

Research article

A pilot study of the perception of specialists from a Medical Rehabilitation field regarding the efficiency of Marketing Communication

Mirela Morcov¹, Iuliana Raluca Gheorghe², Maria Veronica Morcov^{1,2}, Victor Lorin Purcărea²

- 1. The National Center of Neurorehabilitation for Children "Dr. N. Robănescu",041408 Bucharest, Roma-nia; morcovmirela@yahoo.com (M.M.); raluca.gheorghe@umfcd..ro (R.G.); averopsi@yahoo.com (M.V.M.); victor.purcarea@gmail.com (V.L.P.)
- 2. "Carol Davila", University of Medicine and Pharmacy, 020022 Bucharest, Romania victor.purcarea@gmail.com

Abstract: The necessity to improve the quality of health services is a growing concern of all stakeholders involved in providing medical assistance.

Effective communication establishes interpersonal relationships with patients, enabling timely and accurate treatment decisions.

This study aimed to assess the perception of Medical Rehabilitation specialists regarding the usage of Marketing Communication principles.

It was conducted in the The National Center of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania and included 85 participants with the following positions: physicians, psychologists, physiotherapists and medical assistants.

According to the findings, 80% of medical staff stated that all useful information is provided to patients in a clear and accurate manner, which is also the desired quality management.

In the current study, "face-to-face" communication was found to be the most successful method of communication.

Keywords: communication, health services, marketing, marketing communication

Citation: Morcov M., Gheorghe I.R., Morcov M.V., Purcărea V.L. - A pilot study of the perception of specialists from a Medical Rehabilitation field regarding the efficiency of Marketing Communication

Balneo and PRM Research Journal 2023, 14(3): 587

Academic Editor(s): Constantin Munteanu

Reviewer Officer: Viorela Bembea

Production Officer: Camil Filimon

Received: 15.07.2023 Accepted: 15.08.2023 Published: 01.09.2023

Reviewers:

Andreea Trandafir Aurora Muntiu

Publisher's Note: Balneo and PRM Research Journal stays neutral with regard to jurisdictional claims in published maps and institutional affiliations.



Copyright: © 2023 by the authors. Submitted for possible open-access publication under the terms and conditions of the Creative Commons Attribution (CC BY) license (https://creativecommons.org/licenses/by/4.0/).

1. Introduction

It is acknowledged that there is a need to improve the quality of health services at a world wide level and there is a growing concern for all the stakeholders involved in providing healthcare assistance [1]. To address this need, health care organizations have to be compliant with the demands of medical staff, because the behavior of satisfied personnel may be observed in the interactions with patients [1].

Limiting clinical errors, while simplifying the resources and services provided so as to improve the standard of medical care, is a challenge for any health care service providers [2].

Since 1922, when the Society of Medical Hydrology and Climatology was founded in Romania, the Romanian School of Recovery, Physical Medicine and Balneoclimatology has experienced continuous development, the SPA practice integrating the scientific acquisitions of Physical Medicine and giving a special importance to prevention [3].

The indicator of patient long waiting time before benefiting from recovery services reflects the patients' pressing needs, with implications for them in limited activities and decreased quality of life [4].

^{*} Correspondence: averopsi@yahoo.com.

The efficiency of the recovery service is offered by the modern therapeutic devices, but alsoby the most appropriate communication between specialists, between them and patients, because appropriate communication significantly contributes to an increase in the health care quality of services [5].

As such, communication improves the efficiency of medical services by providing clear information to ensure proper case management. Given that it takes time for a medical team to build the required expertise and interpersonal skills, teamwork is an essential component of health careservices.. To ensure that patients receive high-quality care, medical specialists should be trained to actively listen to patients and interact with colleagues in other field [6].

Moreover, the literature also shows that teamwork and effective communication are considered essential for providing quality and safe health services [7].

Communication is the basis of the relationship with the patient in the medical environment, it ensures the stability of interpersonal relationships through which information and decisions related to treatment are provided. Medical decisions are taken in collaboration with patients to improve the quality of the medical act, which, according to the specialised literature, enhances the efficacy of therapeutic interventions, as well as patient compliance [8, 9].

