

AI & Robotics Implementation and Pitfalls

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Managing Hospital Communication

From care activities to administrative activities in a health unit, communication is a critical factor for the strategy of organisations. That is why a strategic vision for communication in hospitals is essential. Through the three communication al-sectional dimensions for the implementation of communication management in health units, we can understand the importance of these processes.

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key points

- Leaders and health professionals need to reflect on communication flows and how structured they are for delivering value to patients.
- It is critical we understand the three communication paradigms for the implementation of communication management in health units.
- Hospitals that do not manage their communication have less chance of achieving their vision in the short, medium and long term.

A Critical Factor for the Strategy

From care activities to administrative activities in a health unit, communication is a critical factor for the strategy of organizations. This is precisely why leaders and health professionals need to reflect on communication flows and how structured they are for delivering value to patients, with care centered on each person served.

That is why a strategic vision for communication in hospitals is essential. This is not only an operational theme, but also at the tactical and strategic level of health units and should receive the necessary attention to ensure that processes are defined, monitored and evaluated for continuous improvement.

To maximise results in this area, we recommend (Cirino 2018, 2019) that the organization's first focus be on aligning strategic communication. This paradigm aims to structure the activities that concern the construction of the identity of this hospital, from its brand and slogan, for example, but also to its organisational identity, which defines its mission, vision, values and purpose.

Another crucial point is the formalising of communication policy, a document that guides the practices related to

the institutional position regarding its internal and external communication flows, as well as the nature and purpose of each means of communication of the organisation. This policy needs to be managed through indicators and alignment meetings to increase its possibilities of effectiveness in the implementation of the procedures it defines.

Pertaining to strategic communication, it becomes important to define the format of communication management in this health unit: will there be a sector of its own? And/or a commission? How will we work on the activities of projecting, progress of activities and subsequent revision of these themes? These reflections will result in the analysis of those responsible for conducting this activity in the hospital and what are the main attributions and results that can be expected by the entire organisation.

The second paradigm, organisational communication, works in the context of internal communication between the public sits in the hospital. In order to unfold the identity and make it real, this stage implements media that contribute to the dissemination of the organisation's values for the construction of the organisational culture. These means need to be implemented in order to meet the needs and



expectations of employees and other stakeholders by information, keeping them updated.

Another crucial point is that organisational communication also deals with a periodic communication planning that will contain a schedule of disclosures and practices that must be scheduled at each moment and for each hospital

external public, creating the image of this organization. The focus here is that we have the greatest possible coherence between what unity is (identity) and what stakeholders think it is (image).

In addition, it will also be necessary to structure the external media, with a highlight for collaboration with the

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audience. This planning needs to be managed, with continuous evaluation of your results for the optimization of unit practices.

Another essential aspect in this paradigm is communication for patient safety. The flows of care communication should be considered at this stage and structured in order to ensure the mitigation of the risks of failures that can cause harm to patients and collaborators (Cirino 2021a,b). Thus, we emphasise here that in addition to being strategic for the hospital's processes, there is a possibility of a substantial reduction in care errors when managing the communication of the health unit.

The third paradigm is institutional communication. Now that the identity has been developed internally, at this stage we are concerned with the implementation of flows that contribute to the dissemination of the health unit to the

press, since the media is a social health agent (Tuzzo and Cirino 2019) and contributes directly to the practices of local and global health systems. Thus, social media, mobile app's and the hospital's website are a structuring part of communication with society as a whole.

Precisely because of these points presented in the three communication paradigms for the implementation of communication management in health units, we can understand the criticality of these processes.

Hospitals that do not manage their communication have a higher chance of care errors, lower employee stake in organisational strategies and less chance of achieving their vision in the short, medium and long term.

Conflict of Interest

None. ■

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