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A STUDY OF HOSPITAL-NEWSPAPER RELATIONS—IN FLORIDA

BY

MARY CATHERINE KIRKHAM LENNON
B. A., College of White Plains, 1974

THESIS

Submitted in partial fulfillment of the requirements for the degree of Master of Arts: Communication in the Graduate Studies Program of the College of Social Sciences of Florida Technological University

Orlando, Florida 1977

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TABLE OF CONTENTS

		Page
LIST OF	TABLES	vi
CHAPTER		
I	INTRODUCTION AND BACKGROUND	1
	Definition and Scope Purpose of the Study Related Research Significance of the Study Summary References	1 2 3 5 8 10
ΙΙ	PROCEDURE	12
	References	18
III	RESULTS	19
	Surveys	19 34
IV	DISCUSSION	36
	What Are Hospitals Doing to Maintain and Establish Good Press Relations How do Florida Newspapers View the Hospitals' Efforts Where Do Differences and Problems Exist Between Hospitals Efforts and the Impressions of These Efforts By	36 40
	the Press	44 52 52 55
APPENDIX	KES	
А	FLORIDA HOSPITAL ASSOCIATION'S PUBLIC RELATIONS COUNCIL	58

В	NEWSPAPER QUESTIONNAIRE					•			59
С	HOSPITAL QUESTIONNAIRE			•		•			65
D	QUESTION 32 - RESPONSES				•			•	71
BIBLIOGR	АРНУ								72

LIST OF TABLES

TABLE										Page
1	Question 4 Percentage of Responses	٠			٠		•		•	20
2	Question 6 Percentage of Responses									21
3	Question 7 Percentage of Responses				•		•			22
4	Question 8 Percentage of Responses									22
5	Question 9 Percentage of Responses		•							23
6	Question 10 Percentage of Responses					•				24
7	Question 11a Percentage of Reponses	Ì.	•		•	•	•		٠	24
8	Question 11b Percentage of Responses									25
9	Question 11c Percentage of Responses					•		•		25
10	Question 11d Percentage of Responses		٠							26
11	Question 11e Percentage of Responses			,			٠			26
12	Question 12 Percentage of Responses									27
13	Question 13 Percentage of Responses									27
14	Question 14 Percentage of Responses	i.								28

TABLE		Page
15	Question 19 Percentage of Responses	29
16	Question 20 Percentage of Responses	29
17	Question 22 Percentage of Responses	30
18	Question 23 Percentage of Responses	31
19	Question 26-25 Percentage of Responses	32
20	Question 27-26 Percentage of Responses	32
21	Question 30-29 Percentage of Responses	33
22	Question 31-30 Percentage of Responses	34
23	Percentages of Hospital Originated Stories and Newspaper Originated Stories .	71

CHAPTER I

INTRODUCTION AND BACKGROUND

Definition and Scope

This study investigates the relationship between hospitals and newspapers in Florida. A major part of this relationship rests on how these two institutions perceive each other. Hospitals and newspapers can view differently, not only what constitutes good press coverage of health care institutions, but also what is necessary for a good working relationship between hospitals and the press. The type of stories that hospitals would like to have printed about themselves and the type of stories that newspapers consider newsworthy can be far from similar. An example of this if the conflict between hospitals' view of patients' rights and newspapers' view of the people's rights, specifically the right to know.

As used in this study, the words "relations", "relationship", and "rapport" describe the contact, the communication, the interaction, and the interworkings between hospital public relations personnel and representatives of the press. Essentially, these words are used interchangeably in this paper when referring to the interplay between newsmen and hospital public relations practitioners.

The exchange, relations, relationship, or rapport, between hospitals and newspapers can be further defined by examining the elements that both consider essential. For example, a newspaper might be interested in the hospital as a source of information. Elements that may be important include the trustworthiness, the accessibility, and the amount and type of information received from the hospital. A hospital, on the other hand, might be interested in how well the press covers the hospital with respect to such important elements as the amount and type of news, the degree of accuracy, and the light in which the hospital appears to the public in the news.

The health care institutions surveyed in this study are members of the Public Relations Council of the Florida Hospital Association. The reason for using these institutions is that these hospitals and health care institutions have public relations departments or have expressed concern with the image of their institution by being members of the council.

Only newspapers were considered in the survey. The combined media within Florida; radio, television, magazines, as well as newspapers, are so numerous and varied that it would be impossible for this study to investigate them all.

Purpose of the Study

This study examines the relationship between hospitals and newspapers in Florida. Specifically, the research questions this

study asks are:

- 1. What are Florida hospitals doing to establish and maintain good press relations?
- 2. How do Florida newspapers view the hospitals' efforts?
- 3. Where do differences and problems exist between hospitals' efforts and the impressions of these efforts by the press?

Related Research

Patterson conducted a study in 1962 surveying twenty-seven state university hospitals. At that time, twenty-four institutions had existing public relations departments. Of the twenty-four, only eighteen had organized their public relations departments within ten years prior to the study. Consequently, Patterson established that hospital public relations is a fairly new field.

From the survey, Patterson also concluded that public relations practitioners for hospitals have two basic responsibilities.

Both deal with the handling of information. One responsibility is handling the release of information to the mass media. The other responsibility Patterson cites is the preparation and supervision of the production of hospital publications.²

Cunningham also reported on hospital and newspaper relations as part of a study on selected Tampa Bay area hospitals. In the area of responsibility that Patterson described as release of information to the mass media, Cunningham delineated the

subject into three specific areas. These are news release procedures, facilities in hospitals made available to the press, and rules regarding press photography within institutions. All but one of the institutions surveyed allowed photographers to take pictures on a supervised basis. However, only four of the hospitals had facilities for the press. Approximately half of the hospitals surveyed sent to the press birth and death notices as well as what was described as routine release information.³

Cunningham also investigated the importance of press relations to hospitals. He concluded, "Hospitals ranging from the smallest to the largest need to place continual emphasis on public relations activities."4

Similarly, "areas of increasing concern in hospital public relations" were investigated in Trubow's 1972 survey of members of the Florida Hospital Association Public Relations Council. 5 Respondents considered the establishment and maintenance of a good rapport with the press to be of key importance. In addition, the respondents indicated press relations would continue to be of great importance in the future. 6

The Trubow study also pointed out that hospital administrators are learning the value and importance of good public relations.

Professional public relations personnel are increasingly becoming valuable members of a hospital's management team.

Significance of the Study

Elder reported that the hospital industry is the third largest in the nation. He estimated that about twenty-nine million patients are admitted annually. Another one hundred forty-two million outpatient treatment visits are recorded annually. To accommodate this demand, approximately two million persons are employed in the hospital industry. Similarly, Cutlip and Center estimated that hospitals in the United States treat on the average day more than the combined population of Cincinnati and Boston. The average American is admitted to a hospital as a patient at least four times during his lifetime, excluding birth. 9

The large health care industry has changed throughout its Spencer explained that, before World War II, hospital history. administration was nonexistent. Administrative duties were left under the care of nurses and physicians. As the United States became increasingly involved in the Second World War the demand for medical personnel on the battlefield increased. Physicians and nurses left in the United States were forced to devote their energies exclusively toward patient care. A void which presented a growing problem was therefore created, the shortage of administrative personnel. To fill this void, a career administration with management training was needed. 10 With the necessity to free physicians to concentrate on their primary tasks, hospitals have conformed with other industries in seeking the most efficient use

of their resources. And, as other industries have found in recent years, public opinion and knowledge have become an important force within the country.

