

Discussion

Following the analysis of the data collected in Chapter 4, conclusions can be made between the information found in the literature in Chapter 2 and the responses from each interview participant. This further helps us dig deeper into concepts inquired about in each of the research questions.

Research question #1: How can using social media help medical companies build and maintain relationships with current and potential customers?

All four of the experts agreed that social media is an effective tool for aiding businesses and medical practices build relationships with customers in keeping serving the patient's need in mind. Both Miller and Simas mentioned sharing industry news and educating patients through social media as a key component along with Miller's additions of using social media as a listening and learning tool. Williams also emphasized the necessity to post frequent updates with quality content to stay top of mind.

The literature is in line with some of these statements from the experts. "Besides marketing and branding services, social media helps manage public relations and offers opportunities to share relevant healthcare news. It also can be an educational tool."

Moses, Chaitt, & Jones (2014) then use the example of Henry Ford Hospital providing real-time updates from their operating room during a surgery and taking questions on social media as a form of patient education. Social media can also “facilitate direct, one-to-many communication with a large audience at little to no cost” (Harris, et al., 2013).

Downing presented a statement not mentioned in the preexisting literature in Chapter 2—the need for practices to humanize themselves through social media. Practices should use their social media properties to exude the personality behind their hospital, practice, or medical office.

In conclusion, to utilize social media as one of the biggest functions of public relations—a relationship-building tool—medical businesses should utilize it to educate their patients, share industry news, connect with patients, and humanize their practice.

Research question #2: How can using social media help medical companies manage their reputation?

All four respondents had differing answers, however, the common theme was the need for companies to take the time to manage, monitor, and nurture their social footprint and that social media is commonly and increasingly used as a feedback

mechanism. Simas and Miller touched on the importance of building and having an initial strong presence on social media. Miller said, “first and foremost a large social footprint is implicitly a strong reputation defense” (Appendix D).

Williams expressed the need for doctors and businesses to be available, responsive, and ready to turn negative experiences into positive ones on social media. The literature directly concurs with these statements. Baldwin (2011) states that timely responses to social media complaints voice that a company is dedicated to their communities and patients. Along the lines of Williams’ comment about attentive monitoring to a business’ social properties, Duboff and Wilkerson (2010) agree, “it is vital for all marketers to be cognizant of what is being said or shown about their brand on social media or networks” (p. 34). In accordance with Williams’ and Downing’s response regarding reputation, to take care and keep it simple in regards to negative feedback and comments on social media, Shay emphasizes that “any public response should be courteous” because a response to a negative comment is part of the practice’s public face, and should, in turn, remain professional. Second, the respondent should be careful not to include any PHI (*Protected Healthcare Information*).

Overall, social media can be used as a strong reputation defense and initial representation. Building and maintaining a strong reputation online requires work and attention, but it's doable and essential to the continued success of a business. As Williams said, "If you're responsive and you're on top of your management its going to turn out to be a good thing in the end. Showing that you're there and that you're available... I think it's just a faster, more human way to get to people" (Appendix B).

Research question #3: How much should a medical company invest in social media?

As expected following information found in the literature review, expert answers presented a wide range of perceptions on how investment in social media should be measured and what should be spent to ultimately be successful because of the difference in their expertise. Staff and time was a common theme in investment measurements from the responses from Downing, Williams, and Miller but the amounts they believed a company should dedicate were varied. Williams stated a medical practitioner should dedicate at least 15 to 30 minutes a day on nurturing their social media presence, checking it every 15 minutes for any updates or changes. She also stressed the importance of assigning one dedicated employee to the company's social media, an employee who is

invested in their brand and can properly convey the voice they desire. Downing said that for her own hospital, she believes it would be ideal to have one staff member dedicated to their social media for 20 hours a week. Miller said ideally a small practice should be spending a minimum of 8 hours a week and most hospitals usually spend 24 or more hours per week. All respondents agreed that the amount a company should invest in social media is dependent on the type of business, their brand, and goals.

Williams was the only respondent to provide a monetary number along with time and staffing needs for social media investment. “It’s just so competitive that if you are trying to talk to people and reach them, you have to pay to play” (Appendix B). She said that a \$200 advertising budget should be enough for a business to be successful.

The literature didn’t offer much in terms of time commitments medical companies should invest in social media. However, it does fall in line with the respondents’ answers that the costs of social media should be defined in terms of time, setup, and maintenance (Harris, Mueller, & Snider, 2013). TotalSocialSolutions also defines social media investment in terms of labor, which can be connected to the staffing ideals mentioned by the respondents.

Overall, investment in social media can be defined in multiple ways instead of purely with the initial thought, a monetary value. Time is the biggest factor when considering how much to invest in social media. Staff comes in as another popular factor mentioned in regards to social media. The measurements of amount of hours, number of staff, and advertising budget will depend on a medical business' size, goals, and time allotment to dedicate to social.

Research question #4: How can medical companies measure the ROI of their social media strategies?

All respondents agreed that the question of the ROI of social media is a big one in the industry and has a variety of answers. The respondents' answers varied due to their varied fields of expertise and experience. Downing and Simas both mentioned measuring social media success by online engagement rates. They both share a similar view that truly seeing the ROI of social media efforts is a fulfilling and validating moment; their responses attach emotion to ROI. Simas said, "the feel-good part, the ROI, return on investment part, is how many clients are coming in the door from Google" (Appendix C). Downing shared her personal experiences with how she receives validation from her

social efforts for Sierra Vista, “you want to see that people truly see what you are posting as valuable to them and they’re interacting with it” (Appendix A). In the literature, Clifton agrees that while sales can be used to measure ROI, it should not be the number one reason for joining any social media platform as a medical practice because social media is “first and foremost about branding” and building the emotion and person behind a brand (2013).

Williams and Miller both took a more strategic take on the question and state ROI should be measured more in brand awareness, measuring growth, setting initial measurable campaign goals and connecting them to social media efforts. Mindstream Creative agrees ROI is the measure of the effectiveness of a marketing strategy, represented as a percentage of positive or negative growth. “The efficacy of a social media campaign often cannot be defined in such substantial terms, because a social media marketing strategy in a healthcare setting involves more than a simple exchange of money. It’s true that as a part of your medical marketing strategy, social media can help increase patient visits and generate leads” (Mindstream Creative).

Overall, social media ROI should not initially be defined in terms of money because this number isn't a simple one to track and report. Social media ROI and success should be measured by the value a business is providing to their consumer, the conversion rate, results from measurable goals set early on, and increasing brand awareness and characterization.

Research question #5: Which social media outlets are appropriate for use in the medical industry?

The marketing discipline respondent experts in the study had similar but varied responses to this question. Facebook was the common network mentioned by Downing, Miller, and Williams. Both online marketing professionals, Williams and Miller also mentioned YouTube in their responses. Williams went on to emphasize the importance blogging has for a medical office's marketing efforts along with the opportunities email marketing can present. Miller mentioned the necessity for a presence on review sites like Yelp because of their influential and widespread nature in the U.S. "They're so influential and guiding people's buying decisions, inclusive of healthcare today" (Appendix D). In

regards to online reviews, Williams also shared that “doctors have the most online reviews behind restaurants” (Appendix B).

The MayoClinic agrees that Facebook, YouTube, and blogs are important in the medical industry because these are the most used platforms and are also the most valuable for brand development and identity. They also mentioned Twitter in this list of influential and valuable platforms (MayoClinic). Downing also mentioned part of the reason for her emphasis on Facebook is it’s importance and popularity. This concurs with McNab’s (2009) findings, “social networks such as Facebook or Hi5 are used by hundreds of millions of people to communicate about a huge range of topics, including health”.

Simas was the only differing respondent, not listing Facebook as his number one safe pick for the medical industry. He chose LinkedIn as a good professional network for doctors. Bernhardt, et al. (2014) also adds that LinkedIn offers many opportunities for marketers by letting users follow organizations and companies, keep up to date on industry news and advances, have discussions with multiple like-minded professionals, and engage with other professionals in the same industry to grow a professional network.

They list best practices for utilizing LinkedIn such as joining groups related to the health industry and actively contributing to discussions to demonstrate expertise and credibility.

Dolan also says “experts say some physicians have been slow to adopt LinkedIn because it doesn't connect them directly with patients” (Dolan, 2011) and is a difficult social media platform for physicians to see value in if they aren't looking a job seeker or looking to move because the platform is branded to be geared towards finding employment.

LinkedIn is necessary and convenient to keep an ear on industry news and actively join discussions.

Overall, there doesn't seem to be a universal right answer for this question. One common network mentioned in the literature and by the experts was Facebook because of its influence, popularity, and offerings. Choosing social networks for a medical practice should be dependent on which are ideal for building a brand and avoiding sticky situations by getting to personal online.

Research question #6: What medical-specific social media platforms are there?

When asked about social media platforms for the medical industry, each respondent had a different take on what constitutes a social network and had different

responses based on which networks their careers or clients have put them in touch with.

Miller and Williams both work for an online marketing agency representing primary elective healthcare professionals and mentioned RealSelf, a leading network for patients and doctors in the medical aesthetics industry. Simas and Downing each mentioned a different top consumer network for patients in the medical industry. Simas mentioned WebMD and Downing had experience with MayoClinic.

The literature mentioned many patient-to-patient, doctor-to-doctor, and patient-to-doctor platforms. Miller stated that many medical platforms are actually third-party applications allowing patients to make appointments and confidentially ask questions, these are more like patient portals.

According to WebMD, they are a patient-to-doctor resource for people to check symptoms, get questions answered, and learn about diseases from professionals. They pride themselves in being timely, accurate, credible, and trustworthy (WebMD). Simas shared his personal experience with WebMD, “I was interviewed on WebMD which seems to be—I got phone calls all over the country from the interview that I did about a

case that I had handled so I would argue WebMD must be really darn good” (Appendix C).

