

MOGUĆNOST UNAPREĐENJA MENADŽMENTA STOMATOLOŠKE ZDRAVSTVENE ZAŠTITE – STUDIJA SLUČAJA ORDINACIJE „VUKADINOVIĆ“ U REPUBLICI SRBIJI

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ORIGINAL ARTICLE

THE PROSPECTS OF IMPROVING DENTAL HEALTH CARE MANAGEMENT – A CASE STUDY BY THE "VUKADINOVIĆ" DENTAL PRACTICE, THE REPUBLIC OF SERBIA

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SAŽETAK

Uvod: Dentalna medicina je deo zdravstvene zaštite i dužna je da svim raspoloživim sredstvima obezbedi stomatološku zaštitu stanovništvu na određenom području, putem očuvanja, poboljšanja i uspostavljanja konkretne funkcije i izgleda usne šupljine i njenih pojedinih delova, proučavanjem i prevencijom opštih oboljenja usne duplje, kao i lečenjem oboljenja, nepravilnosti i povreda usta i zuba. Sistem stomatološke zdravstvene zaštite na teritoriji Republike Srbije zahteva promene u domenu zakonske regulative, organizaciji rada i finansijskom ulaganju u stomatološku zdravstvenu zaštitu radi poboljšanja rada i dobijanja većeg broja stručnih kadrova za pružanje stomatoloških usluga. McKinsey 7S model predstavlja dobar alat za proveru sposobnosti upravljanja i kapaciteta neke organizacije da odgovori na savremene zahteve koje korisnici pred nju postavljaju.

Cilj: Cilj rada bilo je istraživanje mogućnosti za unapređenje postojećeg sistema menadžmenta stomatološke zdravstvene zaštite.

Metode: Metod rada podrazumeva studiju slučaja koja obuhvata primenu dijagnostičkog modela McKinsey 7S na privatnu stomatološku ordinaciju.

Rezultati: Rezultati istraživanja poslužili su kao osnova za predlog mogućeg unapređenja menadžmenta stomatološke zdravstvene zaštite.

Ključne reči: upravljanje, stomatološka zaštita, model McKinsey 7S.

ABSTRACT

Introduction: Dental medicine is a part of health care which is responsible for providing dental health care for the population of an area using all available means - by preserving, improving and establishing the specific functions and the appearance of the oral cavity and its individual parts, by studying and preventing common diseases of the mouth, as well as by treating diseases, disorders and mouth and dental injuries. The system of dental health care in the Republic of Serbia requires changes in the field of legislation and the organizational process, as well as financial investments for the purpose of improving the organizational process and achieving a greater number of professional staff that would provide dental services. The McKinsey 7S Model is a good tool for checking the managing abilities and the capacity of a certain organization to respond to the modern demands of its users.

Aim: The aim of the paper was to investigate the prospects of improving the current dental health care management system.

Methods: The method involves a case study on applying the McKinsey 7S diagnostic model to a private dental practice.

Results: The results of the research served as the basis for proposing potential improvements to dental health care management.

Keywords: management, dental health care, model McKinsey 7S

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UVOD

Menadžment kao naučna disciplina bavi se planiranjem, organizovanjem, vođenjem i kontrolom određenih poslova, poduhvata ili sistema, radi efikasnijeg i efektivnijeg postizanja zajedničkih ciljeva [1]. Efikasnost se odnosi na pravilno korišćenje raspoloživih resursa i na pravilo da „posao treba obaviti na pravi način“, dok je efektivnost fokusirana na aktivnosti koje će dovesti do postizanja željenih rezultata. Zdravstveni menadžment teži da zadovolji interese svih učesnika u zdravstvenom sistemu, pacijenata s jedne strane, i zdravstvenog kadra u organizaciji sa druge. Zdravstveni menadžment se bavi procesom planiranja, organizovanja, vođenja, i kontrolom rada zdravstvenih programa, organizovanjem resursa (osoblja, novca, fondova, kapaciteta, znanja, opreme, propisa, zakona, vremena), praćenjem primene zdravstvenih programa, donošenjem odluka na svim nivoima zdravstvenog sistema i postizanjem ciljeva vezanih za unapređenje zdravstvenog stanja populacije [2,3,4].

Dentalna medicina je deo zdravstvene zaštite koji je dužan da svim raspoloživim sredstvima obezbedi stomatološku zaštitu stanovništvu na određenom području, putem očuvanja, poboljšanja i uspostavljanja konkretne funkcije i izgleda usne šupljine i njenih pojedinih delova, proučavanjem i prevencijom opštih oboljenja usne duplje, kao i lečenjem oboljenja, nepravilnosti i povreda usta i zuba. Osnovne elemente za upravljanje pružanjem stomatološke zdravstvene zaštite čine resursi (radnici, saradnici, prostor i oprema), kontrola i finansiranje sistema.

U Republici Srbiji, stomatološkom zdravstvenom zaštitom kao i celokupnim zdravstvenim sistemom upravljaju tri najznačajnije institucije:

1. Ministarstvo zdravlja Republike Srbije koje vodi zdravstvenu politiku, određuje standarde za rad zdravstvene službe, upravlja kvalitetom zdravstvene zaštite;
2. Institut za javno zdravlje Srbije „Dr Milan Jovanović - Batut“ koji obezbeđuje podatke o zdravstvenom stanju građana i radu zdravstvenih ustanova, predlaže mere za poboljšanje javnog zdravlja, analizira prikupljene podatke o pokazateljima javnog zdravlja, kreira predlog godišnjeg plana rada zdravstvenih ustanova, organizuje i unapređuje informacijski sistem; i
3. Republički zavod za zdravstveno osiguranje, nacionalna organizacija preko koje građani ostvaruju pravo iz zdravstvenog osiguranja i na taj način finansiraju svoju zdravstvenu zaštitu [5].

Stomatološka zdravstvena zaštita se pruža preko javnih zdravstvenih ustanova (domovi zdravlja, zavodi, Stomatološki fakultet u Beogradu, Klinika za stomato-

INTRODUCTION

Management is a scientific discipline which deals with planning, organizing, running and controlling certain businesses, enterprises or systems for the purpose of achieving common goals more efficiently and more effectively [1]. Efficiency refers to the appropriate use of available resources and the "job-needs-to-be-done-in-the-right-way" rule, whereas effectiveness is focused on the activities that result in achieving the desired outcomes. Health care management strives to satisfy the needs of all participants in a health care system, both patients and health professionals. It deals with the process of planning, organizing, running and controlling the work of health care programs by organizing resources (i.e. staff, money, funds, capacities, knowledge, equipment, regulations, laws, time), by monitoring the implementation of health-related programs, by making decisions at all levels of a health care system and by achieving goals related to the improvement of the health status of the population [2,3,4].

Dental medicine is a part of health care which is responsible for providing dental health care for the population of an area using all available means - by preserving, improving and establishing the specific functions and the appearance of the oral cavity and its individual parts, by studying and preventing common diseases of the mouth, as well as by treating diseases, disorders and mouth and dental injuries. The following elements are essential to managing the provision of dental health care: resources (i.e. staff, associates, space, and equipment), control and the finances of the system.

In the Republic of Serbia, dental health care and the entire health care system are managed by three most important institutions:

1. The Ministry of Health of the Republic of Serbia, which creates the health policy, determines the standards for health services and manages the quality of health care;
2. The Institute of Public Health of Serbia "Dr Milan Jovanovic - Batut", which provides data on the health status of the population and the way health institutions work, proposes measures for improving public health, analyzes the collected data on public health indicators, creates a proposal for the annual work plan of health institutions, and organizes and improves the information system; and
3. The National Health Insurance Fund of the Republic of Serbia, the national organization through which citizens exercise their right of health insurance thus financing their own health care [5].

Dental health care is provided through public healthcare institutions (i.e. community health centers, institutes, the School of Dental Medicine University

logiju Medicinskog fakulteta u Nišu, Novom Sadu, Kragujevcu, Prištini.) i privatne prakse (opšta ili specijalistička ordinacija dentalne medicine i kao laboratorija za zubnu tehniku, prema članu 38. Zakona o zdravstvenoj zaštiti). Osnovnu ulogu u stomatološkoj zdravstvenoj zaštiti ima primarni nivo zaštite koji uključuje prevenciju, rano otkrivanje i lečenje bolesti usta i zuba. Ukoliko primarni nivo stomatološke zdravstvene zaštite nije u mogućnosti da pruži odgovarajuću specijalističku zaštitu, lekar će pacijenta uputiti na viši nivo zaštite. Tercijarni nivo stomatološke zdravstvene zaštite je najsloženiji oblik pružanja stomatološke zdravstvene zaštite koji obuhvata pružanje zaštite primenom vrhunske dijagnostike i lečenja/a u ustanovama tercijarne zaštite.

