Can Healthcare Organizations Find Wisdom in the Crowd?

by Dan Dunlop

America's Founding Fathers worked laboriously to develop a system of government where decision making was insulated from the passions and opinions of the masses. Imagine the founders' reactions if they were alive today to witness the rise of Web 2.0 innovations such as social networks, wikis, and crowdsourcing. Today, anyone with Internet access has a voice.

In the world of Web 2.0, not only can individuals freely publish their opinions online, but organizations can seek the input of various constituencies and groups through crowdsourcing. Wikipedia defines crowdsourcing as the act of "sourcing tasks traditionally performed by specific individuals to a group of people or community (crowd) through an open call."

Stimulate discourse, drive innovation

Crowdsourcing provides organizations with an opportunity to generate insights, data, experiences, and business solutions that might otherwise go unexplored in an institution's traditional decision-making process. Through the use of mass collaboration, companies are finding innovative ways to streamline operations, make improvements in service delivery, boost employee morale, and develop new product offerings.

Social networks, including Facebook and LinkedIn, have built-in crowdsourcing features that can easily be deployed by marketing professionals to gain insights from their internal or external customers. Facebook's polling option allows an organization to ask a question of its followers. LinkedIn's poll application functions in a similar manner. Additionally, LinkedIn Groups has a discussion feature that allows an individual or

Mobile, Social Games Poised to Impact Healthcare

by Stephanie Thum

Video games in one form or another have been a part of the healthcare world for a long time. From wheeled PlayStation consoles in hospital pediatric wards, to one- or multiple-person games like Wii bowling in nursing homes and assisted living centers, games have helped to improve the emotional and physical well-being of patients.

Recently, games have taken a giant leap forward, and into a whole new dimension, in healthcare. Gamification is a buzzword used to describe how organizations are using games to engage with consumers. Mobile and social networking technologies are propelling gamification's rapid growth. Facebook has more than 800 million users. More than 350

Can Healthcare Organizations Find Wisdom in the Crowd?

continued from page 1

organization to engage group members in a discussion in response to a specific question. Twitter can be used for crowdsourcing using polls.tw or another similar application.

This use of online polls through social networks begs the question: Where does crowdsourcing begin and traditional quantitative research end? Part of the answer is found in the way the sample is assembled. If the participants in the survey are solicited through an open call as members of a group, then it fits the definition of crowdsourcing. Furthermore, in crowdsourcing the group is typically asked to answer a single question or provide solutions to a specific challenge, rather than respond to a broad range of survey questions.

How does crowdsourcing work?

Crowdsourcing projects are usually managed through online communities. An organization will post a question or challenge online and then, through an open call, invite a group of people to provide solutions individually. The concept is based upon the principle that there is untapped talent within groups, and an organization should not be constrained by its structure (i.e., silos) when it comes to looking for innovation; often there is wisdom outside of the department's walls. "Solvers" submit their solutions via the community, and occasionally there is a reward for the winning solution. The sponsoring organization benefits from a large pool of ideas at little or no cost.

Critics of crowdsourcing view it as low-budget digital outsourcing, used by organizations that are looking to generate ideas without making a significant financial investment. They also believe the process wastes a tremendous amount of the group's resources, pointing out that participants invest a significant amount of time collectively, when in the end only one solution may be selected.

Crowdsourcing in healthcare

Mayo Clinic was one of the first healthcare organizations to experiment with crowdsourcing. When Mayo set out to form the external advisory board for its Center for Social Media, it began by compiling names of individuals who were well known to the Mayo team. However, as the team worked to identify ideal candidates, the center's director, Lee Aase, realized that Web 2.0 held the answer. "By using crowdsourcing, we could make it a much more open process," says Aase.

Through crowdsourcing, Mayo Clinic had more than 100 people apply for the 12 open positions. According to Aase, the pool of candidates was so strong that the team ended up bringing in 17 additional advisers, five more than originally planned. "Crowdsourcing brought us a number of candidates we might not have identified otherwise. The next time we have a project like this we won't be so slow to turn to crowdsourcing as a solution," he says.

Mayo Clinic also used crowdsourcing to engage the general public in the creation of a Mall of America location. Consumers were given the option of expressing their opinions online or visiting *Mayo Clinic Healthy Living*'s prototype mall location and give input into the design of a permanent facility.

Aase makes it clear that when soliciting ideas from the crowd, the authority for the final decision remains with the organization.

"Crowdsourcing facilitates and enables, if you use it correctly," he says. "I don't think you want the crowd to have the final say. The crowd helps narrow the choices. You need to leave the final decision to the core team that is responsible for the final outcome."

> **"The people are turbulent and changing; they seldom judge or determine right."**
> *– Alexander Hamilton*

In 2010, Harvard University launched a crowdsourcing initiative to stimulate innovative thinking in the battle against type 1 diabetes, seeking to engage medical researchers. The Harvard Clinical and Translational Science Center used a crowdsourcing contest to access new pockets of innovation, working directly with InnoCentive, an open innovation and crowdsourcing firm.

"Academic and research institutions often suffer from the same silos … and anti-collaboration culture as other organizations," says InnoCentive CEO Dwayne Spradlin. "Harvard is setting a new standard. [It is] using technology and social media to break down these barriers. We will work together to prove that collaboration yields better results in an academic environment, advancing medical research in the process."

