Marketing successes shared: why your practice will benefit

28th September 2010

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Declaration of interests

- I have no interest to declare.

Marketing your practice

Definition of marketing

Marketing is a management process for understanding markets, for quantifying the value required by the different customer groups in these markets, for communicating this to everyone within the organisation for measuring the effectiveness of actual value delivered.

Marketing is finding out exactly what the customers want and delivering it well.

Who is responsible for marketing in your practice?

1. Me (GP)
2. Another GP
3. Me (PM)
4. None of the above
5. No one
6. Everyone

Family Doctor Association

NewsExtra
GP-led health centres

How PCTs are getting free rein under new patient complaints system
In Focus, page 18 ▶

First GP-led centre takes both patients and nurses from local practices

FEARS CONFIRMED

GPs lose patients and staff to Darzi centre

By Gareth Iacobucci

The first GP-led health centre to open has already starting taking not only patients but also staff from neighbouring practices, Pulse can reveal.

Almost half the patients so far registered at the centre have come from nearby practices, even though it is located in an underdoctored area of Bradford.

One local surgery has al-

practitioners and about 20 patients had defected to the new centre since it opened.

She said: 'The main impact is staff moving down there because they pay more than the general practices do. We've lost both of our nurse practitioners. We're having to advertise and we're currently having to use locums.'

The centre, which also provides out-of-hours services in the area, is run by non-profit or-

Darzi centres will have to poach GPs' patients to survive

Pulse reported concerns over competition from Darzi centres in November

patients from neighbouring practices or become white elephants. Either way the taxpayer will be short-changed.'

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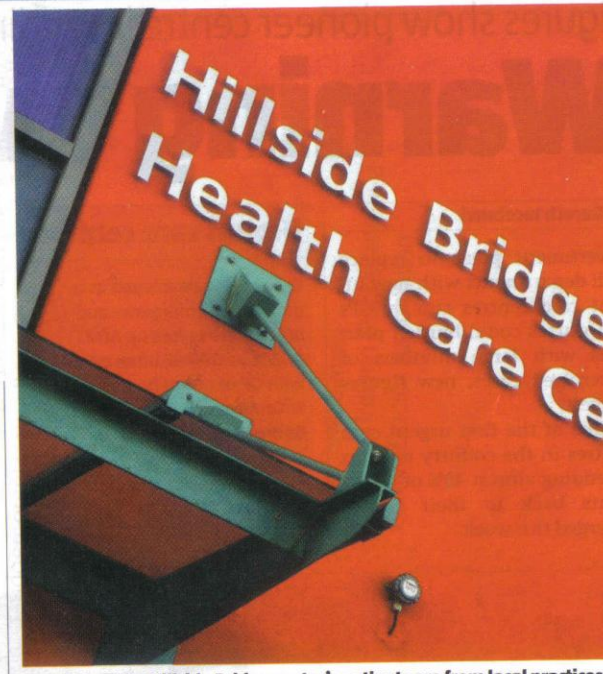
▶ **Have your say**

Are you concerned your staff and patients will be poached?

