Harnessing High Touch and High Tech: Combining Traditional Engagement and Social Media to Maximize Dissemination

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#### **Colin Kluender and Myra Hillen Patient Experience Ambassadors**



# **Learning Objectives**

- Design a stakeholder-engaged dissemination plan that maximizes the potential for implementation and sustainability
- Identify barriers to effective dissemination and ways engaging stakeholders can address them
- Describe effective communication channels for dissemination including effectively using new technology
- Identify two elements to include in your research design to assure you are "designing for dissemination", in conjunction with your stakeholders
- Access and use key resources

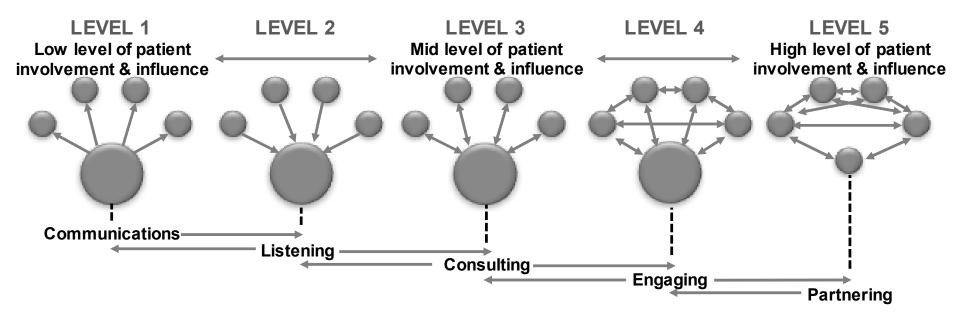


# Agenda

- Context
  - Engagement framework to apply to dissemination
- 2 Case Studies
  - Continuous dissemination
  - Participants as disseminators
  - Social Media guidelines and analytics
- Hear from Patient Experience Ambassadors
- Application selecting & mapping tools/approaches



### Engagement Occurs Across a Continuum



From: Health Canada. 2000. *Health Canada Policy Toolkit for Public Involvement in Decision Making.* Corporate Consultation Secretariat, Health Policy and Communications Branch, Health Canada, Retrieved May 29, 2013. < <u>http://www.hc-sc.gc.ca/ahc-asc/pubs/\_public-consult/2000decision/index-eng.php></u>.



# **High Touch and High Tech Options**

		Inform/Educate	Gather	Discuss	Involve	Partner
Engagement	Jory					
Engaç	Category	Patients are recipients of info & education	Patients are informers	Patients & researchers discuss issues	Patients are advisors	Patients are full participants in research
	High Touch	<ul> <li>Visibility wall</li> <li>Newsletter</li> <li>Brochure</li> <li>Posters (infographics) in clinics</li> </ul>	<ul> <li>Cycle time</li> <li>Penless surveys</li> <li>Suggestion boxes</li> <li>In-person interview</li> <li>Shadowing</li> <li>Mystery shopping</li> </ul>	<ul> <li>Targeted meetings to clarify patient input</li> <li>Focus group</li> <li>1:1 in-person discussion</li> <li>Informal waiting room discussions</li> </ul>	<ul> <li>On-going patient feedback panels</li> <li>Patients attend occasional research meetings</li> <li>Town halls</li> <li>Workshops</li> <li>World Café</li> </ul>	<ul> <li>Patients join ongoing research meetings</li> <li>Patients trained to:         <ul> <li>code data</li> <li>participate in dissemination (e.g. conferences, speakers bureau)</li> </ul> </li> </ul>
Tools/Approaches	High Tech	<ul> <li>Website/Apps/ Blogs</li> <li>Patient e-record/ portal</li> <li>Mass media (newspapers, TV, radio)</li> <li>Email/ texts</li> <li>Social Media</li> <li>Live-streaming</li> </ul>	<ul> <li>Patient e-record/ portal</li> <li>Electronic surveys</li> <li>Phone interview</li> <li>Webinars with Q&amp;A</li> </ul>	<ul> <li>Google hangouts</li> <li>1:1 phone discussion</li> <li>Online discussion forum</li> </ul>	<ul> <li>Virtual town halls</li> <li>Patient panels by video conferencing</li> </ul>	<ul> <li>Patients use Social Media for dissemination</li> <li>Patients interviewed on news (TV or radio)</li> </ul>