Marketing communication consists of informing, persuading, influencing, and reminding the available public about the services [10]. Marketing communication within health services is conducted internally through the interaction between employees, or externally through meeting the needs of health care services [11].

In addition, health professionals revealed that achieving quality communication ensures optimal results in the treatment of patients [12].

Marketing, as a basic process of development and provision of medical services in the health system, operates on specific practical principles. The aim of Marketing is to create and investigate the demand for such services, as well as the supply of such services. Consequently, on the health market, patients for whom the optimization of treatments depends on the proper functioning of health services assume the role of consumer [13].

Health organisations can improve patient satisfaction by providing patient-centred health care services [14].

Thus, theaim of this case study is to assess the perception of the specialists working in a health care organization about the marketing communication used in The National Center of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania

The specific objectives of the study are (1) to analyze the level of communication and collaboration between the employees of the National Center and the pacients' family members or caregivers, and (2) to ascertain how the medical staff from the The National Center of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania communicates with the patients and family members or caregivers.

2. Materials and Methods

The sample of specialists who were included in the study was 85 and they were all employed in the The National Center of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania. Specialists had the positions of physicians, psychologists, pharmacists, biologists, physiotherapists, and medical assistants, being 61 (71,76 %) women and 24 (28,24 %) men.

Participants in the study agreed to take part, after presenting the aim of the research and the conditions of confidentiality and anonymity.

The data was collected with a self-administered questionnaire, which consisted of 36 items, but only 4 were selected for this study. The 4 questions related to the perceptions of the specialists regarding the communication process with the patients or their caregivers or family members.

The study received a Ethical approval from the Ethics Committee from the National Center of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania, no. 7514/25.09.2019.

The data was analyzed with SPSS version 22, and the Chi-square test was used at a p value < 0.05, as considered statistically significant.

3. Results

Participants

Of the 85 subjects, 37 (43 %) persons were medical specialists, 2 (2 %) had paraclinical positions and 46 (55 %) had paramedical positions (Table 1).

Table 1. The distribution of the staff by education level

Category			Percentage
Position	on Physician		43 %
	Paramedical		55 %
Paraclinic		2	2 %
Level of education	High-school	22	25,88 %
	University	63	74,12 %

Out of the total, 22 persons (74.12 %) had higher education.

The subjects' mean age was 41 and ranged from 23 to 53.

The vast majority of respondents stated that they collaborate with the patients' family in carrying out the medical/ therapeutic act (91,8 %), but there were (8,2 %) persons who admitted they sometimes collaborated with the caregivers of the patients (Table 2). In addition, there were 29 (93,54 %) physicians who usually collaborate with the patients' caregivers and there were 49 (90,74 %) of the participants who sometimes collaborate with the patients' caregivers (Table 3 and Figure 1).

Table 2. Frequency and percentage of collaboration with the patient's family in carrying out the medical/therapeutic act

Do you collaborate with the patient's family in carrying out the medical/therapeutic act?	Frequency	Percentage
a) Yes	78	91,8 %
b) Sometimes	7	8,2 %
c) No	0	0 %
Total	85	100,0 %

Table 3. Collaboration with the patient's family in carrying out the medical/ therapeutic act by professional position

by professional position					
		Do you collaborate with the patient's			Total
family in carrying		rrying out the	medical/		
		therapeutic act?			
		a) Yes	b) Sometimes	c) No	
Professional	Physician	29 (93,54 %)	2 (6,45 %)	0	31
position	Other categories	49 (90,74 %)	5 (16,12 %)	0	54
	Total	78	7	0	85

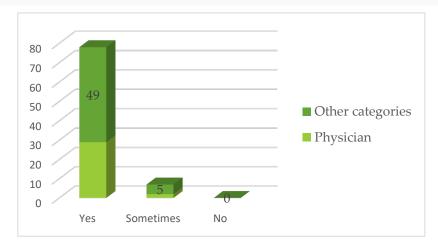


Figure 1. Collaboration with the patientss caregivers to perform the medical/ therapeutic act by professional category

Regarding to what extent the patients or the patients' caregivers are informed about the offered services by the organization, the majority of the staff stated that they are very informed (29; 34,1%) and well informed (43; 50,6%) about the health care services (Table 4).