Email pulse@cmpmedica.com or go to pulsetoday.co.uk/yourviews



Nearly half the Hillside Bridge centre's patients are from local practices

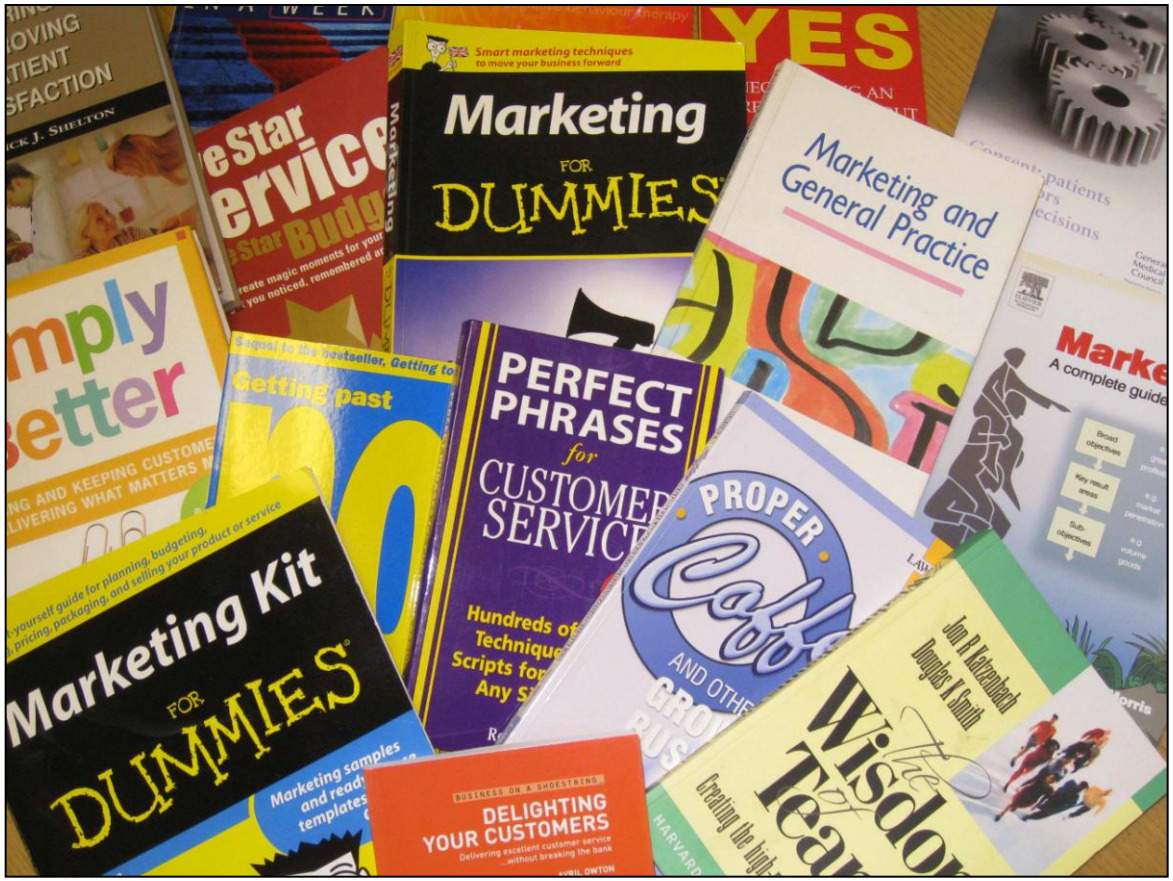
Tesco Express by day

York House Surgery by day

Tesco Express by night

York House Surgery by night

Marketing theory



Marketing your practice

www.family-doctor.org.uk

Get a grip of your external environment

- Kerb appeal
- What do citizens know / think?
- What’s the PCO opinion?
- Watch your site on NHS Choices
- FDA questionnaire
- Practice boundaries (more later)

- Democratisation
- Outcome not process
- Subsidiarity
- Population wide
- Health and wellbeing

Rt. Hon. Andrew Lansley M.P.

