

A Career Unplanned: One PR Professional's 35-Year Journey from Would-Be-Sportswriter to Hospital Board Chair

*Submitted by: Ross K. Goldberg
President, Kevin/Ross Public Relations
Westlake Village, CA*

I am not a physician; but for the past 35 years, I've had the most difficult job in healthcare. I am in public relations.

You think it's difficult diagnosing an illness? Try explaining on the evening news why 45 million of our fellow citizens wake up each morning without health insurance. Or how about taking a shellacking for the sea of medical errors reported in the media ... or discussing long waits in a hospital's emergency department ... or trying to translate the alphabet soup of HMOs, PPOs, DRGs, HSAs, ACOs and MSOs?

Crazy business we're in. One time I produced an annual report for my company that I thought was terrific. The day it came out, the CEO walked into my office and, holding the printed piece in his hand, said to me with a straight face "this isn't the color it's going to be, is it?" I felt like saying "no, we printed one copy just for you."

That story is equaled by a colleague of mine who once landed a great article for his company in a major daily. The CEO called him into his office and, with newspaper in hand, said to him "good story but I would like to change one of the quotes."

Astonishing. What are these people thinking? And more to the point, what was I thinking taking this up as a career? Some nights I lie in bed wondering just how I got where I am. I wonder, too, how many other people of my generation have ended-up spending their lives in the wilderness of careers for which they never planned.

As a journalism major and editor of my college newspaper, my goal was to become the country's next great baseball writer, expecting to be writing about Clemente and Clemens, not colonoscopies and chiropractors. But in my senior year I read an article that said "The trouble with being a sportswriter is that you have to take sports seriously." It was my check-out moment. I realized I was simply too big a fan to not cheer in the press box. So with that goal vaporized I turned my path elsewhere. I had an education and choices. But choices sometimes bring with them unintended consequences.

My father was a child of The Great Depression; and for those of his generation, a steady job was what mattered most. What they were seeking was security, a paycheck and the satisfaction that comes from a "good tired" at the end of the day. Servicemen returning from Europe or the Pacific looked for jobs, not careers or clubby cloakrooms, and professional enjoyment

seldom figured into the equation. Providing for your family was doing your duty.

My sister and I are the first generation in our family to attend college, the first to choose what we wanted to do with our lives. We could be anything we wanted to be. She chose to become an attorney. But what did I choose to become?

Upon graduation, I landed a job with a corporation that owned both hotels and hospitals. Had I opened the other door, I might be writing this from a resort in Tahiti. Instead, I am writing it with three decades of healthcare PR experience behind me, staying the course through seven presidents, countless speed bumps and thousands of proposals on how to cure the nation's healthcare ills. The healthcare reform that passed last year is indeed a milestone, but it's not the only upheaval I've lived through.

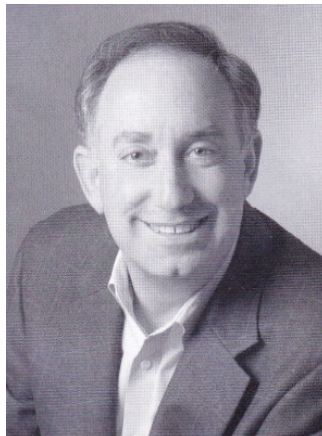
Over the years, I have represented hospitals and health plans, doctors and trade associations, publicly held companies and not-for-profit community enterprises I have tried to help them explain to the public why a woman died unnecessarily during knee surgery or why healthcare costs rise at double-digit rates or how the emergence of electronic health records can at the same time provide unmatched opportunities for effectiveness of care while raising legitimate concerns over invasion of personal privacy.

Somewhere along this unimaginable journey, the unthinkable happened. People began viewing me as an expert I found myself invited to speak at national conferences, teach at my alma mater and write for prestigious trade journals. Then a little more than two years ago the inconceivable occurred: I was elected chairman of the board of trustees for my local, HCA-owned hospital, Los Robles Hospital and Medical Center.

Public Relations and the Board

I am told that not many public relations professionals end up chairman of hospital boards. I find that curious. Ronald Reagan was once asked if he thought being an actor was an appropriate background for being President of the United States. Without missing a beat he answered "I don't know how you CAN be President if you HAVEN'T been an actor." I feel the same way about having a background in public relations as it applies to hospital boards. It is the perfect upbringing; there is no training that is better. Here's why:

It is a public relations perspective, more than any other, which allows a hospital to look through



the lens of a consumer and understand what is important to them. Having this outlook at the table is invaluable to a hospital which is trying to build (or rebuild) its brand or capture new market share in creative and imaginative ways as traditional streams of revenue dry up. If the creativity doesn't come from PR, then from whom?

