

Sit in My Chair Toolkit

Hosting Members of Congress in Your Practice



One of the best ways to make a big splash with policymakers is by creating an experience so genuine and moving, they can't soon forget the issue and the real people at stake. That's why **the Community Oncology Alliance (COA) is thrilled to offer the "Sit in My Chair" Congressional events program.**

This effort puts the work you do every day in front of policymakers, which is exactly where it should be!

Sit in My Chair: Where Your Member of Congress Becomes a Patient for a Day

First introduced by COA in 2009, Sit in My Chair is one of the best opportunities for your practice to engage with local lawmakers, delivering a unique, lasting, hands-on experience. **Through Sit in My Chair, you will introduce your local member of Congress to all the hard work that goes into the real, every day patient experience in community cancer care!**

The program revolves around hosting your member of Congress and/or their aides at your practice and **walking them through the experience of being a patient**: arriving for the appointment and registering with staff, sitting in your waiting room, receiving a cancer diagnosis, walking through procedures with a nurse, and sitting in a chemotherapy chair to 'receive' treatment. Through this experience, policymakers get a real-world look at everything it takes to deliver cancer care to your patients.

Why is Sit in My Chair so effective? Remember: one of the key points of advocacy is to build strong and lasting relationships. Sit in My Chair does this with an unforgettable experience. It also helps your practice build a relationship with your member of Congress and strengthens our ability to effectively advocate in support of community oncology issues going forward.

Participation is easy – COA will give you everything you need!

COA will make it easy for you to execute this event with this planning guide which includes invitations and template materials. We can also provide key contacts in offices (if you don't already have them) and other logistical support as needed. Just email us!

With just a few hours of staff time to prepare for and execute a Sit in My Chair visit, you will have a member of Congress sitting in your practice before you know it. It really is that simple!

This planning packet includes EVERYTHING you need to schedule and host a Sit in My Chair event. Up first is the email invitation template. You can use this to get the program started by inviting your member of Congress to visit. After that are planning guides, talking points, follow-up thank you materials, and even media outreach content!

Act now! The coming August recess is a perfect time

In just a few weeks, members of Congress will depart DC for the August recess where they plan on traveling around their districts and giving face time to constituents.

In an era of divisive health care rhetoric and protests, Sit in My Chair gives them a positive opportunity to hear about health care issues affecting local constituents and businesses; in a private, controlled setting and with the potential for great media optics (if you/they want it). It's a win-win for everyone!

Congressional schedules fill up fast, so we need to reach out ASAP! With the August recess fast approaching, NOW is the best time to reach out to your member of Congress' office to encourage them to make time for a visit.

A template email is included below to help you send an invitation. If you don't know the best contact person or Congressional office address, COA can help. If you have questions or need information, contact Nick Ferreyros at COA nferreyros@coacancer.org.

Policymakers need to hear directly from community oncology practices. This summer, have them Sit in YOUR Chair!

SIT IN MY CHAIR! Event Planning Packet



It's easy to schedule a Sit in My Chair event!

Scheduling a Sit in My Chair event takes only minutes to get on the calendar and planned. This packet includes everything you need, including an invitation email to your member of Congress and/or their staff, a planning guide, talking points, follow-up thank you materials, and even media outreach!

One thing to remember: Don't overthink it! This is really a simple process — all you have to do is be yourselves! Members of Congress represent YOU and your patients. They do hundreds of events in district every year and the real, personal nature of your event will be wonderful. Don't overthink it and get started today!

Also, if you have a COA Patient Advocacy Network (CPAN) chapter be sure to involve them in everything. Have patient advocates on hand to talk to the representative and add a real patient face to the issues you are discussing with them.

Step 1: Invite the Member of Congress

A template email is included below to help you send an invitation. Get this out first to Congressional offices and then be sure to follow-up a day later with a phone call to confirm that they received it.

Be sure to invite the members of Congress that represent your practice location, but also consider inviting those from surrounding areas that represent your patients and staff!

If you don't know the best contact person or Congressional office address, COA can look it up. Just send us a quick email at info@coacancer.org and someone will get back to you ASAP.

