

Małgorzata Budzanowska-Drzewiecka

The Jagiellonian University in Krakow Andrzej Frycz Modrzewski Krakow University

Magdalena Dołhasz

Cracow University of Economics Andrzej Frycz Modrzewski Krakow University

PATIENTS' OPINION ON THE ROLE OF PROMOTIONAL ACTIONS IN CREATING AN IMAGE OF A MEDICAL FACILITY

Introduction

Same as other providers that function on the free market of medical services, health care units (institutions, facilities) were forced to change their business and include a pro-client approach in order to work and develop. The fact that competition has emerged on the market and the patients have been allowed to chose a doctor caused an increase in the significance of marketing aspects in the activity of a medical facility.

Decisions made by a patient depend on expectations pertaining to services that satisfy his needs, which brings attention to the quality of provided services as well as to supplier's image. An increase in patients' demands ensues from the observed technological advancement in medicine, and also from the growth in awareness of the increasingly better educated society. Competing for patients also causes that medical facilities depend on the number of services they sold. Thus, they cannot content with focusing attention on enhancing the objective quality of services, but need to actively seek good reputation and a patient's loyalty.

One of the fundamental attributes of the medical services market is a strongly asymmetrical balance of power in a supplier-patient relation. In such circumstances, making a decision about the choice of a provider is closely connected with a supplier's image – the image of a medical facility. Thus, the increasingly bigger

competition within the scope of marketing communication that aspires to build a positive image of medical facilities.¹

The report aims at determining the basic actions in marketing, in the health care industry, that aspire to build an image of a medical facility. It mainly focuses on showing the role of promotional actions, including the way they are perceived by a recipient – a patient (a customer of a medical service).

The report comprises a systematization of basic concepts pertaining to a company's image, specific character of healthcare marketing, especially a medical service and marketing communication tools, as well as an analysis of selected excerpt from studies conducted among patients of Cracow medical facilities.

Specific character of marketing in the health care industry — the review of the key concepts

Marketing in health protection (including marketing in health care) means adapting to the health care system ideas, rules, principles, and experiences that pertain to marketing. The aim is to create and exchange services directly and indirectly connected with health that have some value, assuming that the subjects operating in the medical services market are, to a great extent, non-profit organizations. Service marketing, because this is the marketing specificity one should refer to when analyzing actions in medical services market, is a system directed at a broadly understood exchange of human activity (inside and outside the market) applied by all enterprises and institutions included in the service sector (*not-for-profit* and for-*profit*).

The impact of marketing on the healthcare sector was first observed by P. Kotler and S. Levy in 1969.² The development of marketing thought in healthcare is also attributed to the work of the researchers: G. Zaltman'a and I. Vertinsky'ego (1971). In the 1970s of the 20th century, their works caused many controversies as for extending marketing ideas on the non-economic aspects of life.³

Implementing marketing ideas in healthcare, as it has been already mentioned, is becoming more and more justified due to the commercialization of healthcare services, as well as extending their range and developing their quality. Using marketing approach requires: conducting regular studies on clients' needs, market segmentation, coordinating actions in order to increase customers' satisfaction,

Rudawska, I. 2011. "Relacje partnerskie między podmiotami opieki zdrowotnej – warunki powodzenia". Przegląd Organizacji: 2011, No. 5; Rudawska, I. 2010. "E-pacjent na rynku usług medycznych". Marketing i Rynek: 2010, No. 11.

Rudawska, I. 2005. Marketing w nowoczesnej opiece zdrowotnej. Wybrane aspekty. Szczecin: Wydawnictwo Uniwersytetu Szczecińskiego.

Rudawska, I. 2005. Marketing w nowoczesnej... op. cit., p. 70.

regular communication with the environment, and most importantly in this sector, acting in accordance with ethical norms.

The idea of marketing is based on the Marketing Mix. The fact that it can be adjusted to a variety of factors connected with market status and segment constitutes its merit. In the classical idea of the Marketing Mix, McCarthy distinguishes: product, price, place and promotion (4P's). However, the scope and way of using these elements is different with reference to various economic sectors. In the case of service marketing, the following elements were added to the initially distinguished ones: people, process, i.e. the course of providing a service, from a client's interest through information, sale and a post-sale service as well as physical evidence, that is all visual and material elements (buildings, logo, furniture, technical equipment, leaflets, etc.), which prove to the client the quality of a given service.

The activity of a medical facility should refer to the extended concept of the Marketing Mix, the so-called 7Ps, i.e. a particular type of services offered to a given market segment (segments), prices of theses services, promotion and market communication methods, process, the way of providing services, as well as professional knowledge of people who provide these services.