In 2011 Kaiser Permanente's Innovation Fund for Technology, which provides seed money for rapid exploration and prototyping of novel ideas, launched an employee crowdsourcing initiative designed to stimulate a greater diversity of ideas from across the far reaches of the organization. The company was looking for new sources of innovative thinking.

According to Miles Appel, executive director of internal Web capability at Kaiser Permanente, the organization created a six-week innovation chal-

lenge using its internal online community – IdeaBook – to capture key information about ideas in a searchable and sortable manner. Employees submitted ideas by visiting the online community, signing in, writing their proposal, and posting it to the site. Once ideas were posted to the site, other community members could review them, search for ideas relevant to their areas of interest, vote ideas up or down, and comment on submissions. Kaiser promoted the innovation challenge through a variety of internal channels, including emails, innovation ambassadors, webinar workshops, and the company's websites, encouraging users to both submit and vote on ideas that were submitted by others.

When the challenge concluded, 97 ideas were submitted garnering 1,475 votes and 278 comments, resulting in 1,850 points of engagement with Kaiser Permanente's employees and physicians. Fifty-eight of the users had not previously submitted ideas to the Innovation Fund, meaning the challenge successfully prompted novel thinking from new areas of the organization. "Innovation should be something that springs from the foundations of the organization – growing wherever there is room for improvement, creating efficiencies or spreading a new successful practice. And this framework for the challenge was intended to cast a wider net into how folks are innovating throughout the organization," says Appel.

The insurance industry also has recognized the potential benefits of crowdsourcing and the simple act of asking customers for their opinions. In February 2011, Blue Cross Blue Shield of North Carolina launched an online crowdsourcing community called "Blue Asks You NC." The community was designed to allow Blue Cross Blue Shield members to share insights and ask questions that may ultimately affect positive change for healthcare in North Carolina.

Several firms have developed crowdsourcing applications designed to limit the spread of infectious disease. Influ, for example, is a mobile health service that allows users to report on and track real-time movements of human disease with smartphones. Its purpose is to help with disease prevention by allowing people to avoid the illness altogether. The application is available for iPhone and Android devices (www.influtech.com).

Not everyone enthusiastic

Although the potential uses for crowdsourcing in healthcare appear limitless, not everyone sees wisdom in the opinions of the masses. Andrew Keen, the author of *The Cult of the Amateur,* argues that Web 2.0 technologies and user-generated content are blurring the distinction between authoritative information and uninformed opinions. "Crowdsourcing is a euphemism for relying on the mob. Herd behavior is never either healthy or wise. The most efficacious and just decisions are always made by individuals," says Keen.

Keen's extreme perspective relies on two common misperceptions about crowdsourcing: 1) that the crowd is empowered to make the ultimate decision and 2) that the crowd is an undefined mob. The value in crowdsourcing comes in the definition of the "crowd" and the final evaluation of the solutions provided by the group. In healthcare's experimentation with crowdsourcing, the crowd has often been made up of fairly narrowly defined groups such as medical researchers, employees, and members of a specific health plan. In each case there is a review process for evaluating the ideas that are generated. As Mayo Clinic's Lee Aase points out, turning to the crowd for inspiration does not mean that the final decision will be made by the crowd. In the end, it is up to the project's leaders to review the solutions and make decisions based on the input they have received.

There is little doubt that the healthcare industry's experimentation with crowdsourcing will greatly expand in the months and years to come. Healthcare organizations need innovative solutions that allow them to respond nimbly to the many challenges they face. Crowdsourcing, if used effectively, appears to hold that promise.

Dan Dunlop is president and CEO of Jennings, an advertising and brand development agency based in Chapel Hill, NC. Dunlop is an author, healthcare marketer, blogger, and frequent speaker at national and regional conferences. You can find him on Twitter at @dandunlop or email him at ddunlop@jenningsco.com. eH

Mobile, Social Games Poised to Impact Healthcare

million of those users access the site via a mobile device. These two statistics alone speak to the pervasiveness of social and mobile realities in the gaming evolution.

There is growing evidence of the popularity of mobile and social games among older adults and women. According to a fall 2011 study by the Information Solutions Group, more women (54 percent) than men (46 percent) play social games in the United States. Across gender lines, the average player age is 41. Forty-six percent are age 50 and older. Forty-four percent of all survey respondents play social games more than once a day. Thirty-eight

percent are "avid" gamers, playing six or more hours per week.

What is different about games in the traditional sense – with consoles, controllers, and game cartridges – and gamification? Debates and definitions surrounding the term are plentiful, but the core concept seems well-accepted. Gamification incorporates game elements into non-gaming products, creates incentives for users to do tasks, and guides them toward a desired behavior. Gamification begins with a basic game concept, then tosses in sophisticated gaming attributes such as avatars, virtual incentives for play, achievement badges, quests, leaderboards, and visual progress meters. In many instances, users complete tasks offline and then return to the game to track their activities.

Then, there is a social networking element, where players can compare results with online friends from Facebook and Twitter, for example. Because of the cross-functionality of game design, virtually any Internet-connected device can become the playing field – desktop, laptop, mobile phone, tablet, or game console. Given these parameters, there is an opportunity to engage in play seamlessly, almost anywhere.

