

INTERNSHIP TRAINING
AT GULF MEDICAL COLLEGE HOSPITAL
AJMAN UAE

By

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Roll No.94

PGDHM E (2012-2014)



INSTITUTE OF HEALTH MANAGEMENT RESEARCH UNIVERSITY

DELHI

INTERNSHIP TRAINING
AT GULF MEDICAL COLLEGE HOSPITAL
AJMAN UAE

**“DIPSTICK SURVEY TO ASSESS THE MARKET FOR
UPCOMING GMC HOSPITAL IN DUBAI”**

BY

DR. SUVENDU SEKHAR PANDA

UNDER THE GUIDANCE OF

MS.KIRTI UDAYAI (ASSOCIATE PROFESSOR)

POST GRADUATE DIPLOMA IN HOSPITAL AND HEALTH MANAGEMENT

2012-2014



INSTITUTE OF HEALTH MANAGEMENT RESEARCH UNIVERSITY DELHI

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 one thousand respondents randomly selected at prominent malls 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.

TO WHOM AND FOR WHAT SOEVER IT MAY CONCERN

TO WHOMSOEVER IT MAY CONCERN FOR WHATEVER THE REASON

This is to certify that **Dr.Suwendu Sekhar Panda** student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from International Institute of Health Management Research, New Delhi has undergone internship training at **Gulf Medical College Hospital** from 1/3/2014 to 21/5/2014.

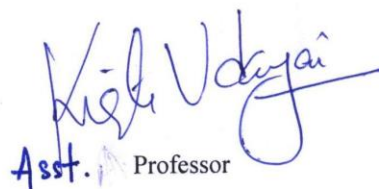
The Candidate has successfully carried out the study designated to him during internship training and his approach to the study has been sincere, scientific and analytical.

The Dissertation is in fulfilment of the course requirements.

I wish him all success in all his future endeavours.



Dean, Academics and Student Affairs
IIHMR, New Delhi



Asst. Professor

IIHMR, New Delhi

CERTIFICATE OF COINTERNSHIP COMPLETION



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

ميدى
THUMBAY

May 21, 2014

To Whom It May Concern

This is to certify that **Dr. Suvendu Sekhar Panda** holder of Indian Passport Number L6172520 was working in our institution as Management Trainee from 1st March 2014 till 20th May 2014, as a part of dissertation of his P.G.D.H.M program .He has completed the assigned project.

We wish him all the best.

For GMC Hospital and Research Centre, Ajman

to



THUMBAY MOIDEEN
President

AFFILIATED TO GULF MEDICAL UNIVERSITY

ACCREDITATIONS & MEMBERSHIPS



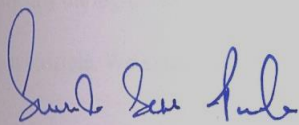
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CERTIFICATE BY SCHOLAR

INSTITUTE OF HEALTH MANAGEMENT RESEARCH DELHI

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. Suvendu Sekhar Panda (Enrolment Number 94), under the supervision of Ms.Kirti Udayai (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.



Dr. Suvendu Sekhar Panda

(Roll no.94 - PGDHM)

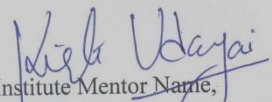
IHMR Delhi

DISSERTATION ADVISORY COMMITTEE

Certificate from Dissertation Advisory Committee

This is to certify that **Dr. Suwendu Sekhar Panda**, a graduate student of the **Post- Graduate Diploma in Health and Hospital Management** has worked under our guidance and supervision. He/ She is submitting this dissertation titled **"Dip stick survey to assess the market for upcoming GMC Hospital in Dubai"** at **"GMC Hospital, Ajman"** in partial fulfillment of the requirements for the award of the **Post- Graduate Diploma in Health and Hospital Management**.

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.


Institute Mentor Name,
Designation, **Assistant Professor.**
Organization **IIMR, Delhi.**

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CERTIFICATE OF APPROVAL

Certificate Of Approval

The following dissertation titled **“Dip stick survey to assess the market for upcoming GMC Hospital in Dubai”** at **“GMC Hospital, Ajman”** is hereby approved as a certified study in management carried out and presented in a manner satisfactorily to warrant its acceptance as a prerequisite for the award of **Post Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

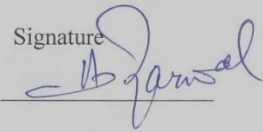
Dissertation Examination Committee for evaluation of dissertation.

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FEEDBACK FORM

Name of the Student: Dr. Suvendu Panda

Dissertation Organization: Gulf Medical College Hospital, Ajman UAE

Area of Dissertation: Ajman UAE

Attendance: 1st April to 20th May 2014 (100 %)

Objectives Achieved:

Probable Marketing Strategies for the upcoming GMC Hospital in Dubai.

Dipstick Survey to understand the Health Care needs of people and provide better Healthcare Services

Deliverables:

- Current Level of awareness about the Brand
- Presents an opportunity to create further awareness about the new hospital
- Pricing Strategy
- Communication Strategy
- Expectation & Preference of prospective patients about the service offering

Strengths:

- Has good knowledge of Healthcare industry
- Integrity Values are high
- Good team player and committed

Suggestions for Improvement:

- Improve listening skills
- Pay attention to details
- Openness for new ideas

Signature of the Officer-in-Charge/Organization Mentor (Dissertation) :

P.S. Panda

Date : 20th May 2014

Place : UAE

Acknowledgements

We, the authors of this report, viz. Drs.Suvendu Sekhar Panda,Chaitanya Acharya, Nida Siddique , 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 us 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 us to design the study and helped us to successfully overcome any difficulty during the course of the study. Without his kind patronage, this work would not have been possible. We extend our heartfelt gratitude to him.

Dr. SadashivBanger (Assistant Director Patient Affairs and Marketing Departments of GMC Hospital Ajman). Right from the onset, he provided us with a congenial and enabling atmosphere, and gave us opportunity to get exposed to day to day working of Patient Affairs and marketing Departments of the Hospital. This has enriched our knowledge and made our work more effective. We are very thankful to him.

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

Ms.Kirti Udayai (Associate Professor at Institute of Health Management Research University, Jaipur), my Guide for Dissertation, ensured the Quality of the study through

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1. Introduction

What started in 1998 with the establishment of the Thumbay Group at Ajman, UAE by its founder, a visionary and third generation entrepreneur from India, Mr. Thumbay Moideen,

blossomed into a diversified group with operations in Education, Healthcare, Medical Research, Diagnostics, Retail Pharmacy, Health Communication, Retail Optical, Wellness, Nutrition Stores, Hospitality, Real Estate, Publishing, Trading, Marketing & Distribution. Today, the Thumbay Group is a symbol for superior service, quality and innovation.

Venturing into new avenues of service with missionary zeal, the Thumbay Group has over the past decade spread its wings of excellence in various fields of social and business endeavours. The GMC Chain of Hospitals, the constituent teaching hospitals of Gulf Medical University, is one of the largest healthcare services provider in U.A.E serving patients from more than 175 countries. Similarly, Gulf Medical University attracts a student cohort of over 67 nationalities and faculty and staff from over 22 countries.

Apart from being an acknowledged leader in the health sector, Thumbay Group operates a reputed pharmacy chain, diagnostic centres, multi-brand retail outlets, world-class wellness centres, a prestigious chain of coffee shoppers, popular health & lifestyle publication, to name a few. An academic and entrepreneurial powerhouse, the Thumbay Group takes its strength from an empowered and loyal employee group exceeding two thousand and two-hundred people, which has enabled Mr. Thumbay Moideen to emerge as a personality of eminence in the Arabian Gulf.

2. Hospital Profile

GMC Hospital Ajman, Dubai, Sharjah & Fujairah are full-fledged multi-specialty hospital providing quality care at affordable prices. GMC Chain of Hospitals is one of the largest health care providers in the region. The group focuses on three pillars Education, Healthcare and Research.

GMC Hospitals aims to provide exceptional quality of care with latest technology, highly skilled medical work force from 20 nationalities, speaking more than 50 languages, treating guests from more than 175 nationalities worldwide with warm Arabian Hospitality.

GMC Hospital is managed by qualified professionals with wide ranging experience in Hospital Management and is well equipped to meet the challenging task of running a state of the art medical facility. Its goal is to build lasting relationship with people and medical professionals in the region.

Vision

“Our vision is to make GMC Hospital a world class tertiary healthcare center and teaching hospital that is committed to patient safety and emerge as a trustworthy healthcare provider in academic settings in the region.”

Mission

“Healing through Knowledge and Wisdom” The mission of the GMC Hospital, Ajman is to provide comprehensive healthcare services of high quality and health education to the community impart excellent educational opportunities for students in a stimulating environment and promote relevant bio-medical research.

GMC Hospitals Overview

Gulf Medical College Hospital (GMC Hospital), Dubai is a 150 bed multispecialty Hospital with cutting edge technology and is located at Al Quasais, Dubai. It is established to cater to the ever increasing need for quality healthcare for the people of the UAE and will be functional by mid 2014.

Gulf Medical College Hospital and Research Centre (GMCHRC), Ajman is a 250 beds multi-speciality Hospital with cutting edge technology having over 40 outpatient departments and is located in the heart of Ajman with easy access to patients from Dubai, Sharjah, UAQ and RAK apart from the local residents of Ajman. The multi speciality hospital was established to cater to the ever increasing need for quality healthcare for the people of the UAE. GMC Hospital Ajman is the first hospital in the Middle East to receive International Accreditation from the Joint Commission International (JCI).

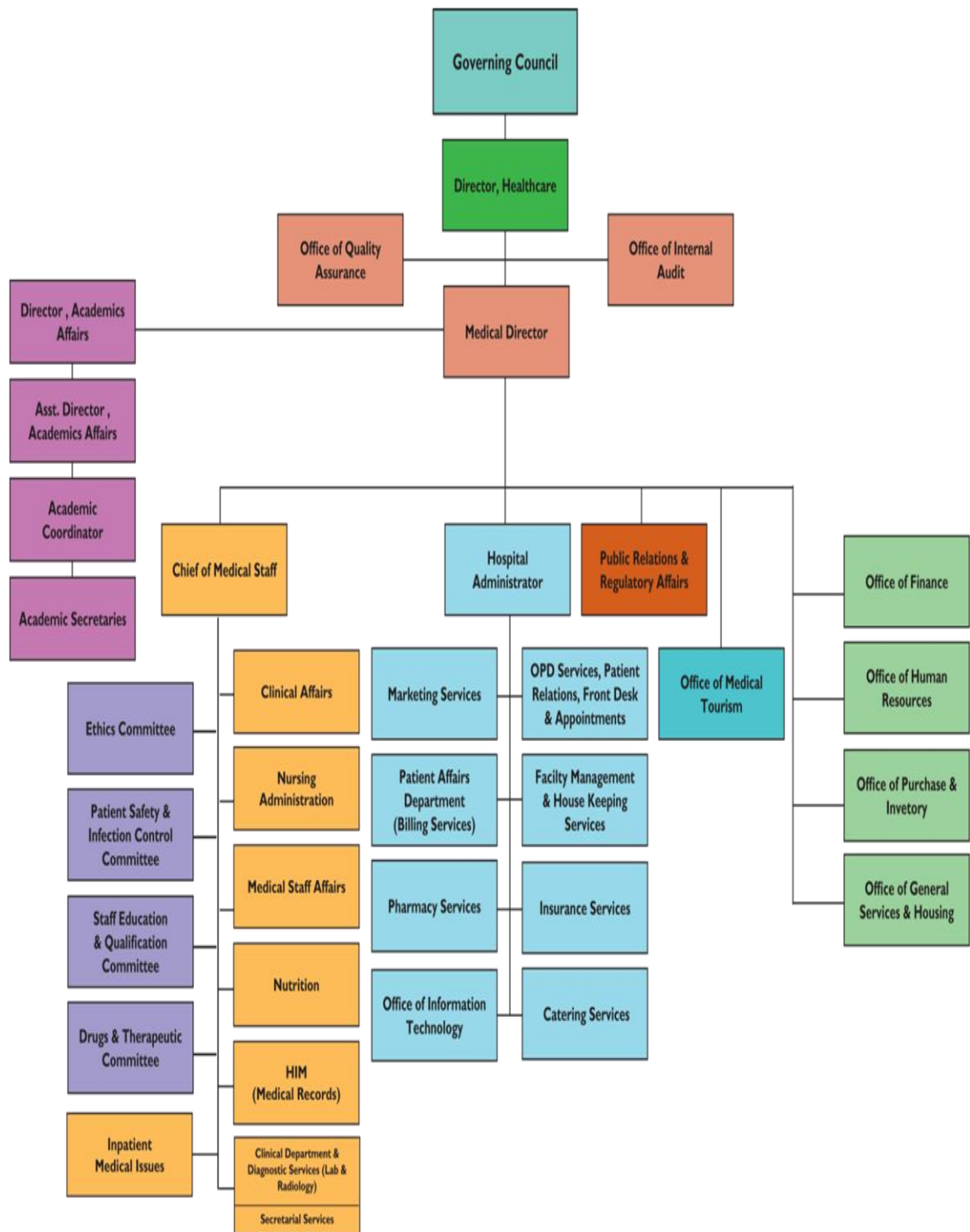
Gulf Medical College Hospital (GMC Hospital), Fujairah is a 60 bed multi speciality hospital providing quality care at affordable prices. The hospital is equipped with various speciality departments and services supported by highly qualified and experienced doctors, technicians and trained nurses.

Gulf Medical Center and Dental Speciality centre Sharjah is a modern satellite clinic consisting of departments like internal medicine, orthopaedics, Radiology, Pediatrics, Obstetrics and Gynaecology, Dental and in-house Pharmacy.

GMC Super Speciality Dental Center (Ajman and Sharjah). Together with exceptional knowledge in advanced Dental Techniques, Specialist dentists here are also known for their focus on patient satisfaction. GMC Super speciality Dental Center is the first hospital in the Middle East to receive Temos Certification.

(2)

ORGANOGRAM



Gulf Medical College Hospital & Research Centre, Ajman -

Department of Internal Medicine

The department is staffed with highly experienced consultants and specialists rendering expert service in a caring and friendly environment. The subspecialties under internal medicine are

- Endocrinology and metabolism
- Gastroenterology
- Neurology
- Immunology
- Nephrology

The services offered include outpatient consultation, specialty clinics, 24 hours inpatient care, and emergency services.

Department of General Surgery

The Department of General Surgery is a full-fledged healthcare facility providing complete evaluation, diagnosis, and surgical treatment for a wide variety of disorders

The Department specializes in operations of

- Laparoscopic appendectomy,
- Laparoscopic Hernia
- Laparoscopic Cholecystectomy
- Laparoscopic Varicocelelectomy
- Upper and Lower GI endoscopies

- Diagnostic endoscopies
- Colonoscopy
- Circumcision (for all ages)
- All general surgical, urological and gastroenterological procedures
- Breast Surgery
- Thyroid Surgery
- Anal Diseases Surgery- haemorrhoid, fistulae, and anal fissure
- Large bowel surgery like tumours and obstruction
- Small bowel surgery
- Gastric surgery
- Spleen surgery
- Urology surgery, testicular surgery.

Department of Obstetrics & Gynaecology

The Department of Obstetrics & Gynaecology of GMC Hospital provides comprehensive services to women in the treatment and management of gynaecologic and obstetric conditions

– from routine care to complex high-risk situations. Our maternity services manage and care for women during pregnancy, childbirth and postnatal periods. The department is fully equipped with

Maternity Unit

- Antenatal package
- Delivery package
- Modern Labor Suits
- Neonatal Intensive Care Unit
- Inpatient Wards

- Fully equipped operation theatre

Special Services:-

- Labor analgesia (Epidural) for painless delivery in labor suit
- Health Education- Antenatal Classes

Gynaecology Department specialized in

Laparoscopic Surgeries: - Hysterectomy, myomectomy, ectopic pregnancies, ovarian cyst, etc

- Diagnostic Laparoscopy for infertility evaluation
- Diagnostic and operative hysteroscopy
- Non Descent Vaginal Hysterectomy.
- Colposcopy

Department of Paediatrics

The Department of Paediatrics of GMC Hospital provides comprehensive healthcare services for children and adolescents below the age of 15 years old. The Department has Consultants A, Specialists A&B and resident doctors to diagnose and treat infants and children with Cardiac, Gastrointestinal and Neurological problem.

