

PROBLEMS AND SOLUTIONS IN THE MANAGEMENT OF MEDICAL INSTITUTIONS IN MODERN CONDITIONS

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The problems of managing medical institutions in modern conditions are considered: underfunding, low level of trust of Russian citizens in the healthcare system, problems of quality and accessibility of medical services, shortage of highly qualified medical personnel, low managerial qualifications of heads of healthcare organizations. The main factors complicating the management of healthcare organizations have been identified. The main directions for improving the work of healthcare institutions have been identified. Increasing operational efficiency means improving key indicators of the medical and social efficiency of a medical organization. Different approaches to determining the efficiency of a medical organization are considered: efficiency on the part of contractors, efficiency on the part of patients, efficiency on the part of staff, efficiency on the part of management. To solve problems in the management of a medical institution and improve the efficiency of its work, it is proposed to use the total quality management (TQM) method.

Key words: management of the activities of a medical institution, performance indicators of a medical institution, total quality management (TQM) method, standardization.

Problem Status

The main priority of the state policy of the Russian Federation at the present stage is the preservation and strengthening of public health. Currently, medical institutions are becoming objects of increased attention. An important indicator of the effectiveness of the management of medical institutions is the public's trust in their activities.

Management in healthcare involves managing the financial, labor and material resources of healthcare. The main goal of healthcare management is to reduce losses in Russian society from morbidity, disability and mortality. In the context of the economic crisis in healthcare, the need to increase the efficiency of healthcare institutions is of particular importance, which requires the introduction of new forms, methods and models for managing all parts of the medical institution as a system. In conditions of financial shortages, the economic component of medical care is becoming increasingly important. Administrations of healthcare institutions strive to minimize costs, identify financial reserves, and increase income from paid medical services. The main means of achieving the above goals include improving methods of organizing and managing medical organizations, comprehensive statistical and financial control of medical organizations, and optimizing the treatment process.

The successful development of high-tech medicine implies the need to create management mechanisms aimed at improving the quality and efficiency of both primary care medical institutions and high-tech medical centers.

The quality of medical care depends, on the one hand, on the level of development of primary health care services, and on the other, on the provision of medical institutions with high-tech equipment and materials. Both areas require the involvement of qualified medical

personnel capable of making rational decisions based on a scientific approach, effective managers of medical institutions capable of ensuring the economic and clinical effectiveness of modern treatment methods. In this context, it becomes relevant to introduce a management system for a medical organization based on quality management.

Analysis of the main problems and factors complicating the management of healthcare organizations

The main problem of healthcare institutions is the lack of sufficient funding. Given the innovative nature of modern medical services, for more -

To achieve competitiveness and ensure the continuous development of medical institutions, significant investments are required. Due to the low level of effective demand for expensive high-tech medical services, the acquisition by medical institutions of innovative equipment, premises, and training of medical personnel become unattainable and unprofitable tasks for most medical institutions.

All medical institutions, without exception, have faced the problem of underfunding in recent years due to the following factors:

- increased costs for imported consumables necessary for the treatment process;
- reduction in the value of the ruble against foreign currency;
- increasing the salaries of medical workers.

In addition to economic problems, currently there are acute problems of civil society's trust in the healthcare institution and the patient's interpersonal trust in the doctor. One of the conditions for achieving the main goal of the activities of medical institutions is the formation of trusting relationships between doctors and patients, and the main goal of their activities is to strengthen the health of society by reducing mortality, disability and morbidity.

The low level of trust of Russian citizens in the healthcare system is based on problems of quality and accessibility of medical services.

Quality management is a continuous process of influencing the provision of medical care in order to ensure quality through the consistent implementation of management functions. In Russia, the problem of ensuring the quality of medical care is usually solved through quality control and assessment, since these areas are the most developed from the standpoint of the availability of a sufficient regulatory framework, a wide range of scientific research and publications, as well as their implementation in practical activities. The quality control system for medical services has been in effect since the adoption of the order of the Ministry of Health of the Russian Federation and the Federal Compulsory Medical Insurance Fund dated January 19, 1998 No. 12/2 "On the organization of work on standardization in healthcare" and other documents that were developed in pursuance of the above order. Over the past time, significant steps have been taken to organize and implement both departmental and non-departmental systems for monitoring the quality of medical care, but this problem does not lose its relevance.

Factors that complicate the management of healthcare organizations can be divided into two groups according to the method of occurrence: external environmental factors and internal environmental factors.

The following are considered to be environmental factors:

- on the part of the state: inflated licensing requirements; high requirements for medical premises; outdated standards for equipping medical offices; dumping prices for paid services set by state medical institutions;

- on the part of suppliers: inflated cost of medical materials and equipment;

- on the part of consumers: a high level of distrust in medicine, prejudice of the population against paid medical services;

- other factors: lack of premises.