Služba za stomatološku zaštitu je najzastupljeniji tip službe za negu i lečenje usta i zuba koju čine odeljenje za dečiju i preventivnu stomatologiju, odeljenje za ortopediju vilica, odeljenje za bolesti usta i zuba, odeljenje za trijažu, ekstrakciju zuba i oralnu hirurgiju, odeljenje za stomatološku protetiku i zubotehnička laboratorija. Javne zdravstvene ustanove koje pružaju stomatološku zdravstvenu zaštitu osnivaju se iz sredstava u državnoj svojini prema Planu mreže zdravstvenih ustanova, koji reguliše Vlada Republike Srbije.

Organizaciju rada, prava i obaveze pružalaca i daljaca zdravstvenih usluga stomatološke zdravstvene zaštite u Republici Srbiji uređuje i reguliše paket zakona i pravilnika iz oblasti zdravstvene zaštite, zdravstvenog osiguranja i drugih segmenata zdravstva u celini. Zakon o zdravstvenoj zaštiti [6] prema članu 1. uređuje sistem zdravstvene zaštite u Republici Srbiji, njenu organizaciju, društvenu brigu za zdravlje stanovništva, opšti interes o zdravstvenoj zaštiti, nadzor nad sprovođenjem ovog zakona i druga pitanja od značaja za organizaciju i sprovođenje zdravstvene zaštite. Zakonom o zdravstvenom osiguranju [7] definisani su uslovi, prava i obaveze obaveznog i dobrovoljnog zdravstvenog osiguranja Republike Srbije. Uredbom o planu mreže zdravstvenih ustanova [8] utvrđuje se Plan mreže zdravstvenih ustanova u javnoj svojini – struktura, kapaciteti i prostorni raspored zdravstvenih ustanova, i njihova organizaciona struktura na svim nivoima zdravstvene zaštite.

Uprkos razvoju tehnologije i znanja i sve većem broju stomatologa specijalista, stanje usta i zuba stanovništva Republike Srbije je na nezavidnom nivou. Gotovo svaki šesti građanin (16,1%) izjavio je da je imao nezadovoljene potrebe za stomatološkom zdravstvenom zaštitom. Najčešće navođeni razlozi za nezadovoljene potrebe za stomatološkom zdravstvenom zaštitom bili su finansijske prepreke pristupačnosti stomatološke zdravstvene zaštite (66,6%) i strah od lečenja (15,1%) [9]. Stomatološke usluge bez novčane

of Belgrade, the Clinics of Dentistry at the Faculties of Medicine in Niš, Novi Sad, Kragujevac and Priština) and private practice (general or specialist dental practice as well as dental laboratories, according to Article 38. of the Law on Health Care). The primary level of protection, which includes prevention, early detection, and treatment of oral and dental diseases, plays a fundamental role in dental health care. If the level of primary dental health care is unable to provide appropriate specialist care, the patient will be referred to a higher level of protection. The tertiary level of dental health care is the most complex form of providing dental health care, which includes the provision of care using cutting-edge diagnostics and treatments in tertiary care institutions.

The dental care service is the most represented type of service for oral care and treatment, and it consists of the department of pediatric and preventive dentistry, the department of jaw orthopedics, the department of oral diseases, the department of triage, tooth extraction and oral surgery, the department of prosthetic dentistry and a dental laboratory. Public health institutions that provide dental care are publicly funded according to the Healthcare Facilities Network Plan adopted by the Government of the Republic of Serbia.

The organizational process and the rights and obligations of dental care service providers and holders in the Republic of Serbia are governed and regulated by laws and regulations in the field of health care, health insurance and other segments of health care. Article 1. of the Law on Health Care [6] regulates the system of health care in the Republic of Serbia, the way this system is organized, the social concern for population health, the general interest in health care, the supervision of the implementation of this law and other issues of importance for the organization and implementation of health care. The Law on Health Care [7] defines the conditions, rights and obligations in the field of mandatory and voluntary health insurance of the Republic of Serbia. The Regulation of Healthcare Facilities Network Plan [8] determines the Healthcare Facilities Network Plan for public ownership – the structure, capacity and spatial arrangement of healthcare institutions, as well as their organizational structure at all levels of health care.

Despite the development of technology and knowledge and a growing number of specialist dentists, the oral health of the population of the Republic of Serbia is at an unenviable level. Almost every sixth citizen (16.1%) stated they had had unmet needs for dental care. The most frequently cited reasons for unmet needs for dental care included financial obstacles to the availability of dental health care (66.6%) and the fear of treatment (15.1%) [9]. Free dental care in the public sector is provided only for underage patients,

nadoknade u okviru državnog sektora zdravstvene zaštite mogu koristiti samo osiguranici koji su maloletna lica, trudnice, hitni slučajevi i studenti do 26 godine života, što je dovelo do pada korišćenja stomatoloških usluga među punoletnim licima. Najčešći razlozi za izbegavanje i zanemarivanje potreba za stomatološkim uslugama su visoke cene usluga i strah od stomatologa. Potreba za unapređenjem organizacije rada i pružanja stomatološke zdravstvene zaštite svim kategorijama stanovništva Republike Srbije upućuje na razmatranje proširenja pružanja usluga na teret Fonda za zdravstveno osiguranje, kao i da postoji potreba za izdvajanjem većih sredstava Fonda za zdravstveno osiguranje u korist stomatološke zdravstvene zaštite. Važno je i prilagođavanje cenovnika usluga populaciji sa niskim primanjima i obezbeđivanje kvalitetnog kadra za pružanje i poboljšanje kvaliteta stomatoloških usluga radi postizanja standarda i očuvanja oralnog zdravlja stanovnika Republike Srbije. U tom smislu, sistem stomatološke zdravstvene zaštite na teritoriji Republike Srbije zahteva promene u domenu zakonske regulative, organizaciji rada i finansijskom ulaganju u stomatološku zdravstvenu zaštitu radi poboljšanja rada i dobijanja većeg broja stručnih kadrova za pružanje stomatoloških usluga.

Uvođenje promena u način upravljanja prevashodno zahteva izbor pristupa [10,11]. McKinsey Model od sedam elementa (*McKinsey 7S*) predstavlja dobar alat za proveru sposobnosti upravljanja i kapaciteta neke organizacije da odgovori na savremene zahteve koje korisnici pred nju postavljaju. McKinsey 7S Model predstavlja jedan od najefikasnijih pristupa u upravljanju promenama u organizacijama [12]. Model je 1980. godine stvorio Robert Waterman, a objavila ga je konsultantska kuća nakon čega je postao osnovni alat za globalni menadžment. Ovaj model je prvi put pomenut u knjizi „Umetnost japanskog menadžmenta“ i koristi se za analizu kompanija i organizacija. Ovaj model planiranja ima izgled atoma sa sedam faktora koji počinju slovom „S“. Faktori se dele na tvrde i meke. U tvrde faktore spadaju strategija, struktura i sistemi. U meke faktore spadaju veštine, stil, zajedničke vrednosti i zaposleni [13,14].

Strategija (*Strategy*) je akcioni plan koji organizacija primenjuje kako bi postigla specifične korporativne ciljeve. To je pravac kojim organizacija kroz raspodelu svojih resursa ostvaruje svoje ciljeve [2,14]. Struktura (*Structure*) je hijerarhija organizacije. To je način na koji se različita odeljenja ili zaposleni odnose jedni prema drugima, ko kome odgovara, kako se zadaci dodeljuju [2,14,15]. Sistemi (*Systems*) se odnose na one procese koji podržavaju svakodnevno poslovanje kompanije. Ovi sistemi se odnose na informacioni, finansijski

pregnant women, emergency cases and students up to 26 years of age, which resulted in a decline in the use of dental services among adults. The most common reasons for avoiding and neglecting the need of dental services are high prices and the fear of dentists. The need for improving the organizational process and providing dental health care to all categories of the population of the Republic of Serbia urges us to consider expanding the provision of services at the expense of the National Health Insurance Fund and emphasizes the need for allocating greater funds from the National Health Insurance Fund to dental health care. It is also important to adapt the price list of dental services to low-income individuals and to ensure quality staff for providing dental services and improving the quality of services in order to achieve standards and preserve the oral health of the population of the Republic of Serbia. In this sense, the system of dental health care in the territory of the Republic of Serbia demands changes in the field of legislation, organizational process and financial investment in dental health care for improving the work process and obtaining a larger number of professional staff for providing dental services.

Introducing changes in management primarily requires the choice of approach [10,11]. McKinsey 7S Model is a good tool for checking the managing abilities and the capacity of a certain organization to respond to the modern demands of its users. This model is one of the most efficient approaches to managing changes in organizations [12]. It was developed in 1980 by Robert Waterman and it was published by a consulting firm becoming the basic tool for global management. This model was first mentioned in the book "The Art of Japanese Management" and is used for analyzing companies and organizations. This planning model looks like an atom, and it contains seven factors, all starting with the letter S. The factors are divided into soft and hard ones. Hard factors include strategy, structure and systems, whereas soft factors include skills, style, shared values and staff [13,14].

