

Global Strategic Business Management on Healthcare Administration and Operations - A Comprehensive Framework for Decision Makers of the Healthcare Industry

Sunil K Adepu¹, Kevin T Cherian², Maqhawe Malinger³, Ramya Surapaneni⁴,
Srikanth Sangoju⁵, Vikram Aditya Boorla⁶, Sandeep Kumar Yadav⁷

¹Student of Doctor of Healthcare Management, The Masterminds International Institute of Management (Masterminds International University), International Quality Standards, Kingdom of Eswatini (Swaziland), Africa

²M.D., General Medicine

³B. Pharm, Regulatory Pharmacist

⁴M. Pharm, Quality Assurance

⁵MBA, Pharma Sales & Marketing

⁶M. Pharm, Medicals Supplies & Surgicals

⁷B. Tech biomed, Medical & Diagnostics Equipments

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Corresponding author: Sunil K Adepu

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Abstract

Healthcare is a system that is constantly evolving, with development moving relatively, quickly and new procedures being created almost constantly. The deployment of new management tactics, such as downsizing, fee-for-service, managed healthcare capitation system, etc., is a result of efforts to lower the cost of healthcare. Every institution is accountable for providing healthcare to ensure the well-being of its most valuable resources: the people. New medical techniques, medical equipment, medications, and diagnostic methods are all examples of advancements in the medical field. New standards of care, which are revised yearly to reflect changes in the healthcare system, have also been developed to match the enormous advancements in healthcare. A dynamic system is needed to govern the healthcare industry because it is a dynamic system that is always evolving. Most healthcare use is not intentional or impulsive. In fact, utilization is usually postponed until a pressing need arises. People don't decide to get a bypass operation when they first wake up. The purpose of quality management is to ensure the delivery of high-quality services, reduce or eliminate avoidable negative consequences, maximize resource utilization, improve processes with the cooperation of all parties involved, and reduce waste related to improper usage of services. The strategy begins with the organizational leadership vision and values statement, then moves on to the establishment of goals and the creation of a strategy for putting these goals into action. In general, the corporate hospitals have adopted a strategic management system and organizing structure, which has resulted in a strategic plan with metrics. It has made it possible to establish formal and quantifiable connections across a wide range of internal business operations, including the yearly operational plan, choices about how to allocate resources, the balanced scorecard, and employee performance.

The Strategic- Management System- (SMS) aligns organizational- planning and- performance measurement and facilitates an- appropriate.

Keywords: Quality Management, Utilization of Resources, Leadership, Strategic Management System, Healthcare Administrations and Operations.

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Introduction

The healthcare industry is constantly evolving and systematic at a rate that is unheard of. Planning for the future has become increasingly crucial in recent decades if any healthcare business is to be profitable for many years to come. Hospitals, clinics, private practices, and other healthcare institutions can be better prepared for whatever the future may hold by making plans for the unforeseen. Healthcare is a service, and managing it requires a thorough grasp of its evolution, expansion, resources, applications, and financial impact. The expense of healthcare is predicted to reach 15% of the United States Gross National Product (GNP) by 2026. This rate is rising daily [1-5].

Planning is essential for managing an organization's finances as well as structural choices made within a hospital or clinic. No matter how big or small, a hospital strategic plan can increase efficiency in all facets of practice management.

Many various decision-makers collaborate to care for patients and run the operations of the modern healthcare system. Strategic planning in healthcare is often misunderstood, but fortunately, the definition is straightforward [5-7].

Strategic Planning in Healthcare

Strategic health planning is setting goals and objectives for where a business wants to go in the future, then developing a strategy to get there. Healthcare planning, in this business specifically, must take into account prospective governmental policy changes, technological improvements, and economic trends that could significantly alter an organization's operations [8,9].

The value of strategic planning in healthcare should be considered in both the short and long terms. Making an effective plan with targeted initiatives requires an

understanding of the institutional structure and how it is essential for the overall system to function.

Setting firm objectives and a plan for achieving them enables employees at all levels, from administrators to physicians, to have the drive and passion that are crucial in the medical industry [10-12].