A PR voice in the boardroom can remind the other board members—and hospital management for that matter—that a sound hospital must be committed to practicing daily the four most important elements of trust: integrity, honesty, promise-keeping and loyalty. Only when a hospital has those as its foundation and house-wide commitment can it build a strong and trusting relationship with the public. And only once that is achieved can the hospital play an important role in fostering its community's health and well-being ... thus truly fulfilling its mission.

It is a public relations voice in the boardroom, which can help explain how to engage the public in some of the seminal issues with which we are grappling both as a nation and in local communities: cost, quality, access and fairness in how healthcare is delivered and paid for in America. An educated public is a powerful ally and public relations is the tool that can build these alliances now and for the future. And speaking of engaging the public, public relations can remind board members that the most important thing they can do is listen.

Public relations can provide immeasurable value at the time of crisis. It can gauge public sentiment, suggest key messaging and take a broad and unbiased view of how an issue will play with—and how to communicate with—all external and internal publics. More importantly, having a public relations professional on the board can provide the upfront strategic thinking that can often help prevent a crisis from escalating to the point where a hospital feels the need to redesign the plane in mid-flight.

Having a seasoned public relations practitioner on the board can open eyes to how quickly the world of communications is changing and the importance of adapting accordingly. That means having a hospital budget that provides for a robust website, engaging in social media, or communicating with various publics virally instead of clinging to a past that is quickly dying. The irony of course is that other service industries—airlines, hotels, banks—caught on to this years ago. Yet most hospital boards speak with still don't fully understand how they can leverage the Power of online communications to their benefit. Part of the reason may be because most hospital boards are still populated with "yesterday's leaders"—people who helped build the community and/or were fundamental to the hospital's development. And while experience is valuable currency, what about tomorrow's leaders? Young people live in a different world, speak a different language, communicate in different ways and have different things that are important to them. So while appreciating that youth is more than a time of life—it is also a state of mind—it wouldn't hurt for hospital boards to consider adding a few 20 somethings or 30 somethings among their ranks.

Using Their Talents

Inviting those with public relations backgrounds to serve on hospital boards is only half of the equation. The other half involves properly utilizing their talents. Board members are

often selected because they bring a perspective or craft that the hospital believes to be of value. But all too often, they then spend their time admiring themselves in the mirror as hospital leadership fails to fully take advantage of what these individuals have to offer. As great as it might be to have a strong voice at monthly or bimonthly board meetings, it would be greater still if these diverse talents can be put to use in a more tangible way. In fundraising what's important is the "ask." Boards need to do a better job of asking each individual member to contribute in their own way. PR folks have a lot to contribute.

Looking Back and Forward

On December 31, 2010, my two-year term as board chair ended (though I remain on the board for another 12 months in completing my six-year run). I am happy to report that in my two years we weren't just passing time. During my term the final phase of the hospital's master plan was approved by the city council, thus allowing our facility to expand while fulfilling state seismic safety requirements. We were designated a stroke center. We achieved JCAHO accreditation. We rewrote our Board's bylaws and wrote a new vision statement for the hospital that included the word "trust." And we were designated one of two trauma centers in the county.

The experience as board chair allowed me to see (more than ever) a hospital from the inside—how decisions are made, how physicians and lay-members can interact and how at least one local hospital tries to respond to the changing needs of a growing and diverse community. But have I changed?

Deep down I remain a consumer, heart sickened by the industry's paralysis in its attempt to become truly consumer-friendly and passionate about the need to simplify our healthcare system. I am worried about patient safety, alarmed by our national obesity epidemic and greatly concerned with how we provide end of life care with compassion and dignity. And remain a champion for anyone who will listen concerning what healthcare organizations must do if they are to ever regain the public's long lost trust.

At the same time, I am hopeful when I see consumers take personal responsibility for their own health, applaud the movement afoot for pricing transparency, and admire those hospitals truly committed to providing community benefit. I am proud of the people I've come to know on the board, believing that the people who work in healthcare are, for the most part, those with good hearts and good to be around. But like someone unable to take yes for an answer, I just can't figure out how I ended up among them.

I now have a 15-year-old son, and together we pursue my true passion through season seats for the Dodgers, visiting other ballparks, and playing catch in our backyard. The irony is not lost on me that it is the career for which I never planned that has provided the wherewithal to make the tickets, the travel and the backyard all possible. Still, I am not sure what wisdom I can pass on to my son except to tell him that life has a sly sense of humor, and you better know how to handle a curve.