Building meaningful brands through social media: a case study about hospitals

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Abstract  
Implementing an efficient corporate communication strategy has become a priority for all hospitals interested in building a meaningful brand. To do that, most of these organizations resort to social media such as Facebook, Twitter or Youtube. Thanks to these platforms, hospitals improve and dynamise their relationships with stakeholders, especially patients, employees and media companies. This literature review paper aims to better understand how hospitals should manage these platforms in order to build a meaningful brand based on human values. To do that, we conducted a literature review about different concepts such as corporate communication, brand, social media, and reputation; and, based on this research, we proposed an online communication model aiming to help hospitals build meaningful brands (Medpac Reputation Model). We concluded that hospital organizations should implement professional protocols to analyze the information gathered from social media, prioritize a public relations approach and ban all marketing-related initiatives, and, finally, conduct constantly different research initiatives about the health market.

Key words  
Health Organizations; Branding; Strategic Communication; Stakeholders; Social Media Platforms.
1. Introduction

Implementing an efficient corporate communication strategy has become a priority for all hospitals interested in building a meaningful brand and reinforcing their strategic positioning in the health market. Thanks to a strong brand, hospitals can face some challenges such as patients’ new demands and behaviours, the development of medical technologies, the implementation of new management techniques, or the consolidation of some international hospital groups. An increasingly number of hospitals consider social media platforms as the main corporate communication tool that they can use to interact with stakeholders and build a reputed brand. Nevertheless, hospitals need to better integrate these platforms in their employees’ professional logic in order to helping them become more efficient from a professional point of view. This literature review paper aims to better understand how hospitals should manage these platforms in order to build a meaningful brand based on human values. To do that, we conducted a literature review about different concepts such as corporate communication, brand, social media, and reputation; and, based on this research, we proposed an online communication model aiming to help hospitals build meaningful brands (Medpac Reputation Model). This model includes ten communication principles, an annual content plan, fifty key performance indicators and an internal structure proposal. This model can be applied to all public and private hospitals around the world. Finally, we proposed three main conclusions as well as three main managerial implications.

2. Hospitals’ Strategic Communication Initiatives

Corporate communication refers to external and internal initiatives that aim to create positive links between an organization and its main stakeholders (Van Riel & Fombrun, 2007). It integrates in a consistent way public relations, marketing and journalism activities (Mazzei, 2014) allowing the company to solve some organizational problems related to business, management or human resources (Maier, 2016). Most companies implement a Corporate Communication Department integrated by experts in reputation, public relations, marketing and economics who work in an integrated way according to different protocols, annual plans and key performance indicators (Medina Aguerrebere, 2019). This department is led by the Corporate Communication Director, who takes part in the company’s board and assumes several responsibilities such as defining the brand architecture, managing the company’s reputation or improving the company’s relationships
with its stakeholders (Zerfass & Viertnam, 2017). Normally, this department integrate three main units: interpersonal, internal and external communication units.

**Interpersonal Communication Unit.** In hospitals, most employees have a direct contact with patients and their families, what constitutes a risk and an opportunity in terms of communication (Archipioli et al., 2016). Health professionals disseminate several scientific concepts related to treatments, diseases and research so that patients can understand these insights and improve their health behaviours (Chan, Yu-Ling, Huxley, & Evans, 2016). To do that, these professionals need to improve their skills in interpersonal communication, as well as their emotional and intercultural abilities to interact with different kind of patients – children, elderly, aggressive people, etc. (Gilligan et al., 2016). Health professionals’ skills in interpersonal communication constitutes a strategic issue for all hospitals engaged in improving the patient’s empowerment (Medina Aguerrebere, 2019).

**Internal Communication Unit.** Internal communication initiatives in hospitals aim to disseminate the company’s brand architecture in order to influence internal stakeholders’ perceptions about the company, especially employees (Rodrigues, Azevedo & Calvo, 2016). In these organizations, employees communicate constantly through their behaviours, attitudes and performance (Helfert, Lugmayr, Heimgärtner & Holzinger, 2013). Hospitals need to innovate and implement efficient internal communication processes allowing employees to work in an integrated way (Peliti, 2016). Thanks to these initiatives, health professionals should be able to work in a more efficient way and satisfy patients’ needs (Jahromi et al., 2016). Moreover, thanks to internal communication initiatives, the whole hospital can adapt to new internal and external changes taking place in the health market, such as the development of e-medicine, the consolidation of private hospital groups or the economic crisis (Naveen, Anil & Smruthi, 2014).

