The Great Divide: Social Media’s Role in Bridging Healthcare’s Generational Shift

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EXECUTIVE SUMMARY

Social media, a resource largely untapped in the healthcare field, presents opportunities and advantages and, if used properly, can innovate healthcare and create a competitive advantage for adopters. Many organizations have considered social media but dismissed its advantages as fleeting products of the new generation entering the workforce: the millennials. However, the millennial generation has assumed a greater presence in clinical and administrative positions as the baby boomer generation prepares for retirement. This article advocates the adoption of social media in healthcare organizations as a strategic advantage in connecting with their patient population and recruiting and retaining millennial staff amid the generational shift of the healthcare workforce.

For more information about the concepts in this essay, please contact Ms. Sarringhaus at ms123806@ohio.edu. Ms Sarringhaus is the first-place winner of the undergraduate division of the 2011 ACHE Richard J. Stull Student Essay Competition in Healthcare Management. For more information about this competition, please contact Reed L. Morton, PhD, FACHE, at (312) 424-2800.
Throughout the previous decade, social media has become one of the most pervasive communication outlets in the world. Connection takes just an Internet connection and two people. Social media allows a person in Dhaka, Bangladesh, and a person in Seattle, Washington, to share ideas, culture, and even business plans. Though social media was originally used mostly by the millennial generation (those born between 1979 and 2000), this is changing as social media increasingly becomes an everyday function in businesses.

Social media offers healthcare organizations (HCOs) an abundance of potential benefits (Thielst 2010; Squazzo 2010; McNab 2009), including enhanced community outreach, employee relation improvements, and insight into the competitive recruitment environment. Unfortunately, HCOs have been slow to adopt and use this new resource, leaving these and other benefits unrealized. This article will show how social media applications can provide HCOs with a competitive advantage.

Social media applications and sites offer an abundance of information on organizational culture, current employee attitudes, and the overall relationship between administrative and clinical staff. Use of social media starts an interactive conversation in which anyone can take part and demonstrates an inclusive and participative culture.

One basic fact must be addressed: Given the endless spectrum of social media usage in society today, without a doubt a conversation is happening about every HCO. Leading organizations should strive to shape and be a part of this discussion, but most organizations choose not to participate. Meanwhile, forward-looking organizations are capitalizing on this communication opportunity.

**How Social Media is Used**

Social media can be technically described as “electronic tools that enhance communication, support collaboration, and allow users across the globe to generate and share content” (Thielst 2010, 1). Online social networking sites help some hospitals share personal connections with the community and patients they serve. However, social media in healthcare is still in its infancy, its depths undiscovered and its advantages only partially realized. No matter the outlet chosen, social media gives an organization an identity beyond a name and standard of care.

With more than 150 million users in the United States (comScore 2011), Facebook is a social networking site that allows users (both individuals and organizations) to create profiles, share information, and stay connected. Facebook has provided a free and engaged audience for the few HCOs involved to impact conversations to their advantage and attract a broader spectrum of stakeholders. But Facebook is just one part of the vast social media landscape.

Twitter, a microblog site originally created for users to simply disclose their physical location, now allows users to follow each other and share posts relating to news, announcements, and personal or organizational information. Twitter has connected some HCOs to each other, their patients, and the community by enabling them...
to follow news and draw attention to events and recognitions.

Blogs provide a forum for cataloging the daily or weekly activities and issues of the organization and give readers an opportunity to respond or comment. Blog authors discuss a variety of issues of their choosing.

Social media lets HCOs transition from talking at their audience to talking with them, from one-directional telling to multidirectional interacting. HCOs can receive frequent (in some cases, daily) updates of their followers’ locations and frequency of use. Demographic information is critical in allowing an organization to see their most engaged audience, expand to new markets, and cater to the needs of each specific audience segment. This information, along with the feedback that social media participants provide, allows an organization to identify, analyze, and employ strategies for each demographic.

The number of hospitals currently using social media is minimal, as only 965 US hospitals, out of a total of almost 5,800, are taking advantage of this untapped communication tool (Bennett 2011, AHA 2010a). These 965 hospitals are the creators of 777 Facebook pages, 714 Twitter accounts, 486 YouTube accounts, and a mere 120 blogs (Bennett 2011).

The modern healthcare workforce suffers from a growing division in attitudes and work habits between administrative staffs dominated by baby boomers and nursing, physician, and lower administrative positions filled mostly by millennials. This division is often attributed to the technology gap between the two generations. Mark Bauerlein (2008) gives voice to many baby boomers’ apprehension in The Dumbest Generation: How the Digital Age Stupefies Young Americans and Jeopardizes Our Future. Bauerlein discusses in length the disconnect and misunderstanding between the generations and also explores millennial dependence on technology. Bauerlein suggests that “more and more, it seems, the technology itself is [millennials’] possession, their expression” (2008, 72), in contrast with baby boomers’ preference for traditional interpersonal communication.

