

get the budget to do a set of groups. That's what this is designed for." (More info from Selz at 310/842-8310; fax 310/842-7212)

## TIMELY IDEA BOOK ON HEALTHCARE REFORM

- **Variation on Constituency Relations Programs:** "Harris Methodist Health Foundation (Fort Worth) ties young professionals in the community with the system by creating an informed constituency. Health Exchange has grown to 400 participants & alumni. Participants attend quarterly meetings for 2 years. There are 'no strings attached' -- no dues nor solicitations for donations. In return, members receive an intimate look at the medical world & Harris System thru presentations & tours. Exchange members help their businesses & the Harris System reach common goals & are potential board mbrs. (Tom Peck, exec dir, public & patient rels)"
- **Dealing with Healthcare's Trust Problem:** "A sentiment crossing geographic & demographic lines is a lingering distrust of every healthcare segment. Any reform plan seen as a solo effort is less credible than a proposal advanced by many organizations allied in a coalition. For instance, consumers tend to agree that physicians should be involved & take a leading role in proposals to change the system, but they're less supportive of anything they perceive to be physician-only. In one consumer focus group, when asked who should be in charge of developing reform proposals, some supported doctors, others government, some said hospitals -- but the general consensus was 'they all ought to work together.' Enlisting allies & building coalitions is one way to reassure the public that a reform proposal is genuine, honest & in their best interests, rather than being a self-serving effort of one special-interest group. (Kathleen Lewton, vp, healthcare, Porter/Novelli, Chi)"

**Managing Healthcare Reform: Ideas for Leaders** is a collection of advice & activities drawn from 300 mbrs of ASHCMPR (American Society for Healthcare Marketing & Public Relations). Chapters cover: reform; communicating change; state & ass'n strategies; government relations activities; media relations; advocacy thru advertorials; publications addressing reform; trustees & governing board involvement; payer & employer activities; physician participation; integrated delivery system development; home health & mental health programs; community partnerships. Each entry includes contributor's name, title, org'n & location. (\$25; 800/AHA-2626)

## WHO'S WHO IN PUBLIC RELATIONS

**ELECTED.** Public Affairs Council chrm, Austin Sullivan, Jr. (vp & dpa, General Mills, Mpls); chrm-elect, Barbara Bey (mng dir pa, American Council of Life Ins, DC); 3 new vice chrm, Fruzsina Harsanyi (vp-pa & corp coms, ABB Inc, DC), James Hart, Jr. (vp-pa, Panhandle Eastern Corp, Houston) & Fritz Wenzler (vp gov't afrs, Johnson &

Johnson, New Brunswick, NJ); treas, Derrel DePasse (vp worldwide gov't rels, Varian Assocs, Palo Alto).

**HONORS.** Kent State U presents the first annual Pathfinder 2000 Award to Pat Jackson of Jackson Jackson & Wagner & pr reporter. Initiation of award coincides with 25th anniv of Ralph C. Darrow PRSSA chapter.

## Outstanding Case Study That Puts All The Organizational Trends Together COMMUNICATION, PR IDEAS DRIVE UNIQUE RE-ENGINEERING PLAN

While some object to the term "re-engineering" because it sounds like taking the humanity out of the process, Francis Tuttle Vo-Tech Center (Oklahoma City) bases its re-engineering efforts on 1) better understanding (via communications), 2) building relationships & 3) customer satisfaction. "We've taken the concept of CQI (continuous quality improvement) & put it together with strategic planning, and built it all around communication & feedback from our internal & external customers," Susan Hardy Brooks, Center's pr ofcr, told pr. Like this:

1. **Candid assessment by employees begins it.** In the spring of '90 (when program began), employees were asked: a) What changes do you think our organization should make to best meet its goals & objectives and plan for the future? b) Do you feel you presently report to the right person in the organization, and why or why not? c) If you had the opportunity to restructure the Center, what would you do? d) Is there something we could do as an organization to make you more productive in your present job? *Over 90% responded to these open-ended questions.*
2. **Based on employees' responses, management was restructured** -- layers of middle management eliminated & a management team created. With this kind of movement, midmanagement is most threatened because they "have to totally rethink what their role in the organization is & how they work. We didn't necessarily fire people, but changed them from managers to doers. Even the management team had to rethink how they work because instead of teams driven by them, we have a bottom-up process." Management vision still comes from the CEO level, but otherwise the organizational chart has been turned upside down -- an inverted pyramid with customers at the top, superintendent & board at the bottom.
3. **Huge commitment to training, culture change.** "We tried to move too fast & had to step back & make a larger training commitment to bring employees along and make the climate right for implementing. That's why this all began in '90 & we just last year started stepping across into

"I don't know many who have built the whole process around communication rather than charts & data. It's a different twist & I'm hopeful that's what will cause ours to be successful...because we have built it all around communication."

the process. It took us that long to get our culture right." 200 were trained in a) customer relations, b) leadership styles, c) personal goal setting -- married with d) what the employee is doing to be productive on the job, e) teamwork, f) quality issues, g) adjusting to change.

