Section 3: Media and Marketing/Dissemination Outreach

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Promoting Agency Research, Tools, and Resources

AHRQ’s Office of Communications (OC) works to promote the research, tools, and resources developed and funded by the Agency. We also help grantees and contractors promote the findings of their AHRQ-funded research through well-established AHRQ dissemination channels (discussed below). OC works with AHRQ program staff, grantees, and contractors to maintain the AHRQ brand, to promote findings to the media, and to disseminate and implement knowledge based on the research to appropriate audiences in the health care community.

Overview and Key Contacts

This section provides an overview of the activities OC uses to promote the Agency and its mission. The tactics OC uses are designed to promote the Agency’s strategic goals to the public and to AHRQ stakeholders, including clinicians, policymakers, health systems, and State and local governments. We use a wide range of targeted techniques to reach the appropriate audience.

Social marketing research clearly indicates messages need to be delivered multiple times using different vehicles for audiences to focus on and understand them. For example, commercial product campaigns usually involve print and broadcast advertising as well as product placement and other techniques.

Another key to effective dissemination and awareness building is sustainability. It is not sufficient to promote a message or product one time and assume it has struck a chord with an audience. OC takes every opportunity and venue to promote messages and products to the appropriate audience, and we try to integrate messages so they build on each other and are used over time.

Our most basic message is the Agency’s mission: To produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and work within the U.S. Department of Health and Human Services (HHS) and with other partners to ensure the evidence is understood and used. OC reinforces the mission in every tactic and activity we pursue, and we work with the Agency’s offices and centers and their respective contractors to ensure that the Agency and our mission are reflected appropriately in the materials, articles, and products that are developed with AHRQ dollars.

OC also works to promote the Agency as a resource for reporters, the public, and health care decisionmakers. To that end, we promote the expertise of AHRQ staff and the knowledge and evidence we develop. Our goal is to create “repeat customers” who seek us out for their health care information needs in addition to introducing AHRQ to new audiences.
To help streamline our work, OC works closely with the Agency’s various research areas to deliver high-quality marketing and dissemination strategies. For marketing and media-related questions contractors and grantees should contact OC representatives (and should courtesy copy their project officer or task order officer as well):

- **General Marketing/Dissemination:** Kristie Kiser (kristie.kiser@ahrq.hhs.gov)

- **Data Resources (AHRQ’s Healthcare Cost and Utilization Project [HCUP] and Medical Expenditure Panel Survey [MEPS]):** Bruce Seeman (bruce.seeman@ahrq.hhs.gov) or Lorin Smith (lorin.smith@ahrq.hhs.gov)

- **Primary Care/Prevention (including the U.S. Preventive Services Task Force):** Rachel Weinstein (rachel.weinstein@ahrq.hhs.gov)

- **Patient Safety:** Farah Englert (farah.englert@ahrq.hhs.gov)

- **Media Relations and HHS Press Office Liaison:** Mr. Lorin Smith (Lorin.smith@ahrq.hhs.gov)

### Media and Marketing/Dissemination Strategies

OC’s media and dissemination strategies include media outreach and response; dissemination and implementation; audio/video production and clearance; stakeholder outreach; and social media. These categories are not exclusive, but they do provide a good structure for connecting the dots among all the activities OC pursues to promote AHRQ’s mission and messages. They are intended to overlap so AHRQ reaches audiences with multiple vehicles.

AHRQ grantees and contractors should coordinate all media/dissemination outreach—including but not limited to, press releases, public-facing Web sites, slide presentations, traditional and social media outreach, videos, marketing fliers and other materials—through OC.

### Media Outreach and Response

OC invests a great deal of time and effort on media outreach and response. Media refers to reporters who write about AHRQ research for outlets, including print and online general, daily, and weekly newspapers; television and radio; trade and legislative publications; blogs; podcasts; and educational press. The media are an important audience and a critical conduit to the public, policymakers, and health professionals. As part of this effort, we work to build relationships with reporters so they rely on AHRQ as an important resource for information.

### Press Releases

OC assesses the newsworthiness of AHRQ-funded research and tools by asking several basic questions:
• Is the finding being published in a top-tier journal such as the New England Journal of Medicine or the Journal of the American Medical Association?

