Dipstick Survey at Ansar Mall to Assess the Market for Upcoming GMC Hospital in Dubai

Internship Training
at
Gulf Medical College Hospital Ajman UAE

By
Nida Siddique

Under the guidance of
Maj. (Dr.) Vinod Kumar SV

Post Graduate Diploma in Hospital & Health Management
2012–14

IIHMR UNIVERSITY
Institute of Health Management Research
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TO WHOM AND FOR WHAT SO EVER IT MAY CONCERN

This is to certify that **Dr.Nida Siddique,** student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from Institute of Health Management Research University, Jaipur has undergone internship training at Gulf Medical College Hospital, Ajman UAE from 1st March 2014 to 21st May 2014.

The Candidate has successfully carried out the study designated to her during internship training and her approach to the study has been sincere, scientific and analytical.

The Dissertation is in fulfilment of the course requirements.

We wish her all success in all her future endeavours.

Dr. Ashok Kaushik

Dean, Academics and Student Affairs

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Maj. Vinod Kumar

Associate Professor

IIHMR Jaipur.

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GMC HOSPITAL
"Healing through knowledge and wisdom"

ثومبي
THUMBAY

May 21, 2014

To Whom It May Concern

This is to certify that **Dr. Nida Siddique** holder of Indian Passport Number K3449745 was working in our institution as Management Trainee from 1st March 2014 till 20th May 2014, as a part of dissertation of her P.G.D.H.M program .She has completed the assigned project.

We wish her all the best.

For **GMC Hospital and Research Centre, Ajman**

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CERTIFICATE BY SCHOLAR

This is to certify that the Dissertation titled "Dipstick Survey to Assess the Market for Upcoming GMC Hospital in Dubai" and submitted by **Dr. Nida Siddique (Enrolment Number 1348)**, under the supervision of **Maj.Vinod Kumar (Associate Professor)**, for award of Post Graduate Diploma in Hospital and Health Management of the Institute, carried out during the period from 1st March 2014 to 21st May 2014 embodies our original work and has not formed the basis for award of any degree, diploma, associate ship, fellowship, title in this or any other institute or other similar institution of higher learning.

I have based this report on one part of complete data that was collected by three researchers viz, Dr. Nida Siddique (IIHMR Jaipur), Dr.Chaitanya Acharya (IIHMR Jaipur) and Suvendu Sekhar Panda (IIHMR Delhi). Remaining part of data has been utilized by them for their dissertation

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Abstract

Gulf Medical College Hospital Group of UAE, an enterprise of Thumbay Group of Companies and affiliated to Gulf Medical University has been successfully providing healthcare services in UAE since 1998. After successfully establishing itself as a Hospital brand that provides quality treatment at affordable prices through its Hospitals at Ajman, Sharjah and Fujairah, the group now intends to establish itself in Dubai. Need was felt by senior management at GMC Hospitals to conduct a Dipstick Survey in Dubai in the Al Quasais area of Dubai, where the new hospital will be located.

The survey aimed to gather information regarding Brand awareness and Satisfaction levels of people with GMC Hospitals. Information was also gathered about other aspects of health seeking behaviour of people like source of information about treatment, treatment charges and preference for a particular language and nationality of Doctors.

Semi structured Questionnaires were utilized to gather information from four hundred and eighty seven respondents randomly selected at Ansar Mall, one of the prominent mall in Al Quasais area of Dubai. Data was analysed and findings were presented to senior management. On the basis of findings, Marketing Strategies were suggested for effective marketing of Gulf Medical College Hospital Dubai.

The results showed that Gulf Medical College Hospital is a known brand in Dubai but awareness needs to be generated among the masses regarding its upcoming venture i.e. GMC Dubai in Al Quasis, Dubai.

The consultation charges that people pay currently for a specialist doctor in Dubai are in the range of 200-250 AED, in case of self paying patients. For insured patients the copayment charges are found to be mostly n the range of 30-50 AED. Indian doctors with English as their language of communication are the most preferred choice of doctors for the people in Dubai. Internet is found to be the most common mode of media sought after for the information on medical treatment. Private hospitals in Dubai were found to be the medical facilities most commonly visited in case of emergency.

Acknowledgements

I, would like to acknowledge the contributions of the following persons -

First and Foremost, we are grateful to Mr. Akbar Thumbay Moideen (Director Healthcare & Retail Division Thumbay Group UAE), who gave me the opportunity to conduct a Dipstick Study for their upcoming Hospital in Dubai. He is the originator of the idea and a continuous guiding light for the whole endeavour.

Dr. Manvir Singh (Medical Director Operations, Healthcare Division Thumbay Group UAE), was instrumental in guiding me to design the study and helped to successfully overcome any difficulty during the course of the study. Without his kind patronage, this work would not have been possible. I extend my heartfelt gratitude to him.

Dr. Sadashiv Bangera (Assistant Director Patient Affairs and Marketing Departments of GMC Hospital Ajman). Right from the onset, he provided me with a congenial and enabling atmosphere, and gave an opportunity to get exposed to day to day working of Patient Affairs and marketing Departments of the Hospital. This has enriched my knowledge and made my work more effective. I am very thankful to him.

Mr. P S Dharmapalan (Head of Marketing, GMC Hospital Ajman), was my immediate supervisor during the course of study. He worked with me all the while, lead our team as a captain, cleared all operational roadblocks and communicated with senior management as well as other stakeholders on my behalf. A great lot of credit goes to him for making this effort a success.

Maj.Vinod Kumar (Associate Professor at Institute of Health Management Research, Jaipur), my Guide for Dissertation, ensured the Quality of the study through his insightful guidance, all along the course of the study. I am grateful for his blessings that he bestowed for this project.

Dr. Ashok Kaushik (Dean Academic and Students Affairs at Institute of Health Management Research) played a key role in instilling confidence in me from time to time, that enabled me to make this project a success. Mr. Dalbir Singh (Placement Officer at IHMR Delhi) played very important role of clarifying issues that arose from time to time during the course of my study.

Lastly, I extend my heartfelt gratitude to all the staff working in the Marketing Department of GMC Hospital Ajman, who provided us support and guidance whenever needed.

Table of Contents

List of Figures Page Nos.

List of Tables Page Nos.

List of Abbreviations:

1. AED-Arab Emirates Dirham

2. CAPA-Corrective Action, Preventive Action.

3. DHA –Dubai Health Authority

4. GCC – Gulf Cooperation Council

5. GDP-Gross Domestic Product

6. GMC-Gulf Medical College

7. GMU-Gulf Medical University

8. PHS- Private Health Sector

List of Appendices

1. INTRODUCTION

1.1 GCC Healthcare Markets

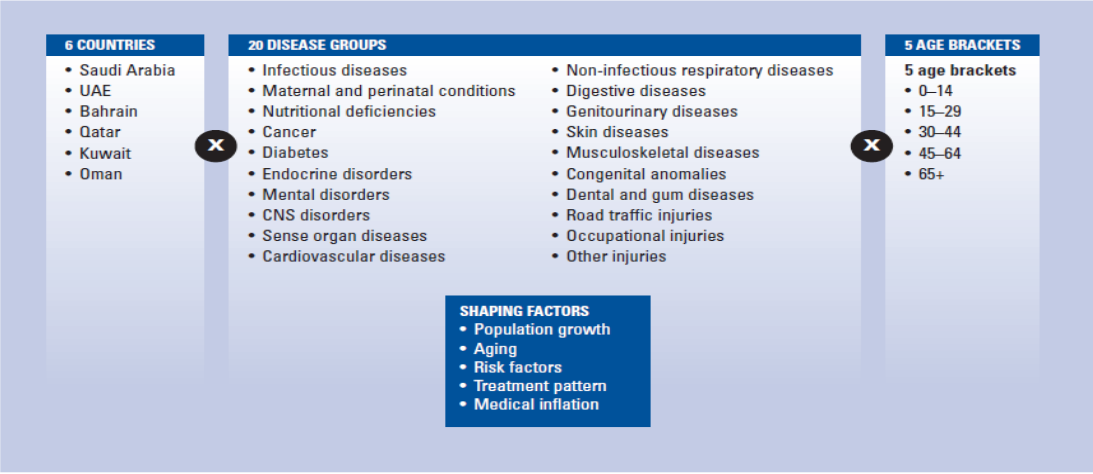
The coming decade will bring significant new challenges to health care in the Gulf Cooperation Council countries. These challenges will require new strategies on the part of government and private health-care players. Health-care demand in the Gulf Cooperation Council is undergoing fundamental change The Gulf Cooperation Council (GCC) countries—

Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, and the United Arab Emirates—will face an unparalleled and unprecedented rise in demand for health care over the course of the next two decades. It is estimated that total health-care spending in the region will reach US$60 billion in 2025, up from US$12 billion today. No other region in the world faces such rapid growth in demand with the simultaneous need to realign its health-care systems to be able to treat the disorders of affluence. Moreover, although GCC health-care systems are far better than they were 20 years ago, many residents remain unsatisfied with the availability and quality of care at government-run hospitals and clinics. Government agencies mostly lack the managerial skills needed to run health-care facilities, and cash incentives alone haven't been enough to attract specialists to treat the rising numbers of people with ailments such as heart disease and cancer. Government-run hospitals and clinics are ill prepared for a rapidly growing and aging population, nor are they prepared for the rise in chronic diseases such as diabetes, whose prevalence has grown as countries have developed. To augment services and raise standards of care, some GCC governments have already encouraged internationally renowned academic institutions to set up health-care facilities in their countries. Many more private health-care providers are required, however, to meet future demand. For

the most part, GCC governments intend to go on subsidizing robust medical benefits—at least for their own citizens. Governments now shoulder more than 75 percent of this burden, but even those with the deepest pockets may not have enough, in 20 years, to pay for the cost of health care. Most now recognize that they will soon need private-sector help to finance it.

Fundamental changes will be required of payers, providers, and government. Private payers that build volume by competing in more than one GCC state are the most likely to succeed. For private providers, the decision must be whether to enter into government contracts to manage public facilities or to open their own. Finally, big changes to government policy and regulation are needed to ensure that private players can attract patients and succeed. The two most important changes are that governments must reimburse their citizens for private as well as public health care, and that independent regulatory bodies must be established to define and enforce quality standards for public and private providers alike.

McKinsey's model to estimate disease demand in Gulf Cooperation Council countries



Source: McKinsey & Company.