Strategy is an action plan implemented by an organization to achieve specific corporate goals. It is the direction in which the organization achieves its goals through the distribution of its resources [2,14]. Structure is the hierarchy of the organization. It shows how different departments or employees relate to each other, who reports to whom, how tasks are assigned [2,14,15]. Systems refer to the processes which support a company's daily operations. These systems include the information system, the financial system, management, and human resource (HR) system. The system of control is divided into three groups – preventive, current and corrective control [2,14]. Style refers to the



Slika 1. Analiza organizacije: McKinsey 7S model (modifikovano prema <https://gmbusiness.biz/analiza-organizacije-mckinsey-7s-model/#prettyPhoto/0/>).

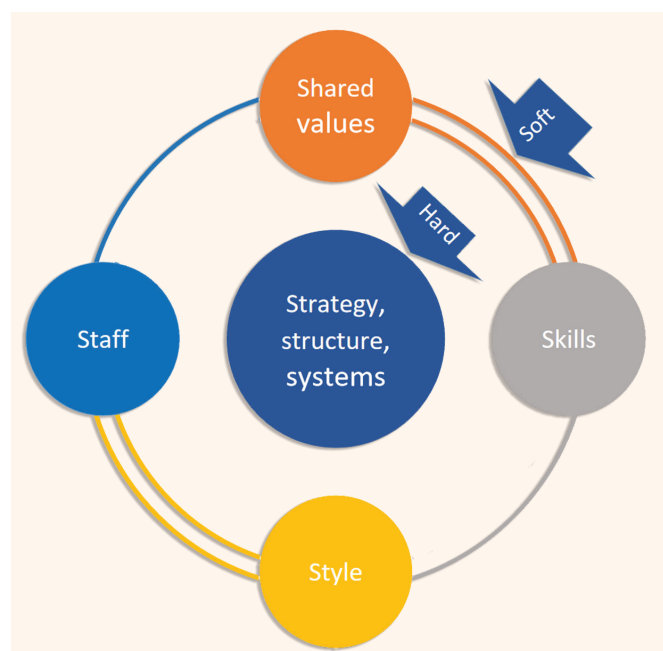


Figure 1. The analysis of an organization: McKinsey 7S Model (adapted according to <https://gmbusiness.biz/analiza-organizacije-mckinsey-7s-model/#prettyPhoto/0/>).

sistem u organizaciji, menadžment i sistem ljudskih resursa. Sistem kontrole je podeljen u tri grupe - preventivnu, tekuću i korektivnu kontrolu [2,14]. Stil (*Style*) se odnosi na stil vođenja organizacije. Reč je o kulturi organizacije, stilu ponašanja menadžera i rukovodilaca - kako se ponašaju, kako organizuju radno vreme, kako mere učinke, koliko su otvoreni za kreativnost, kako prepoznaju uspeh i kvalitet [14,16]. Veštine (*Skills*) su karakteristične sposobnosti organizacije i njenog ključnog osoblja koje su potrebne za sprovođenje strategije organizacije [14]. Zaposleni (*Staff*) podrazumevaju zaposlene u organizaciji, njihove sposobnosti, potencijale, iskustva. Zaposleni u organizaciji imaju direktan uticaj na to kako će organizacija pružati svoje usluge i obavljati svoju delatnost, pa zbog toga organizacija mora da zaposli sposobne ljude, da ih obučava i rasporedi na ispravne poslove kroz obuke, selekciju, motivaciju, priznanja i nagrade itd. [14]. Zajedničke vrednosti (*Shared values*) se smatraju prvim suštinskim korakom u definisanju uloge organizacije u okviru zajednice u kojoj postoji i funkcioniše. Vrednosti su ono za šta se organizacija zalaže i što je njena sveobuhvatna svrha. Vrednosti se mogu opisati i kao savest i identitet organizacije, one uključuju faktore kao što su odnos prema poslu, duh konkurencije i međusobna saradnja zaposlenih. Saradnja je važna tehnika za postizanje organizacijskih ciljeva, zbog toga što nudi najbolje šanse da se dođe do obostranih i zadovoljavajućih rešenja na osnovu interesa i ideja koje dolaze od svih strana. Saradnja istovremeno održava i jača radne odnose [14]. Efektivnost stomatoloških ustanova, javnih ili privat-

way the organization is run. It involves the culture of the organization, the way managers and executives behave – what they do, how they manage working hours, how they value results, how open they are for creativity, if they recognize quality and success [14,16]. Skills are the characteristic abilities of the organization and its employees necessary for the implementation of the organization's strategy [14]. Staff refers to employees in the organization, their abilities, potentials, experience. Staff have a direct influence on how an organization provides its services and performs its activities, so the organization needs to hire capable people, train them and assign them the right positions through training, selection, motivation, recognition, awards, etc. [14]. Shared values are considered the first essential step in defining the role of an organization within the community in which it functions. Values are what an organization stands for and what its universal purpose is. They can also be described as conscience and identity of an organization, and they include factors such as work attitude, competitive spirit, and cooperation among coworkers. Cooperation is an important technique for achieving organizational goals as it offers the best chance of reaching mutually satisfactory solutions based on interests and ideas coming from everyone involved. Cooperation both maintains and strengthens work relationships [14]. The effectiveness of dental institutions, public or private, is reflected through the prism of the 7S Model; in other words, for an institution to be effective, a balanced relationship of all seven elements of this model is necessary.

Prilog 1. Zajedničke vrednosti

Attachment 1. Shared values

Zajedničke vrednosti / Shared values	
Koje su osnovne vrednosti (i očekivana ponašanja)? / <i>What are the fundamental values (and expected types of behavior)?</i>	<ul style="list-style-type: none"> • Stručnost / <i>Expertise</i> • Preciznost / <i>Precision</i> • Kvalitet / <i>Quality</i> • Ljubaznost / <i>Kindness</i> • Dostupnost / <i>Availability</i> • Odgovornost / <i>Responsibility</i> • Kolegijalnost / <i>Collegiality</i> • Kooperativnost / <i>Coopertiveness</i>
Šta je timska kultura? / <i>What is team culture?</i>	Međusobno uvažavanje i poštovanje. Poverenje. Ljubazno ophođenje prema pacijentima i ostalim zaposlenima / <i>Mutual appreciation and respect. Trust. Courteous treatment of patients and other employees</i>
Koliko su jake vrednosti u Vašem timu? / <i>How strong are values in your team?</i>	Izuzetno su jake pogotovo ako se ima u vidu postignuti uspeh u poslovanju / <i>They are very strong especially if we take the achieved business success into consideration</i>
Koje su osnovne vrednosti na kojima je organizacija/ tim izgrađena? / <i>What are the core values on which the organization/team is built?</i>	<ul style="list-style-type: none"> • Stručnost / <i>Expertise</i> • Preciznost / <i>Precision</i> • Kvalitet / <i>Quality</i> • Ljubaznost / <i>Kindness</i> • Dostupnost / <i>Availability</i> • Odgovornost / <i>Responsibility</i> • Kolegijalnost / <i>Collegiality</i> • Kooperativnost / <i>Coopertiveness</i>
Strategija / Skills	
Koja je Vaša strategija u poslovanju? / <i>What is your business strategy?</i>	Održavanje uspešnosti, podizanje kvaliteta poslovanja i pružanja usluga, praćenje razvoja novih tehnologija i njihovo uvođenje u svakodnevni rad. Kontinuirano osvežavanje znanja i stručno usavršavanje svih zaposlenih / <i>Maintaining success, improving the quality of business and service provision, keeping in touch with new technologies and introducing them in everyday work. Continuously refreshing knowledge and providing professional development for all employees</i>
Kako nameravate da postignete ciljeve? / <i>How do you intend to reach goals?</i>	<p>Omogućavanjem konstantnog korišćenja najboljih i najsavremenijih preparata i medicinskih sredstava u stomatologiji / <i>By enabling constant use of the best and most up-to-date materials and medical devices in dentistry</i></p> <p>Obezbeđivanjem adekvatne tehničke podrške za bezbedno i nesmetano odvijanje radnih procesa (stomatološka i IT oprema) / <i>By enabling adequate technical support for safe and smooth work process (dental and IT equipment)</i></p> <p>Planiranjem na godišnjem nivou, pored tekućeg održavanja, i investicionih ulaganja u opremu i usavršavanja zaposlenih / <i>By making annual plans not only for ongoing maintenance, but for investing in equipment as well and training of employees</i></p> <p>Prilagođavanjem dostupnosti svojih usluga uvođenjem smenskog rada i rada vikendom / <i>By adjusting the availability of our services by introducing shift work and working at weekend</i></p> <p>Precizno planiranje zapošljavanja mladih i talentovanih stručnjaka koji treba da zamene starije kolege koji odlaze u penziju / <i>By accurately planning the employment of young and talented professionals who should replace older colleagues who are about to retire</i></p> <p>Insistiranjem na profesionalnom i ljubaznom odnosu prema pacijentima čime se podiže viši stepen zadovoljstva korisnika / <i>By insisting on professional and kind relationship with patients which increases the level of user satisfaction</i></p> <p>Oplemenjivanjem radnog prostora izbegavanjem strogog sterilnog medicinskog ambijenta / <i>By refining the work space by means of avoiding strict and sterile medical environment</i></p>
Kako se nosite sa pritiskom konkurencije? / <i>How do you deal with competitive pressures?</i>	<p>Striktnim poštovanjem usvojene strategije i ciljeva u poslovanju / <i>By strictly adhering to the adopted strategy and business goals</i></p> <p>Kvalitetom usluga i poštovanjem dogovorenih rokova / <i>By good quality services and respecting the deadlines</i></p> <p>Prihvatljivim i realnim cenama usluga / <i>By acceptable and realistic prices of our services; and</i></p> <p>Umerenim i dostojanstvenim oglašavanjem u medijima / <i>By moderate and dignified media advertising</i></p>
Kako rešavate promene u zahtevima pacijenata? / <i>How do you deal with changes in the demands of your patients?</i>	<p>Posle pažljivog postupka dijagnostike, svaki pacijent dobija plan terapije koji sadrži: vrstu planiranih usluga, vremenske raspone i finansijske konstrukcije / <i>After a careful diagnostic procedure, every patient gets the therapy plan which contains the type of the planned services, time frames and finances</i></p> <p>Pacijentima se sve ovo usmeno pažljivo objasni korišćenjem termina koji su i njima razumljivi i nakon toga im se ostavi vremena da sve detaljno prouče i razmisle o prihvatanju stomatološkog tretmana ili terapije. Ovakvim načinom dogovaranja, maksimalno se smanjuje broj nedoumica i eventualni nesporazumi. Sve eventualne promene u zahtevima pacijenata rešavamo strpljivo uz dogovor i uz obavezno poštovanje stava da pacijent mora biti zadovoljan / <i>All of this is carefully explained to patients, using the terms they understand and they are given time to study the offer and think about accepting the recommended dental treatment or therapy. This way of negotiating minimizes the number of doubts and possible misunderstandings. We deal with any possible changes in the demands of our patients patiently and by reaching an agreement, respecting the rule that the patient must be satisfied</i></p>
Kako je Vaša strategija prilagođena pitanjima životne sredine? / <i>How is your strategy adapted to environmental issues?</i>	Poštovanjem svih zakonskih propisa iz te oblasti i primenom adekvatnog načina za odlaganje medicinskog otpada (organskog i neorganskog) koji potom preuzima profesionalna institucija koja je kvalifikovana za to / <i>By complying with all legal regulations in that area and using an adequate way of disposing of medical waste (organic and inorganic) which is then taken over by a qualified institution</i>

