Stakeholders’ participation in hospitals’ branding initiatives on social media: a proposal model for building collective brands

La participacion de los stakeholders en las iniciativas de branding del hospital en las redes sociales: una propuesta de modelo para construir marcas colectivas

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Abstract

Introduction: All health organizations face many managerial and economic challenges such as the consolidation of private and international hospitals, the increasingly interest of society for health education issues or the development of telemedicine. In this framework, many organizations prioritize social media as the main corporate communication tool for building a reputed brand in a collective way along with stakeholders. Objectives: This paper aims to identify a communication model allowing hospitals to efficiently apply branding initiatives on social media in order to build a brand in a collective way with stakeholders. Methodology: We carried out a literature review about corporate communication, health communication, branding and social media; and, then, we proposed the PET Model for Branding Hospitals on Social Media. Results and Conclusion: We conclude that hospitals should create a multidisciplinar corporate communication department, implement management initiatives for allowing health professionals have more time for using social media and integrate health education and patient’s empowerment in every communication initiative.

Keywords: Hospital; Corporate Communication; Brand; Stakeholders; Social Media.

Resumen

Introducción: Las organizaciones sanitarias hacen frente a muchos desafíos económicos y de gestión, como son la consolidación de los hospitales privados e internacionales, el creciente interés de la gente por la educación sanitaria o el desarrollo de la telemedicina. En este contexto, muchas organizaciones priorizan las redes sociales como principal herramienta de comunicación corporativa para construir una marca reputada de manera colectiva junto con los stakeholders (accionistas). Objetivos: Este artículo tiene como objetivo identificar un modelo de comunicación que permita a los hospitales aplicar de manera eficiente las iniciativas branding (etiquetar) en las redes sociales para construir así una marca colectiva junto con los stakeholders. Metodología: Llevamos a cabo una revisión bibliográfica sobre comunicación corporativa, comunicación de salud, branding y redes sociales; y, posteriormente, proponemos el Modelo PET para la promoción de la marca hospitalaria en redes sociales. Resultados y Conclusión: Los hospitales deben crear un departamento de comunicación corporativa multidisciplinar, implementar iniciativas de gestión para permitir que los profesionales de la salud tengan más tiempo para usar las redes sociales e integrar la educación sanitaria y el empoderamiento del paciente en cada iniciativa de comunicación.

Palabras clave: Hospital; Comunicacion Corporativa; Marca; Stakeholders; Social Media.
Introduction

The development of private and international hospitals, the new interest of people about health-related issues and the increasingly economic pressure, force many hospitals to reinvent their corporate communication strategies in order to reinforce their strategic positioning in the health market. Most hospitals prioritize branding initiatives focused on stakeholders' needs and interests rather than journalistic products (corporate magazines, press release, newsletters, etc.). To do that, most of them focus their corporate communication strategies on social media. Even if these platforms constitute a true challenge (confidentiality, patients' rights, scientific dissemination, etc.), many hospitals try to surpass their lack of professional experience in these platforms and use them so as to create a new corporate communication paradigm focused on the hospital's brand and the satisfaction of all stakeholders' information needs. This paper aims to identify a communication model allowing hospitals to efficiently apply branding initiatives on social media in order to create a collective brand along with stakeholders.

To do that, this literature review paper proposes a theoretical analysis about corporate communication, health communication, branding and social media: and, then it explains an online communication model for building collective brands based on an internal functioning structure, ten communication principles, a brand content plan and fifty key performance indicators (PET Model for Online Branding).

Corporate Communication in Hospitals

Managing efficiently corporate communication has become a strategic priority for most hospitals (Hannawa, García-Jiménez, Candrian, Rossmann, & Schulz, 2015). This activity determines health professionals’ performance, their relationships with patients as well as the hospital internal functioning at a whole (Brent, 2016). Besides, it helps hospitals reinforce their brand positioning, as well as their strategic positioning in the health market (Glover Khalilzadeh, Choy, Prabhakar, Pandharipande, & Gazelle, 2018). Hospitals manage four main communication activities: interpersonal, internal, external and reputation initiatives (Medina Aguerrebere, 2018).

