

Social Responsibility of Healthcare Entities in the Conditions of the COVID-19 Pandemic – A Literature Review

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Submitted: 23.04.2021 | Accepted: 29.10.2021

Abstract

Purpose: This article aims to present the concept of corporate social responsibility as applied by healthcare entities in the conditions of the coronavirus pandemic.

Design/methodology: The article is a literature review on corporate social responsibility, healthcare, management, and health economics. A critical analysis was performed based on the desk research method, using professional, scientific databases. The article consists of the following parts: introduction; research methodology; issues of corporate social responsibility in the current epidemic conditions, taking into account the areas and tools of CSR as applied by healthcare entities; literature study; limitations; conclusions, and practical implications.

Findings: Running medical entities in a socially responsible manner is, in the context of the COVID-19 pandemic, perceived as a key and strategic action on the global market, contributing to the competitiveness of a given entity while caring for and shaping its image in the local environment.

Research limitations/implications: A critical analysis identified several barriers to the study that could have influenced the overall picture of the considerations. Therefore, this article can be treated as a preliminary diagnosis of the topic under discussion. Subsequently, future analyses should extend to other entities and healthcare institutions to have a complete picture of their implementation of the CSR concept in pandemic conditions.

Original value: The approach to the social responsibility of healthcare entities in the context of the COVID-19 pandemic based on the latest scientific studies, taking into account current reports in this regard by Polish and foreign authors, enriching the recent scientific achievements on social responsibility of the health sector and signaling the author's contribution to the development of the discipline of management and quality sciences.

Keywords: corporate social responsibility, CSR, healthcare, medical entity, COVID-19 pandemic.

JEL: I10, M14, Z00

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Suggested Citation: Czerna, I. (2021). Social responsibility of healthcare entities in the conditions of the COVID-19 pandemic – A literature review. *Problemy Zarządzania (Management Issues)*, 19(4), 166–184. <https://doi.org/10.7172/1644-9584.94.9>.

Spoleczna odpowiedzialność podmiotów leczniczych w warunkach pandemii COVID-19 – przegląd literatury

Streszczenie

Cel: zaprezentowanie koncepcji społecznej odpowiedzialności organizacji w ujęciu podmiotów leczniczych w warunkach pandemii koronawirusa.

Konstrukcja/metodyka: artykuł jest przeglądem literatury z zakresu społecznej odpowiedzialności biznesu, opieki zdrowotnej, zarządzania i ekonomiki zdrowia. Dokonano krytycznej analizy na podstawie metody desk research, korzystając z profesjonalnych naukowych baz danych. Opracowanie składa się z następujących części: wprowadzenia; metodologii badania, zagadnień społecznej odpowiedzialności biznesu w odniesieniu do aktualnie panujących warunków epidemicznych, uwzględniając obszary i narzędzia CSR w ujęciu podmiotów leczniczych; studium literatury; ograniczeń badania; wniosków i praktycznych implikacji.

Wyniki: prowadzenie podmiotów leczniczych w sposób społecznie odpowiedzialny jest, w kontekście pandemii COVID-19, postrzegane jako kluczowe i strategiczne działanie na rynku globalnym, przyczyniające się do konkurencyjności danego podmiotu przy jednoczesnej dbałości i kształtowaniu jego wizerunku w otoczeniu lokalnym.

Ograniczenia/implikacje badawcze: krytyczna analiza pozwoliła zidentyfikować kilka barier badania, które mogły mieć wpływ na ogólny obraz rozważań. Należy zatem niniejszy artykuł potraktować jako wstępną diagnozę podjętej tematyki. Kolejne, przyszłe analizy należałoby rozszerzyć o pozostałe podmioty i instytucje opieki zdrowotnej, aby mieć pełny obraz realizacji przez nie koncepcji CSR w warunkach pandemicznych.

Oryginalność/wartość: ujęcie społecznej odpowiedzialności podmiotów leczniczych w kontekście pandemii COVID-19 bazuje na najnowszych opracowaniach naukowych, uwzględniając aktualne doniesienia w tym zakresie, autorów polskich i zagranicznych, wzbogacając dotychczasowy dorobek naukowy o społecznej odpowiedzialności sektora zdrowotnego i sygnalizując wkład autora w rozwój dyscypliny nauk o zarządzaniu i jakości.

Słowa kluczowe: społeczna odpowiedzialność organizacji, CSR, opieka zdrowotna, podmiot leczniczy, pandemia COVID-19.

1. Introduction

As an acronym for Corporate Social Responsibility, CSR considers the economic, social, and environmental aspects of enterprises' operations. It means being a responsible organization that invests in human resources, environmental protection and creates positive relationships with stakeholders. These three aspects (economic, social and ecological) should be taken into account already at the stage of building the company's strategy (Blanke & Gorynia-Pfeffer, 2008) because CSR will distinguish an organization competitively only when it becomes an element of the business strategy of that organization (Skrzypek, 2015, pp. 191–205; Zalewska-Turzyńska, 2016, pp. 417–426). Corporate social responsibility includes activities on companies' own, voluntary initiative, regardless of the legal regulations, and taken in their everyday activities to benefit society and the environment (European Commission, 2016, as cited in Hawran & Kowalik, 2017, pp. 107–116).

The CSR concept and the idea of sustainable development are in line with the health sector's goals. The activity of healthcare units in the

protection and improvement of the quality of human health and life especially fits in with the idea of corporate social responsibility; however, it has not theoretically developed so far, nor is it widespread in the practice of medical entities (Szewieczek & Maruszewska, 2016, pp. 150–158).