The Honorable (Name)

United States Senate OR United States House of Representatives

(Building and Office Number)

City, State, ZIP

Dear *[Scheduler Name]*:

On behalf of the staff and patient constituents at [practice name] in [city name], we would like to invite the (Senator/Representative) or a member of (his/her staff) to visit our practice during the August recess to see firsthand the fantastic cancer care that we deliver the community.

Specifically, we would like to invite you to a one-of-a-kind cancer experience called "Sit in My Chair." This program – which can be tailored in length to meet your schedule – allows the (Senator/Representative) or a member of (his/her) staff to see and better understand the cancer care experience.

Our goal for this visit is to provide a greater appreciation of what cancer patients in your district and around the country experience when they are diagnosed with and treated for this

devastating disease. In addition to providing you with an opportunity to meet our clinic staff and see our practice operations in action, we hope to shed some light on the challenges we face in delivering cancer care that is local, affordable, and accessible to patients.

*We recognize that in this period of heated health care debates that district visits can be tricky. With that in mind, we want to assure you that should you be able to accommodate this request it will be positive and educational. And if you request **this visit can be private and not publicized**. Our goal is to provide a positive, informative, and productive time.*

I appreciate your consideration of my request and hope we can count on you to sit in our chair! You may reach me at (email address or phone number). Thanks for your time and reply!

Sincerely,

Patty Prevention

Practice Name and Address

Step 2: Plan Out Your Sit in My Chair Event (aka What does this all look like?)

Here are the steps for planning out a complete *Sit in My Chair* visit. The process should take one hour, with the first 30 minutes going through the actual experience and the following 30 minutes devoted to discussing big issues that impact your practice with the member and ending with your ‘asks’. If the member already has a personal experience with cancer, has already sat in a chemotherapy chair, or it is impossible to do so because of time constraints, just skip to step #5.

- I. Start like any normal patient: Have the Representative or Senator register as a normal patient. If they have a staff person or legislative assistant with them (most likely), treat them as a caregiver. The most effective approach is to make as little “fuss” as possible. Starting like this may appear a little awkward, but it is realistic and very effective.
- II. Call the member back to the treatment areas, just like a patient. The most effective approach is to bring the member back to an oncologist who explains to the member the type of cancer they have and what the treatment options are for their cancer. Tell him/her all the things they will go through — just as you would with any patient.
- III. Have the nurse come in to help, if this is your procedure. Discuss all the realities of their disease, just like you would with any patient. If any bloods are drawn, walk through this process. Then, bring the member back to the chemo area. *If possible, try to keep any congressional staff or press separate from the member at this point. It keeps the experience more focused.*
- IV. Let the member sit in the chemo chair for at least 10 minutes. Consider going through the process of hooking up an IV to make it extremely realistic! Go through all the steps and explain them. Let the member observe the treatment he/she is getting, as well as what other patients receive.
- V. Bring the member back to a conference room and briefly cover three areas using the key points from the following discussion guide.

Discussion Guide for Sit in My Chair Visits

Remember that in conducting any member or staff visit the goal is to communicate and educate in a very positive way. While many of these issues might be difficult for your practice don't project that anger on the member or staff – you are trying to build allies, not enemies!

A. **Care for patients.** Start by covering the following topics relating to the care of cancer patients:

- Treating cancer is more complex than most medical conditions — it requires an inordinate amount of oncologist time as well as that of highly skilled nurses, pharmacists, and staff.
- Talk about how patient care is coordinated, both in the clinic as well as with other medical providers. Discuss how community oncology practices are the hub of care coordination.
- Educate the Member on why chemotherapy and other cancer drugs, especially biologicals, require precise handling, preparation, and administration. Explain how critical it is that patients be closely monitored by trained professionals.
- Touch on how patients typically experience an emotional toll when going through cancer treatment. The state of their mind and quality of life are very important parts of their care.
- Emphasize the biggest message: The majority of Americans battling cancer receive care in the community oncology setting. Community oncology practices provide high quality, compassionate, and cutting-edge care.
- All of this is delivered locally – in the communities where your patients and their families live and work.

