Motivation and stimulation system of medical staff’s work

Sistema de motivación y estimulación del trabajo del personal médico

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ABSTRACT:
The work of medical staff around the world is associated with a high level of creativity, an individual approach, a large and varied amount of information, a high degree of responsibility because the patient's life depends on the doctors. In this regard, the problem of motivating the professional activity of medical workers is extremely urgent. Without motivation of work, it is not possible to develop normally for any organization, which explains the need to investigate the problem of motivating and motivating staff. Using the most modern and advanced methods of stimulation, it is possible to achieve a significant improvement in the quality of work. We conducted a study of the system of motivation and stimulation of medical workers, based on foreign and domestic experience, analyzed the current trends in the formation of foreign labor motivation systems. Based on the sociological survey of respondents of medical organizations, a psychological portrait of a modern Kazakhstani physician is described, which is characterized by positive and negative elements, and an improved management model is proposed. Based on the analysis and study of foreign experience, a comprehensive study of the theoretical foundations of labor motivation, as well as the results of a sociological survey of employees of medical

RESUMEN:
El trabajo del personal médico en todo el mundo se asocia con un alto nivel de creatividad, un enfoque individual, una cantidad grande y variada de información, un alto grado de responsabilidad porque la vida del paciente depende de los médicos. En este sentido, el problema de motivar la actividad profesional de los trabajadores médicos es extremadamente urgente. Sin la motivación del trabajo, no es posible desarrollarse normalmente para ninguna organización, lo que explica la necesidad de investigar el problema de motivar y motivar al personal. Usando los métodos de estimulación más modernos y avanzados, es posible lograr una mejora significativa en la calidad del trabajo. Llevamos a cabo un estudio del sistema de motivación y estimulación de los trabajadores médicos, basado en la experiencia extranjera y doméstica, analizamos las tendencias actuales en la formación de sistemas de motivación laboral extranjera. Con base en la encuesta sociológica de encuestados de organizaciones médicas, se describe un retrato psicológico de un médico kazajo moderno, que se caracteriza por elementos positivos y negativos, y se propone un modelo de gestión mejorado. Con base en el análisis y estudio de la experiencia extranjera, un estudio integral de los fundamentos teóricos de la motivación
1. Introduction

At present, the problem of increasing the labor motivation of health-care workers is an important function of health management. The issue of management of labor motivation of medical workers as a factor of economic development takes on special urgency and requires not only deep theoretical comprehension, but also serious development of a practical plan. Stimulation of labor is one of the means by which a motivational mechanism is realized (Egorshin, 2013; Kibanov et al., 2010; Genkin, 2011).

Medical activities are marked by specificity, and required special professional qualities from workers. At the same time, the changes that have taken place in recent years in society have led to a drop in the prestige of the work of health workers. Due to low material incentives for medical workers, the semantic motivational factor of the profession of a doctor, a nurse is being eroded and it impacts on the professional level, quality and effectiveness of their work (Baryshnikova, 2014).

The motivation and working conditions of health workers are important characteristics of the health system and underlying factors that determine its effectiveness. In modern conditions, the remuneration of a doctor is inadequate to responsibility, tension and other specific features of the profession of a medical worker. At the same time, remuneration in health care should stimulate staff to improve the quality of medical care, rational use of resources, take into account the complexity and intensity of their labor costs.

Studies of different theories, views, and points of view on the problem have highlighted the following principal positions. Firstly, to allocate the human resource from all organizational resources (financial, material, technological) because it hides the greatest reserves for increasing the efficiency of the functioning of the organization, institution, etc. Secondly, to consider the stimulation and development of personnel as the most important integral process within the framework of the management functions as the consistent development of the personnel incentive system allows achieving certain results and successes in the activity. Thirdly, the stimulation and development serve the purposes of the formation of professionalism and competence. Their technology are directly related to motivation, efficiency, career of a specialist, a person, where the most powerful stimulating tool for the employee is the interest in the work.