Interpersonal communication

Most Schools of Medicine propose in their study plan some courses about language, interpersonal communication and techniques for helping health professionals adapt their speeches to different patients (Hendriks, Van den Putte, De Bruijn, & Vree, 2014). Health professionals’ skills in interpersonal communication determine patients’ engagement with their treatment as well as the doctor and hospital (Mosquera, Melendez, & Latasa, 2015). These professionals should attend courses for improving their performance when interacting with different patients (illiterate people, children, aggressive patients, etc.) in several situations (bad news, family conflicts, etc.) as a mean to guarantee an efficient interpersonal communication allowing all of them to be aware of their health problems (Archiopoli, Ginossar, Wilcox, Avila, Hillm, & Oetzel, 2016). Hospitals and Universities work together to constantly update these courses about interpersonal communication for both University’s students in Medicine and hospital’s doctors (Gilligan et al., 2016).

Internal communication

In hospitals, most employees have a direct contact with patients and their family, what represents a challenge from a corporate communication point of view (Medina Aguerrebere, 2015). Thanks to internal communication, hospitals can improve their employees’ engagement with the organization, their sense of belonging as well as their understanding about the global goals pursued by the hospital (Chan, Yu-Ling, Huxley, & Evans, 2016). Internal communication aims to create a positive climate allowing employees’ hospital to work together in an efficient way and focus mainly its interests on patients’ needs and expectations (Blackston & Pressman, 2016). To do that, experts in internal communication focus their efforts on reinforcing the internal culture among employees (identity, values, mission, vision, culture.) rather than designing journalistic products such as newsletters or magazines (Heide & Simonsson, 2014).

External communication

Hospitals interact with many external stakeholders as for instance media companies, public authorities, clients and suppliers (Mira, Lorenzo, & Navarro, 2014). For this reason, they need to implement a professional approach when managing these stakeholders, which involves creating a corporate communication department, recruiting experts in branding and communication, and implementing an annual communication plan (Esposito, 2017). Hospitals constantly analyse all stakeholders’ attitudes and behaviours and identify new opportunities for establishing a corporate dialogue with them (Moser & Greeman, 2014). They also should adopt a pedagogical
mains reasons why the organization’s founders decided to create the company: these reasons determine its internal and external functioning (Maier, 2016). All communication initiatives led by the company should be consistent with its identity and reinforce it in several ways (He & Balmer, 2013). Values can be defined as tangible ideas directly related to identity which help employees behave in a proper way so that they can efficiently contribute to achieve all organization’s goals (Sheehan, Isaac, 2014). Integrating values in all corporate communication initiatives enables organizations to build an emotional relationship with stakeholders (Zerfass & Viertmann, 2017). Mission refers to organizational goals pursued by the hospital in the mid term –five or ten years– (Medina Aguerrebere, 2015) as well as all practical initiatives led by the organization to implement this abstract concept in the employees’ daily life (Naveen, Anil, & Smruthi, 2014). Vision is an intangible concept used by companies to describe their organizational objectives in the long term, as well as the practical initiatives they will implement to achieve these objectives and reinforce the company’s reputation in the market (Singal & Jain, 2013). Finally, culture can be defined as the one-of-a-kind way in which all hospital’s employes behave every day; culture is an internal element letting the company to become incomparable for both internal and external stakeholders (Nelson, Taylor, & Walsh, 2014).

The Corporate Communication Director align all these elements –identity, values, mission, vision and culture– in order to create a true addie value to all stakeholders and build a reputed brand in a collective way (Pinho, Rodrigues, & Dibb, 2014). He should also design an annual corporate communication plan which aims to disseminate the company’s brand architecture (identity, values, mission, vision and culture) to all internal and external stakeholders (Gonzalez Pacanowski & Medina Aguerrebere, 2018). Designing the brand architecture and the annual plan before launching any communication campaign (advertising, public relations, marketing, events, etc.) is essential for hospital to become credible and establish true relationships with stakeholders (Trong, 2014).