Baby boomers’ misgivings about modern applications of technology is countered in the workplace by millennials’ dependence on technology and apprehension about working in an organization that does not embrace the latest social media applications. Millennial workers grew up in constant contact with technology; they are eager to adapt to innovations and do so easily. Accordingly, millennials are uncomfortable in workplaces that lack the latest advancements. Although many baby boomers have begun using social media and other new technologies at home, few transferred this use to the workplace. This technology divide has led to problems in coordination, trust, communication, and overall organizational efficiency. Baby boomers’ reluctance to embrace the use of social media on an organizational level has caused the healthcare field to fall behind in the application of such technologies. This makes the field appear to be filled with excessively bureaucratic institutions that are unattractive to younger generations. Because of both generations’ interdependence and need for fluid
communication, steps must be taken to bridge the gap in today's highly competitive healthcare environment.

**MILLENNIALS IN THE WORKPLACE**

A better understanding of the millennial generation is fundamental to a heightened awareness of the critical role they can play in an organization's staff. Perhaps the most distinguishable characteristic is their adaptability to technology. Schooley and colleagues (2005) describe millennials as "technology natives" due to their fluency with and early use of technology. An estimated 76.9 percent of people ages 20 to 24 and 47.2 percent of those 25 to 29 use social networking several times per week (AHA 2010b). Experimentation with multiple technologies at a young age has made that age group quick technology adapters and experienced multitaskers.

Moreover, technology adaptations have already flourished in many businesses; these changes are coming to healthcare, too. Early adapters will help ease the transition and will profit in the long term. As Schooley and colleagues (2005, 6) state, "Before older managers retire, they need to transform the workplace to accommodate the expectations and work patterns of this new workforce." This transformation includes using technology to reach out to, and communicate with, employees. Social media gives employees more identity, and constant communication makes them appear attuned to the organization's ideas. Schooley and colleagues (2005, 9) suggest that for organizations to have "success in hiring and training employees under 25 years old, the information workplace must be interactive... and have a social networking component."

Social media provides the perfect tool to help healthcare executives begin to close the gap in technology adaptation. Social media can enhance relations with millennials inside and outside the organization by engaging them in conversations that advance the goals of the organization. Although the process of narrowing this gap may initially appear daunting, the potential long- and short-term benefits to the healthcare workforce are substantial. Employing social media as a recruitment and retention tool by targeting millennials can provide HCOs with a competitive edge in today's hectic marketplace.

**Healthcare Organizations and Millennial Providers**

The current and forecasted US nursing shortage is a foremost issue for many HCOs. A hospital attempting to fill 80 or more registered nurse positions for one year faces at least $800,000 in direct costs for recruitment and selection (AFSCME 2010). The nearing retirement of millions of baby boomer nurses is coupled with nursing schools' incapacity to increase enrollment to meet demand. Millennials represent a large pool of potential nurses, and organizations can alleviate their nurse shortages by reaching that pool through effective recruitment. Social media use makes recruiting newly graduated nurses more effective. Likewise, to retain their current millennial nurses, administrative staff must facilitate communication. For example, integrating social media with the organization's nursing excellence recognition...
policy would fulfill millennials’ desire for positive reinforcement, and it would also facilitate retention.

Moreover, a greater number of hospitals are moving toward an employment model with their medical staff, and younger physicians are an important component of this emerging model. Unique recruitment strategies and continued improvement of hospital–physician relations through open communication are necessary to attract these physicians, who determine their own career paths and control their employment terms. Social media can aid in recruiting and employing young physicians while bridging the technology gap for baby boomer administrators.

Many young people see HCOs as top-down, bureaucratic organizations, mostly because of high regulation and lack of interactive communication. The institutions seem intimidating and unapproachable. The ease of dialogue and inherent familiarity that accompany social media use soften this image, allowing a comfortable interface for initial contact with an unfamiliar organization.

This same bureaucratic image often persists for young employees within an organization’s existing workforce. This issue, if unaddressed by senior leadership, leads to fragmentation and distrust within the workplace. Millennials desire a relationship with authority that differs greatly from the relationship that baby boomers are accustomed to, and this discrepancy often leads to this issue being ignored. Tapscott (2010) points out the distinguishing characteristics of millennials compared to their predecessors. Tapscott describes millennials as the “relationship and collaboration generation,” as they continually look for openness and interaction in choosing where to work (Tapscott 2010).

