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Internal Communication during the Crisis.

Case Study - Suceava County Hospital

Florentina Popa¹

Abstract: Internal communication in an organization is affected by a crisis, although current research in communication crisis through crisis plan, aimed at reducing to a minimum the increase of entropy internal organization of staff. During the paper I want to analyze the relationship between the dynamics of crisis and internal communication, how communication flows both vertically and horizontally within the team may lead to escalation of the crisis with negative consequences for the entire organization. Every crisis highlights the weaknesses of the organization stronger, however, post-crisis analysis offers opportunities that can be turned into strengths. I want to highlight opportunities that can benefit Suceava County Hospital, especially in internal communication in crisis COVID 19.

Keywords: crisis; crisis communication; internal communication; crisis plan

Introduction

The crisis generated by the COVID-19 pandemic facing the whole world highlights the problems faced by health systems in all countries, but in Romania this crisis overlaps with older suffering caused by underfunding and poor management. Romania was affected by the transmission of the virus from people who worked seasonally in other countries in the European Union and who returned to the country with the temporary closure of companies. One of the regions with a large number of migrants is Bucovina, respectively the area of Suceava County which soon became an outbreak of infection with Covid 9. The first target was Suceava County Hospital, a newly built hospital and which benefited from significant investments in equipment and funds for training medical staff. However, it did not cope with the local crisis, which led to an organizational crisis due to poor management and insufficient preparation for pandemic management. We analyzed the crisis situation at the Suceava County Hospital because the magnitude of the events was high, and the entropy in the maximum internal organization.

Internal communication in an organization is influenced by a crisis situation, although current research in the field of crisis communication, through the crisis plan, aims to reduce to a minimum the increase in the entropy of the internal organization of the team. For the research I used qualitative methods to help me provide an overview of the events that took place and the causes that gave rise to the crisis situation. From the first information received in the press, a first conclusion emerged that it was a faulty internal communication, and from the study of the documents on the website of the hospital and the Ministry of Health, as well as the information in the press, most of them based on information provided by hospital staff, we were able to identify the causes that amplified the crisis situation caused by the pandemic.

¹ Senior Lecturer, PhD, Danubius University of Galati, Romania, Address: 3 Galati Blvd., 800654 Galati, Romania, Corresponding author: florentina.popa@univ-danubius.ro.

The first part of the paper focuses on presenting the theoretical aspects of the elements I will base my research on - internal communication in the organization and crisis communication and how a faulty internal information flow can lead to crises that result in human victims. The second part analyzes how the communication crisis started, which later turned into an organizational crisis and what were the triggering factors, what tensions existed collectively and what opportunities this crisis offers for the organization in question.

During the paper I want to analyze the relationship between the dynamics of a crisis and internal communication, how the flow of communication, both vertically and horizontally within the team can lead to escalation of the crisis with negative effects for the entire organization. Any crisis highlights the weaknesses of the organization, but the post-crisis analysis offers opportunities that can be turned into strengths. I would like to highlight the opportunities that the Suceava County Hospital can benefit from, especially in the field of internal communication, following the COVID-19 crisis.

The Importance of Internal Communication in an Organization

Internal communication in an organization takes place between the management of the organization and employees and represents the way in which information flows are organized vertically, horizontally and obliquely. Depending on the communication channels used, we can distinguish between formal and informal internal communication. Formal communication uses the official channels, established by internal regulations, and in parallel, at all levels of the organization, new channels of communication between employees appear spontaneously, informal communication, which is more relaxed and informal. Informal communication is all the more intense the poorer and more inefficient the official communication. Informal communication has the advantage that it can help create collective cohesion, but it cannot replace the official one because there is a danger that it will turn into rumors or gossip, which distort the initial information. (Cismaru, 2008, p. 26); (Iacob & Cismaru, 2010, p. 80).

Vertical communication can be downward and upward. Downward vertical communication involves the transmission of decisions, division of tasks, explanation of regulations and procedures from the management structure to employees and ensures the smooth running of the organization. Without feedback from recipients, this type of communication does not support an environment conducive to achieving performance, in which employees feel motivated and part of the collective identity.

