Patient or “Homo Consumer”: how changes in the Institutional Logics (IL) change the Healthcare System

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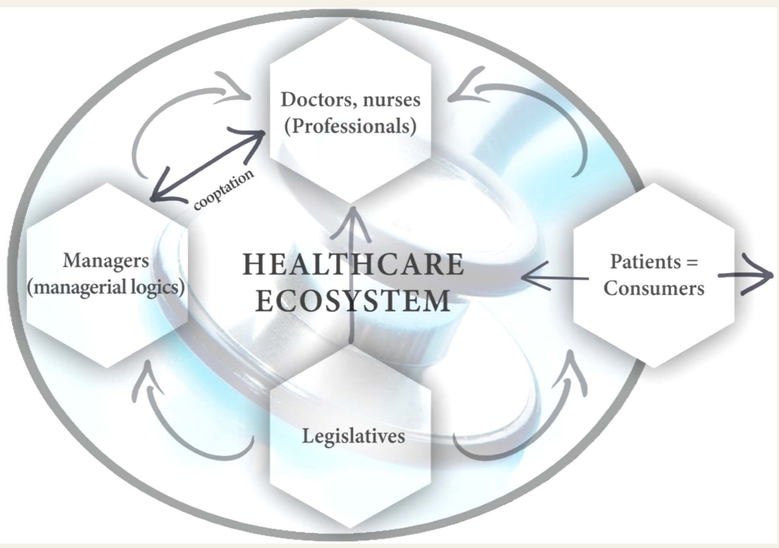
Context

The study focuses on the efficiency of the healthcare system, which is a widely discussed topic nowadays. It is so for both highly and low developed economies.

In medicine, the “product” and quality are difficult to measure and to evaluate. Solving this problem requires a clear understanding of the multi-factorial nature of the entire treatment process and many institutional processes. This can help improve the healthcare management.

Usually, the researchers focus on healthcare providers, but also identify other important actors: employers and government agencies, fiscal intermediaries and regulatory structures. At the same time, they do not consider patients as a factor that brings changes in the institutional logics.



Aim

Find out the interaction of various ILs in healthcare with an emphasis on studying the patients' IL as a decisive factor in determining the quality indicators in medicine. In this regard, it is necessary to:

- consider the alterations in the ILs of the actors in healthcare, their mutual influence and alteration in behavior;
- consider why the patients' IL is not accepted into account in determining the treatment’s quality indicators.

Hypothesis

The role of the patient in the ecosystem of modern healthcare has changed. The patient has become a Client (“Homo Consumer”). In this regard, the attitude towards the patient has also changed on the part of professionals and business.

Being a client, the patient cannot be an objective factor in assessing the quality indicators of the provided medical services.

Doctors change their behavior, too. They show co-optation with managers and they are guided by the client's (=patient’s) demand and requirements in their work.

Methods

1. Survey

A survey was conducted among 135 people, including 116 doctors of various specialties, 8 paramedical personnel, 3 chief doctors, 8 managers of medical institutions in Russia to check whether the patients with their IL are actors in the healthcare field, and how their IL is taken into account by other actors.

The age of the survey participants is from 21 to 67 years old.

Work experience in medicine: from 11 to 35 years.

2. Observation

Observation was carried out in a specialized private medical center (European Center for Orthopedics and Pain Therapy) in Moscow, Russia, at all levels of the clinic processes: medical treatment process, management, doctors’ performance, patients' satisfaction, etc.

ILs & Actors in Healthcare

Institutional Logics is a combination of material practices and symbolic structures that constitute the principles of the field organization and can be accustomed to collective and individual actors.

Each institutional logic is implemented by the relevant types of actors (individual and collective). Ils interact, influence each other and change.

Institutional logic	Actors
Professional logic	Physicians, medical staff
Business logic	Managers of clinics
Law-shaped logic	Representatives of low-making institutions, insurance companies
Consumer logic	Patients

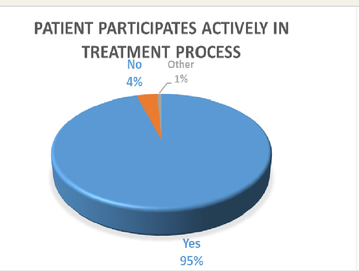
The relationship between doctors and patients has changed its structure.

