

STRATEGIC MANAGEMENT IMPLEMENTATION PROCESS IN HEALTH CARE INSTITUTIONS

**Shukurov Ibodullo Murodullaevich**

**Achilova Liliya Ilxomovna**

**Aleksandr R. Kim**

**Men Viktoriya,**

**Anvarkhujaev Rustam**

MBA Listeners, Almaty Management University.

**Abstract.** The concept of strategic management has been substantiated. The key tasks of strategic management of the state medical institution have been defined. The urgency of implementation of strategic management in public medical institutions has been proved. The structure of the strategic management process in the state clinical hospital has been substantiated. The main stages of implementing strategic management in a public hospital are described: the development of operational plans for the implementation of strategic goals is determined. The objectives and practical activities of the strategic committee as a management body for the development of medical institutions are substantiated.

**Keywords:** strategic management, strategic goals, strategic tasks, operational plans, medical institutions.

**ПРОЦЕСС ВНЕДРЕНИЯ СТРАТЕГИЧЕСКОГО УПРАВЛЕНИЯ В  
УЧРЕЖДЕНИЯХ ЗДРАВООХРАНЕНИЯ**

**Шукуров Ибодулло Муродуллаевич**

**Ачилова Лилия Илхомовна**

**Ким Александр Романович**

**Мен Виктория**

**Анварходжаев Рустам**

слушатели программы MBA Almaty Management University

**Аннотация:** Обоснована концепция стратегического управления. Определены ключевые задачи стратегического управления государственным медицинским учреждением. Анализирована актуальность внедрения стратегического управления в государственных медицинских учреждениях. Определена структура процесса стратегического управления в государственной клинической больнице. Описаны основные этапы внедрения стратегического управления в государственной больнице: определена разработка оперативных планы реализации стратегических целей. Обоснованы задачи и практическая деятельность стратегического комитета как органа управления развитием медицинских учреждений.

**Keywords:** strategic management, strategic goals, strategic tasks, operational plans, medical institutions.

Access to quality medical services for the population is a pressing problem not only for Uzbekistan, but also for other CIS countries, including the EAEU. In Uzbekistan, healthcare is currently a developing industry, the dynamism of which is based on the social policy of the state, increasing interest of the population in maintaining health, as well as on the active development of technologies, including management ones. One of the most popular modern concepts for managing both commercial and non-profit organizations in various industries is the concept of strategic management [1]. The Presidential Decree "On measures to further improve

the activities of the Ministry of Health” defines the goals of expanding the provision of quality medical services through the consistent continuation of reforms in the healthcare sector, including improving management, identifying further prospects for the development of the sector, improving the material and technical base of medical institutions and organizing the effective use of facilities state property. [2]

Briefly, the essence of this concept lies in the answers to the following questions that determine the structure of its tasks:

– what is the mission and main goals of the organization? This is solved by developing and approving a mission that takes into account the interests of all parties involved in the organization, as well as by determining the main indicators that characterize the essence of the institution’s activities and developing their target values for the period of strategic planning;

– what are the strategic objectives of the organization and how to measure their implementation? This is determined by the method of analyzing external opportunities and threats to the development of the organization, as well as through assessing the strengths and weaknesses of the organization on the way to realizing opportunities and overcoming threats;

– how to ensure the implementation of the set strategic objectives? This is achieved through the operationalization of strategic objectives in the form of operational plans (road maps), as well as through the creation and functioning of a strategic committee that monitors the implementation and adjusts the entire system of main goals, strategic objectives and operational plans of the organization.

Strategic management was originally focused purely on market firms, where the owners are the dominant stakeholders (parties interested in the organization), and thus all the company's activities are aimed at maximizing the profits they receive from the business [3]. In cases of managing commercial medical organizations, the essence and principles of strategic management correspond to its classical concept. For domestic public medical institutions, where the main stakeholder is the population in need of medical care, the structure of strategic management tasks is modified, becoming focused on meeting the needs of patients and the requirements of the founders in the form of ministries and departments of health care.

In this case, the key tasks of strategic management of a public medical institution may look like this.