B. **Problems your practice faces in delivering care.** Next, talk specifically about the problems you face in treating patients, especially seniors in the face of cuts to reimbursement:

- Share data and patient stories as appropriate. It is appropriate during this time for the Member to hear different perspectives — patient, nurse, administrator, and oncologist. If this takes place, each should give a brief overview of their perspective.
- Topics you can highlight are: challenges to cancer patient access to care (local clinics closing, the long distance they might have to travel if your practice were not there); challenges with pharmacy benefit managers (PBMs) and impact they have on patient care (e.g. delaying delivery of medication, impeding care coordination, etc.).
- Be sure to discuss the ramifications on patient care, but also do not be reserved about talking about the pressures of running a medical practice as a small business. Consider mentioning the impact that payment cuts such as the sequester have on your operations.
- Again, keep the conversations positive but realistic!

C. **Make an ask.** When closing, be sure to explicitly solicit help from the Member — this is called the “ask.” On the next page we have pulled together as a cheat sheet to have handy in making the ask.

For the summer of 2017 we are focused on two big issues – 340B and Pharmacy Benefit Managers (PBMs). Remember when talking about these issues to focus on the patient impact. Avoid making it about a local business fight or reimbursement. This is about your patients and their cancer care.

I. Fix the 340B Drug Discount Program so that it helps patients – not hospitals.

1. The 340B Drug Discount Program gives certain clinics and hospitals that are supposed to care for high numbers of uninsured, poor, or vulnerable patients upwards of 50% discounts on the drugs they buy for these patients. It is a critically important program.
2. Unfortunately, 340B has seen a dramatic increase in recent years and is now hurting the very patients it was intended to serve. Nearly half of the hospitals in the U.S. participate in 340B, even though most of them provide little charity care.
 - Background and data on the 340B program, growth, abuses, and more can be found in the COA 340B compendium: <http://bit.ly/340bcompendium>
3. Some hospitals have realized they can make a LOT of money buying discounted 340B drugs and selling them to all patients at full price. Because of this, they have been buying up or forcing local, independent community cancer clinics - like ours - out of business.
 - Discuss your market situation with 340B and local hospital(s) that are part of it.
4. Abuse by some hospitals of the 340B program has left patients with fewer choices and less access to affordable, local cancer care. It is costing us all billions as drug prices rise to cover 340B discounts, and cancer care that was once delivered in the community has now shifted into the much more expensive hospital setting.

Ask: Fix the 340B program so that it helps patients and not hospitals. Support the recent CMS proposal to reform 340B hospital reimbursement. Also, push for greater transparency and oversight of the hospitals so that the program benefits patients, not hospital profits.

II. Stop PBM abuses that negatively impact patient care. [Note: This is relevant if your practice has a dispensing or retail pharmacy]

1. Pharmacy Benefit Managers (PBMs) are powerful middlemen corporations that manage drug benefits for over 260 million Americans. They decide what drugs are covered by insurance, how much they should cost, and how they get into patients’ hands.
2. PBMs make billions in profits as middlemen in our health care system while delivering no actual patient care. In fact, PBMs are causing many problems for patients and practices.
3. We experience firsthand the horror stories of the impact that PBMs have on patient care, including: medication delays, denials of life-saving treatments, endless hours spent on the phone with PBM bureaucracies, and more. These are the norm, not the exception.
 - Discuss stories from your patients and practice of dealing with PBMs.
 - COA has two PBM horror story compilations available that capture some patient stories:
 - Volume 1: <http://bit.ly/pbmstoriesv1>
 - Volume 2: <http://bit.ly/pbmstoriesv2>
4. Stuck in the middle of this all are very real and sick American patients with cancer who just want to get better.

Ask: Stop PBM abuses. PBMs are having an increasingly negative impact on cancer patient care and oncology practices. Help us stop PBM abuses!

A note on representing COA and CPAN at events:

We know you take the responsibility of being a community cancer advocate seriously. Nevertheless, it's important to underscore that by using COA or CPAN materials independently of or during an event or advocacy opportunity — even one organized by you — you are representing COA and CPAN.

It's important that you distinguish between personal opinion and experiences and statements you are making on behalf of COA or CPAN. During events, please try to refrain from sharing personal views not consistent with the positions of COA/CPAN in support of community oncology and the patients, practices, and communities that rely on it across the United States.

