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ОЦЕНКА СЕРВИСА ЧАСТНЫХ МЕДИЦИНСКИХ ОРГАНИЗАЦИЙ С ПОЗИЦИИ ПРЕИМУЩЕСТВА НА РЫНКЕ МЕДИЦИНСКИХ УСЛУГ

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Введение. Современный рынок частных медицинских услуг принадлежит их потребителю (пациенту), и в выигрыше находится та медицинская организация, в которую они возвращаются. У «повторных» пациентов средний чек выше на 50%. Конверсия, при повторных обращениях, достигает 100% в том случае, если вся команда медицинской организации стремится к предоставлению сервиса высшего уровня. Внедрение новаций системы сервиса может выражаться не столько в действиях, сколько в визуализации конкретных преимуществ для потребителей медицинских услуг.

Цель исследования. Изучение сервиса для пациентов, с позиции влияния на рост продаж медицинских услуг.

Материалы и методы. В статье использованы методы наблюдения, описания, измерения, сравнения. В разработку включены 10 крупнейших частных медицинских центров города Рязани.

Результаты и обсуждение. Преимущество качественной медицинской услуги, приводящее частную медицинскую организацию к лидерству на рынке, не всегда имеет выраженную эффективность. Позволяет оценить динамику лояльности потребителей медицинской услуги регулярное измерение NPS. Частным медицинским центрам это следует делать по основным организациям-конкурентам, для понимания своих позиций. Крупные частные медицинские центры уже известны пациентам довольно широким ассортиментом качественных медицинских услуг. Грамотно разработанная и реализованная программа лояльности позволяет стимулировать пациентов к повторному визиту, и проведению дополнительной диагностики, что не только приносит выгоду медицинскому центру, но и способствует контролю здоровья пациентов. В продвижении частных медицинских организаций на рынке медицинских услуг существует множество нюансов, которые нужно учитывать для получения максимально эффективных результатов.

Заключение. Формирование сервисных преимуществ должно включать следующие компоненты: организацию мозгового штурма, мониторинг пациентов, мониторинг конкурентов.

Ключевые слова: качественный сервис, частная медицинская организация, рынок медицинских услуг, конкурентное преимущество.

EVALUATION OF THE SERVICE OF PRIVATE MEDICAL ORGANIZATIONS FROM THE POSITION OF ADVANTAGES ON THE MARKET OF MEDICAL SERVICES

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Introduction. The modern market for private medical services belongs to their consumer (patient), and the medical organization to which they return is the winner. In «repeat» patients, the average check is 50% higher. Conversion, with repeated calls, reaches 100% if the entire team of a medical organization strives to provide the highest level of service. The introduction of service system innovations can be expressed not so much in actions as in the visualization of specific benefits for consumers of medical services.

Purpose of the investigation. Investigate the service for patients from the standpoint of influencing the growth of sales of medical services. We have included in the development 10 largest private medical centers in the city of Ryazan.

Materials and methods. The article uses methods of observation, description, measurement, comparison.

Results and discussion. The advantage of high-quality medical services, leading a private medical organization to leadership in the market, does not always have a pronounced efficiency. It is necessary to regularly measure the NPS, which makes it possible to assess the dynamics of the loyalty of consumers of medical services. Private medical centers should do this against the main competing organizations in order to understand their positions. Large private medical centers are already known to patients with a fairly wide range of quality medical services. A well-designed and implemented loyalty program allows you to stimulate patients to return visits, and to conduct additional diagnostics, which not only benefits the medical center, but also contributes to the control of patients' health. There are many nuances in promoting private medical organizations in the medical services market that must be taken into account in order to obtain the most effective results.

Conclusion. The formation of service benefits should include the following components: organization of brainstorming, patient monitoring, monitoring of competitors.

Key words: private healthcare organizations, medical service, criteria for the quality of medical care, standards

Introduction. The recommendations of the World Health Organization, among the main criteria for the quality of medical care, include, along with the qualifications of a doctor, his compliance with the technology of diagnosis and treatment, as well as patient satisfaction [4]. Patients who choose private clinics are guided by the fact that by providing payment for the service, they expect to receive not only high-quality medical service, but also medical service that meets their requirements [1, 3, 5]. The service component in commercial medicine is no less important than the quality of medical care. The question is how to turn the service into a competitive advantage that significantly affects the reputation of a medical organization [1, 2].