The younger generation’s collaborative attitude applies throughout an organization, and it begins with having their voices heard. Although relationships and collaboration are not as highly valued by older generations, they are critical to recognize and address, especially in a field often seen as authoritative and rigid in communication. At the heart of social media is input that creates two-way communication. This includes sharing information and collaborating on problems and complex issues as a team, not within a traditional hierarchy. Baby boomers were originally attracted to the healthcare workplace because they assumed that they could show their loyalty to the organization through hard work and long hours and that financial reward would follow. The typical hierarchical, highly regulated healthcare workplace was attractive to baby boomers, but a different philosophy must soon be adapted to transition the workplace so that it is attractive to millennials (AHA 2010b).

Maximizing the Value of Millennials Through Social Networking

Millennials hold a new and often misunderstood role in the healthcare workforce. They have new attitudes, work ethics, and views. Some of their attributes can be misconstrued as counterproductive to an organization’s mission, such as their need for recognition or constant use of multiple technologies. However, if organizations let these workers flourish with a new approach to
managing them, millennials will prove
to be invaluable assets. A report on
generational differences in the work-
force (AHA 2010b) describes millenni-
als as being team oriented, seeking open
communication, and needing constant
feedback and reinforcement. In contrast,
baby boomers are described as expecting
loyalty from coworkers, equating their
career with their identity, and having
a driven work ethic (AHA 2010b).
Although such differences may initially
appear as barriers, they are actually
opportunities upon which organizations
can capitalize. HCOs must adapt their
recruitment and retention approach and
other management processes to maxi-
mize the potential of this technology-
driven generation.

Some truths lie within the mis-
conceptions about younger workers.
Bauerlein (2008, 36) describes millen-
nials as lacking the necessary skill set
to “negotiate an information-heavy,
communication-based society” and
says that they “avoid the resources and
media that might enlighten them”
because of their excessive use of tech-
ology. Bauerlein fails to point out
that traditional media outlets have also
moved to social media. Millennials are
simply gathering their information in
new ways. However, some millen-
nials demonstrate poor judgment and
irresponsibility but use social media as
a scapegoat. Users of social media are
generally free to post whatever infor-
mation they like, including material
that defames themselves or others and
content that makes them undesirable in
the eyes of potential employers. While
members of every generation make
mistakes in young adulthood, millenni-
als’ problems are available for everyone
to see. This visibility can be an asset
in the recruitment process—vetting
candidates through social media lets
recruiters be more cautious in hiring.
An organization’s use of social media
allows them to connect with current
and potential employees, providing an
avenue for gauging employees’ judg-
ment and responsibility. Healthcare
professions are judgment professions,
relying heavily on nurses and physi-
cians to have sound responsibility and
critical decision-making skills. Social
media allows another channel of assur-
ance that current and future nurses
and physicians demonstrate these vital
attributes. It is imperative to use social
media not only to attract a new genera-
tion of seemingly foreign healthcare
workers but also to select appropriate
and responsible candidates from the
crowd it draws.

Another reason to use social media
in recruitment is the declining use of
job boards. Millennials find job boards
confusing and frustrating and are not
comfortable using them. These candi-
dates are instead turning to social media
sites, such as LinkedIn and Twitter, to
see job openings and learn more about
organizations. To younger job seekers,
social media is familiar, easily naviga-
ble, and useful in stressful and complex
situations such as job searching. On
average across all fields, social net-
working follows only employee referrals in
successful and cost-effective sources for
recruitment (Affinity 2008).

Accordingly, an active and engag-
ing social media recruitment strategy
will yield a large pool of qualified
healthcare providers. HCOs large and

small can differentiate themselves in the competitive marketplace by connecting, engaging, and communicating with current employees, potential employees, customers, and the general community. Millennials use social media and become content creators. “They construct knowledge” (Bauerlein 2008, 73) and so can innovative organizations.

**Implementing a Social Media Strategy**

Among all the benefits previously discussed, the most significant one is that the cost of a social media recruitment strategy is budget neutral. In this dismal economy of lowering reimbursement rates and the uncertain implications of healthcare reform, every organization needs to reduce costs. With most social media options free to users, such as Facebook, Twitter, LinkedIn, blog hosting sites, and YouTube, the costs associated are mainly those of labor in the marketing and human resources departments.

In the midst of an influx of millennials and a significant retirement rush of baby boomers, experienced administrators bear the tasks of transforming workforce processes and engaging young workers. The shift starts within the organization, with a conversation about social media. All social media deployment begins with a decision about what kind of user the organization will be, which tools it will use, and the selection of an individual within the marketing or public relations department to oversee media use. The individual chosen should do a needs assessment and determine which social media forums and content would best serve the organization’s mission. A needs assessment may include any or all of the following considerations (Thielst 2010):

- A search for an individual within the organization with strong communication skills who is comfortable using social media and tasked with implementing a long-term social media strategy
- A survey about how frequently current employees use social media and which specific outlets they use
- A survey of the applicant pools that the organization desires to reach, such as nursing students or medical school students, to determine which social media applications they use most
- An exploration of the organization’s existing social media presence, such as patient pages on Facebook, blogs that mention the organization, or any individual departments already contributing to online conversations about the organization
- A consideration of any current media content (video, audio, weekly addresses) that could be reformatted and used in the organization’s social media applications
- Analysis of the organization’s capacity to regularly update information, monitor feedback, and appropriately respond to any and all detected criticism
- Identification of administrative and clinical staff who may be willing to contribute content

Some organizations may choose to bring in an outside expert such as a social media manager in the early planning stages. This new social media
manager position in many hospitals has grown out of the realization that “social media require more time and effort—and have a worthwhile payoff” (Cook 2010). These specialists are charged with the task of engaging employees and patients through social media and teaching staff how to use it.

