



OPEN THE DOOR TO SOCIAL MEDIA

BY ELIZABETH BORRE LEONARD

As many association professionals know, nonprofits often restrict employee access to social networking sites and sometimes prohibit it altogether. Never mind that popular sites like Facebook, MySpace, YouTube, Flickr and Twitter already have become staples in the modern mainstream marketing mix; many nonprofit executives continue to question the value of social media, worrying about the potential impact of hypothetical misinformation when it's spread via social networks. As the Metropolitan Chicago Healthcare Council recently discovered, the risks are real. But so are the rewards.

THE PROBLEM WITH SOCIAL MEDIA

During the first half of 2009, media reports of social media blunders became all too common. Some people have even lost their jobs over short — but not so sweet — tweets. There was a woman in California, for instance, who unintentionally sabotaged a job offer when she carelessly tweeted about getting a new job with a “fatty paycheck,” then lamented over the longer commute and admitted to “hating the work.” In the end, the company rescinded its job offer.

Daliah Saper of Saper Law, a Chicago-based firm that practices social media and Internet law, warns that while social networks may seem harmless to employees, their employers must beware. That's because evolving workplace ethics and — in some industries, such as health

care, where there are rules like the Health Insurance Portability and Accountability Act (HIPAA) governing communications — legal mandates have shed a new spotlight on employee correspondence, even when that correspondence takes place on social networks.

“Simple actions such as complaining about a long day at the office have taken on an Internet-based tint,” Saper says. “Those status updates published to hundreds of connected people about the trials of the day could get you in trouble.”

The problem isn't only with employees, according to Saper; it's also with the social networks themselves, as there is no one on the other end of a typical social network policing improper or illegal activity. “If [a health care employee] posts a photo of a patient, Facebook certainly won't instruct them to take it down,” Saper says. “If you are not aware of the problem and you haven't correctly trained your employees, you could be liable for a number of claims resulting from your employees' postings.”

MCHC, a membership and service association representing more than 140 hospitals and health care organizations in northern Illinois, has been studying social media for many years. In 2007, at the request of its member hospitals, MCHC hosted a blogging session to address a topic still considered taboo by hospitals: executive blogging. The question hospitals were asking them — and are still asking today — was, “Should we be participating in health care discussions on blogs?”

MCHC took the plunge this summer when its president and CEO, Kevin Scanlan, began blogging about health care reform and its impact on hospitals in the Chicagoland area. “We knew that what was headed our way in terms of health care reform via the Obama administration was going to come down the pike at a fast and furious pace,” Scanlan says. “We also knew that our member hospitals were looking to us to get messages out into the community on how reform might impact their local hospital.”

In June, Scanlan and the public affairs team at MCHC launched a consumer-focused Web site, called Support-OurHospitals.com, and spent much of the summer blogging about health care reform and how the recession was negatively impacting hospitals.

OPEN SESAME

Julie Pesch, director of public affairs and communications for Children's Memorial Hospital in Chicago and immediate past chairwoman of MCHC's Public Affairs Committee, recalls how social media engulfed nearly every committee meeting she chaired from 2007 to 2009. “Blogging was the main focus early on, but by the end of 2008 Twitter and Facebook conversations seemed to be everywhere,” Pesch says. “And while many of us preferred e-mail and phone to reach out to the media, all of a sudden we were pushed in a new direction by health reporters toward sites like LinkedIn and Twitter.”

