

# CASE STUDIES

## CRISIS MANAGEMENT



## Mystery Deaths and Clinic Investigation Require Swift Response

**PROBLEM:** In 2008, a number of unusual and unexplained deaths occurred at a Texas dialysis facility. Regulators immediately shut down operations while investigators – including local law enforcement and state and local health authorities – were allowed to fully investigate the situation. Witnesses reported observing a nurse/employee inject an unknown substance into patients' IV lines during treatment. The company engaged Revive to manage the public fallout from this situation.

**STRATEGY:** We coordinated communications during the investigation and acted as the client's front-line media representation due to our expertise and background in clinical care crisis issues. We crafted a strategy to distance the client's brand and operations from the seemingly random criminal acts of a single individual. Revive managed relations with local and national media, providing timely information and updates. We worked closely – onsite and remotely – with law enforcement, state health authorities, and client legal counsel, to provide the best available information without compromising client liability or confidentiality.

Daily news briefings, one-on-one media briefings, customized information presentations, and significant media background briefings were utilized to diffuse rumors. We maintained a positive image of the client by placing positive patient stories in the media. We also protected employee confidence by shielding them from media inquiries and providing internal communications updates as needed.

**RESULTS:** Despite the risk for negative reports making national headlines, we were able to keep the story locally contained and no media coverage appeared outside Texas. The client suffered no measurable damage to its corporate reputation as measured through public awareness and influence on stock price and financial performance. All patients were transported – at company expense – to other centers owned by the company, and no patients' families pursued legal action or media attacks against the company. Most importantly, the company's protocols and prompt action prevented any further patients from being harmed and demonstrated that it protected patient safety.



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## Physician Controversy Prompts Reputation-Damaging News Story

**PROBLEM:** Ignoring a crisis doesn't make it disappear any more than closing your eyes makes someone disappear. This was apparent when one hospital chose to ignore a budding crisis, resulting in an explosive situation. An investigative reporter for a major metropolitan daily newspaper targeted a practicing OB/GYN, based on a number of complaints from the physician's Spanish-speaking patients. She was developing a story that the physician was a deviant, using inappropriate techniques to treat women pre- and post-delivery in ways that were sexually gratifying for him. Beyond the personal behavior, the reporter was also focused on the hospital's handling of nurse-initiated incident reports regarding the physician. The hospital would potentially face severe consequences if these issues were not handled carefully. It needed to protect the organization's reputation and avoid scaring off Hispanic patients, which comprised the majority of the population in the primary service area.

**STRATEGY:** The first challenge was improving communication with the reporter. We first learned of this issue when the physician kept the reporter waiting in the hallway outside his office for five hours without notifying the hospital, and then sprinted to his car to avoid her questions. Revive developed a clear set of messages and supporting data around the physician and hospital's quality and outcomes. We then organized a conversation with the reporter to clear the air and establish a fact base. It might have been too late to make the reporter like or trust the physician, but through this approach, the hospital's reputation could still be protected.

Revive arranged for outside experts to talk with the reporter about physician oversight and the peer review process. We briefed the hospital CEO and CNO, conducted media training, and scheduled a special session for the reporter to tour the hospital and view the OB unit. We also helped the physician and his attorney prepare for follow-up interviews with the reporter, as well as identify past patients and nurses who would vouch for his skill and quality care. The clear focus was on protecting the hospital's reputation, but the tone and content of the story would have a great deal of influence on the physician as well.



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## Physician Controversy Prompts Reputation-Damaging News Story (cont.)

**RESULTS:** After multiple interviews with and reams of documents provided to the reporter, the story ran on the Saturday of a holiday weekend. It did not run in the Spanish-language paper, which was a common occurrence for major stories in this particular market, nor did Spanish language TV pick it up. The story was far from flattering for the physician, and it included many of the allegations made by the critical nurse who had filed the incident reports. Yet, the hospital's reputation was protected and relations with the medical staff were not damaged as they would have been if the organization had been seen as abandoning a key physician. Third party expert sources, identified to defend the hospital's practices and the quality of the physician's practice, added balance to the story and credibility to many of the hospital's defenses.

Most importantly, though OB volumes dropped temporarily, they returned to usual levels within 30 days. This key service line in the hospital's business model remained strong, contributing to the hospital's bottom line.



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## Nurse Scandal Requires Rapid and Astute Action to Avoid Media Crisis

**PROBLEM:** Imagine one of the worst situations a hospital and its leadership could face. A nurse in a pediatrics ward had been circumventing a Texas hospital's electronic medication management system for nearly six months, withdrawing narcotics using legitimate billing codes, and then emptying the narcotic vials with a syringe and replacing the drugs with saline solutions.

This sounds bad enough, but the nurse was HIV and hepatitis C positive, which made the drug diversion more than fraudulent and scary – it made his behavior deadly. The nurse had completed a drug treatment program prior to his employment by the hospital, which was kept secret from the hospital under state law, and the descent into addiction and drug use was sure to raise a host of issues for the hospital and the state.

Compounding this further was the potential impact on the patients in the pediatrics unit and their families. After careful analysis, it was determined that 56 pediatrics patients were potentially exposed to HIV or hepatitis C as a result of injections received while under the care of the nurse in question. Under state law, the hospital was required to notify these patients and their parents. Clearly the moral and ethical obligations needed to be addressed, but there were also legal obligations that shaped this intricate communication strategy.

**STRATEGY:** After hundreds of hours of collective deliberation and legal analysis by the legal and PR team over a two week period, Revive developed a communication strategy centered around proactive notification of the 56 affected patients and their families, coupled with concurrent proactive releases to the media. This bold strategy required careful synchronization, since any preemptive media release could force affected families to read the news in the paper, rather than hearing it from the hospital. On the other hand, too much delay in contacting the media could result in an angry family member leaking the story and turning the event into a major "gotcha" opportunity.



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## CRISIS MANAGEMENT



## Nurse Scandal Requires Rapid and Astute Action to Avoid Media Crisis (cont.)

The first step in the media strategy was to find the right reporter to approach with the story. Revive contacted an investigative health care reporter from the major daily newspaper, who was determined to keep conscientious coverage focused on the nurse rather than the hospital itself or potential system failures. The right print coverage would shape subsequent TV and radio coverage, which would use the print story as its primary source to create its own breaking news. Every facet of the strategy was geared toward shortening the news cycle and mitigating the likelihood for prolonged news coverage.

The strategy was executed as planned, with each family receiving a hand-delivered letter the day before the print story ran, and the hospital CEO personally speaking to each of them. As the story broke on the front page of the daily, the hospital CEO made the rounds of the TV morning show to keep cameras away from the hospital and make it clear there was nothing to hide. Internal communications were also carefully managed so that staff and physicians could answer questions and deal with the anxiety expected from patients currently under their care.

**RESULTS:** Nothing good can come from a situation like this, yet the impact of the awful news was curtailed in several ways. First, carefully managing the media information stream led to only two days of coverage. Second, the empathetic approach to communicating with the affected families prevented them from filing any litigation. Third, the hospital's staff and physicians rallied to defend the hospital and the quality of the allied health professionals who worked there.

This crisis management effort, led by Revive's senior leadership, received the Platinum Award for Crisis Management by the *Bulldog Reporter*.