Building a reputed, credible and innovative brand constitutes a priority for the Corporate Communication Director, but also for all the hospital’s stakeholders, who should actively engage with this collective process (Zerfass & Viertmann, 2017). Hospital’s employees must lead a branding revolution allowing the company to improve its reputation and credibility and reinforce its strategic positioning in the market (Esposito, 2017). Building a brand in a collective way constitutes a
Managing efficiently social media for improving the hospital's reputation has become a priority for many hospitals (Visser, Bleijenbergh, Benschop, Van Riel, & Bloem, 2016). These organizations invest human and economic resources for leading market research about competitors, trends in the health market, patients' expectations and behaviours, etc. (Blombren, Hedmo, & Waks, 2016) allowing them to implement efficient branding strategies and emotional relationship with stakeholders (Trepanier, 2014). Thanks to this emotional link, hospitals create online brand communities based on social media where all stakeholders, especially patients, can interact with the company and share information and experiences (Huesch, Currid-Halkett, & Doctor, 2014). The involvement of hospital's health professionals is essential for these communities to become a true source of medical information (Rupert et al., 2014; Liu, Guo, Wu, & Vogel, 2014). Social media and brand communities have radically changed all hospitals' corporate communication strategies (Boudewyns, Himelboim, & Hansen, 2015). Thanks to these platforms, hospitals can build an emotional brand in a collective way with stakeholders (Fernández-Luque & Bau, 2015) and establish a dialogue about patients’ expectations and health related content –diseases, treatments, etc.– (Visser et al., 2016).

In order to efficiently integrate social media platforms and brand communities in hospitals’ corporate communication strategies, we propose the PET Model for Branding Hospitals on Social Media. This model is based on four main elements: 1) internal functioning model, 2) ten communication principles, 3) brand content plan and 4) fifty key performance indicators.

According to this model, hospitals implement a Corporate Communication Department which reports directly to the hospital's CEO (Chef Executive Officer) and integrates all communication initiatives led by the organization: public relations, advertising, marketing, events and social media. The Corporate Communication Director defines an annual plan for he whole department as well as for each unit (advertising, public relations, etc.). All these plans should be consistent with the hospital’s business plan and validated by the hospital’s CEO. Besides, the Corporate Communication Director designs and applies internal protocols for main initiatives led by this department, as for example press conferences, co-branding initiatives, social media campaigns, etc. Finally, concerning the social media unit, its director as well as the other employees in this unit apply these plans and protocols and manage a constantly updated database about stakeholders’ behaviours on social media.

All employees working in the social media unit respect ten communication principles enabling the hospital to disseminate an unambiguous image and engage all stakeholders in a collective brand building process (see Table 1, Communication Principles on Social Media).

First, strategic approach. Hospitals recruit experts in corporate communication able to add value to the hospital’s brand and improve all stakeholders’ engagement in creating content through social media (Ruiz-Granja, 2015). Second, brand positioning. All branding initiatives through social media are consistent with the organization’s brand architecture so that they efficiently influence stakeholders’ perceptions and reinforce the company’s positioning in the market (Brent, 2016). Third, personal branding. All hospital’s health professionals should become brands specialized in different fields so that the hospital converts into a credible source of scientific information for all stakeholders (Liu et al., 2014). Fourth, pedagogical approach. All hospital’s communication initiatives on social media should help patients master different health related contents (treatments, prevention, etc.), which helps the organization develop its scientific credibility (Grajales, Sheps, Kendall, Novak-Lauscher, & Eysenbach, 2014). Fifth, trust relationships. Hospital must figure out some problems related to privacy, security and personal data in order to build a true relationship with stakeholders (Househ, Boryck, & Kushniruk, 2014).

Sixth, engagement. Hospitals should mobilize stakeholders so as to build a collective brand based on the company’s interests and stakeholders’ needs (Grajales et al., 2014). Seventh, emotional connexion. Hospitals focus their online communication strategies on patients' feelings and perceptions about the company in order to reinforce their emotional engagement with the hospital (Kemp, Jilipalli, & Becerra, 2014). Eighth, knowledge management. Doctors and PR experts work together to build and update databases about stakeholders' attitudes and expectations in order to improve the hospital’s internal functioning as well all stakeholders’ satisfaction (Bubien, 2015). Nineth, content specialized. Hospitals analyze all stakeholders’ health information needs and create scientific content adapted to each of them (McCarroll, Armbruster, Chung, Kim, McKenzie, & Von Gruenigen,
2014). And tenth, medical service. Health professionals must integrate social media in their daily work for implementing a collective decision-making process with patients and improving in this way all medical services (Lim, 2016) (Table 1).

