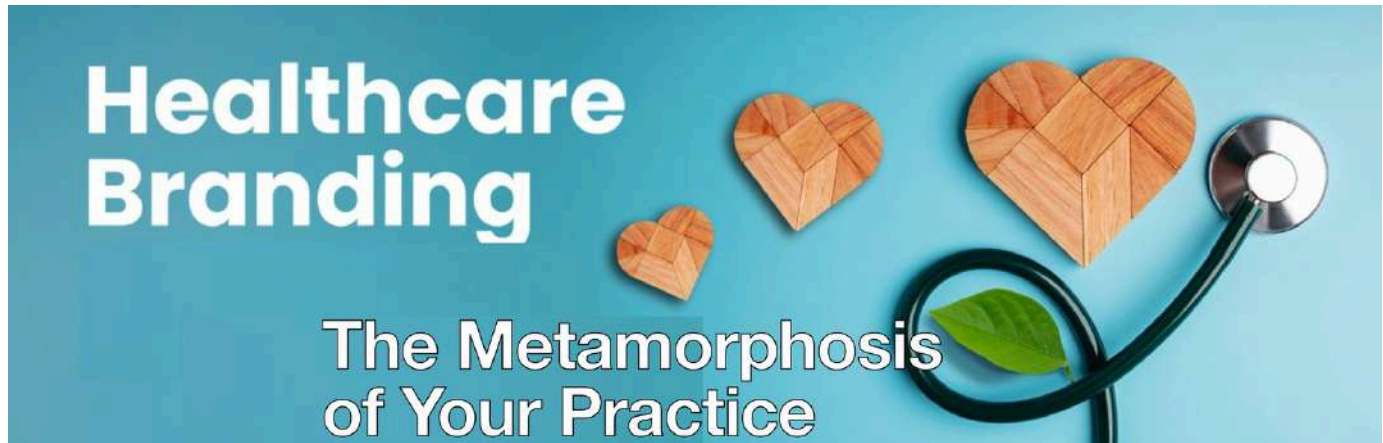


Healthcare



1 May 26



Here's what's happening in healthcare! Low CPB — Chief Faculty- Healthcare

Due to branding errors and brand projection pitfalls in healthcare, the practitioners be it start-ups or established healthcare, getting low margin practice as against the high margin practice they expect. We call this low CPB (Configuration Practice Base)

This is happening due to lack of so many factors and one of them is almost zero in-depth branding. Branding (administration) oneself professionally in the market is the need of the hour; it does not mean having fleet of white elephants in the hospital in the form of employed CEOs, CFOs, GMs, etc.,; no, it's getting connected with the patients and the public and making staff to work towards reaching your ideals, making their organisations robust thru world-class updated systems

Floating websites or social media professionally following conversion principles is need of the hour and not inundating these platforms with full content and boring copy cat information

Another factor to increase the branding is the One-O-One communication with the patients and being professional in case presentation skills

In our live projects with several healthcare institutions, we consistently observe the healthcare is plagued by 'silos' wherein pts & staff are made to run pillar to post due to sickening org culture that seeped in & unfortunately managements give minimal importance on building a strong organizational culture, rushing in only to invest heavily in infrastructure, equipment which often leads to Cost of Poor Quality (**COPQ**), ultimately resulting in ('imbalance') operational inefficiencies, financial distress, and debt accumulation.



In this newsletter you can expect:

COPQ OVERVIEW

CASE STUDIES

HOW WE TRANSITIONED ABOVE HC

CULTURE CHANGE

ACTION STEPS TO GET ROBUST ORG CULTURE

OUR ASSURANCE & WHAT WE OBSERVE



COPQ OVERVIEW

The Cost of Poor Quality (COPQ) in healthcare refers to the financial impact of failing to meet quality standards in patient care and inability to run the healthcare with 'required' professional standards accumulating various costs associated with poor quality, which can ultimately affect its overall branding & sustenance at the end. Here's a breakdown of how COPQ manifests in healthcare:

Components of COPQ in Healthcare:

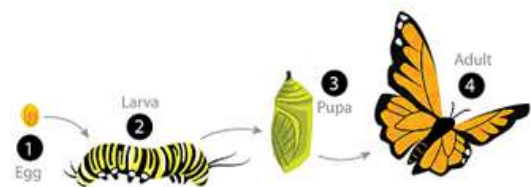
- Internal Failure Costs: 8 wastes of HC
- External Failure Costs: Costs incurred after the service reaches the patient
- Appraisal Costs: Costs spent on monitoring and checking to ensure quality
- Preventive Costs: Costs associated with preventing defects and ensuring first-time right care

All the above topics are heavy to understand and we cover them all in our CMIO Project



₹12 CR LOSS HEALTHCARE RESTORATION

During our project with a mid-sized hospital (150 bedded) during Lean SWOT Analysis, we found out that it faced significant challenges related to the Cost of Poor Quality (COPQ). (It plummeted to the tune of ₹12 Crore debts!) The hospital had been experiencing high rates of patient readmissions, medication errors, patient complaints regarding the quality of care, law suits and zero CPB. These issues not only affected patient outcomes and satisfaction but also led to increased operational costs and strained resources, more so high volumes of pts, staff & consultants attritions took place in this HC. Marketing was almost ineffective, public rejected this HC.



HOW WE TRANSITIONED IT

To restore this sick HC, Initially, our entire Tabor team conducted a primary analysis of the facility through Lean SWOT analysis. After completing this, we assembled internal teams, consisting of members from the Tabor board, external recruits, and hospital inner staff. Together, we organised Kaizen events to strategise and plan steps in the sequence of Plans A, B, and C. We removed non-performing, anti-hospital staff from top to bottom; followed by rigorous retraining programs and fresh recruitments. Afterward, we implemented robust systems and initiated a **culture change** initiative within the organisation through numerous pro-staff initiatives, reviving the culture of innovation that had nearly disappeared.



Culture Change

Organizational culture change is the process of altering an organization's values, beliefs, processes, (its DNA) and strategic goals to align with its vision and core values. This process can help a healthcare to achieve new objectives and improve the work environment

The most challenging task for any healthcare organization is transforming its organizational culture. In world-class companies like Apple, Mayo Clinic, and Virginia Mason, innovation thrives at all levels, from top management to frontline staff, ensuring the highest quality outcomes for both patients and leadership. This stands in stark contrast to the stagnant and outdated cultures found in traditional organisations. As we tour around hospitals we find managements giving least importance to this and they get COPQ at the end

ACTION STEPS TO GET ROBUST ORG CULTURE

1. Quantitatively measure your current culture
 2. Design Future culture, Definitive targets.
 3. Prepare whole team from top to bottom to work towards meeting above goals
 4. Ensure staff and stakeholder participation
 5. Communicate and demonstrate the change, again and again and again and then ... again.
 6. Birth in EI- Emotional Intelligence all throughout the facility to face day today challenges
 7. Embed Continual Trainings & drill in Lean Systems like DSM (Daily Standup Meeting) and regular VSM, (Value Stream Mapping)
 8. Make all from to bottom to innovate & change the whole atmosphere
- We cover all these in our live projects!

Call us for Powerful Projects



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