



Professional Management of Hospital Communication at Vall d'Hebron and Bellvitge in the Context of Healthcare Digitalization

LA GESTIÓN PROFESIONAL DE LA COMUNICACIÓN HOSPITALARIA EN VALL D'HEBRON Y BELLVITGE EN EL CONTEXTO DE LA DIGITALIZACIÓN DE LA SALUD

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Abstract: The aim of this study is to explore the digital transformation of the professional management of hospital communication in two leading hospitals of the public health system of Catalonia. Particularly, the study analyses how hospital communication is structured and how communication strategies have adapted to the digitalization of healthcare in both organizations. Following a qualitative exploratory approach, in-depth interviews ($n = 4$) with communications executives and social media managers from each hospital were conducted. An inductive thematic analysis was applied to the material. Findings reveal two models of hospital communication with different approaches and based on integrative communication strategies. The study concludes that hospital communication is much more agile and flexible in the context of healthcare digitalization.

Keywords: Healthcare digitalization; hospital communication; communication strategies; social media.

Resumen: El objetivo de este artículo es explorar la transformación digital de la gestión profesional de la comunicación hospitalaria en dos hospitales de referencia del sistema de salud público de Cataluña. En particular, el estudio investiga cómo se estructura la comunicación hospitalaria y de qué manera las estrategias de comunicación se han adaptado a la digitalización de la salud en ambas organizaciones hospitalarias. Siguiendo un enfoque cualitativo de carácter exploratorio, se realizaron entrevistas en profundidad ($n = 4$) con directivos del área de comunicación y gestores de las redes sociales de cada hospital. Al material se le aplicó un análisis temático de carácter inductivo. Los resultados revelan dos modelos de comunicación hospitalaria con enfoques diferenciados y basados en estrategias de comunicación integradoras. El estudio concluye que la comunicación hospitalaria es mucho más ágil y flexible en el contexto de la digitalización de la salud.

Palabras clave: digitalización de la salud; comunicación hospitalaria; estrategias de comunicación; redes sociales.



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1. Introduction

Hospital communication is undergoing an unprecedented revolution in the context of health digitalization. At the clinical level, more and more hospitals are opting to implement electronic medical records (Adler-Milsten *et al.*, 2015) and telemedicine (Jiang *et al.*, 2024). At the organizational level, hospitals are increasingly present on social media (Beier & Früh, 2020; Ravenda *et al.*, 2024) or have their own applications that, among other things, provide the patient with hospital guidance and information on medical appointments (Lu *et al.*, 2018). In both cases, these changes have quickened particularly since the COVID-19 pandemic (Sendra *et al.*, 2021).

Focusing exclusively on the organizational level, the goal of this article is to investigate the digital transformation of the professional management of hospital communication by two reference hospitals of the public health system of Catalonia: Vall d'Hebron University Hospital (HUVH, located in Barcelona) and Bellvitge University Hospital (HUB, located in L'Hospitalet de Llobregat). Both specialized healthcare providers are considered by the Catalan Institute of Health (ICS) high-tech tertiary hospitals together with Germans Trias i Pujol University Hospital (located in Badalona) (ICS, n.d.). This objective yields the following research questions:

1. How is hospital communication structured at the organizational level in Vall d'Hebron and Bellvitge hospitals?
2. How have the communication strategies in Vall d'Hebron and Bellvitge hospitals adapted to health digitalization?

Below, we first present the theoretical framework of the article, highlighting prior research on hospital communication. We then describe the two hospitals that are the subject of our analysis before introducing the study design and the results. The article concludes with a discussion focusing on highlighting how the professional management of hospital communication has adapted to digital transformation.

1.1. Theoretical Framework

In recent years, the «gestión profesional de la comunicación institucional se ha convertido en una prioridad estratégica para las organizaciones hospitalarias»¹ (González-Pacanowski & Medina-Aguerreberre, 2018: 83). This strategic

¹ Translation of the quotation: «professional management of institutional communication has become a strategic priority for hospital organizations».

priority became patent with the insufficient response by health systems to the COVID-19 pandemic (Dobosz, 2020; Fullaondo *et al.*, 2024), and the wave of misinformation that accompanied said health crisis (Lovari, 2020). However, the integration of professional communication management in hospital organizations is still work in progress (Martini, 2010; Medina-Aguerreberre *et al.*, 2024). For example, previous studies have noted that communication professionals tend to have a limited role in managing hospitals' internal crises (Heide & Simonsson, 2014). Likewise, hospitals' public relations or corporate communication departments tend to be the first to suffer the consequences due to hospital organizations' lack of financial resources (Gordon & Kelly, 1999), in addition to generally having «escasos recursos humanos»² (Castro-Martínez *et al.*, 2022: 156).

