

# **Dilemmas and dynamics of media management**

*An explorative study on media strategies of  
health care inspectorates in Europe*



Nederlandse School voor Openbaar Bestuur

**Jorren Scherpenisse**

**Mark van Twist**

**Martijn van der Steen**

*Research report for the EPSO  
(European Partnership of Supervisory Organisations in Health Services and Social Care)*

*Final report, August 2015*

# Table of contents

1. Introduction: Health care inspectorates and the media	3
2. The relationship between media and supervision	5
2.1 Mediatization	5
2.2 Media management by health care inspectorates	6
3. Methodology	8
3.1 Mixed methods approach	8
3.2 Respondents	8
3.3 Research steps	9
Step 1. Discussing experiences with the media	9
Step 2. Collecting cases	9
Step 3. Performing a vignette study (questionnaire)	10
Step 4. Discussing and interpreting results	10
4. Results: dilemmas and dynamics of media management	11
4.1 Negative news: passive communication or active informing?	11
4.2 Negative news: better to emphasize or downplay role of the inspectorate?	13
4.3 Reassuring news: Better to send reassuring messages, or not?	14
4.4 Positive news: remain in the background or publicly celebrate successes?	15
4.5 Permit journalists close proximity to the inspectorate's work, or keep them at a distance?	16
4.6 Discuss early findings with the media, or share conclusions after work is complete?	17
4.7 Counter media hype by waiting for attention to ebb, or persist at the media's tempo?	18
4.8 Adjust public statements to accommodate dominant media logics and biases, or emphasize organizational and professional logic?	19
4.9 Summary of findings	20
5. Conclusion	23
5.1 Dealing with incidents by toggling time horizons	23
Literature	26

# I. Introduction: Health care inspectorates and the media<sup>1</sup>

## *The ambivalent relationship between media and health care inspectorates*

Media and health care inspectorates both serve as ‘watchdogs’ in the public domain. They oversee how public money is spent, determine whether services are of sufficient quality, and confirm that the implementation of regulatory standards is of sufficient rigour. These inspectorates operate by entirely different means, but are still active in the same sphere. Media, for example, reports regularly on the poor quality of certain health care services, and on critical incidents in health facilities. Journalists actively research the state of affairs in the sector, and are tipped off by individuals about failing standards. They represent the interests of clients, who are often powerless against the highly professionalized and technically oriented health-care system and the institutions associated with it. Media provides a voice option for individuals, in a system that provides few possibilities for exit or loyalty (Hirschman, 1970). The media and inspectorates both have an interest in identifying potential ‘wrongdoings’ in the sector. In so doing, media and health care inspectorates both play key roles in representing the public interest.

Although media and health care inspectorates are active in the same field and often report on similar issues of quality, availability, and standards, they do not do so in a concerted effort. They have agendas of their own, and each follows its own path when choosing what to report on and where to allocate time and energy. However, there is some overlap, with media acting as an important force informing the inspectorates’ agenda (Cobb & Elder, 1972). For example, media reports sometimes have the effect of creating a window of opportunity to organize attention around an issue already on inspectorates’ radar that had lacked sufficient momentum. Media is also a platform for sending a message to the public and can be used to put pressure on the sector.

In other cases, media reporting interferes with inspectorates’ efforts by calling into question their efficacy, or by holding them at least partially accountable in instances of failure. Examples of interference include situations where the inspectorate apparently ‘misses’ an incident that the media reports on, or when whistle-blowers share information with the media that contradicts earlier, more positive reports by the inspectorate. As such, media reports on the health care industry are not always a positive development for inspectorates and can represent a potential risk as well. Outlets may disclose confidential information, overemphasize and highlight relatively insignificant “critical” incidents, and reduce public trust in the sector through negative reporting. In some cases, the inspectorate itself is the subject of reports. For example, the media will sometimes report on inspectorate failures to notice a loss of quality or a lack of quality, and often admonishes the inspectorate with accusations that they elevate the interests of the sector over those of its clients. The perceived failure of health care inspectorates consistently makes for interesting reading and is often reported on by news media as a result. This is truer still of stories involving critical incidents, when media reporting is typically ambivalent. Though criticism tends to primarily focus on the organization directly responsible for the failure, stories more often than not lead to highly critical remarks about the inspectorate “that let it all happen.” Critical reporting about what happened in “Organization X” is often accompanied by questions about why “Inspectorate Y” was unable to detect and disarm the looming failure in time (Van der Steen et. al, 2015).

<sup>1</sup> This report presents independent research funded by the health and social care inspectorate in Northern Ireland (RQIA) and the Norwegian board of health supervision (Helsetilsynet). The views expressed are those of the author(s) and not necessarily those of the RQIA, Helsetilsynet and EPSO.

The inspectorate's relationship with the media is ambivalent, characterized by both opportunity and risk; the media can be a partner and an asset for monitoring and controlling the health care sector, but can also seriously degrade the reputation and the effectiveness of the health care inspectorate.

### *The strategic importance of media for health care inspectorates*

It is important to note that the media generally does not deliberately foster either a good or bad image of the sector or the inspectorate. Media operates under the logic of 'newsworthiness' and, in the case of private news media, from a commercial perspective – 'news has to sell' (Bennet, 2009). Media outlets work independently, based on their own values and goals. And although there is no evidence of intent to disparage inspectorates, the choices that media outlets make in their selection of stories, and in their message and tone in coverage, can pose a serious threat to the reputation of inspectorates and the sector. In many European countries, there have been a variety of negative media reports focused on health care inspectorates as of late. Media can damage the reputation of supervision, justly or not, for the sake of newsworthiness. In effect, this can also negatively impact the image of the health care sector itself. Both sides are important to consider for health care inspectorates. Likewise, media coverage can also be supportive of the development in the sector, or create space to manoeuvre for the inspectorate.

For health care inspectorates, the media plays a more influential role than that of simply representing public relations or external communication about core processes; instead, the media makes up a core part of the inspectorates' primary processes and lies at the very heart of their operations. Media can cause damage to and frustrate intervention strategies of the inspectorate, but can also create leverage for an inspectorate's actions. Inspectorates can use the media as a platform to enhance their impact on the sector or the public. Media attention can greatly influence how the sector sees itself, how the public perceives the sector, and to what extent the sector and the public value the inspectorate. As a result, it is important to consider the way media are managed, the dynamics of media attention, and the consequences this strategic repertoire and its inherent limitations lead to for inspectorates in the health care sector. The EPSO has recognized the importance of this topic, and has asked the Netherlands School of Public Administration (NSOV) to explore this issue in the context of the different European health care inspectorates it represents. This report is a product of that exploration. It is the academic output of empirical research, but is also a report that should help the members of EPSO better deal with media in their own practice.

### *Outline of the report*

First, we explore the key topics of this study: the relationship between media and supervision, and the at times conflicting logics inherent to balancing professional inspection and media management. Second, we describe the way our research was designed and developed. Third, we show the results of our interviews, discussions and survey feedback sessions with a broad range of inspectors, media officers and inspector generals from European inspectorates of health care. Fourth, we reflect on the dilemmas and dynamics of media attention for inspectorates. In our reflection, we take a deeper look at the significance of timing in media management. We conclude with final remarks on promising developments in professional and strategic media-management techniques that could eventually benefit inspectorates in the health care sector.

## 2. The relationship between media and supervision

### 2.1 Mediatization

#### *Media shape the image of the health care inspectorate*

Mass media are important sources of information in matters beyond people's own experience (Strömbäck and Kioussis, 2011); they mediate the indirect contacts between public organizations and their stakeholders. For example, though many people likely use the products and services monitored and certified by health inspectorates, the supervisory activities usually take place beyond their direct realm of experience, leaving most people with little to no significant or direct interaction with the inspectorates. Their appraisal of the inspectorate is thus based on an 'indirect experience' of the inspectorate via media reporting. Those who have not recently or regularly been visiting a hospital facility instead form their opinion of the inspectorate based on news coverage, articles about inspections, and interviews with the inspectorate leaders. Even in cases where supervision interventions take place on an individual level, just a limited few directly experience the actions of the inspectorate. Thus, people are left to construct and maintain images of 'the quality of the inspectorate' and the work it conducts based on experiences that are "real" in the sense that they originate from real reporting, but aren't founded in individual experience; the experience of the quality of the inspectorate is mediated by media coverage.