In healthcare, gamification has focused on two key areas: employee wellness and chronic disease management. Some of the fastest-growing and attention-getting mobile and social games encourage users to perform nutrition, health, and fitness tasks in real life that they might normally consider boring, tedious, or perhaps even insurmountable. The games then reward users for completing and tracking those tasks.

Mobile and social employee wellness: OptumizeMe
UnitedHealth Group, a giant health benefits and services company,

recently launched an iPhone and Android application called OptumizeMe. The app is available for free to the general public, and UnitedHealth Group customers can access expanded game play.

Company executives describe OptumizeMe as a mobile fitness challenge that lets players use their smartphones to create or join fitness, nutrition, and lifestyle health challenges with friends, co-workers, and others in their social network. As users complete and log their activities, they earn virtual badges. The app integrates with Facebook, so users can post updates to their Facebook wall. Friends can monitor progress and post messages of support.

OptumizeMe contains elements of gamification, but company executives view it as something more. "We see this as a convergence opportunity," explains Nick Martin, vice president of innovation, research, and development at UnitedHealth Group. "Mobile technology is pervasive, but we haven't abandoned other communication channels like telephone access and support via our portal. Nurses and wellness coaches are still involved with clients in real life. We see this as part of a network of connectivity for our clients."

UnitedHealth Group's focus right now is getting people to use the app. "We want them to use the app, engage with their network, and leverage the challenges available," says Martin. To date, there have been 20,000 downloads of OptumizeMe, and more than half represent active users.

Mobile and social employee wellness: Keas
In another example, Keas, a venture-capital-backed company in San Francisco, offers a health and fitness

social game by the same name as part of a company's employee wellness program. Quest Diagnostics, Pfizer, Salesforce.com, and Chilton Hospital in Pompton Plains, NJ, are a few of the companies on the client list. Once companies sign up, eligible employees can access and play the game on a desktop computer or mobile device. Approximately 100,000 people currently use the game, and Keas expects the number to grow exponentially by mid-year.

With Keas, employees create profiles, build groups of like-minded co-workers, track progress, compare notes, motivate, and compete with one another as they work toward their health and fitness goals. Players collect points and badges as they progress through the game.

Access to Keas costs employers $12 per year, per employee. Much like UnitedHealth Group's approach, Keas doesn't focus on showing clients a return on investment. Instead, the company works on getting employees engaged with the game.

Currently, Keas demonstrates to its clients how employees are responding to the game by way of dashboard metrics that sum up pounds lost, trips to the gym, and challenge results.

For example, Chilton Hospital recently held a 12-week health and fitness challenge. Approximately 40 percent of the hospital's 1,300 eligible employees registered. Through the challenge and social game, Keas tracked 1,230 pounds lost among employees. A post-challenge survey indicated 73 percent felt more positive toward their employer and 64 percent felt more positive at work.

"The game can track everything from steps taken to how many servings of fruits and vegetables are being consumed. You can get a

sense of how people's behaviors actually change. Number of pounds lost, though, is a very compelling metric. Until now, companies really couldn't get a great sense of weight lost," says Keith Messick, chief marketing officer at Keas.

Mobile and social chronic disease management: HealthSeeker

Chronic disease management is another area of focus for healthcare gamification. Joslin Diabetes Center, the Diabetes Hands Foundation, and Ayogo Games recently created a social game called HealthSeeker. Originally released in June 2010 as a Facebook game, HealthSeeker is now also playable via an iPhone or Android app. It has more than 13,500 players – 67 percent of whom are female.

HealthSeeker is available to anyone, but it is specifically designed to help people with diabetes make more informed lifestyle decisions in a way that complements their daily use of social media. Players pick lifestyle goals and choose from missions and action steps that can be completed alone or with their family and friends. The most popular missions and action steps are nutrition-related.

Players collect points by completing action steps and missions and by engaging in the exchange of supportive messages with friends. From its launch in June 2010 through December 2011, HealthSeeker users completed 36,233 action steps. Approximately 25 percent of users access the game via the Spanish language interface. The game becomes more ambitious as players reach higher levels.

"We recognize that we need to put health information where people are, and not just expect people to come to us as a medical center for information," says

Daphne Psacharopoulos, senior director of healthcare services for Joslin Diabetes Center in Boston. "Increasingly, people are on Facebook, as are their friends who can provide social support. We wanted to make health information fun and actionable. People don't need to know everything about diabetes, but they do need help with small steps which, over time, can add up to behavior change."

> **"We have not yet completed gathering data and studying the results, but we are optimistic about the potential of health games."**

Choosing or building your own game

The topic of gamification is becoming a point of conversation. However, the notion has yet to take hold as an individual hospital marketing tool.

"Many hospital marketers are talking about games, but nobody has really jumped on the bandwagon [to create their own]," says Christine Pierpoint, vice president of emerging media in the Baltimore office of IMRE, a full-service marketing agency. "Strategically, it's difficult to fathom how playing a social game might lead to a booked medical procedure. Also, it can be difficult to justify the cost of creating, launching, and maintaining a social game on your own."

Reluctance looms due to priorities as well. A more pressing issue for many hospitals at the moment is creating mobile websites. However, there is a growing interest among hospitals in promoting wellness, and gaming can play a role in helping to form stronger relationships with consumers over the years.

