

**Ministry of Health
National Centre for Public Health and Analysis**

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**NEED FOR MARKETING CULTURE
AS A MANAGEMENT FUNCTION
IN HOSPITAL MANAGEMENT**

AUTHOR'S REFFERAT

THESIS

For the acquisition of an educational and scientific degree

Doctor

Scientific Leader:

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1. Introduction – topicality and importance of the problem

National health systems in the modern age are undergoing permanent reform. The problems of health reforms are diverse, but the leaders are of a management and organizational nature. It concerns fundamental organizational changes that affect not individual aspects and sectors, but the overall structure, regulatory basis and management of the health system.

Each organizational change in the health system is manifested by three basic types of change - a change in the mission, a change in funds (methods) and a change in organizational culture. In this context, the need for a marketing approach as an element of the new management culture in the general governance process of healthcare, and in particular in the hospital sector, is growing.

In recent years, with the introduction of market mechanisms in healthcare, the importance of marketing comes from its very nature and mission – in the conditions of the market, it is responsible for establishing, anticipating and effectively meeting the needs and requirements of the client (in the need), respectively of patients in the medical sector of the health system.

The scientific literature makes it increasingly clear that today the backing of marketing is not only goods and services, but also people, territories, ideas, companies, knowledge, information technology, etc.

According to the modern vision, marketing, in addition to specific management technology and fine-tuning procedures, is also a cultural phenomenon. A close bureaucratic understanding of marketing as advertising should be overcome and used throughout its wide range of opportunities and methodological approaches.

2. Purpose, tasks and methodology

The methodology of the study proceeds from the vision that in healthcare marketing is a prerequisite for a new organizational culture specifically in the hospital sector and for more effective management decisions of hospital management. In this broad context, marketing should be analysed as a cultural phenomenon – a marketing culture of the management team and hospital staff, which plays the role of a specific resource of the hospital in modern market conditions and in the increasingly complex competitive environment in the medical sector.

2.1. Purpose and tasks

Purpose: Based on a specific literary and empirical analysis of the level of marketing culture and awareness of management and medical staff, the growing need for more efficient use of marketing as a factor of effective management in the hospital in the interest of improving the quality of hospital activity in modern market conditions is based.

In order to achieve the objective pursued, the following main tasks are set:

1. To provide a literary overview on the problems of marketing in hospital activities.
2. Analyse the specific role of the marketing approach in healthcare.
3. To analyze the results of a study of marketing culture in a public and private medical institution.
4. Compare the analysis of marketing culture in a public and private medical institution.
5. To prepare proposals for more efficient use of marketing as a factor of effective management in the hospital with a view to improving the quality of hospital activity.

2.2. Object and units of observation

The subject of the study is the marketing culture in hospitals.

Technical units of observation with two public hospitals and two private hospitals in the capital, inadvertently selected.

Logical units of observation are: every second member of staff in the hospital (inadvertently selected) – doctors, nurses and administrative staff and hospitalized patients from the 4 hospitals.

Observation time - the first week of December 2019 and the first week of February 2020.

2.3. Signs of observation

The signs of observation are contained in the two survey cards. The analysis will focus on the following signs:

- Information of the respondents about the nature and role of the marketing approach;
- Availability of information about the health needs and the demand for hospital care by patients, as well as their preferences;
- Difficulties in using the marketing approach;
- Implementation of competitive analysis;
- Public awareness of the conditions and capabilities of the hospital, its structural units and the quality of medical care provided.
- Sources of information about the specific hospital.
- Preliminary awareness of patients before hospitalization about the conditions and capabilities of the given hospital.
- Presence of target contingents of real and potential patients.

2.4. Methods for collecting, processing and analysing information on

The study involved 306 hospital staff (doctors and nurses - 206 from two public hospitals and 100 from two private hospitals) and 340 patients treated in these hospitals (240 in public hospitals and 100 in private hospitals).

The following basic methods are used to dial and process the information:

- Documentary - analysis of available official documentation.
- Sociological – conducting a direct individual anonymous survey.
- Statistically – the data were processed with computer programs STATGRAPHICS and EXCEL. H(a) the purposes of the analysis are used alternative, variational, parametric analysis (t – Stewedent test), non-parametric analysis (χ^2 – Pirson test), correlation and graphical analysis. The statistical value of the differences is determined at $P < 0,05$.

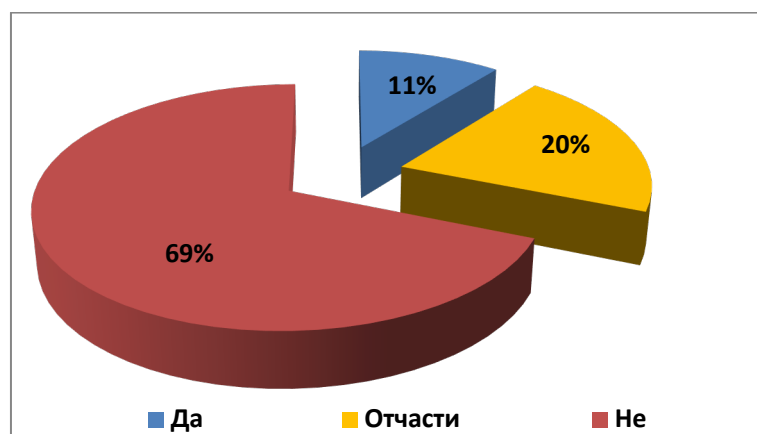
3. Analysis of results

The study involved 306 hospital staff (doctors and nurses) - 206 from two public hospitals and 100 from two private hospitals, as well as 340 patients treated in these hospitals (240 in public hospitals and 100 in private hospitals).

3.1. Results of the public hospital survey

Data on the need for a marketing approach in the activities of the department show that a fairly small number of respondents are considered informed or partly informed - 64 (31.1%) in this respect (Fig. 1). This low awareness is a consequence of the still rare use of the marketing approach in the activities of the hospital.

Fig. 1. Assessment of the awareness of medical staff in public hospitals about the marketing approach (%)



Specific marketing awareness refers to its purpose, function and benefit.

