

Abstract

The health care system is currently characterized by increasing competition. Care institutions have to characterize themselves within the market if they want to keep being in business. Benchmarking is an instrument which is being used more and more by care institutions in order to strengthen their strategic position in the market. Benchmarking is a management instrument with which quality and suitability improvements inside an organization can be realized. According to relevant literature, it appears that the implementation phase of a benchmarking process at care institutions does not proceed sufficient enough. Therefore, in this thesis the following problem will be addressed:

“In which way should benchmarking of hospitals be executed, such that the implementation phase of benchmarking can be completed?”

To find an answer to this central question, it is necessary to obtain insight in possible problems and success factors of benchmarking. First of all, a literature review is performed to actually find out these problems and success factors. Furthermore, experiences with benchmarking and expectations of it from professionals in the health care industry are examined by means of a qualitative research.

According to the theory, a benchmarking process consists of five phases, namely: preparation, planning, analysis, construction of a plan and action. For each of these five phases, there can occur possible problems which oppose the implementation of the suggested changes. On the other hand, for each phase there are also factors which could make benchmarking a great success. Whether benchmarking of hospitals will become a success depends on which kind of problems the hospitals encounter during the benchmarking process and which success factors they apply. At the same time, possible improvements of the benchmarking instrument are mentioned in the literature. However, these improvements still have to be developed in more detail, after which the surplus value of them should be investigated.

Analysis confirms very first the fact that hospitals do not always achieve the implementation phase of a benchmarking process. For instance, the Reiner de Graaf group, the Meander medical centre as well as the Maxima medical centre did not pass through this phase. On the other hand, the St. Elisabeth hospital and the Lievensberg hospital carried out the benchmarking process completely and experienced it as something positive. From the analysis, it turns out that the possible problems which are mentioned in literature, occurred more frequently during the benchmarking carried out by the Reinier de Graaf group, the Meander medical centre and the Maxima medical centre compared to the benchmarking

carried out by the other hospitals. The first mentioned also applied less factors which determine the success of a benchmarking compared to the St. Elisabeth hospital and the Lievensberg hospital.

The conclusion of this thesis describes how the different phases of a benchmarking process should be executed for a benchmarking to be carried out successful. This description is based on data obtained from literature and analyzing the results of the qualitative research. Also, several suggestions, proposed by the health care professionals, are mentioned in order to improve the benchmarking instrument in practice.