

## Editors' Comments

### High Overall Satisfaction: 1998 Survey Results Tom Janisse, MD, Editor-in-Chief



In 1998, *The Permanente Journal (TPJ)* editorial team surveyed our readership. We did this in several ways: two hardcopy surveys inserted into the June and November issues; personally calling all of the physicians on the original focus group; individual input from each Advisory Board member (who brought representative clinician comments from their KP Regions); and comments from Permanente Regional Medical Directors and Associate Medical Directors who convened at a conference in Los Angeles.

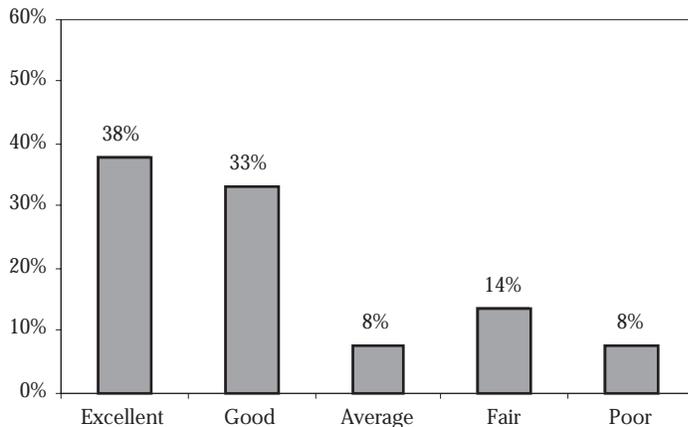
The following numbers are from the hardcopy survey. Even though the sample size was small (N=200), the hardcopy results were confirmed by the other groups we surveyed, so we have some degree of assurance that they are representative.

#### Overall Satisfaction

In response to the question: "How would you rate your overall satisfaction with *The Permanente Journal*," (see graph) 38% said "excellent" and 33% said "good." Although 8% said "average" and 14% said "fair," these responses could be viewed as good given the publication market and our competitor journals. Eight percent rated *TPJ* "poor." We were concerned with this, and scrutinized this group closely. Many people who rated "poor" also checked the box "never read it" and made the comments that "they don't have time" and that "it is a waste of money given the financial situation."

**TPJ 1998 Reader Survey Results**

**"How would you rate your overall satisfaction with *The Permanente Journal*?"**



#### Top Areas

The sections that ranked highest, when combining "excellent" and "good," were the "Editors' Comments" and "Clinical Contributions." The sections that ranked the highest with an "excellent" rating were "A Moment in Time" and "Soul of the Healer," followed by "Health Systems," "Permanente Abstracts," "Clinical Contributions," and "External Affairs."

In the survey area on General Comments, the highest-ranked areas, when combining "excellent" and "good," were the cover, the look, a forum for clinicians to express their talents in the humanities, and *TPJ* fosters a spirit of Permanente community.

#### Most Common Comments

The most common comments in answer to the question "The one thing I would like to see continued is" included:

- I like the direction
- Efforts to improve morale
- Focus on how we can be good doctors
- The good news about our system
- I'm very proud of the *Journal*
- Best practice articles
- Communication tips
- Alternative medicine
- Awareness of other regions' standard of care
- Group practice and health systems management
- Book reviews
- The *Journal* is a great recruitment tool

The most common comments in answer to the question "The one thing I would like to change is" included:

- Less crowded text, and the print is too small
- Decrease the length of the articles
- Slick paper
- More research articles
- It's more geared to managers than clinicians
- More articles of general interest
- Circulate more widely
- Add advertising to help support it

#### Changes We Are Making

*The Permanente Journal* has already changed, beginning with the Winter issue. We wonder if you noticed. The cover stock is a lighter weight, and the internal page stock is also lighter and less glossy. On the one hand, we hoped the changes would be more noticeable so you would see our cost-reduction and gloss-reduction efforts. On the other hand, even af-



ter saving \$5,000 per issue on paper quality, it still looks good—maybe too good for those who thought the *Journal* looked too slick.

Well, that leaves more room for improvement. What you see for the first time in this Summer issue is the enhancement in readability because of greater space between lines, greater attention to a pleasing and visually comfortable page layout, and format changes noted in the following paragraphs.

### Strategies for Success

On the basis of the reader survey and the planning of the Editorial Team and Advisory Board, we have identified several strategies for success. The first is to focus on Permanente Medicine, through evolving descriptions of it, articles that define it through the demonstration of Permanente clinical practices, and the promotion of it in internal and external forums.

The second focus is on enhancing the image of *The Permanente Journal* so that it functions well as a credible vehicle for Permanente practices, information, and communications. Changes include previously mentioned readability, and our applying for MEDLINE approval using the three issues in 1999. Having *TPJ* articles listed in MEDLINE would greatly enhance the benefit of publication for some potential authors and would aid *TPJ*'s efforts to find and publish the best new information.

Adding new features and changes to format represent the third area of focus and include: expansion of "Permanente Abstracts" to give you more clinical information reported nationally by Permanente authors; abstracts at the beginning of each "Clinical Contributions" and "Health Systems" article to provide a quick summary; brief Table of Contents summaries to assist your choice of articles; more best practices through an annual Vohs Award issue featuring the winner and honorable mention projects; and a special "Customer Service" issue this Fall, which implements an idea from our Advisory Board.

Our fourth focus is on new products and services. In conjunction with the Permanente Federation we are developing an electronic Permanente Medicine newsletter to bring you general information, Permanente "Pearls," and educational "scripts" for your patients in a more timely and accessible format. This will be a component of an information continuum including the printed and Web-based *Permanente Journal*. On the Web will also be an index of all *TPJ* articles with links from the title directly to the article, and you will soon be able to obtain CME credit for

reading *TPJ* articles. A final new service will be individualized distribution of each issue directly to each physician, clinician, and subscriber to ensure that you receive your personal copy of *TPJ* on time.

### Cost Reductions

Our final strategic focus has been our ongoing cost consciousness. In keeping with the cost reduction efforts across the Program, *The Permanente Journal* has reduced its budget by 9% for 1999. The three major areas of reduction are: 1) Printing one less issue for 1999, thus saving in printing, paper, and distribution costs; 2) Reducing the weight of our cover and text stock, which will continue long term; and 3) Canceling Advisory Board and Editorial Team meetings that required travel and lodging expenses.

One less issue does not result in a 25% cost reduction because of the fixed costs necessary to publish a journal. Our plan is to return to the quarterly issue format in 2000, although we will continue to look for cost reductions in the way we manage and produce *TPJ*. Complementing this, we will be increasing our revenue through subscriptions, and we are exploring other revenue sources available to medical journals, such as advertising. I intend to address commercial sponsorship in a future editorial when I seek your input on this controversial area.

### Final Comments

The Editorial Team and the Advisory Board are very encouraged by our readers' responses, both the positive comments of continuing support and the critical comments guiding our improvement efforts. We recognize that *TPJ* is a new venture for the Permanente Medical Groups, and a significant part of its exploration is to find the greatest benefits it can bring to clinicians. Our most important focus is to bring clinically relevant information about Permanente Medicine to Permanente physicians and clinicians across the country. We believe this will enhance regional clinical practice as well as enlarge our national medical knowledge capacity. *The Permanente Journal* has helped to create a national Permanente presence, a Permanente identity, an interregional Permanente connection, and a national Permanente communication forum. And finally, *TPJ* has demonstrated Permanente Medicine in a concrete and visible way by publishing articles which define our practice, and by the very existence of a national medical journal published by a medical group. ❖