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# Executive Summary

## Company Description

The Ohio Trauma System (OTS) is a statewide system connecting all entities related to trauma injury services. These entities include injury prevention, Emergency Medical Transportation services, trauma centers, and rehabilitation facilities. The purpose of the trauma system is to unite these entities so that citizens can move more efficiently through the system as needed. Additionally, the trauma system is able to collect distribute data from all of these entities in order to improve effectiveness and efficiency.

## The Problem

A major problem OTS faces is the lack of awareness by the very people it is trying to help. Due to a lack of funding, OTS has been unable to adequately distribute information to the public. A major goal of OTS is one day to have enough public support to be able to change legislation in order to make the system more effective. Without public awareness, this goal may never be realized.

## Solution

Today, even a zero dollar budget can go far. With the manpower OTS has behind it, there are many ways to spread information in cost effective ways. Utilizing the internet, local news media, and volunteers, we have come up with several tactics OTS can use to effectively disseminate information without incurring major costs. Additionally, we have defined OTS as a brand for the public to recognize.

## Why Now?

Increased awareness and overall knowledge of the system by the public will increase the likelihood of getting voter and lobbying support with legislation change. The faster the marketing strategy is put into action the faster this legislation change can be proposed and made, which will provide more money for additional promotional efforts. Furthermore, increased awareness about the OTS will help to save lives. More public knowledge about the system and trauma itself will increase the level and quality of care for each Ohioan. An efficient statewide trauma systems with effective communication methods decreases the likelihood of trauma occurring and also increases the survival rates of trauma patients.



# A:Project Brief

## Part I

### 1. THE ASSIGNMENT

A brief preamble to the document sets up the context in which this brief is being written. Should include the objectives for the assignment, as well as metrics for evaluation.

- Educate consumers or Ohioans
- Create knowledge regarding Trauma and what it means for consumers
- Make consumers aware of things like “The Golden Hour”.
- They can lose their lives if they choose NOT to go straight to a trauma center
- Create a brand awareness for client.
- Implement various tactics and campaigns
- Social Media Campaign
- General Media Campaign
- Education Campaign



### 2. BRAND'S VALUE PROPOSITION

Who: Ohioans

What: Increases chances of survival and decreases the likelihood of life-long disability.

Why:

#### **Decreases likelihood of trauma occurring**

- Trauma Systems advocate for state legislation to be passed related to injury prevention. For example, in 2013, Montana passed a seatbelt law and West Virginia made failure to wear a seatbelt a primary offense. These are a few laws among many that have been passed in states with active trauma systems.
- Best practices programs offer statistical evidence that injury prevention programs are effective. For example, a study on falls management exercise intervention showed that over the entire study, fall rate can be reduced by up to 54%. Furthermore, a Brazilian study shows that school intervention programs can help both increase knowledge and improve attitudes about safety in the youth.
- Trauma systems support injury prevention by connecting established agencies and organizations at local and state levels. One study concludes that many times injury prevention programs lack coordination, resulting in irrelevant or redundant programs being in place in a community and that trauma centers alone do not provide sufficient injury prevention programs. The programs could be enhanced through a partnership of all trauma related entities.

# Situation Analysis

## Increased speed of response if trauma occurs

- Golden Hour
- The initial treatment and response as well as the trauma centers are most important in the golden hour of a patient's treatment.
- The Golden Hour is a term used to describe the first hour immediately following a serious injury. If a patient receives proper medical care in that first hour, his chances of survival triple and the long-term side effects of injury are significantly decreased. This is one of the reasons distance between the scene of an accident and a trauma center as well as rapid response on the part to a trauma center following a severe injury, the chances of recovery diminish.<sup>4</sup>
- The organization of these two entities is very important for the patient.
- Improved communication resulting in a quicker response
- Faster, more efficient use of first responder care through increased communication. Closer unit responds – ex: alleviates the issue of having two different ems units respond to the same scene when only the closest is needed.
- Trauma centers have organized trauma teams that respond promptly to trauma alerts, a surgeon who



## Increased quality of care “all the way through”

- Physicians and staff are on site 24 hours – Example: Grant Hospital (Lv. 1 TC) (varies per level)
- Trauma team includes specialized trauma surgeons, neurosurgeons, orthopedic surgeons and plastic surgeons to meet the patient's complex needs.
- At any given time, 15 physicians are on call and immediately available<sup>5</sup>
- Multidisciplinary response teams are available 24 hours a day<sup>5</sup>
- A pool of more than 200 physicians is available to treat a trauma patient<sup>5</sup>
- Better equipment and facilities
- Trauma bay is 24 hour ready for trauma situation
- Specialty equipment available for specialty centers (i.e. burn treatment, etc.)
- Trauma centers have been proven to decrease mortality of seriously injured people by as much as 25%.
- Doctors at trauma centers will be able to suggest top quality rehabilitation centers based on patient need -can ensure CARF (Commission on Accreditation of Rehabilitation Facilities) accreditation with those providers. (Ohio State Wexner Medical Center is CARF accredited)<sup>6</sup>
- Through accreditation, CARF assists service providers in improving the quality of their services, demonstrating value, and meeting internationally recognized organizational and program standards.<sup>7</sup>
- Rehabilitation facilities increase the likelihood of fully recovering from a trauma – get back to feeling “normal” again

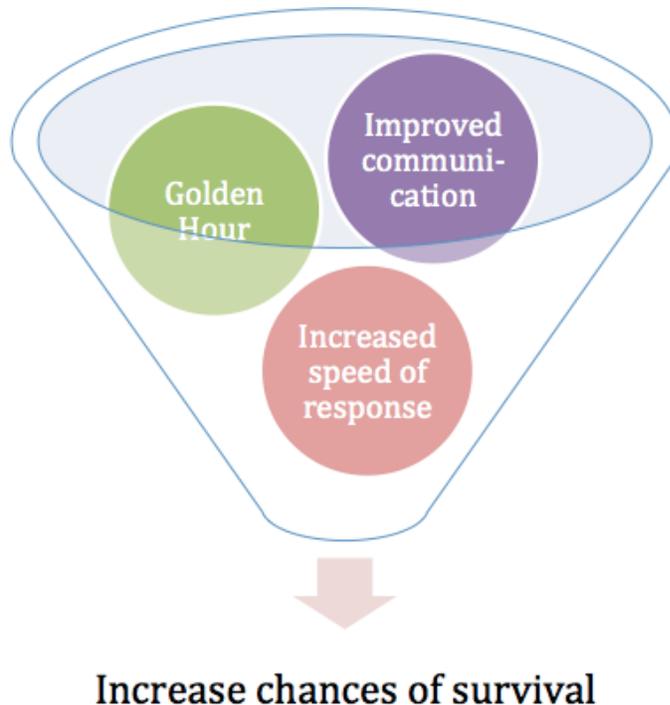
### Improved flow of information relating to data pool and analysis

- The Ohio Trauma System has access to ANY entity, hospital, or program that falls underneath their umbrella
- There are no other programs or hospitals in the medical industry with access to large information or data
- This system in place makes it easier for communication across the entities
- Data analysis and applications improve efficiency and effectiveness throughout different entities
- Data analyses of transportation routes
  - Information regarding effectiveness of Injury Prevention and what works best
  - Research regarding facilities and tools that save lives
  - Affiliated hospitals are gathering data about patients and investigating therapies and interventions that could improve recovery from acute injuries or related long-term effects.

**KEY THING OR TAKEAWAY:** If all else fails we need Ohioans to take away that the system improves their likelihood of surviving and thriving.

### 3. WHAT IS THE BRAND PERSONALITY and VOICE?

- We must create a brand personality. No brand personality yet.
- Key to convey value in the brand relating to trust in the system and quality of the care.



# Situation Analysis

## PART 2

### 4. WHERE DOES THE BRAND FIND ITSELF TODAY?

- Looking to be better known.
- Losing trauma centers in rural areas, because they cannot keep up with costs.
- There is a lot of opportunity. A chance to really grow to become a brand with public awareness.
- Might consider small hospitals without trauma centers a competitor. The two are butting heads.

### 5. WHY ARE WE SPENDING MONEY on THIS BRAND?

What overall business problem/opportunity, or strategic goal, are we trying to address?

- We aren't spending money, however we are investing time and volunteers.
- Creating awareness/knowledge
- Public awareness will create support when it comes to legislature and funding
- These will help the system to continually improve
- Continual improvement will spare preventable deaths

### 6. STRATEGIC CATEGORY CONVENTIONS

- Target young student population and adult group
- Including every angle so brand is widely know and recognized
- Young
- Speakers from community come to schools to inform students about the system. (Police officers, fire fighters, nurses, rehab etc.)
- Children brochures
- Adult
- Local News Stories
- Facebook and Twitter Account
- Youtube commercials and videos
- Adult volunteers will learn more through volunteer process

### 7. CREATIVE CATEGORY CONVENTIONS

- System Logo
- Catchy phrase or slogan to enhance the brand image or recognition
- Brochures and information packets
- Super hero duo characters
  - Website look and design

### 8. MEDIA CATEGORY CONVENTIONS What are they?

- Social Media
- Facebook
- Twitter
- Youtube
- General Media
- Brochure print
- Brochure PDF via email and website
- Local news story

## B: Current Context

Currently, there are four distinct phases that exist for preventing and treating trauma in Ohio:

### Injury prevention

- Primary Prevention includes programs specifically based on how to prevent injury
- Secondary Prevention includes precautions that exist when in a situation of possible injury (i.e. Wearing a seatbelt)
- Tertiary Prevention includes the rest of the steps or preventing worse consequences. This focuses on quality life aspect of injury.

