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М. С. Бугайчук,

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кафедра менеджменту та інноваційного провайдингу

ПВНЗ «Європейський університет»

бульвар Академіка Вернадського 16-В, Київ 03115

email: mbuhajchuk@e-u.edu.ua

ORCID:<https://orcid.org/0009-0006-0746-4053>

## FORMATION OF THE ORGANIZATIONAL COMMUNICATIONS MANAGEMENT SYSTEM OF MEDICAL INSTITUTIONS

**Abstract.** *The article analyzes the existing features and problems of the organizational communications management system in the medical field. Based on the possibility of using a functional approach to the formation of the system of organizational communications of medical institutions is substantiated, by determining the stages, the implementation of which is possible based on developed powers, competencies and responsibilities for the spheres of execution of communication processes by employees and managers of the medical institution, which will ensure the avoidance of contradictions between the goals of functional units, will contribute to increasing transparency of activity, management flexibility and active cooperation of medical workers.*

*The organizational structure is substantiated and the increase in the role of the subject attitude towards employees on the part of the heads of medical institutions, the increase in responsibility for the result and its differentiation according to the level of authority or the level of the employee's contribution to the production process is determined. Requirements for basic knowledge, skills and communication skills of medical workers are given.*

*The practical implementation of the chosen approach to improve the formation of the organizational communications system of medical institutions can be successful under the conditions of achieving consistency between the goals, the strategy of the medical institution, the strategy of communication management and organizational culture.*

**Keywords:** *management, organizational communications, medical institutions, information, competencies, communication conditions.*

**Formulation of the problem.** High-quality exchange of information is an important and integral part of the management of medical institutions. Implementation of communications is a binding process that requires effective information exchange between medical workers and management; a medical institution and its employees and citizens as consumers of medical services.

Due to the imperfection of the communication system, the effectiveness of the development of medical institutions is significantly reduced, as a result of which the problem of improving the management of communications of a medical institution is acute, since effective communications in practice are a necessary condition for achieving the effectiveness of its development. The cleanliness of communication channels in the process of information exchange affects the circulation, formulation and implementation of the goals of the functioning and development of the medical institution. In connection with this, the research of approaches to the formation of the management system of organizational communications of medical institutions is an urgent problem.

**Analysis of recent research and publications.** The issues of communications management are covered in the works of O. Bezchasny, M. Gazuda, O. Dovgun, O. Zozulyova, M. Mandzyuk, P. Mykytyuk, N. Morozova, J.M. Leikhif, D. Rayko, L. Sager, I. Simenko, K. Surovtseva, V. Falovych, O. Shubin, and others.

Significant foreign works on the management of communications in the medical field are offered by Schmalz C, Rogge A, Dunst J, Krug D, Liethmann K, Renedo A, Garrett R, Belch G.E, Hunter, D. J, Gault, I, Ng Y.K, Shah N.M, Chen T.F, Loganadan N.K, Kong S.H, Cheng Y.Y, Sharifudin S.M, Chong W.W, et al.

But due to the desire for universality, existing approaches to the management of communications in medical institutions do not always take into account modern challenges and industry specifics.

**The purpose of the article** is to analyze the existing features and problems of the management system of organizational communications in the medical field and to justify the approach to the formation of the management system of organizational communications of medical institutions.

**Presenting main material.** Communications is one of the important aspects of medical activity, the basis of ensuring the social effectiveness of the medical and diagnostic process and a condition for the success of management of medical institutions. In recent years, there have been serious changes in the socio-economic, political, and socio-psychological structure of Ukrainian society, ideological and value orientations have changed, new means of communication have appeared, and the role of market mechanisms in relations between subjects of medical activity has increased [1–2]. All this could not fail to affect the culture of communications.

Management of organizational communications ensures a timely response to changes in communication needs and is carried out on the principles of:

- orientation to the strategic goals of the medical institution;
- support of top management;
- clear demarcation of functions;
- accuracy in determining the terms of implementation of communication measures;
- development of a system of criteria and indicators;
- of a continuous nature;
- application of a full management cycle with a mandatory stage of evaluation of results.