Upward vertical communication allows the transmission of information from the bottom up, from employees to managers and reflects the way in which the information transmitted was received and interpreted on official top-down channels.

Internal communication is based on the mission, vision and values of the organization, which support the culture specific to the organization. The values of the organization allow the maintenance and development of an organizational identity. Ideally, the values of employees should be identical to those of the organization, the national culture influences the organizational culture.

Geert Hofstede (Hofstede, 1996, pp. 43-45) defines organizational culture as “that software of organizational practices and behaviors shared by members of an organization” and considers that each national culture influences the culture of an organization through the values cultivated in society. He considers that the level of national culture has four dimensions (Hofstede, 2010, pp. 353 – 371):

- The great distance from power characterizes the distribution of power in society. In the organization, the boss is an autocrat and distributes orders to employees. India, the Philippines are examples of countries with a great distance from power, unlike Israel where the distance from power is small and employees expect to be consulted by hierarchical bosses.
- Individualism / collectivism - characterizes the degree of independence of individuals, the desire for self-affirmation and financial independence. The US and Australia are individualistic societies in which employees are independent and take on responsibilities within flexible structures;

- Collectivist societies have rigid structures, management is participatory and employees are part of clans or groups that provide protection, but performance and productivity are low. The countries in the socialist bloc are examples of collectivist societies;
- Avoiding uncertainty - reflects how employees relate to new situations and feel threatened by them. In countries with a high degree of uncertainty avoidance, employees feel threatened by everything new or different and are followers of lifelong employment. Examples of countries where employees avoid uncertainty are Japan, Greece, on the other hand are Denmark, USA, countries where employees are eager to experience new situations, so they often change jobs;
- Masculinity / femininity - male nations, for example, England, focus on material gains, managers are the ones who make decisions and are authoritarian, unlike female nations who are interested in establishing social relationships and quality of life, and managers seek consensus in organizations. Examples of female nations are the Nordic countries, Sweden, Norway;
- Long-term orientation is a dimension added later and reflects the long-term vision that individuals in a society set. Romania is considered a nation in which individuals have a short-term vision.

A study done in 2005 with the Value Survey modules developed by the Institute of Research for Intercultural Communication, set up by Geert Hofstede, showed that the characteristic values for Romania are similar to the countries in the area, Bulgaria, Greece, Serbia, namely - Collectivism, Distance high power, femininity, high index of uncertainty avoidance, short-term orientation. (România, 2005, p. 4)

The high index of Distance to power explains the behavior of Romanians, who obey orders from managers and prefer authoritarian leaders, who centralize power because they do not take responsibility for their own opinions and want to have the protection of the boss to whom he shows obedience. However, when asked about the work environment, the respondents want a bottom-up communication in the organization, ie they want to work in organizations in which to be consulted. The conclusion of the study is that although Romanians are emotionally connected to authoritarian leaders and submit without challenging authority, however, the greatest desire is to work in an organization with a participatory leadership style.

The research also highlighted a specific feature of Romania called by researchers “the authority complex”, which manifests itself in a paradox, Romanians refuse, undeclared, to respect the law and authority, but ask to have laws and rules. We will find this paradox in the behavior of the employees of the Suceava County Hospital and I consider that it is one of the sources of the crisis situation there.

Crisis Communication

A crisis can be defined as “the last phase of a chain of dysfunctions that endangers an organization's reputation and stability.” This definition proves that a crisis is the result of causes that have accumulated over time and at some point causes an imbalance in the organization. The surprise aspect of crises is only apparent, because the dysfunctions that generate the crisis situation appear long before the critical moment, so the results of research in the field prove that crisis situations can be avoided or resolved in favor of the organization. The crisis can also mean an opportunity, a feedback, if the causes are analyzed and the optimal solutions are found or it can be won before it occurs if the organization prepares its crisis plan in calm periods when the crisis cell can identify and analyze the risks and their magnitude. Anticipating the crisis is done on two levels: the material organization of the crisis and the organization of crisis communication.