### Initial treatment and response

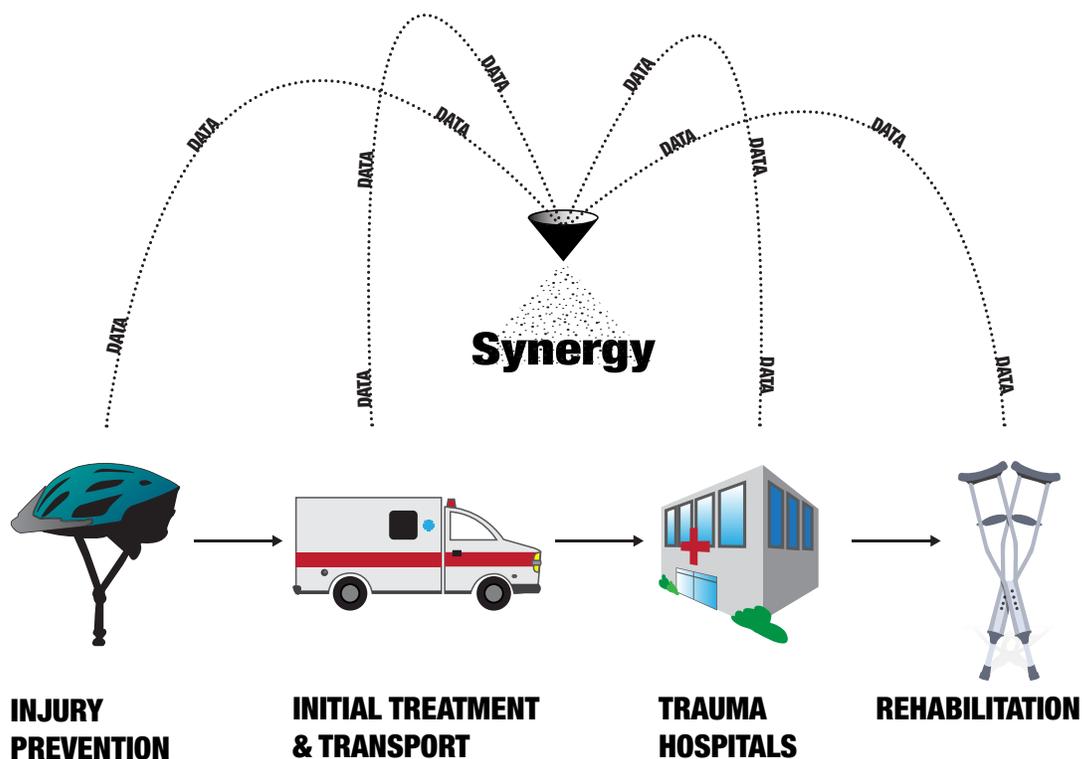
- Includes the dispatcher or 911 that receives the initial call
- The EMT then responds to the call and shows up on the scene providing temporary care
- Transportation to the best hospital is provided to the injured

### Trauma Centers

- Offer operating rooms, equipment, and surgeons at all hours for any patients in need of immediate care

### Rehabilitation.

- This step focuses on getting the patient back to the pre-injury state and improving their quality of life.



# Situation Analysis

## STRENGTHS

Strengths relate to the numbers proving lives are saved when the system is in place. In addition to the statewide system, six regional trauma systems exist solidifying the statewide system in a regional manner:

- Northern Ohio Trauma System
- North East Ohio Regional Trauma Network
- Central Ohio Trauma System
- Tri-State Trauma Coalition
- The Southwest Ohio Regional System

## WEAKNESSES

Although these steps are solidified separately, a problem with the current situation is that many people are not aware that a system exists and there is not an overriding power to facilitate coordination between the entities. In 2012, representatives for the Ohio Trauma System conducted a survey at the Ohio State Fair to judge current awareness of trauma in Ohio. According to this survey:

- Only 66.9% of respondent believe there is a trauma system in place in Ohio.
- 54.2% of respondents are very or extremely confident that the hospitals closest to their homes would be able to provide the best care for their injuries.

Increasing the knowledge about this system is necessary to save more lives relating to trauma injuries. It is difficult to raise awareness for it and the system does not receive much in additional funding.

## OPPORTUNITIES

- There is no real existing brand so creating a brand that makes citizens aware of the system and its benefits represents a lot of opportunities.
- This will allow people to be knowledgeable of their choices and change their involvement in their own care.
- Resistance decreases against the EMT's during initial treatment and response. Gaining trust in the medics at this phase will ensure that a patient receives treatment during that golden hour.
- Due to raised awareness voters are more likely to lobby support and funding for the system.

All of these opportunities offer the chance to build on their value proposition to increase survival and well-being from trauma related injuries.

## THREATS

Some threats arise in the act of accomplishing these goals:

- The system has no funding to use for promotion and must rely on volunteers and grants as their only resources.
- In order for big changes to take place, legislation must be changed. If they are not able to lobby support for this cause, the needed legislation may not get passed.

## C. Historical Context

In the United States, the evolution of an emergency care system dates back almost half a century.

- In 1966 the need for a formal system of trauma care was discovered. This nationwide disclosure leads to the outcome that states were charged with developing a systematic trauma care plan.
- In Ohio loosely coordinated trauma system existed back in the 1980's, but the formation of an well-organized and inclusive emergency care system is very difficult.
- Movement and change have always been very restricted through long and difficult legislation processes. It took until 2000 when in a statewide trauma committee was created in Ohio. This committee was assigned tasks such as the development of rules and guidelines for a variety of trauma system elements or oversight of EMS quality of care and provider education.
- Soon thereafter, along with the striving for a comprehensive Ohio Trauma System, six main regional trauma systems were built on a smaller basis. All of these regional systems similarly state their main goal as providing the highest possible quality of care to trauma patients within their region.

## D. Industry Analysis

Within the last decade, states are implementing statewide Trauma Systems. This statewide system is responsible for increasing survival rates by 15 to 20 percent. Each statewide system strives for similar goals.

- Decrease the time it takes injured patients to get the care that they need
- Guarantee a continuum of care throughout the rehabilitation process.
- Ensure optimal, equitable, and accessible care for all persons sustaining trauma
- Prevent unnecessary deaths and disabilities from trauma
- Enhancing efficiency while decreasing incidence and severity of trauma
- Implement quality and performance improvement of trauma care throughout the system
- Ensure certain designated facilities have appropriate resources to meet the needs of the injured

Without a statewide system, the level and quality of care rendered at any given time may vary on a regional, daily or hourly basis within a region or state. The ultimate goal is for the system to work nationwide.

As of 2011, Forty-two states had recognized the importance of a statewide trauma system.

- Alabama, California, D.C., Idaho, Michigan, New Jersey, Rhode Island, South Dakota, and Vermont do not have trauma systems.
- 24 of the states with trauma systems have some kind of form of state funding.
- 13 states fund through moving violation fines, vehicle registration, license plates, or license renewal.
- Six states have tax on cigarettes, four states collect fees from criminal penalties and five states allocate money from state's revenues.
- Some states have tried legislative efforts with only Alaska and Georgia seeing success. In Alaska, College of Surgeons Committee on Trauma Chair played a critical role in championing legislation

Only 8 states have fully developed Trauma Systems, most have no federal funding. The consensus is the same for states that have systems in place or that are working toward the goal: The public is not aware of the trauma center system. Yet, the success of the trauma system is largely determined by the degree that is publicly supported.

# Situation Analysis

## E. Market Analysis

The concept of a statewide trauma system is relatively new.

- Throughout Ohio, several regional trauma systems have been formed. However, these regional systems are not in constant communication with one another.
- There are 46 trauma hospitals in Ohio, all of which are level 3 or higher
- There are 6 pediatric trauma centers.

Many Ohioans are unaware of the benefits of a trauma system. To educate the public about the Ohio Trauma System, marketing efforts will be directed to three different market segments.

- Adults aged 18-44 (Injury is the leading cause of death for people ages 1-44)
- Children ages 5-17 (Patients over 18 are able to communicate which hospital they choose to go to)  
Children will be treated differently in regards to education.
- Enthusiastic superhero characters and mascots
- Interactive school activities
- Create a place for trauma centers in the minds of the youth.
- Adults aged 45 and over

Effective education about the trauma system will not only influence their decisions as to where they want to go when faced with a serious injury, but it will also improve support for the continuation of a state-wide system.

Many assume that they are already receiving the highest quality of care; however, this may not be the case:

- The quality of care strongly depends on the diligence to which the triage laws are applied.
- Care quality is directly linked with how well the injury prevention, EMS, trauma centers, and rehabilitation facilities are functioning together.

The Ohio Trauma System will help streamline all processes involved in trauma prevention and care in order to always guarantee the highest quality care to Ohioans. Injury is preventable. In educating the public and strengthening awareness of OTS, lives will be saved.



## F. Competitive Analysis

The current competitive landscape surrounding the Ohio Trauma System is unique. Due to the nature of the medical industry and the overall goal of the trauma system in Ohio, competition can't be assessed in a traditional manner. After all, all hospitals ultimately want people to survive. When considering an all-inclusive system involving multiple components, it then becomes even less competitive in the traditional sense; The idea is for all of the entities (i.e. ems services, trauma centers, rehab facilities) as well as the smaller trauma systems in the state to work together.

