

Ethical Communication in Healthcare Organizations

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Abstract

Today, sustainability is an economic concept increasingly applied in the global economy, and communication is an inevitable part of every strategy. The events of recent years, marked by the COVID-19 pandemic, have led to the transformation of the business model in the medical sector by including ethical communication as a main component. The article aims to analyze the ethical communication with patients in organizations in the medical sector to eliminate the high risks related to a sustainable medical act and only in this way will the conditions for realizing a relevant and viable medical act be created for the individual and society. The research was carried out by means of a questionnaire applied to patients from hospitals in Romania. The results prove that progress in the health sector has increased remarkably, and health management is better due to new knowledge about managing diseases and life-threatening problems for patients. Therefore, it is necessary to incorporate ethical principles in all communication activities in the medical sector globally. Ethical communication will determine an elimination of the risks related to the loss of the image of medical institutions, the occurrence of medical errors, and their related financial consequences.

Keywords

Medical communication, ethics of communication, ethical principles, patient, sustainability.

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Introduction

Communication is a significant problem in modern society, directly or indirectly affecting people, communities, and entire societies worldwide. Communication can be seen as a bond between people in a community. Communication offers the possibility of psychosocial homogenization and assures a normal functioning of a community (Moreau, 2021).

Communication is a complex phenomenon that transmits information, opinions, and ideas from one community to another and/or from individual to individual (Sethumadhavan and Sasangohar, 2020). Hence, the communication process is found today as an integral part of the activity of an individual or a community and of a company's business process.

The events of recent years that the COVID-19 pandemic has marked have determined that communication in the medical sector has become essential for the individual and the community leading to the creation of better management in the medical sector (World Health Organization, 2021). Progress has been made in the health sector, but medical professionals need effective communication to provide effective and quality care. Today, unfortunately, we still encounter medical organizations that suffer from a series of communication deficiencies (Burlea-Schiopoiu and Ferhati, 2021). These constitute a vulnerability of the medical system that, for patient safety, it must be removed. The risk of medical errors as well as the risk of communication failures, must be removed. Recent expert studies show that communication failures in medical organizations lead to inefficiencies in health systems. They waste precious resources for the healthcare system, and for a sustainable medical act, it is necessary to eliminate these risks (Pablo, 2015).

The paper aims to analyze ethical communication in the medical sector to eliminate the risks related to a sustainable medical act and create the premises for carrying out a viable medical act for the individual.

1. Review of the scientific literature

An essential component of communication in the medical sector is managerial communication. Managerial communication presents particularities determined by communication's complexity, purpose, objectives, and implications. In organizations in the medical sector, these particularities usually follow norms imposed by the organization's policy and/or managerial culture.

New relevant characteristics have been identified in the literature related to the issue of managerial communication (Jankelová and Joniaková, 2021). Management communication is based on feedback, a process that uses permanent or scheduled informational activities. Therefore, the characteristics of managerial communication depend very much on the performance of communication functions (Burlea-Schiopoiu, 2007b).

Managerial communication must be carried out permanently and on time. Therefore, it can be done vertically upwards, downwards, and horizontally on the same hierarchical level and through formal, pre-established communication channels. Formal internal communication is based on the operation of the communication system under the communication rules and procedures established in policies and procedures at the organizational level (Voinea, 2015). In addition to formal communication, communication can be done through informal channels that transmit information without immediate and/or direct utility (Burlea-Schiopoiu, 2010). Informal communication channels are spontaneous. These are constantly changing. It works at all organizational levels (European Commission, 2022).

In every organization, internal managerial communication is based on the organizational climate (defensive or closed). Therefore, internal managerial communication depends on the organizational structure, formal communication rules, the impact of informal communication, communication barriers, communication climate, and subordinate relationships in the organization (Burlea-Schiopoiu, 2007a; Pablo, 2015).

In the organization in the medical sector, both internal and external communication is carried out. Internal communication is vital in the conduct of the medical act. External communication is critical to patient satisfaction and it is vital for maintaining the image of the organization in the medical sector. Internal and external communication significantly contribute to the fulfillment of the purpose of the medical act (Pablo, 2015).

Institutions in the medical sector possess ethical values and they must be respected by all its members. At the management level, each manager knows how to communicate both internally and externally for the protection of the image of the organization in the medical sector as well as his own image. Medical personnel are obliged to constantly reconsider their attitude related to ethical principles. It must apply these principles both inside and outside the organization in the medical sector (Vermeir et al., 2015).