Through media coverage, the broader crowd is informed about the activities of the inspectorate, through the lens of the media (McLuhan, 1964). The media act as mediators between health care inspectorates and the public. Information around health care inspectorates can therefore be seen as at least in part mediatized (Korthagen, 2013; van Twist, Klijn & van der Steen, 2012; van der Steen et al., 2013). Mediatization is described by Hajer (2009: 38) in the context of governance as the "interpenetration and interdependence of media and governance".

#### *Mediatization*

Mediatization means that health care inspectorates cannot control the information selected for publication by journalists; they determine which events are newsworthy and then decide how to frame their coverage. As a result, though journalists report often on the actions of health-care inspectorates or individual inspectors, they often focus on problems, incidents and failures relating to supervision. Positive publicity cannot be enforced. Journalists work with professional autonomy and hold public organizations accountable (McNair, 2003; Davis, 2009). Moreover, news publications are created in unique media systems, guided by equally unique logics (Bennett, 2009; Altheide and Snow, 1979; Mazzoleni & Schulz, 1999). Journalists' decisions on properly handling coverage depend on the values they ascribe to newsworthy events or viewpoints, in terms of emphasis, deviance, timelines, proximity, human interest and controversy. News decisions are further influenced by organizations' perception of audience interest, production routines and economic considerations (Shoemaker and Reese, 1996; Strömbäck et al, 2012). Media outlets are increasingly commercialized, resulting in more infotainment – a mixture of news and entertainment – and less time for journalists to create their news items. This leads to several information biases that simplify complex public issues: personalization, dramatization, fragmentation and an authority-disorder bias (Bennett, 2009). News stories concentrate on emotional elements, personalities, conflicts and failing authorities when they discuss public issues. A serious incident in a hospital that results in fatalities, for example, prompts severe condemnation of supervisory activities, and is especially newsworthy because it satisfies many of the aforementioned elements guiding the selection of contemporary news content, as well as some sensational elements.

What's more, because an organized press conference is probable in such a scenario, coverage is neatly organized and efficient for news organizations to report on from the outset of the incident.

It might seem that news reporting simply *happens* to organizations. However, this would be an unnecessarily fatalistic approach towards the media (Klijn et.al., 2015). It is not, after all, impossible to influence the content of news reports. In fact, governmental organizations are spending more and more money on the professionalization of their public communications services in an effort to influence news reporting (Blumler and Kavanagh, 1999; Tenscher, 2004; Cook, 2005; Neijens and Smit, 2006; Bennett, 2009). Positive publicity is crucial for governmental organizations' political image and public support, and is equally important for health care inspectorates. Positive publicity for health care inspectorates' actions or reports can considerably increase their impact, leading not just to increasingly positive evaluations by citizens and political actors, but also to potential real and tangible impact on practices in the health sector itself. The inspectorates' professionalization of their public communications is a clear indication that proactive and defensive media strategies are actively practiced by the sector (Klijn et.al., 2015). Proactive efforts principally aim to attract positive publicity to the organization through press releases, press conferences, pre-arranged interviews and press tours. Governmental information is also made easily accessible to journalists, in a practice referred to as "information subsidies" (Davis, 2002; Lieber and Golan, 2011; Jacobs & Schillemans, 2011). Defensive activities are also practiced in a complementing effort to protect the organization from negative publicity; organizations engage in efforts to actively frame potentially damaging stories in a more positive light, as well as suppress potentially damaging information (McNair, 2003). Research shows that half or even a majority of the activities conducted by communication professionals' focus on restricting reporters' access to information and attempts to suppress negative stories (Davis, 2002).

## 2.2 Media management by health care inspectorates

### *Dilemmas and dynamics*

Stories in the media are in a constant state of flux; they are always developing and changing. They can grow increasingly rich and complex as additional viewpoints are incorporated, they can change from positive to negative, and they can grow progressively influential as they are repeated over a longer period of time. However, they can also wear thin if they persist for too long, resulting in requests for a 'new perspective.' Reactions and impressions are not static; an appearance in the media can be effective one moment, but later interpreted negatively in the event that new facts emerge. The effects of a media strategy in the short and long term depend on these dynamics.

The constant re-evaluation of news by media makes it challenging to determine the correct media strategy. Should inspectorates actively involve the media in their work, or keep them at a distance? Should an inspectorate head make an appearance on tv in the event of an incident in the health care sector or choose other media channels? Should inspectorates increase attention on their messages by appealing to media logics like personalization and the tendency for emotional story-building, or should they choose a neutral and more legalistic tone? Should inspectorates assume a prominent public role when they are criticized, or remain in the background until it blows over?

If we look closely at these optional media strategies, they boil down to series of dilemmas. Being prominently in the news or staying behind the screens, involving the media in their work or keeping them at a distance; in each case there are difficult considerations to be made between contrary options that could both yield positive and negative results. This means that choosing between media strategies can be uncomfortable or even seem impos-

sible. In theory, both choices could lead to positive results, but also to unintended damages. In practice, results depend on the dynamics influencing and causing the media strategy. For example, expressing sympathy for patients instead of sticking to facts in a public statement could be a better way of delivering a message, since it implies and indicates the inspectorate is an 'involved' party, thus leading to a more positive view of its activities. However, when expressing sympathy too late, it might lead to the contrary, causing people to feel like the inspectorate is not involved enough. Therefore, more insight is needed into the dilemmas and dynamics of media management.

#### *Media strategies: damage control and impact enhancement*

It might be valuable to establish or maintain a certain distance between supervision and media (and the citizens they report to) in order to preserve trust, authority and power, in comparison to staged openness and proximity in media performances. Nevertheless, it is clearly essential to develop anticipatory media strategies, since media reporting on supervision has important consequences and enormous potential in terms of impact enhancement and damage control. These media strategies should not just focus on dealing with incident outcomes, but also on proactively building perspectives to influence possible explanations regarding the significance of such incidents later on.

Media strategies focused on damage control often follow after the media begins publishing potentially damaging information on an issue affecting the sector's image, and possibly the inspectorate's effectiveness as well. The strategies focus on minimizing damage from possible media attention on the health care inspectorate by, for instance, spinning potentially damaging stories or suppressing potentially damaging information. Media strategies focusing on 'impact enhancement' aim to attract positive publicity for the organization and/or use the media attention to become more effective. The health care inspectorate can inform the media in a manner that is to its benefit by, for instance, publishing select information, organizing a press conference or by giving pre-arranged interviews.

In this study we explored the opportunities, as well as the threats, that the media environment provides for health care inspectorates in European countries. What are the dilemmas and dynamics health care inspectorates face in terms of damage control and impact enhancement? How do the health care inspectorates in European countries perceive and manage the media, and what are the dilemmas and options for dealing with them?

## 3. Methodology

### 3.1 Mixed methods approach

To assess the way inspectorates in Europe deal with media attention, we combined round-table discussions, interviews, a vignette study and feedback sessions. Vignettes are “short stories about hypothetical characters in specified circumstances, to whose situation the interviewee is invited to respond” (Finch, 1987:105, in: Barter and Renold, 1999). Vignettes are a less threatening way of exploring sensitive topics that clarify people’s judgments (Hughes, 1998; Barter and Renold, 1999). Their purpose is to deduce the beliefs and attitudes of our respondents towards proactive and defensive media strategies (Atzmüller & Steiner, 2010). Therefore, the short stories in the vignettes are based on interviews and round-table discussions with representatives from the European inspectorates in the health care sector. The vignettes reflect the real dilemmas that inspectorates have to deal with in relation to the media. Using this method makes it possible to gain insight into the dilemmas that are essentially the same across the different countries.