According to González-Pacanowski and Medina-Aguerreberre (2018), hospital communication is divided into communication between health professionals and patients (interpersonal communication), communication between the hospital organization and its employees (internal communication), and communication between the hospital organization and its main audiences, including patients (external communication). Interpersonal communication pertains to the clinical level of hospital communication, while internal and external communication pertains to the organizational level. The purpose of implementing hospital communication strategies, whether at the clinical or at the organizational level, is «to ensure that the best healthcare and health promotion communication practices are being used» (Kreps, 2020: S6). However, while interpersonal communication is an intrinsic part of clinical practice, internal and external communication are more recent organizational practices (Medina-Aguerreberre, 2012a). Likewise, hospitals have traditionally given priority to external communication (Medina-Aguerreberre, 2012a), especially focusing on marketing (Medina-Aguerreberre *et al.*, 2020).

Despite its short existence, hospital communication at the organizational level has become a fundamental tool for the running of hospitals (Martini, 2010; Holá, 2012). Hospital communication at the organizational level helps hospitals preserve a strong corporate identity and a respectable brand image and reputation (Martini, 2010; Medina-Aguerreberre, 2012a). Moreover, hospital communication at the organizational level not only improves the hospital work environment and the efficiency of its employees, but also has a positive influence on its organizational functioning (Holá, 2012; Medina-

² Translation of the quotation: «scarce human resources».



Aguerreberre, 2012a). In addition, hospital communication at the organizational level fosters trust with the main hospital audiences (Esposito, 2017). Thus, when working with crisis management teams, hospital communication at the organizational level helps ready hospital organizations to tackle public health crises (Dobosz, 2020) and to counter any misinformation that may lead to confusion among health professionals (Mosquera *et al.*, 2015) and the main hospital audiences (Schiavone *et al.*, 2021).

With the advent of health digitalization, hospital communication at the organizational level has progressively abandoned classic practices in order to adapt to digital transformation (Castro-Martínez *et al.*, 2022). Web pages, smartphone health applications and videoconferences are just some of the resources that hospitals have incorporated over the last few years in their communication strategies (Medina-Aguerreberre, 2012b; González-Pacanowski and Medina-Aguerreberre, 2018; Castro-Martínez *et al.*, 2022), particularly since the COVID-19 pandemic (Castro-Martínez *et al.*, 2022). One of the resources to which hospital organizations have especially committed is social media (Costa-Sánchez & Míguez-Gonzalez, 2018; Ravenda *et al.*, 2024). According to Medina-Aguerreberre (2012b: 197), these online platforms «constituyen una oportunidad estratégica para los hospitales que desean instaurar una comunicación institucional más participativa»³. Nevertheless, not all hospitals are present in social media (Schiavone *et al.*, 2021), mainly due to organizational restrictions (Beier & Früh, 2020; Walsh *et al.*, 2021; Sendra *et al.*, 2023). Another resource that is expected to determine the future of hospital communication strategies is artificial intelligence (Subramanian *et al.*, 2024).

Two important aspects for hospital communication at the organizational level in the context of health digitalization are humanization and integration. On the one hand, humanization is defined «como una serie de competencias personales que hacen posible desarrollar la actividad profesional dentro del ámbito de la asistencia sanitaria, cuidando, atendiendo y respetando al ser humano»⁴ (Simón-Márquez *et al.*, 2022: 23). Humanization is in response to the increasingly widespread implementation of participatory healthcare, where the patient is at the centre of care (Gil-Paz *et al.*, 2018; Lamouret-Colom & García-

³ Translation of the quotation: «constitute a strategic opportunity for hospitals that wish to establish more participatory institutional communication».

⁴ Translation of the quotation: «as a series of personal skills that enable carrying out the professional activity within the field of healthcare, caring for, attending to and respecting human beings».

Nieto, 2020). In this context, social media are a crucial space for the development of humanization in healthcare contexts (Simón-Márquez *et al.*, 2022). On the other hand, integration is a result of the inclusion of communication in hospital management systems, especially in times of health crises (Heide & Simonsson, 2014; Dobosz, 2020). According to Dobosz (2020: 382), «the integration of communication into these systems allows communication to be perceived as an integral component of crisis management by executive leadership». Integration also fosters teamwork and collaborative networking in hospitals, which in turn enhances the efficiency with which hospital organizations operate (Fullaondo *et al.*, 2024).

