Social media for physiotherapy clinics: considerations in creating a Facebook page

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Social media websites play a prominent role in modern society, and the most popular of these websites is Facebook. Increasingly, physiotherapy clinics have begun to utilize Facebook in order to create pages to publicize their services. There are many factors to consider in the planning, implementing, and maintenance of Facebook pages for physiotherapy clinics, including ethical and privacy issues. The primary purpose of creating a page must be clearly defined, with dedicated clinicians given adequate time to manage the page. This technical article discusses these factors and summarizes the experiences at the University of Otago, New Zealand, in creating a Facebook page for the physiotherapy clinic and provides suggestions for physiotherapy clinicians in operating a Facebook page.

Keywords: Internet, Social networking sites, Health promotion, Physiotherapy, Professional practice

Introduction

Social media (‘websites and applications used for social networking’)¹¹ are a growing influence in modern society. The largest social media applications such as Facebook, Twitter, and YouTube are among the most widely-used of all websites,² with Facebook alone having over 800 million active users.³ Each of these social media websites have varying functionality and capability, and enable users to interact in different ways (Table 1).

Facebook was created in 2004, initially to enable students at Harvard University to connect with other students within the University. Its popularity soon spread to other universities across America, and then to high schools, and eventually to a global audience.⁴ Facebook allows users to create an online profile, upload photos and videos, exchange messages with other users, and post information on other users’ profiles (called ‘walls’). It also permits users to join groups on all manner of topics, including for health-related purposes,⁵ and to ‘like’ information on other people’s profiles (Fig. 1).

Twitter is a micro blogging service which enables a rapid exchange of information.⁶ Users send 140-character messages (called ‘tweets’) which are received by other users they are linked to (‘followers’); users can also send other members direct messages (Fig. 2).⁷ Twitter currently has over 200 million user accounts, with 25% of those users logging in daily.⁶ Recent research has demonstrated examples of the use of Twitter in healthcare for a wide variety of purposes, including to improve quality of life,⁸ share information about symptoms,⁹ spread awareness of illnesses,¹⁰ and to discuss medications.¹¹

YouTube is dedicated to video-sharing, and members can upload, watch, and share videos with a global audience (Fig. 3). Since its inception in 2005, YouTube has grown to such an extent that it exceeds two billion views every day,¹² and is the third most accessed website in the world.¹³ Individuals, companies, and institutions upload videos on all manner of topics, for entertainment or for educational purposes. There is a huge quantity of health information present on YouTube, and recently there has been an increase in the examples of health-related research being conducted on this social networking site.¹⁴,¹⁵

The field of healthcare has been party to this shift towards social media, and many medical organisations have Facebook pages, Twitter feeds, or YouTube accounts. In the UK, NHS Direct has over 10 000 Twitter followers¹⁶ and a Facebook page,¹⁷ while the Mayo Clinic in the USA has a YouTube channel with nearly 1,500 videos.¹⁸ A recent report supports this strategy, suggesting that healthcare users consider the social media presence of a hospital when choosing where to seek treatment.¹⁹
The physiotherapy profession has not been exempt from these developments, and the potential for physiotherapists to engage in social media is apparent. Giordano and Giordeno included physical therapy students in a survey of social media use among health professions students, and reported that 77% of all students sampled had a Facebook account. Benefits of social media for physiotherapists include the facilitation of learning, enabling professional networking, aiding contributions towards the research base, and as a promotional tool. Physiotherapists are currently using social networking sites for discussion forums, collaborating with overseas colleagues, and also for job advice (one such Facebook group, ‘Interview questions for junior physios’, currently has almost 4500 members). Hundreds of physiotherapy clinics have established Facebook pages, and a brief search of physiotherapy clinics listed on Facebook shows that this is a global phenomenon.

Given the popularity of Facebook, it is the logical choice for many physiotherapy clinics (and other clinical services and departments) who wish to promote their services. However, the use of social media in physiotherapy is still in its infancy, and to date there is a lack of published literature in this field. The School of Physiotherapy Clinic (Dunedin, New Zealand) recently created a Facebook page (Fig. 1) and although several online resources offer guidance as to how to effectively create a Facebook page, no published literature was found to support this process in the context of a physiotherapy clinic. The following provides an outline of the considerations involved in planning, implementing and maintaining a physiotherapy clinic Facebook page.