As Phillips noted, hospitals are involved in more than just caring for the sick. They are concerned with a myriad of issues. For example, hospitals are involved with making the public more sensitive to preventive health care and environmental health care, such as the rights of nonsmokers. In addition, hospitals provide emergency and disaster services to the community as well as health care to rural areas surrounding the serviced community. Il According to Riggs, with the increasing responsibility and roles of hospitals come expanding responsibilities and roles for hospital public relations directors. 12

Brennan commented, however, that public relations techniques are valuable tools that have been under-appreciated and under used. 13 Therefore, the value and resources available to an institution are left relatively unexplored and underdeveloped. Groundlun and Guscti commented, "Professors in the field of public relations have commented that PR in the hospital field is five to ten years behind that of industry. "14 Libman added that hospital adminsitrators and public relations practitioners are finding the traditional and familiar ways of dealing with the community are far from adequate. 15

Riggs explained that hospital public relations practitioners must "interpret crucial issues and developments for hospitals," as

well as act as the hospitals' spokesmen. Porte adds that the public relations director must introduce new systems, methods, and services to implement change within the institution. Not only must public relations directors be able to handle change, but also handle the impact of change on the institutions' employees. 17

According to Libman, some current problems and changes facing hospital public relations directors include the issue of patients' rights. It is an example of the power and momentum of a phenomenon that is described as the increasing demand by consumers on health care suppliers for quality health care. It is medical consumerism. 18

Quality of care is only one of three issues that McKnight found to be crucial to the medical consumerism movement. Access to hospitals and the rising cost of health care are also main concerns of medical consumers. 19 Caine emphasized cost. He commented that relating the cost of hospital services to their value is the most important public relations challenge facing hospitals. 20

A related and pressing challenge facing hospital public relations is the problem of malpractice insurance, a crisis involving the availability and cost of professional liability insurance. Hastings explained that hundreds of thousands of dollars worth of premium charges have been included in the budgets of health care institutions in the past.²¹ As the cost of malpractice insurance soars, Phillips predicts that some institutions will be forced to close and others

to increase rates.²²

Another problem facing hospitals' public relations practitioners is, as Haseltine noted, "Newsmen and physicians live in their own worlds. They see the same things, but each views them from his own training."23 Therefore, press inquiries about personal illnesses and injuries may exceed what the medical profession considers ethical to release for public consumption. The same concept is true of medical research and hospital innovations. What the press demands for news can conflict with the code of ethics for the medical profession and the confidential relationships between patients and their doctors. And as Cutlip and Center succinctly stated, "Hospitals, in turn, are circumscribed by doctors' attitudes and ethics."24

Summary

The field of hospital public relations is young but rapidly growing. One of the most essential aspects of the practice of hospital public relations is the establishment and maintenance of good media relationships.

A good rapport with the media can open a channel of communication through which the hospital can promote its image as a community service organization. However, the view from the medical industry and the view from the media can be divergent. Each sees the same happenings, but the images drawn can be quite different. Both have responsibilities and interests to consider. The press wants to get

the news, whereas the medical industry wants to care for the patient, including his right to privacy.

In short, there is a need for hospital public relations. Also, public relations for health care institutions is becoming more and more a specialized function under the direction of a specialist.

Further investigation is needed into public relations techniques of health care institutions. Specific areas for study include the tools and techniques available to hospital public relations, the effectiveness of public relations methods, and the response to the hospitals' communicative efforts by various publics, patients, press, employees, and supporters.

The purpose of this study is to examine the relationship between newspapers and hospitals in Florida.

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19 John L. McKnight, "Hospitals Must Work to Change Image," Hospitals, J.A.H.A., XLIX (May 16, 1975), 72.

²⁰Raymond W. Caine, Jr. "The Why of Hospital Costs," <u>Public Relations Journal</u>, XLII (October, 1968), 83-84.

²¹James F. Hastings, "Malpractice Insurance Crisis: A Proposal for Federal Action," <u>Hospitals</u>, <u>J.A.H.A.</u>, XLIX (May 1, 1975), 41.

 $^{22} \text{Donald F. Phillips, "Malpractice Coverage: The Long and the Short of It," <math display="inline">\underline{\text{Hospitals, J.A.H.A.}}$, XLIX (April 16, 1975), 45.

23Hillier Krieghbaum, When Doctors Meet Reporters (New York: New York University Press, 1957), pp. 8-9.

²⁴Cutlip and Center, pp. 518-519.

CHAPTER II

PROCEDURE

This study was launched with the aide of Mr. Charles Richards, Public Relations Director of Winter Park Memorial Hospital, Winter Park, Florida. Mr. Richards suggested that contact be made with Mr. Wade Edwards of the Florida Hospital Association.

Mr. Edwards, Vice President for Public Relations and Public Relations Council Secretary, offered the Association's assistance in the project. Use of the Florida Hospital Association library and clipping service were made available, and all printing and mailing expenses were provided. Collection of surveys, manpower, as well as invaluable suggestions, and aid were also provided.

The study was a two phase project. The major phase consisted of a set of dual surveys, one sent to hospitals that are members of the Florida Hospital Association Public Relations Council (Appendix A) and a corresponding questionnaire sent to newspapers (Appendix B) that were indicated by the responding hospitals as those which the hospitals dealt with most frequently.

The questionnaire were developed based upon suggestions for establishing and maintaining good newspaper relations from Alan B. Mills' book, Hospital Public Relations Today;

Harold P. Kurtz' book, <u>Public Relations for Hospitals</u>; ² Cutlip and Center's <u>Effective Public Relations</u>; ³ <u>Big Public Relations on a Little Budget</u>, a booklet prepared and published by the Florida Hospital Association; ⁴ <u>A Basic Guide to Hospital Public Relations</u>, prepared by the American Society for Hospital Public Relations; ⁵ <u>Role and Scope of a Hospital Public Relations Director</u>, Florida Hospital Association; ⁶ and <u>Formulating the Health Care Institution Public Relations Program</u>, Tennessee Hospital Association Communications Division. ⁷ (Appendix C).

The hospital survey was sent first. The initial mailing included ninety-two hospitals, the members of the Florida Hospital Association's Public Relations Council. March 19, 1975 was the date of the survey's mailing. Replies were collected at the Florida Hospital Association in Orlando. Addressed return envelopes were included with the survey inquiries.

It was decided to send a follow up letter and survey to the nonresponding institutions. July 3, 1975 was the date of the follow-up mailing. Questionnaires in this mailing were dittoed, along with a cover letter, and a reproduction of the cover letter signed by Mr. Edwards from the mailing in March were included. Stamped, self addressed envelopes to the investigator's home were also included. Replies from the follow up were received as late as September, 1975.

From the returned questionnaires, a list of newspapers to be queried were compiled. A total of 190 newspapers, with duplication,

were indicated on the surveys. At times different hospitals named the same newspaper, but indicated different, and at times the same, reporters or editors. Therefore, more than one survey was sent to some newspapers. The greatest duplication was found in three areas of the state: Dade County, Orange County, and the Pinellas-Hillsbourough County area. These regions are those of highest concentration of hospitals in the state. The Miami Herald, Miami News, Palm Beach Post, Palm Beach Journal, St. Petersburg Times, St. Petersburg Independent, Tampa Tribune, Tampa Times, and Sentinel Star were the newspapers with the most duplication. To alleviate some of the redundancy, the survey was sent to bureau offices, specific reporters, editors, and sections of the papers; as indicated by responding hospitals on the survey questionnaire.

Without duplication, a total of 137 newspapers were named in survey response. Some of the responding hospitals included both the addresses of newspapers as well as names of writers dealt with most frequently. Others included either one or the other, names or addresses. Some included neither of the two. To obtain addresses, the latest edition of the Ayers Directory was consulted. 8 If that source failed, local telephone directories covering the state of Florida were consulted. City directories were then consulted for those papers which the previous two had failed, and finally zip code directories were consulted to complete the addresses that were found. Seventeen of the papers could not be located in any of

the sources.

Those newspapers without names, but with addresses, a total of 54, were telephoned. Phone numbers for the 54 papers were procured from Ayers, telephone directories, and directory assistance. The calls were made requesting the name of the science or medical writer on the staff of the paper. A follow-up second call was made at a later time if the first call proved unsuccessful.

Only nine calls succeeded in gaining a name of an individual to whom the survey could be directed. Several of the responses indicated that the survey material should be directed to the paper's editor.

It was decided the the remaining 45 papers would have surveys sent to the editors. Ayers was again consulted for the names of the publications' editors. Those newspapers for which no name could be found, 23 in all, were simply addressed to "Editor."

The initial mailing of the newspaper questionnaire was sent

December 18, 1975. One hundred, seventy-three letters and surveys
were sent to 120 different news publications. A stringer question
was included for the interest and use of the Florida Hospital
Association. This was question number 31, (Appendix B). It read:

"If there is more than one hospital in your area, please indicate
any hospital with particularly good and/or bad press relationships."

