KING'S FUND
PROJECT PAPER

HOSPITAL HOUSE JOURNALS

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Report of a series of studies
of hospital house publications

by

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FOREWORD

This project paper presents the results of a series of studies of hospital house journals. It reflects the views of producers and consumers - the editors of house journals and their readers. The project was undertaken originally at the suggestion of a group of editors who were anxious to obtain some idea of the value of house publications as well as possible guide-lines for future development. The report is based, firstly, on a questionnaire completed by 133 editors, and secondly, on readership surveys of 17 publications in 122 hospitals.

The individual surveys have, in most cases, been used by editors concerned to improve their publications, but the general findings of the study have a much wider implication, since some very clear principles have emerged.

The project has highlighted the importance of good communications in hospitals, has demonstrated that a house publication can be a valuable means of attaining this end, and has also given a very clear indication of the opinions and needs of hospital staff.

The number of hospital house journals has increased considerably during the past few years, demonstrating the value of such publications both as a tool of management and a means of two-way communication.

It is hoped that this report will help to emphasize the need for house publications in the hospital world and will give some indication of <u>what</u> they should contain. It has not attempted, however, to go into details of <u>how</u> this can be done - this will be the subject of a Manual for Editors to be published in the near future.

CONTENTS

INTRODUCTION

What is a house journal?

The British Association of Industrial Editors (BAIE) defines a house journal as 'a publication issued periodically and not primarily for profit by an industrial undertaking, business house or public service'. Although known by a variety of titles - news sheet, newsletter, staff magazine, staff bulletin and so on - publications of this type all have one aim in common - 'the creation and maintenance of good will through sustained communication'. (1)

'A good two-way communication in this age where big organisations are spread all over the world is essential to enlightened management', declared HRH, the Duke of Edinburgh, 'and a good house journal is probably one of the best ways of achieving this'. (2)

Current figures demonstrate how the business world has taken this advice to heart. Although the exact number of house journals in the United Kingdom is unknown, it is believed to exceed 2,300. Members of the BAIE are responsible for 1,800 whose combined circulation is estimated to be 23 million copies for a single issue of each - a circulation figure far in excess of that of the country's national newspapers.

In the United States of America at least 10,000 house journals are produced with a combined circulation of nearly 200 million. There is said to be a total of 1,670 house journals published by leading commercial and industrial organisations in Western Europe.

The earliest house journal of which any record can be found was published by the Lowell Cotton Mills of Massachusetts, USA. The honour in the U.K. goes to the Great Western Railway whose staff magazine first appeared in 1862. The oldest house journal still in production in this country is the National Post, first published by the National Cash Register Company in 1899.

House journals in the National Health Service

As the largest single civilian employer in the country and possibly the third largest in the world, the National Health Service certainly comes into Prince Philip's category of 'big organisations' and according to Dr. R H Revans hospitals and allied institutions stand in no peculiar position, for they share with factories and industrial plants the paralysing problems of poor communications. (3)

Following the fomation of a new Hospital Management Committee in the Midlands, an attitude survey in 1965 revealed that the fundamental problem was not the actual difficulties of re-grouping and integration, but 'the lack of communication caused by rapid clinical development within a static administrative pattern'. (4)

'There's great difficulty in getting to know things; there's no method of communication' was a frequent complaint in this particular survey. One of the first actions of the new management committee on receiving the results was to request the early issue of a regular newsletter. Several years later, one of the four popular and successful publications for that particular group of hospitals was included in a national readership survey (see Part II) and produced the highest satisfaction level of any of the journals studied.

The first serious study of house journals in the hospital field was undertaken in 1966 when only 22 publications could be found .(5) By the beginning of 1974, the total number of house journals, excluding patients' magazines and other publications restricted to particular staff groups, e.g. nurses, was approaching the 300 mark.

Why this project paper?

The King's Fund Centre receives a steady stream of requests for help and information on the production of hospital house publications. Attempts to meet the need includes the provision of lending folders from the Centre's library, an occasional information package service, a biennial national competition and annual all-day workshops for practising editors and newcomers to the field.

Some hospital authorities have only a very hazy notion of the purpose and content of a good house journal but have a vague idea that it may be a 'good thing' to have one. The more forward-looking managements have appreciated the potential value of house publications and give support, both financial and moral. On the whole, however, hospital house journals are largely dependant upon the enthusiasm and devotion of a number of employees who undertake editorial duties in addition to their full-time jobs in the health service, and with little or no experience and training. A minority have gained official recognition, with editorship of a journal written into their job descriptions and finance definitely allocated.

The experiences of the majority of these editors have led a number of them to ask the King's Fund to publish some of the material that has been collected during the past eight years in the hope that the value and importance of house journals in the hospital and health services will be more widely appreciated by management. This project paper is an attempt to meet this expressed need.

Breadth and depth

The first section is a study in breadth of a survey of questionnaires completed by the editors of 133 hospital house journals and gives an overall picture of the general scene as it has developed over the past few years.

Part Two can be described as a study in depth, being the report of a readership survey of 17 different publications prepared from questionnaires completed by all grades of staff employed in the hospitals as well as a smaller number of 'outside' readers. This survey gives the candid opinions of the readers and provides a clear guide for future action.

Both studies have been carried out over a period of a few years. The only disadvantage that results is the difficulty of making accurate comparisons of costs.

[illegible] have only a very hazy notion of the [illegible]

[illegible] have journal but have a vague idea that [illegible]

[illegible] is done so. The more forward-looking management [illegible]

[illegible] the potential value of house publications and give [illegible]

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[illegible] dependent upon the enthusiasm and devotion of [illegible]

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during the past eight years in the hope that the [illegible]

[illegible] in the hospital and health services will be more [illegible]

[illegible]. This project paper is an attempt to [illegible]

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survey of 17 different publications prepared from questionnaires [illegible]

[illegible] of staff employed in the hospitals as well as a smaller [illegible]

[illegible]. This survey gives the candid opinions of the readers [illegible]

[illegible] for future action.

[illegible] have been carried out over a period of a few years [illegible]

[illegible] that results is the difficulty of making accurate [illegible]

References:

(1) HAZZLEWOOD, J.W. House Journals. Facts of print series.

(2) HRH Prince Philip, Duke of Edinburgh at the 10th Annual Luncheon of the British Association of Industrial Editors.

(3) Conference on Hospital Communications. 19 November 1964. The Hospital Centre, London.

(4) PANTALL, J and ELLIOTT, J.R. Can research aid hospital management? The Hospital. June, July, August 1965.

(5) HINKS, M. Dorothy. House Journals - an aid to management? The Hospital. October 1966.

References

(1) HAZZLEWOOD, J.W. House Journal. [illegible]

(2) HRH Prince Philip, Duke of Edinburgh [illegible]
of the British Association of Industrial [illegible]

(3) Conference on Hospital Communication. [illegible]
The Hospital Centre, London.

(4) PANTALL, J and ELLIOTT, [illegible]
management? The Hospital. [illegible]

(5) HINKS, M. Dorothy. House [illegible]
The Hospital. October 1956.

PART ONE - A STUDY IN BREADTH

GENERAL

The information in this section was obtained by means of questionnaires completed by the editors of 133 hospital house journals. Except where otherwise stated, all statistics in this section refer to that number (133).

These journals covered a very wide range of readership, the smallest being a weekly publication for a single unit employing only 190 staff. At the other end of the scale was a quarterly regional journal distributed among nearly 10,000 staff. Details of distribution are given in Table 1. Allowing for hospitals receiving group publications in addition to their own house journals, the total number of hospitals and units covered by the 133 journals was 122 with a total staff in the region of 225,000. Seven of the publications were produced by hospitals for the mentally handicapped, while psychiatric hospitals accounted for a further thirty four.

The majority of hospital publications in existence have appeared within the last eight years; no less than 75 per cent of those included in this study have been started since 1965. (See Table 2)

The frequency of publication in this selection varies, as shown in Table 3 with monthly journals at the top of the list (40 per cent of the total). The type of contents varies according to the frequency, as will be explained elsewhere.

Only 28 of the 133 publications were produced by printers typeset: 22 were produced by offset litho processes and the remainder (70 per cent of the total) were duplicated. The appearance of a number of the duplicated magazines was improved by printed covers. This proportion between types roughly still holds good, but there is a growing tendency towards the increased use of offset litho printing.

PART ONE - A STUDY IN BREADTH

GENERAL

The information in this section was [illegible]
by the edition of 133 hospital house [illegible]
statistics in this section refer to [illegible]

These journals covered a very wide [illegible]
publication for a single unit [illegible]
was a quarterly regional journal [illegible]
distribution are given in Table [illegible]
in addition to their own house [illegible]
covered by the 133 journals was [illegible]
Seven of the publications were [illegible]
while psychiatric hospital [illegible]

The majority of hospital [illegible]
eight years; no less than [illegible]
started since 1965. [illegible]

The frequency of publication [illegible]
monthly journals at the top of the [illegible]
contents varies according to the [illegible]

Only 28 of the 133 publications were [illegible]
produced by offset litho process [illegible]
were duplicated. The appearance of [illegible]
was improved by printed covers. This [illegible]
looks good, but there is a growing [illegible]
litho printing.

TYPE OF HOSPITAL/AUTHORITY	No of JOURNALS
SINGLE HOSPITALS including 7 one-hospital HMCs	48
HOSPITAL MANAGEMENT COMMITTEES	63
TEACHING HOSPITALS	12 *
REGIONAL BOARDS	3
HOSPITAL AUTHORITY national	1
VOLUNTARY HOSPITALS	3
TOTAL:	130

Table 1: TYPES OF HOSPITALS AND AUTHORITIES

* 3 Teaching groups had 2 journals each

PERIOD	TOTAL No JOURNALS STARTED
1950-59	10
1960-64	17
1964-69	59
1970-72	42
UNKNOWN	5
TOTAL:	133

Table 2: AGE OF JOURNALS

FREQUENCY OF PUBLICATION	No of JOURNALS	FREQUENCY OF PUBLICATION	No of JOURNALS
WEEKLY	10	QUARTERLY	29
FORTNIGHTLY	4	3 Per Annum	2
MONTHLY	53	6 - MONTHLY	1
BI - MONTHLY	31	9 - MONTHLY	1
SIX WEEKLY	1	ANNUAL	1
		TOTAL:	133

Table 3: FREQUENCY OF PUBLICATION

FREQUENCY OF PUBLICATION	No. of JOURNALS	PERCENTAGE OF JOURNALS
DAILY	10	[illegible]
[illegible] WEEKLY	4	[illegible]
FORTNIGHTLY	53	[illegible]
MONTHLY	[illegible]	[illegible]
BI-MONTHLY	1	[illegible]
TOTAL		

TABLE - FREQUENCY OF PUBLICATION

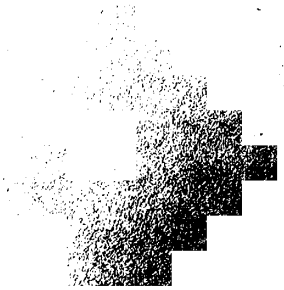
FINANCE

Finance is the rock on which many potential editorial ventures have foundered. With restricted budgets and ever-increasing costs, the official view very often is to place such 'luxuries' at the bottom of the priority list. This study, however, reveals that 70 per cent of the 133 publications were financed entirely from Exchequer funds, and a further 7 per cent were assisted from the same source. (see Table 4)

Rising costs during the years covered by this survey make any really meaningful comparison of costs very difficult. In addition, size, frequency, methods of production and circulation figures all affect costs in varying degrees. This aspect is considered in greater detail in Part Two.