Figure 1.1a. McKinsey's model to estimate disease demand in Gulf Cooperation Council countries

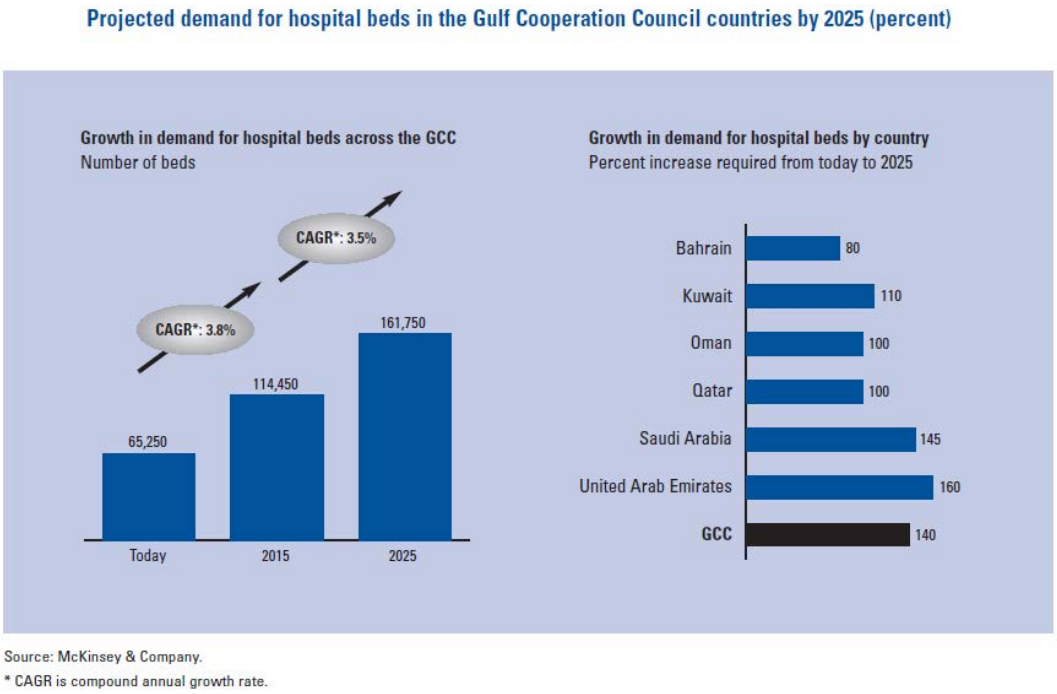


Figure 1.1 b. Projected demand for hospital beds in the Gulf Cooperation Council countries by 2025 (percent)

1.2 Healthcare in UAE[(2)]

The United Arab Emirates (UAE) is a federation of seven Gulf sheikhdoms: Abu Dhabi, Ajman, Dubai, Fujairah, Ras al-Khaimah, Sharjah and Umm al-Qaiwain. Sheikh Khalifa bin Zayed al-Nahayan became president of the UAE and ruler of Abu Dhabi in November 2004, on the death of his father, Sheikh Zayed bin Sultan al- Nahayan, who had held both positions since the formation of the country in 1971. UAE has seen remarkable progress in health care. Over the past years government health strategies have paid special attention to the welfare of UAE citizens who are considered to be the country's major resource and the prime target of all national development. To this end comprehensive health programs have been adopted to meet the needs of UAE society. Currently the UAE has a comprehensive, government-funded health service and a

developing private health sector. This progress is clearly reflected in the positive changes in health statistics which indicate that the UAE has taken its place among the developed nations of the world.

The estimated population of UAE is 3 754 000 (2002). Average life expectancy is 73 years, males 71.3 and females 75.1 years. The majority of the population is males who represent 67.7% while females represent 32.3%, owing to the preponderance of male expatriates. 68.8% of the total population is between the ages of 15 and 49 years. Local nationals make up around 20% of the population according to the most recently available data, and demographic trends within the country are driven primarily by the emirates' reliance on foreigners to provide the workforce for their growing economy. The UAE population increased by some 86% between 1975 and 1980 following the influx of foreign workers after the 1973-74 oil boom. Some of these workers left during the 1982- 83 recession but the 1985 census showed a population of 1.62m, compared with 1.04m in 1980, a 55.8% increase in five years. During the 1990s the population grew by an average of 5% a year, reaching 3.11m by 2000 an increase of almost 50% on the 1990 level. The oil-fuelled surge in economic growth over the following years has seen the UAE's total population grow at an average annual rate of 10% to just over 4 million by the end of 2003, according to official Ministry of Planning figures. Recent UN estimates suggest that the UAE's population could double by 2029. The federal government typically allocates some 25% of its total spending to education. In 2000 there were 1,050 schools catering for some 620,000 pupils. Just under two-thirds of schools are government-run, with the remainder run by a range of private sector bodies. The overall literacy rate rose from 43% in 1975 to 77.3% in 2002, and the female adult literacy rate is slightly higher according to the UN at 80% in 2002. The higher rate for women reflects the smaller number of unskilled female expatriate workers in the

emirates. No data is available for literacy rates solely among the Emirati population, but it is certain to be far higher than the overall average. This is supported by data for youth literacy (15-24 an age group that is still likely to capture a large number of expatriates), which was estimated by the UN to stand at over 90% in 2002. The government has set up education centers in remote areas, and the country now has one of the lowest pupil/teacher ratios in the world, measured at 12 pupils per teacher in 1995. Tertiary education is provided by Emirates University at Al-Ain in Abu Dhabi, 12 technical colleges and Zayed University, which has campuses in Abu Dhabi and Dubai. [(2)]

The UAE has an open economy with a high per capita income and a sizable annual trade surplus. Its wealth is based on oil and gas output (about 33% of GDP), and the fortunes of the economy fluctuate with the prices of those commodities. Since 1973, the UAE has undergone a profound transformation from an impoverished region of small desert principalities to a modern state with a high standard of living. At present levels of production, oil and gas reserves should last for more than 100 years. The government has increased private sector involvement. The UAE economy remains heavily dependent on oil and gas, despite the recent successes of the diversification efforts of some of the emirates (particularly Dubai). Abu Dhabi is by far the largest oil producer, although Dubai, and to a much lesser extent Sharjah and Ras al-Khaimah add to the UAE's overall output. Despite the importance of oil, its contribution to nominal GDP has been declining in recent years, from about 60% in 1980 to 35.8% in 1993 and an estimated 20.8% in 1998. Although the ratio rose again over the following years to around 25-30%, as there were price-driven increases in the value of oil output, this remains far below previous highs, reflecting the greater diversity of the local economy. Nevertheless, the figures understate the sector's real importance to the economy, as oil earnings are the central aspect of government income, with revenue determining the

public-sector expenditure on which much of the non-oil economy directly or indirectly relies. Dubai has established itself as a centre for trade and services within the Gulf, and is building an increasingly prominent position within South Asia as a whole.

Standards of healthcare are generally high in the UAE, reflecting high levels of public spending over the decades since the oil boom. Better health provision has been reflected in rapidly improving figures for key indicators such as life expectancy and infant mortality rates, which are now at Western levels. There are some 35 public hospitals in the UAE, as well as 14 private hospitals and 128 outpatient clinics. Although several small private hospitals have been set up over the past few years, wealthy people still tend to travel abroad for medical care. Healthcare used to be free to all, but in 2001 the government introduced charges for expatriates - a move that partly sought to reduce the draw of healthcare on public funds, but also aimed to increase the cost of expatriate labour (which now requires health insurance) and thus encourage the employment of local staff. Since the policy was introduced, visits to government hospitals have fallen sharply, with some reports suggesting a 50% reduction. Although some foreign workers now have health insurance, such provision remains rare among Asian expatriates, particularly manual and semiskilled workers. Traditionally, wealthy UAE nationals and expatriates travelled overseas for serious medical treatment. However, Dubai is currently building Dubai Healthcare City effectively a hospital free zone based on the successful Dubai Internet City model. It has attracted some of the world's leading healthcare providers, including Harvard Medical School and The Mayo Clinic from the US. It is a commercial venture that hopes to generate revenue from the UAE population, but more importantly by attracting "health tourists" from the Arab world, the Indian subcontinent and Africa.

According to the Annual Statistical Report 2002, the United Arab Emirates has 15 hospitals in urban areas, which represents 57.7% of the total number of hospitals in the country, and 11 hospitals in rural areas, which represents 42.3% of the total hospitals in the country. In addition, there are 106 primary health care centres distributed between urban and rural areas, in a proportion of 33% (35 centres) and 67% (71 centres), respectively. The Ministry of Health provides an average of one centre for every 35 415 of the population. Also, the Ministry of Health provides nationwide 11 centres for school health, which supervise 642 clinics in schools, 9 centres for preventive medicine, and 10 centres for maternity and child care. In addition, the Ministry of Health provides 92 dental clinics nationwide. The number of beds in non-private hospitals reached 4100 in 2002. It is estimated that there is one bed for every 915 people. The average bed occupancy rate for hospitals ranges from 57% to 90%. The Ministry of Health, with comprehensive coverage to all the population, is extending its services to small communities scattered around the major settlements. The major areas of strategy in this sector are revision of the family care system, accreditation and strengthening the referral system. Almost all levels of health services are decentralized. All hospitals are either managed by medical districts or independent authorities. With rapid changes, the management of the system poses some difficulties to be addressed by the Ministry of Health. The Ministry of Health has established a complete network of health centers and hospitals and units and thus made the service more accessible to meet the ever expanding population needs and new technologies. Curative services of the MOH are managed by the central departments at headquarters and corresponding departments in all medical districts. These departments prepare national plans and programs and supervise their implementation according to the regulations and standards set by the MOH to ensure optimal performance and adequate service.

Healthcare used to be free to all, but in 2001 the government introduced charges for expatriates a move that partly sought to reduce the draw of healthcare on public funds, but also aimed to increase the cost of expatriate labor (which now requires health insurance) and thus encourage the employment of local staff. Since the policy was introduced, visits to government hospitals have fallen sharply, with some reports suggesting a 50% reduction. Although some foreign workers now have health insurance, such provision remains rare among Asian expatriates, particularly manual and semiskilled workers. The private sector has developed in recent years to become an important partner in providing comprehensive health care to the people of the UAE. It is now contributing effectively to curative, preventive and promotive services through the hospitals, polyclinics and diagnostic and medical centers and private clinics. The Ministry of health paid special attention in recent years to preventive and promotive health by developing strategies and programs directed to mothers, under –five as well as school children and other population groups at special risk of certain health problems. Special programs have also been developed to cater for the prevention and control of infectious diseases in general and imported diseases and occupational health problems in particular. Health education is also given special attention to raise awareness and promote healthy behaviour among the public. The ministry of Health has paid special attention to health education as an effective method for changing unfavorable attitudes and behaviour that would negatively influence the health and well-being of individuals and the community at large. To meet this challenge, the ministry established a department of health education under the preventive health sector with representation in all medical districts. The departments' responsibility is to develop national plans to raise the awareness of the public on all matters pertaining to their health and well- being. The implementation of these plans in the form of programs and specific activities is supervised by the department. The Pharmacy and supplies includes a number of

departments and sections that deal with different functions of this important sector. These departments and sections work in harmony to provide all MOH institutions with their needs of pharmaceuticals and drugs after ensuring that such products are safe and superior quality and safe.

1.3 Private Healthcare Sector in Dubai

One of the strategic goals of DHA (Dubai Health Authority) is promoting the investment in health care in Private Health Sector (PHS), and encouraging the public/ private partnership in the healthcare to be 70% Vs. 30%, respectively. This has lead to a steady increase in the number of private health establishments in Dubai. It is important to involve this sector in the statistical information system to evaluate the health services provided by the private facilities and to achieve a high standard of care in cooperation with the private health sector.

We obtained information about patients' statistics, hospitals' data, manpower and other health services provided by the PHS in Dubai during 2012 as follows:

Manpower

During 2012, the registered manpower in the private heath sector was 17,944. Non-nationals

constituted about 87.5% of the manpower in the private sector, with only 12.5% of the total were Nationals. Doctors amounted to 3,443 (19.2% of the total manpower); dentists 5.9%; nurses 34%; and technicians made 14.7% of the total. More than half of the manpower was

females (58.5%), against 41.5% males. About two thirds were less than forty years old (58.8%). The distribution of doctors by specialty illustrated that almost all the working

doctors in PHS were specialists (75.5%), while general practitioners represented only 24.5% of the total.