"But if you *are* going to build it, above all else, make sure you get the social element right," advises

Richard Talens, chief technology officer and co-founder of the company and game Fitocracy. The 2011 start-up now boasts upwards of 200,000 users. Talens attributes Fitocracy's early success to the game's social elements.

Fitocracy is a personal fitness social game that allows users to track, improve and expand on their real-life physical fitness. Fitocracy cross-pollinates social features from Twitter and Facebook with video game elements such as quests and challenges to compel users to press ahead, or "level up," in reaching their fitness goals. Users receive points for completing certain fitness activities. They follow, encourage, learn from, and compete against one another for a spot on the site's leaderboard. They can create special groups, "give props" to other users, and comment on others' activities. Ultimately, however, users compete against themselves.

"Right now we are at an absolute turning point in the industry. We have more ways to connect with people than ever before," says Martin of UnitedHealth Group. "Gaming is mind-bogglingly big. People like to use their mobile phones. There is a great opportunity to think about how we can use these realities to make people more health-conscious and physically active."

But, observes Messick of the gaming company Keas, "an organization's culture has to support this [endeavor]. A social game cannot be a small initiative, and there will be even bigger hurdles if your organization isn't embracing social media," he says.

"We want to learn from this … experience," Joslin Diabetes Center's Psacharopoulos says. "How can we engage with people to help prevent and manage diabetes in nontradi-

tional ways? Does providing a fun, social resource like HealthSeeker support people in making small changes that can lead over time to new habits? We have not yet completed gathering data and studying the results, but we are optimistic about the potential of health games."

Stephanie Thum is a consultant and writer based in the Washington, DC, area. She can be reached at stephaniethum@yahoo.com. eH

ASK THE EXPERT … THERESA JACOBELLIS

Question: Is Google+ a Social Media Tool for Healthcare Marketers?

You finally mastered Facebook, know the definition of the terms "tweet" and "hashtag" and can use them in a sentence, and your organization even has a YouTube channel for sharing video content. Just when you feel comfortable riding the social media wave, along comes Google+. In January, just over six months after Google launched the by-invitation-only beta site, company CEO Larry Page announced that Google+ had amassed more than 90 million users, making Google+ the fourth largest social network in the world, still trailing Facebook, the Chinese microblogging site Sina Weibo, and the Chinese site Qzone, but much larger than LinkedIn and Twitter.

The explosive growth of Google+ is unrivaled, and its unique features and full integration with the world's largest search engine point to potential opportunities for healthcare marketers. Ed Bennett, whose Found in Cache blog was one of the first and most comprehensive compendiums of hospitals with a social media presence, counts 56 hospitals currently on Google+.

Theresa Jacobellis, MS, has more than two decades of experience in healthcare marketing. She is director of public affairs at Huntington (NY) Hospital and serves as chair of the Nassau-Suffolk Hospital Council's public relations committee. You can reach her at thjacobellis@optonline.net.

Google+ versus Facebook versus Twitter
Stephen Moegling, executive vice president for account planning at Franklin Street Marketing, a healthcare branding and advertising firm in Richmond, VA, thinks that social media burnout may hinder wholesale adoption of Google+. "As with any new communication tool, Google+ does require an adaptation period," he says. "With Facebook and traditional blogs as established social vehicles and now Twitter, which continues to perform well, people are hesitant to dive in and add one more social media platform to their portfolio."

Several features differentiate Google+ from the other leading social spaces. Google+ claims that connecting virtually on the site is similar to interacting in the real world. The key to that is segmentation, which Google+ makes possible with Circles. Circles enable the user to assign Google+ contacts to various categories, and to publish specific content based on those categories. For individuals, this characteristic provides the ability to share different content with co-workers than friends, for example. For healthcare marketers, this feature could allow a hospital, pharmaceutical company, or other entity to custom publish content based on user interest.

The +1 button promotes content sharing on Google+. By embedding this button in a website or blog, healthcare brands can encourage

Google+ users to share new content and in turn drive traffic back to their site or blog.

Unlike its peers, Google+ offers a unique video chat capability called Hangouts. Using a webcam or mobile device, users can engage in live video chats with up to nine participants. Similarly, its Messenger feature allows multiple users to engage in a simultaneous text-based chat.

Who's there?
For marketing professionals, it is essential to position your brand where your audience lives. By all accounts, Google+ is not yet that place for the healthcare market.

Raed Mansour, chair of the American Public Health Association's communications committee, spent time researching the Google+ demographic. "I found that Google+ members were overwhelmingly male, mostly 25 to 34 years old, early adopters, most of whom are living in California or New York, but locally concentrated in Austin, Texas, and the San Francisco region, and working in technology and engineering companies like Google, IBM, and Apple," he says.

Swedish Medical Center in Seattle has had a Google+ brand page since early November. Melissa Tizon, communications director, says her instincts tell her that unlike those who "like" the Swedish Facebook page, her hospital's Google+ audi-

ence tends to lack a direct connection with Swedish. "I think Google+ is perhaps more like Twitter, with people sharing information and news," she says.