Struktura / Structure	
Kako je podeljena Vaša organizacija/ tim? / How is your team organized?	Podeljena je prema hijerarhiji: / It is organized respecting hierarchical structure: 1. Vlasnik /1. The owner 2. Rukovodilac stručnog tima /2. The head of the professional team 3. Zaposleni (medicinski deo tima, administrativni i pomoćni deo ima) / 3. Employees (the medical part of the team, the administrative part and the part of the team that provides support)
Kakva je hijerarhija u Vašoj organizaciji? / What does the hierarchy in your company look like?	Vlasnik ordinacije obezbeđuje uslove za adekvatno funkcionisanje i rad ordinacije, dok rukovodilac stručnog tima organizuje, prati i proverava stručni rad / The owner of the practice provides conditions for adequate functioning and work of the practice, whereas the head of the professional team organizes, monitors and checks the professional work
Kako različita odeljenja koordiniraju aktivnosti? / How do different departments coordinate their activities?	Ordinacija funkcioniše kao celina, koju organizuje rukovodilac stručnog tima. (ne postoje različita odeljenja) / The practice functions as a whole which is organized by the head of the professional team (there are no separate departments)
Kako se članovi tima organizuju i usklađuju? / How are team members organized and adjusted?	Kroz međusobnu direktnu saradnju i uputstvima rukovodioca stručnog tima uz poštovanje postavki i pravila savremene struke / Through mutual direct cooperation and with the help of instructions they get from the head of the professional team respecting the settings and rules of the modern practice
Da li su donošenje odluka i kontrola centralizovani ili decentralizovani? / Are decision-making and control centralized or decentralized?	1. Centralizovani - kada je u pitanju organizacija i način pružanja usluga. / Centralized – when it comes to the organization and service provision of services 2. Decentralizovani - kada su u pitanju stručne odluke. / Decentralized – when it comes to professional decisions
Da li je takva podela dobra u skladu sa tim što radite? / Does such division fit what you do?	Apsolutno / Absolutely
Kako su postavljene linije komunikacije (ko kome odgovora)? / What lines of communication do you have (who is responsible to whom)?	Rukovodilac stručnog tima za svoj rad odgovara vlasniku ordinacije a svi ostali zaposleni odgovaraju njemu / The head of the professional team is responsible to the owner of the practice and all other employees respond to the head
Sistem / Structure	
Koji su glavni sistemi koji vode organizaciju (finansijski i ljudski resursi, komunikacija i skladištenje dokumenata)? / What are the main systems that manage the organization (financial and human resources, communication and document storage)?	<ul style="list-style-type: none"> • Vlasnik / The owner • Šef stručnog tima / The head of the professional team • Za finansijski aspekt zadužen je administrativni radnik i eksterno angažovana agencija za finansijsko poslovanje / An administrative worker and an externally hired agency are in charge of the financial aspect • Eksterna zubotehnička laboratorija / An external dental laboratory • Informacioni sistem u kome se čuva i vodi medicinska i finansijska dokumentacija u elektronskom obliku / An information system in which medical and financial documentation is stored and managed in electronic form
Kako je organizovana kontrola i kako se ona prati i procenjuje? / How is control organized and how is it monitored and evaluated?	Glavni kontrolor je rukovodilac stručnog tima koji praktično predstavlja unutrašnju kontrolu, a eksterna kontrola je propisana zakonskim propisima koje sprovodi odgovarajuća služba Ministarstva zdravlja / The chief controlor is the head of the professional team who practically represents internal control, whereas external control is determined by legal regulations and implemented by the appropriate department of the Ministry of Health
Koja interna pravila i procese tim koristi da bi bio na pravom putu? / What internal rules and regulations does the team use in order to stay on the right track?	<ul style="list-style-type: none"> • Poštovanje pravila struke / Respecting the rules of the profession • Pisana naređenja o radnom vremenu, rasporedu, načinu zakazivanja pacijenata i vođenju medicinske i finansijske dokumentacije / Written regulations on working hours, schedule, making appointments, and keeping medical and financial documentation • Raspored rada tokom korišćenja slobodnih dana, godišnjih odmora i odsustava / Work schedule when days off, holidays and leaves are used
Stil upravljanja / The management style	
Koliko je participativan stil upravljanja/ rukovođenja? / How participatory is the management style?	Svako od zaposlenih u svakom trenutku može da iznese svoje viđenje funkcionisanja ordinacije i da eventualne predloge u smislu promena i unapređenja rada. Rukovodilac i vlasnik ordinacije donose odluku o tome i obaveštavaju zaposlene / Every employee can at any time share their own opinion on the functioning of the practice and make possible suggestions in terms of changes and improvements. The head and the owner make the decision and inform the staff
Koliko je to vođstvo efikasno? / How efficient is this type of management?	Dosadašnje uspešno poslovanje i broj pacijenata koji dolaze u ordinaciju pokazuju da jeste / The success we have had so far and the number of patients who come to our practice show it is efficient
Da li zaposleni/ članovi tima imaju tendenciju da budu konkurentni ili kooperativni? / Do employees/team members have a tendency of being competitive or cooperative?	Članovi tima su međusobno kooperativni sa ciljem da kao tim budu konkurentni prema drugim ordinacijama / Team members cooperate with each other with an aim of being competitive to other private practices