Outpatients

A total number of **5,569,517** outpatient visits was recorded in PHS during the year 2012, with an increase of 21.7% than that of 2011. Males made up 55.5% of the total encounters in 2012. The share of hospitals was 47.3%, while that of clinics was 52.7%. Nationals constituted only 13.6% of total private outpatient encounters in 2012. The vast majority of the outpatient services at the PHS were used by Non-nationals (86.4%). By studying the distribution of outpatients by ICD codes, it was demonstrated that diseases of the Respiratory System made

the highest percentage of the total encounters (20.9%), followed by diseases of Musculoskeletal System (8.3%), then diseases of Digestive system (6.4%).

Inpatients

In 2012, a total of **132,394** inpatients encounters were recorded in the PHS, that were provided through 22 private hospitals, of which 56.3% of the attendees were females. It has been noticed that the number of In-patients has been increased on the private sector this year (2012), especially Nationals as they shared with about two thirds of Private Hospitals Inpatients (62.2). Patients in the age group of 25-45 constituted less than half of total inpatients in 2012 (58.9%). Regarding inpatient admissions by ICD codes, Pregnancies & child birth shared the highest percentage of inpatient admissions (16.8%), then Digestive System (10.3%), followed by the Respiratory System diseases (8.6%). By studying the inpatients services in Private Health Sector (PHS), it was found that the number of beds was **1,468,** with the Bed Occupancy Rate of **56.6%**. The overall discharge days were 303,609 days. In the meantime, the average length of stay for

inpatients in PHS during 2012 was 2.3 days. The crude hospital mortality rate was 1.5 death per 1000 discharges; it was 15.8 for Cancers; 7.3 for Diseases of Circulatory System.

Dental Treatments

A total of **642,964 dental** treatments were performed in the PHS during 2012. Periodontics, Endodontics, Orthodontics, Oral surgery & Prosthodontics made the highest percentages of the total encounters (18%,10%,9.8%,9.2%,7.5 respectively). Nationals made up only 19.1% of the total dental treatments in PHS, and females made 51% of treatments.

Surgical Operations

The number of operations performed in PHS during 2012 was **53,648** operations. Majors ones constituted 59.4% of the total, with the remaining percent for minor operations (40.6%). The share of Nationals was 22.2% of the total operations in PHS. By studying the distribution of operations by specialty, it was found that General surgeries had the highest share of 22.1% of the total operations, followed by Gynecology (21.5%), Orthopedic Surgeries (13.4%).

Laboratory Tests

In 2012, a huge number of laboratory investigations were performed in PHS summed to **4,422,837** tests, of which males amounted to 51.9% of the total investigations. Nationals comprised 13.5% of total lab. tests, while Non-national constituted the vast majority of the lab. tests performed in PHS (86.5%). In the meantime, nearly half of these tests were for Biochemistry investigations (47.8%), followed by Hematological tests (20.8%), then Microbiology and Serology tests accounted for 10.8% of the totals.

Radiological Examinations

The number of radiological examinations performed in PHS during 2012 totalled **976,727** exams. National amounted 11.1%, while the remaining percentage were non-national (88.9%). By studying the type of Radiology tests, General X-ray examination constituted the

largest share of the total in 2012 (55.3%), and Ultrasound summed to 20.6% of the overall radiological exams for the year 2012.

Alternative Medicine

The total number of alternative medicine treatments in PHS during 2012 was 111,591 treatment. Homeopathy therapy, Neuromuscular and Musculoskeletal treatments were the most frequent treatments sought in PHS (16.8% & 16.7%, respectively).

Skin Care

A total of 77,344 skin care treatments were performed in PHS in 2012.

Table 1.3: Private Hospitals in Dubai- Performance Indicators for the year 2011 &2012 source (3)

PRIVATE HOSPITALS PERFORMANCE INDICATORS FOR THE YEARS 2011 & 2012

INDICATORS / HOSPITALS & YEARS		المترددون على الطوارىء / EMERGNCY PATIENTS	مرضى العيادات الخارجية / OUT-PATIENTS	مرضى القسم الداخلى / IN-PATIENTS	عدد الأسرة / NO.OF BEDS	أيام الإقامة HOSPITAL DAYS: DAYS OF CARE TO PATIENTS DISCHARGED INCLUDING DEATH	أيام الإقامة HOSPITAL DAYS: TOTAL PATIE DAYS OF CARE TO PATIENTS IN HOSPITAL (CENSUS)	معدل الإقامة / AVERAGE LENGTH OF STAY	معدل اشغال الأسرة / BED OCCUPANCY RATE	المؤشرات / المستشفيات
BELHOUL EUROPEAN HOSPITAL	2011	-	64,449	2,077	10	3,144	3,144	1.5	86.1	مستشفى بالهول الأوروبى
	2012	-	115,131	2,050	10	2,199	2,300	1.1	63.0	
BELHOUL SPECIALITY HOSPITAL (L.L.C)	2011	-	91,863	4,849	64	12,681	11,589	2.6	49.6	مستشفى بالهول التخصصية
	2012	19,859	120,553	7,367	74	12,106	12,124	1.6	44.9	
MEDCARE HOSPITAL	2011	18,391	162,436	9,103	56	18,471	18,470	2.0	90.4	مستشفى ميدكير
	2012	12,568	182,867	16,402	56	31,952	19,020	1.9	93.1	
NEW MEDICAL CENTER HOSPITAL	2011	8,582	52,567	1,108	10	1,224	1,224	1.1	33.5	مستشفى المركز الطبى الجديد
	2012	8,885	189,165	1,076	10	1,265	1,265	1.2	34.7	
AMERICAN HOSPITAL	2011	23,467	155,596	15,720	187	37,780	34,220	2.4	50.1	المستشفى الأمريكى
	2012	21,199	162,812	16,152	187	41,652	38,073	2.6	55.8	
MEDICLINIC WELCARE HOSPITAL	2011	62,349	168,329	12,091	110	29,503	39,218	2.4	97.7	مستشفى مديكلينك ويلكير
	2012	66,139	155,013	12,038	110	32,852	36,074	2.7	89.8	
NEURO SPINAL HOSPITAL	2011	5,919	19,864	611	37	5,040	10,322	8.2	76.4	مستشفى الجراحة العصبية والعمود الفقري
	2012	5,895	20,952	746	37	10,900	10,856	14.6	80.4	
CANADIAN SPECIALIST HOSPITAL	2011	13,371	93,386	4,054	200	10,951	10,951	2.7	15.0	المستشفى الكندي التخصصى
	2012	14,533	121,811	9,578	200	10,616	10,616	1.1	14.5	
SAUDI GERMAN HOSPITAL	2011	-	-	-	-	-	-	-	-	المستشفى السعودي الألماني
	2012	-	54,347	1,755	143	5,038	4,667	2.9	8.9	
EMIRATES HOSPITAL	2011	-	81,853	2,935	21	2,935	2,935	1.0	38.3	مستشفى الإمارات
	2012	21,591	76,853	3,085	21	1,155	1,633	0.4	21.3	
GULF SPECIALITY HOSPITAL -DUBAI	2011	-	923	124	6	352	372	2.8	17.0	مستشفى الخليج للجراحة والتجميل
	2012	-	146	96	6	168	213	1.8	9.7	
ZULEKHA HOSPITAL	2011	27,558	251,307	9,926	77	19630	19,830	2.0	70.6	مستشفى زليخة
	2012	27,697	253,205	10,827	77	22,925	21,116	2.1	75.1	

Table 1.3 Continued'

PRIVATE HOSPITALS PERFORMANCE INDICATORS FOR THE YEARS 2011 & 2012

INDICATORS HOSPITALS & YEARS		المترددون على الطوارىء EMERGNCY PATIENTS	مرضى العيادات الخارجية OUT-PATIENTS	مرضى القسم الداخلي IN-PATIENTS	عدد الأسرة NO.OF BEDS	أيام الإقامة HOSPITAL DAYS DAYS OF CARE TO PATIENTS DISCHARGED INCLUDING DEATH	 TOTAL PATIE. DAYS OF CARE TO PATIENTS IN HOSPITAL (CENSUS)	معدل الإقامة AVERAGE LENGTH OF STAY	معدل إشغال الأسرة BED OCCUPANCY RATE	المؤشرات المستشفيات
CEDARS - JEBEL ALI INTERNATIONAL HOSPITAL	2011	1,107	37,722	958	16	2,097	2,097	2.2	35.9	مستشفى سيدارز -جبل علي الدولي
	2012	1,035	63,440	966	16	2,327	1,770	2.4	30.3	
IRANIAN HOSPITAL	2011	130,039	521,126	11,170	120	35,892	35,418	3.2	80.9	المستشفى الإيراني
	2012	130,398	543,169	15,878	120	54,585	54,382	3.4	-	
N.M.C SPECIALITY HOSPITAL	2011	48,346	155,283	5,325	79	11,583	11,583	2.2	40.2	مستشفى إن أم سي التخصصي
	2012	33,760	183,203	6,384	73	12,879	16,900	2.0	63.4	
AL RAFA HOSPITAL FOR MATERNITY AND SURGERY	2011	433	28,923	2,543	14	4,088	4,088	1.6	80.0	مستشفى الرفاعة
	2012	590	33,271	2,988	14	4,813	4,852	1.6	95.0	
INTERNATIONAL MODERN HOSPITAL	2011	8,948	18,100	5,889	54	11056	15667	1.9	79.5	المستشفى الدولي الحديث
	2012	11,592	37,679	5,062	54	9,995	9,424	2.0	47.8	
LIFE LINE HOSPITAL	2011	12,240	57,677	1,529	16	4,315	4,315	2.8	73.9	مستشفى لايف لاين
	2012	13,680	128,180	2,489	20	7,467	7,467	3.0	-	
AL QARHOOD HOSPITAL	2011	-	-	-	-	-	-	-	-	مستشفى القرهود
	2012	470	13,690	2,601	38	2,662	3,013	1.0	21.7	
DUBAI LONDON SPECIALITY	2011	-	65,075	470	7	470	470	1.0	18.4	مستشفى دبي لندن التخصصية
	2012	-	75,833	1,105	7	1,105	1,105	1.0	43.2	
MEDICLINIC CITY HOSPITAL	2011	31,451	118,656	14,248	170	37,147	36,895	2.6	59.5	ميديكلينك مستشفى المدينة
	2012	39,955	94,922	13,352	170	34,366	45,721	2.6	73.7	
AMERICAN ACADEMY OF COSMETIC SURGERY HOSPITAL	2011	-	5,794	212	25	318	318	1.5	3.5	مستشفى الأكاديمية الأمريكية لجراحة التجميل
	2012	-	10,035	397	25	582	582	1.5	6.4	
TOTAL	2011	392,201	2,150,929	104,942	1,279	248,677	263,126	2.4	56.4	المجموع
	2012	429,846	2,636,077	132,394	1,468	303,609	303,173	2.3	56.6	

1.4 Importance of Marketing in Hospitals

The medical industry has shifted over time. Insurance policies, costs, and reimbursements have changed; large corporate hospital-management firms have arisen; and countless innovations continually revolutionize the way we receive and provide medical care in ways too numerous to count. At the same time, in recent years, the economy has shrunk. Doctors are finding that medical practices aren't exactly recession-proof. At the same time, medicine has become more competitive and patients are seeking less care, either because they don't have insurance that will adequately cover it or because they can't afford their deductibles. With increased competition and slower growth in demand, many medical providers find their revenues growing more slowly than usual, or even shrinking. This means that healthcare marketing strategy is crucially important. Hospitals must have a coherent strategy in place to attract patients,

retain the patients they have, and maintain the relationships between staff and patients. Good medical marketing should start with careful planning. Building a brand requires knowledge of Hospital's strengths and core values, and their communication to target audience. This will involve various healthcare marketing strategies, including many online marketing tools and techniques. As business grows, a brand should be flexible enough to change with new technology. It is important to remain fresh and up-to-date, to adjust where there is room for improvement, and to accurately communicate the progress the hospital is making, in order to keep abreast of the competition. Adaptability in brand strategy — remaining flexible yet retaining focus on objectives and identity — is the key.