Table 1 presents the assessment of medical staff for the purpose (benefit) of the marketing approach. There is a significant diversity of opinions and assessments. When asked "What would be the benefit of a marketing approach to future activity?" according to one-third of those surveyed, it was useful for analyzing financial performance and, according to less than a third, for a fuller range of current and sweaty patients.

Tabl. 1. Assessment of the usefulness of the marketing approach

Answers – benefit from the marketing approach	Number
To develop strategies	16
To improve the quality of medical care	14
For long-term planning	17
To analyse the financial results	51
For public relations	10
To increase patient satisfaction	21
For more objective criteria for pay for work	28
For evaluation of information systems	25

To improve staff qualifications	20
Other	6
Everything	173

Note: The absolute number is greater than the number of surveyswounded individuals, since there are more than one possible answer to this question

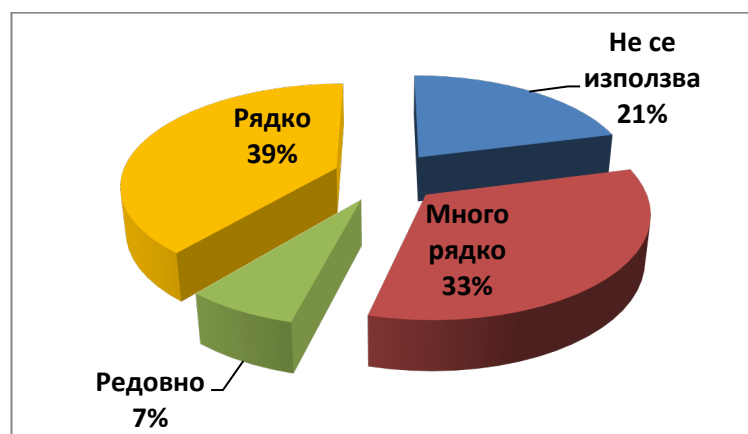
These data show that the view of respondents for the purpose of marketing is quite diverse and to some extent inadequate. A significant proportion of them attribute to marketing functions that are not inherent to it, for example, to analyse financial performance, to form more objective criteria for the pay of staff or for the analysis of information systems, which are not primarily inherent functions of marketing.

At the same time, a minimum number of responses have been received for a particularly typical function of measures – public relations (only 10).

Obviously, it is necessary to improve and substantially expand the awareness and awareness of medical staff in the future of the usefulness of a marketing approach in the context of an implemented market mechanism in the management and financing of the healthcare sector.

Analysis of the data on the degree of use of marketing in individual stationary structures shows that according to the majority of respondents, the marketing approach in the hospital is rarely or at all used. This is a characteristic picture in medical institutions in general, which is due to the long-standing underappreciated of the possibilities of marketing for the effectiveness of the activity.

Fig. 2. Degree of use of marketing in individual stationary structures (%)



In addition, it is considered that there are certain difficulties in using marketing in the department's activities without being able to specify these difficulties.

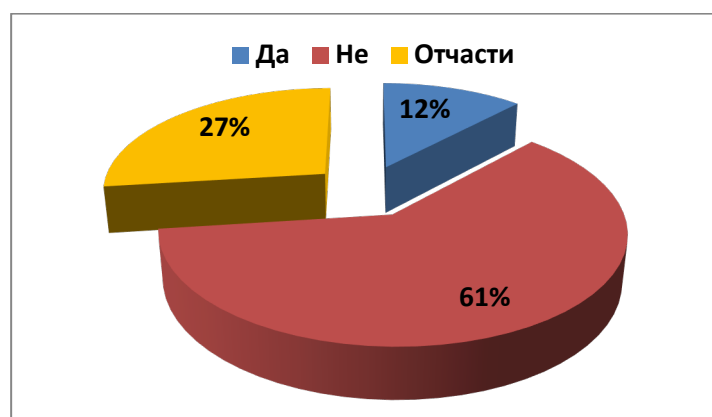
This testifies that it is necessary to a certain extent to increase the marketing culture of medical staff.

Table 2. Difficulties in the use of marketing in the activities of the ward

Answers	Absol. Number	%
There is a significant	180	87,4
There are medium-sized	13	5,8
There are, but poorly expressed	9	4,4
No	2	1,0
Everything	206	100,0

An important element of marketing is the competitive analysis that is essential for the management of the hospital. Only 12% of respondents responded that such an analysis based on information about competing medical structures is used -real and potential, public and private, 27% believe that competitive analysis is used in part and 61% of respondents respond that no such analysis is used at all (Figure 3).

Fig. 3. Use of competitive analysis in management (%)



The lack of competitive analysis in management is a serious weakness in hospital management.

In this context, it should be clearly and categorically emphasised the place and role of competitive analysis as a necessary element in hospital marketing, as well as to specify the answers to a number of specific questions: are there a large number of competitors, is there a risk of new competitors appearing, is it easier to access these competitors for patients, what is the quality of the activity of these competitors? , do these competitors have newer technologies, etc.

In the context of an implemented market mechanism, it is important that both the management of a hospital structure and the staff have a constant sense and awareness of the presence of other competing structures.

In the survey, special attention is paid to the information available to the search for medical care, respectively. In this respect, it is particularly important to look at the relative share of unmet inpatient medical care needs with a view to expanding the operation of a ward in the future.

The problem of unmet and unmet medical care needs was identified in various screening studies. A large-scale presentation study in Bulgaria more than 30 years ago found that in the structure of the total (total) morbidity of the population a very high percentage (55%) were unregistered diseases, and

only 45% were diagnosed and registered and therefore subject to medical activity. This shows the extraordinary importance of hidden unrecorded morbidity, reflecting the huge percentage of potential patients who are not subject to appropriate medical activity.

Infact, some of the respondents considered that there are unmet medical needs that are not currently subject to their activities, but may cover in the future and according to 11.3% there are no unmet needs in their specialty or do not have such information.

Statistically, we found a moderate correlation between person awareness of seeking medical care (health needs) and their view of unmet health needs (medical services).

As a general finding, regardless of the level of patient awareness, we suggest that there is an iceberg of health needs, i.e. a certain percentage of health needs remain objectively unmet and should be targeted at the future marketing activity of the hospital. This is clearly apparent from the data in Table 3 and Figure 4.

