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**IMPROVING AN INTEGRATED APPROACH TO MANAGING A  
MEDICAL ORGANIZATION**

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**Abstract**

The modern market of medical services requires managers and their deputies to take a single integrated approach to the management of a medical organization. If earlier, the main task of the clinic was accurate and timely diagnosis, which requires specific studies and existing modern diagnostic methods, as well as competent appointment and effective treatment of patients, today the functions and tasks of the clinic are expanding. The ability to adapt to changing market trends, to the requirements of customers, as well as to the actions of competitors, forces medical organizations to make independent decisions in terms of management and effective distribution of functions and tasks between the company's divisions. The management function, as well as the function of ensuring the smooth operation of the company, regardless of external conditions, forces medical organizations to make independent decisions regarding the distribution of responsibilities and ensuring control over their performance. Personnel selection, their qualifications, work experience, and ability to regulate the activities of individual divisions of the organization are not a complete list of skills that are required for applicants for positions that do not require medical education, but allow them to significantly influence the effectiveness of the company's activities. Setting company goals to be achieved in a certain period of time, it should be understood that guide all processes in the company need professionals with certain skills and knowledge, and seeking to achieve common goals of the company.

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## 1. Introduction

Modern trends in the management of medical organizations involve the integrated use of knowledge and experience in management, psychology, marketing, as well as continuous improvement of the approaches used to manage organizations as a whole. Insignificant, at first glance, deviations from the approved schemes can lead to unpredictable consequences, which, in the future, can result in conflicts and failures in the unified system of functioning of the organization. Inefficient management often leads to problems in the supply of medicines, to the work of personnel on modern equipment, to problems of interaction with patients and government agencies that control the activities of medical organizations in General. Using an integrated approach to managing all divisions of the organization allows you to find common ground for each individual element of the system. This, in turn, will allow you to identify the most productive moments in using the advantages of the entire system to achieve a single goal of the organization – high-quality and timely provision of medical services (Korzhova et al., 2019).

Taking into account the existing approaches to ensuring the economic effect of the functioning of a medical organization, we can identify the main trend in the planning and management of all medical organizations, namely, the complex relationship between all the structural elements of companies. Considering a medical organization as a single organism that can independently perform all the functions that provide an Autonomous existence in the market infrastructure, it should be understood that there are external factors that hinder the planned and rapid development of the company. For example, state regulation of medical activities, internal motives of consumer behavior, as well as the varying degree of readiness of a medical organization to meet changing market requirements, all this can have a significant impact on the effective and cost-effective management of the company. These circumstances should be taken into account when making management decisions and in order to achieve the goals set, the action program should be adjusted in a timely manner.

## 2. Problem Statement

Modern trends in the management of medical organizations, including the experience of foreign companies and commercial structures of domestic representatives of this business sector, we can distinguish a single pattern, namely, the managerial function of the head of a medical institution is divided into two parts. The first is the direct medical activity of the organization, which is directly the core of its activities and is evaluated from the point of view of state bodies and the population. Quality characteristics of the provided medical services, accurate diagnosis, appropriate treatment and its timely implementation-this is the main activity of the chief medical officer of the organization. The second important management function is to ensure the smooth functioning of the enterprise. Delivery of equipment, medicines, supplies; recruitment, training and training with staff; routing of patients in a medical facility; financial issues - all this is an auxiliary function that ensures high-quality provision of medical services to the population. Mutual complementarity and productive work of each of the areas will ensure the organization's leading position in the medical services market. Applying the concept of interaction marketing and a clear division of functions and responsibilities between the company's structural divisions will allow you to establish the most effective method of managing a medical institution.

By analyzing the current situation in medical institutions in terms of management, it is possible to identify a number of significant problems that ultimately reduce the effectiveness of the management of a medical organization. So, in medical institutions that have a hospital, the Manager is forced to find a balance between effective treatment of patients, search for optimal options for purchasing and delivering medicines, and implementation of all existing regulatory legal acts that regulate various aspects of the functioning of a medical institution (Kirillova et al., 2019).