Respiratory: Diagnostic and Management of bronchial asthma and other forms of allergy.

Facilities

- Ultramodern neonatal ICU with high facilities of preterm, respiratory distress, low birth weight management.
- Capsule phototherapy for severe neonatal jaundice.
- Vaccination Centre
- 24 Hours Specialist on Call

ENT Department

The department of ENT deals with all ENT related problems and emergency situations to provide full coverage of services. The department provides round the clock emergency services and Outpatient Services from Saturday to Thursday

The department specializes in the operation of:-

Adenoidectomy, Tonsillectomy, Uvullectomy,
Uvulopalatopharyngoplasty, Submandibular Sialadenectomy, Submandibular Salivary
Calculus Excision, Excision of neck swellings, Tongue tie release, FESS, Nasal
Polypectomy, Septoplasty, Caldwell-Luc, Excision of oral lesions, Nasal bone fracture
reduction, Parotidectomy, Auricular sinus excision, Window operation for auricular
hematoma or abscess, Myringotomy, Grommet insertion,
Myringoplasty, Tympanoplasty, Mastoid exploration, Direct
Laryngoscopy, Hypopharyngoscopy, Oesphagoscopy, Fibroptic
Nasopharyngoscopy, Direct Laryngoscopy, Oesophagoscopy, Pediatric Bronchoscopy,
CO Laser assisted Surgery etc

Ophthalmology Department

The Department of Ophthalmology of GMC Hospital Ajman provides both basic and specialised eye care services for patients. Experienced Consultant provides specialised treatment for a wide variety of eye problems. Specialised equipment such as the argon laser for treatment of diabetic eye diseases, and computerised visual field analysers for assessment of glaucoma are available:

All surgeries are conducted at state-of-the-art operation

theatres in the hospital.

- OCT - Topcon
- F.A - Topcon
- Field Exam (Perimetry) Humphrey
- Glucoma Assessment- Applanation Tonometer Keeler
- Field Examination (Humphrey)
- Optic Nerve Head Analysis
(Topcon Image net system)
- Glucoma operation by laser:
 - Laser Peripheral Iridotomy
 - Laser Trabeculoplasty
 - Operation surgical
- Peripheral iridectomy
- Trabeculectomy
- Diabetic Retinopathy work up
 - OCT macular assessment
 - Field Examination
 - Fluorescein Angiography
 - Fundus Photography
- Diabetic Retinopathy Treatment
 - PRP
 - Grid Macular Treatment
 - Intravitreal VEGF Injection
 - Intravitreal Steroid Injection
 - Focal Laser Treatment
- Vein Occlusion and Branch Artery Occlusion Management

- Laser treatment to PRP (Pan Retinal Photocoagulation)
- Intravitreal VEGF Injection
- Cataract Evaluation and Treatment
- ECCE Operation
- Phacoemulsification (coming soon)
- Pterygium Excision and Grafting
- Lacrimal Sac Operation
- Lid operation Including Cosmetic and Chalazion operation.

Orthopedic Department

The department of orthopedics is an independent department with its own scope of services i.e., Patient's care, medical graduate teaching and related clinical research; provided with the help of qualified MOH licensed physicians having vast range of knowledge and experience on various aspects of orthopedics on all the seven days of week

Type of Major Surgeries Performed

- Arthroscopy – diagnostic, for sport injuries of knee, shoulder and ankle joint.
- Spine, joint replacement surgeries.
- Diagnosis of Bone tumor, hand reconstruction surgery.
- Amputation.
- Paediatric orthopaedics including corrective surgery for congenital deformities, like club foot, CDH.
- Tendon repair, reconstruction, including hand injuries.
- Soft tissue injuries of limbs.
- All types of advanced fracture fixation and dislocation cases.
- Bone, joint and spine infection.

- Degenerative joint disorders.
- Interlocking intramedullary nailing.

Dermatology & Venereology Department

The Department of Dermatology offers comprehensive care for all common and rare diseases of the skin, hair and nails. Dermatologists here offer safe and innovative care for their patients based on years of specialized experience and expertise.

Specialized services

- Dermatology Surgery
- Cosmetology- Botox and filler injections, Microdermabrasion, skin peels
- Electro Surgery
- Cryotherapy
- Phototherapy
- Laser Therapy- Hair removal, skin rejuvenation and acne scars.
- Venerology

Cardiology Department

The department of cardiology in GMCHRC is an independent unit, serving patients with various forms of heart diseases. The department provides all emergency cardiac consultation round the clock. The department is ready to receive emergency cardiac cases (CCU) 24 hours a day. The department is well equipped with centrally monitored beds, ventilators, Defibrillators and excellent medical supervision by highly qualified doctors and nursing staff.

Cardiology Department Services

- 12-Leads standard surface Electrocardiogram (ECG)
- Exercise Treadmill Test (Stress ECG)

- 24 Hours Continuous Ambulatory ECG Monitoring (Holter Monitoring)
- 24 Hours Continuous Ambulatory Blood Pressure Monitoring (ABPM)
- Echocardiography:

Adults:

- 2D & 3D Transthoracic Echocardiography (TTE)
- Trans-Esophageal Echocardiography (TEE)
- Pharmacological Stress Echocardiography
- Pediatric Transthoracic Echocardiography
- Neonatal Transthoracic Echocardiography

Urology Department

The Department of Urology at GMC Hospital is dedicated to provide state-of-the-art medical and surgical care in all aspects to male and female, as well as male infertility problems.

The Department of Urology in this hospital has the expertise to deal with the following conditions:

- Urinary Stones
- Congenital Anomalies
- Prostate enlargement
- Urinary infections
- Injuries to the Kidneys, Urinary bladder and Urethra
- Urinary Incontinence (urine leaks) in men, women and children
- Cancers of the Urinary Tract and Testis
- Male Infertility & Impotence

Special services

- Day Care surgery

- Endoscopic Surgeries & Open urological surgical procedures
- ESWL (Shock wave treatment for stone diseases)

Anesthesia Department

Department of Anesthesia of GMC Hospital offers a widerange of cutting-edge anaesthetic, perioperative and painmanagement services to patients.

The services provided are:

- General Anesthesia, Spinal Anesthesia, Local Anesthesia.

Peripheral Nerve Blocks and Bier's block.

- MAC (Monitored Anaesthesia Care)
- TIVA (Total Intravenous Anesthesia) for Major Orthopedic, General Surgery, ENT, Urological, Uro Surgery, Obstetric andGynecological Procedures, Plastic and Reconstructive Surgeries,including Laparoscopic and Laser Surgeries.

In addition the department provides round the clock services

1. OT:

- Providing anaesthesia inside the theatres
- Pre Anaesthesia checkup Clinic (PAC)
- Post Anaesthesia Care Unit (PACU)

2. ICU:

- Management of post operative patients
- Management of critically ill patients
- Patients on ventilator support

3. Pain clinic:

- Labor epidural analgesia
- Post operative pain management

4. Met call

Psychiatry Department

The Department provides consultation services through highly qualified and experienced Psychiatry Consultant. Services offered and conditions that may be treated are as follows,

- Evaluation and Treatment of Psychiatric disorders
- Different disorders among adults (anxiety, depression, panic, phobia and psychotic disorders)
- Psychological problems among elderly people.
- Psychological and behavioural problems among children.
- Psychological problems among people with epilepsy or Learning disabilities.
- Cases of substance abuse (addiction) and associated psychological problems.

Counselling Services include:

- Marital Counselling Services.
- Family counselling to deal with domestic problems including those among adolescents.
- Educational advisory services to students at different educational levels.
- Evaluation and treatment of psychological problems among patients in collaboration with other departments in the hospital

Family Medicine Department

- Family Medicine Department provides health care services in an integrated holistic manner and in harmony with the other Departments in the Hospital.
- Family Medicine department provides: Physical, Social and Psychological Health care services in continuous, coordinated, integrated competent and compassionate manner care.

- Family Medicine department concerned with physical ,social and psychological states of the patients and discover hidden agenda: family stress, work stress and occupational hazards to reach cause of illness or sickness through holistic approach during consultation interview, advices, counselling or during discussion of management plan with the patients.

List of services conducted

- Routine comprehensive health Check up.
- Health Fitness examination and Fitness certificate
- Vaccination (Adult Vaccination) and issue of vaccination
(Pediatrics Vaccinations are running in pediatrics department).
- Traveler's medicine issue, advices, vaccinations recommended for travelling to different countries and malaria prophylaxis therapy.
- Early detection and management of Hypertension, Bronchial Asthma, Diabetes mellitus, Thyrotoxicosis and Gout.

Department of Gastroenterology

Department of Gastroenterology is devoted to the clinical care of patients with gastrointestinal and liver disorders. The department manages a variety of gastrointestinal and liver disorders, including peptic ulcer disease, gastroesophageal reflux disease, gastrointestinal bleeding, functional gastrointestinal disorders, inflammatory bowel disease, pancreatobiliary diseases, acute and chronic liver disease.

Special services

- Endoscopy
- Colonoscopy

- Endoscopic Polypectomy for small polyps
- Diagnostic Biopsy of GIT

Department of Nephrology

The Department of Nephrology of GMC Hospital is a leading provider of services for patients with kidney disease, including the diagnosis and management of all forms of kidney diseases (including kidney stones). It's also provides management of patients who are on CAPD (Peritoneal Dialysis) and Post renal transplants patients.

GMC Super Specialty Dental Centre

GMC Super-Specialty Dental center-Ajman is a unique oral health care center which renders super specialty services, and is the Only Accredited Dental Center in the Middle East

by TEMOS

As a Super-Specialty Dental Center, the main specialties served are:-

1. Orthodontics and Dentofacial Orthopedics.
2. Oral and Maxillo-Facial Surgery.
3. Periodontics (Treatment of gum).
4. Pedodontics (Treatment of kids).
5. Fixed & Removable Prosthodontics.
6. Implant Dentistry.
7. General Dentistry.

Radiology Department

In Gulf Medical Collage Hospital, Diagnostic Imaging Department plays a pivotal role in many clinical conditions by helping the clinicians to reach an accurate diagnosis and hence efficient treatment for patients.

Services

Most of the major advancements in the field of Radiology are available in the Radiology Department.

The full range of services includes:

- Digital Conventional X-Ray machines with Digital fluoroscopy.
- Portable X ray unit.
- Computerized Radiology system with Laser printer
- Ultrasonography examinations including Routine abdominal, pelvic & obstetric Scans, Breast, Thyroid, scrotal, musculoskeletal, Colour Doppler studies, Endocavitary (Transrectal and Transvaginal), cranial ultrasound. Ultrasound guided fine needle aspiration cytology is also available.
- DEXA Scan (Bone densitometry).

Additional services :

- Multi detector 128 Slice CT machine for Coronary angiography in addition to other routine examination with colonography and angiography facility.
- Digital Mammography

Neurology Department

Department of Neurology of GMC Hospital provides comprehensive consultative services, diagnostic testing and treatment for a broad spectrum of neurological conditions, including diseases of the brain, spinal cord, peripheral nerves and muscles. The department uses the latest technology and facilities, staffed by an experienced team of neurologists and nurses who are committed to patient's care.

GMC Hospital Neurology Department offers management of a variety of Neurological conditions in both adults and children includes:

- Different types of stroke
- Epilepsy, seizures and other types of unconsciousness
- Migraine and Headaches of different types
- Brain infections like meningitis, encephalitis, etc.
- Vertigo/dizziness
- Paralysis of different kinds
- Parkinson's disease and other movement disorders
- Cerebral palsy and other developmental disorders of children
- Behavioural disorders
- Degenerative brain diseases
- Memory problems/ dementia
- Neck, back, lower back, arm & leg pains and tingling
- Cervical, lumbo-sacral spondylosis
- Some types of brain tumours
- Other neurological diseases

Clinical Nutrition Department

Clinical Nutrition Department mainly functions as two subunits namely: Inpatients Dietetics Department and Outpatients Nutrition Clinic.

- Nutrition Services of the Department include both medical nutrition therapy and nutrition education to both outpatients and inpatients with the aid of personalized diet regimens, education handouts and therapeutic lifestyle management guidelines. The department is responsible for inpatient's meal services according to the standard hygiene practices and recommended dietary guidelines.

Referral service

GMC Hospital is providing round the clock Outpatient and Inpatient services to the patients, referred from other clinics/Hospitals. The hospital is equipped to carry out all outpatients, inpatient and Emergency services round the clock.

24X7 Facilities

- Emergency
- ICU-CCU
- Ultramodern Neonatal ICU
- Labor & Delivery Room
- Hi-Tech Laboratory
- Radiology – Diagnostics imaging & Services
- Pharmacy
- Doctor on Call facility
- Patient affairs department
- Ambulance Service

Special Features

- Wide ranging tertiary care services
- Separate IP & OPD blocks
- Male & Female wings
- Private rooms, Deluxe rooms, Smart Deluxe rooms & VVIP Suites
- Four well equipped Theatre and Post operative care
- Day care facility
- New generation medical electronics
- Women's Health Centre

Centre-Of – Excellence

- Orthopedics Total Knee Joint Replacement
- Total hip replacement
- Spine Surgery and joint replacement surgery
- Critical care medicine
- Reproductive medicine
- Plastic Surgery
- Urology
- Renal dialysis unit

Timings:-

Emergency Services – 24 Hours

In Patient Services - 24 Hours

Out Patient Services – 9.00 am to 9.00 pm

Friday Clinics – 5.00 pm to 9.00 pm

(internal medicine, Gynecology, Orthopedic&Pediatric)

ANCILLARY DEPARTMENTS

- Accident & Emergency
- Laboratory - Pathology , Heamatology ,Microbiology ,Blood Storage Centre
- Physiotherapy
- Pharmacy & Drug Information Center
- Patients Affairs
- Nutrition and Diet
- Patient Education
- Catering
- Biomedical Engineering
- Insurance
- Hospital Informatics
- CSSD
- House Keeping

Special Features

- Wide ranging tertiary care services
- Separate IP & OPD blocks
- Private rooms & deluxe Facilities
- 24 Hour emergency
- ICU- CCU & Labour Rooms
- Day care facility

- New generation medical electronics
- Traditional architecture with modern facilities
- Doctor on call facility

Key Highlights

- GMC Hospital, Ajman, UAE was inaugurated on 17th October by **H.H Sheikh Humaid Bin Rashid Al Nuaimi**- Member of Supreme Council, U.A.E and Ruler of Ajman.
- **First JCI Accredited Hospital in Ajman UAE**
- The First Private University Teaching Hospital in U.A.E.
- GMC Hospital conducts the highest number of deliveries in the private sector in U.A.E.
- Affordable prices and caters to population from all the Emirates.
- First dedicated Patient Affairs Department in the private sector in the country.

Accreditations – Memberships – Affiliations

In 2013, GMC Hospital Ajman received international accreditation from the Joint Commission International (JCI) and was the first hospital in the Middle East to be a certified member of the International Tesmos Network. Other Accreditations/memberships -

Ministry of Health, UAE

Member - Medical tourism Association

International Hospital Federation

Tesmos, International Board of Medicine and Surgery

Tesmos Dental certification

Asian Hospital Federation

International patients

As a major Health Care Service Provider within the Gulf, GMC Hospital has taken great measures to improve all its services and procedures with the introduction of the International Medical and Health Care Tourism unit of the Hospital. Clients are provided with excellent Health care services world class recovery measures as well as recreational therapy and Spa services.

Aim at GMC Hospital is to target a great volume of Medical Tourists travelling from all over the world with a great need for excellent and affordable medical health care services.

Enquiries come from all over the world from various hospitals, medical practitioners, personal contacts and enquiry portals seeking medical services.

Affordable Care

GMC Hospital has special schemes to provide affordable medical care to the economically weaker sections of the society. Its mission is to provide affordable healthcare that doesn't compromise on quality. It is towards this end that they have established quality systems and controls that meet international standards of excellence in healthcare.