Table 4. Frequency and percentage regarding informing the patient/ relative/ visitor about the services offered by the organization

To what extent do you think that the patient/ relative/ visitor is	Frequency	Percentage
informed about the services offered by the organization you		
represent?		
a) Very informed	29	34,1 %
b) Well informed	43	50,6 %
c) Satisfactory	11	12,9 %
d) Little informed	2	2,4 %
e) Uninformed	0	0 %
Total	85	100,0

In Table 5 it may be observed that physicians are convinced that the information provided to patients and to their caregivers is accurate, but there are employees who believe that the patients and the caregivers are both little informed (9; 16,67 %) and uninformed (2; 0,37 %) (Table 5 and Figure 2).

Table 5. Informing the patient/ member/ visitor about the services offered by the organisation depending on the professional position

		<u> </u>				
To what extent do you think that the patient/ member/				Total		
		visitor is informed about the services offered by the				
		organization you represent?				
		a) Very	a) Very b) Well c) Little d) Uninformed			
		informed	informed	informed		
Category	Physician	14 (45,16 %)	15 (48,39 %)	2 (6,,45 %)	0	31
	Other	15 (27,78 %)	28 (51,85 %)	9 (16,67 %)	2 (0,37 %)	54
	Total	29	43	11	2	85

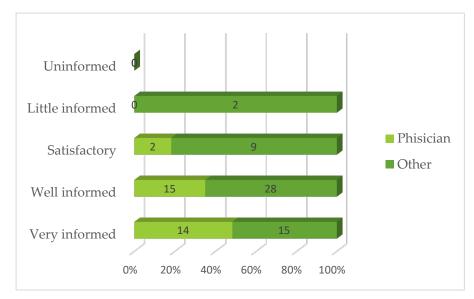


Figure 2. Patient / member / visitor information about the services offered by the organisation depending on the professional position

Table 6 reveals that the vast majority of respondents prefer to inform or communicate with the patients and their caregivers face to face (57; 67,1%) and by telephone or online (20; 23,5%) (Table 7 and Figure 3).

Table 6. The frequency and percentage regarding the achievement of communication/information/ patient/ relative/ visitor

What is the preferred method to inform or communicate with the patients or with his caregivers?	1 7	Percentage
a) Face to face	57	67,1 %
b) Through the organization's website	20	23,5 %
c) By e-mail	4	4,7 %
d) By telephone	20	23,5 %
e) Through conferences	9	10,6 %
f) Through video presentations within the Center	9	10,6 %
g) Through printed materials	18	21,2 %
h) All of the above	0	0 %
Total	85	100,0

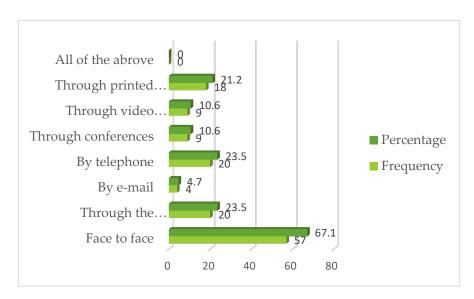


Figure 3. The preferred physician and staff's methods for informing or communicating with the patients or caregivers

The analysis of the responses by professional positions reveals that, with the exception of the "Face-to-face" method of communication, the percentages for all other methods of communication with the patient are higher for the physicians (Table 7 and Figure 4)

Most of the times, the patients and the caregivers are informed in a face to face manner (30; 96,8 %), by telephone (22; 71 %), and by printed materials (21; 67,7 %) (Table 7). Moreover, the vast majority of participants communicate to patients and to their caregivers all useful information (68; 80 %).