Insufficient level of wages contributes to low motivation of health workers to improve the quality of medical care and professional growth. Therefore, the problem of labor motivation in health care is extremely acute now. But it cannot solve without a serious socio-hygienic and socio-psychological study of issues related to the construction, development and improvement of the motivational labor system in medical institutions. The issues of methodological, normative-legal and instructive-methodological support for the development of the motivational process and the formation of motivation systems for workers in health organizations prompted to study this problem.

The revealed regularities in this area make it possible to conclude that the main direction of improving modern labor motivation systems is the regulation of their remuneration. At the same time, wages are the most important part of the system of payment and labor incentives, as well as one of the tools to influence the worker's efficiency in medical organizations (Kalabina, 2016; Shchepin and Medic, 2018).
Remuneration in health care should stimulate staff to improve the quality of medical care, rational use of resources take into account the complexity and intensity of their labor costs. In developed countries, the share of wages in the cost of medical services is at least 60%, and the real income of doctors is more than $5000 dollars a month. In order to achieve the health indicators of the developed countries of the world, the growth of the average life expectancy, the reduction of mortality, the reduction of morbidity, especially from socially significant diseases and other indicators it is necessary to raise real salaries for physicians and bring it in line with the salaries of doctors of the developed countries of the world. Thus, in order to achieve competitiveness in terms of the health indicators of the people doctors should be adequately paid for.

Wages in the health care of the Republic of Kazakhstan steadily lag behind other sectors of the national economy. According to International Information Agency (IFA) Kazinform, wages in the health and social services sector of the Republic of Kazakhstan grew by less than 1%, and their purchasing power fell by 6%. In Organization for Economic Co-operation and Development (OECD) countries, the average salary of health workers on the basis of purchasing power parity is 3 to 1 to the average wage in the economy. From the speech of the Minister of Health of Kazakhstan it is showed that the ratio in the country is 1.1 to 1 today (Ranking.kz, 2018).

In all the program documents of the development of the Republic of Kazakhstan, the health and well-being of the nation take a special place, in connection with it, the health care system requires its modernization (Ranking.kz). Therefore, a real emphasis on the economic and moral motivation of doctors to achieve a decent level of health of the nation will require a decent, real evaluation and remuneration of medical personnel.

Within the framework of studying the system of motivation and stimulating professional activity, the peculiarities of the system of material incentives for labor in two medical organizations were studied in Astana: Maternity and Childhood Center JSC and the state communal enterprise on the right of economic management of City Polyclinic №5. The purpose of this study is to development of theoretical provisions, development of methodological and practical recommendations for improving the system of motivation and stimulation of labor medicine Kazakhstani workers and proposals on the formation of a modern management system for medical organizations.

The study of the features of the system of motivation and stimulation of health workers in modern conditions as well as our analysis which allows to state that the problems of increasing labor motivation are systemic and require an integrated approach while solving them. On the basis of the revealed regularities, it was concluded that it is necessary to improve modern systems of labor motivation, to improve the living standards of health workers and quality.

In modern conditions, the motivation of doctors' work in medical organizations is determined by the financial possibilities and the degree of freedom of the leader in their use. But the further development of the motivational process requires the fullest possible identification and recording of various stimulating factors. Introduction of scientifically grounded modern methods, forms and technologies of motivation of doctors' work will allow stimulating the activity of a professional team of medical institutions.

2. Method

While studying specific problems of methods of motivation and stimulation of medical personnel, a set of the following methods of economic research were used: monographic, program-target, abstract-logical, expert assessments. The work also used such theoretical methods of research as comparisons and generalizations, scientific abstraction and synthesis. When analyzing current trends in the development of health care in Kazakhstan, quantitative and qualitative research methods were applied. While developing and evaluating the introduction of differential pay for medical personnel, methods of economic and statistical analysis were used: analysis of the series of dynamics, absolute and relative differences, the index method, the organizational experiment method and the sociological survey (Dobrenkov and Kravchenko, 2017).
The practical value of this study is due to the fact that the theoretical provisions and recommendations which contains in the work can be used to study problems in the field of motivation and stimulation of the work of personnel of medical organizations of the Republic of Kazakhstan with a view to improving the quality of provided medical services.