Therefore, the way to look at competition for this industry is to consider two angles:

- Any organization or program that competes for the mental space of any potential customer of the trauma system. Even when considering this however, "competition" still doesn't quite make sense. Mental space is merely divided by another concept. Therefore, we have only considered these relationships as a guide to understanding what works and what doesn't when it comes to how people interact and support any particular program. For example, consider MADD's campaign and branding tactics:
- NFL commissioner Roger Goodell announces expanded partnership with the NFL and MADD
- Volunteer spotlights and video competition awards given to outstanding volunteers
- Social media sites and website are easy to navigate to volunteer or get involved on site
- Billboards, radio ads, and posters to empower people to call 911 if they suspect an impaired driver
- It is prudent to consider how other states have organized their trauma systems. By understanding what others have done we can learn from what has worked, what hasn't, and even gain new ideas.

Georgia tried passing Amendment 2 in 2010 ballot where certain motor vehicles are charged \$10.00 annually

- The 1 million dollar informational ad campaign consisted of rallies around the state, lapel stickers, bumper stickers, yard signs, brochures, sixty second radio ads, a four page direct mailer, and tv ads.
- The amendment was defeated with a 52.6% in opposition

Other funding ideas include

- An additional \$5.00 surcharge on motor vehicles or an additional surcharge on rental cars
- An increase in monthly cell phone surcharge by \$1.16
- Add-on charge to fines for moving violations such as DUIs
- A check box allowing citizens to contribute 5% of tax refund to Georgia Trauma Care Fund

Although these state systems aren't competitors per se, they do operate at a similar level to Ohio's "Trauma System". Thus, the "competitive analysis" is simply to understand how other systems operate and how consumers react to certain marketing campaigns within the realm of these trauma systems.

### Improved flow of information relating to data pool and analysis



# Objectives

## A. Quantitative Benchmarks

## B. Measurement Methods

- Social Media
- Run diagnostic with Facebook and twitter (Google analytics)
- Track user rates and activities
- Education campaign
- Ensure students get brochures with the rest of their “end-of-day” information
- Measure areas holding presentations using volunteer emails. Focus on holes where presentations have not been held.
- Distribute survey at the end of the school year to school districts
- Ultimate final goal
- Measure difference in awareness at Fair 2014 using survey distributed (Appendix C survey with additional questions)

## C. Criteria for Success

As the overall goal of this project is to raise awareness for the Ohio Trauma System, this is a very unique setting. The traditional benchmarking tools can not be easily applied to this specific situation and therefore we suggest to focus mainly on the following goals.

Goals for the Trauma Survey at the 2014 Ohio State Fair:

- Decrease number of respondents that answered with ‘Not Sure’ for the question whether they know if the closest hospital to their home is a trauma center.
- Increase amount of money people would be willing to spend in order to ensure everyone in Ohio lives within 60 minutes of a trauma center.
- Decrease number of respondents that don’t know whether a trauma system is in place in the State of Ohio.
- Also, add a question to the survey 2013 such as: How did you hear about the Ohio Trauma System? And give options such as Twitter, Webpage... Asking the same question at the fair 2014 again, will show effectively which promotion tactics were most successful throughout the year. Those tactics should be mainly focused on in the next year.

Goals for the social media tactics:

- Increase the number of followers/friends/viewers of their profiles.
- The amount of valuable activities on their social media pages are also crucial.

## D. TimeFrame

- See Timeline attachment. Pg. 50

# Budgeting

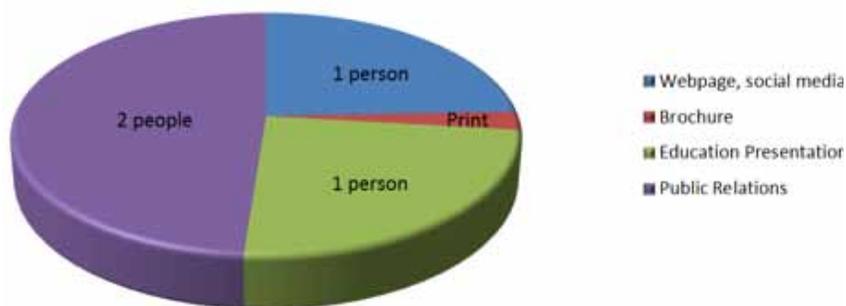
## WEBPAGE:

Team 24/7 has designed a sample layout for a webpage. To make the webpage complete, someone who is knowledgeable on designing a webpage will be needed. We recommend someone with a creative eye to make this webpage attractive and user friendly. To do this with no budget, we suggest volunteers with the required skill set or contacting The Ohio State University's Computer Science's Department and asking for volunteers. Once this page is created it will need updated regularly.

## SOCIAL MEDIA:

Facebook, Twitter, and YouTube are of no charge. Both Facebook and Twitter can be linked together so that when one "tweets" it will automatically be posted to Facebook. If a video is posted on YouTube, it can be uploaded to Facebook with the click of a button. It's suggested that there be one designated volunteer for this. YouTube is a free service and is

great for making commercials to begin to advertise The Ohio Trauma System. Volunteers will be needed as well as props. It is suggested that The Ohio State University's Film and Theatre Departments be contacted to make a clip of the story board(s) that have been suggested within this document.



## BROCHURES:

The quantity of brochures will be determined by how many each place can hold and/or take. Printers are easily accessible. The brochures have been created in color but due to the budget constraints, they are just as informational in black and white. It is suggested that the brochures be placed in doctor's offices, church bulletins, and taken to the schools where classes will be given. It's also recommended that a link to a pdf file for this brochure be on the webpage so that anyone with access to the Internet can print it off.

## CAMPAIGNING:

1. Volunteers will be needed for these training classes. It is recommended that fire and police department volunteers as well as doctors and nurses be utilized for this being that they are highly respectable. A powerpoint presentation will need to be made for this. This will take time for it needs to be accurate and up to date. It is recommended that one universal powerpoint be used. Training will be needed so that all those who teach have the necessary information and can answer any questions from students. A separate packet of information will need to be made for this training.

2. A highly knowledgeable spokesperson will be needed for the interviewing. This interviewing is free of charge using pbs. Having articles written in the Columbus Dispatch and other local magazines is another great way to get this brand known. The articles can be written for no charge as long as the story is creative enough. A writer for the 614 magazine has been contacted and three writers for the Columbus Dispatch.

# Strategy and Execution

Who: Ohioans

What: Increases chances of survival and decreases the likelihood of life-long disability.

Why:

- Decreases likelihood of trauma occurring (Trauma prevention data, examples, safety course, etc.)
- Increased speed of response if trauma occurs (Golden hour, talk about how system speeds things up)
- Increased quality of care “all the way through” (Process if you experience trauma, from when it first happens and when you get back to point before you were in the hospital, get best quality care if you go to trauma center)
- Improved flow of information relating to data pool and analysis

KEY THING OR TAKEAWAY: If all else fails we need Ohioans to take away that the system improves their likelihood of surviving and thriving.

## Tactics:

OTS should have its own website.

- The website should include a list of organizations associated with the trauma system
- It should also provide links to all social media websites and Youtube videos
- Domain name = [www.ohiotraumasystem.org](http://www.ohiotraumasystem.org)
- Domain name, design, and upkeep \$5.99 per month. Worth the few dollars for organization website
- We have provided a sample design of the website (see attached)
- The website should be created and available to the public as soon as possible

OTS logo: Unexpected Accidents. Unbelievable Care.

Navigation: Home | Injury Prevention | Initial Treatment/Transport | Trauma Hospitals | Rehabilitation | Research

**DID You KNOW?**  
Injury is the leading cause of death among people ages 1 - 44 years.

**Reports and Publications**  
Read More...

**Regional Trauma Systems**  
Read More...

Click Here to view trauma center locations

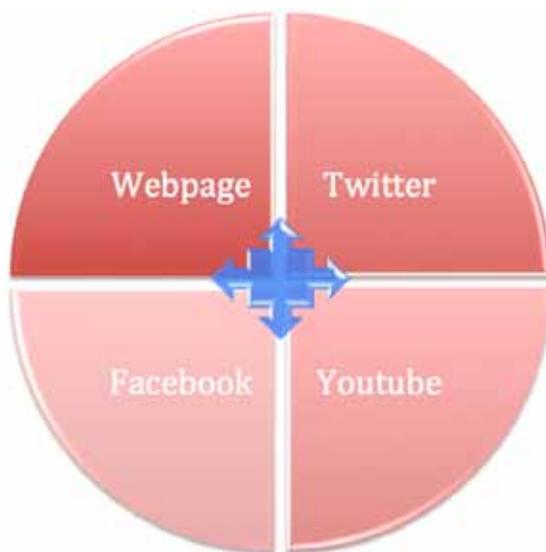
Contact Us | About Us | Legislation | Privacy Statement | How to Volunteer | Site Map | Brochure PDF  
© 2013 OHIO TRAUMA SYSTEM. All Rights Reserved.

We highly recommend the use of social media to help raise awareness as well. Social media accounts should be activated after the website has been created so that we are able to link all accounts to the website.

- Twitter, Facebook, and Youtube are free to join and easy to use.
- Twitter
- An employee would be made in charge of the twitter account and would be required to make at least two tweets per week.
- Tweets could cover a variety of topics, including statistics related to OTS and trauma injuries, information regarding injury prevention classes and events, or an entertaining story about events that happened that week
- Facebook
- We recommend registering on Facebook as an organization
- Allow other users to “like” the Ohio Trauma System page and follow posts.
- We recommend making posts similar to Twitter tweets. Facebook can be tied in with Twitter so tweets and status updates are correlated.
- Additionally, pictures of OTS entities and what they do on a day-to-day basis would connect the audience with what the trauma system does every day.