In a broad sense, the service includes all parameters of a patient's perception of a medical organization. In a narrow sense, service is understood as a personal contact with a patient in terms of attributes / criteria / ingredients of the service. Service attributes are highly dependent on the industry and target audience. It is on the components that are valuable to the patient that service standards should be built. The contribution of each attribute of the service should be proportional to the impact on the loyalty of the consumer of the medical service [3, 6].

Purpose of the investigation. Investigate the service for patients from the standpoint of influencing the growth of sales of medical services.

Materials and methods. To search for opportunities to assess and develop proposals for improving the service of private medical organizations, the authors' research project is aimed at studying the service for patients from the standpoint of influencing the growth of sales of medical services. We have included in the development 10 largest private medical centers in the city of Ryazan. The study and analysis of regularities, the systematization of the available facts, provided for the use of methods adequate to the present study: observation (survey), description (fixation of the information obtained), measurement (comparison of parameters by common features), comparison (study based on the study of similarities and differences in data, comparative analysis and comparison of the results obtained).

Results and discussion. The goal of any service management system is a high and stable level of service. Patients of private clinics are guided by the fact that for the money spent they will receive not only high-quality medical care, but also medical service of the appropriate level. Quality service is flawless service activity. If you turn service into a competitive advantage, you will significantly improve the reputation of your healthcare organization. We will try to understand the nuances of this issue.

There are many quality medical services in private medical organizations, but what can we say about the service?

The advantage of high-quality medical services, leading a private medical organization to leadership in the market, does not always have a pronounced efficiency. Many private healthcare providers offer similar health care offerings.

Of course, positioning and comparison with competitors are very important, but, in general, the modern medical organization no longer has significant differences from similar ones, as it was before. Moreover, the Internet blurs the boundaries, and the availability of a large amount of information on the medical services offered gives consumers a wide range of choices.

We evaluated the service for patients, which affects the growth of sales of medical services, in the 10 largest private medical centers in the city of Ryazan. For this purpose, a survey of 50 doctors, 10 chief doctors and 4 territorial managers of network medical centers was conducted.

What results did we get? Firstly, the level of service in these medical centers is average for the market: we stated both the absence of disadvantages and the absence of obvious advantages. Secondly, the employees we interviewed do not know why the medical organization in which they work is better than their competitors. Moreover, they found it difficult to answer about the advantages of competing organizations, which prevents an objective analysis of the real market situation. Thirdly, in 7 out of 10 medical organizations we studied, there is no system for assessing the level of service in comparison with other private medical centers.

So what should be done? Introduce a system whose purpose is to systematically monitor the level of service of competing medical organizations. It is necessary to identify the main competitors, as well as focus on the market organizations in other regions, the level of service of which is subject to assessment. It makes sense to hold regular executive meetings to discuss service benefits.

Does a private center need a loyalty index for consumers of medical services?

It is necessary to regularly measure the Net Promoter Score (NPS), which makes it possible to assess the dynamics of the loyalty of consumers of medical services. Private medical centers should do this against the main competing organizations in order to understand their positions.

NPS should be measured monthly. The level of loyalty of consumers of medical services will give an understanding of how much patients want to return to this particular medical center, how much they are ready to recommend it. Moreover, the success of a private medical center largely depends on how ready this center is to use NPS as one of the key indicators, including for the motivation of leaders.

If the medical organization does not have a person responsible for the service, then it is worth officially appointing him, including the definition of standards and maintaining the required level of service in his area of responsibility. This gives not only the possibility of control itself, but, more importantly, the possibility of control at the numerical level, and not at the level of sensations.

Employee ideas that require managerial support should not be neglected. In particular, the idea of personal contact with regular patients, including notifying them through messengers, social networks, for example, about new medical services. Or the next example: a medical center sends patients to others, in the absence of the medical service they need. In such cases, it is important to

focus on making the patient feel that he is expected, and what awaits his particular doctor. And here operational statistics of such cases can be of great help.

And finally, every large medical center provides an opportunity to register a patient via the Internet (patient's personal account); in many organizations, tablets are used in the work, but they are not always used by employees. What idea can arise from a recommendation in the development of a methodology for launching innovations? Let's just say: when introducing such changes, it is necessary to pre-test them by the forces of the heads of departments, and only if the test is successful, pass them down the hierarchy.

