

LEGAL AND PSYCHOLOGICAL ASPECTS OF HUMAN RESOURCES MANAGEMENT IN HOSPITALS

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Purpose: The aim of the article is to present the issue of managing a hospital establishment in the light of two aspects: formal-legal and psychological.

Design/methodology/approach: In the first part, the authors focus on defining the issue of mandatory conditions and citing the provisions of law regulating the activities of hospitals in the field of medical staff management. The content of the publication discusses the required qualifications which health professionals are subject to and must be taken into account by the hospital management when employing staff. The issue (formally unregulated) was also raised: motivational systems for medical staff in hospitals which is not mandatory from the point of view of the person managing the hospital, however, according to the authors, is an important factor in effective management of human resources.

In the second part of the paper, the topic of effective hospital management is considered from a psychological perspective. Based on Abraham Maslow's hierarchy of needs, it shows how supporting good relations between medical staff affects the prevalent atmosphere in hospitals. The authors consider the impact of endured stress of medical staff on the level of patient care, detailing the impact of eustress and distress.

Findings: The issue of occupational burnout among medical staff employed in hospital and some recommendations are indicated for the unit managing the facility which are to counteract this phenomenon. The publication also focuses on the correlation between empathy felt by medical staff, their attitude towards the patient and the degree of provided care which directly affects the process of treatment and convalescence.

Originality/value: There are presented some actions to raise the level of empathy and communication skills of staff and can be implemented by the hospital management unit. It was based on a meta-analysis of the results of various studies and existing sources.

Keywords: Law, psychology, hospital, management, medical staff.

Category of the paper: Conceptual paper.

1. Introduction

The functioning of hospitals is an important social problem affecting every beneficiary of health care. The manner and efficiency of this functioning largely depends on how it is managed. This topic should become the subject of social discussion so that ready-to-implement solutions applicable in Poland are developed, streamlining and regulating actions that can be taken by the hospital management unit. The following article is an attempt to respond to this need from the point of view of three aspects: **formal and legal** and psychological.

2. Formal conditions

The legal definition of a hospital was formulated in the Act on Medical Activity of 15 April 2011 (Journal of Laws of 2022, item 633, as amended) where a hospital was defined as a medical facility in which a medical entity performs medical activities such hospital services (Article 2(1)(9) that are performed 24 hours a day consisting of diagnosis, treatment, care and rehabilitation and cannot be provided as part of other stationary and 24-hour health services or ambulatory health services; hospital services also include services provided with the intention of terminating their provision within a period not exceeding 24 hours (Article 2(1)(11)).

According to the data of the Central Statistical Office (GUS, 2019) at the end of 2019, there were 890 inpatient general hospitals in Poland with 166.8 thousand beds. Out of this number, nearly 70% of hospitals are public hospitals whose operations are financed on the basis of contracted services from the state budget through the National Health Fund. In terms of the number of inhabitants, there were 2.3 hospitals per 100,000 inhabitants and 43.5 beds per 10,000 inhabitants which means that there were on average 230 inhabitants per bed. 7,464.4 thousand patients were hospitalized.

There were 126.07 thousand doctors working directly with patients, 210.92 thousand nurses and 27.63 thousand midwives. These data clearly show that the medical staff is a large group of employees, whose management should positively translate into both their professional satisfaction- but also- above all, the quality of medical services provided by them (GUS, 2019).

The number and qualifications of the medical staff necessary to provide medical services in hospitals is strictly defined by law - The Regulation of the Minister of Health on Guaranteed Services In The Field Of Hospital Treatment of 22 November 2013 (Journal of Laws of 2021, item 290 i. e.)

In Annex 3 to this regulation, the Minister of Health defined The Detailed Conditions For The Implementation Of Guaranteed Services In The Field Of Hospital Treatment, specifying, among other things, the requirements for medical staff for each profile or type of hospital organizational unit (E.g: Allergology, Dermatology, Clinical Oncology etc.).

Another legal act regulating the employment of medical personnel in hospitals is The Regulation of the Minister of Health On The Method Of Setting Minimum Standards For The Employment Of Nurses And Midwives In Healthcare Entities That Are Not Entrepreneurs of 28 December 2012 (Journal of Laws, item 1545).