Once the planning has happened and the promotion and education have begun, one critical part of a marketing strategy is patient interaction. Efforts to build your brand are reinforced or undermined by the quality of the interaction between patients and staff, from receptionists to doctors. Accurate information, a personal touch, and attention to detail will encourage patients to spread the word. Patients and clients value competence, reliability, compassion, and attentiveness. They desire important information to be relayed promptly, clearly, and forthrightly, and above all with sensitivity. A personal recommendation on these merits is invaluable: patients and clients often prefer to visit practitioners and patronize businesses recommended by someone they trust.

To sum up: if we want to make our Hospital stand out head and shoulders above the rest, a well-planned, well-executed, flexible healthcare marketing strategy is very important. It's a way to continue bringing excellent care to the most community members possible**.**

2. The Study

2.1 Literature Review

Dipstick Survey is a mean for analyzing the market response in different areas of study or research. Dipstick Surveys are conducted to evaluate consumer's attitude, beliefs, perceptions and views towards a product, service, concept or an idea. They have an advantage over self-accomplished ways such as postal and online surveys because respondents are more likely to give their total attention when an interviewer is present. Dipstick surveys derive instant and cost effective insights into the markets. Market Researchers use dipstick surveys for data collection to derive insights from the consumers to gain market and mind share.[4]

Most of the studies published regarding surveys conducted by Hospitals are either Patient Satisfaction Surveys or Patient Expectation Surveys. They are very important to improve the services of a Hospital and generate more and more patient satisfaction.

Expectations, with reference to healthcare, refer to the anticipation or the belief about what is to be encountered in a consultation or in the healthcare system. It is the mental picture that patients or the public will have of the process of interaction with the system. Patients come to a consultation with expectations which they may or may not be overtly aware of. These expectations may be openly presented or the physician may have to attempt to elicit them. Reactions to unmet expectations can range from disappointment to anger. Thus, knowing the expectations of our patients can help avoid these reactions, enhance their healthcare experience, and reduce our exposure to liability. Studies have

shown that as much as 70% of litigation relates to real or perceived problems involving physician communications, which influences patients' expectations. Not meeting expectations can also result in non-compliance or suboptimal compliance and affect physicians' reputation in a community.

Patients with unmet expectations may never complain to the physician directly but instead they just will not return for ongoing and follow-up care. The days of absolute trust and blind obedience to doctors are over.

Understanding and managing patients' expectations can improve **patient satisfaction**, which refers to the fulfilment or gratification of a desire or need. When we can "read" our patients, they are grateful. They will sense we understand them better because our responses are accurate and appropriate to what they expect and feel deep inside.

This study is different from patient satisfaction and patient expectation surveys, although it comprises the elements of both. Overall, this study focuses on obtaining preliminary information on **Brand Awareness of GMC Hospitals as well as Satisfaction Levels of Patients and Expectations of prospective patients, among the people of Al Quasais area of Dubai.**

Brand awareness is the extent to which a brand is recognized by potential customers, and is correctly associated with a particular product. Expressed usually as a percentage of the target market, brand awareness is the primary goal of advertising in the early months or years of a product's introduction.

Brand awareness is related to the functions of brand identities in consumers' memory and can be reflected by how well the consumers can identify the brand under various conditions. Brand awareness includes brand recognition and brand recall performance. Brand recognition refers to the ability of the consumers to correctly differentiate the brand they previously have been exposed to. This does not necessarily require that the

consumers identify the brand name. Instead, it often means that consumers can response to a certain brand after viewing its visual packaging images. Brand recall refers to the ability of the consumers to correctly generate and retrieve the brand in their memory. A brand name that is well known to the great majority of households is also called a **household name**.

Brand awareness plays a major role in a consumer's buying decision-making process. The eventual goal of most businesses is to make profits and increase sales. Businesses intend to increase their consumer pool and encourage repeat purchases. Apple is a brilliant example of how there is a very high recognition of the brand logo and high anticipation of a new product being released by the company. An iPod is the first thing that pops into our minds when we think of purchasing an mp3 player. iPod is used as a replaceable noun to describe an mp3 player. Finally, high brand awareness about a product suggests that the brand is easily recognizable and accepted by the market in a way that the brand is differentiated from similar products and other competitors. Brand building also helps in improving brand loyalty.

Maintaining Brand Awareness is a very important aspect in marketing a company. It is imperative and very helpful to analyze the response your audience has towards the change in packaging, advertising, products and messages sent across through various means. Working towards creating an image in the minds of the consumers is not the last thing a company should aim to do. Inviting consumer feedback and maintaining a constant presence in the market is equally essential. Availability of the product to the consumer is one such way of doing this. The consumer should not have to come looking for you when he is in need of making a second purchase of the product, dealerships and outlets at convenient places should make the consumer think of the brand as the most convenient and best solution to their needs of fulfilments.[(5)]

Understanding customers' buying behaviour is another important objective of this study. Without this understanding gaining more customers will be difficult, especially in today's competitive world. Customers base their buying decisions on both rational and emotional reasons. They will look at a category on a rationale basis. They then decide, especially for repeat customers on the brand on an emotional basis.

Getting our customers to have an emotional attachment to our brand is one of the keys to **keeping them loyal.** As well it is one of the key factors in gaining referrals and recommendations. This study aims to know besides experience and expectations of our prospective patients, their current service provider, charges they pay, source of information regarding medical treatment. This vital information will help in greater understanding of our prospective customers and better segmentation and targeting of market for GMC Hospital in Al Quasais area of Dubai.

2.2 Methodology

Title

Dipstick Study to assess the market for GMC Hospital Dubai

Overview

A study based on collection and analysis of primary data, aimed at determining the awareness among the people of Al Quasais area of Dubai regarding Gulf Medical College Hospitals and identifying their current buying behaviour and expectations from the new hospital.

Research Questions

1. What is the level of awareness and satisfaction from the services of Gulf Medical College Hospitals among people at Ansar Mall of Al Quasais area of Dubai?

2. What is the current 'Hospital Services Utilization Pattern', in terms of source of information on medical treatment, charges paid for specialist consultation and choice of facility in medical emergency, among people at Ansar mall of Al Quasais area of Dubai?

3. What is the preference for language and nationality of treating Doctor, among people at Ansar Mall of Al Quasais area of Dubai?

Objectives of Study

1. To determine the level of awareness and satisfaction from the services of Gulf Medical College Hospitals among people at Ansar Mall of Al Qusais area of Dubai.

2. To determine the current 'Hospital Services Utilization Pattern', in terms of source of information on medical treatment, charges paid for specialist consultation and choice of facility in medical emergency, among people at Ansar mall of Al Qusais area of Dubai.

3. To determine the preference for language and nationality of treating Doctor, among people at Ansar Mall of Al Qusais area of Dubai.

Type of Study

Cross-sectional Dipstick Study

Study Group

General Public at Ansar Mall, Sharjah in Al Qusais Area of Dubai. Ansar Mall is one of the oldest and biggest mall of Al Quasis areas. It experiences an average customer fall of 1500 on a daily basis. It also attracts national and non national crowd which provides a representation of different nationalities and hence a multicultural overall response rate for the study.

Study Tool

Semi-Structured Questionnaire

Sample Size

487

Formula-

$$\mathbf{n} = \frac{\mathbf{t^2 \times p(1-p)}}{\mathbf{m^2}}$$

Description:

n = required sample size

t = confidence level at 95% (standard value of 1.96)

p = estimated prevalence of character of interest (default 50%)

m = margin of error at 5% (standard value of 0.05)

Non-Response rate= 10%

(This comes out to be 424. We have increased the sample size to maximum possible with given time and resources, as per the hospital's management decision.)

Analysis

Data thus collected was compiled and analysed to deduce relevant information regarding awareness of people about GMC Hospitals and their expectations from upcoming Gulf Medical College Hospital in Al Qusais area of Dubai.

Presentation of Findings

The whole exercise was compiled in the form of a Detailed Report and Key Findings presented.

Outcome

This study revealed the **awareness level** of people on Gulf Medical College Hospitals and threw light on the **expectations** that people of Al Qusais area of Dubai have, from an upcoming Hospital in their area. This valuable information helped us to **suggest an effective Marketing Strategy** for the hospital.

The Dipstick Survey

Taking inspiration from the top management at Gulf Medical College Hospitals in UAE, this Dipstick Survey to assess the market for upcoming Gulf Medical College Hospital in Dubai, was designed. Inputs were taken from my guide at Institute of Health Management Research University, Jaipur from time to time.

Details of Survey Exercise

Prior authorisation letters were issued with the seal and signature of the higher management officials of GMC Hospital Group, authorising the survey team to conduct the survey for GMC Hospital and requesting the management of mall to allow the team to conduct the exercise in their premises. As per the convention for such activities in Dubai markets, permissions were sought and agreements were signed to complete all the legal requirements. Standard charges were paid to mall that demanded such payments for allowing the survey work in their premises, and were borne by GMC Hospitals.

. It took eight to ten hours at the survey site to collect the data. The day, date and time of survey was planned well in advance. Discussions within team members and with managers at the mall were done to determine most appropriate day and time of survey so as to achieve most appropriate response.

Every survey activity was preceded by a briefing and followed by a debriefing meeting among the team members under the leadership of Mr. Dharmapalan. Learning from experience of survey from the site was noted and incorporated for future activities.

Data was cleaned and entered into SPSS Files (Statistical Package for Social Sciences). Presentations were made showing trends at Ansar Mall phase and presented to the Head of Department. Complete data was collected, compiled and analysed using frequency distribution. Final presentation made to senior management of GMC Hospital.

2.3Results

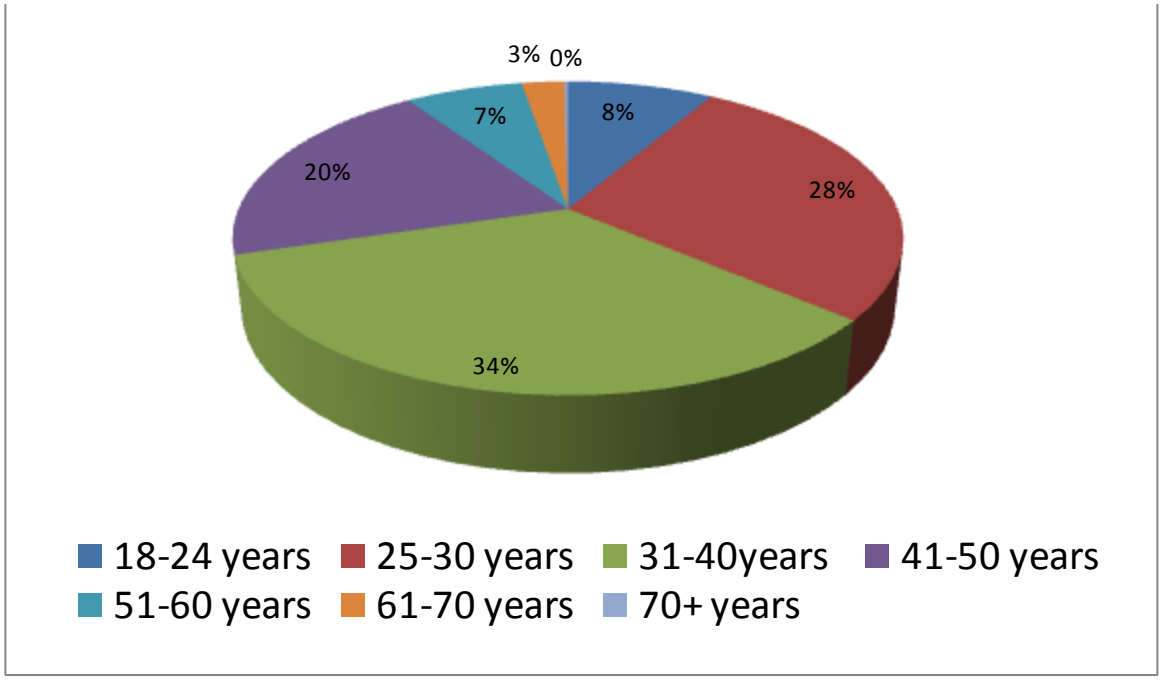


Figure 2.3 (a) Age distribution of Respondents at Ansar Mall

Figure 2.3(a) shows the age distribution of the interviewed respondents of Ansar Mall. 34 percent of the respondents were in the age group of 31-40 years of age. Majority of the responses i.e.82 percent were in the age range of 25-50 years of age group.