We combined the research technique of vignette studies with feedback sessions, based on the survey feedback method. The survey feedback method is mainly used in organizational development as a means for learning (Björklund et al., 2007; French & Bell, 1999; Mann, 1961; Meijer et al., 2001; Werkman, 2006). The starting point of survey feedback is a survey of some kind (in this case, a vignette study), from which the (quantitative) data are used in a feedback session to generate qualitative data (Lindström et al., 1997). In this study, we used the data from the vignette study in a feedback session with the respondents. The respondents were then asked to discuss and interpret the outcomes of the survey. By reflecting on the quantitative outcomes, the respondents provide us with insights into how they perceive the results and how their knowledge of the survey affects their own beliefs on, in this case, media management.

### 3.2 Respondents

Respondents from eleven national health care inspectorates in European countries filled out the vignette study, including respondents from Belgium, Denmark, Estonia, France, the Netherlands, Northern Ireland, Norway, Portugal, the Republic of Ireland, Sweden, and the United Kingdom. The resulting data includes responses relating to a wide range of European health care inspectorates, with 21 respondents in total<sup>2</sup>. From each inspectorate, we received a response from their press officer (two from Northern Ireland) and we also received a response from the inspector generals or CEO’s of six of these organizations. The three EPSO contacts that filled in the vignette study were all involved in media management in their organization or consulted the individuals responsible for media management while filling in the questionnaire. The table below shows the number of respondents in the vignette study.

Function	N
Inspector General / CEO	6
Press officer	12
Epsos contact	3
<b>Total</b>	<b>21</b>

<sup>2</sup> We do not have a large group of respondents, only between 1-3 respondents from each country. This could have been a risk for the generalizability of these scores for the whole organization. However, most of the respondents are either the people responsible for media management in their organization or are involved in media management. Most of the respondents are either the head of the inspectorate or a press officer. The three ‘Epsos contact’ respondents were all involved in media management or consulted the persons responsible for this when filling in the questionnaire.

The feedback session was held with 40 representatives from the different countries. Many of them had also filled in the questionnaire, and some additional representatives from these organizations participated in discussions intended to parse through and interpret the quantitative results of the vignette study.

### 3.3 Research steps

To explore these questions, we followed a sequence of research steps. First, we discussed experiences with the media with a large group of international representatives of health care inspectorates. Second, we collected real cases about challenges involving the media from the different European health care inspectorates. Third, we used cases to form the basis of a questionnaire about the possible media strategies of different European health care inspectorates. Fourth, we had feedback sessions with a large group of representatives (including most of the respondents) from the different European inspectorates. In the sessions, we discussed the cases and responses and hosted discussions about the dilemmas involved. These research steps are explained in detail below.

#### Step 1. Discussing experiences with the media

First, we discussed the experiences of health care inspectorates with the media. Around 30 representatives from 10 different European health care inspectorates participated in this discussion. This meeting was used to explore possible interesting topics for this research. To support the discussion, we used the results of a general questionnaire about perceptions of the media filled in by EPSO members (see Appendix 2 for some of the results). Based on the results of the questionnaires we had a discussion about the dilemma's involved in dealing with the media. This discussion provided initial insights into the challenges these health care inspectorates face in their dealings with the media.

#### Step 2. Collecting cases

Second, we collected real cases of Inspectorates in different European countries that concerned dilemmas in dealing with the media. The cases were collected in two round-table meetings with 30 EPSO members, including several heads / Inspector Generals and press officers from the different health care inspectorates. We also contacted the EPSO contacts and received several cases through e-mail. In addition, interviews were held with specific respondents: a representative from the Dutch health care inspectorate (IGZ), the head of the health care inspectorate in Denmark, the head of the health care inspectorate in Norway and the Chief Executive of the health and social care inspectorate in Northern Ireland (RQIA). In these interviews, we discussed bad and best practices of actual media strategies of health care inspectorates, expected challenges for the future and desirable media strategies in their specific countries.

Based on these interviews and meetings, we formulated sixteen cases reflecting dilemmas for health care inspectors in dealing with the media. The stories in the vignettes reflect the real dilemmas that inspectorates have to deal with in relation to the media. The cases suggest different strategic options. For instance, a pro-active strategy: offering opportunities for 'embedded journalism' during an intervention in a health organization. Or a defensive strategy: leaking a personal file in the context of media hype involving an incident where supervision is unfairly blamed.

We asked respondents to reflect on these hypothetical situations of media strategies, using the above four norms (perceived effectiveness, acceptability, feasibility and rightfulness). The following case is an example of one of the vignettes we used:

Your supervisory organization is conducting its regular periodic review of all major hospitals. There are no specific complaints or negative sources of information.

You receive a request from a television broadcaster wanting to make a program about the work of your inspectors.

**Strategic option: Do you collaborate with the program, which will show the work of the inspectors inside the hospitals?**

Question 1: How probable do you think the strategic choice presented in this case is (scale 0 – 10)?

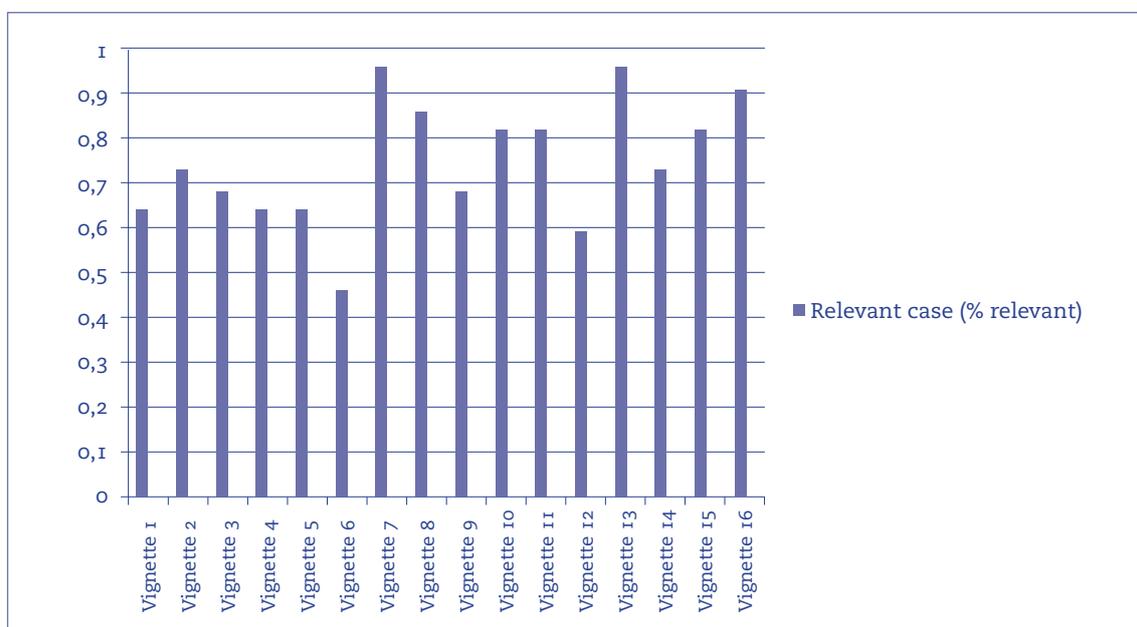
Question 2: How realistic do you think the presented case is (scale 0 – 10)?

Question 3: Is the strategic option in this case....:

1. effective? [scale 1-5]
2. workable? [scale 1-5]
3. legal? [scale 1-5]
4. morally correct? [scale 1-5]

### Step 3. Performing a vignette study (questionnaire)

We tested the 16 cases by sending them to our EPSO contacts in the Netherlands, Norway and Northern Ireland, who confirmed the relevancy of these cases. Because there could still be some differences in terms of relevancy for each of the different countries (e.g. some Inspectorates do not supervise private nursing homes), we included a question about the relevancy of the case after each vignette. Overall, the cases were considered mostly relevant by our respondents, as shown in the figure below.



### Step 4. Discussing and interpreting results

We discussed the results of the questionnaire in several meetings and a round-table session with 40 EPSO members from the different countries. During the meetings, the cases and responses from the vignette study were presented and discussed. This way, we were able to derive the dilemmas and the dynamics resulting from possible intervention options for dealing with the media.