Doctors, nurses, front-line managers, middle managers, high-level managers, and the board of directors were the six important jobs that we identified. Three kinds of clinical judgments were established: diagnosis, therapy and treatment, prescription, and administration of medications [13].

Budget, resource allocation, technology acquisition, service increases and reductions, and strategic planning were the five categories used to categorize non-clinical choices. In order to learn more about these choices and related ones, we also conducted information-gathering interviews with three executives at one hospital (GSMH) in Siteki, Kingdom of Eswatini (Swaziland), Africa. These actions provide a thorough picture of which hospital staff members make which decisions [14,15].

The structure of the institution is a crucial element that ought to serve as the foundation for strategic planning in healthcare organizations. Making an effective plan with targeted initiatives requires an understanding of the institutional structure and how it is essential for the overall system to function.

Sometimes re-evaluating who controls which aspects of the business, and the hierarchy that follows can be beneficial [14,16-18].

It is crucial for the organization's structure to be solid so that ideas and communication can flow freely while

conducting strategic healthcare planning. Setting firm objectives and a plan for achieving them enables employees at all levels, from administrators to doctors, to have the drive and passion that are crucial in the medical industry.

Benefits of Strategic Planning in Healthcare

The various advantages of strategic planning in healthcare are largely due to the complexity of healthcare planning. Healthcare organizations, like most businesses, operate on many different levels. Health systems must make several plans for the future, from patient care to

financing [19-21].

Strategic planning, as opposed to conventional plans, considers what lies ahead for every area of the company and accounts for changes that are likely to occur across all departments.

When examining an organization's productivity, it is also possible to evaluate the significance of strategic planning in healthcare. The majority of the institutions think they are operating as efficiently as possible, but examining productivity more closely can reveal areas for improvement and allow for the creation of more detailed strategies [22-25].

Table 1: Key areas that a hospital Strategic plan can significantly improve include.

1	Company Culture
2	Goals and Objectives
3	Operating Budgeting
4	Service Line Decisions
5	Risk Management
6	Capital Planning
7	Cost Accounting
8	Long Range Forecasting

Operations Management in Healthcare

Operations management in the healthcare industry entails supervising the procedures set up to monitor and control the numerous processes that are taking place to propel the services provided, spanning funding, staffing, policy, and facilities. Quality control, quality assurance, healthcare coordination, staff certification and licensure credentialing, managing health insurance and associated claims risks, coordinating medical reviews, and legal, auditing, and compliance programs are just a few examples of these procedures [26-28]. Overall, operations management in the healthcare industry entails managing both higher-level strategic operations and the day-to-day hospital operations that have an impact on the patient experience.

What Do Hospital Operations Managers Do?

In hospitals, operations managers take on

many tasks in the direction of the from the day- to-day hospital operations, including:

- Adhering to the operating budget, financial goals and objectives with economic and efficient performance.
- Establishing policies and procedures that support high-quality healthcare service, in partnership with hospital management, medical teams and the surrounding community
- Managing a team of healthcare professionals Influencing strategic decisions related to hospital functions
- Resolving operational issues and analyzes workflow

Steps to Empowerment

The Responsibilities of Health Care Management

- Health care management is built upon several key tasks.

- Hiring of new employees,
- The training and managing of medical staff,
- The creation of organizational goals and
- There are also steps managers can take to empower employees.
- Define clear roles and organizational goals.
- Listen carefully and promote open communication.
- Provide a safe environment for failing, and give employees autonomy and room to improve.
- Managers should also recognize and praise efforts, which can include rewarding success.
- Must create a respectful and positive work environment that holds employees and themselves accountable for mistakes and failures, which can demonstrate supportiveness and foster trust

The Benefits of Empowering Staff/ Teams

It can improve output and efficacy, as well as boost job satisfaction among staff members. Additionally, it could promote teamwork between members. Staff empowerment also promotes employee accountability and responsibility, which might result in productivity improvement. Additionally, it can encourage original thinking and problem-solving skills. Lastly, it can lower organizational expenses including operational and staff turnover costs [29-33].

Empowering Organizations Depends on Leadership

Three leadership philosophies have a direct impact on empowerment. The first leadership approach is directive. The ability to give people instructions and enforce punishments when they don't follow them defines leadership. This type of leadership, sometimes referred to as

autocratic leadership, is good for novice workers but harmful for talented and motivated ones because it necessitates ongoing reliance on the boss.