The implementation of communications in medical institutions is designed to ensure the following functions: informative — transfer of information necessary for decision-making, identification and evaluation of alternative solutions; motivational, which encourages medical workers to perform and improve their activities; control, which based on monitoring the behavior of employees based on hierarchy and formal subordination; expressive, which promotes the emotional expression of feelings, experiences, attitude to what is happening, and allows meeting social needs. Thus, communications in medical institutions reflect not only the process of information transmission, but also perception, understanding, assimilation of information [3–5].

The management of organizational communications contributes to the creation of favorable communication conditions for improving the efficiency of the activities of medical institutions [6]. Four stages of communications management are proposed [7]:

1. receiving information to the management system;
2. verification of received information;
3. support for the adoption of the relevant management decision;
4. formation of the subject of management communication.

At the first stage, the effectiveness of organizational communications is assessed and the information and communication needs of a medical institution are determined. The obtained data serve as an information base for the development of a communication strategy — a stable line of communication interactions over a long period of time to realize the long-term interests of the institution by expanding communication opportunities and minimizing (or eliminating) the gap between communication needs and the established level of communication. Communication management is carried out continuously: after determining the effectiveness of communication measures, the assessment stage is repeated and adjustments are made to the communication strategy.

The assessment of organizational communications of a medical institution should be of a regular nature, which makes it possible to distinguish monitoring as a management tool, the purpose of which is systematic observation and analysis of the dynamics of organizational communications development. Monitoring communication processes will contribute to the accumulation of practical experience in the management of communications and increase the accuracy of forecasting the consequences of decisions.

Depending on the features of the medical institution, which are determined by the influence of the mentioned factors, the following organizational forms of communications management are possible:

- a) communications department;
- b) information and analytical department;
- c) decentralized management (distribution of communications management functions among existing units);
- d) department of external relations;
- e) department of internal communications.

Some large medical institutions are characterized by two-level communication management. The distribution of functions and the development of criteria for evaluating the activities of specialized divisions in this case involves the division of responsibilities between the center and branches.

The activity of each medical institution is influenced by environmental factors, which primarily determine their behavior on the market and the effectiveness of their activities.

The stage of assessing the level of organizational communications and identifying communication needs serves as an information base for the development of a communication strategy that gives communication management activities a targeted character and ensures the realization of the long-term interests of the medical institution.

For the successful implementation of the communication strategy and the evaluation of its effectiveness, organizational and economic support is formed: the structure of communication management is designed, areas of responsibility and resources are distributed, and a system of evaluation criteria and indicators is developed. The effectiveness of communication management is determined by the complex effect (economic, social, innovative, managerial, coordination) of the implementation of measures within the framework of the adopted communication strategy.

The formation of the medical institution's communication system requires the staff to adapt to new tasks that arise as a result of improving interaction through input and output information flows.

The levels of communication interaction in a medical institution are given in Table 1.

Table 1

**Levels of communication interaction**

| Level        | Report                                                                                                                                 | Request                                                                                                                                                    |
|--------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Desired      | satisfies the needs of the control system                                                                                              | allows you to generate a report of desired quality                                                                                                         |
| Sufficient   | does not fully meet the requirements of the management system, but it allows making a management decision of the appropriate quality   | after its adjustment or addition without deterioration of the defined quality of the report                                                                |
| Insufficient | does not fully meet the requirements of the management system, which negatively affects the quality of the management decision         | the requirements for the quality of the report cannot be met due to the non-compliance of the quality characteristics of the request with the requirements |
| Unacceptable | does not meet the requirements of the management system, which makes it impossible to make a management decision of acceptable quality | cannot be satisfied due to the inconsistency of its quality characteristics with the requirements                                                          |

*Justified by the author on the basis [8]*

At the same time, the biggest problems arise in the process of interaction of units and individual employees. They are caused both by the unsatisfactory quality of relationships, and by the resistance of the institution's employees, by the difference in the qualifications of the medical worker, who are not interested in changes for various reasons. We propose to minimize these problems by establishing information flows in interconnected subsystems (technical, informational, social, management), which provide information exchange not only within the medical institution, but also with the external environment.

The management of organizational communications of a medical institution is understood as a set of continuous purposeful managerial influences on internal and external processes of information exchange and interactions, which ensure the satisfaction of communication needs and the realization of the long-term interests of a medical institution [9].