Da li u okviru organizacije funkcionišu stvarni timovi ili su to samo nominalne grupe? / <i>Are there real teams within the organization or are these just nominal groups?</i>	Ordinacija je koncipirana kao jedan funkcionalni tim / <i>This private practice is organized as a functional team</i>
Zaposleni / Staff	
Koje pozicije ili specijalizacije su zastupljene u timu? / <i>What positions/specializations are represented in the team?</i>	Stručni tim obuhvata / <i>The professional team includes</i> <ul style="list-style-type: none"> • Specijalistu iz oblasti bolesti zuba / <i>A dental diseases specialist</i> • Specijalistu oralne hirurgije / <i>An oral surgery specialist</i> • Specijalistu maksilofacijalne hirurgije / <i>A maxillofacial surgery specialist</i> • Specijalistu stomatološke protetike / <i>A dental prosthetics specialist</i> • Anesteziologa / <i>An anesthesiologist</i> • Stomatološke sestre / <i>Dental nurses</i> • Administrativnog radnika / <i>An administrative worker</i> • Higijeničare / <i>A dental hygienist</i>
Koje pozicije treba popuniti? / <i>What positions need to be filled?</i>	Zbog organizacije smenskog rada treba angažovati još jednu stomatološku sestru, i jednog administrativnog radnika / <i>In order to organize shift work, it is necessary to hire another dental nurse and one more administrative worker</i>
Da li postoje nedostaci u potrebnim kompetencijama? / <i>Are there any gaps in the required competencies?</i>	Ne postoje, s obzirom na to da su svi zaposleni specijalisti u ordinaciji nastavnici Stomatološkog fakulteta Univerziteta u Beogradu / <i>No, as all specialists in this private practice are also teachers at the School of Dental Medicine University of Belgrade</i>
Veštine / Skills	
Koje su najznačajnije veštine zastupljene u timu? / <i>What are the most significant skills represented in the team?</i>	Stručnost i kvalitet pruženih usluga / <i>Expertise and quality of services provided</i>
Da li postoje nedostaci kada je reč o veštinama? / <i>Are there any gaps in terms of skills?</i>	Ne / <i>No</i>
Po čemu je organizacija poznata, šta najbolje radi? / <i>What is the organization famous for, what is it that it does best?</i>	Naročito je poznata po tzv. „tretmanu u jednom danu“, u okviru kog se sprovodi kompletan stomatološko-protetski i hirurški tretman u jednom danu u uslovima analgesedacije / <i>It is especially famous for the so-called "single-day treatment" in which a complete dental and prosthetic treatment is performed in one day using analgesedation</i>
Da li sadašnji zaposleni u timu imaju sposobnosti da obavljaju posao? / <i>Do the team members possess the necessary skills to do the job?</i>	Apsolutno / <i>Absolutely</i>
Kako se veštine nadgledaju i procenjuju? / <i>How are skills monitored and evaluated?</i>	Rukovodilac stručnog tima svojim potpisom daje saglasnost za predloženi plan terapije. Rukovodilac stručnog tima takođe na dnevnom i nedeljnom nivou kontroliše pružene usluge pregledom pacijenata i uvidom u njihove kontrolne snimke / <i>The head of the professional team gives his consent to the proposed therapy plan by signing the document. The head also controls the services provided on the daily and weekly basis by examining patients and reviewing their control images</i> Pored toga nadgleda se i način komunikacije sa pacijentima gde se od zaposlenih, osim ljubaznosti, zahteva i da koriste pacijentima razumljive termine i izraze / <i>In addition, the way of communication with patients is monitored and, apart from being courteous, the employees are also required to use terms and expressions understandable to patients</i>

nih, ogleđa se kroz prizmu modela 7S, drugim rečima, da bi ustanova bila efektivna treba da poseduje izbalansiran odnos svih sedam elemenata ovog modela.

Opšti cilj ovog rada je bio da se razmotri mogućnost unapređenja upravljanja stomatološkom zdravstvenom zaštitom u Srbiji, što je podrazumevalo da se prevashodno analizira trenutni način upravljanja i poslovanja uz primenu dijagnostičkog modela McKinsey 7S, na primeru privatne prakse.

METOD RADA I INSTRUMENTI ISTRAŽIVANJA

Istraživanje se zasniva na kvalitativnoj analizi sistema upravljanja uz primenu dijagnostičkog modela McKinsey 7S u stomatološkoj ordinaciji „Vukadinović“, koja se nalazi na lokaciji Pazinska 26, opština Voždovac,

The general aim of this paper was to consider the prospects of improving dental health care management in Serbia, which primarily meant analyzing the current managing system with the use of the diagnostic model McKinsey 7S, on an example from private practice.

METODOLOGY AND RESEARCH INSTRUMENTS

The research is based on a qualitative analysis of the management system of the "Vukadinovic" dental practice, 26 Pazinska Street, Voždovac municipality, Belgrade, with the use of McKinsey 7S Model. The practice was founded in 2014 as a micro-level company with around 14 permanent or occasional employees. There are 25 to 30 patients on a daily level. Data from

Beograd. Ordinacija je osnovana 2014. godine kao preduzeće na mikro nivou sa oko 14 stalno ili povremeno angažovanih radnika. Ordinacija na dnevnom nivou usluži između 25 i 30 pacijenata. Podaci iz upitnika dobijeni su posredstvom usmenog intervjua, postavljanjem pitanja rukovodiocu i prisutnim članovima stručnog tima ordinacije.

Intervju je sproveden 9. septembra 2022. godine, uz pomoć anketnog upitnika (Kontrolna lista McKinsey 7S modela) (Prilog 1). Ovaj instrument istraživanja ima 31 pitanje kojim su obuhvaćeni elementi modela. Za strategiju je bilo postavljeno pet pitanja koja su se odnosila na samu strategiju poslovanja, postavljene ciljeve ordinacije, odnose sa konkurencijom, zahteve pacijenata i odnos prema životnoj sredini. Kada se radi o strukturi, sedam pitanja se odnosilo na organizaciju rada ordinacije, hijerarhiju, donošenje odluka i liniju komunikacije. Tri pitanja o sistemima su se odnosila na sistem vođenja ordinacije i sistem kontrole na internom i eksternom nivou ordinacije. Četiri pitanja o zajedničkim vrednostima odnosila su se na vrednosti na kojima je ordinacija izgrađena i na tim koji čini ordinaciju. Za stil su postavljena četiri pitanja o stilu upravljanja i vođenja ordinacije, a dodatna tri pitanja odnosila su se na pozicije i specijalizacije zaposlenih u ordinaciji. Na kraju, postavljeno je pet pitanja koja su se odnosila na najznačajnije veštine zastupljene u timu ordinacije i eventualne nedostatke na tom polju, kao i na način na koji se veštine nadgledaju u ordinaciji i po čemu se ordinacija izdvaja u odnosu na druge.

REZULTATI

Prema modelu McKinsey 7S primenjenom u stomatološkoj ordinaciji „Vukadinović“, osnovna strategija ordinacije je da održi svoju uspešnost u poslovanju i ojača svoju poziciju među vodećim privatnim stomatološkim ordinacijama u Republici Srbiji. Ordinacija to postiže konstantnim praćenjem razvoja novih tehnologija i njihovim uvođenjem u svakodnevni rad, kontinuiranim stručnim usavršavanjem zaposlenih, ulaganjem i obezbeđivanjem najsavremenijih preparata i medicinskih sredstava u stomatologiji, prilagođavanjem dostupnosti svojih usluga i insistiranjem na ljubaznom i profesionalnom odnosu prema pacijentima (Tabela 1).

U ordinaciji je zastupljena tradicionalna vertikalna organizaciona struktura, gde hijerarhija počinje od vlasnika ordinacije koji se nalazi na vrhu; na sledećem nivou je rukovodilac stručnog tima, a ispod njega ostali zaposleni koji su podeljeni na medicinski, administrativni i pomoćni deo tima. Rukovodeći deo tima ordinacije čine vlasnik ordinacije i rukovodilac stručnog tima, dok se stručni tim sastoji od medicinskog dela tima koji obuhvata specijaliste iz određenih grana stomatologije

the questionnaire were obtained by interviewing the manager and the present members of the professional team.

The interview was conducted on September 9th, 2022, using a survey questionnaire (McKinsey 7S Model Checklist) (Attachment 1). This research instrument contains 31 questions that cover the elements of the Model. Strategy was covered with five questions related to the business strategy itself, the set goals of the dental practice, its relations with competitors, demands of its patients and its attitude to the environment. When it comes to Structure, there were seven questions related to the organization of the work process, hierarchy, making decisions and the line of communication. Three questions on Systems were referred to the management system and control system on the internal and external level of the dental practice. The four questions on Shared values referred to the values on which the dental practice was built and its team. Style was covered by four questions related to the management style of the dental practice and additional three questions referred to the positions and specializations of the employees. Finally, there were five questions related to the most significant skills represented in the team and possible deficiencies in that field, as well as the way in which skills were monitored in the dental practice and what distinguished this practice from others.

RESULTS

According to McKinsey 7S Model applied in "Vukadinovic" dental practice, the basic strategy of the practice is to remain successful in business and strengthen its position among the leading private dental practices in the Republic of Serbia. The practice achieves this by constantly following the development of new technologies and introducing them in the workplace, by continuous professional development of employees, by investing in and providing the most modern dental equipment and supplies, by adjusting the availability of its services and by insisting on kind and professional attitude to patients (Table 1).