The highest annual allocation in the survey was the sum of £2,500 per annum from Endowment Funds for a newspaper type of house journal with a bi-monthly circulation of 10,000. Other examples of Endowment-funded journals were £1,200 per annum for a twice yearly paper with a circulation of 13,500 and a similar sum for a quarterly magazine with a 2,500 circulation.

The highest Exchequer estimate was £1,000 for 4,000 copies of a bi-monthly printed magazine. A monthly duplicated magazine with a circulation of 1,800 was estimated to cost £160. Some idea of the varying costs covered by Exchequer funds is given in Figure 1. No details of costs were given for 16 of the 94 house journals entirely financed from hospital budgets, the opinion in these cases being that the cost could be absorbed without undue difficulty.



SOURCES OF FINANCE	No OF JOURNALS
EXCHEQUER FUNDS	94
EXCHEQUER & FREE MONIES	3
EXCHEQUER & SALE OF JOURNALS	4
EXCHEQUER & INCOME FROM ADVERTISEMENTS	2
FREE MONIES/ENDOWMENTS	11
SALE OF JOURNALS ONLY	1
SALE OF JOURNALS & FREE MONIES	1
SALE OF JOURNALS & INCOME FROM ADVERTS.	1
ADVERTISEMENTS ONLY	2
STAFF CLUB FUNDS	1
STAFF CLUB FUNDS & SALE OF JOURNAL	1
UNKNOWN	9
VOLUNTARY HOSPITAL FUNDS	3
TOTAL	133

Table 4: SOURCES OF FINANCE

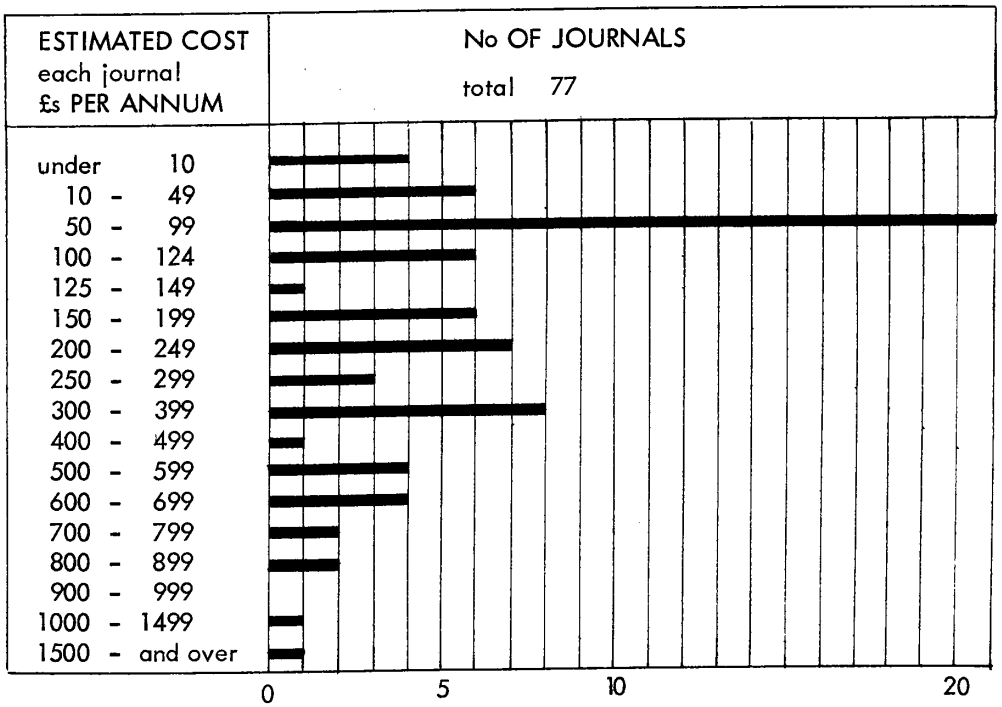


Figure 1: ANNUAL COSTS OF JOURNALS FINANCED BY EXCHEQUER FUNDS

SOURCES OF FINANCE
EXCHEQUER FUNDS
EXCHEQUER & FREE MONIES
EXCHEQUER & SALE [illegible]
EXCHEQUER & INCOME [illegible]
FREE MONIES/FUNDING [illegible]
SALE OF JOURNALS ONLY
SALE OF JOURNALS [illegible]
SALE OF [illegible]
ADVERTISEMENTS ONLY
STAFF CLUB FUNDS
STAFF CLUB FUNDS [illegible]
UNKNOWN
VOLUNTARY HOUR [illegible]

Table [illegible]

ESTIMATED COSTS each year £s per [illegible]	
under [illegible]	[illegible]
10 - [illegible]	[illegible]
50 - [illegible]	[illegible]
110 - [illegible]	[illegible]
123 - [illegible]	[illegible]
150 - [illegible]	[illegible]
200 - [illegible]	[illegible]
250 - [illegible]	[illegible]
300 - [illegible]	[illegible]
400 - [illegible]	[illegible]
500 - [illegible]	[illegible]
600 - [illegible]	[illegible]
700 - [illegible]	[illegible]
800 - [illegible]	[illegible]
900 - [illegible]	
1000 - [illegible]	[illegible]
1500 - and over	[illegible]

Figure 1: ANNUAL COSTS OF JOURNALS [illegible]

IN THE HOT SEAT

The 156 editors responsible for this selection of house publications were drawn from over 50 different types of job in the health service. In spite of many complaints that house journals are completely controlled by 'the administration' the survey shows that just under half of the editors were drawn from various administrative grades (see Table 6). Medical and nursing accounted for 17 per cent, while the remainder represented a wide selection of staff. The latest trend is for an increasing number of staff from newly-instituted personnel departments to become involved.

Twenty six editors reported that editorial responsibilities had been included in their job descriptions or 'would be, if I had one'. (See Table 5) A few others commented that this had 'been mentioned vaguely at interview'. In spite of the official recognition, no less than 12 of the 26 stated that they regularly worked on the editorial duties in their own time - amounts varying from one to seven hours per week.

POST HELD BY EDITOR	No
HOSPITAL SECRETARY/ASSISTANT HOSPITAL SECRETARY	6
ADMINISTRATIVE ASSISTANTS	3
CLERICAL OFFICER	1
LIBRARIANS	2
PERSONNEL OFFICER	1
PUBLIC RELATIONS OFFICERS	11
SOCIAL ORGANISER	2
TOTAL	26

Table 5 : DETAILS OF EDITORS WITH EDITORIAL DUTIES INCLUDED IN THEIR JOB DESCRIPTIONS

[illegible] selection of house publications [illegible]
[illegible] health service. In some of many [illegible]
[illegible] completely controlled by the administration [illegible]
[illegible] of the edition were drawn from various [illegible]
[illegible] medical and nursing accounted for 17 per [illegible]
[illegible] selection of staff. The latest [illegible]
[illegible] institutional personnel department [illegible]

[illegible] reported that editorial responsibilities [illegible]
[illegible] or would be, if it had one. (see Table [illegible]
[illegible] mentioned vaguely at interview. [illegible]
[illegible] from 12 of the 26 social [illegible]
[illegible] in their own time - amounts [illegible]

[illegible] EDITOR

[illegible] SECRETARY/ASSISTANT HOSPITAL [illegible]
[illegible] ASSISTANTS
[illegible]
[illegible]
[illegible] OFFICER
[illegible] OFFICERS
[illegible]

DETAILS OF EDITORS
WITH EDITORIAL DUTIES INCLUDED [illegible]

ADMINISTRATION		
Chief Officers, Deputies and Assistants	26	
Hospital Secretaries and Assistants	22	
Administrative Assistants (PAA, SAA, GAA)	20	
Clerical Officers	4	
Personal Secretaries	3	75
GROUP POSTS		
Treasurer	1	
Supplies Officer	1	
PROs and Reg. Information Officers	15	
Work Study Officer	1	
Personnel Officers	2	
Catering Officer	1	
Training Officer	1	22
NURSING		
CNO/PNO	2	
Senior Nursing Officers	5	
Nursing Officers	2	
Ward Sisters/Charge Nurses	9	
Tutors	2	
Student Nurses	2	22
MEDICAL		
Consultant Psychiatrist	1	
Psychiatric Registrar	1	2
PROFESSIONAL & TECHNICAL		
Occupational Therapists	4	
Psychiatric Social Worker	1	
Physicist	1	
Medical Technicians	3	9
OTHERS		
Chaplains	5	
Librarians	5	
Voluntary Help Organisers	2	
Recreation and Social Organisers	7	
Head Teacher	1	20
ANCILLARY & TRADESMEN		
Head Porter	1	
Telephonist	1	
Engineering Craftsman	1	3
SPECIALIST		
Administrative Consultant Adviser	1	
PR Consultant *	1	
Journalist *	1	3

Table 6: DETAILS OF POSTS HELD BY EDITORS TOTAL: 156

* not employed in NHS

ADMINISTRATION	
Chief Officers, Deputies and Assistants	26
Medical Secretaries and Assistants	22
Administrative Assistants (PAA, SAA, GAA)	20
District Officer	4
Personal Secretaries	[illegible]
GROUP POSTS	
Treasurer	
Supplies Officer	
PROs and Reg. Information Officers	
Work Study Officer	
Personnel Officers	
Catering Officer	
Training Officer	
NURSING	
CNO/PNO	
Senior Nursing Officers	
Nursing Officers	
Ward Sisters/Charge Nurses	
Tutors	
Student Nurses	
MEDICAL	
Consultant Psychiatrist	
Psychiatric Registrar	
PROFESSIONAL & TECHNICAL	
Occupational Therapists	
Psychiatric Social Worker	
Physicist	
Medical Technicians	
OTHERS	
Chaplains	
Librarians	
Voluntary Help Organizer	
Recreation and Social Organizer	
Head Teacher	
ANCILLARY & TRADESMEN	
Head Porter	
Telephonist	
Engineering Craftsmen	
SPECIALIST	
Administrative [illegible] Advisor	
PR Consultant	
Journalist	
[illegible] DETAILS OF POSTS HELD BY EDITORS	TOTAL 1[illegible]
[illegible] not employed in NHS	

ADMINISTRATION		
Chief Officers, Deputies and Assistants	26	
Hospital Secretaries and Assistants	22	
Administrative Assistants (PAA, SAA, GAA)	20	
Clerical Officers	4	
Personal Secretaries	3	75
GROUP POSTS		
Treasurer	1	
Supplies Officer	1	
PROs and Reg. Information Officers	15	
Work Study Officer	1	
Personnel Officers	2	
Catering Officer	1	
Training Officer	1	22
NURSING		
CNO/PNO	2	
Senior Nursing Officers	5	
Nursing Officers	2	
Ward Sisters/Charge Nurses	9	
Tutors	2	
Student Nurses	2	22
MEDICAL		
Consultant Psychiatrist	1	
Psychiatric Registrar	1	2
PROFESSIONAL & TECHNICAL		
Occupational Therapists	4	
Psychiatric Social Worker	1	
Physicist	1	
Medical Technicians	3	9
OTHERS		
Chaplains	5	
Librarians	5	
Voluntary Help Organisers	2	
Recreation and Social Organisers	7	
Head Teacher	1	20
ANCILLARY & TRADESMEN		
Head Porter	1	
Telephonist	1	
Engineering Craftsman	1	3
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Table 6: DETAILS OF POSTS HELD BY EDITORS TOTAL: 156