**External Communication Unit.** In the health market, patients have become true opinion leaders able to influence hospitals’ public image (Johnson, 2014). That is why, the hospital’s Corporate Communication Director tries to reinforce the company’s brand through establishing strategic dialogues with all stakeholders, especially with patients (Zerfass & Vierrmann, 2017). Implementing external communication initiatives lets hospitals to influence patients and create a favorable atmosphere concerning the organization, its services and employees (Naveen, Anil & Smruthi, 2014). Hospitals use several key performance indicators to constantly evaluate stakeholders’ attitudes in order to adapt their external communication strategies and become more efficient (Moreno, Wiesenberg & Verčič, 2016).

The hospital’s Corporate Communication Director prioritize health education as a main value for all interpersonal, internal and external communication initiatives (Medina Aguerrebere, 2019). Health education activities such as conferences, workshops or books publishing about treatments and diseases positively contribute to improve the patient’s empowerment (Haluza, Naszay, Stockinger, & Jungwirth, 2016). Health professionals should engage in these health education initiatives in order to reinforce the hospital’s relationships with its stakeholders (Hannawa, Garcia-Jiménez, Candrian, Rossmann, Schulz, Peter, 2015). Thanks to health education, the hospital’s
employees improve their performance and become more efficient in their daily work (Brent, 2016). Integrating health education initiatives in the hospital’s corporate culture helps these organizations reinforce their brand positioning and build a reputed brand in a collective way along with stakeholders (Jones et al., 2015). Building a reputed brand involves several advantages such as improving the coherence among all communication initiatives (Maier, 2016), establishing trust relationships with all stakeholders in the long term (Van de Merwe & Puth, 2014) and achieving the organization’s goals in a more efficient way (Kemp, Jilipalli & Becerra, 2014).

3. Hospitals’ Branding Initiatives on Social Media

The hospital’s Corporate Communication Director designs and implements a brand architecture helping the organization become an unambiguous, unique brand: in other words, they define identity, values, mission, vision and culture (Medina Aguerrebere, 2019). According to Maier (2016), identity refers to the main economic, cultural and social reasons why the organization’s founders decided to create the company. Values are some tangible and intangible ideas based on the company’s identity that aim to explain to employees how they should work to efficiently help the company achieve its organizational goals (Sheehan & Isaac, 2014). The corporate mission can be defined as the main objectives pursued by the hospital in the mid-term (Medina Aguerrebere, 2018). Vision refers to the main organizational objectives established by the company for the long-term and includes the practical techniques that they will implement to achieve those objectives (Singal, Jain, 2013). Finally, culture is an intangible concept that defines the unique way in which the company’s employees behave for building an unambiguous, unique brand (Nelson, Taylor & Walsh, 2014).

Developing a branding strategy allowing the hospital to adapt to the constantly changing context has become a priority (Kemp, Jilipally & Becerra, 2014). Based on the hospital’s brand architecture and its competitors’ communication strategies, the hospital defines a brand positioning for the long term (Esposito, 2017). A clear brand positioning allows companies to build trust relationships with stakeholders as well as boost their own business initiatives (Ruiz Granja, 2015). According to this brand positioning, the hospital’s Communication Director integrates the brand in all communication, management and organizational initiatives carried out by the company (Fernandez Luque & Bau, 2015). Integrating the brand in all hospital’s initiatives involves several benefits. First, hospitals can implement a unique way of working that help the company to improve their patients’ perceptions and satisfaction (Gombeski et al., 2014). Second, based on this brand, hospitals can implement personal branding plans for some health professionals working in the organization in order to influence stakeholders’ attitudes and perceptions about the hospital (Trepanier & Gooch, 2014). Third, many stakeholders, especially patients and their family, can become brand ambassadors engaged with the organization and its communication initiatives, what helps the hospital become a credible brand (Johnson, 2014). Fourth, hospitals can focus their internal functioning processes on the emotional support proposed to patients, health education initiatives and the patient’s empowerment, what contributes to create an innovative health service
leading patients to engage with the organization in the long-term (Myrick, Holton, Himboim & Love, 2016). And fifth, hospitals can counteract the effects of other competitors’ communication campaigns and protect their own niche market (Maier, 2016).

With the purpose of improving their branding initiatives, many hospitals implement a professional management of social media as a corporate communication tool (Fernandez-Luque, Bau, 2015). To do that, they must first fix some problems related to the lack of economic and human resources (Rando Cueto, Paniagua Rojano & de las Heras Pedrosa, 2016). According to several authors as Griffis et al. (2014), social media are the most powerful channel that hospitals can use to develop their brands and improve their relationships with stakeholders. These organizations implement a Social Media Department integrated by experts in corporate communication, engineering and public health, and apply several protocols and annual plans to work in an integrated way (Medina Aguerrebere, 2018). This department focuses its activities in three main fields: a) improving collective decision-making processes between health professionals and patients, b) enhancing the medical services quality from a scientific and communication point of view; and c) managing medical emergencies in a more integrated and efficient way (Lim, 2016).