The material of the study was the results of the analysis of personnel, resource support as well as the sociological survey of medical personnel, the study of the dynamics of changes in their salaries and the scientific justification for the organizational and economic mechanisms for the formation of labor remuneration.

3. Results

At the present stage of development of Kazakhstani economy, close attention is paid to reforming the social sphere, the most important part of which is budgetary health care.

Reforming the healthcare system, on the one hand, aims at increasing the availability and quality of specialized, including high-tech, medical care, and on the other - to improve the performance of budgetary medical institutions. Competent and consistent introduction of material and non-material incentives to work will help significantly raise the level of workers health care in Kazakhstan.

The changes need to be carefully considered and evaluated for real impact on improving the performance of medical personnel in all areas of their activities.

Domestic theory and practice of motivation are reduced to remuneration based on fixed tariff rates and salaries that are ineffective. When creating systems of labor motivation at enterprises, it is necessary to use the experience gained by world practice. In the work the analysis of modern tendencies of formation of foreign labor motivation systems is conducted such as Japanese, American, French, English, German, Swedish models.

It should be noted that the remuneration of the doctor is currently inadequate to responsibility, tension and other specific features of medical worker profession. At the same time, remuneration in health care should stimulate staff to improve the quality of medical care, rational use of resources, take into account the complexity and intensity of their labor costs (Gavrilov, 2017). However, with the existing system of payment for health workers, the manager still has little leverage for material incentives for labor. At the same time, the main condition for the long-term development of the system of motivating the work of doctors in medical organizations is the financial security of all links in a continuously functioning institution.

On the basis of research, the comparative description of the activities of medical organizations was developed. The priority role of the social component of the effect (customer satisfaction) of medical care was determined and a model of the socio-economic efficiency of the medical organization as a whole was created.

A variant of the strategic map of medical organizations was also designed and proposed. It allows linking the models of motivation of the quality of medical personnel work in modern conditions with the strategic goal of the organization based on the use of a balanced system of indicators.

The study investigated the moral and psychological climate in two medical organizations: the methods of personnel management, the satisfaction of employees with work and the position in the team. The issues of labor remuneration and fair distribution of remuneration, career growth, the availability of opportunities for the development of competence, social security were studied.

On the basis of sociological research and critical analysis of scientific works in the field of psychology, personnel management and organizational behavior, a psychological portrait of a modern Kazakhstani physician was created. Isolated psychological groups have been singled out, a differentiated approach to improving the productivity of labor has been developed through the proposed rational model of motivation.

The developed system of stimulating the doctor's work can improve the quality of the medical services provided and the effectiveness of medical organizations. In accordance with
the strategic goal of the organization and taking into account existing standards, a set of terms of remuneration is proposed which are included in the contract of the doctor.

4. Discussion
We conducted a study of the system of motivation and stimulation of labor of medical workers based on foreign and domestic experience (DHL's Corporate Policy, 2018; Dryakhlov, 2002; Volgin and Volgin, 2006), analyzed the current trends in the formation of foreign labor motivation systems which are showed in Table 1 and are discussed below.

<table>
<thead>
<tr>
<th>Country</th>
<th>The main factors of labor motivation</th>
<th>Distinctive features of labor motivation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Japan</td>
<td>Professional skills, Age, Experience, Productivity of work</td>
<td>Lifetime employment, One-off benefit on retirement</td>
</tr>
<tr>
<td>USA</td>
<td>Encouragement of entrepreneurial activity, Quality of work, High qualification</td>
<td>The combination of elements of piecework and time systems, Participation in profit, Bonuses for trouble-free operation, long-term operation of equipment and tools, Double Betting System</td>
</tr>
<tr>
<td>France</td>
<td>Qualification, Quality of work, Number of rationalization proposals, Level of mobilization</td>
<td>Individualization of labor remuneration, Employee Labor Score in terms of professional skills, labor productivity, quality of work, observance of safety rules, ethics of production, Initiative, Additional rewards (education of children, car, old age security)</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>Income</td>
<td>Profit sharing, Share holdings, Labor share participation</td>
</tr>
<tr>
<td>German</td>
<td>Quality</td>
<td>Labor stimulation, Social guarantees</td>
</tr>
<tr>
<td>Sweden</td>
<td>Solidarity wages</td>
<td>Differentiation of tax and benefit system, Strong social policy</td>
</tr>
</tbody>
</table>

