

**ЗДОРОВ'Я ЛЮДИНИ, ФІТНЕС І РЕКРЕАЦІЯ,  
ФІЗИЧНЕ ВИХОВАННЯ РІЗНИХ ГРУП НАСЕЛЕННЯ**

**IMPROVEMENT MANAGEMENT SYSTEM HEALTH CARE FACILITY OF THE  
MUNICIPAL ENTERPRISE «RIVNE REGIONAL WAR VETERANS HOSPITAL»  
RIVNE REGIONAL COUNCIL**

**ВДОСКОНАЛЕННЯ СИСТЕМИ УПРАВЛІННЯ ЗАКЛАДОМ ОХОРОНИ  
ЗДОРОВ'Я КП «РІВНЕНСЬКИЙ ОБЛАСНИЙ ГОСПІТАЛЬ ВЕТЕРАНІВ ВІЙНИ»  
РІВНЕНСЬКОЇ ОБЛАСНОЇ РАДИ**

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**Abstracts**

The purpose of the study is to develop scientifically based recommendations for improving the management efficiency of the Municipal enterprise “Rivne Regional Hospital of War Veterans” Rivne Regional Council by improving existing management processes, implementing innovative methods and optimizing the use of resources. The main criteria for the effectiveness of the state regulation of the health care system are: the successful implementation by the state of the functions of the guarantor of the observance of the general socio-economic interest of society in improving the health of the population.

The article examines the main aspects of effective hospital management, evaluates the effectiveness of the management of medical institutions, criteria for the overall effectiveness of health care, and indicators of medical and social management of a medical institution. The publication presents recommendations for improving the efficiency of management of the “Rivne Regional War Veterans’ Hospital” Rivne Regional Council.

The development strategy of the institution consists of preparation, analysis of the current state, development of the strategy, its discussion and approval, implementation and monitoring. The scientific work defines the stages of strategic planning and tasks, goals and conditions for the implementation of the institution’s development strategy. The authors defined the main tasks and necessary conditions for the implementation of the strategy. The SWOT matrix of the ME “Rivne Regional Hospital of War Veterans” Rivne Regional Council presents 4 types of strategies, namely: “Strengths – Opportunities” S–O strategy, “Weaknesses – Opportunities” W–O strategy, “Strengths – Threats” S–T strategy and strategy “Weaknesses – Threats” W–T. A strategic map has been developed for the ME “Rivne Regional Hospital of War Veterans” Rivne Regional Council.

The authors have developed a scheme for conducting a clinical audit of the institution, which contributes to the implementation of best practices in health care and the improvement of both the internal order of providing medical services and the results for its end users – patients. There are presented recommendations for improving the development management of the ME “Rivne Regional Hospital of War Veterans” Rivne Regional Council.

The developed proposals will in a certain way ensure the sustainable development of the ME “Rivne Regional Hospital of War Veterans” Rivne Regional Council.

**Key words:** hospital, implementation of development strategy, improvement of medical facility management, clinical audit.

Метою дослідження є розробка науково обґрунтованих рекомендацій щодо підвищення ефективності менеджменту КП «Рівненський обласний госпіталь ветеранів війни» шляхом вдосконалення наявних управлінських процесів, впровадження інноваційних методів та оптимізації використання ресурсів. Основними критеріями ефективності державного регулювання системи охорони здоров'я є: успішна реалізація державою функцій гаранта дотримання загального соціально-економічного інтересу суспільства в поліпшенні здоров'я населення.

У статті розглянуто основні аспекти ефективного управління госпіталем, проведена оцінка ефективності менеджменту медичних закладів, критерії загальної результативності охорони здоров'я та показники медико-соціального управління медичним закладом. У публікації представлені рекомендації щодо вдосконалення ефективності управління закладу КП «Рівненський обласний госпіталь ветеранів війни» Рівненської обласної ради.

Стратегія розвитку закладу складається з підготовки, аналізу поточного стану, розроблення стратегії, її обговорення та затвердження, реалізації і моніторингу. В науковій роботі визначені етапи стратегічного планування і завдання, цілі та умови реалізації стратегії розвитку закладу. Авторами визначені основні завдання та необхідні умови для реалізації стратегії. У SWOT матриці КП «Рівненський обласний госпіталь ветеранів війни» Рівненської обласної ради представлено 4 види стратегій, а саме: стратегія «Сильні сторони – Можливості» S–O, стратегія «Слабкі сторони – Можливості» W–O, стратегія «Сильні сторони – Загрози» S–T та стратегія «Слабкі сторони – Загрози» W–T. Розроблена стратегічна карта для КП «Рівненський обласний госпіталь ветеранів війни» Рівненської обласної ради.

Авторами розроблена схема проведення клінічного аудиту закладу, що сприяє впровадженню кращої практики в охороні здоров'я і покращенню як внутрішнього порядку надання медичної послуги, так і результатів для її кінцевих користувачів – пацієнтів. Представлені рекомендації з удосконалення управління розвитком КП «Рівненський обласний госпіталь ветеранів війни» Рівненської обласної ради.

Розроблені пропозиції дозволять певним чином забезпечити сталий розвиток КП «Рівненський обласний госпіталь ветеранів війни» Рівненської обласної ради.

**Ключові слова:** госпіталь, реалізація стратегії розвитку, удосконалення управління медичним закладом, клінічний аудит.

**Introduction.** Healthcare managers are faced with numerous challenges and issues arising from constant changes in legislation and market demands. These challenges require managers to adapt and improve management processes to ensure the efficient operation of the hospital and its successful adaptation to new conditions.

The Rivne Regional War Veterans Hospital is a very important medical facility for veterans who require specialized medical care. It is very important for our society that these veterans receive qualified and effective medical care. In Ukraine, due to the full-scale invasion, the number of veterans in need of medical assistance has increased.