## 4. Results: dilemmas and dynamics of media management

To explore the dilemmas and dynamics between media and inspectorates, we held meetings and interviews with representatives from several European health care inspectorates. We found eight types of cases and dilemmas that were recognized by representatives across the group of European health care inspectorates. We will discuss them one by one, with each illustrated by cases that were inspired by the meetings and interviews with inspectorate representatives, and used in the vignette study.

The first four vignettes are about the type of news and how to choose strategies in terms of anticipation and reaction. First, we discuss two dilemmas on media strategies when there is negative news, and then we discuss two media dilemmas related to reassuring and positive news. Both for negative and positive news, we discuss a situation in which news can be ‘made’ public (anticipation), and a situation in which the news is already public and a strategy has to be chosen (reaction). We discuss the strategic options and the dynamics that they can influence or generate.

In the last four vignettes we consider the interplay between media and inspectorates in news production. The first two dilemmas are about *involving* the media in the work of the inspectorate, and the last two dilemmas are about the *relation* to the media. In cases both involving the media and relating to the media, we discuss a dilemma about the substantial distance (e.g. adjusting messages to media logic or sticking with organizational logic) and a dilemma about the *temporal distance* (e.g. involving the media early or late in the process).

Dilemmas of dealing with positive and negative news		
	Anticipation strategies	Reaction strategies
Negative news	<i>Inform passively / actively</i>	<i>Emphasize / downplay own role</i>
Positive news	<i>Reassure / not</i>	<i>Celebrate successes / remain neutral</i>
Dilemmas on the distance between inspectorate and media		
	Substantial distance	Temporal distance
Involving media	<i>Close / distant media involvement</i>	<i>Early / late media involvement</i>
Being involved with media	<i>Own logic / adjust to media logic</i>	<i>Own tempo / adjust to media tempo</i>

### A. Dilemmas of dealing with positive and negative news

#### 4.1 Negative news: passive communication or active informing?

When incidents occur in the health sector, the inspectorate faces a dilemma regarding how actively to bring the news to public attention. There exist, for example, substantial differences in outcome between actively informing the public and politicians of news, versus passively announcing something by simply publishing a report on an inspectorate website.

Inspecting the health sector is often related to the exposure of problems. Exposing problems is important for keeping the public informed and can also be a tool for pressuring supervised institutions to improve their problems. By naming and shaming, media exposure can act as catalyst for improvement. It can therefore be perceived that a primary task of inspectorates is to actively inform the public of incidents. However, media attention about negative news can become overhyped and result in unintended, adverse consequences. For example, publishing actively about malpractice in a hospital might help grow it into become a major media item, which then causes confidence in the institution to drop and, in turn, prompts patients to begin avoiding the hospital altogether. The active publication of the hospital misconduct thus results in the hospital ending up in greater trouble. There is also a risk that negative news about one organization might ‘stick’ to the sector. The problems at one institution can be portrayed as characteristic of the whole sector. Negative news is often enlarged and hyped, which causes extra damage to the reputation of the sector. Instead of improving the reliability of the sector, the exposure of problems undermines confidence in the sector as whole. This creates a difficult dilemma for health care inspectorates.

Consider the following case. *Your supervisory organization has finished a positive review of private clinics. However, the reviews also showed that one doctor has prescribed harmful medicines to his clients. You could sue the doctor to make sure he cannot work anymore, but it is unclear whether your supervisory organization will have enough evidence to win the case. You are also aware a legal case against the doctor will generate a lot of negative media-attention about the doctor and will be damaging for the reputation of the profession as a whole. Do you publish the results of your review and sue the doctor, or do you try to find a solution ‘behind the screens’? For example, what if you could make an agreement with the doctor to keep this issue unpublished and avoid opening a legal case in exchange for the doctor ending his career by removing himself from the professional register?*

Making this agreement might conflict with legal considerations (‘the doctor might have broken the law and should be judged’) and there is also a risk that the agreement becomes public and attracts substantial criticism. At the same time, it is the fastest way to ensure that the doctor ceases working and prevents the reputation of the whole sector from being damaged. This shows the dynamics involved in this dilemma. The active exposure of problems is part of supervision, but consideration of possible, unintended consequences and the snowball effects that might result from exposure make up a part of inspectorates’ responsibilities too.

	<i>Inform actively about incidents</i>	<i>Inform passively about incidents</i>
+	Inform the public Force improvements by naming and shaming	Possible to solve behind the screens Doesn’t damage the reputation and image of the sector
-	Negative news is often amplified (snowball effects) and hyped It could stick to the sector	Opaque supervision Less pressure on health care institution to improve

#### 4.2 Negative news: better to emphasize or downplay role of the inspectorate?

Another strategic dilemma concerning media attention focusing on incidents in the sector regards how prominent a role the inspectorate should assume in terms of public attention. Inspectorates can emphasize their own role by, for example, explaining how the inspectorate has handled the issue or what it intends to do about it. However, inspectorates can also downplay or put less emphasis on their own role.

On the one hand, emphasizing the own role can be part of public accountability towards the public and politics. It can also be a strategy to prevent negative/less accurate stories about the inspectorate to circulate. On the other hand, emphasizing its role could ‘backfire’ on the organization. This has to do with media dynamics. Media use a different perspective on information than inspectorates. Media often look for what is ‘newsworthy’, what is an interesting story to tell, and what is dramatic, recognizable, and exciting. Also, generally speaking, media tend to distrust authority. Supervision tends to be highlighted in news coverage when problems occur in spite of efforts to supervise and prevent incidents. In the event of a debacle, media reports inevitably focus on whether the inspectorate failed to prevent a problem that it should have. This means that even the exposure of problems by an inspectorate can raise questions about why supervision was unable to flag or prevent an issue earlier. As a consequence, it is difficult to determine how much exactly inspectorates should emphasize or downplay their own role when media coverage focuses negative attention on the sector.

One of our respondents discussed the following example, which illustrates this dilemma. The inspectorate had recently completed research on the quality of hospital care. Because of some alarming results, the report contained several warnings towards the sector that improvements should be made. The inspectorate wanted to send a strong message through the media that improvements are necessary and the inspectorate would be monitoring them closely. The head of the inspectorate was invited to a TV show to discuss the report. However, during the broadcast, the TV host and the other guests started criticizing the inspectorate itself: how could you let this happen? Why did you not make them improve this earlier? Wasn’t this already occurring 5 years ago? The image of a ‘strong supervisor’ was then replaced with the image of a ‘failing supervisor’.

Also, consider the following case: *Your supervisory organization has gathered worrying information on a dentist working with a false medical degree. Your supervisory organization will organize a press conference to release the findings and results. However, the media attention is enormous and they will probably publish about this as a big scandal. This will be harmful to the level of confidence in the sector: Do you reschedule the timing of publication towards a day on which it will coincide with a big media event, in an attempt to reduce the media attention?*

When inspectorates highlight their supervisory role, it fosters vulnerability and opens the door to media criticism. A connection with a fiasco might cause the media to frame the inspectorate as ‘acting tough, but with no real power’. In such a scenario, rescheduling publication could be a way to avoid major criticism and damage to the reputation of the inspectorate. On the other hand, remaining invisible also carries risks and vulnerabilities, opening the door to accusations that the inspectorate has something to hide or doesn’t care enough about patients’ interests. There are difficult choices to make in these situations. On one hand, you want transparency and need publicity to exercise influence on the sector. But on the other hand, negative news is often interpreted as ‘failing supervision,’ which diminishes the image and possibly the effectiveness of the inspectorate. This is illustrative of the dynamics of the dilemma faced by health inspectorates in terms of media outreach. Visibility during negative news can cause unintended consequences that not only harm the sector, but the inspectorate as well. This risk is indicative of the importance of considering the dynamics of the dilemma in its entirety.