Note: Compiled according to the source *Foreign experience of labor motivation* (2018).
The Japanese model is characterized by the growth of labor productivity in relation to the growth of the standard of living of the population, including the level of wages. The system of labor stimulation is built taking into account three factors: professional skill, age and length of service. The size of the salary depends on these factors on the tariff scale. With its help, the salary is defined as the sum of payments in three sections: age, length of service, qualification and skill, characterized by category and level. Thus, the use of the labor rate includes the possibility of automatic growth of wages outside of communication with the upgrading of skills and labor contribution of the employee. This increases the motivation for work in this case directly depends on the results of work.

The American model is based on the socio-cultural characteristics of the nation and it shows the high level of economic well-being. In the United States the incentive system based on a pay. Flexibility to the system is given by periodic assessments of employees, on the basis of which the level of remuneration of employees for a subsequent period is set. A system of labor remuneration is also applied and it is noticed that the increase depends not so much on output but also on the growth of qualifications and the number of professions have been mastered.

The French model of labor motivation is characterized by a wide variety of economic instruments. In the wage policy of French firms, there are two trends: the indexation of wages depending on the cost of living and the individualization of wages. The advantage of the French model of motivation is that it has a strong stimulating effect on the efficiency and quality of labor. It serves as a factor in self-regulation of the size of the wage fund.

Nowadays, in the UK there are two modifications to the pay system depending on the profit: a cash and stock, which involves partial payment in the form of shares. In addition it is possible to apply a system of fluctuating wages, entirely dependent on profit. The employee receives income in three areas: the basic salary, the share of participation in profits on the basis of labor, the share of profits on the basis of their invested capital.

The German model of motivation of labor proceeds from the fact that in its center there is a person with his interests as a free person, conscious of his responsibility to society. Western researchers came to the conclusion that a harmonious combination of labor incentives and social guarantees is one of the most optimal models ever known in the history of economic theories.

The Swedish model of labor motivation is distinguished by a strong social policy aimed at the reduction of income inequality through redistribution of national income in favor of the poor. The policy of solidarity wages is based on such principles: equal pay for equal work, narrowing the gap between the minimum and maximum wage.

Based on the analysis of the peculiarities of foreign labor motivation systems, in our opinion, the French and American models are acceptable for the Kazakhstani organizations. The advantage of the French system of motivation is that it has a strong stimulating effect on the efficiency and quality of labor, and serves as a factor in self-regulation of the size of the wage fund. The flexibility of the US wage system consists in the periodic evaluation of employees, on the basis of which the level of remuneration of employees for the following period is set. An interesting system of payment for labor, in which its increase depends not so much on output as on the growth of skills and the number of professions that have been mastered.

In the world practice of public health, there are more and more often used explicit incentives for motivating the doctor's work (both financial and intangible). Special studies show that it is characteristic of a person to evaluate his material well-being in comparison with others. The typology of incentives in medical practice is presented in the table.

<table>
<thead>
<tr>
<th>Incentives</th>
<th>Implicit (implicit)</th>
<th>Explicit (explicit)</th>
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<tbody>
<tr>
<td></td>
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</table>
Two types of implicit incentives (internal and external) are based on trust. Any use of explicit incentives for employees (increased earnings) should be preceded by a thorough analysis of the possible consequences. The motivation of employees is not only related to the level, but also to the mode of payment for labor.

Over the years, the main methods of payment for medical workers in different countries of the world were a fee for the service and / or salary. The fee is a piece-rate wage, and wages are time-based. Salary as a time-based form of payment has the same shortcomings in health care as in other spheres. However, this method has undeniable advantages: for example, automatic control of costs and working time, ease of use.