The distribution of responses in age group also correlates with the current demographic transition pyramid of UAE. The wide width in the middle of demographic transition pyramid also provides the hospital an opportunity to target the young and middle aged group for marketing the new hospital in Dubai.

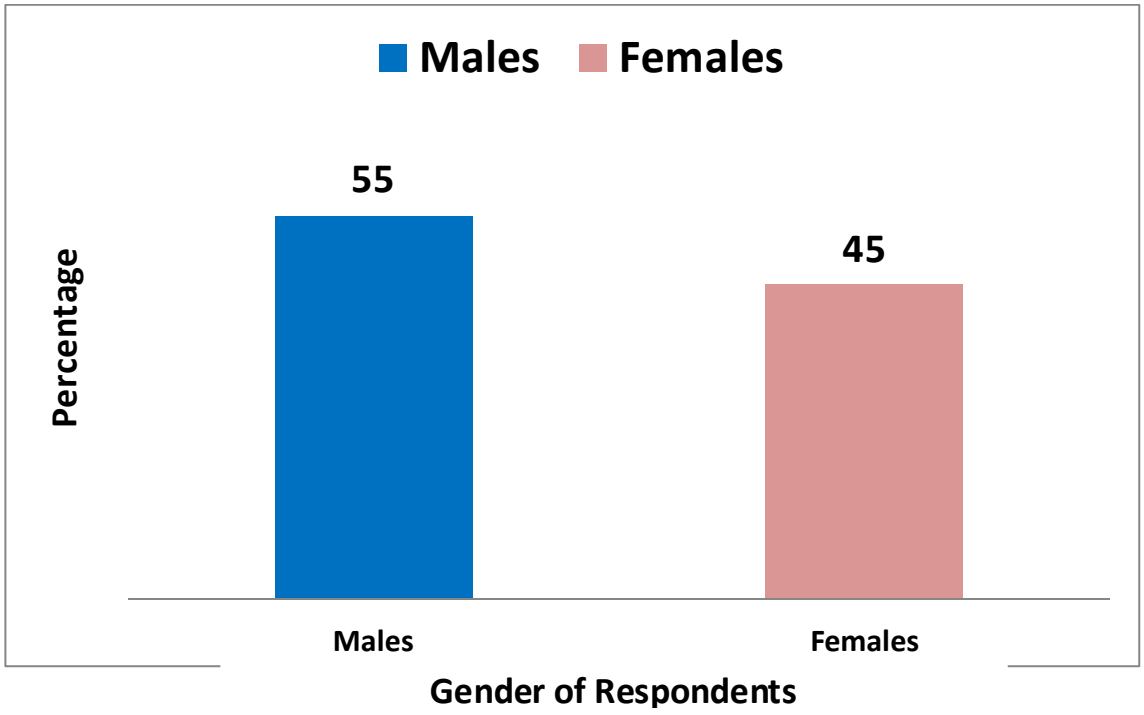


Figure 2.3 (b): Gender wise distribution of Respondents

More than fifty percent of the interviewed respondents were males. 45 percent of female responses also correlated to the UAE's male dominated demographic profile. The lower female responses were also attributed to the conservative culture of the UAE's society.

(c.) GMC Hospital brand awareness:

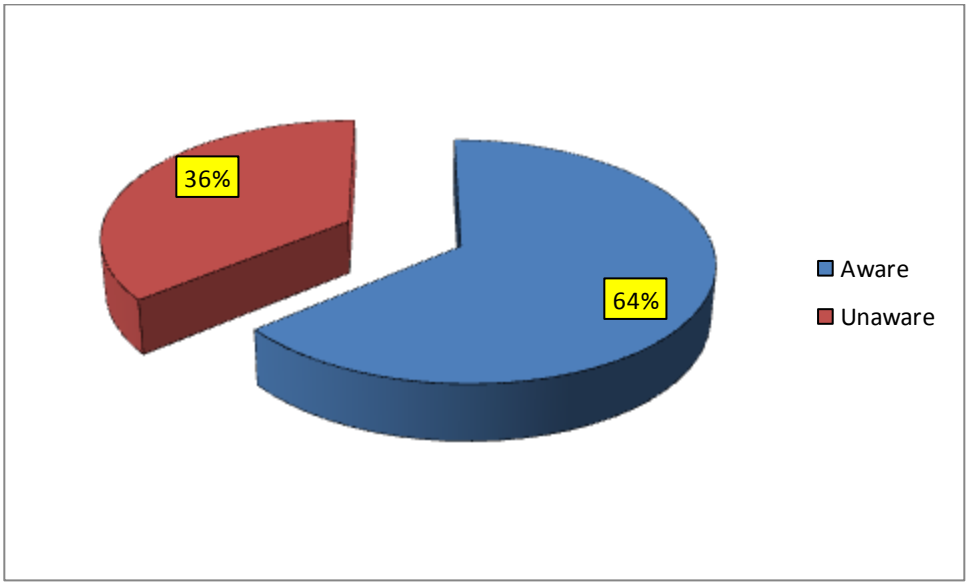


Figure 2.3 (c): Awareness of GMC Hospital Brand

The respondents were asked about the awareness of GMC Hospital. The analysis at the end of the survey revealed that approximately 64 percent of the respondents were aware of the GMC hospitals. The awareness was more in respect to GMC hospital at Ajman.

d. Satisfaction level of the respondents from GMC hospital's Services

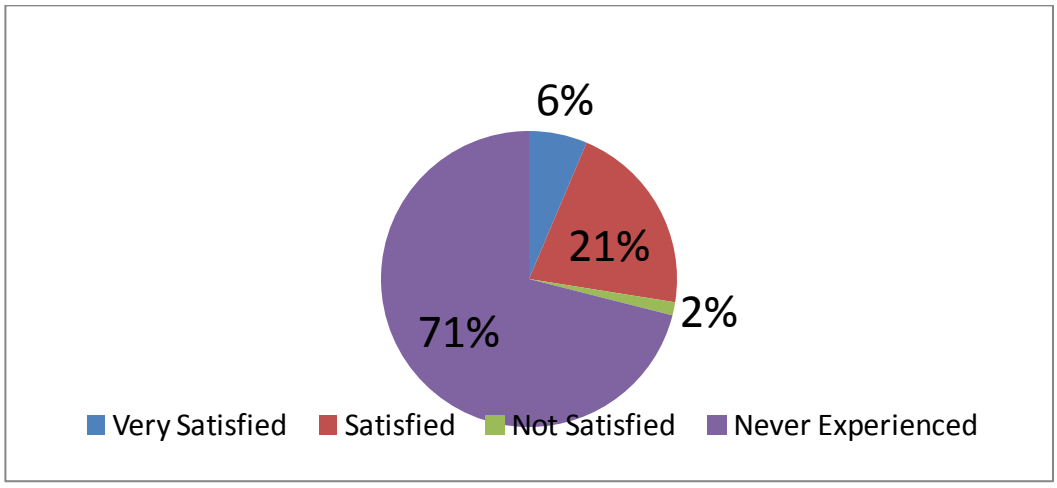


Figure2.3 (d): Percent distribution of satisfied respondents

Majority of the respondents (71%) did not experience any service from GMC Hospitals. Out of remaining 29% of experienced respondents 21% were found to be satisfied from the GMC hospital services. A very small proportion of around 2 percent was found to be not satisfied.

e. Awareness on upcoming GMC Hospital, Dubai:

AWARENESS REGARDING UPCOMING GMC HOSPITAL DUBAI	
AWARE	42%
UNAWARE	58%

Table 2.3(a): Awareness on GMC Hospital Dubai-Percent distribution

The study revealed that the respondents were less aware on the upcoming hospital of GMC brand at Al Quasis area of Dubai. Around 42 percent of the respondents knew about the opening of GMC in Dubai. The remaining 58 percent unaware respondents also opens up a window of opportunity for the hospital to propose marketing strategies for their awareness. Above the line marketing and below the line marketing strategies can be aimed to capture this major chunk of the masses.

f. Consultation Charges for a Specialist

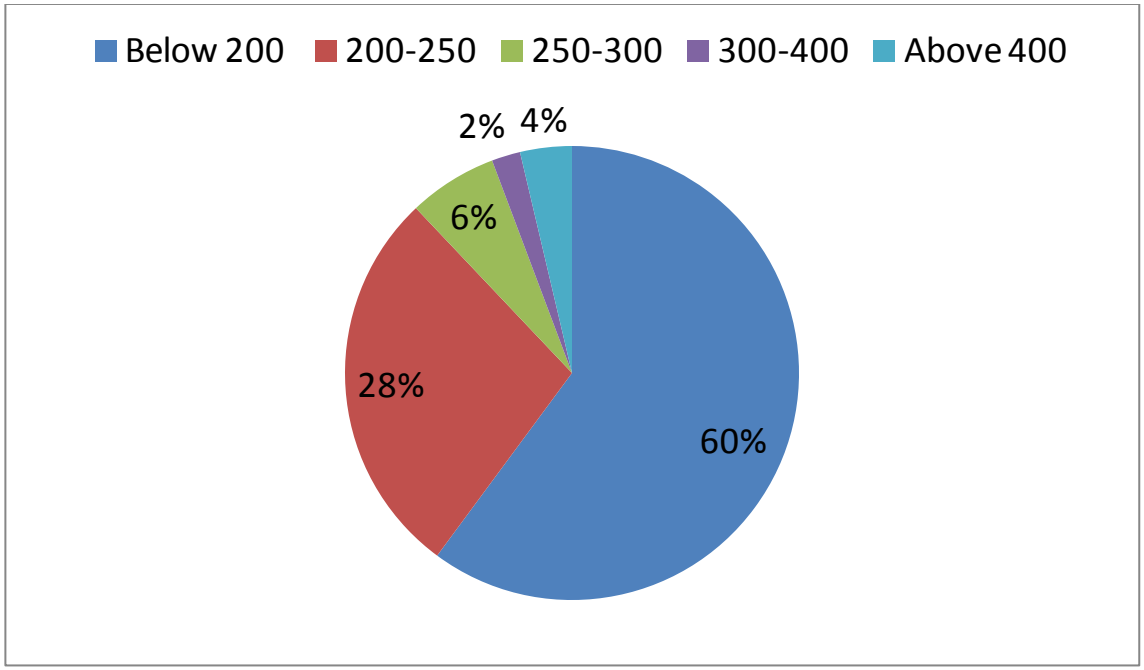


Figure 2.3(e): Common consultation charges paid by UAE residents in AED

Figure 2.3(e) shows that majority of the respondents (60 %) pay less than 200 AED for a specialist consultation. The reason attributed to this is that ninety percent of the people in UAE are insured and they pay only a small amount of copayment which is usually between the ranges of 30-40 AED. The next majority of the responses (28%) said that they pay in the range of 200-250 AED for the consultation by a specialist. The same findings were also correlated with a price study done at Beloul hospital, NMC Hospital and Zulekha hospital.

