Components of a Communications Strategy to Promote Well-Being

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A communications strategy that promotes well-being should address information needs, deliver informative messaging that reaches the intended audience, provide content related to organizational support, and use a tone that engenders a sense of caring.

A leader (such as the chief wellness officer [CWO]) oversees the strategy. However, collaboration with other groups in the organization, such as Marketing and Communications, Human Resources, divisions or departments, student affairs, or the well-being office, is instrumental for success.
### Communications resources

**GOAL** Identify existing communications and marketing resources to reveal any gaps in how the organization disseminates information about well-being

**TACTICS**
- Partner with Marketing and Communications colleagues to understand current communications platforms and resources
- Identify standard communications resources that already exist within the marketing infrastructure
- Identify communications resources that might be outside of current communications and marketing efforts (eg, student-run email listservs, department-specific resources)
- Work with Marketing and Communications colleagues, the well-being office, and your team to close any gaps by developing new resources or exploring new channels to expand access

**EXAMPLES**
- Exploratory emails and surveys directed to health system leaders can help you understand how the department, division, or group members most commonly receive communications and what resources are shared
- Communications resources to look for include a website, a weekly email, a calendar with well-being events, brochures or handouts about well-being programming, etc.
- Channels are how those resources are disseminated and may include social media, an email blast or listserv, etc.

### Well-being resources

**GOAL** Determine if the intended audience is aware of confidential, non-punitive mental health and well-being support resources that are available and investigate any gaps

**TACTICS**
- Involve the well-being communications stakeholders in ascertaining awareness of support resources
- Work with stakeholders to craft a variety of simple and understandable resources with targeted messaging and details about support that closes any gaps you find

**EXAMPLES**
- If awareness of existing resources is low, an infographic or simple webpage can be a one-stop shop housing a wide range of resources (eg, mental health support, peer support, coaching, spiritual support)

### Reach

**GOAL** Measure the performance of a wide array of communications approaches

**TACTICS**
- Capture metrics on the effectiveness of communications platforms and engagement with well-being content (eg, click-through rates, click-to-open rates for text or email, unique website visitors)
- Deploy the well-being communications stakeholders to measure awareness of content delivered by different platforms
- Attempt to identify correlations between efforts to enhance reach and awareness of resources and resource utilization

**EXAMPLES**
- Dashboards can help you measure performance over time. Check with the communications platform vendors to see what metrics they capture and what type of reporting they offer. For example, some platforms will track email open, click, and share rates for you
- Brief surveys that ask, “How do you learn about psychosocial support resources (click all that apply): (1) email (2) website (3) app (4) none of the above (5) other: _____?” or “Why did you not access a resource?” can help track reach
- Focus groups with clinicians or community groups (eg, volunteer sports teams, culture groups, interest clubs) with open-ended questions like, “How do you learn about psychosocial support resources?” may be useful
- Click-through rates to see if people are accessing well-being resources, for example, clicking a link to the organization’s well-being website or the landing page for more information about a well-being event
### Information needs

**GOAL** Determine the information the intended audience needs most. The intended audience will vary between organizations based on the CWO’s charge

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| • Utilize surveys, focus groups, key informant interviews, web-based feedback, etc., to ascertain what information is most helpful, particularly in times of uncertainty and distress  
• Develop a cohort of well-being communications stakeholders (e.g., mid-level leaders, well-being directors, or committees representing various constituent groups within the intended audience) to ask about information needs at the local level  
• Set expectations about information needs with stakeholders regarding what can or cannot be answered by communications efforts. You may wish to consult with legal counsel regarding wellness information and personal privacy  
• Craft compassionate and responsive language for circumstances when communications cannot meet information requests | • Survey questions with options to check all that apply, for example: “Please indicate how you prefer to receive messages or communication: (1) email (2) website (3) app-based (4) in-person meetings.”  
• Focus group discussions of open-ended questions like: “What sort of information do you feel you need at present from the health system or hospital leadership?” |

### Tone

**GOAL** Deliver messaging in a tone that resonates as caring with the intended audience

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| • Test the language before disseminating:  
  ◦ Convene a team of mental health and well-being support experts and empower that group to provide feedback on proposed messaging  
  ◦ Convene groups of constituent community representatives (e.g., physicians, nurses) to gauge how well the language resonates  
  ◦ Iterate and improve the phrasing until it repeatedly “lands well” for the intended audience | The original message about documentation requirements might be: “Please remember that you are required to close patient charts within 24 hours of completing the patient encounter.”  
Upon review, it might be better worded as: “We recognize that documentation requirements can be time-consuming and place a considerable burden on you. Our organization’s goal is to have all charts closed within 24 hours of completing patient encounters. Please reach out if you are having trouble reaching this goal so we can troubleshoot and find the best way to help you get there.” |

### Bidirectional feedback

**GOAL** Establish a way to gather feedback from the community and then inform them of what is or is not feasible

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| • Use tools that can gather timely bidirectional feedback (e.g., web-based or text-based platforms)  
• Ensure that responses reflect and explicitly react to feedback solicited from the workforce | Time is precious. Streamline and simplify your requests so that people don’t need to put much effort into giving feedback (e.g., if you want information about the usefulness of your website, you might use a web- or text-based survey to poll the community)  
Example: Please take this anonymous 2-question survey about our well-being website by clicking here.  
Survey question 1:  
What resource were you looking for on the website?  
A) Mental health resources  
B) Peer support services  
C) Coaching recommendations  
D) Spiritual services  
E) Other. Please describe: ________________  
Survey question 2:  
How long did it take you to find what you were looking for?  
A) 1-2 minutes  
B) 2-5 minutes  
C) More than 5 minutes  
D) Didn’t find what I was looking for |
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- Fostering Clinician Well-Being: Current Trends and Insights from the AMA’s 2022 National Report
- Crossing the Divide: Building Bridges Between Physicians and Administration

*Source: AMA. Practice transformation series: chief wellness officer roadmap. 2023.*