The Material Organization of the Crisis

The material organization of the crisis consists in establishing a crisis management plan from the perspective of their prevention and preparation by identifying the risks that may affect the organization. A list of possible, unlikely and to be considered scenarios is made and subjected to detailed analysis from the perspective of the probability of occurrence, the magnitude of the risk and the degree of efficiency of the security systems that the organization has implemented. The second step is to simulate the consequences of the possible identified crisis situation, which helps the organization to act effectively in the face of an ongoing crisis. The simulation tests the procedures, the employees' behaviors and the technical part.

The crisis communication plan is the most important part of the organization of the crisis communication and has the form of a file with instructions for each type of crisis identified. The plan specifies who is part of the crisis cell, what are the target audiences of the crisis, the messages and channels through which they can be transmitted, contact details, crisis files and the dates on which the simulations of the crisis situation take place. This plan involves the involvement of employees in the departments that are targeted by the identified risk and is based on the flow of information within the organization, ascending, descending and oblique. It is important that during a crisis the organization has a single spokesperson to provide information to external audiences, and that employees follow the instructions given by the crisis cell.

Internal Communication Risk Factor in the Covid-19 Crisis at Suceava County Hospital

The first information about the crisis situation at Suceava County Hospital appeared in the media in the second half of March, when there was already a state of emergency in Romania. On March 23, the press reports that an epidemiological assessment is underway, according to information provided by the Strategic Communication Group of the Ministry of Health. *The Emergency Hospital in Suceava was closed after 52 medical staff were diagnosed with coronavirus and two patients died due to COVID-19* is the opening sentence of the news on the Radio Free Europe Romania website.¹ The press article compares the crisis situation caused by the contamination of the medical staff, which produces effects - two dead patients, and the message sent by the hospital management that uses the strategy of denial and transfer of responsibility to people coming from risk areas. The management's tactics are losing because more and more information about poor internal communication continues to appear on all information channels, which has led to the spread of the virus between doctors and patients. The news and reports are based on information transmitted by sources, by the medical staff in the hospital describing the situation of confusion and internal disorganization.

On April 2, the Ziare.com website makes an x-ray of the crisis situation at Suceava County Hospital, a crisis that is growing in magnitude due to the lack of stocks of medicines and protective equipment, and the information is given to the press by hospital doctors who have already made a request to the Suceava Prefecture. And in this way they wanted to raise the awareness of the Ministry of Health

In the local and national press, new information appears on each radio or television news program about the lack of clear procedures for the hospitalization of patients infected with Covid-19 and about the defective way in which medical staff were protected, as well as about the precarious conditions of hospital hygiene, lack of toilet paper, the usual disinfectants. The sources indicated by the media are doctors and nurses in the hospital or patients who tell reporters about the chaos in the hospital.

After the epidemiological investigation, the management was changed, but even the new managers do not communicate with the employees and do not assume responsibility for clear decisions and rules of internal organization, which reassure employees and patients. There is a lack of vertical top-down communication for managers to establish new rules for the operation and protection of non-Covid staff

¹ <https://romania.europalibera.org/a/spitalul-din-suceava-%C3%AEnchis-din-cauza-coronavirusului-52-de-cadre-medicale-infectate/30504572.html>. 20 mai 2020.

and patients. The fact that they are isolated in their offices increases the concern of the team. The crisis covers the entire organization and the lack of a crisis cell to assess the situation and establish the crisis management and communication plan only increases the chaos in the hospital. Inpatients are under pressure to be discharged and go to other hospitals in other cities, healthy medical staff refuse to come to work for fear of infection with the Covid-19 virus.

The events in Suceava County Hospital show that there were sources of risk for possible crises long before this organizational crisis started. The lack of top-down and top-down vertical internal communication is unlikely to have been disrupted by cases of Covid-19 virus disease. Most likely, it also existed during periods of calm, but the tension caused by the fear of contamination with the new virus highlighted more clearly the lack of communication skills, both at the level of management and at the level of employees.