1. What types of services and in what volume need to be developed to meet the growing needs of the population.

2. How to increase the efficiency of diagnosis and medical care.

3. How to ensure that the budget necessary to solve the first two tasks is received from the compulsory health insurance system, from paid services, through the VHI system (voluntary health insurance) and other sources.

4. How to correctly build a comprehensive system of strategic objectives for the entire medical institution, aimed at achieving its main goals.

5. How to systematically organize the practical implementation of the set strategic objectives in the process of current activities.

6. The root reasons for turning to the use of strategic management tools in government healthcare organizations are associated with the following factors.

7. The need to match the effectiveness of institutions to the achievement of key indicators for the implementation of state policy in the field of health care.

8. As a rule, the growth of the institution and the expansion of its activities (both as a result of mergers and as a result of an increase in the number of patients).

9. Development of new, including paid, types of services and voluntary health insurance in order to achieve economic efficiency and ensure the fulfillment of obligations to pay staff.

10. Increased competition in the markets for compulsory medical insurance and paid services from both commercial and public medical institutions.

11. The objective need to move from annual planning to medium- and long-term planning in connection with the anticipation of greater commercialization of the medical industry.

12. The presence of numerous examples of successful application of the strategic management system in the management of medical organizations both abroad and in commercial medical companies. Let's consider what a typical project for implementing strategic management methodology consists of. The goal of the project is to create a permanent system of strategic planning and control over the achievement of medium- and long-term development indicators and the implementation of activities within the framework of both the institution as a whole and its individual divisions [4]. The tools for achieving the goal are the system of strategic goals of the institution, the system of long-term development plans for departments (medical departments and departments for provision and support), as well as the activities of the strategic committee of the institution.

The most extensive area of strategic objectives for public medical institutions is the area of diagnostic and treatment activities. This strategic area typically consists of the following strategic objectives.

1.Improving the organization of medical activities. Responsible – Deputy Chief Physician for Medical Affairs. The indicators for the implementation of this strategic objective include: postoperative mortality for the hospital as a whole; resuscitation mortality for the hospital as a whole; [6] the number of introduced examination methods in the hospital; number of implemented treatment methods in the hospital; the number of doctors' participation in city and international conferences; share of the volume of penalties in the budget of compulsory health insurance (hereinafter referred to as compulsory medical insurance); the number of events held within the framework of cooperation with departments; the number of justified requests from patients regarding the quality of medical care, the number of cases of nosocomial infections in the hospital as a whole.

2.Improving the quality of examinations and medical care. Responsible – Deputy Chief Physician for Clinical Expert Work. The indicators for the implementation of this strategic objective include: the level of satisfaction of the population according to an independent assessment of the quality of services provided to patients treated in hospitals and clinics; the number of justified requests from the population regarding the quality of medical care; the number of analyzes carried out on the results of quality control cards for the work of departments and doctors with provision to the commission for the distribution of incentive payments; the number of analyzes carried out on inspection activities of insurance companies; number of occupational infections during professional activities.

3.Development of each specific department. The person in charge is the head of the department. It is necessary to formulate such a number of such tasks that it corresponds to the number of departments in the hospital.

The next area of strategic objectives is the area of “economics and finance”. The following strategic objectives may fall within this strategic area.

1.Creation of a system of end-to-end planning and control. Responsible – Deputy Chief Physician for Economics. Indicators of the implementation of this strategic task include

deviations from the plan of financial and economic activities in terms of income and expenses at the end of the quarter [7].

2. Creation of financial responsibility centers in branches. Responsible – Deputy Chief Physician for Economics. Indicators of the implementation of this strategic task include the presence of a plan for the receipt and expenditure of funds for each division and a monthly report by the head of the department on the financial results of the department's activities.

Optimization of costs for the purchase of resources for core activities. Responsible – Deputy Chief.

3. Physician for Economics. Indicators of the implementation of this strategic objective include the number of participants [8] in each competitive procurement procedure, a decrease in the number of concluded contracts compared to the previous year and a decrease in the procurement budget compared to the previous year.