Marketing actions (the Marketing Mix) that build the image of a medical facility

As it has been stressed before, marketing actions of medical facilities should aspire to build their positive image. B. Gardener and S. Levy were the first to use the term 'image' when they were describing the phenomenon of consumer behaviour. First of all, definitions of 'image' that might be found in literature differ in terms of perspective from which this category is perceived by representatives of various social and economic life spheres. The image of a company is defined as 'an image among people who come across it – clients, contractors, clerks, employees, and others. In other words, it is what people think about a company. The identity of a company is a sum of elements that identify it and make it stand out among other companies. It is expressed in a visual form in its individual character'. From other perspective, corporate image is 'a way of perceiving, as well as impressions pertaining to an organization that were evoked in the society as a result of interactions with an organization and the way it presents itself'. The shared element of the two perspectives is, first and foremost, a subjective assessment of a company's image by the participants in a communication process.

The elements of image, listed in the definitions quoted above, can be arranged according to groups into which people, giving opinions and receiving a company's

Budzyński, W. 2002. Wizerunek firmy: kreowanie, zarządzanie, efekty. Warsaw: Poltext.

⁵ Słownik pojęć ekonomicznych. 2007. *Biznes* 2007, No. 10.

image, as well as factors (dimensions) that might be deciding for them are divided. Different sort of factors will be crucial for an employee (e.g. a certainty of employment), and different ones will draw a supplier's attention (business profile). Hence, we can talk about two types (perspectives) of an image about an image: the internal and market one. The report focuses on creating a market image.

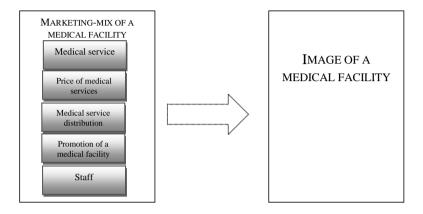


Figure 1. The Marketing Mix vs the market image of a medical facility Source: own development.

There is no doubt that the way of using proper marketing tools in creating a company's image is determined by a disparately formulated business subject, i.e. medical service, as well as specific features that differentiate it from material goods.

There is no one accepted way of understanding a medical service. There are some departures depending on the field that defines it. Legally, it signifies: 'an action serving to preserve, save, restore and improve health, as well as other medical actions ensuing from treatment or separate principles regulating the rules of their performance, especially connected with: check-ups and a medical counsel, a treatment, an examination and a psychological therapy, a medical rehabilitation, taking care of a pregnant woman and her foetus, labour, confinement, and an infant, taking care of a healthy child, a diagnostic test, including a medical analysis, nursing the sick, nursing the disabled and taking care of them, palliative-hospice care, announcing and giving opinion about health, preventing injuries and diseases by prophylactic actions and protective vaccination, technical actions within the scope of prosthodontics and orthodontics, actions within the scope of supplying orthopaedic items and aids.'

⁶ Cf. Rozwadowska, B. 2002. *Public Relations: teoria, praktyka, perspektywy.* Warsaw: Wydawnictwo Studio Emka.

Health care facilities act of August 30, 1991 (Journal of Laws: No. 91, item 408, as amended).

In the area of medical actions, it is important to present medical service as 'a unit of professional actions using available medical knowledge and professional equipment in order to restore, preserve and improve health within the scope of human health protection.'8 Putting an emphasis on the significance of a relation between patient and medical staff, K. Krot defines a medical service as 'a number of non-material actions - from the first contact between a patient and a medical facility until the moment when the patient is released - taken at a request in order to provide health (its preservation, saving, restoring and improving) or enrich personal qualities. The course of medical service depends on the character of relations between staff and the initiative of each party. This perspective means that a given medical service is attributed to an individual medical facility which dictates the value and scope of benefits offered to a patient. A relation created when the service is being provided constitutes a crucial element which decides about the whole service, affecting its shape, quality and patient's satisfaction. Additionally, the definition stresses a non-material character of the service, which is the main source of clients' doubt, and following on from that a challenge to the marketing actions that are taken.

In marketing, according to H. Mruk, a service comprises, apart from non-material features, a combination of material elements which aspire to fully satisfy clients' needs and wishes. ¹⁰ Thus, every medical service is characterized by: non-materialness, inseparability, diversity, impermanence, inability to be resold, information asymmetry, uncertainty and risk.