(g) Most Common source of information on medical treatment

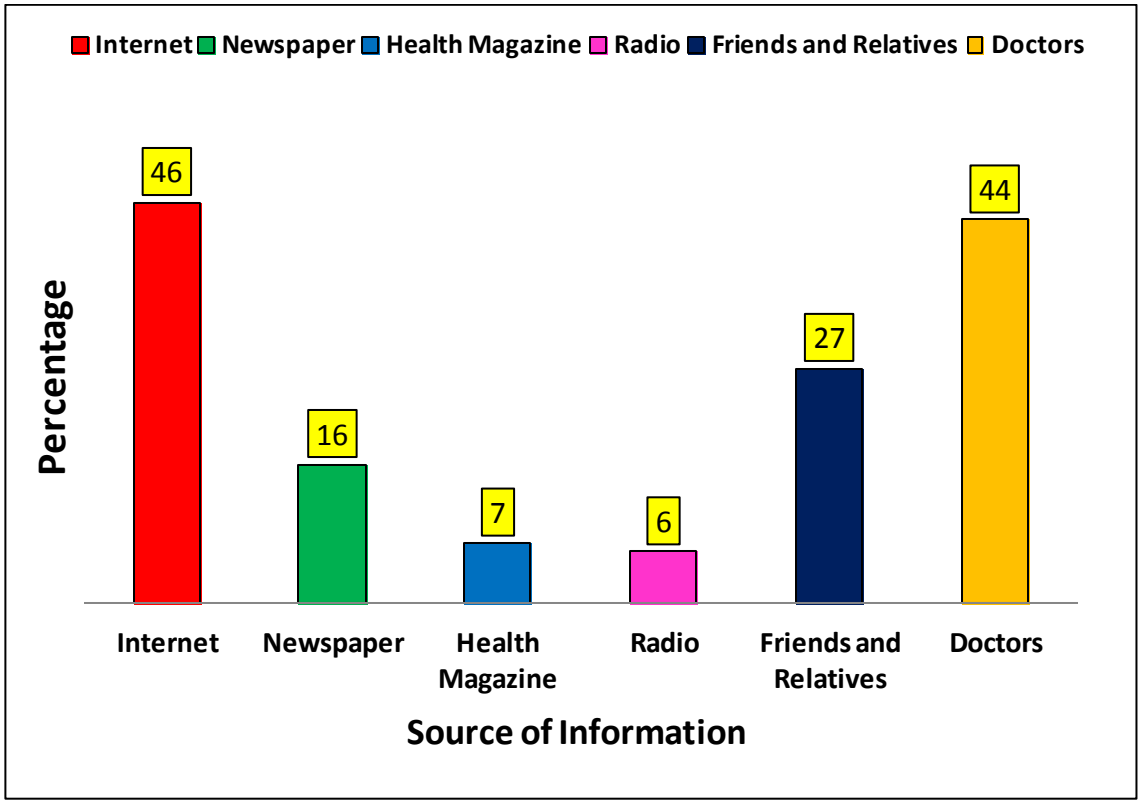


Figure 2.3(f) Percentage distribution of source of information of medical treatment

Forty six percent of respondents preferred internet to seek information on medical treatment followed by doctors for which 44% and friends and relatives for which 27 % respondents turned to when they needed to seek any medical treatment/information. Thus, this data could help the hospital in creating promotional advertisements on internet for the upcoming hospital at Dubai. Also referral doctors could also be utilised in promoting the upcoming GMC hospital.

(h.)Nationality Preference of the doctors:

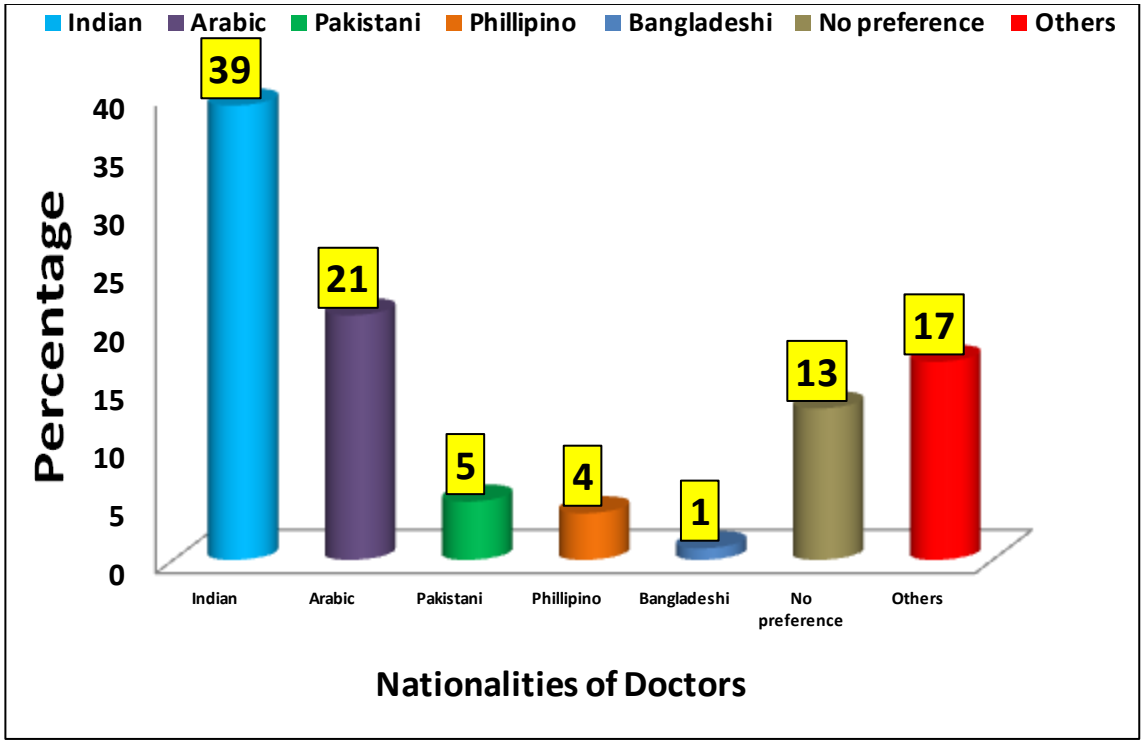


Figure2.3 (g): Doctors 'Nationality preference distribution

Thirty-nine percent of the respondents preferred to consult Indian doctors. The second major response of 21% was for the arab nationality doctor while 17% of the respondents showed preference for other nationalities like Sri Lanka, Jordan, Egyptian, Russian etc for the nationality of the doctor while

(i.) Preferred Language of Consulting Doctor:

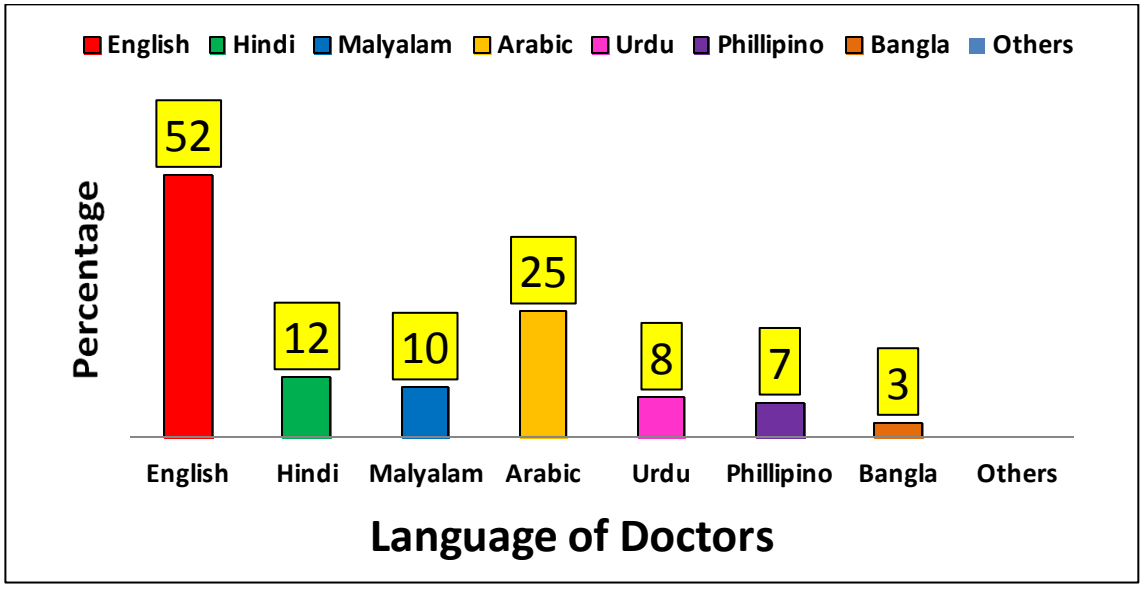


Figure 2.3(h): Preferred language of consulting doctor

Figure 2.3 (h) shows that more than half of the respondents preferred English speaking doctors followed by next major responses of 25 percent for Arabic and 12 % Hindi language..

(j.) Preferred Medical facility in emergency:

Figure 2.3 (i) shows that majority of the respondents (48%) preferred to avail private hospital emergency services.28 percent preferred to go to nearby clinics. Both the above statistics provide the hospital an opportunity to expand private 24x7 emergency services in the upcoming GMC hospital and also target referral doctors for marketing the new hospital.