Regarding the object of the study, it should be emphasized that the Municipal Enterprise (ME) "Rivne Regional War Veterans Hospital" Rivne Regional Council is located in Rivne District, village Klevan, the total area of the medical facility is more than 11 hectares. On the territory of the hospital there are 2 treatment buildings, an administrative building with an assembly hall, a

physical therapy and water treatment building, and a rehabilitation department. 41 cottage-type houses with improved living conditions have been allocated for patient recovery services [4].

One of the main aspects of effective hospital management is ensuring optimal use of resources. This means that staff, equipment and materials must be allocated in a way that maximizes the efficiency and ensures that patient needs are met. Also, it is important to ensure that the hospital is properly funded in order to have sufficient resources to provide quality medical care.

Modern conditions place increasingly high demands on the quality of medical services. To meet these requirements, we need to manage processes efficiently and ensure a high level of quality.

In municipal enterprises that receive funding from the budget, it is especially important to use limited financial resources rationally. This means that every expense must be justified and as effective as possible. To achieve this goal, it is important to improve the management system, which

will reduce costs and increase the efficiency of resource use.

Innovative management approaches are important for modern organizations. They allow the introduction of new methods and technologies that contribute to the improvement of management efficiency. For example, the use of modern information systems and management practices helps ensure faster and more accurate decision-making, and strategic planning allows the organization to focus on important goals and directions of development.

The theoretical aspects of managing the effectiveness of management have been widely researched in the scientific literature. There is a significant amount of work devoted to the general principles of management in organizations, including medical institutions. The works of such authors as Henry Mintzberg [16], Peter Drucker [2], Michael Porter [17; 18] became fundamental for the development of management theory. They describe key concepts and models that can be applied in the field of health care.

The topic of managing the effectiveness of the management of a medical institution is well developed from both a theoretical and a practical point of view. However, there are still many challenges and opportunities for further research in this area, especially regarding the adaptation of modern management approaches to the specific conditions of medical institutions and the introduction of innovative technologies. This provides a wide space for scientific research and improvement of management practices in the field of health care.

There are many empirical studies related to the management of medical facilities. Numerous studies have been conducted in various countries on the impact of management practices on the effectiveness of hospitals, clinics and other medical facilities. These studies often include analyzes of health care quality indicators, patient satisfaction, cost-effectiveness, and resource utilization.

**Methods.** The purpose of the study is to develop scientifically based recommendations to increase the management efficiency of the ME “Rivne Regional War Veterans Hospital” by

improving the existing management processes, implementing innovative methods and optimizing the use of resources.

**Results of the study.** The effectiveness of health care consists in restoring the health of the main component of the productive forces of society – man, contributing to the reduction of morbidity, the growth of labor productivity, and the extension of the working period. In general, the effectiveness of health care is expressed as a measure of its impact and action on preserving and improving the health of the population, which contributes to increasing labor productivity, reducing costs for health care and social security [15].

In order to increase the life expectancy of the population, strengthen its health and reduce mortality from the most significant diseases on the basis of ensuring the availability of medical care and improving the efficiency of medical services, the Government of Ukraine has developed a number of legal and by-laws in the field of health care. The implementation of state targeted, regional health care modernization programs contributed to the development of the resource base of medical institutions that provide medical care in outpatient settings [12].

Socio-economic criteria used to evaluate the effectiveness of the health care system must meet many requirements, namely, they must be objective, adequate (correspondence of the criterion to the real tasks of the system’s activity), measurable (which means the possibility of obtaining qualitative or quantitative assessments for conducting a comparative analysis), sensitive to changes occurring in the system, resistant to small changes in the initial data, synthetic (which means the ability to reflect in the aggregate all significantly important directions of the system’s activity), etc. [11–13; 15].

The main criteria for the effectiveness of state regulation of the health care system are: successful implementation by the state of the functions of the guarantor of the general social and economic interest of society in improving the health of the population; availability of conditions that ensure the availability of medical care to all categories of citizens; determination of the ratio of paid and free

medical care for the population, which ensures the social norm of the consumption of medical services by both wealthy and weakly socially protected sections of the population; ensuring the effectiveness of licensing of pharmaceutical and medical activities [9; 10; 11; 12].

In health care, priority should be given to the achievement of social goals, although limited resources make it necessary to combine social and economic goals that satisfy public needs. In connection with this, the question of the effectiveness of the work of medical and preventive institutions is relevant. Effectiveness should be understood as the organization's ability to ensure the achievement of final results corresponding to the set goal. The overall effectiveness of health care should be assessed not by the amount of income received, but by the following criteria:

- the degree of protection of the population in the field of health care;
- degree of implementation of patients' rights;
- increasing life expectancy;
- increase in birth rate;
- reduction of morbidity in the population [5].

Other indicators of social effectiveness in the activities of health care management organizations regarding the distribution, for example, of budget funds are:

- targeted spending;
- use of regional and municipal property to guarantee free medical care to the population;
- maintenance of the appropriate level of medical care culture;
- ensuring the availability of a system of continuous improvement of the quality of medical care;
- ensuring the existence of a mechanism for smoothing out negative market effects in the non-state sector of health care;
- planned coverage of the population by dispensation, preventive measures, etc.

Management is impossible without information. Information is formed by indicators that quantitatively and qualitatively characterize the phenomenon or the researched object. Activity indicators and performance indicators are shared. Both of them are used in economic anal-

ysis to improve the quality of management decisions [8].

Economic efficiency is the ratio of results to costs. In this sense, the economic efficiency of health care can be defined as the fraction of the division of the amount equal to the "benefit" of this measure by the amount of its costs in money. In this way, it is possible to compare the amount of costs spent on the entire health-improving event with the benefits of damage prevention (for example, the benefit may be the amount of savings from reducing morbidity, disability, and mortality in monetary terms) [5].

The content of the concept of "efficiency" presupposes the presence of its meters (indicators). In fact, the efficiency of management is often identified with the efficiency of production and resort to the help of indicators of the efficiency of economic activity itself. Then, generalizing indicators are the volume of activity, profit, profitability (from the point of view of measuring efficiency, these indicators should increase), and specific indicators are those that characterize the level of use of certain types of resources: material, financial, and labor. However, modern conditions require an assessment of the effectiveness and the management system itself. Then it is necessary to use quantitative indicators of activity in the field of health care management (Table 1).