Also, a specific character of medical services as professional services is connected with the following features:¹¹

- Responsibility before the environment: doctor cannot always fulfil patients' demands (e.g. in the case of euthanasia, gross medical malpractice).
- Significant meaning of experience in a situation of uncertainty of purchase, patient is directed by, inter alia, doctor's experience whose status as an expert is proven by age or an academic degree.
- Quality control often limited, depends on patients' conduct and expectations.
- Medical staff their conduct and approach towards patient, apart from professional responsibilities, decides about quality control and the level of patients' satisfaction.
- Influence of interpersonal relation on the assessment of service quality, as well as building a mutual trust and engagement.

⁸ Rudawska, I. 2003. "Pacjent – klient na rynku usług zdrowotnych". Marketing i Rynek 2003, No. 2.

⁹ Krot, K. 2008. Jakość i marketing usług medycznych. Warsaw: Wolters Kluwer Polska.

Based on: Woźniak, K. and Klamerek, A. 2008. "Marketing w opiece zdrowotnej na rynku usług". Pielęgniarstwo Polskie: 2008, Vol. 28, No. 2.

¹¹ Krot, K. 2008. *Jakość i marketing usług..., op. cit.*, p. 15-16.

Małgorzata Budzanowska-Drzewiecka, Magdalena Dołhasz

A set of material and non-material features constitutes an offer directed at a patient. It comprises three basic levels:¹²

Table 1. Medical service from the perspective of marketing

MEDICAL SERVICE LEVEL	Characteristics	EXAMPLE
service core and the scope of medical help	basic service constituting the essence of a benefit that ensues from fulfilling a specified need	pain alleviation
real service	attributes of an offer (including quality) comprising elements that constitute the so-called bundle of satisfaction for a patient	effectiveness of the provided service, medical staff competence and professionalism, modernity of a medical facility
additional benefits	extending service in order to gain new purchasers, as well as advan- tage in the healthcare market	care and control over patients af- ter they have been released form a medical facility, high technology and procedures

Source: based on Wojda, M. and Pogorzelska, D. 2006. "Usługa Medyczna jako produkt marketingowy". *Pielęgniarstwo Polskie*: 2006, Vol. 21, No. 1, p. 79.

Medical services have many subjective features that depend on individual reception. A patient who obtains a medical service based on measurable and immeasurable criteria makes a subjective assessment of the provided service. The final effect of obtaining a medical service, an improvement of a patient's health as well as his satisfaction or its lack, depends on various features which are typical for a medical service. ¹³

That is why, the quality of a medical service is its important attribute. From patient's perspective it depends, among others, on: medical staff qualifications and conditions in which medical services are provided, the course of appropriate medical procedures, as well as the atmosphere in which these procedures take place, and finally on effect of a treatment, i.e. a degree of health improvement.¹⁴

Price is often a tool used to verify the quality of a service. The price of a medical service represents its value for a supplier and seller. There are considerable price ranges of the same services according to a subjective valuation of price by the subject, both on the demand and supply side. Non-material worth, as well as

Wojda, M. and Pogorzelska, D. 2006. "Usługa Medyczna jako produkt marketingowy". Pielę-gniarstwo Polskie: 2006, Vol. 21, No. 1.

Wantoch, A. 2007. "Cechy charakterystyczne usług medycznych – ujęcie marketingowe". Pielę-gniarstwo Polskie: 2007, Vol. 23, No. 1.

Klamerek, A. 2008. "Usługi medyczne jako produkty marketingu społecznego". Pielęgniarstwo Polskie: 2008, Vol. 30, No. 4.

involvement of professional human work in medical services together with individual patients' needs cause difficulties in objective valuation. The prices of many medical services are regulated by subjects that control the health care system; they are set in overall batches rather than in individual transactions. Not every client of a medical service knows its price (worth) for he does not pay directly for its execution. Often, a branch of National Health Protection Fund does it on his behalf.

People – medical staff are an important element which diversifies the quality of a service, creates an additional benefit as well as constitutes a source of competitive advantage.

The level of patient's satisfaction with a medical service is assessed twice, i.e. before and after treatment. Apart form the above mentioned features of a medical service itself (connected with the process of providing it, the staff and quality), a key element are promotional actions which constitute a crucial and important marketing action in the health care industry.

Promotional actions that create an image of a medical facility

Based on promotion, which is an element of the Marketing Mix that communicates content, patients can create an image of a medical facility. Promotion of medical services constitutes a set of tools and resources applied in order to achieve diversified goals. The preparation of this process requires taking basic decisions concerning goals, recipients, a message and ways of reaching the recipients (Table 2).