	<i>Emphasize own role during negative news</i>	<i>Downplay own role during negative news</i>
+	Frame of strong, caring and responsible	Staying out of the picture, image of inspectorate who is working hard to fix problems
-	Frame of toothless tiger	Frame of not caring about patients' interests

#### 4.3 Reassuring news: Better to send reassuring messages, or not?

*Your supervisory organization has received worrying complaints from a patient about a hospital, concerning a critical mistake made during surgery. You don't usually initiate investigations on the basis of individual complaints, but you notice that this particular complaint is generating significant attention on television. To correct this biased information, you want to establish a more positive view of the hospital. Do you publish confidential information about the hospital, to show that this was merely an incident and that the hospital usually performs well?*

When news becomes exaggerated and negative, it's possible to paint a more nuanced picture of a situation by publishing reassuring news that balances the coverage. In such a scenario, publishing the information might be a good means of establishing a more nuanced and balanced image of the hospital. The inspectorate views itself as responsible for ensuring that public debate is informed, balanced, and that criticism of the sector is not unfair or undue. Releasing positive information has the potential to appropriately balance a debate on the sector. However, the strategy carries untold risks, with messages intended as reassuring also having the potential to cause unintended consequences. Some of our respondents were hesitant to choose this strategy. They explained that reassuring news is often interpreted as suspicious. When a health care inspectorate nuances negative stories, the media (or publicly prominent individuals like politicians, for example) might find it suspicious and accuse the inspectorate of being ignorant and/or emphasize the negative aspects of the story to an even greater extent in response.

In addition, reassuring messages issued by inspectorates have the potential to be framed differently by the media than was initially intended at their release. A reassuring news story about a decrease of underperforming GP-practices from 200 to 150 (25% reduction) could also be published with a headline lamenting the fact that there are 'still 150 underperforming GP-practices'. This means a reassuring message can be reframed and 'backfire' on the inspectorate. As a health care inspectorate, it's within your best interest to publish positive news when it is appropriate, but it is difficult to control the way announcements will be received by media and, in turn, the public. Publishing reassuring news might be a boon for the sector, but from a cynical point of view, could also be interpreted as indicative of the inspectorate's lack of independent judgement ('too close to the sector'). Not publishing reassuring news however, can make the sector vulnerable when media coverage tends towards coverage of negative elements.

One of the lessons garnered from discussion with respondents about this dilemma is that it is important to consider the broader context and history that frame how the media will interpret a given message. Is there a history of incidents that contradicts the reassuring message? What is the current public opinion and how suspiciously will the message be received? To strengthen the perceived 'truth' of the reassuring news, it might be a good strategy to show how it links to other positive events from the past. Linking in such a way illustrates that this is not merely an incident, but a positive pattern.

	<i>Nuance negative news by sending reassuring messages</i>	<i>No reassuring messages</i>
+	<p>Creates nuanced image of sector</p> <p>Stimulates sector to perform above average</p>	<p>Prevent creating suspicion</p> <p>Prevent criticism when the situation gets worse</p>
-	<p>Reassuring news looks suspicious, risk of backfiring at inspectorate</p> <p>Risk of criticism that inspectorate is not independent enough in judgment</p>	<p>Criticism of only focusing on negative elements</p> <p>Undermine confidence in sector</p>

#### 4.4 Positive news: remain in the background or publicly celebrate successes?

Messages about improvements or well performing institutions are not always as ‘newsworthy’ as unfortunate incidents or disasters. In that sense, good supervision is usually invisible. This makes it harder to positively frame the sector. Also, celebrating successes with the sector could cause the perception that the inspectorate is captive to the sector’s interests and is thus not an independent supervisor. Another dilemma for inspectorates is whether they should actively screen media to (help) celebrate successes, or whether it’s preferable to instead remain behind the curtains.

Consider the following case. *You have conducted research that shows improvements in one of the health care domains like, for example, general practitioner (GP) practices. Would you publish the anonymous results of your investigation on your website, to inform journalists and the public about these improvements?*

Although publishing (anonymous) positive results on your website seems a fairly safe and common-practice strategy, not all of our respondents were inclined to do so. On one hand, visibility could be a chance to celebrate positive developments and to stimulate further improvements. On the other, there exists the risk that if the inspectorate is seen as celebrating in excess of what is appropriate, it will be framed as ignorant of problems that do exist or criticized for not being sufficiently critical. Entertaining visibility with some positive news can be very effective, but publishing too much positive information can backfire on the inspectorate.

Therefore, putting positive news on the media agenda requires a delicate strategy. The inspectorate needs to have a sense for how the media will cover a message, as well as understand the limits of when it’s appropriate to stop ‘celebrating’ that message. How can media dynamics be influenced to create a positive news cycle? One of the lessons from our discussions is that the timing of a publication or statement matters for the kind of attention it will draw. A ‘good practice’ presented by one respondent was to create a media event during a period in which few other media events were taking place. The health care inspectorate invited Royals for the camera. The connection between the Royal family and the positive news made it a strong message with large potential for coverage. The connection with Royals strengthened and amplified the inspectorate’s message, making a stronger impression that generated a longer-lasting positive news cycle in the media. This strong image made for an impression that stood out from other news issues. It shows how important it is to consider the attractiveness and timing of a message in terms of media logic. By considering how the message fits into their logics of having attractive news, showing famous people, and covering a large event, the inspectorate was able to draw significant, positive attention.

Also, the timing was of paramount importance, with the amount of media attention the event attracted highly dependent on a lack of prominent concurrent issues that might have otherwise competed for media attention.

	<i>Publicly celebrate successes</i>	<i>Remain on the background during positive developments</i>
+	Celebrate and stimulate positive developments	Prevent criticism later Keep to your task of addressing problems
-	Become vulnerable when things get worse Frame the inspectorate as advertising for the sector	Miss opportunities to create a better image of the sector and stimulate excellence

## B. Dilemmas on the distance between inspectorate and media

### 4.5 Permit journalists close proximity to the inspectorate's work, or keep them at a distance?

How closely should journalists be involved in the work of the inspectorate? For instance, the relationship between the inspectorate and journalists can be strictly one-way: the inspectorate sends information through reports and announcements, allowing journalists to use the information to report on the sector. However, in practice there is often much more interaction between journalists and inspectorates, which could help attract media attention and influence positive news coverage about the health sector. There might be interviews, TV appearances, and informal contacts with journalists or camera crews filming the work of the inspectorate as it interacts with health care providers. Inspectorates have the capacity to decide how closely they want to work with the media.

Consider the following vignette. *Your supervisory organization is conducting its regular periodic review of all major hospitals. You receive a request from a television broadcaster wanting to make a program about the work of your inspectors. Do you collaborate with the program, which will show the work of the inspectors inside the hospitals?*

Our respondents gave mixed responses to this option. Allowing the media to closely watch the inspectorate could have the positive effect of encouraging more informed publications on its work; a television broadcast offers inspectors and health care providers the opportunity to show their good work. While inspectorates can say how hard they work and which difficulties or improvements they see in the sector, showing it on screen can make the message much stronger. However, there is also the risk that the media decides to focus on the negative elements or that media gains insight into confidential parts of the inspectorate's work. The question becomes one of ethics and whether journalists should be provided access to private health care activities, when patients are at their most vulnerable. Keeping the media at a distance might be a good way to protect patients, but also creates a problem for the inspectorate in that it restricts what it shows of its work publicly to just paper and words, instead of the more complex reality. This runs the risk that the media misinterprets the real situation, or doesn't do much with the information provided by the inspectorate and instead continues to write stories based on other sources. To what extent inspectorates should involve the media represents a tricky dilemma balancing considerations of public and media involvement, and maintaining values.

	<i>Involve media closely</i>	<i>Keep media at distance</i>
+	More informed media reports	Better role division
-	Less control of which information goes public Too much insight into confidential information	Not much influence on storylines in the media

#### 4.6 Discuss early findings with the media, or share conclusions after work is complete?

There is often a limited amount of time to influence any given story line that becomes established by the media. After an incident in the sector, different media channels interpret the facts and combine them into a coherent story that is considered newsworthy. This creates a self-reinforcing dynamic, where stories are quickly repeated and confirm each other, and thus strengthen the existing story narrative. The result is a very short window of time in which there exists the chance to get the inspectorate's message across. Informing the media early, (e.g. during its own investigation, before the press conference) has the potential advantage of having great impact and influence during this period of time when the storyline is quickly building, but there also exists the consideration that the information is not final, potentially premature, and is often still confidential.