Downing listed MayoClinic as one of her favorite medical specific social media platform. “I think that they are just really engaging. You know, and the content that they post is relevant and up-to-date. They’re reputation is so strong anyway that it just kind of builds upon that. And they have a lot of resources that they dedicate” (Appendix A). The MayoClinic has been in the forefront of social media ever since it started podcasting back in 2005. It began its journey on social media for media relations and eventually expanded to sharing medical information from its expert researchers, scientists, and physicians (Vecchione, 2012).

In regards to platforms like MayoClinic and WebMD, Williams said, “I think a lot of those kind of like border a line of security and you have to take everything with a grain of salt” (Appendix B).

Overall, it seems to be necessary to define what a social platform is before determining which medical social networks are out there. There are lines drawn between

patient portals, doctor advice sites, and review websites. WebMD, MayoClinic, and RealSelf are influencers at the forefront of the medical industry.

Research question #7: What topics should medical companies discuss on social media?

A similar point that the marketing experts made is the overwhelmingly engaging nature of personal content on social media including staff and office photos, employee recognition, and questions to challenge followers. Simas also mentioned consumer education, sharing industry news, as a key topic medical companies should promote and nurture on social media and Miller concurred with pointing out the effectiveness of sharing or discussing current events in popular news.

In line with Miller and Simas' recommendations, Kaufman's (2011) research shows "health plans are posting health advice to support wellness, 'tweeting' about diseases, and talking about healthcare reform, as well as rising healthcare premiums, and other 'hot topics'".

Downing, Williams, and Miller recognize the importance of personal content from inside the practice on social media. Miller says "the personal side of the people behind the practice we see resonate very very highly with patients overall" (Appendix D).

Williams said that engaging content should be photos from the practice of staff, birthday celebrations, anniversary celebrations, and anything that's personal and humanizes your practice. In Downing's experience, "employee recognition, personal stories... awards... new commercials" (Appendix A) resonates best on her hospital's social media.

The literature agrees with these notions. Norton & Strauss (2013) find healthcare organizations should use their social media platforms to "promote employee and community activities, communicate opportunities for better health, introduce new and advanced medical procedures, spotlight employee volunteer efforts, and keep employees and patients up-to-date on the impacts of weather-related events or emergencies".

Overall, there are a wide range of topics that are ideal and appropriate for social media in a medical setting including, personal office content, community and industry news, employee recognition, and anything to educate patients. "Be strategic and choose wisely" to identify the what, where, when, and why of information that should be shared on social media (McNab, 2011).

Research question #8: What laws regulate what medical companies can post on social media?

Each expert experienced or knew of a situation where social media caused a legal or ethical issue for a medical practice and knew of varying common litigation issues social media can present. Downing, Williams, and Miller answered the question in terms of patient privacy issues relating to accidental disclosure and improper responses to patients on social media.

Another common issue presented by Williams, Simas, and Miller is copyright and permission issues with using photos. Williams cautions practitioners, “you just really have to think about it, like if you don’t own the rights to use that content, even though it’s just a Facebook post, it counts. You should really be cautious with those things” (Appendix B). Simas mentioned individual state laws about photos, for example the requirement to fully disclose if a photo is a model in a stock photo rather than an actual patient. A practice can’t misrepresent a stock photo as their patient or use someone else’s photo with a patient in it as their own. Miller also said that negligence to receive permission from a

patient to publish a photo infringes on that person's rights. To remain compliant, practitioners must obtain signed consent to post a photo of someone in the social space.

The concurrent remedy from the experts on avoiding legal and ethical issues because of social media is staff education. The literature says educating employees on the laws and regulation and creating office and industry-wide policies are first steps to avoiding possible legal issues (Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland, 2011).

Research question #9: What problems does social media cause for medical companies?

All four respondents recognize that social media can pose many different risks for the social media. Each respondent had something different to add to what additional problems the social space can create.

According to Downing, "privacy is the number one big problem" (Appendix A) and to stay out of trouble professionals must be up to date, responsive, and transparent with their social media. In line with privacy concerns, Shay (2014) lists risks involved in using social media that medical practices must understand and avoid such as: posting

inappropriate pictures, posting things infringing on patient privacy, and negative feedback on review sites.

Williams says there is a concern amongst doctors and businesses with maintaining a professional image on social media. In the literature, Backman, Dolack, Dunyak, Lutz, Tegen, Warner, and Wieland (2011) list a similar concern, inappropriate employee usage of social media as a large concern.

Simas brought a new issue to the table, misrepresentation of scope of practice. He provided the example of physical therapists and chiropractors having different competencies even though their licenses state that they are allowed to perform similar actions. Practitioners can get in trouble by misrepresenting their capabilities on social media.

There are many risks that come along with using social media to market for the medical industry such as professionalism, patient privacy, and according to Miller, “risk of backlash, public declaration that if your service or product isn’t exceptional, accidental or intentional violation of patient rights and expectations, damage to practice reputation” (Appendix D). These risks can be avoided and remedied by having an educated staff,

ensuring permission, staying up to date on laws, and remaining transparent and responsive.

Recommendations for Practice

After the completion of the study, significant information has been collected and analyzed on the topic of best practices for social media marketing in the medical industry.

With the new and existing information, it is important to present the most notable content and organize it in a manner to provide advice and standards for future social media, online and medical marketing professionals along with medical practitioners and staff members. Recommendations for practice include committing to social media education, dedicating time to social media profiles, and setting goals to measure the success of social media efforts.

Commit to continuous social media education

Social media is an ever-changing medium that is altered and updated almost daily. To remain out of trouble, medical companies must view social media “through a legal lens, recognizing the accompanying burdens of compliance, ethical, and litigation

issues” (Moses, et al., 2014). This means staying up to date on current legislations, any updates to HIPAA, HITECH, the AMA Code of Ethics, licensing board requirements, and state laws regarding communication. A crucial component that some practitioners miss in their social media education, according to Simas, is in neglecting to recognize that while there are federal laws there are also unique state laws regulating social media and communication. Professionals need to ensure that they are covering all possible bases and being thorough in their research and education.

Dedicate time to nurture social media profiles

A company interested in building a social media presence needs to first ensure they have the time to commit to building and maintaining a strong presence. The online marketing experts agree that if a practice isn’t ready for the responsibility or not willing to put in the time, they should leave social media alone. “Depending on the brand, the image, the goals of the practice, as well as where they are on the life cycle, it may not be necessary for them to be there. In fact it could even be detrimental for their practice for them to start and not be committed to engaging in social media” (Appendix D).

Time needs to be allotted for nurturing fan growth and cultivation, strategic planning of campaigns, creation of original post content and sourcing or creating or creating corresponding graphics, listening to and responding to direct messages, monitoring and replying to wall posts, and working to integrate between social media and other aspects of your online marketing, according to Miller. Williams adds a practice should have one dedicated person who makes time to take photos around the office of staff, celebrations, birthdays, anniversaries, and create social media policies. Taking the time to generate engaging content will lead to success. TotalSocialSolutions (2014) adds that be successful in social media, businesses need to invest in the time to recruit skilled copywriters versed in writing for marketing and researchers to keep up with strategies.

Allotting time to build social media presence comes down to multiple key things: creating profiles, researching creating a social media policy, building a large social footprint and reputation, gathering and cultivating positive reviews, and monitoring and being responsive on all platforms.

Set measurable goals to find value

The ROI of social media is often called into question because of the apparent lack of evidence linking social media efforts to conversions. Instead of trying to place a monetary value on social media success, marketers need to look to the aspects of social media that are measurable—fan growth, engagement, traffic back to specific pages on the website that are being promoted on social media, new and current relationships, and brand awareness.

The best way to go about measuring ROI doesn't start at the end of a campaign, it starts before the campaign is even off and running by setting measurable goals, forming tactics based on those goals, and then measuring their outcome. Williams suggests examples such as hosting an event and requiring attendees to RSVP via the Facebook Events app and setting a goal for a specific number increase of followers or engagement.

“That will keep you on the right track. The money will come from those efforts”

(Appendix B). Miller adds that it's okay to have non-financial, measurable goals for a social media campaign. Those will still be success indicators. Another important way he mentions for measuring the success of social media campaigning is measuring patient

inquiries that are generated and patients coming in for procedures that were promoted on the practitioners' social space.

Study Conclusion

In conclusion, given the complete findings of the study, regular qualitative research on social media marketing practices for the medical industry is necessary to keep up with changing technology, laws, and popularity. Ideally, routine data collection and interviews should be conducted and should also be separated by state to avoid any differences in state laws. All of the respondents interviewed for the study work and California and provided a wealth of information about standards in the state. This study cannot be applied to all businesses that utilize social media. However, the study can serve as an educational and protective tool for medical professionals, medical employees, and marketing agencies representing a person or organization in the medical industry.

Social media changes at such a rapid rate that it would be wise for medical companies, practitioners, and their representative marketing companies to have living documents regarding their social media policies and standards so that they can be easily updated and distributed.

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Appendix A

Interview Transcription: Shannon Downing

The following interview was conducted to get expert opinions from a hospital perspective based on a questionnaire about social media and the issues it can cause for the medical industry.

Interviewer: Jessica Padilla

Respondent: Marketing Manager at Sierra Vista Regional Hospital
(Shannon Downing)

Date of Interview: 11/7/2014

Interview Transcription

Jessica Padilla: "In your wealth of experience with marketing for medical practitioners, in what ways do you think social media can help medical companies build relationships with current consumers?"