Michael Gowan, associate director of Web strategy at Duke Medicine in Durham, NC, launched a Google+ page on the first day it became available. He, too, is waiting for his target audience to arrive. "A lot of the people we are talking to now are industry colleagues," he notes. "Everyone is listening to see what everyone else is doing with Google+."

"In healthcare our audience is typically a 50-plus woman," says Moegling. "That's changing, but across the board, some of these social tools haven't maximized in our space yet because our audience hasn't quite gotten up that curve."

The power of Google

Perhaps the greatest asset of Google+ is its integration with Google, the 800-pound gorilla of search. Google's search algorithms are one of the most closely guarded secrets of our time. However, some

experts believe that having a brand page on Google+ will enhance search engine optimization.

"From an online visibility perspective, Google+ allows healthcare marketers a way to penetrate the organic search results outside of just their website," says Danielle Leitch, executive vice president at MoreVisibility, a search, design, and interactive marketing firm in Boca Raton, FL. "As a Google property, [Google+] pages and their content get indexed and ranked very quickly. By leveraging keywords effectively in content shared, marketers can supplement their SEO efforts through a Google+ page."

Brands can create a direct connection between their website and their Google+ page. Once this connection is established, users who add the "+" symbol to the beginning of their search term will be taken directly to the organization's Google+ page, bypassing the regular website.

Google+ also integrates easily with YouTube, another member of the Google family. A YouTube search button is embedded along the edge

of the Google+ home page. Photos taken with an Android phone are automatically uploaded to a private album in the Google+ cloud for later editing and sharing.

What's new

Google+'s most recent improvements, announced in late December, include enhancements to the brand pages. In response to user feedback, Google+ rolled out the capability to designate up to 50 page administrators. In addition, Google+ is now providing an aggregated count of users who have added a page to a circle or shared the page with their contacts. This feature gives page administrators and visitors an overview of engagement.

The measurement conundrum

Measuring the impact of social media remains a challenge for healthcare marketers. Quantitative metrics, such as the number of Facebook likes or the number of retweets on Twitter, fail to account for the quality of interactions between brands and their fans.

"Social media in general is not a tool that was intended for business use," says Brian Mulligan, assistant vice president of public relations at North Shore-LIJ Health System in Great Neck, NY. The organization's Google+ page is in what Mulligan calls a "quiet phase."

Mulligan compares social media to product placement. "Even if it doesn't result in X number of referrals, if you are in front of people in a positive way they begin to trust you as a healthcare provider. If you're not taking advantage of social media channels, you're not doing what you're supposed to be doing in terms of PR."

Don't forget the fundamentals

It remains to be seen whether Google+ will be a bust or the next
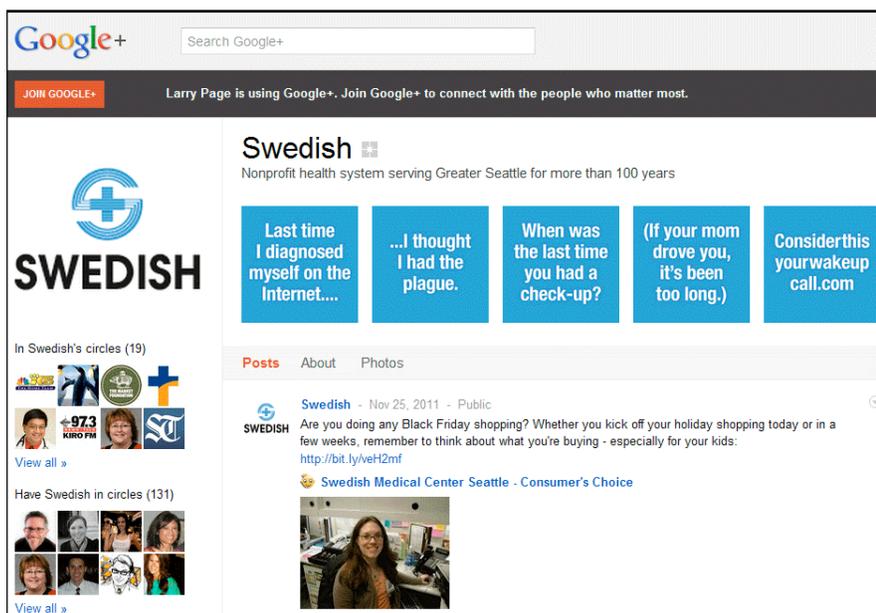
Swedish Medical Center's Google+ page

big thing in social media. Either way, industry leaders emphasize the importance of focusing on an integrated overall communication strategy.

"We don't see Google+ as a strategy in and of itself, but a tool that an integrated marketing communication department can use," said Tizon of Swedish Medical Center. "It's not necessarily about the tools, but about understanding how to engage with people, add value, be responsive, and integrate social media into all the other work you do in the realm of marketing communications."

As with any communication tool, targeting the message to the audience is imperative to success.

"We try to understand our audience and how [it wants] to receive information," says North Shore-LIJ's Mulligan. "What we communicate in print will be different from what we publish on Twitter and Facebook and Google+."

At Duke Medicine, says Gowan, "We want to share our message wherever there are people to receive it. So if the Google+ social media platform serves audiences that Facebook doesn't, this is a good place to talk to them." **eH**

HIMSS 2012 Reflects Growing Importance of Consumer Engagement

by Daniel Fell

This year's Healthcare Information and Management Systems Society (HIMSS) annual conference in Las Vegas in February was one of the largest in recent history – topping 35,000 attendees and growing in both exhibitors (more than 1,100) and trade show floor space (more than 400,000 square feet).