Table 7. Frequency	and percentage	regarding	communication/	informing/	patient/
relative/ visitor by pr	ofessional positio	n			

How is the patient/ member/ visitor	Physician		Other qualification	
informed?	Frequency	Percentage	Frequency	Percentage
a) Face to face	30	96,8	54	100,0 %
b) Through the organization's website	21	67,7	26	48,1 %
c) By e-mail	13	41,9	19	35,2 %
d) By telephone	22	71,0	26	48,1 %
e) Through conferences	17	54,8	19	35,2 %
f) Through video presentations within the Center	18	58,1	20	37,0 %
g) Through printed materials h) All of the above	21 0	67,7 0		44,4 % 0 %
Total	31	100	54	100,0

Table 8. The type of information provided to patients or caregivers by the physicians or other category of employees

Do you communicate to patients/ relatives/ visitors only information about the services you offer?	Frequency	Percentage
a) All useful information	68	80,0 %
b) Only related to my work	14	16,5 %
c) General information only	3	3,5 %
d) Sometimes	0	0 %
e) Never	0	0 %
Total	85	100,0 %

The following figure shows us that the percentages of responses to the question "I communicate all useful information" are roughly the same in the "physician" (80.7%) versus "other" (79.6%) professional categories. The chi-square test for concordance gives a p-value of 0.991, suggesting that the distributions of the responses in the two categories correspond.

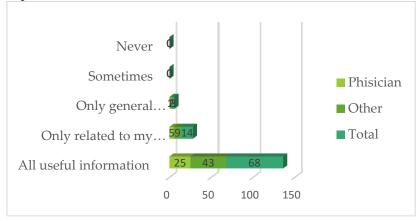


Figure 5. Communication of information regarding the services offered by professional categories to patients/ relatives/ visitors

4. Discussions

Marketing communication helps recovery specialists create a positive image of the services they provide, which leads to the establishment of correct and building trustworthy relationships with patients [15].

Patients benefit from Marketing Communication by developing positive relationships with the healthcare facility and its specialists, exchanging information, and having easier access to medical care.

To provide the best possible patient care, healthcare workers must adjust their attitudes and behaviours [10].

According to the scientific literature, good communication and consultation between specialists is reflected positively in the patient's state of health, as well as in the quality of the medical act, strengthening patients' confidence in the medical services offered. Communication is indispensable in health services and is becoming a habit in medical practice .[16]

According to a study carried out in 2020, a good patient partnership is built on knowing the patient as a whole and his functional demands [17].

The "face-to-face" communicationwas selected by most of the respondents, and is also considered in the medical literature as the most useful form of communication [17].

Furthermore, the literature shows that the forms of communication that have appeared in the digital age are not as effective as face-to-face communication; although patients are satisfied, the medical staff do not have the same perception [17].

According to the quality management perspective, 80% of medical professionals believe that all useful information and services offered by medical specialists are communicated to patients in a clear and accurate manner.

As a result, it is preferable for all medical workers to attend training and communication enhancement courses to understand how to achieve good communication between medical service providers and their patients [18].

Limitation

This findings of the study carried out within the The National Center of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania referred only to the perceptions of the employees of this health care organization and cannot be generalized or extended to other medical organizations. Another limitation consists in the small sample of respondents, so the findings of the case study should be analyzed with caution.

The cross-sectional approach measures the outcome through simultaneous exposure and response time is a limitation. In this study, no reference was made to the past or to the evolution in the future.

5. Conclusions

Face-to-face communication remains the most effective type of communication in a health care organization.

Employees who have a positive perception of their health care organization will transfer that confidence to their patients. As a result, Marketing Communication may be a useful strategy for improving health care brand promotion reputation. The efficient implementation of Marketing Communication is closely linked to employee communication and external marketing efforts.

A larger sample size may increase statistical power and allow us to better understand our results.

٠

6. Patents

Author Contributions: Conceptualization, M.M. methodology, M.M, R.G, M.V.M, V.L.P.; software M.M.; validation, R.G.; formal analysis, M.V.M and R.G.; investigation, M.M.; resources, M.M.; data curation, M.M, and M.V.M.; writing—original draft preparation, M.M., and V.L.P.; writing—review and editing, all authors; visualization, all the authors; supervision, V.L.P.; project administration, M.M. All authors have read and agreed to the published version of the manuscript.