Shannon Downing: "Wow. Well we have our Sierra Vista Facebook page, then we have a Sierra Vista Birth Center Facebook page, and then we have a closed group NICU support Facebook page. We also have a Twitter and Instagram account, but with just me in this department it's a bit overwhelming to keep up with everything so I really just focus on the birth center and hospital website. I see the Birth Center Facebook page as a better tool because of the demographics that we are working with on that. I mean it's a lot of young moms who have Facebook on their phones; they're engaged on Facebook already, and so that is kind of creating a community with them to interact with each other. For example, right now our maternity campaign is called 'Mom2Mom' and there's a landing page for moms to go in and share their birthing story. It also has a large presence on our Facebook page. So really the goal of our Birth Center Facebook page is to have a platform for moms to engage and interact with each other. So you know we're not shoving information down their throat as far as what your labor is going to be like and

this or that—we're letting the patients tell their story. The information is coming from their peers instead of from us, which seems to be more credible, I guess you can say. And then as far as our hospital Facebook page goes, that's really been an interesting concept because a lot of what I post on there is employee related. So if I have like an employee of the month or an employee retirement or you know any type of hospital award, a lot of that goes on there. The engagement that we get from patients and other staff is always really good on those because they say, 'oh, that was my nurse and I loved her' and you know 'great job' or 'I love working with you, so-and-so' and so that has been much more successful than if I post a report on heart disease, what are your risk factors for heart disease, and I don't get any likes or clicks. And I'm like okay. So people really are craving the social part of social media. And its kind of conflicting because Ron, he wants me to put more on there about heart disease or arthritis, but that's not what is engaging people. It's the pictures of the nurse with her award that is engaging people. Or even last year we had a couple of our employees do Movember and so at the end I did a little contest on Facebook, 'Who Wore it Best' and that was our biggest post of the whole year was voting on who had the best beard for Movember.

I think that it's just making the hospital look not just as a hospital but... there is a person behind the hospital. You know, and being able to exude that personality and we're not just a cold, institutional facility that you go to, but the people that work here are warm, and I think that's what comes across well on social media."

JP: "That's great, also, question, since you said you were managing only a few of the pages, who manages the other ones?"

SD: "Well, so I manage the two open Facebook pages. The closed one just kind of has a life of its own because it's just you know parents asking questions and stuff and nothing gets really posted on their as much as its just working that way. The Twitter one is set up so that if I post something to Facebook it posts to Twitter, but like I hardly ever go on Twitter. And the Instagram is new, that's just for the Birth Center. I just don't really have time to go on. On a good week, sometimes I'm really good and I will post, you know, two or three times a week and then other times it will be like three weeks and I'm

like oh my gosh I haven't posted. And I can tell when I post something, you know, our likes go up and I think 'oh god I gotta do this more.' But its hard being one person and that seems to take a backseat to other tasks at hand."

JP: "Okay. What do you think are some good examples of other brands building relationships through social media? Any kind of brand, it doesn't have to be medical specific."

SD: "Well actually the MayoClinic, they do really well with that. Let me think of some other brands... So I'm sorry, repeat the question again?"

JP: " What are some examples of other brands building relationships through social media?"

SD: "Um, well MayoClinic always comes up, its like my favorite one, I love it."

JP: "Why do you think it's good?"

SD: "I think that they are just really engaging. You know, and the content that they post is relevant and up-to-date. They're reputation is so strong anyway that it just kind of builds upon that. And they have a lot of resources that they dedicate to it—a lot more than just someone who spends fifteen minutes a week in their little office."

JP: "Absolutely. So what are some ways you think that medical practitioners can use social media to manage their reputation?"

SD: "I think you know, we have to be very careful. I do get alerts on my phone so as soon as someone posts something to our page I check and see. Generally it's a good post but every so often there will be you know, someone who's disgruntled or they're scared because they have a family member in the hospital and they're not getting the answers that they want and so they see it as an outlet to kind of get some sort of feedback from us.

So we have a process, posts get sent to our risk management team who sends it down to the nursing leadership and then the patient and their family are addressed based on the comment, or question, or complaint. If the patient has already left then the same thing holds true, we follow up with them. It's just another avenue for feedback that we receive. We have had a few people, you know, post inappropriate pictures—they don't understand that they're breaching their own patient privacy—so we'll have to take something down if it has a picture of a patient's face or something like that. Which is a struggle for us because you know, if they're posting it themselves, they're taking on that liability. But then, like I said, there's so much, no one really has an answer to the social media HIPAA question. So, I'm anxious to read your report."

JP: "From all of the literature so far, I've found that there aren't many regulations because it's still new."

SD: "Well even, because we're part of Tenet Healthcare and we have about 100 hospitals across the country. And even them, I try asking them 'what's our social media policy?' and they keep saying 'oh, we're working on a handbook, we're working on a handbook' and so I still—when is your project due? Or you only have like a month probably?"

JP: "I believe its due in 5 weeks."

SD: "Well if I happen to get ahold of that handbook before then I will send it to you."

JP: "That would be great."

SD: "Yeah it's really, even our compliance director, I'll ask him about things. But we couldn't for so long, because we weren't going to social media. So we have to I guess, 'take the risk' because we have to be there."

JP: “Yeah, you have to have a presence. Do you mind telling me any particular stories about people who have posted anything to your page that have caused issues with reputation? How did you guys handle that besides the process that you just mentioned?”

SD: “There are two in particular that I can think of. One was an employee who had been let go. And so the problem with that was it was posted late at night, I want to say around midnight. He was obviously upset and since he was posting at midnight I was thinking he’s probably you know drinking or something. And so by the time we saw it the next morning, he had a lot of comments and we immediately deleted the post. Then it was sent to human resources for follow up. So that was an internal situation. I really struggled not with that post in particular, but I struggle with deleting posts because I want us to be transparent. And I don’t want to enrage someone even more by deleting their post. So unless it’s blatantly inappropriate I will tend to leave it up and monitor it and respond to it there. Just to kind of monitor and see if it’s getting any kind of traction. And then if its causing too much of a problem then I will take it down.

So the other example I was going to share was there was a patient that came in to the emergency department with a family member and the family member was very upset. And they’re the ones that posted a couple different pictures of the hospital in not a flattering light. They kept kind of harassing the Facebook page. So I had to block that person. So not just deleted the post but also blocked that person. And I think I blocked the employee also. So yeah the process is just trying to remedy or be aware of it as soon as possible is the control factor, otherwise it can get a little out of hand. Seeing it quickly and then getting ahold of those patients because usually we have a really good team in place who follows up and in most cases, the people are very emotional because of the family member being sick and they just want someone to listen to them and to feel like they are part of the process. So once they get a phone call or a nurse to come and talk to them, its usually remedied.”

JP: “That makes sense. How much do you think, ideally, a medical practitioner or office should invest in social media?”

SD: "That's a good question. So you're thinking like..."

JP: "Well, it doesn't have to be a number because numbers for social media are hard to come by."

SD: "Like an office or a hospital? I would think a part time position for our size hospital would be sufficient. And our hospital is... Hospitals are judged by the number of beds they have. So our hospital has 164 beds in our hospital. Which is kind of a small to medium-sized hospital. Like Arroyo Grande has I think around 60 beds. But then, UCLA has like a thousand beds. So I think depending on the size of the hospital, would warrant the size of the staff. But, for us, we've been talking about bringing on a 20 hour a week person to do social media for a couple years now. I'm hoping maybe next year it will be in the budget. I don't think it's going to go away, I think its just going to continue to evolve and whether that's Facebook or five years down the road there's going to be something else that we don't even know about. But I think consumer engagement online is the way tat hospital marketing is going, not just pushing the message, but allowing the consumer to kind of create their own presence and that's really what we're looking at doing."

JP: "What are some ways that you measure the success of what you do on social media for Sierra Vista?"

SD: "Just the number of likes we get or just the—like with the 'Mom2Mom' campaign, the number of shares is important. That makes me excited when I see people are sharing it. And then just the comment factor. You want to see that people truly see what you are posting as valuable to them and they're interacting with it."

JP: "Can you tell me a little bit more about the 'Mom2Mom' campaign?"

SD: "Mhmm, let me grab you a flyer... So what we did was we put together a focus group of six new moms and we brought in some cameras and we just asked them to share

their birthing story. The good and the bad. And then we put it into a really nice 60-second commercial and we have a landing page, Sierra Vista Mom2Mom, which all their stories are posted to and any other mom can go and post their story or add photos or video, so that's really an interactive site that just launched about a month ago."

JP: "That's awesome."

SD: "Yeah, so I guess you would consider that a social media platform."

JP: "Definitely. Do you take any stats or anything for the stuff that you do for social?"

SD: "No. Well, the reason is there is no one to show it to. Not that they don't care, but no one's really asking for it. Our advertising agency is Barnett Cox & Associates and so they're keeping some stats on the Mom2Mom campaign. Just the landing page hits. I don't know if you'd be interested in that information or not."

JP: "Mm, not necessarily."

SD: "Yeah, I think if you have people that you're reporting it to its important, but we don't have anyone to show it to. It's like well why am I running this report."

JP: "Does BCA do most of... well what kind of stuff do they do for you guys?"

SD: "Well, our commercials and our print ads and our radio ads. Brochures. They may next year take a more active approach in the social media aspect of it, if we don't hire someone in-house, they may start doing more of that for us. But I find, I'm not really sure how I think that's going to work, because when I post something, I get a picture and I post something. So even if I'm not posting it, I would still need to send that information for them to post."

JP: “That’s where we sometimes struggle with our clients. We have to ask them for pictures, and if they don’t send us anything we just have to make up stuff to put on their post plan and do it for them. So it’s kind of difficult, it’s usually easier to have someone in-house to do that kind of stuff.”

SD: “Yeah, because it would be just as easy for me to post it as it was for me to upload, email to them, I might as well just be doing it. Like how would you guys know if we’re having cake for so-and-so’s retirement? Do you see engagement on the things you make up when clients don’t send you information?”

JP: “Sometimes. But like you said the things that get the most engagement are featuring the doctor or office parties, fun stuff at the office, fun stuff with the doctor. Puppies. Children. That seems to be the most engaging content always. And the campaigns are always fun too. But definitely that’s what we usually see on social media.”

