Developing a Medical Institution Management System through Promoting Social Accountability

Inna V. Plotnikova, Kurmanbek kyzy Nurzata, Ludmila A. Red’ko*, Olga A. Shadrina, Marina N. Yanushevskaya

* Corresponding author: Ludmila A. Red’ko, la_redko@list.ru

Abstract

The paper regards the implementation of social accountability principles into the system of medical institution management as the target of research. The process of personnel management is viewed as its research subject. The paper aims to develop the system of incentives for medical institution personnel based on the principles of social accountability. The research methods and tools applied in the study are analysis of content and internal enterprise documentation, staff member interviews and statistical methods of data processing. The expected research outcome is the implementation phase of the social accountability management system resulted in the development of the Code of corporate conduct. The article advocates the view, that the Code of Conduct should be based on the diagnosis of the state of corporate culture and motivate employees of the organization. The management team of medical institution can set their own social and reasonable quality management system, which will enable it to promote and involve staff in the process of improvement.

© 2017 Published by Future Academy www.FutureAcademy.org.uk

Keywords: Medical institution, social accountability, quality management system, personnel management process, staff motivation, code of corporate conduct.

1. Introduction

In the modern world companies have to operate in the conditions that change fast due to the strengthening requirements of the consumers to the quality of the production and service provided. For the promotion of their competitiveness, companies develop management systems focused on meeting the requirements of the consumers and other parties concerned. The standards ISO9000 (the International Organization for Standardization) are considered the acknowledged world authority of
such systems (ISO, n.d.). These standards and documentations provide a set of key conditions which guarantee consumer satisfaction, including continual improvement of the company’s operations through innovations and implementation of technological achievements. Continual improvement is viewed as controlled changes in the procedures of implementing company’s operations. As these changes closely relate to people and their activities, human resource management and staff potential development are the priority continual improvement directions for the company’s management team.

As a rule, human resource management in many companies is organized as the process of personnel management (Kasumova & Mchedlidze, 2015). Though any process realisation implicates a possibility of economical, ecological and social risks; managing social risks is given higher priority nowadays. Company’s social risks are the events caused by such hazards as

- failing to follow the European Convention of Human Rights;
- neglecting workplace safety requirements;
- violating employment regulations;
- discrimination, etc.

A reliable method of social risk facilitation is considered the observance of the social accountability principles as stated in SA 8000 (Social Accountability International), and ISO 26000, for instance (SAI, n.d.; Olkhovikova & Salimova, 2012).

Another important component of the personnel management process is staff motivation. Management team’s commitment to follow social and ethical principles as well as to promote employee general welfare creates the company’s attractiveness as an employer which may result in development of labour productivity and cooperation with the key personnel (Kibanov & Genkin, 2015). Following social accountability principles develops a positive image of the company and its brand at the market which, in its turn, forms a constituent part of the company’s competitiveness.

2. Problem statement

Regional state autonomous healthcare institution Polyclinic (Polyclinic) is a non-profit organisation established for work and service delivery in order to implement powers in healthcare as stipulated by current legislation.

The Polyclinic employs 157 people; its doctors carry out about 1100 examinations and consultations a day. The Polyclinic services include 23 healthcare areas among those are general medicine; adult day hospital; obstetrics and gynaecology; cardiology; oncology; neurology; physiotherapy treatment; traumatology; ophthalmology and others.

The Polyclinic renders healthcare services to the general population carrying a policy of obligatory medical insurance, aged 18 and up. Citizens of the active working age make up 75% of the patients; 25% are those older than that. As of 2011 to 2015 the majority of references were to general therapists and ophthalmologists; 57% were for disease prevention purposes, 38% for medical treatment and 5% of cases were doctor home visits.

The Polyclinic management team has focused on the medical institution operation improvement. For this purpose in 2013 the Polyclinic integrated and certified the system of quality management in compliance with the requirements of the standard ISO9001:2008. The quality system covers all the
Polyclinic principle and secondary processes such as medical and preventive healthcare, paperwork and record management, personnel management, infrastructure management, information and technical maintenance, working environment management, procurements and other fields of operations. According to the quality management system, senior managers and focus area administrators have been appropriately trained.

