

# GAZDASÁG & TÁRSADALOM

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## TARTALOM

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Economic Diplomacy and the Role of Diplomatic Missions Nowadays

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Improving Electronic Communication between Organizations  
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Bodrogai Anzelm László – Kulcsár László – Vizi István György

A helyreállított fertődi Eszterházy-kastély térségi szerepéről  
alkotott vélemények a gazdasági szereplők körében

Horváth Ágnes

A nonprofit szervezetek tőkebeszerzési lehetőségei

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## **Involvement of Employees in Creating a Socially Responsible Organization in Health Care Institutions**

*Zadros, Katarzyna*<sup>3</sup>

**ABSTRACT:** Corporate Social Responsibility (CSR) is a management concept that allows the development of the organisation positive image and strengthening its competitive advantage. It has been widely used by economic organisations.

The acceptance and realization of the concept assumptions by the managerial staff is not sufficient for the concept to be successfully implemented, the engagement of all the workers in the concept realisation is needed. The more conscious and more qualified the workers are and higher their responsibility for the organization's future is, the easier it is to implement the rules of social responsibility in such an organization. The fact that workers commonly follow the rules of ethics and have the same understanding of ethical standards which are applicable in a given organisation constitutes another equally significant factor supporting the concept implementation. The workers of health institutions should be characterized by all the factors mentioned here. Thus, the process of the CSR concept implementation and realization in health care institutions should proceed more smoothly than in others. The paper – based on literature sources and empirical research – attempts to diagnose the level of health sector workers preparation to the implementation of social responsibility assumptions in their centres. The author also tries to evaluate to what extent the implementation process has already been completed or will probably be completed in the near future.

**KEYWORDS:** CSR, employees, management, health institutions

JEL codes: I19, M14, L21

### **Introduction**

The CSR rules enable not only the managerial staff but also all the workers to shape the management process of the organisation and its competitive advantage. Implementation of these rules requires conscious and

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active participation of workers in shaping management processes. Workers are also required to possess a specific kind of sensitiveness thanks to which each activity is a conscious and intentional establishing of the relation with internal and external environment of the organization. Such an attitude to the management enables making positive contribution to the social development and minimizing possible negative effects resulting from potential mistakes in the operation of medical subjects or their workers.

A detailed analysis of the internal and external environment of a medical subject based on which the key clients and targets to be realised with reference to them will be established constitutes the starting point for the implementation of social responsibility rules.

The following persons can be appointed, among others, as possible clients of each medical subject:

- current and potential patients;
- current and potential workers;
- National Health Fund;
- companies cooperating with a medical subject and rendering services for it;
- companies producing and maintaining medical equipment and pharmaceutical companies;
- local authorities and its institutions;
- media;
- others, institutions having key function from the point of view of the medical subject;
- companies operating at the local market and searching attractive health packages for their employees.

From the point of view of internal clients this elaboration is devoted to, it is particularly important to ensure workers that CSR does not mean burdening the medical subject and in the effect lowering workers' income and increasing the number of duties, or forcing the change of current methods of operation. Its implementation should contribute to strengthening workers conviction that they work in a place that guarantees them friendly working conditions, allowing continuous professional and personal development and with the guarantee that their work and engagement will be appreciated by managers and patients.

Promotion of attitudes and performance of those workers who follow the CSR rules in practice (whether consciously or not) can play a

significant role in persuading workers to the idea of CSR implementation. This can be achieved by providing information on the engagement of workers in charity, on the organization of preventive campaigns among patients and local societies, on rendering medical services in a way that guarantees professionalism and empathy and at the same time gives rise to the sense of security and trust.

### **The role of CSR in management**

Decisions concerning management made in contemporary organisations usually have numerous dimensions, from purely economic and technical to political, social and finally to moral ones. This variety is reflected by the introduction of the concept that concentrates on social, moral and ethical issues into the management theory and practice. CSR constitutes one of these concepts. It is an assumption that organisations running its activity will voluntarily take into consideration social interest, environment protection and will form friendly relations with widely understood clients (Rok, 2001). It can also be defined as “business performed in a good way” and treated as the opposition to the concept of “doing good business”, in case of which non ethical behaviour and activities are allowed by definition, (Czarnecka, Robak & Slocinska, 2013) if only they are profitable.

Although at the beginning CSR was only associated with expensive activities taken by economic organisations, its universality and possibility to use in the management of all types of organisations have gradually started to be appreciated. It can be even said to fulfil a role of specific philosophy in the operation of organizations that respond to contemporary challenges, both in case of for-profit and non-profit ones. CSR is also regarded to be a specific form of awareness and acceptance of all the management processes with all their implications and internal and external effects (Pearson Education, 2002). It is also important that operating in compliance with CSR a given organization takes the responsibility for its impact on the environment and society (Australian Academy of Science, n.d.).