Undoubtedly, in order to ensure the proper efficiency of the work of the medical institution, it is necessary to carry out adequate control. Today, there is an urgent need to conduct an efficiency audit along with a financial audit. Performance audit in health care is a new technology of state control that goes beyond traditional financial control. However, if the performance audit was recorded in the Lima Declaration of Control Guidelines back in 1977 at the IX Congress of the International Organization of Supreme Control Bodies and currently accounts for 50–60% of the total number of inspections conducted by the highest state control bodies of foreign countries, then in our country still lacks regulatory and legal documents confirming the need to conduct an efficiency audit along with a financial audit. So, it is known that five criteria are



Table 1

**Indicators (criteria) of medical and social management of a medical institution**

Medical indicator	Social indicators
Morbidity	Visits to medical institutions
Mortality	The level of satisfaction of the population with the quality of medical services
Life	Quality of life (a component related to the subjective assessment of one's own health)
Specific gravity of complications	Waiting time for consultation, hospitalization, diagnosis
Specific gravity of fatalities	The number of complaints regarding the quality of service (quality of treatment)
The level of quality of treatment	Length of stay on the sick leave (number of days of sick leave)

used to evaluate the effectiveness of the health care system in Canada: accessibility; timeliness; quality of medical care; the ability of the system to respond to the changing needs of society; reliability of indicators [12].

A comprehensive assessment requires the development of cross-sectoral indicators of activity aimed at improving the health of the population, the social effectiveness of the activities of health care management bodies, for example, such as the compliance of priorities in the distribution of financial means of health care with reasonably chosen social priorities; the amount of revenues to the budget of the health care management bodies of financial deductions of enterprises for improving the environmental situation, for creating working conditions and reducing injuries of employees of enterprises, for conducting health-improving activities; degree of coverage of the population by preventive measures, etc. [8].

Considering the same problem of the effectiveness of the use of health care resources at the micro level, that is, in medical and preventive institutions, we highlight the following indicators:

- increasing the level of targeted use of the bed fund;
- increasing the level of rational use of bed stock, reducing bed downtime;
- shortening of hospitalization due to increased efficiency and intensity of treatment;
- reducing the number of hospitalizations due to treatment in day hospitals and the introduction of new technologies in OPI (outpatient polyclinic institutions);

- reducing the number of beds at the expense of day hospitals and increasing the intensity of treatment;

- the share of financial resources of medical and preventive institutions aimed at preventive measures.

Based on the introduction of databases of planned indicators of funding under the general medical insurance program, analysis and control of the use of general medical insurance funds is carried out in medical institutions that have concluded contracts for the provision of medical and preventive care under general medical insurance contracts. Indicators of the effectiveness of the management of financial resources of medical and preventive institutions include the complete return of financial funds to the general medical insurance system, which is equal to the actual amount of funds received from the general medical insurance system to medical and preventive institutions (the actual amount of funds received from the fund of mandatory medical insurance to a medical and preventive institution + unreceived financial funds + the amount of financial sanctions of the insurer to the medical and preventive institution)  $\times$  100%. This indicator is used to assess the effectiveness of the treatment and prevention facility in the general health insurance system. The goal of the analysis of the financial condition is the continuous improvement of the quality of management of the financial resources of the health care organization, which, in turn, must be adapted to the constantly changing organizational and economic conditions and depend on the choice of priority values [11].

Thus, a huge advantage of the medico-economic approach to the distribution of funds is that it involves the development of a mechanism for calculating the costs and benefits of alternative solutions, which will contribute to providing patients with the most possible and effective medical care in conditions of limited resources. Implementation of medico-economic and medico-social criteria in health care management will allow to quickly monitor the effectiveness of medical services to the population.

Choosing a strategy for the development of a health care institution, such as the ME "Rivne Regional War Veterans Hospital" Rivne Regional Council, requires to pass through several key stages. This process consists of preparation, analysis of the current situation, development of strategy, its discussion and approval, implementation and monitoring in the conditions of the modern military situation. Let's consider each of these stages in more detail (Fig. 1):

a) Preparation for strategic planning

1. Assessment of the hospital's readiness to develop a strategic plan: determining the institution's level of preparation for strategic planning.

2. Creation of a working group for the development of the hospital's strategy and approval of the regulations regarding its work: formation of a team that will deal with the development of the strategy and official approval of the regulations of its activity.

3. Development and coordination of the structure of the strategy and plan of further actions of the hospital: formation of the main elements of the strategy and plan of actions that will be implemented.

b) Analysis of the current state of the health care system and the hospital

1. Identification of interested parties and analysis of the need for their involvement at various stages of the hospital's work: identification of the main interested parties and their role in the process of strategy development and implementation.

2. Collection and analysis of statistical information on the dynamics and features of the state of medical care in the hospital, access to and satisfaction with services: collection of data on the current state of medical care.

3. Collection and analysis of information on strategies, programs, projects: analysis of existing strategies and programs that can influence the development of a new strategy.

4. Analysis of the hospital's financial and economic indicators: assessment of the hospital's financial condition to determine opportunities and limitations.

5. Collection of additional information on hospital operations as needed: collection of any additional data that may be useful for strategic planning.

c) Development of a hospital development strategy

1. Discussion of values: determination of the main values on which the operation of the hospital will be based.

2. Definition of the strategic vision of the future (vision): formulation of the vision of what the hospital should become in the future.

3. Definition of the mission: formulation of the mission of the hospital.

4. Carrying out a SWOT analysis using the data collected in stage II: analysis of the strengths and weaknesses of the hospital, as well as the opportunities and threats facing it.

5. Determination of strategic directions, goals and tasks: determination of the main directions of development, specific goals and tasks.

6. Development of an implementation plan: determination of ways to implement the strategy, responsible executors, deadlines, volumes and sources of financing, performance indicators and expected results.