Once the hospital’s Corporate Communication Director has established an internal functioning model and explained to all its employees these ten communication principles, the next step consist of definin a brand content plan. This annual plan aims to disseminate corporate contents directly related to the hospital’s brand architecture using five social media platforms (Twitter, Linkedin, Youtube, Facebook and Instagram) and targeting seven stakeholders (patients, employees, scientific community, public authorities, shareholders, media companies, opinion leaders, society and suppliers). Hospitals should integrate the brand architecture and corporate contents in a creative way and share constantly with stakeholders new inputs pushing them to establish a dialogue with the company (see Table 2. Brand, Content and Targets). To do that, they should carry out previously a market analysis about all stakeholders’ information needs.

During the whole year, the hospital’s Corporate Communication Director analze many key performance indicators for the purpose of evaluating whether stakeholders engage –or not– with the organization for building a collective brand. For each social media platform, he establishes an official list of key performance indicators to evaluate the true impact of social media in stakeholders’s attitudes and behaviours (see Table 3. Key Performance Indicators).

The hospital’s Corporate Communication Director establishes different objectives according to all these key performance indicators, as well as the annual corporate communication plan and the social media annual plan. They take into account all these indicators to evaluate constantly the campaign during the whole year in order to adjust it for being more efficient. Besides, at the end of year, they analyse all data available in the social media unit’s database and update the social media annual plan as well as all protocols used for each platform (Twitter, Linkedin, Youtube, Facebook and Instagram) as a mean to optimize the hospital’s effort on social media and improve all stakeholders’s engagement with the organization. All these modifications should be consistent with the two annual communication plans (corporate and social media).

**Table 1. Communication Principles on Social Media**

<table>
<thead>
<tr>
<th>Communication Principle</th>
<th>References</th>
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<tbody>
<tr>
<td>1</td>
<td>Strategic approach</td>
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<tr>
<td>2</td>
<td>Brand positioning</td>
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<td>3</td>
<td>Personal branding</td>
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<tr>
<td>4</td>
<td>Pedagogical approach</td>
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<td>5</td>
<td>Trust relationship</td>
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<td>6</td>
<td>Engagement</td>
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<td>7</td>
<td>Emotional connexion</td>
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<td>8</td>
<td>Knowledge management</td>
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<td>9</td>
<td>Content specialized</td>
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<td>10</td>
<td>Medical service</td>
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<td></td>
<td>Ruiz-Granja, 2015</td>
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<td>Brent, 2016</td>
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<td>Bubien, 2015</td>
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<td>McCarroll, 2014</td>
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<td>Lim, 2016</td>
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Table 2. Brand, Content and Targets