#### Youtube

- It may be difficult to raise funds required for a TV commercial
- We recommend filming witty commercials and educational videos and posting them for free on Youtube.
- Reaching out to university film schools would provide a way to create professional videos on a budget. Volunteers can serve as actors and cameramen.
- Commercials and videos can be tweeted or posted on Facebook so people can follow the link creating awareness



# Strategy and Execution

We recommend distributing brochures as a physical advertisement.

- We have provided example brochures about the trauma injury treatment for both children and adults (See attached)
- Helps educate adults about what OTS is, what trauma is, difference between a trauma center and regular hospital, and where trauma centers can be found
- Brochures will be available online
- Brochure in PDF form will be emailed to different entities within the Ohio Trauma System to be printed and distributed at their various locations
- Upload to website and distribution will take place after website, Twitter, and Facebook are active





## Unexpected Accidents, Unbelievable Care

To attract the attention of Ohioans aged 18-44, we recommend reaching out to local news stations to see if they will air a segment about the Ohio Trauma System.

- One or several experts would be interviewed about the trauma system
- News story idea will be submitted online to local news in Cleveland, Columbus, Cincinnati/Akron, and Toledo
- Submission will occur after website, social media, and brochure are online and active
- Would direct viewers to the Ohio Trauma System's website and social media sites for more information.

We also recommend starting an educational campaign.

- Volunteers to go to Ohio schools and make short presentations to students about OTS.
- Mass email where volunteers can reply with when and where they will present
- Short presentation and brochures will be sent via email to volunteers
- Top to bottom approach. (i.e. Tim will get in touch or email bosses the information. Bosses will then email to employees)
- Through presenting the system to children, we hope to leave a lasting impression in their minds
- This will create more support for the system as the children become voters
- Educational campaign should begin after all other tactics have been implemented so that schools will be more receptive in allowing these presentations

# Evaluation

## Facebook Benchmarks:

- Ohio State Wexner Center
  - Joined Facebook in 2008
  - Has 13000 likes
  - Avg. Growth = 2600 likes per year
- Ohio Health
  - Joined Facebook in 2008
  - Has 11000 likes
  - Avg. Growth = 2200 likes per year
- Natalie's Coal Fired Pizza
  - Joined Facebook in June 2012
  - Has 1700 likes
- Avg. Growth Estimated to be = 2100 likes in first year

### Our Recommendations:

- Based on the number of likes these companies received over the time they have been on Facebook we suggest that they aim for 2000-3000 likes per year

### Understand: Value of the Social Media Platform through Calculation

- Calculation of value of a "Like" is:  $\text{Output} - \text{Input} = \text{ROI}$
- NOTE: Calculations aren't necessarily needed but understanding how to value a "like" is critical to understanding the impact of social media and also critical to the understanding of what is needed to capitalize on that value (i.e. updating their status a certain amount of times, etc.).
- Simply setting up a Facebook account isn't enough to ensure growth – need to stay active.

### Calculation:

- $\text{OUTPUT (emails, donations, actions, page views (sponsorship))} - \text{INPUT (time/money/agency/software/content/advertising)} = \text{ROI}$

## Step 1=Assess the inputs (costs) that go into the equation:

- Time - How much staff time goes into your social media efforts? What is the value of that time?
- Agency Costs - Are you working with an agency to assist or run your social media? How much are you paying them? Monthly retainer? Project basis?
- Media Costs - Are you spending money to advertise on social media platforms?
- Content Production Costs- Are there costs associated with purchasing images, producing videos, creating infographics? Is there more staff time devoted to modifying this content before posting?
- Software Costs - Do you use social media monitoring/publishing tools? Or custom tab creators?

Every organizations inputs are going to vary, but the exercise is an important one. Some of these variables might not be exclusive for social media. For example, you might produce a video that is being used for a presentation to board members and have repurposed it for Facebook use. You will have to make percentage estimates on costs like these.



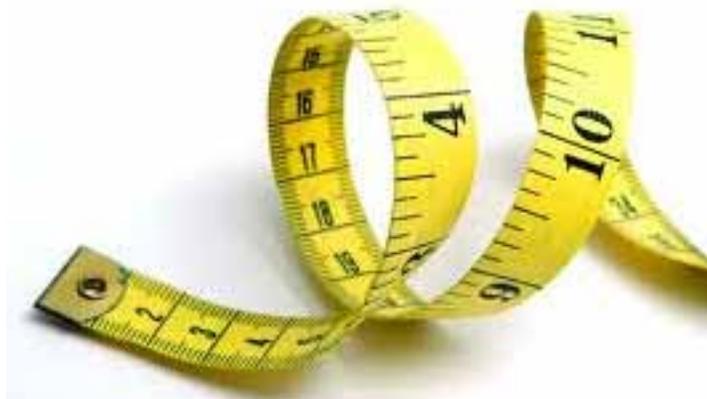
## Step 2=Assess all of the outputs (value) for the equation:

- Donations - How many donations can you track as originating from Facebook? This is much more difficult than it sounds and requires a tool like Google Analytics integrated with your payment processing platform. If you can't tell where your donations are coming from online, then how do you know where to focus your efforts?
- Website Traffic - Have you assigned a value to visitors to your site? Do you have sponsorship placements on your site that make it easier to determine these values?
- Email capture - Are you capturing new emails through Facebook? What value have you assigned to email?
- Actions - What is the value of an advocacy action? A new volunteer signup? Whatever the calls-to-actions are on your site need to have a value to your organization. This might be a lot of leg work, but there is tremendous benefit beyond Facebook for know the answer to these questions
- Brand Awareness - This is always a difficult thing to measure, because it varies for every organization.

What you put in during one quarter might not payoff right away. It might take until the end of the year to payoff, so it is important to constantly track this equation and looking at trending over time to anticipate when Facebook because a revenue positive platform.

### Bottom Line

- There is no value in a Facebook Like, only in Facebook as a platform. Measure your ROI on Facebook by calculating the resources needed to run your efforts against what you are accomplishing. Having a better understanding of the ROI your organization has on Facebook will help you plan and allocate resources better in the future. This will become increasingly more important as digital natives become a larger chunk of your supporters and expect to engage with your organization on these mediums.
- Understand that ROI and value is lost if the Facebook page is not updated on a continuous bases (e.g. 2-3

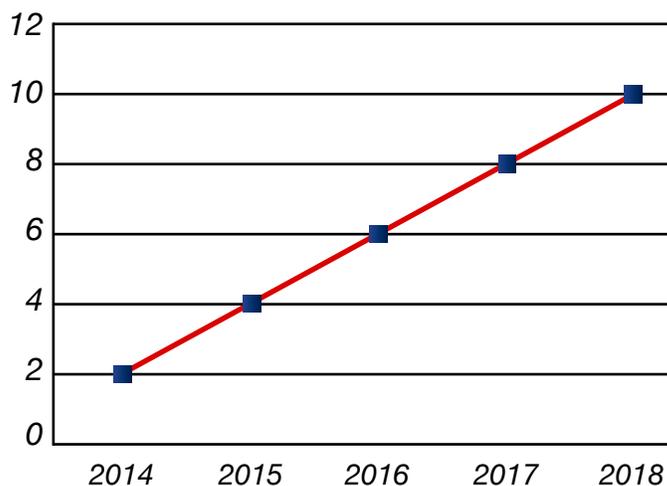


# Evaluation

## Twitter Benchmarks

- To see how many visitors are coming to your site via Twitter, you'll need an analytics tool, such as Google Analytics, which is a free source, or HubSpot.
- Here are the metrics we recommend you keep track of:
- 1) Twitter Follower Month-to-Month Growth
- By pulling the number of Twitter followers and net new followers, you can get a sense of the growth of your Twitter reach monthly. For example, if you were to compute the following growth in March, you would pull the numbers from February and March:
  - $(\text{March Twitter Followers} - \text{February Twitter Followers}) / \text{February Twitter Followers} = \text{Growth \%}$
  - Tracking this percentage monthly will allow you to see whether your tweeting strategies and campaigns are helping to boost your reach, or have become a waste of time.
- 2) Twitter Visitor-to-Lead Rate
- Similarly, by pulling Twitter visitor numbers and Twitter lead numbers, you can calculate another percentage to help you track your lead growth.
  - $\text{Twitter Visitors} / \text{Twitter Leads} = \text{Visitor-to-Lead Rate}$
  - Keeping track of your Twitter visitor-to-lead growth rate will help ensure your social tactics are translating into leads for your sales team. If you want to track this growth more closely to see how specific campaigns impact it, you can create daily goals. Decide on the number of leads you want to generate monthly. Then divide that number by the number of business days in that month, and that will give you your daily goal.