There are two basic forms of employing medical personnel, i.e. an employment relationship established pursuant to Art. 22 § 1 of The Act of June 26, 1974 - Labour Code (Journal of Laws of 2022, item 1510 i.e.) and on the basis of a contract for the provision of health services concluded pursuant to art. 27 of the Act on Medical Activity. It should be emphasized that the simultaneous employment of medical personnel in hospitals financed from public funds on the basis of an employment relationship and a contract for the provision of health services is unacceptable and constitutes a violation of Art. 132 sec. 3 of the Act On Health Care Services Financed From Public Funds of 27 August 2004 (Journal of Laws of 2022, item 2561 i.e.) which clearly states that "you cannot conclude a contract for the provision of health services with a doctor, nurse, midwife, other person performing the medical profession or a psychologist, if they provide health care services with a healthcare provider who has concluded a contract for the provision of healthcare services with the National Health Fund".

While considering the legal aspect of managing medical staff in hospitals, one cannot ignore the aspect of working time regulations applicable to this group of employees. The working time of doctors in the adopted settlement period may not exceed 7 hours 35 minutes a day and an average of 37 hours 55 minutes a week in an average five-day working week.

The rule for employees employed in a medical entity is the settlement period, which may not exceed 3 months (Article 93(4) of the Act on Medical Activity). According to Art. 97 sec. 1 and 2 of this Act, an employee of a medical entity has the right to, at least, 11 hours of uninterrupted rest each day, and each week the employee has the right to minimum 35 hours of uninterrupted rest, including at least 11 hours of uninterrupted daily rest. The rest time specified in the above-mentioned provisions applies only to employees working under an employment contract in one hospital, as the current legal status does not allow the employer to check the possible additional employment of a medical worker. It should also be emphasized that the provision of Art. 97 of the Act On Medical Activity does not apply to doctors providing medical services on the basis of civil law contracts.

The management of medical personnel as an important issue for the implementation of state policy was the subject of a study conducted on the basis of the provisions of The Act on the Supreme Audit Office of 23 December 1994 (Journal of Laws of 2022, item 623) under the subject of Hospital Staff Resources in the period from 1 January 2019 to 10 June 2022 by the Supreme Audit Office, known as NIK, which identified five areas as the scope of the audit: employment of hospital staff; organization of work of medical staff; compliance with working and rest time standards; professional development of medical staff and the remuneration system (NIK, 2022).

The NIK audit showed that the hospital defined 12 risks related to the management of the hospital human resources, including, among others, increased medical work costs; staff fluctuation, absenteeism of medical staff or even post-traumatic stress caused by long-term work in a hazardous area. This fact confirms that hospitals as entities employing medical staff are aware of the importance of the issue of employee management.

2.1. Legally unrelated aspects of medical staff management

Employee management is commonly referred to as Human Resource Management. The authorship of this phrase since 1954 is attributed to Peter Drucker, who in his repeatedly reprinted book *The Practice of Management* (Drucker, 2018), emphasized the importance of a man (employee) in the company's operations, and hospitals can be included in this category for the purposes of these considerations. P. Drucker formulated the idea that the most valuable resource at the employer's disposal is a man who is creative by nature. Consequently, the author formulated a thesis on employee motivation, which is one of the most important elements that can make an employee involved in the optimal implementation of the goals of the organization in which s/he is employed. At the same time, he emphasized the fact that the organization of work must result in something more than getting the employee to perform the expected duties. Referring to this assumption, it can be said that in the case of hospitals, the organization of work, i.e., Human Resource Management of medical staff, should result in the development of employees, increase their involvement and identification with the direction of activities and goals of the entity employing them. In the case of hospitals, these goals can be comprehended as providing medical services at the best possible level in accordance with the applicable standards, both substantive (medical knowledge) and ethical, and a high degree of respect for patients' rights.

The method that allows to achieve high involvement of employees in the activities assigned to them seems to be the creation of an incentive system that would result in the release of employees' optimal potential and commitment. Lack of such involvement and failure to use fully one's own skills and experience will only result in the performance of obligatory duties in exchange for receiving remuneration within a specified period. Such a model will certainly not have a positive impact on the achievement by the employer (hospital) of a satisfactory objective in terms of quality. It can be assumed that when creating an incentive system, the employer should introduce solutions resulting in the creation of a friendly working environment in which the staff will be aware of the importance of the goals pursued and believe that the personal contribution of each employee in this area is important. Thanks to this, employees get a chance to develop their creativity without focusing only on the routine performance of their duties. It should also be assumed that a positive role in the incentive system will be played by solutions that will allow each staff member to emphasize their strengths and work at an appropriate pace on strengthening the weaker ones.