Consider the following vignette. *Your supervisory organization has received some worrying reports on a hospital. Your supervisory organization has finished a review of the hospital and provided a report to the hospital, which confirms the reported concerns. You know a lot of people would like the judgments of the supervisory organization to be published on a website by naming and shaming, to enable people to make an informed choice between hospitals. You are also aware that the effects and consequences of reports by the supervisory organization can be damaging for the hospital. It appears a national newspaper will soon publish its own ranking of hospitals to show the 'lack of courage' of the supervisory organization. Do you pre-empt the activists by publishing the list of hospitals under intensified supervision?*

In this case, publishing the list might not be part of the current strategy. But if the newspaper publishes a list, it will attract all the attention. It makes the inspectorate look weak and eliminates any momentum for informing the public on your own terms. This shows that in terms of media management, it is important to consider the timing of publications with regard to the speed and development of media attention. Once a storyline is established, it becomes self-reinforcing, with any possibility of providing an alternative narrative severely decreased. It shows a difficult dilemma: supervision does not want to be premature in presenting information, but also cannot be too late in getting across the right message.

Beyond timing, it is also important to publicize findings. By not informing the media before a publication, inspectorates run the risk of having only bits and pieces reported on by media, as shown by an example from one of our respondents. The supervisory organization had performed an investigation about a hospital with a history of problems and organized a press conference to present the results. The report showed key topics that were slightly improved and some areas for further improvement. However, during and after the press conference, the media were already publishing about continuing problems in the hospital. The reports appeared so quickly that journalists couldn't have used any information from the report. Instead, most reports were based on the information they had from the past. The press conference did not create the desired result: it barely had any influence on media reports.

Media reports about current issues often have to be made under tight deadlines. The competition between media sources, especially with the rise of social media, is not just about quality but also about how quickly news can be presented. The result is that coverage of an event is only partially based on information presented during the event itself. Much of the story is based on information that was already collected from the past. Informing the media during the event itself appears to be too little, too late, to make sure that the proper message is communicated. One strategy for preventing miscommunication is to offer journalists the scoop in advance of the event, in exchange for a well-informed publication about the inspectorate. This shows the importance of the timing of informing journalists. When they receive information up-front, it increases the chance that they will use the information in their publication. This is also the reason that ‘press releases’ are often compiled for journalists to use to build stories.

In terms of media management, the implication of this timing dilemma is that it is important for health care inspectorates to be proactive in creating and adding to storylines. As a result of the self-reinforcing nature of storylines in the media, supervision has to express its views at an early stage in order to have a meaningful impact. Even, or especially, when there is still no media attention, the inspectorate should begin investing in the storyline about the sector and its organizational input. When there is already a storyline about an issue, it might be more effective to add to it instead of contradicting it. This way, media can take this into account in their future coverage. However, such a consideration is of course dependent on the facts and type of cases.

	Inform early	Inform afterwards
+	More influence to get message across	No premature informing Give the full picture
-	Premature informing Thin line between informing and wheeling and dealing with confidential information	Less influence on storyline building in the media Less attention for the message than shortly after the incident

#### 4.7 Counter media hype by waiting for attention to ebb, or persist at the media’s tempo?

*Your supervisory organization has received worrying reports about medical mistakes by a doctor working at a private clinic. Your supervisory organization is carrying out an inspection of the private clinic and has been asked to investigate the doctor. You are aware that a lot of people want the name of the doctor to become public so he cannot harm any more patients. Research journalists from a national magazine have published an article about this issue, which shows the supervisory organization overlooked some critical points during the inspection. Do you publish some shocking research results about the doctor and emphasize the good work of the supervisory organization to change the public opinion about your organization?*

When the media criticize the inspectorate, there are plenty of options for how to best react. The inspectorate can choose to make a public statement, give interviews, etc. This might be helpful to defend the organizational image and put the situation in perspective. However, there is also the risk that this strategy potentially adds to the controversy. It could, for example, elicit negative responses, fire up the debate and cause more damage. In order to avoid such a predicament, slowing down or waiting until the issue blows over is sometimes a better strategy because, as one respondent said, “soon they will find another scapegoat”.

However, this might be a counterproductive strategy if it doesn't blow over. The disappearance of the inspectorate could be seen as a sign of guilt or ignorance, and cause more negative news as a result. Again, this is not a dilemma where there is a 'right' or 'wrong' choice. The correct response depends on situational dynamics and circumstances, which should guide strategy going forward.

The potential pitfalls of waiting silently for a storm of negative media coverage to pass are well illustrated by an example from one of the health care inspectorates. The inspectorate was criticized by media for allowing the use of a birth inducement drug that was not registered and caused complications for six of the patients who received it. The coverage of the patients took on a personal angle, focusing on the six individuals and triggering a significant quantity of negative media coverage about the inspectorate. One respondent told us in an interview: "When the media portrays 10 'victims' of this medicine, this appears to be a much stronger message than saying that 120,000 people are helped by the same medicine (effectiveness) because these patients remain anonymous". Because of the difficulty to challenge the media story line, the inspectorate decided not to comment to the press anymore. However, the story did not blow over. Instead, the story endured and the criticism towards the inspectorate increased. Eventually, the inspectorate tried to explain why it had acted in the way it had, but it was already too late: "Our message was not being covered independently, they just added it to their own storyline".

In this case, the strategy of the inspectorate to wait until the news faded did not lead to a positive result. Instead, criticism grew because of it. When the inspectorate did start defending itself in the media, the negative dynamics were already too strong to influence. This inability to affect the narrative shows the difficulty and dynamics of this dilemma.

	<i>Adjust to their tempo</i>	<i>Counterbalance by slowing down</i>
+	<p>Nuance the story, defend your own reputation</p> <p>Provide the facts, prevent self-reinforcing false stories</p>	<p>Don't go with the hype</p> <p>Prevent adding fuel to the fire</p>
-	<p>Defending can generate quick responses and more criticism</p>	<p>Look suspicious for not reacting</p> <p>Where there is smoke, there is fire</p>

#### **4.8 Adjust public statements to accommodate dominant media logics and biases, or emphasize organizational and professional logic?**

The media often use a different language to describe the facts. Inspectorates and media both interpret and present the facts based on their own logics. Inspectorates, for example, often have a more legalistic and factual approach towards the issue at hand, while media focus more on emotions and personal stories. On the one hand, it is important that the inspectorate stick to its own profession, because that is what gives it legitimacy. On the other hand, influencing media coverage (or attracting their attention) could require elements that fit with media logics. The message can be altered accordingly, in ways as simple as careful word selection, proper message framing, and choosing the right image to accompany the message, in order to directly appeal to media coverage.

Consider the following vignette. *Your supervisory organization has received alarming information concerning a nursing home. Your supervisory organization is planning on performing a critical review of the nursing home. You find out that a television crew of a program is planning on revealing the ‘scandals’ in the near future, including negative remarks about the alleged failure of supervision exercised by your supervisory organization. Do you issue a press release about the ‘alarming’ information you have received concerning the nursing home and about the review you will conduct as a result of these signals?*

In this case, a neutral stance might be advantageous, in which case the inspectorate might choose not to announce a review. In the event it did, it would make sense to make its announcement without using words like ‘alarming.’ However, this could also lead to a negative image of the inspectorate for not being considerate enough of the severity of personal drama involved, according to the media. On the other hand, by taking a moral stance, the inspectorate runs the risk of prematurely expressing judgment, making it appear biased against the sector.

	<i>Make statements from own professional logic</i>	<i>Adjust statements to media logic</i>
+	Stick to the facts Remain neutral	Make more impact on news coverage Show consideration of patients
-	Have less impact, attract less attention Look inconsiderate	Premature judgment Get criticized by sector for being populist

#### 4.9 Summary of findings

Taken together, we have distinguished eight dilemmas in the relationship between media and supervision. These dilemmas are not simply defined as ‘good’ and ‘bad’ choices. The right strategy depends on the dynamics involved, which are in turn influenced by the actions of the inspectorate. Media management is more than simply a choice between option A and B, but also includes consideration of elements like timing, creation of positive cycles and prevention of negative snowball effects. For media management, it is important to make choices based on insight into these dynamics. The table below summarizes these findings.