Hospitals are the most important category of organizations in the medical sector because often face ethical issues. There are still problems in hospitals related to established doctor-patient relationships, especially during medical research activities and these relationships must be regulated and controlled very well. In hospitals there are still problems related to internal relations. The problems related to external relations are usually regulated by specific internal procedures.

The main actors in a medical institution involved in ethical communication are presented in Figure no. 1.

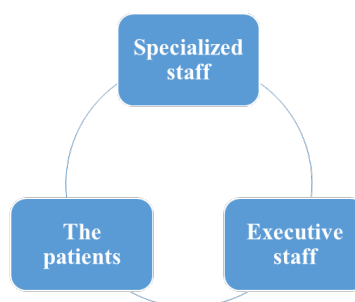


Figure no. 1. The main actors in communication in organizations in the medical sector

Source: World Health Organization, 2010

Communication must be based on ethical principles only because only in this way can the final goal be achieved under good conditions: the performance of the medical act. Medical personnel generally consider all the values generated by applying medical ethics primordial. Moreover, emphasis is placed on the legally stipulated right of patients to be informed and to decide and agree with the proposed therapy. Finally, the executive staff is always guided by the marketing principles, which mainly aim at the best optimal development of their organization (World Health Organization, 2010).

A lack of communication between medical and administrative staff can generate conflicts. As a result, ethical and effective communication is necessary to remove this vulnerability and offer patients a relevant medical record and a better quality of life.

Another essential category of built relationships is external communication with society (Burlea-Schiopoiu and Balan, 2018). How resources are used in the short term and in the long term to ensure the necessary medical services are critical because they can have ethical implications for the local and global community (World Health Organization, 2010).

In order to carry out the medical act, the regulation of a correct and honest method of communication between institutions in the medical sector must be ensured, and the risk of false competition must be eliminated (World Health Organization, 2021).

At the management level, a leader in the medical sector is responsible for ensuring optimal conditions for real collaboration between all the employees, and only in this way will ethical values be utilized in medical practice. Depending on the specifics of each institution in the medical sector, relevant analysis of the application of these ethical principles of communication must be carried out, as well as the need to develop new regulations.

2. Research Methodology

How can ethical communication be analyzed in the medical sector? By analyzing the communication carried out by the main communication actors in the organizations in the medical sector. The communication of doctors and medical staff with patients is an essential part of the analysis of ethical communication in organizations in the medical sector. For this analysis, a questionnaire applied to patients from several hospitals in Romania was created and used.

The research was carried out between January 15, 2023 and March 15, 2023. Compliance with the legal provisions on the protection of personal data was ensured.

The questionnaire was created in Google Forms from the Google Docs ePlatform. The resulting data were collected for further processing using MS Office Excel and MS SPSS version 26.

3. Results and Discussion

From the data collected regarding the answers of the patients to the questionnaire, it follows that 242 patients participated in the study, of which 130 women (53.7%) and 112 men (46.3%) (Table 1). The relatively equal number of women and men leads to greater accuracy of the results obtained.

The 242 patients included in the study are between 18 and 30 years old, accounting for 37.2% of the total number of patients, being the most representative age group. Among the patients, 19% have high school education and 3.3% post-high school education. The largest number of patients included in the study is represented by patients with higher education (76.9%).

82.6% represent patients from the urban environment.

Table no. 1. Descriptive statistics of the collected data

		Frequency	Percent	Valid Percent	Cumulative Percent
Gender	Female	130	53.7	53.7	53.7
	Male	112	46.3	46.3	100
	Total	242	100	100	
Age	18 - 30 years	90	37.2	37.2	37.2
	31 - 40 years	62	25.6	25.6	62.8
	41 - 50 years	60	24.8	24.8	87.6
	51 - 65 years	26	10.7	10.7	98.3
	over 65 years	4	1.7	1.7	100
	Total	242	100	100	
Education Level	Secondary	46	19	19	19
	Post-secondary School	8	3.3	3.3	22.3
	Higher education	186	76.9	76.9	99.2
	PHD	2	0.8	0.8	100
	Total	242	100	100	
The environment of origin	Urban	200	82.6	82.6	82.6
	Rural	42	17.4	17.4	100
	Total	242	100	100	

Source: Author's own research results.