SD: “That’s funny, good, I’m not alone.”

JP: “Yeah. What social media outlets do you think are most appropriate and effective for the medical industry? Sounds like Facebook so far.”

SD: “Yeah, I like Facebook.”

JP: “And why do you think that is? Is it like a comfort thing or you know more about it?”

SD: “Probably for me its comfort. And that’s just where I see people going to.”

JP: “Definitely, it seems to be something that’s familiar for everyone.”

SD: “Yeah, and I think that that’s the biggest one out there right now. And with my limited time, if I’m only able to focus on one, I think that that’s the one right now to be focusing on.”

JP: “Okay. Is there anything that you don’t like about using Facebook for this kind of stuff?”

SD: “Hmm. I don’t like how I can’t tag people. Because we’re a business page, that kind of causes some problems.”

JP: “Do you use Facebook Advertising at all?”

SD: “You know what, we never have. We’ve talked about it a lot but we’ve never actually done it. What do you think about Facebook Advertising?”

JP: “For our clients, it works very effectively. We’ve run Like Ads or Promoted Posts and stuff like that. It definitely gets it in front of more eyes. But whether it’s the eyes you want on your content is the question. I’d like to think a more organic way of going about it is great but Facebook obviously is like, we want your money, so it’s more difficult. What topics do you think are most effective and engaging to discuss on social media?”

SD: “I think employee recognition, personal stories, I like to put up our awards—and some of those get more traction than others depending on what the award is—new commercials that we run.”

JP: “Have you had any experience with any legal or ethical issues because of social media?”

SD: “No.”

JP: “Okay, what steps do you take, or what prior knowledge do you have, that helps you avoid getting into legal or ethical issues with your social media?”

SD: “Our corporate team, through Tenet, has a very large Ethics and Compliance department. And also, a large marketing communications department. So every year we have to go through training on compliance and privacy and even, there is a marketing review process that we go through, where we can’t write anything or have any information that may be false or misleading. That’s all approved through corporate. We have a lot of steps in place that have helped us, and a lot of resources that a small doctor’s office probably wouldn’t have. That’s been nice to have that cushion, or if I have a question, we have a whole legal department that I can run it by and people who know how to respond to it.”

JP: “Is your social content reviewed by someone else before you put it up?”

SD: “Not usually. But I tend to not post anything that would cause anything. If there was something that I thought could cause a problem, I would send it in for review. But any of our other ads, I need to send in for review. But that’s another problem that we run into, is if I have a new TV commercial or a new print ad, I have to send it in for review. But with social media, its like how can I send in my social media post every day? Because it takes them like a week to review it. And I’m like okay, well that’s old news now, I can’t put it on social media anymore because that’s a waste of time.”

JP: “Okay, are there any other problems you can think of that social media can cause for the medical industry?”

SD: “Just besides privacy, you mean? Privacy is the number one big problem. And I think you just have to make sure that you’re up to date and transparent and responsive. Because any of those could get you into trouble.”

JP: “Definitely. Well, that’s all the questions I have written here. I just had one more from what you said earlier about you’ll have patient’s post on pictures and be like oh that’s my nurse, that doesn’t violate anything? Or that’s not...”

SD: "Well, they're not posting their own pictures. Like if I post a picture of a nurse that got an award and they'll say, they'll comment on that picture. If they're identifying themselves its okay."

JP: "Okay, I thought so."

SD: "Well if they went on and said like that's my nurse and she changed my catheter and did all this stuff, then we might look at that with some concern. And I think when you live in this community too it's so small. But I don't know if you've been able to find other social media policies for like the MayoClinic or, well I recently was looking around for that. And they're all really light and there's not a lot of depth to them or a lot of restrictions."

JP: "I'm sure it's difficult because it's constantly changing."

SD: "Do you want me to send you our social media policy for employees?"

JP: "Sure that would be great!"

SD: "Yeah, we don't want our employees going on and like bagging on us."

JP: "Definitely not, but that's all I had so if you have anything else to add feel free."

SD: "Cool, well thank you. Keep me posted. I'll send you anything that I can find. Good luck."

JP: "Thank you!"

Appendix B

Interview Transcription: Ashley Williams

The following interview was conducted to get expert opinions from a marketing professional perspective based on a questionnaire about social media and the issues it can cause for the medical industry.

Interviewer: Jessica Padilla

Respondent: Social Media Manager at Etna Interactive
(Ashley Williams)

Date of Interview: 11/7/2014

Interview Transcription

Jessica Padilla: “So what’s your background in social media?”

Ashley Williams: “Okay, I’ve been doing social media for about five years. I specialize in doing social media for the medical sector—so, specifically elective healthcare, dealing with plastic surgeons, cosmetic dentists, dermatologists. I have worked with social media basically on every platform, from blogging to Facebook to Twitter, being a community manager as well as a social media strategist and developing plans for the team to execute.”

JP: “Okay, so from a marketing standpoint, how do you think social media can help medical companies build relationships with their current customers, consumers, patients?”

AW: “I see the most opportunity with staying top of mind. So if somebody—somebody might not need a treatment from you or need to go to your practice right then, but if you work on staying top of mind, when they do need to come in they’ll think of you. I also see good opportunities to humanize your practice. The medical industry is obviously very professional, very service-based, but social media allows you to really get to know the

people behind the practice. And at this point I really think that if you're not on it, people are expecting you to be there so you're missing a huge opportunity."

JP: "What about potential customers? Do you think that's the same?"

AW: "Hmm. Yeah I do. I think word of mouth is really important and social media is basically word of mouth marketing, you trust whatever your friends are going to recommend and you can see that through social media. Also we've read stats that doctors have the most online reviews behind restaurants. So while you think that maybe your potential patients aren't looking for you on social media, they are there and they're using social media to share their experience."

JP: "What are some of your favorite examples of brands building relationships with their audiences through social media?"

AW: "Oh boy. Okay, when I think medical-specific, I know it's really hard for a lot of device manufacturers to use social media because there's so many regulations and there's HIPAA compliance concerns, but I think the company CoolSculpting does a really good job. They really take a fun, healthy living, light approach to social media and that's what it's really all about. People are on there to see smiling, happy faces, to get wellness tips, hear motivational quotes, and they're constantly updating all of their platforms with the same branding, the same message, and they're doing it frequently. And not only are they pushing their own content out there, they're sharing others, they're liking other pages, they reply and say 'thank you' when you follow them on Twitter. It's obvious that they are really listening to their audience.

My other favorite go-to is the NFL. I love the NFL on social media. I think that they have such a captive audience during this one season every year. It's so much shorter than baseball, so much shorter than most sports, and they really do a great job of pushing it across all of their platforms, keeping the branding consistent, the messaging consistent, and just really putting it on the fans, not just pushing it out themselves. They listen to the fans and they just really do a great job."

JP: “So this is something that was brought up in an interview I had this morning, what do you think of pages that basically are just created by a company and companies just let them run, they just let the patients do everything—they let them do all the work and they just have this platform there for them and its all patient-generated content?”

AW: “I think that that could work, but it’s scary with medical. If somebody puts something out there and, with HIPAA, if a patient shares their experience and you don’t acknowledge that that is your patient, they can do whatever they want. They can share that information, but you never know where a potential patient is looking to get information about your practice and if they take what they’ve said as the truth, they might not end up coming in or they might get a bad taste in their mouth about your business. I always think that its good to monitor every platform, and if you don’t have the staff to monitor a platform, you probably shouldn’t create it. It’s just scary.”

JP: “Interesting, yeah well what Sierra Vista has going, it’s really cute, it’s a Mom2Mom landing page for people to tell their birthing stories and share advice.”

AW: “I love it. Your customers are going to be your biggest advocates so you want to give them the freedom you want to give them a place to talk to each other. It’s important to keep an eye on it too. We’ve seen some pretty upset patients to take to social media, so got to be careful.”

JP: “ So what are some ways you’ve used social media to help your clients manage their reputation?”

AW: “Um, it’s a good listening tool. So we’ve used third-party platforms like Hootsuite to keep a good eye on mentions, brand mentions on twitter, you can search by keyword, you can see if people are just talking about your practice without actually coming to your pages to comment. But overall if somebody does leave a negative content on your page, that’s such an opportunity to turn that into a positive experience for that person and if

you're responsive and you're on top of your management its going to turn out to be a good thing in the end. Showing that you're there and that you're available instead of them having to call an 800 number and leave ten voicemails, I think it's just a faster, more human way to get to people. But it's definitely a lot of time. I always say that you should check on all your profiles at least fifteen minutes a day. You don't want to take up too long without seeing anything."

JP: "Can you talk about any specific instances where social media's hurt someone's reputation?"

AW: "Yeah, yeah. This is a little bit of an older situation, but when Facebook was relatively new, we had a lot of doctors that were using their personal profile to promote their business and—instead of a business page, which I always recommend. You want to keep your personal life separate, completely not work-related, you don't want to promote your business on your personal profile. If you're going to do any of that, you need to use a brand page. And this doctor was, he was really personable and he was really close with a lot of his long-time patients and he was accepting them as friends on his personal profile, instead of directing them to the fan page. He had a really good long-time friend surprise him for a weekend visit and he wanted to leave at noon on Friday, so innocently he cancelled all of his appointments for that afternoon and posted a picture of him on his Facebook page golfing, drinking a beer with a buddy, hand-in-hand. This person who had scheduled an appointment with him that afternoon, she'd taken work off, she'd paid for daycare, she was pretty upset when she saw that he was out golfing. So I just think social media is a great marketing tool and you should keep everything separate from your personal life and just be careful what you put out there because you really don't know, once it's on the internet, it's out there. And Facebook particularly changes their privacy settings all the time, so sometimes you'll think that you have a profile completely tightened up and they'll change it and you won't know that you have to check that box and then things will be public for a while. So, just keep it separate."