## **Social responsibility in health care**

The word “responsibility” has a significant meaning in determining the importance of this concept for management. Especially when it will be referred to the medical industry, including medical subjects. This is because this word is associated with the care for a patient and the guarantee that this patient will be given the feeling of safety thanks to the professionalism of medical staff that attends him.

In many cases decisions concerning the choice of a doctor and of a medical subject are based on the workers professional qualifications and the resulting from them trust and the feeling of safety. However, what is also important for a patient is the awareness that apart from purely professional medical activities a given doctor or a nurse takes part in various preventive programmes realised within social campaigns, that they help in hospices or support humanitarian aid operation generating, in this way, “the added value” for their medical subject.

However, all these activities, to be regarded as socially responsible, must result from the good will of medical subject employers, their own motivation to act and not from the obligation or realization of tasks aiming at medical subject promotion.

These questions were analysed by an own empirical research, conducted in various health care centres (primary centres, hospitals and specialized institutions) among the different levels of employees: medical staff and the administrative staff.

Thus, the evaluation of the motivation to take up a given activity constitutes a factor that allows to consider a given activity as socially responsible. If it is a result of pure and disinterested desire to help others and to act for the benefit of the society, without expectation of any profits, it should be regarded then as the activity remaining within the area of social responsibility. If it is a desire to gain profits that is the starting point for taking up an initiative, then such an activity is a promotional one (even if it is connected with unpaid activities for the benefit of the society).

From the point of view of a medical subject it is important to perceive social responsibility as a holistic attitude based on wide and comprehensive processes: “with personal responsibility towards users and clients as a basis”, it consists in the introduction of social innovations

that result in the long-term development of an organisation and its beneficiaries (Anonymous author in Program Leonardo da Vinci, 2006).

Effective initiatives within the area of CSR already allow for the development and constant increasing of the reliability of medical subjects and their workers and by means of them they co-create the social image and reputation and in the future, they should contribute to strengthening their market positions.

It can even be stated that social responsibility is an attitude that is not only required but it is vital for the realisation of the medical subjects tasks and mission. Both managers and employees are equally responsible for their realization. However, to allow the employees to participate in the realization of the mission it is necessary to create appropriate conditions and opportunities for it first and it is the managerial staff, who is fully responsible for it.

The cooperation between managers and employees in practice will be presented in the further part of this paper.

### **CSR areas of medical workers' activities**

This paper discusses the results of the survey conducted by the author among medical subject workers. The survey explores the activities medical subjects take and that can be used to create and implement in this subject the assumptions of social responsibility. The research was conducted in selected Polish medical institutions. The numbers of the sample was 1986 employees in total. The distribution of the sample is shown by *Figure 1*.



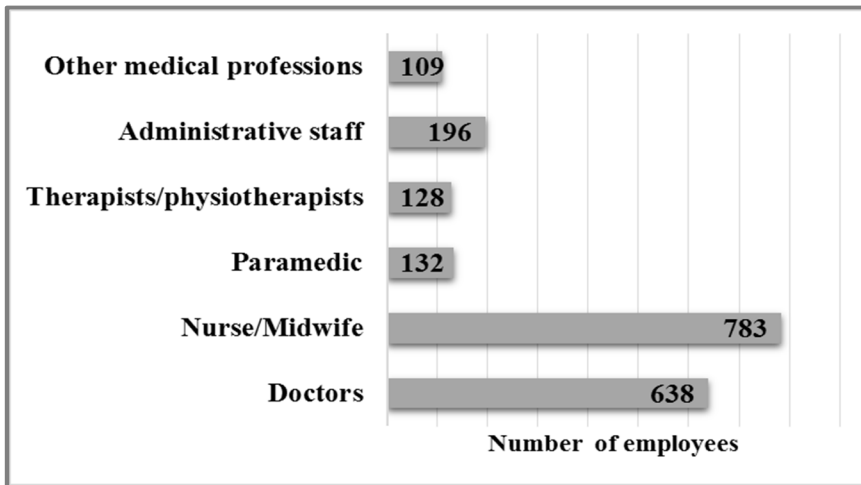


Figure 1: The sample (number of employees in the survey)

Source: own research

The aim of the first questions of the survey was to explore the workers' attitudes and their performance supporting the realisation of social responsibility assumptions in practice, to assess if a given worker is engaged in any social activities, (Table 1.) how long he/she has been doing it and what his/her engagement consists in.