### Planning a Facebook Page

Before creating a Facebook page, it is important to establish why your physiotherapy clinic wants to start such a page. Some institutions and companies elect not to have a Facebook page as it does not fit with their marketing strategy. Motivations for having a Facebook page could include increasing the exposure of your clinic; advertising specialist services at your clinic, or to facilitate patient education. From our experience at the School of Physiotherapy, University of Otago, Fig. 4 outlines some of the key issues that need to be considered before creating a Facebook page for a physiotherapy clinic; early consideration of these in advance of creating the page will enable it to have the greatest possible impact.

### Implementing a Facebook Page

Patients (and potential patients) will ultimately base their opinions of a clinic’s Facebook page on the content of information posted on the page. Essential items for inclusion are the contact details of the practice, a map showing the location of the clinic, and photographs of the clinic/facilities. Physiotherapy clinics may choose to include information relating to its staff members to acquaint the target audience with their clinical specialities. Potential websites/Facebook links to be incorporated into a clinic’s Facebook page could be links to national/international physiotherapy groups (e.g. World Confederation for Physical Therapy), disease-specific organisations (e.g. Arthritis New Zealand), and patient rights resources.

The Facebook page may also serve as a medium to disseminate news snippets with a local, national, and international flavour. Changes relating to the practice (altered opening hours, special rehabilitation/exercise classes, new staff/equipment etc.) may be shared, as well as features relating to physiotherapy on a national/international level (e.g. informing users about events such as World MS Day). Some clinics elect to post self-help strategies for patients on Facebook, this may include using videos and links from YouTube and can be tailored towards the needs of the caseload seen within each clinic. It is important that any videos or links disseminated through a Facebook page in this manner are clinically accurate, and information should adhere to best-practice clinical guidelines where appropriate. The standard of health information online has been shown to be variable for a variety of medical conditions, and the credibility of the Facebook page will be brought into question if incorrect/inappropriate information is being shared with users.

### Maintaining a Facebook Page

Maintaining a page is essential to ensure that it is up to date: out-of-date information can have a negative effect, and be counter to the marketing strategy which underpinned its development. It is vital to consider time constraints and staff allocation for the upkeep of a Facebook page, and maintaining a page through a designated staff member will provide

<table>
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<th>Table 1 Comparison of Facebook, Twitter, and YouTube</th>
<th>Facebook</th>
<th>Twitter</th>
<th>YouTube</th>
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<tr>
<td>Date launched</td>
<td>February 2004</td>
<td>July 2006</td>
<td>February 2005</td>
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<tr>
<td>Key feature</td>
<td>Creating an online profile to interact with other users</td>
<td>Sending messages of 140 characters for rapid exchange of information</td>
<td>Uploading, sharing and watching videos online</td>
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<tr>
<td>Usage</td>
<td>Over 800 million members</td>
<td>Over 200 million members</td>
<td>Over 2 billion videos viewed per day</td>
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continuity. A private clinician who works alone may feel that a Facebook page could become a burden to an already busy working life, whereas larger practices with several members of staff could more readily allocate a staff member for a few hours per week to this task.

“Wall” The central portion of Facebook page where users can “post” comments: This should be monitored by the individual responsible for administering the page, in order to reply to any comments by Facebook users.

“Post” A note left on the “wall”. This can be posted by either the individual responsible for the page, or from any Facebook user who visits the page.

“Like” The option for Facebook users to click on the “like” button to show that they “like” a page, a comment, a link, a video or a photo on Facebook.

“Share” This function allows Facebook users to send content to their friends or to post it on their profile.