According to 1/5 of the medical staff surveyed (21.2%) there is a significant volume of unmet health needs of patients who may be potential patients in the future. According to 46.6% of respondents, there is a limited volume of unmet health needs of patients, who can also be potential patients of the hospital, albeit in a more limited volume.

It is obvious that, in the context of the data presented, significant broad prospects for future activity are emerging for the hospital if these contingents of patients with unmet health needs are covered.

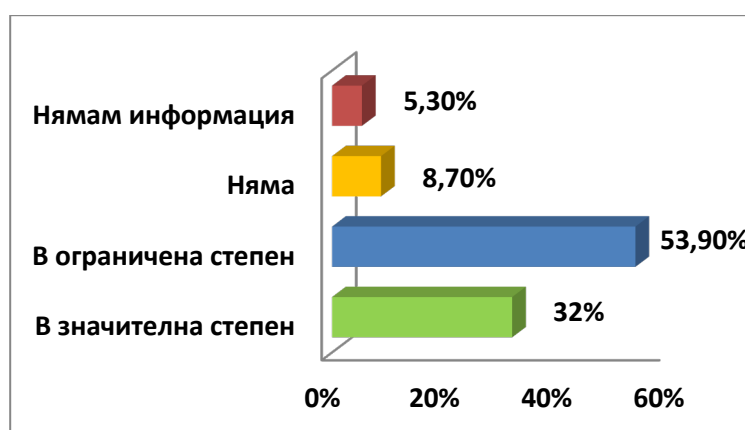
The data in Table 3 show an objectively credible opinion of medical staff on the existence of unmet medical care needs, respectively, the presence of a significant percentage of potential patients, and the contingent remains currently unknown in the hospital sector.

Table 3. Opinion on unmet needs as an object for future hospital activity

Answers	Absol. Number	Percentage
There is a significant	66	32,0
There is a limited volume of	111	53,9
No	18	8,7
I have no information	11	5,3
Everything	206	100,0

This, on the one hand, reflects a certain shortage of inpatient care for the contingent in need and, on the other hand, reflects the lack of an effective link and coordination between hospital and outpatient care. This issue is important because it is directly relevant to the need for a more justified future activity with so-called targeted contingents in need of specific hospital care.

Fig. 4. Presence of unmet medical care needs as a subject for future activity (%)

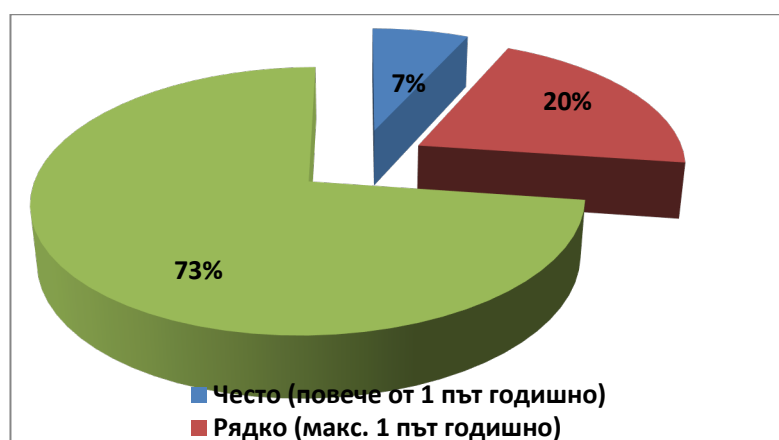


In marketing terms, a very high level of interest is the role and level of mutual awareness and interaction between the hospital and outpatient sectors. Data show a fairly low level of interaction between hospitals and doctors in the outpatient sector – DC, medical centers, personal doctors, etc.

This fact in organisational and management terms deserves special attention, as it significantly clarifies one of the reasons, on the one hand, for unmet needs for inpatient care and, on the other hand, for increasing overhospitalisation.

This two-way deficit of interaction between the hospital and outpatient sectors deserves special attention in the context of the marketing approach in hospital management.

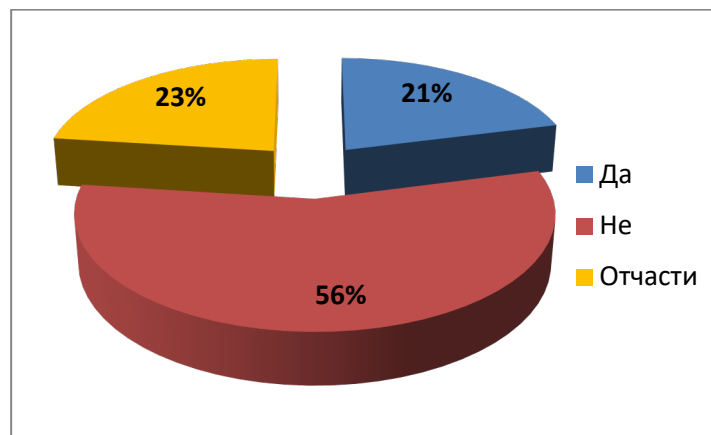
Fig. 5. Relationship between hospital and outpatient sector



Nearly 3/4 of the respondents said that no meetings and seminars were held with doctors from the Ministry of Health, DKC and ALP for interaction with them and for health services offered by the hospital. Only 6.8% (14 persons) consider that such meetings are held often - at least once a year (Fig. 5).

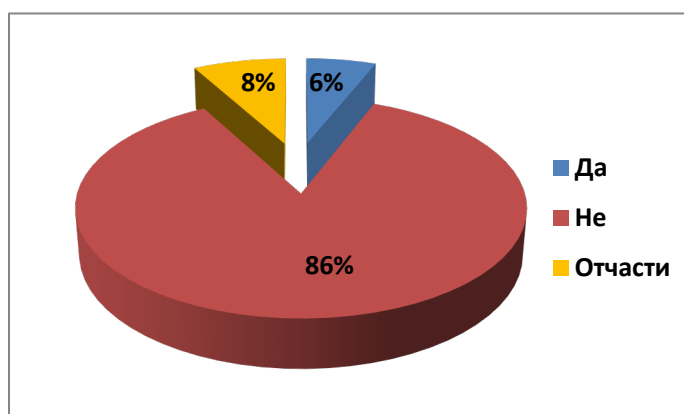
The internet's capabilities as a means of providing widely available information about the health services offered, answering questions and advice to patients were used by 43 respondents (20.9%), partly by 47 individuals (22.8%).