The communication skills of medical staff are an integral part of the behavior involved in their role and status in the organization. Vocational training also includes the rules of communication with superiors and patients. The internal regulations define the responsibilities and authority at the level of the organization, which is the flow of information and feedback and establishes the criteria on the basis of which the quality services provided by the medical staff are evaluated. Due to faulty top-down vertical communication, informal communication is amplified and alarmist rumors appear, causing panic among both medical staff and patients.¹ The way the nurses inform patients about the drug crisis in the hospital demonstrates the lack of empathy, but also a superficial understanding of the importance of communication in the medical act.² For a diabetic patient, the emotional state is very important, and the announcement that the next day he will no longer have medication can produce long-term negative effects. But, this behavior can also be interpreted as a cry for help from nurses who are powerless, have no one to address within the organization and want to alert patients' relatives to ask for help from the Ministry of Health.

In order to limit the communication with the outside, the management forbade the dissemination of information to the outside environment by prohibiting personal mobile phones at work, a situation considered by the employees an abuse of which they informed, according to sources, the press. This shows that the staff was not trained on how to communicate in the organization during a crisis, they did not understand that during a crisis there is only one spokesperson in that organization and he gives all the information to the outside. Any information transmitted on sources affects the image of the entire organization. However, neither the institution organized any press conference nor did it establish a communication strategy with the patients' relatives.

The Hospital's website displays provisions of the hospital manager, from 2017, approving the updating of the Professional-Scientific Commission and for improving the professional training of medical staff and updating the composition, duties and activities of the Risk Management Team. These commissions were to draw up the Annual Plan for the professional training of the medical staff and, respectively, the Risk Analysis Report related to the development of the unit's own activity and the Plan of measures to limit the consequence of the occurrence of risks. We did not find on the site the two plans, which were probably drawn up, but certainly were not brought to the attention of the employees involved in the activities subject to analysis.

The behavior of employees at all levels shows that they were not informed about the strategies proposed by the Risk Management Team for the identified risk situations, any type of risk, and did not participate in any simulations. There was no crisis cell to try to implement the plan for this risk situation.

¹ <https://www.digi24.ro/stiri/actualitate/sanatate/marturia-sfasietoare-a-unei-paciente-cu-coronavirus-din-suceava-nu-aveam-nici-macar-cu-ce-sa-luam-medicamentele-1284734>. 20 04 2020.

² <https://ziare.com/stiri/spitale/cronologia-unei-tragedii-dramele-incredibile-de-la-spitalul-din-suceava-povestite-de-pacientisi-personal-medical-1604549>. 13 mai 2020.

The crisis situation at Suceava County Hospital is amplified by the resignation of the new managers appointed by the Ministry of Health.¹ The strategy of the Ministry for resolving the crisis was to take over the leadership by a team of military doctors led by Major General in reserve Ionel Oprea, Secretary of State in the Ministry of Health. The report of the military leadership, presented in a press release on the website of the Ministry of Health, specifies that among the main deficiencies found were faulty internal and external communication.²

In an interview with the Military Observatory General-Major (r) Ionel Oprea details the internal communication problems existing in the hospital: (...) *We also introduced working procedures, set objectives and, above all, I think we are on way to finalize the chain of communication with all hospital employees, by empowering the heads of departments, departments and services to transmit everything decided at the hospital management, to be disseminated to all staff for information and to act accordingly. I think that this change will be a big step for Suceava County Hospital, for its staff.*³

Staff protection was also a top-down internal communication issue, as it was not sufficiently explained how the virus is transmitted, so that medical staff in non-Covid departments understand and agree to wear protective equipment. Major General Ionel Oprea (...) *But there were, I met other structures in the hospital that did not want to protect themselves, on the grounds that they are not exposed, but after I explained to them what are the possible ways of infection, transmission of infection, even if they claim to be active in away from them in the hospital, I showed them the ways in which they can be infected and they finally understood.*⁴

All these problems of vertical, ascending and descending internal communication, mainly, were old risks in the system, the Medical Council had not met since February. The appeal of the doctors to the Prefect of Suceava County proves that the relationship of the Medical Council with the Board of Directors and with the Board of Directors was deficient and the military leadership restored the collaboration relations between these management forums. It should be noted that Suceava County Emergency Hospital is a Center of Excellence for training medical staff involved in implementing priority health programs in an innovative transnational context, a project co-financed by the European Social Fund through the Human Capital Operational Program 2014-2020. Within this project were held regional seminars on diseases with major incidence, innovative specific training programs for staff involved in priority areas of health, simulation sessions of clinical activities in priority areas for a number of eight hundred and seventy of medical staff. Priority areas included communicable diseases, and seminars and simulations took place in 2019, and a few months later they faced a real crisis, on which they failed to apply efficient crisis management.