**Projected Twitter & Facebook User Growth** (in thousands)





- In addition to the hard metrics like leads and customers, Twitter engagement is associated with other metrics that are unique to its environment. For instance, how do you measure the effectiveness of using a hashtag? Or a mention of a specific campaign?
  - Following is a range of free tools that can help you measure Twitter-specific interactions.
  - Tool 1: Twitter Counter
    - One of the fundamental metrics to track is your follower growth. Twitter Counter allows you to easily examine your follower growth over time. More importantly, you can see your net new number of followers per day by hovering over each day. This data can be used to see how many new followers a certain campaign garnered on the day it launched. If your following remains constant over time, this could indicate that you're not using Twitter as well as you could. Your goal should always be to increase followers so your reach grows. Expanded reach results in more leads and customers.
  - Tool 2: Twitter Advanced Search
    - You can use this search tool when running campaigns to see if your efforts sparked any conversation by looking for tweets with words comparable to tweets you post.
  - Tool 3: Hashtags
    - Another successful way to track how well a certain campaign is performing is to label it with a hashtag. Tools such as HooteSuite and Hashtracking allow you to see how many times a hashtag has been used. Furthermore, they can help you track a topic beyond what you say about it or beyond what you link to.
  - Twitter is more than just a network for engaging in the conversation and creating a positive brand image. The days of updating on-the-go tweets and leaving it at that are over. You must test and analyze all your efforts to understand whether it's even in your business' best interest to be vesting much time on Twitter.

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# Appendix B

## Summary of Research

### Focus Group

- Asked questions about logo design, color scheme, slogan and character design
- What the majority of what the focus group participants chose for all the options were what we eventually went with

### Research on legs

- Injury prevention
  - Researched different injury prevention organizations including MADD, Child Injury Prevention Alliance, and Healthy Ohio to see how they communicate with the public about their respective organizations. We felt like we could utilize their strategies for our recommended campaign
- Initial treatment and transport
  - After researching some of the EMS service providers around the state we determined the importance of the golden hour as well as the point that EMS is faced with the dilemma of patients choosing not to be treated at trauma centers.
- Hospital (trauma centers)
  - We were able to formulate a SWOT analysis based on other state and regional trauma systems, giving us an overall understanding of how trauma hospitals work and what areas we could capitalize on.
  - The concept of 24/7 service and higher quality facilities was a critical point that we learned after looking into local and regional centers.
  - We also learned that the data that they collect through these centers is crucial to providing increased care year-over-year.
  - We determined that even though we are trying to promote the systems benefits as a whole, this leg provides the most value and is probably the easiest to understand from a patient perspective.
- Rehabilitation
  - We did a SWOT analysis for this leg giving us a clearer understanding of its benefits.
  - Learned that trauma hospital rehab facilities aren't promoted enough as a part of the comprehensive care that a trauma centers provide.
- Research Leg
  - We learned how much this process adds to the value of the entire process
  - By being able to collect more information from more sources is critical to improving the level of care provided overall
  - Online research:

# Appendix C

## Focus Group Transcript

Sarah: To give you a little background our client is Ohio Trauma System. We are doing a branding for the ots. It's a statewide system connecting many entities. They want us to come up with a brand for them because they don't have one at all. But most of all they want to create a public awareness with the branding.

Jimmy: When will I use the client?

Sarah: So essentially anytime you suffer a traumatic injury.

Billy: Does this pertain to when someone gets injured and ask sto go to a specific trauma center?

Sarah: Yes. If patient is able they can request where they want to go.

Jimmy: Would the Ems people advise them otherwise?

Sarah: Yes, but they have final say. We want to remember that awareness will help when an injured person makes the decision of which hospital to go to. But we also want to keep in mind that public awareness is the ultimate goal.

Sarah: I'll just pass around the first logo. On the sheet, starting with the logos, what comes to mind?

Jimmy: Does that stand for Ohio Trauma Center?

Sarah: Well system but yea (Everyone Laughing)

Sarah: It's so quiet

Jimmy: When do you want us to stop?

Sarah: just as soon as you are done with the logo section.

Jimmy: Alright

Sarah: Let's just move onto the characters....

Jimmy: Like Mickey Mouse.

Sarah D: Number 1 looks like an apple person

Sarah: That's a good point, That you really didn't know what he was.

Kyle: Maybe add a cape, the super EMT guy

Sarah D: Looks like a baseball mascot

Sarah D: Slogan more about getting them back to normal

Jimmy: No key word in the first one, the second one is trust. That's a word I would want to hear. Quality is very broad, could associate it with another brand. I picked the second slogan. I think it could evolve and incorporate some other key word

Sarah D: I think the same thing. Number 3 doesn't work with urgency. I said number 2 would be what I would want to hear.

Louis: I do a lot of work related to the medical field. Based off of that I have been to Grant. Think Grant (quality) over some of the others because it is one of the top trauma centers in the state. If I get shot they better take me to Grant and not St. Ann's because Grant has a trauma center. So I think quality for Grant so I went with quality. But I like your trust being a key word, because I would trust Grant over St. Ann's.

# Appendix C

## Focus Group Transcript: Continued

Kyle: Liked 1 and 3 better, put a good quality right with Trauma system. Just cuz I felt like they put a more positive vibe. Trust is a good quality but if I hear someone saying just trust us I might be uneasy. I think your life matters to us sounds more positive. Depending on how you take the trust part.

Sarah D: I felt the same way. I don't trust a lot of people (laughing).

Billy: I thought 1 and 3 and leaning toward 1. I thought the second one did not sound right like the wording is wrong.

Kyle: I think it could almost be like two short statements back to back. Short and to the point.

-Unexpected accidents, Unbelievable Care

Nina: Or I don't know if this is already a slogan for someone but like, "Quality care you can trust."

Jimmy: OTS- Or even s three short adjectives. Something that begins with an O maybe, trustworthy, specialized.

Why should I go to OTS mr emt. Oh because they are Something, Trustworthy, and specialized.

Jimmy: As for the character. Human guy didn't really associate with EMT, just a nice guy smiling.

Nina: Maybe if added more to it it might be a great one to go with. bandaid is more memorable, kids are more inclined to remember and more kid oriented.

Kyle: Even the whole super bandaid or super emt guy adds a little more to it.

Sara: I kind of thought the bandaid looked like a hotdog at first.

Jimmy: I thought it was a hotdog (laughing)

Sara: Maybe make a snake like from the snake and staff. Make it friendly. Break stereotypes.

Jimmy: For the bandaid maybe just use the white peel in the back as the cape. You might want to change the texture a little to make it look more like a bandaid. And the first thing with the logos.

Sarah: yeah let's run through our color ideas. Logos with the colors. We are open to what you guys think color scheme-wise

Kyle: I think the lines make that second logo look way better.

Jimmy: Me too. Definitely

Louis: Without those lines it looked much less appealing.

Jimmy: looks like the Flyers logo. I think this one draws you in. It is kind of like a bullseye.

Nina: I think that one needs a touch of color though.

Jimmy: What did we learn in color class. The different moods or associations.

Louis: blue is comforting or calming.

Billy: Blue is calming because of the sky.

Sara: I don't associate blue with medical though.

Sarah: that is something we weren't sure about. If we should stick with colors within the industry so people know it is medical or if we should be loud and unique with the new brand.

Jimmy: What can you defend the best to the client.

Sarah: I think either one can be equally defended.

Louis: That's why I liked the Serpent staff logo. Because I think people would know that it is medical.

Kyle: Have you guys tried the one that was the second logo with the lines above and below? It made the other one look better so may also help that one out. In any color.

Nina: I may be biased but the gray and black and red looks good.

Sarah: Yeah we weren't sure if that was too OSU ish. But you guys like the snake one best.

Louis: I like that it is obviously medical.

Kyle: I actually didn't like that one as well. It almost reminded me of like a Wingding font because every letter looked so different.

Sara: I agree. I thought it was too busy. I liked the second one. Looks sleek or fast which is what you want for OTS.

Nina: I put technologically advanced for the second one.

Sarah: We also wanted to touch on the name for the mascot. You guys have any ideas for that?

Sara : Sticky (laughing).

Sarah: I definitely like the super hero idea. Great idea.

Jimmy: Just pass out different fliers with different name ideas.

Sarah: I think we did not want to come up with names until we knew which characters we would use. So it is good to get suggestions.

Jimmy: Out of them I vote bandaid.

Nina: I think if you change EMT guy.

Louis: Maybe give him a bag, stethoscope. Bandaid could be IN the bag.

Renee: We also thought we could put the logo on the guy's shirt. But we would want to wait until we came up with the logo.

Kyle: Why not combine the characters? The bandaid can be the little side kick.

Sara: Let's get sticky...

Nina: I kind of thought a duo would be a good idea.

Sarah: I thought so too. Once you guys brought up the super hero idea.

Jimmy: The bandaid reminds me of the Microsoft paperclip

Louis: give him goggles or something

Sara: I like the goggles because then he can give you safety tips. Eye trauma avoidance. Be the side kick safety tip guys.

# Appendix D

## Interview with Dr. Yellin (Miami Valley Hospital)

Nicole: So our first question would be, do you think most people know the difference between a trauma center and a regular hospital?

Dr. Yellin: You mean like the average person out on the street? Probably not.

Nicole: Do you think there are key difference we should point out when we are trying to make people more aware?

Dr. Yellin: Yeah. First of all a serious injured patient is very complicated and so there are a lot of different people involved. It's sort of a group effort. And a trauma center, there are different designations, with a level 1 being the highest, that is going to have all of the various people and resources available to treat somebody like that. And the treatment has to be done very rapidly and you want to have people who are very experienced and who are doing that all the time. If you go to a smaller hospital occasionally they would get a patient like that, they're not going to have all the pieces that you need probably to optimize caring for the person. They've shown statistically, you know if you have a seriously ill patient that goes to a level 1 trauma center versus another hospital, within an hour of the trauma there is about a 25% higher survival rate if you go to a trauma center. But there are so many different pieces involved that having the right type of position there, you know there's an emergency room, a trauma surgeon, a neurosurgeon, an interventional radiologist, an anesthesiologist, an ICU, and they all have to be available immediately. We have someone there all the time. And a small or medium sized hospital they're not going to have that. So your chance of survival is not as good at a place like that.