Questions 1, 2, 7, 9, 10, 11, 16, 17, 18, 19, 20, and 21 also included stringer categories at the request of the Florida Hospital

Association. This category was "don't know", (Appendix C). For the sake of analysis, a response of "don't know" on these questions was considered no response. Only the "yes" and "no" categories as included on the hospital survey forms were considered as responses.

Question 24 on the hospital survey "Does your institution publish an annual roster and press manual to be distributed to newspapers?", was omitted on the newspaper survey because the replies of responding hospitals showed that only three hospitals published a press manual and annual roster. Therefore, it was felt irrelevant to query the newspapers as to whether or not such a publication was received annually.

The primary wave of the newspaper phase elicited 41 responses from 37 different papers.

A follow up to the newspaper survey was sent on January 18, 1976 to the remaining newspapers. An addressed return envelope was included with the second mailing. The responses from the follow-up survey numbered 33.

The total number of surveys received from the hospitals used for analysis was 65 which is 60.9 percent of the total questioned. Seventy-four newspaper surveys, 43 percent of the total questionnaires sent, were analyzed. Of the total number of newspapers, without duplication, 120, there were responses from 65 individual papers. Therefore, of the total number of newspapers, there was a response of 54.15 percent.

A Chi square analysis was run on the corresponding questions of the replies of the responding populations, hospitals and newspapers. This was done to determine whether or not a significant difference existed between the responses of the hospitals and those of the newspapers.

The minor or secondary phase of the study consisted of a measurement analysis of newspaper clippings for the first six months of 1975. The clippings were provided by the Florida Hospital Association's newspaper clipping service, Florida Clipping Service, Tampa, Florida; which scans Florida newspapers and magazines.

Only Florida newspapers were considered.

The length of the articles was measured in column inches and fractions of column inches. Measurements of the articles were recorded under both the newspaper in which the article appeared and the hospital about which the copy was concerned.

Data received from the clipping service review ranked the top ten newspapers and the top ten hospitals in terms of giving and receiving the most coverage for the first six months of 1975. Two separate listings were prepared. One ranked the ten newspapers giving the most coverage to health news, and the other ranked the ten hospitals receiving the most coverage.

General comments and discussion about the types of coverage are included in the discussion section of this paper.

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- 6 , Role and Scope of a Hospital Public Relations Director (Orlando, Florida: Florida Hospital Association, Inc., 1972), p. 4.
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CHAPTER III

RESULTS

Surveys

Analysis of the responses to the dual surveys indicated that significant differences do exist between the responses of hospitals and the responses of newspapers. Individual questions will be examined in the order that they appeared on the questionnaires.

No significant differences were found for questions 1, 2, and 3. Question 1 asked about statements concerning the institutions' positions on contemporary health issues. Question 2 concerned establishment of a rapport between the hospital public relations personnel and reporters, and question 3 asked if tours of the hospital were conducted for the press.

Concerning notification of the press of Board of Trustee meetings, question 4, showed a significant difference, $(x^2 = 3.98, df = 1, p < .05)$.

TABLE 1
QUESTION 4
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	23.08	72.31
Newspapers	36.84	50.

It is interesting to note that a higher percentage of hospitals indicated no notification than the percentage of newspapers receiving no notification of the meeting.

No significant difference was indicated in the response to question 5 which asked about the attendance of the press at Board of Trustee meetings.

Newspapers indicated by their responses that important hospital decisions concerning policy were available to them to a higher degree than the actual hospital public relations departments felt that policy decisions were made available to the press. Question 7 is the question involved, $(x^2 = 9.19, df = 1, p < .01)$.

TABLE 2
QUESTION 6
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	29.23	63.08
Newspapers	57.89	39.47
Newspapers	57.89	39.

The reason for this difference may stem from the wording of the questions rather than from actual differences. The newspaper survey stated the question, "Do you feel that important hospital decisions are available to you?". The hospital survey stated the question, "Are all policy decisions of the Board of Trustees made available to the press for dissemination?". The hospital directed question implies that all policy decisions are important, however, the newspaper directed question does not assume that all policy decisions are defined as important. It is therefore necessary to question the significance of the responses. Further investigation is necessary in this area to determine if indeed there exists a significant difference or if the differences reported are merely a result of the tool used in this study to investigate the relationship between the hospitals and newspapers.

Questions 7 through 10 deal with news media and hospital codes of cooperation. Significant differences between the two groups

were reported for each of the questions concerning codes.

Question 7 asked if the institutions have a code or guide. A much greater percentage of hospitals responded positively than newspapers, $(x^2 = 9.46, df = 1, p < .01)$.

TABLE 3

QUESTION 7

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	98.46	1.54
Newspapers	38.16	10.53

Question 8 asked if the code of cooperation was given to the press. The majority of the hospitals responded in the affirmative, however, the majority of the newspapers responded in the negative, $(x^2 = 27.51, df = 1, p < .01)$.

TABLE 4

QUESTION 8

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	69.23	20.
Newspapers	25.	61.84

Question 9 inquired if all employees of the hospital who might deal with the press received a copy of the code, $(x^2 = 37, df = 1, p < .01)$.

TABLE 5
QUESTION 9
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	92.31	4.62
Newspapers	10.53	22.37

Question 10 asked whether or not the institutions used the media code of cooperation of the Florida Hospital Association. Hospitals replied strongly in the affirmative. Newspapers, however, had the majority of replies in the negative. It is interesting to note that 80.27 percent of the newspapers gave no response. It is highly likely that a hospital using the code of cooperation with a newspaper might not have necessarily state that the code was that of the Florida Hospital Association. This could affect the responses. Several newspapers did ask for a copy of the media code of cooperation of the Florida Hospital Association. The analysis for question yielded the following, ($x^2 = 8.37$, df = 1, p < .01).

TABLE 6
QUESTION 10
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	90.77	1.54
Newspapers	14.47	5.26

Investigating the usage of the press release as a tool of public relations departments was question 11. The question is divided into several parts. In each part of the question a significant difference was recorded between responding newspapers and hospitals. The first part of question 11 dealt with releases describing nre or improved hospital facilities, ($x^2 = 8.04$, df = 1, p < .01).

TABLE 7
QUESTION 11a
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	95.48	4.52
Newspapers	75.	22.37

The second part of the question concerned changed in hospital rates and fees, $(x^2 = 4.5, df = 1, p < .05)$.

TABLE 8

QUESTION 11b

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	32.31	58.46
Newspapers	17.11	78.95

Visiting hours and policies were concerned in the third part of question 11, $(x^2 = 11.69, df = 1, p < .01)$.

TABLE 9
QUESTION 11c
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	46.15	43.08
Newspapers	21.05	76.32

The fourth part of question 11 explored whether or not releases were sent and received concerning emergency room policy, ($x^2 = 21.33$, df = 1, p < .01).

TABLE 10
QUESTION 11d
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	49.23	40.
Newspapers	14.47	80.26

The last part of the question queried about releases concerning "other topics of community interest", $(x^2 = 21.33, df = 1, p < .01)$.

TABLE 11

QUESTION 11e

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	93.85	3.08
Newspapers	63.16	35.53

Newspapers and hospitals differed significantly to question 12, investigating whether or not newspapers were encouraged by hospitals to originate stories concerning the institutions and the operation

of the health care institutions, $(x^2 = 7.88, df = 1, p < .01)$.

TABLE 12

QUESTION 12

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	87.69	10.77
Newspapers	59,21	28.95

Questions 13 and 14 dealt with spokesmen for the hospitals. Emphatically, the hospitals answered in the affirmative that there was indeed a person or group of persons available on a 24 hour basis to act as official spokesmen. The newspapers disagreed, $(x^2 = 34.59, df = 1, p < .01)$.

TABLE 13

QUESTION 13

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	95.38	4.63
Newspapers	31.58	38.16

Almost equally emphatic, hospitals responded that the press had been notified as to the identity of the spokesmen, question 14. Again, the newspapers significantly differed, ($x^2 = 26.64$, df = 1, p < .01).