Fig.6. Use of the Internet as an information tool for the public and for patients (%)



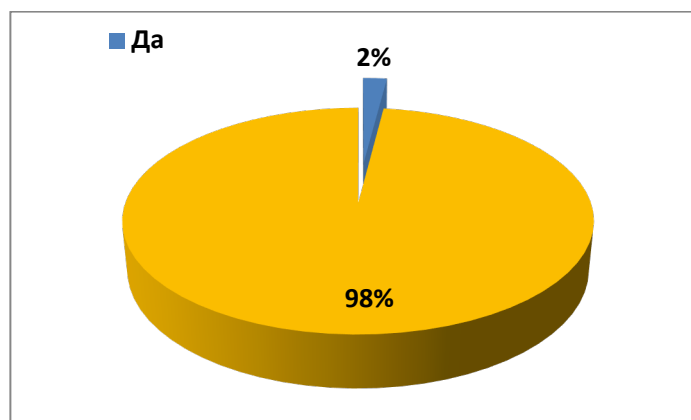
Of all the respondents, only 12 said that anonymous surveys were conducted about patients' preferences and satisfaction with the quality of their medical care (5.8%) and the majority - 177 persons replied that such were not conducted (85.9%) – Fig. 177. 7.

Fig.7. Conducting patient surveys (%)



Of the 206 individuals, only 5 attended health marketing courses and seminars – 2%.

Fig. 8. Visiting health marketing courses and seminars (%)



Data on patient opinion in public hospitals

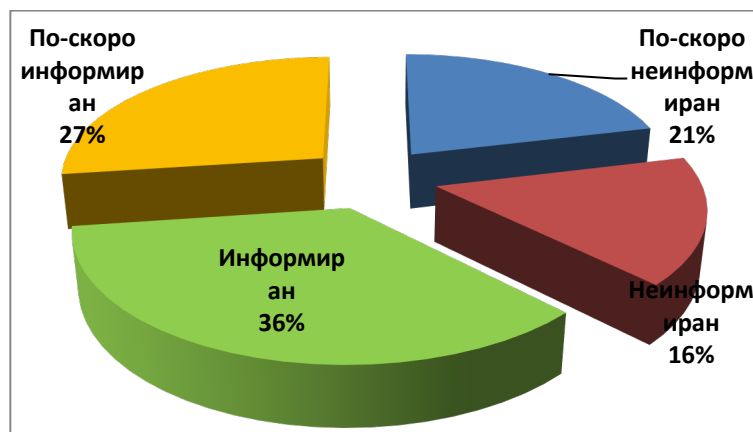
This includes questions about the prior awareness of patients about the conditions and quality of the hospital unit in which they are being treated .

Data on prior patient awareness of the conditions, types and quality of medical care provided by the hospital showed that a significant percentage of respondents - nearly two-thirds of them (62.5%) were informed and rather informed - but 37.5% said patients were misinformed and rather uninformed (Figure 4).

These results show, on the one hand, that patients are personally more interested in health and are in their own way seeking a source to inform themselves and, on the other hand, insufficient knowledge of the opinion of the contingent of medical care contractors, since many tend to intuitively believe that patients do not have information about the hospital's activities.

The higher self-assessment of patients for their preliminary awareness of the quality of medical care in the hospital compared to the assessment of IMP is not a subjective fact.

Fig.9. Preliminary awareness of incoming patients about the types and quality of medical care provided by the hospital (%)



The analysis of the sources of information from which patients have received information about the conditions and quality of activity in hospitals can show what is the level of marketing in the management process and the marketing culture in these hospitals.

Table 4 provides data on the sources from which patients draw information about the conditions and quality of activity in the hospital. as sources of information. The percentage of media and especially advertising brochures is extremely low as a source of information. This shortage of reliable information sources for the quality of the hospital's activities is essentially a marketing problem. It is obvious that the public relation of the hospital can only be talked about conditionally. .

Confirmation of this is the fact that as sources of information a particularly low percentage show media and advertising brochures).

Table 4. Sources of information on the quality of activity in the hospital

Sources	Number	Percentage
Close and familiar	164	40,7
GP	52	14,0
Other doctors	72	17,1
Doctors in this hospital	62	15,2
Internet	14	2,4
Media	40	10,0
Advertising brochures	4	0,5
Everything	407	100,0

Note: The number of responses is greater than the number of respondents (240) due to the need to give more than one answer to this question.

In the survey we focused on some indicators of patient satisfaction with the medical assistance provided in the hospital. In the opinion polls, a direct question is most often used about how satisfied patients are. In our opinion, the direct question often has inert answers that are not always credible. That is why we specifically used an indirect indicator, which in our opinion is the most synthetic and with it the responses of the respondents are as objective as possible.

Such an indirect indicator of patient satisfaction is their vote to re-select the given hospital by the respondents (Fig. 10).

It is seen that more than three-quarters of the treated patients (189 persons – 77.5%) they are adamant that if necessary they will choose the same hospital treatment. In marketing terms, this is an important indicator since this positive attitude is a kind of advertisement to the public about the

quality of activity in the given hospital structure - in front of the relatives and acquaintances of these patients

Fig. 10. Attitude of patients for re-selection of the given with ational (%)



This positive assessment on the above-mentioned indirect indicator does not fully reflect patient satisfaction. There is always a certain degree of patient dissatisfaction, of their unrealized preliminary expectations of their stay in the given hospital.

In this regard, an interesting question is what are the causes of patient dissatisfaction with a hospital. The survey asked a question with free answers: "What are the main reasons for not responding to your preliminary expectations of the conditions in this department with your current impressions". Only a fraction of respondents (99-41.3%) responded, indicating that the rest of the patients (141-58.7%) most likely did not feel any kind of dissatisfaction with their stay in the hospital inpatient.