	<i>Dilemma</i>	<i>Dynamic</i>	<i>Paradox / effects</i>	<i>Intervention options</i>
I	<b>Negative news: passive communication or active informing?</b>	You want to inform the public about problems, but prevent media-attention to be disproportionately damaging to the health care sector	Snowball effect: enlargement and hyping of negative messages  Negative news is often amplified and hyped, which can cause extra damage to the reputation of the sector	Consider the longer-term dynamics of negative news  Example: - Some issues can be solved ‘behind the scenes’ - Meet frequently with journalists to accomplish more-informed publications

2	<p><b>Negative news: better to emphasize or downplay the role of the inspectorate?</b></p>	<p>You want transparency and need publicity to exercise influence on the sector, but negative news is often interpreted as ‘failing supervision,’ which diminishes the image and effectiveness of the supervisory organization</p>	<p>Unintended consequences: backfiring efforts to send critical messages</p> <p>Supervision in media reports is often ‘failing supervision’</p>	<p>Consider the frames and the weaknesses for the image of the supervisory organization</p> <p>Example: - Discuss talking points before the broadcast</p>
3	<p><b>Reassuring news: better to send reassuring messages, or no?</b></p>	<p>You want to publish reassuring news, but the more positive the news, the more sceptical it could be received</p>	<p>Media can reframe a message from a different perspective: ‘hitting the target, missing the point’</p> <p>Reassuring messages from supervision are suspicious</p>	<p>Consider the broader context and history in which the message will be interpreted</p> <p>Example: Link news to other positive events from the past to show a positive pattern</p>
4	<p><b>Positive news; remain on the background or publicly celebrate successes?</b></p>	<p>You want your positive message to make the proper impact, but media attention is always contested by other issues</p>	<p>Variability of media attention: media attention depends on the density of issues</p> <p>Good supervision is usually invisible; the amount of media-attention is dependent on other issues on the agenda</p>	<p>Consider attractiveness and timing of the message</p> <p>Examples: - Generate media attention: create an event with famous guests? - Prevent media attention: reschedule press conference to coincide with other media event?</p>
5	<p><b>Permit journalists close proximity to the inspectorate’s work, or keep them at a distance?</b></p>	<p>You want to moderate which (sensitive or personal) information becomes public, but also show journalists a real impression of the work</p>	<p>Quickness of story building</p> <p>Media construe their storylines and only use small bits and pieces of the information from the supervisory organization</p>	<p>Consider involving journalists in real-time aspects of inspectorate work</p> <p>Examples: - Let journalists tag along with an inspector for a day - Give selected journalists a scoop before the event, so they include it in their coverage</p>

6	Discuss early findings with the media, or share conclusions after work is complete?	You don't want to prematurely share information, but also can't afford to be overtaken by events	<p>Self-reinforcing storylines</p> <p>Once a storyline is established, it is self-reinforcing and the option to send another message decreases substantially</p>	<p>Consider the timing of public messages during the start of story-building</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>- Be proactive in creating and adding to storylines</li> <li>- Publishing parts of research before media coverage</li> <li>- Add to a story-line, instead of contradicting it</li> </ul>
7	Counter media hype by waiting for attention to ebb, or persist at the media's tempo?	You want to defend yourself when there is criticism, but don't want to strengthen the negative cycle by firing up the debate	<p>Vicious cycles</p> <p>Defensive messages often elicit negative responses, but staying silent can reinforce that as well</p>	Consider the depth and length of criticism and the reaction on a defensive tone
8	Adjust public statements to accommodate dominant media logics and biases, or emphasize organizational and professional logic?	You want to stick to the facts and your role, but also cover the proper frame in order to get the message across	<p>Parallel stories, conflicting logics</p> <p>Formal, legal statements speak to the facts, while moral statements speak to the emotions</p>	<p>Consider the personal side of communication</p> <ul style="list-style-type: none"> <li>- Express sympathy or other emotional involvement</li> <li>- Use facts besides emotions, but not to contradict them</li> </ul>

## 5. Conclusion

### 5.1 Dealing with incidents by toggling time horizons

In this study, we have explored media challenges and the strategies employed by health care inspectorates. The meetings and interviews with representatives from different European inspectorates have provided insight into the dilemmatic character of these strategic options, resulting in a rich description of some common dilemmas and dynamics of media management. In all of the cases we considered, media management is not simply about the right content, but also about influencing the dynamics in an intelligent way. Therefore, an important aspect of media management is the competence to understand the dynamics of the media. When is attention growing or diminishing, how long will it last? What is the current frame and when can this be changed? Media strategies are not only about delivering the right message, but doing so at the right time.

In media management, a good sense of timing is just as important as the content of the message. Media strategies need to consider message content, but also look at the timing in relation to the dynamics involved. When is the right moment to go public? How does the message interact with current media dynamics? When is it too late, or too early to give a press conference or to release a report? This study has shown the importance of developing this sense for timing. The importance of timing is especially relevant in times of incidents or turbulence, when media stories tend to build and develop quickly. To operate effectively in such turbulent times requires the organization to be structurally prepared. But what is structural preparedness in the context of intense media attention? We will elaborate on a number of these elements as recommendations for the inspectorates.

The core of these recommendations is that they don't prescribe a specific choice between media strategies, but instead point to organizational conditions necessary for optimal functioning within these dynamics: organizations cannot entirely avert incidents from happening, but can invest in their ability to deal with them better if they do occur. Toggling the extreme short-time horizon of incidents and the longer-term development of a brand of the inspectorate is key to improving the ability to deal with media-coverage.

#### *Media management during incidents*

##### **1. Important role for the inspectorate leadership**

Our discussion with the European health care inspectorates has shown that these issues of media management are not only issues for the communications department. These are strategic issues that lie at the core of the inspectorate's work and influence the way the public perceives the organization, the way messages about the sector will be interpreted, and the effectiveness of the reports and warnings from the health care inspectorate. Dealing with the media requires continuing involvement and reflection on the highest level. This is especially the case when there are incidents that reflect poorly on the inspectorate. The leader of the inspectorate is the person with the most authority in the public domain to speak on behalf of the organization, is the prime figure that the media will want to speak with, and therefore represents the greatest potential impact on public debate. The leadership has a role in preventing an incident, but also has a significant part to play in tending to the public debate and helping with early prevention of self-reinforcing negative news stories. The leadership's role is to bring about oversight and calmness, as well as to find the right tone in the situation.

## 2. A well-functioning organization

The leadership's role does not diminish the crucial role of professionals in the organization. By maintaining regular contacts with other relevant actors – e.g. health care organizations, patients, journalists – there will be more insight into the dynamics between them. Especially when incidents occur, this insight and the short lines with other actors are important for operating effectively. To use the lines with external contacts effectively, a well-functioning internal communication system is required to make sure that information reaches other employees and the inspectorate's management in time.

## 3. Connecting media strategies with other actors

During incidents and crisis, a coordinated strategy with other actors is often required. Therefore, it is important to connect and adjust the media strategies between parties within this network. For example, it can be agreed which part of the communication is for the inspectorate and which part is for the health care organization. Also, agreements can be made about which information is published and when.

## 4. Connecting internal and external media strategies

Internal communications that take place within the inspectorate and the organization's external communications with the public cannot be treated as completely separate. This is especially when things go wrong, when the organization is most inclined to turn most of its attention towards external communications. However, there are many sources through which bits and pieces of information reach the public. Consider, for example, media attention at the location of the incident, and the persons working there. By keeping professionals in the organization and most direct partners directly informed, it's possible to prevent the emergence of varied, conflicting stories. This requires timely and conscientiously informing partners and staff through proper channels.

## 5. Attention to facts and framing

It is very important to verify the facts about any given incident in announcements. This requires a well-working monitoring system that should be prepared for times in which negative news is released unexpectedly and there is little time to familiarize with the facts. Fact-finding is the basis of a good strategy, but understanding framing is similarly important. Framing determines the 'lens' through which people interpret the facts and how public statements will be judged. This requires professionals who not only know and understand the facts in health care, but also are familiar with framing and counter framing in the public debate.