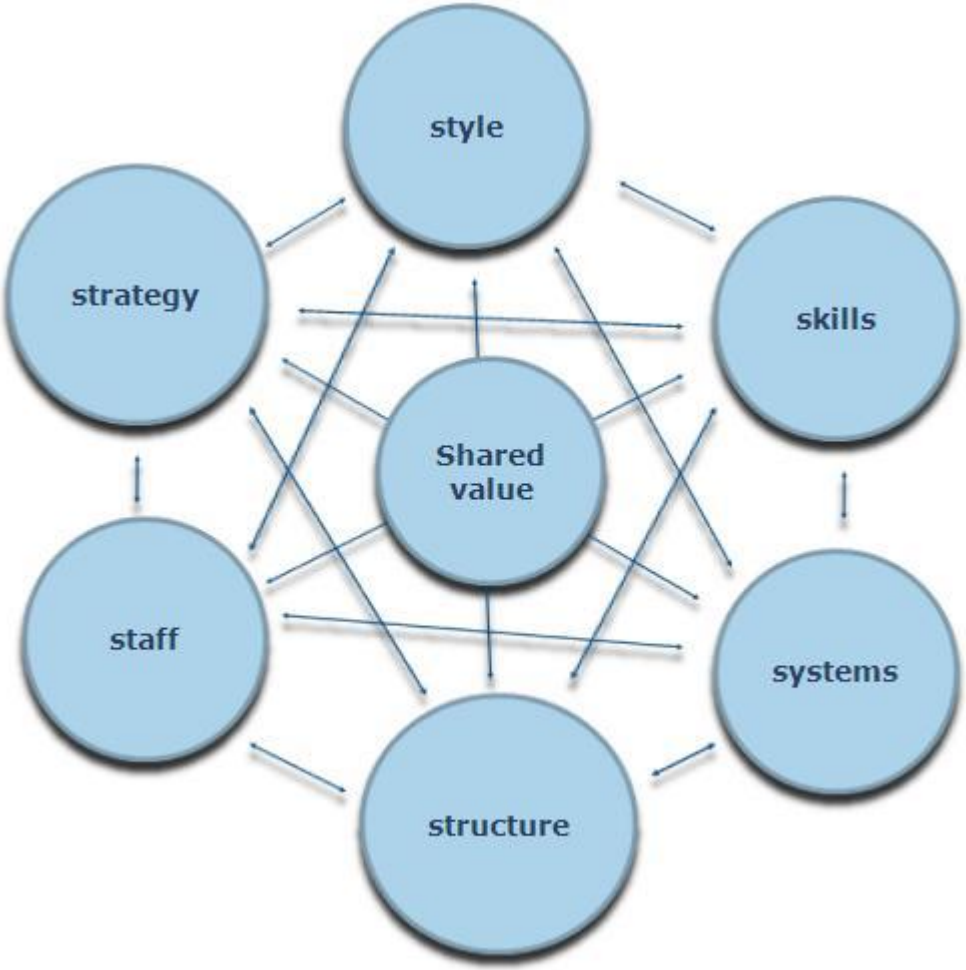
- Patients at the heart of everything we do
- Focus on outcomes
- Empower professionals to deliver
- Health & wellbeing for individuals & communities
- Reform health & social care

Rt. Hon. Andrew Lansley M.P.

- Very permissive brief from Government as to how to run the new organisations
- Very few rules and regulations
- GPs to be given genuine responsibility

Dame Barbara Hakin

Getting a grip of your internal environment
The McKinsey 7S Model



Categorisation of elements

Hard elements	Soft elements
Strategy	Shared values
Structure	Skills
Systems	Style
	Staff

Strategy

- What is our strategy?
- How do we intend to achieve our objectives?
- How do we deal with competitive pressure?
- How are changes in customer demands dealt with?
- How is strategy adjusted for environmental issues?

Patients can register with GP anywhere they want, says Health Secretary Andy Burnham

Patients will be able to register with a GP anywhere in the country in a radical move to abolish restrictive catchment areas, Andy Burnham, the Health Secretary, will announce.

By Rebecca Smith, Medical Editor
Published: 10:00PM BST 16 Sep 2009

GP practices often run very tight boundaries and refuse to take patients who live even 100 yards too far away or on the wrong side of the road and people who move house are forced to change their surgery.

But within the next year patients will be able to choose to remain with a favoured doctor when they move house or register with one near work or school if they choose.

Andy Burnham says efficiency needs to improve in the NHS to save £15bn Photo: PA

Telegraph.co.uk

NEWS

HSJ 29 Jul 2010

COMMISSIONING

PRIMARY CARE BUSINESS

Goodwill could net GPs £8bn

Sally Gainsbury
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GP practices could earn at least £8bn from selling the "goodwill" tied up in their practices, figures from the DH suggest.

The figure comes as private companies targeting the primary care sector are lobbying the government to allow practices to sell the goodwill in their businesses – essentially their patient lists – as a way to open up the GP practice market.

Practices are barred from selling their goodwill which means they have little incentive to sell their practices. A source at one private primary care provider

vate primary care companies were interested in a relaxation of the rules around selling goodwill as that was a "means of getting into the business".