The most common responses in the survey that show some frustration are as follows:

- Very quick visits, little time for a visit without detailed questioning of the patient about new complaints;
- Insufficient time for the doctor to talk to the patient;
- Not always the cultural attitude of nurses;

- Very complicated way of admission to the station with a lot of formalities and a waste of time.

These interesting responses of patients mainly reflect the psychological (communication) and organizational problems of the hospital hospital. These are problems that can be solved without additional financial means, but with a more targeted increase in the communication skills of medical staff and also a significant improvement in the organization of visits to the thrasinara.

3.3. Results of the survey of staff in private hospitals

The comparative analysis of marketing culture in the public and private health sectors should take into account the following considerations.

Although healthcare marketing has been underestimated until recently, more and more health organizations are starting to consider implementing the marketing model to formulate strategic plans for their particular business. Nevertheless, many aspects of health marketing remain unexplored. This is driven by complex causes.

As a whole, the field of healthcare marketing is still in its infancy and would attract the interest of many hospital managers who were reluctant to do so, change their view and exploit the benefits and benefits of marketing. .

Ankis anonymously 100 hospital staff at two private hospitals.

Table 5 presents the awareness of medical staff in private hospitals about the marketing approach. This awareness is found to be relatively better than the awareness of staff in public hospitals. Almost half (48%) well or partly informed about the nature and capabilities of marketing.

Table 5. O censor of the awareness of medical staff in private hospitals by a no-gomarketing approach

Awareness	Number	Percentage
To	21	21 %
Partly	27	27 %
Not	52	52 %
Everything	100	100,0

Regarding the assessment of respondents for the benefit of the marketing approach, the data in Table 6 show that the highest percentage of responses reflect the role of marketing and public relations in increasing patient satisfaction.

Table 6. Assessment of the usefulness of the marketing approach

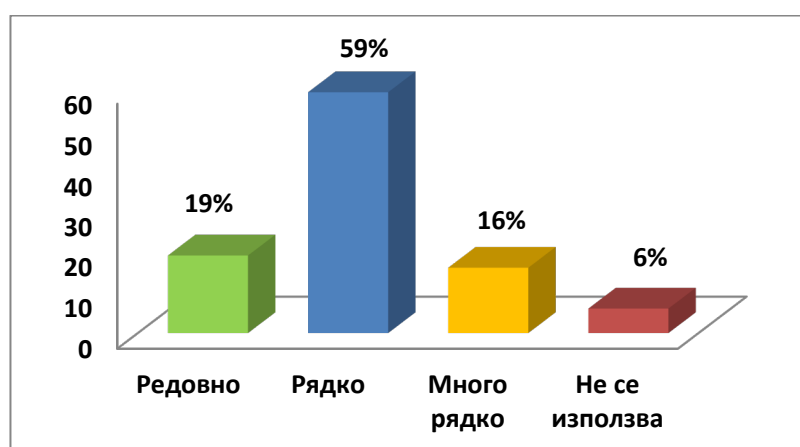
Answers – benefit from the marketing approach	Number
To develop strategies	18
To improve the quality of medical care	12
For long-term planning	19
To analyse the financial results	41
For public relations	33
To increase patient satisfaction	21
For more objective criteria for pay for work	9
For evaluation of information systems	7
To improve staff qualifications	4
Other	1
Everything	155

Note: The absolute number is greater than the number of surveyed individuals, since there are more than one possible answer to this question

It is seen that the notions of marketing as a management problem on the one hand are quite limited and, on the other hand, are inadequate notions of marketing functions.

According to the degree of use of marketing, a higher percentage of respondents considered that marketing in the hospital is used relatively rarely. The proportion of respondents is very low that this approach is not used at all – only 6%. In summary, it is seen that the marketing approach is used in fact better than public hospitals regularly - a total regularly and rarely 78%, which is a fairly high percentage (Fig. 11).

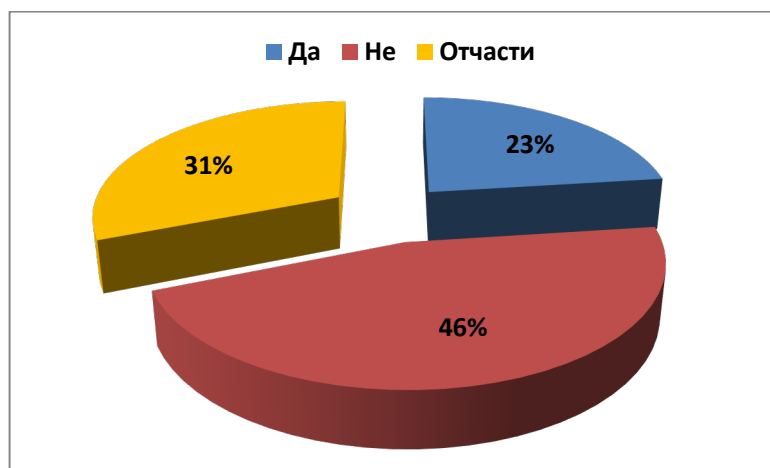
Fig. 11. Degree of use of marketing in individual stationary structures (%)



An extremely important criterion for marketing is the ability to use competitive analysis in hospital management. The competitive analysis is not an objective, but it pursues to assess the extent to which there are similar clinical structures in the health system and the extent to which there are vacancies for a particular type of hospital care.

The data show (Figure 12) a relatively active use of competitive analysis in management, according to respondents' responses. Less than half of respondents (46%) that this type of analysis is not used, and according to more than half of respondents (54%) competitive analysis is used, whole or in part.

Fig.12. Use of competitive analysis in management activities (information on competing medical structures, public and private) (%)



In management and marketing terms, particular attention deserves coordination and mutual cooperation between the hospital and outpatient hospitals.