The quality management system performance is regularly assessed including the criterion of patient satisfaction. To get the results patients are asked to fill in questionnaires and are regularly interviewed, the staff keeps record and analysis of patient complaints.

An interview was held January, 2016, to get patient opinion on the quality of the services rendered by the Polyclinic. 93 participants, aged 20 to 75 (17 males and 76 females) were asked 7 questions.

The question “Why have you addressed this healthcare establishment?” got 100% of answers from the interview participants that it happened due to the medical insurance attachment. The majority of the attached patients live close to the Polyclinic location.

15% of those interviewed expressed their discontent with the work quality of the reception desk staff.

80% said they had been quite satisfied with the doctor attitude to their need during their visits.

17% of the interviewees expressed a strong desire to visit a different healthcare establishment. The major reason was that the Polyclinic did not have a specialized doctor in the medical staff.

Half of the patients preferred morning hours from 9 to 12 for their visits to the doctor.

The total work quality of the Polyclinic was assessed 7 points out of 10 according to the survey results.

Finally, the question “What is necessary to improve in the Polyclinic operations?” received various answers. Among the major weak points can be mentioned long queues; prior registration (even with a few week wait); lack of specialized doctors; problems with making appointments through the Internet or over the phone.

To conclude the results, we would say that the patients criticised the organisation of appointments and visits (prior registration, long queues), though the quality of the healthcare specialists they found satisfactory enough.

Alongside with surveys and interviews the Polyclinic management team analyses patient encounters on the regular basis. Fig. 1 demonstrates the individuals control chart of the moving range, built according to the number of patient encounters for the period from 2010 to 2015.
As the graphs above illustrate, the number of patient complaints are within the control limits. The system that conditions patient complaints is stable and statistically controlled therefore it can be further improved.

The Polyclinic also faces the problem of personnel deficiency. The end of 2015 demonstrated the following staff demand: doctors – 24%, nursing staff – 15%, medical attendants – 16%, other categories of staff – 24%.

The mentioned above challenges state that personnel motivation and development of the corporate culture regarding change management are vital tasks to be solved by the Polyclinic management team. The possible decision in this case is the implementation of the social accountability principles.

The principles of the social accountability are stated in the entire set of international documents. Standards SA8000:2014 “Social accountability 8000” and ISO26000:2010 “Guidelines on social accountability” are of our primer interest as the principles given in these standards are appropriate to the application in the company management system.

Standard SA8000 aims to improve labour conditions and the employee level of living. The standard is not limited to a certain field or geographical area and may be applied in all spheres including production and service industry. SA8000 implies a certification procedure conducted by an external audit company which is accredited by the organisation “International Social Accountability”, the SA8000 developer (SA8000, n.d.).

ISO26000:2010 is guideline on the principles, basic topics and problems compiling social accountability, methods of integration of socially accountable behaviour into strategies, practice and
Selection and peer-review under accountability of the Organizing Committee of the conference

Selection and peer-review under accountability of the Organizing Committee of the conference

This international standard emphasises the importance of results and efficiency improvement. Social and economic aspects of corporate social accountability are covered in seven key topics: administrative management, human rights, working practice, environment, conscientious business practice, consumer related problems, community involvement and its development (ISO 26000, n.d.).

Major companies, presenting their products at the world market, implement systems of social accountability according to SA800:2008 (Plotnikova & Redko, 2016).

Smaller companies can also be adherent to these principles, though the social accountability of their business is presented in other ways. For instance, the heads of such companies invest into personnel development, corporate culture establishment, promotion of relations with suppliers and consumers.

At present the Polyclinic holds ISO9001:2008 certificate of conformity. The evidence of the Polyclinic management team adherence to the principles of the social accountability is proved by the quality management policy which includes commitment for the parties concerned: patients, staff members and external parties.