Table 2. Specific character of selected stages of planning promotional actions in healthcare industry

Stage of the	CHARACTERISTIC FEATURES OF FUNCTIONING
PLANNING PROCESS	IN HEALTHCARE INDUSTRY
goal of promotional actions	Aspiring mostly to build reputation and an image of a medical facility
target group	Changeability of a target group ensues from the lack of specialization of services provided by medical facilities. They are directed at patients obtaining a health service regardless of their social, demographic and psychographic characteristics.
message	It should only transfer information with a legally limited scope of persuasion
selection of promotional tools	A chance to use diversified tools within the scope of promotional mix that comes under legal conditions

Source: own development on the basis of Czerw, A. 2010. *Marketing w ochronie zdrowia*, Warsaw: Difin, Bukowska-Piestrzyńska, A. 2008. *Marketing Usług Zdrowotnych*, Warsaw: Wydawnictwa fachowe CeDeWu.pl.

Małgorzata Budzanowska-Drzewiecka, Magdalena Dołhasz

The specific objectives of promotion in services market, including medical services, result from the features of an object of exchange. Due to its non-material character, marketing specialist, first and foremost, rely on promoting an image. The inability to store it requires that the objectives of promotion concentrate on creating a demand as well as levelling it in time. A. Bukowska-Piestrzyńska claims that promotional activity of medical facilities should concentrate on:¹⁵

- presenting benefits when purchasing a service offer for a patient,
- presenting distinctive features of a facility with relation to competition,
- building a facility's reputation

The realization of objectives is possible due to the choice of proper content as well as tools in the promotional mix, adjusted to the target audience.

All tools traditionally included in the promotional mix: advertisement, additional promotion, public relations, personal selling, as well as direct marketing, are used, to a great extent, in healthcare industry. According to A. Bukowska-Piestrzyńska and I. Rudawska, apart from the above mentioned forms of promotional actions, building an image of a medical facility is possible by means of:¹⁶

- visual incentives (e.g. decor and facility's architecture),
- verbal incentives (e.g. call centre),
- behavioural incentives (e.g. medical staff conduct),
- staff experience,
- · modernity of the applied technologies,
- providing complementary or facultative services.

Among all the above mentioned promotional tools, advertising is the most often used by medical facilities. One of the most important factors that determine its content and form are legal conditions. Polish legislation allows only objective information to be included in the message when providing medical services. Medical facilities can issue announcements that include:

- encouragement to use health services,
- promises, information about methods and time of treatment,
- prices and means of payment,
- information about the quality of medical equipment.

Most often, advertising is in a form of notice boards, classified ads (only in medical services section), directory entries, medical services guides, websites, information via special call lines, as well as annotations in medical magazines (guides).¹⁷ It is also used in a form of brochures, leaflets and posters.¹⁸

Bukowska-Piestrzyńska, A. 2008. Marketing usług zdrowotnych. Warsaw: Wydawnictwa Fachowe CeDeWu.pl, p. 33.

Ibid. Rudawska, I. 2005. Marketing w nowoczesnej opiece zdrowotnej. Wybrane aspekty. Szczecin: Wydawnictwo Uniwersytetu Szczecińskiego.

Bukowska-Piestrzyńska, A. 2008. Marketing usług zdrowotnych..., op. cit., p. 35

¹⁸ Czerw, A. 2010. *Marketing w ochronie zdrowia*. Warsaw: Difin, p. 54.

Another instrument, commonly used within the scope of medical services, which plays an important role in forming relationships with patients are public relations (PR). PR includes:¹⁹

- relation with media (press, radio, TV)
- publications (press announcements, participation in press shifts, articles in local papers, brochures and posters),
- exhibitions and presentations,
- organisation of seminars and conferences for promoting a facility,
- lectures concerning a facility or office activity,
- financial support for charities,
- 'open door' policy, e.g. free consultations.

Public relations plays a considerable role in showing distinctive features of medical facilities with reference to competition. They propagate its positive image, both in the internal and external environment.

Sales promotion serves to cause a rapid sales growth, as well as to convince a patient to visit a medical facility again. These actions can have different forms. A. Czerw lists, inter alia:²⁰

- prices for the youngest patients,
- free samples of selected products (e.g. toothpaste),
- demonstrations how to perform basic prophylactic actions,
- reduction in prices on provided services, in a form of discounts for regular clients or their families.
- loyalty/frequent purchase programmes.