JP: “How much do you think should be invested in social media? Like time-wise, basically, money is like across the board different everywhere.”

AW: “Yeah. Time-wise I say at least 15 to 30 minutes a day. I think social media, there is a lot of ways to be very efficient with it, but you should be checking on it at least 15 minutes a day. Staff-wise I think that you should have one point of contact on your staff who’s dedicated to social media. That person should take pictures, they should plan content, they should get your staff on board, they should have policies for your employees and how they can share their personal information on Facebook that relates to your business. And overall that should be a person who’s really integrated in your brand because if you trust that to someone who’s new or somebody who’s part time and really doesn’t understand your voice, that’s going to show. It’s going to show that you took a shortcut so at least one staff member with the support of the business owners and then money-wise you’re going to have to have some kind of budget for advertising. It’s just so competitive that if you are trying to talk to people and reach them, you have to pay to play. And I would say, nothing crazy, like maybe 200 dollars a month or something like that. You don’t need to go broke over it.”

JP: “What are some methods that you can use to measure the ROI of social media?”

AW: “There’s a lot of opportunity with stats now. I think my favorite platform with stats is obviously Facebook. Their insights dashboard is really detailed. That’s going to relate more to KPI, especially with key performance indicators like fan growth, engagement growth. When you’re looking for an actual dollar ROI on social it’s a bit difficult. If you do a Facebook specific or a social media specific special and you know that you get X amount of new patients from that special, you can relate that directly back to social media. You could do an event and ask people to RSVP using the events app on Facebook and directly tie all those people coming to your event and the money they spend that way. But overall day in and day out its really not about ROI, I think its more about relationship marketing, brand awareness, and everybody’s different. Like different companies have trackable things through Google Analytics and they can put ref codes on

their links and I think all of that is really good. But most importantly set a goal for yourself, like we want to see X amount of fans by the end of the month or we want to see our engagement increase by this month. That will keep you on the right track. The money will come from those efforts.”

JP: “Which social networks do you think are most appropriate for your clients?”

AW: “Ooh. Blogging is number one. And a lot of people don’t assume that that’s a social network, but blogging is social media. Blogging is such an important outlet for doctors and medical practices to really dive in to new trends and new procedures and new treatments and answer frequently asked questions and just give more information to potential patients. After that I think Facebook is what we’ve seen the most success with. Facebook, email marketing, and YouTube. Email marketing is your pot of gold. So if you can collect a confirmed list of subscribers I would send at least one email correspondence a month to them just updating them on your practice, even if you don’t offer specials or anything, just get in front of them once a month. We do use, we dabble in Pinterest, Twitter, Instagram, Google+, I think it’s all part of the mix for integrated promotion but it’s not where you should focus all of your efforts.”

JP: “Which medical specific social networks are you familiar with?”

AW: “RealSelf. RealSelf is probably the one I’m most familiar with. There’s a lot of local directories and local search things but I don’t really work with those. RealSelf is interesting because patients really have complete freedom to share whatever on that platform. And doctors are signing in and responding and I always think it borders the line of medical advice and HIPAA compliance. It’s a really interesting site. But a lot a lot of potential patients go to that site to hear real doctors respond candidly and to see before and after photos. They really get to know the doctor on a personal level and we’ve seen a lot of business come from that site. It’s a good tool.”

JP: “Are you familiar with the MayoClinic at all?”

AW: “Yeah, a little bit. It makes me think of more like WebMD. I think a lot of those kind of like border a line of security and you have to take everything with a grain of salt. Allergan is also a big provider of our elective healthcare industry and they train all of their sales guys with this in-depth social media training and online marketing training and then they host training sessions with every doctor that they distribute to.”

JP: “Do we have a policy here for our clients?”

AW: “Yeah, we do. We have it if they need it, like they can fill it in, they can choose to use it and then they kind of monitor if its there in place. A lot of companies do it themselves because they seek legal counsel.”

JP: “What topics do you think are most effective and engaging on social media in general?”

AW: “Again, anything positive, inspirational, anytime you can ask a question and speak with your fans instead of speaking at them, that’s really important. We always say 80 percent of your content should be engaging and 20 percent should be self-promotional. And that engaging content should be photos of your staff, pictures around the office, birthday celebrations, anniversary celebrations, anything that’s really personal and really humanize your practice. I think I’ve seen a big switch in Facebook since Pinterest arrived and its put a—there’s always been a focus on visual content, and now it seems to be like creative visual content, like stock photos and things that you can make through tools like Canva. But I still think it comes down to the peoples’ faces and it being actual patients of the doctor. And before and after photo galleries do really well.”

JP: “Are there any specific to your clients that you think do best?”

AW: “Yeah that’s probably where I would say the before and after photo galleries because we’re in a results-driven industry, being able to see the transformation of actual patients is

really powerful. Type of posts-wise, photo posts always do the best. Short, two-sentence posts that just lead into that photo and have a quick call to action. Anything with the doctor's face, so simple, it can be a photo that's 10 years old, doesn't matter, if his picture is in that post, it's going to do the best."

JP: "Gotcha, have you had any experience with legal or ethical issues with social media for any of your clients?"

AW: "Hmm. Not too many. I think the biggest thing that we see is them not owning the rights to use images. So when they're using social media and they really don't have a lot of marketing experience, they just see posts out there and they right-click and save that image and then use it for their posts. They're not using it, they're not sharing it from the source and that really puts you in jeopardy, that's a huge copyright issue. So we always try to caution them of that. I think just copying in general, like they'll take the exact—whatever was written exactly on Wikipedia or exaction on a website—and they'll just make it their post. You just really have to think about it, like if you don't own the rights to use that content, even though it's just a Facebook post, it counts. You should really be cautious with those things."

JP: "Anything with patient privacy and social media?"

AW: "We had, in the beginning, a few doctors that would get patient comments like 'I love my results' and 'I'm already feeling so much better' and just really basic things and the doctor would respond or somebody from the practice would respond and say something like 'oh, thanks Sarah we're so happy you love your results,' like 'we'll see you for your follow-up on Thursday' and it's like aaah! Just say thank you, you don't want to get personal even though that person is revealing all of that information, just keep it simple."

JP: "So they're self-identifying, just a neutral response."

AW: “Yes, neutral response. Great to hear from you—no, actually I wouldn’t say that. Just say thank you. Keep it simple. But everything else you can say can get you in sticky water. I just always like the comment and I’ll leave it at that or when everybody is done leaving comments we can do one big comment at the bottom that says, ‘thanks everyone who left a comment,’ period. You want to let them know that you got it but you just don’t want to admit to them being your patient, at all.”

JP: “What steps do you help your clients take to avoid breaching patient privacy or legal issues?”

AW: “We do a whole security training with any of our clients so our IT and engineering teams are actually in charge of that and they go from website pages to blog comments, they cover a bit of social media, a little bit of online marketing, reputation management, and they really just give them overall like how to manage your online reputation and protect patient privacy. We also advise that any time they’re giving content to us for the website or to us for social media that they have a form in it where that patient signs to say that they’re completely fine with letting go of their photo rights and that we have complete rights to use them. And then we’re always here, we have so many eyes on their site, on their online marketing identity that if something was to come up, we’re pretty much right on it. And we have an AE team that reaches out to the client and the doctor directly to warn them about anything.”

JP: “What other problems do you think social media can cause for medical companies?”

AW: “I think keeping it professional has always been a concern that I hear. Doctors are really concerned about sharing personal photos or really letting their guard down on social media. And I don’t think its necessary to really let your guard down, like you can still be an approachable professional doctor, just like sharing tips or just keeping it really simple like a lot of other doctors are really worried about giving medical advice when they give a tip. Like it just needs to be simple like eat healthy, you know? Get some Vitamin C. Really simple things, and sometimes the doctors just read a little bit to into it I think.

It's more about being available, being personable, having a nice branded Facebook page and social media properties, and being responsive if somebody reaches out to you."

JP: "Okay, well that's all the questions I have for you. If you want to add anything feel free, but that's about it."

AW: "Hmm, well. Those are really good questions."

JP: "Thanks!"

AW: "I think that it's important to remember, I know we talked about ROI, but it's important to know that social media is just about brand awareness, relationship marketing, you can't always see a direct money return but it's something that in 2014 you just have to be doing. And that you have to have buy-in from the business. If you're an outside person trying to make that page work and you don't have the support of the business owner, the doctor, or whoever, it's not going to work. You can only make up so much and people know when you're just filling space. We have like a clear line of people that we think are right that social media and some that aren't. If you're not ready, just don't set up anything beginning and leave it alone. Hope that helps!"

Appendix C

Interview Transcription: Steven Simas

The following interview was conducted to get expert opinions from a legal professional perspective based on a questionnaire about social media and the issues it can cause for the medical industry.

Interviewer: Jessica Padilla

Respondent: Owner & Founder of Simas & Associates, Ltd.

(Steven Simas)

Date of Interview: 11/10/2014

Jessica Padilla: "So first, I have some general social media questions, just like as a consumer. In what ways do you think social media can help medical businesses build relationships with their customers?"

Steven Simas: "Medical?"

JP: "Yes."

SS: "I'm more familiar with legal."

JP: "We can go there too."

SS: "Well I've seen billboards where you can go to the ER by texting. Have you seen those?"

JP: "No I actually haven't."

SS: “Fascinating, I’ve seen like two or three of those. My view of it is always on the negative end of it where one of the licensing boards of the state is having a problem with my client’s social media. And I know you’ve got questions on that in a minute. I don’t know in medical as well as legal, but we get a lot of clients by Google and we have a SEO company that works for our firm and doctors I don’t think refer—well, in the old days doctors and lawyers were all by referral. That’s old school. And we still get that, and I’m sure doctors still get that but I don’t think the communication about cases—they use social media, veterinarians have a network called VIN, Veterinary Information Network, and if you have a dog with a hernia then you go on there and you log in and there will be discussion groups, scholarly articles, and all that. I know healthcare professionals, veterinarians, I know this more about veterinarians than I do like docs because I use this to defend veterinary board cases. My number one answer would be communication about journal articles and collaboration. They use social media for that. I don’t know much how they interact with their patients. But I do know they use it for collaboration interaction like that, especially veterinarians. Some of them use it to make an appointment; I’ve seen that, that’s a good way. A lot of them are on LinkedIn. Is that a good answer to your question?”