• Does the finding include new or updated data or rates, such as lower rates of infections?

• Is the finding actionable and of wide interest to a broad group of stakeholders, including clinicians, policymakers, payers and possibly patients?

• Does the finding or tool have the ability to change the way health care is practiced or have significant impact in the field?

For those findings and tools that meet the above criteria, OC staff members draft a press release and work with AHRQ subject matter experts and HHS press office colleagues to navigate the clearance process. OC sends press releases to reporters via a major national newswire service that reaches print and broadcast media and through a media listserv to reporters who have requested to receive news bulletins from AHRQ. Press releases from AHRQ and other HHS agencies require clearance from the HHS Assistant Secretary for Public Affairs (ASPA). Press releases developed by AHRQ grantees and contractors must also be approved as part of an HHS “third party” release clearance process. Appendix 3-A discusses the steps in the AHRQ and third-party press release clearance process.

Third-party press releases that mention AHRQ or AHRQ products need to be approved by OC and program staff prior to being distributed to the media. Press releases that include quotes from Federal officials need further clearance from ASPA.

Email all third-party press releases to Mr. Lorin Smith (Lorin.smith@ahrq.hhs.gov) for approval and HHS clearance, if necessary.

**Media Interviews and Requests for Information**

OC arranges interviews for AHRQ subject matter experts in response to reporter requests. OC also may contact reporters proactively to arrange interviews in publications appropriate to a specific message. In preparation for media interviews, OC obtains deadline information and, if possible, questions from reporters and provides background information, talking points, and sample questions and answers for Agency experts to use in media interviews. In general, reporters, including bloggers, should have access to AHRQ employees they seek to interview. While speaking to the media is not a requirement, employees are encouraged to speak to reporters about their work whenever possible and appropriate.

Interview requests from major media outlets, such as ABC News or the New York Times, require clearance from ASPA. Appendix 3-B has details on the media interview clearance process.

Per HHS Media Policy, only an HHS employee can speak to the media on behalf of his/her agency. Contractors, fellows (except Title 42 fellows), and other non-Federal employees employed by HHS cannot speak on behalf of the Agency. In instances where
there are technical questions that require data or input from contractors, OC will help coordinate how the information is provided to the reporter.

OC submits a nightly media report to ASPA by 4 p.m. ET Monday through Friday. The report includes a list of media requests that were fielded that day, including the name of the reporter, the media outlet, and the nature of the inquiry. Information for this report must be submitted to Mr. Lorin Smith by 3 p.m. ET to be included in that evening’s report. If you received a media request and were cleared by OC to conduct the interview, send an email to Lorin.smith@ahrq.hhs.gov with information about the request and how it was handled.

Here is an example of an item for the ASPA nightly report:

Jane Smith of *Health Care Executive Magazine* contacted AHRQ for information on the average out-of-pocket cost of health insurance for employees. We arranged for her to speak with AHRQ expert Joel Cohen, Ph.D.

**Marketing/Dissemination Outreach**

OC uses a variety of marketing/dissemination tactics to convey messages to the public, policymakers, and professional audiences. Unlike the tactics in the media category, these tactics go directly to the audiences and not through a media intermediary. OC develops marketing/dissemination plans that encompass different levels of effort and outreach to a range of audiences. OC works with partners and stakeholders to maximize outreach and potential.

**Marketing/Dissemination Plans**

After assessing the promotion potential and marketability of findings and products developed or supported by the Agency, OC determines the level of effort and resources that will be allocated to dissemination and implementation activities. In consultation with program staff, OC staff use the following criteria to determine the level of resources that will be devoted to various outreach tactics. These criteria provide general guidance; research findings, reports, and tools are considered on a case-by-case basis and evaluated individually. Dissemination and implementation efforts may be tailored accordingly.

