

Use of Facebook as part of a social media strategy for patient engagement

Clare Liddy MD MSc CCFP FCFP Zoë Hunter MSc Ariana Mihan Erin Keely MD FRCPC

Using social media is part of many people's daily routines. However, social media can also be a part of a patient engagement strategy by supporting information dissemination, raising awareness, and encouraging the public to ask their primary care providers about innovations in care delivery such as electronic consultation. The Champlain BASE (Building Access to Specialists through eConsultation) eConsult service is a secure, Web-based tool that allows primary care providers quick access to specialty care for their patients. In an effort to increase awareness of the service and invite patient feedback on the use of this new model of care delivery, we developed a Facebook page.

Why Facebook?

Facebook provides an accessible method of obtaining information in lay format about health services that would otherwise only be found in scientific or academic journals and other sources that are less accessible to the general public.¹ Our choice of Facebook rather than other social media platforms was based on its rapid, interactive, free-form method of communication with the ability to strategically target groups and drive discussion by allowing users to rate the service, write a review, share the page, post about their experiences with eConsult, access the eConsult website, and stay updated on the service.

Implementing a successful Facebook page

Content development and management. First, we created a mind map of patient engagement tools to demonstrate where social media fit within our strategic approach, incorporating promotional, engagement, and stakeholder objectives. Second, we held several meetings with the eConsult research team's partners to review institutional policies and explore the potential risks and benefits of using a Facebook page as a patient engagement tool for eConsult. Extensive planning was required before launching the page. In response to suggestions made at these meetings, we created a "Facebook Moderator's Handbook" outlining our implementation plan, which focused on 3 main objectives: raising page awareness among the target audience, privacy, and continuous evaluation. The handbook included a calendar indicating the date and type of pre-planned content, engagement, video, and photo posts (eg, "It's Fun Fact Friday! Did you know that the average response time for an eConsult case is only 2 days?");

a plan for responding to feedback (both positive and negative); and methods of page moderation.

Reaching our target audience. Our target audience included patients and the general Canadian public older than 18 years of age. To raise awareness, we reached out to our stakeholders with requests to disseminate information about the launch of the eConsult Facebook page on their respective social media platforms. Further, we "liked" health-related and patient-focused pages with similar target audiences (eg, Canada Health Infoway, The Ottawa Hospital), thereby linking our page to similar groups. Facebook demographic settings were used to set a "preferred page audience," targeting age, location, interests, and language, increasing the chances of our target audience encountering our page. We expect people to join the page as they see their friends and family members doing so, and as they note that it has a following and is patient-focused, relatable, relevant, and free of medical jargon.

Privacy. While the free-form nature of Facebook is optimal for interactivity, it holds the potential for privacy and liability issues. We adjusted settings to disable private messaging and ensure no posts would be published before being approved by the page moderator, a designated member of the eConsult team (Z.H.) who is responsible for page maintenance. Terms of use dictate no personal health questions, photos, or profanity are published, and responses can be expected during business hours Monday through Friday. In addition, a disclaimer stated that any personal health concerns should be voiced to a primary care provider.

Continuous evaluation. Successes, setbacks, and obstacles encountered were tracked daily in a Microsoft Word document entitled "Facebook Journal." Maintaining a record of problems and their solutions proved useful in providing day-to-day tracking of methods used and their success or lack thereof. Facebook's insights and analytics provided detailed analysis including number of page and post likes, reach, sources of likes, and audience demographic characteristics.

Results

Four weeks after the page went live, it received 198 likes from Canada, the United States, Ghana, Vietnam, Taiwan, and Ecuador. Engagement (post clicks, likes,

Hypothesis

comments, and shares) was obtained from the above-mentioned countries, as well as Israel, Australia, Iran, and the United Kingdom. The page had a total organic reach (ie, number of viewers who saw a post without paid advertisements) of 5601 people living in Canada, and had reached 44 other countries. Of the 198 likes, 78% were from people between the ages of 18 and 34 years. Posts that obtained the most reach were those including photos, followed by posts containing links.

Conclusion

The ultimate goal of the Facebook page was to engage patients and raise awareness surrounding the Champlain BASE eConsult service. Within 4 weeks of launching the site, we obtained extensive reach worldwide but limited uptake in terms of discussion flow. It might take more time for the page to gain the popularity and trust necessary to develop a large enough audience for consistent engagement. The eConsult Facebook page remains a key resource for patients, enabling them to conveniently acquire information about and comment on the service. We expect increased traffic as the service becomes more mainstream. With technology evolving and shaping our means of communication, Facebook can be an effective, simple tool for patient engagement. 🍁

Dr Liddy is Clinician Investigator at the C.T. Lamont Primary Health Care Research Centre of the Bruyère Research Institute in Ottawa, Ont, Associate Professor in the Department of Family Medicine at the University of Ottawa, and Primary Care Lead of the Champlain BASE (Building Access to Specialists through eConsultation) eConsult service. **Ms Hunter** and **Ms Mihan** are research assistants at the C.T. Lamont Primary Health Care Research Centre of the Bruyère Research Institute. **Dr Keely** is Chief of the Division of Endocrinology and Metabolism at The Ottawa Hospital, Professor in the Department of Medicine and the Department of Obstetrics and Gynecology at the University of Ottawa, and Specialist Lead of the Champlain BASE eConsult service.

Competing interests

None declared

Reference

1. Veale HJ, Sacks-Davis R, Weaver ERN, Pedrana AE, Stoové MA, Hellard ME. The use of social networking platforms for sexual health promotion: identifying key strategies for successful user engagement. *BMC Public Health* 2015;15:85.

Hypothesis is a quarterly series in *Canadian Family Physician*, coordinated by the Section of Researchers of the College of Family Physicians of Canada. The goal is to explore clinically relevant research concepts for all *CFP* readers. Submissions are invited from researchers and nonresearchers. Ideas or submissions can be submitted online at <http://mc.manuscriptcentral.com/cfp> or through the *CFP* website www.cfp.ca under "Authors and Reviewers."

— * * * —