Nicole: And as I mentioned last night, we were talking about how a lot of people would choose to go to their local hospital instead of a trauma center when they are conscious. Have you ever had anything happen like that or any similar frustrations?

Dr. Yellin: I have not. I mean I'm sure that happens. But that's probably more people picking them up or people in the ER position would run into.

Nicole: Why do you think people don't know about trauma centers? Is it just lack of information or they way the information is being presented?

Dr. Yellin: It's probably just not on people's every day radar screen. That kind of information, if you wanted to, I'm sure you could look it up on the internet. But most people are just living their life and suddenly something comes up and they're never even thinking about it probably. But in Ohio there's only maybe 10-12 level 1 trauma centers. In Dayton, Miami Valley is the only one, and then in Cincinnati there's UC. But pediatrics is a whole different thing. I don't think there's any places in Ohio that are level 1 in both pediatrics and adults.

Nicole: Oh I had know idea that they were different.

Dr. Yellin: Oh yeah, the treatment of kids is totally different. It's a whole different training. There's pediatric surgeons, pediatric neurosurgeons, pediatric everything. And so there are very few level 1 pediatric facilities in Ohio. There's not one in Dayton, there's one in Cincinnati and Columbus and maybe Cleveland. But there are probably only like 3-4 in the whole state. Dayton Children's is a bit of a lower level, they're probably set up to treat most things, but part of a level one center is not just about treating the patient, but you have to have a lot of quality assurance and committees and research trying to make sure that your outcomes are trending the right way. There's a lot of peer review that maybe even a level 2 wouldn't have. But I would say most people are not even thinking about it. It probably would be useful to have some public service announcements about that. I would figure someone who's really injured is probably not saying "Oh I want to go to this hospital or that hospital".

Nicole: So we have a zero dollar budget, do you have any suggestions about ways you think would be particularly effective about getting that information out?

Dr. Yellin: Well that's tough without money.

Nicole: We have a lot of man power though!

Dr. Yellin: So a zero dollar budget does that mean you can't print anything?

Nicole: Well we're not really sure. We assume that our client would have access to printers and basic pamphlet making materials.

Dr. Yellin: You know with the internet, people have to actually and most people probably even ignore things like that. I don't have a good answer for that one. Probably all the usual things, print ads. People are always watching TV though, but you don't have any money. You could maybe do a news expose if you presented it to them. Like, this is a problem we think exists, the lack of community awareness. Would you want to maybe do this as an interest piece, maybe as a public service?

Nicole: That would be great! Well thank you for all of your information and have a great day.

# Appendix E

## Interview with Shannon Judy (Ohio State University Trauma Center Nurse)

February 6, 2013

What do you think would help make people more aware?

Advertising.

Information from their insurance companies when they sign up for insurance.

Why do people not know?

Lack of advertising.

Inside type of thing.

How much better are trauma systems based on your experience?

A trauma center is just that. They have specific protocols that they must follow and the staff/surgeons are all trauma qualified unlike a regular hospital.

They have better equipment.

Ross and James Hospitals are granted money unlike OSU's medical center because they specialize in specific areas and are research based.

Insurance differences?

No, she doesn't believe so.

Location definitely plays a part on the type of client that comes to a trauma centers.

Clients are stabilized and then brought to a trauma center.

People differentiate hospitals by location, the outside of the building (i.e. riverside is prettier than Grant b/c Riverside.)

Level 1 is critical. Level 2 examples : broken legs, facial fractures, car accidents.

One may think that they can go their local hospital for a broken leg, but at a Trauma Center, they have better equipment. They have trauma bays unlike the other hospitals. Their doctors are more experienced. You risk complications if you go to a non-trauma center.

# Appendix F

## Estimated Budget

### Web page : to make people find the information easily

Web page	0	: Highly recommend to use "Ohiotraumasystem.org" URL address : Ask to Web design majoring students if they could voluntarily make it
	US\$ 5.99	: Domain name, design, and upkeep \$5.99 per month (Suggestion)
<b>Total Cost</b>	<b>0</b>	

### Social media (facebook & twitter)

Facebook	0	: Only need email account - ohiotraumasystem@gmail.com
Twitter	0	: need email account - ohiotraumasystem@gmail.com and an twitter account - Ohio_TS > Facebook and Twitter are linked together, so only one person needs to tweet twice per day
Youtube Video	0	: actors/actresses/recording staffs-nurses, doctors (volunteers) : webcam (use phones/cameras already have) : ask "Film major students" to do the art project with Ohio Trauma System
<b>Total Cost</b>	<b>0</b>	

need 1 person to update and answer the Q&A for the website and social media

### Brochure

Prints (pamphlet)	0	: easily accessible from many facilities : Most Catholic churches print their own information session papers, so if we just go and tell them the system and story, they will put it in, which costs zero. : Ask doctors and nurses to print few copies and put the brochures in the offices. : Both colored and balck&white versions look great. Either is fine. : When police officers, fire fighters and doctors go to schools to educate students, ask them to print and bring it.
<b>Total Cost</b>	<b>0</b>	

### Precaution Class at elementary/middle/high schools & colleges

Fire Department	0	: accessible and easily ask them to mention the OH trauma system
Police Department	0	
Nurces and doctors	0	
Red Cross	0	
School Infirmary	0	
Prints (pamphlet)	0	: easily accessible from many facilities
<b>Total Cost</b>	<b>0</b>	

need one person to make training ppt & speech ppt

### Public Relations (PR)

Writer or Interview	0	: need one person to write about Ohio Trauma System and how it works
Contact Columbus Dispat	0	: Free by email (We already contacted them and columnists said we just need to send them the stories. After they read, they'll decide whether to publish it or not)
<b>Total Cost</b>	<b>0</b>	

need one spokesman either to do an interview with columnist or to write a story about OH trauma system

# Appendix G

## CREATIVE BRIEF-GENERAL

Date 5/15/2013

Client Ohio Trauma System

Project Title Ohio Trauma System Branding

Point Person Timothy Erskine

**OVERVIEW OF PROJECT** Ohio Trauma System has yet to have a brand or brand personality. Through various tactics and advertising materials we will create a brand for the unnoticed system.

**OBJECTIVE** Ultimate objective is for the branding and creative to create awareness for the Ohio public, and the projected result will be public support. In turn the system can attain legislation changes with the public backing it up. This will help provide funding so that the system can continually improve.

**AUDIENCE** All Ohioans. Specific targets include: kids 1-17 years old (primarily characters will be used here as creative tactic). Also a target audience of mid to young adults ages 18 – 44 years, and 45 years and older.

### STRATEGY

- Visual aid will help familiarize people with the system, thereby increasing chances of public support.
- This will help system attain their long-term goals related to legislative changes and support
- 24/7 team created Logo with Ohio map because Ohioans have strong connection and pride with their state.
- In addition, by including the strong heart beat shape, it even strengthens the reliability on the high quality of the trauma service.
- There is a catchy slogan under the logo, “Unexpected accidents. Unbelievable care.” With the rhymed but realistic slogan, people will even more pay attention to and remember the Ohio Trauma System.
- Brochures make a large impact because they will be distributed to all offices, injury prevention, and rehab centers via email or website

### TACTICS

- Logo and Slogan: The logo will be very useful whenever the Ohio Trauma System has events and can be used for the cover page of the facebook.
- Characters (Billy the bandage) and Brochure: These characters can be used for profile picture on facebook and twitter. On the brochure, the logo, slogan and characters are included with contact number and Ohio map, marking the location of the trauma hospitals.

**KEY MESSAGE** First and foremost, remember the brand. Know that the system provides exceptional care. Trust your trauma system.

**TONE/MANNER** A fun tone throughout the campaign. Not too humorous because of the serious matter at hand, but a fun twist to captivate and keep the audience’s attention. Characters contribute the light-hearted part of the campaign. The slogan captures the serious impact that the system really makes.

**MANDATORIES/EXCLUSIONS** Ensure we treat this as a statewide system. Do not pay special attention to certain entities or regions excluding any others.

**BUDGET** \$00.00. Resources available.

#### **QUANTITY**

Emergency man and Billy the Bandage sidekick = 1 but look to provide different versions in the future (For example Emergency Woman, Holiday versions, etc.)

Logo and Slogan = 1 but will be included on all materials

Brochures = unlimited supply

#### **MILESTONES**

- Education campaign launch with characters as main theme
- Needed for presentations
- Students/kids will remember the brand more when they associate with characters
- Special events and holidays with characters
- Logo and slogan will be included on all materials
- Visual aid will help familiarize people with the system, thereby increasing chances of legislative support

# Logo and Slogan



Unexpected Accidents, Unbelievable Care

# Brand Characters

## Emergency Man



## Billy the Bandage





# THE OHIO TRAUMA SYSTEM

## Unexpected Accidents. Unbelievable Care.

### WHY TAKE SERIOUSLY INJURED PATIENTS DIRECTLY TO A TRAUMA CENTER?

- Most traumatic injuries cannot be properly cared for in a non-trauma center hospital.
- Trauma centers have 24-hour availability of emergency medicine, surgeons, specialized equipment and operating rooms.
- Trauma surgeons are the most practiced at executing trauma operations.