In general, OC promotes and markets findings or tools that have widespread applicability to the health care field because they have or may change medical practice/behaviors or those that may effect change in areas with a high public health burden. OC is always looking for opportunities to tell the story of what AHRQ does and how various findings help to advance our mission. In general, we look to promote:

- Research and evidence that makes health care safer and improves quality
- Materials to teach and train health care systems and professionals to help improve patient care
• Measures and data used to track and improve performance and evaluate progress of the U.S. health system

Enhanced Outreach/Dissemination

OC asks the following questions to determine whether a tool or finding should receive the highest level, or “enhanced” outreach effort:

• Is the finding being published in a top-tier journal such as the New England Journal of Medicine or the Journal of the American Medical Association? If so, a press release is typically drafted and cleared with AHRQ and HHS, assuming OC has at least 2 weeks prior knowledge of the publication date to allow time to draft and clear a press release.

• Is the finding actionable and of wide interest to a broad group of stakeholders, including clinicians, policymakers, payers, and possibly patients?

• Does the finding or tool have the ability to change the way health care is practiced or have significant impact in the field or is it of interest to HHS? (Example: In September 2014, AHRQ and PCORI announced the launch of a registry for patients with uterine fibroids.)

Once a finding or tool is determined to be an enhanced level of interest, OC uses the following tactics to promote it:

• Draft, clear, and issue press release if appropriate (must meet the criteria listed above).

• Issue listserv announcements via various AHRQ lists.

• Include in AHRQ’s weekly Electronic Newsletter.

• Conduct marketing outreach, including development and distribution of sample newsletter articles and social media messages, to stakeholder groups representing key target audiences.

• Develop AHRQ Views blog post.

• Conduct social media outreach via AHRQ’s Facebook, Twitter, and LinkedIn accounts.

Standard Outreach/Dissemination

OC asks the following questions to determine whether a tool or finding should receive a standard outreach effort:
• Is the research or tool published in a specialty journal such as American Family Physician or The Green Journal?

• Is the research actionable but of interest to a narrower, targeted list of stakeholder groups?

• Is the research or tool important to the field, even though it doesn’t necessarily have a broader message applicable to a wide audience? Example: AHRQ’s Health IT Workflow Toolkit. The assessment and redesign of workflow analysis is critical before, during, and after any health IT system implementation to ensure maximum staff productivity and quality patient care. A new toolkit funded by AHRQ specifically addresses challenges and processes related to workflow analysis and redesign in the small-to-medium-sized physician practice.

• Is the research or tool not published in a journal but there is value in educating audiences about it? Example: AHRQ’s “Improving the Emergency Department Discharge Process: Environmental Scan Report.” OC promoted the availability of the environmental scan around the emergency department discharge process so that target audiences could gain greater awareness and insights into the ED discharge process and use the findings to improve their own processes.

• Is more research needed? Awareness raising is conducted as a “for the record approach” since the Agency has spent tax dollars to fund the research.

Once a finding or tool is determined to be of standard-level interest, OC uses the following tactics to promote it:

• Issue listserv announcements via various AHRQ lists.

• Include a short article or link to findings in AHRQ’s weekly Electronic Newsletter.

• Possibly include social media outreach via AHRQ’s Facebook, Twitter, and LinkedIn accounts, depending on whether the product supports one of AHRQ’s priority areas.

Electronic Newsletter

OC staff write, edit, and distribute the AHRQ Electronic Newsletter, which features news about important Agency activities and AHRQ-funded journal articles. It goes out weekly to nearly 115,000 subscribers. A typical e-newsletter article includes five to six sentences about the research or tool along with a link to the relevant section of the AHRQ Web site or a PubMed abstract for readers who want more details. The newsletter, designed to provide a quick snapshot of AHRQ news, is managed by Bruce Seeman (bruce.seeman@ahrq.hhs.gov).
Listservs
The Agency uses GovDelivery listservs and currently has several dozen topic-specific listservs for subscribers interested in the various research areas of the Agency. Similar to short e-newsletter articles, the listserv postings typically include five to six sentences about the research or tool along with a link to the relevant section of the AHRQ Web site where the original source material can be found.

Journal Article Tracking
OC tracks the publication of all AHRQ-funded research and assesses it for outreach potential, which can range from a press release to a mention in the Agency’s Electronic Newsletter.