Participative leadership is the second style of leadership. This approach promotes team members' thoughts and feedback while also getting them involved and working together to accomplish goals. It fosters a supportive work atmosphere where employees are inspired to express their creativity. As a result, there is an improvement in staff retention and satisfaction. [34,35].

Delegative leadership is the third leadership approach. This laissez-faire style of leadership is characterized by a propensity to delegate decision-making to subordinates and team members. The approach also referred to as laissez-faire leadership, offers staff members minimal direction from managers and ambiguous positions and authority, which lowers motivation. The least effective leadership style, according to experts, is this one.

Study methodology

In 2021, a hospital survey was conducted in Eswatini in one hospital based in the Lubumbo region Good Shepherd Mission Hospital (GSMH), with 10 employees selected using multi-stage sampling, The team selected 10 key role-player employees within the hospital (GSMH). We administered Questionnaires to the 10 selected employees in the hospital.

The purpose was to create a comprehensive framework for decision-making in health care administration and operations (Global Strategies on business management of healthcare administrations and operations). The research process comprised three steps.

Population of the Study

The study covered the administrator, which was responsible for monitoring the system's general performance, including staff registration. Any authorized

personnel of the administrator could also manage the system. The system's main users were the administrator, receptionist, billing officer, pharmacist, and head nurse. The patients and doctors of the hospital were also part of the population of the study.

Operational feasibility

The hospital had discussed the need for computerizing its transactions, which the researchers discovered during their initial study. The users would not be reluctant to adopt the suggested idea because it was so pertinent to their current circumstances. The initiative has the support of the management as well because it is essential for the hospital.

The developers' system did not lead to a reduction in the workforce. Since the current workforce was already computer literate, there was no need to cut it. The researchers were able to provide the materials required for user training, such as a user handbook or user guide that would be sent to users at project completion. Additionally, they could give individual training. On the other hand, there would be a modest transition for

hospital patients from the current management to the new centralized management system. However, because hospital work routines remained unchanged, patients did not need to adjust as much.

The system's development required taking legal and moral concerns into account. Even though the system was automated, the researchers regarded the hospital's official receipt as part of the system. For legal purposes, the official receipt was necessary. The researchers urged the users to accept it as a requirement for the hospital's upgrade.

In conclusion, a systematic planning process was done to establish how much time and attention would be put into building the system, including the training to be given to the users when needed. The functional linkages as they relate to how the processes were developed are depicted in Figure 1's functional decomposition. It largely concentrated on how the system's overall functionality was designed and how users and the system interacted with it.

