

# The use of a closed-circuit hospital television channel to promote health: the reach and appeal of RPAtv to patients and visitors

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## Abstract

Closed-circuit television has the potential to promote health in hospitals, as a significant number of patients watch large amounts of television (TV) during their stays. This project sought to investigate the potential of a dedicated hospital TV channel to communicate health messages in an entertaining way by assessing the reach and appeal of a closed-circuit hospital TV channel — *RPAtv*. A cross-sectional survey of 162 inpatients and visitors at the Royal Prince Alfred Hospital was conducted.

Sixty-four percent of participants were aware of *RPAtv*, with patients (72%) significantly more likely ( $P < 0.001$ ) to be aware of *RPAtv* than visitors (41%). Almost 60% of those who were aware of the channel had viewed it. Of those who had viewed *RPAtv*, 73.3% rated the programming as “good” or “very good”.

When asked about programming preferences, 34% suggested that the channel should include health and hospital information. However, 66% said that they would rather watch programming that was entertaining, light-hearted and escapist.

The high approval rating of programming by viewers suggests that the channel is improving the experience of patients and visitors during their time in hospital. However, its effectiveness as a vehicle for health promotion could be some-

## What is known about the topic?

People in hospital are often receptive to health information. Patient education can increase knowledge of health issues and self-management.

## What does this paper add?

This paper is the first to report on the feasibility of an Australian hospital-wide free in-house television system for patients that can be used for patient education and health promotion.

## What are the implications for practitioners?

This in-house hospital television system has considerable potential to reach patients, and to some extent, visitors, with health information. However, this information must be delivered in an entertaining way.

what limited. Any health education-focused objectives of similar channels need to be realistic about the extent of likely increases in health knowledge.

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CLOSED-CIRCUIT TELEVISION has the potential to be an effective channel for health promotion in hospitals as a significant number of patients (and sometimes visitors) watch large amounts of television (TV) during their stays.<sup>1</sup> There is evidence that individuals are more receptive to health messages when in hospital as a result of their illness and need for care. This has been shown for issues such as smoking,<sup>2,3,4</sup> breastfeeding,<sup>5,6</sup> and nutrition<sup>7,8</sup> which have all been the subject of inpatient education programs.

While TV programming on its own is unlikely to lead to the widespread adoption of healthy behaviours,<sup>9,10</sup> it can act as an important trigger or reinforcement of health promotion messages.<sup>11</sup>

*RPAtv* is a free closed-circuit TV channel that is broadcast to most wards at the Royal Prince

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Alfred Hospital (RPAH) in Sydney for almost 24 hours a day. Up to 500 000 outpatients, 63 000 inpatients, 75 600 visitors and 3500 staff are potential viewers of the channel over a year. The average length of stay for an inpatient in RPAH is 3.2 days<sup>12</sup> with television one of the primary forms of diversion. *RPAHtv* aims to improve the experience of patients and visitors at the hospital by offering information about health, wellbeing and hospital services.<sup>13</sup> In order to discover *RPAHtv*'s potential as a health promotion strategy, this study aimed to determine the reach and appeal of *RPAHtv*, a free closed-circuit TV channel.

## Methods

A cross-sectional survey of inpatients and visitors at RPAH was conducted. To be eligible for the survey, participants needed to be inpatients or visitors on the wards sampled during the week of the study, to be aged 17 years or older and able to speak English.

All wards at RPAH were included in the sample frame, with the exception of mental health and acute care. Of 36 possible wards in the hospital, 15 were randomly selected with the intention of achieving a participant sample of about 150 respondents. This was calculated based on the size of the ward (number of patients) and of the anticipated level of awareness of *RPAHtv* (as determined by a pilot study conducted a few months earlier).

All patients and visitors present at the time from sampled wards were approached at the bedside by a research assistant and asked to participate in the survey. During this approach patients and visitors were informed about the aims of the study, and what was required of participants. The questionnaire was verbally administered, and covered awareness of *RPAHtv* and whether the respondent had watched it. If they had watched it, respondents were asked how long they had watched it for, their programming preferences, and whether advertising would be acceptable. Visitors were included, as their interaction with the patient was often

centred around watching TV. The survey sought the response of all viewers of the channel at the bedside.

Proportions were calculated and  $\chi^2$  tests used to test homogeneity between groups. Medians were calculated to identify trends in age groups. All statistical analyses were conducted using SPSS for Windows version 14.0 (SPSS Inc, Chicago, Ill, USA). The study was approved by the Sydney South West Area Health Service Ethics Review Committee (RPAH Zone) in 2006.

## *RPAHtv*

*RPAHtv* is provided free of charge to TVs throughout the hospital at patients' beds (TVs are permanently available) and also broadcast to a number of public areas. Signage near patients' beds indicates free availability. Patients need to pay for access to free-to-air commercial TV. *RPAHtv* went to air in September 2005 and was officially launched in late November 2005.