Managing social media in a strategic and professional way involves ten main advantages for hospitals. First, thanks to social media, patients can establish a more symmetric relationship with health professionals, what contributes to establish a constructive dialogue and better satisfy their information and medical needs (Smailhodzic, Hooijmsma, Boonstra, & Langley, 2016). Second, disseminating accurate scientific information through social media helps patients engage with the hospital and its employees (Househ, Borycki & Kushniruk, 2014). Third, implementing a professional management of social media as a corporate communication tool helps hospitals reinforce the patient’s empowerment (Haluza, Naszay, Stockinger, & Jungwirth, 2016). Fourth, all information shared by patients on these platforms allows hospitals to better understand their expectations and attitudes, what contributes to improve the hospital’s medical services (Bubien, 2015). Fifth, social media policies let health professionals to become experts in managing and disseminating scientific information; in other words, they become efficient brand ambassadors (Peluchette, Karl & Coustasse, 2016). Sixth, thanks to social media, hospitals collaborate with some public health initiatives (emergencies, education campaigns, etc.) and foster their relationships with health professionals and society (Matarin & Jimenez, 2015). Seventh, communicating on social media lets hospitals to explain in a visual, clear way their brand architecture (identity, mission, vision, values and culture) to all stakeholders (Pelitti, 2016). Eighth, thanks to social media hospitals build a brand in a collective way along with main stakeholders, such as patients and employees (Blomgren, Hedmo & Waks, 2016). Ninth, disseminating information about patients’ personal experiences at hospital is an efficient way to build an emotional brand and reinforce relationships with stakeholders (Quintero, Yilmaz & Najarian, 2016). And tenth, social media metrics provide hospitals with quantitative and qualitative information about users’ attitudes and behaviours, what helps these organizations to adapt their communication campaigns in order to be more efficient (Abramson, Keefe & Chou, 2015).
4. The MedPac Reputation Model

Using social media as a corporate communication tool allows hospitals to enhance their brand reputation in a more efficient way, optimize their communication budgets and accelerate their internal and external processes (Jiang & Street, 2016). Nevertheless, hospitals should always implement an online communication strategy based on human values because these organizations deal with people’s rights to health and life (Medina Aguerrebere, 2019). Social media initiatives should reinforce all basic principles related to medicine and patient’s rights, and highlight humanities as a key element in all branding activities (Campbell & Craig, 2014). Fostering this human approach in online corporate communication constitutes a priority because the hospital’s reputation is directly related to human behaviours and expectations (Esposito, 2017). Moreover, the hospital’s employees need to constantly interact with patients and other stakeholders for elaborating an integrated health service (Brent, 2016). Finally, these companies cannot exist if they are not associated with some deep values such as trust, emotional support, transparency, tolerance and equality (Gilligan et al., 2016).

In order to help hospitals implement a human approach in social media, we propose the Medpac Reputation Model, which is based in five main elements: a) internal structure, b) key communication principles, c) annual content plan (brand architecture, key messages, targets and platforms) and d) key performance indicators.

**Internal structure.** Within their Corporate Communication Department, hospitals implement a Social Business Unit led by an expert in corporate communication, public health and management. They design and apply an annual social media plan as well as several protocols for different strategic situations such as crisis situations, public events, etc. These plans and protocols should be consistent with the hospital’s corporate communication plan so that they become useful to help the hospital achieve its organizational objectives. The Social Media Manager employs several experts in corporate communication, public health, humanities, design and engineering; and outsources some external agencies specialized in branding or public relations. All employees involved in this department participate in different learning initiatives organized by the hospital (seminars, courses, moocs, etc.) in order to improve their professional skills in public health and communication, and properly interact with the hospital’s departments.