Thus, patients can remember a medical organization precisely for the service benefits that will result from successful management decisions.

How to verify the thesis: a grateful patient is a generous purchaser of medical services?

Large private medical centers are already known to patients with a fairly wide range of quality medical services. But these medical organizations are remembered by patients and the fact that, according to a loyalty card, they can, for example, drink tea or coffee for free, leave a child in a children's room under the supervision of an employee of a medical center. It is especially worth noting the practice of introducing such a free service as escorting people with disabilities and persons with disabilities who applied to a medical center. By providing these free services, the medical organization is building its policy in such a way as to form an additional way of attracting "primary" patients; to increase the frequency of referral of "repeated" patients; ensure an increase in the number of consumed services.

Do you need to implement programs that promote patient loyalty?

The competition between private medical organizations for customer trust and loyalty is increasing every year. A well-designed and implemented loyalty program allows you to stimulate patients to return visits, and to conduct additional diagnostics, which not only benefits the medical center, but also contributes to the control of patients' health. Loyalty programs are used for patients who have contacted a medical organization at least once, but are not suitable for attracting new patients. Let's dwell on some of them. For example, it can be a cumulative program based on a system of discounts, which depends on the total amount of services paid by the patient; The 5th procedure as a gift is another example of an accumulative loyalty program.

A non-material program, as a loyalty program, may include webinars, face-to-face seminars, "Health promoting schools", In which a representative of a medical organization - a specialist doctor - discusses a topic that is relevant to patients, answers questions, suggests solutions; contests, for

example, for medical centers providing services in the "pediatrics" profile, a competition for drawings, plasticine crafts, etc. (important: there should be no losers, a consolation prize for every child); festivities organized at city venues; co-branding; service in a medical center allows patients to receive discounts in other organizations (for example, a commercial kindergarten, fitness, and others).

So, it is advisable to implement loyalty programs, and, regardless of the size and direction of the medical center's activities, loyalty programs can be evaluated as a tool in the competition and investment in long-term development.

How to attract a patient to a private medical organization: an offer that cannot be refused?

There are many nuances in promoting private medical organizations in the medical services market that must be taken into account in order to obtain the most effective results. Let's look at examples of specific results that became the subject of discussion with our respondents. Among the areas that need to be worked on in the first place, we want to note the following:

1. Contextual advertising: you need to use all its capabilities to the maximum and promote, both in Yandex and in Google.
2. SMM: effective promotion in social networks implies their active maintenance, filling with content and using internal advertising tools, such as targeting.
3. SEO-optimization: search engine promotion of your own site allows you to receive constant organic traffic by getting into the TOP-10 queries.
4. Online enrollment on the site: According to research, placing an enrollment form on the site helps medical centers reduce the cost of attracting leads by 3-5% and get 20% more patients. This is the number of registered applicants who leave applications at night or early in the morning, when the call center or directly to the clinic cannot be called (according to our data, only 2 out of 10 surveyed private medical organizations provide round-the-clock work of the call center). Organizations without online appointments are losing patients to more progressive competitors.
5. Friendliness with everyone, even when it is difficult: with patients and their attendants, with their doctors and nurses, with suppliers, with partners and colleagues.
6. An interview for a television, radio station, newspaper, magazine or medical portal: this can be presented as a medical consultation on the air or as an expert opinion on a topical topic of the day.

Conclusion. So, in conclusion, let's answer the question: how to create such service benefits?

1. Organization of brainstorming. Employees of a medical organization know what exactly can be changed for the better. Preliminarily, it is necessary to determine what the patients will really

like, what will cause the maximum effect, that is, what will make them return to the medical organization again and again, what they will remember.

2. Patient monitoring. The introduction of such a system into the work of a medical organization will help determine, first of all, what patients complain about that they are not satisfied with the work of employees and the organization. Discussion of service shortcomings on a regular basis contributes to systematic management decisions to improve the image of a medical organization.

3. Monitoring of competitors. The prerequisites for compliance are consistency and regularity, with the indispensable fixation of the strengths of the main competitors. This is followed by the collection of information, its processing, identification of differences, and, as a result, the development of measures to improve the quality of service and their implementation.

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