GMC Hospital brings together highly skilled professional and the latest advancements in medical technology. Their goal is to build lasting relationship with people. They believe that the healing process is as much about personal care as medical attention. It's this conviction that drives **Ajman's first ever private hospital.**

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4. Activities of Marketing Department at GMC Hospital Ajman

Department of Marketing at GMC Hospital Ajman organises numerous Activities throughout the year. These activities entail planning, teamwork and effective implementation. The department, under the able leadership of Dr. SadashiveBangera (Assistant Director) and Mr. P S Dharmapalan (Head of Department), has been very effective in attracting new patients to the hospital and retaining old ones. Special emphasis is given on learning and improvement with each and every experience, and obtain better results next time. Major activities performed in the year 2014 are –

Free Dental Consultation Camp

Blood Sugar and Blood Pressure Check-up Camp

Blood Donation Camp

Eye Camp for Diabetic Patients

Breast Cancer Screening and Awareness Campaign

Doctor'sMeet (Continuous Medical Education)

Women's Day Celebration

Chest Disease Camp

ENT Check-up Camp

BMI Measurement activity

Ante Natal Classes

Nephrology Camp

Hip and Knee Camp

Activities Conducted in the year 2013 are given in the following Table

2013 Marketing Activity

S N	Month	Date	PROMOTIONAL ACTIVITY			
			<u>In House Camps</u>	No of Pati ent	<u>Outside Camps</u>	No of Pati ent
1	JANUA RY	04 th	First Aid Training Program	22		
2		28 th	ENT Camp	103		
3		26 th	Antenatal	6		
4		31 st	Dental Camp	293		
6	FEBRU ARY	9 th	HCV Awareness Program	174		
7					Al Hikmah School Dental	817
8					Our Own Pvt School	250
9		28 th	Dental Camp	309		
10	MARC H				AsmaBeintOmeis School	60
11					Dubai Airport Medical Camp	NPD
12		28 th	Dental Camp	220		
13		30th	Antenatal	11		
14	APRIL				Sharjah Wanderes sports Club (Kabaddi)	NPD
15					Safeer Mall Health Fitness Awareness	290
16		18th to 25th	Dental Camp	355		
17		21 st	Neprology Camp	33		
18		27 th	Antenatal Class	10		
19	MAY	14 th	Migraine & Headache Camp	24		
20		21 st	Surgical Camp	38		
21		17th	Doctors Meet	505		
22		18th to 25th	Astma Camp	280		
23		28th & 29th	Arthroscopic Camp	119		
24		30 th	Dental Camp	237		
25	JUNE	8th to 13th	Diet & Nutrition Camp		No Patient Data	
26		10 th	Dermatology Camp	99		
27		15 th	Antenatal Class	6		
28		28 th	Mega Health Camp	286 6		
	JULY & AUGUST (SUMMER HEALTH PACKAGES PROMOTION)					
29	SEPT	27th Sept	Mega Health Camp	312 7		

	OCTOBER					
30	NOVEMBER	19 th	Dermatology Camp	99		
31		19 th	Diabetes	43		
32		23 rd	Antenatal Class	12		
33		28 th	Dental Camp	238		
34	DECEMBER	3rd & 4th	UAE national day camp		Ajman Post Office	230
35		04 th	Blood Donation Camp	99		
36		26 th	Dental Camp	277		

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5. PATIENT AFFAIRS DEPARTMENT (PAD):

Work Handled by PAD:

Patient Affairs department is the central core department of the GMC Hospital, Ajman. Its work starts in assisting the patient and its relatives from the time of their entry, involving their stay in the hospital to their exit.

The works handled by PAD are enumerated below:

1. Admission
2. Discharge – Billing
3. Referrals
4. Procedure Estimations (Cost Estimation)
5. Delivery Packages
6. Gold Card processing
7. In-patient rounds
8. Insurance approval
9. Dealing with patient problems and complaints

Aims of the Department:

1. To make Patient /Patient's relatives to know about their rights and responsibilities during their care in the hospital.
2. To guide the patient/ handle the patient / patients relatives grievance about the care and thereby making patient stay more comfortable.
3. To minimize the waiting time for admission and discharge and thereby patient satisfaction.

Pre-admission process:

1. Customer or patients are welcomed to the hospital with a formal greeting and are attended quickly.
2. Pre Admission form is collected from the patient.
3. The staff checks the validity of the legal documents.
 - Pre Admission Form
 - Emirates ID of the patient
 - Passport and visa (Patient and spouse)
 - Marriage Certificate (in case of deliveries/ obstetric procedures)
4. Patients on request are given a suitable written estimate and all queries with regard to billing are explained to the patient prior to admission
5. The staff explains types of accommodation available, asks for the preference of the patient and checks for the availability of the rooms.

Admission Process:

1. After the pre admission process is completed, the Inpatient Authorization form is filled with required information such as:

- Patient Name, Age, Gender and Nationality.
- Name of the doctor.
- Diagnosis.
- Payment Mode
- Admission Date and time.

2. Initial advance deposit is collected and the consent of the patient/ relative is taken on the “agreement for settlement of payments” form and general consent.

3. Credit facility if offered only to the patients from corporate and insurance covered (Insurance) having tied up with the GMCHRC.

4. Advance is taken where in patient walks in without authorization from the insurance company.

5. If the patient has insurance limitation then nominal deposit is collected to recover the non payable items

6. Once the admission form has been filled, the same is handed over to the care assistant (assisting the patient), to submit at the concerned nursing station for further care & management.

7. At the time of admission Pass is given to the patient

- For ward patient : one visitor Pass and attender pass only
- For room patients: Two visitor pass & One Attender Pass
- NICU – One visitor pass to the Father
- ICU- One visitor pass

8. In the event of non availability of room desired by the patient, any available and suitable bed will be offered. Subsequently on availability the patient will be shifted to the desired bed.

9. If a hospital bed is not available the patient is referred to the nearest Government/Private hospital. If ambulance service is required the same is provided.

10. The patient is handed over a folder which contains Leaflet – Patient's Rights and Responsibilities, General Consent, In-patient Information sheet.

In-patient services:

Daily Patient Rounds

The administrative assistant meets with inpatient on a daily basis. Based on the patient feedback the administrative assistant coordinates with the respective HOD's in providing proper care to the in-patients.

Grievance Recording, Redress & Prevention:

The nature of the complaint and the details are recorded on the feedback form by the Administrative Assistant, PAD. The filled form is handed over to the HOD, PAD.

The HOD, PAD uses the Corrective Action Preventive Action (CAPA) form attached for necessary investigations. It is ensured that the complaint process is fair, impartial, and confidential.

INFORMATION CENTER & PROVISION OF INTERNET:

- Detailed information about various departments and scope of medical services available is provided to patient as and when required.
- Queries are directed to the appropriate department /consultant for information and resolution.
- If the patient wants to avail the internet facility, the PAD staff explains the tariffs and usage rates and collects the payment and issues the internet voucher to the patient/attendant.

Assistance with Billing:

Billing officer, Assistant Billing Officer and Billing Clerk explains the total bill, the amount paid and the outstanding bill on a daily basis to the patient or attendant.

DISCHARGE PROCESS:

- The payment for the in- patient care is collected in the PAD; PAD staffs explain the bill and give detailed bill to the patient/ patient party. PAD staff ensures that

the patient's bills are clear, easy to read, there are no queries and completely accurate.

- If the patient has any complaints regarding bill/ clarification on bill they will meet Assistant director Patient Affairs or Assistant director Medical Affairs.
- If the Patient has insurance, the nurses will inform the insurance department and PAD about the discharge, and PAD staffs prepares the bill and coordinates with insurance department, respective staff nurse and patient / patient party in settlement of bills.
- At the time of discharge the PAD staff enquires if the patient/attendant requires transport facility and arranges the same.

Second Opinion for OPD:

- If the patient need for a second opinion they can approach either PAD or Front Desk for the further consultation with the second person. PAD or Front Desk will either arrange for the consultation according to the patient's choice or they will be provided with a list of doctors that contains details of their nationality and the languages they can communicate, within the organization. After the decision made by the patient, an appointment will be taken for the second opinion.

Second Opinion IPD:

- In the inpatient department, if the patient need for a second opinion they can approach either the health care providers including the inpatient coordinator or directly to PAD for the further consultation with the second person. If the information has been given to the health care providers /inpatient coordinator, it will be communicated to the PAD. They will either arrange for the consultation according to the patient's choice or they will be provided with a list of doctors that contains details of their nationality and the languages they can communicate, within the organization. After the decision made by the patient, an appointment will be taken for the second opinion.

Second Opinion outside the organisation:

In the inpatient department, if the patient request for a second opinion for consultation from an outside organization, the PAD will check for the reasons with patient/family and the patient will be discharged by signing a LAMA [Leave against Medical Advice] form.

In case of demise:

The PAD on duty is contacted by the nurse soon after a death is declared in any of the wards in the hospital. Upon receiving information, the PAD reaches the site where the deceased is. The PAD checks for

- MLC / non MLC status
- Full & Final settlement of bill
- Authenticity of the relationship of the next of kin to the deceased

In case the deceased is a Medico Legal Case, the deceased (body) is handed over to the representatives of the concerned police station in the presence of the immediate family member.

Workload in the Department:

1. Average Admission per day- 50
2. Average discharges per day – 50
3. Average packages explained per day (Walkings) – 30
4. Average Package explained telephonically – 25
5. Average referrals taken per day – 6
6. Average estimation given to patients per day- 6
7. Average time taken for admission of the Patients – 15 min
8. Average time taken for preparing bill for self payment – 15 min
9. Average time taken for preparing bill for insurance patient – 15 min

6. Projects undertaken other than Dissertation

Price Study

Department of Marketing at GMC Hospital Ajman wanted to gather information regarding charges of various routine and non routine medical treatments and diagnostic services as well as laboratory investigations, at prominent hospitals in Dubai, that are the main competitors of upcoming GMC Hospital at Dubai. As management trainees, under the supervision of our Head of Department, we gathered the aforementioned information. This valuable information will be used to decide the treatment charges and design packages for services at GMC Hospital Dubai.

Doctor's Meet at Ajman & Fujairah

One of the most important annual event hosted by the Marketing Department of GMC Hospital is Annual Doctor's Meet. We contributed towards the success of the event at GMC Hospital Ajman and GMC Hospital Fujairah by taking up the tasks of invitations to Doctors and their reception at the event.

School Dental Health Programme

Developed strategies for Marketing of Dental Department through a School Dental Health Programme, and made a presentation of the same to the Head of Department.

Doctor's Details in Dubai

Marketing Department has taken up the enormous task of developing a comprehensive database of Doctors in Dubai, which includes their details like, name, speciality, address etc. This is to be gathered from open sources available on internet. We gathered and compiled the required information for Dermatologists, Dentists, Paediatricians, Gynaecologists and Orthopaedic Surgeons of six areas of Dubai that are in the vicinity of GMC Hospital, Al Quasais Dubai.

Assistance in Brochure Designing

A new brochure was being developed for Dermatology Department highlighting latest techniques of Skin Treatment that are being introduced. We assisted in designing of the same.

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1. INTRODUCTION

1.1 GCC Healthcare Markets

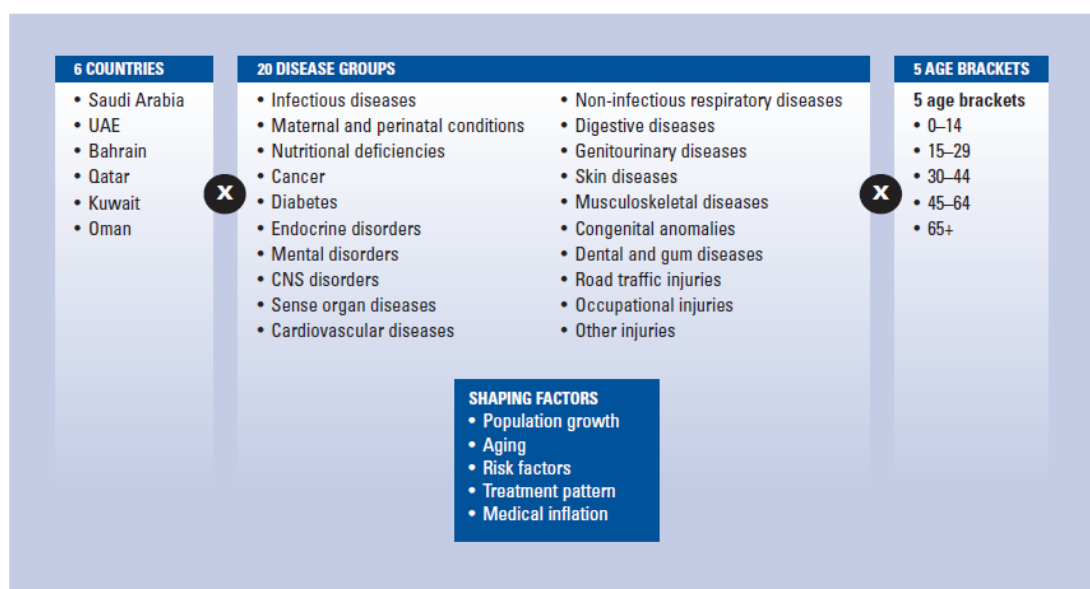
The coming decade will bring significant new challenges to health care in the Gulf Cooperation Council countries. These challenges will require new strategies on the part of government and private health-care players. Health-care demand in the Gulf Cooperation Council is undergoing fundamental change. 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 payors, providers, and government. Private payors 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. McKinsey's model to estimate disease demand in Gulf Cooperation Council countries

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

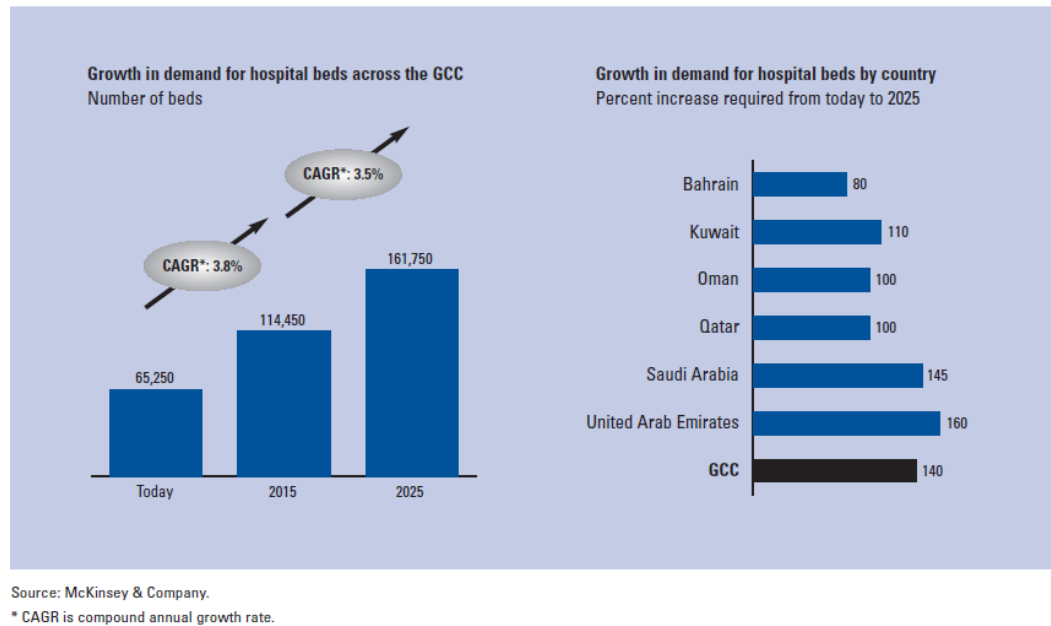


Figure 2. Projected demand for hospitalbeds in the Gulf Cooperation Council countries by 2025 (percent)

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1.2 Healthcare in UAE

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 4m 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.

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 semi-skilled 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 semi-skilled 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 department's 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.

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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 led 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 health 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** inpatient 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. Major 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.