But the conference was also one of the most patient-centric. More sessions touched on how consumers are accessing medical information and interacting with medical providers online. In addition, many exhibitors displayed patient-friendly engagement tools designed to streamline and enhance everything from registration to care management in the home.

Meaningful use and other hot topics
Among the hot educational session topics and exhibit hall solutions was a clear focus on electronic health records (EHRs), as hospitals rush to meet meaningful use requirements.

Farzad Mostashari, MD, national coordinator for health information technology for the U.S. Department of Health and Human Services, was clearly encouraged by how far the industry has come in just two years. EHR adoption among primary care providers has doubled, from 17 percent to 34 percent. More than 1,600 hospitals have been paid under the new health IT incentive program.

Attendees also eagerly awaited the Centers for Medicare & Medicaid Services release of the new Stage 2 Meaningful Use guidelines, which were issued just as the conference ended. These guidelines are part of the 2009 Health Information Technology for Economic and Clinical Health (HITECH) Act that authorizes incentive payments through Medicare and Medicaid to physicians and hospitals that use electronic health records in ways that significantly improve clinical care – hence the term "meaningful use."

The Stage 2 Meaningful Use guidelines provide critical benchmarks for physicians and hospitals that are implementing EHR systems in an effort to receive additional payments from CMS. And these payments can mean millions of dollars for individual providers. At the same time, however, the 455-page document is not exactly straightforward and easy to comprehend, so it's no surprise

health IT professionals are preoccupied with the rules and how to meet them.

Other hot trends included:

▪ Cloud computing. Several companies touted cloud-based electronic health records that presumably are more integrated than what Google attempted to do before pulling back from healthcare altogether this past year.

▪ Data and analytics. HIMSS Analytics is launching several new initiatives around what it terms "clinical and business intelligence."

▪ Mobile applications. Apps include Kaiser Permanente's new Android rollout that allows nine million members to access their medical records from anywhere in the world and iTriage, an online symptom checker and physician referral service recently purchased by Aetna that has been getting a great deal of press lately.

Leadership views
One highlight of the meeting is the release of the annual HIMSS Leadership Survey results. Conducted with healthcare IT leaders in the months leading up to the annual conference and completed by 302 respondents representing more than 600 hospitals, it is a good gauge of the current

priorities, spending trends, and technology focus in healthcare organizations today. Not surprisingly, the top IT priorities for the next two years were achieving meaningful use, focus on clinical systems, and better leveraging information.

Seventy-five percent of IT leaders reported a probable or definite increase in IT operating budgets this year, and 61 percent expect staff increases. At the same time, lack of staffing resources and inadequate financial support were cited as the two most significant barriers to IT implementation in their institutions.

The survey also echoed the growing influence of IT on the patient experience. Three-quarters of this year's respondents indicated they believe IT can impact patient care by improving clinical/quality outcomes, reducing medical errors, and helping standardize care by allowing for the use of evidence-based medicine.

The full results of the 2012 HIMSS Leadership Survey can be found on-line at www.himss.org/2012survey.

Getting social
The choice of Twitter co-founder Biz Stone as an opening keynote speaker at this year's conference was an interesting and entertaining choice, albeit not particularly educational in terms of how social networking sites are revolutionizing healthcare or what the future of social media may hold. Interestingly, Stone did share that for some time he has used the Fitbit device, a small electronic monitor that tracks the user's everyday steps, stairs climbed, calories burned, and other measures. Having lost about 30 pounds, Stone hypothesized that the future of medicine would be heavily influenced by Internet-enabled, wearable monitoring devices that provide patients and caregivers with real-time data.

On a more practical level, the greatly expanded HIMSS Social Media Center signaled the association's recognition of the growing importance of consumer engagement in healthcare and the broader definition of healthcare technology. There appeared to more health and technology bloggers attending than in past meetings (as evidenced by the number who were invited to be speakers and those crowding the media room and other sponsored events). HIMSS itself sponsored several social media forums and "meet-ups" for those involved in covering the conference for traditional and new media outlets. A quick search of the official conference hashtag (#HIMSS12) on Twitter is a good way to see many of the educational and event highlights – almost as if they were in real-time.

You can catch next year's annual IT conference March 3-7 in New Orleans.

Daniel Fell is executive vice president at Neathawk Dubuque & Packett. Fell heads the marketing communications firm's Chattanooga, TN, office and is a frequent speaker on healthcare marketing, particularly e-health. He can be reached at dfell@ndp-agency.com or 423/752-4687 ext. 300. **eH**

Top Five Reports for SEO in Google Webmaster Tools

by Heather Schwartz

Google Webmaster Tools (GWT) provides detailed reports about a site's visibility seen through the eyes of Google. GWT is the holy grail for search engine optimization (SEO) and a powerful tool for webmasters. You are missing out on a significant opportunity if you are not familiar with GWT. Here are the top five GWT features to gain a SEO advantage.