The practice has the traditional vertical organizational structure, with the owner of the practice at the top of hierarchy, followed by the head of the professional team and other employees divided into medical, administrative and support team. The managerial part of the team consists of the owner and the head of the professional team, whereas the professional team consists of the medical part of the team which includes specialists from certain branches of dentistry. The financial part of the team consists of an administrative worker who is in charge of the finances within

Tabela 1. Meki elementi dijagnostičkog modela McKinsey 7S u stomatološkoj ordinaciji „Vukadinović“

Table 1. The soft elements of the McKinsey 7S diagnostic model at the "Vukadinovic" dental practice

Zajedničke vrednosti / Shared values	Veštine / Skills	Zaposleni / Staff	Stil / Style
<ul style="list-style-type: none"> • stručnost / expertise • preciznost / precision • ljubaznost / kindness • dostupnost / availability • kvalitet / quality • kolegijalnost / collegiality • kooperativnost / cooperativeness 	<ul style="list-style-type: none"> • stručnost / expertise • kvalitet rada / quality of work • profesionalnost / professionalism • iskustvo / experience • veštine / skills • kontinuirano osvežavanje znanja / continuous refreshment of knowledge • stručno usavršavanje zaposlenih / professional development of employees 	<ul style="list-style-type: none"> • vlasnik ordinacije / the owner of the practice • rukovodilac stručnog tima / the head of the professional team • specijalisti iz oblasti maksilofacijalne i oralne hirurgije, specijalista iz oblasti bolesti zuba i ortopedije vilica, anesteziolog / maxillofacial and oral surgery specialists, oral and dental diseases and jaw orthopedics specialist, anesthesiologist • specijalisti stomatološke protetike / dental prosthetics specialists • stomatološke sestre / dental nurses • finansijsko- administrativni radnici / financial and administrative workers • higijeničari / dental hygienists 	<ul style="list-style-type: none"> • autokratski / autocratic • demokratski / democratic

je. Finansijski deo tima sastoji se od administrativnog radnika koji obavlja finansijske poslove unutar ordinacije i eksterno angažovane agencije za finansijsko poslovanje. Eksterna zubotehnička laboratorija je zadužena za poslove izrade metalokeramičkih, bezmetalnih i keramičkih krunica, mostova i proteza, proizvodnju implanta itd.

Sistem kontrole u ordinaciji „Vukadinović“ postoji na internom i eksternom nivou. Interni nivo kontrole sprovodi rukovodilac stručnog tima tako što na dnevnom ili nedeljnom nivou kontroliše kontinuitet i kvalitet usluga pruženih pacijentima, način komunikacije sa pacijentima i celokupan stručni rad. Eksternu kontrolu sprovodi odgovarajuća služba Ministarstva zdravlja uz pomoć formiranih zakonskih propisa. Medicinska i finansijska dokumentacija se čuva i vodi elektronski u posebnom informacionom programu.

Stil upravljanja ordinacijom podrazumeva koncept funkcionalnog tima. U ordinaciji je zastupljen autokratski stil rukovođenja gde vlasnik i rukovodilac stručnog tima donose odluke o organizaciji i načinu pružanja usluga pacijentima. S druge strane, demokratski stil je prisutan u segmentu stručnih odluka gde je uključen ceo medicinski tim zaposlenih specijalista. To znači da svako od zaposlenih može da iznese svoje stavove o funkcionisanju rada ordinacije, i dâ eventualne predloge u smislu unapređenja rada i uvođenja promena.

Stomatološka ordinacija „Vukadinović“ se ističe veštinama kao što su stručnost zaposlenih i kvalitet pruženih usluga. Naglasak se stavlja na kvalitetan odabir medicinskog tima i njegovu profesionalnost, iskustvo, veštine. Ordinacija se zalaže za kontinuirano osvežavanje znanja i stručno usavršavanje zaposlenih, obezbeđivanjem zaposlenima mogućnosti praćenja edukativ-

the practice and an external agency for financial operations. An external dental laboratory is responsible for the production of metal-ceramic, metal-free and ceramic crowns, bridges and prostheses, implants, etc.

The system of control at "Vukadinovic" dental practice exists on internal and external level. The head of the professional team is in charge of internal control and controls, on a daily or weekly basis, the continuity and quality of services provided to patients, communication with patients and the overall professional work. The external control is performed by an appropriate department of the Ministry of Health following established legal acts. Medical and financial records are stored and kept electronically in a separate information system.

The practice management style implies the concept of a functional team. The office has an autocratic management style where the owner and the head of the professional team make decisions on the organization and the way of providing services to patients. On the other hand, a democratic style is present when professional decisions are made, and the entire team of specialist employees takes part in it. This means that every employee can express their views on the organizational process and possibly make suggestions in terms of improving work and introducing change to its.

The "Vukadinovic" dental practice stands out for its skills such as expertise of its employees and the quality of services provided. Emphasis is put on quality selection of the medical team and its professional competence, experience, and skills. The practice is committed to the continuous refreshment of knowledge and professional development of employees, by providing the employees with opportunities to follow educational seminars and lectures so that they are up to date with

nih seminara i predavanja kako bi bili u toku sa novim znanjima u oblasti stomatologije. Ordinacija se izdvaja po „tretmanu u jednom danu“ u okviru kog se sprovodi kompletan stomatološki, protetski i hirurški tretman u jednom danu u uslovima analgo-sedacije.

DISKUSIJA

Studija slučaja McKinsey 7S primenjena na stomatološku ordinaciju „Vukadinović“ omogućila je identifikovanje jakih i slabih strana ordinacije. Kada je reč o jakim stranama, izdvajaju se jačanje strategije usmereno na održavanje uspešnosti rada ordinacije ulaganjem u najbolje i najsavremenije preparate i medicinska sredstva u stomatologiji, u IT opremu, u stručno usavršavanje svih zaposlenih, te insistiranje na profesionalnom i ljubaznom odnosu među zaposlenima, kao i između zaposlenih i pacijenata. Od internih pokazatelja, izdvaja se medicinski deo tima i njihova stručnost i veštine koji najvećim delom doprinose uspešnom poslovanju ordinacije. Donošenje odluka je centralizovano kada je u pitanju organizacija i pružanje usluga pacijentima, a decentralizovano kada su u pitanju stručne odluke. Slabost ordinacije se ispoljava u nedostatku stomatoloških sestara u odnosu na broj zaposlenih specijalista i nedostatku administrativnog kadra za potrebe organizacije smenskog rada. Primera radi, Hmielevska i saradnici [17] koji su primenili McKinsey 7S dijagnostički model na organizacioni učinak javnih bolnica, zaključili su da više pažnje treba posvetiti mekim faktorima modela (zajedničkim vrednostima, zaposlenima, veštinama i stilu) jer se pokazalo da oni igraju značajniju ulogu u upravljanju bolnicom. Tvrdi elementi (strategija, struktura i sistemi) su nesporno važni aspekti organizacije, ali samo u ograničenoj meri određuju učinak menadžmenta, odnosno organizacione aktivnosti i odluka koje vode ka ostvarenju zacrtanih ciljeva. Kao i u konkretnom primeru, slaba strana ordinacije „Vukadinović“ je takođe „meki“ faktor – nedostatak stomatoloških sestara i administrativnog radnika za pružanje informacija pacijentima putem telefona, imejla, ili licem u lice, zakazivanje pregleda i intervencija, naplatu pruženih usluga, itd. Samim tim, administrativne dužnosti preuzima stomatološka sestra čiji primarni opis posla podrazumeva asistiranje specijalistima i brigu o pacijentima, usled čega dolazi do usporavanja rada i efektivnosti poslovanja, kao i ograničenosti u uspostavljanju smenskog rada.

Treba napomenuti da je Uredba o Nacionalnom programu preventivne stomatološke zdravstvene zaštite objavljena 2009. godine [18], što je jasan pokazatelj da je neophodno inovirati Nacionalni program preventivne stomatološke zaštite zasnovan na savremenom konceptu organizacije stomatološke zdravstvene zaštite

new knowledge in the field of dentistry. This practice stands out for its "single-day treatment" which allows patients to have a complete dental, prosthetic and surgical treatment in just one day using analgo-sedation.