PRIVATE HOSPITALS PERFORMANCE INDICATORS FOR THE YEARS 2011 & 2012

INDICATORS HOSPITALS & YEARS		المترددون على الطوارئ EMERGENCY PATIENTS	مرضى العيادات الخارجية OUT-PATIENTS	مرضى القسم الداخلي IN-PATIENTS	عدد الأسرة NO. OF BEDS	أيام الإقامة HOSPITAL DAYS		معدل الإقامة AVERAGE LENGTH OF STAY	معدل إشغال الأسرة BED OCCUPANCY RATE	المؤشرات المستشفيات
						DAYS OF CARE TO PATIENTS DISCHARGED INCLUDING DEATH	TOTAL PATIENT DAYS OF CARE TO PATIENTS IN HOSPITAL (CENSUS)			
BELHOUL EUROPEAN HOSPITAL	2011	-	64,449	2,077	10	3,144	3,144	1.5	88.1	مستشفى بالهول الأوروبي
	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	182,436	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 الطبي 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 الأمريكي
	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 ميدكلينيك ويلكير
	2012	66,139	155,013	12,038	110	32,852	36,074	2.7	89.8	
NEURO SPINAL HOSPITAL	2011	5,919	19,884	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 التخصصي
	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	76,653	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 للجرارة والتجميل
	2012	-	146	96	6	168	213	1.8	9.7	
ZULEKHA HOSPITAL	2011	27,558	251,307	9,926	77	19,630	19,830	2.0	70.6	مستشفى زليخة
	2012	27,697	253,205	10,827	77	22,925	21,116	2.1	75.1	

PRIVATE HOSPITALS PERFORMANCE INDICATORS FOR THE YEARS 2011 & 2012

INDICATORS	HOSPITALS & YEARS	المترددون على الطوارئ EMERGENCY PATIENTS	مرضى العيادات الخارجية OUT-PATIENTS	مرضى القسم الداخلي IN-PATIENTS	عدد الأسرة NO.OF BEDS	ليام الإقامة HOSPITAL DAYS		معدل الإقامة AVERAGE LENGTH OF STAY	معدل إشغال الأسرة BED OCCUPANCY RATE	المؤشرات المستشفيات
						DAYS OF CARE TO PATIENTS DISCHARGED INCLUDING DEATH	TOTAL PATIE. DAYS OF CARE TO PATIENTS IN HOSPITAL (CENSUS)			
CEDARS - JEBEL ALI INTERNATIONAL HOSPITAL	2011	1,107	37,722	958	16	2,097	2,097	2.2	35.9	مستشفى سبدارز-جبل على 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	33,780	183,203	6,384	73	12,879	18,900	2.0	83.4	
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	1.8	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	126,180	2,489	20	7,467	7,467	3.0	-	
AL QARHOOD HOSPITAL	2011	-	-	-	-	-	-	-	-	مستشفى القروود
	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	مديكلينيك مستشفى المدينة
	2012	39,955	94,922	13,352	170	34,386	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	

Table 1. Private hospitals in Dubai - performance indicators for the year 2011 & 2012

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.

(8)

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.

(9)

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 fulfillment 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 respond 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 fulfillments.

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 rational 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 regarding Gulf Medical College Hospitals among people of Al Quasais area of Dubai ?
2. What is the level of satisfaction from the services of GMC Hospitals, among people of Al Quasais area of Dubai ?
3. 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 of Al Quasais area of Dubai ?
4. What is the preference for language and nationality of treating Doctor, among people of Al Quasais area of Dubai ?

Objective of Study

1. To determine the level of awareness regarding Gulf Medical College Hospitals among people of Al Qusais area of Dubai.
2. To determine the level of satisfaction from the services of GMC Hospitals, among people of Al Qusais area of Dubai.
3. 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 of Al Qusais area of Dubai.
4. To determine the preference for language and nationality of treating Doctor, among people of Al Qusais area of Dubai.

Type of Study

Cross-sectional Dipstick Study

Study Group

General Public in Al Qusais Area of Dubai

Study Tool

Structured Questionnaire

Sample Size

1030

Formula-

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

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, in order to increase the reliability and validity of the study)

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 our respective guides at Institute of Health Management Research University, Jaipur from time to time. The whole exercise was planned in three phases as shown below -

Phase	Date	Survey Site	Number of Respondents
1	April 09, 2014	Lulu Hypermarket	375
2	April 28, 2014	Al Mulla Plaza	155
3	May 8, 2014	Ansar Mall	487
Total			1017

Table 2. 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 respective malls 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 malls that demanded such payments for allowing the survey work in their premises, and were borne by GMC Hospitals.

The survey team comprised of Researchers Drs. Suvendu Sekhar PandaChaitanya Acharya, NidaSiddique ,and was lead by Head of Marketing Department at GMC

Hospital Ajman, Mr.P S Dharmapalan. The team spent about eight to ten hours at each 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 malls 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 every phase was noted and incorporated in further phases.

Data was cleaned and entered into SPSS Files (Statistical Package for Social Sciences). Data Analysis was done at every phase. Thus separate results and inferences are available with us for each phase of the survey. Presentations were made showing trends of each phase and presented to the Head of Department. Analysis of individual phases was majorly done using frequency distribution function. Later on, when complete data of all three phases was collected, it was compiled and analysed using frequency distribution and cross tabulation functions. Final presentation made to senior management of GMC Hospital, comprised of interpretation of individual phases as well as the final outcome of all three phases.

2.3 Results

Statistics								
		Age	Sex	Awareness GMC	Satisfaction	Awareness GMC Dubai	Consultation Charges	Nationality of Doctor
N	Valid	1009	1008	1016	1016	1016	1007	1009
	Missing	8	9	1	1	1	10	8

Table 3. Statistical Table showing the Valid and Missing data

1.

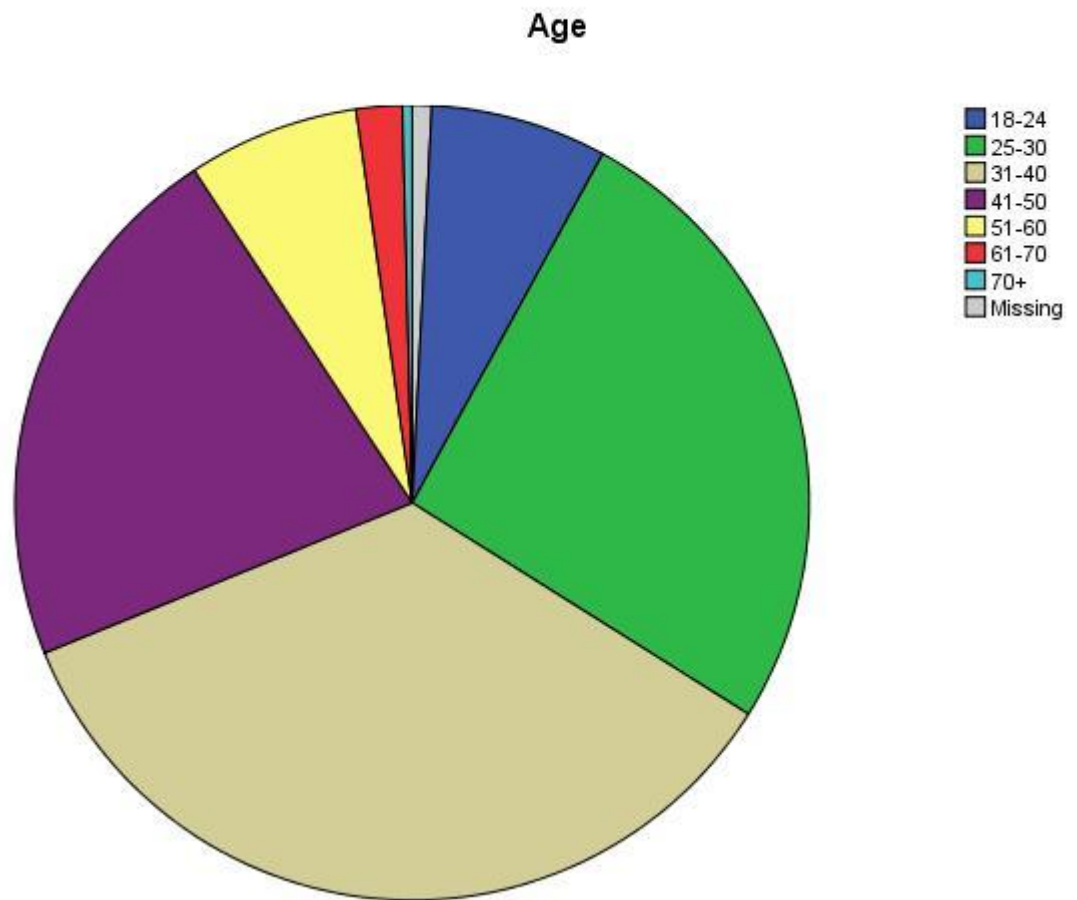


Figure 3. Respondents by Age-Groups (Percentages)

RESPONDENTS BY AGE-GROUPS (PERCENTAGES)	
18-24	7.2
25-30	26.2
31-40	35.2
41-50	22.1
51-60	7.0
61-70	1.9
70+	0.4
Total	100

Table 4. Respondents by Age Groups (Percentages)

2.

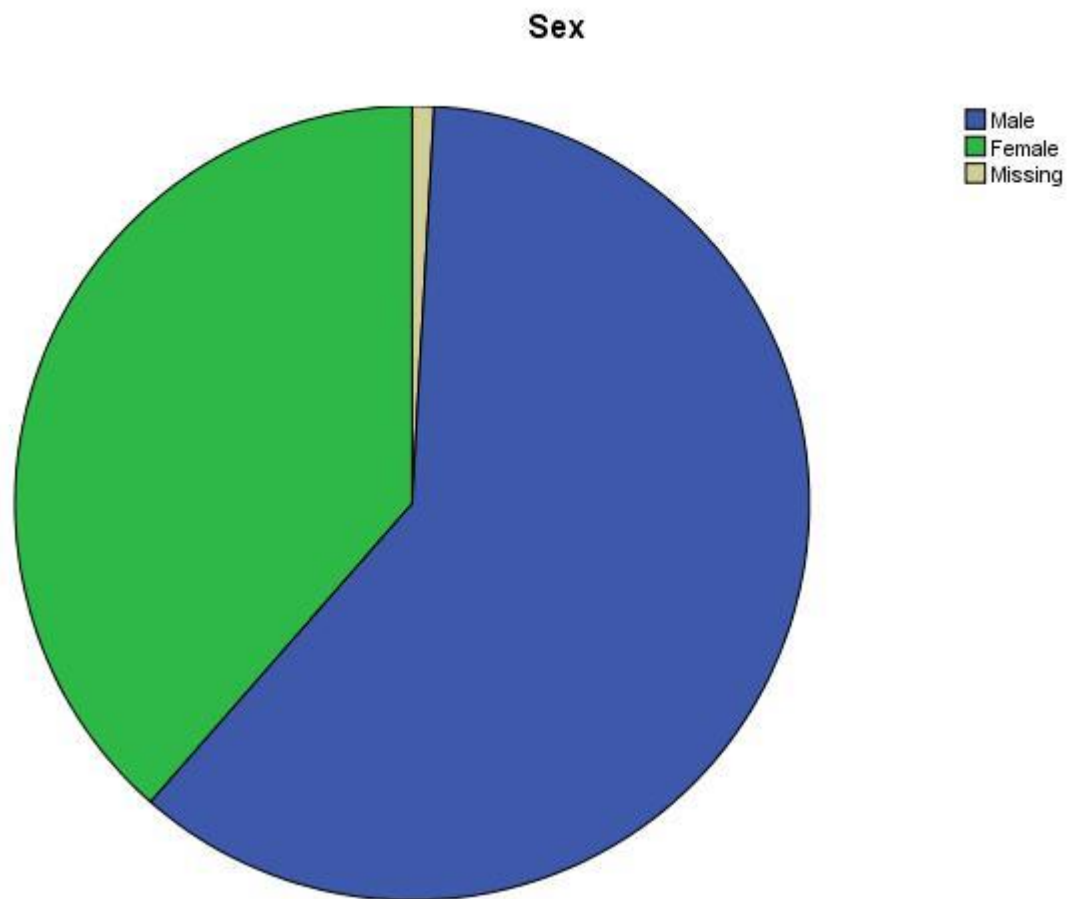


Figure 4. Respondents by Gender (Percentages)

RESPONDENTS BY GENDER (PERCENTAGES)	
Males	61.1
Females	38.9
Total	100

Table 5. Respondents by Gender (Percentages)

3.

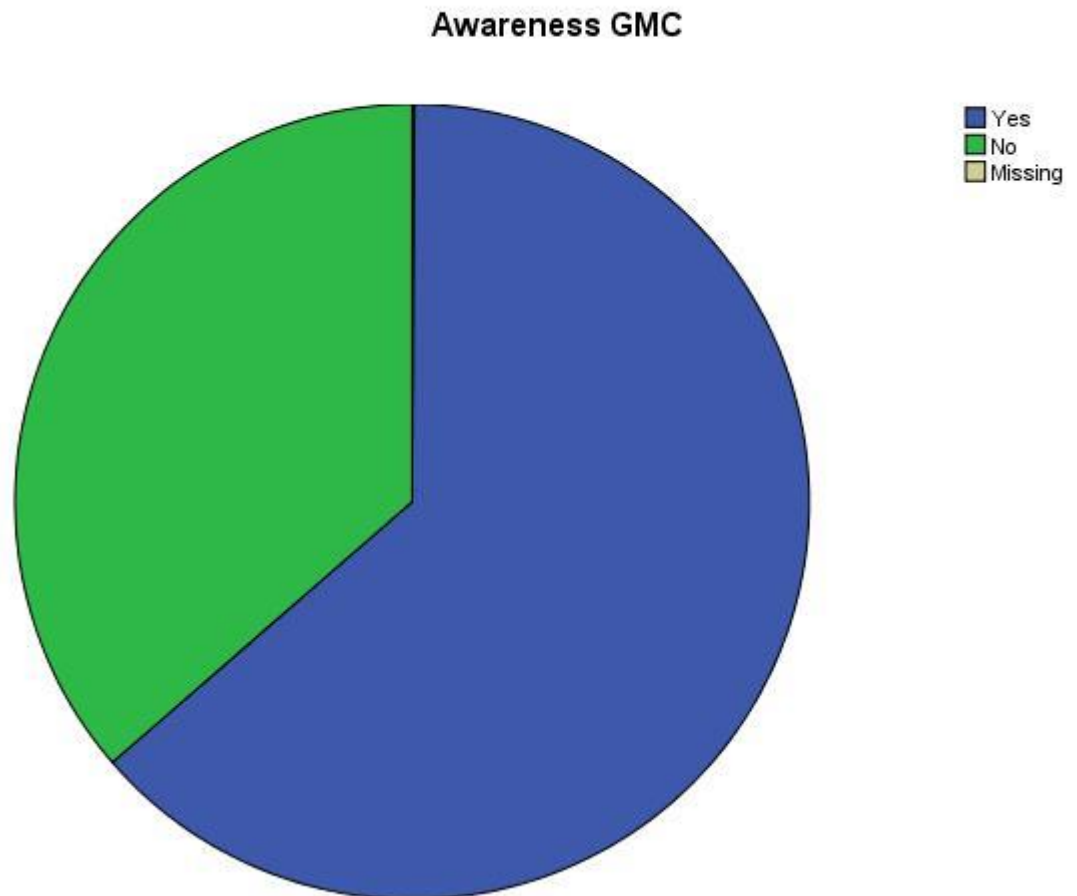


Figure 5. Awareness of GMC Hospitals (Percentages)

AWARENESS OF GMC HOSPITALS (PERCENTAGES)	
Aware	63.6
Not Aware	36.4
Total	100

Table 6. Awareness of GMC Hospitals (Percentages)

4.