Personal selling, the last tool of the promotional mix, is considerably rarely used by medical facilities. In this case, medical facilities can organize meetings as a part of "White Saturday" when they promote a healthy smile.²¹

Image of medical facilities in the view of patients

- selected research results

The studies that were conducted served to define the opinion of patients in Cracow medical facilities on the subject of activities shaping an image of a medical facility. They mostly concentrated on:²²

 defining factors that condition the assessment of a medical service in the opinion of respondents,

¹⁹ Bukowska-Piestrzyńska, A. 2008. Marketing usług zdrowotnych..., op. cit., pp. 37–38.

²⁰ Czerw, A. 2010. Marketing..., op. cit., p. 55.

²¹ *Ibidem*, p. 55.

The quoted data constitutes an integral part of the studies entitled 'How medical facilities are perceived by patients' conducted as a part of research studies in Marketing Department at the The Cracow University of Economics, between December and January 2010/11. They were to constitute an attempt to initially diagnose attitudes of a Polish consumer-patient in terms of perceiving medical facilities as well as their offer, with special emphasis put on image.

• defining actions determining a positive perception of an image of a medical facility in respondents' opinion.

The assumptions could be realized thanks to the isolation of more detailed scopes.

First of all, focus was placed on the way respondents perceive a medical facility.

The second area referred to defining the role of staff in creating an image in a medical facility. This approach ensued from a conviction that very often the choice of a medical service is made on account of the assessment of staff professionalism, mostly doctor's, which constitutes a basis for the assessment of a medical facility's trustworthiness.

As far as the aim of the studies is concerned, it was important to determine the criteria used by patients to assess an image of a medical facility. Despite the fact that every patient assesses an image through his own subjective criteria ensuing from personal experiences, it was decided to define the most important, according to the respondents, criteria of assessment. It was assumed that contact with the facility staff as well as verbal incentives (information and opinions given to patients) and visual incentives (colour scheme, equipment) are important when an image is being created.

The last scope of research is an attempt to define communicative actions, expected by respondents, that allow a medical facility to create a positive image.

The population that was studied comprised persons who were real and potential patients of medical facilities in Cracow. A mean-per-unit sampling was used in the research. Data was gather by means of a questionnaire. 103 respondent participated in the research. 101 correctly completed questionnaires were used in the analysis.

Data shown in the picture below indicate that women constituted the majority of people who participated in the study (Figure 2).

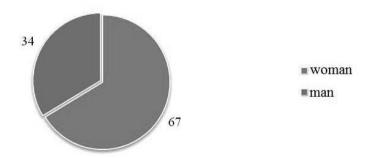


Figure 2. Sex ratio of respondents

When analyzing respondents' place of residence, it should be stated that 91 respondents came form the city, and among them 69 named Cracow as their place of residence. Only 8 respondents lived in the countryside. That being so, place of residence was not used as an independent variable when testing relations. The mean age of people who took part in the study is 26 years, the median amounts 24 years. Both men and women assessed their situation as average (3.29 on a 5-degree scale, regardless of gender).

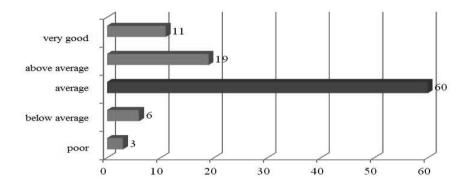


Figure 3. Distribution of the assessment of respondents' material situation

N=99 (due to the lack of data) Source: own development.

A question about the use of services during the last year was asked in order to confirm that respondents have basis for assessing an image of medical services (Figure 4). The majority of respondent used medical services (73 people). Only 28 respondents said that during the last year they had no need to use a medical facility.

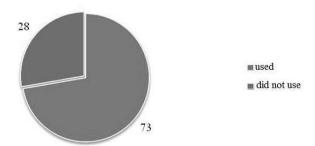


Figure 4. Use of medical facilities service by respondents

According to data, respondents mainly use private medical facilities (50 respondents). Only 15 persons claimed to use only public medical facilities. 36 respondents did not define their preferences. A tendency to use private medical facilities more often does not depend on gender (Figure 5). Both men and women more often use an offer of private medical facilities.

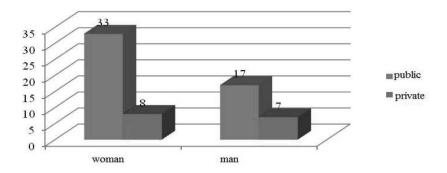


Figure 5. Type of facility vs patient's gender

N=65 (due to the lack of data)

Source: own development.

More importantly, financial situation does not differentiate significantly a respondent's choice of a medical facility. Data shown in picture 6 indicate that people with a satisfying and unsatisfying financial situation more often prefer to use private medical facilities.