"The [GMS] contract is the goodwill; it's the list," he said. "If you could buy goodwill, the private sector could buy [a practice] as an existing concern."

'If you could buy goodwill, you could buy a practice as a going concern'

Strategy: practice boundary

- BMA booklet “Reforming Practice Boundaries.” January 2010.
- Winner or loser.
- Threats and opportunities.
- Develop attractive specialist skills.
- Open convenient hours

Structure

- How is the company / team divided?
- What is the hierarchy?
- How do the teams co-ordinate?
- How do the team members organise themselves?
- Is decision making centralised / decentralised?
- How should it be?
- Lines of communication: explicit or implicit?

Systems

- What are the main systems?
- What are the controls?
- How are the controls monitored and evaluated?
- What are the internal rules to keep the team on tack?

Shared values

- What are the teams core values?
- What is the corporate / team culture?
- How strong are the values?
- What are the fundamental values the team was built upon?

Types of Practice

- Bottom line
- Work life balance
- Clinical excellence.

- York House 25%, 35%, 40%

Style

- How would you describe the leadership style?
- How effective is this leadership?
- Are team members competitive or co-operative?
- Are there real teams or just groups?

Staff

- What specialisations are represented in the team?
- What positions need to be filled?
- Are there gaps in required competencies?

Skills

- What are our strongest skills?
- What are the gaps?
- What is the team known for doing well?
- Do we possess the necessary abilities?
- How are the skills monitored and assessed?

Customer services

- Access (more later)
- Treated as a person/individual
- Touch points
- Staff matrix
- Mystery patient

Access.

- 72 GP appointments a week / 1000 patients.
- Delegate ALL long term conditions.
- Mixture of open and appointment clinics.
- Make full use of telephone consultations.
- Monitor the number of follow ups.
- Analyse the frequent attenders.
- Beware depression anxiety alcohol.

External validation: values

External validation: values

Our mission is to care for the patient by knowing the person.

External validation: customer service.

Family Doctor Association

CUSTOMER SERVICE EXCELLENCE

UK

The Government Standard

Which of the following do you have at the practice?

1. Updated listing on NHS Choices
2. Practice website
3. Practice newsletter
4. Patient Participation Group
5. A named contact at the PCO
6. None of the above

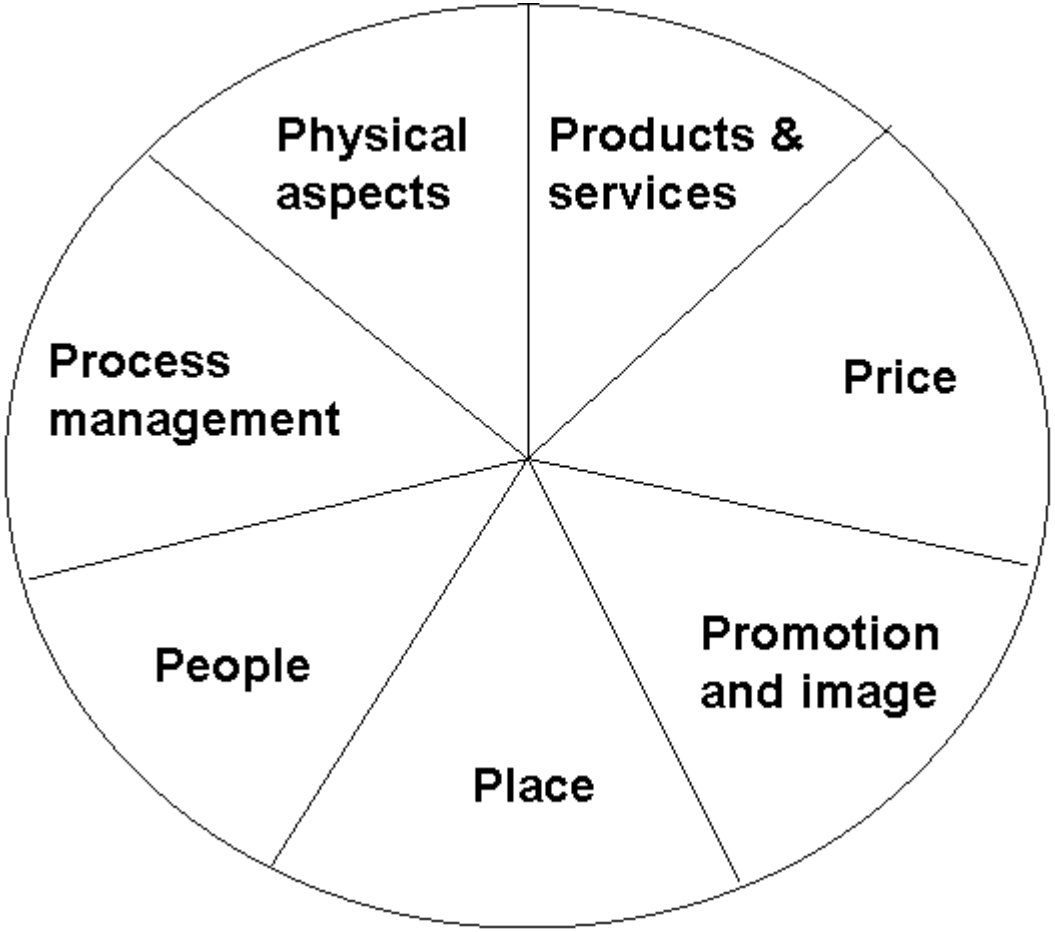
Which of these do you have in your practice?