4. **Sought internal & external customer input** "on where we should be going, what we should be doing." Held focus groups with students, vendors, parents, business & industry, employees. From the data developed institutional goals -- "the starting place for our strategic planning."
5. **Set up a quality guidance team** to adopt quality principles for the organization. Trained quality advisors -- employees trained in using traditional quality tools -- "so they could begin using them in their workteams."
6. **The "catchball" principle.** At the workteam level, the quality advisor facilitated development of departmental strategies to support institutional goals. Quality processes will identify other areas across campus that need improvement. "We're not making CQI into a paperwork nightmare. We're integrating it with strategic planning & ongoing communication. What we'll do now is 'catchball' -- gather input from customers, then toss it back to them in a never-ending process of back & forth. So we'll never lose touch & we'll always be modifying & moving forward with our plan."
7. **Continual assessment.** Use subscales in the questionnaire to find out how employees are feeling about a) organization's constancy of purpose, b) employee empowerment, c) trust, d) whether org'n has an external customer focus, e) an internal customer focus -- plus f) cooperation, g) teamwork, h) communication, i) rewards & recognition. "That has had a big impact on some of the strategies the pr dep't is pursuing, giving us a larger internal focus, changing some of our communication efforts."
8. **Crossfunctional process-action teams** -- from a mix of dep'ts -- tackle processes that need improvement, according to internal/external customer input. This is ongoing.
9. **Developing a flexible strategic plan.** "We have a set of goals & strategies for the institution & our dep't, but a fluid one, always changing & being modified...at least on an annual basis. It's a working process rather than a document that sits on the shelf collecting dust. That's what we're working toward. It's a long-term commitment."

**The way we've tied it all together is what's going to help us be successful with it.** I've read about problems with TQM. But I feel we're headed down a road that's going to be productive, not just totally jumping off the deep end with TQM & letting that be our sole style of leadership & operational mode, but combining it with communication & strategic planning & our overall visioning process."

10. **Bottomline results.** a) Enrollment has improved. "Can't say yet it's a direct result of what we're doing. But it has to have a direct impact because we started with the customer and everything we're doing everyday now -- our plans, daily work habits -- is affected by that input."

b) Latest assessment indicates employee attitudes & feelings about the Center are better than 3 yrs ago. "If you support the notion that employees are the #1 customer & if they are happy you'll have happy external customers, then this is a direct benefit" of Center's re-engineering efforts.

**"You have to have:** 1) Commitment from the top. It has to be more than lipservice. It has to be longterm. 2) A huge training commitment because there's so much that needs to go on with employees. 3) Commitment to *overcommunication* -- where you are constantly communicating with & listening to employees & customers. It's a big time & resource commitment. As long as the focus is on results rather than the tools, it can work."

### NEW RESEARCH SERVICE -- QUICK-STEP FOCUS GROUPS

Every other Thursday (since August), Marketing Matrix runs 2 Quick-Step Focus Groups -- where organizations can buy 20 minute time slots to have their issues/questions presented. "We take one slot -- usually on financial services because that's the focus of our business -- and other organizations can ask anything they want in the remaining slots," Marcia Selz, pres of Marketing Matrix (Los Angeles) & project manager of the Quick-Step Focus Groups, told prr. Analogous to piggyback questions in survey research.

- **Two 20-minute slots** (1 in each group) **cost \$3,800** -- "you should never do just one group because you could get an anomaly in one group that could throw everything off."
- Groups use a **mix of respondents:** men & women, working & retired, young & old.
- **1st group is "typically investors** (which is 27% of the population). They represent a more uptier type of consumer."
- 2nd group tends to be **non-investors with some money** (\$5000) but in a savings account or CD -- "pretty much the other part of the buying population."

Suggested uses: a) Doing a disaster check before beginning a campaign. Copy is reviewed in the group to discover issues, reactions. b) An org'n in a crisis situation can quickly come in to see what the problems are. c) Learning public's attitudes toward a celebrity before hiring him or her.

Selz has been a researcher for 25 years. "Before starting my own firm, I worked in corporate America. There were many times when I had just a couple of issues I wanted to run by somebody -- not enough of a project to