Physicians Are Vital To Web Site Success

BY THOMAS C. LAWRY

A friend of mine, recently learning that he has prostate cancer, asked his physician where he might go on the Internet to learn about the disease, including treatment options for it and statistics on recovery. The physician replied that he had no suggestions—and then proceeded to move on to his next patient. In doing that, the doctor lost an opportunity to serve a person in need and empower him as a patient.

I informed my friend of several Web sites that provide information that is both medically sound and useful to patients. Among these were Prostate Cancer Treatment Guidelines, developed by the National Comprehensive Cancer Network in conjunction with the American Cancer Society (www2.cancer.org/nccn_acs/Prostate/index.htm), and the site of a hospital in his own community that happens to carry excellent information about both the disease and the treatment the hospital offers for it.

The situation my friend faced occurs every day in physicians' offices. Patients come in asking how to look for health information on the Web, or perhaps wanting to discuss information they have already found there. This behavior often frustrates busy physicians, who have neither the time nor the expertise to sort through thousands of Web sites in order to advise patients which ones are trustworthy.

By the end of this year, about 60 percent of U.S. households will have Internet access, with half of all adult users turning to the Web for health information. And patients increasingly expect their physicians to be Web experts. Today 77 percent of health consumers say they would rather get online health information from their doctors than from any other source. However, only 27 percent of physicians have Web sites to which they can direct patients. Other studies note that most physicians lag behind consumer expectations in using the Web to locate health information.

HOSPITAL SITES SEEK PHYSICIAN ADVISERS

Fortunately, hospitals are stepping into the breach, encouraging consumers to use their Web sites as local online sources of health information. In fact, astute site planning teams are turning what physicians tend to see as a bother into an opportunity to increase the value and use of hospital sites. And they are doing it by involving physicians in planning, promoting, and using the sites.

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When it comes to getting physicians involved in the planning of a hospital site, a planning team should keep some important things in mind to ensure that the experience is valuable for both the hospital and the physician.

GET PHYSICIANSInvolved EARLY

Early physician involvement in a Web project means stronger physician "ownership" of the final product. If the team is designing a new site (or redesigning an old one), it should consider

AMAADOPTSWEB GUIDELINES

My last column ("Putting the Physician-Patient Relationship Online," Health Progress, July-August 2000, pp. 12, 16) concerned physicians' use of e-mail in their practices. Since then, the American Medical Association House of Delegates has adopted electronic mail guidelines for its members.

The AMA guidelines are intended to help physicians develop e-mail policies and procedures for their offices. Interestingly, the guidelines draw heavily on a white paper written by Daniel Sands, MD, whom I interviewed for my Health Progress column.

The full text of the AMA electronic mail guidelines is available at www.ama-assn.org/meetings/public/annual100/reports/bot/bot2a00.rtf.
adding physicians to the committee responsible for defining the site’s content and services.

The most important qualification to look for in a physician is an interest in Web services and a desire to apply those services in ways that improve care, empower patients, and increase efficiencies. The team should look for doctors who are already experimenting with Web services in their practices. It will be a plus if their medical specialties are among those the team intends to emphasize on the site.

The physicians recruited need not themselves be experts in information technology. Their greatest contribution will be in helping the team determine which site services are most relevant to patients and other physicians.

Physicians’ reluctance to take time away from their practices is usually the greatest obstacle to their involvement. The team should accommodate participating physicians by clearly spelling out how much time will be expected from them. If doctors agree to serve on a site planning committee, the team should be flexible in scheduling meetings. But even if physicians cannot serve, they can help plan the site by suggesting health care topics for its content. The team should also ask them to review and comment on the Web plan as it evolves.

CONSUMERS WANT SOLID HEALTH CONTENT
Finding reliable local health information is probably the main reason a consumer comes to a hospital Web site—and gets into the habit of returning to it. Even in a “wired world,” health care is a local event.

Although many outstanding national health Web portals exist, a hospital site can give its community a local or regional blend of health content and information about the services available. When asked to recommend a health care site, physicians will gladly direct their patients to the hospital’s site—but only if they are aware of it and believe that its content is useful and trustworthy.

A wise team will therefore ask the hospital’s clinicians to review the site’s health content, whether the site was developed internally or purchased from an outside vendor. The team may arrange this review either by appointing a formal content review committee or by asking individual physicians to review site materials. Because doctors respond daily to patients’ questions, they can help ensure that the site’s health content is truly useful to patients.

Including physicians in the review process also helps ensure that the site’s health information content is accurate, clinically sound, and in keeping with the practice patterns of the hospital’s medical staff. And it increases the site’s credibility among the medical staff—which increases the likelihood of the site being used.