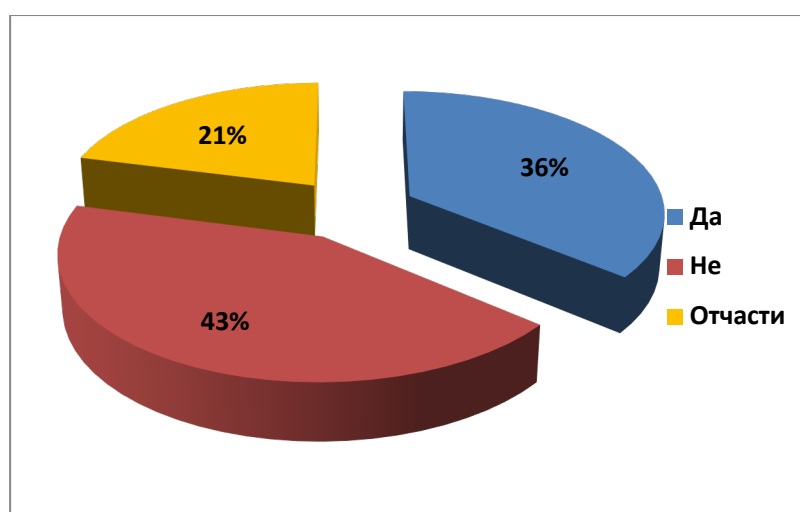
The survey data shows that, according to Mabko, more than half of respondents(52%) private hospitals more often or less hold meetings and seminars with doctors from the D.C. And ALP in order to keep them informed about health services offered by a hospital and for closer connection and more active interaction between the hospital and outpatient facilities.

Table 7. Relationship between a hospital and the outpatient sector (holding meetings and seminars with doctors from the D.C. and ALP to interact with them and health services offered by your hospital)

Frequency	Number	Percentage
Often (more than once a year)	24	24
Rare (maximum once a year)	28	28
There are no	48	48
Everything	100	100,0

In today's world, the internet is an important factor in making effective public relations available to any health organisation.

Fig. 13. Using the Internet as an information tool for the public and for patients (%)

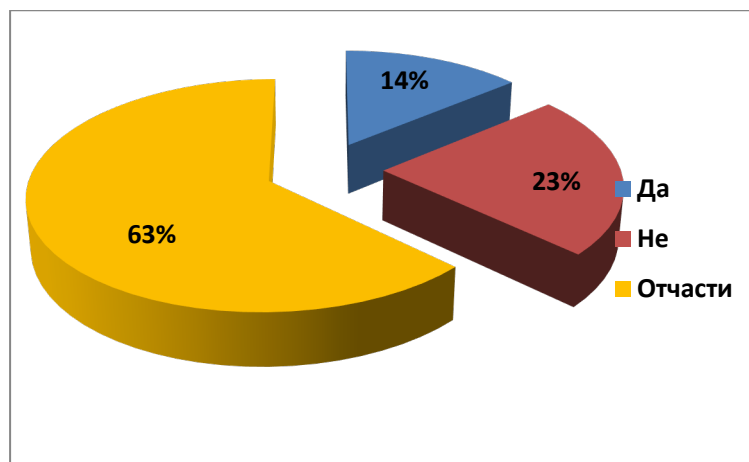


In this respect, Figure 13 shows that private hospitals are relatively more actively using the Internet, although there are still untapped options in full. They provide widely available information about the health services offered by the hospital concerned, as well as answers to questions and advice to patients.

In this regard, there are clearly opportunities and prospects for even wider use of the Internet as an information tool in the context of health marketing.

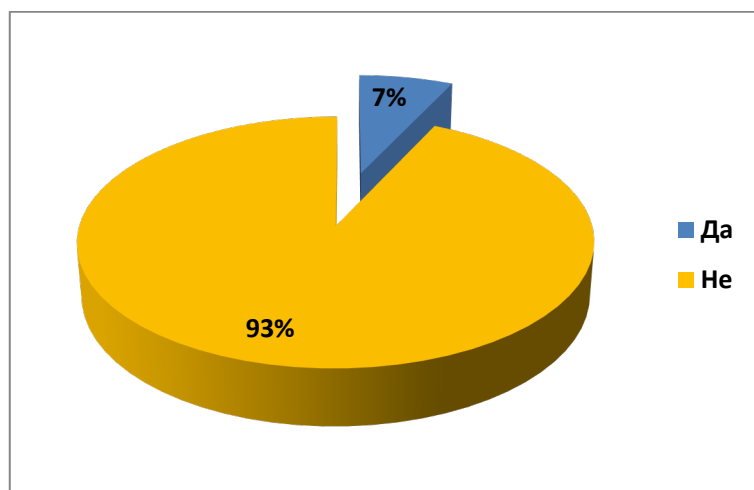
The anonymous survey provides information on two other important issues: the frequency of patient surveys and the number of qualification courses and health marketing seminars. patient surveys on their satisfaction and recommendations (Fig. 14).

Fig..14. Conducting patient surveys (%)



Only 7% attended such courses, which speaks to an acute need for systematic training on health marketing issues and approaches in the framework of continuing training (Fig. 15).

Fig.15. Visiting health marketing courses and seminars (%)



Patient opinion data in private hospitals

With the survey data, the preliminary awareness of the 100 patients surveyed about the conditions, types and quality of medical care provided by the private hospital found that a fairly high percentage of respondents were informed and rather informed - 73% and in 27% patients were ill-informed and rather uninformed. These results differ and are more favourable than public hospital data.

These reports clearly show that patients at the private hospital are personally more interested in health and in their own way need to be informed about the types and quality of medical care provided by a private hospital.

Table 8. Preliminary awareness of incoming patients about the types and quality of medical care provided by the hospital

Answers	Number
To	41
Rather,	32
Rather, it is not	18
Not	9
Everything	100

The analysis of the sources of information from which patients have received information about the conditions and quality of activity in hospitals can show what is the level of marketing in the management process and the marketing culture in these hospitals.

Table 9 presents data on the sources from which patients draw information about the conditions and quality of activity in the hospital.

It is an impressive fact that the lowest is the proportion of the GP (4.5%) as a source of information about the conditions and quality of activity in hospitals.

This shortage of reliable informative sources about the quality of the hospital's activities is essentially a marketing problem. It is obvious that there is an unresolved problem for targeted communication and information advertising activity (public relation) of the hospital.