The outbreak of the COVID-19 pandemic resulted in the mobilization of companies' activities, and the changes had a strong impact primarily on the medical industry (Almurisi et al., 2021, pp. 2298–2308). A significant difference observed in medical professionals and consumers, in general, is the increase in vigilance and readiness to take appropriate action immediately. Being in permanent “standby mode” has become a sign of the current situation. The word “responsibility” has acquired a special meaning in the social dimension, not only in the context of one's health but also the health of others, mainly through social distancing. Being a socially responsible healthcare entity in the coronavirus pandemic conditions means taking many actions aimed at its patients' health and the impact on the local environment.

The study's main aim was to present the concept of corporate social responsibility as applied by healthcare entities in the conditions of the coronavirus pandemic. The specific purpose was to review the literature on corporate social responsibility, including healthcare entities.

The research problem of this paper was formulated as follows: How is the socially responsible running of healthcare entities perceived in the context of the COVID-19 pandemic? The author developed the following research questions to find a solution to the research problem:

1. Is running socially responsible medical entities, in the context of the COVID-19 pandemic, perceived as a key and strategic action on the global market?
2. Do healthcare entities implementing the CSR concept in the conditions of the coronavirus pandemic contribute to the increase of their competitiveness in the health services market?
3. Does the functioning of healthcare entities, by the CSR concept, determine the shaping of their image in the local environment?

The work uses a literature review to address the research questions. The article contains seven sections. The first one presents the research methodology. The second section deals with corporate social responsibility in the conditions of the coronavirus pandemic. The following third section discusses the areas of social responsibility of healthcare entities. In particular, it notes the security of the services provided, ethical marketing strategy, ethical choice of treatment method and drugs used, care for the natural environment while maintaining high sanitary standards in medical waste storage and disposable equipment, maintaining medical confidentiality and training of medical personnel. Section four deals with the tools of social responsibility of healthcare entities. This part of the study focuses on selected CSR tools, which, according to the study's author, are crucial for the efficient and safe functioning of medical entities during the

COVID-19 pandemic. A necessary part of the article is the literature study. The author considered the observations and opinions on the topic under consideration and signaled her contribution to management and quality sciences development. Limitations as the next section of the work illustrate the obstacles diagnosed by the author in obtaining a complete picture of the reality of the research problem under consideration. The final stage of the work was conclusions about the research questions in the research problem context and practical implications.

2. Research Methodology

The paper is a literature review comprising the literature on corporate social responsibility, healthcare, management, and health economics. The bibliography includes 39 works, among them scientific articles, books, and reports from the period 2008–2021, in which slightly more than half are related to the period 2020–2021. During the desk research analysis, the author first used BazEkon – a bibliographic and abstract database in economics. In this database, the author identified fifteen articles. Secondly, the author used the following licensed bibliographic databases in which the author found the number of literature items given in parentheses: ScienceDirect (3) and Springer (1). Third, the author used the following databases to complete and deepen the information on a given topic: PubMed (4), ResearchGate (7), and Google Scholar (9). The author used all these scientific databases due to their possible access by having an account in these databases. Secondly, it was these databases that made it possible to complete the literature for this article. Finally, the first used database BazEkon was selected to show the contribution of native scientists to the development of social sciences and health sciences.

Based on the analyzed literature on the subject, a critical analysis was performed, which allowed, firstly, to observe trends in research on social responsibility of medical entities. Second, it showed geographic differences in the context, country, and region of origin of the authors of the collected literature. Finally, the author identified potential research gaps for filling in the future—the critical analysis allowed for outlining future research directions on the CSR role in healthcare systems. The author also presented limitations of the study on the part of social responsibility of healthcare entities in the conditions of the COVID-19 pandemic.

3. Corporate Social Responsibility During the Coronavirus Pandemic

The coronavirus outbreak started in China in December 2019. It spread rapidly worldwide and was declared a pandemic by the World Health Organization (WHO) in March of 2020. The COVID-19 pandemic caused

global socio-economic disruption, the halt to transportation, the shutdown of factories and businesses, social distancing, and, finally, lockdown (Marom & Lussier, 2020, pp. 250–269).

The pandemic situation serves as a magnifying glass to study the CSR concept in its primary sense (Marom & Lussier, 2020, pp. 250–269). The “big winner” of the new global situation is the environment. It reveals a significant decrease in air pollution and CO₂ due to halting meaningful activities worldwide, including industry and transportation. Companies were actively involved in various CSR activities to help fight the virus. For example, many manufacturing companies have converted their factories to make fans, personal protective equipment, hand sanitizers, and some donate instead of selling them. Supermarkets designated opening hours specifically for the elderly and healthcare professionals. Many companies have set airtime for the original ad campaign to promote reasonable goals (He & Harris, 2020, pp. 176–182). However, despite limited economic activity due to the COVID-19 pandemic, which has undoubtedly made the air and water cleaner, the dynamics of biomedical waste generation at the same time has seen a massive increase in solid waste management (Sharma et al., 2020).

Social responsibility requires transparency to lead to a comprehensive understanding of healthcare capacity in a community context, not just a medical entity or health system, to optimize healthcare at the regional level during the COVID-19 pandemic (Cutter, Nelson, & Abir, 2021, pp. 3–5).

4. Social Responsibility Areas of Healthcare Entities

According to K. Zadros (2015, pp. 765–774), social responsibility of medical entities results from their nature and should be reflected in the mission they carry out daily. Implementing the concept of corporate social responsibility by entities from the health sector is innovative, multidimensional, and multi-instrument. Implementing the CSR concept in the marketing dimension consists of the simultaneous application of relationship marketing based on knowledge and integrated marketing and social marketing, representing the sustainable development of medical entities (Matysiewicz & Sztangret, 2017). In the context of sustainable development, the key to disease prevention by medical entities is eliminating environmental, socio-economic, and cultural threats (Zalewska, 2015, pp. 247–260).