Internal environmental factors include:

- low level of diagnostic services;

- lack of advertising and marketing (or their low quality);

- low managerial qualifications of institutional managers;

- shortage of qualified medical personnel;

- shortage of financial resources and underfinancing.

Taken together, interacting with each other, these factors lead to inhibition of the development of modern medicine.

Thus, we can identify the main problems that arise in the management of medical institutions at the present stage:

1. The problem of underfunding.

2. Low level of trust of Russian citizens in the healthcare system.

3. Problems of quality and accessibility of medical services.

4. Shortage of highly qualified medical personnel.

5. Low managerial qualifications of heads of healthcare organizations.

Consequently, the main system-forming factors for the effective functioning of Russian medical institutions are:

- improving the organizational system to ensure the provision of higher quality free medical care to citizens of the Russian Federation (within the framework of state guarantees);

- providing medical institutions with a sufficient number of highly qualified medical personnel;

- resource provision and development of infrastructure of healthcare institutions using standardization and innovative approaches.

Main directions for improving the work of healthcare institutions

Solving problems that arise during the functioning of healthcare organizations should lead to improved quality and accessibility of medical services. To do this, it is necessary to create unified management systems for healthcare institutions that will help improve the quality of medical care and increase the efficiency of their activities.

Modern economic conditions dictate the need to consider issues of managing the quality of medical care in the following aspects: increasing the technological effectiveness of all processes of its provision, standardizing and optimizing the choice of medical technologies, applying the principles of evidence-based medicine in practice, using advanced forms and methods of informatization and organization.

Along with this, management models used in practice, as a rule, focus exclusively on the process of providing medical care and do not take into account those interrelated processes and

activities of a healthcare organization that are directly or indirectly involved in the process of creating a medical service and influence its result. Existing models rely mainly on the standardization of functional algorithms for the diagnostic and treatment process and medical services (clinical pathways, patient management protocols, standards of medical care) and on methods for monitoring and assessing the quality of medical care. Currently, the issues of introducing a process approach to management in medical institutions, which would allow continuously improving the quality of services provided with available resources and effectively solving assigned tasks, remain insufficiently developed. Despite the introduction of ISO 9000 standards, which define the general requirements for the quality management system of any organization without exception, mechanisms for their implementation in healthcare institutions have not yet been developed.

In addition, the quality management system is usually considered as a subsystem, and not as an integral management system of a medical institution, the activities of which are aimed at increasing the satisfaction of consumers (patients), the effectiveness of the processes of providing medical care and the activities of the medical institution as a whole. Currently proposed directions for improving the level of quality management of medical services are mainly borrowed from the experience of industrial production, which is faced with the need to urgently improve quality. Over the past decades, many medical institutions have adopted the method of total quality management (Total Quality Management - TQM) and achieved quite good results.

The TQM system is a comprehensive system that focuses on continuous improvement of quality, minimization of production costs and just-in-time delivery. The TQM philosophy is based on the principle that there is no limit to improvement. In relation to quality, the target setting is “striving for 0 defects”, for costs - “0 unproductive costs”, for deliveries - “just in time”; it is assumed that it is impossible to achieve these limits, but the attitude is formed that one must constantly strive for this and not stop at the achieved results. This philosophy has a special term - “continuous quality improvement” (quality improvement).

The TQM system uses quality management methods that are adequate to the objectives. One of the key features of the system is the use of collective forms and methods of searching, analyzing and solving problems, the constant participation of the entire team in improving quality.

Let's consider the main directions for improving the work of medical institutions in quality management, which should be an integral part of the main plans for the activities of all organizations in the healthcare industry. The result of the study and analysis of a number of successful processes to improve the activities of enterprises and organizations in economically developed countries, as well as generalization of the experience of leading Russian enterprises, was a list of the main directions for improving the efficiency of medical organizations. These areas include:

1. Increasing the interest of senior managers of a medical institution in improving its performance. To begin the process of improvement, genuine confidence among the top management of a healthcare organization that it is capable of more than past achievements is absolutely necessary. The improvement process begins with senior management, develops as

other employees become interested in the process, and stops when interest in it from senior management wanes.

2. Awareness of the need for collegial decision-making to improve activities. To implement the principle of collegial decision-making, it is necessary to create a public (trustee) council or commission to improve activities. The public council should include representatives of senior management, as well as heads of departments and services, doctors and other personnel. The main functions of the council should be to study the process of improving activities and adapt it to the conditions of the medical institution. Experience shows that there are no universal specific recommendations for quality improvement for all medical organizations and even departments of one medical institution. The Public Council for Performance Improvement is the developer of the performance improvement process, prepares the medical organization for the implementation of improvement measures and coordinates activities to implement this process.

3. Involving the entire management team in the improvement process. The entire management team of the medical institution is responsible for the implementation of the performance improvement process. This requires active practical participation from every senior and middle manager (from the chief physician to the chief accountant). Each manager should receive special training to learn new requirements for performance standards and obtain information about existing methods for improving performance.