In this regard, in fact, it is not yet systemic and regular and it is imperative that it be organised systematically and purposefully as an important element of the management process and in the interests of the effectiveness of medical care.

Confirmation of this is the fact that as sources of information a particularly low percentage show media and advertising brochures (table 9).

Table 9. Sources of information on the quality of the activity in the hospital

Sources	Number	Percentage
Close and familiar	51	23,9
GP	10	4,5
Other doctors	11	5,4
Doctors in this hospital	63	29,5
Internet	43	20,2
Media	24	11,3
Advertising brochures	11	5,2
Everything	213	100,0

Note: The number of responses is greater than the number of respondents (120), due to the possibility of giving this question more than one answer.

The study focused on some indicators of patient satisfaction with the medical assistance provided in the hospital.

Table 10. Attitude for re-selection of the given inpatient by patients

Answers	Number
To	86
Rather,	5
Rather, it is not	6
Not	3
Everything	100

Such an indirect indicator of patient satisfaction is their attitude to re-selection of the given hospital by the respondents (Table 10).

Regardless of the positive assessment on the above mentioned indirect indicator, there is also a certain degree of patient dissatisfaction of unrealized their preliminary expectations of their stay in the given hospital.

One particularly interesting and important question is what are the causes of patient dissatisfaction in a hospital. The patients interviewed were asked a question with free answers: "What are the main reasons for not responding to your preliminary expectations about the conditions in this ward with your current impressions". Only a fraction of those questioned (37) responded, indicating that the rest of the patients - about two-thirds - did not feel any kind of dissatisfaction with their stay in the hospital's inpatient.

The most common responses in the survey that show some frustration are as follows:

- Insufficient time to visit;
- Insufficient time for the doctor to talk to the patient;
- Very complicated way of admission to the stationary with a lot of formalities and a waste of time;
- Inability to ask questions of the nurse, who is either very busy or has no desire to contact.

These responses of patients are shown mainly to reflect psychological (communication) and organization problems of the hospital. These are problems that can be solved without additional financial means, but with a more targeted increase in the communication skills of medical staff and improvement of the organization of visits to the station.

This, in turn, also shows that the problems of the marketing culture reflect and are most closely related to the level of communication culture of medical staff in the hospital.

3.3. Comparative analysis of data for public and private hospitals

The data presented above show that there are some differences in the marketing culture of staff in public and private hospitals.

Table data information on the marketing approach is significantly higher in private hospitals (the difference is statistically significant in $P < 0.01$). In public hospitals, the informed -well and partly- are 31.9%, and in private hospitals this rate is significantly higher, almost half of the 48% surveyed.

Table 11. Awareness of medical staff in public and private hospitals from a no-go marketing approach

Awareness	Public	Private	P
To	11,7 %	21 %	< 0,01
Partly	20,2 %	27 %	< 0,05
Not	68,1 %	52 %	< 0,01
Everything	100	100,0	

A significant difference between public and private hospitals is also found with regard to the use of competitive analysis in management activity – 39% for public hospitals and 54% for private hospitals (table 12). This is a indicative

difference, which is explained by the higher interest of private hospitals to know, report and take into account the presence of current and potential competitors.

Tabl. 12. Use of competitive analysis in management activities

Answers	Public	Private	P
Yes, it is used to	12 %	23 %	< 0,01
Partly used	27 %	31 %	> 0,05
Not used	61 %	46 %	< 0,01
Total	100,0	100,0	

Table 13. Relationship between a hospital and the outpatient sector – comparative data public and private hospitals (Holding meetings and seminars with doctors from the DC and ALP for interaction with them and health services offered by your hospital)

Frequency	Public	Private
There are no	73 %	48 %
Rare (maximum 1 year)	20 %	28 %
Often (more than once a year)	7 %	24 %

It is seen that private hospitals compared to public hospitals have clearly a better relationship with the outpatient sector. This is conditioned by their stronger and better organized motivation for patient search, which necessarily requires overcoming the tight frameworks of the hospital and making a strong creative connection and coordination with the outpatient network.

With regard to the use of the Internet to provide widely available information about the health services offered, to answer questions and to advise patients, private hospitals are more often using this source – either in whole or in part (57%) 44% for public hospitals (Fig. 16).

Fig.16. Use of the Internet as an information tool for the public and patients (%)

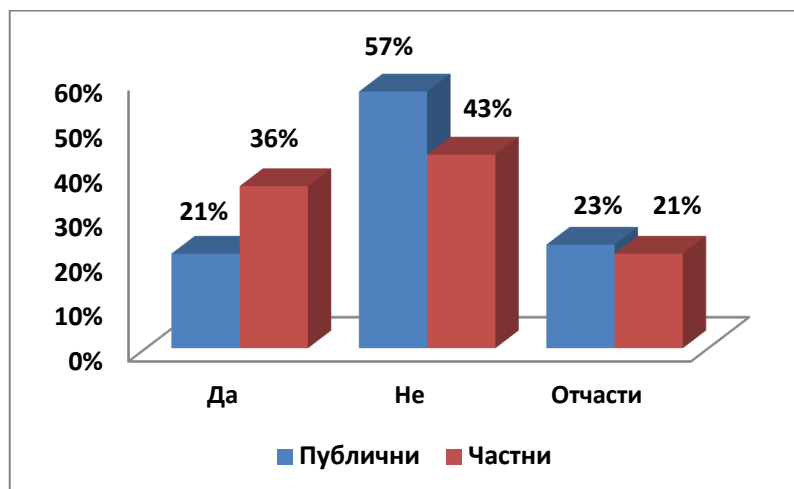


Table 14. Conducting patient surveys on their preferences and satisfaction with the quality of their medical care (in %)

Answers	Public	Private
To	5,8	14
Partly	8,3	23
Not	85,9	63
Everything	100,0	100

Conducting anonymous opinion polls with patients is an important approach in marketing to identify a number of problems in health coverage and to receive recommendations from patients, etc.

Patient opinion data

Comparative data show that patients from private hospitals have a higher prior awareness of the types and quality of medical care provided by the hospital.