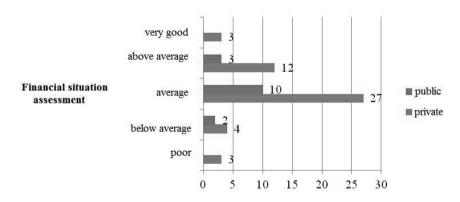


Figure 6. Assessment of residents' material situation vs the use of medical facilities

N=65 (due to the lack of data) Source: own development. This situation can partly result from the negative opinions of respondents about medical facilities.

Assessment of an image of a medical facility in the opinion of respondents

The majority of respondents negatively assess an image of medical facilities (public) (Figure 7). Among associations they named are mostly queues, unpleasant staff, and the fact that waiting takes a long time.

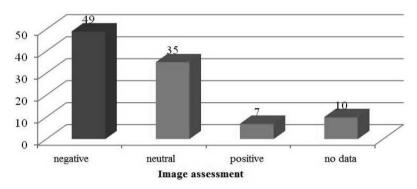


Figure 7. Assessment of an image of medical facilities in the opinion of respondents Source: own development.

It is interesting that the assessment of an image depends neither on gender nor on the use of a medical facility. Both men and women more often consider an image of a medical facility negative or neutral. Only 6 women and one man positively assessed the image (Figure 8).

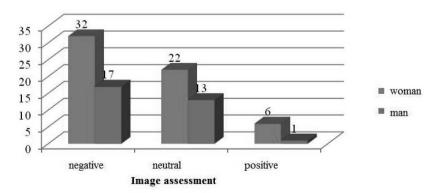


Figure 8. Assessment of an image of medical facilities vs respondents' gender Source: own development.

A similar distribution of data was obtained when analyzing relations between assessment of an image as well as using or not medical facilities (Figure 9).

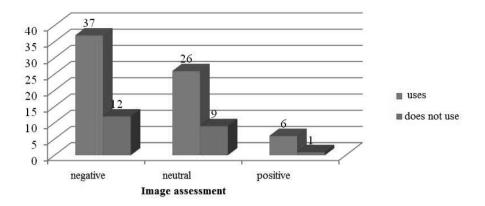


Figure 9. Assessment of an image of medical facilities in the opinion of respondents vs using a medical service

Source: own development.

The majority of respondents has a negative opinion about a medical facility. Only 7 persons had a positive opinion about it, 6 of them used and 1 did not have a chance to use services of medical facilities during the year before the research.

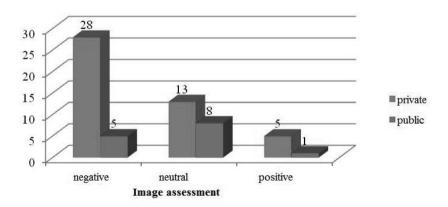


Figure 10. Assessment of an image of medical facilities in the opinion of respondents vs a type of a medical facility

It should be noted that people who had a negative assessment of an image of a medical facility mostly use private medical facilities. It might be assumed that dissatisfaction or negative convictions constitute grounds for making a decision about using private medical facilities. This is partly confirmed by data presented in picture 11. Positive associations with medical facilities had only those people who were satisfied with the provided medical service.

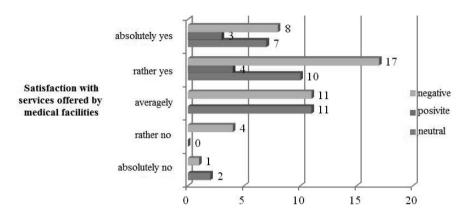


Figure 11. Assessment of an image of medical facilities in the opinion of respondents vs satisfaction with services

N=78 (Data does not amount 101 due to the lack of data)

Source: own development.

Elements included in an image of a medical facility in the opinion of respondents

In accordance with the expectations, doctor was the most often listed association with a medical facility (approx. 20% respondents' answers). Apart from doctor, a noticeable factor was also medical staff.

According to data shown in picture 12, the majority of respondents think that staff is significant as a factor building an image of a medical facility (58 answers). Only 7 respondents does not notice such a relation. More importantly, in the case of people using services of public facilities, all of them emphasized the role of staff, which allows us to claim that using public facilities, to a great extent, ensues from employing highly qualified personnel.

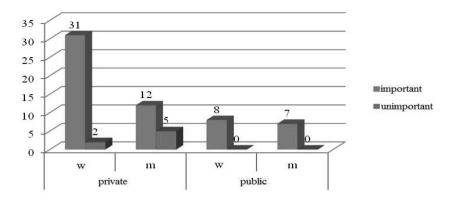


Figure 12. Role of staff in creating an image of medical facilities in the opinion of respondent vs gender and a type of a facility

Source: own development.