Funding: "This research received no external funding".

Institutional Review Board Statement: The study was conducted following the Declaration of Helsinki and approved by the Ethics Committee of the National Clinical Centre of Neurorehabilitation for Children "Dr. N. Robănescu" Bucharest, Romania (protocol code 7514, date of approval 25.09.2019) for studies involv-ing humans.

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study. Subjects' participation in the survey was voluntary. After the patient's parent or legal representative signed the informed consent form, in which detailed details of the study were described, the patient was enrolled.

Acknowledgments: The current study is part of the first author's larger Ph.D. project entitled "The impact of integrated marketing communication on the quality management of medical recovery services".

Conflicts of Interest: "The authors declare no conflict of interest".

References

- 1 Popa F, Purcărea T, Purcărea VL, et al. Current challenges for healthcare services and the opportunities created by the marketing abilities. *J Med Life* 2008; 1: 16–22.
- 2 Craig L. Service improvement in health care: a literature review. Br J Nurs 2018; 27: 893–896.
- 3 Andone I, Cinteză D, Drăgoi M, et al. Scoala de Recuperare, Medicină Fizică și Balneoclimatologie din România. *Medica Acad* 2018; 5–15.
- 4 Băjenaru O, Cinteză D, Mureșanu D, et al. Recuperarea medicală neurologică, o problemă majoră de sănătate publică. *Medica Acad* 2018; 52–67.
- 5 Goula A, Rizopoulos T, Stamouli MA, et al. Internal Quality and Job Satisfaction in Health Care Services. *Int J Environ Res Public Health*; 19. Epub ahead of print 2022. DOI: 10.3390/ijerph19031496.
- 6 Dartiguelongue JB, Cafiero PJ. Communication in health care teams. *Arch Argent Pediatr* 2021; 119: E589–E593.
- 7 Mujumdar S, Santos D. Teamwork and communication: an effective approach to patient safety. *World Hosp Heal Serv Off J Int Hosp Fed* 2014; 50: 19–22.
- 8 McKee M. Health services in central and eastern Europe: Past problems and future prospects. *J Epidemiol Community Health* 1991; 45: 260–265.
- 9 Grassi L, Caruso R, Costantini A. Communication with patients suffering from serious physical illness. *Adv Psychosom Med* 2015; 34: 10–23.
- 10 Bobocea L, Spiridon S, Petrescu L, et al. The management of external marketing communication instruments in health care services. *J Med Life* 2016; 9: 137–140.
- 11 Teutsch C. Patient-doctor communication. Med Clin North Am 2003; 87: 1115–1145.
- 12 Andriyanova AA, Andriyanova LS, Kornienko M V. [The marketing study of medical services market: factors and regional characteristics]. *Probl sotsial noi Gig Zdr i Istor meditsiny* 2020; 28: 480–485.
- 13 Chang C-S, Chang H-H. Effects of internal marketing on nurse job satisfaction and organizational commitment: example of medical centers in Southern Taiwan. *J Nurs Res* 2007; 15: 265–274.
- 14 Redmond WH. Marketing fundamentals. Occup Med 2001; 16: 471–81.
- 15 Ekiyor A, Altan F. Marketing communication and promotion in health services. *Promot Mark Commun* 2020; 2: 173.
- 16 Dahlke S, Hunter KF, Reshef Kalogirou M, et al. Perspectives about Interprofessional Collaboration and Patient-Centred Care. *Can J Aging* 2020; 39: 443–455.
- 17 Liu X, Sawada Y, Takizawa T, et al. Doctor-patient communication: a comparison between telemedicine consultation and face-to-face consultation. *Intern Med* 2007; 46: 227–232.
- 18 Vega-Hurtado C. [Importance of doctor-patient communication strategies]. *Rev Med Inst Mex Seguro Soc* 2020; 58: 197–201.