2. Methodology

The two hospitals that feature in our analysis of the digital transformation of the professional management of hospital communication are two reference hospitals of the Catalan public health system: the HUVH and the HUB. Known as the ICS (Institut Català de la Salut), the public health system of Catalonia was founded in 1983 as a Social Security management entity in charge of health care. Since 2007, the ICS has been a public enterprise that manages the eight reference hospitals within the Catalan public hospital network, including the HUVH and the HUB. In addition to being top public reference hospitals in Catalonia, the HUVH and the HUB are the two most highly valued public ICS-managed hospitals for healthcare reputation, according to the 2024 edition of the Merco ranking⁵ (n.d.).

2.1. The HUVH

The HUVH is one of the five entities that make up the Vall d'Hebron Barcelona Hospital Campus brand, together with the Vall d'Hebron Research Institute (VHIR), the Vall d'Hebron Institute of Oncology (VHIO), the Centre for Multiple Sclerosis of Catalonia and the Autonomous University of Barcelona (UAB). The Vall d'Hebron Barcelona Hospital Campus brand stands out for its excellence, its engagement with the region, its innovation, efficiency and eco-sustainability, the participation of its professionals, the humanization of healthcare, and the enhancement of citizen care.

Its mission is «contribuir a mejorar la salud y la calidad de vida de la ciudadanía en todas las etapas de la vida, generando, compartiendo y transfiriendo

⁵ Merco: Corporate reputation business monitor.



conocimiento útil que permita avanzar a la sociedad y al sistema sanitario»⁶ (HUVH, n.d.). It is a reference health complex that stands out for its innovative organization and is structured into six strategic areas: paediatrics, transplants, the elderly, cancer, neurosciences, and highly specialized surgery.

Its model is based on interdisciplinary work and is broken down into 32 areas of knowledge. The vision to which the HUVH aspires is «ser reconocidos y consolidarnos como un centro de referencia líder e innovador en asistencia, docencia, investigación y gestión»⁷ (HUVH, n.d.). The hospital's most notable objectives include ensuring the continuity of healthcare and improving the patient experience.

This brand architecture is also defined by a series of values with trust as a core value. Around trust revolve pragmatic values (professionalism, quality and efficiency), emotional values (humanity, teamwork and innovation), and social and ethical values (social engagement, transparency and respect). In total, the HUVH resorts to some 9,000 professionals and attends to about 7,000 patients each day.

2.2. The HUB

The HUB is the local health centre for the inhabitants of L'Hospitalet de Llobregat and El Prat de Llobregat. It is also the tertiary reference hospital for two million people living in southern Catalonia. The HUB, which covers 41 specialties, stands out for being the Catalan health centre that performs the most complex surgeries and the most adult kidney and heart transplants. Its projects are oriented towards improving the patient experience and networking with primary care and hospital centres in its surroundings.

Its mission is «proveer a la población de referencia una atención de salud excelente, integrada al ámbito social y comunitario, generadora de conocimiento y potenciando la docencia, la investigación y la innovación»⁸ (HUB, n.d.). Some of the hospital's main strategies include improving the user experience by providing greater accessibility, participation and humanization, as well as

⁶ Translation of the quotation: «to contribute to improving the health and quality of life of citizens at all stages of life, generating, sharing and transferring useful knowledge that allows society and the health system to advance».

⁷ Translation of the quotation: «to be recognized and become established as a leading innovative reference centre for healthcare, teaching, research and management».

⁸ Translation of the quotation: «to provide the reference population with excellent healthcare, integrated into the social and community environment, generating knowledge and enhancing teaching, research and innovation».

committing to professional development, promoting a culture to give space to innovation and research and disseminate the results.

The HUB participates and collaborates in research with the Bellvitge Biomedical Research Institute (IDIBELL). Its vision seeks «el reconocimiento como organización de referencia y líder en el sistema público de salud a través de la experiencia de los profesionales, el trabajo en red, la innovación, la mejora continua y la participación»⁹ (HUB, n.d.). The HUB's eight defining values are: commitment, trust, equity, professionalism, proximity, respect, responsibility, and transparency. In total, the HUB resorts to some 5,000 professionals and attends to about 5,300 patients each day.

2.3. Study Design

To answer the research questions, the study follows an exploratory qualitative approach. Four in-depth interviews were conducted with the managers of the communication area of each hospital and the social media managers of each hospital organization (Table 1). The first author was tasked with conducting the interviews. For participant selection, the first author contacted the HUVH Communication, Corporate Strategy and Citizen Attention Management Department and the HUB Directorate of Communication and Institutional Relations by email, explaining the purpose of the study and requesting their participation.

