

COMMUNICATIONS TACTICS / IDEAS FROM SITES

Some approaches shared by various facilities during the webinars and at other recent events.

- Learn the individual styles of communication for your physicians and work with them that way. It has never been a one size fits all!
- Use multiple avenues/channels to communicate such as face-to-face meetings, e-mail, phone, grand rounds (biggest crowd), department meetings, website, branded e-newsletter, word of mouth and printed handouts, information distributed through mailboxes and at meetings.
- Form a communications sub-committee and invite a department head or physician representative from each department to join. Sub-committee members then take on a role of communications liaison for their physician group to spread the word, send out e-mails on behalf of the MSA/ physician society and encourage physicians to attend events.
- Despite leveraging our website and sending once a month updates, word of mouth is the most effective.
- Ask department representatives on working group to share information; and leaders to forward e-mails onward “like a tree.”
- Share a list of physician responses/attendees from departments showing which have been most responsive, to encourage others to do the same.
- Send e-mail correspondence to personal emails rather than business emails.
- Ask Medical Office Assistants to help share information and filter e-mail.
- Post regular updates on a display or e-bulletin board outside the physician's lounge, with background info, new initiatives, announcements, engagement stories, etc.
- Have physicians involved in first round of funding activities share their experiences at a member event, and prior to additional rounds of funding.
- Motivate (when communicating) by appealing to a higher purpose, what is important to physicians, what they value, and have meaningful takeaway messages after meetings.
- Use a communication expert consultant to centralize marketing and communication.

WEBINAR QUESTIONS AND ANSWERS

Who does all the communications work?

It depends on the extent of your needs, size of hospital, size of team and budget. Usually, a combination of the following: a project manager, physician leads, a subcommittee which may include physicians, individual team members, and at times, an external consultant as needed. Here is general list of functions to be fulfilled:

Communications strategy

- **Identify needs, challenges and a plan:** Collaborative effort (often between the project manager and working group, sometimes external consultant)

Tactical functions:

- **Content coordination / liaison:** Collect information for newsletters and other communications, and has communications drafts approved by Working Group for distribution
- **Writing:** Newsletters, information documents, website and brochure content
- **General content preparation:** PPT presentations, posters, brochures
- **Graphics:** Design important documents from scratch, prepare visual graphs and charts, take photos, or find stock photos or images, create newsletter templates
- **E-mail distribution:** Create an e-mail list, set up e-mail templates or systems, send out final e-mails or newsletters, pass on e-mails, monitor responses
- **Postings:** posters, bulletin boards, physician mailboxes
- **Websites or other digital platforms:** Planning, technical setup/ production, graphics, content coordination, writing, channel maintenance and postings

What can the Provincial SSC Communications Team offer sites?

You can make a request through your Facility Engagement Lead (FEL) to get support from the provincial communications team as listed below. Unfortunately, the small provincial team is not able to provide hands-on tactical support such as writing, preparing newsletters, creating graphics, or developing websites. However, we can link you to consultants, writers and developers to perform those functions if you do not have those contacts.

- **Communications Orientation:** One-on-one general counsel by phone with sites about how to plan general communications. [Or, sites may wish to view the 30-minute webinar recording instead here >](#)

- **Communications Needs Diagnosis:** A session with an MSA/ Physician Society to help get planning on the right path by ‘diagnosing’ local communications strategic needs, and making general recommendations about steps and budget needed + connect with external consultant/s, writers and developers if requested.
- **Template and tool development:** Upon request by FELs and as needs arise, ongoing graphic or content template development – if it is universally applicable to share with the rest of the sites around the province. Collect and share tools and good ideas from the sites themselves.
- **Sharing stories:** Share stories submitted by sites on FE website and other provincial channels, and provide editing support for these kinds of stories if needed.

What can the health authority provide?

- **The health authority communicator assigned to your hospital or region** may be able to help to identify local distribution channels, newsletters, announcements, story sharing, and site leadership or health authority executive communications channels.

Is there a Talking Points template for the Working Group and Board?

Yes. You can find the template and customize with your local information. See

www.facilityengagement.ca/engagement-and-communications > [Logos and Templates here](#) >

Is Facebook or Twitter a good networking tool?

It depends on your goals. Social networks may be appropriate and effective for activities such as recruiting physicians or communicating about events or subjects that are not confidential in nature. However, Facility Engagement information, as well as physician feedback in general, is not for wide public consumption or sharing; therefore the usual public-facing social networks are not appropriate collaboration spaces.

