NET GAINS

Maryland Hospital Launches “Second-Generation” Website

BY THOMAS C. LAWRY

As consumer demand for online health services grows, many hospitals are dropping their “first-generation” websites and replacing them with sites that give consumers access to more complete health information. Holy Cross Health (HCH), Silver Spring, MD, is one such hospital.

What HCH wanted was a site that would not only give consumers information but would also let them interact usefully with the hospital. Located just outside Washington, DC, HCH serves a diverse population, residents of some of the area’s most affluent neighborhoods and some of the poorest as well.

HCH launched its original website in 1997. “We saw the Web as an emerging opportunity and created our first site to provide the hospital with a general presence,” says David Simpkins, HCH’s vice president for marketing. “It provided basic information but served no strategic purpose. As the dynamics of the Web changed, we realized that we were missing an opportunity to extend our mission and reach into the community. We also recognized that making a website strategic meant starting from scratch rather than reworking the old site.”

PLANNING BEFORE PROGRAMMING

HCH’s marketing department led the creation of the new site. Planning for it began a year before the actual launch. “The first thing we did was form a Web steering committee,” says Simpkins. “The committee, which included members of the hospital’s key departments, was asked to determine the new site’s goals and a strategy for reaching them. In the end, the committee decided that the site should support HCH’s five key service lines: maternity care, cancer therapy, women’s health care, and senior services.”

Having done that, the committee hired a Web development firm to create the site and a vendor to equip it with a full range of content. “Our goal at HCH is to create and sustain lifelong relationships,” says Simpkins. “Great health content is important if you want to attract people to a site. We concluded that buying content from a vendor was more cost effective than trying to develop our own.”

This was made easier and less expensive by HCH’s parent system, Trinity Health, Novi, MI. Trinity, which had researched various Web vendors, selected one to work with its member hospitals, enabling them to license site content at a discount.

THE NEW WEBSITE

The new site—www.holycrosshealth.org—was implemented in January. When visiting it, one immediately notes the focus on HCH’s five key service areas. Each area is prominently listed on the home page, and easily accessible from there. Indeed, a special feature brings one to a different key area each time one returns to the home page.

The site makes effective use of its prepackaged health content, which is well integrated and allows users to move easily from general information about a particular condition to specific information about the services HCH provides for that condition.

Actually, the site has two faces. Holycrosshealth.org greets the user with information about the hospital, physicians, health content, and other hospital-specific content. A variation of the site, www.healthyside.com, focuses more specifically on health content.

The site’s two faces enable HCH to meet both its outreach and marketing objectives. Through the site primarily focused on content, the hospital has formed online partnerships with other local organizations, including a newspaper. HCH provides online health content for the newspaper’s older readers; indeed, HCH’s vice president for senior care serves as the paper’s editor for online services. In using such information, the paper helps promote both the site and HCH.

By licensing and promoting healthyside.com, the hospital has integrated its Web effort with...
Rural health care bears a significant burden because of the Medicare wage index.

For further information on rural health care, contact the following:

* The Rural Information Center Health is a joint project of the U.S. Office of Rural Health Policy and the National Agricultural Library. It provides free customized assistance (such as performing database searches on rural health topics and funding resources), refers users to sources for additional information, furnishes selected publications, and posts on the Internet funding resources, conference announcements, bibliographies, directories, and the full texts of documents. See http://www.nal.usda.gov/riz/rich/
* The National Rural Health Association is a not-for-profit group composed of people who share a common interest in rural health. Headquartered in Kansas City, MO, the association also has an office in Washington, D.C. See http://www nrharural.org
* The Rural Policy Research Institute conducts research and facilitates public dialogue to help policymakers understand the impact of public policies and programs on rural areas. Many policies, though not explicitly "rural," nevertheless have substantial implications for rural areas. The institute is dedicated to comprehending and articulating these implications. See http://www.rupri.org.

NOTES
1. Unless otherwise noted, the statistics cited in this article are taken from Charles W. Fluharty, "Refrain or Reality: A U.S. Rural Policy? Implications for Rural Health Care," working paper, SIH-SIU Health Policy Institute, Rend Lake, IL.
4. Illinois Department of Public Health, p. 27.
6. The Lewin Group, "The Impact of the Medicare Balanced Budget Refinement Act on Medicare Payments to Hospitals," a report prepared for the American Hospital Association, February, 2000. Although Congress intended to cut federal expenditures by $118 billion, the actual total will turn out to be twice that figure.