Table 1. Interviewees

Group	Participant	Position	Duration
Group 1	Fran Garcia	Director of Communication, Corporate Strategy and Citizen Attention (HUVH)	75'
	Rosa Manaut	Director of Communication and Institutional Relations (HUB)	81'
Group 2	Marc Téllez	Technician in Digital Communication (HUVH)	75'
	Cristina Lloret	Digital Communication manager (HUB)	37'

Source: Authors' own.

The interviews were held face to face in January 2025 at the interviewee's respective hospital. Each participant was interviewed individually. The interviews were conducted referring to a script of previously drafted questions

⁹ Translation of the quotation: «recognition as a benchmark organization and a leader in the public health system through the experience of professionals, networking, innovation, continuous improvement, and participation».

based on a review of the literature on hospital communication in the digital age, including management features, impact, challenges and dilemmas. Some common questions and other, more concrete questions on administration management (group 1) and social media management (group 2) were established. In particular, the questions covered the following topics: (a) digital health, (b) communication management, (c) social media management, and (d) integration of health communication theories. The script of questions was initially drafted by the first author and later revised by the other the authors.

The interviews were audio recorded after the interviewees had consented thereto at the beginning of each interview. The total duration of the four interviews was four hours and 29 minutes. The interviewees were duly informed of the study and signed the form of informed consent to participate and for their data (name/s and surname/s) and the interview content to be used and disseminated. Interviews were transcribed verbatim by the first author prior to data analysis. The interview transcripts were initially collated by the rest of the authors to verify their consistency and were subsequently subjected to several proofreading reviews by the first author.

2.4. Data Analysis

The data from the interviews was analysed by means of an inductive thematic analysis. Thematic analysis is a method for identifying, analysing, and interpreting themes within a set of qualitative data (Braun & Clarke, 2006). It is a useful, flexible method that is characterized by being an effective way to summarize the key findings of large datasets, in addition to underscoring their similarities and differences (Braun & Clarke, 2006). According to the steps established by Braun and Clarke (2006), the first author first became familiar with interview data by reading through it multiple times. Next, and using excerpts from the interviews, the first author generated a preliminary list of themes and sub-themes. This preliminary list was discussed by all authors until a consensus was reached. The first author then reviewed and refined the preliminary list of themes and subthemes, contrasting them with the revised literature, prior to generating the final analysis report (Table 2).

As an alternative to qualitative content analysis, thematic analysis enables bringing to light reflective practices, contextualized from a standpoint of logical argumentation (Braun & Clarke, 2014). The method applied and the questions of our research are in line with this methodological tool, which adequately responds to the needs and requirements of our approach. Professional experiences are taken into account in a flexible manner, as are the

organizational environments in which the communication actions and practices take place and are located.

Table 2. *Matrix of the thematic analysis of the interviews*

Theme	Subtheme
Strategic communication	Organization and management
	Internal and external communication
Communication strategies	Digital humanization
	Innovative practices and digitalization

Source: Authors' own.

The thematic analysis has enabled ascertaining the day-to-day of hospital communication at the organizational level and the initiatives and activities carried out by the communication area of each hospital. It has also allowed recording the reflections of the managers on different aspects of organization and brand identity related to the challenge of patient centrality, internal and external communication, innovative practices, and the COVID-19 pandemic. Having discussed these elements with the interviewees, it has been possible to verify and present several premises that allow sketching the current panorama of hospital communication at the organizational level at these two reference centres in Catalonia. This has helped us to achieve a broader vision of the issue and understand where it is heading and how communication strategies have a constitutive impact on the organizational logics of the two hospitals.

3. Results

3.1. Theme 1: Strategic Communication

Organization and management. The managers of the communication area of each hospital agree that there has been a change in recent years in hospital communication at the organizational level. In the past, principally communication «was reduced, or understood outwardly, [...] like the press» (Garcia), even among the employees and managers of hospital organizations. However, the need to communicate more broadly has now been understood: «Communication has started to be seen as being strategic and related to positioning. This is a challenge because there is also an associated requirement» (Manaut).

In the interviews, it becomes clear that communication has gone from being perceived as an operator to having a strategic function within the two hospital organizations (Sánchez-Lopez & Romero-Rodríguez, 2024). In this sense, the role of these communication professionals «se ha visto impactada por la

creciente complejidad de la comunicación, la aparición de nuevas herramientas digitales y la presencia de nuevos actores en el ecosistema comunicativo»¹⁰ (Sánchez-Lopez & Romero-Rodríguez, 2024: 57).

