

Episode 14 – MedBoard Matters Retrospective

Intro music: 0:00

Podcast introduction: 0:09

Hello and thank you for joining me. I'm Jean Fisher Brinkley, Communications Director for the North Carolina Medical Board, and this is MedBoard Matters.

This is a special episode of MedBoard Matters because – it's our birthday. The month of September marks one full year of podcast episodes, and we thought it appropriate to pause and observe that milestone. Let's face it, many podcasts don't make it. So, we at NCMB are pretty pleased that we're still here, producing episodes that we hope and believe have value for patients and medical professionals alike.

That's not to say that things have worked out exactly as we expected. But does anything?

When we started out we had a plan. It was pretty simple – we were going to use the podcast to focus on the mission and responsibilities of the medical board. The work this organization does touches the lives of pretty much every person in the state. The trouble is, hardly anyone knows that, or even knows what the North Carolina Medical Board is. Through the podcast, we planned to take the complicated work of the Board and break it into small, easy to understand pieces.

Here's how we pitched it to prospective listeners in September 2020, when we posted a promo for MedBoard Matters.

"So why would you want to listen to a medical board podcast? Let's be honest. Medical regulation is an important but complicated topic that makes for some pretty dry reading. MedBoard Matters will explore NCMB's work in a much more enjoyable and easy-to-digest format. We are a little unique in that we have two distinct audiences. Sometimes we will have episodes geared towards medical professionals and sometimes we'll cover topics that are mostly aimed at patients. And there will probably be some episodes that have a little something for everybody. We are going to talk about suicide in healthcare. We are going to talk about telemedicine in the time of COVID. We are going to talk about the medical board complaint process. We are going to talk about signing death certificates. We are going to answer questions you don't even know you have yet about the medical board, and much, much more."

So, have we delivered? I think the answer is a resounding yes, and I'll tell you why over the next 15 minutes as I share some thoughts about what we've learned in our first year, and where we are headed next with this endeavor. So, grab a coffee or your beverage of choice and join me as I reflect on Year One of MedBoard Matters.

What's working and what needs finetuning: 2:31

Let's start with what we're getting right with the podcast and move on to what needs a little finetuning.

So, what's working?

Number one - We are doing pretty much exactly what said we would. In fact, we've done episodes on three of the four specific topics mentioned in the promo. The only one we haven't gotten to is telemedicine in the time of COVID-19. I think we have also delivered on the promise to explain some of the most important aspects of the medical board. A good example is Episode Number 2, which explains the Complaint Process. Here's how I summed up the need for that one:

"People file a complaint because they think the Medical Board can help them get a financial settlement. People file a complaint because they think we can force their prescriber to give them a certain medicine. Some people think we can help resolve billing disputes. In fact, the Medical Board can't do any of those things, but a lot of people think that it can. And because of that, unfortunately, we have a lot of unhappy customers who aren't happy when the complaint they file doesn't result in the outcome they were hoping for. That, in a nutshell, is why we are doing this episode."

More recently, we did an episode on NCMB's online Look up a doctor or PA search tool, which is the most-used resource on our website. I've had staff members tell me that they've used these explanatory episodes to help train new medical board employees. They are that helpful at getting someone up to speed on these NCMB basics.

And I have to say, we've only just scratched the surface with Medical Board content. We have an almost endless supply of ideas without even looking outside our organization, which is pretty awesome.

Another way that we are incredibly fortunate is that we have an amazing professional staff to draw from to help explain the medical board's work. It's great to have such a deep bench. We have a lot more Medical Board essentials to cover in the coming year. So, stay tuned.

Number two – We've been consistent. Many podcasts struggle to post episodes on schedule or even at all. On average, podcasts just sort of fade away after six or seven episodes. Well, we said we would post new content at least monthly and we have done so faithfully for the last year. An episode may have been posted on the last day of the month, but that still counts. Consistency is important for any podcast that wants to build a regular audience, which of course we do. People need to know that the content is going to keep flowing or they won't stay subscribed.

Number three – we have been nimble. When we started out with MedBoard Matters we had a good list of episode topics. But we also knew that we wanted to be able to respond to current events and important developments in medicine. And we have done that. In fact, about half of our episodes to date were not on our starter list of topics, but rather, in response to something going on in the world. A prime example of this is COVID-19 vaccination. When the state started its vaccine rollout in late December and early January, we had the idea to do an episode on how our licensees could help. We requested an interview with NC DHHS Secretary Dr. Mandy Cohen, who graciously accepted. The end result was a really timely episode that included content personalized to our audience:

"Well, for I just wanted to say thank you again. I know this has been a long year. I think everyone has felt like it is felt like 10 years in one year here. I know there's been a lot of personal sacrifices all over and I'm so grateful to the healthcare community. We are so lucky here in North Carolina. We have fantastic clinicians who have stepped up in every way to help us respond to this crisis. And I'm so, so grateful."

We'll get through this. I see that light. We're not...we're not at the end of the tunnel yet but it's there. I'm excited. So, just thanks for the help"

I have to say, it was really cool to have for something listeners that they hadn't read or heard a dozen times before.

Number four – We sound really good! I want to give our little production team of two a pat on the back for pulling together a professional sounding podcast.