Communication between medical staff and patients in organizations in the medical sector

Doctors and medical personnel listen to the patient (50.41%) (Figure 2). Doctors and medical personnel provide clear explanations to the patient regarding the treatment and appropriate medication (52.07%) and provide information that the patient understands regarding the treatment/medication in recovery (54.55%). Doctors and medical personnel always provide clear explanations to the patient regarding his health condition (48.35%). They are open in communication with the patient (45.97%). Doctors and medical personnel use in communication a language understood by the patient (42.15%).

Vulnerabilities that can lead to high risks and that still persist in the medical system are related to the attention with which doctors and medical personnel communicate very carefully with the patient (37.60%) with a high percentage of undecideds (33.99%). Vulnerabilities are also related to the fact that doctors and medical personnel do not offer any explanation or little explanation to the patient (33.47%) with a fairly high percentage of undecideds (23.14%).

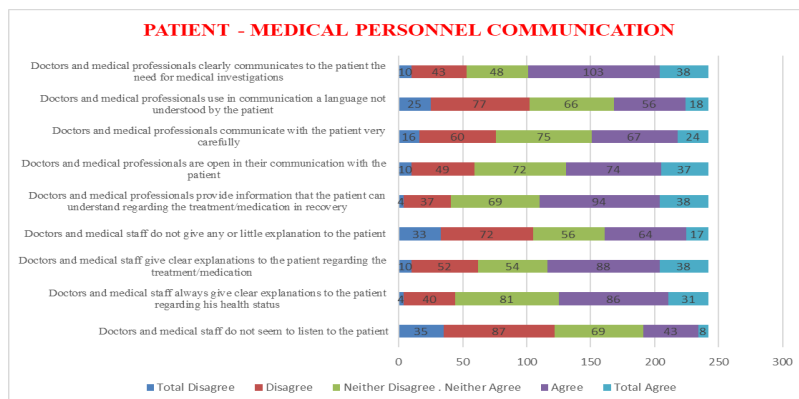


Figure no. 2. Communication between medical staff and patients in organizations in the medical sector

Source: Author's own research results.

The level of patient safety, satisfaction and trust in the medical system

The patient is satisfied with the interaction with the current doctor (54.96%) (Figure 3).

Vulnerabilities that can lead to high risks and that still persist in the medical system are related to the patient's communication with the medical personnel, who present a state of dissatisfaction (58.26%). This communication needs to be improved to increase patient safety, satisfaction and trust in the medical system.