As soon as AHRQ-funded research findings have been accepted for publication in a peer-reviewed journal, please alert OC by sending the accepted manuscript (drafts are acceptable) and the following information to journalpublishing@ahrq.hhs.gov:

- Title of study
- Author names
- Editor’s tracking code (if available)
- AHRQ grant or contract number
- Type of article (research study, commentary, letter to the editor, etc.)
- Name of journal
- Journal contact (editor’s contact name, email, and phone number)
- Online publication date, with embargo time if applicable
- Estimated print publication date, with embargo time if applicable
- AHRQ Program contact (task order or grant officer)

This information also can be entered into a fillable PDF form. Send the completed form to journalpublishing@ahrq.hhs.gov.

Note: AHRQ always honors embargo dates and coordinates with journals as needed.

To ensure enough time for outreach efforts, please notify OC as soon as you know your (or your grantee’s or contractor’s) article has been accepted.
Social Media
As OC continues to expand the Agency’s social media presence, the goal is to ensure that social media outreach efforts by AHRQ staff and contractors are well coordinated and the Agency maintains the highest standards for its brand and messages.

Individuals who wish to use social media technologies as part of official AHRQ communications must follow standards and policies that govern information and information technology. Section 4, Social Media, has information on standards and policies that apply to the use of social media.

AHRQ staff and contractors should work with an OC representative to complete the AHRQ Social Media Checklist for new social media accounts. For general questions on social media, email socialmedia@ahrq.hhs.gov.

Stakeholder Outreach
A key component of AHRQ’s mission is to work with partners to ensure that the research, tools, data, and measures the Agency produces are understood and used by our customers. Engaging stakeholders broadly and at the highest levels can facilitate this goal while helping to solidify the Agency’s priorities and generally raising the Agency’s profile with key audiences.

AHRQ has a long history of working collaboratively across the health care system with many different types of stakeholders. For example, as a funder of health services research, AHRQ has historically enjoyed a small but loyal following among the research community. In addition, AHRQ has garnered broad bipartisan support for its work to improve patient safety. Broadening AHRQ’s stakeholder base and activating existing stakeholders is necessary to help the Agency meet future demands.

AHRQ’s Stakeholders
Most of AHRQ’s stakeholders fall into several broad categories:

- Clinicians in clinical, research, or academic practice across the spectrum of health care settings
- Safety and quality improvement professionals
- Health system leaders
- Federal partners
- Health services researchers, including data analysts and statisticians
- Consumers who are highly active in the safety and quality area

OC considers the following factors when deciding to pursue partnerships with stakeholder organizations:
- Will the partnership help best reach the intended audiences?
- Which groups have the greatest influence and credibility with the intended audiences?
- Which organizations will be easiest to persuade to engage in a partnership and require the least amount of ongoing support?
- What can AHRQ offer to the partner?

Policies for working with for-profit partners include the following:

- AHRQ does not consider collaboration with corporations that endorse a specific commercial product, service, or enterprise.
- The AHRQ name and logo may be used only in conjunction with approved projects and only with the written permission of AHRQ. AHRQ retains the right to review all copy prior to approval of the use of the AHRQ name and logo.
- OC formally reviews each partnership proposal.
- No company will have an exclusive right to use the AHRQ name and logo, messages, or materials.
- AHRQ will not partner with companies that have any products, services, or promotional messages that conflict with AHRQ policies or programs; those that are currently in negotiation for a grant or contract with AHRQ; those that have any unresolved conflicts or disputes with AHRQ; or those for which establishing a partnership would create tension or conflict with another AHRQ partner or Federal program.

Questions about potential partnership agreements should be directed to Kristie Kiser (kristie.kiser@ahrq.hhs.gov).

**Impact Case Studies**

OC is always looking for ways in which AHRQ-funded research, products, and tools have changed people’s lives, influenced clinical practice, improved policies, and affected patient outcomes. AHRQ Impact Case Studies describe AHRQ research findings in action and are used in testimony, budget documents, and speeches. Grantees or contractors whose AHRQ-funded research has had an impact on health care policy, clinical practice, or patient outcomes should review the criteria and fill out the form available on the AHRQ’s Impact Case Studies Web site.
Additional Information

To discuss specific issues or obtain additional guidance on media and marketing outreach, contact:

Mr. Lorin Smith
Media Relations and HHS Press Office Liaison
Office of Communications
Email: Lorin.smith@ahrq.hhs.gov
Phone: 301–427–1864

Kristie Kiser
AHRQ General Marketing/Dissemination
Office of Communications
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