**Key communication principles.** All social media initiatives should respect ten communication principles that aim to highlight the hospital’s human approach (see Table 1. Key Communication Principles). First, hospitals use social media to become a credible source of scientific information allowing stakeholders to improve their expertise in health education, that is why these organizations prioritize learning initiatives focused on how to manage and understand medical information (Hannawa, García-Jiménez, Candrian, Rossmann, Schulz, Peter, 2015). Second, health professionals use social media for influencing patients’ behaviours and attitudes about prevention and education, but not to promote the hospital’s health services (Jones et al., 2015). Third, hospitals engage actively with some public health campaigns promoted by local, national or international authorities in order to reinforce people’s skills in health education (Weberling, 2014).
Fourth, hospital should use social media for reducing inequalities concerning the access to public health systems, medical treatments, medication, etc. (Peluchette, Karl & Coustasse, 2016). Fifth, health professionals respect all basic principles in medicine such as ethics, confidentiality or patient’s integrity and integrate these insights in their activities on social media (Fischer, 2014). Sixth, health professionals should become experts in managing and analyzing information related to patients so that they can identify some humanities-related contents (sociology, anthropology, etc.) and apply them to their interactions with patients (Gilligan et al., 2016). Seventh, Hospitals implement a multicultural and multilingual approach in order to help health professionals to efficiently interact with different types of patients, such as elderly people, violent patients, etc. (Paternotte, Dulmen, Van der Lee, Scherpier & Scheele, 2014). Eighth, one of the most important priorities assumed by health professionals when using social media consists of integrating their patients in the collective decision-making processes (Blomgren, Hedmo, Waks, 2016). Ninth, health professionals use several platforms and mobile applications to promote interpersonal communication relationships in the hospital (Jeong, Tan, Brennan, Gibson & Hornik, 2015). Tenth, hospitals must increase their investments in human resources for allowing health professional to have enough time during their workday to efficiently use their social media platforms (Rando Cueto, Paniagua Rojano & de las Heras Pedrosa, 2016).

Table 1.

Key Communication Principles

<table>
<thead>
<tr>
<th>Principle</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Source of scientific information</td>
<td>Hannawa, García-Jiménez, Candrian, Rossmann, Schulz, Peter, 2015</td>
</tr>
<tr>
<td>2 Patients behaviours</td>
<td>Jones et al., 2015</td>
</tr>
<tr>
<td>3 Public health campaigns</td>
<td>Weberling, 2014</td>
</tr>
<tr>
<td>4 Access to public health systems</td>
<td>Peluchette, Karl &amp; Coustasse, 2016</td>
</tr>
<tr>
<td>5 Basic principles in medicine</td>
<td>Fischer, 2014</td>
</tr>
<tr>
<td>6 Humanities related content</td>
<td>Gilligan et al., 2016</td>
</tr>
<tr>
<td>7 Multicultural and multilingual approach</td>
<td>Paternotte, Dulmen, Van der Lee, Scherpier &amp; Scheele, 2014</td>
</tr>
<tr>
<td>8 Collective decision making processes</td>
<td>Blomgren, Hedmo &amp; Waks, 2016</td>
</tr>
<tr>
<td>9 Interpersonal communication initiatives</td>
<td>Jeong, Tan, Brennan, Gibson &amp; Hornik, 2015</td>
</tr>
</tbody>
</table>

Source: Own elaboration.
Once the Social Media Manager has defined the internal structure (plans and protocols) and ten key communication principles, they design an annual content plan to integrate the hospital’s brand architecture (identity, values, mission, vision and culture) with eight key messages addressed to eight targets through five different social media platforms (see Table 2. Annual Content Plan). The Social Media Manager is in charge of translating the hospital’s brand architecture elements into different key messages related to patient’s rights, ethics, or social engagement (human approach); and adapt this content to several targets using different social media platforms. Even if they can use all social media platforms during the whole year for interacting with all stakeholders, every month they should prioritize one target as well as one social media platform, one key message and one brand architecture element in order to improve the hospital’s reputation on social media in an unambiguous, unique way.

Table 2.