It is appropriate to distinguish two levels of communication management: long-term and short-term. The long-term level involves the creation of a communication strategy, a long-term program for achieving goals, which will help the medical institution to effectively use its available communication resources and create new potential for successful activity in the future due to the organization of the communication space, as well as not only analyze the achieved results, but also lay the foundation for future strategic decisions.

The short-term management level includes the development and implementation of a system of corporate standards and communication regulations, as well as the organization and implementation of activities aimed at realizing competitive advantages.

As a result of the study of existing approaches to the classification of communications, a number of classification features are proposed, which make it possible to fully cover the entire variety of communications used in modern management processes. The main features of the classification of communications are the distribution by direction, by relation to the external environment, by the degree of formalization, by the method of forming feedback, by the level of protection, by the number and composition of participants, by the form of data display, by the method of data transmission, etc.

It is proposed to attribute communications to the strategic resources of the enterprise, i.e. to resources that are of great significance for sustainable functioning and development and require the development of management tools. Thus, communications for a medical institution perform the role of:

- a tool for the integration of all types of activities;
- environment and management mechanism;
- means of ensuring the institution's flexibility and adaptability;
- a tool for the development of personnel and innovation potential;
- a tool for forming an organizational culture based on shared goals and values, etc.

With the traditional type of organizational structure of a medical institution, if the head even delegates authority, then in order to control and verify the “delegated” activity, he has his own ideas about how this or that function should be performed. This is precisely where the property of reflectivity works, due to which changes in the directive direction of development do not occur — because the directions of development and key issues are developed based on the vision of such a leader. That is, there is an effect of identity of the activities of the manager and the company.

If the organizational structure of a medical institution is built according to the principles of reflexive management (i.e. as the relationship of officials (managers and specialists) of the enterprise), then the attitude of each manager to subordinates is adequate to the structure of his own activity, that is, any problem (if you look at it through the prism of the structure) can always be localized with precision to a specific and unique official responsible for it [8]. And this localization is achievable and carried out within the scope of the activities of the immediate manager of this person. Accordingly, the professional duty of the manager of the lowest link is not to “release” the problem beyond the scope of his own activities (that is, to upper management levels).

**Conclusions.** Thus, it is advisable to use a functional approach to the construction of the organizational communication system of medical institutions, by determining the stages, the implementation of which is possible on the basis of the developed powers, competencies and responsibilities for the spheres of communication processes performed by employees and managers of the medical institution, which will ensure the avoidance of contradictions between the goals of functional divisions, will contribute to increasing transparency of activity, management flexibility and active cooperation of medical workers.

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### **М. С. Бугайчук. ФОРМУВАННЯ СИСТЕМИ УПРАВЛІННЯ ОРГАНІЗАЦІЙНИМИ КОМУНІКАЦІЯМИ МЕДИЧНИХ УСТАНОВ**

**Анотація.** У статті проаналізовано існуючі особливості та проблеми системи управління організаційними комунікаціями у медичній галузі. На цій основі обґрунтовано можливість використання функціонального підходу до формування системи організаційних комунікацій медичних установ, шляхом визначення стадій, реалізація яких можлива на основі розроблених повноважень, компетенцій та відповідальності за сферами виконання комунікаційних процесів працівниками та керівниками медичної установи, що забезпечить уникнення протиріч між цілями функціональних підрозділів, сприятиме підвищенню прозорості діяльності, управлінської гнучкості та активної співпраці медичних робітників.

Обґрунтовано організаційну структуру та визначено збільшення ролі суб'єктного ставлення до співробітників з боку керівників медичних установ, збільшення відповідальності за результат та її диференціація за рівнем повноважень або рівнем внеску працівника у виробничий процес. Наведено вимоги до базових знань, умінь та комунікативних навичок медичних працівників.

Практична реалізація обраного підходу з удосконалення формування системи організаційних комунікацій медичних установ може бути успішною за умов досягнення відповідності між цілями, стратегією медичної установи, стратегією управління комунікаціями та організаційною культурою.

**Ключові слова:** управління, організаційні комунікації, медичні установи, інформація, компетенції, комунікаційні умови.