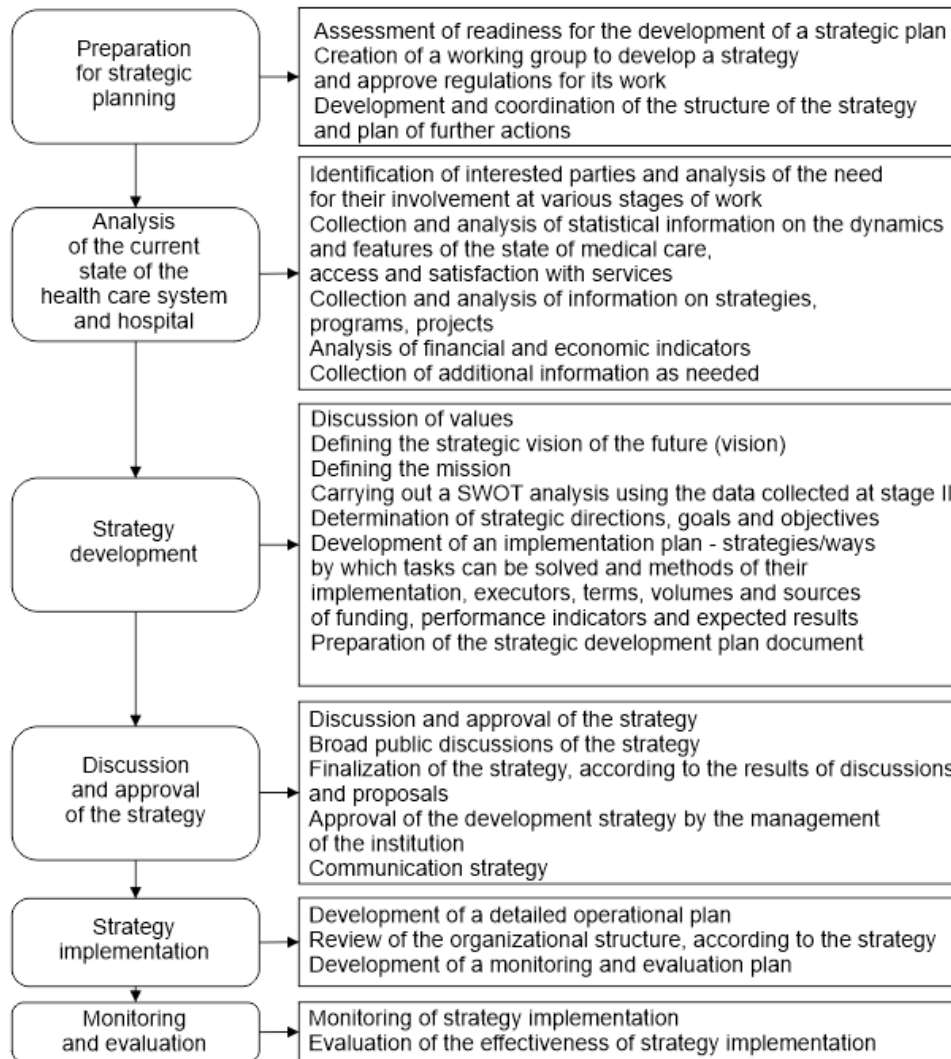
d) Discussion and approval of the strategy

1. Broad public discussions of the strategy: involvement of the public and stakeholders in the discussion of the draft strategy.

2. Refinement of the strategy, according to the results of discussions and proposals: making changes to the strategy based on the received proposals and comments.

3. Approval of the development strategy by the management of the institution: official approval of the strategy by the management of the hospital.

4. Strategy communication: informing employees and other stakeholders about the approved strategy.



**Fig. 1. Stages of strategic planning (formed by the authors, 2023)**

#### e) Strategy implementation

1. Development of a detailed operational plan: determination of specific steps to implement the strategy.

2. Revision of the organizational structure, in accordance with the strategy: making changes to the organizational structure, if necessary, for the implementation of the strategy.

3. Development of a monitoring and evaluation plan: determination of mechanisms for monitoring and evaluating the implementation of the strategy.

#### f) Monitoring and evaluation

1. Monitoring the implementation of the strategy: constant control over the implementation of the strategy.

2. Assessment of the effectiveness of strategy implementation: analysis of the results of strategy implementation to determine its effectiveness and make the necessary adjustments.

In order to effectively develop and increase the efficiency of the management of the ME “Rivne Regional Hospital of War Veterans” Rivne Regional Council, it is necessary to clearly define the tasks, goals and conditions for the implementation of the strategy. The graphic image (Fig. 2) reflects the key aspects of this process.

The main goals of implementing the development strategy:

Increasing the level of customer satisfaction (patients treated in the hospital):

- improving the quality of service and medical care;
- implementation of effective feedback mechanisms with patients.

Improving the quality of medical care:

- application of modern methods of treatment and diagnostics;
- improving the qualifications of medical personnel through continuous training and development.

Increasing the manageability of the institution:

- implementation of modern management information systems;
- optimization of administrative processes and internal communication.

Orientation to the implementation of the development strategy:

- development of clear action plans to achieve strategic goals;
- regular monitoring and assessment of strategy implementation.

The main tasks for the implementation of the strategy

Improving the quality of medical care:

- introduction of new medical technologies and equipment;
- raising the standards of medical care.

Improving the quality of preventive work:

- development and implementation of disease prevention programs;
- informing the population about disease prevention methods.