Regarding the approach and implementation of communication, we find differences between the two hospital organizations. On the one hand, the HUVH makes an «significant leap» (García) with the creation of the Communication, Corporate Strategy and Citizen Attention Management Department, which reports to the hospital management, when the Vall d'Hebron Barcelona Hospital Campus brand is established in 2016. From that moment on, «communication becomes a department, acquires far more responsibility, and goes far beyond what the press was until then» (García). The HUVH and the other affiliated entities come under an umbrella brand jointly to communicate the Vall d'Hebron Barcelona Hospital Campus brand. The Corporate Strategy area includes Corporate Social Responsibility (CSR) and patronage, while Citizen Attention focuses on patient participation through working groups or permanent committees for the co-creation of topics of interest in order to get them involved in their health process and decision-making (Quevedo *et al.*, 2023).

Meanwhile, the HUB has its Communication and Institutional Relations Office. Its senior members also report to the management of the same hospital and the Hospital de Viladecans. In the case of the HUB, communication focuses more on its relationship with the local region. As Manaut explains, «we are a highly complex hospital, but we are also a community hospital». At the same time, the generation of synergies with different institutions in the reference area is sought, taking into account that the population covered by the HUB is very large, reaching two million inhabitants. The office deploys and performs a wide variety of actions. Some of them, such as the library in Bellvitge or the neighbourhood association, can be framed in CSR as activities with other entities. In addition to these activities, the office is also responsible for organizing events, outreach, digital communication projects, patient involvement, humanization, and photography and audiovisual services.

In general, two models of hospital communication can be identified at the organizational level with differentiated approaches. The model of the HUVH is highly integrative and includes Corporate Strategy and Citizen Attention, where communication is aligned with long-term global hospital planning, with

¹⁰ Translation of the quotation: «has been affected by the growing complexity of communication, the emergence of new digital tools, and the presence of new stakeholders in the communication ecosystem».

innovation constantly in mind. In contrast, the HUB emphasizes user support and outreach to other entities to seek external collaboration with local actors through a variety of communication initiatives as different ways to connect with its audiences.

Internal and external communication. Hospital communication at the organizational level must engender trust between internal and external audiences. In view of this, establishing the increasingly blurred boundaries between internal and external communication currently poses a challenge for hospital organizations. Taking into account hospitals' three missions of providing healthcare and undertaking research and teaching, the management of hospital organizations is complex and highlights the need for coordination (Medina-Aguerreberre & González-Pacanowski, 2017).

In such a context, the managers of the communication area of each hospital were asked to give their opinion regarding this differentiation, as well as the dilemmas that arise and the content generated for each audience. Both managers assert that the separation between internal and external communication remains in place despite being questioned due to its ambiguous boundaries. Even so, Manaut stresses the importance of aligning both types of communication: «The bottom line is that you cannot communicate anything to the outside that you have not communicated within. This is the priority. It's a matter of consistency». Garcia adds that this «thin line» has led to «appreciating that what we were communicating internally would go to the outside». In fact, the manager of the communication area at the HUVH, where internal communication is known as *relations with the professional*, emphasizes that this trade-off has always been present, even before the existence of social media, bearing in mind the filtering implemented by the trade union representation of information that ended up in the media.

However, Garcia affirms that these blurred boundaries «should not mean that we cannot communicate internally: we define what we explain in one place and in another to cover two audiences without risk. Communication must be transparent». For her part, Manaut emphasizes again that this trade-off poses a difficult challenge, since the focus of communication «is not always clear». The two managers explain that, although much of the content is common to internal and external audiences, some information is provided exclusively to health professionals, not for confidentiality reasons, but due to a question of the public interest. To convey this information, these hospital organizations have several internal channels, such as apps and employee newsletters.

3.2. Theme 2: Communication Strategies

Digital humanization. Trust is one of the values shared by both the HUVH and the HUB, albeit with different perceptions. In the case of the HUVH, trust is a core value, where «trust is transparency» (Garcia). Garcia adds that they try to be transparent in several ways (with the patient, citizens and professionals) and he links trust with the hospital's motto: *Fem Vall d'Hebron amb tu* (*We make Vall d'Hebron with you*). For the HUVH, this *with you* refers, among others, to patients, suppliers, health professionals and accompanying persons. Therefore, transparency is what generates trust in the institution. In the case of the HUB, proximity is the core value, and communication touches on this. This «proximity to the patient» (Manaut) refers to highlighting how the patient is treated and the feedback received for good personal treatment. For the HUB, trust at user level is worked on from this proximity to the patient, where «transparency is rather institutional trust» (Manaut).