EDUCATE PHYSICIANS ABOUT THE SITE
A team can do various things to increase the number of visitors to its site. First, it can design the site so that search engines can find it. Second, it can promote the site in the hospital’s publications and advertising. And, third—though this is often overlooked—the team can enlist the hospital’s medical staff in recommending and promoting the site.

Left to themselves, physicians will often be slow to take advantage of a hospital site, either because they do not know it exists or because they are unaware that patients find the information and services on it useful. However, the team can do several easy and inexpensive things to increase the likelihood that physicians will direct their patients to the site.

Present the Site to Your Medical Staff When planning a Web site, the team must be sure to promote it among the medical staff. It might, for example, demonstrate the site’s capabilities at a medical staff meeting. The presenters should focus, first, on the site’s health content and, second, on those services that both patients and physicians’ office employees are likely to find useful. If the health content deals comprehensively with a specific medical area—cancer or women’s health, say—the team should consider scheduling presentations for medical section meetings, thereby allowing those physicians who attend to review site content and offer their opinions on the best ways of packaging online health information for consumers.

Provide Tools That Make It Easy to Refer Patients to Your Site The team can ask staff physicians to let it put cards promoting the site in their waiting rooms. The cards should explain how to find the site and describe its content. Participating doctors are likely to find the cards a simple, inexpensive way to help promote the site.

The team might also ask physicians to give each of their patients a list of the site’s health topics. In fact, doctors could use the list to direct patients to the site for specific health information.
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effort, as did a medical director hired to recruit new doctors into the program. RFK had to convince local obstetricians that the unit would offer both the latest obstetrical technology and a birthing experience their patients would fondly remember. An initial mailing to physicians featured a yellow rubber ducky toy. In a follow-up letter, RFK's CEO described the program, promised access to advanced technology, and assured doctors that their patients would be treated with the greatest care.

RFK also worked hard to reach women of childbearing age. "We knew it was critical for new moms to visualize themselves giving birth here," says Singleton-Turner. "Looking at a picture just doesn't do it for new mothers. They have to see themselves here." Toward that end, RFK constructed a demonstration childbirth room that visitors could examine during tours of the facility.

RFK also hired consultants to help develop a comprehensive communications plan that addressed current and prospective physicians, their office staffs, employees, and consumers. The consultants came up with "Babies First" as a name for the new unit. An accompanying tag line was "A loving start for every baby, loving care for every mom."

The marketing communications campaign began four months before the unit opened. Promotional materials included upbeat illustrations of flowers, rubber ducks, and other symbols likely to appeal to women and their families. The campaign's centerpiece was a giant rubber ducky balloon on the roof of the hospital. "The ducky intrigued not only community members but also the hospital's own employees," Singleton-Turner says. "Word of mouth from the hospital family—employees, volunteers, medical staff, board members and vendors—is critical to the success of all the programs we offer."

Within 24 hours of the giant duck's appearance on the roof, some 75 people called to inquire about it. The duck also generated articles in the news media. Soon after that, RFK was hung with a banner that said: "We're expecting in September, are you?" The banner brought more phone calls and generated more talk in both the hospital and the community, thus building a sense of excitement about the new program's formal introduction.

In an attempt to reach newly pregnant women and their families, RFK sponsored and aggressively promoted maternity teas and baby showers. The hospital gave the women "preadmission kits" containing information about the new service and about the kind of care families could expect from RFK. Newspaper and radio advertisements helped publicize the program in its first several months.

ENLARGING THE CAMPAIGN

Because the number of births in the unit's first year exceeded expectations, the hospital's leaders have set higher goals for the second year; they suspect that many area people do not yet equate childbirth with RFK. The hospital is aiming a continued "Babies First" promotion at such people.

CHW has been so pleased with the RFK results that it has extended the "Babies First" brand to eight of its Los Angeles area hospitals. To reach the large Hispanic population, CHW is promoting its campaign on KMEX, the area's heavily watched Hispanic television station. Included in the KMEX ad is a toll-free number that, when called, is answered by Spanish-speaking personnel who answer questions, promote CHW hospitals, and send additional materials to the callers.

And physicians' office staffs could download information from the site and use it as patient handouts.

LET PHYSICIANS HELP DEFINE WEB SERVICES

The site team should also employ staff physicians as a sounding board for new ideas for its Web strategy. For example, doctors could help evaluate proposals for using the Web to improve information sharing among consumers, hospitals, and physicians' offices. Allowing patients to register for services or schedule an appointment online might be one idea. Another—sure to be popular with office staffs—would be creating a site area where patients could request referrals and get answers to commonly asked health care questions.

Most Catholic health care organizations have already committed themselves to using the Web to extend their healing mission deeper into the community. Most have invested many resources in creating a site to support their goals. If, in the end, these organizations are successful in making their Web sites the local online source of health information, physicians will very likely turn out to have been their most important allies.

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