TABLE 14

QUESTION 14

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	92.31	6.15
Newspapers	39.47	38.16

Question 15 asked if hospitals mailed copies of their annual report to the press, and if newspapers received copies of the annual report. There was no significant difference between the responses of the two groups.

No significant difference was also observed for question 16. The question asked if photographers were allowed in the health care institutions.

No significant difference was found for question 17 which concerned the birth and death notices released by hospitals to the press, or the sending of releases to the press on a routine basis, question 18.

Question 19 dealt with facilities made available to the press for the reporters' use, for example, press centers, interviewing space, and telephones. The responses of the two queried groups were significantly different, $(x^2 = 7.88, df = 1, p < .01)$.

TABLE 15

QUESTION 19

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	30.77	61.54
Newspapers	3.95	73.68

Press luncheons, the question of whether or not they are held, was explored in question 20, $(x^2 = 9.73, df = 1, p < .01)$.

TABLE 16
QUESTION 20
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	38.46	56.92
Newspapers	11.84	72.37

Asking about disaster plans to accommodate the press in an emergency situation, question 22 read in the hospital survey, "Does your hospital have a disaster plan to accommodate the press?" and in the newspaper survey, "Do you know of a disaster plan to accommodate in the press in an emergency situation?". A significant difference was recorded, $(x^2 = 79.42, df - 1, p < .01)$. question raises a question. That question is, is it necessary or helpful for a newspaper to know of a disaster plan? A well designed plan might be very successful without prior knowledge of the plan's existence on the part of the press. In the interest of furthering and improving relations, however, it would seem intuitively obvious that at least knowledge of an emergency press plan, before it is needed, if not the actual proposed plan or participation in the creation of a plan of action to follow in the event a disaster does occur, would enhance relations between the press and the institution. Further investigation concerning coping with emergency and disaster situations is desirable.

TABLE 17
QUESTION 22
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	87.69	10.77
Newspapers	10.53	84.21

Consideration of the deadlines of the press, explored in question 23, showed highly significant differences between the two populations, ($x^2 = 49.09$, df = 1, p < .01).

TABLE 18

QUESTION 23

PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	93.85	4.62
Newspapers	32.89	59.21

Because of different numerical sequences on the questionnaires sent to hospitals and the questionnaires sent to newspapers, a system of pairing the questions has been utilized. For example, question 25-24 is the question dealing with whether or not a hospital has asked or a newspaper has been asked to play down a story concerning bad news. On the newspaper survey, the question was stated, "Has a hospital ever asked you to play down a story when dealing with bad news?". It is numbered question 24. On the hospital survey, the question was stated, "When dealing with bad news, would you ever ask the media to play down a story?". The question is numbered 25. In a paired question the first figure, 25, corresponds to the hospital questionnaire. The second figure, 24, corresponds to the newspaper questionnaire.

Question 25-24 showed no significant difference between the two groups. However, question 26-25 asked if a request for playing down of news had been made, was the request honored. The two responding groups differed significantly, ($x^2 = 32.59$, df = 1, p < .01).

TABLE 19
QUESTION 26-25
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	26.15	10.77
Newspapers	6.85	75.

Question 27-26 asked if fair coverage of hospitals by the press was given. A significant difference was recorded in the responses of newspapers and those of hospitals, ($x^2 = 4.52$, df = 1, p < .05).

TABLE 20
QUESTION 27-26
PERCENTAGE OF RESPONSES

	Yes	No
Hospitals	64.62	18.46
Newspapers	84.21	6.58

"Does your hospital publish a health column regularly in the newspaper?" and "Does your newspaper regularly publish a health column furnished by a hospital?" make up the question 28-27. There was no significant difference between the responses of hospitals and the responses of newspapers.

There also was no significant difference in the responses to question 29-28. This question dealt with how often newspapers receive releases from hospitals.

The two groups significantly disagreed as to how often releases were picked up by newspapers. Question 30-29 is the question involved, ($x^2 = 21.17$, df = 4, p < .01).

TABLE 21
QUESTION 30-29
PERCENTAGE OF RESPONSES

	Hospitals	Newspapers
Daily	10.77	
Weekly	53.85	25
Biweekly	23.08	22.37
Monthly	4.62	30.26
Less than monthly	1.54	7.89

Question 31-30 asking for a description of the relationship between hospitals and newspapers also produced a significant difference between the responding newspapers and hospitals, $(x^2 = 30.68, df = 4, p < .01).$

TABLE 22

QUESTION 31-30

PERCENTAGE OF RESPONSES

	Hospitals	Newspapers
Fantastic	18.46	6.58
Needs some improvement	46.15	17.11
Neutral	7.69	39.47
Needs much improvement	10.77	13.16
Extremely poor		3.95

Appendix D shows the breakdown for responses to question 32. The question concerns the percentage of hospital originated stories and newspaper originated stories.

A tally of responses to corresponding questions shows that 55.88 percent of the questions on the survey, the chi square analysis found p < .01, 8.82 percent of the questions the analysis revealed p < .05. Questions with responses containing no significant difference made up the remaining 35.29 percent.

Clippings

The secondary research phase of the study, analysis of the newspaper clippings for the first six months of 1975, resulted in the following ranking of the top ten newspapers for space given to health care institutions.

Tampa Tribune	(3758.5 inches)
Sentinel Star	(2603.25 inches)
St. Petersburg Times	(2133.75 inches)
Sun Journal	(1448 inches)
Miami Herald	(1273.75 inches)
Sarasota Herald Tribune	(985 inches)
Florida Times Union	(875.5 inches)
Pensacola Journal	(681.75 inches)
Sun Sentinel	(629 inches)
Jacksonville Journal	(589 inches)

Corresponding to the ranking of newspapers is a ranking of hospitals receiving the most coverage.

Lvkes Memorial Hospital	(2677.5 inches)
North Orange Memorial Hospital	(880 inches)
Sarasota Memorial Hospital	(828.5 inches)
Morton F. Plant Hospital	(723 inches)
Indian River Memorial Hospital	(719.25 inches)
Manatee Memorial Hospital	(678.75 inches)
Washington County Hospital	(656 inches)
Bradford County Hospital	(643 inches)
Flagler Hospital	(637.75 inches)
University Hospital (Jacksonville)	(621.75 inches)

CHAPTER IV

DISCUSSION

This study asked three questions; What are Florida hospitals doing to maintain and establish good press relations?, How do Florida newspapers view the hospitals' efforts?, and Where do differences and problems exist between hospitals' efforts and the impressions of these efforts by the press?

What Are Hospitals Doing to Maintain and Establish Good Press Relations?

In order to find answers to this question the surveys returned by the hospitals are discussed exclusively. To see what hospitals consider are their efforts to maintain and establish good press relations and where the emphasis of these efforts lies, it is necessary to examine surveys of hospitals not in conjunction with newspaper responses.

Over ninety percent of the responding hospitals stated that a rapport has been established with representatives of the press, especially reporters. This is a necessity for if there is to be communication between the two industries a rapport must exist.

The hospitals, ninety percent of the responding institutions, have also sought to define with the newspapers some guidelines of

the relationship. This has been done by setting up common ground for communication between the two groups. A code or guide for the release of information concerning patients is the means for agreement. What the hospitals consider can be released by their staff and what the newspapers consider is necessary for accurate, complete reporting of the news may not in some instances be acceptable limits for the other party. By means of a preestablished code, the newspapers and hospitals can operate within the agreed upon guidelines and prevent some of the misunderstandings that can easily occur between the media and public relations offices for any type of institution.

Hospitals, however, have not approached the system of a code or guideline in practice as ideally as the system works out in theory. Ninety percent or better of the responding hospitals have distributed the code to all employees of the institutions who may deal with the press. Of the same responding population, only 69.23 percent have distributed to the press the code which the institution looks toward for guidelines. For a code of cooperation to be useful it is vital that both parties cooperating know of the existence of the code. If only one party knows of the code, then in reality there is no guided cooperation and the code has no meaning. However, a code or set of guidelines for cooperation between hospitals and newspapers can have worth if both coacting parties jointly are aware of the code and agree to abide by the guidelines.

Along with the idea of a joint code of cooperation, goes the idea of an official spokesman for the hospital. An official spokesman with the authority to speak for the hospital is available on a twenty four hour basis in ninety percent or better of all the responding hospitals. The same percentage group states that the press has been notified as to the identity of these spokesmen.