In this regard, both hospitals try to manage trust on social media. On the one hand, the HUVH social media manager explains that trust in communication via social media «is a foundation that has been worked on over the years» (Téllez). In particular, Téllez stresses that «our job is to show and explain what is happening, we are transparent and clear». Meanwhile, the HUB's social media manager underlines the importance of «using clear, concise and plain language so that anyone can understand it» as another relevant aspect in social media communication (Lloret). Lloret adds that the HUB's social media approach is to put the patient at the centre of all communication and organization «always».

The concept of humanization is closely related to trust. According to previous studies, humanization is crucial in order to achieve excellent public relations with patients and their families (Lamouret-Colom & García-Nieto, 2020). In this context, the ability of social media to generate links and exchange ideas or feelings make these resources a key space to communicate humanization (Simon-Márquez *et al.*, 2022). Indeed, in the case of *Instagram*, the evidence shows that «la categoría de publicaciones que más influyen en el *engagement* de los pacientes hospitalarios son aquellas que incorporan contenido de humanización»¹¹ (Cuevas-Molano *et al.*, 2024: 15), which typically includes real-life stories of healthcare professionals or patients. According to the social media managers, humanization «is one of the most popular types of content, obviously, that yields the greatest returns, while also being the most gratifying and

¹¹ Translation of the quotation: «the publications that most influence hospital patients' *engagement* are the ones that incorporate humanization content».

rewarding to work on» (Lloret). Téllez adds that «telling personal stories [...] is a kind of attention grabber for people who see them [on the app]_and take a look at it. We have come to make stories that you think will succeed because people will empathize». In general, telling these stories «is a way of being close to the patient-user and for an organization to be able to speak in a very warm tone, it humanizes» (Lloret).

With the new functions that have been added and the diversification of formats on social media like *Instagram*, *storytelling* is an indispensable component that forces communication professionals to dedicate themselves to the production, recording and editing of content to consolidate the hospitals' brand reputation and impact their main audiences. It becomes clear, therefore, that hospital organizations seek ways to interact and capture the attention of these audiences on social media with a ratio between informative and emotional support, which confirms that social media can be a good tool to provide new opportunities for empowerment and relations with patients (Sendra *et al.*, 2020).

Innovative practices and digitalization. The COVID-19 pandemic quickened hospital organizations' digitalization processes. However, for the HUVH and the HUB it is debatable whether it marked a before and an after, taking into account that prior to the pandemic, major changes had begun to take place in the two hospitals' organizational and communicational logics. For example, already in 2019, the HUVH proposed redistributing the hospital into areas of knowledge, as well as improving the Emergency Department to work in a more coordinated manner. In this sense, Garcia states that the pandemic «accelerated the functioning that was already in place». Garcia also labels the pandemic as being «the greatest example of crisis communication» in recent years, with routine dynamics marked by urgency. In the case of the HUB, Manaut reports that during the pandemic «a lot of work was done on the informative part and, once it had evolved somewhat, on the emotional part», although she stresses that the digital and social media aspects had already been worked on previously.

Similarly, the different strategies have allowed us to ascertain the most innovative communication actions of each hospital. For example, the HUVH decided to launch its *TikTok* account to publish information in a more informative and entertaining way about the large groups of professionals. For Garcia, creating the *TikTok* account «was a bold decision» at a time when the rest were questioning whether a hospital organization should be present on this social media. The HUVH communication area manager also mentions topics such as the debate as to whether or not to remain on the social media *X* and the practice of

data interoperability. One example of this is the monitoring of care management data on hospital occupancy in real time: «As a hospital it greatly helps us to make decisions. Having parameterized the data on emergencies served to counteract a communication problem concerning information that said it was overburdened» (García).

According to the results, the videopodcast is another communication format implemented by the two hospitals. The HUB has the *Veus de Bellvitge* videopodcast, launched in July 2024 where each chapter is dedicated to a specific health-related topic in the form of interviews with health professionals. The HUVH, meanwhile, premiered in March 2024 *Fem Vall d'Hebron amb tu*, which also involves health professionals who tell their personal stories and the reasons behind their vocation. Given the diversity of HUB initiatives and in tune with humanization, Manaut states that «to reach patients you must use different pathways because we are all different and take different pathways». These initiatives include projects such as patient interviews (*Pacientes que inspiren*), the «B-side» of health professionals and their hobbies outside their work, or the humanization of signage with the theming of the hospital buildings and a graphic reproduction of emblematic places in the area around the hospital complex, such as modernist buildings, bridges crossing the Llobregat River or hermitages. With regard to the latter initiative, the HUB communication area management explains the reasoning behind it as follows: «We've conducted a pretty important study on the subject. In addition to making the space nicer, it serves to disseminate, has a community function and an intention for the patients to situate themselves» (Manaut).