At the same time, when managing human resources in a hospital, it should be remembered that it is a working environment characterized by certain conditions that are unique to it.

These conditions were clearly identified in her work by Małgorzata Sidor-Rządowska (Sidor-Rządowska, 2019), who defined them as: “a constant burden of responsibility for the life and health of other people; dealing with extreme situations (suffering, death); decision-making dilemmas related to the process of making a diagnosis and the choice of therapeutic procedure (in the case of doctors); inability to predict a large part of tasks combined with 24/7 readiness to perform them; a low degree of tolerance for ambiguity and error; accumulation of tasks that require both a high degree of independence and an extremely high ability to work together; difficulties in measuring the effects of implemented activities; double (clinical and administrative) subordination of a large part of employees”.

3. Introduction to the psychological approach

The issues of human resource management in health care should also be looked at from a psychological perspective. It can be analysed in two ways. Firstly, attention should be paid to the protection of the mental well-being of medical personnel, for which the management unit is responsible in the workplace. Then, as a consequence, analyse the impact of the mental state of employees of a given hospital facility on their readiness to take care of the mental well-being of patients under their care. In particular, the impact of staff trusts in the management unit and each other, as well as the impact of stress and burnout levels and ways to prevent them will be analysed.

3.1. Relations between staff

The person who decides on the management of the facility should try to create a friendly working environment in order to ensure the well-being of the staff. This can be viewed from the perspective of providing tangible and intangible resources. As material, we can understand, firstly, the environment, which is the place where professional duties are performed, secondly, amenities, and thirdly, ensuring safety while fulfilling them. On the other hand, intangible resources are factors directly related to the organization of work. These include, among others: working time, overloading it, enabling a balance between private and professional life. Intangible factors that are important for the atmosphere in the work environment also include all aspects related to interpersonal relations between staff, such as willingness to cooperate, the atmosphere between them and preventing mobbing and discrimination (Kolasińska, 2020). From a psychological point of view, interpersonal relationships in the workplace are one of the key determinants of well-being in it.

According to Maslow's theory, fulfilling the needs of belonging and recognition, which are at the middle levels of the pyramid, is the way to satisfy the ultimate human need, i.e., self-fulfilment. In turn, the achievement of this need prevents or slows down the professional burnout syndrome, which will be discussed later in this article. From the perspective of the effective management of a group of cooperating individuals, ensuring good relations between them is also crucial for their psychological well-being and a positive atmosphere in the workplace. As a social being, people need to be connected to other people and to have their performance reflected in them (Jankowska, 2011).

A supportive working environment also provides a sense of security and reduces the stress of being responsible for the health and lives of patients.

3.2. Stress in a transactional perspective

A certain level of stress when performing a responsible job is advisable. So-called eustress, i.e., positive stress, is motivating to act, sustains aspirations and allows you to focus on your duties. Remaining in a state of eustress, we tend to adopt coping strategies focused on solving the problem, which increases work efficiency. However, one must not forget that working with a patient is a stressor itself. If we add other stressors, such as an unfavourable work environment to the already existing stress, the optimal level of stress may be exceeded. Then the individual will enter its maladaptive level, distress, which is conducive to making mistakes and reacting focused on emotions (Ogińska-Bulik, 2009), which in the specificity of work in health care can have particularly dangerous consequences.

3.3. Professional burnout and empathy in health care

In the effective management of a hospital facility, the unit overseeing the work of the staff should have as one of its overriding goals from a psychological point of view the prevention of professional burnout among the medical staff.

Indeed, professional burnout promotes a decrease in energy levels in an employee, especially one who interacts with patients in their daily work which contains a strong emotional gradient. Dealing with the suffering and personal problems of patients can be severely mentally exhausting. Professional burnout must be prevented for the sake of both the well-being of healthcare professionals and the resulting psychological state of patients. Indeed, symptoms of professional burnout include: impatience, increased irritability, cynicism, isolation and lack of expression of feelings, displaying superiority and infallibility (Wilczek-Rużyczka, 2014). It is not difficult to deduce the impact on the patient of dealing with staff displaying the above behaviours. The atmosphere of hostility and distance is not conducive to the healing process. Professional burnout syndrome kills expressions of empathy towards the patient.