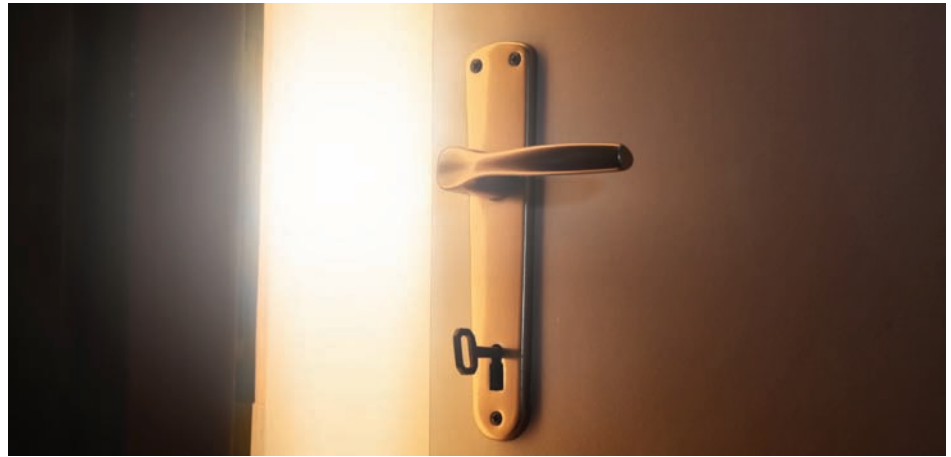
In early 2009, MCHC's Public Affairs Committee noticed that its members were consistently running into a single obstacle: They were being denied access to social networking sites by their employers. Because they couldn't log onto Facebook, YouTube or Twitter from their worksta-



tions, some committee members began using their smart phones to sign into their personal social networking accounts and communicate with reporters.

For its members' sake, MCHC's Public Affairs Committee knew it needed to substantiate the value of social media while finding ways to mitigate its risks. Deborah Song, associate director of media relations for Rush University Medical Center and current chair of MCHC's Public Affairs Committee, inherited this conundrum from Pesch and faced the even bigger task of establishing template guidelines that committee members could share with human resources executives to begin the process of opening social networks to employees at work.

"We were aware of why hospitals were preventing their employees from getting on these sites, but we also knew that they were doing it anyway without sanction from their organization," Song says. "We wanted to provide a roadmap for employees and their hospital organizations that would allow members to take their social media strategies to the next level."



GUIDELINES TO THE RESCUE

Over a three-month period, MCHC assembled a subcommittee of member public relations professionals to research and develop a sample guidebook for use in teaching employees to effectively use social media. Additionally, MCHC recruited Saper to provide legal advice. The result was MCHC's *Guide to Social Computing*, a template of suggested language for organizations to use when they're building internal policies regulating the use of social media, or outlining consequences for employees who violate that policy.

MCHC gave its members a written social media resource, but it also took advantage of the opportunity to lead by example, using the guidelines it developed for members to develop its own internal policy for MCHC employees. Mary Anne Kelly, MCHC's vice president of human resources and work force development, used that policy to give employees a framework for appropriately using social media to the benefit of the association, and for understanding what is inappropriate use.

MCHC's own policy also expanded on the *Guide to Social Computing* with additional language spelling out MCHC's right to monitor at any time all electronic communications and social media postings to ensure that staff is engaged in a reasonable use of social media during work hours.

REWARDS VS. RISKS

The debate over social media continues at associations across the country, begging the question: Is the reward worth the risk?

To answer that question, MCHC advises associations and their members to take a slow and balanced approach to implementing social media. "Once we studied the

issue and created guidelines to steer staff in the right direction, we realized that we still needed to assess our strengths and weaknesses in this area and make sure our team was well positioned to handle these sites," says Caryn Stancik, MCHC's vice president of communications.

To that end, MCHC organized its staff on a linear continuum of social media familiarity. On one end, it identified younger employees who grew up with Facebook and MySpace and could navigate the Internet with ease. Members of this group, it decided, needed clear direction on how to keep their private lives separate from their professional lives. On the other side of the continuum were MCHC's more experienced employees, who typically arrived to the social media party one or two generations too late. Because they had little use for social networks in their personal lives and were less familiar — and sometimes had no experience at all — with these sites, members of this group needed basic education about what social networks are and how they work. Finally, both groups needed training to teach them the positive impact that social media can have on their work.

To give employees the social media training they need, MCHC's public affairs department is currently revamping its internal training workshops — once targeted toward traditional media training — to effectively address social media strategy. The goal by year's end is to create a team of brand agents that will advocate on behalf of MCHC's member hospitals in metro Chicago. ■

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