DISCUSSION

McKinsey 7S case study applied to the "Vukadinovic" dental practice helped identify the strengths and weaknesses of this private practice. Its strong points include strengthening the strategy for maintaining success at work by investing in the best and most up-to-date materials and medical devices in dentistry, IT equipment, and professional training of employees, and by insisting on professional and kind relationship among employees and between employees and patients as well. When it comes to internal indicators, what stands out is the medical part of the team and their expertise and skills that greatly contribute to the successful work of the practice. Decision-making is centralized when it comes to organization and providing services to patients, whereas it is decentralized in case of professional decisions. The weaknesses of this private practice are manifested in the lack of dental nurses when compared to the number of dental specialists as well as the lack of administrative staff for the purpose of organizing shift work. For example, Chmielewska et al. [17], who applied the McKinsey 7S Model to the organizational performance of public hospitals, concluded that more attention should be paid to the soft elements of the model (i.e. shared values, staff, skills and style) as they have been shown to play a more significant role in managing a hospital. Hard elements (strategy, structure and systems) are certainly important aspects of organization, but only to a limited extent do they determine the performance of management, i.e. organizational activities and decisions that lead to the achievement of set goals. Like in the given example, the weak point of "Vukadinovic" dental practice is related to a soft element – the lack of dental nurses and administrative staff for giving information to patients via phone, e-mail, or face-to-face, scheduling examinations and treatments, charging for the provided services, etc. Due to this lack, administrative duties are taken over by a dental nurse whose primary job is to assist specialists and take care of patients, so there is a delay in work and effectiveness of the business, as well as the limitation of shift work.

It should be noted that the Regulation on the National Program of Preventive Dental Health Care was published in 2009 [18], which is a clear indication that it is necessary to refresh the National Program of Preventive Dental Health Care based on the contemporary concept of the organization of dental health care,

te, koji bi i državnu i privatnu praksu unapredio a prema ugledu na programe evropskih zemalja i zemalja čiji su programi doneli očekivane rezultate.

Prema pomenutoj Uredbi, tada je u Srbiji 69,7% trogodišnjaka imalo sve zdrave zube a cirkularni karijes 8,3% pregledane dece, dok je za trećinu manje (20,6%) šestogodišnjaka imalo sve zdrave zube, a još manje adolescenata - 14% dvanaestogodišnjaka i 11,3% petnaestogodišnjaka. Nasuprot tome, rezultati brojnih epidemioloških studija u populaciji dece uzrasta od 12 godina, ukazivali su da je epidemija karijesa gotovo zaustavljena u zemljama Zapadne Evrope i SAD [18]. Metode za postizanje ovakvih rezultata se ogledaju u sprovođenju redovnih sistematskih školskih promotivnih programa i programa zdravstvenog vaspitanja, poboljšanju higijene usta i zuba, zdravoj ishrani, kontinuiranoj primeni fluorida i usvajanju zdravog stila života. Takođe, u razvijenijim zemljama resursi za brigu o zdravlju su usmereni više na preventivnu strategiju očuvanja zdravlja jer je ona dostupnija i delotvornija u odnosu na visoku cenu tradicionalnih kurativnih mera za tretmane stomatoloških oboljenja.

Primenom modela McKinsey 7S u ordinaciji „Vukadinović“, i na osnovu dobijenih rezultata, dolazi se do zaključka da se pozitivni rezultati kada je reč o zdravlju usta i zuba kod dece mogu postići primenom besplatnih preventivnih pregleda i povećanjem svesti o važnosti prevencije. To je moguće učiniti i davanjem besplatnih uzoraka za očuvanje higijene usta i zuba i primenom adekvatne edukacije o važnosti zdravog stila života i ishrane prilagođene deci određenog uzrasta.

S tim u vezi, prema podacima iz Republičkog fonda za zdravstveno osiguranje Republike Srbije ostvarena je mogućnost kolektivnog dobrovoljnog osiguranja stomatoloških usluga, koje podrazumeva lečenje i popravku zuba, skidanje kamenca, obradu paradontalnog džepa, vađenje i plombiranje zuba kao i druge usluge koje spadaju u vrstu osnovnih stomatoloških usluga koje su navedene u Posebnim uslovima za osiguranje stomatoloških usluga [19]. Dobar primer daje Fond za zdravstveno osiguranje Republike Srpske, koji je sa određenim brojem privatnih stomatoloških ordinacija potpisao ugovore na osnovu kojih privatne klinike mogu pružati stomatološke usluge osiguranicima Fonda i te usluge fakturisati Fondu. To se postiže u saglasnosti sa propisima Republike Srpske iz oblasti zdravstvenog osiguranja i korišćenjem STOMIS (Stomatološki informacioni sistem) programa koji podržava informatičko izveštajne obaveze ordinacije koje su definisane ugovorom. Stomis obuhvata podatke o ordinaciji, lekarima, laboratorijama koje pružaju protetske usluge i podatke o pacijentima, kao i ažuriran cenovnik koji je takođe dostupan na sajtu Republičkog

which would improve both public and private practice according to the programs of European countries and those countries whose programs have already achieved expected results.

According to the abovementioned Regulation, at the time there were 69.7% of three-year-old children with all healthy teeth and 8.3% had circular caries (early childhood caries), whereas the number of six-year-old children who had all healthy teeth was smaller by a third (20.6%) and the percent was even smaller in the population of adolescents – 14% of 12-year-olds and 11.3% of 15-year-olds. In contrast, the results of numerous epidemiological studies in the population of children aged 12 indicated that the caries epidemic had almost been stopped in the counties of Western Europe and the USA [18]. Methods for achieving such results include the implementation of regular promotional check-ups and health education programs at school, the improvement of oral hygiene, a healthy diet, continuous application of fluoride and adoption of a healthy lifestyle. Besides, in developed countries health care resources are more focused on preventive health care strategy as it is more accessible and more effective compared to the high cost of traditional curative measures used for the treatment of dental diseases.

By applying the McKinsey 7S Model to "Vukadinovic" dental practice, and according to the results obtained, it has been concluded that positive results concerning oral and dental health in children can be achieved through free preventive examinations and increasing awareness of the importance of prevention. Such results can also be achieved by giving free samples for preserving oral and dental hygiene and by adequate education on the importance of a healthy lifestyle and diet adapted to children of certain age.

Using the data of the National Health Insurance Fund of the Republic of Serbia, the possibility of collective voluntary insurance of dental services has been realized and it includes treating and repairing teeth, removing tartar build-up, treating periodontal pockets, extracting and filling teeth, and other services that belong to the category of basic dental services and that are listed in the Special conditions within dental insurance [19]. A good example is given by the Republic of Srpska Health Insurance Fund, which has signed contracts with a certain number of private dental practices according to which private clinics can provide dental services to the Fund's policy holders and invoice the Fund for those services. It is done in accordance with the regulations of the Republic of Srpska in the field of health care insurance and by using STOMIS (Dental information system) program which supports the IT reporting obligations of the practice defined by the

fonda [20]. Republika Srbija nema ostvarenu ovakvu saradnju između Republičkog fonda za zdravstveno osiguranje i privatnih klinika dentalne medicine. Tome bi pomoglo uvođenje plana privatnih stomatoloških ordinacija u pripravnosti po ugledu na Spisak plana pripravnosti koji je transparentan i nalazi se na portalu Republičkog fonda za zdravstveno osiguranje Republike Crne Gore [21]. Za razliku od ovog primera dobre prakse, stomatološka zdravstvena zaštita Republike Srbije nema definisan Plan pripravnosti na ovakav način, iako vrlo verovatno postoji mogućnost da manji broj privatnih klinika obavlja pripravnost u većim gradovima Republike Srbije.

Po ugledu na razvijenije zemlje, ulaganja u stomatologiju u Srbiji treba usmeriti na programe prevencije i sprovođenje redovnih sistematskih pregleda dece školskog uzrasta, promotivne programe, programe zdravstvenog vaspitanja, poboljšanje higijene, poboljšanje kvaliteta života u cilju sprečavanja razvoja oboljenja i zapuštanja bolesti usta i zuba. Iako je sistem stomatološke zdravstvene zaštite Republike Srbije ograničen u domenu pružanja usluga koje su na teret Republičkog fonda za zdravstveno osiguranje (jer se pružanje usluga odnosi na usluge koje se pružaju u ustanovama javnog sektora i određenoj populaciji), Pravilnik o posebnim uslovima za osiguranje stomatoloških usluga omogućava ostvarivanje osnovne stomatološke intervencije na teret Fonda i u privatnim klinikama. U tom smislu, ordinacija „Vukadinović“ sa svojim modelom 7S treba da razmotri ovu mogućnost.