In medicine, until recently, empathy was defined as the appropriate recognition of a patient's condition without empathising with the patient. Meanwhile, the patient cannot be approached purely empirically while at the same time cutting oneself off to protect one's own emotions. Empathy must be based on genuine emotions and self-reflection. An overly conservative

approach is not recommended, as this demotivates appropriate action, but at a level that does not add to the stress. Genuine, emotionally felt empathy is quite important for the appropriate recognition of pain by medical staff in the patient under their care. Observing someone else's pain not only triggers a response from the same centres in the observer's brain that are responsible for the patient's pain, but in all likelihood also involves the same biochemical substances that are involved in the patient's own pain (Janczukowicz, 2014). By feeling empathy in this way, the doctor can be counted on to approach the patient in a more individualistic way and to put more effort into the patient's healing process. This is why it is so important from the perspective of the hospital management unit to prevent professional burnout in their subordinates.

Preventive measures against this that are within the employer's reach include, for example, giving employees tasks that are not below or above their professional competence. Another good practice would be to evaluate their performance objectively, with constructive feedback for the future. It is also a good idea to provide opportunities for learning and development, through training, courses and additional qualifications. It may also be helpful to organise training or workshops on stress management and improving interpersonal skills. It is also important to provide recovery breaks where possible. Most crucial in counteracting burnout, however, is adequate job remuneration and ensuring that at least once a year an employee takes a leave of no less than two weeks (Gembalska-Kwiecień, 2015). Applying these measures can allow health care staff to take care of their own mental health and physical well-being and to realise their full potential for work and remain nimble. This will be a resource for both them and the patients in their care.

In addition to measures to counteract professional burnout, a measure for the benefit of the patient on the part of the facility manager would be to provide medical staff with so-called empathy training. One proposal for such training, which is in line with the possibilities of hospitals in Poland, is the Bonvicini & Associates training. It emphasises communication skills and empathic expression. It uses methods designed to allow people to experience the clinical situation and take on the role of the patient. During the development of the training, participants took part in three 60-hour workshop series, during which they were taught to use appropriate communication techniques based on the '4ES' programme: "engage, empathise, educate, enlist". As a result of the classes, not only are the methods used to administer, but also to activate. After each of the three series of workshops, doctors participated in a coaching session, during which recordings of the patient's last visit were discussed. The results of these activities showed a positive impact on the level of empathy of the trained staff during the interaction with the patient. The overall rate of improvement was, in terms of global empathy, 37% improvement over the baseline measurement. At the same time, the control group showed no effect (Sikora, Biegańska, Baran, 2016). The fact that it not only increases the level of empathy towards patients, but also emphasises contact, can be considered a significant resource of this method. As mentioned earlier, good contact between medical staff and patients promotes a feeling of safety during treatment.

It is worth including in the training of employees teaching them how to communicate effectively. Such communication should be clear, credible and reliable. Maintaining these principles can often eliminate the dangers that arise from misunderstandings about medical advice. It is worth sensitising medical staff to the fact that patients do not have the expertise, nor do they understand such language. Therefore, it is important for doctors to adapt the language of the message to the recipient. It is also important to remember to distinguish between effective communication with the patient and with authorised family members.

In communication with the patient, it is always necessary to take into account both the aspect of transmitting medical information and its reception by the patient, and the second, understanding the message sent by the patient (Kuriata-Kościelniak, 2020).

4. Summary

In the process of optimal human resource management of medical staff, it is necessary not only to take into account the mandatory requirements of the law in this respect, but also to introduce rules that will be an effective motivation for employees to achieve the goals of the entity employing them.

The unit managing the hospital is responsible for taking care of the mental well-being of its staff. The psycho-physical state of the staff determines their attentiveness towards the patient and the level of care towards the patient, and to some extent the efficiency of the recovery and treatment. In order to achieve it, the manager should care about a friendly atmosphere in the workplace, including tangible and intangible resources. It is important that s/he counteracts professional burnout in themselves and their subordinates and provides ways to balance stress levels. Training and workshops on good contact, empathy and communication are also important.

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