Tabl. 15. Preliminary awareness of incoming patients about the types and quality of medical care provided by the hospital

Answers	Public		Private	
To	35,4	62,5	41	73
Rather,	27,1		32	
Rather, it is not	21,2	37,5	18	27
Not	16,3		9	
Everything	100	100	100	100

Particular attention is paid to data on sources of information (Table16). They show characteristic differences between public and private hospitals regarding the sources of preliminary information on the quality of the activity and the conditions in the hospital.

It can be seen that while the leading sources of information in public hospitals are blyses and acquaintances, the leading sources of information in the private hospital are doctors from the private hospital, close and familiar, the Internet, where the percentage of advertising brochures as a source of information is significantly higher. These data are indicative of the more active marketing approach in private hospitals aimed at more active targeted communication with patients who are about to be hospitalized.

Table 16. Sources of preliminary information on the quality of the activity in the hospital – in %

Sources	Public	Private
Close and familiar	40,7	23,9
GP	14,0	4,5
Other doctors	17,1	5,4

Doctors in this hospital	15,2	29,5
Internet	2,4	20,2
Media	10,0	11,3
Advertising brochures	0,5	5,2
Everything	100,0	100,0

4. Summary of results

In the modern conditions of the market mechanism in the medical sector of healthcare, the use of marketing approaches becomes a necessity in the management process.

The data presented above and analyzed show a level of health culture, with a comparative analysis of indicators in public and private hospitals.

As a general finding, an insufficient marketing culture was found in the hospitals studied. This is a factor that seriously hampers the overall management process in hospitals and does not contribute to high efficiency.

Staff's awareness of the nature of marketing is insufficient and inadequate. The usefulness of applying marketing approaches is not clear.

There is no targeted activity of public relations – PR – with a view to informing potential patients of the conditions and quality of their activities before hospitalization.

In these conditions, the sources of preliminary information for patients are diverse and insufficiently reliable. The most common source of information is close and familiar, having contact with the given hospital. It is indicative that in private hospitals the most common source from which patients receive preliminary information are doctors from the same hospital.

A very important fact is the very rare use of competitive analysis, which is a key element of marketing. This indicator identifies a certain difference between

public and private hospitals. In public hospitals, competitive analysis is not used at all at 61%, while in private hospitals this percentage is much lower – 46%.

The data shows that such anonymous surveys are rarely conducted in public hospitals (14.1%) than in private hospitals (27%).

5. Conclusions and recommendations

Conclusions:

Marketing is a management process in the conditions of the market mechanisms established in Bulgaria for the management of medical institutions. Mastering marketing approaches, the new marketing culture is a necessary element of hospital management.

As a concept and function, the marketing culture is directly related and is the basis of successful quality management as its important factor.

The marketing culture implies a new attitude towards the patient contingent to ensure adequate awareness of a medical facility. Due to a lack of information, the patient is not completely free to choose the type of medical care, he must rely on the doctor and the health system for timely and reliable information.

Hence the need for modern hospital to become a widely humanised system open to communication and intensive public relations.

Our anonymous sociological survey shows a number of problems and gaps in the marketing culture in the hospital. A comparative analysis of the marketing culture in public and private hospitals has also been carried out.

There is a fairly low awareness of medical staff about the nature and role of the marketing approach. The benefit of using the marketing approach is understood not quite adequately and within limited operational frameworks.

A negative indicator of the marketing culture in the hospital is the misconception that marketing is intended for analysis of information systems, for analysis of financial results and for more objective payment of medical labor.

It is found that the relationship and coordination between the hospital and the outpatient sector is quite rare. Comparative data show some difference between public and private hospitals. Public ones have less frequent meetings and seminars with doctors from the D.C. and APS (27%) compared to private hospitals (52%).

Better active interconnection of private hospitals with the outpatient sector is driven by their stronger and better organized motivation for patient search.

In the process of hospital management, systemic competitive analysis is not regularly used, which is an important methodological approach of marketing as a means of attracting patients. Private hospitals are more often using this approach. Regular use of a marketing approach in public hospitals is 12%, and in private - 23%.

The lack of target contingents of patients is one of the factors for under-predicted and unregulated (elemental) hospitalization of patients, dependent on the chances of the moment.

It is rare to use the means to inform the public about the medical services offered. Of the means of information used most often is the Internet, and much less often brochures, leaflets, TELEVISION, newspapers. Lectures, talks and radio are very rarely used.

The anonymous survey of hospitalized patients showed a low level of their preliminary awareness of the conditions, types and quality of medical care in the hospital. Patients enter the hospital with a serious preliminary information deficit, which affects their adequate perception of the hospital environment. Better pre-awareness is available to patients at the private hospital.

It is found that patients draw preliminary information about the hospital from different sources – above all from relatives and acquaintances and less often from

brochures and meetings with doctors from the given hospital. A very rare source of information is the GP. There is a lack of targeted communication advertising and information activity (public relations) or this activity is accidental and irregular. This is also evidence of a weak relationship and coordination between primary care (GP) and hospital care.

Recommendations

The recommendations are aimed at the management teams of the hospitals – directors/managers, their deputies, directors of the economic part, heads of hospital structures, chief and senior nurses, relations are the public, etc.

It is necessary to increase the marketing culture of the management team and hospital staff through systematic training on the possibilities and benefits of the marketing approach.

The marketing should be introduced and regulated as a mandatory element in the management activities of the hospital. It is appropriate to have a competent qualified assistant in the management team to take on specifically the functions and responsibility for the use of the marketing approaches.

It is imperative that hospital management periodically conducts a comprehensive competitive analysis through which to more purposefully use promising unemployed market niches in the field of hospital care.

In marketing terms, an important task of hospital management is to overcome the narrow frameworks of the hospital inpatient and to make a strong creative connection and coordination with the outpatient network.

The need for a well-organised broad activity of each public relations hospital (PR) is objective, systematically exploiting the great opportunities of the Internet and the media to inform citizens in advance, and especially the contingent of potential patients of the hospital about the specific conditions and quality of hospital care.

It is necessary to conduct periodic qualification courses and seminars on health marketing for the management staff of the hospital – directorial team and head of clinics and departments.

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