In recent years, health managers and funding agencies around the world, concerned about the growth of total costs. They are trying to introduce more modern methods of payment in order to control costs and achieve effective work at the same time. The most popular option is the payment of services per each patient attached to the doctor. In fact, this is a modified fee method, since the payment for a doctor depends on the number of patients. The obvious advantage of this method is that it does not create incentives for overproduction, but relates compensation to the number of actually referring patients (Salman and Figueras, 1997).

The various wage systems for different categories of health professionals are given below (Table 3) and showed that none of them can be recognized as ideal. Today in different countries of the world use the mixed payment systems that combine with time-based payment and fee elements. Often different payment systems are used for different categories of medical workers (Table 3).

<table>
<thead>
<tr>
<th>Wage systems in health care</th>
<th>Type</th>
<th>Economic effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fee for service</td>
<td>Piece-work basis</td>
<td>Stimulates additional activity: Yes, Stimulates activity reduction: No, Suppresses growth in labor costs: No</td>
</tr>
<tr>
<td>Salary (salary)</td>
<td>Part-time</td>
<td>Stimulates additional activity: No, Stimulates activity reduction: Yes, Suppresses growth in labor costs: Yes</td>
</tr>
<tr>
<td>Payment with a fixed maximum cost per patient (capitationfee)</td>
<td>Modified piece-work basis</td>
<td>Stimulates additional activity: No, Stimulates activity reduction: Yes, Suppresses growth in labor costs: Yes</td>
</tr>
</tbody>
</table>

Note: Compiled according to the source Maynard (2006).

The basis of the modern approach to pay Pay-for-Performance (P4P) is the dependence of earnings on the result of activity. In P4P systems, productivity growth is achieved, which
means the partial release of employees who have become "redundant". At the same time, payment based on the results provokes a positive selection, or sorting of employees. Studies show that in organizations using the P4P system, turnover of labor is significantly reduced. When building these or those combined payroll systems, one should remember about observance of the following important conditions. Any increase in pay must really be worth the extra effort. The result should be fundamentally measurable and correlated with the actions of a particular employee. The increased productivity of an employee should not be considered subsequently as a new minimum standard. Otherwise, the increase in labor remuneration will either not have any motivational effect at all, or the effect will be short-lived.

A comparative study of job satisfaction and physician motivation was conducted at university medical centers in Germany and the United States (Mukhamedova, 2014). It showed that the main factors of job satisfaction, although "overlap", but still have significant differences. Both in the US and Germany, doctors point out the importance of their participation in decision-making concerning the main issues of clinics. This factor take place the first place in Germany and the second in the USA.

However, German doctors put on the second place the possibility of continuous professional development and the stability of employment. On the third, they put an administrative burden, then the relationship with colleagues and the opportunity to access new technologies and equipment. For US doctors, the stability of employment and financial incentives are in the first place, the third is the relationship with colleagues and the management of the organization, and access to new technologies has proved to be an insignificant factor.

The program of the first stage of our study was to study the theoretical aspects of labor remuneration and management of motivation for work. This is connected with the improvement of the quality of medical care on the basis of domestic and world experience and the study of modern trends in assessing the quality of the professional competence of physicians.

The main criterion of the quality of labor resources of a medical organization is the professional level of its employees. Such an assessment should be carried out on the basis of quantitative and qualitative characteristics of the change in indicators using the technology of the cluster analysis method (Zyukin and Pozhidaeva, 2014).

At the second stage, the task was to conduct a sociological study. The purpose of this study is to identify the psychological climate in medical organizations, to study the desires and inclinations working with the subsequent construction of motivation systems and to stimulate the quality of doctors' work.

The degree of satisfaction with working conditions and wages assesses using respondents' questionnaires (Yadov, 1995). Based on the opinions of the respondents, it should be concluded that there are broad opportunities to use pay as a motivation factor for employees. It is pay that is most valuable in working in a medical institution for almost half of the respondents, and also the main aspect (70% of respondents singled out) in the labor process, which needs to be changed for the better (Devyatko, 2010).