* not employed in NHS

ADMINISTRATION

Chief Officers, Deputies and Assistants	20
Medical Secretaries and Assistants	22
Administrative Assistants (PAA, SAA, CAA)	22
Clerical Officers	[illegible]
Personnel Secretaries	[illegible]

GROUP POSTS

Treasurer	[illegible]
Supplies Officer	[illegible]
PROs and Reg. Information Officers	[illegible]
Work Study Officer	[illegible]
Personnel Officers	[illegible]
Catering Officer	[illegible]
Training Officer	[illegible]

NURSING

CNO/PNO

Senior Nursing Officers

Nursing Officers

Ward Sister/Charge Nurses

Tutors

Student Nurses

MEDICAL

Consultant Psychiatrist

Psychiatric Registrar

PROFESSIONAL & TECHNICAL

Occupational Therapists

Psychiatric Social Worker

Physicist

Medical Technicians

OTHERS

Chaplains

Librarians

Voluntary Help Organisers

Recreation and Social Organisers

Hood Teacher

ANCILLARY & TRADESMEN

Hood Porter

Telephonist

Engineering Craftsmen

SPECIALIST

Administrative Consultant Adviser

IT Consultant *

Accountant *

[illegible] POSTS HELD BY EDITORS [illegible]

* not established in NHS

PRIORITIES

Figure 2 gives editorial views on the most important items in the publications, weighted according to the priority given to each.
This should be compared with the opinions of readers as shown in the survey reported in Part Two. (See page 24)

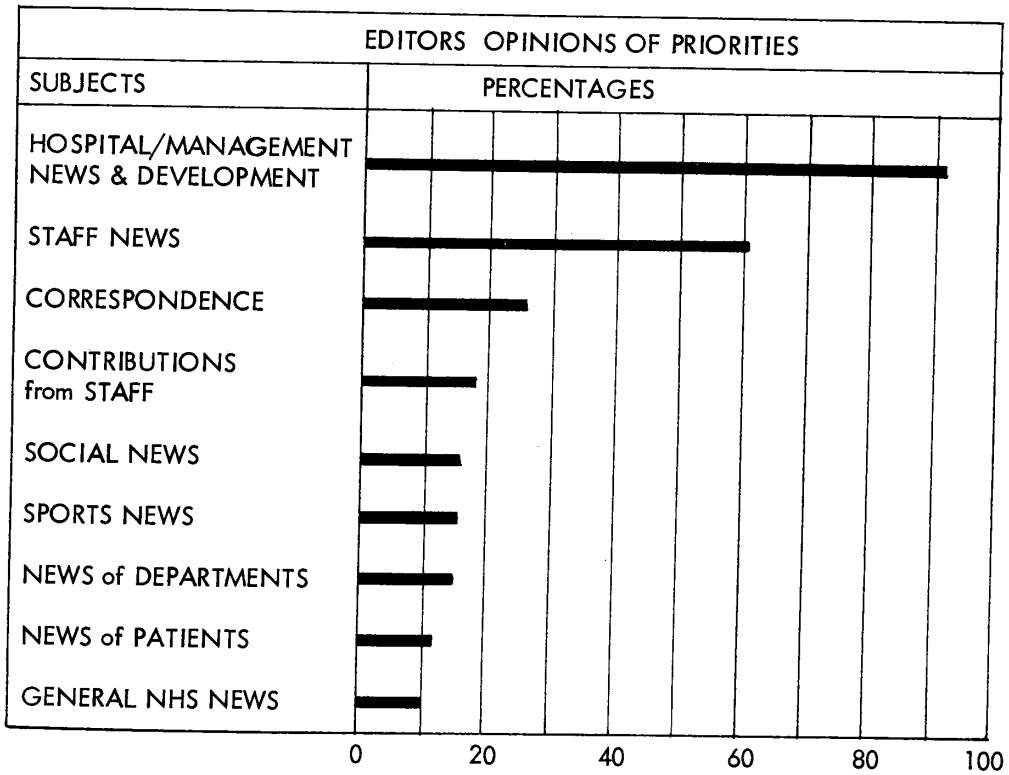

Figure 2: EDITORS OPINIONS

PROBLEMS

The major problems experienced by the 117 editors who answered this question are given in Figure 3. Shortage of time is the most serious problem but lack of finance is surprisingly low on the list. Insufficient material and lack of interest on the part of staff are inter-related. The detailed readership studies in Part Two clearly demonstrate this point. Staff will show marked lack of interest if the material they want is not provided for them, but all this information should be readily available to editors, provided that they are clearly aware of the need. Not all editors find difficulty in filling the pages. 'We average 24 pages per issue, we could use 36' wrote one editor.

The basic problem of editorial responsibility was voiced by one editor who complained that he was 'only editor in name since the journal, as a management information organ is vetted by the Hospital Secretary.' Although a house journal is a very valuable tool of management, it should not be regarded as a 'bosses journal'. It is a two-way means of communication and it is essential that the editor should enjoy freedom to publish, as he thinks fit. The only management censorship - apart from information which it has been mutually agreed to withold, should be solely for accuracy. This question is dealt with at greater length in the Manual for Editors.

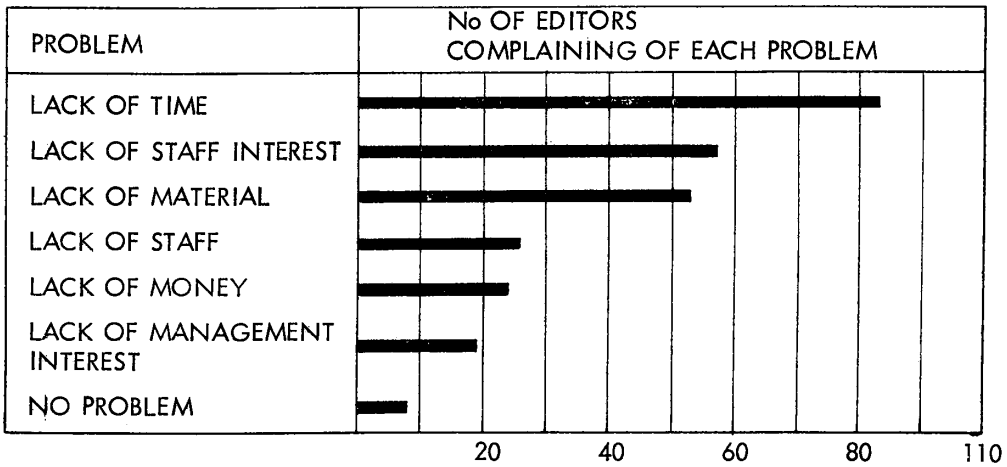

Figure 3: MAIN PROBLEMS EXPRESSED BY 117 EDITORS

PROBLEMS

The major problem [illegible]
are given in Figure [illegible]
Finance is [illegible]
the part of staff [illegible]
clearly [illegible]
material they want [illegible]
readily available [illegible]
Not all advice [illegible]
we could use [illegible]

The basic problem [illegible]
complained [illegible]
information [illegible]
is a real [illegible]
journal [illegible]
extra [illegible]
centralising [illegible]
[illegible]
Administration [illegible]

PROBLEM	
LACK OF TIME	[illegible]
LACK OF STAFF/MATERIALS	[illegible]
LACK OF MATERIALS	[illegible]
LACK OF STAFF	[illegible]
LACK OF MONEY	[illegible]
LACK OF MANAGEMENT INTEREST	[illegible]
NO PROBLEM	[illegible]

Figure 3: MAIN PROBLEMS [illegible]

PUBLICITY

Some large organisations produce two types of 'house' publication - an 'internal' journal for staff, and an 'external' publication for a wider circulation. This latter is frequently a sound economic proposition.

Opinions vary as to the value of a hospital house journal as a tool of public relations. Much depends on the type of hospital, its location, frequency of publication of the journal and so on. A few hospitals, particularly specialist hospitals with a national or international reputation in the medical field already follow this policy. In a much smaller way, however, it is worth considering how far a house publication can be of value in a wider field.

Of the 133 editors, eleven (9 per cent) considered that their publications were solely for staff. Just over half of the 122 (57 per cent) provided copies for members of their governing body and its committees. Local newspapers and occasionally the national press were supplied with regular copies by 54 per cent of the editors. Regional Hospital Authorities and past staff were sent copies by 36 percent, but some of the latter were sent only on request and a few for payment.

Table 7 shows the wide variety of 'other' readers of hospital house journals, but this also demonstrates a possible failure in making the best use of this valuable tool of communication.

Amongst recipients each mentioned by only one editor were: the local Employment Exchange, medical students, psychiatric prisons, out-patient hostels, advertisers, 'contractors on site' and the British Museum.

[illegible] organisations produce two types of 'house' publication – an 'internal' [illegible] staff, and an 'external' publication for a wider circulation [illegible] a frequently a stated economic proposition.

Opinions vary as to the value of a hospital house journal as a [illegible] relations. Much depends on the type of hospital, its location, [illegible] of publication of the journal and so on. A few hospitals, particularly [illegible] hospitals with a national or international reputation in medical [illegible] follow this policy. In a much smaller way, however, [illegible] for a house publication can be of value in a wider field.

Of the 122 editors, eleven (9 per cent) considered that their [illegible] solely for staff. Just over half of the 122 (57 per cent) provided copies for [illegible] of their governing body and its committees. [illegible] national press were supplied with regular copies by 34 per cent [illegible] Regional Hospital Authorities and post staff were [illegible] some of the latter were sent only on request and a few for [illegible]

Table 7 shows the wide variety of 'other' readers of hospital [illegible] also demonstrates a possible failure in making the best use of [illegible] communication.

Amongst recipients each mentioned by only one editor were [illegible] students, medical students, psychiatric patients, out-patients [illegible] 'customers on site' and the British Museum.

RECIPIENTS	No OF JOURNALS
MEMBERS OF GOVERNING BODY	70
PRESS local and national	66
RHBs	44
PAST STAFF	44
LEAGUES OF FRIENDS AND SIMILAR GUILDS	37
OTHER HOSPITALS	36
LOCAL AUTHORITIES	21
VOLUNTARY ORGANISATIONS	20
PUBLIC LIBRARIES	16
OTHER HOUSE JOURNAL EDITORS	15
KINGS FUND CENTRE & COLLEGE	15
PROFESSIONAL PRESS	15
VOLUNTARY WORKERS	11
PATIENTS	9
LOCAL GPs	9
DHSS	8
VISITORS	8
LOCAL EDUCATIONAL ESTABLISHMENTS	8
EXECUTIVE COUNCILS	7
LOCAL MPs	7
TELEVISION	7
TRADE UNIONS	5
PROFESSIONAL ORGANISATIONS	4
LOCAL AMBULANCE SERVICE	4
LOCAL POLICE	3

Table 7: DETAILS OF EXTERNAL CIRCULATION OF 122 JOURNALS

RECIPIENTS
MEMBERS OF GOVERNING BODY
PRESS local and national
RHBs
PAST STAFF
LEAGUES OF FRIENDS AND [illegible]
OTHER HOSPITALS
LOCAL AUTHORITIES
VOLUNTARY ORGANISATIONS
PUBLIC LIBRARIES
OTHER HOUSE JOURNAL EDITORS
KINGS FUND CENTRE & [illegible]
PROFESSIONAL BODIES
VOLUNTARY SOCIETIES
PATIENTS
LOCAL GPs
BMJ
VISITORS
LOCAL EDUCATIONAL ESTABLISHMENT
EXECUTIVE COUNCILS
LOCAL MPs
TELEVISION
TRADE UNIONS
PROFESSIONAL ORGANISATIONS
LOCAL AMBULANCE SERVICE
LOCAL POLICE

Table 7: DETAILS OF EXTERNAL CIRCULATION [illegible]

PART TWO - A STUDY IN DEPTH

BACKGROUND

At the special request of a number of editors attending the Centre's regular workshops, the King's Fund undertook a house journal readership survey. The original intention had been to study a total of 20 publications selected to cover as wide a field as possible both in relation to types of hospital and of house publications. Of the first 18 hospitals approached, seven declined to take part and four others fell by the wayside for various reasons. Finally, 14 publications were selected and individual surveys carried out over a period of two to three years. Towards the end of this period, greater interest was expressed by editors and a number of requests for inclusion in the study were received. Table 8 gives details of the various hospital authorities and their respective publications.