Annual Content Plan

<table>
<thead>
<tr>
<th>Month</th>
<th>Brand architecture</th>
<th>Key messages</th>
<th>Target</th>
<th>Social Media Platform</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>Identity</td>
<td>Respect of patients’ rights and society’s needs about health education.</td>
<td>Patients and society</td>
<td>Twitter</td>
</tr>
<tr>
<td>February</td>
<td>Value 1</td>
<td>Medical innovation based on scientific research.</td>
<td>Hospital’s health professionals</td>
<td>Linkedin</td>
</tr>
<tr>
<td>March</td>
<td>Value 2</td>
<td>Ethics and deontology.</td>
<td>Other hospital’s employees</td>
<td>Instagram</td>
</tr>
<tr>
<td>April</td>
<td>Mission</td>
<td>Scientific dissemination.</td>
<td>Media companies</td>
<td>Youtube</td>
</tr>
<tr>
<td>May</td>
<td>Vision</td>
<td>Social engagement.</td>
<td>Public authorities</td>
<td>Facebook</td>
</tr>
<tr>
<td>June</td>
<td>Culture</td>
<td>Commitment with best practices, and respect of employees’ rights.</td>
<td>Shareholders and suppliers</td>
<td>Facebook</td>
</tr>
<tr>
<td>July</td>
<td>Identity</td>
<td>Respect of patients’ rights and society’s needs about health education.</td>
<td>Patients and society</td>
<td>Twitter</td>
</tr>
<tr>
<td>August</td>
<td>Value 3</td>
<td>Medical innovation based on scientific research.</td>
<td>Hospital’s health professionals</td>
<td>Linkedin</td>
</tr>
<tr>
<td>September</td>
<td>Value 4</td>
<td>Ethics and deontology.</td>
<td>Other hospital’s employees</td>
<td>Instagram</td>
</tr>
<tr>
<td>October</td>
<td>Mission</td>
<td>Scientific dissemination.</td>
<td>Media companies</td>
<td>Youtube</td>
</tr>
<tr>
<td>November</td>
<td>Vision</td>
<td>Social engagement.</td>
<td>Public authorities</td>
<td>Facebook</td>
</tr>
<tr>
<td>December</td>
<td>Culture</td>
<td>Commitment with best practices, and respect of employees’ rights.</td>
<td>Shareholders and suppliers</td>
<td>Facebook</td>
</tr>
</tbody>
</table>

Source: Own elaboration.
Finally, the Social Media Manager defines and implements some key performance indicators (KPIs) for each social media platform (see Table 3. Key Performance Indicators). During the whole year, they measure the impact of all social media initiatives on stakeholders’ attitudes and expectations according to these KPIs in order to prove in a quantitative way that these initiatives are useful for building a reputed hospital brand. On the other hand, the Social Media Manager applies some qualitative methods (focus groups, personal interviews, etc.) to better know what stakeholders think about the organization. This qualitative information allows the Social Media Manager to better understand some insights gathered through key performance indicators.

Table 3.

Key Performance Indicators

<table>
<thead>
<tr>
<th>Social media platform</th>
<th>Key performance indicators</th>
</tr>
</thead>
</table>
| **Twitter** (Datapine, 2019a) | 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.  
| **Linkedin** (Datapine, 2019b) | 1. Followers’ demographics.  
2. Number of followers.  
3. Impressions.  
4. Reach.  
5. Engagement rate.  
7. Viewer information.  
8. Contact and network growth.  
10. Post views and engagements. |
| **Instagram** (Kindness, 2020) | 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. |
| **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. |
| **Facebook** (Datapine, 2019d) | 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.  
10. Positive or negative feedback. |

Source: Own elaboration.
According to these qualitative and quantitative results, the Social Media Manager modifies the social media annual plan and proposes some suggestions to improve the hospital’s annual corporate communication plan.

The Medpac Reputation Model focuses on human value content allowing the hospital’s stakeholders to improve their knowledge and expertise about health-related topics. Building a hospital brand based on quality scientific knowledge useful for stakeholders constitutes a challenge as well as an opportunity to create a new hospital communication paradigm where employees integrate social media in their professional logic as a corporate communication and public health tool used for improving the hospital’s medical services and building a reputed brand in a collective way along with stakeholders.

5. Conclusions

Most hospitals consider social media platforms as one of the main corporate communication tools they can use to build a reputed brand. This paper aimed to better understand how hospitals should use these platforms for improving their relationships with stakeholders. We proposed a communication model (Medpac Reputation Model) for helping these organizations achieve this objective. Thanks to this model, hospitals can implement social media in a creative and efficient way and associate their brand with human values, what contributes to improve their reputation. So as to conclude this paper, we propose three last ideas. First, hospitals must implement a knowledge management system letting them to manage and analyse the information gathered from social media platforms. Second, implementing a human approach involves refusing to use social media for achieving marketing or advertising objectives; in other words, hospitals should only use these platforms for public relations and public health initiatives. And finally, these organizations must increase their economic investments in research about patients’ perceptions and behaviours, employees’ expectations, media companies’ interests, etc.; these insights are essential to identify the true stakeholder’s needs and this way build a meaningful brand for all of them.

Finally, we consider that hospitals should also implement three main management initiatives. First, recruiting experts in corporate communication, public health, strategy and engineering able to work in an integrated way according to protocols, plans and key performance indicators. Second, defining an annual budget for the Social Media Unit based on professional criteria. And, finally, evaluating health professionals’ performance according to some criteria related to their professional use of social media platforms.

6. References


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