Predlog mera za unapređenje menadžmenta stomatološke zdravstvene zaštite zasniva se na mogućnosti proširenja pružanja stomatoloških usluga koje će biti pokrivene od strane Fonda za zdravstveno osiguranje kako bi pored trudnica, dece do 18 godina, studenata i teško obolelih lica, i druga kategorija stanovništva mogla da koristi usluge koje će pasti na teret zdravstvenog osiguranja. Dalji predlog mera se zasniva i na mogućoj saradnji između zdravstvenog osiguranja i privatne prakse, gde bi privatne ordinacije mogle da pružaju stomatološke usluge koje su definisane ugovorom na isti način kao i javne ustanove koje pružaju stomatološku zdravstvenu zaštitu. Treba razmotriti vid osiguranja za pomenute kategorije građana kojim bi se obezbedile ove usluge, i to bi dovelo do smanjenja dugog čekanja na pregled stomatologa ili specijaliste, i smanjenja mogućnosti zapuštanja oboljenja usta i zuba kod pacijenata, koji su u nemogućnosti da plate stomatološke usluge po definisanim visokim komercijalnim cenama. Za modernizaciju poslovanja stomatološke zdravstvene zaštite, potrebno je inoviranje Nacionalnog programa preventivne stomatološke zdravstvene zaštite kroz participaciju svih zaintereso-

contract. STOMIS includes the data on the practice, its doctors, laboratories that provide dental prosthetic services, and data on patients, as well as the updated price list that is also available on the website of the Republic Fund [20]. The Republic of Serbia has not achieved this type of cooperation between the National Health Insurance Fund and private dental practices. The first step towards this type of cooperation would be the introduction of a standby plan for private dental practices based on the transparent Standby plan list which can be found on the website of the National Fund of Health Insurance of the Republic of Montenegro [21]. Unlike this good practice example, dental health care of the Republic of Serbia does not have a defined Standby plan, although it is very likely that a few private practices could do standby arrangements in larger towns of the Republic of Serbia.

Following the example of more developed countries, investments in dentistry should be directed at prevention programs and the implementation of regular check-ups for schoolchildren, promotional programs, health education programs, improvement of hygiene, improvement of the quality of life so as to prevent the development of diseases and the neglect of oral and dental diseases. Although the dental health care system of the Republic of Serbia is limited in the domain of providing services that are the responsibility of the National Health Insurance Fund (because the provision of services refers to the services provided in public sector institutions and only to certain categories of population), the Rule book on special conditions for insuring dental services enables basic dental procedures at the expense of the Fund in private practices as well. In this sense, "Vukadinovic" dental practice, with its 7S Model, should consider this possibility.

The proposal of measures for improving dental health care management is based on the prospects of expanding the provision of dental services covered by the National Health Insurance Fund so that in addition to pregnant women, children up to 18 years of age, students and seriously ill individuals other categories of the population could also use the services covered by their health insurance. Further proposal of measures is based on a prospective cooperation between health insurance and private practice, where private practices would be able to provide dental services defined by the contract in the same way as public sector institutions which provide dental health care. It would be necessary to consider the type of insurance for the abovementioned categories who these services would be provided for, which would result in shorter waiting lists for a dentist or dental specialist and fewer cases of neglect of oral and dental diseases in patients who

vanih strana koje učestvuju i doprinose vrednovanju očuvanja zdravlja usta i zuba stanovništva, izdvajanje značajnijih sredstava iz državnog budžeta za stomatološku zdravstvenu zaštitu, kao i proširenje okvira pružanja usluga koje idu na teret Republičkog fonda za zdravstveno osiguranje na sve kategorije stanovništva Republike Srbije, uspostavljanje saradnje između Republičkog fonda za zdravstveno osiguranje i privatnih klinika dentalne medicine (na primer, dobrovoljno zdravstveno osiguranje), i uvođenje Plana lekara u pripravnosti u svim gradovima Republike Srbije.

ZAKLJUČAK

Efektivnost stomatoloških ustanova, javnih ili privatnih, ogleda se kroz prizmu modela 7S - da bi ustanova bila efektivna treba da postoji ravnoteža svih sedam elemenata ovog modela. Analiziranjem svakog elementa modela u privatnoj ordinaciji iz ovog rada, dobile bi se precizne slike elemenata koje je potrebno unaprediti, kao i onih koje treba održavati, jer donose dobre rezultate poslovanja. Predlog mera za unapređenje menadžmenta stomatološke zdravstvene zaštite u ordinaciji „Vukadinović“ odnosi se na meki faktor, i ispitivanje mogućnosti pružanja stomatoloških usluga trudnicama, deci do 18 godina, studentima i teško obolelim licima na teret zdravstvenog osiguranja.

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LITERATURA / REFERENCES

1. Glossary of terms used in the HFA Series No 1–8. Geneva: WHO; 1984.
2. Petrović D. Menadžment i organizacija. Beograd: Fakultet organizacionih nauka; 2012.
3. Mićović P. Zdravstveni menadžment - izvodi iz knjige. Zdravstvena zaštita. 2009; Vol. 38(4):67-74. doi: 10.5937/ZZ0904067M
4. Mićović P. Zdravstveni menadžment. Zdravstvena zaštita. 2009; 38(5):73-78. doi: 10.5937/ZZ0905073M
5. Mitrović M. Organizacija i menadžment u zdravstvu Srbije. FBIM Transactions. 2013;1(2):145-58.
6. Zakon o zdravstvenoj zaštiti („Službeni glasnik RS“, br. 25/2019)
7. Zakon o zdravstvenom osiguranju („Službeni glasnik RS“, br.25/2019)
8. Uredba o planu mreže zdravstvenih ustanova („Službeni glasnik RS“, br. 5/2020, 11/2020, 52/2020, 88/2020, 62/2021, 69/2021, 74/2021 i 95/2021)

are not able to pay for dental services at the defined high rates. In order to modernize dental health care, it is necessary to improve the National program of preventive dental health care through participation of all interested parties who participate and contribute to the evaluation of the preservation of the oral health of the population, to allocate significant funds from the national budget to dental health care, as well as to expand the scope of service provision covered by the National Health Insurance Fund to include all categories of the population of the Republic of Serbia, to establish cooperation between The National Health Insurance Fund and private dental practices (e.g. voluntary health insurance) and to introduce a standby plan that would include doctors in all places of the Republic of Serbia.

CONCLUSION

The effectiveness of dental institutions, both public and private, is reflected through the prism of 7S Model – for an institution to be effective, there should be a balance between all seven elements of the model. By analyzing each element of the model in the private practice from this paper, we would get a precise picture of the elements that need to be improved, as well as those that need to be maintained as they bring good business results. The proposal of measures for improving dental health care management at the "Vukadinovic" dental practice refers to a soft factor and the examination of the possibility of providing dental services to pregnant women, children up to 18 years of age, students and seriously ill individuals at the cost of health insurance.

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9. Todorović J, Popović N, Piperac P, Đurđević-Todorović S, Terzić-Šupić Z. UNMET DENTAL HEALTH CARE NEEDS IN SERBIA. *Serbian Journal of the Medical Chamber*, 2021;2(2):43-51. DOI: 10.5937/smcl2-32309
10. Galli, B.J., 2018. Change management models: A comparative analysis and concerns. *IEEE Engineering Management Review*, 46(3), pp.124-32.
11. Shaqrah, A.A., 2018. Analyzing business intelligence systems based on 7S model of McKinsey. *International Journal of Business Intelligence Research (IJBIR)*, 9(1), pp.53-63.
12. Channon, D.F. and Caldart, A.A., 2015. McKinsey 7S model. *Wiley encyclopedia of management*, pp.1-1.
13. Hidayat, A.A.A. Organizational Effectiveness with Mckinsey 7s Model Approach on Public Health Center in Madura, Indonesia. *International Journal of Psychosocial Rehabilitation*. Vol. 24 (7). 2020.
14. Malan A. Applying McKinsey's 7s model within managed healthcare systems (MHS) to assess the organisation's effectiveness and ability to adapt [short dissertation]. *Rand Afrikaans University*; 2003.
15. Daft L.R. *Organization Theory and Design*, Tenth Edition-Cengage Learning. 2008.
16. Northouse G.P., *Liderstvo – teorija i praksa*, Data status, Beograd, 2008.
17. Chmielewska, M., Stokwiszewski, J., Markowska, J. et al. Evaluating Organizational Performance of Public Hospitals using the McKinsey 7-S Framework. *BMC Health Serv Res* 22, 7 (2022). <https://doi.org/10.1186/s12913-021-07402-3>
18. Uredba o Nacionalnom programu preventivne stomatološke zdravstvene zaštite. („Službeni glasnik RS“, br. 22 od 30.marta 2009)
19. Posebni uslovi za osiguranje stomatoloških usluga. 2011. Dostupno na: https://rfzo.rs/download/dobrovoljno/Posebni_uslovi_stomatologija.pdf. poslednji pristup: septembar 2022.
20. Izveštaj za FZO RS - Fond zdravstvenog osiguranja Republike Srpske. Dostupno na: http://www.stomis.com/sr/izvestaj_fzrs.htm. Poslednji pristup: septembar 2022.
21. Fond za zdravstveno osiguranje Crne Gore. Dostupno na https://fzocg.me/page.php?type=stomatologija_clanak&id=6). Poslednji pristup: septembar 2022.