PUBLICATIONS STUDIED

The survey finally covered 17 publications which were distributed regularly to a total of 122 individual hospitals and units, employing altogether over 30,000 staff. All types of hospital were included - teaching, acute, psychiatric, mental handicap, geriatric, maternity and rehabilitation. The total number of copies published for a single issue of each journal was 23,180 and the grand annual total reached 378,760. (See Table 8)

The most frequent publication was a weekly magazine produced for a small unit employing only 190 staff. The majority (10) were monthly publications but the study included two bi-monthly and four quarterly house journals. Only one was produced by professional typesetting, six used litho processes and the rest were duplicated. All but three were financed solely from Exchequer funds, and estimated annual costs varied from £1,250 (from Endowments) to less than £10 from Exchequer.

METHODS OF SURVEY

The King's Fund Centre provided explanatory letters, questionnaires (see Appendices A, B and C) and franked addressed envelopes for the completed

JOURNAL	DATE STARTED	METHOD of PRODUCTION	TYPE of HOSPITAL(s)	No of UNITS	No of STAFF	No of COPIES per issue	FREQUENCY of PRODUCTION	TOTAL No of COPIES pa	ESTIMATED COST £ pa	SOURCE(s) of FINANCE (Exch = Exchequer)
A	1967	printed	gen	22	3 500	3 500	M	42 000	600	Exch
B	1958	o/litho	psych	5	1 150	1 000	M	12 000	240	amenities
C	1965	dup	psych	1	510	600	Q	2 400	150	Exch
D	1967	dup	gen	9	1 300	1 000	Q	4 000	55	Exch
E	1968	dup	gen	9	2 300	600	M	72 000	6.50	Exch
F	1967	o/litho	gen	10	4 100	3 000	M	36 000	1 650	Exch
G	1967	dup	rehab	1	190	200	W	104 000	—	Exch
H	1968	dup	gen	15	1 850	850	M	10 200	25.50	Exch
J	1967	dup	gen	4	930	600	Q	2 400	50	Exch
K	1963	o/litho	teach	8	4 000	2 500	Q	10 000	1 250	endow-ments
L	1964	o/litho	gen	13	1 800	1 850	M	22 200	300	Exch
M	1969	o/litho	gen	10	2 300	2 500	B	15 000	390	Exch
N	1970	o/litho	teach	6	3 200	2 200	B	13 200	650	amenities
O	1961	dup	m h'cap	1	950	1 050	M	12 600	576	Exch
P*	1970	dup	m h'cap	6	1 080	700	M	8 400	—	Exch
R*	1971	dup	m h'cap	1	380	280	M	3 360	40	Exch / amenities
S*	1969	dup	gen	1	620	750	M	9 000	60	Exch
	TOTALS			122	30 160	23 180		378 760		

Table 8: DETAILS OF HOUSE JOURNALS INCLUDED IN READERSHIP SURVEY

NOTE: * In the case of these journals questionnaires were circulated to all members of staff in each hospital. A sample of one in ten was taken for all the other journals.

W = WEEKLY
M = MONTHLY
B = BI-MONTHLY
A = QUARTERLY

JOURNAL	DATE STARTED	METHOD of INDUCTION	(Y/N) INFECTION TEST	[illegible]	[illegible]
A	1967	printed	gen	22	[illegible]
B	1958	o/litho	[illegible]	5	[illegible]
C	1965	dup	[illegible]	[illegible]	[illegible]
D	1967	dup	gen	[illegible]	[illegible]
E	1968	dup	gen	[illegible]	[illegible]
F	1967	o/litho	gen	[illegible]	3 000
G	1967	dup	[illegible]	[illegible]	190
H	1968	dup	gen	13	850
J	1967	dup	gen	4	930
K	1963	o/litho	[illegible]	3	4 000
L	1964	o/litho	[illegible]	13	[illegible]
M	1969	o/litho	[illegible]	10	2 000
N	1970	[illegible]	[illegible]	4	3 200
O	[illegible]	[illegible]	[illegible]	[illegible]	950
P*	[illegible]	[illegible]	[illegible]	[illegible]	1 080
R*	19[illegible]	dup	[illegible]	[illegible]	[illegible]
S*	[illegible]	dup	[illegible]	[illegible]	[illegible]
			TOTALS	[illegible]	[illegible]

Table 8: DETAILS OF [illegible]

NOTE: In the case [illegible]

* questi[illegible]

to [illegible]

[illegible] sample of one in

[illegible]en for [illegible] the other

replies. Publicity in the hospitals was left to the editors and hospital authorities. The sample of readers was selected by taking every tenth name from the hospital's payroll. In the case of the three hsopitals identified in Table 8 and 9 as P, R and S, the editors particularly requested that all staff should be included.

In addition, a similar questionnaire suitably modified, with covering explanatory letter and reply-paid envelope was supplied for all 'other' readers (see appendices D & E).

Response rates varied considerably as shown in Table 9. Results in some cases were affected by local conditions as well as by the various publicity methods employed. The highest response ratesfor staff and 'other' readers were 61 per cent and 70 per cent respectively, the lowest rates were 9 per cent and 6 per cent.

REPORTS TO EDITORS

On completion of the whole analysis of the questionnaire each editor was supplied with a detailed confidential report. Each report contained an analysis of all staff respondents by age group and years of service (male and female separately), by professional and occupational groups and by employment in individual hospitals where applicable. In addition, details of category and employing hospital of all who complained of lack of regular supplies of the house journal were also given. Each report included analyses of replies under all other headings shown on the questionnaires followed by a brief summary and recommendations.

One editor wrote, 'Thank you for sending me such very comprehensive details, these have been read with intense interest. I have wallowed in the compliments; squirmed at some of the criticisms. Very seriously I shall find this summary an extremely useful tool for future and constant reference. It will be of immense value '.

replies. [illegible]

The [illegible]

papyrus [illegible]

5, the [illegible]

In [illegible]

letter [illegible]

D & [illegible]

[illegible]

affected [illegible]

The [illegible]

sent [illegible]

REPORTS TO [illegible]

On [illegible]

supplied [illegible]

of [illegible]

separate [illegible]

individual [illegible]

analogy [illegible]

house [illegible]

other [illegible]

recent [illegible]

One [illegible]

these [illegible]

squirted [illegible]

extremely [illegible]

value [illegible]

	STAFF			OTHER READERS		
H.J.	FORMS SENT	FORMS RETD.	PERCENTAGE	FORMS SENT	FORMS RETD.	PERCENTAGE
A	400	172	48	52	27	52
B	150	69	60	36	18	50
C	54	33	61	80	21	25
D	130	60	46	35	23	65
E	226	72	31	46	34	70
F	410	220	52	62	43	69
G	19	12	60	31	18	58
H	167	86	52	30	12	40
J	90	43	48	20	-	-
K	400	36	9	300	33	11
L	225	74	32	45	7	15
M	240	119	50	100	28	28
N	341	115	33	341	115	33
O	102	33	32	334	122	36
P*	1100	222	20	175	11	6
R*	288	38	15	40	6	15
S*	637	226	35	170	45	26
Total	4974	1630	32.8	1897	563	28.6

Table 9: DETAILS OF READERSHIP RESPONSE

* Questionnaires supplied for all staff at request of editors.
Others - one-in-ten selection

READERSHIP OPINIONS - STAFF

PURPOSE

> 'I believe a hospital magazine should form a communication between 'us' and 'them'. It is the only link between the administration and the staff and should be a sort of travelling noticeboard to all employees.'

No less than 72 per cent of all staff in the survey agreed that the prime purpose of a house journal was to 'tell staff what is going on', to which one added - 'better still if it tells us WHY!' 'It's a great help', explained another 'otherwise we would not know half of what is going on in the hospital'.

Readers were equally certain that house journals were not just intended for amusement - 58 per cent placed this last on the list. Figure 4 gives details of staff opinions of the purpose of a house journal.

PREFERENCES

The popularity poll demonstrated by Figure 5 helps to confirm the findings on the purpose of house journals. Nearly half (48.8 per cent) of all respondents placed hospital and management news and developments in first place. This was followed by news of staff (32 per cent). It is significant that all items in this list are directly concerned with the place of work and one's co-workers.

It is noticeable that the figures for 'items of least interest' were very much lower than for 'those of most interest', as shown in Table 10.

Those items are not, on the whole, directly connected with the life and work of a hospital. Some of the strongest criticisms were levelled at 'poor jokes which sicken the reader and cheapen and belittle the magazine'. 'Corny comedy', 'blue tidbits' and 'snide comments' were all condemned. 'It is better to laugh with people' added one critic.

Opinions on production, frequency, size, circulation, layout and appearance varied according to the particular journal and personal tastes of readers. Thirty-one per cent