4. Increasing the efficiency of using resources in core activities. Responsible – Deputy Chief Physician for Economics. The indicator for the implementation of this strategic objective was defined as a reduction in costs for inventories by a certain percentage compared to the previous year with a similar number of patients treated.

The strategic objective area called "Paid Services" may include the following strategic objectives.

1. Optimizing service offerings and increasing organizational efficiency. Responsible – head of the paid medical services department. The indicators for the implementation of this strategic objective are determined to be an increase in turnover for paid services and an expansion of the institution's client base.

2. Development of the website and creation of a positive image of the institution. Responsible [9] – head of the paid medical services department. The indicators for the implementation of this strategic objective are an increase in site traffic and an increase in the number of requests after visiting the site.

3. Creation of a CRM system (customer relationship management system). Responsible – head of the paid medical services department. The indicators for the implementation of this strategic objective are: the number of clients of the paid branch; number of calls to paid branch clients; number of shares in the client base of paid services; revenue; received from repeat sales.

4. Increasing sales efficiency and expanding sales channels. Responsible – head of the paid medical services department. The indicators for the implementation of this strategic objective are: increasing the number of insurance companies-partners for voluntary medical insurance (hereinafter referred to as VMI); increase in the number of patients under VMI; increase in monthly income under VMI; increasing the number of commercial partner clinics; increasing monthly income from commercial clinics; increase in the number of corporate clients; provision of paid services as a provider of medical services for government institutions through the government procurement portal.

The strategic objective area entitled "Enable and Support" may include the following strategic objectives.

1. Creation of a highly competitive team of motivated personnel. The person in charge is the head of the HR department. The indicators for the implementation of this strategic objective are: the number of effective contracts concluded; staffing levels; number of people [10] trained as part of a comprehensive personnel training program; number of comments by the department and the chief physician in the framework of personnel records management, military registration, and work with the pension fund.

2. Creation of an information system to support core business processes. Responsible – Head of the Information Technology Department. The indicators for the implementation of this strategic objective are: the number of new automated processes; number of completed repair requests; connecting and setting up computer equipment; equipment downtime; number of comments by the chief physician; deputy chief physicians to work information technology (hereinafter referred to as IT) services; deviation from the IT system [11] implementation schedule; number of training seminars for employees on working with the information system; the number of purchases of computer equipment for the needs of the developing information system; the number of workplaces connected to a structured cable network for the needs of the information system being implemented.

3. Providing resources for core activities and development. Responsible – Deputy Chief Physician for Economic Activities. The indicators for the implementation of this strategic task are defined as: fulfillment of the plan for the purchase of equipment, medicines and consumables and the absence of comments from the chief physician.

After developing indicators and their target values for strategic objectives, operational plans (road maps) are developed aimed at the implementation of each strategic objective.

For treatment and diagnostic units, the following four sections of activities in the operational plan are highlighted.

1. Increasing the efficiency of medical care processes.
2. Modernization of existing and introduction of new tools and methods of diagnosis and treatment
3. Development of personnel and scientific potential of the department.
4. Development of material and technical support for the department. For each event, according to the widespread methodology of strategic planning, the deadlines for the implementation of the event, [12] as well as the planned result, are determined. To effectively organize the strategic management process, a strategic committee is created.

It consists of the institution's chief physician, a number of his deputies and an external consultant. All procedures for strategic planning and control are prescribed in the approved regulations on the strategic committee. The Strategic Committee becomes a permanent management body for the long-term development of the institution. Its meetings are held three times a year for each department. At meetings, department heads report on the achievement of planned indicators for 4 months, as well as on the degree of implementation of operational plan activities. Committee members evaluate the work of department heads, propose and approve new initiatives, and adjust department development plans. This ensures continuity and controllability of the implementation of strategic plans for the development of branches.

Thus, the implemented strategic management systems in public medical institutions aim the latter at effective development, ensure the achievement of promising performance indicators, monitor the implementation of a system of comprehensive development measures, and also form effective healthcare managers.