Ninety percent of the responding hospitals have also stated that photographers are allowed inside the institution, either on an escorted or an unescorted basis.

In the area of sending of releases to the press, ninety percent or more, have stated that press deadlines are considered when releases are sent to newspapers. This tends to infer that the hospitals responding in the affirmative when queries as to whether or not deadlines are considered, must be aware of the deadlines of the press and exactly what and when they are. It could reasonably be assumed that the public relations departments have done some research and have some knowledge of the medium of the newspaper and are familiar with the workings of the newspaper as an industry and as a public servant to the same community the hospitals themselves serve.

Of the responding hospitals, ninety percent do send out statements in release form concerning new or improved facilities and services of the hospital and other topics of community interest.

Not included in the topics of community interest are changes in rates and fees, visitors hours and policies, and emergency room

policy.

Between 75 and 90 percent of the responding hospitals have stated that a disaster coping plan to accommodate the press in the event of an emergency is in existence. An example of such an emergency would be a tragedy within the community such as a large fire or explosion. The event would be one of such a nature as to be a major news story in which members of the press would have to be informed of events and handled in an orderly fashion without interference of the medical function of assisting victims.

The same percentage of hospitals encourage members of the press to visit the hospital or originate features or news stories. It would appear that these hospitals have tried to establish themselves as valuable news sources by not only making the press welcome but also by actively attempting to draw newsmen to their institutions and inviting the reporters to seek news within the health care center.

Between 50 and 75 percent of the time hospitals responded in the affirmative to queries about the types of stories on file for release regarding the institutions' position on contemporary health care issues. Examples of such issues include the role of hospitals in community health and hospital costs to individual patients.

In this percentage range, concerning dealings with the press, the results indicate press tours and open houses, press releases sent out on a "routine" basis, press centers, that is space made available to reporters and photographers for interviewing and

telephones for their use; and the purchase of advertising space in the newspaper for the purpose of such things as publicizing the annual report and programs to salute volunteers.

In response to the open ended question asking for additional comments and information several of the comments are worth mentioning. More than one hospital responded that hospital public relations has to be more than just sending releases to the press. Good relations have to be a function of how the practitioner approaches the task. It is essential that the public relations person enjoy his work and consider that his institution is important and has important messages to communicate to the community.

Baptist Hospital of Miami's public relations director stated an interesting outlook on the emphasis of publicity in hospital public relations: "While it is desired, liked, and appreciated within the hospital realm, acquiring publicity holds a minor position to communicating to our employees, medical staff, supporters, donors, and potential donors and patients."

How Do Florida Newspapers View the Hospitals' Efforts?

The second question posed in this study goes hand in hand with the final question that seeks differences and problems that exist between hospital and newspaper communication. There is value, however, in examining the second question separately before discussing the differences and problems that exist. To do so, a

discussion of the additional comments from the responding newspapers supplies answers to the question.

Responses from individual newspapers vary considerably from approval of the hospital and newspaper relationships, that is, an attitude of contentment to an attitude of disastrous non-cooperation. Several weeklies stated quite plainly that their newspapers are too small to be concerned with or receive attention from the hospitals. Another position expressed by weeklies is that hospitals are not considered by their papers as a major area of coverage and therefore do not exert a best effort to obtain hospital news which leaves them to depend upon releases for health care news and hospital oriented stories.

In the area of constructive criticism by news reporters to hospitals, often the reporters felt too little effort and information was the case rather than excessive flooding of "make news" releases to the papers. The tons of these comments was such that public relations personnel and hospital administrators are cooperative when approached by reporters, but rarely do they take the initiative and call the newspaper either with newsworthy material or encourage the press to explore their health care centers and community health care as a topic of interest to the community.

The response from the <u>Lake City Reporter</u>, for example, stated that public relations oriented materials were seldom if ever received from local hospital facilities.

Cissy Ross of the <u>Gainesville Sun</u> suggested that hospital public relations people should gear their efforts more toward journalistic duties. She elaborated by stating bluntly that she "would like to receive birth and death notices."

Comments about the hospitals by newspapers stated and restated that the relationship between the hospitals and the newspapers varies with the latest news. Acting as a barometer for the degree of cooperation is whether the hospitals feel the news is favorable or unfavorable to their institution. When the hospital is receiving flattering and favorable coverage, newsmen are welcome and accommodated. Yet when the coverage or story is less than flattering, praising, or favorable the cooperation declines.

In a comment from the <u>Bradenton Herald</u> it was observed, "They (hospitals) of course want articles with facts supporting their positions." <u>The Pensacola News Journal</u> response commented that generally the hospitals are cooperative, but cooperation is great if the newspaper shows the hospital point of view.

Succinctly, cooperation is high when the newspapers investigate new facilities, emergency procedures and matters or events upon which the hospitals wish to be focused. However, when investigation may pull something into the limelight that does not enhance the image of an institution, then the hospitals become defensive and aloof.

Some of the sharpest criticism against the hospital public relations by responding newspapers was leveled at the oscillating between cooperation and lack of cooperation.

Tom Sawyer, city editor of the <u>Palm Beach Post</u> stated in his reply, "I have found Florida hospitals to be uncooperative in dealing with reporters compared to other states."

Echoing is Fred Thomas of the <u>Tampa Tribune</u>. He commented that he finds media experts uncooperative; the attitude of the hospitals in general look down on newsmen; hospital spokesmen are a wealth of noninformation; and most information comes not from official sources but from the emergency room nurse.

Sara Schwiede of the <u>Tampa Times</u> found public relations officers good only for flattering stories and that information came from unauthorized sources.

The response from the Broward County bureau of the Miami Herald sought to distinguish between small hospitals and chain operated hospitals. The chains were portrayed as having better public relations than the smaller hospitals which were described as antagonistic and not knowing how to deal with the press.

Comments from the respondents help identify areas of frustration in dealing with the health care industry by members of the press.

To further analyze, however, and to get an empirical answer to the question of how the newspapers in Florida view the efforts of the hospitals in the state, it is necessary to ask where do the

differences and problems exist between the efforts of the hospitals and the impressions of these efforts by the press?

When it is considered that 64.90 percent of the answers of hospitals and newspapers differed significantly, it is obvious that the efforts of the hospitals and the needs of the newspapers as well as the needs of the hospitals and the efforts of the newspapers fall short of each industry's expectations of the other.

Where Do Differences and Problems Exist Between Hospitals' Efforts and the Impressions of These Efforts by the Press?

Significant differences were recorded on the .01 level on all four questions dealing with codes or guides for the release of information to the press concerning patients. Establishment of a rapport between the press and the hospital public relations personnel should mean more than knowing the names of the editor and the public relations director. It is ironic that the two populations agree that a rapport has been established yet 98.46 percent of the responding hospitals acknowledge the existence of a code of cooperation between the media and the hospital and only 38.16 percent Even more ironic is that when nearly all of the newspapers agree. responding hospitals admit the existence of a code, only 69.23 per cent have distributed the code to the press. A code of cooperation is obviously useless if the existence is known only to one of the cooperating parties. To add even more to the irony of the situation only 25 per cent of the responding newspapers have received, or admit

to having received a code or guide for the release of information.

Along with the codes of cooperation there significantly differed on the .01 level the responses to both questions 13 and 14 concerning hospital spokesmen. Question 13 asked if a person or set of persons was available on a 24 hour basis with the authority as official spokesman for the hospital, and question 14 asked if the spokesman were known to the press.

Cooperative, conscientious, informed, available, official spokesmen who are known to the press as a source of information would greatly help the communication between the two groups. It would be necessary for the spokesmen to assume the responsibility to serve as reliable sources of information that conscientiously assume the role of information officer. The task demands effort, but would help to build the credibility of the health care center with the press.

Along with the idea of a joint code of cooperation, goes the idea of an official spokesman for the hospital. An official spokesman with the authority to speak for the hospital is available on a twenty four hour basis in ninety percent or better of all the responding hospitals. The same percentage group states that the press has been notified as to the identity of these spokesmen.