JP: “Yes, that’s great. What are some general examples of like any company, any kind of company that you think does a good job connecting with customers through social media?”

SS: “A firm?”

JP: “It can be anything. Can be legal, can be like Skittles, anything.”

SS: “Our law firm.”

JP: “Your law firm? Okay.”

SS: “The reason I say that is because you can make an appointment, you can pay your bill, we have resources on our website. I don’t know if you’ve seen our website but this would corroborate it. We have a blog that gets blasted out through the Facebook page and all that, that every day I am linking our blog to clients and potential clients that have questions. So I think our website, unlike most law firms, is a huge resource for our clients. And so we’re able to connect with them that way and so we also have a newsletter that ties it all back together and I get rave reviews of our newsletter all the time. And then the final component we just implemented a couple months ago is a survey, questionnaire about how we’re doing. I think the one thing, I think, it’s easy to trash someone on Yelp and all those other ones, but I don’t want to get trashed on Yelp. I want a client to email me back in my questionnaire. So that’s why I think we do better than just Yelp and all that stuff. We’re also on Yelp, have to be on everything.”

JP: “Yup, have to be present and cover all the bases. My next question actually is about managing reputation over social media. So, what do you think are some good ways for companies to manage their reputation with social media?”

SS: “My clients have this exact problem, especially with veterinarians. You’re going to hear me refer to a lot of veterinarians. We don’t represent mostly veterinarians, it’s mostly healthcare.”

JP: “Okay.”

SS: “So veterinarians are susceptible to this because people don’t want to pay for service to their dog or cat. They immediately go trash them on Yelp. So one, the legal way of writing a demand nasty-gram letter to Yelp and saying take this down, blah blah blah, not effective at all because people cite the first amendment and say we have the right, freedom of speech. The only way to be effective in that is if Yelp is republishing defamatory material. So if they say, ‘doctor Padilla is a criminal, and she stole money from me when my dog was spayed or neutered...’ Okay, that’s calling you a criminal, that’s defamatory. I could probably get Yelp to take that down. So what I’ve been advised,

by social media people and by my clients is to kill them with good reviews, that just lowers the bad review and that's the best way. And Yelp, in particular, is just not cooperative. And maybe to keep their credibility, they shouldn't be. But there's times where they need to do a little bit better."

JP: "Absolutely."

SS: "Some of the legal websites that we get reviewed on, lawyers.com and Avvo, they'll take stuff down because people like to trash their lawyers when their lawyers want them to pay their bill."

JP: "I actually work for a social media company right now and we have similar issues with ourselves and our clients. It's nice to know it happens to not just us."

SS: "Yeah, I'm probably not going to tell you much new. But you're sitting duck. We're all sitting duck. Before I go and trash a business or something I have to be really peeved and be objective. I think you have a duty to be honest and social media assumes and relies on that and people are not."

JP: "Nope, not always. How much do you think should be invested in social media?"

SS: "I don't know what a good budget is, but a majority of our marketing budget in our firm goes to that and it depends on the kind of business, I suppose. I had a friend who had a purely online dog food, natural dog food business and he should invest everything he's got because live or die, we still have some old school components where we get referrals from other lawyers and former clients and family and friends and so we still get the old—one day a couple weeks ago, I got two referrals from old school. It was very nice. It's been a long time, you know, everyone is Google, Google, Google. It's beautiful but it depends on the kind of business. But you need enough to keep the water spigot pouring water."

JP: “Mhmm. What are some ways that you, for here, or anyone else should be measuring their return on investment for social media?”

SS: “My colleague Justin Hein in Sacramento is responsible for that for our firm. So we actually see—I know there’s different ways to do it—so generally your goal is to get a click and then get a conversion and then get a client. We measure it mostly by clients. Clicks don’t really help us although you gotta have them to convert and all that. And an example of this success is tomorrow I’m meeting with a lawyer from Ohio who’s flying into Sacramento to meet with me because she found us on Google because we have a very narrow specialty. Her client is a California company and they need our specialty from Ohio.”

JP: “That’s awesome.”

SS: “And, it’s my second client from Ohio in like a year. I’ve never been to Ohio, I don’t really like the sports teams from Ohio, but that is the gloriousness of it. That’s the feel-good part, the ROI, return on investment part, is how many clients are coming in the door from Google.”

JP: “Gotcha, which social media networks do you think are most appropriate for professional industries like medical and legal?”

SS: “I think there’s a stigma with Facebook because people date on it and people don’t date on LinkedIn.”

JP: “That’s true.”

SS: “I would say LinkedIn is probably the safest. My colleague Justin would know more about this than me but he’s on Avvo for lawyers, and there’s another couple. There’s dedicated lawyer ones. And then, medical, I was interviewed on WebMD which seems to

be—I got phone calls all over the country from the interview that I did about a case that I had handled so I would argue WebMD must be really darn good.”

JP: “Yes, that’s a good one. Definitely. Are you familiar with any other medical-specific social networks?”

SS: “Probably not, no.”

JP: “Yeah, that’s fine there aren’t that many big ones. WebMD is definitely one of the most well known. What topics do you think are the most effective and engaging for medical companies to discuss on social media?”

SS: “Well one we did is, watch out for the California Pharmacy Board if you don’t have—in 2006 a new law passed, and if you are a wholesaler of medical devices approved by the FDA, you now have to have a California Pharmacy License or wholesaler. So, what’s effective, we think, is we blogged about that and communicated about that.”

JP: “So industry news?”

SS: “Yeah, industry news, in a need. We always try to target it towards a need. A need first; try to fill a need, or how we have handled it or dealt with an identical problem or case. People relate to that.”

JP: “How can businesses make sure their social promotions adhere to applicable laws?”

SS: “Where they get in trouble, and the only way I think to do this is you gotta look at the state individual laws. In California, if you’re a physician you need to be familiar with Business and Professions Code Section 651. And, you probably should go look that up for your report. You can Google, as long as you put in CA Business Code 651, it’ll show up. And what that is, that applies to all healthcare professionals in California. It is a very specific law and it depends on the mind of the consumer and was he or she misled.

Which is an insane standard when you are communicating, of course you didn't think they'd be misled because you didn't try. So that can cause you license discipline in California. That's whether you're a pharmacist, a doctor, a nurse, a pharmaceutical company, so the law is about—there's federal law, but then the states have differing unique state laws.”

JP: “Okay.”

SS: “And that is just about the content of the communication and all that. There's also web-based marketing laws in California where you have to have certain disclaimers and things like that in addition to what I said. So Internet marketing is regulated in California but this is specific to healthcare providers that I was talking about.”

JP: “Have you—are there any bigger issues or really common issued that come up in relation to social media and medical companies?”

SS: “Yes. In California, there is a war between physical therapists and chiropractors about who can adjust or manipulate our joints and spine. Not just medical providers, this is—so the issue I'm going to discuss is called ‘scope of practice’ so if you go to a psychiatrist and you get in his wallet and he shows you his wallet card, it says physician and surgeon. So his license is to talk you through your problems and provide counseling and prescribe medicine but he can't do knee surgery on you, but his license says he can do knee surgery on you. So he can do surgery on you but it would be a lot like me doing surgery on you because he's not competent. What someone's scope of practice is is different than what they're competent to do. For example, an orthopedic surgeon can't really do heart surgery. Specialization. The problem comes in when people represent through social media what they can do for you. Do we want specific cases yet or no?”

JP: “Go for it.”

SS: “I had a laser surgeon who had before and after pictures of patients because he was going to make you beautiful, or handsome, or whatever. And the law was, the medical board law requires you to say that it’s a model and it’s not a real patient. And I have a case right now where a client sent me a website of a competing physical therapist with her picture and her patient on it. She lifted it from Facebook and she stole not only the patient—which it’s pretty egregious to do that to a child, it’s a 3-year-old kid. The point of the picture is to show this device they use for pediatric physical therapy. And so the stealing PT says, you know I have this device, it’s really cool—well she took the little kid and my client who’s a PT who’s in the picture. So that, it’s so easy to right-click and commit maybe a crime but it’s certainly unfair competition and a violation of the physical therapy act and the advertising law and a violation of patient rights. That one click could get her sued by the kid’s family, her license in trouble, her insurances cancelled that provide, you know, her coverage for her patients. So that is about a 2-week-old example. Really. So the message has to be, this is what we do and it has to be within your scope, you can’t represent something outside your scope. Okay. And then the second is, you can’t violate rights and it’s hard to use models and examples and all that without permission. My client says that she had the permission to have the kid on her website. But, the second one clearly doesn’t have it.”

JP: “Yeah, definitely not. Wow, that’s crazy.”

SS: “Yeah, so does that answer that?”

JP: “Yeah, that was great. How do you think those types of things could be prevented?”

SS: “Well, have a—it’s self-serving to say, ‘always have your attorney review everything, but that’s what we do so that’s what I know. And you’re going to educate the world by being a journalist. But that only works if people listen and read and care about what you write. So you have the same problem I do. If a healthcare provider had a website and I looked at it, I could tell them what I think violates the law, I could tell them what I think doesn’t, but I think the better general answer is audit your message before it goes out.

Audit it. Have a layperson look at it, have a professional look at it, have a lawyer look at it, and don't have staff write it when you don't know what's going on. It's all about the representation and is it in your scope of practice because if you offer a service you're not licensed to do, that could be a misdemeanor and you could get your license in trouble if you have a license in other areas. And that's true in healthcare, but with contractors, real estate people, doing mortgages, some mortgage people don't have to be licensed if they work for banks and some are licensed by the Bureau of Real Estate. The consumer always needs to know who he or she is dealing with and has the right to. So that's one of the problems."