Improving the conditions for providing medical care:

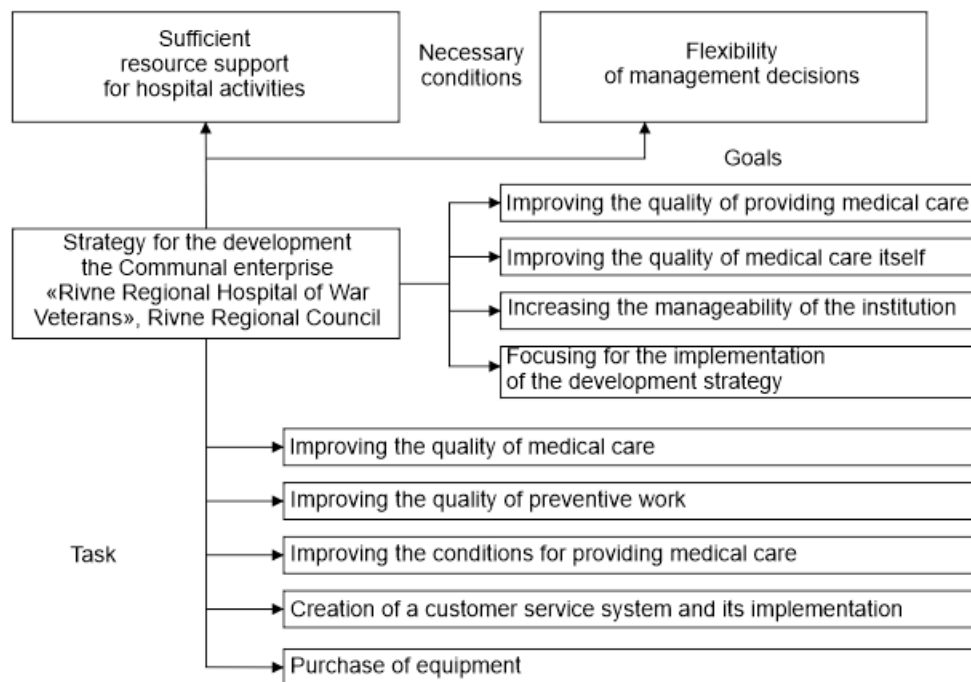
- modernization of hospital infrastructure;
- improvement of the conditions of stay of patients in a medical institution.

Creation of a customer service system and its implementation:

- introduction of a customer relationship management system (CRM);
- staff training in the principles of a client-oriented approach.

Purchase of equipment:

- determination of needs for new medical equipment;
- attraction of financial resources for updating the material and technical base.



**Fig. 2. Tasks, goals and conditions for the implementation of the development strategy of the Municipal enterprise “Rivne Regional Hospital of War Veterans” Rivne Regional Council**



Necessary conditions for the implementation of the strategy

Sufficient resource provision:

- financial resources for the purchase of equipment, infrastructure modernization and personnel training;

- material and technical resources to ensure the effective operation of the institution.

Flexibility of management decisions:

- ability to adapt strategy and operational plans to changes in the external environment;

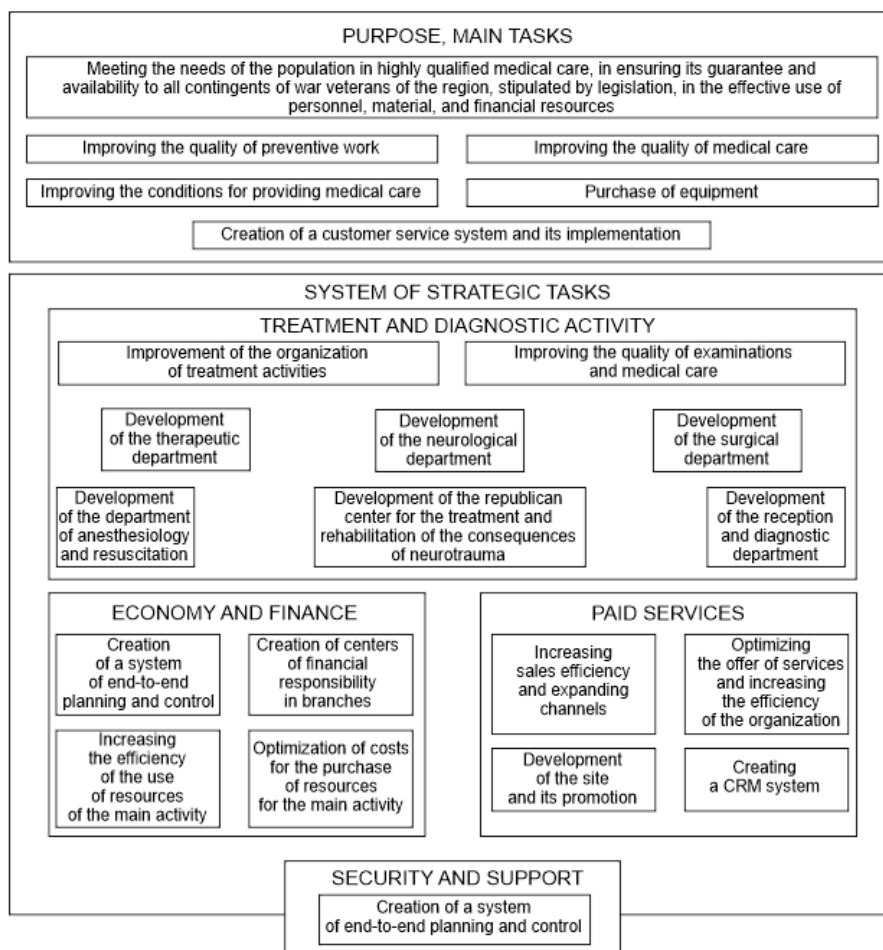
- implementation of mechanisms for rapid response to challenges and opportunities.

The effective implementation of the development strategy of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council depends on a clear definition of goals, tasks and conditions, as well as on the ability of the institution

for flexible management and sufficient resource provision. The implementation of modern management methods, innovative technologies and orientation to the needs of patients will contribute to improving the quality of medical services and increasing customer satisfaction.

When implementing the development strategy of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council, all units must be involved. A typical strategic map for a hospital should include the goal and main tasks, a system of strategic tasks that includes various types of activities (medical and diagnostic activities, economy and finance, paid services) and provision and support of the institution’s activities and implementation of the development strategy (Fig. 3).