Codes and spokesmen can be two constants that serve to build good hospital and newspaper relations. Newspapers have many types of news to cover. Hospitals are only one source of information

with which reporters work. Spending time on a variety of stories, interviewing a number of sources can keep reporters very busy. Hospitals could improve their worth as a news source by providing an official spokesman who will abide by a code of cooperation. If a reporter knows who will give information to the degree and type specified by the code, then it is likely he will be more amiable and open to releases and publicity a hospital might send to the press.

High turnover of reporters on some newspapers is another reason codes and spokesmen are valuable. The informed public relations practitioner should keep abreast of changes in personnel or newspapers with which the hospital has contact. If, however, a new or different news reporter should seek information from a hospital, then inquiries could be directed to the official spokesman who would have knowledge of the codes of cooperation and could enlighten the reporter about the code. The responsibility, therefore, lies with the hospital public relations personnel to acquaint spokesmen with the knowledge that, possibly, a reporter seeking information may not be aware of the code or set of guidelines concerning the release of information.

In addition the spokesmen for a hospital must be easily accessible. A reporter unfamiliar with a hospital should have no difficulty in finding the person or persons available on a twenty four hour basis with the authority to speak for the hospital. Again the responsibility lies with the public relations director to inform the employees of the hospital as to whom news representatives should

be referred when seeking information.

Several points concerning the use of press releases as communicative tools resulted in significantly different responses from the two surveyed groups. Question 11 explored several different types of stories that can be covered by press releases. All parts of the question; facilities, hours, policy, rates, and other stores of interest to the community; were significant on the .01 level except for the part concerning rates and fees which was significant on the .05 level. There also was a significant difference as to the frequency that newspapers pick up and use releases sent by hospitals.

The highest concentration of responses, 53.85 percent, from hospitals indicated that releases were picked up on the average almost always with the second highest concentration, 23.08 percent, indicated as about half the time. Newspapers however, indicated the highest concentration being rarely, 30.26 percent; the second highest, 25 percent, almost always; and about half of the time, 22.37 percent, was the third highest concentration of responses. The "rarely" category was selected as a response by only 4.62 percent of the responding hospitals.

The hospitals and newspapers do not agree as to how much of the release information is used for publication. A number of reasons could account for the differences. One is a turnover of employees, making them unfamiliar with the frequency of use of released materials. Another possible reason is a lack of monitoring of the

press to get an accurate estimate of how much material is used by the press that is sent out by hospital public relations offices, or an incorrect estimate from newspapers as to how many releases are received from hospitals. A third possible reason for the difference could be reception by the newspaper in the past from hospitals a flood of releases, newsworthy or not, that may have caused newspapers to discard releases before fair consideration of them.

Question 29-28, asking the frequency of releases sent to and received by the press, would seem to discount a misconception of the frequency of articles sent, however, as there was no significant difference between the two groups. Further investigation is necessary to determine why there is a difference and what the cause or causes of the difference are.

As well as differences in released information, there is a significant difference in the responses of the two groups concerning whether or not the press is encouraged by the hospitals to originate news stories and feature articles. Hospitals responded strongly, 87.69 percent, in the affirmative to the question, "Does your hospital encourage the press to visit your hospital to originate features or news stories?" whereas newspapers responded less enthusiastically, 59.21 percent, in the affirmative to the corresponding question, "Are you encouraged by the hospitals to visit them and originate features and news stories?" This seems to indicate a definite lack of communication exists between the hospitals and the newspapers. Not only does it seem that there

tends to be a lack of willingness to cooperate, but also a lack of understanding of the roles, functions, needs, and operations of each. Significant differences to questions as to whether or not luncheons are held or if press centers exist, or if deadlines are considered indicate a lack of understanding of the operation of each industry by the other. There is an ignorance of the methods, means and responsibilities. It appears as if the two groups assume too much about the other without actually understanding the reality of the other's situation. In other words not only do the newspapers and hospitals fail to see each other's point of view, they fail to see each other clearly. The conception of each one by the other appears to be full of misinformation.

Concerning the significant differences between the hospitals and newspapers over disaster plans, the wording of the question may be misleading. The hospital questionnaire posed the question, "Does your hospital have a disaster plan to accommodate the press in an emergency situation?"; the newspaper questionnaire posed it, "Do you know of a disaster plan to accommodate the press in an emergency situation?" Emergency plans may be in existence, however the newspapers may not be aware of the existence of the plan.

This underlines the problem of lacking communication. If the newspapers and hospitals could work together, for example, to establish disaster plans and thus eliminate one step should an actual emergency arise, not only the establishment of the plan but

also full knowledge of implementation if necessary, thus more efficiently coping with information transfer in a disaster. Working together, both parties voicing the needs of their operation, either in reporting of the news or caring for patients, would have overcome one obstacle in handling confusion while cementing the relationship between hospitals and newspapers.

There are significant differences in the viewing of the relationship by both industries. In response to "How would you describe your press relations?", the highest concentration of answers by hospitals, 46.15 per cent, stated "needs some improvement". Newspapers responded to "How would you describe your newspaper's relationship with the hospital?" most frequently, 39.47 percent, as "neutral". This seems to indicate a lack of consideration by the press of hospitals as an important news source. Whether this is due to a failure of the hospital personnel or the newspaper personnel is difficult to determine. More investigation into the hospital as a news source is definitely necessary to establish reasons for a neutral feeling towards health care institutions by the press. It does indicate, however, that hospital public relations needs improvement.

There are significant differences to questions referring to fair coverage of hospitals. This points out a need for increased cooperation and communication between the two industries. Newspapers are not going to seek out hospitals beyond the needs of the

paper. The hospital public relations offices, serving as spokesmen for community health care institutions, will have to perfect their operation and learn about the press and how to handle and work with the press.

As a further example, there was no significant difference in the responses to the questions asking, "When dealing with bad news, would you ever ask the media to play down a story?" and "Has a hospital ever asked you to play down a story when dealing with bad news?" However, there was a significant difference to questions concerning if a hospital had asked to have a "bad news" story played down, was the press cooperative? This question deserves more investigative attention. The responses of the two groups have opened an area for questioning. The manner in which the questions were stated, one relying upon the other, makes it a difficult area to analyze.

Knowledge of the operation of each other, hospitals and newspapers, rather than an assumption of how and why the other works and who are the participants would help to clear up many misunderstandings. If hospital public relations personnel understand the workings of not only the press in general, but the specific newspapers, editors and reporters who work with the represented institution, then the establishment and maintenance of a good rapport with the press could be an easier ideal to obtain. By the same token, if the individual newsmen were to learn about the

health care institutions' operation as a community service organization, both the individual newspapers and the communities they serve could benefit. The lack of cooperation and mutual trust hampers communication between the two groups. It is unfair for hospitals to ignore queries from the press, to treat newsmen as adversaries and then expect material released by hospital public relations officers to receive priority treatment. At the same time, newsmen cannot expect answers and cooperation if little or no attention is paid to valid news coming from health care institutions.

Clippings

In the second phase of the study, the clipping measurement analysis, it was observed that many of the stories printed about hospitals concerned construction of new facilities and expansion of existing facilities. In general the coverage appeared to be balanced and fair. Usually if an unfavorable story was printed about an institution, there were favorable stories about the institution printed by the newspaper. Most of the stories were neither favorable nor unfavorable, but rather written in a neutral tone.

Summary

The right to know of the people as viewed by the press and the right of privacy of hospital patients can cause conflict resulting

in a lack of understanding and communication between health care institutions and newspapers. A problem existing between community service institutions such as hospitals and the medium of the press can have an effect on the community.

The purpose of this study was to determine what the hospitals in Florida are doing to establish and maintain good press relations. how Florida newspapers view the hospitals' efforts, and where differences and problems exist between the hospitals' efforts and the impression of these efforts by the press.

The study was a two phase project. The major phase consisted of a set of dual surveys, one sent to hospitals that are members of the Florida Hospital Association Public Relations Council and a corresponding questionnaire sent to newspapers that were indicated by the responding hospitals as those which the hospitals dealt with most frequently. A Chi square analysis was run on the corresponding hospitals and newspapers.