4. Participation of doctors and other personnel in the process of introducing activities to improve activities. Once the entire management of a medical institution is involved in the process of improving performance, it is necessary to move on to involving doctors, nurses and other members of the medical institution team in this process. This is the responsibility of each individual unit manager, who must form a “performance improvement team” within his unit. For example, the head of a department, as the leader of such a group, is responsible for organizing the training of its members in those methods of improving work that he himself has already studied. The primary responsibilities of a performance improvement team include evaluating the performance of its unit and working toward continuous performance improvement.

5. Encouraging individual participation. Despite the importance of collective action, attention should also be paid to each individual member of the team. In this regard, it becomes advisable to develop a system of measures that encourages personal participation, allowing one to evaluate and recognize the results of the contribution that each employee makes to improving the efficiency and quality of the medical institution.

6. Formation of a group to improve the process management system. Any repeatable action in each department of a medical institution is nothing more than a process, which is controlled using the same methods that are applicable in the management of conventional technological processes. To improve the process control system, it is advisable to develop a flowchart of operations, including

involved in the process, organize control over their implementation and provide feedback. Only one official is responsible for the implementation of each individual process of providing a medical service and for its successful functioning, even if it covers several areas or

different functional units. The process management system improvement group should consist of representatives from each department involved in the process. Such an organization of work will ensure the most effective interaction between departments and will eliminate the possibility of a negative impact on the entire process if only part of the process is subject to improvement.

7. Attracting suppliers. In the current economic situation, all medical organizations are directly dependent on resource suppliers. Without their assistance, not a single successful process of improving the activities of a medical institution can be carried out.

8. Ensuring the quality of functioning of medical organization management systems. Recently, units have been created in healthcare institutions that are mainly engaged in measuring quality indicators and compiling reports on the level of quality assurance in the process of providing medical services. The main task of these units is to identify problems and correct errors. The result of this approach was the formation of a management system “by deviations”, which reacts to errors that have already been made, neglects the importance of preventive measures and underestimates the importance of excellent work results in departments that are not directly related to the process of providing medical services.

9. Development of strategy and tactics for improving performance. It is advisable for medical organizations to develop a long-term strategy aimed at improving the quality of medical services. It is then necessary to ensure that all managers at various levels understand the strategy and can use it to develop step-by-step short-term plans that contribute to the achievement of strategic goals. Short-term plans are included in the annual plan for implementing the overall strategy. The implementation of these plans must be monitored throughout the year.

10. Creation of a system of encouragement and recognition of merit. In the process of improving performance, a fundamental change in attitude towards errors must occur. Currently, the necessary changes can be made in two ways:

- apply penalties to anyone who makes mistakes in the performance of their duties.
- reward individual employees and (or) the team if they complete assigned tasks or for a significant contribution to the process of improving performance.

Let us note that the optimal way is to recognize the merits of both ordinary employees and managers, and stimulate them to achieve better results. In the process of improving activities, a medical organization should strive for the complete absence of errors by personnel and managers.

When implementing the TQM method, the role of people and staff training increases significantly. To ensure the method's success in Russian healthcare, doctors must take a central place in it.

To implement the changes, it is necessary for doctors to accept the essence of the new requirements. This new knowledge is not yet taught in medical schools, although it is necessary for work in the modern health care system and should be included in the doctor's arsenal along with classical clinical skills, which the new system must also protect and support.

Thus, at the present stage, the importance of effective management is increasing. The measures taken by the institution are a response to environmental influences. The chances of

effective functioning are higher in those medical institutions where a qualified manager has correctly distributed the functional responsibilities of the staff. In times of financial shortage, the speed of response to change is especially important. For a quick response and a clear distribution of responsibilities, it is necessary to draw up a matrix for the distribution of types of management activities between employees of the organization.

In conditions of a shortage of financial resources, it is especially important to create a team of good doctors and ensure low turnover of qualified personnel, and ideally its absence. Highly qualified doctors are always in demand, and if they leave, some patients may be lost. It is important to provide doctors with a decent level of compensation for labor costs, which would be directly dependent on their performance. Comfortable working conditions (for example, flexible hours) and a healthy psychological climate in the team also play an important role. The functional responsibilities of a doctor must be clearly defined, and opportunities for his professional growth must be created.

It is necessary to involve the personnel of a medical organization in the process of making management decisions; this will enable each member of the team to understand their place in the organization, self-actualize and strive for self-development. Despite growing unemployment, there is currently a shortage of highly qualified medical personnel in the labor market. Therefore, it is necessary to improve the qualifications of doctors and nurses not only at the expense of budgetary funds, but also at the expense of profits from the provision of paid services.

Thus, to solve problems in the management of a medical institution and improve the efficiency of its operation, it is advisable to use the TQM method. It offers a set of general principles on which health care providers can create an effective, high-tech health care organization that becomes a powerful, supported organization that performs an order of magnitude better than it has performed in the past .

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