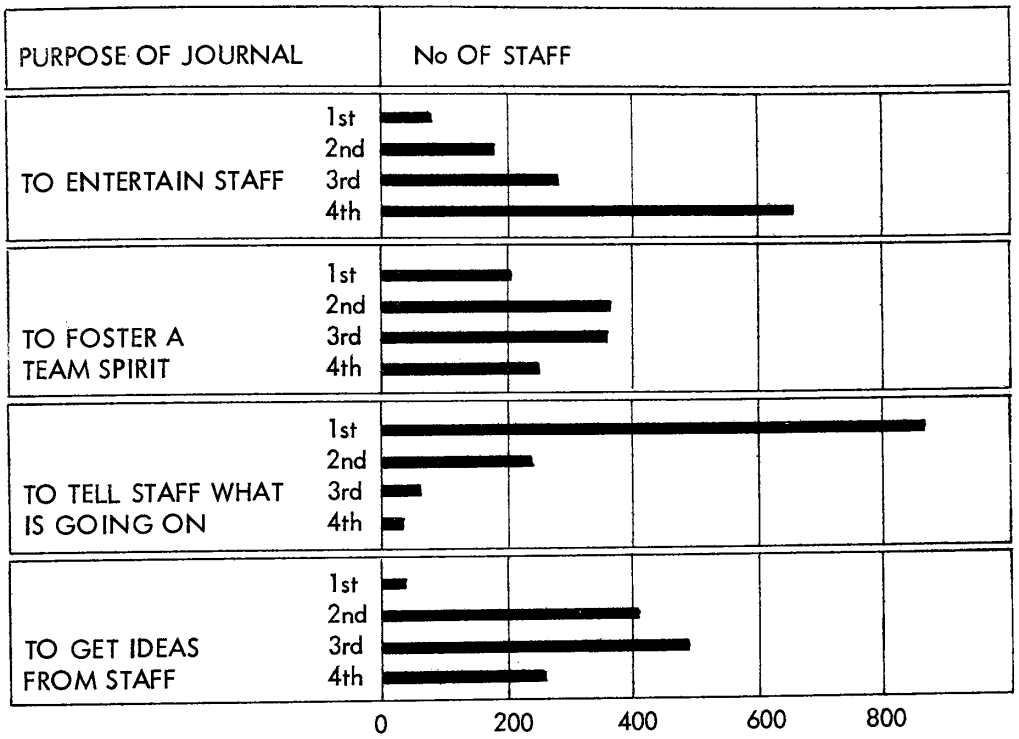

Figure 4: STAFF OPINIONS OF PURPOSE OF HOUSE JOURNALS

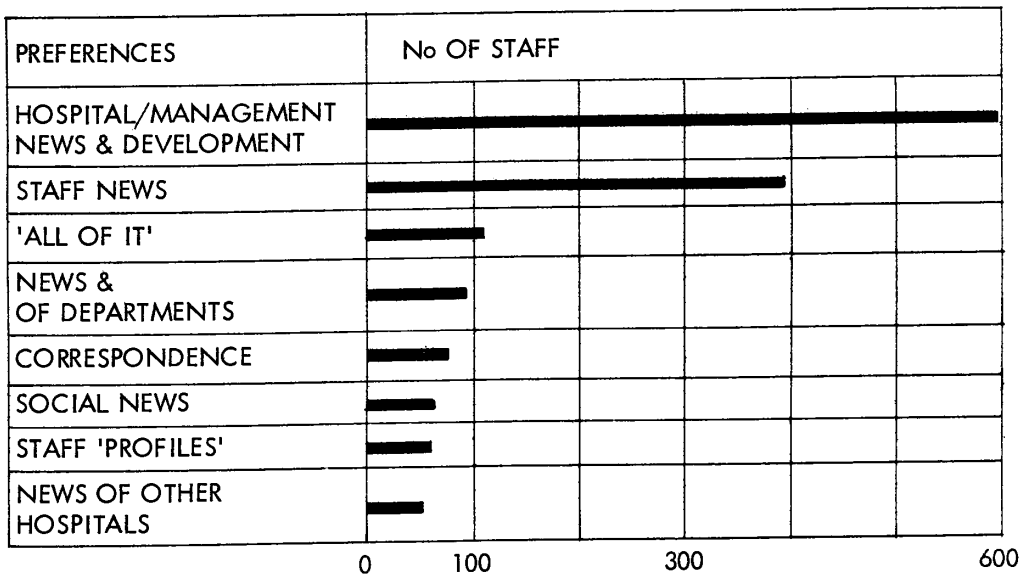

Figure 5: POPULARITY POLL - STAFF OPINIONS AND PREFERENCES

PURPOSE OF JOINT AD

TO ENTERTAIN STAFF

TO FOSTER
TEAM SPIR

TO ILL STRA
TO CONVEY OU

TO GE
GOOD LUCK

Figure 4

PARTY

NEWS
STAFF NEWS

WELCOME

NEWS
OF DEPARTURES

CORRESPONDENCE

SOCIAL NEWS

STAFF PROFILE

NEWS OF OTHER
HOSPITALS

Figure 5: POPULARITY POLL

of respondents would like to have a larger journal and 13.8 per cent requested more frequent publications. Not surprisingly, particularly if they had no other experience of hospital house journals, the majority of readers were inclined to vote for 'same as now'.

LEAST POPULAR ITEMS	MENTIONED BY No OF STAFF
'NOTHING'	129
SPORT	64
STAFF PERSONAL NEWS	57
ADVERTISEMENTS	49
POOR JOKES/HUMOUR	36
RECIPES/HOUSEHOLD HINTS	36
CROSSWORDS	33
DESCRIPTIONS OF STAFF HOLIDAYS	24

Table 10: LEAST POPULAR ITEMS

of respondents would like to have a longer journal [illegible]
frequent publications. No surprisingly, particularly [illegible]
of hospital/house journals, the majority of [illegible]
as now'.

LEAST POPULAR ITEMS	
'NOTHING'	[illegible]
SPORT	[illegible]
STAFF PERSONAL NEWS	[illegible]
ADVERTISEMENTS	[illegible]
POOR JOKES/HUMOUR	[illegible]
RECIPES/HOUSEHOLD HINTS	[illegible]
CROSSWORDS	[illegible]
DESCRIPTIONS OF STAFF FOLLOW-UP	[illegible]

Table 10: LEAST POPULAR ITEMS

SATISFACTION RATES

GENERAL

Although staff readers were quite clear as to what they wanted to read in the house journals, the general satisfaction rate with contents as they were, were not as high as one would have hoped. News of people working in the hospital scored the highest rating (50% of all respondents), next came news of different departments (40%).

Table 11 gives full details of the satisfaction rating for the 1630 staff taking part in the survey.

SUBJECT	TOTAL No OF STAFF EXPRESSING SATISFACTION	PERCENTAGE OF TOTAL
REASONS FOR WHAT YOU DO IN YOUR JOB	110	6.1
PEOPLE IN THE HOSPITAL	824	50.0
AIMS OF THE HOSPITAL	451	27.6
DIFFERENT DEPARTMENTS AND JOBS IN THE HOSPITAL.	652	40.0
NO ANSWER	235	14.4

Table 11: SATISFACTION RATES

SATISFACTION RA

GENERAL

Although [illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

Table [illegible] SATISFACTION RA

RECEIVING THE JOURNAL

Less than three-quarters of the respondents received copies of their house journal regularly (See Table 12). The main reasons for this situation would appear to be:

1. Problems of distribution, particularly in groups with a large number of separate units. Leaving piles of copies at strategic points is not entirely successful 'When I get there, there are never any left'.

2. Staff hours of work. Part-time workers and those on night duty often feel neglected. 'Have not seen one for about six months: am on nights.'

3. Insufficient number of copies published. Only seven of the 17 journals studied were produced in sufficient quantities to allow all staff to have their own copy (see Table 8 for details). In some cases, there was an average of only one copy for every three or four staff members.

   'I would be quite interested just to receive it', commented one member.

   'There are not always sufficient copies sent to the departments', wrote another, ' no one can feel they can remove a copy, as someone may not have seen it'.

RECEIPT OF HOUSE JOURNAL	No OF STAFF OUT OF 1630
REGULARLY	1187
NEARLY ALWAYS	120
OCCASIONALLY	223
NEVER	60
NO ANSWER	40

Table 12: RECEIVING THE JOURNAL

RECEIVING THE JOURNAL

Less than three-quarters of the respondents received the journal regularly (See Table 12). The main reasons for [illegible]

1. Problems of distribution, particularly [illegible] separate units. Arising a lot of [illegible] entirely successful. When [illegible]

2. Staff hours of work. [illegible] feel neglected. There [illegible]

3. Insufficient number of copies [illegible] studied were producing [illegible] their own copy [illegible] average of only one copy [illegible]

"I would be quite [illegible]

"There are [illegible] another, I do not [illegible] have seen it".

RECEIPT OF HOUSE JOURNAL	
REGULARLY	[illegible]
NEARLY ALWAYS	[illegible]
OCCASIONALLY	[illegible]
NEVER	[illegible]
NO ANSWER	[illegible]

Table 12: RECEIVING THE JOURNAL

READING THE JOURNAL

Only 39 of the 1630 staff completing questionnaires declared that they did not bother to read their journal. Less than half, however, troubled to read it right through (see Table 13).

Shortage of supplies and insufficient time were two reasons given for not reading the house journal. Some potential readers were discouraged by poor production and layout. 'At the moment it looks like a Tesco cheap circular' - but who can really blame editors who have to work on a shoestring budget in their own time?

One of the main reasons for the fact that so many staff failed to read the whole of the house journal was probably the fact that the publication did not entirely match up to the requirements as shown in Figures 4 and 5. 'Nothing very interesting', commented one, 'but I continue to hope'.

On the other hand, readers who expressed satisfaction with their house publication were enthusiastic in their comments. 'It's just as we all love it - a bond of all the people who work for the benefit of patients. It is like a family gathering' wrote one enthusiastic reader.

HOW MUCH IS READ	BY No OF STAFF	PERCENTAGE OF TOTAL Nos
ALL OF IT	756	49.1
MOST OF IT	410	26.7
SOME OF IT	137	8.9
GLANCE THRO' IT	73	4.8
NO ANSWER	163	10.5

Table 13: 'HOW MUCH IS READ'

READING THE JOURNAL

Only 39 of the 1630 staff completing questionnaires [illegible] to read their journal. Less than half [illegible] (see Table 13).

Shortage of supplies and insufficient [illegible] house journal. Some potential [illegible] layout. 'At the moment [illegible] a 'lucky dip' [illegible] blame editors who have to work [illegible]

One of the main reasons for the [illegible] the house journal was probably [illegible] up to the requirements as shown [illegible] commented one, 'but I continue [illegible]

On the other hand, readers [illegible] were enthusiastic in their [illegible] of all the people who work [illegible] wrote one enthusiastic reader [illegible]

HOW MUCH IS READ	[illegible] OF READERS
ALL OF IT	[illegible]
MOST OF IT	[illegible]
SOME OF IT	[illegible]
GLANCE THRO' IT	73
NO ANSWER	163

TABLE 13: 'HOW MUCH IS READ'

SHARING THE JOURNAL

Nearly three-quarters of respondents (ie. a total of 1172) passed their copies on to other people to read as shown in Table 14. Over half (57 per cent) took the journals home to show to their families.

INDIVIDUALS TO WHOM COPIES ARE PASSED ON	No OF STAFF PASSING ON THEIR COPY
COLLEAGUES AT WORK	513
MEMBERS OF FAMILY	692
PAST EMPLOYEES	91
FRIENDS & NEIGHBOURS	128
NO DETAILS GIVEN	70

Table 14: SHARING THE JOURNAL

READERSHIP OPINIONS - 'OTHER' READERS

> 'I do not understand the purpose of this magazine.'
>
> 'I learn more from the house magazine than I do at HMC Committee meetings.'

These conflicting views came from two HMC members included in the 563 'other' readers who completed questionnaires. Of the 1897 invited to take part in the survey, 28.6 per cent responded (see Table 9). Not all completed every item in the questionnaire, but the identity of 396 readers who provided this particular item of information is given in Table 15.

In common with staff readers, this group gave first priority to 'telling staff what is going on' and placed pure entertainment value firmly at the bottom of the list (see Figure 6). Not surprisingly, bearing in mind their varying relationships to the hospitals, they were more varied in their placing of the other three purposes of a house journal. Like staff readers, however, they placed hospital news and developments well on the top of the priority poll with staff news running a good second. (see Figure 7)

Their general comments and suggestions for improvements follow largely on the same lines as those made by staff readers. Technical improvements and use of the publication as a means of communication not only within the hospital but also between hospital and public were major points.

The major impression given by the comments of these 'other' readers was the great potential of the house journal in the wider field of communication - a potential at present largely untapped.

Past staff can form a valuable P.R. corps and those who are fortunate enough to receive copies of their own hospital's journal show great enthusiasm.

> 'It is a great means of conveying news and interest, especially to retired staff - it is a good feeling that we are just not forgotten.'

READERSHIP OPINIONS - 'OTHER' READERS

"I do not understand the purpose of this mag[illegible]

"I learn more from the house magazine than [illegible] Committee meetings."

These conflicting views come from two HAC members [illegible] readers who completed questionnaires. Of [illegible] survey, 28.6 per cent responded (see Figure 6). [illegible] the questionnaire, but the identity of the readers [illegible] item of information is given in Table 12.