# **Engagement for Dissemination**

·								
		Inform/Educate	Gather	Discuss	Involve	Partner		
Engagement Category								
00	e 0	Patients are recipients	Patients are informers	Patients &	Patients are advisors	Patients are full		
Eng	Cat	of info & education		researchers discuss issues	$\frown$	participants in research		
		• Visibility wall	Cycle time	<ul> <li>Targeted meetings to</li> </ul>	<ul> <li>On-going patient</li> </ul>	<ul> <li>Patients join ongoing</li> </ul>		
		Newsletter	<ul> <li>Penless surveys</li> </ul>	clarify patient input	feedback panels	research meetings		
		• Brochure	<ul> <li>Suggestion boxes</li> </ul>	• Focus group	Patients attend	• Patients trained to:		
	E	• Posters (infographics) in	<ul> <li>In-person interview</li> </ul>	• 1:1 in-person	occasional research	$\circ$ code data		
	Ď	clinics	<ul> <li>Shadowing</li> </ul>	discussion	meetings 🔥 👖	$\circ$ participate in		
			Mystery shopping	<ul> <li>Informal waiting</li> </ul>	Town halls	dissemination (e.g.		
	High		, , , ,, ,,	room discussions	<ul> <li>Workshops</li> </ul>	conferences,		
es	I				World Café	speakers bureau)		
ch		<ul> <li>Website/Apps/Blogs</li> </ul>	<ul> <li>Patient e-record/</li> </ul>	Google hangouts	Virtual town halls	<ul> <li>Patients use Social</li> </ul>		
pprod		<ul> <li>Patient e-record/ portal</li> </ul>	portal	• 1:1 phone discussion	• Patient panels by video	Media for		
D	<del>ہ</del>	<ul> <li>Mass media</li> </ul>	<ul> <li>Electronic surveys</li> </ul>	Online discussion	conferencing	dissemination		
Ap	<b>U</b>	(newspapers, TV, radio)	<ul> <li>Phone interview</li> </ul>	forum		<ul> <li>Patients interviewed</li> </ul>		
s/	X	• Email/ texts	<ul> <li>Webinars with Q&amp;A</li> </ul>			on news (TV or radio)		
Tools/A	Hig	Social Media						
T,	I	Live-streaming						



### Continuous Dissemination and Engagement

		High touch for dissemination	High tech for dissemination
Continuous Dissemination throughout Project	Recruitment		
throughc	Project kick-off		
emination	Conduct of Research		
ous Disse	Dissemination of Results		
Continu	Celebrate Successes and Honor Stakeholders		

Adapted from: Lavallee, D. C., Wicks, P., Alfonso Cristancho, R., & Mullins, C. D. (2014). Stakeholder engagement in patient-centered outcomes research: high-touch or high-tech?. *Expert review of pharmacoeconomics* & *outcomes research*, *14*(3), 335-344.

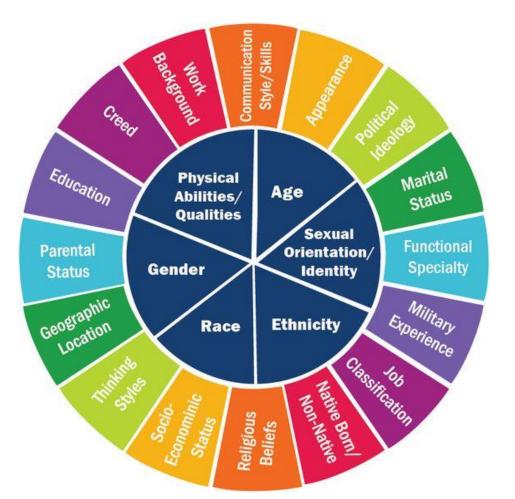


A Fundamental Engagement Challenge: Moving Beyond "The Usual Suspects"