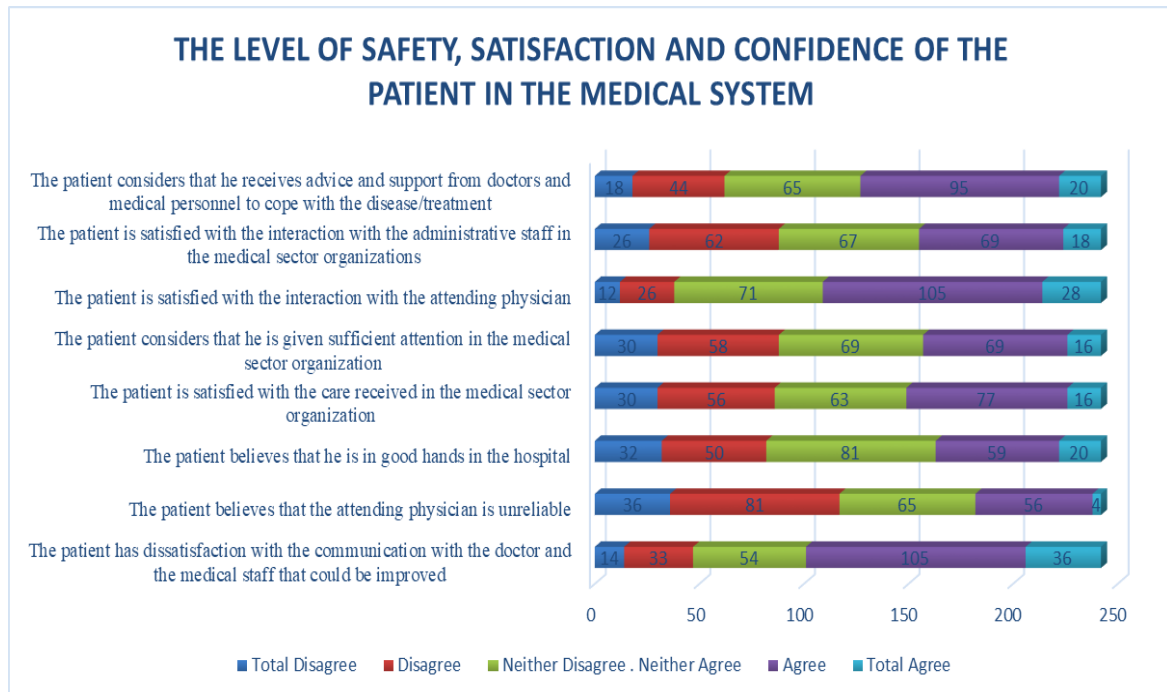


Figure no. 3. The level of patient safety, satisfaction and trust in the medical system

Source: Author's own research results.

Communication of the medical staff with the patient's relatives

The patient believes that he receives advice and support from doctors and medical staff to cope with the disease/treatment (47.52%) (Figure 4).

Vulnerabilities that can lead to high risks and that still persist in the medical system are related to the way in which medical professionals are interested in the patient's family and/or relatives (50%). If the percentage of those who are undecided (26.86%) is added to this percentage, the result is that patients are not satisfied.

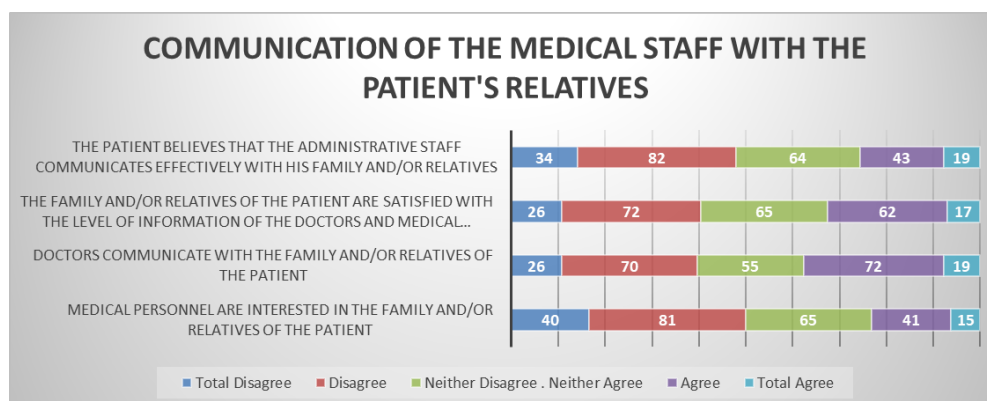


Figure no. 4. Communication of the medical staff with the patient's relatives

Source: Author's own research results.

The obtained results demonstrate that doctors and medical personnel listen to the patient. It gives him clear and clear explanations regarding the appropriate treatment and medication. Doctors and medical staff are open in their communication with the patient. The patient is generally satisfied with the interaction with the attending physician.

It is found that there are still vulnerabilities related to the way doctors and medical staff communicate with the patient and his relatives. More attention should be paid to the patient regarding his uncertainties. Careful attention should be paid to all the details of the patient's treatment to eliminate all uncertainties related to the patient's treatment. All this can only be achieved through ethical communication.

Conclusions

Communication is a basic component of a sustainable business, in all fields. Ethics must be at the center of communication, implicitly also in the field of health. Thus, ethical principles must be incorporated into all health communication activities. Ethical communication will eliminate the risks related to medical errors as well as the risks related to the loss of the image of the medical institution. It will eliminate the financial consequences.

Only ethical medical communication will influence people's behaviors related to the medical system. It will influence people's choice in adopting a healthy lifestyle. It will influence the choice of healthy behaviors to maintain a quality of life at the highest qualitative level.

In case of deficient and/or unethical communication, there is the risk of huge financial losses not allowed in the current economic conditions but what constitutes a major risk in this case is the risk of losing the image of the medical institution. This entails another risk, namely the loss of patients' trust in the medical act. In the current economic and social context, the role of the entire medical staff becomes essential in approaching and applying ethical principles in communication.