1. Sitemaps
If you have not submitted your site's XML sitemap, this step is quick and easy and will provide instant gratification because Google will identify any errors with the URLs listed in the sitemap. For larger sites, having multiple sitemaps structured by site navigation is a best practice. A multiple sitemap structure allows problems to be identified more easily. For example, if there are several errors in the Locations sitemap, you can work on cleaning up this section rather than searching through thousands of URLs. *How to access this report in GWT? Site Configuration > Sitemaps*

2. Crawl errors
This report is invaluable because it shows problematic URLs that Google encountered when crawling a site. For SEO, it is important to help facilitate the indexing of a site and not have Google waste its time crawling URLs with 404 errors, for example. At the very least, be sure to do a monthly cleanup of those problematic URLs that Google reports. *How to access this report in GWT? Site Configuration > Crawler access*

3. HTML suggestions
It is commonly known that having unique title tags and Meta descriptions on every page of a site is a best practice, but sometimes it's easier said than done. The HTML suggestions report in GWT will outline potential issues with a site's title tags and Meta descriptions, such as

duplicates and site tags that are too long or too short. If possible, keep title tags to 70 characters (including spaces) and Meta descriptions to 150 characters (including spaces). The report identifies the offenders by URL, so a site can simply update its content with unique title tags and Meta descriptions. While these issues will not prevent a site from appearing in Google's SERPs (search engine results pages), addressing the issues will often increase a site's organic CTR (click-through rate) and the overall user experience. *How to access this report in GWT? Diagnostics > HTML suggestions*

4. Search queries

You probably often ask yourself, "What search queries have returned pages from my site?" The GWT search queries report will give you the answer. Not only does the report list the search query metrics (impressions, clicks, CTR, average position) and the top pages that appear in Google's SERPs, but the report matches the keywords driving traffic to those top pages. For example, it could identify the keywords that are driving traffic to the Homepage versus the Locations page. One of the most important metrics in this report is the CTR, which can help you easily determine the effects of a title tag and Meta description for a page. *How to access this report in GWT? Your site on the Web > Search queries*

5. +1 metrics

Google's recent announcement of "Search, plus Your World" means integrating Google+ with a site is no longer an interesting feature, but a must-have if you want your site to compete organically in the SERPs. Google has tied Google+ directly to Google Search by allowing logged-in users to see normal organic results or highly personalized results from their Google+ Circle. Personalized search results are not new, but the direct connection with Google+ and organic search is ultra-personalized. The +1 metrics report in GWT will be something to look to as sites integrate Google+. *How to access this report in GWT? +1 Metrics*

The GWT interface has experienced several changes in the past two years, and all for the better. Especially now that Google has introduced "Search, plus Your World," GWT will be more valuable than ever before. It you don't have a GWT account for your site, go to www.google.com/webmasters/tools and sign in with your Google account information. For those of you already familiar with GWT, revisit your account and determine what cleanup needs to be done. Easy fixes include getting rid of crawl errors and updating any duplicate title tags or Meta descriptions.

Heather Schwartz is a senior account executive at Anvil Media, a Portland, OR, agency that specializes in helping clients with search engine optimization, paid search, and social media. She can be reached at heather@anvilmediainc.com or 503/595-6050, ext. 227. **eH**

e*NEWS PULSE …*

WEBSITES/MOBILE APPLICATIONS

Online Physician Resource to Help Patients Eat Healthy Foods released by the American Medical Association. The online training module helps guide physicians through ChooseMyPlate.gov, the new resource from the U.S. Department of Agriculture that promotes healthy eating choices, and provides strategies for talking to patients about their habits. Visit www.ama-cmeonline.com/myplate.

New App to Help Athletic Trainers and Doctors Assess Concussions on the Field introduced by PAR, Inc. The Care-Sport Version app guides users through a series of questions and activities to rule out cervical spine injury and evaluate signs of a concussion. Available for $10 at the Apple App Store or Android Market.

RESOURCES

Social Network Site Pinterest Generates Strong Traffic, with 11.7 million visitors in January 2012, up from 7.5 million in December 2011, according to comScore. The online site where users collect images of their favorite things is also becoming a meaningful source of site referrals. The percentage of total referral traffic in January was 3.6 percent, below Facebook's 26 percent but similar to Twitter, according to Shareaholic.

"Liking" a Brand on Facebook Doesn't Necessarily Translate into Loyalty, finds a study by eVOC Insights. Among 187 people who "liked" a brand on Facebook, only 13 percent indicated they were much more likely to purchase the brand; 41 percent were somewhat more likely to purchase. No influence was cited by 47 percent. The full report, entitled "What Can Facebook Do for Me? Benchmarks and Best Practices from Brand Leaders," is available for $995 (the eight-page abstract is free). Visit www.evocinsights.com/reports.html. **eH**

WEB TAKES ... MARCH PICKS

Saint Thomas Health

www.sths.com

There is a lot to recommend about this site from a hospital system in central Tennessee. This review will highlight several notable areas.

Most organizations do not fully utilize their home page banner area. Some just use the space for branding. Others only have a few key service messages. And in many cases, banners rotate too quickly or visitors have to refresh their browser to see another message. This site has nine different banners, which rotate automatically at a moderate pace. A small numbered bar indicates which message is being shown, allowing a visitor to return to a message of interest or move on quickly to another one. With the large number of banners, the site can cover all bases, from promotion of important services to calls to action, branding, and organizational information.