As it has been mentioned in the premises of the research, it is difficult to unambiguously determine the criteria of assessment when choosing a market offer according to the subjectivism that results from individual conditionings of purchase decisions. However, the study results made it possible to define which factors govern respondents' choice when opting for a medical service (Figure 13).

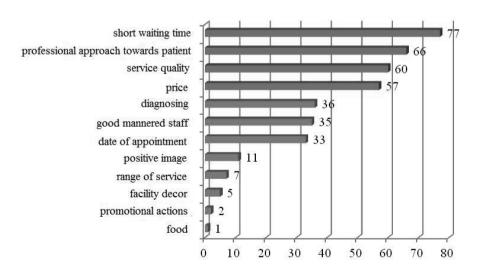


Figure 13. Factors of assessing a medical service in the opinion of respondents Data does not amount to 101 – a multiple choice question

Among the criteria that were used earlier by respondents, there are: a short waiting time for providing a service in a facility itself, as well as a professional approach towards client, the quality of a service and price. Thus, it might be stated that according to respondents, most important are the quality of a provided service, the level of customer (patient) service as well as pricing policy. Thanks to them, it is possible to shape a conviction that a given facility provides high quality service.

Similar results were obtained when asking respondents about their opinion on factors shaping an image of a medical facility.

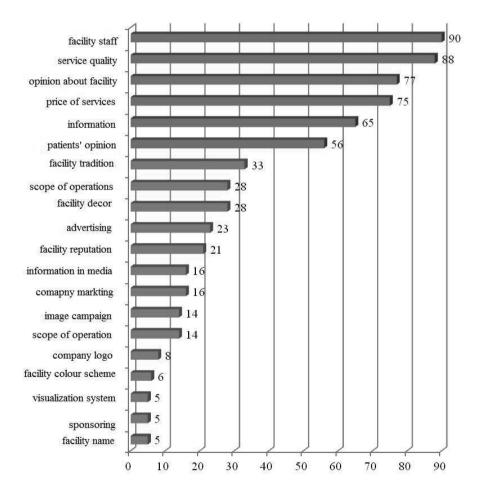


Figure 14. Factors shaping an image of a medical facility in the opinion of respondents

Data does not amount to 101 - a multiple choice question

The study results confirm that a factor which in the opinion of respondents translates into a positive image of a provided service is the quality of customer service, as well as the quality of a provided service and pricing policy. The fact that patients' opinion was noticed as a factor shaping an image (56 answers) deserves attention. It proves that here, same as in the case of services provided in other markets, other patients' opinions are perceived as significant.

Factors have a similar significance for both genders. The study results show that there is no diversification, apart from the assessment of sponsoring. In the case of this factor no answer was marked by any of the men.

Creating an image of a medical facility requires selecting the appropriate promotional actions. With a view to identify means of conveying which respondents would use as sources of information on medical facilities, a question concerning preferences within this scope was asked (Figure 15).

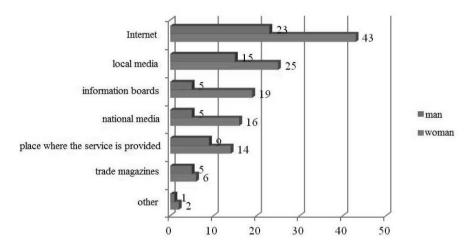


Figure 15. Preferences within the scope of means of conveying information about a medical facility in the opinion of respondents.

Data does not amount to 101 - a multiple choice question

Source: own development.

Data indicates that in the opinion of respondents the best mean of conveying information of a promotional character is the Internet. Preferences within this scope do not depend on gender. Both men and women unanimously claim that the Internet is a mean of conveying that a medical facility should use to communicate with patients. At the same time, this result may be directly dependant on a characteristics of a group of subjects, students who live mostly in the city.

As one can expect, information pertaining to medical facilities were being sought also in local media, less important is the information in the place where a service is provided.

Also, respondents assessed the significance of individual interest groups in creating an image of a medical facility (Figure 16).

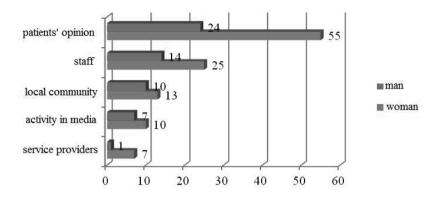


Figure 16. Significance of selected clients in the shaping of an image of a medical facility in the opinion of respondents

Data does not amount to 101 - a multiple choice question

Source: own development.