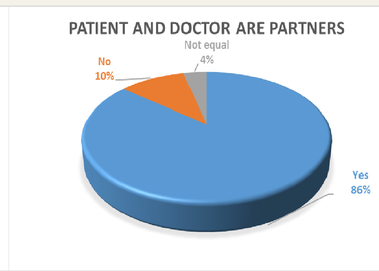
The understanding of how the patient's (client's) IL functions can be a decisive factor in determining the quality indicators of medical services and treatment for management improvement.

Results: Patients’ Behavior

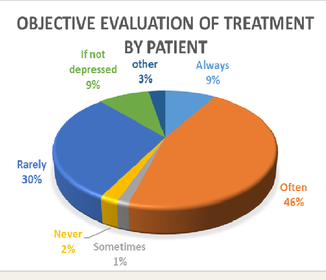
The survey results show the system of the doctor-patient relationship and establish the correctness of the hypothesis that the patient plays the role of a Client (Consumer) in the commercial medicine of Russia.

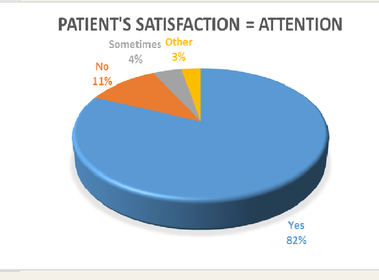
- Doctors and managers believe that the patient is a partner and an active participant in the treatment process.





- The patient is unable or is insufficiently able to give an objective evaluation of the treatment process.
- The objectivity of the patient also depends on his/her emotional and mental state.
- The patient's assessment is highly dependent on the cost of treatment. The more expensive is the treatment, the more demanding is the patient.
- For patients often (82%), the attentive attitude and the level of service outweigh the results of the treatment itself.

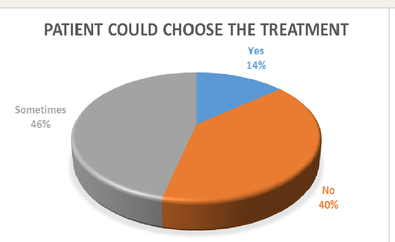


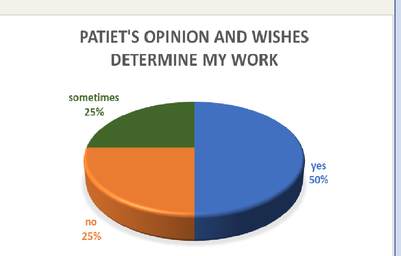


Results: Doctors’ Behavior

IL of the professionals is also changing.

- Doctors are forced to adjust in their work as in any area that offers services.
- Physicians (sometimes) allow patients to choose methods and types of therapy.

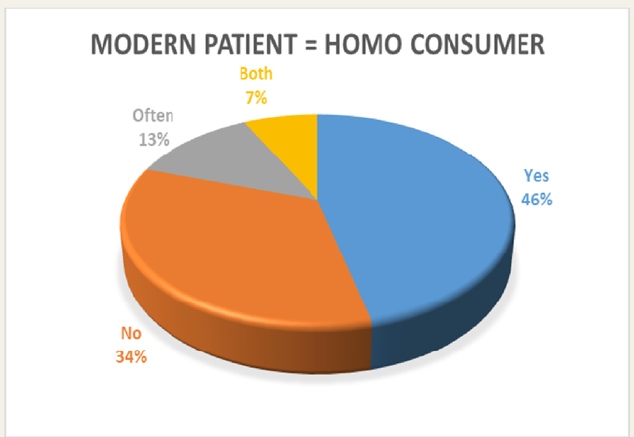




- Doctors recognize that patients are partners, but this partnership is unequal, because the doctor is completely responsible for the treatment.
- Despite commercialization, doctors observe professional ethics and exhibit professional IL.

Patient or “Homo Consumer” ?

Doctors acknowledge that the patient's behavior has changed and the patient has become a Client (“Homo Consumer”).



A lot of doctors noted that the more serious the disease is, the less the patient holds on to be a consumer. If the problem is not so serious, then the consumer’s behavior comes to the forefront.

Conclusion

The patient’s IL is converted to the Homo Consumer’s IL.

- The patient's logic affects not so much the doctor as the logic of management: how to "pack" the proposed services.
- Doctors should not just appoint treatment, but also be prepared for negotiations with the client (formerly a patient).
- Doctors do not just treat, but provide services. In Russian medicine there is a co-optation of professional and business logics.
- The patient is an involuntary or even accidental actor in a health care institution.

Patients cannot participate in the assessment of the quality of treatment, because they do not show objectivity and they are “temporary” actors in the health care ecosystem.

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