SWOT analysis of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council with



**Fig. 3. Strategic card for the Municipal enterprise “Rivne Regional Hospital of War Veterans” Rivne Regional Council (formed by the authors, 2023)**

the identification of potential internal strengths of the hospital (S), potential internal weaknesses of the hospital (W) and an analysis of potential external favorable opportunities of the hospital (O) and potential external threats (T) presented in table. 2.

The authors developed a SWOT-matrix (table 3) for ME “Rivne Regional War Veterans Hospital” Rivne Regional Council.

When analyzing the state of activity and development of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council using the SWOT matrix, the main strengths and weaknesses of the hospital, which need further strengthening, were identified.

In addition to the analysis of the activities of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council and the identification of strengths and weaknesses, an analysis of the external environment was conducted and potential opportunities and threats were identified.

The SWOT matrix of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council (Table 3) presents 4 types of strategies, namely: «Strengths – Opportunities» S–O strategy, «Weaknesses – Opportunities» W–O strategy, «Strengths – Threats» S–T and strategy «Weaknesses – Opportunities» W–O.

The development strategy can be different, and when choosing it, one should take into account the number of combinations of strategies for ME “Rivne Regional War Veterans Hospital” Rivne Regional Council. Currently, a strategy of

organizational changes is being implemented, but it would be advisable to implement a stabilization strategy, because in the conditions of destabilization of the entire medical field, this strategy will allow to preserve a highly qualified team and overcome the negative manifestations of the pandemic and a full-scale invasion.

For the development of health care institutions directly related to improving the quality of patient care, in our opinion, it is necessary to introduce into practice the activities of domestic and foreign institutions of modern practices and methodical approaches that are used in medical institutions and can be adapted to Ukrainian realities. Such a useful practice is a clinical audit, which is primarily aimed at improving the processes and procedures implemented in domestic health care institutions.

The theoretical concept of clinical audit comes from medical audit. In 1989, in Great Britain, medical audit was defined as a systematic analysis of quality in medicine, in which the procedures of diagnosis and treatment, use of resources, outcomes and quality of life of patients were monitored. Over time, the concept of audit has expanded significantly. Clinical audit is a quality improvement process, the purpose of which is to improve patient care and treatment outcomes by evaluating them systematically with certain criteria and applying the necessary changes both for individual employees and for an institution or structural unit at the level of a specific medical service.

Table 2

**Elements of SWOT-matrix**

<b>S.W.O.T. MATRIX</b>	<b>STRENGTHS S List of strengths</b>	<b>WEAK SIDES W List of weaknesses</b>
<b>OPPORTUNITIES O</b>	Strategy “Strengths–Opportunities” S–O Use your strengths to take advantage of opportunities	Strategy “Weaknesses–Opportunities” W–O
List of opportunities		Overcome weaknesses by taking advantage of opportunities
<b>THREATS T</b>	Strategy “Strengths–Threats” S–T Use strengths to avoid/neutralize threats	Strategy “Weaknesses–Threats” W–T Risk. A script is needed to reduce sensitivity to threats and minimize weaknesses
List of threats		

Table 3

**SWOT-analysis matrix of ME “Rivne Regional War Veterans Hospital”  
Rivne Regional Council**

<p>S.W.O.T. MATRIX ME “RIVNE REGIONAL WAR VETERANS HOSPITAL” RIVNE REGIONAL COUNCIL</p>	<p>STRENGTHS OF S S 1. Achieving staffing and a high level of qualification of medical workers S 2. New approaches to the financing of health care facilities corresponding to the medical subvention S 3. Cooperation of hospital departments with research medical institutions S 4. Implementation of quality standards, local protocols S 5. Implementation of new methods contributing to timely diagnosis of diseases S 6. Availability of state-of-the-art equipment for treatment and rehabilitation activities S 7. Purchase of diagnostic equipment S 8. Availability of a system of postgraduate training of medical workers</p>	<p>WEAKNESSES W W 1. Moderate level of customer service W 2. There is no financial system of staff motivation W 3. Underfunding of the hospital in relation to budget-approved expenses W 4. Untimely delivery of medicines (vaccines) W 5. Most laboratory tests are done manually W 6. Insufficient infrastructure development W 7. Existence of certain shortcomings in the distribution of bed stock</p>
<p>OPPORTUNITIES O About 1. Demarcation of medical care between health care institutions About 2. State nature of health care O 3. Decentralization of powers from the central level to the regional level with delegation of responsibility for providing medical care About 4. Expected salary increase of medical workers About 5. Using the experience of other countries About 6. Using the potential of public-private partnership</p>	<p>Strategy “Strengths – Opportunities” S–O S 1 – O 1 S 1 – O 4 S 2 – O 2 S 3 – O 5 S 3 – O 6 S 4 – O 5 S 5 – O 5 S 5 – O 6 S 6 – O 6 S 7 – O 3 S 3 – O 2</p>	<p>Strategy “Weaknesses – Opportunities” W–O W 1 – O 1 W 2 – O 4 W 3 – O 6 W 4 – O 3 W 4 – O 6 W 5 – O 1 W 5 – O 5 W 6 – O 2 W 7 – O 5</p>
<p>THREATS T T 1. Competition from private centers in the city T 2. The unfavorable ecological, political and economic situation, the prevalence of socially dangerous conditions among the population, causes a threat to the health of the population T 3. Interruptions and shortcomings regarding stable inter-budgetary financing of the health care sector T 4. Low level of payment of medical workers’ slings T 5. Lack of funds for capital expenditures in the industry T 6. Consequences of military actions on the territory of Ukraine</p>	<p>Strategy “Strengths – Threats” S–T S 1 – T 1 S 1 – T 2 S 2 – T 3 S 2 – T 4 S 3 – T 1 S 4 – T 2 S 5 – T 1 S 5 – T 6 S 6 – T 5 S 7 – T 3 S 8 – T 1</p>	<p>Strategy “Weaknesses – Threats” W–T W 1 – T 1 W 2 – T 5 W 2 – T 1 W 3 – T 3 W 4 – T 2 W 4 – T 4 W 5 – T 1 W 6 – T 2 W 6 – T 6 W 7 – T 1</p>

Source: developed by authors

Most studies emphasize the “British roots” of clinical audit, focusing on improving the quality and meeting the needs of patients in quality care and improving their quality of life after treatment. It is also emphasized that with the help of clinical audit, it is possible to promote the implementation of better practices in health care and improve both the internal procedure of providing medical services and the results for its end users – patients. Clinical audit is one of the possible ways to improve the quality of medical care.