1. A mission statement
2. Stated business objectives
3. Stated marketing objectives
4. Current action plans

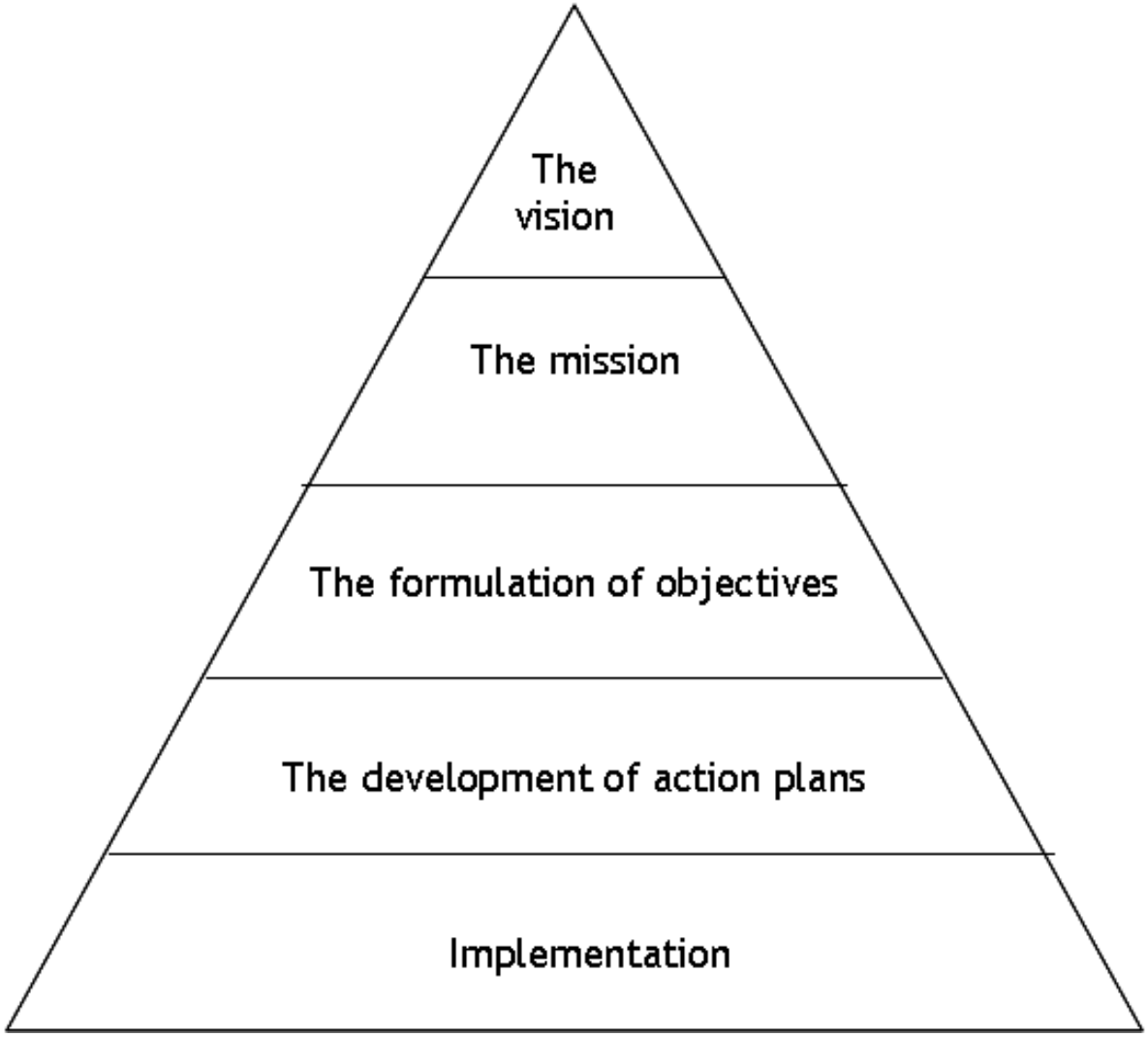
Mission statement

- Keep it short
- Make it durable
- Make it credible
- Make it exciting
- Make it understandable
- Make it measurable
- Make it important

The Practice's Marketing Mix



The Planning Hierarchy



The Marketing Plan

Objective	Allocation of responsibility	Actions needed	Timescales	Resources	Monitoring method
(Short term)					
(Long term)					

The Marketing Plan - obstacles

- The vision is not shared and or clear.
- The practice team do not communicate well about the plan and or do not share enthusiasm for its implementation.
- Too many / few objectives.
- The plan is too long.
- Failure to agree and to allocate the appropriate resources.
- Failure to monitor and to give feedback.

The Final Checklist

- Who is leading, who has over all charge, who is the engine of the project?
- Are the resources of money, time and intellect in place?
- Are there any residual doubts about the vision being shared by all stakeholders?
- Are the plans too ambitious?
- Are the timescales adequate?
- Are most or all of the marketing mix boxes ticked?
- Are all of those leading on a project objective, committed, and up to speed?
- Are the interim checks agreed to ensure effective monitoring?
- Have you already scheduled the review meetings to discuss obstacles and progress?