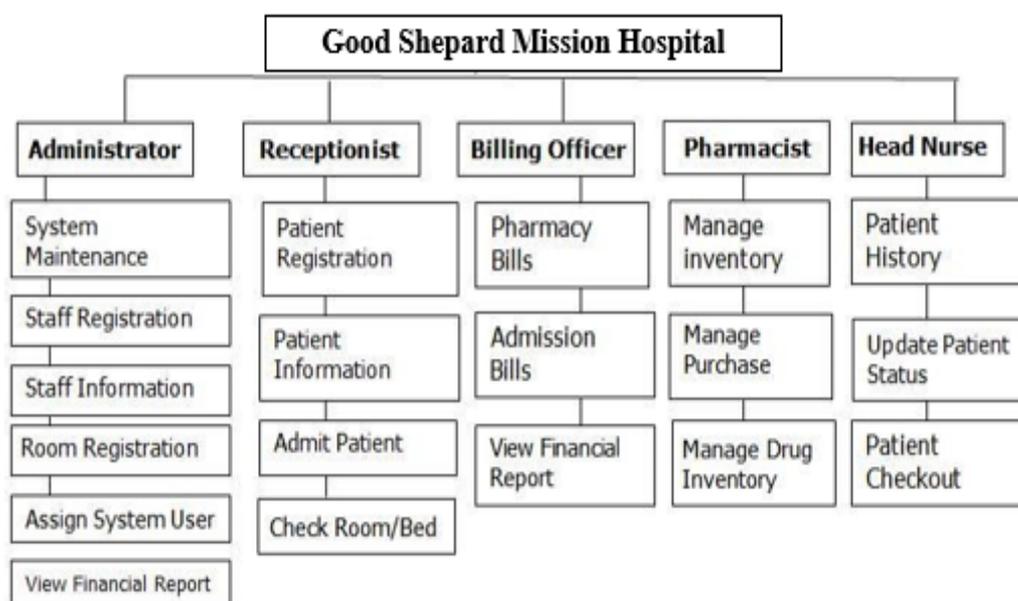


Figure 1: Functional Decomposition Diagram

General Observation and Report on the scope for improvements:

The hospital has located in Siteki Town and they are serving the rural people in and around Siteki, Eswatini.

1. The Average Out-patients:
2. The Average In-Patients:
3. Number of Medical Doctors Full time:
4. Number of Medical Doctors Part-time/ Visiting Consultants:
5. Number of Para Medical Staff Full time:
6. Number of Para Medical Staff Part-time:
7. Administrative Staff:
8. Support Staff:
9. Maintenance Staff:
10. Emergency & Ambulance Team:

Globalization and vision plan needs to be established so every country and the Govt policies must be improved and strategically they must Assists and revisits the healthcare system of the country because that is one key parameter that every country must take care of their people i.e. means Citizens and people of the country.

If the people are healthy the country will grow much stronger nations, and the country can produce much more economical growth and development. If they are sick and they are not able to perform their lives then defiantly the country's economy is going to drop.

So main focus is to ensure the standards of medical care and globalization of the system and spreading the technology as far as excellence must be provided across every part of the world.

- I have been focusing on Asian, and African Countries for the last 10 years. It has given me a lot of challenges to experienced, the comparison of medical systems which is available in India as well as in Africa we could be able to see the huge difference in Health Sectors.

- Even though the facility is available in certain areas which are not affordable i.e. it is not everyone can afford the treatment.
- Health insurance definitely will play a big role to make the system viable and accessible globalized
- All country's decision makers make the plan with health insurance companies to create an ideal platform where the treatment should not be compromised at any cost i.e. is my ultimate aim.

Departments Visited

Security Dept, Sanitization room, Vaccination room for COVID/ Temp Check, Vaccination room for Children Ward, Reception Dept, Outpatient waiting for Area, Bill Receiving and paying Counter, Consultation Room for Doctors like Outpatient In-Patient dept, GPs, Intern Medicine, Physicians, Paediatrics, Dental, Obs & Gyn, Physiotherapy, Ophthalmology, Maternal & Health, ENT, HIV/AIDS, Home based care like T.B, D.O.Ts, Mental Health, Casualty/Emergency Services, Wellness center, Counselling Centres, Community Health, Pharmacy Department/Drug Dispenser, Storeroom for Pharma & Stationery, Pathology Dept/ Laboratory, Imaging Services X-ray, ultrasound, First Services Dept, Surgical Room, ICU, etc.

Result and Discussion

- First, we found pertinent literature about decision-making roles and duties in healthcare systems to categorize the sorts of decisions and their related decision-makers.
- Secondly, we created interview questions for information-gathering using the first healthcare decision-making framework.
- Third, we performed information-gathering interviews with senior-level staff members in the hospital organizations, including Good Shepherd Hospital, to support the identified literature and pinpoint crucial responsibilities within the decisions.

- Medical facilities spread across, and we can be able to maintain the healthy Community can be able to produce a much more strong force.
- In every region within 50 km should have multispecialty or super specialty hospitals in every country to care to treat the people, the system will be taken care of across the countries.
- Every 15 km there should be a clinic facility and once in 30 km treasure care, primary care centers District Health Management Team (DHMT) i.e. increase the capacity of the health facility.
- In every region and town 20-30 km with education institutions/universities with multispecialty hospitals these are the strategic Recommendation if we adapt this formula to global services.