A patient applying for medical care for a specific disease under a mandatory health insurance policy does not always agree with the list of manipulations and medication provided for a specific service. Paying for medical services in full is not always the best option for patients. At the same time, a part of the service, separate elements within a single service, or payment for a separate drug supply would be the best option from the point of view of both the patient and the clinic providing medical services. However, the legislation regulating the provision of medical services in the system of compulsory medical insurance does not allow dividing the service into its components and partially providing medical services in the system of compulsory medical insurance. Moreover, a medical institution cannot charge only for the provision of medicines for a particular medical service, since this will be a resale of medicines, and the medical institution provides medical care, and does not resell medicines. Thus, the head of the organization is forced to find a balance between high-quality treatment of the patient and saving his money. Since this decision is individual in each case, and the Manager does not have the opportunity to study such cases in detail, there is a need for deputies who would take on some of the issues and make decisions within their competence. It turns out that in fact, all issues are resolved not by the Manager alone, but by competent employees who have special education, experience in the relevant work and, accordingly, are responsible for certain aspects of the problem. The result of such decisions and interactions between structural divisions is the effect of an integrated approach to company management, regardless of its scale. Respect and mutual understanding, the absence of conflicts and disputes, all this forms the basis of competent leadership and effective management.

### **3. Research Questions**

How can you achieve a result that would help you gain a large market share if you have been on the market for a long time, using modern technologies and highly qualified personnel? Why can't a medical organization that has a large enough potential ensure full utilization of its production capacity? What motivates consumers of medical services when they decide to choose a particular medical organization? How can you influence this choice so that you don't have to be Intrusive, but at the same time achieve your goal? Is it possible to retain customers and, by performing the main medical function, achieve both a good location and profit for the company? Why do consumers often choose their work and career over their health? What should be done to improve the customer's perception of the company's medical services? How can we create consumer expectations so that they are not overstated, but at the same time have a positive impact on the consumer's desire to take their health more seriously? All these issues have been bothering medical corporations for a long time, both in the public health market and in the private medicine market (Melendez & Gracia, 2019). Since most of the costs fall on the source of income from paid services, and this is a decent salary for doctors, and the purchase of new equipment, and the repair and improvement of

premises, and the necessary medicines, and much more that is necessary in the daily activities of a medical organization.

#### **4. Purpose of the Study**

The business processes that take place in a medical company, in General, do not differ much from the same business processes in companies that are not related to the health sector. There is also a process of searching for clients, concluding contracts, and creating optimal conditions for increasing customer satisfaction. The only difference is that the very process of providing medical services affects the most important and important thing that a person has – their health. Making a choice in favor of a particular organization, each individual consumer decides for himself what is most important for him-the qualifications of doctors, new modern technologies, high - quality and updated equipment, external factors that ensure the provision of services, or something else that is purely individual for each person. Depending on the severity of the disease, depending on the time that the client has, and, of course, depending on the available financial resources, the consumer makes his choice. Although not always, financial opportunities are a key factor in the choice. Otherwise, how can we explain the fact that people with limited resources choose a paid dental clinic, and those who have sufficient financial resources go to be treated under a mandatory health insurance policy? It is necessary to understand what and how they are affected and use this knowledge in the process of managing a medical organization.

#### **5. Research Methods**

When conducting research in the field of effective management of a medical organization, it is important to choose the right experts who can objectively assess the strengths and weaknesses of a medical company. Such experts are usually specialists from among the medical and other personnel, representatives of the management team, as well as representatives of third-party organizations, which, in turn, interact with several medical companies. The assessment of health care institutions ' management activities by experts from third-party organizations is the most objective and correct. Comparison of some indicators, such as the growth of clients in the clinic, the increase in demand for individual services, the number of positive reviews and offers – all this is an indicator of effective management of a medical institution. The starting point for the research can be considered a survey of experts on the presence and significance of individual elements in the management of the company's divisions, their effective use and monitoring of performance and results of activities. Identifying the strengths and weaknesses of an organization, identifying clear advantages, and evaluating weaknesses and risks is the main task that research participants set for themselves. Only the results of a comprehensive assessment of individual indicators, their comparison with similar results of third-party companies that provide services in a similar market, can be used to judge the results of a medical clinic.

It should be taken into account that the evaluation of the company's performance in medical activities should be carried out on all seven elements of the marketing mix, which generally determine the planning and effectiveness of the medical company's activities (Pletnev & Barkhatov, 2016). The provision of a range of services, its range and pricing should be formed not only under the influence of their own resources, but also taking into account the requirements that society as a whole imposes on the medical

market. It should be understood that consumers of medical services make demands not only on the quality of the medical service itself, but also on the external environment that contributes to the most complete and high-quality provision of it. It is impossible for the consumer to fully understand how the planned service was provided, since the result will be noticeable only after some time, but physical reinforcement will allow you to clearly imagine the level of quality that the clinic claims. External attributes are a kind of symbols or attributes of the level of development of the medical organization that was declared when forming consumer expectations. In this regard, it is the feedback of the company's customers, their opinions after receiving the service, taking into account their requirements and preferences, wishes and discontents – all this is important material in the research process. The data obtained as a result of a survey of patients after receiving the service will help to identify weaknesses in the organization that are visible to the end user, but may not be seen by experts, or do not consider them significant. In any case, such circumstances should be taken into account in the process of developing an optimal management model for the company.