Health communication activities unfortunately raise a multitude of ethical concerns and these are particularly directed at personal preferences and deep-rooted social values. The results of the study show that although there are regulations to prevent communication in medical institutions, the degree of patient satisfaction is still not optimal. Ethical communication in the field of health involves addressing essential issues not only for the individual but also for society, namely responsibility, risks as well as social and cultural values.

Ethical communication is necessary for the performance of a medical act to the quality standards imposed by the current socio-economic conditions correlated with the regulations in the field. Only ethical communication can lead to an increase in the trust of individuals and communities in the image and in medical institutions, globally. Many vulnerabilities and risks of medical institutions can thus be eliminated by approaching ethical communication.

References

- Burlea, A.S., 2007. An Approach of the Knowledge Management for the Development of the Organisational Commitment. In: W. Wojtkowski, W.G. Wojtkowski, J. Zupancic, G. Magyar and G. Knapp, eds. *Advances in Information Systems Development*. Boston, MA: Springer US. pp.313–323. https://doi.org/10.1007/978-0-387-70802-7_26.
- Burlea-Schiopoiu, A., 2007. The Communication Process in Virtual Teams. *Informatica Economica*, 1, pp.113-117.
- Burlea-Schiopoiu, A., 2010. *Ethics of Information in Distributed Business Environments* – in *Infonomics for Distributed Business and Decision-Making Environments: Creating Information System Ecology*, editor, Malgorzata Pankowska, IGI-Global
- Burlea-Schiopoiu, A. and Balan, D.A., 2018. *The short memory life span of consumer: a premise for corporate socially irresponsible behavior?* Innovation Management and Education Excellence through Vision 2020, Vols. I-XI, pp. 1274-1286, Milan, Italy.
- Burlea-Schiopoiu, A. and Ferhati, K., 2020. The Managerial Implications of the Key Performance Indicators in Healthcare Sector: A Cluster Analysis. *Healthcare*, 9(1), p.19. <https://doi.org/10.3390/healthcare9010019>.

- European Commission, 2022. *Communicating and raising EU visibility: Guidance for external actions - 2022*, [online] Available at: <https://international-partnerships.ec.europa.eu/knowledge-hub/communicating-and-raising-eu-visibility-guidance-external-actions_en> [Accessed 01 March 2023].
- Jankelová N., Joniaková Z., 2021, *Communication Skills and Transformational Leadership Style of First-Line Nurse Managers in Relation to Job Satisfaction of Nurses and Moderators of This Relationship*, [online] Available at: <<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8003159/>> [Accessed 01 March 2023].
- Moreau F., Bourreau M., Wilkstrom P., 2021, *Communication offers the possibility of psychosocial homogenization and assures a normal functioning of a community*, [online] Available at: <<https://onlinelibrary.wiley.com/doi/epdf/10.1111/ecin.13015?af=R>> [Accessed 01 March 2023].
- Pablo M. A., 2015. *Management of the Internal Communication in Hospitals: Conceptual Framework and Implementation Model*, [online] Available at: <<communicationandhealth.ro/upload/number5/PABLO-MEDINA.pdf>> [Accessed 01 March 2023].
- Sethumadhavan A., Sasangohar F., 2020, *Design for Health: Applications of Human Factors*, *Academic Press*. <https://doi.org/10.1016/C2018-0-00043-2>
- Vermeir, P., Vandijck, D., Degroote, S., Peleman, R., Verhaeghe, R., Mortier, E., Hallaert, G., Van Daele, S., Buylaert, W. and Vogelaers, D., 2015. Communication in healthcare: a narrative review of the literature and practical recommendations. *International Journal of Clinical Practice*, 69(11), pp.1257–1267. <https://doi.org/10.1111/ijcp.12686>.
- Voinea, D.V., 2015. The journalists' obligation of protecting the victims of sexual assault, *Social Sciences and Education Research Review*, 2(1), pp 23-96.
- World Health Organization, 2010. *Monitoring the building blocks of health systems: a handbook of indicators and their measurement strategies*. [online] *World Health Organization*. Available at: <<https://apps.who.int/iris/handle/10665/258734>> [Accessed 24 April 2023].
- World Health Organization, 2021. *COVID-19 Research and Innovation Achievements*, [online] Available at: <<https://www.who.int/publications/m/item/covid-19-research-and-innovation-achievements>> [Accessed 01 March 2023].