# **Diversity of Voices**



#### Dimensions shape:

- Values
- Beliefs
- Experiences
- Expectations

Affect Health Outcomes



#### Technology as an Engagement Tool





# **Example 1: The Dane 1 in 4 Project**





### **Branding**





### Dane 1 In 4 Website & Social Media



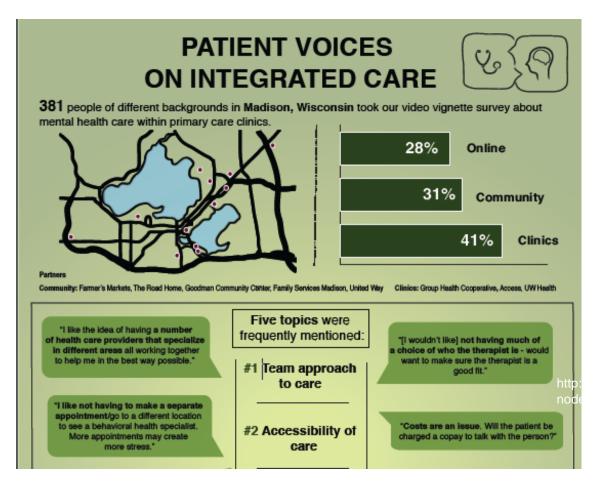


### Stakeholder Partnering: United Way Forum





## **Sharing Results Back**





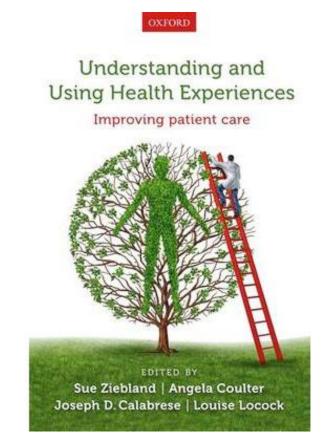
#### Example 2: Young Adults With Depression Module





## **Health Experiences Research**

- Interviewing people about their experiences with particular health conditions
- "...encourage the patient to tell the story of what has happened to them in their own way, focusing on the issues that are important to them."



(Ziebland, Coulter et al., 2013)



### Health Experiences Research Network Steering Committee

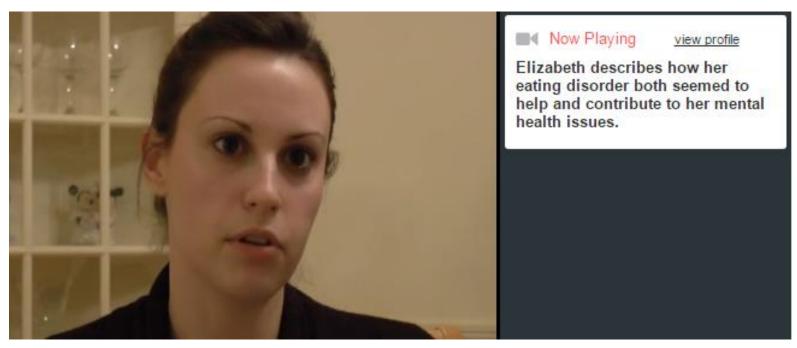
Launched in in 2014

Rachel Grob, MA, PhD, Chair Erika Cottrell, PhD, MPP Kay Dickersin, PhD Mark Helfand, MD, MPH Kate Smith, PhD, MA Nancy Pandhi, MD, PhD Mark Schlesinger, PhD





### Interviews In Home Or Participant Preferred Setting



http://www.healthtalk.org/peoples-experiences/mental-health/young-adults-experiences-depression-us/depression-and-eating-disorders



# Participants Have Control Of What Is Shared And How It Is Shared.....

I have reviewed my transcript and have crossed out any material that I wish to exclude. With the
exception of those sections that I crossed out, I consent to my interview being available in the
following format(s):

Check all that apply:

Video recording of interview

- Audio recording of interview
- Written transcript of interview

I understand that my interview will only be used in the manner set out above. If I decide that I no longer want my interview to be used on the website (or for any other purpose) it will be removed, although I accept that it may not be possible to remove all existing copies from circulation.

Name: (block capitals)	
Signature:	Date:



# How Does HER Enhance Participant High Touch/High Tech Engagement?

- Listening to participants to capture a wide range of experiences and priorities
- Empowering participants by giving voice to their story and choices about sharing their data
- Bringing in and amplifying voices that wouldn't be heard through other engagement activities
- ✓ From voice to voices synthesizing themes and disseminating to broad audiences not just peer-reviewed literature





# Participants as Disseminators

- Identify Activities
- Training Program
- Logistics (compensation, support to others)





# **Dissemination Activities/Tactics**

#### **High Touch**

- Conferences
  - Tabling
  - Poster sessions
  - Presentations
- Speakers Bureau