In common with staff readers, this group [illegible] is going on' and placed punctuation [illegible] (see Figure 6). Not surprisingly, [illegible] the hospitals, they were more [illegible] of a house journal. Like staff readers [illegible] developments well on the top of the [illegible] second. (see Figure 7)

Their general comments and suggestions [illegible] same lines as those made by staff [illegible] use of the publication as a means of [illegible] but also between hospital and public [illegible]

The major impression given by the comments [illegible] potential of the house journal in the wider field of [illegible] at present largely untapped.

Past staff can form a valuable P.R. corps and those who [illegible] receive copies of their own hospital's journal show great enthusiasm.

"It is a great means of conveying news and interest, [illegible] retired staff - it is a good feeling that we are just not forgotten

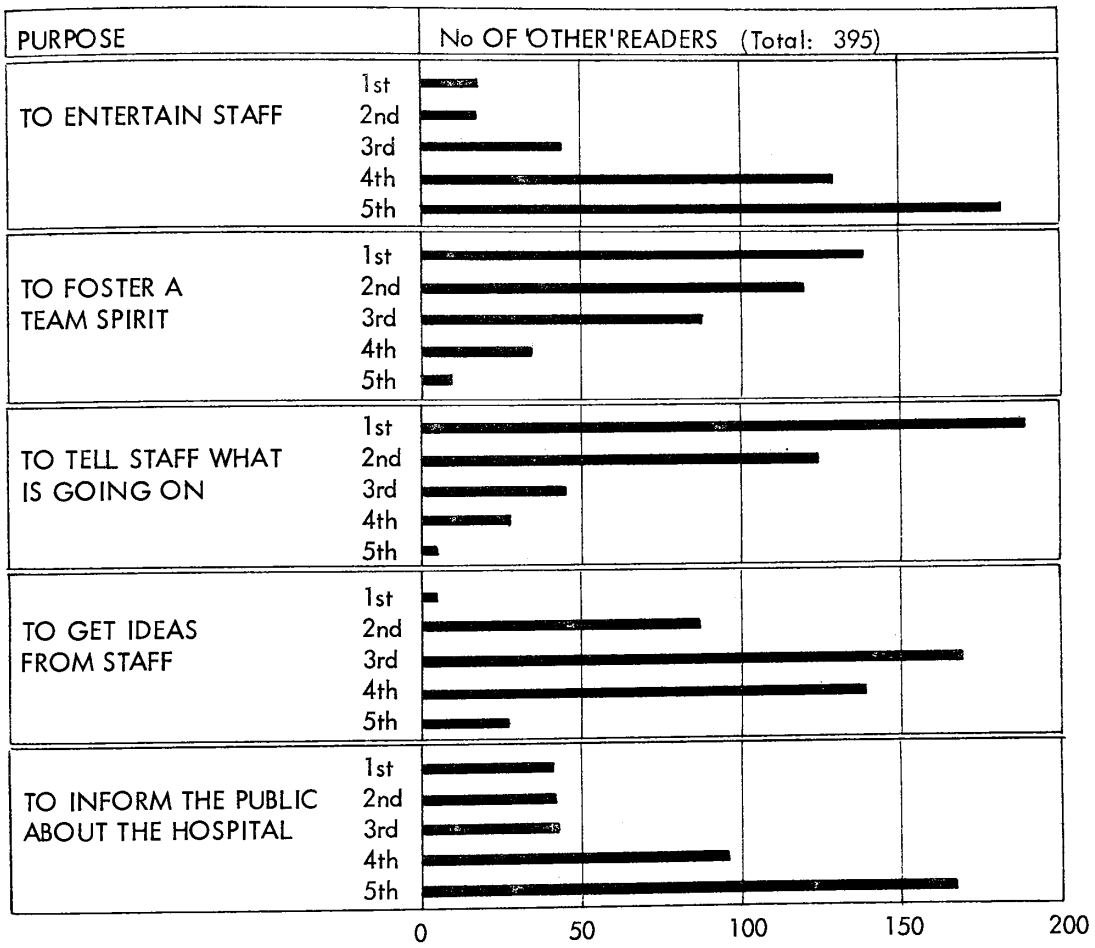

Figure 6 : OPINIONS ON PURPOSE OF JOURNAL - 'OTHER' READERS

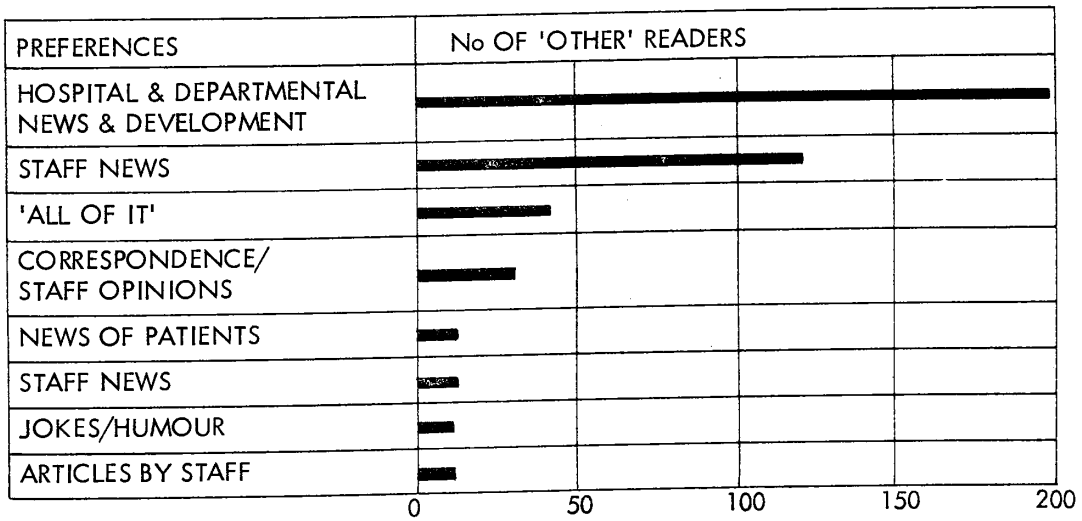

Figure 7: POPULARITY POLL - 'OTHER' READERS

PURPOSE
TO ENTERTAIN STAFF
TO FOSTER A TEAM SPIRIT
TO [illegible] STAFF [illegible] DOING [illegible]
TO GET [illegible] FROM STAFF
TO INFORM [illegible] ABOUT THE [illegible]

Figure 2: [illegible]

PURPOSE
POPULARITY [illegible]
HOSPITALITY [illegible] MEANS OF [illegible]
STAFF [illegible]
VALUE FOR [illegible]
COMMERCIALISATION [illegible] STAFF [illegible]
NEW [illegible] OF PARTIES [illegible]
STAFF NEWS
LOVES/HUMOUR [illegible]
ARTICLES BY STAFF [illegible]

Figure 2: POPULARITY [illegible]

Another respondent expressed his views on the value of a house journal as follows:-

> 'To give a better idea to outside people of the problems of the hospital and to tell people more about the work the staff do, also give more information as to staff problems. Perhaps if more people knew about the needs of the hospital and the running of it, more volunteers would come forward.'

The last word in this section should go to one 'outside' reader whose neat and apt summing up read:

> 'I think the magazine could be used more by the administration, general, medical and nursing, as a vehicle of communication and perhaps individually as evidence that the administration takes the magazine seriously.'

'OTHER' READERS	
EX/RETIRED STAFF	103
MEMBERS OF HMCs/BGs	88
OTHER NHS STAFF	73
'FRIENDS'OF HOSPITAL & OTHER VOLUNTARY WORKERS	64
OTHER HOUSE JOURNAL EDITORS	20
HOUSE COMMITTEE MEMBERS	21
STAFF OF LOCAL AUTHORITY	16
LOCAL PRESS	13

Table 15:

'OTHERS' - (less than 6 each) - Radio/TV; general practitioners; University; local library; other organisations; general public.

Another respondent expressed his views on the [illegible]

'To give a better idea to outside people of [illegible]
and to tell people more about the work [illegible]
information as to staff problems. Perhaps [illegible]
the needs of the hospital and the nursing [illegible]
come forward.'

The last word in this section should go to one [illegible]
summing up read:

'I think the magazine could be used more [illegible]
general, medical and nursing, [illegible]
perhaps individually or [illegible] that the [illegible]
magazine [illegible]ously.'

[illegible] READERS	
[illegible] STAFF	[illegible]
MEMBERS OF HMC[illegible]	[illegible]
[illegible] STAFF	[illegible]
FRIENDS OF HOSPITAL [illegible]	
OTHER VOLUNTARY WORK[illegible]	[illegible]
OTHER HOUSE JOB[illegible]	[illegible]
HOUSE COMMITTEE [illegible]	[illegible]
STAFF OF LOC[illegible]	[illegible]
LOCAL PRESS	[illegible]

Table [illegible]

'OTHER' - [illegible] University [illegible] hospital [illegible]

TAKING A WIDER VIEW

An objective readership survey of the type described in this paper, undertaken by an outside agency and with anonymity to respondents assured, can produce three types of information of value not only to house journal editors, but to administrators in general.

1. Readers' opinions on the purpose, content, value and success of their particular house publication. This is, of course, the prime purpose of a readership survey, which can be of great help to an editor by enabling him to keep his finger on the pulse and to discern and meet the needs of his reading public.

   This is not to suggest, however, that every editor should immediately rush off to conduct his own survey. Unless certain criteria are met, such an exercise could be quite useless - even a hindrance rather than a help.

   It must be emphasized that the questionnaire shown in Appendix C and used for this particular study is quite unsuitable for use in an internal survey carried out by editorial staff, since certain questions enable individual staff to be identified.

   A pilot study with a specially modified version of this questionnaire has recently been carried out with three house journals by their own editorial staff. Certain problems and difficulties have appeared and the whole question of do-it-yourself readership surveys will be discussed in the Manual for Editors. This survey of 17 publications, however, has produced results which fall into a well defined pattern, giving a clear picture of what is required to make a hospital house journal a vital instrument of communication.

2. Communication problems within the hospital or group of hospitals.

   Distribution difficulties have already been mentioned but readers' suggestions for additional material in the house journals have pin-pointed a number of

Des vrew

ob[illegible] survey of the type described. In this [illegible]
[illegible] gency and with anonymity to encourage [illegible]
[illegible] mention of value not only to [illegible]

[illegible] opinions on the purpose, content, [illegible]
particular house publication. [illegible]
[illegible] survey, which can be [illegible]
to keep his finger on the pulse [illegible]
reading public.

This is not to suggest, however, [illegible]
off to conduct his own survey. [illegible]
exercise could be quite useful [illegible]

It must be emphasised that [illegible]
for this particular study is quite [illegible]
carried out by external staff, [illegible]
staff to be identified.

A pilot study with a specially [illegible]
recently been carried out with [illegible]
staff. Certain problems and [illegible]
question of do-it-yourself [illegible] survey will [illegible]
for Editors. This survey of 11 publications, however, [illegible]
which fell into a well defined pattern, given [illegible]
required to make a hospital house journal a vital [illegible]

Communication problems within the hospital or group of hospitals

[illegible] difficulties have already been mentioned but [illegible]
[illegible] material in the house journals have pin-pointed a [illegible]

other communication problems. Those refer largely to lack of adequate information of various types or, probably even more, general ignorance of their existence. These include official publications and notices, Whitley Council regulations, staff and patient handbooks, procedure manuals, training procedures and library and other facilities, as the following quotations suggest.