And when visitors click on a banner, they are taken to an interior page or a subsite that provides outstanding subject information.

During February, the top of each page appeared in red with a box that said, "Why we've gone Red!" A click on the box took visitors to a Go Red Nashville subsite, which explained the organization's involvement in a national initiative of the American Heart Association. The subsite was great, but my real point here is that Saint Thomas has the ability to alter its site to tie into special programs or events.

Near the bottom of the home page is an area were promotional boxes are rotated, with three seen at one time. I liked two of these promo-

tions in particular: the 25 percent discount on self-pay Lap-Band surgery (although I'm not sure everyone understands the heading of Metabolic Surgery) and No Appointment Needed on Saturdays at one of the organization's medical groups. Next to this section is a box highlighting Saint Thomas Health on Facebook, with the statistic that 1,614 people "like" the organization.

Finally, service sections not only provide strong content and calls to action, but they make use of different colors to set off various areas. This design provides visual interest and holds attention.

Dana-Farber Cancer Institute

www.dana-farber.org

This site for a Boston facility makes the task of searching for information on cancer simple. The ease-of-search objective was the key reason for a redesign of the site, and the effort appears to be successful.

On the left side of the home page is a section entitled "Get Started." Visitors select an age group (adult or pediatric), a cancer type from the A to Z listing, and their status (before treatment, in treatment, or after treatment). A click on the Go button brings visitors to a page with a brief summary of the cancer and tabbed sections that cover treatment; cancer summary, which actually provides detailed information and links to more content on the cancer; patient and family support; and sometimes health library information. Once within a section, visitors can easily switch to a different treatment "phase."

Clearly visible links to Request an Appointment and other relevant support features also appear in the

cancer sections. Above these sections are two important links on a navigational bar – New Patient Guide, which expands to offer access to a large list of valuable resources, and Appointments & Second Opinions.

The site reportedly has 4,000 pages of cancer-related content, which should satisfy virtually any individual's needs.

Regional Health

www.regionalhealth.com

Regional Health is an integrated system in South Dakota, including more than 40 hospitals, specialty care centers, medical clinics, and assisted living facilities. This website offers a fine solution for providing details on different facilities while communicating a strong overall image for the organization.

The home page features a background visual comprised of rugged mountains that gradually fade to black at the edge of the screen. In the middle of the screen is the main copy. Uncluttered space, simple and clear navigational links, and informational boxes serve up a classy image and provide strong site usability. The home page design is carried out throughout the site.

With a mouse point on Our Locations on the top global navigational block, visitors can easily select a facility of interest. Once selected, the returned page focuses exclusively on that facility and includes a relevant visual, an overall review in the middle of the page, and links to key information on the left. When appropriate to a given facility, a series of distinctive boxes that highlight important features or services appear

on the right. This format is followed throughout the site.

The site does a good job of promoting cancer and weight management, both key service lines. One glaring site omission is any health content, even anything related to the organization's key services. At a minimum, there should be links to content on government and other major websites.

Prominence Treatment Center

www.prominencetreatment.com
Prominence is a drug and alcohol rehab facility in California. Its site does a fine job of combining an uplifting image, just the right amount of information on treatment, and strong calls to action.

A huge banner area rotates images of tranquility with brief messages on the need to begin treatment. For example, there is a photo of a young woman with outstretched arms standing in a meadow. The heading reads, "Start Today for a Better Tomorrow."

Each program or treatment option is fully explained without overwhelming the visitor. Also included in most sections is a clearly visible Contact Us box requiring name, email, phone number, and a message. A number of rotated patient endorsements appear just below this box.

In the upper right corner of all pages visitors can find a toll-free phone number shown in a large font size, a notice that calls are answered 24 hours a day, and a clear statement that insurance is accepted and financing is available.

Reviewed by Mark S. Gothberg **eH**

MY INTERNET ... *Personal Solutions*

Turning Your Tablet into a Cook's Helper

Using a tablet to access recipes from the Internet or an electronic file is now the way to prepare meals; print cookbooks are a bit dated. But how do you keep the tablet upright or from getting dirty? At the high end of the price range is the iOstand (www.iomounts.com), a vertical stand that uses magnets to attach the tablet. Cost is $89 for a white or black finish, $109 for stainless steel. The GorillaMobile Ori (www.joby.com) is an aluminum stand that costs just $30 for the iPad1 and $70 for the iPad2. The stand can be folded for easy storage when it is not in use. If you just want to put the tablet on the counter, but keep it clean, get the Chef Sleeve (www.chefsleeve.com). The sleeve slips over the tablet and can be cleaned or just replaced with a fresh cover. Cost is $20 for a package of 25.

Skype Videoconferencing for Groups

Skype video chats are great, but it is a pain to have two or more people forced to squeeze in front of a computer. The telyHD from Tely Labs allows a group of people to video chat in high definition. The foot-long device is placed near a HDTV and can be connected to any Skype-enabled device. It can be controlled from a dozen feet away and thus take in a number of people and still offer good sound quality. The device has other features such as the ability to send pictures from a flash memory card plugged into telyHD. Cost is $250 at www.tely.com, www.skype.com, and www.amazon.com. **eH**