Social responsibility of healthcare entities requires responsible business activity, in particular (Szewieczek & Maruszewska, 2016, pp. 150–158):

- security of the services provided;
- ethical marketing strategy;
- ethical choice of treatment method and drugs used;
- care for the natural environment while maintaining high sanitary standards in medical waste storage and the use of disposable equipment;

- maintaining medical confidentiality;
- training of medical personnel.

During the COVID-19 pandemic, the risks and challenges of waste management are increasing significantly. This situation mainly concerns waste generated by healthcare entities. These threats arise from the following conditions (United Nations Environment Programme, 2020):

1. The increased amount of infectious waste generated.
2. Breaks in the provision of services related to medical waste management.
3. Conducting improper management of medical waste.
4. Suspension of recycling activities.
5. Insufficient capacity to process and dispose of waste.

Healthcare operators' responsibility regarding proper segregation of medical waste at source is required not only for storage and transport but also to prevent adverse effects on health and the environment and maintain resource efficiency and material recovery. Also, medical entities' social responsibility should express specific operational protocols for managing medical waste in the case of COVID-19 waste, taking special precautions to mitigate any potential risks associated with COVID-19 infection in the waste management process. In conclusion, the efficient management of biomedical waste is crucial as it can adversely affect human health. Proper waste segregation, safe storage, and neutralization are the key to effective biomedical waste management. In the coronavirus pandemic context, waste segregation plays a crucial role in improving biomedical waste management.

Patient confidentiality and privacy are critical issues of patient rights. In medical entities, information about the patient should be confidential in professional relations. The patient's medical data is what the doctor obtains from objective observations, clinical trials and test results, and insights about family life, lifestyle, and habits. The patient may share confidential information (stressful, embarrassing, and harmful) necessary for the doctor to make an accurate diagnosis, which means mutual trust between the patient and the doctor. A patient's fear of confidentiality has a crucial impact on their confidence. Patients may hide certain information from their doctor and be less likely to refer to them when they obtain information about privacy issues related to new technologies, including mobile applications (Noroozi et al., pp. 875–883).

The protection of health information privacy is currently a significant barrier to the creation of innovative health systems. The global epidemiological situation requires better tools for tracing contacts and studying virus transmission during the pandemic. As part of public health, there is a need to link the medical records of COVID-19 patients to their cellular devices to track their movements and other people whose cellular devices indicate they are in their vicinity. However, at present, the public health service is not authorized to access cellular providers' data in this regard. Therefore, there is a need for immediate access to this data and cloud-based tools to integrate it (Lenert & McSwain, 2020, pp. 963–966).

5. Social Responsibility Tools of Healthcare Entities

A medical entity's social responsibility may be confirmed and documented using the so-called Framework Reporting Principles (GRI – *Global Reporting Initiative*). The GRI guidelines indicate the basic reporting categories and detailed disclosure standards in the economic, environmental, and social dimensions (Szewieczek & Maruszewska, 2016, pp. 150–158). GRI's mission is to become a globally accepted standard for CSR reporting by promoting organizational transparency, accountability, and stakeholder engagement (Olanipekun, Omotayo, & Saka, 2021, pp. 425–435). Generally, reporting may take the form of a few general sentences showing the subject's attitude to social responsibilities, usually without providing any financial information or the form of a detailed description (Macuda, 2016, pp. 76–86).

The foundation of a socially responsible entity is to conduct a dialogue with stakeholders using various communication tools. One of such devices is the so-called integrated reporting. Integrated reporting is a combination of financial and non-financial statements; the primary task is to improve health services quality. Combining financial reporting with reporting on non-financial information and the management board's activities enables obtaining and presenting a reliable, comprehensive, comparable, and clear picture of the effects of a given entity's overall training to a large group of stakeholders. In Poland, the concept of integrated reporting is a relatively new initiative, and the interest in this reporting among the managers of Polish medical entities has been low so far (Jaskólska, Auguścik, & Cygańska, 2020, pp. 43–59).

In the conditions of the COVID-19 pandemic, one of the essential CSR tools used by healthcare entities may be virtual volunteering, easing the pressure on healthcare professionals, improving patient experiences, reducing the risk of viral infection, and ensuring a sense of normality for patients and their families. Virtual volunteering as an innovative approach to adapting medical volunteering to the current pandemic minimizes the risk of spreading the virus and provides patients and their families with significant psychosocial and educational development. This form of volunteering is currently the only safe option and will likely remain the dominant medical volunteering program even after the COVID-19 pandemic (Pickell, Gu, & Williams, 2020, pp. 537–540).

One of the most popular CSR instruments, also used during the coronavirus pandemic, is social campaigns. The action aims to draw attention to a given social problem and change the attitudes or behavior of a specific group of people using the media as a message carrier (Leoński, 2016, pp. 89–98). Public campaigns related to the coronavirus pandemic mainly focused on not leaving home without necessity (during the first wave of the pandemic), maintaining social distance, frequent hand washing, maintaining personal hygiene, and recently encouraging the public to mass vaccinate

against COVID-19. Medical professionals working in healthcare entities used the guidelines mentioned above of social campaigns to make their patients aware. Vaccinations for volunteers are still taking place in many medical entities.