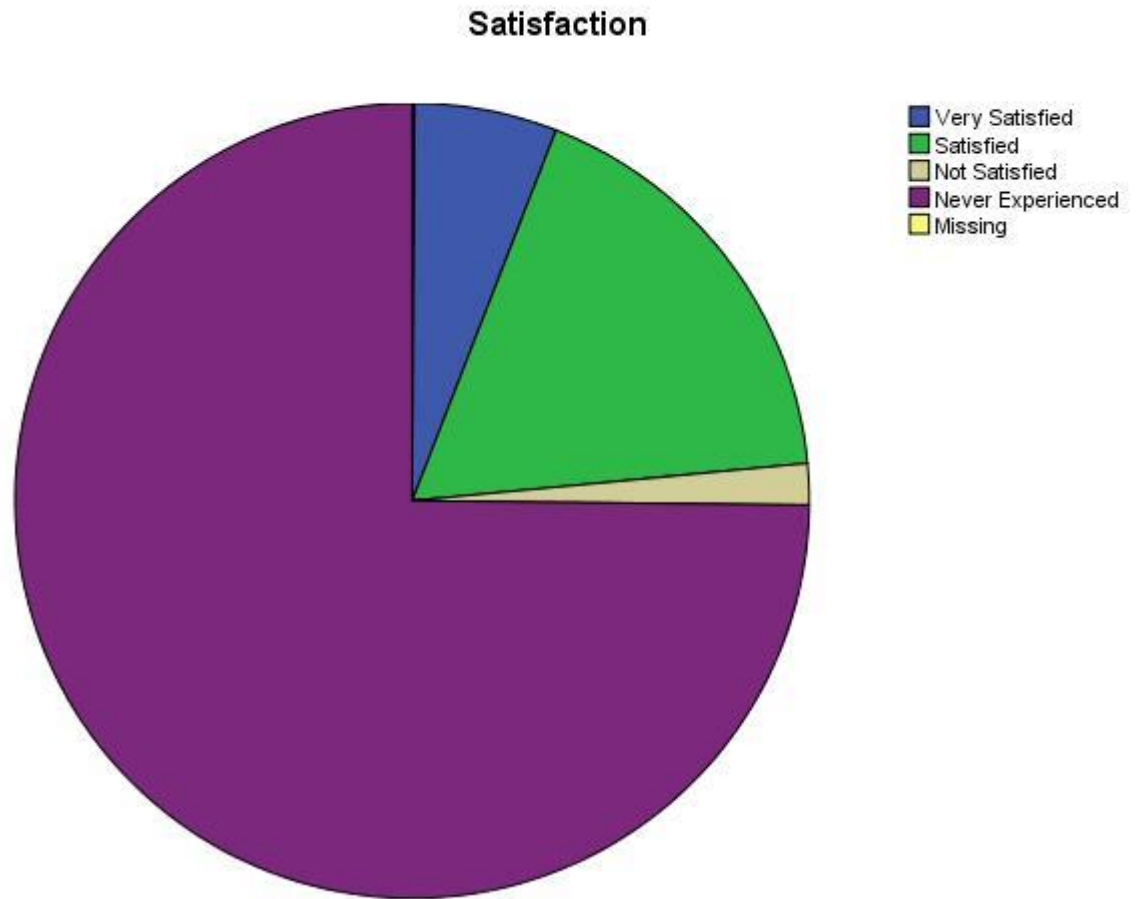


Figure 6. Satisfaction from GMC Hospitals (Percentages)

SATISFACTION FROM GMC HOSPITALS (PERCENTAGES)	
Very Satisfied	5.8
Satisfied	17.6
Not Satisfied	1.7
Never Experienced	74.9
Total	100

Table 7. Satisfaction from GMC Hospitals (Percentages)

5.

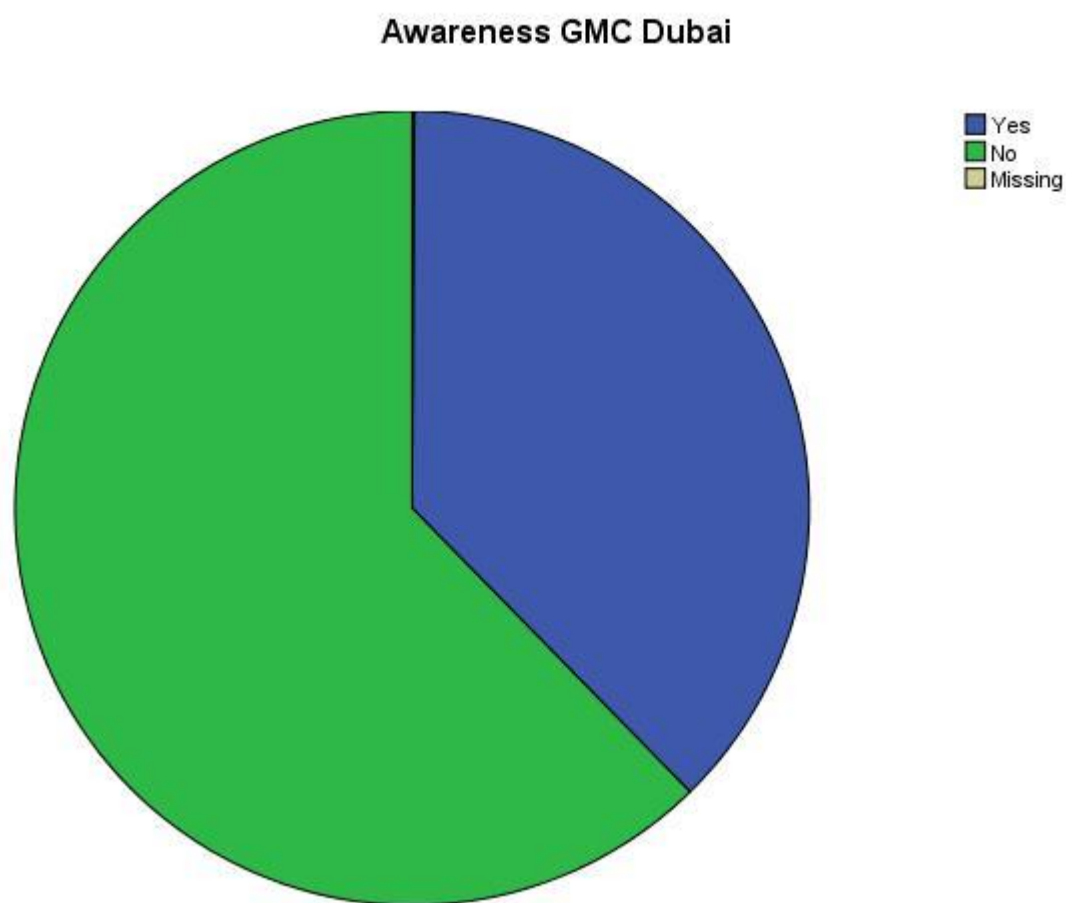


Figure 7. Awareness of GMC Hospital Dubai (Percentages)

AWARENESS REGARDING UPCOMING GMC HOSPITAL IN DUBAI (PERCENTAGES)	
Aware	37.6
Not Aware	62.4
Total	100

Table 8. Awareness of GMC Hospital Dubai (Percentages)

6.

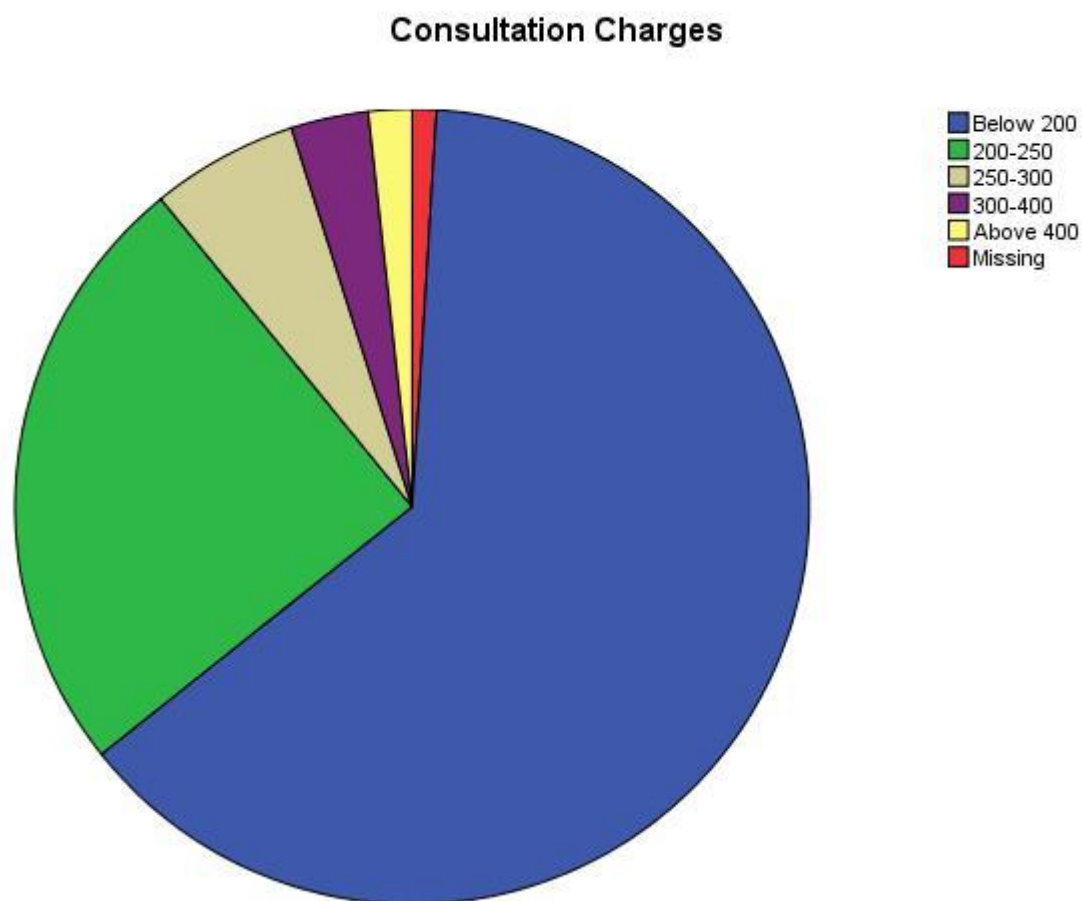


Figure 8. Consultation Charges paid for a Specialist Doctor (AED) (Percentages)

CONSULTATION CHARGES PAID FOR A SPECIALIST DOCTOR (AED) (PERCENTAGES)	
Below 200	64.0
200-250	25.0
250-300	6.0
300-400	3.2
More than 400	1.8
Total	100

Table 9. Consultation Charges paid for a Specialist Doctor (AED) (Percentages)

7.

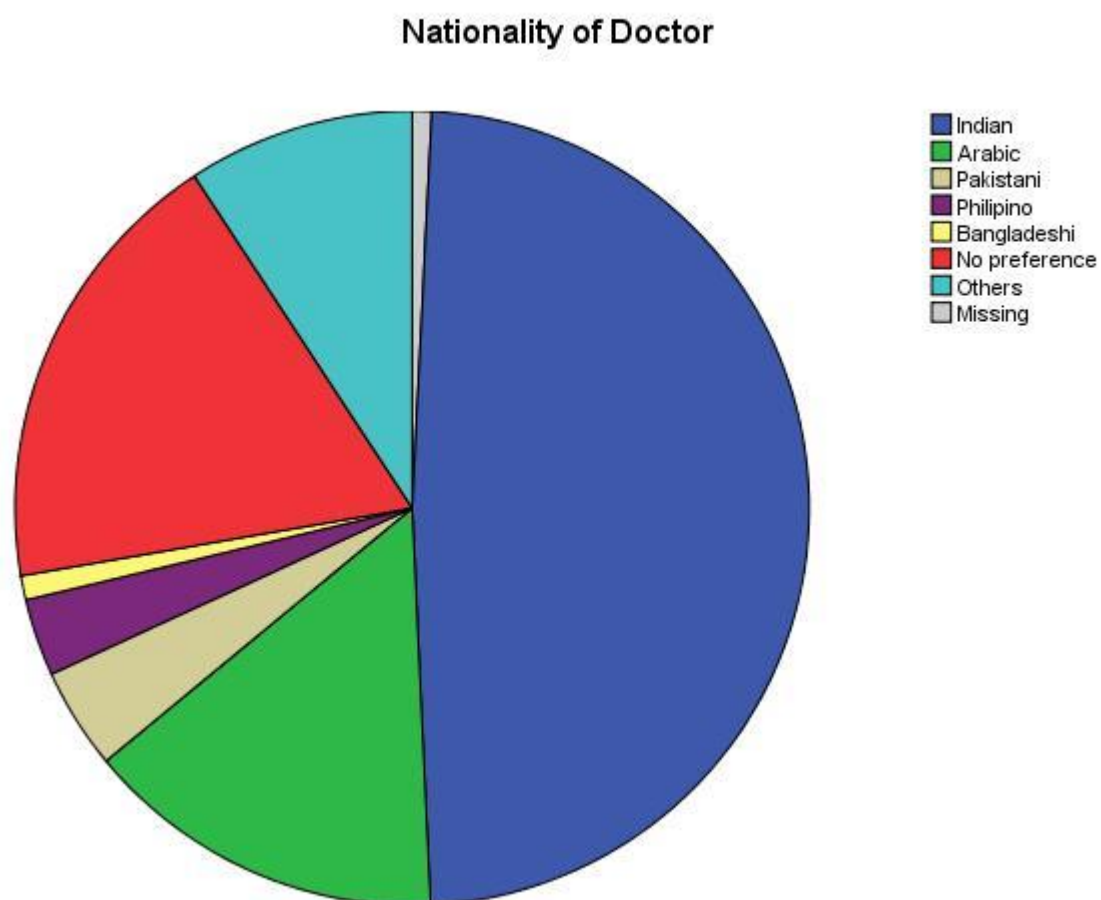


Figure 9. Preferred Nationality of Doctor (Percentages)

PREFERRED NATIONALITY OF DOCTOR (PERCENTAGES)	
Indian	48.9
Arabic	14.9
Pakistani	4.2
Philipino	3.2
Bangladeshi	1.0
No Preference	18.6
Others	9.3
Total	100

Table 10. Preferred Nationality of Doctor (Percentages)

8.

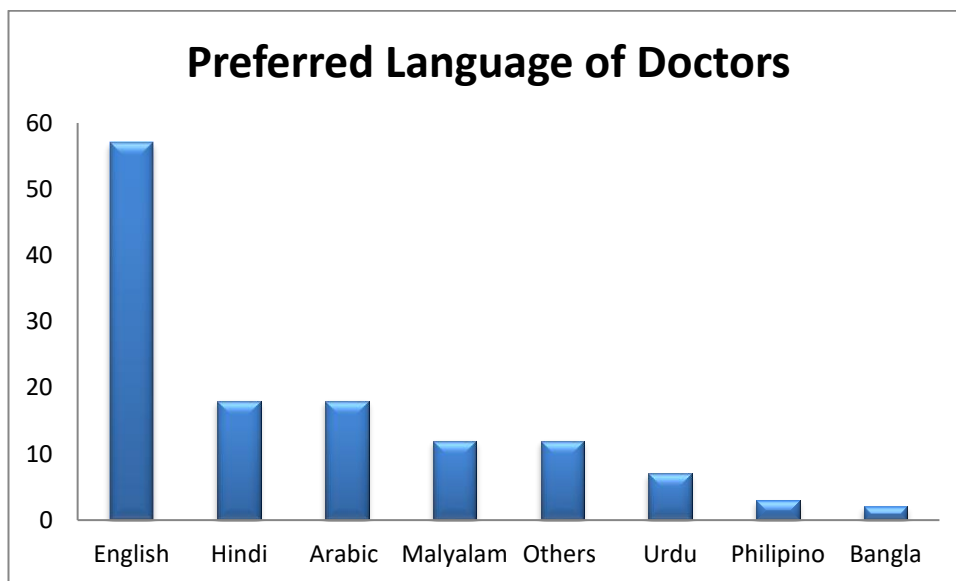


Figure 10. Preferred Language of Doctors (Percentages)

PREFERRED LANGUAGE OF DOCTORS (PERCENTAGES)	
English	57
Hindi	18
Arabic	18
Malyalam	12
Others	12
Urdu	7
Philipino	3
Bangla	2

Figures do not add up to 100 because multiple responses were sought from each respondent

Table 11. Preferred Language of Doctors (Percentages)