'Salary scales and pensions'(are Whitley handbooks readily available?)
'New appliances that could be ordered by ward sisters if only they knew that they existed and where to order them from.' (What is the supplies procedure?)
'Precis of diseases by consultants for students'
'Printed copy with definite training pages'
(both the above are responsibility of trainers)
'Hints on nursing procedures'(What about ward procedure manuals?)
'Articles on nursing management, drugs,nursing techniques'(are library facilities and nursing journals easily available?)
'Unusual and interesting case histories' (again, what about libraries?)

3. Other problems in the hospital(s) not directly associated with house journals, but which are revealed by comments in the questionnaires. Staff will sometimes use this method of bringing to official notice items that so far appear to have been unnoticed or unappreciated. The assurance of anonymity in the surveys described here has enabled staff to write freely without fear of intimidation or reprisals - a fear which can be very real.

Material which appears under this heading while sometimes revealing some omission or illuminating some situation previously unknown can also be indicative of some underlying malaise or unrest or possibly deep feelings of resentment, as for example, after adverse publicity in the local or national press. Such warning signals, if picked up quickly, can be very valuable in helping to prevent trouble spots from developing into festering sores.

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information of various types or, probably even more, general [illegible]
of their existence. These include official publications [illegible]
Whitley Council regulations, staff and patient handbooks, [illegible]
manuals, training procedures and library and other facilities [illegible]
following quotations suggest.

'Salary scales and pensions (are Whitley handbooks [illegible]
'New appointees too could be assisted by [illegible]
that they existed and where to order them from. [illegible]
procedure?)
'Precis of diseases by consultants for students.
'Printed copy with [illegible] (page)
(both the above are responsibility of [illegible])
'Hints on nursing procedures. What about [illegible]
'Articles on nursing management [illegible]
facilities and nursing journals easily available [illegible]
'Unusual and interesting case histories' (again, [illegible]

3. Other problems in the hospital (if not of [illegible]
but which are revealed by comments in the questionnaire [illegible]
sometimes use this method of bringing to [illegible] for
appear to have been unnoticed or underplayed [illegible]
anonymity in the survey described here [illegible]
without fear of intimidation or reprisals [illegible]

Material which appears under this heading [illegible]
omission or illuminating some situation previously [illegible]
indicative of some underlying malaise or unrest [illegible]
resentment, as for example, other adverse publicity [illegible]
press. Such warning signals, if picked up quickly [illegible]
in helping to prevent trouble spots from developing [illegible]

TOWARDS THE IDEAL HOUSE JOURNAL

Nearly 2,000 comments, criticisms and suggestions for improvement to the 17 house journals were received from both staff and 'other' readers. This gave an overall average of one for every staff reader and one for every two outside readers. Their comments presented a lively picture of the opinions and expectations of readers of all types.

LEVELS OF SATISFACTION

A number of readers expressed a high level of satisfaction, as the following quotations show:

> 'I find it all interesting, as you get to know what is going on and what is happening.'

> 'A most lively, interesting and informative magazine.'

> 'Since it's birth —— has maintained a steady flow of group information that should interest all concerned with hospital life.'

Others were appreciative, but aware of current limitations, while realising the possible potential of such publications.

> 'A good magazine, considering the resources.'

> 'It appears to contain all the necessary ingredients of a good magazine.'

> 'It has many excellent points at present, but I should like to see it improved as a vehicle of communication.'

> 'I should miss it if it were withdrawn, but feel it could be more newsy.'

> 'The newsletter we have at present is the beginning of what could be a most informative paper. Our editor does a good job with the material she has.'

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'It appears to contain all the necessary ingredients of a good [illegible]

'It has many excellent points at present, but I would like [illegible] improved as a vehicle of communication.'

'I should miss it if it were withdrawn, but feel it could be much better.'

'The newsletter we have at present is the beginning of what could be a great informative paper. Our editor does a good job with the material he has.'

> 'What is needed is more hospital news - of the group and hospital we work in - and of the service as a whole. News - criticisms - the quality of our magazine is too good for the scanty material it contains.'

At the other end of the scale, a minority of readers expressed dissatisfaction:

> 'It is all pretty boring.'

> 'Nothing of any interest at all.'

But, then, as one reader remarked, 'It's difficult to please everybody.'

TECHNICAL AND ADMINISTRATIVE IMPROVEMENTS

This section included comments on the standard of writing, presentation and layout, methods of printing, use of illustrations and types of covers.

> 'As so many copies are distributed to outside bodies' wrote one 'I feel it is essential to have a well-presented document.'

Comments on administrative matters included such subjects as the availability of copies, the actual number of copies published and the physical problems of distribution.

> 'More copies should be available, as in this office, we have only one copy for eight people.'

> 'I am concerned that the distribution of this magazine leaves a lat to be desired.'

THOUGHTS ON EDITORS AND MANAGEMENT

Readers who commented on the work of editors were on the whole most appreciative of their efforts and showed awareness of both their problems and their limitations.

> 'On the whole I consider this is a very commendable publication, the editor's personality has, I feel, much to do with this.'

'What is needed [illegible]
we work in – and of the [illegible]
the quality of [illegible]
contains.'

At the other end of the [illegible]

'It is [illegible]

'Nothing [illegible]

But, then, [illegible]

THEORETICAL [illegible]

This section [illegible]
method [illegible]

'[illegible]

Comments on [illegible]
[illegible]
distribution [illegible]

[illegible]

'[illegible]
be [illegible]

THOUGHTS ON EDITORS AND ACADEMICS

Readers who [illegible]
of their efforts and [illegible]

'On the whole I consider this [illegible]
editor's personality [illegible]

> 'I read everything and wish that it could be bigger and more frequent, but understand that it is a voluntary effort, after work, both editorially and technically.'

> 'In spite of the valuable financial support given by the HMC it is only produced because the editor puts in many hours of voluntary work.'

Some readers feel that management did not full appreciate either the problems or potential of house journals.

> 'I feel that the management are not making sufficient use of this magazine as a means of communication.'

One reader considered that 'there should be more recognisable support for the magazine - goodwill alone is not sufficient to maintain it,' while another wrote

> 'I feel that the editor and, indeed, the group management, are failing to obtain full benefit by not using the journal as a fuller means of communicating on official and semi-official matters.'

MORE INFORMATION

> 'I should like to know more of what is going on in the hospital generally', wrote one reader, while another wanted to read 'more about MY hospital.'

The desire for more information of all kinds directly connected with their place of work was clearly expressed by many readers.

> 'We have a goodly amount of what's happened' wrote one, 'but perhaps insufficient of what's going to happen.'

This anxiety for information about the future was widespread, but particularly acute in the case of hospitals with redevelopment programmes. Some staff were most anxious that the journal should give them information about their jobs in the new hospital.

'I read everything and when there is [illegible]
frequent, but understand that it is [illegible]
both editorially and technically.'

'In spite of the valuable financial [illegible]
only produced because the editor pu[illegible]
work.'

Some readers feel that management [illegible]
potential of house journals.

'I feel that the management [illegible]
magazine as a [illegible]

One reader considered that [illegible]
magazine - goodwill alone is not sufficient [illegible]

'I feel that the editor [illegible]
to obtain full benefit [illegible]
communicating on all [illegible]

MORE INFORMATION

'I should like to know [illegible]
wrote one reader, while [illegible]
hospital.'

The desire for more information [illegible]
work was clearly expressed by many readers.

'We have a goodly amount of what's [illegible]
perhaps insufficient of what's going to happen.'

This anxiety for information about the future was [illegible]
acute in the case of hospitals with redevelopment [illegible]
many readers felt the journal should give them information [illegible]
the new hospital.

There were requests that the house journal should 'inform staff of the plans and policies of the hospital for the future, and perhaps invite discussion on these plans and policies.'

Readers were concerned too, about the timing of the presentation of news. They wanted, 'up-to-date news; not history'. 'By the time we get it, the news is stale', complained another.

These comments raise problems connected with the frequency of publication of house journals and the type of contents that are applicable - those will be dealt with in detail in the Manual for Editors.

Among the many practical items which staff readers wished to see in their journals were such matters as simple explanations of superannuation, administrative changes and potted versions of DHSS circulars applicable to them.

IMPROVING UNDERSTANDING

'The magazine needs to contain the sort of information indicated in your questionnaire about jobs, people, objectives, the reasons why we do the job we do. There is need to understand the roles and functions of other departments and personalities' wrote one reader. Others made similar comments.

> 'I would like to see departments given a page from time to time to explain to staff their own particular job. The wages department, for instance, could explain to staff about their difficulties - they must have them'.

> Many readers wanted 'news about various departments and their problems. This would lead to greater co-operation and understanding.'

> 'We do not know much about the backroom boys and girls' commented another.

There were requests that [illegible]
policies of the board [illegible]
plans and policies.'

Readers were [illegible]
wanted, 'up-to-date [illegible]
stale', complaints [illegible]

These comments [illegible]
house journals and [illegible]
dealt with in [illegible]

Among the many [illegible]
were such [illegible]
and policy [illegible]

IMPROVING [illegible]

'The magazine [illegible]
about [illegible]
been [illegible]
were [illegible]

[illegible]
[illegible]
[illegible]

'Very [illegible] [illegible]
problems [illegible] protection and [illegible]

'We do [illegible] men, boys and [illegible]
[illegible]

BOOSTING MORALE

One reader wanted to see in his house journal 'anything that would make our hospital a close-knit group, and would put over the message that, irrespective of status, we are all like part of a clock. Even the big wheels don't function without the little ones - each is essential to the whole'.

This particular comment illustrates an attitude that came across very strongly throughout the whole survey - the almost pathetic desire of staff to feel appreciated and wanted, to be regarded as members of a family and to feel valued as individuals, however humble their jobs. This was particularly noticeable among the ancillary grades and in small units of large groups which often feel that they received insufficient attention.

The basic need for appreciation is well illustrated by the following quotations:

> 'We as a group (nursing auxiliaries) do not look for medals or whatever; just a sign of acknowledgement that we exist.'

> (from another nursing auxiliary) 'we do a useful job and work jolly hard, but who cares'.

> 'We know we are not so important (as senior doctors etc.) we do give a service and sometimes a little word of praise could be a great help.'

> 'More interest in the domestics as we never get a mention about our work.'

Those were typical of similar comments made by representatives of other groups such as laundry, catering and stokers. The need for appreciation of the work done by these groups was realised by other readers who commented as follows:

> 'There must be sections or departments in hospitals that do a good job in keeping the hospital organised and equipped yet are never recognised - why not an occasional write-up? It would boost morale.'

> 'I would like to see more space devoted to the mediocre jobs, as they are just as important to the running of a hospital.'

Other readers requested 'more up-to-date news and plans for development' which they felt would not only be good for staff morale but would also be 'a great help in squashing 'grapevine' rumours.'

CHALLENGE AND CHANGE

'The journal should be used as an agent of change and a platform for debate' wrote one reader. Others felt that 'staff of all grades should be encouraged to give their views'.

One reader requested the introduction of an 'Open Forum to foster ideas from staff for the benefit of hospitals generally', adding sagely, ' a good deal of time can often be saved if plans for forthcoming jobs were only sounded out among hospital staff'. Some editors felt that this was indeed part of their job; one wrote that his particular journal 'was intended not only to provide an alternative to noticeboards but is used for kite-flying on occasion'.

Another reader thought that house journals could make use of the present untapped potential among staff. 'Thousands of staff within the NHS who feel as I do, very frustrated at the lack of communication within the service have very good ideas for improving things'.

Thought-provoking suggestions came from some readers who felt that 'comments from patients on (a) suggestions for improvements in the service and (b) their personal experience in hospital 'would be valuable additions to the contents of house journals. 'Then perhaps, many of us that feel complacent at the moment might have second thoughs and give our approaches and attitudes a second look'. 'It would do us all, as hospital employees, a great deal of good just to hear how our patients feel about their stay in hospital —— it would certainly make us do some hard thinking.'