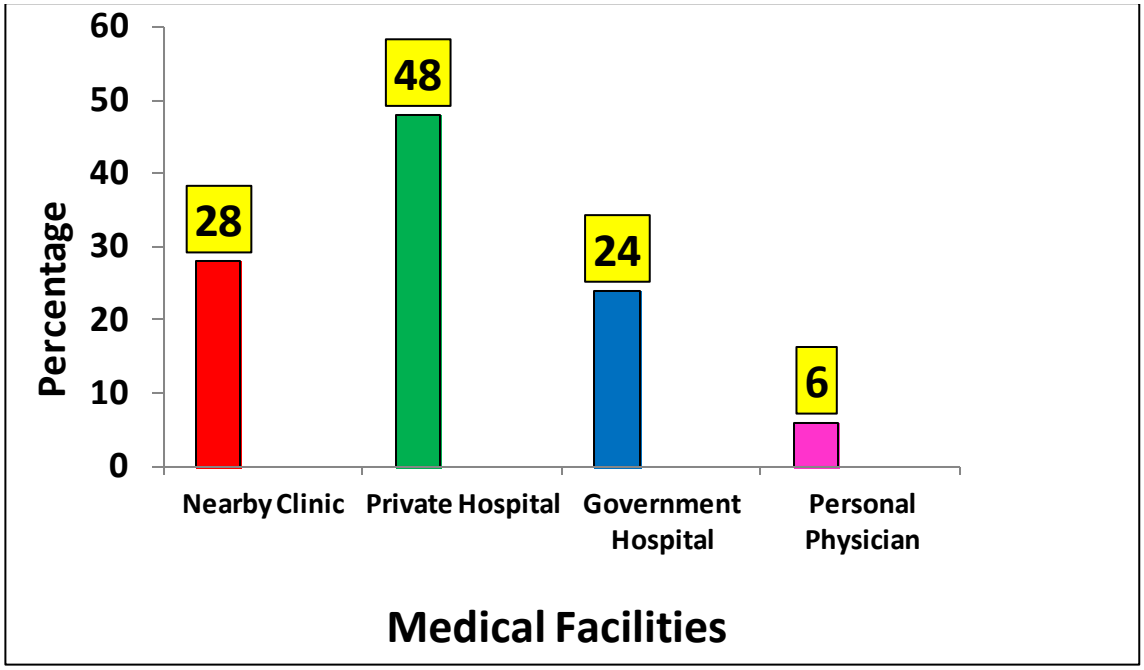


Figure 2.3(i): Preferred Medical facility in emergency

2.4 Discussion

The results shown in the preceding chapter of this report shows certain trends. First thing to be noticed is higher number of responses from males as compared to females. This can be attributed to the fact that the survey was conducted by randomly selecting individuals at public places. No prior stratification or clustering was done. UAE has a higher male population than females. This is because of higher number of expatriate population in the country who are predominantly males. Moreover, because of conservative culture in the country, voluntary participation from females in the exercise is expected to be less. More than half of the responses are from the people between 25 to 40 years of age. Individuals below 18 years of age were deliberately kept out of the exercise. We believe that that this age group is the most important when decision making regarding utilization of healthcare services is to be studied. This way, maximum participation by people of age group 25-40 has served well for the study. However, when it comes to utilization of healthcare services by geriatric population, lower participation by older individuals might have created some bias. Although, considering the fact that all three survey sites are malls, it can be understood why people in their fifties, sixties and more do not form a significant portion of respondents, still it has to be accepted that less participation from these age groups renders some limitation to the conclusions drawn out of this study. The demographic transition pyramid of UAE also narrows at the top showing less number of geriatric population abetting the bias of this study to certain.

About 64 percent respondents were aware of GMC Hospital Brand. This is an encouraging fact. But more than 70 percent people never experienced the services of GMC Hospitals. Moreover, close to 40 percent people were aware of upcoming GMC Hospital in Dubai. This implies that GMC brand awareness already being there,

marketing of upcoming GMC Hospital in Dubai has to focus on creating awareness regarding its market entry in Dubai and attracting the patients to avail the services of the hospital at least first time, followed by strategies to create brand loyalty.

Sixty Four percent respondents said that the consultation charges that they pay for a specialist doctor were below 200 AED. This can be explained by the fact that in Dubai, most of the people are insured for medical treatment. Dubai is close to ensure 100 percent medical insurance cover for its residents – be them Emiratis or Expatriates or even tourists. On probing further regarding consultation charges, people have reported that being insured, they only pay the deductible part of consultation charges that range from 20 AED to 50AED (mostly being 30 AED), and remaining is paid by the insurance company. On further questioning, among those without insurance and even those with insurance, many respondents (25 percent) said that the consultation charge they paid for a specialist doctor without insurance is 200-250 AED.

When asked about the preferred nationality of Doctor, about half of the respondents preferred Indian Doctors. About one-fifth had no preference for any specific nationality and about fifteen percent preferred Arabic Doctors. Other preferred nationalities of Doctors were found to be Pakistani, Philipino and Bangladeshi, besides others. It is interesting to note that many respondents who have preferred language of doctor other than Indian Languages, have given preference of nationality of doctors as Indian. This means that Indian doctors are preferred by people not because of national association, but they actually enjoy better reputation among people of all nationalities. This can be corroborated by certain comments of respondents that were recorded by investigators praising Indian Doctors for their expertise and professionalism.

More than 50 percent people indicated ‘English Language’ as preferred language of communication with their doctor. One fourth of the people are comfortable with

'Arabic' as Language of Doctor. 12 percent of the respondents mentioned 'Hindi' as the preferred language of communication with their Doctor. These figures can be explained on the basis of multi-ethnic cosmopolitan demography of Dubai with predominance of Arabic speaking locals and Hindi speaking Expatriate workers from India. Dominance of Malayali population can also be sensed by the fact that 10 percent respondents have indicated their preferred language of Doctor as 'Malayali'or 'Malabari'. The marketing strategies therefore should highlight the English, Arabic, Hindi and Malayalam speaking doctors in the promotional advertisements.

Respondents were asked about their source of information regarding medical treatment. The motive behind this question is to identify the most important media for Hospital Marketing Communication. Various options were given to the respondents and they were asked to tick on multiple options as applicable to them. Close to half of the respondents rely on the internet for obtaining information about medical treatment. This can be understood as most of the people coming to malls are expected to be educated and are able to access internet to search for answers to their medical queries. Besides internet, the other two most important sources of information regarding medical treatment came out to be 'Doctors' themselves and 'Friends and Relatives' of patients. The fact that near about half of respondents directly contact doctors to seek their advice regarding medical services utilization emphasises the importance of referral marketing for the upcoming hospital. Also, 27 percent respondents contact their friends and relatives and rely upon their advice in matters of medical treatment. This indicates that we need to employ strategies that would attract new patients through word of mouth. Innovative offers and marketing activities need to be designed and conducted so as to target the friends and relatives of current patients of GMC Hospitals.

When asked about the medical facility people rely upon the most in case of a medical emergency, close to half respondents named private hospitals and 28 percent preferred their nearby clinic. This opens the opportunity of marketing of 24-7 emergency services of the upcoming GMC hospital, with target population of Al Quasais area of Dubai.

2.5 Conclusion

First thing that becomes clear from this exercise is that Gulf Medical College Hospitals is a known brand in Dubai. But, awareness needs to be generated among the masses regarding its latest venture, that is, upcoming Gulf Medical College Hospitalin Al Quasais area of Dubai.

Secondly, the consultation charges that people are paying currently for a specialist in Dubai are in the range of 200-250 AED. We need to further corroborate this finding by doing a 'Price Study' of hospitals in Dubai. This will lead us o set competitive prices of our services at GMC Hospital Dubai.

Thirdly, it can be concluded that Indian Doctors who communicate with patients in English are most preferred by our prospective patients. Knowledge of Hindi, Arabic or Malayalam will be an added advantage.

Fourthly, Internet is the most important source of information on medical treatment. This is followed by 'Doctors' and 'Friends and Relatives'. We need to focus on these three areas for effective Hospital Marketing Communication. An impressive interactive website, referral marketing and schemes, offers and events targeting friends and relatives of existing patients should be our main line of action in the marketing of our new hospital in Dubai.

Lastly, as the results indicate, preferred choice of medical facility in an emergency being 'Private Hospital Emergency Department' and 'Nearby Clinic', we need to emphasise more and more on referral marketing in nearby clinics of Al Quasais area to bring in more and more new patients to our hospital.

3. Marketing Strategies

PROPOSED MARKETING STRATEGIES

Based on the results derived from the dipstick study conducted at Dubai, several marketing strategies are devised to promote the upcoming GMC hospital at Dubai. These marketing strategies are customer focussed and also takes into account other dominating niches of the existing market in Dubai. A vigorous and bottom to top approach keeping in mind promotional activities for all the levels of society are planned. The key strategies to be utilised for promotion of the hospital are discussed below:

1. LINE MARKETING:

Above the Line Marketing (ATL): ATL marketing refers to promotional activities done at macro level. It is done at national, regional or at bigger territory level and mass audience is covered in this type of promotion. A brand image is created about the company and its product. Media such as television, cinema, radio, newspapers and magazines are used to create an impact about the company and its products.ATL communication is more of conventional in nature.

Below the Line Marketing (BTL): BTL communication is unconventional in nature, done at micro level and forms part of non media communication. Measures include Direct Mailing, Distribution of Flyers, Brochures and usage of sponsorships, public relations, telemarketing and point of sale.

Through the Line marketing (TTL): TTL refers to an advertising strategy involving both above and below the line communication. This strategic approach allows brands to

engage with a customer at multiple points (for example, the customer will see the television commercial, hear the radio advertisement and be handed a flyer on the street corner). This enables an integrated communication approach where consistent messaging across multiple media creates a customer perception.[6]

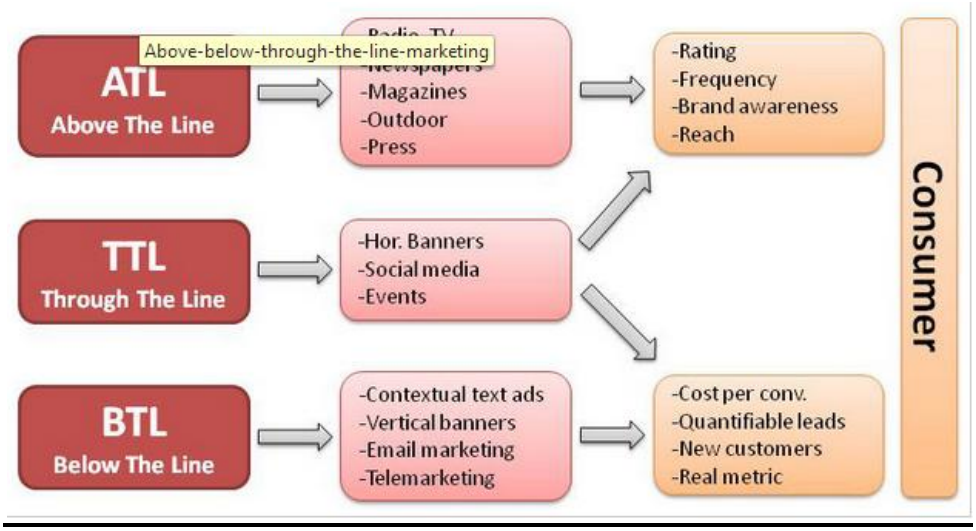


Figure 3.1. ATL BTL and TTL Marketing strategies for GMC Hospital Dubai

2. GIFTING HEALTH:

Gifting Health is a strategy that works on the principle of attracting customers through **"word of mouth".** The concept is built upon the utilization of the brand name of GMC, Ajman. The hospital is a known entity in Ajman and nearby areas with a total of around 1200 out patients per day. Its sister concerns at the emirate of Sharjah and Fujairah are also established and known in their respective emirates for their affordability and quality care. This strategy will be targeted to introduce GMC as brand to those 36 percent unaware population that is identified by the dipstick study.

The GMC Hospital Ajman is also famous for its Obstetrics & Gynaecology services and the department boasts of the patients from not only neighbouring emirates but also

internationally. The fame of affordability and quality care will be utilized via the concept of "Gifting Health" to fetch customers for the new hospital at Dubai.

Gifting Health will work via "**Take Care Cards**". The Health Card will be given to the regular patients or the patients with minimum of three paid consultations at the GMC Hospital at Ajman, Sharjah & Fujairah. The card bearer will be vested with the authority of gifting the card to any of his/her relative/friend residing at Dubai and the person gifted can utilize the same card at GMC Hospital Dubai with a 10 percent discount on his/her first consultation.

Take Care Card will have a unique identification code at the back of its panel. The receiver can scratch the card and the unique identification number can be matched with the Patient's Visit Record (PVR) number. The card would be valid for a maximum of 6 months period after it's dispatched to the patient at Ajman, Sharjah & Fujairah's GMC hospitals. The discount availing customer needs to produce a copy of its residence contract at the time of consultation at Dubai GMC Hospital.