<table>
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<tr>
<th>Month</th>
<th>Brand Architecture</th>
<th>Corporate content</th>
<th>Main target</th>
<th>Platforms</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>Identity</td>
<td>Medical information (treatments, services, etc.)</td>
<td>Patients, Employees</td>
<td>Twitter, Linkedin</td>
</tr>
<tr>
<td>February</td>
<td>Mission</td>
<td>Scientific research led by health professionals</td>
<td>External scientific community, Public authorities</td>
<td>Youtube, Facebook</td>
</tr>
<tr>
<td>March</td>
<td>Vision</td>
<td>New business projects (new departments, joint ventures, etc.)</td>
<td>Shareholders, Media companies</td>
<td>Facebook Youtube</td>
</tr>
<tr>
<td>April</td>
<td>Value 1</td>
<td>Corporate events</td>
<td>Public authorities, Opinion leaders</td>
<td>Facebook Twitter</td>
</tr>
<tr>
<td>May</td>
<td>Value 2</td>
<td>Learning initiatives</td>
<td>Patients, Society</td>
<td>Twitter, Instagram</td>
</tr>
<tr>
<td>June</td>
<td>Culture</td>
<td>Employees' initiatives</td>
<td>Employees, Suppliers</td>
<td>Linkedin, Instagram</td>
</tr>
<tr>
<td>July</td>
<td>Identity</td>
<td>Medical information (treatments, services, etc.)</td>
<td>Patients, Employees</td>
<td>Twitter, Linkedin</td>
</tr>
<tr>
<td>August</td>
<td>Mission</td>
<td>Scientific research led by health professionals</td>
<td>External scientific community, Public authorities</td>
<td>Youtube, Facebook</td>
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<tr>
<td>September</td>
<td>Vision</td>
<td>New business projects (departments, joint ventures, etc.)</td>
<td>Shareholders, Media companies</td>
<td>Facebook Youtube</td>
</tr>
<tr>
<td>October</td>
<td>Value 3</td>
<td>Corporate events</td>
<td>Public authorities, Opinion leaders</td>
<td>Facebook Twitter</td>
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<tr>
<td>November</td>
<td>Value 4</td>
<td>Learning initiatives</td>
<td>Patients, Society</td>
<td>Twitter, Instagram</td>
</tr>
<tr>
<td>December</td>
<td>Culture</td>
<td>Employees' initiatives</td>
<td>Employees, Suppliers</td>
<td>Linkedin, Pinterest</td>
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Table 3. Key Performance Indicators

<table>
<thead>
<tr>
<th>Social media platform</th>
<th>Key performance indicators</th>
</tr>
</thead>
</table>
| Facebook (Datapine, 2019a) | 1. Number of fans  
2. Followers demographics  
3. Page views by sources  
4. Actions on page (likes, content shared, etc.)  
5. Reach by post type  
6. Post engagement rate  
7. Click-through-rate  
8. Impressions  
9. Frequency  
10. Positive or negative feedback |
| Twitter (Datapine, 2019b) | 1. Average amount of link clicks  
2. Average engagement rate  
3. Average amount of impressions  
4. Top 5 tweets by engagement  
5. Interests of followers  
6. Followers demographics  
7. Number of followers  
8. Frequency  
9. Positive or negative feedback  
10. Hashtag performance |
| Youtube (Datapine, 2019c) | 1. Total watch time  
2. Total amount of video views  
3. Viewer retention  
4. Video engagement  
5. Number of subscribers  
6. Daily active users  
7. Traffic source  
8. Subscribers demographics  
9. Top 5 videos by views  
10. Positive or negative feedback |
| Linkedin (Datapine, 2019d) | 1. Followers demographics  
2. Number of followers  
3. Impressions  
4. Reach  
5. Engagement rate  
6. Company update statistics  
7. Viewer information  
8. Contact and network growth  
9. Profile views by job title  
10. Post views & engagements |
| Instagram (Agency Analitics, 2019) | 1. Followers growth rate  
2. Followers demographics  
3. Engagement per follower  
4. Website traffic  
5. Link clicks  
6. Comment per Post  
7. Instagram Stories Engagement  
8. Reach  
9. Impressions  
10. Positive or negative feedback |
Conclusion

Building a reputed, credible brand constitutes a challenge as well as a priority for all hospitals interested in reinforcing their strategic positioning in the health market. For doing that, these organizations need to integrate social media in their professional logic and constantly develop a collective process along with stakeholders in order to influence their perceptions about the organization. Applying the PET Model for Branding Hospitals on Social Media help these organizations to implement a new communication paradigm allowing them to create meaningful brands for all stakeholders. For the purpose of concluding this paper, we propose three last ideas. First, the hospital's Corporate Communicaton Department and the Social Media Unit should be integrated by experts in branding, economics, mathematics, engineering, public health and medicine; this multidisciplinary structure should work internally according to protocols and annual plans previously approved by the hospital's CEO. Second, building a credible brand involves all hospital's employees, which means that they need time during their workday for attending courses on corporate communication and social media as well as for using these platforms; in other words, hospitals should recruit more employees so that health professionals can efficiently integrate this new responsibility in their daily schedule. And finally, for properly applying the PET Model, hospitals need to integrate health education and patient's empowerment in every communication initiative so that the hospital brand become a credible source of scientific information for all stakeholders.

References