For instance, the Polyclinic commitment for its personnel is formulated like “Ensuring conditions for personal fulfilment and professional development of employees”:

- Timely professional enhancement and occupational retraining;
- Engagement of employees into all spheres of Polyclinic operations;
- Creation of an open, comfortable and safe internal environment;
- Observance and protection of rights, honour and dignity of the Polyclinic personnel.

Let us now regard constructing the motivation system of the Polyclinic taking the principles of social accountability into consideration.

3. Research objective and methods

The paper aims to study the opportunities of development of a medical institution corporate culture regarding the social accountability principles.

The research methods and tools include employee survey; analysis and synthesis of information; statistical methods of processing and data visualization.

The expected outcome of the research is the possible ways of engagement of employees into the process of continual operation improvement.

4. Research procedure

The requirement analysis of SA8000, ISO9001 and ISO26000 demonstrates both similarity in some concepts and emphases and also some diversity which are to be considered when building a socially-oriented quality system. Moreover, standards SA8000, ISO9001 and ISO26000 could initially be integrated with ISO9001 which resulted in appearance of synergetic and specific zones in the management system when finally integrated. Synergetic zones indicate the cases of the systems being integrated which are similar in content and structure of their standartisation objects and an identical row of elements and requirements to them. Specific zones appear as a result of widening the
management system application sphere through the distinctive management spheres, objects, integrated systems and specific requirements of the standards which the systems being created are to comply.

Table 1 represents the comparison results of standards ISO26000:2010, ISO9001:2015 and SA8000:2014 requirements.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6.2 Administrative management</td>
<td>5.3 Administrative roles, responsibility and authority</td>
<td>9. Management system</td>
</tr>
<tr>
<td>6.3 Human rights</td>
<td>-</td>
<td>1. Juvenile labour</td>
</tr>
<tr>
<td>6.4 Working practice</td>
<td>7.2 Competence</td>
<td>6. Punishment administration</td>
</tr>
<tr>
<td>6.5 Environment</td>
<td>-</td>
<td>3. Health and safety</td>
</tr>
<tr>
<td>6.6 Conscientious business practice</td>
<td>8.4 Product supply and external service management</td>
<td>9.10 Supplier relationship management</td>
</tr>
<tr>
<td>6.7 Consumer related problems</td>
<td>5.1.2 Consumer orientation</td>
<td>9.6 Complaint handling and conflict management</td>
</tr>
<tr>
<td></td>
<td>8.2.1 Consumer feedback</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9.2.2 Definition of requirements to production and service</td>
<td>9.7 External checks and interaction with concerned parties</td>
</tr>
<tr>
<td></td>
<td>9.1.2 Consumer satisfaction</td>
<td></td>
</tr>
<tr>
<td>6.8 Community involvement and its development</td>
<td>4.2 Understanding the concerned parties’ needs and expectations</td>
<td>4. Freedom of association and right for collective bargaining;</td>
</tr>
</tbody>
</table>

Thus, it can be concluded that the Polyclinic management system based on ISO9001:2008 standard strongly conforms the principles of social accountability stated in SA8000 and ISO26000 in terms of personnel management. These social accountability principles can be further developed while building the company’s corporate culture.

5. Research of the Polyclinic corporate culture and employees’ motivation

The Polyclinic personnel body by the end of 2015 had the following characteristics. It consisted of 157 staff members. The number of doctors was 43 (11 males and 32 females), aged up to 36 years old – 8 people, older 60 – 7 people. Nursing staff contained 57 people (3 males and 54 females), aged up to 36 years old – 22 people, older 60 – 9 people. Other specialists made up 53 people (7 males and 46 females), aged up to 36 years old – 21 people, older 60 – 7 people. More than half of the Polyclinic personnel body was up to 45 years old; that is the staff is quite young.

In order to analyse the corporate culture and understand the problems of motivation that exist in the Polyclinic, there was a survey held among the employees.