9. Information Source

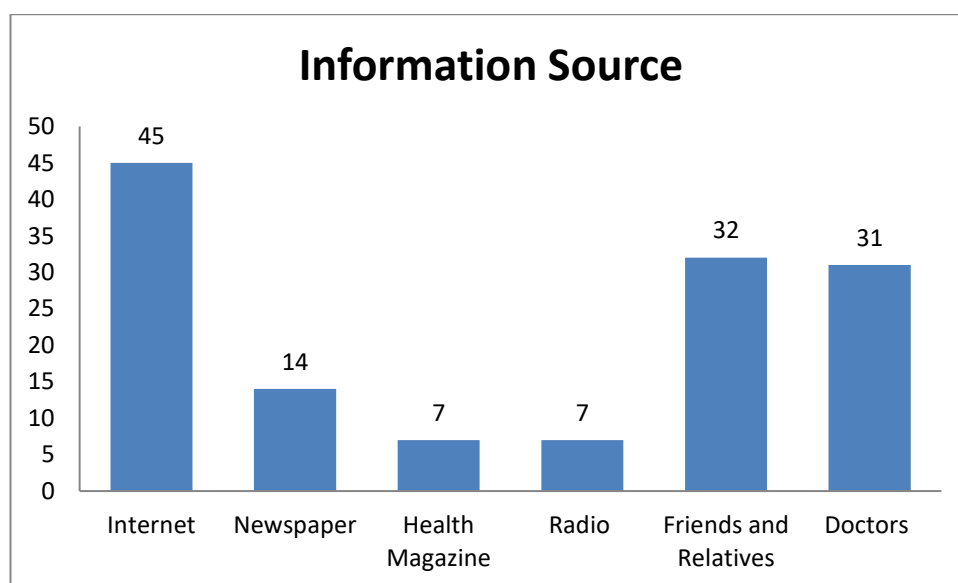


Figure 11. Source of Information Regarding Medical Treatment

SOURCE OF INFORMATION REGARDING MEDICAL TREATMENT (PERCENTAGES)	
Information Source	Percentage
Internet	45
Newspaper	14
Health Magazine	7
Radio	7
Friends and Relatives	32
Doctors	31

Figures do not add up to 100 because multiple responses were sought from each respondent

Table 12. Source of Information Regarding Medical Treatment

10. Preferred Emergency Option

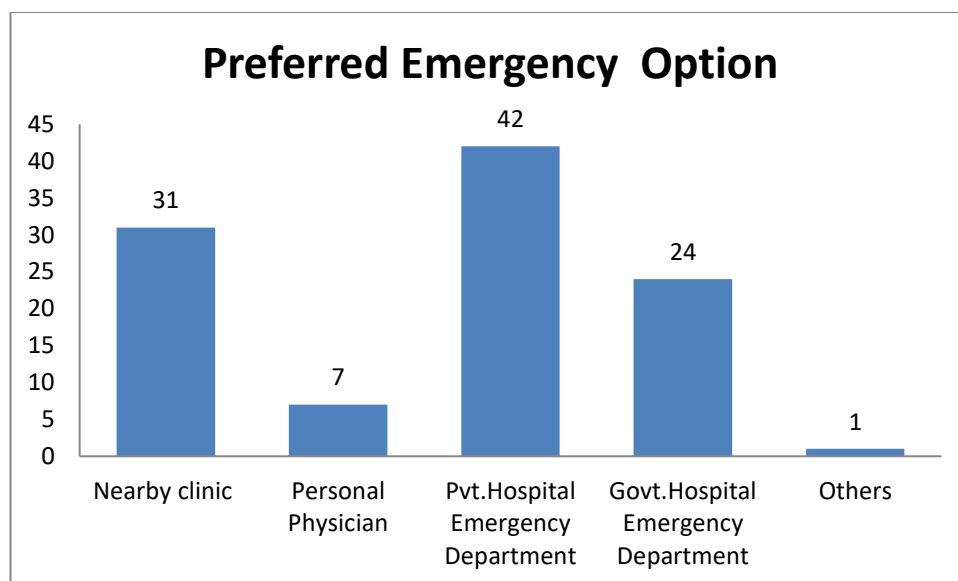


Figure 12. Preferred Medical Facility in Case of Emergency (Percentages)

PREFERRED MEDICAL FACILITY IN CASE OF EMERGENCY (PERCENTAGES)	
Nearby clinic	31
Personal Physician	7
Private Hospital Emergency Department	42
Government Hospital Emergency Department	24
Others	1

Figures do not add up to 100 because multiple responses were sought from each respondent

Table 13. Preferred Medical Facility in Case of Emergency (Percentages)

AGE-GROUP-WISE DISTRIBUTION

11.

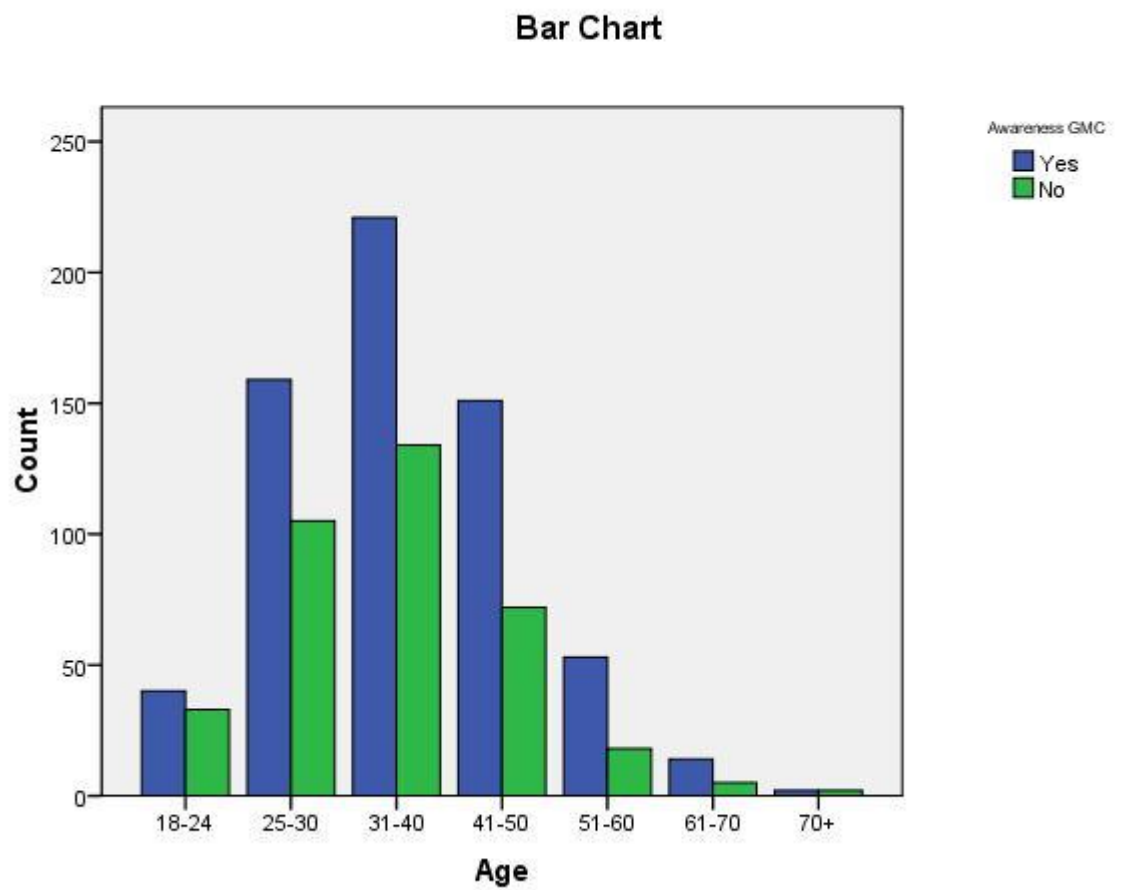


Figure 13.AWARENESS REGARDING GMC HOSPITALS (FREQUENCIES)

12.

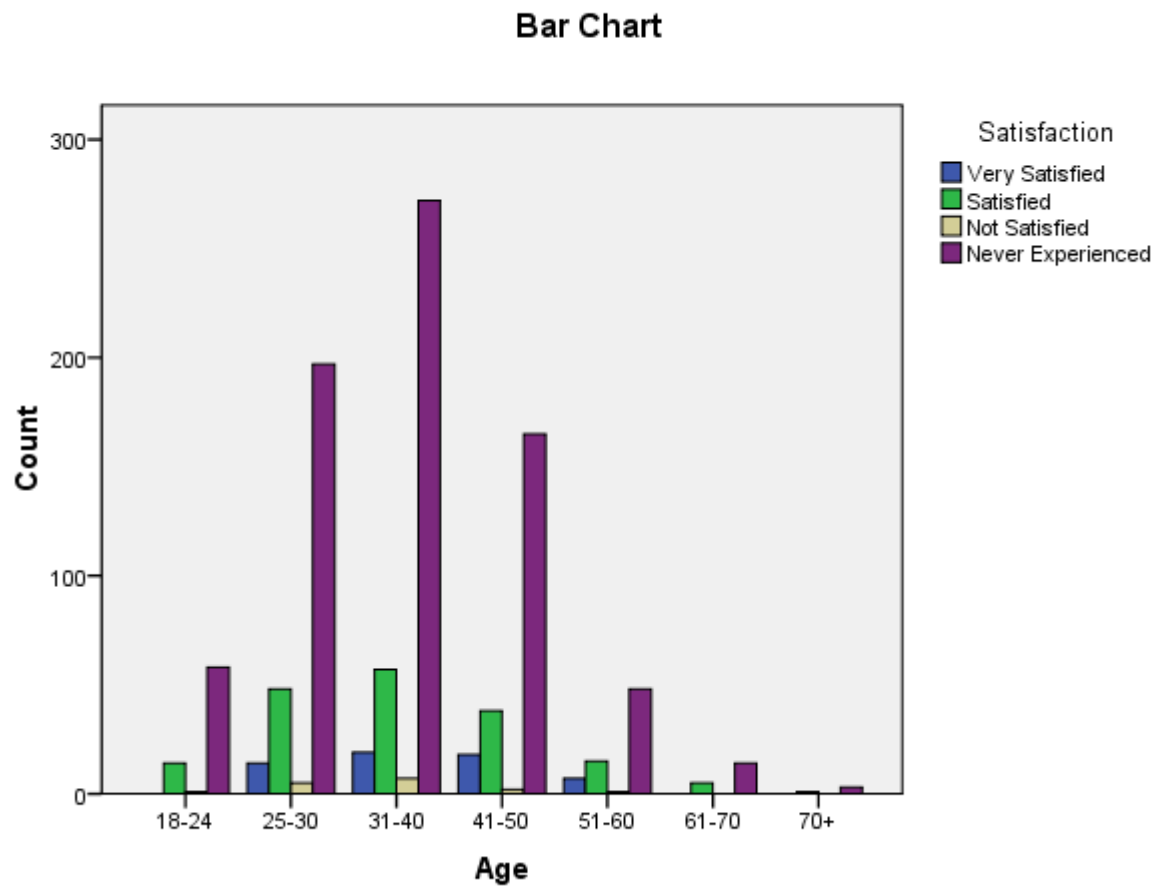


Figure 14.SATISFACTION FROM GMC HOSPITALS (FREQUENCIES)

13.

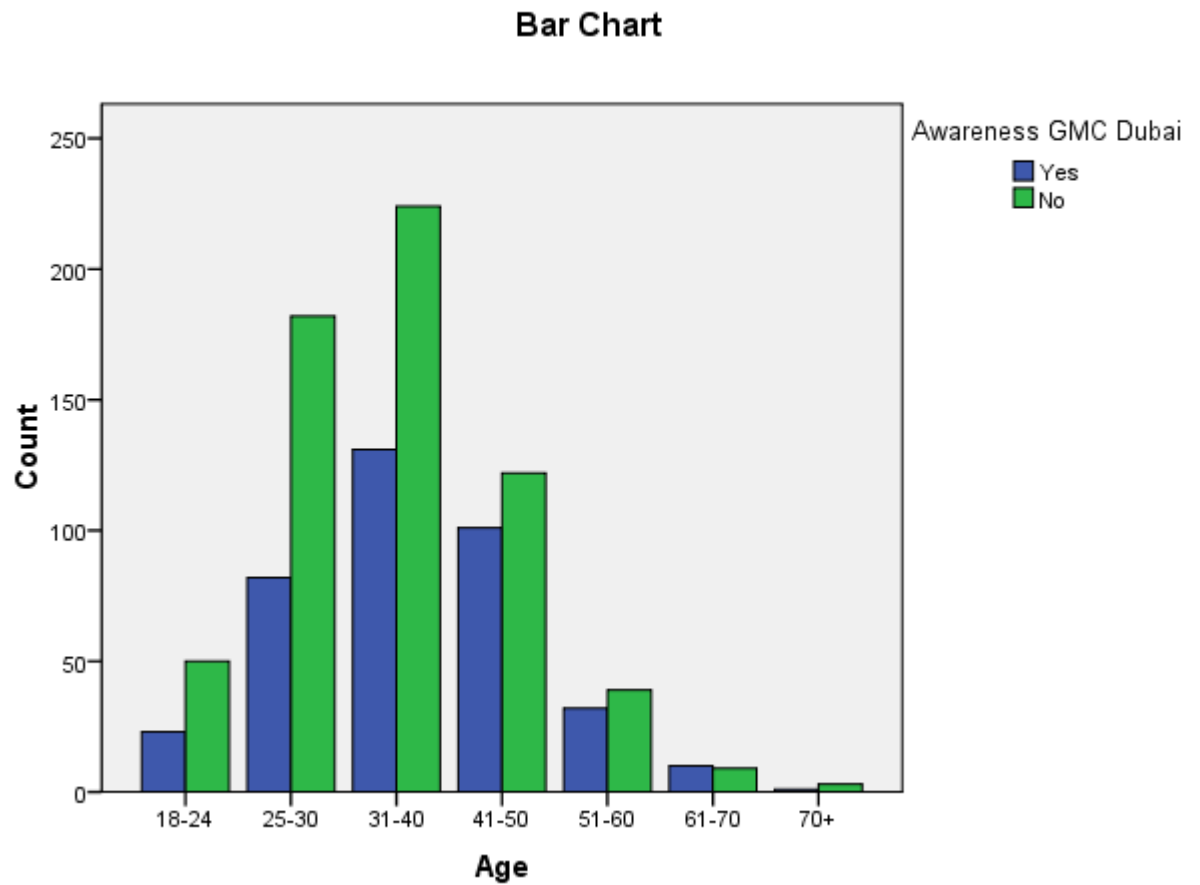
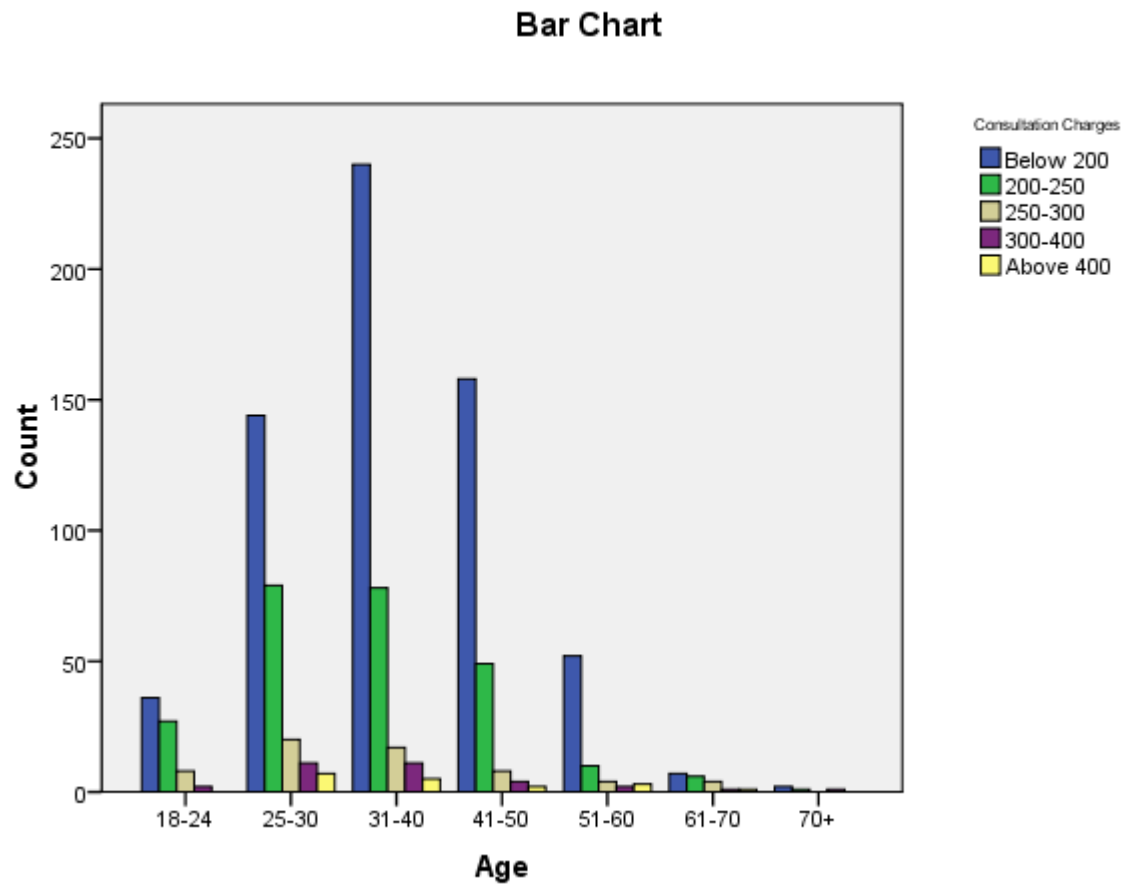


Figure15. AWARENESS REGARDING UPCOMING GMC HOSPITAL IN DUBAI (FREQUENCIES)

14.