Figure 1 Facebook page (School of Physiotherapy Clinics, Dunedin)
In order to be attractive to the intended audience, to encourage the maximum number of visitors to the page, and to prevent the page from becoming redundant, the Facebook page needs to be regularly updated with new information. Such updates may include details of the services you provide, information regarding physiotherapy techniques and modalities, and images/videos of the clinic. Posting testimonials from patients may be an added advantage in building a positive reputation on the quality of services offered by the clinic. Queries and comments from users on the Facebook ‘wall’ should be responded to promptly and fully, in order to build trust with the users that their comments are being noted. When responding to these comments, it is paramount to maintain patient confidentiality at all times.

The provision of promotional offers (e.g. discounts on treatment fees) for the users who ‘like’ the Facebook page may help to increase the number of
KEY CONSIDERATIONS

- What will be the primary purpose of the Facebook Page?
- Who will be responsible for maintaining the Facebook page?
- Does the staff member administering the Facebook page understand the workings of Facebook?
- Will adequate time/time in lieu be provided for the staff member administering the Facebook page?
- What incentives will the clinic use to entice individuals to visit the Facebook page?
- How will the success of the Facebook page be measured?

Figure 4 Checklist of considerations for Physiotherapy Clinic Facebook page

members during the initial stages of implementation. Individuals responsible for maintaining the Facebook page will find it helpful to engage in regular discussion with the physiotherapy clinic staff in order to help respond to queries and comments from the users of the Facebook page. In parallel with this, seeking informal suggestions from current patients regarding the utility, significance, and user friendliness of the Facebook page can help to shape the progression of the page and guide future changes as necessary.

Ethical Considerations

As well as making sure that the information on a clinic Facebook page is accurate and interesting, it is vital that the page adheres to the regulations and guidelines from the relevant national physiotherapy/medical organisation. The Chartered Society of Physiotherapy in the United Kingdom and The Australian Medical Council have both created working documents to guide their members in terms of using social media professionally. Physiotherapists must respect patient privacy when using social media, just as they would in their day-to-day practice. For example, a physiotherapist in the workplace would never discuss a patient’s personal and confidential health status openly in front of a listening audience, and thus it would be equally inappropriate for a physiotherapist to become engaged in a dialogue with a patient about such matters on the clinic’s Facebook page as this would be visible by all members. In addition, it would be inappropriate for a clinic to use photographs or videos of patients in the clinic on the Facebook page without prior written consent.

Privacy Settings

This is an important consideration for any Facebook user. To ensure that anyone can freely access a clinic’s Facebook page, it will need to have its privacy settings set to ‘public’: a ‘public’ privacy setting means that the clinic’s page can be identified by anyone searching Facebook. Facebook users can locate pages on Facebook by using the search tool bar above their ‘wall’, and can then ‘like’ a page and/or write ‘posts’ on that page (Fig. 1). This can create a marketing opportunity for a clinic, and generate an interactive environment where users can post about topics of interest relating to the clinic.

It is essential to consider the privacy settings of the Facebook accounts for clinic staff and patients, as if the settings of these individuals are ‘public’ then other Facebook users can view their profiles and any information posted there. A recent study at the University of Otago, New Zealand, found that only 63% of the 338 doctors who graduated in 2006 and 2007 had activated the privacy settings which restricted the visibility of their Facebook account. The majority of the doctors who had not activated their privacy settings belonged to ‘neutral’ groups (e.g. music-related groups) and had ‘neutral’ photographs (e.g. photographs of themselves working overseas) posted on their profiles. However, 10% of those who had not activated their privacy settings had photographs of themselves appearing intoxicated, with a minority belonging to groups based on rude/inappropriate humour (e.g. ‘Perverts united’). The unimpeded visibility of this information may obviously alter the professional boundaries between patients and staff, and therefore, it is vital that clinic staff fully understand the privacy settings in Facebook in order to prevent any unprofessional incidents.

Summary and Conclusions

Social media already plays a large role in the lives of physiotherapists and patients, and as social networking sites continue to grow in terms of number and importance, then it will be a medium that will find increasing use by physiotherapy clinics. Provided that a Facebook page is well-planned, regularly/correctly maintained, and adheres to ethical and professional guidelines, it can be a valuable tool for physiotherapy clinics to better serve their patients.

References

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During the preparation of your manuscript for publication, the questions listed below have arisen. Please attend to these matters and return this form with your proof. Many thanks for your assistance.

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