Employee ethics programs are another instrument of the CSR concept. The most common element of such programs is the company's code of ethics, which consists of documented values and principles of operation to which employees and management are obliged. However, in the face of the COVID-19 pandemic, despite these professional codes of ethics, nothing – either morally or legally – compels medical professionals to respond to risk-prone situations. Professional oaths and codes may serve as guidelines for practicing medics but are not absolute in the face of personal risk (Iserson, 2020, pp. 477–483).

Another CSR tool used during the coronavirus pandemic is cause-related marketing (CRM). It is defined as a company's activity taking into account both its marketing goals and social needs. The effect of cause-related marketing may be creating a product or service and providing support for a given cause or charity organization. Although it is easy to find examples of such activities carried out by various brands globally, there is a lack of such activities undertaken by medical entities focused on saving human lives. Since the pandemic, medical entities have not fully used the CRM tool due to the overwork of medical personnel. And here, according to the author, there is space to be developed in the future.

6. Literature Study

Corporate social responsibility in the healthcare sector is a relatively recent issue, as indicated by Singh et al. (2021, pp. 5476–5479). Crane and Matten (2021, pp. 280–284) suggest that the CSR literature has paid little attention to the pandemic and similar global social threats. They underline the importance of entities highly exposed to such new threats and their role in counteracting them. In addition, the authors emphasize an essential point, namely that the coronavirus pandemic highlights the company's core function of producing goods and services that meet social needs and requirements (masks, syringes, gloves). However, this contrasts quite significantly with the way risk is conceptualized in the existing mainstream CSR literature. Hence, the CSR literature should again draw attention to the debate around the “risk society.” The mentioned authors believe modern societies are vulnerable to threats and do not have adequate mechanisms to deal with them.

Despite its relatively untouched nature, CSR is crucial for healthcare entities due to several challenges they face: technical and technological progress, economic and financial crisis, sustainable development, social pressure (Tomaselli et al., 2020, pp. 11–23), as well as aging of the population,

growing expectations of patients in terms of the quality and availability of health services provided (Frączkiewicz-Wronka & Laska, 2013, pp. 72–92), and now also the coronavirus pandemic. CSR in healthcare also concerns health education, promotion, and prevention. Therefore, it has a significant impact on healthcare organizations and can help them reduce the costs of diseases, particularly chronic ones.

Rudawska (2013, pp. 34–52) noted that the epidemiological profile of a modern European was described primarily by non-communicable diseases, and the dominant cause of deaths was chronic and degenerative diseases. How dynamically has this situation changed since 2020, where the coronavirus has focused on all healthcare systems in the world and has dominated healthcare globally? Chronic diseases have been pushed to the background for a long time, changing the current epidemiological profile. Therefore, healthcare entities should implement the CSR concept in the current reality, relying on selected tools adequate to their activity profile.

Zalewska (2013, pp. 53–71) indicates that we are currently dealing with the fourth stage of the modern approach to public health. Attention focuses on the one hand on molecular and genetic epidemiology and the other – on social epidemiology. The three earlier stages were: the era of the sanitary movement (first half of the 19th century); the age of the theory of pathogenic microorganisms (from the second half of the nineteenth to the mid-twentieth century); the era of chronic diseases (second half of the 20th century). The current time of the pandemic clearly shows that the world is in the fourth stage, and especially there has been a dynamic development of clinical epidemiology using data sources for EBM – “evidence-based medicine”. This situation is essential for medical entities, for example, in the context of vaccination against COVID-19. Here, too, the role of socially responsible activities of medical entities in medical waste management (disposable masks, syringes, gloves, doctors’ clothes: gowns, coveralls) is indicated.

Ryć and Skrzypczak (2013, pp. 9–23) indicate the possibility of economic turbulence at all times. It will impact the condition of the healthcare sector in individual countries, the situation of sick people, healthcare beneficiaries, public finances, and disposable income of households. And here we have the coronavirus pandemic, which has had a significant impact on the economic life and condition of the health sector of all countries in the world. For this reason, the use of CSR tools by healthcare entities is justified and extremely helpful in their proper and safe functioning daily.

Ludzińska (2017, pp. 207–220) notes that enterprises’ implementation of the CSR concept is an essential and attractive argument for modern markets. In socially responsible enterprises, values such as transparency and transparency of financial operations, trust in relations between the company and its stakeholders, and CSR tools that favor building good relations with the internal and external environment are valuable. That is why, not

only in the conditions of the coronavirus pandemic, it is worth investing in management methods based on the principles of social responsibility to increase the value of medical entities, attract new patients and safely provide health services for society.

According to J. Synoweć, M. Robakowska, and A. Tyrańska-Fobke (2018, pp. 47–61), the concept of corporate social responsibility supports the healthcare sector in solving social problems, thus improving the image of healthcare entities and increasing their involvement in the life of the local community. The use of CSR policy by healthcare entities may become a competitive advantage in the health services market. This is particularly important in the coronavirus pandemic in the interest of potential partners in financial aid for medical entities requiring such support. Therefore, healthcare providers planning to expand should pay attention to social, environmental, and economic results.

Conducting healthcare entities in a socially responsible manner should be perceived globally as a key and strategic action. Because such a philosophy of action brings many benefits, contributing, on the one hand, to the development of society, and on the other – to environmental protection, not only in the local dimension. In times of commercialization, aggressive competition, and the COVID-19 pandemic, the fate of many healthcare entities may be uncertain. Already in 2013, Nojszewska noticed that against the background of the demographic trend and the costs of treatment, especially in the long term, it would be advisable to consider how to guarantee the availability of services and their quality on the side of public and private insurance, and take into account the new roles to be played by private healthcare entities in changing macroeconomic conditions, with a particular role played by financial constraints (Nojszewska, 2013, pp. 24–33). García-Sánchez and García-Sánchez (2020) point to the need to involve the private sector in the context of dealing with externalities resulting from the epidemic. The pandemic reality currently determines these conditions, and the part of the private sector in the healthcare system is increasingly visible and desirable. Therefore, it is necessary to educate management staff, invest in their development, to include CSR activities in the development strategy of medical institutions. Such an implementation of good practices will contribute to the development of the entity itself and build a positive image on the market and to the development of the local community and the environment.