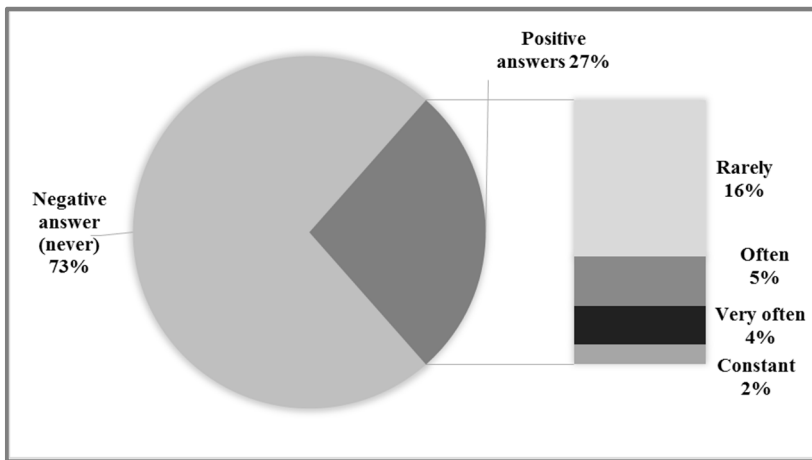
Table 1: Involvement of employees in social activities (number of employees)

Answer	Profession						Σ
	Doctors	Nurse/ Midwife	Para-medical	Therapists/ physiotherapists	Administrative staff	Other medical professions	
Never	539	585	55	71	157	47	1454
Rarely	59	123	42	37	26	37	324
Often	17	31	14	11	9	13	95
Very often	15	27	12	7	3	8	72
Constant	8	17	9	2	1	4	41
Σ	638	783	132	128	196	109	1986

Source: own research

Respondents' answers indicate that it is not possible to unequivocally point out a medical subject or a professional group that are engaged in the activities for the benefit of others, however, the total lack of engagement in such a type of activities cannot be stated, either.

From the 1986 employees 532 indicated that they have already been involved in social activities. The distribution of the answers of the respondents (total sample) on involvement in social activities are shown by *Figure 2*.



**Figure 2: distribution of the answers of the respondents (total sample) on involvement in social activities**

*Source: own research*

Based on the background information of the survey, it can be claimed that the younger the workers are (especially doctors) the greater the possibility they will be engaged in voluntary work is. Older workers, in turn, are more often engaged in charity activities that enable their younger colleagues to acquire new skills, or to raise the level of their formal qualifications. Many workers are willing to join campaigns promoting the medical subject they work for (*Table 2 and Table 3*).

Table 2: **Forms of involvement**

Answer	Profession						
	Doctors	Nurse/ Midwife	Para-med	Therapists/ physiotherapists	Administrative staff	Other medical professions	Σ
Abroad missions	0	0	1	0	0	0	1
Health promotion campaigns	2	9	4	1	0	2	18
Volunteering	15	29	7	12	2	11	76
Helping younger staff	47	68	24	18	9	16	182
Others	32	76	32	18	23	27	208
<b>Σ</b>	<b>99</b>	<b>198</b>	<b>77</b>	<b>57</b>	<b>39</b>	<b>62</b>	<b>532</b>

Source: own research

Another issue under research concerned the relations between particular groups of workers in a medical subject, especially rules of their cooperation, and in the further part the relations between the medical subject workers and patients.

Table 3: **Duration of involvement**

Answer	Profession						
	Doctors	Nurse/ Midwife	Para-med	Therapists/ physiotherapists	Administrative staff	Other medical professions	Σ
Less than 1 year	17	51	17	12	4	9	110
1-2 years	37	62	25	19	12	23	178
3-5 years	29	41	23	16	13	15	137
6-10 years	11	28	9	7	9	11	75
More than 10 years	5	16	3	3	1	4	32
<b>Σ</b>	<b>99</b>	<b>198</b>	<b>77</b>	<b>57</b>	<b>39</b>	<b>62</b>	<b>532</b>

Source: own research

When analysing the relations between workers that are supporting the CSR implementation, a special attention should be paid to how important it is for a medical subject to have the atmosphere of cooperation and mutual trust and to observe the rules of ethics both for medical professions and those commonly accepted by the society as important and valuable.

All the respondents when assessing these issues agreed that generally cooperation between workers in medical subjects they work for is not hindered by any problems, it is effective and contributes to appropriate functioning of these medical centres. However, if the answers of separate professional groups are analysed in detail, then it turns out that nurses and administrative workers do not assess their cooperation with doctors very well. They draw attention to common unjustified incidents of doctors' arrogant behaviour towards them.

On the other hand, nurses also notice positive attitudes and behaviour of doctors towards them, for example consulting and asking for help when rendering medical services or inviting to cooperation in charity activities.