Finally, within innovative practices and digitalization, we must not overlook artificial intelligence (AI). AI is not only one of the pillars of digital health, it is a very open and evolving set of tools. In such a context, the communication area managers of each hospital confirm the use of AI in hospital communication at the organizational level, in addition to being in favour of its use. Therefore, AI is perceived as «a tool that can facilitate work» (Manaut). García especially stresses the need for professional support so that AI becomes a «truly reliable tool». An example of this is the Citizen Attention area of the HUVH, which «is beginning to work on it to apply response models» (García). According to Manaut and Téllez, AI is used in their hospitals to generate images, songs, adaptations of a press release in a publication for the social media X or automatic subtitling and improving the sound of the contents, for instance. The next steps will involve working on regulatory aspects such as the proper training of employees, paid subscription to AI chatbots such as *ChatGPT*, and the creation of a

guide to best practices. Therefore, these results suggest that the role of AI is assured in the future of hospital communication at the organizational level.

4. Discussion

The purpose of this study was to examine the professional management of hospital communication in two reference hospitals of the public health system of Catalonia in the context of health digitalization. The intensity of the digital transformation being undergone by hospital communication poses a challenge for us to investigate the strategic focus that is being developed, the diversity of communication actions and practices that are emerging, as well as the processes of disintermediation and appropriation that are being deployed. Consequently, communication area managers and social media managers from the HUVH and the HUB were invited to respond to the research questions at individual interviews.

Regarding the first research question, the results reveal that in the professional management of hospital communication there are innovative dynamics that affect the disintermediation (Alami *et al.*, 2017) of communication, where its planning and evaluation has ceased to be the highest priority. Experimentation and innovation in decision-making now prevail, boosted by the use of digital solutions. These results reflect those of Medina-Aguerreberre *et al.*, (2024) who also found that hospitals, especially in the wake of the COVID-19 pandemic, have been forced to make changes to the professional management of health communication and opt for a more transparent, closer relationship with their main audiences. Communication strategies converge in a space from whence strategic communication is reinvented and transformed. This transformation of priorities is evident in the integration of institutional relations, corporate identity and citizen support in the one communication area, consistent with the literature (Simón-Márquez *et al.*, 2022), also in the appropriation of social media or artificial intelligence, which are no longer an external access route to be adapted to directly integrate them into the processes of humanization of hospital care. Overall, the results leave no doubt as to the strategic value of communication in hospital organizations (Medina-Aguerreberre, 2012a).

The results also show that communication strategies have been integrated into more dynamic strategic communication where planning and corporate values are based on a degree of adaptability in operational and practical decision-making, in line with the context and the shared purpose of the increasing central role of patients and the humanization of healthcare. This strategic communication comes in response to a nimble public relations planning model



(Van Ruler, 2015: 187), where communication «is a multi-way, diachronic process of ongoing constructions of meanings in which one cannot foresee who is – or will be – involved, in what way, and what the results will be». Following such logic, internal and external communication have been reformulated to accommodate the segmentation of messages according to the needs of the diverse audiences, accessibility to channels and on-demand content (see, for example, Dobosz, 2020). Likewise, the relationship with the media is conditional upon the hospitals' ability to issue messages through their own channels in which the supervision of circulating misinformation, the selective use of artificial intelligence, the management of information on websites, and the administration of patient monitoring applications are added. These results are consistent with recent studies that show the growing importance of digital communication for hospitals' strategic communication, particularly from a proactive role (Costa-Sánchez & Míguez-Gonzalez, 2018; Mosquera *et al.*, 2015).

With regard to the second research question, the results show that in the professional management of hospital communication, there is a commitment to new models of intermediation that are far more focused on putting people at the centre, which is in line with the growing importance of participatory healthcare (Quevedo *et al.*, 2023). One interesting finding is that the power as reference information sources has turned these highly complex hospital centres into laboratories of constant innovation: whether to incorporate new issuers (nurses, porters, doctors, patients) into actions and practices; to know in real time the occupation of the different buildings or spaces of the hospitals; or to influence the alignment towards hospital humanization from the handling of a variety of everyday situations over and above corporate purposes. The growing role of humanization in hospital communication, as well as the importance of involving health professionals in the communication activities of the hospitals dealt with in this study seem to be consistent with other research (Lamouret-Colom & García-Nieto, 2020; Medina-Aguerreberere *et al.*, 2020; Simón-Márquez *et al.*, 2023). According to these new models of intermediation, problems are also understood in a context shaped by the transformation of professional priorities that focus on the humanization of the hospital environment, «un compromiso socialmente responsable de los hospitales»¹² (Lamouret-Colom & García-Nieto, 2020: 187) that is of growing importance for hospital communication at the organizational level.