The secondary phase of the study consisted of a measurement analysis of newspaper clippings for the first six months of 1975. The length of the articles were measured in column inches and fractions of column inches. Data received from the measurement review ranked the top ten newspapers and the top ten hospitals as far as giving and receiving the most coverage.

The results of the study show significant differences in various areas of hospital and newspaper relations. Codes of cooperation,

the existence and the use of such codes and the availability of official spokesmen for the hospitals, both basic tools for a hospital public relations department, were areas of difference.

The actual coverage of the hospital as news through the use of released information from the public relations department and press originated news features were areas of significant differences between the two groups.

As far as building a knowledge and a rapport between the two groups significant differences were reported in the areas of knowledge of disaster plans to accommodate the press in a time of emergency, existence of press centers and press luncheons, invitations to Board of Trustee meetings extended to the press, and a knowledge and a consideration of the deadlines of the press.

There were significant differences in response to whether the institution received fair news coverage and whether or not the press cooperated with hospitals in the playing down of bad news.

Basically, there seems to be a lack of cooperation and communication that stems from an ignorance of the operations, responsibilities, limitations, duties, and outlook of each party by the other. This can be evidenced by the fact that significant differences occurred in responses to questions concerning consideration of deadlines, existence of facilities available, encouragement of reporters to seek out hospitals as news sources, actual information made available and used for news stories, and

the quality of the relationship between hospitals and newspapers.

It can be inferred that communication is the key to successful hospital public relations. To encourage communication hospitals could offer a code to the press that would set guidelines for the release of information. The code could protect the privacy of patients without alienating the press. A hospital spokesman available on a twenty-four hour basis could be a point of contact for the press within an institution. Codes and spokesmen could be two constants that could serve as a foundation upon which good public relations between hospitals and newspapers could be built.

Further Research

There is a dfinite need for further esearch in the area of hospital and newspaper relations. An investigation into the professionalism of hospital public personnel, their educational background and practical experience in the field of public relations and the media is needed.

Study of internal relations, that is, relations with patients, volunteers, administrative, medical and maintenance personnel is needed. What are the problems of internal relations and how can they be handled, are two questions deserving consideration.

Hospital public relations personnel deal with other media besides newspapers. Similar studies for radio and television are needed to define the media - hospital relationship.

Broader study of media codes of cooperation is one area of investigation that is worth pursuing. Do hospitals on a national basis use them? Are the codes of cooperation effective? How do the media view the codes? Are the media consulted when codes are written?

Definitions of hospital public relations duties and the duties of the hospital administration is necessary to provide the public relations personnel with a clear view of the function of the public relations office. The role of hospital public relations in today's health care centers and the responsibility to the community should be examined to determine the degree, and the type of public relations needed for medical centers.

Specific problems encountered by hospital public relations personnel need to be studied. Examples of such problems would be public relations techniques for large metropolitan hospitals, or small rural community hospitals, how to handle malpractice problems, racial sensitivity, minority sensitivity, abortion, the right to die, labor or medical personnel strikes against the institution, and how to handle an expose showing the institution in an unfavorable light. In addition to specific problems, a study of the tool available to a hospital public relations practitioner such as when exclusive stories are granted to a paper or eporter, community service projects and fund raising campaigns is needed.

Because little investigation has been done in the area of

hospital public relations there is much room for research in this area. Enthusiastic responses from queried hospital public relations personnel indicate that those who are in the field are eager to obtain information made available about the field in which they as professionals are involved.

APPENDIX A

FLORIDA HOSPITAL ASSOCIATION'S PUBLIC RELATIONS COUNCIL

The statewide Public Relations Council was established on November 8, 1967. The Council Board of Directors is responsible to the Executive Vice President and Board of Trustees of the Florida Hospital Association.

PUBLIC RELATIONS COUNCIL GOALS include: (1) Providing for the exchange of public relations information, techniques and ideas; (2) Stimulating communications among persons engaged in public relations work at the local regional and state level; (3) Promoting the development and continuous improvement of hospital public relations programs by encourageing and assisting individual Council members to raise hospital public relations standards, to develop their knowledge, and to increase their competence; (4) Cultivating programs in cooperation with colleges and universitites and interested professional groups to stimulate and develop careers in hospital public relations; (5) Bringing uniformity of purpose to the resolution of public relations problems common to the hospital field; (6) Fostering the development of local and regional hospital public relations groups; and (7) Promoting and co-sponsoring with the Florida Hospital Association, educational institutes and programs on public relations.

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APPENDIX B

NEWSPAPER QUESTIONNAIRE

HOSPITAL-NEWSPAPER RELATIONS STUDY By Ms. Cathy Kirkham Florida Technological University

Newspaper _____City ____

1.	Do you ever receive from hospitals statements about their positions on contemporary health issues, e.g., the role of hospitals in community health the cost of a hospital visit today?	()	yes	()	no	()	don't	know
2.	Has your newspaper an established rapport with representatives from the hospital?	()	yes	()	no	()	don't	know
3.	Have you ever been invited to tours or an open house at a hospital?	()	yes	()	no	()	don't	know
4.	Are you routinely notified of public hospital Board of Trustees meetings?	()	yes	()	no	()	don't	know
5.	Do you usually attend?	()	yes	()	no	()	don't	know
6.	Do you feel that important hospital policy decisions are available to you?	()	yes	()	no	()	don't	know
7.	Does the institution(s) have a code or guide for the release of information to the press concerning patients?	()	yes	()	no	()	don't	know

8.	Has this code been given to — you?	()	yes	()	no	()	don't	know
9.	In your opinion, have all hospital employees you deal with been given this code?	()	yes	()	no	()	don't	know
10.	Does the institution follow the hospital and news media code of the Florida Hospital Association?	()	yes	()	no	()	don't	know
11.	Does your newspaper regularly receive press releases describing new or improved hospital facilities?	()	yes	()	no	()	don't	know
	Concerning changes in rates?	()	yes	()	no	()	don't	know
	Concerning visitors' hours and policies	()	yes	()	no	()	don't	know
	Concerning emergency room policy?	()	yes	()	no	()	don't	know
	Concerning other topics of interest to the community?	()	yes	()	no	()	don't	know
12.	Are you encouraged by the hospitals to visit them and originate features or news stories?	()	yes	()	no	()	don't	know
13.	Is there a particular person or persons available on a twenty four hour basis with authority as official spokesmen for the hospital?	()	yes	()	no	()	don't	know
14.	Do you know who these spokes- men are?	()	yes	()	no	()	don't	know
15.	Do you receive copies of hospital annual reports?	()	yes	()	no	()	don't	know

16.	Are photographers allowed inside the hospital?	()	yes	()	no	()	don't	know
17.	Does your newspaper routinely receive birth and death notices?	()	yes	()	no	()	don't	know
18.	Does your newspaper routinely receive press releases from the hospital(s)?	()	yes	()	no	()	don't	know
19.	Is there a press center with special facilities for reporters (as telephone and interviewing space)?	()	yes	()	no	()	don't	know
20.	Does the hospital hold press luncheons?	()	yes	()	no	()	don't	know
21.	Have hospitals ever purchased advertising space in your newspaper (e.g. to publicize the annual report, to publicize programs to salute hospital volunteers)?	()	yes	()	no	()	don't	know
22.	Do you know of a disaster plan to accomodate the press in an emergency situation?	()	yes	()	no	()	don't	know
23.	Do you feel that the hospital(s) considers your deadlines when sending out releases?	()	yes	()	no	()	don't	know
24.	Has a hospital ever asked you to play down a story when dealing with bad news?	()	yes	()	no	()	don't	know
25.	Have you cooperated in playing down a bad news story?	()	yes	()	no	()	don't	know
26.	Do you feel you give the hospital fair news coverage?	()	yes	()	no	()	don't	know

27.	Does your newspaper regularly () yes () no () don't know publish a health column furnished by a hospital?
28.	How often do you receive news releases from hospitals on the average? () daily () weekly () bi-weekly () monthly () less often than monthly
29.	How often does your newspaper develop a story based on a hospital news release? () always () most always () about half () rarely () never
30.	How would you describe your newspaper's relationship with the hospital(s)? () fantastic () needs some improvement () neutral () needs much improvement () extremely poor
31.	If there is more than one hospital in your area, please indicate any hospital with particularly good and/or bad press relationships:
	Exceptionally good press relations
	Exceptionally bad press relations
32.	Would you estimate what percentage of hospital stories published in your newspaper originate from the hospital's public relations office and what percentage originate from reporters?
	Hospital originated stories%
	News media originated stories%

Have you any additional comments or information that you would like to add? Please use back of page for your comments. Thank you.