The history of clinical audit begins in the middle of the 19th century. The Hungarian physician Ignats Philip Semmelweis [3; 14] found that the incidence of puerperal fever after childbirth, which was quite common in the mid-19th century and resulted in a mortality rate of up to 35%, could actually be significantly reduced if hands were disinfected in the delivery room. Although the results after implementing hygiene rules were good, it was difficult for Dr. Semmelweis to implement his ideas in the medical environment, as there were doctors who were offended by the suggestion to wash their hands more often. Florence Nightingale [1], who is considered the founder of modern nursing, the epidemiological approach and the comparison of results in health care, also gained popularity. F. Nightgale conducted a clinical audit during the Crimean War (1853–1856), the focus of which was the unsanitary conditions in the hospital, and the resulting high mortality among wounded and sick soldiers. After the introduction of strict hygiene rules, the death rate dropped from 40% to 2%. Ernest Codman [6; 7], who worked in the first half of the 20th century, is an important person who deserves mention in connection with clinical audits. He monitored the recovery of patients after surgery in order to find errors in treatment, and with the help of the obtained results to improve the quality of treatment. Aven-Dis Donabediani also plays an important role in the assessment of the quality of health care from the work “Quality Assessment in Medicine” published in 1966, in which he concluded that in health care it is important to assess not only the structure and processes, but also quality of treatment results. Doctors have always tried to

improve their activities and offer patients services with better quality. Despite this, in the UK, systematic audits began to be organized since the 70s, but officially the first medical audit was conducted in 1989.

In general, approaches to conducting clinical audits have standard foundations, but they require some clarification depending on the specifics of the object and the purpose of such an audit. The scheme of clinical audit is shown in fig. 4.

At the first stage, the object is selected and the clinical audit tasks are set. Here it is important to imagine that the clinical audit is mainly retrospective in nature, as it requires an analysis of the existing experience in the treatment of certain diseases and groups of patients. The effectiveness of existing treatment standards and protocols is also evaluated, based on a comparison of expected and actual results. Thus, the object of clinical audit can be:

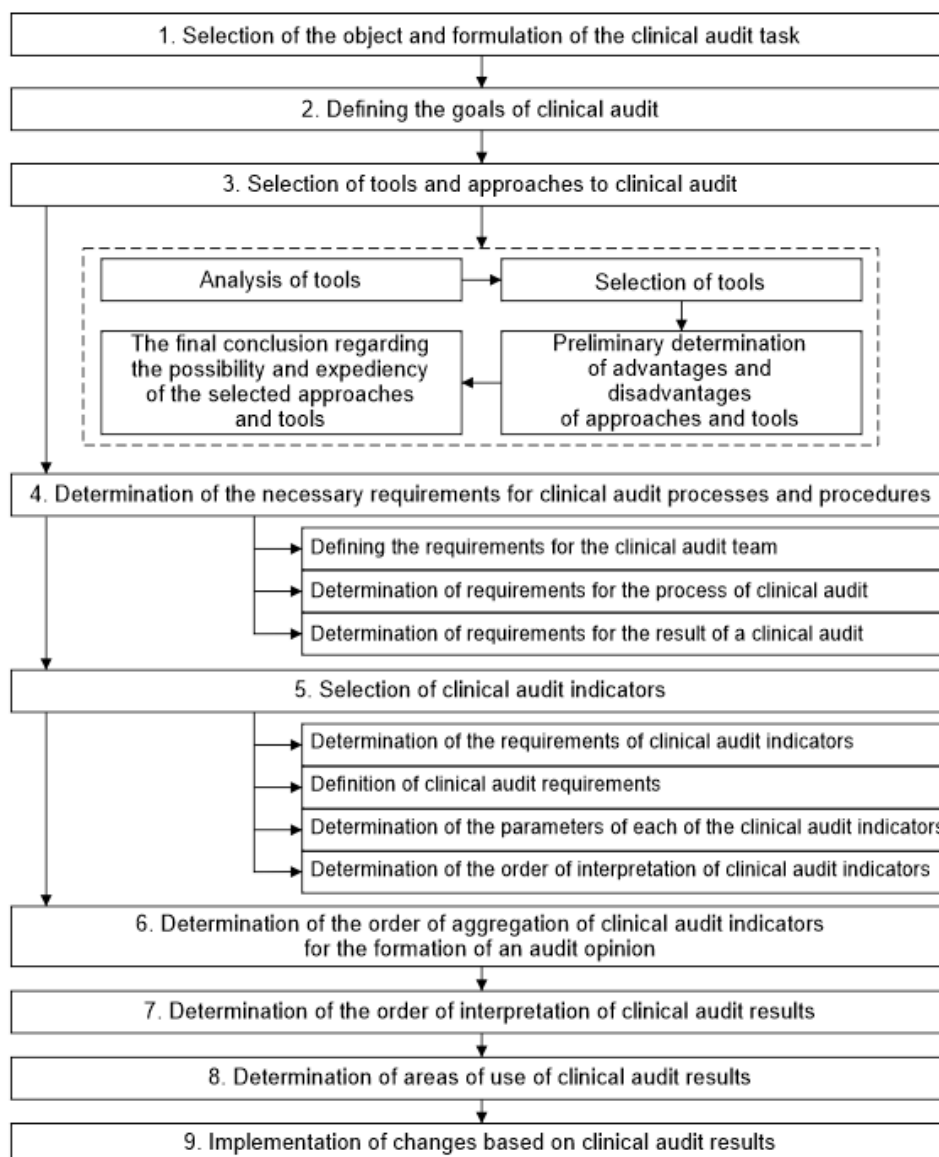
- a) diagnostic processes;
- b) treatment processes;
- c) patient care processes;
- d) processes of resource provision of medical institutions;
- e) anti-epidemic measures;
- e) consequences of medical interventions;
- g) the effect of treatment on the patient’s quality of life.