## 6. Establishing continuity during crisis

Incidents with a high level of media attention require a significant amount of the inspectorate's attention, but normal operations must continue as well. If the organization gets distracted from daily operations, it might increase problems in the long term. While solving one problem, new ones can materialize because of a lack of attention. This also applies to continuity within health care organizations; an incident can distract them from daily operations as well, and inspectorates should avoid exacerbating this dynamic by asking for too much information and deliberation.

## 7. Prevent disasters after the disaster

When incidents occur, it is not only important to solve the problem itself but to also consider which consequences might follow. A quick and thorough intervention might be good in the short term, but could also have negative consequences. For example, making firm statements about the seriousness of a situation sounds like a convincing media strategy, but if the situation turns out to be different, these firm statements will be perceived from a different point of view and could be interpreted as premature. The effect will then be not

a stronger image, but a weaker one. Also, these statements might have incorrectly reflected poorly on the specific health care organization or professional. This requires considering the short and the long-term effects of statements during media management. In the organization, it is sometimes necessary to organize this in different functions to make sure both perspectives are taken into account.

### *Structural media management*

We started this report by discussing how media and inspectorates are increasingly intertwined, while insisting that each has their own role and own logic under which they work and communicate. The media are of strategic importance for inspectorates, because they mediate between supervisory work and the public. However, it would be a mistake to assume that effective media management would mean that inspectorates should resemble the media logics. This would lead to an overly incident-based strategy. Instead, in this report, we have shown that the relationship between the inspectorate and media is one of structural dilemmatic character. These dynamics can lead to very positive coverage of the inspectorate and can offer a stage from which to send a message, but can also generate criticism and negative publicity. Incidents and negative publicity can never be totally prevented, and media management should therefore also be focused on the long-term by continuously building a strong image that is resilient to sudden blows or crises. The recommendations above focus on strengthening these structural organizational features, which can help build the resilience required in times of critical incidents. At its most basic, the key is to work on your brand and the framing of your organization, in order to create a positive reinforcing cycle: once a positive frame is established it determines the interpretation of new events which lead to the reinforcement of framing. For inspectorates, this means that active media management is a challenge of structural attention that requires a consistent and continuous approach. In the end critical incidents cannot be entirely prevented. What inspectorates can do is to work continuously on how these incidents are made sense of when they occur. Partly, managing media attention around incidents is about quick and adequate response and media-appearances around the incident. But it is also about developing a strong brand that will act as signifier for sense-making for the incident at hand. In order to deal better with the short-term timeline of incidents, it is important for inspectorates to invest in the long-term brand of policy issues.

## Literature

- Altheide, D. L., and R. P. Snow. 1979. *Media logic*. Beverly Hills; Sage Publications.
- Atzmüller, C. & Steiner, P.M. (2010). Experimental vignette studies in survey research. *Methodology*, 6(3), 128-138.
- Barter, C. and Renold, E. (1999). The use of vignettes in qualitative research. *Social research update*, Issue 25, university of Surrey.
- Bennett, W. L. (2009). *News. The politics of illusion*. (8th ed.). New York: Pearson Longman.
- Björklund, C., Grahn, A., Jensen, I. & Bergström, G. (2007). Does survey feedback enhance the psychosocial work environment and decrease sick leave? *European journal of work and organizational psychology*, 16(1), 76-93.
- Blumler, J.G. and Kavanagh, D. (1999). The Third Age of Political Communication: Influences and Features. *Political Communication*, 16(3), 209-230.
- Cobb, R.W. & Elder, C.D. (1972). *Participation in American politics: the dynamics of agenda-building*. Baltimore, MD: Johns Hopkins University Press.
- Cook, T. (2005). *Governing with the news*. Chicago: University of Chicago Press.
- Davis, A. (2002) *Public Relations Democracy. Public Relations, Politics and Mass Media in Britain*. Manchester: Manchester University Press.
- French, W.L. & Bell, C.H. (1999). *Organization development behavioral science interventions for organization improvement*. Upper Saddle River, NJ: Prentice Hall.
- Hajer, M.A. (2009). *Authoritative governance: Policy making in the age of mediatization*. Oxford University Press.
- Hirschman, A.O. (1970). *Exit, voice, and loyalty: Responses to decline in firms, organizations, and states*. Harvard University Press.
- Hughes, R. (1998). Considering the vignette technique and its application to a study of drug injecting and HIV risk and safer behavior. *Sociology of Health and Illness*, 20(3), 381-400.
- Jacobs, S. & Schillemans, T. (2011). Critical media attention for public organizations: a trigger for accountability processes? *Paper for the ECPR panel Bureaucratic Autonomy and Public Accountability*.
- Korthagen (2013). Who Gets on the News? The relation between media biases and different actors in news reporting on complex policy processes. *Public Management Review* (2013), 1-26.
- Klijn, E.H., Twist, M.J.W. van, Steen, M. van der & Jeffares, S.R. (2015). Public managers, media influence and governance: three research traditions empirically explored. *Administration & Society*, doi: 10.1177/0095399714527752.

- Lieber, P.S. and Golan, G.J. (2011). Political Public Relations, News Management, and Agenda Indexing. In: Strömbäck, J. and Kiouisis, S. (eds.) *Political Public relations. Principles and Applications*. New York: Routledge.
- Lindström, K., Dallner, M., Elo, A.-L., Gamberale, F., Knardahl, S., Skogstad, A., (1997). *Review of psychological and social factors at work and suggestions for the General Nordic Questionnaire (QPSNordic)*. Copenhagen, Denmark: Nordic Council of Ministers.
- Mann, C.F. (1961). Studying and creating change. In: W.G. Bennis, K.D. Benne & R. Chin (Eds.), *The planning of change* (pp. 605-613). New York, NY: Holt, Rinehart & Winston.
- Mazzoleni, G. & Schulz, W. (1999). 'Mediatization' of politics: A challenge for democracy? *Political Communication*, 16 (3), 247-261.
- McLuhan, M. (1964). *Understanding media: The extensions of man*. London and New York: Routledge.
- McNair, B. (2003). *An Introduction to Political Communication*. London: Routledge.
- Meijer, M., Berkhout, P. & Ruiten, M. (2001). Gevolgen van reorganisaties voor tevredenheid van personeel. De casus van een onderhoudsbedrijf bij de Koninklijke Marine. *M&O Tijdschrift voor Management en Organisatie*, 55(46).
- Neijens, P. and Smith, E. (2006). Dutch public relations practitioners and journalists: Antagonists no more. *Public Relations Review*, 32, 323-240.
- Shoemaker, P.J. and Reese, S.D. (1996) *Mediating the message. Theories of influences on Mass media content*. New York: Longman Publishers USA
- Strömbäck, J. and Kiouisis, S. (2011). Political Public Relations: Defining and Mapping an Emergent Field. In: Strömbäck, J. and Kiouisis, S. (eds.) *Political Public relations. Principles and Applications*. New York: Routledge.
- Strömbäck, J., Karlsson, M. and Hopmann, D.N. (2012). Determinants of news content. Comparing journalists' perceptions of the normative and actual impact of different event properties when deciding what's news. *Journalism Studies*, 13(5-6), 718-728.
- Tenscher, J. (2004). Bridging the Differences: Political Communication Experts in Germany. *German Politics*, 13:3, 516-540.
- Van der Steen, M. Scherpenisse, J., van Twist, M.J.W., 't Hart, P. (2015). How to see failure: attempts by the Inspectorate of Education to detect and disarm failure in Dutch education policy. *Public Policy & Administration*.
- Van der Steen, M., Klijn, E.H. & Van Twist, M.J.W. (2013). Ruimte voor strategie: relatie tussen toezicht en media nader bezien. *Tijdschrift voor Toezicht* (3).
- Van Twist, M.J.W., Klijn, E.H. & van der Steen, M. (2012). Over hijgerheid en lange adem: een verkenning van de relatie tussen toezicht en media. *WRR achtergrondstudie*.
- Werkman, R.A. (2006). *Werelden van verschil. Hoe actoren in organisaties vraagstukken in veranderprocessen hanteren en creëren*. M.J.W., Amsterdam: Amsterdam University.