The current global epidemiological situation impacts organizations in developing more thoughtful and innovative business models to contain the virus epidemic, thus contributing to more sustainable results (Babińska, 2020, pp. 9–20). According to He and Harris (2020, pp. 176–182), the crisis will accelerate the CSR development after the pandemic in the long run, as more and more companies are aware of their dependence on achieving a balance between profitability and harmony with various stakeholders.

Thus, the dilemma faced by healthcare actors will be how to effectively and adequately use CSR tools to achieve social, environmental, and economic goals and not whether to use the various instruments available at all.

Czajkowska (2020, pp. 45–62) believes that the changes caused by the COVID-19 pandemic contributed to the development of CSR. These sudden, unforeseen circumstances caused organizations to undertake various activities which created a positive image of them and supported society. This situation also applies to healthcare entities operating in a socially responsible manner to understand better and meet the needs and expectations of the local environment and entire societies globally. However, the priority of the activities of medical entities in the conditions of the COVID-19 pandemic was and still is to ensure the continuity of health services and take all measures to minimize the risk of illnesses of medical staff and patients using the services of a medical facility.

The results of a study by Anser et al. (2021) show that coronavirus cases escalate healthcare spending and reduce CSR efforts. At the same time, increasing coronavirus testing capabilities increase CSR efforts in terms of carbon damage costs. Therefore, the authors postulate that there is an urgent need to develop a sustainable health policy through international cooperation and assistance in CSR activities to improve the quality of the environment in various countries.

Asante-Antwi et al. (2021, p. 453) claim that the impact of the COVID-19 pandemic on corporate social responsibility is epochal. According to them, CSR strategies must be proactive to survive possible future potential unknown pandemics with the same ability to ensure a balance in the conduct of activities of various entities. For this reason, according to the author of the study, healthcare entities must create innovative and regular exercises to educate their employees and stakeholders so that they are more prepared and demonstrate the commitment needed to diagnose, protect, treat and rehabilitate all people at risk of the pandemic and other crises which may have an impact on the stability of the functioning of medical entities, and thus health systems in the world. Nowadays, many experts expect that the organization will be ethical and will not harm the environment in which it operates. In addition, the organization should protect the environment and ensure human well-being as its top priority. The organization is also likely to have a good reputation for doing something extra and giving back to the public. Therefore, it requires the organization to implement a proactive CSR strategy for the good of society (Bhardwaj, Gupta, & Kumar, 2021, pp. 169–186). Considering this, especially in the current pandemic conditions, healthcare entities should implement various CSR programs and join social campaigns for which helping patients is of the highest value.

A summary of the considerations made so far is in Table 1, which presents the list of scientific papers published in the 2020–2021 pandemic. The list of works includes the year of publication, the type of work, the author's

country of origin(s), the continent, and keywords appearing in the text. This summary showed geographic variations in the number of scientific articles published on the topic under the conditions of the coronavirus pandemic.

Year of publication	Kind of the work	Country of origin of the author(s)	Continent	Keywords
2021	scientific publication	Malaysia, United Arab Emirates, India	Asia	COVID-19, crisis, health system, pharmaceutical industry, vaccine
2021	scientific publication	China, Pakistan, Saudi Arabia	Asia	carbon damages, healthcare expenditures, COVID-19 cases, logistics activities, Corporate Social Responsibility, cross-sectional regression
2021	scientific publication	China	Asia	COVID-19, CSR, evolution, health, implication, public
2021	scientific publication	USA	North America	population health, COVID-19, social responsibility, health systems, health care delivery
2021	scientific publication	New Zealand, United Kingdom, Nigeria	Zealandia, Europe, Africa	Corporate Social Responsibility tools, frameworks, standards, ratings and indices, GRI
2021	scientific publication	India	Asia	Corporate Social Responsibility, corporate philanthropy, COVID-19
2021	book	India	Asia	Corporate Social Responsibility (CSR), the COVID-19 pandemic, stakeholder
2021	scientific publication	United Kingdom	Europe	Corporate Social Responsibility, COVID-19, governance, risk society, stakeholders, supply chain
2020	scientific publication	USA	North America	end of life care, health care education, health policy, medical education, medical humanities
2020	scientific publication	Israel, USA	Asia, North America	Corporate Social Responsibility, coronavirus, stakeholders, core competencies

Table cont.

Year of publication	Kind of the work	Country of origin of the author(s)	Continent	Keywords
2020	scientific publication	USA	North America	health privacy, health information exchange, COVID-19, coronavirus, COVID-19 research, HIPAA
2020	scientific publication	Poland	Europe	integrated reporting, healthcare entities, reporting, Corporate Social Responsibility, stakeholders
2020	scientific publication	United Kingdom	Europe	COVID-19, Corporate Social Responsibility, marketing, consumer ethical decision making, marketing philosophy, business ethics
2020	scientific publication	Poland	Europe	Corporate Social Responsibility (CSR), COVID-19, enterprise mission, pandemic
2020	scientific publication	Poland	Europe	Corporate Social Responsibility (CSR), COVID-19, social media
2020	scientific publication	India	Asia	biomedical waste, COVID-19 waste, food supply chain, food waste, plastic waste, solid waste management
2020	scientific publication	Malta, India	Europe, Asia	communication tools, Corporate Social Responsibility, CSR, CSR and healthcare, CSR communication, healthcare communication, healthcare organizations, healthcare systems, literature review
2020	report	Kenya, Japan	Africa, Asia	waste management, COVID-19 pandemic, healthcare waste, healthcare facilities
2020	scientific publication	Spain	Europe	COVID-19, Corporate Social Responsibility, altruism, CEO, stakeholder engagement, crisis
2020	scientific publication	USA	North America	healthcare ethics, COVID-19 pandemic, risk assessment

Tab. 1. Details of the scientific works published during the pandemic period cited in this article. Source: Own study.