Take Care Card would be an effective strategy for it would help in acquiring the patients through patients. The word of mouth has always proved efficient in acquiring patients and gifting health would give a platform to the hospital in increasing and retaining the patient footfall.

3. Health at Coffee Table:

GMC hospital is one of the several brands of Thumbay Group. Blends and Brew is a coffee restaurant under Thumbay Group's umbrella. It has several outlets in the emirates of Ajman, Dubai and Sharjah. One of its many outlets is located at Rashid Hospital, which is a government hospital in Dubai.

New GMC Hospital at Dubai's promotion will be made by using coffee tissue papers of Blends & Brew's outlets. Sixty two percent of population Quasis are is found to be ignorant of the upcoming GMC hospital. This strategy specifically will work to target this section. The outlet at Rashid Hospital in Dubai will help in introducing and promoting the GMC Hospital at Dubai to direct customers while the other outlets situated at other places will be a promotional activity for the indirect customers/consumers.

While sipping coffee or having a brunch at Blend & Brew's restaurant, the awareness on opening of GMC Hospital will be easily made known to the masses in Dubai.

Figure 3.2. Blends & Brews Tissue Paper with GMC Logo

4. The simultaneous pursuit of differentiation and low cost:

Steady population growth, high per capita income, increased health awareness and the rising prevalence of lifestyle diseases — taken together, it's not hard to see why the demand for quality health care is growing across the UAE.

According to a study conducted by industry research firm RNCOS, the UAE health-care industry is expected to grow at the rate of more than 16 per cent during 2011-14, and will be worth about $14.6 billion by 2014. The country has witnessed tremendous increase in the demand for health-care services, which also indicates high health-care spending.

. The UAE government has also adopted a strategy of encouraging top global and regional health-care service providers to establish facilities in the country..

The above data clearly outline the fact that the market of health care is huge in UAE and specifically in Dubai. The demand of health care services being on higher side can be explored and utilised to attract an increase patient footfall for the new GMC Hospital in Dubai. A combination offering of affordable and quality services would be promising in promoting and placing the GMC Hospital in Dubai.

The above marketing concept can be illustrated with the help of figure 3.1

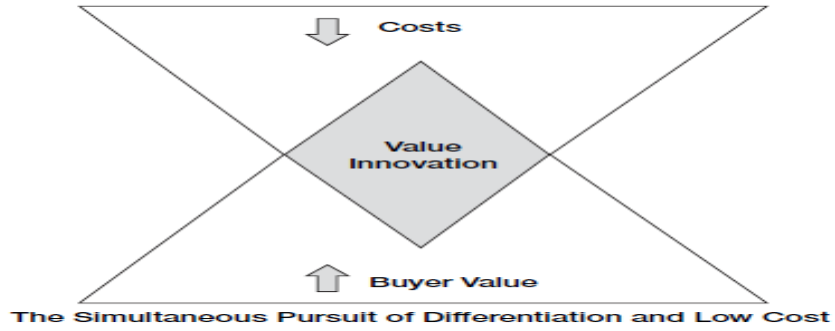


Figure 3.3. The simultaneous pursuit of Differentiation and low Cost

The concept focuses on reducing the prices of health care services in comparison to the existing horizontal market in Dubai without compromising the quality. The duo combination together brings the healthcare services in a **Value Innovation zone** which automatically will increase the buyer value and henceforth an increase in return on investment.

A pricing study was done over a period of 7 days by making calls and personal visits to hospitals in Dubai like Zulaikha Hospital, New Medical Centre, Aster Hospital and Biloul hospital. The prices for different categories of services including dental, laboratory and radiology were enquired upon and a consolidated results were used to prepare the competitive price list for the services to be given at GMC Dubai.

This strategy will be implemented in collaboration with the data gathered from the study conducted in Quasis which reveals that 64 percent of the people pay below 200AED for a specialist consultation. The pricing would be kept low as per the parallel competitive prices in the market in Dubai.

5. HOME DELIVERY LABORATORY SERVICES:

.As the UAE is a very high-income country, the health-care costs are proportionately higher," Hadley adds. The increased per capita income also reflects the busy schedule of the nation's population. Offering a service at the door step specifically a healthcare linked service will importantly just not bring the ease to the customers but will also help in attracting and retaining them for longer durations.

Offering the facility of collecting the samples for laboratory investigations can be utilised as a marketing strategy to attract those high income capable payers who could not afford a major break from their schedules. These services will be used to chiefly attract those customers who have the paying capacity but their tight work schedules make it little difficult to sacrifice the whole day for just simple medical investigations.

Door step sample collection strategy would be appropriate to attract the busier class of the nation's population. The strategy aims to collect lab samples from home, deliver lab tests at door step provide physiotherapy at home and other Home care facilities.

6. Patient Centred Healthcare Services: New insights suggest that a care-management approach which includes patient involvement is more effective than a standard approach which does not. This is especially evident in the management of chronic diseases like diabetes.

Patient involvement is more than availability of information or health literacy. It is about the interaction between the patient and the healthcare provider and encompasses a wide range of different aspects.

The core of the concept is the interaction between the healthcares worker and the patient (or their representing organisations).

A touch of expressed concern even after the customer returns back from the hospital could be explored as a psychological strategy to retain the customers for a longer duration and to build the trust in them.

Several techniques can be used to build the concept of patient centred health care services. The provision of a personal communication from the hospital's side on important occasions like the patient's birthday, festivals, and national events will work in building the patient-hospital relationship.

Similarly **Loyalty cards** will be given to regular customers with an added advantage of some extra services. Regular gift honouring for loyal customers will be linked to the strategy of loyalty cards.

This strategy would add in extending the brand awareness to 36 percent and 64 percent GMC brand and hospital unaware population.

22-26% of the population in Dubai are Indians with 23 Indian communities. Health Camps targeting this population on occasions like national days of the country will be used to attract the Indian customers. Simultaneously other group specific free consultation camps targeting children, old aged and disease specific camps will be conducted.

7. Highlighting Quality Services: GMC Hospital Ajman is known for the quality and affordability. To add to it, the hospital also received JCI accreditation in 2013. Thumbay group also has academics and research as one of its several line extensions and Gulf Medical University is the centre of academic wing for the Thumbay Group.

Healthcare Marketing Studies show that people associate academics with quality. This association should be utilized for the branding of the hospital. The promotion advertisements of GMC, Dubai will highlight its association with Gulf Medical

University and also its advanced laboratory centres like Centre for Advanced Biomedical Research and Innovation (CABRI).

Another association of quality within health care setting is seen to be linked with the service provider's excellence. The doctors, nurses and the other healthcare service providers' achievements, awards in healthcare will be used to advertise for quality services at GMC hospital, Dubai.

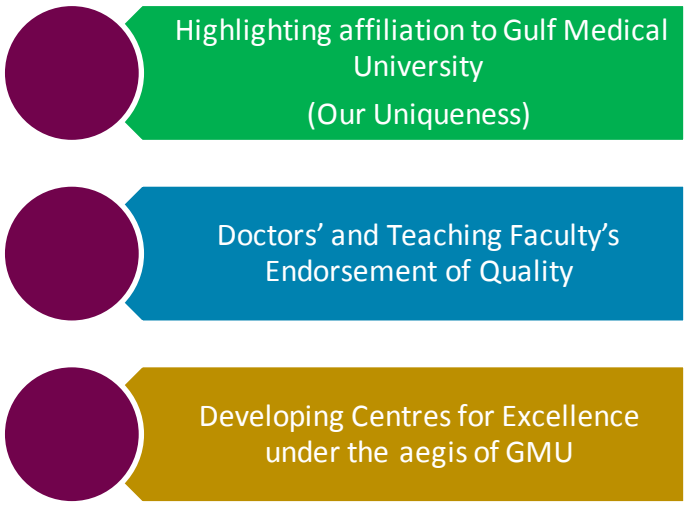


Figure 3.4. Ways to emphasise Academics-Quality Association

8. Differential Marketing:

Different Departments of Hospital have different Unique Selling Propositions. While designing the brochure for hospital and other promotional pamphlets, each department's promotion will be designed based on the selling proposition of the concerned department.

For Example, in treatments of complicated and grievous diseases, patients look for most experienced and qualified doctors. For such departments, marketing strategy will be to highlight the expertise of our Doctors. On the contrary, in areas such as Deliveries and knee replacements, where the outcome of treatment is more or less known to the patients, highlighting economic packages should be the main marketing strategy. Similarly, Aesthetic treatments in Dermatology and Dentistry should be marketed showing their beautiful results and treatment of lifestyle diseases like diabetes and hypertension, where the patient has to repeatedly come to the hospital, the overall ease and comfort of experience due to nearness of hospital, facilities in hospital premises and team work and patient orientation of staff should be emphasised.

Figure 3.5. Differential Marketing of Hospital Services

8.GMC MASCOT:

GMC Mascot will be introduced at the launch of GMC Hospital Dubai. The Mascot will be utilized as a GMC hospital specific figure and will be the figure of attracting the customers especially the patients accompanied with children.

10. DENTAL STAR:

The figures reveal that that 40 percent of Dubai's population comprises of Indians. The major section of Dubai's market works within the purview of Indian culture. Following the trend and keeping the interest of the Indian masses, the launch and endorsement of dental services will be done by some famous Indian celebrity.

The people especially the women and youngsters tend to follow their celebrities. The same will be utilized to promote and capture the market for dental wing of the GMC Hospital, Dubai.

Figure 3.6. Dentist of Star

4. Instrumentation

مستشفى جي إم سي
GMC HOSPITAL
HEALTHCARE - EDUCATION - RESEARCH

THUMBAY

GREETINGS FROM GMC HOSPITAL !!

Please tick (✓)

1. Have you heard about Gulf Medical College Hospital (GMC Hospital)?
   ☐ Yes ☐ No

2. How satisfied are you from services of GMC Hospital?
   ☐ Very Satisfied ☐ Satisfied
   ☐ Not Satisfied ☐ Never Experienced

3. Do you know that GMC Hospital is now coming up in Al Qusais-Dubai?
   ☐ Yes ☐ No

4. What consultation charges you pay for a specialist doctor (AED)?
   ☐ Below 200 ☐ 200-250 ☐ 250-300
   ☐ 300-400 ☐ Above 400

5. Where do you primarily look for information on Medical Treatment? (Tick Single or multiple options)
   ☐ Internet ☐ Newspapers ☐ Health Magazines
   ☐ Radio ☐ Doctors ☐ Friends and Relatives

6. Your preference for nationality / language spoken by your doctor? .....

.....

7. Where do you prefer to go in case of medical emergency?
   ☐ Nearby clinic
   ☐ My personal physician
   ☐ Private Hospital Emergency Department
   ☐ Govt Hospital Emergency Department
   ☐ Others .....

Thank You Very Much !!

STAY HEALTHY

1st JCI ACCREDITED HOSPITAL IN AJMAN

5. Appendix

مستشفى جي إم سي
GMC HOSPITAL
"Healing through knowledge and wisdom"

ثمبي
THUMBAY

To

31st March 2014

Mr.Madhu
General Manager
Lulu Hypermarket
Al Qusais
Dubai.

Respected Sir,

Gulf Medical College Hospital (GMC Hospital) is conducting a survey in and around Al Qusais area of Dubai that would help us to understand the healthcare needs of people and provide better healthcare services to them.

We hereby request you to grant permission to our survey team to conduct their exercise in or around your premises.

Thank you for your kind cooperation.

With regards,

Dr.Manvir Singh
Director - Administration
Gulf Medical College Hospital (GMC Hospital)

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