JP: "Have you dealt with any cases involving patient privacy legislation?"

SS: "Legislation?"

JP: "Yes, patient privacy laws like HIPAA, HITECH, all of that."

SS: "All the time."

JP: "What kind of issues mostly come out of those?"

SS: "I just hung up on a phone call as you were walking in. There is a physician being disciplined by the medical board—I can't remember for what. And—oh, for over-prescribing which is very common. This is the only medical board case I have where the physician is not my client. I represent the patients. Because the medical board subpoenaed the patient records and they don't want to give them up and they didn't want to discontinue seeing the doctor. So, in our opinion it interfered with the physician-patient relationship and they don't want to give up their records and they're personal pain med prescription records. We're fighting this fight in court. I've had many cases of accidental disclosure where you have to then notify the aggrieved party. I've had this PT case I already told you about. I'm trying to think. Most of the time when you're sued or the licensing board comes after you for negligence and patient records or an issue, most of

the time HIPAA and HITECH aren't applicable because you redact the records and you have the right to defend yourself with your patient records. But, things get messed up and get misdisclosed and clients get in trouble for that sort of thing all the time and my area is if you violate HIPAA then it comes to the medical board and that's also a separate licensing violation because you're supposed to know better. So I hope that was enough specific examples."

JP: "Yeah, definitely, that was helpful. That was actually all the questions I have. If you have anything else to add feel free."

SS: "I don't think so."

JP: "That was fantastic. Thanks for all your help."

Appendix D

Interview Transcription: Ryan Miller

The following interview was conducted to get expert opinions from a marketing professional perspective based on a questionnaire about social media and the issues it can cause for the medical industry.

Interviewer: Jessica Padilla

Respondent: President of Etna Interactive
(Ryan Miller)

Date of Interview: 11/14/2014

Interview Transcription

Jessica Padilla: "From a marketing standpoint, how do you think social media can help medical companies build relationships with current consumers?"

Ryan Miller: "So would you consider medical companies to be everything from private practices, hospitals..."

JP: "Sure, the whole umbrella."

RM: "Boy, we have half an hour so I think the first opportunity that social media represents is obviously the opportunity to connect with new patients, so whether we're talking about a medical practice, a hospital, or a medical device or pharmaceutical company, there's an incredible chance for these practitioners to increase awareness for who they are and what they do to share sort of the benefits that they offer from whatever, whether its their practices or their products. But I think beyond there, when we start to get where it really becomes interesting, beyond generating patient interest. I think there is a huge opportunity for patient education and awareness. What is seldom understood in the United States is that for many new therapies, for many new medical products, there is

a period between, after which, the research has been done, doctors are now coming to believe that this new treatment or this new product is an excellent course of care for patients dealing with diseases but that insurance companies don't yet pay for it. There are opportunities today, thanks to social media, for patients to learn about emerging therapies often sooner than their doctors and specialists are learning about them. And one of the eye-opening things for me working in this space is that, I'd say my biggest take away, you know, when I'm done with this job and I move on to retirement or whatever it might be is the knowledge that as a patient, I must advocate for my own care if I want to get the best care possible. To do so I have to be really well educated. I think social media creates an opportunity for patients to really play an active role in their own care. Probably for me the third big category of the opportunity social media presents for me in medicine is the opportunity for medical companies to listen to and learn from their patient base. We see it very much with the doctors that we serve that they may be great practitioners, but in the old days we talk about bedside manner that they may as individuals, may not be providing the best service or experience for a patient and that contributes to how their overall feeling of well-being and how they perceive the choice of healthcare providers or products to be fit to them. Today we see this is such a big deal in America that a lot of the federal insurance reimbursement for healthcare—so monies that are paid out by our government to practitioners—is linked to patient satisfaction ratings. Meaningfully, so are they providing these things, these services, in a way that are truly benefitting patients? And so, it's recognizing being important that our federal government is building into the delivery of care and the reimbursement for care, the need for hospitals to collect feedback and I think social media is a great feedback mechanism."

JP: "That's great. What are some good examples of your favorite brands building relationships with their customers on social, so any brand, doesn't have to be medical, could be anything?"

RM: "Ooh. Hmm. Favorite brands building relationships with their customers. Boy that's tough for me because I'm not an absolute brand loyalist. I tend to be a little bit more brand-fickle. And it's hard not to fall back on just traditional case studies. You

know I think for me the examples that come up would have to be related to some of my own personal experiences and the things that I purchase. I feel like we see today a lot of the hotel brands doing a really great job of extending quality of service and I think it's been, it's actually thanks to sites like Trip Advisor things like that that we see it. Both the Marriot and Starwood properties are properties that I frequent when I have to travel for business and I really think they do a great job of encouraging people to celebrate in social media their experiences there while at the same time marketing a message that talks about how much they value customer feedback. So I think there's some good examples there. I think that there are, gosh it's funny, I think American Express."

JP: "Yeah they do a great job."

RM: "...Yeah, does an amazing job. As I look at my credit cards on my desk, of, you know of connecting the patients and social media. But I'd say probably the other areas where I see social media being used really well is in cause-based marketing. So I know I've seen in like the Komen Foundation how there are instances where they're using social media to connect people and resources and tell stories for like breast cancer awareness and they do a really fantastic job as well."

JP: "Perfect. What are some of the best ways you think that your company helps your clients manage their reputation on social?"

RM: "Ooh. So I'm a firm believer that first and foremost a large social footprint is implicitly a strong reputation defense. Today we might see that a practice who doesn't try on popular sites link HealthGrades or Vitals or Yelp and ends up with one or two reviews that comprise the entirety of their reputation on that site. And so what we see is that they're left with something that's really not representative of who they are but because there is such a strong movement, in the U.S. in particular, around social media, it's much more likely that they will accumulate a large fan base and there is something implicit. If I go to vitals and I see a practice that has three and a half stars based on two reviews, and then when I searched on Google for their name the very next result is their Facebook

page and they have 2,000 fans and these are people with real names and real lives that were willing to connect themselves to this business—before I ever get into the idea of review content on Facebook—right away I think, can this really be that bad of a business, a three and a half star business if 2,000 people were willing to connect with this business on Facebook? Then you go deeper and you start looking at—so I'd say there's an element of social proof, simply having a large base of followers suggest to people that you are, there's a level of trust that comes just by having that fan count. But that said, the next layer forward is we see, today, that most of the social platforms provide opportunities for individuals to rate business. The two most prevalent for me would be Google My Business and Facebook. For both of those, I think reviews are very essential the way they're operating and presenting data today. Interestingly, Facebook, which is so much more out there in terms of visibility, we see clients cultivating very large volumes of reviews. Where Google+, where perhaps that's probably the thing that's weaker about it, the social connections are weaker. On Google My Business it's harder to cultivate reviews. I would say both the footprint, the scale of their connections and social space speaks to their reputation. And obviously today we're helping our clients to directly cultivate reviews on those social channels.”

JP: “Do you have any examples of a time where social media damaged a client's reputation?”

RM: “Sure, this was quite a long time ago now where I'd say in the fairly new days of Facebook where it was not well understood how it would work well for business at all for the medical business. It's an anecdote that I'll often tell when I'm lecturing about social media. We had a client who had a colleague from medical school who was coming in and he asked his nurse to please cancel two of his procedures that were scheduled for the end of the day on Friday. His intent was that he would go and play a round of golf with this colleague in the short wind of time that he had with the colleague in town. He went out, played the game, took photos of himself with his buddy, posted photos of them playing golf and having a beer at one point on their Facebook page. Now this was the very early days of Facebook and the doctor had, not really understanding, had already started to

form personal connections with his patients on his personal page. So this kind of predates people knowing that it wasn't a good idea for you to have a personal Facebook page as a medical provider and then allow patients to connect with you there. Long before discussions about privacy settings and all that. Well, he didn't ask her to do this but the nurse told a white lie to both patients when she cancelled those appointments and said, 'the doctors had a family emergency and needs to reschedule...' Mind you for many of these people, a surgery date for something is big as important, as an elective procedure like this often means finding childcare, taking time off work, it's a really big deal. The patient in question had developed some empathy initially, 'so I understand the doctor's had an emergency come up,' and ended up being one of the ones who was connected with him on Facebook. Sees him playing a round of golf and drinking a beer with a buddy and all of the efforts that she had made for this procedure, both emotionally and practically, were for not. She quickly fired back at the doctor publicly accusing him of being a terrible person. She had previously been a loyalist to the practice and she had been quickly converted. It actually caused other people who had suffered other inconveniences because of the practice start to chime out in social space as well. It definitely took a while to remedy the situation, but I think the doctor definitely learned an important lesson there."

JP: "How did you guys remedy the situation?"

RM: "Yeah, this is actually before we even had a social media team."

JP: "Oh wow, that's crazy."

RM: "Yeah so we did a couple things. We encouraged the client to speak offline and very personally and directly with the patient to try and remedy the relationship. They had modest success with that; the patient really was fired up. We encouraged him in the coming weeks and days to have an open conversation with patients he had previously friended and explain that it doesn't feel appropriate for me to connect personally with you as a patient. That was when we started driving our doctors to make sure they started creating their business profile pages—and reestablishing those connections. And then

really counseled the client to make a very public apology about the misunderstanding because that's really what it was, it was a misunderstanding. Nobody meant for it to happen the way it did. But that level of very public exposure really created an opportunity for there to be a lot of misunderstandings."

JP: "How much do you think a private practice should invest in social media?"