For research purposes a questionnaire was developed made up of 20 questions divided into 5 sections. 36 employees participated in the survey. The answer to each question implied a rating system from 0 to 10. The higher the average point was the higher the satisfaction of the employees with the certain entry of the survey was.
The survey results are listed below.

The question section “Interest to work” was assessed at 8 points on average which demonstrated that the Polyclinic employees do feel interested in what they do at their workplace.

The question section “Staff communication” was assessed at 3 points on average which was the evidence of some perplexities in communication and information exchange in the Polyclinic.

The question section “Career opportunities” got the average estimation of 7 points, which proved that the Polyclinic employees were aware of the opportunities how to enlarge their competence as a staff member.

The question section “Moral environment” was estimated at 6 points, which was an indicator of certain aspects that had to be improved.

The question section “Informal communication” was evaluated at 5 points on average which actually reported on the low level of the staff social cohesion outside their work duties.

The Polyclinic corporate culture can be generally rated as that of middle-class. The staff member interaction is rather low developed. The employees do not try to follow the traditions of the community, destroying this way the existing corporate culture. The staff members reported that the factor which prevents them from working efficiently is a low level of their motivation.

Thus, the social and psychological environment of the working community, which is the most important characteristic of the corporate culture, is to be improved; staff social cohesion and openness to communication and sense of community also require further enhancement.

So, the programme of personnel incentives is to be revised and then complemented with productive elements. Personnel motivation study was conducted on the basis of employee motivational types. In order to elicit the motivational structure of employees and managers we used the method – test version “Motype”, running the typological model of V. Gerchikov (Gerchikov, 2008). The “Motype” test consists of 18 multiple-choice questions and diagnoses the manifestation degree of each of the five basic types of motivation.

The questionnaire consists of five sections:

• Social and demographic section;
• Attitude to work;
• Attitude to salaries and wages.

The questions are cloze and the result processing is performed with the special chart of labour motivation types.

46 employees participated in the study. This group consisted of 27 nurses, 15 doctors and 4 managers which made up 30% of all the doctors employed 50% of nurses/paramedics and 100% of managers of the Polyclinic.

The result processing was held in two steps. First, the questionnaires were checked and the individual motivation profile of each interviewee was identified. The type of motivation was defined according to the chart. Each answer was additionally marked with an index of the corresponding type or types of motivation.
The second step was devoted to the statistical processing of the answers. It was performed for each group of labour motivation separately. The questionnaires were selected according to the group considered for such statistical analysis.

We summed up the indices for each type of motivation from all the questionnaires received and then divided the obtained result by the number of questionnaires in the group, that way we got the average index of certain type of motivation in each group. Finally, the same process was performed for each type of motivation and then the data of average indices were tabled so that the overall situation of the type of labour motivation in the Polyclinic could be analysed.

The structure of the labour motivation in the Polyclinic can be seen in Tables 2 and 3.

Table 2. Labour motivation structure according to the employee group.

<table>
<thead>
<tr>
<th>Motivation type</th>
<th>Managers</th>
<th>Doctors</th>
<th>Nurses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Average index</td>
<td>Rank</td>
<td>Average index</td>
</tr>
<tr>
<td>Instrumental</td>
<td>23%</td>
<td>3</td>
<td>34%</td>
</tr>
<tr>
<td>Professional</td>
<td>31%</td>
<td>1</td>
<td>26%</td>
</tr>
<tr>
<td>Patriotic</td>
<td>25%</td>
<td>2</td>
<td>17%</td>
</tr>
<tr>
<td>Master</td>
<td>14%</td>
<td>4</td>
<td>7%</td>
</tr>
<tr>
<td>Escaping/Lumpen</td>
<td>7%</td>
<td>5</td>
<td>16%</td>
</tr>
</tbody>
</table>

Considering the obtained results, it can be concluded that the Doctors of this organisation are characteristic of the instrumental motivational type. That means that financial reward could be the most effective method of labour incentive.

The professional type of motivation has the highest pre cent in the second rank. This category of employees require setting challenging tasks for the better effect.