### WHO IS A TRAUMA PATIENT?

A trauma patient or trauma victim is a person who has suffered an injury that:

- 1) Poses a significant risk of loss of life; loss of limb; permanent disfigurement; or permanent disability
- — and — —
- 2) Is caused by blunt or penetrating injury; exposure to electromagnetic, chemical or radioactive energy; drowning, suffocation or strangulation; or a deficit or excess of heat

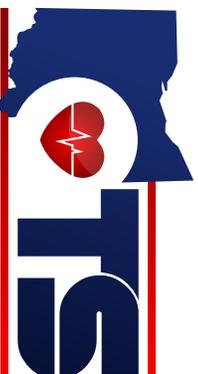
### DID YOU KNOW?

Trauma centers have been proven to reduce mortality of seriously injured people by as much as 25%?

Injury is the leading cause of death among people ages 1 – 44 years.

There are six regional trauma systems in Ohio:

Northwest Ohio Regional Trauma Registry • Northern Ohio Trauma System • Northeast Ohio Regional Trauma Network • Central Ohio Trauma System • Tri-State Trauma Coalition • Southwest Ohio Regional System



The law requires that all trauma victims be transported directly to a trauma center

### WHAT ARE THE LEVELS OF TRAUMA CENTERS AND HOW ARE THEY DIFFERENT?

- Trauma centers are designated as Level I through Level IV. The Ohio Trauma System only has Levels I through III.
- The differences in levels are based on the depth of the resources available to treat the trauma victim.
- The differences in the levels are not based on quality of care – all trauma centers are required to have a commitment to high quality of care.

**Level I** – A regional resource trauma center that must have the capability of providing total care for every aspect of injury, from prevention through rehabilitation. Level I trauma centers also have responsibility of providing leadership in education, research, and system planning.

**Level II** – A trauma center that provides initial definitive trauma care, regardless of the severity of the injury. Depending on location and available resources.

**Level III** – Level III trauma centers are meant to serve communities that do not have immediate access to a level I or II trauma center. Level III trauma centers can provide prompt assessment, resuscitation, emergency operations and stabilization of the trauma patient, as well as arrange for possible to a facility that can provide a higher level of definitive trauma care.

### There are three age groups for trauma patients:

- Pediatric** — Age 0 – 15 years
- Adult** — Age 16 – 69 years
- Geriatric** — Age 70 years and older

# DID YOU KNOW?

Trauma centers have been proven to decrease mortality of seriously injured people by as much as 25%.



## Advantages of the Ohio Trauma System

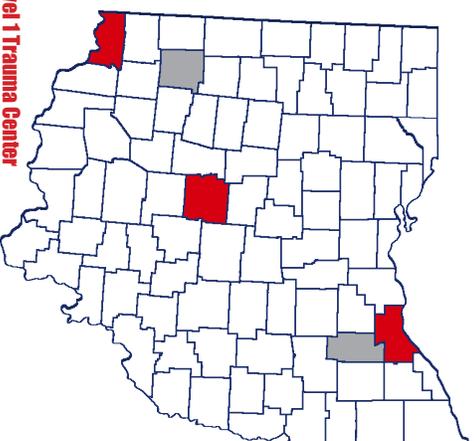
Physicians and staff are on site 24 hours.

A pool of more than 200 physicians is available.

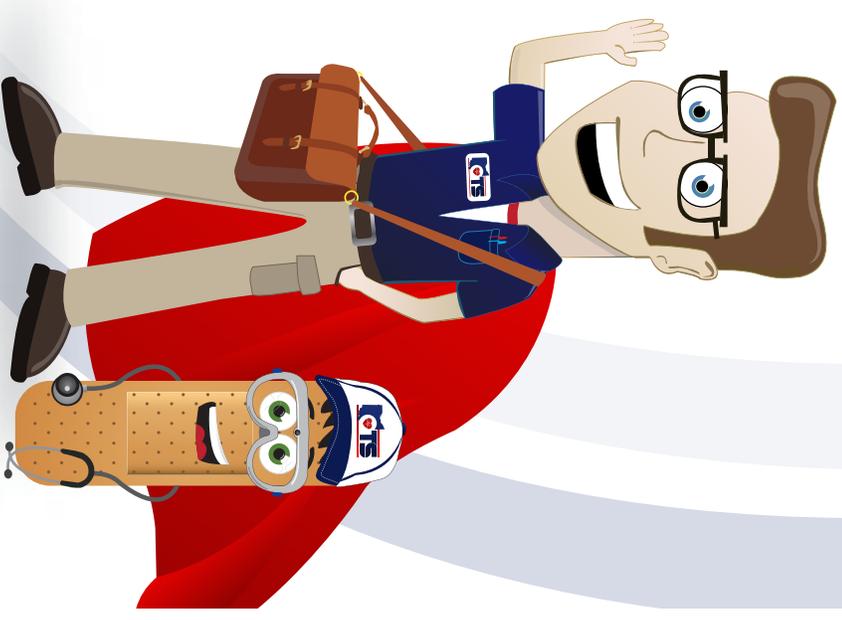
Specialized equipment and operating rooms available at all times.

Doctors are able to suggest top quality rehabilitation centers based on specific patient needs.

### Pediatric Trauma Centers



1: Level 1 Trauma Center  
2: Level 2 Trauma Center



To learn More:  
[ohiotraumasystem.org](http://ohiotraumasystem.org)

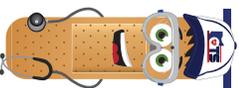


# THE OHIO TRAUMA SYSTEM

## Unexpected Accidents. Unbelievable Care.



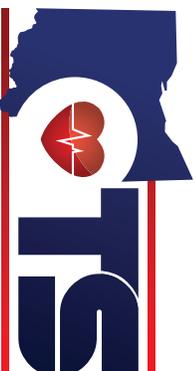
### DID YOU KNOW?



Trauma is a leading cause of death in children older than 1 year in the United States, with head trauma representing 80% or more of the injuries.

### DID YOU KNOW?

There are six trauma systems in Ohio that specialize in Pediatric trauma care?



The law requires that all trauma victims be transported directly to a trauma center

## Pediatric Trauma Centers

### Akron Children's Hospital (Level 2)

1 Perkins Square Akron, Ohio 44308  
330-543-1000

### Children's Medical Center of Dayton (Level 2)

1 Childrens Plaza Dayton Ohio 45404  
937-641-3000

### Cincinnati Children's Hospital Medical Center (Level 1)

3333 Burnet Ave. Cincinnati, Ohio 45229  
513-636-4200

### Metrohealth Medical Center (Level 2)

2500 Metrohealth Drive Cleveland, Ohio 44109  
216-778-7800

### Nationwide Children's Hospital (Level 1)

700 Childrens Drive Columbus, Ohio 43205  
614-722-2000

### University Hospital Rainbow Babies and Children's Hospital (Level 1)

11100 Euclid Ave Cleveland, Ohio 44106  
216-844-1000

# Appendix H

## CREATIVE BRIEF-VIDEO

Date 05/15/2013  
Client The Ohio Trauma System  
Project Title Ohio Trauma System Branding  
Point Person Timothy Erskine  
Client Approvals

**OVERVIEW OF PROJECT** Ohio Trauma System lacks a branding strategy. Through video advertisements a brand will be created for the unnoticed system.

**OBJECTIVE** The ultimate objective is to create awareness of the Ohio Trauma System among Ohioans, the projected result being public support. In turn the system can attain legislation changes with the public's support. This will help provide funding so that the system can continually improve.

**AUDIENCE** All Ohioans. Specific targets include: kids 1-17 years old, mid to young adults ages 18 – 44 years, and 45 years and older.

### STRATEGY

- Humorous and witty video campaign will catch audience attention to raise awareness.
- The slogan, "Unexpected accidents. Unbelievable care." Will appear along with the OTS logo at the end of all videos so that viewers will begin to recognize these as belonging to the Ohio Trauma System.

**TACTICS** Videos will be created and uploaded to the Youtube account. May be aired as commercials after public support has increased and a larger budget is acquired. A sample storyboard is attached. OTS will seek out videography schools and hold competitions for creating the commercials as an opportunity for students to build their resumes.

**KEY MESSAGE** First and foremost, remember the brand. Know that the system provides exceptional care. Trust your trauma system.

**TONE/MANNER** Videos will be lighthearted and even comical. We do not want to show any graphic images in case young children are present during the daytime hours when the commercial would be shown. Humorous videos will attract viewer attention in a positive way.

**MANDATORIES/EXCLUSIONS** Ensure we treat this as a statewide system. Do not pay special attention to certain entities or regions excluding any others.

