

Private Healthcare Services: Possibilities for Effective Communication between Patients and Medical Staff

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ABSTRACT

The present-day market of private healthcare services shows active development, becoming streamlined and consolidated. As a result, the competition between different medical centers and clinics has become more complicated. Technologies, equipment and staff proficiency, which have just recently been considered the key competitive advantages, are losing their importance now. At private healthcare organizations, much attention is paid to the customer experience which is believed to be another essential part of medical services in addition to the effectiveness of diagnostics and treatment.

Key words: private healthcare organizations, customer experience, organizational method, efficiency.

INTRODUCTION

Since a medical organization is rather complex in its structure, the task is to provide not just medical services to the patients, but the best customer experience possible. Internal policies and rules of conduct applied within an organization may be well known to its staff, but not to the patients, especially those having their first visit, who can be unaware of how the organization operates and what functions it has.

Is it possible to improve the existing customer experience system of a medical organization and, if yes, what organizational methods should be applied to improve its performance?

METHODOLOGY

To achieve this goal, using formalized and non-formalized methods, a study was conducted of the possibility of optimizing the service system that has developed in a medical organization, taking into account the appropriateness of using specific organizational mechanisms. An unformalized analysis assumed the allocation of blocks of internal documents governing the after-sales service of patients in the studied positions, in accordance with the purpose of the analysis. A formalized analysis of the documents included in the study is based on a comparison of individual quantitative characteristics of the information presented in the standards of patient care.

RESULTS/ DISCUSSION

It should be noted that patients face real difficulties in planning or fixing an appointment. Besides, the human factor should be taken into account. For instance, the reception staff may leave out some information which seems obvious to them, but can be unknown to the patient. Let us mention several organizational methods which help build the customer experience system to factor in the needs of the staff and patients and facilitate performance of the medical organization.

Customer Experience Management in a Medical Organization Using Internal Policies. Internal policies

belong to internal corporate documents of an organization. Their primary task is to regulate working processes, ensure reasonable working times and improve quality and performance within a medical organization. Besides, these policies should comply with the applicable healthcare legislation and be binding upon all members of the treatment and care staff in each structural unit of the organization.

What do these policies cover? For example, they can specify the procedure for applying to the medical organization, guidelines for rendering medical services, procedure for interactions between patients and doctors, rights and obligations of patients, procedure for obtaining information about the state of health by the patient or their legal representatives, procedure for issuing medical documents; working schedule of the organization, hours for receiving visitors by the management, guidelines for settling conflicts between patients and the medical organization, list of services and prices as well as details on provision of the medical services, liability for violations of the policies by patients or the medical organization; FAQs with answers for effective communication with patients.

How can the policies facilitate communication with the patient? As experience shows, providing the necessary basic information to patients saves time that would be otherwise spent on inefficient communication of the medical and reception staff with the patient. Excerpts from the policies concerning the patient's conduct in a particular area of the medical organization may be displayed where appropriate. In a doctor's office, for example, it may be reasonable to have the excerpt which specifies the procedure for delivering medical services and the rules for effective communication with the patient.

An additional function of the policies is settling conflicts between the patient and the medical organization's staff. The staff, for example, may rely on the specified procedures showing how to act if the patient is late for an appointment, respond to the patient's claims and behave as the medical staff in general.

Is it necessary to familiarize patients with these policies? What is their benefit for the patients? In order to

simplify the process of effective communication, it is better to request that all patients read the policies at all times. The policies may be displayed at places easily accessed by patients, e.g. on the organization's website, at the reception desk, on the information stand or in a special file kept in the waiting room. The policies explain where and how the patient can book an appointment, what documents they need to have on hand, what they should tell the doctor during the appointment, etc. They also specify the maximum waiting times for medical services, since compliance with the appointment time standards is a key evidence of better staff performance, with the policies partially regulating to the process.