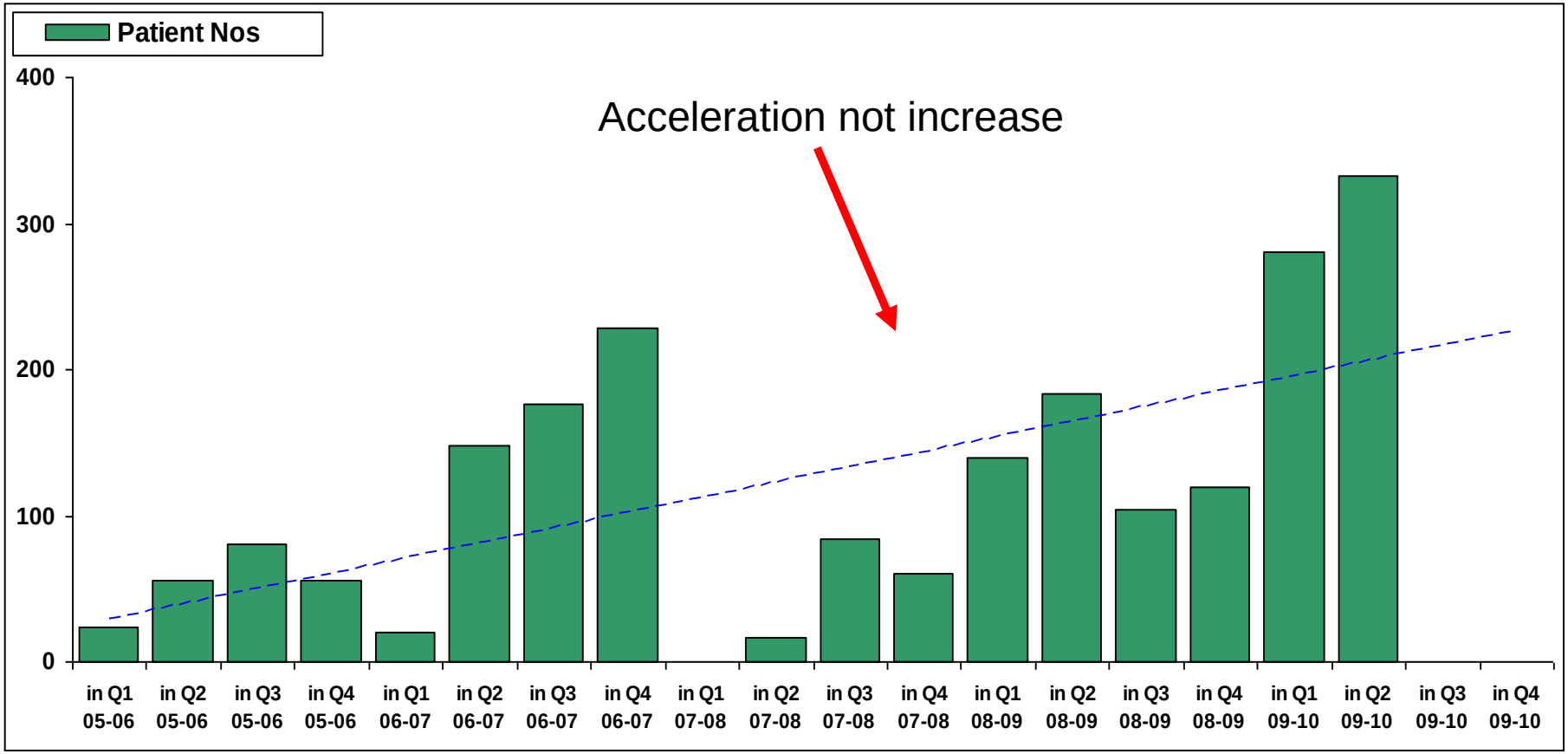
The Marketing Plan

Objective	***Allocation of Responsibility***	***Actions Needed***	***Timescales***	***Resources***	***Monitoring Method***
Improved tel system	JMW/MBT	Digital System	Done but improvement still needed	Largely committed (£5000)	Access Survey
Texting	JMW/PA	Register of mobile phone	Done but monitoring needed	Committed (PCT)	Counts of tel nos and tests sent hits
Email	PA/MBT	Publicise	By end July: text & Health Matter		Number received
Carers' Coordinator	HEO/MBT	To appoint	By end June	£1000 pa	Register questionnaire
Customer Service	NR/MBT/JMW	To appoint	By end June	£1500 pa	Questionnaire Mystery Shopper
Enhanced Children's Services	GT/JMW	To present a plan. Leaflet	By end July	To be determined	
Some morning appointments	GT/MBT	Appt JAIR	October 2009	None above salary	
Extended hours	GT/MBT	2 hrs Thurs Eve	June 2009	90% PCT	Satisfaction Questionnaire
Sceptical Friends Group	NR/MBT	Quarterly Meeting	September 2009	£400	Evaluation questionnaire

The Marketing Plan

Objective	***Allocation of Responsibility***	***Actions Needed***	***Timescales***	***Resources***	***Monitoring Method***
Mini Focus Groups	JAC/ST/MBT	Bi-monthly evening meeting	October 2009	£600	Evaluation questionnaire
Increase kerb appeal	MBT/JMW	Signage	Done	Committed (£800)	Increase in pt numbers
Website	MBT/JMW	Additional pages	By October 2009	£400	New patients
NHS Choices	JMW/MBT	Changing details	By July 2009	Time only	? hits (MBT) New pts
Decorating	JMW	Patient area	By end of August	£1000	
Carpeting	JMW	Patients' corridor	By end of July	£1500	
Seating	JMW	Re-upholster	By end of July	£1500	
			Total costs	£13700	

Quarterly Increase in Practice Population
York House Surgery



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