HOSPITAL-NEWSPAPER RELATIONS STUDY
Ms. Cathy Kirkham
2622 Verona Trail
Winter Park, FL 32789

December 18, 1975

TO:

Selected Representatives of the Press

FROM:

Cathy Kirkham

Masters Degree Candidate

Your newspaper is invited to participate in a study of newspaper and hospital relations in the state. I'm asking hospitals for their opinions about press coverage and asking you about your local hospital or hospitals. This study is part of my work to complete my masters degree from the Communications Department of Florida Technological University, Orlando.

Please fill out the survey and return in the enclosed envelope. The Florida Hospital Association is assisting me with this project.

Although each hospital is unique, this study seeks general tendencies. Please answer the questions generally, noting any blatant exceptions.

Prompt attention in completing and returning the survey will be greatly appreciated. Results of the final study will be sent to you.

Thank you.

Enclosures: Surve

Survey Sheets

FHA Reply envelopes

Cathy Kirkham 2622 Verona Trail Winter Park, FL 32789

DATE:

January 19, 1976

T0:

Selected Members of the Press

FROM:

Cathy Kirkham

Masters Degree Candidate

I am sending you a second copy of the survey concerning newspaper and hospital relationships in the state, because I have not heard from your newspaper.

I would greatly appreciate your taking the time to complete the survey and return it to me. An envelope is enclosed for your convenience. The Florida Hospital Association is helping me with this project.

Each response is extremely important to help gain a clearer understanding of the conditions existing between newspaper and hospital communication in Florida.

Results of the study will be sent to you.

Thank you very much.

CK:jar Enclosures:

APPENDIX C

HOSPITAL QUESTIONNAIRE

HOSPITAL-NEWSPAPER RELATIONS STUDY

By
Ms. Cathy Kirkham
Florida Technological University

Name	of	hospital			
Count	ty _		Ci	ty_	
		has your hospital had a nt?			relations
		e of service does your ho heck all that apply.	spi	ta1	provide to patients?
()	General	()	Psychiatric
()	General - Excluding Obstetrics	()	OB-GYN
()	Special - Medical	()	Special Rehabilitation
()	Pediatrics	()	Other
How n	nany	beds does your hospital	have	e? _	
()	Private, non-profit	()	Tax-District
()	Private, investor owned	()	Public Health Trust
()	State	()	City - County
()	County	()	Other

Would you list the newspapers that you usually send press releases? Would you also indicate the names of the reporters for each newspaper that you deal with most frequently?

1.	Does your hospital have available for release to the press statements about the institution's position on contemporary health issued, eg., the role of hospitals in community health, the cost of a hospital visit today?)	yes	()	no
2.	Does your hospital have an established rapport with representatives from the press, especially reporters?	()	yes	()	no
3.	Does your hospital conduct tours and hold open house for the press?	()	yes	()	no
4.	Is the press invited to Board of Trustee meetings?	()	yes	()	no
5.	Usually do members of the press attend?	()	yes	()	no
6.	Are all policy decisions of the Board of Trustees made available to the press for dissemination?	()	yes	()	no
7.	Does your institution have a code or guide for the release of information to the press concerning patients?	()	yes	()	no
8.	Has this code been distributed to the press?	()	yes	()	no
9.	Have all employees of the hospital who may deal with the press been given this code?	()	yes	()	no
10.	Does your institution follow the hospital and news media code of cooperation of the Florida Hospital Association?	()	yes	()	no
1.	Does your institution regularly send to the press releases describing new or improved facilities and services of your hospital?	()	yes	()	no
	Concerning changes in rates and fees?	()	yes	()	no

	Concerning visitor's hours and policies?	()	yes	()	no
	Concerning emergency room policy?	()	yes	()	no
	Concerning other topics of interest to the community?	()	yes	()	no
12.	Does your hospital encourage the press to visit your hospital to originate features or news stories?	()	yes	()	no
13.	Is there a particular person or set of persons in your hospital who are available on a twenty four hour basis with the authority as official spokesmen for the hospital?	()	yes	()	no
14.	Has the press been notified as to whom these spokesmen are?	()	yes	()	no
15.	Do you mail copies of your annual report to the press?	()	yes	()	no
16.	Are photographers allowed inside your hospital?	()	yes	()	no
17.	Do you routinely send out birth and death notices to the press?	()	yes	()	no
18.	Do you routinely send out press releases?	()	yes	()	no
19.	Do you have a press center with special facilities for reporters? (as telephones and interviewing space)	()	yes	()	no
20.	Do you ever hold press luncheons?	()	yes	()	no
21.	Does your hospital ever buy advertising space in the newspaper (e.g. to publicize the annual report, to publicize programs to salute hospital volunteers)?	()	yes	()	no
22.	Does your hospital have a disaster plan to accommodate the press in an emergency situation?	()	yes	()	no

23.	Do you consider the deadlines of the press when sending out releases?	()	yes	()	no
24.	Does your institution publish an annual roster and press manual to be distributed to newspapers?	()	yes	()	no
25.	When dealing with bad news, would you ever ask the media to play down a story?	()	yes	()	no
26.	If you have asked the press to play down a story, did you receive cooperation from the press?	()	yes	()	no
27.	Do you feel your hospital receives fair news coverage?	()	yes	()	no
28.	Does your hospital publish a health column regularly in the newspaper?	()	yes	()	no
29.	How often do you send news releases to the () daily () weekly () bi-weekly (() less than monthly	pre:	ss noi	on the	e av	vei	age?
30.	How often are your releases picked up on the () always () most always () about he () never	e a alf	vei	rage? () 1	rare	ely	/
31.	How would you describe your press relations () fantastic () needs some improvement () needs much improvement () extremely	? (po	or) neut	ral		
32.	Would you estimate what percentage of stories about your hospital that are published originate from the hospital's public relations office and what percentage originate from the newsmen? Hospital originated stories?% News media originated stories%						
33.	Have you ever worked for the news media?						
34.	Have you any additional comments or informa like to add? Please use back of page for					NOI	uld

34.

March 19, 1975

TO: PRC Membership

The enclosed questionnaire has been designed to obtain from hospital public realtions their views of the rapport between the institution they represent and the press. It is part of a study investigating newspaper and hospital relations in the state.

Ms. Cathy Kirkham, a masters degree candidate at Florida Technological University, is conducting the study.

Your cooperation is requested. Please fill out the survey and return it in the enclosed envelope. Prompt attention in completing and returning the survey will be greatly appreciated.

Results of the final study will be sent to you.

Thank you very much.

Wade H. Edwards PRC Secretary

Enc.

Cathy Kirkham 2622 Verona Trail Winter Park Florida 32789

July 3, 1975

To: Members of the Florida Hospital Association's PR Council

Since I did not hear from you on the first survey, I am sending a second copy to you.

I would greatly appreciate your taking time to fill out the survey and return it to me. An addressed, stamped envelope is enclosed.

Results of the study will be sent to you.

Thank you very much.

Cathy Kirkham Masters Candidate Department of Communication Florida Technological University

APPENDIX D

QUESTION 32 - RESPONSES

Table 23

Percentages of hospital originated stories and newspaper originated stories

Percentage	Originated	Responses						
Hospitals	Newspapers	Hospitals	Newspapers					
100	0	1	- 4					
99	0 1 2 5 10	1 1 3 3 13	-					
98	2	3	<u> </u>					
95	5	3	3					
90	10	13	11					
85	15	1	5					
80	20	4 12	4					
75	25	12	-					
70	30	1	1					
65	35	1						
60	40	1	1 7					
50	50	8						
40	60	1 1 1 8 1 1	1					
30	70	1	2					
25	75	1	2					
20	80	1	4					
15	85	2	3					
10	90 95	2	0					
5 1	99		1 2 4 3 8 2 2					
.01	99.99		1					
0	100		6					

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