Embracing social media is a strategic decision to move the organization forward, to shift and transform a portion of its culture in order to become more attractive to and facilitate communication with millennials. Consequently, when joining the conversation and facilitating open communication, an organization engages its current employees and demonstrates to potential employees a commitment to recognize and adapt to changing workforce dynamics.

As with any transformation, there are limitations or disadvantages associated with shifting toward social media. Close monitoring of content is a necessity because of the delicate nature of private health information. Each individual involved in the organization’s social media strategy should be trained on the privacy and security of health information. Organizational expectations on social media behavior and compliance guidelines need to be clearly communicated to all employees from the beginning and reiterated periodically. Employees must understand that their words and actions on social media sites directly reflect on the organization.

In addition, it should be noted that the possibility of unpleasant commentary or feedback is more likely in social media than in traditional interpersonal communication. While face-to-face communication may deter many patients or employees from communicating their honest opinion, writing to a computer screen empowers writers and gives them more time to formulate their messages. Administrators should decide in advance how they will handle and respond to such criticism. Deleting or ignoring comments is not an option, as it dissuades people from participation. However, inappropriate content or content that violates laws or policies may be removed. If an individual posts negative feedback, pushing for communication with that person shows a commitment to engaging the audience and the community. The basis for social media is that it is an interactive and engaging conversation. Not responding to feedback simply communicates to users that the organization is not open to criticism and does not value input from various stakeholders.

Prematurely discontinuing social media use in the face of adversity is unwise, as “a string of abandoned or infrequently tended social media accounts hurts credibility” (McNab 2009, 1). Response to employees and consumer feedback must be consistent and swift, or the audience will become uninterested and the original goal of connecting will fail.

Fortunately, organizations can take action to assure success in engaging employees and recruiting desirable applicants. The implementation process should begin slowly at first. The social media team should launch just one page in just one media format and learn how to use all its available applications. It is important to understand what the audience is seeking in visiting a social
media site, then attempt to provide it. Content geared toward potential applicants should share information about organizational culture, include testimonials from current employees, and provide easy links to job openings on the organization’s website (Thielst 2010).

Social Media in Action
Several HCOs have already begun their social media strategies. Beth Israel Deaconess Medical Center (BIDMC) in Boston is one hospital that successfully implemented a social media plan (Squazzo 2010). From 2006 through his retirement in early 2011, then-CEO Paul Levy wrote the popular blog Running a Hospital, where he connected with patients and employees by sharing his own management stories. In his retirement Levy writes the blog Not Running a Hospital; meanwhile, BIDMC enjoys a rich social media presence, with Facebook, Twitter, and YouTube accounts.

Inspired by Levy’s success, Marty Bonick, president and CEO of Jewish Hospital in Louisville, began the hospital’s social media campaign with a blog of his own, Hospital Life. His blog sparked Twitter and Facebook accounts for the hospital, which have been very successful in connecting with patients and employees. Bonick cites bridging the technology divide within his workforce as “a way to break down the walls and that administrative ‘us versus them’ mentality” (Squazzo 2010, 38).

Dublin Methodist Hospital in Columbus recently piloted a social media program for its larger system, Ohio Health, to better connect with its community. Its marketing specialist launched targeted Facebook and Twitter pages that include links to physician profiles, virtual tours of the hospital, and patient guides with a personal feel. The hospital frequently posts updates about hospital events, awards, and the latest news on health inside and outside of the hospital system. These social media efforts have gotten a significant positive response from patients. These and other hospitals exemplify the many possibilities for successful outreach that a social media campaign offers an HCO.

CONCLUSION
When used effectively, social media can be an invaluable tool with which a healthcare organization can engage young workers in a company culture, recruit and retain millennial workers, and provide consumers a personalized experience. In the face of the technology divide in the workforce, baby boomers’ social media use is a significant step closer to the tech-centric lifestyles of the millennials. Social media is a feasible and appropriate strategy for any HCO to adopt to some degree. It is the one organizational change that will ready the modern workforce for a dynamic transformation as baby boomers retire and millennials become fully integrated into the healthcare labor force.

REFERENCES