**Table 4: Abiding the rules of work ethic by employees**

Answer	Profession						
	Doctors	Nurse/ Midwife	Para-medic	Therapists/ physiotherapists	Administrative staff	Other medical professions	Σ
<b>Always</b>	197	209	65	38	46	27	<b>582</b>
<b>Often</b>	165	160	51	66	57	54	<b>553</b>
<b>Usually</b>	271	397	14	21	22	22	<b>809</b>
<b>Rarely</b>	5	17	2	3	6	6	<b>42</b>
<b>Never</b>	0	0	0	0	0	0	<b>0</b>
<b>Σ</b>	<b>638</b>	<b>783</b>	<b>132</b>	<b>128</b>	<b>196</b>	<b>109</b>	<b>1986</b>

*Source: own research*

The observance of professional and social ethics principles by medical subject workers is also assessed very well by most of those who took

part in the survey. The respondents emphasised that their job is a mission, so their readiness to devote to others is a natural thing for them. What is more, administrative workers who participated in the survey assessed the medical workers attitude similarly and simultaneously they positively assessed their own behaviour in relations with other medical subjects workers and patients (Table 4, 5).

**Table 5: Abiding the rules of work ethic by other employees**

Answer	Profession						
	Doctors	Nurse/ Midwife	Para-med	Therapists/ physiotherapists	Administrative staff	Other medical professions	Σ
<b>Always</b>	137	183	52	31	35	22	<b>460</b>
<b>Often</b>	152	139	42	53	41	42	<b>469</b>
<b>Usually</b>	328	427	27	31	100	34	<b>947</b>
<b>Rarely</b>	13	29	9	12	17	9	<b>89</b>
<b>Never</b>	8	5	2	1	3	2	<b>21</b>
<b>Σ</b>	<b>638</b>	<b>783</b>	<b>132</b>	<b>128</b>	<b>196</b>	<b>109</b>	<b>1986</b>

Source: own research

The last issue presented by this article relates to the relations between the workers of medical subjects and patients.

Patients were asked here if they are treated by workers subjectively and if they can influence the way medical subjects are functioning and the way they do it in. In case of the first issue, the author tried to establish if the patients are perceived and treated by medical subject workers as diseases entities or as people who expect not only to be diagnosed but to be talked to, supported and not to be anonymous, as well. It turns out that the differences in the approach to patients between hospitals and in particular between medical centres of the first contact are huge. In case of the latter, according to all the workers, the patient-centred approach dominates (Table 6).

**Table 6: Approach of primary care employees to the patient's in specialized clinics and hospitals**

Answer	Workplace							
	Primary Health Care		Specialized Clinics		Hospitals		Σ employees	
	Medical	Administrative	Medical	Administrative	Medical	Administrative	Medical	Administrative
Fully subjective	538	17	124	9	325	3	987	29
Rather subjective	132	14	152	11	340	22	624	47
Hard to say	78	17	14	8	28	29	120	54
Rather objective	17	12	9	8	17	20	43	40
Definitely objective	3	7	4	2	9	17	16	26
Σ	768	67	303	38	719	91	1790	196
	<b>835</b>		<b>341</b>		<b>810</b>		<b>1986</b>	

Source: own research

What is also important here, patients’ opinions and evaluations by patients (where quality management is being introduced) are a significant factor increasing their participation in the medical subject management.

Table 7 summarizes how the management of the different institutions uses or implements the opinion of the patients in the managerial processes.

**Table 7: Including patients opinion in the management of medical centres**

Answer	Workplace							
	Primary Health Care		Specialized Clinics		Hospitals		Σ employees	
	Medical	Administrative	Medical	Administrative	Medical	Administrative	Medical	Administrative
<b>Always</b>	12	4	3	1	2	6	<b>17</b>	<b>11</b>
<b>Often</b>	561	26	19	3	41	21	<b>621</b>	<b>50</b>
<b>Usually</b>	111	3	83	7	297	13	<b>491</b>	<b>23</b>
<b>Hard to say</b>	53	12	95	2	316	17	<b>464</b>	<b>31</b>
<b>Rather no</b>	31	17	71	17	46	21	<b>148</b>	<b>55</b>
<b>Definitely no</b>	0	5	32	8	17	13	<b>49</b>	<b>26</b>
<b>Σ</b>	<b>768</b>	<b>67</b>	<b>303</b>	<b>38</b>	<b>719</b>	<b>91</b>	<b>1790</b>	<b>196</b>
	<b>835</b>		<b>341</b>		<b>810</b>		<b>1986</b>	

Source: own research

While in hospitals it is commonly regarded that workers have too much work to treat patients subjectively in full. Hospital workers, especially medical professionals, cannot perceive advantages in patients and local societies' participation in medical subject management.

## Conclusions

Summarising the above analysis it can be claimed that in spite of the lack of knowledge among managers and workers of medical subjects about what CSR is and what role it has in the functioning of a medical subject there are huge possibilities to implement this concept. It can be facilitated by the fact that the workers of medical subjects are characterized by big activity in initiatives that are traditionally regarded as socially responsible.

However, the unfavourable approach of medical subject managers to the introduction of new solutions and to the wide scale promotion of CSR implementation constitute the most significant factor hindering the realisation of this concept in the management of medical subjects.

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