**Figure 16. CONSULTATION CHARGES PAID FOR A SPECIALIST DOCTOR
(FREQUENCIES)**

15.

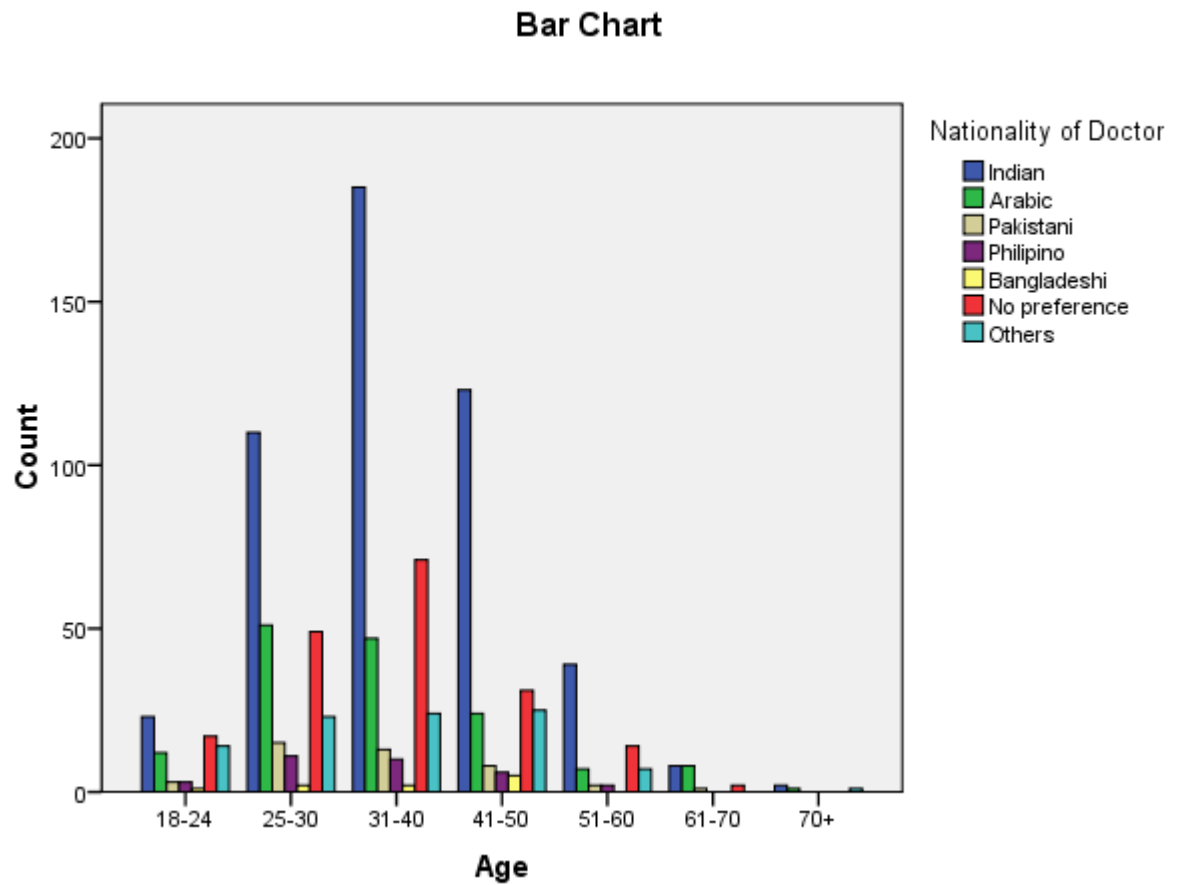


Figure 17.PREFERRED NATIONALITY OF DOCTOR (FREQUENCIES)

GENDER-WISE DIFFERENCE

16.

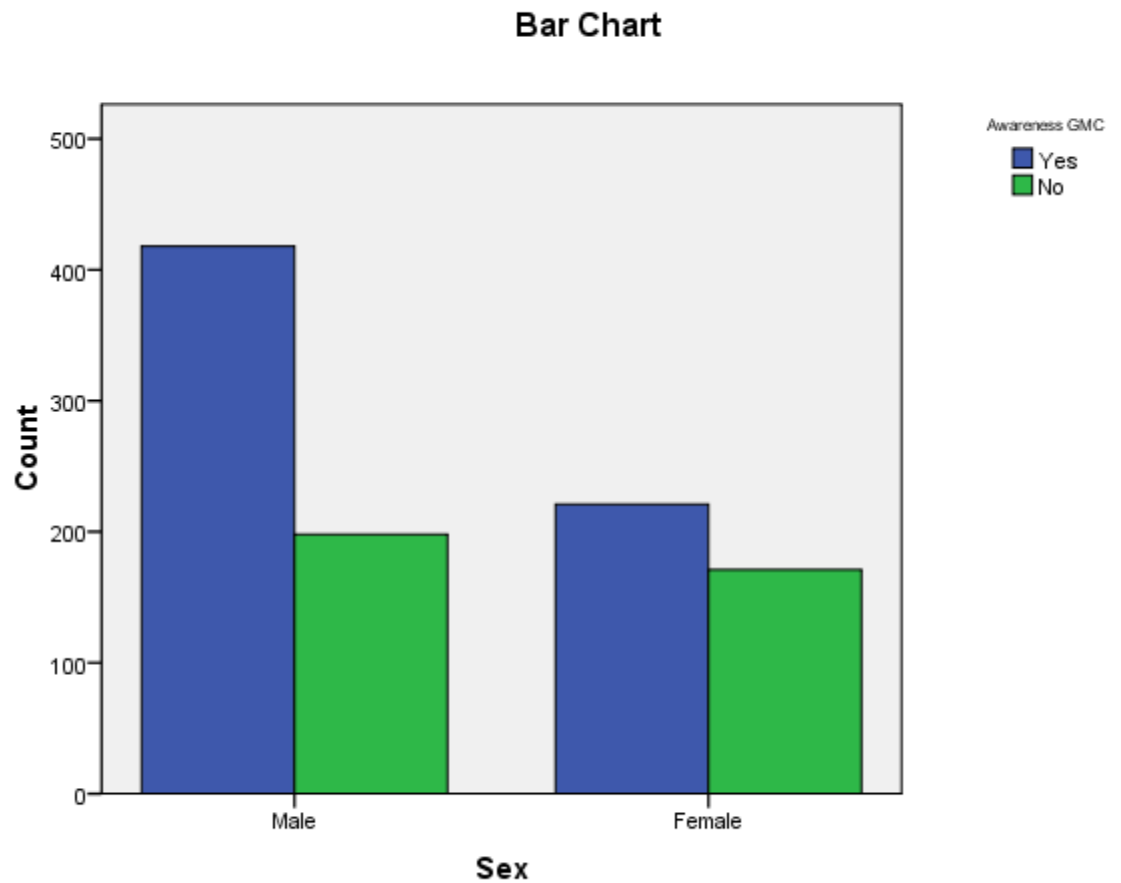


Figure 18.AWARENESS ABOUT GMC HOSPITALS (FREQUENCIES)

17.

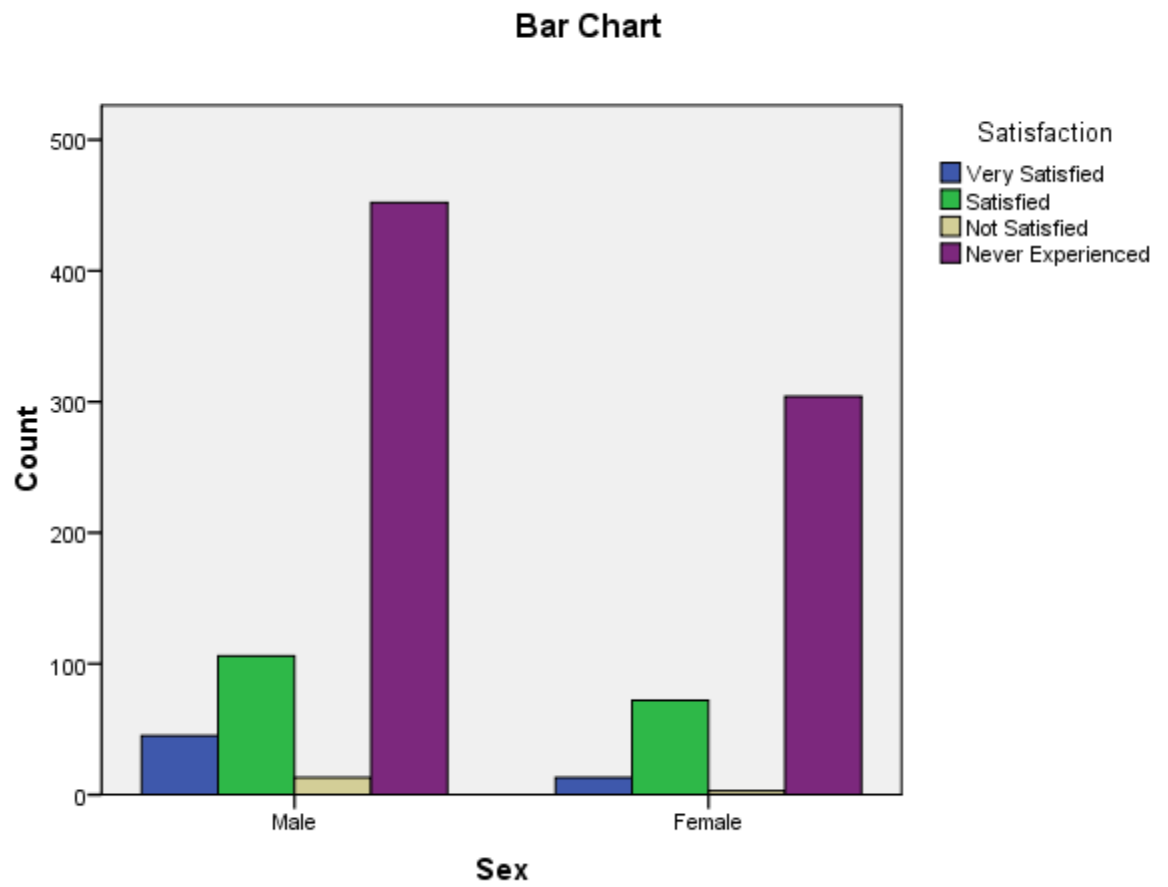


Figure 19.SATISFACTION FROM GMC HOSPITALS (FREQUENCIES)

18.

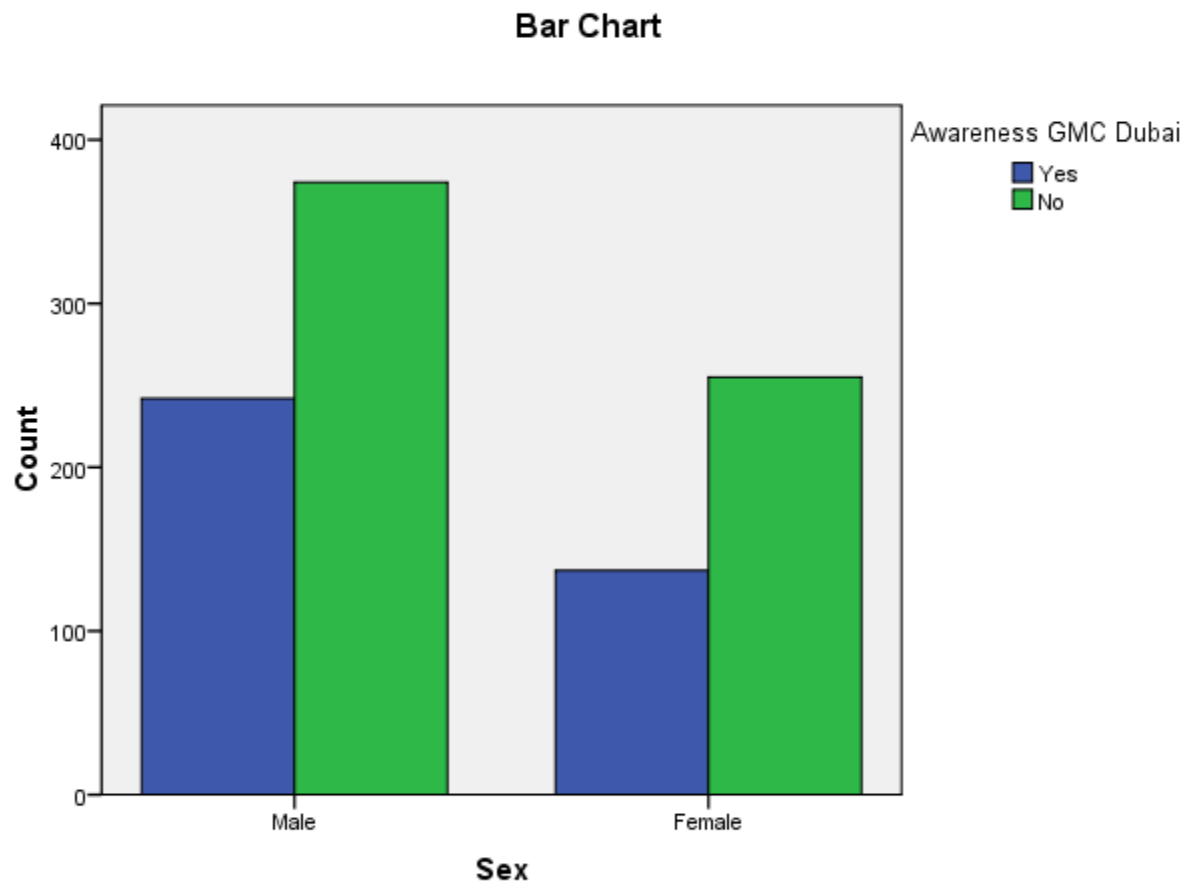
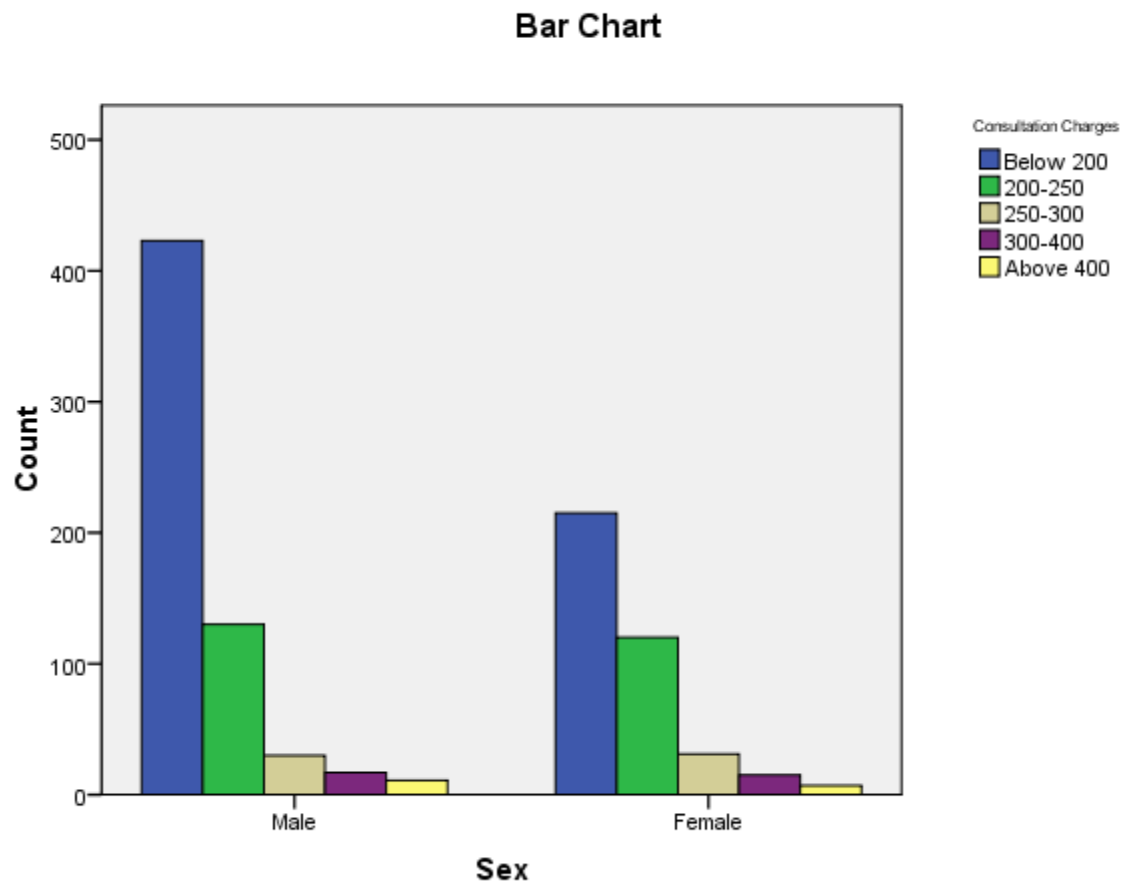


Figure 20.SATISFACTION FROM GMC DUBAI (FREQUENCIES)

19.