At this stage, the reporting data on services and offices, medical and economic standards were studied. Based on the results of the mathematical analysis of sociological research data, expert evaluation and modeling, recommendations were developed on the introduction of a rational model of remuneration for medical personnel.

The psychological portrait of a modern Kazakh doctor is of particular interest in the medical organizations under investigation. A model for motivating and stimulating the quality of labor is also constructed. The conducted sociological survey of the respondents showed the following results.
The obtained data testify to a significant share (33.8%) of medical personnel with a long record of service, which indicates a sufficiently mature collective in the age group. The experience of medical personnel is mainly assessed by qualification category. Among the respondents, the highest category has 38% of medical staff in City Policlinic №5 (CP); 59% in National Scientific Medical Center. But some doctors have no any category: 22% in City Policlinic №5 (CP); 3% in National Scientific Medical Center (NSMC). In general, it should be noted that the level of "category" is quite high.

The distribution of respondents on wages showed that 15.5% of employees get salary over 130,000 tenge. The highest percentage of medical staff with high incomes was registered in "National Scientific Medical Center" JSC. But among the respondents there was a small percentage with a minimum salary of 50,000 - 60,000 tenge – it is only 2.5%. Basically, these are young doctors who started working immediately after graduating from high school, who do not have the length of service and the category for which wages are paid. These data allow us to say that doctors do not belong to highly paid categories of workers in Kazakhstan. Thus, there is a discrepancy between the payments of doctors on the one hand and the quality and complexity of a performed work, on the other.

We have also studied the issue related to the motivation of effective work and the size of wages. This topic is important because it is not always possible to know the real state of affairs from the organizations data report for the reasons of the staff’s turnover and dissatisfaction with the realization of labor potential. Analyzing the indicators of the level of mutual relations in the team, the staffs of medical organizations highly appreciate the competence and authority of the immediate heads of departments and the employers too which indicates a favorable socio-psychological climate in the work.

Thus, sociological studies shows that respondents are not satisfied with the motivation of labor, as there are no incentives to improve the quality of work, where incentive systems must be consistent with the collective.

Sociological research in the two medical organizations showed positive results among the staff: more than 80% of respondents are willing to work more hours for the sake of earning. The most important positive characteristic of the medical staff is collectivism and mutual assistance (60.8% of respondents), especially in such activities as medicine, where all components are important - diagnosis, treatment, nursing, counseling, communication. One of the main positive features of the portrait of medical personnel is adherence to spiritual values and the ability to rely only on themselves (45.7% of respondents).

One of the negative elements in the psychological portrait of the doctor is the inability to make strategically important decisions and bear individual responsibility (71.5% of respondents). The second negative feature is a picture of super flexibility (51.5% of respondents). It manifests itself as a transition to other organizations, at any time the specialist leaves and often goes to a competitive organization, referring to higher earnings, provision of housing, career prospects. The third drawback is the dependence on the others’ opinions (57.8% of respondents). Thus, large shares of medical personnel are inherent in the above-listed serious drawbacks, which cannot be ignored a building a management model and a model for motivating the quality of labor.

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The motivators and the work itself, which brings a person psychological satisfaction should be the basis of the motivational system. The model shows that activation of motivation is achieved not only due to the system of stimulating doctors. To a greater extent - due to the
sense of involvement in a large common cause, and also in connection with public opinion about the high social significance of the work of doctors. The final stage of work on the use and further perfection of the model should be the work on compiling a number of internal-organizational "Regulations".

Calculating the salary of a doctor, it is necessary to use the algorithm of the motivation model of a highly qualified specialist with the introduction of a stimulating composite per capita standard. In this case, the system of motivation and incentives should work in full force. Thus, the developed complex questionnaire is oriented to obtaining objective socio-demographic information about doctors. At the same time, a number of indicators are taken into account: determining the level of staff turnover, determining the reasons for wanting to change jobs, studying the social satisfaction of the organization’s staff, motivating labor activity, etc. A psychological portrait of a modern Kazakhstani physician is detailed, models of motivation are investigated, and a model for motivating the work of medical personnel is created.