If the object has already been selected, a list of tasks is developed that characterize the expected results to be achieved in the future, and also allow to determine the operational processes and distribution of powers in the audit team. The object and task help to establish clear goals of the clinical audit and to focus attention on their achievement.

At the third stage of conducting a clinical audit, the selection of tools and approaches to conducting is carried out. The choice of tools requires a careful approach, since the effectiveness and informativeness of the audit will depend on the set of tools and the ability to use them effectively by the team.

The fourth stage involves defining the necessary requirements for clinical audit processes and procedures. The preceding steps enable the audit to be conducted promptly and in accordance with





**Fig. 4. Clinical audit scheme**

best practices. Particular attention should be paid to the formation of the clinical audit team, starting with defining the requirements for it.

When forming a team, remember that the staff must have competence in the following areas:

- a) sufficient competence in conducting an audit;
- b) basic knowledge of audit methodology;
- c) data collection and analysis skills;
- d) formation and explanation of results;
- e) project management;
- f) use of modern communication technologies;
- g) teamwork.

A special role in the formation of the team is played by the manager, who distributes responsibilities and defines subject areas for each specialist. He must have practical experience in conducting audits. Team members are subject to appropriate requirements, including:

Auditors must meet the following criteria:

- a) Have sufficient competence in their specialty, including knowledge of current medical standards, new treatment methods and innovative approaches.
- b) Confirmed objectivity and lack of interest in audit results.
- c) Independence from the audit topic.

d) Availability of experience in clinical work in the relevant field.

e) Reliability, honesty, integrity and courtesy.

f) Experience of cooperation in a team.

After the formation of the team, the manager, together with his colleagues, specifies the requirements and results of the clinical audit. Taking into account the above-mentioned processes, the fifth stage takes place, at which the clinical audit indicators are selected. This stage involves determining the requirements for the indicators, specifying the indicators themselves, determining the parameters of each of them and the order of their interpretation.

At the sixth stage, the procedure for aggregating indicators and forming an audit opinion is determined. The conclusion is not an end in itself, since further actions are implemented on the basis of it to improve the processes of functioning of health care institutions. Accordingly, the order of interpretation of the results is determined and directions of use of clinical audit results are specified.

A detailed analysis of the audit report and conclusion is an important prerequisite for the implementation of qualitative changes in the activities of the health care institution. The results of this analysis allow management to develop a number of ways to improve processes and procedures, which will contribute to long-term development and the ability of the institution to adequately respond to current threats and needs.

The developed measures to improve the management of the development of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council are presented in Chart 4. The implementation of such an approach to the improvement of management allows to ensure the effective functioning of the institution and improve the quality of medical services provided to patients.

The reality of the functioning of health care institutions emphasizes the need for continuous improvement of the management system of the organization’s management effectiveness and its development. ME “Rivne Regional War Veterans Hospital” Rivne Regional Council, although it works stably, needs new approaches and development strategies, especially in the conditions of a full-scale invasion.

To determine development paths and key strategic goals, it is necessary to develop a development strategy for this institution, taking into account possible alternatives and actual resources. The conducted research showed that it is currently advisable to focus on the stabilization strategy.

In the context of the institution’s heavy workload, it is important to systematically monitor all aspects of the institution’s functioning. Therefore, it is recommended to introduce a clinical audit, for which a corresponding scheme of its implementation has been developed.

The measures proposed in the work will contribute to the improvement of the management

Table 4

**Recommendations for improving development management for ME “Rivne Regional War Veterans Hospital” Rivne Regional Council**

<b>№</b>	<b>Name of activity</b>	<b>Brief content</b>	<b>Forecasted result</b>
1	Recommendations on choosing the strategy for ME “Rivne Regional War Veterans Hospital” Rivne Regional Council	Choosing of the development strategy based on diagnostics of the organization’s functioning environment	Currently, the strategy of organizational changes is implemented, but it would be advisable to implement the strategy of stabilization
3	Formation of methodical approaches to clinical audit in the context of development ME “Rivne Regional War Veterans Hospital” Rivne Regional Council	Formation of the clinical audit scheme	Allows management to develop a number of ways to improve processes and procedures, which is a prerequisite for the implementation of qualitative changes in the activity of a health care institution

efficiency of the organization of the researched health care institution.

**Conclusions.** When analyzing the state of the ME “Rivne Regional War Veterans Hospital” Rivne Regional Council using the SWOT matrix, the main strengths and weaknesses of the hospital, which need further strengthening, were revealed. Thus, the strategy of organizational changes is implemented today, but it would be advisable to implement the strategy of stabilization.

For the purpose of operational response and improvement of operational processes of the organization, the work proposes the formation of methodical approaches to clinical audit in the context of the development of the ME “Rivne Regional War Veterans Hospital” Rivne Regional Council. A clinical audit scheme has been developed. This allows the management to develop a number of ways to improve processes and procedures, which is a prerequisite for the implementation of qualitative changes in the activities of the health care institution.

The developed proposals will in a certain way ensure the sustainable development of ME “Rivne Regional War Veterans Hospital” Rivne Regional Council.

The study showed that effective management of a medical institution is a complex process that requires the use of a system of key performance indicators, consideration of economic principles, analysis of internal and external factors, as well as constant monitoring of performance indicators.

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[suchasnoi-sestrinskoj-spravi/](https://www.bsnu.edu.ua/blog/4571-florens-naytingeyl-persha-doslidnitsya-i-osnovopolozhnitsya-suchasnoi-sestrinskoj-spravi/) (дата звернення: 17.07.2024).

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