## 6. Findings

Evaluating the data obtained as a result of the research on existing approaches to the organization and management of the company, you can notice a single pattern: all management decisions are made regardless of the requirements and trends of market development. Based on the data obtained from a survey of consumers of medical services, the main problem in the management of a medical organization is the inconsistency of actions of all divisions of the company, the lack of mutual complementarity of services and saving time for both medical personnel and the patient who came to the appointment. In contrast to budget healthcare, private medicine responds most flexibly to the requirements of patients and the market as a whole. Since medical corporations do not exist outside of society and do not operate separately from market trends and environmental factors, it should be understood that the subjects and forces surrounding the company often have a significant impact on the development of the company as a whole, and sometimes on its existence in the medical services market.

Managers' lack of desire and ability to manage, taking into account external factors, leads to an outflow of patients, neglect of individual patients' cases, and dissatisfaction with both the patients themselves and the inspection bodies. A change in the situation is possible only if the company focuses not only on its own capabilities and resources, but also takes into account the changes and trends that are taking place today in society. Modern trends dictate their own rules not only in terms of treatment methods and the use of an updated database of medical equipment. Current trends are primarily taking into account the limited resources of the consumer, namely time resources. The consumer is willing to overpay for the provision of medical care is not so significant amounts, if, at the same time, he will save his personal time, get the full range of services, or pass the examination and treatment at a convenient time for him.

A lot of consumers are willing to postpone going to the doctor even if there is a critical situation: high fever, repeated pain, or other symptoms that indicate a malfunction in the body. This circumstance is dictated by the uneven workload of working hours and the reluctance to give up the income received in favor of spending time waiting for a doctor's appointment. In this situation, medical organizations do not fulfill their main task-to provide high-quality and timely medical care to patients, to prevent serious consequences from untreated diseases, to ensure prevention and a comprehensive medical approach to

diagnosis and treatment. The way out of this situation can be considered the process of organizing working hours by doctors, working out a flexible duty schedule, including evening hours, as well as weekends and holidays (Prokhorova, 2016). The need to adapt all the resources of a medical company to the requirements of the market is the key to the successful operation of the enterprise.

Creating a sustainable demand for a healthy lifestyle is impossible without creating conditions to ensure it. Slogans and calls for taking care of their own health, healthy nutrition, conducting systematic examinations and diagnostics, all this will not have any result until the consumer believes in the reality of receiving medical care at the time and under the conditions that were originally announced to them. If a medical clinic plans to exist for a long time in the market of medical services, develop and grow, then it needs to listen to the expectations of its patients. And only in this case, when consumers feel a high degree of satisfaction with the service provided, the absence of negative aspects and the timeliness of its provision, they (the consumer) can become an adherent of this medical institution. No generation can visit the clinic if the medical service is provided effectively. And each subsequent generation can bring something new to its development, to the effectiveness of its functioning and the creation of long-term and stable profits for the company and increased satisfaction for the patient.

## 7. Conclusion

The key findings of the evaluation:

- every medical organization should use a comprehensive approach in managing its activities;
- all structural divisions of a medical company should be interconnected and complement each other;
- when planning the company's activities, it is necessary to take into account current trends and trends that are constantly changing;

it is necessary to consider strengths and develop them, and also to neutralize the negative impact of the weak aspects of the company, to try to improve the activities based on the risk potential;

- it is important to listen not only to your own ideas and desires, but also, first of all, to your customers, take into account their wishes and requirements;

- time is the most valuable human resource that needs to be protected and planned by a medical organization taking into account this circumstance, if the company strives to fulfil its most important function – ensuring the health and quality of life of the population.

If the company is limited in its own capabilities and does not have sufficient resources to provide its patients with high-quality medical services, it must either narrow the market for services provided, or enter into contracts with third-party organizations, which in turn will provide the necessary assistance in providing comprehensive medical services in a timely and qualified manner. Future research in this area should focus on identifying the strengths and weaknesses of organizations and allocating the company's resources in such a way that the company's strengths lead the market, and weaknesses are constantly monitored and significant efforts are made to smooth them out and reduce their negative impact on the company. As a result of this work, it is possible to identify common trends and patterns in the development of medical companies, it is possible to determine the prospects for the development of companies and develop a comprehensive approach to the management of a medical organization. Modern management

tools promote a unified, holistic and organic approach to management, taking into account customer requirements, market trends and development prospects.

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