Chapter 5
Dimensions of Culture in Hospital Teamwork

Anna Rosiek
Ross Medica, Poland

Krzysztof Leksowski
Military Clinical Hospital, Poland & Collegium Medicum Nicolas Copernicus University Chair of Public Health, Poland

ABSTRACT
The chapter discusses, on research-based findings, the particularities of culture in hospitals, in a cross-cultural perspective with a particular focus on the Polish case. The findings of the study point to the fact that exterior factors and perceptions have a decisive impact on the patient evaluation of the hospital experience, so hospitals should dedicate some of their efforts to improving organizational culture and its perceived effects on patients.

1. INTRODUCTION
The issues, raised first by the European Union, largely contributed to actions which were undertaken later and which would result in improving the quality of health care service in medical units in Poland. Beside that, the significant structural changes in the social and economic systems in Poland have led to transformation and commercialization of many aspects of life, including the medical service sector. The changes affected not only structures, but also the patients’ thinking mode, their way of seeing a health care unit and the services it offers. Patients have become more demanding, they have started to behave like customers (clients) and expect the same quality of service as in the case of consumer goods.

Such a situation is caused by the entry of medical services into the market of consumer goods, into the area of competitive medical

DOI: 10.4018/978-1-4666-4325-3.ch005
Dimensions of Culture in Hospital Teamwork

units. This new situation requires a medical organization to take into consideration patients’ needs, to listen to them and to improve the quality of its services.

Specifics of medical service – its professional and interpersonal aspects – are extremely important in health care. Those specifics concern the highest values, that is: health and human life. However, concentrating on providing high quality medical service in its technical aspect is not sufficient in contemporary market environment. Therefore, in order to obtain patient’s positive opinion on medical services provided by health care units, such a unit has to take care of those factors which pertain directly to its image as seen by the customer. Those factors are highly subjective; they include patient’s feelings and experience in previous contacts with a health care organization, his/her trust and satisfaction and also the commitment of the whole organization to the treatment process and improvement of patient’s physical and psychological state. Those factors, as peculiar determinants of medical service, have direct influence on shaping the image of a health care unit on the service market. Emphasizing this issue is extremely important now because in everyday medical practice in hospitals, we encounter depreciation of work and stance of medical personnel, specifically doctors and nurses. In the long run, such a situation leads to the decrease of trust, decrease in satisfaction, contributes to negative viewing of a medical unit and leads to deterioration of quality of medical service and that in turn gives a health care unit bad image. Furthermore, the managers of health care units, focused on solving system problems, often forget that an organization’s success lies in its image and how it is perceived, and also in the quality of services it provides, in the way it communicates with its patients and its identity. There is, therefore, a need for specific indication and appreciation of medical personnel as an important part of the organization, influencing its image through the quality of services offered to a patient. Creating and ensuring the quality of the relations between a service provider (in this case a hospital) and a patient; relations based on connections, both rational and emotional, and also determining critical areas in an organization, which affect the way this organization and the quality of medical services are perceived by a patient, will allow to create a medical service which will fulfill patient’s expectations. By the same token, it will also help to build a solid image of a health care unit, which will be based on trust, satisfaction and partnership, with special emphasis on many levels and areas of quality in medical service, in relation to the ongoing process of evaluation and increasing expectations of customers (patients). The aforementioned premises became the starting point for a discussion about quality improvement in medical services in the aspect of hospital’s image-creation on the service market. They also inspired work on creating an eventual model of medical service that would be aimed at the service’s quality, for the goal is to effectively build a hospital’s image that would be based on satisfaction, trust and good relations with others.

The aim is, therefore, to create a medical service model and a management model that would help to create a good image through improvements in quality of offered medical services. The general aim can be further described in the following specific aims:
Related Content

Considerations of “Related Party,” in Disguised Earning Distribution via Transfer Pricing
www.igi-global.com/chapter/considerations-of-related-party-in-disguised-earning-distribution-via-transfer-pricing/180762?camid=4v1a

Study on Chinese Low Carbon Economic Model
www.igi-global.com/chapter/study-chinese-low-carbon-economic/63748?camid=4v1a

Adaptability of Backcasting for Sustainable Development: A Case Study from Nepal
www.igi-global.com/article/adaptability-of-backcasting-for-sustainable-development/127626?camid=4v1a

Small Active Investors' Perceptions and Preferences Towards Tax Saving Mutual Fund Schemes in Eastern India: An Empirical Note
Jitendra Kumar, Anindita Adhikary and Ajeya Jha (2017). International Journal of Asian Business and Information Management (pp. 35-45).
www.igi-global.com/article/small-active-investors-perceptions-and-preferences-towards-tax-saving-mutual-fund-schemes-in-eastern-india/179915?camid=4v1a