RM: "So for a private practice, it depends. One of the things that we explain is that for some practices simply is not right for them. Depending on the brand, the image, the goals of the practice, as well as where they are on the life cycle, it may not be necessary for them to be there. In fact it could even be detrimental for their practice for them to start and not be committed to engaging in social media. It's hard to say, to really answer directly, Jessica, because I think you know we also advocate for the practice to develop the capabilities of someone on their staff."

JP: "Yes."

RM: "So then they can offset what it might cost to hire a vendor while still producing really authentic content because we need someone inside the office to help with that. I would say—the way I would choose to answer it would be in terms of time. And that for a single practice that is going to go after a single channel, like Facebook, to be successful they're likely to commit a minimum of 8 hours a week allowing for things like committing to fan growth and cultivation, strategic planning of campaigns, the creation of original post content, and sourcing or creating or creating corresponding graphics, listening to and responding to direct messages, monitoring and replying to wall posts, and working to integrate between social media and other aspects of your online marketing like referencing and linking back to blog posts and things of that nature. That's a big time commitment for a lot of practices to do it really really well. What we see today is most practices on average are struggling and questioning the value but largely because they're maybe only putting in the equivalent of four hours a week to their efforts. Probably about half the time it takes to be really successful."

JP: “So do you think there’s a difference for if they’re a bigger practice or more of an institution, manufacturer, or not really?”

RM: “Sure, I mean there’s a couple of key differences. If we get away from—let’s ignore manufacturer and pharmaceutical company for just a moment. Let’s talk about like a larger or a group practice or even a hospital setting. In the group practice, we tend to be looking at a model wherein it’s easier in one sense because there are more people from whom you can draw inspiring content. Harder in the sense that it’s often like hurting cats. Now you’re chasing that many more people for that input. So I would say in terms of the total time, it’s a wash. Some things come easier and some things come harder. Hospitals tend to naturally staff because they’re communicating on a much broader level about many more areas of service, tend to be able to benefit more from actually having multiple dedicated staff members who are focused on social media campaigning in the market that they serve. I would say hospitals are probably easily spending three times that 24 hours that week in the social media they work and they work across multiple channels. Pharmaceutical companies, it’s a completely different story. In the pharmaceutical and device space, they deal with aggressive regulations. So for them, there’s less that they can do and more regulations so they may need to put three to five times as much effort just to produce the same amount of activity that a private practice could in 8 hours.”

JP: “Gotcha.”

RM: “Which is why many brands today in the device and pharma space still kinda stay hands off as precautionary.”

JP: “Interesting, yeah I was just reading some new articles too that they just added some regulations to what they can do on social.”

RM: “Yeah and the big thing that medical device and pharmaceutical companies have to address is what’s called adverse event reporting. Basically if you make a product and you

learn from a consumer that they have had a negative reaction to interacting with your product, you are legally obligated to do a certain amount of due diligence and investigation and so the fear with opening up the channel on social media where you as the company, the medical device or pharmaceutical company, control the space, control the page, if you own it and then somebody posts on your wall, 'oh your product is giving me a rash,' you have to by law reach out to that person and invest a certain amount of effort to try to gather all of the details and then ultimately you have to report that out publicly and back to the FDA. So that is why we see a lot of drug companies not necessarily opening themselves up to that kind of exposure in social space."

JP: "That's definitely understandable. What are some ways that you can measure the ROI of social media for medicine?"

RM: "Yeah, so it's funny we were just talking about this at lunch. When we talk about social media I think that there's different values we have to place on social media. So you hit on, in the very beginning, the very first one which is reputation management. There is a value in social proof to having a large fan base that's fairly intangible. So in terms of measuring investment return, I might make an investment in social media where the only planned return is accumulating a large fan base to help protect me and my reputation. Now that said, I don't think that's really what you're going after but it's one of the first goals. So we might measure a growth and accumulation of fans and let that be a part of a campaign goal that is a non-financial, measurable outcome of the campaign. So the next thing that we might look at social media for is creating a measurable and very very—having a specific impact on consumer awareness either about my brand or an attribute my brand. An example that I'll give is we have a client who's a facial plastic surgeon who loves doing non-surgical procedures, injectables, BOTOX..."

JP: "DCM? I think we were just talking about this in a meeting."

RM: "DCM, yup... Where in looking ahead in 2015, one of his major goals is to better tell the story about the fact that he's a surgeon who doesn't like doing surgery, that he

believes it's actually better for the patient to use a combination of injectable and reversible therapies than to necessarily undergo a surgical procedure. There's a very specific category of patient that wants that and doesn't want to undergo surgery. Part of his goal is to actually drive awareness around that. So in terms of creating an awareness of a brand attribute or a selling proposition that's unique to yourself, your brand, there's an opportunity in social media that is directly measurable. We can measure it in terms of impressions, engagement, traffic back to specific related pages on the site where we're clearly getting that message out there. But again, not directly tied to ROI. If we come back and bring it straight down to what is the monetary return on our investment we're able to—and really anybody has the capacity, but most don't tend to—more immediately measure patient inquiries that are generated and procedures that result from social media campaigning.”

JP: “What mainstream social media outlets do you think are most appropriate for medicine, as a whole?”

RM: “Yeah so I think probably first, the top two on my list would be Facebook and YouTube. And then I think there are a variety of answers that will be of additional options that are completely contextual. In plastic surgery, I would actually classify RealSelf as a social media outlet that is more than appropriate, it's almost essential today for providers in the elective healthcare space. So I think that that's there and I look at many practitioners and I would count, for example, a site like Yelp as a social reviews platform and look at certain markets where Yelp is highly penetrated like San Francisco, Seattle, you know, pretty much everything in Portland and the Northeast and increasingly across the rest of the U.S. and say well it's kind of essential that you have a strategy around Yelp because they're so influential and guiding people's buying decisions, inclusive of healthcare today.”

JP: “What medical-specific social networks are your clients active on?”

RM: “So I’d say RealSelf is probably going to be the one that is most prevalent. Medical-specific... If we consider the ratings and reviews sites to be social platforms, then I would say that from there the ones that are really common are going to be HealthGrades, Vitals, RateMDs. At least in the U.S.”

JP: “Are there other ones for Canada?”

RM: “Yeah there’s like Canada B.A. which is a breast augmentation site that has a significant physician reviews component. There’s actually a site, it’s called Kijiji which is like their version of Craigslist but it has a advertising and reviews platform so like sellers can be reviewed.”

JP: “Hmm. Do any of our clients have their own patient portal type of thing where they can interact with each other?”

RM: “It depends on how you would define that. Many have some kind of third-party tool to connect with patients virtually but the scope is going to vary. The most common one would be practices that use a practice management software package; that software package will often have a secure portal for things like pre-registration for appointments and secure messaging. That’s probably the most common. Less frequently, I have clients who’ve gone out and invested in secure messaging platforms so they can have virtual consultations back and forth by sending encrypted mail inside a secure portal. I would say fewer still have a kind of independent third-party solution for things like appointment scheduling and that kind of thing where it’s a portal for patient connectivity but they’re not really socializing or building a deeper connection. They’re like tools of convenience.”

JP: “Okay. What topics do you think are most effective and engaging on social media?”

RM: “Boy, the joke that I often tell is that pregnancies are huge. Right? So you get to announce that someone is pregnant, celebrate, you get to show the photos from the shower, you get to wish them well when they go out on maternity, you get the photos of

the baby when they come back, you get a photo of the doctor holding the baby, and then welcome that person back to the office when they come back, and the first birthday, gosh, you can work it for almost 2 years. So I would say generally, all joking aside, that leads into really the personal side of the people behind the practice we see resonate very very highly with patients overall. I think interrogative content, so content where you're asking questions and challenging patients' knowledge is great while providing education. Obviously contests are very very popular in social media that people have a chance to get something for free, drives engagement. I would say content with controversy, whether that's tying into something that's happening in the popular press, challenging a common view or opinion, or just coming out with a really strong message, seems to really drive significant engagement."

JP: "Have you had any experience with legal issues related to social media for any of your clients?"

RM: "We have seen clients who posted photos that contained, like from staff events things like that, where they hadn't previously received consent from those patients. I don't know that it ever went to a full lawsuit but they received threatening letters from the clients, inquiring, mandating that those photos be removed. So if you're hosting an event you need to get consent. I think that's probably the only one that I've heard so far among our client base where there was a strong point of contention where there was potentially legal action that was going to happen."

JP: "Okay. Any ethical issues between employees and doctors or doctors and patients?"

RM: "We've seen a smattering of concerns around two things, one, we've had doctors who've come to us and said, 'I found my employee bad mouthing our office in social media, kind of venting, what do we do about that?' Our answer is, call an employment lawyer. Then, the other one that I'm aware of that we, again, we were not involved, they worked there way on this, they had, again in the early days, they had an employee, a receptionist, who was sitting at the front desk and was making personal Facebook

connections with patients. She was building relationships with patients on her own and then went home from work one night and complained on Facebook about one of the people who'd come into the office that day, a patient of the practice, just kind of venting. And it made it back to that patient and they elected to terminate her because her behavior outside of the office impacted the success of the office and the lawyers felt that they were right to do so. So I've heard and we've seen those things and like I told you we were carefully involved in those."

JP: "Okay. What steps do you and your clients take to avoid breaching patient privacy or litigation issues?"

RM: "Sure, so we encourage our clients, all of our clients, to become active on social media to make sure that they've trained their staff in HIPAA and make sure they learn the understanding of what's required to protect patient privacy. We counsel them to be careful when replying to or acknowledging inquiries in social media and at the end of the day to ensure that they are receiving consent forms, signed consent forms, before they use any images from patients."

JP: "Perfect. What other problems can social media cause for the medical industry?"

RM: "Gosh. I think we've touched on a lot of the potential risks which are the risk of backlash, public declaration that if your service or product isn't exceptional, accidental or intentional violation of patient rights and expectations, damage to practice reputation."

JP: "That's all of the questions I have, do you have anything to add or any questions?"

RM: "No, that's great, good luck."