From the analysis of the data on the website of the Suceava County Emergency Hospital, of the Ministry of Health and from the press, we came to the conclusion that there is a problem of internal communication in the organization, especially between management and employees. The causes are the values of the organization, employees and management.

The behavior of medical staff who prefer to give information to media sources and do not discuss it first in the internal forums of the organization shows a great distance from power, employees prefer not to intervene in power, are afraid of authority and avoid taking opposing views, although I do not agree with the manager's opinion. The way the hospital management reacted when the crisis broke out shows an authoritarian management, with a short-term thinking and not wanting to know the feedback of the employees. The explanation given by the local and national press about the lack of commitment to the information provided by employees supports this hypothesis: *181 employees in the hospital, infected. The employees of the Suceava County Hospital don't say anything anymore. A small town,*

¹ <https://www.digi24.ro/stiri/actualitate/managerul-si-directorul-medical-de-la-spitalul-judetean-suceava-au-demisionat-ministrul-sanatatii-merge-la-suceava-1285281> 14 mai 2020.

² <http://www.ms.ro/2020/05/14/misiune-de-preluare-a-conducerii-spitalului-judetean-de-urgenta-sf-ioan-cel-nou/> 14 mai 2020.

³ <http://presamil.ro/suntem-tot-medici-comunicam-la-fel-de-bine-cu-medicii-civili-din-spitalele-militare/> 22 mai 2020.

⁴ Idem.

*they have relatives, friends, they are afraid to report irregularities. Others were allegedly threatened not to speak to the media.*¹

Major General (r) Ionel Oprea, in the aforementioned interview, considers that it has become a practice not to assume his own opinion within the organization: The views and requests of some colleagues appeared in the media, who never expressed their wishes. to us and they did not even reproach. *It is the right of everyone to express their point of view, but it is good to be in the institutional collaboration, here, in the medical council, where everyone has the right to express their point of view or, directly, in the hospital, because we meet daily not with one case, but with dozens of cases in which the staff addresses me directly to solve the problems that have arisen. I managed, to a large extent, to the surprise of some, compared to what was happening before.*

The military leadership from abroad noticed existing problems in the team: *We took over, in fact, certain relationships within the personnel that we did not generate. Perhaps some did not conform to the principles of a united team, perhaps there were divisions that we inherited as such.*

We can better understand the context if we associate the index of the great distance from power with the low level of individualism of the collective, the organization is a collectivist one, formed by groups that do not always have common interests. Individuals obey the rules of the group, which promotes their interests, but group interests can affect the stability and balance of the organization, a situation faced by Suceava County Hospital at a time when the context generated by the pandemic has created additional tensions. This shows that the index of avoiding uncertainty is high in the collective and increases anxiety, which leads to negative and emotional reactions without control from employees, under the impulse of the moment. The tendency of groups in ambiguous situations is to oppose the rule established by the minority, in this case the military leadership.²

The specific values of the Suceava County Emergency Hospital, as it results from this analysis, are similar to our national values and to the behaviors generated by these values. Studies show that Romanian employees give good results if they are treated with confidence and are allowed to express their fears and avoid situations that seem too risky, but they want the leader to make decisions, sometimes even risky. Participatory style gives the best results. The leader should communicate vertically upwards and downwards to resolve the tensions that have arisen in the team.

The crisis situation can also be an opportunity if the mode of action and the results obtained are correctly evaluated, because organizations change more easily as a result of crises that highlight very clearly the problems they face. The new leadership that replaced the military leadership has the chance to increase the performance of the organization if it will analyze the development of events after the crisis and will adapt the management to the values of the team.

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² Studiul Interact aprilie 2005, p. 8.

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