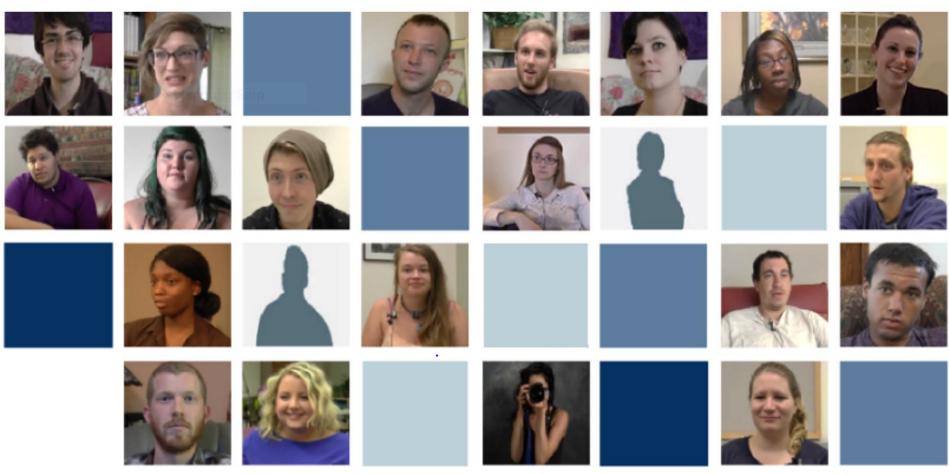
   Local community presentations

#### **High Tech**

- Social Media
  - Facebook
  - Twitter
  - Reddit
- TV News Interviews
- Letters to editors & Op Eds



#### Hear from our Ambassadors





# **Training Components 1**

- Ambassador Job
   Elements
- Teamwork
- Module's Message
- Effective
   Messaging
- Telling Your Story

- Module Review
   Guidance Module
   Topic Facts & Stats
- Social Media
- Traditional Media
- Local Speakers
   Bureau



# **Training Components 2: Logistics**

- Options to pay
- Conference Logistics
  - What to Wear
  - Financial details
  - Behavior & activities

- Guidance for Providing Resources, Support, or Emergency Help
- Who to contact



### **Training Components 3: Compensation**

- Participate in training:
   \$50
- Conference base fee: \$50/day
- Conference exhibition:
   \$50 (plus base fee)
- Social Media:
  - 15 posts, 5 engagements
     in 1 week: \$50
  - 5 posts, 2 engagements in
    1 week: \$20
  - see the Social Media One-Sheet

- Blog Submission/Letter to the Editor/Op-Ed: \$45
  - If published: +\$15, total \$60
- Interviews with Media: \$25
- Organizing/Presenting at Speakers Bureau: \$100-\$150
  - Depending on whether or not other team members are involved in organizing the event.



### Paying Ambassadors & Other Considerations

- Distinguished from "Participants" and "Engaged Stakeholders"/ "Advisors"
- Pre-travel honorariums
- Business Services
- Liability
- Academic Culture

See: "Paying Engaged Stakeholders" in "Compensation and Celebration of Deeply Engaged Stakeholders in

https://www.hipxchange.org/DeeplyEngagingPatients



## **Twitter Guidelines**

- Conversational
- Multimedia
- Pithy & Relevant
- Discoverable
- Consistent

HealthExperiencesUSA @HealthExUSA · Mar 23 Fascinating piece by @amyebutcher on the student use of Yik Yak to get #depression support on college campuses:



Opinion | How the Depressed Find Solace on Yik Yak, Believe It or Not A platform associated with the gutter of young humanity had blossomed with tenderness.

nytimes.com

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HealthExperiencesUSA Retweeted

National Council @ @nationalcouncil · May 19 Education is important! Here are some suicide warning signs that may help you recognize if a loved one is at risk. #MHM2017



Suicide Prevention @afspnational
 May is #MentalHealthAwareness month.



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HealthExperiencesUSA @HealthExUSA · May 17 We love this—self-care comes in many forms, and we don't have to do shopping, or getaways to recuperate.



'Boring Self-Care' Drawings Celebrate Everyday Mental Health Wins Let's talk about the radical act of taking care of yourself. huffingtonpost.com

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HealthExperiencesUSA @HealthExUSA · May 17 Thank you so much @WISCTV\_News3 for the wonderful piece on our resource! Find it here: healthexperiencesusa.org/depression/

WISCTV News 3 @ @WISCTV\_News3 UW Health website speaks to young adults with depression #news3 channel3000.com/health/uw-heal...