Should you have any questions about your role as a COA/CPAN spokesperson, we are here to help. We can also connect you with others in your community, help you host an event and provide assistance with learning our policy issues, so you are well prepared for your next community oncology advocacy experience.

We're here to support you just as much as you support local cancer care. If you have any questions or need more information, please contact Rose Gerber at roseg@COACancer.org.

Step 3: Take photos!

Taking photos of your Sit in My Chair event is incredibly important to spreading the word about local advocacy efforts and it also helps raise the profile of your practice. The members also like photos because it shows them engaging with constituents, and COA likes photos to showcase the great work community oncology practices are doing.

Please share any photos you take with Nick Ferreyros (nferreyros@coacancer.org) with the name of your event, names of people in the photos, date, and location of the event. Also, don't forget to share your photos on social media—Facebook, Twitter, and Instagram. Reach out to your practice's marketing department to see if they'll share photos of the event, both before and after.

Step 4: Consider Inviting Local Media

It isn't every day that your practice is visited by a member of Congress and members of his or her staff. When you participate in Sit in My Chair, you'll want to be sure you make the most of your time. One way to do this is to notify your local media about the event. Any time a congressional office is part of a compelling event in your community, most local media outlets will consider covering the story.

That said, before inviting the media check with your contact at the member's office to see if they want media to be a part of the visit. It is important to make sure they are interested in doing this so that there are no surprises. Also, ask if the office's communications director would like to handle this.

- See **Appendix A** for our guide to Contacting Local Media

Step 5: Post About the Event on Social Media

Social media offers tremendous opportunities to share your story and shape public policy, including during a visit or event with a member of Congress or any policymaker. The first step is learning what social media channels to use and how to use them to motivate others to action.

- See **Appendix B** for our full guide to using Social Media for your Sit In My Chair event.

Step 6: Thank the Member for his/her time – in person & in a follow-up email.

Don't forget to thank the Member for taking the time to visit your practice and learn about the issues impacting community oncology firsthand.

Thank them in person at the conclusion of the event as well as in a follow-up email. Let them know representatives of your practice are available as a resource anytime. Be sure to share your cards and contact information with the representative and/or any staff members.

Subject line: Thank You

To: [Member of Congress]

CC: [Relevant office staff involved in the visit or scheduling]

Email body:

Dear [Representative/Senator Last Name OR staff member who participated],

On behalf of [Practice Name] and our [total number of patients], I am writing to extend my sincere thanks for your taking the time to "Sit in My Chair" on [Date].

We enjoyed hosting you and hope you found your visit to be both enjoyable and informative. As you looked around our practice, listened to our clinicians and began to get acquainted with our work, we hope you begin to appreciate just how important it is to keep local cancer care clinics operating in our community.

Patients here and everywhere depend on community oncology. In fact, the majority of Americans battling cancer receive treatment in a community clinic. However, nearly 400 clinics have closed since 2008, with many more under threat.

Thank you again for allowing us to introduce you to community oncology and the many services we offer to patients in need in our community. We hope we can count on you to stand up for community oncology in Congress now and in the future.

Sincerely,

[Email Signature, Practice Head]

Appendix A: Contacting Local Media

It isn't every day that your practice is visited by a member of Congress and members of his or her staff. When you participate in **Sit in My Chair**, you'll want to be sure you make the most of your time. One way to do this is to notify your local media about the event. Any time a congressional office is part of a compelling event in your community, most local media outlets will consider covering the story.

Here is a quick guide on how to handle the media and contact local reporters about your event:

1. Coordinate with the member of Congress' office – they might not want media!

Once the visit is confirmed, work with your contact at the member's office to see if they would like to invite media to be a part of the visit. It is important to make sure they are interested in doing this so that there are no surprises. If so, ask if the office's communications director would like to handle inviting media or if the practice should following the steps outlined below.

2. Determine which reporter(s) to pitch.

Identify the local outlet(s) that you want to reach and then seek out the reporter's contact information. For this type of visit your main focus will probably be health care reporters, however, you might also consider community events or political reporters, as well as just the newspaper's photography department. If the outlet is small, it may not have a dedicated health reporter. In that case, the general newsroom contact is where to go with your story idea.