**Figure 21. CONSULTATION CHARGES PAID FOR A SPECIALIST DOCTOR
(FREQUENCIES)**

20.

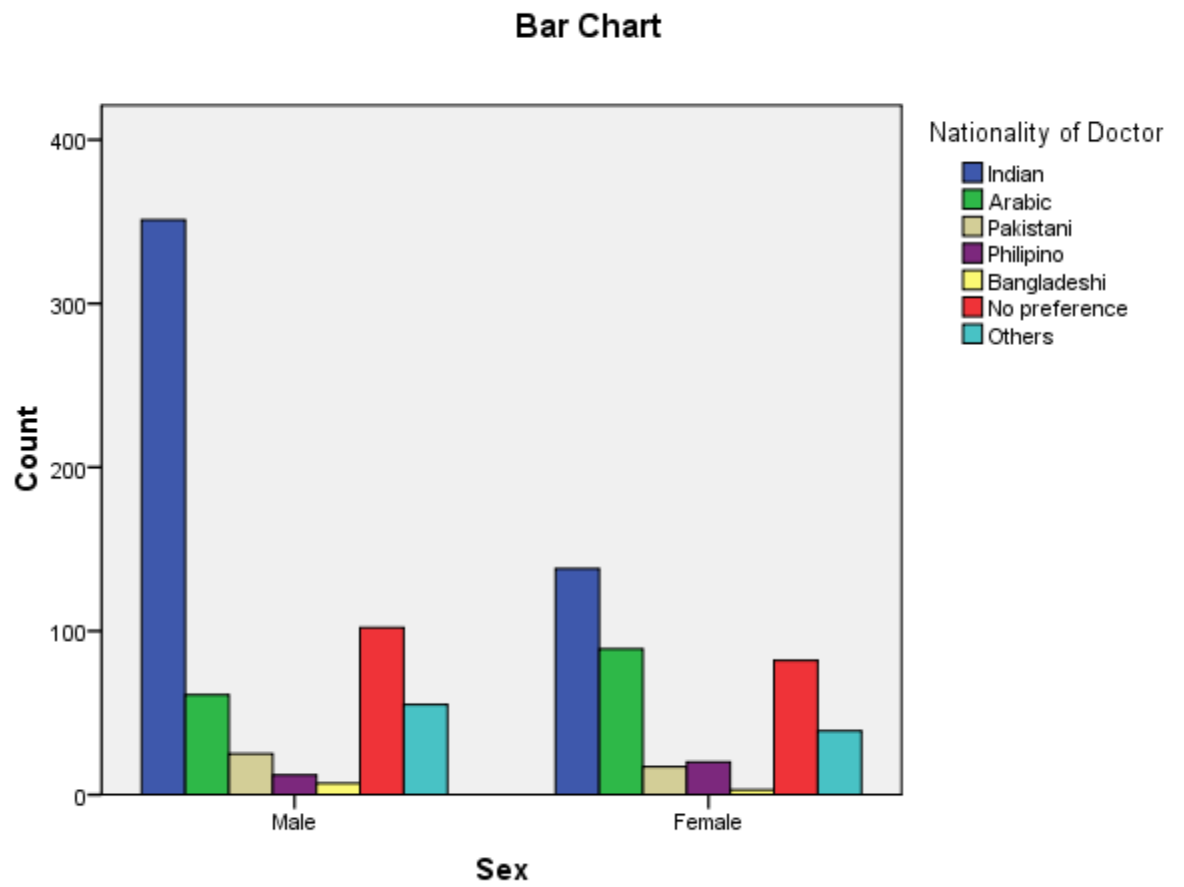


Figure 22. PREFFERED NATIONALITY OF DOCTOR (FREQUENCIES)

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.

Second thing that comes out of our analysis is that 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 our 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.

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, less than 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.

Close to 60 percent people indicated 'English Language' as preferred language of communication with their doctor. One fifth of the people are comfortable with 'Arabic' as Language of Doctor. Same number of 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 12 percent respondents have indicated their preferred language of Doctor as 'Malayali' or 'Malabari'.

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 one third of respondents directly contact doctors to seek their advice regarding medical services utilization emphasises the importance of referral marketing for the upcoming hospital. Also, one-third 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 about one third preferred their nearby clinic. This opens the opportunity of marketing of 24-7 emergency services of our hospital, with target population of Al Quasais area of Dubai, a locality where upcoming GMC Hospital in Dubai will be located.

Age-wise distribution and Gender-wise distribution of responses has been shown in figures 11-15 and 16-20 respectively. It is clear that the responses of combined sample population and those when the sample is analysed with age and gender differentiation follows the same pattern. So to say, the inferences drawn on combined sample above are applicable to all age groups and both genders.

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 Hospital in 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 to 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.

Today, ATL is used for branding effect, to generate mind share while BTL is used to generate loyalty and repeat sales. ATL is tailored for mass audience while BTL promotions are targeted at individual level according to their needs and preferences. ATL promotions are difficult to measure while BTL are measurable in terms of sales (ROI). Since BTL focus is targeted and customer centric, it is efficient and cost effective, apt for start ups.

Social networking sites such as face book, twitter, my space, you tube help generate leads and enable companies to develop eCRM (Customer Relations Management) and use data in a varieties of ways. Though, social media is an integral part of BTL activity today, but it beats even television, audio, magazines in creating brand value in terms of number and is a way more rewarding.

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.

The advent of social media has blurred the lines segregating the marketing techniques .These days companies use an integrated approach involving both ATL and BTL and it is called TTL approach. This approach allows brands to engage with their customers at multiple points and thus generate a solid perception regarding the company and the product, the main aim of marketing.

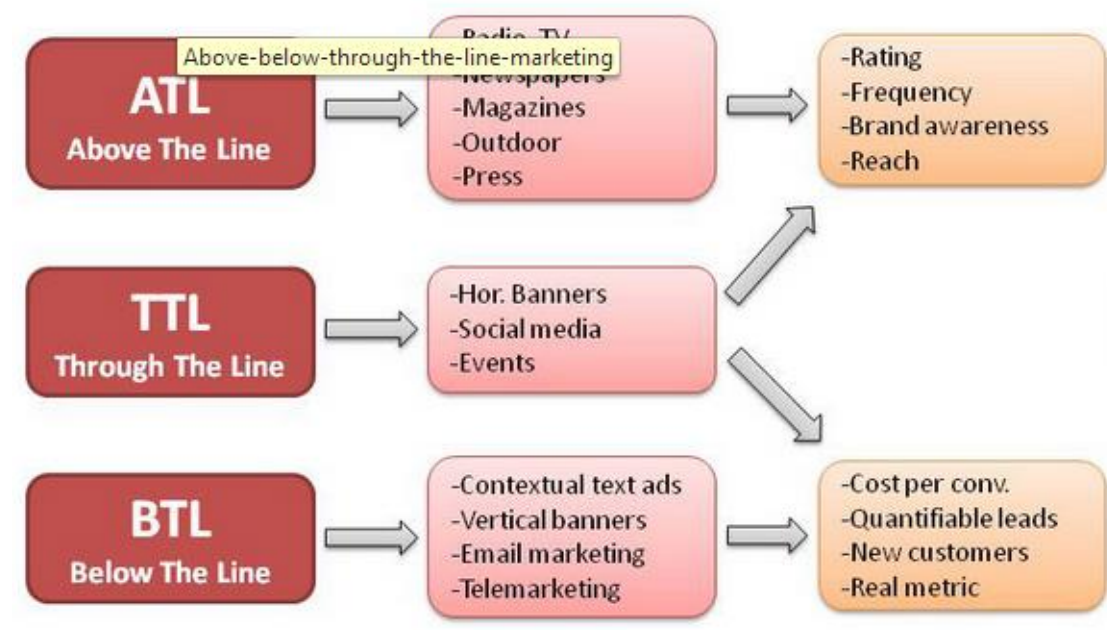


Figure 23. ATL BTL and TTL Marketing strategies for GMC Hospital Dubai

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 24. Blends & Brews Tissue Paper with GMC Logo

4.The simultaneouspursuit of differentiationand 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.

Sensing opportunities for growth, a number of major international health-care players have entered the market in the past few years, raising the standard of care offered in the country. The UAE government has also adopted a strategy of encouraging top global and regional health-care service providers to establish facilities in the country. These developments

have not only helped UAE residents, who have traditionally travelled abroad for medical care to avail of treatments in the country, but also created a hub for regional medical tourists.

David Hadley, CEO of Mediclinic Middle East, which manages Welcare, City Hospital and a number of clinics, tells GN Focus, “A rapid increase in the population has resulted proportionately in an increase in demand for health-care facilities. This has attracted many competitors into the market, which is excellent for patients as the extra competition will certainly help to raise the quality of health-care services.”

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 diagram
(Diagram Number)

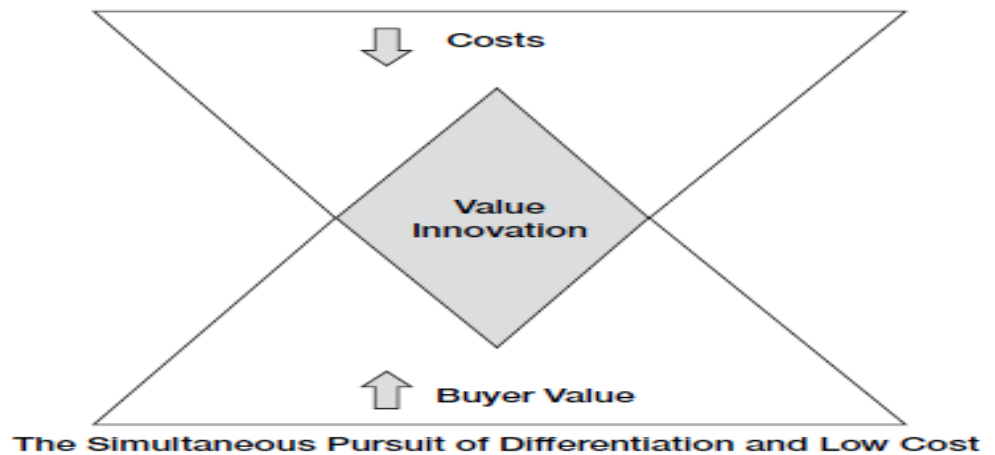


Figure 25. The simultaneous pursuit of Differentiation and low Cost

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:

“It is important to note that health-care spend is linked to the per capita GDP of a country,” says Hadley. “One of the biggest cost drivers in the hospital industry is salaries, and obviously salaries need to be reflective of the environment we live in.. 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 healthcare 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.

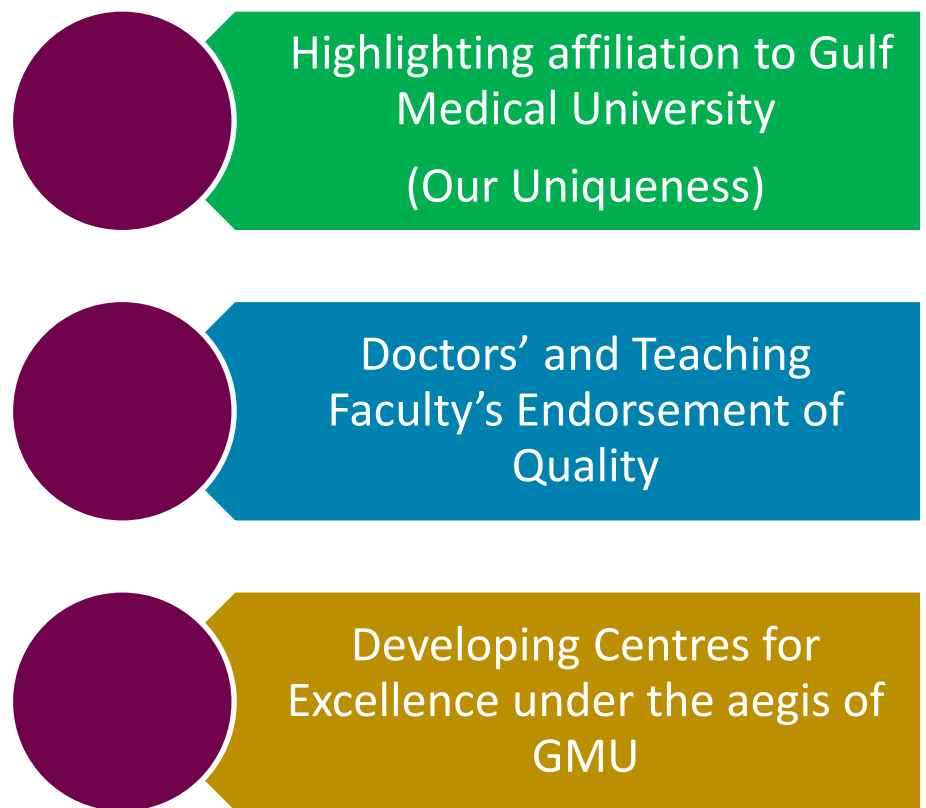


Figure 26. Ways to emphasise Academics-Quality Association

8. Differential Marketing:

Different Departments of Hospital have different Unique Selling Propositions. While designing the brochure for hospital and other promotional pamphlets, each departments' 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 27. Differential Marketing of Hospital Services

9. 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.



[http://gulfnews.com/gn-focus/health-care/health-care-picks-up-in-the-uae-](http://gulfnews.com/gn-focus/health-care/health-care-picks-up-in-the-uae-1.1136633)

1.1136633

Figure 28. Dentist of Star

4. Instrumentation



مستشفى جي إم سي
GMC HOSPITAL
HEALTHCARE - EDUCATION - RESEARCH



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"

تومباي
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)

6. Bibliography

- 1, 2 ,3 and 4-Thumbay Group Brochure, GMC Ajman Brochure, Records of Marketing Department assessed on 1st of April,2014.
- 5-Mckinsey Report on GCC Healthcare markets(<http://middleeasthospital.com/GCC%20HEALTHCARE%20CHALLENGE.pdf>) assessed on 5th of April,2014
- 6 and 7-Health Systems Profile UAE –Regional health systems observatory –WHO- 2006 and DHA Annual report 2012(<http://www.dha.gov.ae/EN/SectorsDirectorates/Directorates/HealthRegulation/Reports/Pages/HRDAnnualReport.aspx>) assessed on 12th April,2014
- 9-Building Brand Awareness (www.raygain.com) assessed on 11th of April, 2014.
- 10, 11, 12 Building and quantifying brand (<http://www.businessdictionary.com/definition/brand-awareness.html>) and Keller, Kevin (1993). "Conceptualizing, measuring, and managing customer-based brand equity". The Journal of Marketing 1 (22) and Percy, Larry; Rossiter, John (1992). "A model of brand awareness and brand attitude advertising strategies". Psychology & Marketing 9 (4): 263–274 assessed on 13th of April, 2014.
- 13. Alisha (2014) “What is ATL, BTL and TTL Marketing”. Startup Freak (<http://www.startupfreak.com/what-is-atl-btl-and-ttl-marketing>) assessed on 10th May, 2014.