¹² Translation of the quotation: «the hospitals' socially responsible commitment».

The results also show that this process of humanization has been enriched by the plurality of options enabled by health digitalization. Among these options, and according to previous studies (Costa-Sánchez & Míguez-Gonzalez, 2018; Ravenda *et al.*, 2024), social media acquire a leading role in hospital communication at the organizational level of the two hospitals. In this sense, both hospital organizations assume that social media are just another instrument at the service of strengthening the community of health professionals in their multiple interactions with their main audiences and with the purpose of capturing the polyphony of patients' voices. Therefore, in the two hospitals, the digital communication strategy «se adapta a la estrategia general de comunicación»¹³ (Costa-Sánchez & Míguez-Gonzalez, 2018: 1146) and social media are used to promote corporate identity as well as to communicate and strengthen the brand image of each hospital organization. Another significant finding refers to the articulation of the different initiatives to be undertaken. Although the HUVH and the HUB's goal and values are the same, their ways of influencing the creation of the communication community are different, both in terms of practices and of actions, taking into account the specificities of these two reference hospital organizations and who they represent and serve.

Integration and diversification are not contradictory processes in the work of communication professionals, but respond to the specific logics of the hospitals in which they are immersed. The more integrative, systemic and technophilic vision of the HUVH is consistent with trust in the entire public hospital system, as well as with the aim of being a benchmark for innovation; while the more diversified, territorialized and community-oriented vision of the HUB responds to more personalized and horizontal trust with the aim of responding to a more collaborative and classic leadership. These two paths, fruitful in the environment in which they operate, allow us to highlight some final reflections on the change in the role of hospital communication, which is now far more agile, flexible and open to reformulation. Perhaps the acceleration triggered by the COVID-19 pandemic has underpinned greater recognition of the relevance of communication oriented towards more connected patients, towards patients «más autónomos, creativos y críticos»¹⁴ (Farré-Coma & Sendra-Tosest, 2021: 26) in upholding their needs and healthcare preferences, a trend that both Medina-Aguerreberre *et al.*, (2024) and Simón-Márquez *et al.*, (2023) have pointed out in recent studies. In this context, conventional approaches to strategic

¹³ Translation of the quotation: «adapts to the general communication strategy».

¹⁴ Translation of the quotation: «more autonomous, creative and critical».



planning, corporate identity, crisis management and the reactive use of social media have been replaced by much more integral and positive options, in line with social support linked to emotions and the narrative nature of diseases (Sendra *et al.*, 2020).

The limitations of this research are primarily its exploratory nature and the proposed thematic analysis, together with the limited sample of communication professionals interviewed and of selected hospitals. However, the goal of furthering knowledge of the conceptualization of communication in reference centres justifies the qualitative approach applied. Future research should enrich, endorse and compare the results and trends noted. A comparison with other centres of similar size and complexity would constitute a good laboratory of analysis, as would finding out the extent to which other smaller hospitals adapt or do not adapt their circumstances to the emerging trends reported. Therefore, we emphasize that the contribution of this research stresses exploring the trends that are arising in two large reference hospitals. Future research should also explore the reception of hospital communication by users.

Going beyond isolated communication strategies or rigid strategic communication is a challenge shared by these two hospitals. This does not mean that they do not manage to be consistent with their shared values and purposes, albeit in different ways in communication practices and actions. In essence, these two ways of doing things can also be considered complementary since both are relevant and there is no single path to effective hospital communication. As the results of this study show, this path must be taken by following the objectives and the conditions of each hospital with respect to its environment, its location and its coverage. The strategic value of hospital communication is indisputable, it is designed and implemented to reformulate itself, taking into account changing priorities and needs.

Ethics and Transparency

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Conflict of Interest

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Author Contributions

Role	Author 1	Author 2	Author 3	Author 4
Conceptualization	X	X	X	
Data curation	X	X	X	
Formal analysis	X			
Funding acquisition				
Investigation	X	X	X	
Methodology	X	X	X	
Project administration				
Resources				
Software				
Supervision		X	X	
Validation				
Visualization	X			
Writing – original draft	X	X	X	
Writing – review & editing	X	X	X	

Data Availability Statement

Access to data can be provided by the authors.

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