3. Develop your pitch email for reporters.

Here is a sample pitch email you can use to contact reporters:

Subject line: [MEMBER OF CONGRESS] to Visit [PRACTICE NAME] on [DATE]

Hello [Reporter Name],

Please join us at [practice name] on [day and time] as we host [Congressperson X] for a special, inside look at the vital cancer care patients receive at community oncology clinics like ours. This personalized educational experience called "Sit in My Chair" will explain how patients are cared for, some of the challenges community oncology faces and why Congress needs to stand up for local cancer care.

The majority of Americans battling cancer receive treatment in a community oncology clinic like [practice name]. However, nearly 400 community oncology clinics have closed since 2008, with many more under threat. Working with the Community Oncology Alliance (COA) we are organizing physician and patient voices to advocate for cancer care in their own communities—including right here in [CITY or REGION].

For more information and to RSVP, please contact [NAME] at [EMAIL] or [PHONE NUMBER]. Thank you for your consideration.

[Email Signature]

4. Send your email pitch to reporters.

Send a separate email to each contact on your list about a week before your event. Make sure you have included your phone number and email address for follow-up questions.

5. Call to follow-up with reporters.

Follow-up is important. The mention or story about your event is unlikely to materialize unless you call and make a compelling pitch that includes offering an interview with a spokesperson and suggestions for visuals. An effective follow-up call will stress why preserving community cancer care is important and interesting to readers.

6. Work with the reporter and prepare your spokesperson.

Once you get the green light from a reporter, work with him/her to fully understand the angle that he/she wishes to pursue. As the media contact, you are the designated liaison between the reporter and any requested interview subjects – patients or practice staff. It's your charge to alert the interview subject of the request and to help prepare them for the interview.

7. Slightly easier OR if pressed for time, send a Media Advisory.

You can send a media advisory to a large list of reporters notifying them about the event. Do this about 2-3 business days prior to the event. The following is a template media advisory that you can email. It is slightly less personal but still an excellent way of letting the media know about your event.

[MEMBER OF CONGRESS/SENATOR NAME] ACCEPTS [PRACTICE NAME] INVITE TO "SIT IN MY CHAIR" ON [DATE]

What: Local oncology practice [NAME] will provide a first-hand account and demonstration of what it's like to be a cancer care patient. This unique event is part of the Community Oncology Association's "Sit in My Chair" program to introduce policymakers and others to the important role community oncology plays in the lives of patients in local communities like ours.

Why: The majority of Americans battling cancer receive treatment in a community oncology clinic. However, nearly 400 community oncology clinics have closed since 2008, with many more under threat.

When:

[DATE], [TIME]

Where:

[BUILDING]

[ADDRESS]

[CITY], [STATE] [ZIP]

Who:

Speakers include:

[NAME], [TITLE], [PRACTICE/ORGANIZATION], [TOPIC SPEAKING ON]
[NAME], [TITLE], [PRACTICE/ORGANIZATION], [TOPIC SPEAKING ON]
[NAME], [TITLE], [PRACTICE/ORGANIZATION], [TOPIC SPEAKING ON]

RSVP:

To RSVP or to learn more contact [NAME] at [EMAIL] or [PHONE NUMBER].

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About the Community Oncology Alliance (COA)

The Community Oncology Alliance (COA) is a non-profit organization dedicated solely to preserving and protecting access to community cancer care, where the majority of Americans with cancer are treated. COA leads community cancer clinics in navigating an increasingly challenging environment to provide efficiencies, patient advocacy, and proactive solutions to Congress and policy makers. To learn more about COA visit www.CommunityOncology.org.

About [PRACTICE NAME]

[Add two to three sentences about the practice and the community it serves. This helps any reporter covering the event write about the practice in more detail. Include your website.]

8. Prepare a Follow-Up Press Release

A short, compelling news release is an effective way to share the success of your event. Sending a news release immediately after your event provides an opportunity to follow-up with media that did not attend. It also provides an opportunity to offer interviews and/or spokespersons as resources for future cancer stories. Including photos and quotes from the speakers is a nice touch that increases the chances your event will be covered.