Table 1 presents more than half of all scientific papers included in this article (51.28%) from the pandemic period (2020–2021). These are mainly scientific publications from various continents, including three works also from Poland. These works contain keywords considering the coronavirus pandemic, healthcare, and corporate social responsibility. The remaining research works before the pandemic are not in the table, but they are essential as they constitute the background of the study. As many as 94.74% of the authors in these publications come from Poland. However, this situation does not mean that there were no authors from other countries and continents during this period. The author of this article wanted to show the contribution of authors from Poland to the development of management and quality sciences, including authors from the journal *Management Issues*.

The article's author contributed to the development of the discipline by researching the role of social responsibility of medical entities in the context of the COVID-19 pandemic. The ongoing coronavirus pandemic requires further, in-depth analysis, and the presented approach to the topic contributes to reducing the cognitive gap in this regard.

7. Limitations

The critical analysis allowed me to identify the following barriers/shortcomings of the study:

1. Due to time constraints, it is impossible to analyze all available scientific literature on the problem under consideration.
2. Difficult access to various publications results mainly from paid access and the obligation to set up an account at portals containing publications important from the author's point of view.
3. It focused only on medical facilities, ignoring other healthcare units (e.g., budgetary units, research institutes, foundations, associations, or churches) that can successfully implement the concept of CSR during the pandemic.

The limitations mentioned above certainly impacted the overall picture of the situation and could have distorted the conclusions and practical implications. Therefore, this article can be treated as an initial diagnosis of the functioning of medical entities in the pandemic reality. Only one and a half years have passed since the outbreak of the COVID-19 pandemic. Hence it is not easy to assess the process of implementing the CSR concept in the health sector and to list all the social responsibility tools implemented during this period.

8. Conclusions and Practical Implications

The corporate social responsibility strategy now shows how business is developing and what directions it can follow to help solve the world's most significant global problems. The current global challenge is the COVID-19

pandemic, under which responsible healthcare actors should do everything possible to protect their citizens primarily at the regional level, promoting patient health and safety. The priority of healthcare entities' activities, especially in the coronavirus pandemic conditions, should be to ensure the continuity of medical services and take all measures to minimize the risk of illnesses of medical personnel and patients using the facility's benefits.

Healthcare entities whose mission, vision, and values go beyond patients and include many stakeholders and broadly understood social, economic, and environmental needs will win the future. Corporate social responsibility drives them, creates a competitive advantage, and builds a responsible entity's image. The health sector needs accountable and sustainable actions to understand better and meet the needs and expectations of the local environment and entire societies globally.

The article's main aim was to present the concept of corporate social responsibility as implemented by healthcare entities in the conditions of the coronavirus pandemic and the specific purpose, which was a review of the literature on corporate social responsibility, including healthcare entities, has been achieved. The author achieved both goals by studying 39 CSR literature items, Polish and foreign, including pandemic conditions. Scientific publications of authors from Poland before 2020 were the background of the study, complemented by scientific articles from 2020–2021, mainly by foreign authors.

Referring to the research problem formulated in the Introduction, the author, based on the considerations in this study, can conclude that the CSR literature review helped find a solution to the research problem by verifying the research questions posed. First, running socially responsible healthcare entities in the COVID-19 pandemic is an essential strategic action in the global marketplace. In addition, healthcare entities implementing the CSR concept in the pandemic conditions contribute to their competitiveness in the health services market. Their responsible functioning determines their image in the local environment. Therefore, social responsibility is a policy expected in the strategic planning and everyday practice of medical entities.

The critical analysis allowed the author to identify practical implications for healthcare managers in education, prevention, and cooperation with the local environment. For healthcare entities that want to implement the CSR concept in pandemic conditions effectively, there are the following areas to be developed:

1. Education – you can organize a talk for your patients on proper hygiene, including hand hygiene, the necessity to wear masks in public places and get vaccinated against SARS-CoV-2.
2. Prophylaxis – you can organize, for example, once a month or at irregular intervals, free follow-up visits for young people and seniors. Such action in the problematic pandemic will undoubtedly shape a positive image of the entity in the local environment.

3. Cooperation with local institutions – it is possible to cooperate with schools, libraries, and community centers to assist with vaccinations.
4. Supporting charity actions – you can join activities for the benefit of local communities, e.g., donating personal protective equipment (masks, gloves) to medical centers in need; providing meals for COVID patients or needy seniors isolated in their homes.

There is a need to implement CSR tools and solutions in the healthcare sector but at the managerial level. An important and apparently best approach to communication by healthcare entities would be a mixed approach, i.e., both digital and traditional. This implementation of CSR tools by medical entities should be carried out in sustainable healthcare, which, according to the author, is of crucial importance for the development of health systems in the world. In addition, there is a need to improve the green supply chain process and shipment of medical equipment to medical entities to reduce the spread of new coronavirus cases effectively. Healthcare entities' socio-economic and environmental responsibility is badly needed in the COVID-19 pandemic for healthcare professionals and stakeholders to deliver safe and healthy medical services.