The following are typical of other comments on more general lines:

> 'More controversial letters from staff to encourage exchange of ideas and objective criticism of the service'. One reader thought that a 'staff discussion or criticism page would be a good idea for the people in charge as they would have a good idea of what they are doing wrong.'

One reader felt that there was a need to include more controversial articles by all grades of staff in the group'so that we see ourselves as others see us, and by so doing, prevent ourselves from getting self-satisfied and insular.'

Another thought that the house journal might be used as a 'vehicle for airing staff problems and differences and a means for staff to let off steam. Also for staff to make suggestions on ways and means of improving conditions both for staff and patients. The more controversial the better.'

CHECK LIST

It is thought that, in the place of the more usual Summary, a check-list may be of more practical use to editors and management.

This check list is set out in the form of a series of questions. There will be no one right answer for each of the questions, because circumstances will vary from hospital to hospital. But each hospital and authority could usefully ask itself all these questions.

1 DOES YOUR HOSPITAL/AUTHORITY HAVE A HOUSE JOURNAL? IF NOT, WHY NOT?

2 What is to be the main purpose of your house journal?

3 What financial resources should be allocated for its publication?

4 Should there be separate publications for each hospital/Sector /District/ Area/Region?

5 How frequently should your house journal be published?

6 In your own situation, what are the relative merits of house magazines, bulletins, news sheets?

7 Should all members of staff be issued with individual copies?

8 Should the publication be restricted to hospital and health matters?

9 How can your house journal be used to improve public relations?

10 Are editorial duties officially included in the job description of the person appointed to be editor?

11 Should the editor be assisted by an editorial committee/advisory panel?

12 How many assistants/reporters does the editor need?

13 How much editorial freedom is the editor to be permitted, and to what extent is the material to be censored by management?

14 How many hours per week should be allocated specifically for editorial duties?

15 What are the best methods of collecting material?

16 Does every department or job have a fair share of publicity in your journal?

17 How can the editor best attract and retain the interest of all grades and types of staff?

18 Is there a clear editorial policy regarding the planning of the contents of the publication?

CHECK LIST

It is thought that, in the place of the more usual [illegible] more practical use to editors and managers.

This check list is set out to give [illegible] right answer for every of the questions [illegible] to possible. But each possible [illegible] questions.

1 DOES YOUR NEWSPAPER [illegible] IT NOT, WHY NOT?

2 What is to be the [illegible]

3 What [illegible]

4 Should there be [illegible] Area/Region?

5 How [illegible]

6 Is your [illegible] political [illegible]

7 Should [illegible]

8 Should the [illegible]

9 How can your [illegible]

10 Are editorial [illegible] better [illegible]

11 Should the [illegible]

12 How much [illegible]

13 How much editorial [illegible] extent is the [illegible]

14 How many [illegible] hot news [illegible] outlets?

15 What are the best methods of [illegible]

16 Does every department of [illegible]

17 How can the editor best attract and retain the [illegible] power of staff?

18 Is there a clear editorial policy regarding the [illegible] use [illegible]?

19 What methods of production can be used?

20 What is the policy regarding illustrations?

21 How many copies per issue should be produced?

22 How can good distribution be assured?

23 To whom should complimentary copies be sent for general interest and information?

24 Should the publication be controversial and allow free comment from all readers?

25 How can management use the publication to explain policy?

APPENDIX A

KING EDWARD'S HOSPITAL FUND FOR LONDON

KING'S FUND CENTRE

Director:
M. C. Hardie, M.A., F.H.A.
Telephone:
01-262 2641

24, NUTFORD PLACE,
LONDON,
W1H 6AN

Dear Reader,

Will you please help us? We are carrying out a survey of readers' opinions of hospital house journals, magazines and bulletins, and your Group Secretary and the Editor of _____ have kindly agreed to let us use your journal in this study.

In order to get a fair cross-section of staff, a questionnaire is being sent to every tenth person on the payroll. You are one of the people selected in this way and we should be most grateful if you will very kindly complete the attached questionnaire as soon as possible. Please send it direct to me at the Hospital Centre within the next seven days, using the enclosed stamped addressed envelope. There is no need for you to sign the form - all replies will be anonymous.

Thank you for your help.

Yours sincerely,

(Miss) M D Hinks
Research Officer

KING EDWARD'S HOSPITAL FUND FOR LONDON

KING'S FUND CENTRE

Director:
M. C. Morris, M.A., F.H.A.

Telephone:
01-262 3401

Dear Doctor,

Will you please let [illegible]
opinions of hospital house [illegible]
Secretary and the Editor of [illegible]
your journal in this study.

In order to get a fair [illegible]
to every tenth person on the [illegible]
this way and we should be [illegible]
attached questionnaire to [illegible]
Hospital Centre within the next [illegible]
addressed envelope. There is no [illegible]
will be anonymous.

Yours [illegible]

APPENDIX B

KING EDWARD'S HOSPITAL FUND FOR LONDON

KING'S FUND CENTRE

Director:
M. C. Hardie, M.A., F.H.A.
Telephone:
01-262 2641

24, NUTFORD PLACE,
LONDON,
W1H 6AN

Dear Reader,

The editor of _____ is anxious to find out what readers really think of the magazine - does it tell them what they want to know, or could it be improved in any way?

We at the Hospital Centre have agreed to help him by conducting a readership survey. A questionnaire is being sent out with every copy of _____ _____ and we hope that you will assist by taking this opportunity to express your opinion of your magazine and to suggest any ways in which you think it could be improved. Simply fill in the attached questionnaire and send it direct to the Hospital Centre within the next seven days using the enclosed pre-paid addressed envelope. There is no need for you to sign the form - all replies will be completely anonymous.

Thank you for your help,

Yours sincerely,

(Miss) M D Hinks
Research Officer

Director:
H. C. Hardie, M.A., F.H.A.
Telephone:
01-262 3041

WE NEED YOUR HELP - it only takes a tick!

☑ Please tick in appropriate square

About yourself — male ☐ female ☐ — Age: under 21 ☐, 21-29 ☐, 30-39 ☐, 40-49 ☐, 50-59 ☐, 60 and over ☐

Service with this Hospital Group — up to 1 yr ☐, 1-5yrs ☐, 6-15yrs ☐, 16-25yrs ☐, 26-35yrs ☐, 36 and over ☐

Hospital in which you work ..... Your job and grade .....

Do you receive the magazine ? — regularly ☐, frequently ☐, occasionally ☐, never ☐

Do you read the magazine ? — Yes ☐, No ☐ — if Yes: all of it ☐, some of it ☐, most of it ☐, glance thro' it ☐

Do others read your copy ? — Yes ☐, No ☐ — if Yes: others at work ☐, former employees ☐, members of family ☐, friends or neighbours ☐

Do you think it should be — (a) bigger ☐, smaller ☐, same as now ☐ — (b) less frequent ☐, more frequent ☐, same as now ☐

What do you find most interesting in the magazine ?

What do you find least interesting in the magazine ?

In what order would you place the following reasons for having a magazine ? (mark 1 to 4)

to entertain staff ☐ — to tell staff what is going on ☐

to foster a team spirit ☐ — to get ideas from staff ☐

Does this magazine tell you what you want to know about: (tick where appropriate ☑)

the reasons for what you do in your job ☐ — the people in the hospital ☐

the aims of the hospital ☐ — different departments and jobs in the hospital ☐

Have you any ideas that you think would make the magazine more interesting and/or more useful, and what would you like to see in the magazine which is not included at present? (Please continue overleaf if necessary)

When completed, this form should be returned in the enclosed envelope to the Hospital Centre, 24 Nutford Place, London W1H 6AN.

WE NEED YOUR HELP – [illegible] any ideas a [illegible]

☑ Please tick in appropriate squares

About yourself

male ☐ [illegible]

female ☐ [illegible]

[illegible]

Service with this hospital Group

up to 1 yr ☐ [illegible]

1-2½yrs ☐ 2½-3yrs ☐

Hospital in which you work

[illegible]

Do you receive the magazine?

regularly ☐ [illegible]

Do you read the magazine?

Yes ☐ If Yes [illegible]

No ☐ [illegible]

Do other read your copy?

Yes ☐ If Yes [illegible]

No ☐ [illegible]

[illegible] think it should be

(a) [illegible] ☐ [illegible]

(b) [illegible]

[illegible] ☐ [illegible]

[illegible] do you find most interesting in the magazine?

[illegible] do you find least interesting in the magazine?

In what order would you place the following [illegible]

to entertain staff ☐ [illegible]

to foster a team spirit ☐ [illegible]

Does this magazine tell you what you want to know about [illegible]

the reasons for what you do in your job ☐ the [illegible]

the aims of the hospital ☐ [illegible]

Have you any ideas that you think would make the magazine more useful, and what would you like to see in the magazine which [illegible]

(Please continue overleaf if necessary)

When completed, this form should be returned in the enclosed envelope to [illegible]
24 Mallord Place, London W11 4AN.

APPENDIX D

KING EDWARD'S HOSPITAL FUND FOR LONDON

KING'S FUND CENTRE

Director:
M. C. Hardie, M.A., F.H.A.
Telephone:
01-262 2641

24, NUTFORD PLACE,
LONDON,
W1H 6AN

Dear Reader.

Will you please help us? We are carrying out a survey of readers' opinions of hospital house journals, magazines and bulletins, and the Administrator of the _____ Hospital and the Editor of _____ have kindly agreed to let us use their journal for this study.

In addition to a one-in-ten sample of all staff employed in the Group, we feel that it would be most valuable to obtain the views of readers other than staff. We should be most grate ul, therefore, if you will kindly complete the attached questionnaire as soon as possible. Please send it direct to me at the Hospital Centre within the next seven days, using the enclosed stamped addressed envelope. There is no need for you to sign the form - all replies will be anonymous.

Thank you for your help.

Yours sincerely,

(Miss) M D Hinks
Research Officer

WE NEED YOUR HELP ..... it only takes a tick!

☑ Please tick in appropriate square

Name of hospital magazine .....

In what capacity do you receive copies of the magazine? .....

Name of organisation you represent .....

Do you receive the magazine?	regularly ☐	frequently ☐	occasionally ☐
Do you read the magazine?	Yes ☐	if Yes: all of it ☐	most of it ☐
	No ☐	some of it ☐	glance thro' it ☐
Do others read your copy?	Yes ☐	if Yes: others in your organisation ☐	members of family ☐
	No ☐		friends or neighbours ☐
Do you think it should be	(a) bigger ☐	smaller ☐	same as now ☐
	(b) less frequent ☐	more frequent ☐	same as now ☐

What do you find most interesting in the magazine?

What do you find least interesting in the magazine?

In what order would you place the following reasons for having a hospital magazine? (Number 1-5)

- to entertain staff ☐
- to tell staff what is going on ☐
- to fosrer a team spirit ☐
- to get ideas from staff ☐
- to inform the public about the hospital ☐

Does this magazine tell you what you want to know about:

- the aims of the hospital ☐
- the work of the hospital ☐
- the staff in the hospital ☐
- the problems of the hospital ☐
- the patients ☐

Have you any ideas that you think would make the magazine more interesting and/or more useful, and what would you like to see included that is not contained in the publication at present? (Please continue overleaf if necessary)

When completed, this form should be returned in the enclosed envelope to the Hospital Centre, 24 Nutford Place, London W1H 6AN