Please keep in mind that media may or may not attend, but may still be interested in covering issues facing community oncology. Establishing and fostering relationships with the media is always a good idea, so utilizing these resources and keeping local media informed is a good habit to start and keep.

What follows is a template press release you can customize and use to send out after your successful event. If you change this significantly, please share any changes with Rose Gerber (roseg@coacancer.org) prior to distributing.

[Practice Logo]

Contact:

[CONTACT NAME]

[CONTACT PHONE NUMBER]

[CONTACT EMAIL ADDRESS]

LOCAL ONCOLOGY PRACTICE [NAME] HAS [NAME OF POLICYMAKER] "SIT IN MY CHAIR"

Local Cancer Clinic Shows Policymakers Firsthand the Benefits of Local Cancer Care as Community Oncology Clinics Threatened

[Local City, State] – [Date of Release] – Local oncology [practice name] hosted [name of policymaker/policymaker's office] today at [LOCATION OF PRACTICE] in [CITY] to share firsthand what it's like to face a cancer diagnosis and treatment in a community oncology setting. The unique event and experience, called Sit in My Chair, brings physicians and office staff together with a local policymaker so they can also learn about the critical issues facing the delivery of cancer care and treatment by community oncology clinics.

For patients with cancer, having care that is close to home is especially important – a task that has become tougher as nearly 400 community oncology clinics have closed nationwide since 2008, due in part to Medicare payment policies. At the same time, many hospitals and health systems are consolidating, leaving fewer locally owned or managed options for cancer patients.

"It was an honor to discuss the value of community oncology with [Congressman/woman X's office]. At [OUR PRACTICE] we are committed to giving our patients quality care right here in [CITY]," said [FIRST LAST], [title]. "As [NURSE/PHYSICIAN/ADMINISTRATOR], I am excited to help make our voice heard."

The Sit in My Chair educational events are being coordinated by the Community Oncology Alliance Patient Advocacy Alliance (CPAN), a national patient advocacy group that gives patients, survivors and others a vital voice to share their experiences and advocate for community cancer care. There are active CPAN chapters across the country and advocates are regularly in Washington, D.C. talking to members of Congress and federal policymakers about the importance of community oncology, where the majority of patients receive their care.

Rose Gerber, director of patient advocacy and education for COA, a non-profit organization dedicated solely to preserving and protecting access to community cancer care, cited the need for changes in how Medicare pays for cancer care for its beneficiaries. When community oncology clinics close, patients are often treated in hospitals, where treatments can cost 50 percent more for both patients and taxpayers.

"[PRACTICE] helps [CITY] patients receive state-of-the-art, personalized care close to their homes. All too often, they're the ones that suffer the most when local, affordable cancer care is threatened by misguided government policies," Gerber said. "It is important that Congress truly understand what community oncology practices go through and we are thankful that [MEMBER NAME] took the time to sit in the chair of cancer patients."

For more information on CPAN, please visit www.coadvocacy.org.

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About the Community Oncology Alliance (COA)

The Community Oncology Alliance (COA) is a non-profit organization dedicated solely to

preserving and protecting access to community cancer care, where the majority of Americans with cancer are treated. COA leads community cancer clinics in navigating an increasingly challenging environment to provide efficiencies, patient advocacy, and proactive solutions to Congress and policy makers. To learn more about COA visit www.CommunityOncology.org.

About the COA Patient Advocacy Network (CPAN)

The Community Oncology Alliance Patient Advocacy Network (CPAN) was created in recognition of the vital role patients should play in advocating for access to local, affordable cancer care for all. CPAN is a non-cancer type-specific, national network representing patients, cancer survivors, caregivers, family members, medical and oncology professionals, and other advocates. To learn more visit www.COAadvocacy.org.

About [PRACTICE NAME]

Add two to three sentences about the practice and the community it serves. This helps any reporter covering the event write about the practice in more detail.

Appendix B: Promoting Your Event on Social Media

Social media offers tremendous opportunities to share your story and shape public policy, including during a Sit in My Chair visit or event with a member of Congress or any policymaker. The first step is learning what social media channels to use and how to use them to motivate others to action.