Alternative options, such as closed Facebook pages and other password protected networks may be an option instead. When exploring the use of online collaboration networks, your physician group should consider privacy and security, content ownership and online engagement pros and cons for physicians, which are explained here:

www.facilityengagement.ca/engagement-and-communications > [Communications Planning](#) > [“Social Media Networks for Collaboration”](#)

Are online forums a good option for collaboration?

They can be, if physicians or project participants feel the discussion is worthwhile to take time to participate. To be successful, forum subjects need to be compelling with active conversations. Forums need to be monitored and moderated by a dedicated individual. A forum like [Slack.com](https://slack.com) is easy to set up and very user friendly. Again, please consider the privacy and security, confidentiality and online engagement pros and cons for physicians which are explained here: www.facilityengagement.ca/engagement-and-communications > [Communications Planning](#) > [“Social Media Networks for Collaboration”](#)

Are there any resources for setting up a website?

There is a desire to have websites to post information about events and activities that physicians can access from anywhere.

The Specialist Services Committee and Doctors of BC do not have dedicated website support for MSAs/ physician societies. We suggest that as a first step, contact your health authority MSA/ Physician Website manager to create a dedicated space for your own physician society, similar to what Vancouver General Hospital has done (see link here at <http://medicalstaff.vch.ca>. (We have learned that Interior Health may have some limitations in this regard and are exploring that.)

It is your choice if you wish to build an external website. It can be time-consuming and somewhat costly (depending on whether it is simple or comprehensive), so ensure you are clear about goals for a website and whether it will help to solve your communications challenges. Keep in mind that with so little time in a day, physicians tend not to visit websites regularly unless there are practical resources for them to access, so you need to create a compelling and useful reason for them to visit yours.

No matter which way you go, you'll need to organize a group to consult and plan the website strategy/ needs (the most time-consuming step), a developer to build a website (or add to an existing one), and a writer or project manager to gather and maintain content.

[The BC Women's and Children's hospital has created its own MSA website here](#) (much broader than just Facility Engagement). Their project manager has kindly offered to provide some advice other sites, and you may contact him at: newton.hoang@cw.bc.ca

E-mail: How can I track whether or not my e-mails are being read? What cloud-based e-mail options are best? What is the difference between Campaign Manager, Constant Contact and Mail Chimp?

[Campaign Monitor](#) (used by Doctors of BC groups and Divisions) and [Constant Contact](#) are cloud-based services to which you subscribe on a monthly basis for a reasonable cost. They enable you to send e-mails in bulk, and issue surveys and event invitations for an extra cost. You can try a free version before making your purchase.

These services provide feedback and analytics about the effectiveness of your e-mail communication: you can see who has opened it or not, what e-mails are bouncing, and what links are the most popular.

[MailChimp](#) is another platform often used because it is free of charge for some templates and functions. However, the Doctors of BC Technology Office has privacy concerns for your consideration which are explained here: www.facilityengagement.ca/engagement-and-communications > [Communications Planning](#) > ["Communicating by Email - Options and Tips"](#)

Facility Engagement and Divisions of Family Practice

- *How do you communicate with physicians doing the same work?*
- *What messages information is available about communicating Facility Engagement in relation to Divisions?*

One-on-one / face to face communication is key. Some suggestions so far:

- Regular meetings in person, or by teleconference (for doctors located around regions) between Facility Engagement Leads and Division of Family Practice ED / Physician leads as well as HA regional reps to discuss what is different, and where the work overlaps.
- To reach physician members who are not directly involved, but work both in primary care and hospital roles, some MSAs and Divisions are adding a regular Facility Engagement section in the Division's newsletter. You should keep members informed regularly. Introduce the working group, who you are, and what you are doing; and follow with updates about your work and progress and the doctors involved.
- More comprehensive messages and guidance about FE and Divisions work is being prepared and will be shared soon.

Where and how can sites order swag?

If you are looking for giveaway 'swag' items for events, such as pens and notepads, you will need to order and pay for them from your Facility Engagement budget. You may wish to use a local promotional products company, or get in touch with our Vancouver-based supplier Mike Ebner mebner@visualimpactinc.com. He will source products and prices for you, have you approve the design, then process the order and send it out to you.