It is also necessary to emphasize that the doctor of the future must possess not only modern medical and diagnostic technologies, but also have a worldview based on a deep understanding of the characteristics of public health, to realize the social responsibility of the medical profession and to be adherent to civilized ethical norms. Continuous professional development is an essential factor in ensuring a high level of medical care, including both clinical activities and management.

According to the results of the research and the study of foreign experience, recommendations for medical organizations have been developed.

1. Constantly improve knowledge on the theoretical aspects of managing the motivation of work related to the improvement of the quality of medical care.

2. To conduct in 3-5 years of sociological research to identify the psychological climate in medical organizations, with the subsequent construction of systems of motivation and stimulation of the quality of work of doctors.

3. When carrying out sociological research it is suggested to use the complex questionnaire developed by the authors, which is oriented to:

   - obtain objective socio-demographic information about doctors (length of service, specialty, gender, age, etc.);
   - determine the level of staff turnover and the establishment of reasons who willing to change jobs, identify the interests of employees left unmet;
   - study of labor discipline and level of conflict;
   - study of social satisfaction of the organization’s staff: motivation (stimulation) of labor activity, develop the labor potential of the personnel in training, advanced training, retraining, assessment of the labor potential of personnel;
   - study the nature of the relationship in the team;
   - identify the importance of factors affecting the labor potential;
   - evaluate the potential of the employee on the basis of a comparison of the requirements for the position, etc.

4. Develop a strategic plan to stimulate and motivate labor and use a rational model of labor remuneration depending on the specifics of the activities of medical organizations.

5. In the proposed labor incentive model, there is a direct dependence of wages on the following factors:

   - quality of work;
   - manifested initiatives of the medical worker to increase the activity of the medical institution as a whole;
   - the introduction of innovations;
5. Conclusion
The conducted research leads to the following conclusions:

1. Motivation of labor is one of the problems and the solution of them has always been given great attention in the world practice. Therefore, when developing labor motivation systems in medical organizations, it is necessary to use a gained world experience in the practice.

2. A special feature of medical staff’s work is the need to take into account in the system of labor incentives the high requirements for knowledge and their constant updating, the increased demands for a combination of material and moral incentives for labor.

3. Comparison of approaches to the organization of medical workers’ remuneration and the procedure for allocating funds to medical institutions according to the experience of developed countries (Great Britain, Germany, France, USA) testifies the need for reforms in the sphere of remuneration of medical personnel in the Republic of Kazakhstan.

4. Motivation of employees is associated not only with the level, but also with the mode of payment for labor. Wages in the framework of a bonanza-premium system of payment are not able to become an effective incentive for the medical worker to increase the growth rate of labor productivity. When calculating the salary of a doctor, it is necessary to use the algorithm of the motivation model of a highly qualified specialist with the introduction of a stimulating composite per capita standard.

5. The need for a questionnaire arises from the fact that it is not always possible to know the real state of affairs from the reporting data of organizations for the reasons of the staff’s quality, including for such important reasons as dissatisfaction with the realization of labor potential. Sociological studies have shown unsatisfactory motivation for the quality of labor, the lack of a clear and coherent incentive system.

6. A conducted sociological survey of employees of medical institutions showed that when paying for the work of medical personnel, the quality of the work performed is not taken into account. The current system of labor remuneration in medical organizations is not economically and socially effective. Taking the aforementioned note, it is possible to significantly increase the level of personnel motivation and, as a result, improve the quality of work.

7. The concept of improving the system of motivation and stimulation of work in the organization should include regular clarification of the attitude of employees to the organization of wages, the determination of their preferences and wishes for changing the current situation in the organization, the introduction of additional rewards, bonuses, and the creation of conditions for career development opportunities for medical workers.

6. Acknowledgement
We would like to express our deepest gratitude to the administration of the state communal enterprise on the right of economic management “City Polyclinic №5” and JSC “National Scientific Medical Center” for providing the opportunity to conduct sociological research.

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