Acknowledgments

This research received no funds.

References

- Almurisi, S. H., Khalidi, D. A., AL-Japairai, K. A., Mahmood, S., Chilakamarry, C. R., Kadiyala, C. B. N., & Mohananaidu, K. (2021). Impact of COVID 19 pandemic crisis on the health system and pharmaceutical industry. *Letters in Applied NanoBioScience*, *10*(2), 2298–2308. <https://doi.org/10.33263/LIANBS102.22982308>.
- Anser, M. K., Yousaf, S. U., Hyder, S., Nassani, A. A., Zaman, K., & Abro, M. M. Q. (2021). Socio-economic and corporate factors and COVID-19 pandemic: A wake-up call. *Environmental Science and Pollution Research*. <https://doi.org/10.1007/s11356-021-15275-6>.
- Asante-Antwi, H., Zhou, L., Xu, X., & Mustafa, T. (2021). Beyond COVID-19 pandemic: An integrative review of global health crisis influencing the evolution and practice of corporate social responsibility. *Healthcare*, *9*(4), 453. <https://doi.org/10.3390/healthcare9040453>.
- Babińska, D. (2020). Corporate social responsibility in time of pandemic. *Humanitas University's Research Papers Management*, *21*, 9-20. <https://doi.org/10.5604/01.3001.0014.8037>.
- Bhardwaj, A., Gupta, A., & Kumar, S. (2021). CSR as a stakeholder to the COVID-19 pandemic. In V. Kumar & G. Malhotra (Eds.), *Stakeholder strategies for reducing the impact of global health crises* (pp. 169–186). <https://doi.org/10.4018/978-1-7998-7495-9.ch011>.
- Blanke, M., & Gorynia-Pfeffer, N. (2008). *CSR – Kompendium. Organisationen in Polen und Deutschland und wie sie das gesellschaftliche Engagement von Unternehmen begleiten. Warschau: RKW*. Retrieved from https://odpowiedzialnybiznes.pl/wp-content/uploads/2008/06/upj_rkw_csr-kompendium2008.pdf.

- Crane, A., & Matten, D. (2021). COVID-19 and the future of CSR research. *Journal of Management Studies*, 58(1), 280–284. <https://doi.org/10.1111/joms.12642>.
- Cutter, C. M., Nelson, C., & Abir, M. (2021). Accountability to population health in the COVID-19 pandemic: Designing health care delivery within a social responsibility framework. *Population Health Management*, 24(1), 3–5. <https://doi.org/10.1089/pop.2020.0096>.
- Czajkowska, A. (2020). Impact of the COVID-19 pandemic on CSR activities undertaken by enterprises. *Cracow Review of Economics and Management*, 3(987), 45–62. <https://doi.org/10.15678/ZNUEK.2020.0987.0303>.
- Frączkiewicz-Wronka, A., & Laska, K. (2013). Selected characteristics of the performance evaluation of European health care systems – The perspective of the patient. *Management Issues (Problemy Zarządzania)*, 11(1(41)), 72–92. <https://doi.org/10.7172/1644-9584.41.5>.
- García-Sánchez, I. M., & García-Sánchez, A. (2020). Corporate social responsibility during COVID-19 pandemic. *Journal of Open Innovation: Technology, Market, and Complexity*, 6(126). <https://doi.org/10.3390/joitmc6040126>.
- Hawran, K., & Kowalik, J. (2017). Corporate social responsibility on the example of the healthcare sector. *Studies and Research of the FEM of the SU*, 47(1), 107–116. <https://doi.org/10.18276/sip.2017.47/1-09>.
- He, H., & Harris, L. (2020). The impact of Covid-19 pandemic on corporate social responsibility and marketing philosophy. *Journal of Business Research*, 116, 176–182. <https://doi.org/10.1016/j.jbusres.2020.05.030>.
- Iseron, K. V. (2020). Healthcare ethics during a pandemic. *The Western Journal of Emergency Medicine*, 21(3), 477–483. <https://doi.org/10.5811/westjem.2020.4.47549>.
- Jaskólska, A., Auguścik, A., & Cygańska, M. (2020). Integrated reporting in healthcare entities in the light of stakeholder theory. *Cracow Review of Economics and Management*, 2(986), 43–59. <https://doi.org/10.15678/ZNUEK.2020.0986.0203>.
- Lenert, L., & McSwain, B. Y. (2020). Balancing health privacy, health information exchange, and research in the context of the COVID-19 pandemic. *Journal of the American Medical Informatics Association*, 27(6), 963–966. <https://doi.org/10.1093/jamia/ocaa039>.
- Leoński, W. (2016). Instruments of corporate social responsibility in connection with the size of enterprises. *Economic Studies*, 254, 89–98. YADDA identifier: bwmeta1.element.cejsh-c44e1dd7-5d4e-46db-b1bb-b8aa1b542198.
- Łudzińska, K. (2017). Corporate social responsibility and enterprise value on the capital market. *Management Issues (Problemy Zarządzania)*, 15(1(66)), 207–220. <https://doi.org/10.7172/1644-9584.66.13>.
- Macuda, M. (2016). Corporate social responsibility – A new trend in hospital accounting?. *Studies in Economics – Research Papers*, 284, 76–86. Retrieved from https://www.ue.katowice.pl/fileadmin/user_upload/wydawnictwo/SE_Artyku%C5%82y_271_290/SE_284/07.pdf.
- Marom, S., & Lussier, R. N. (2020). Corporate social responsibility during the coronavirus pandemic: An interim overview. *Business and Economic Research*, 10(2), 250–269. <https://doi.org/10.5296/ber.v10i2.17046>.
- Maruszevska, E. W., & Szewieczek, A. (2016). Analysis of economic GRI standard disclosures in the context of management of healthcare entities. *Studies in Economics – Research Papers*, 300, 120–128. Retrieved from: https://www.researchgate.net/publication/317935583_ANALIZA_WYMIARU_EKONOMICZNEGO_RAPORTOWANIA_SPOLECZNEGO_GRI_W_KONTEKSCIE_ZARZADZANIA_PODMIOTAMI_LECZNICZYMI.