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HealthExperiencesUSA @HealthExUSA · May 22
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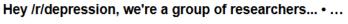
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HealthExperiencesUSA @HealthExUSA · May 19

We are live with an AMA on the important Reddit community /r/depression. Check us out:



Hello /r/depression, We thank you for allowing us to share here, and we thank the mods for their permission. /r/depression is an important space,...

reddit.com

https://twitter.com/ HealthExUSA

### **Analytics for ROI**





### Selecting and Mapping Tools/Approaches

Engagement Category	Inform/Educate	Gather	Discuss		Partner
Engag Categ	Patients are recipients of infe & education	Patients are informers	Patients & researchers discuss issues	Patients are advisors	Patients are full participants in research
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### **Example tools: Visibility Wall**





http://blog.hqc.sk.ca/2013/09/30/educatio n-leaders-study-rqhrs-visibility-walls/

### World Café



http://www.theworldcafe.com/



### **Video Conferencing**





Community-Academic Partnerships

# **Tech Inclusion considerations**

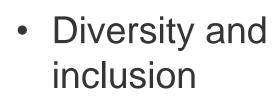
- How familiar is you audience with technology in general?
- Is the tool easy to use and intuitive?
- Is the technology transparent?
- Accessible to non-English speaking or low literacy community members?
- Can communities use it repeatedly?
- Could the use of technology further alienate or intimidate users?





# **Implementation Considerations**

- Expertise
  - Knowledge of the tool
  - Experience with engagement
- Logistics
  - Timing
  - Costs & Compensation
  - Supplies
  - Location



- Pros and cons of each tool
  - Mixing tools to address cons



### **Mapping for Continuous Dissemination**

		High touch for dissemination	High tech for dissemination
out Projec	Recruitment		
throughc	Project kick-off		
Continuous Dissemination throughout Project	Conduct of Research		
ious Disse	Dissemination of Results		
Continu	Celebrate Successes and Honor Stakeholders		

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		High-touch for dissemination	High-tech for dissemination
	Project kick-off	<ul> <li>Community forum at United Way</li> <li>Mass Media – newspaper article, community radio</li> </ul>	<ul> <li>Website</li> <li>Social Media: <ul> <li>Facebook</li> </ul> </li> <li>Twitter (build presence)</li> </ul>
	Recruitment	<ul> <li>Through key community representatives</li> </ul>	<ul> <li>Website about research project</li> <li>Branding project <ul> <li>Blog</li> </ul> </li> </ul>
Continuous Dissemination throughout Project	Conduct of Research	<ul> <li>At farmer's market, community organizations, homeless shelters, clinic waiting rooms</li> </ul>	<ul> <li>Website</li> <li>Social Media:         <ul> <li>Facebook</li> <li>Twitter (about research and related activities)</li> </ul> </li> </ul>
	Dissemination of Results	<ul> <li>Poster with Infographics distributed widely</li> <li>Press Release</li> <li>Traditional academic portals – conferences</li> <li>Personal meetings with community representatives (loop back)</li> </ul>	<ul> <li>Partners posted on own websites</li> <li>Website</li> <li>Social Media: <ul> <li>Facebook</li> <li>Twitter (about results)</li> <li>Blog</li> </ul> </li> <li>Professional listservs</li> <li>Email distribution</li> </ul>
Continuous	Celebrate Successes and Honor Stakeholders	<ul> <li>Invite selective patients from focus group to join research team for next phase of research</li> </ul>	<ul> <li>Thank all community contributors and stakeholders via email</li> </ul>







#### **Publications and Resources**

- Caplan, W., Davis, S., Kraft, S., Berkson, S., Gaines, M., Schwab, W., and Pandhi, N. "Engaging patients at the front lines of primary care redesign: Operational lessons for an effective program." Joint Commission Journal on Quality and Patient Safety 2014;40(12).
- Davis, S., Berkson, S., Gaines, M. Prajapati, P., Schwab, W., and Pandhi, N. Engaging Patients in Team-based Practice Redesign: Critical Reflections on Program Design. Journal of General Internal Medicine. Journal of General Internal Medicine 2015; in press.
- <u>https://www.hipxchange.org/StakeholderEngagementTools</u>
- Arcia, Adriana, et al. "Sometimes more is more: iterative participatory design of infographics for engagement of community members with varying levels of health literacy." *Journal of the American Medical Informatics Association* 23.1 (2016): 174-183.
- Beresford, Peter. *Beyond the Usual Suspects: Towards Inclusive User Involvement: Practical Guide*. Shaping Our Lives Publications, 2013.



## **Articles on Social Media**

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- Darling, E. S., Shiffman, D., Côté, I. M., & Drew, J. A. (2013). The role of Twitter in the life cycle of a scientific publication.
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- Grande, D., Gollust, S. E., Pany, M., Seymour, J., Goss, A., Kilaru, A., & Meisel, Z. (2014). Translating research for health policy: researchers' perceptions and use of social media. Health Affairs, 10-1377.
- Evans, D. (2014) The Crucial Role of Connectors in Disseminating Research Results. WorldBank Blog: Development Impact.



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