First, I should say that neither I nor my partner in crime, Sylvia French-Hodges, had any prior experience with podcasting. So, we had a steep learning curve. It has taken countless hours to make MedBoard Matters happen, from coming up with podcast name, to figuring out platforms, to researching equipment and, of course, making sure MedBoard Matters is listed with popular podcast services so people can find us. And I think we have done a nice job with production under especially challenging circumstances. With so many people working remotely due to COVID-19 most interviews have been done using video conferencing, which means we don't always get the best audio. I want to give a special shout out to Sylvia who has worked tirelessly and uncomplainingly to figure out the logistics. She also quickly mastered sound editing and has just gotten better over time. And I'd be remiss if I didn't mention our host. That Jean Fisher Brinkley really knows what she's talking about!

Now let's move on to things that didn't quite as well, and some lessons learned.

Number one – Feedback.

At the end of every episode, we invite people to send their comments and questions to us at podcast@ncmedboard.org. Well, folks, we don't got mail. And we don't believe it's because those of you who are listening to MedBoard Matters don't have opinions. You're just holding out on us. So, over the next year, you're going to hear me asking for your feedback even more frequently. We really want to know what you think so we can make the podcast even better for you.

Number Two – We go to the expert interview well a lot. I almost didn't want to mention this as a negative because I think interviews are an interesting and efficient way to convey information. But, when we started out with MedBoard Matters, we planned to try different ways to tell stories. For example, we really want to do a mailbag episode, where we would answer listener questions. But as I just mentioned, we're not getting any questions. That doesn't mean we can't do a mailbag episode. If we don't get questions from listeners, we'll just have to work from the questions we get day in and day out at the medical board. So, it comes down to this: Do you want us to answer the questions you think are important? Or would you rather Sylvia and I decide for you?

Number Three – Just say no to gimmicks. In the early days of MedBoard Matters when we were still sort of figuring out how to do this, we thought it would be fun to experiment a little with sound effects. In our second episode, for example, we did a segment that covered a whole lot of information in a short amount of time. We referred to it as the two minute drill and we incorporated a coach's whistle into the bit.

Whistle sound

And then we ended the segment with:

"So, how'd I do on time? One minute, forty-five seconds. Hmmm...Not too bad. [Cheering]"

Cute, right? Now, I'm not sorry we did it, but I am glad that we realized early that cute is best in small doses. We haven't done anything like that since. Frankly, I think the topics we choose are meaty enough not to need the garnish.

Number four – Avoid topics that are too niche. If you have a relatively small audience and you present an episode on a topic that's of interest to only a few of them, you're not going to get many listeners. We saw this with episode Number 8, which discussed the clinician's obligation to sign death certificates. This is actually one of my favorite episodes to date because we were able to tell a story about how lack of a signed death certificate can cause needless pain and logistical nightmares for families. The idea for this episode was actually one of the first to go on our planning list because it's an issue we at the Medical Board have known about for years. And I thought the Oakley family's story was really poignant.

"KO: We're not cattle. We're not numbers. We're not charts. We're people. We are families. Even when somebody dies, they are human. If it was your father-in-law, or your son, or your daughter, or your mom, how would it make you feel to know that one of your colleagues, in your profession, can't sign a death certificate properly?"

TO: Amen!"

But when we checked the downloads, it just didn't attract many listeners.

I'm not going to promise that we'll stay away from interesting stories if we think they need telling. But we are trying to be a bit more thoughtful in planning upcoming shows. We want to reach as many people as possible, and we realize that selecting topics that have broad appeal is our best chance to do that.

A look ahead: 10:52

So where are we headed with MedBoard Matters?

Well, to begin with, we're going to keep producing the podcast. We enjoy making it and NCMB staff and Board Members think it's a great format for highlighting complex topics that might not otherwise get the attention they deserve. We have built a modest but regular audience. We are even international, with listeners in Europe, Asia, Africa and South America, as well as the U.S. About 97 percent of our listeners are in fact, American and, as you might expect, the vast majority of these are right here in North Carolina.

For Year Two our main goals will include reaching even more listeners and figuring out how to get more feedback. And you can help with both.

If you listen to MedBoard Matters and think our content is useful, please help us by sharing the podcast with your friends and colleagues. If you are the sort of person who likes a specific goal, I'll give you one: after listening to an episode, I'd like to challenge you to recommend it or at least mention it to at least two people.

And, as for feedback, that's even easier. Give us a little email love. You have no idea how excited we would be to read your ideas and questions.

Podcast wrap-up: 12:07

Well, that brings me to the end of our Year One Retrospective Episode. Thank you for joining me. I quite enjoyed looking in the rearview mirror and I hope you did too. I'm going to take us out by counting down the top five MedBoard Matters episodes from Year One.

The Number 5 episode as measured by number of downloads was our COVID-19 Vaccine episode with Dr. Mandy Cohen.

Number 4 – Using NCMB's online search tool to find information on physicians and PAs.

Number 3 was our debut episode, Physician Suicide Awareness

Number 2 - Mandatory use of the North Carolina Controlled Substances Reporting System.

And the Number 1 most-listened-to episode of MedBoard Matters was:

Don't be fooled by licensing board scams.

You can find these and all previous episodes of MedBoard Matters at www.ncmedboard.org/podcast. I encourage you to go back and listen to anything you might have missed.

And don't forget to tell us what you think. We are eagerly waiting to hear from you at podcast@ncmedboard.org.

Thanks again for listening.