#### **Bibliography**

1. Decree of the President of the Republic of Uzbekistan “On measures to further improve the activities of the Ministry of Health” [https://uza.uz/ru/posts/o-merax-po-dalneyshemu-sovershenstvovaniyu-deyatelnosti-ministerstva-zdravooxraneniya\\_517791](https://uza.uz/ru/posts/o-merax-po-dalneyshemu-sovershenstvovaniyu-deyatelnosti-ministerstva-zdravooxraneniya_517791)
2. Grant, R. M. Modern strategic analysis. – SPb.: “PETER”. – 2008. – 560 p.

3. Katkalo, V. S. Evolution of the theory of strategic management. – 2nd ed. – St. Petersburg; Publishing house "Higher School of Management". – Publishing House of St. Petersburg University. – 2008. – 548 p.
4. Kaplan, R. S. Strategic maps / R. S. Kaplan, D. P. Norton. Per. from English – M.: Olimp-Business. – 2007. – 512 p.; Ачилова, Л. (2021). ТУРИЗМ ВА МЕҲМОНХОНА САНОАТИДА РАҚАМЛИ ИҚТИСОДИЁТ: ҚИЁСИЙ ТАҲЛИЛ. *ЮРИСТ АХБОРОТНОМАСИ*, 2(6), 92-98.
5. Horvath&Partners. Implementation of a balanced scorecard. Per. with him. – M.: Alpina Business Books. – 2005. – 478 p.
6. Ruzinazarov, S., Achilova, L., & Rakhmonkulova, N. (2023, June). Classification of types (business models) of electronic commerce and subjects-participants. In AIP Conference Proceedings (Vol. 2789, No. 1). AIP Publishing.
7. Achilova, L. (2022). Genesis of sources of legal regulation of relations in the provision of hotel services. Результаты научных исследований в условиях пандемии (COVID-19), 1(06), 101–106. извлечено от <https://inlibrary.uz/index.php/scientific-research-covid-19/article/view/8587>
8. Ruzinazarov, Shukhrat Nuralievich, Nilufar Khodji-Akbarovna Rakhmonkulova, and Liliya Ilkhomovna Achilova. "Some questions of organizational and legal aspects of hotel services in the terms of COVID-19." *PalArch's Journal of Archaeology of Egypt/Egyptology* 17.6 (2020): 1938-1947.
9. Ruzinazarov, Shukhrat, Liliya Achilova, and Nilufar Rakhmonkulova. "PROBLEMS OF FUNDAMENTAL SCIENTIFIC AND METHODOLOGICAL SUPPORT OF DIGITAL CIVIL TURNOVER." *湖南大学学报 (自然科学版)* 48.8 (2021)
10. Ismadiyarov, Y., & Nabiulina, L. (2019, November). Informational ensuring innovative management of higher education system. In 2019 International Conference on Information Science and Communications Technologies (ICISCT) (pp. 1-5). IEEE.
11. Рузиназаров Ш., Ачилова Л. Тенденции и развитие правового регулирования иностранных инвестиций в Республике Узбекистан // Юрист ахборотномаси. - 2020. - № 1.4. - С. 71-75.
12. Meyliev, O., & Gofurova, K. (2023). PRIORITY DIRECTIONS FOR THE DEVELOPMENT OF A "GREEN ECONOMY" IN UZBEKISTAN. *Science and innovation*, 2(A8), 117-122.
13. Khalikov, S., Liu, W., Turaeva, M., & Achilova, L. (2021). Uzbekistan's development under the leadership of various political reforms: The case of air transport industry. *The Open Transportation Journal*, 15(1).
14. Kurbaniyazova, R. K. (2019). THE INFLUENCE OF GLOBALIZATION PROCESS ON SOCIAL MENTALITY CHANGES. In Сборник материалов международных научно-практических конференций (pp. 61-64).
15. Ачилова, Л. И. (2023, July). ЭМОЦИОНАЛЬНЫЙ ИНТЕЛЛЕКТ, КАК ОСНОВА ПРОФЕССИОНАЛЬНОЙ УСПЕШНОСТИ. In *Past and Future of Medicine: International Scientific and Practical Conference* (Vol. 2, pp. 72-76).