Twitter

Cancer advocacy was made for a platform like Twitter—hashtags organize conversations, and formal Twitter chats offer a place for like-minded individuals to gather around a similar mission/goal. Use Twitter when trying to share information in a brief manner or trying to find people who support similar policies. This platform is not made for in-depth discussions on the ins and outs of community oncology clinics shutting down nor for your long-form personal cancer story. Twitter is short, to the point, and a moment in time.

Here are some best practices when actively advocating for community oncology on Twitter:

- Keep it short. A best practice is to aim for between 70 and 100 characters so others can easily share your tweet with their own comments in their tweet.
- Attribution matters. Mention people, policymakers, or organizations that are referenced in the tweet with “@”. This will ensure follows and more retweets in the future—but make sure these are fully vetted handles before adding to your tweet.
- Add relevant hashtags. Think of hashtags as a signal that your tweet is about a certain topic. Twitter users often follow or search by hashtag. Using hashtags will ensure your tweets appear in ongoing and appropriate conversations.
 - Monitor conversations to make sure you’re using the most up-to-date hashtags.
 - Don’t include more than two hashtags in one tweet.
 - Don’t include all hashtags at the end of the tweet, weave them throughout the tweet naturally.
 - Key hashtags to know include #Cancer and #CommunityOncology
- Grab attention. Facts and statistics are appealing on social media and great for sharing.
- Schedule some tweets, but not all. If you are more than a casual Twitter user, you may want to look into using free programs such as Hootsuite and TweetDeck. These services allow you to schedule several tweets for the week to ensure a steady stream of information, but you’ll want to be sure to tweet in real-time as well to engage with followers. Retweeting content and engaging in real-time conversations will help to foster relationships while building followers.
- Give context. Ensure your tweet provides enough context about what the content means for COA and cancer survivors writ large.
- When possible, use a visual. If there is a chart or photograph available, append it to the tweet. Visuals, infographics or short videos increase the likelihood that users will engage with your tweet.
 - Note: Twitter enables users to add up to four photos to create a mini collage. Photos automatically appear in followers’ Twitter streams, and will automatically crop to a smaller size.
 - If you have a video, share the YouTube link to enable playback within Twitter clients.

Facebook

Similar to Twitter, Facebook is a great social media platform to organize your thoughts, message and to share your story on the importance of cancer advocacy. You can utilize Facebook to find other cancer advocates, stay up-to-date on important issues, and to start an on-going conversation with other advocates. Facebook is also a good platform for sharing visuals—whether that be photos from a Hill visit or video footage from a meeting. These visuals are pivotal for your advocacy work and lend powerful imagery to get your point across.

Here are some best practices when actively advocating for community oncology on Facebook:

- **Make it personal.** Facebook is a unique platform in the sense that it's ideal for storytelling; share your personal connection to community oncology, but keep in mind your audience and make sure your posts are appropriate.
- **Share links/articles.** Facebook allows for you to share articles, links, videos, and photos easily. Whether you read an article about an upcoming bill vote, or come across photos from a meeting, share them, so your broader network has a chance to check them out and share as well.
- **Add relevant hashtags.** Like Twitter, use hashtags in your posts—this will allow for other advocates to check out what's trending in terms of community oncology and to get involved in the conversation.
- **Tag friends/other advocates.** Whether they are your friends or other advocacy organizations, a great way to spread the word of what you're advocating for is to tag (using the "@" symbol) those individuals on Facebook. This will ensure that they see your post and can react accordingly.

YouTube

YouTube is particularly important for advocacy work because it allows you to share impactful videos. You can easily— with prior permission – record little snippets on your mobile device to upload. Again, community oncology advocacy rests on making it personal, and that's exactly what these videos will accomplish; the ability for you to share your story with other advocates advocating for the same cause.

Here are some best practices when actively advocating for community oncology on YouTube.

- **Get permission.** If you do wish to record a meeting or visit, make sure you get permission first, and specify that you plan to upload this to YouTube.
- **Keep your audience in mind.** Like most of your social media posts, keep your audience in mind – who do you wish to see this video? That will also help dictate your content— what to film, and what not to film.
- **Capture steady and clear footage.** It may be difficult to film during a meeting or visit, but do some tests before you hit 'play' – make sure the sound is up, and that you're holding your mobile device steady.

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