The recommendations of a healthy country will grow and full back of economic development if the healthy people will have good health and Economic Development the country will become A Developed Country. So people are very important and included in the pharmaceutical company playing a very big role in medical care and we must ensure the Distribution of supply every medication should be appropriate with the proper Standard As per GMP/FDA certified for manufacturing units similarly the Pharmaceutical distributors should meet the requirements of GDP certification and International Quality Standards (ISO) Certifications etc. and the procurement/supplies of Medical Supplies / Medical Equipment / Diagnostics have to undergo/certified the ISO 13485/CE Standards etc.

The healthcare institution shouldn't complicate the medications; however, we must have a better country to avoid the misuse of medical facilities and medical clinics, Treasury care, Multispecialty, Super specialty, and University of hospitals Technology can use the efficacy of medicines.

Likely daily medicine facilities available such as, through telephone consultations have improved a lot. So that the people must make more awareness and the medical institutions should bring more awareness to the public. i.e people will not follow YouTube channels Facebook channels are any other social media for healthcare facilities.

Summary

Leaders in the healthcare industry throughout the world are working harder than ever to ingrain the concepts of continuous improvement in their healthcare facilities. Results can significantly improve when staff members are given the tools, they need to offer reliable, high-quality care. The nine primary results from our study on how healthcare executives may create and maintain a culture of continuous improvement in healthcare are summarised in this paper.

A methodical, long-term strategy for improving the calibre of patient care and results is continuous improvement. Building a culture of continuous improvement requires dedication, investment, and tenacity; it is not a fast fix or turnaround project.

"Operational excellence" is the aim of continuous improvement, which is to create a method of working that improves healthcare quality, safety, and efficacy through the regular application of continuous improvement approaches. Frontline staff members lead and own continuous development, which is supported by regular, specialized training for the benefit of the entire service.

This is a culture change toward a new mindset of becoming a self-analytical, self-critical, learning organization that gives frontline personnel the authority to locate the underlying causes of issues in systems and processes and to create solutions.

This paper summarises the most important takeaways from the interviews with the Good Shepard Mission Hospital's

healthcare executives, focusing first on establishing and subsequently on maintaining a culture of continuous improvement.

The results show that choices about diagnosis, therapy, and the prescription and administration of medications were made collaboratively by doctors and nurses. The board, which was only concerned with governance, led long-term strategy choices, chose the CEO, and exercised supervision. Strategic plans were created, budgets were approved, and resources were distributed by senior-level management. Middle managers carried out policies and made sure they were implemented. First-line managers oversaw the workforce and handled financial matters.

According to the findings, the CEO/Director was generally more interested in making strategic choices. Senior Medical Officers (SMO), and Chief Nursing Matron (CNM) were more focused on clinically relevant choices and staffing. The general management of the hospitals' structure and operations, including choices on budget, strategy, and resource allocation, fell within the purview of management. The senior executives prioritized a range of decisions, and focused on their particular domain, while the CFO made judgments on strategy and the budget. In addition, we learned the following about crucial roles in decisions: The SMO was frequently the approver, executor, input, and proposer, while the CEO and CNM were typically the approvers. Rarely the executor and frequently the approver was the top management.

Conclusion

An exploratory investigation indicated that the underlying decisional processes might be used to understand and assess institutions. In light of this, we conducted

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a more in-depth search on decision-making and healthcare. We looked around and found that there was no overall framework for making healthcare decisions. Based on what we learned from the literature, we made one. We looked for empirical data from information-gathering interviews based on the framework from the literature. We confirmed our findings and discovered new information regarding crucial functions in decision-making.

Recommendations

A mixed-method study design with both qualitative and quantitative components may be used in future investigations. Comparing the impact of overlap in crucial decision-making roles on financial metrics like net gain would be fascinating (or loss). This will aid in the construction of the structure and tools needed to enable healthcare systems to do their self-analysis.

The senior leaders in the organization should then be interviewed by the operations officers. Systemic, organizational, and departmental levels should each have a separate interview segment. The operations officer should evaluate the findings, compare the various functions and the essential decision-making responsibilities they carry out, and look for any areas of overlap.

Future research can evaluate additional facets of healthcare, such as the payment system, and undertake analyses of a similar nature. This method might help teachers get students ready for careers in health administration by teaching them to evaluate their organizations as systems for making decisions.

The quality management systems would help the institutions to administrate systematic operations to achieve zero medical errors.

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