Communication Management in a Medical Organization Using Medical Information System: The introduction and use of the Medical Information Systems in today's healthcare is seen as mandatory for effective performance of any medical organization, whether public or private. The available Medical Information Systems have been initially designed for doctors and managers from top to bottom, being flexible enough and offering almost an unlimited number of options. This is a very important feature given that the overall healthcare system and its constituent medical organizations, including their permanent staff, technologies and equipment, are changing rapidly. Modern healthcare makes it possible to quickly adapt to any changes, for example, by substituting a doctor, altering his/her work hours, analyzing the incoming information, ensuring the necessary amount of work for the staff and managing communications effectively. The Medical Information Systems enable the staff of a private medical organization to balance its daily work load, reduce the amount of documents to be filled in, ensure continuity and consistency of medical care and increase the efficiency of medical services. Another advantage of these systems is that they ensure better treatment results, patient data safety and cost-efficiency. The Medical Information Systems make it possible to communicate with patients at the reception desk and send out reminders of an appointment, while saving both time and effort of the staff. An electronic medical record of the patient is a configurable, secure and functional solution bringing medical services to a higher level of quality.

Many Medical Information Systems can automatically generate contracts and service bills, which prevents time wastes during provision of services and improves loyalty of the patients. Therefore, the Medical Information Systems ensure not only communication management in a medical organization, but also transparency of all related processes.

Standardization of Processes: The availability of standards is a reliable indicator of high-quality customer experience. The patient must be confident that, upon application to the medical organization, they will receive excellent services and full attention at all times. The standard on delivering customer experience by a private medical organization is a sequence of easy-to-understand, clearly communicated and mandatory rules which regulate the staff conduct, identify the level of customer experience and promote a positive image of the organization.

Standardizing documents which ensure a completely different level of management in any medical organization,

public or private, is extremely important in its day-to-day operations. An electronic medical record of the patient, reports made by doctors or medical committees, and other internal or external documents should comply with these standards and be filled out in the same format and manner. As experience shows, no modern private medical organization can operate without skilled staff, automated internal processes or the IT infrastructure. Of course, they require sufficient financing, but pay off well. The information can be transferred without distortion only when all healthcare practitioners – doctors, nurses and assistive medical staff – understand each other. For this reason, continuous staff training, monitoring of knowledge and skills, certification and mentoring of the staff should be done on a regular and permanent basis. This is facilitated by electronic workflow, with data duplicated in the patient's medical record. Thus, any issues or problems concerning communication in the organization are resolved using the original data source.

Customer Experience Trainings for Medical Organization Staff, Including Trainings on the Internal Standards: No effective strategy of corporate development can be implemented without involvement of the staff into all related processes. To improve the customer experience and loyalty by making interactions with the patient more efficient, it is necessary to organize special staff trainings to improve their qualification. The goal of such trainings can be teaching doctors to establish effective communication and a relationship of trust with the patient, properly present medical services depending on what the patient needs and can afford, and explain the pricing policy of the medical organization. These trainings will help the staff to considerably improve the customer experience, especially in the Customer as Patient perspective.

Education or Information Booklets: Can we call this measure effective if it offers only one-way communication with the patient? The booklets issued by a private medical organization can be divided into several categories. An education booklet contains only a minimum of the necessary information. Its task is not only to support effective communication with the patient, but also to provide the latter with an illustrated material about certain health problems and their possible solutions. The booklet can specify services of the medical organization, prices and criteria for the guaranteed quality.

If categorized as an advisory material, the booklet can describe possible signs of discomfort, methods for the prolongation of the effect of treatment, disease prevention, rehabilitation, etc.

The task of persuasive booklets is mostly psychological. For example, it can inform patients about the importance of a private doctor appointment, regular health checks, relationship between the price and quality of treatment, attention to medical care guarantees, etc.

The booklets are usually uniform in their structure. The recommended chapters may include symptoms of diseases or health disorders, main tasks of doctors upon manifestation of these symptoms, specifics of interaction between the patient and the doctor, explanations about the need for prior consultation, information about modern methods, technologies and medical materials used for treatment by the medical organization, information about

guarantees and cases when they are demanded and maintained, explanations about the prolongation of the effect of treatment, etc. It is important to remember that transparent relationships between the medical organization and the patient are based on the communication with the patient.

CONCLUSION

However, achieving effective customer relations in a medical organization may face some risks, which can be avoided by factoring in the medical practice specifics, strategic decisions of the management and the focus on high quality of medical services. One of the ways to improve the efficiency and quality of medical care is to introduce the risk management system, which helps identify accidental events that cause physical and moral damage to the organization, its staff and patients, assess consequences of such events and develop counteraction tactics to decrease their occurrence.

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