Both men and women unanimously decided that patients' opinion is most significant in the shaping of an image. This result is in accordance with previous observations indicating that others' opinion is taken into consideration as a factor of assessing a facility's offer. Also, both genders stressed the significance of facility staff, which determines a necessity of taking care of the level of customer (patient) service.

To sum up, the study results show that in the case of planning an advertising campaign it is important to reach local communities by means of local media. When organizing the functioning of a medical facility, the organization of traffic in a facility (information boards) should not be neglected. Putting an emphasis on the significance of patients' opinion allows traditional promotional tools (respondents deliberately do not attach attention to them) but also word-of-mouth marketing to be recommended.

Conclusion

The results of the studies that were conducted confirmed thesis comprised in reference books concerning an important significance of an image of a medical facility. The most important factors that grab patients' attention are: quality of the provided services and actions of a facility's staff (including medical staff). Patients that were studied admit that their own opinions on the subject of facilities providing medical services have a considerable significance for the image of

a facility, which should be an additional argument in seeking their favour. Due to the specific character of services, promotional actions should be closely directed at local community, patients that use the services of a given facility (except for a situation when a facility provides specialized services, which was not included in the research). The research explicitly showed that despite marketing actions being more and more consciously realized by medical facilities, they often deal with a very negative stereotype. This situation indicates that introducing actions aspiring to improve an image of medical services is very important and current. Also, it makes it possible to forecast that these actions will be a fundamental task for managers managing medical facilities.

Bibliography

Budzyński, W. 2002. *Wizerunek firmy: kreowanie, zarządzanie, efekty*. Warsaw: Poltext. Bukowska-Piestrzyńska, A. 2008. *Marketing usług zdrowotnych*. Warsaw: Wydawnictwa Fachowe CeDeWu.pl.

Czerw, A. 2010. Marketing w ochronie zdrowia. Warsaw: Difin.

Klamerek, A. 2008. "Usługi medyczne jako produkty marketingu społecznego". *Pielęgniarstwo Polskie*: 4(30)/2008.

Krot, K. 2008. Jakość i marketing usług medycznych. Warsaw: Wolters Kluwer Polska.

Styś, A. (ed.) 1996, *Marketing usług*. Wrocław: Wydawnictwo Akademii Ekonomicznej im. Oskara Langego in Wrocław.

Opolski, K., Dykowska, G. and Możdżonek, M. (eds.) 2003. Zarządzanie przez jakość w usługach zdrowotnych. Warsaw: CeDeWu.

Payne, A. 1997. Marketing usług. Warsaw: PWE.

Rozwadowska, B. 2002. Public Relations: teoria, praktyka, perspektywy. Warsaw: Wydawnictwo Studio Emka.

Rudawska, I. 2010. "E-pacjent na rynku usług medycznych". Marketing i Rynek: 11/2010.

Rudawska, I. 2005. *Marketing w nowoczesnej opiece zdrowotnej. Wybrane aspekty*. Szczecin: Wydawnictwo Uniwersytetu Szczecińskiego.

Rudawska, I. 2003. "Pacjent – klient na rynku usług zdrowotnych". *Marketing i Rynek*: 2/2003.

Rudawska, I. 2011. "Relacje partnerskie między podmiotami opieki zdrowotnej – warunki powodzenia". *Przegląd Organizacji*: 5/2011

Słownik pojęć ekonomicznych. 2007. Biznes 10/2007. Warsaw: Wydawnictwo Naukowe PWN

Health care facilities act of August 30, 1991 (Journal of Laws No. 91, item 408, as amended).

Wantoch, A. 2007. "Cechy charakterystyczne usług medycznych – ujęcie marketingowe". *Pielegniarstwo Polskie*: 1(23)/2007.

Wojda, M. and Pogorzelska, D. 2006. "Usługa medyczna jako produkt marketingowy". *Pielęgniarstwo Polskie*: 1(21)/2006.

Woźniak K. and Klamerek, A. 2008. "Marketing w opiece zdrowotnej na rynku usług". *Pielęgniarstwo Polskie*: 2(28)/2008.

Summary

An increase in competitive actions in the healthcare industry caused a need for medical facilities to take marketing actions into consideration. Due to a specific character of an object of exchange in the market – a service that comes under a subjective assessment due to an asymmetry of information typical for the market, marketing actions should aspire to shape a positive image. The report categorizes basic notions connected with marketing tools that can be used in creating a marketing image of a medical facility. The analysis was expanded by results of studies conducted among patients from Lesser Poland. Their aim was to present opinions on the subject of factors shaping an image of a medical facility.