**BUDGET** \$00.00. Resources available.

### QUANTITY

YouTube Videos = 1 per month

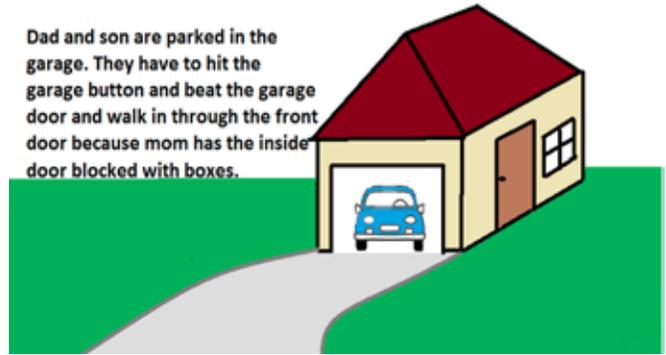
### MILESTONES

- Schools should be contacted and commercials created before week 30.
- Youtube account should be active and have video content during week 30.
- The goal is to acquire "thumbs up" and followers

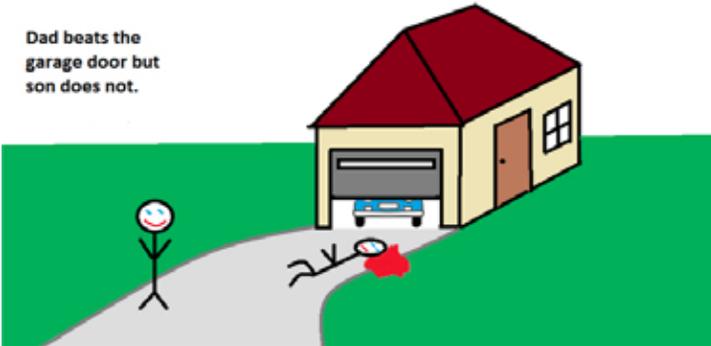
Dad and son come home after running errands for Mom.



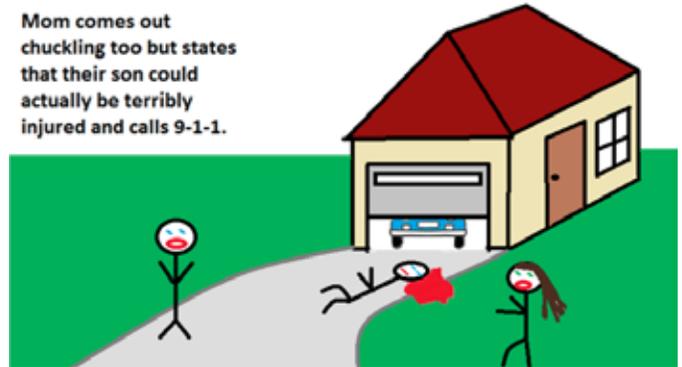
Dad and son are parked in the garage. They have to hit the garage button and beat the garage door and walk in through the front door because mom has the inside door blocked with boxes.



Dad beats the garage door but son does not.



Mom comes out chuckling too but states that their son could actually be terribly injured and calls 9-1-1.



Ambulance arrives to take the son to a trauma center.



Unexpected Accidents, Unbelievable Care  
OHIO TRAUMA SYSTEMS

# Appendix I

## CREATIVE BRIEF-WEBSITE

Date 5/15/2013

Client The Ohio Trauma System

Project Title Ohio Trauma System Branding

Point Person Timothy Erskine

Client Approvals

**OVERVIEW OF PROJECT** Ohio Trauma System lacks of a brand image and a channel to communicate its value to Ohioans.

**OBJECTIVE** The ultimate objective is to create awareness of the Ohio Trauma System among Ohioans, the projected result being public support. In turn the system can attain legislation changes with the public's support. This will help provide funding so that the system can continually improve.

**AUDIENCE** Everyone who using internet in Ohio

### STRATEGY

- Create web site with clear interface that can easily be read.
- All information from other tactics will be available online.
- Another way for the public to donate

**TACTICS** Web site can be designed by using sample layout provided by website providers with low price. Advanced design by professional website designer could be implemented after public support has increased and a larger budget is acquired at a later date. A sample webpage layout is attached. OTS can also seek for computer sciences major students and hold competitions for creating the website as an opportunity for students to build their resumes.

**KEY MESSAGE** First and foremost, remember the brand. Know that the system provides exceptional care. Trust your trauma system.

### tone/MANNER

- Color tone will be colorful.
- It should have a clear and simple layout that can be read easily

**MANDATORIES/EXCLUSIONS** Ensure we treat this as a statewide system. Do not pay special attention to certain entities or regions excluding any others.

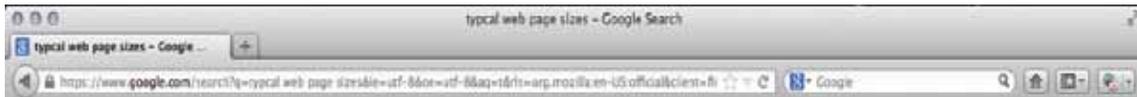
**BUDGET** \$00.00. Resources available. \$5.99/month to maintain the website

QUANTITY

One, but information should be updated consistently

MILESTONES

- Website should be active in week 1 so it can be spread through Facebook and Twitter
- Get high traffic of the website that can be tracked by “Google Analytics”




*Unexpected Accidents. Unbelievable Care.*





**DID YOU KNOW?**

Injury is the leading cause of death among people ages 1 – 44 years.



**Reports and Publications**

Donec id ante quis est feugiat gravida ut ac felis. In hac habitasse platea dictumst. auctor tristique. Curabitur consectetur tristique semper. Etiam nec dolor justo. Morbi a lacinia sem.

*Read More...*

**Regional Trauma Systems**

Donec id ante quis est feugiat gravida ut ac felis. In hac habitasse platea dictumst. auctor tristique. Curabitur consectetur tristique semper. Etiam nec dolor justo. Morbi a lacinia sem.

*Read More...*



**Click Here**  
to view trauma center locations

Contact Us | About Us | Legislation | Privacy Statement | How to Volunteer | Site Map | Brochure PDF  

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# Appendix J

## 2014 Trauma Survey

1. Are you a current resident of the State of Ohio?

A. Yes

B. No

2. Are you or an immediate family member an employee of the Ohio Department of Public Safety or a member of the Ohio Society of Trauma Nurse Leaders or any of its divisions? Divisions include the Bureau of Motor Vehicles, Emergency Management Agency, Ohio Emergency Medical Services, Ohio Homeland Security, Ohio State Highway Patrol, Investigative Unit, and Office of Criminal Justice Services.

A. Yes

B. No

3. Which category best describes your age?

A. Under 18

B. 18-24

C. 25-34

D. 35-44

E. 45-54

F. 55-64

G. 65+

4. In what ZIP code is your home located? (enter 5-digit ZIP code)

5. Are you male or female?

Male

Female

6. Which of the following do you believe is the leading cause of death for people under the age of 45 that live in Ohio?

A. Injuries

B. Cancer

C. Influenza

D. Diabetes

E. Heart Disease

F. HIV/AIDS

G. Other

7. Which of the following do you believe is the leading cause of injury-related death for people under the age of 45 that live in Ohio?

- A. Homicides
- B. Falls
- C. Drowning
- D. Car Crashes
- E. Suicides

8. If you were badly injured, how confident are you that the hospital closest to your home would be able to provide you with the best care for your injury?

- A. Extremely Confident
- B. Very Confident
- C. Somewhat Confident
- D. Not Very Confident
- E. No Confidence

9. Do you think the hospital that is closest to your home is a trauma center?

- A. Yes
- B. No
- C. Not Sure

10. If you were badly injured, how important would it be that an ambulance be required to take you to a trauma center, even if it's not the closest hospital?

- A. Extremely Important
- B. Very Important
- C. Somewhat Important
- D. Not Very Important
- E. Not At All Important

11. From your home, how long would it take you to reach the nearest trauma center by ambulance in the event of a serious or life threatening injury?

- A. Less than 15 minutes
- B. 15-29 minutes
- C. 30-44 minutes
- D. 45-59 minutes
- E. Greater than an hour

# Appendix K

12. If you learned that the hospital closest to your home was not a trauma center, how concerned would you be?

- A. Extremely Concerned
- B. Very Concerned
- C. Somewhat Concerned
- D. Not Very Concerned
- E. Not At All Concerned

13. How Important is it for all people in Ohio to live within 60 minutes of a trauma center?

- A. Extremely Important
- B. Very Important
- C. Somewhat Important
- D. Not Very Important
- E. Not At All Important

14. How much money per year would you be willing to spend in order to be sure everyone in Ohio lives within a 60 minute drive of a trauma center?

- A. Nothing
- B. Less than one dollar
- C. 1-10 dollars
- D. 11-25 dollars
- E. More than 25 dollars

15. How important is it to have an efficient statewide Trauma System in order to increase the number of saved lives?

- A. Extremely Important
- B. Very Important
- C. Somewhat Important
- D. Not Very Important
- E. Not At All Important

16. As far as you know, is there a trauma system in place in the State of Ohio?

- A. Yes
- B. No
- C. Not Sure

17. How did you hear about the Ohio Trauma System?

- A. News on TV
- B. Newspaper, Magazine
- C. Twitter
- D. Facebook
- E. Youtube
- F. Website
- G. Brochure
- H. Educational Presentation
- I. Word of mouth
- J. Others
- K. I did not know an Ohio Trauma System is existing

18. What do you think is the slogan from the Ohio Trauma System?

- A. Unexpected Accidents. Unbelievable Care.
- B.
- C.
- D. I don't know

19. Would you be willing to support the Ohio Trauma System with any of the following options?

- A. Follow the Ohio Trauma System on Twitter or like it on Facebook
- B. Monetary donation
- C. Volunteer for the educational campaign
- D. Others
- E. I would not be willing to support the Ohio Trauma System

Incentive Information

20. We thank you again for completing this survey and would like to offer you the chance at winning a \$25 dollar gift card. Are you interested in this opportunity?

- A. Yes
- B. No

21. Please provide us with the following contact information. Winners will be notified by contact method of choice and information on receiving your gift card will be provided at that time.

# Appendix L