The patriotic type of motivation is quite feebly-marked that is why moral forms of incentives can be applied but would not be highly efficient.

It is important that the lumpen type of motivation is feebly-marked as well and the master motivation is not typical of this group, that why any negative or natural form of incentives and also paternalism and participation in administration are not the recommended ways of labour incentives.

The results also describe the Nurse at the first rank as having predominantly instrumental, professional and lumpen type of motivation. That brings us to choose such forms of labour incentives as financial ones, opportunities of challenging professional tasks, penalties and threats accordingly. On the other hand, at the second rank the professional type of motivation has quite a high per cent which suggests that the job content is more engaging than the salary rate.

The patriotic and instrumental types of motivation have received the same per cent for this category of employees which brings out moral form of labour incentives as really efficient ones.

The master type of motivation is shown low therefore participation in administration as an incentive has no practical sense.

For the Managers it is significant to achieve professional recognition, they are attracted by interesting and challenging tasks and opportunities for self-realisation.

As people with a predominant professional type of motivation are not primarily concerned with financial reward for their work, the head manager is to provide them with tasks which imply
opportunities for their professional development as a way of efficient use of their labour potential. However, the employees of this category are quite successful as specialist of functional type and are focused on career development only if their work engages them enough. As seen from the chart their leadership qualities are rather moderate.

Table 3. General structure of labour motivation in the Polyclinic.

<table>
<thead>
<tr>
<th>Motivation type</th>
<th>Average index</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instrumental</td>
<td>29%</td>
<td>1</td>
</tr>
<tr>
<td>Professional</td>
<td>28%</td>
<td>2</td>
</tr>
<tr>
<td>Patriotic</td>
<td>18%</td>
<td>3</td>
</tr>
<tr>
<td>Master</td>
<td>11%</td>
<td>5</td>
</tr>
<tr>
<td>Lumpen</td>
<td>14%</td>
<td>4</td>
</tr>
</tbody>
</table>

As Table 3 suggests, the predominating type of the employee labour motivation is an instrumental one.

The predominance of this type of motivation focuses on financial forms of reward as the most efficient for the Polyclinic employees. That way the motivational priorities of the staff have been identified.

Concluding the research results it is necessary to say that the corporate culture in the Polyclinic has both positive and negative characteristics.

The positive features elicited are the following.

- The Polyclinic has an articulated goal and mission which are oriented onto the consumer, the quality of and efficiency of processes and personnel development.
- Information channels are reliable and well aligned. Here we refer the Polyclinic web-site, staff briefings and meetings.

There functions a balanced system of records administration which spells out the rules for the employee operations.

The negative features can be stated as the following.

- There exists an unmet need of the staff for their competence development.
- There is a requirement for the non-financial form of professional recognition.
- The social and psychological environment of the staff body demands some improvement.

Aiming to promote the corporate culture of the Polyclinic there has been developed the Code of corporate conduct. Integration of the Code will enable solving a set of tasks: to formally establish and consolidate the existing corporate culture, to secure the unified corporate standards and framework.

The Code of corporate conduct of the Polyclinic consists of the following sections:

- Staff training;
- Appearance and dress code policy;
- Patient communication policy;
- Corporate special events;
- Policy of staff incentives;
- Health, safety and environment;
• Gifts and other forms of gratitude;
• Social benefits, guarantees and amends;
• Information confidentiality policy.

Implementation of the suggested measures into the corporate culture development leads to promotion of labour satisfaction (motivational effect), as staff relations in this case consider social background in labor-management.

6. Conclusion

As the result of the research the authors have identified the motivation type of the organisation employees, diagnosed the condition of the corporate culture and developed the Code of corporate conduct.

Considering the principles of social accountability, the Polyclinic management team establishes a socially-grounded quality system which enables them to promote staff motivation and engagement into the process of activity improvement. The Polyclinic heads create the corporate culture to become more attractive as an employer for a specialist, develop conditions for professional and personal growth of employees whose conscientious work affect the professional image of the Polyclinic and the number of patients.

References