*RPAHtv* gathers its programming from a diverse pool of areas, of which some are paid licence fees and some are free. *RPAHtv* has content agreements with ABC TV and SBS that give a fixed rate per hour for programs. Programs are also sourced directly from support or advocate organisations such as *Beyondblue* – the National Depression Initiative, Schizophrenia NSW or the Engaging Fathers Project, plus independent producers.

*RPAHtv* is financed by RPAH but is working towards being cost neutral by raising funds through selected advertising, grants and sponsorship.

Decisions on programming are initially made by the Executive Producer of the channel. To maintain clinical quality assurance, proposed programming that has clinical or medical content is presented to relevant specialists or representative groups for viewing and endorsement.

Programming incorporates content from the following four areas:

- Information about the hospital's services;
- Education about health choices, disease process, procedures;

- Inspirational stories from people who have overcome challenges both within and outside health;
- Engaging programs that maintain the attention of the audience, from comedy and documentaries to short films.

## Results

Of 299 patients and visitors approached, 162 agreed to participate (75% patients and 25% visitors). Of those who did not take part, 16% were away from their beds at the time the interviewer arrived and 25% were unable to complete the survey due to illness or non-English speaking background. While the overall response rate was just over 54%, of those patients who were available, eligible and approached, only 14% refused to participate.

With regard to the age of participants, roughly one-third (37%) were aged between 20 and 40 years; 31% were aged between 41 and 60; and 31% were aged over 60 years.

Overall, 64% of participants were aware of *RPAtv*, with patients (72%) significantly more likely ( $P < 0.001$ ) to be aware of *RPAtv* than visitors (41%). Two out of five survey participants (39%) had watched *RPAtv*, with patients (45%) again significantly more likely ( $P = 0.009$ ) than visitors (22%) to have watched *RPAtv*. Almost 60% of those who were aware of the channel had viewed it. With regard to participant characteristics, chi-square tests showed that there were no significant age and gender differences. Of those who had viewed *RPAtv*, 73.3% rated the programming as "good" or "very good" and some respondents who had not watched the channel expressed an interest in viewing it. Three-quarters (75%) of patients, and all of the visitors, had watched *RPAtv* for 5 hours or less.

When asked about programming preferences, 34% suggested that the channel should include health and hospital information. However, 66% said that they would rather watch programming that was not related to health, preferring programming that was entertaining, light-hearted and escapist so that patients could be distracted

from their sickness or discomfort. Cooking and comedy were among the most common preferences (both of which are already run on *RPAtv*). News and sport also rated quite highly, although participants were more likely to watch these on commercial channels. In addition, a high proportion of respondents expressed an interest in the meditation programs that were already part of programming.

The survey also asked about advertising, with 80% of survey participants agreeing that advertisements between programs would be acceptable. When asked to specify the type of advertising they preferred most identified "healthy products" and that the advertising of fast food and other junk food should not be allowed. Participants on the maternity ward also showed a preference for the advertising of baby products and services.

## Discussion

The results indicate that *RPAtv* reaches a substantial proportion of patients and visitors, although exposure could be increased. With three-quarters of viewers rating the programming as good or very good, it is reasonable to conclude that the channel is achieving its main aim of improving the experience of patients and visitors by offering information about health, wellbeing and hospital services.<sup>13</sup> With viewers generally liking what they had watched, *RPAtv* can be considered acceptable to patients and visitors.

However, its effectiveness as a vehicle for health promotion could be somewhat limited. This is because its appeal largely depends on its alignment to patient and visitor preferences, which are overwhelmingly for entertainment rather than information. Health promotion messages may have to be woven into entertainment programming if they are to be appealing to patients and visitors.

While the reach of the channel was found to be broad across the patient and visitor population, the intensity of exposure is fairly limited. This is because the average length of stay in hospital is relatively short,<sup>12</sup> and thus few patients or visitors would be exposed to health promotion messages

from TV for a sufficient period of time to make them a significant factor in changing behaviour. The most appropriate role for *RPA tv* might be as a trigger or reinforcer for behaviour change rather than a major change factor.<sup>11</sup>

In addition to reach and appeal, the study also investigated attitudes to advertising and found that respondents generally supported it. This may be an acknowledgement of the need to fund the channel, a recognition that advertising could not be avoided or that it could be turned to a virtuous purpose such as the promotion of breastfeeding.

Television-based strategies such as *RPA tv* may represent an important health education opportunity for reaching patients and visitors in hospital. However, the objectives for such a program need to be realistic. If they are to make a significant contribution to health promotion, the regular review of program material, to ensure that channels have the right balance of information and entertainment, will be necessary.

## Competing interests

The authors declare that they have no competing interests.

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