- Matysiewicz, J., & Sztangret, I. (2017). *Corporate social responsibility in healthcare. A value for customer approach*. Paper presented at the 8th International Research Symposium in Service Management (IRSSM-8), School of Business at Yonsei University, South Korea, Seoul. Retrieved from https://www.researchgate.net/publication/330798293_Corporate_social_responsibility_in_the_healthcare_A_value_for_customer_approach.
- Nojszewska, E. (2013). Changing environment of the health care system as a determinant of its future. *Management Issues (Problemy Zarządzania)*, 11(1(41)), 24–33. <https://doi.org/10.7172/1644-9584.41.2>.
- Noroozi, M., Zahedi, L., Bathaei, F. S., & Salari, P. (2018). Challenges of confidentiality in clinical settings: Compilation of an ethical guideline. *Iranian Journal of Public Health*, 47(6), 875–883. PMID: 30087874; PMCID: PMC6077627.
- Olanipekun, A. O., Omotayo, T., & Saka, N. (2021). Review of the use of corporate social responsibility (CSR) tools. *Sustainable Production and Consumption*, 27, 425–435. <https://doi.org/10.1016/j.spc.2020.11.012>.
- Pickell, Z., Gu, K., & Williams, A. M. (2020). Virtual volunteers: The importance of restructuring medical volunteering during the COVID-19 pandemic. *Medical Humanities*, 46, 537–540. <https://doi.org/10.1136/medhum-2020-011956>.
- Rudawska, I. (2013). Epidemiologic and demographic trends as a challenge for European health care systems. *Management Issues (Problemy Zarządzania)*, 11(1(41)), 34–52. <https://doi.org/10.7172/1644-9584.41.3>.
- Ryć, K., & Skrzypczak, Z. (2013). Health care financing in the turbulent global economy. *Management Issues (Problemy Zarządzania)*, 11(1(41)), 9–23. <https://doi.org/10.7172/1644-9584.41.1>.
- Sharma, H. B., Vanapalli, K. R., Cheela, V. R. S., Ranjan, V. P., Jaglan, A. K., Dubey, B., ... Bhattacharya, J. (2020). Challenges, opportunities, and innovations for effective solid waste management during and post COVID-19 pandemic. *Resources, Conservation and Recycling*, 162. <https://doi.org/10.1016/j.resconrec.2020.105052>.
- Singh, P., Dharwal, M., Alam, J., & Sharma, A. (2021). Corporate social responsibility in the time of COVID-19. *Turkish Journal of Physiotherapy and Rehabilitation*, 32(3), 5476–5479. Retrieved from: <https://www.turkjphysiotherrehabil.org/pub/pdf/321/321-660.pdf>.
- Skrzypek, A. (2015). CSR as a part of organizational strategy. *Research Papers of Wrocław University of Economics*, 378, 191–205. <https://doi.org/10.15611/pn.2015.378.15>.
- Synowec, J., Robakowska, M., & Tyrańska-Fobke, A. (2018). The possibilities of using corporate social responsibility in healthcare units on the example of hospitals. *Modern Management Systems*, 13(2), 47–61. <https://doi.org/10.37055/nasz/129510>.
- Szewieczek, A., & Maruszewska, E. W. (2016). Sustainability reporting – The challenge for health sector accountants. *Studies in Economics – Research Papers*, 284, 150–158. YADDA identifier: bwmeta1.element.ekon-element-000171456443.
- Tomaselli, G., Garg, L., Gupta, V., Xuereb, P. A., & Buttigieg, S.C. (2020). Corporate social responsibility application in the healthcare sector: A bibliometric analysis and synthesis. *International Journal of Information Systems and Social Change (IJISSC)*, 11(1), 11–23. <https://doi.org/10.4018/IJISSC.2020010102>.
- United Nations Environment Programme. (2020). *Waste management during the COVID-19 pandemic – From response to recovery*. Report. Nairobi. Retrieved from <https://wedocs.unep.org/bitstream/handle/20.500.11822/33416/WMC-19.pdf?sequence=1&isAllowed=y>.
- Zadros, K. (2015). Unconscious socially responsible medical staff behavior affects the development of relationships between the therapeutic entity and its surroundings. *Scientific Papers of the Silesian University of Technology. Organization and Management Series*, 83, 765–774. YADDA identifier: bwmeta1.element.baztech-8a2ab50e-96b4-4284-a976-b0f2cb473f8b.

- Zalewska, M. (2013). Analysis of selected indicators of public health in view of sustainable development strategy in the EU countries. *Management Issues (Problemy Zarządzania)*, 11(1(41)), 53–71. <https://doi.org/10.7172/1644-9584.41.4>.
- Zalewska, M. (2015). Limitations of the set of public health indicators monitored in the context of sustainable development. *Management Issues (Problemy Zarządzania)*, 13(2(53)), 247–260. DOI: 10.7172/1644-9584.53.15.
- Zalewska-Turzyńska, M. (2016). Quality of workers' life as part of reputational organization message. *Studies and Research of the FEM of the SU*, 43(2), 417–426. <https://doi.org/10.18276/sip.2016.43/2-39>.