GROWTH LEADERSHIP

The first hundred days in a hospital growth role

Understand the machine that turns demand into patients before adding any demand. Check the pipes before adding fuel.

Swipe →

Gaurav Phogat
gauravphogat.com



WHY DIFFERENT

Almost none of the funnel is yours

- Doctors decide who they see and when
- The contact centre may report to operations
- Pricing sits with finance, empanelment with another team
- The CRM may have been configured for billing, not patients

Clinicians have seen marketing leaders come and go. They judge whether anything you touch gets better.

Gaurav Phogat
gauravphogat.com



DAYS 1 TO 30

Spend the first month on the floor

- Call your own number at different times and ask for a specialist
- Book through the website, send a WhatsApp, walk into OPD
- Sit beside contact centre agents for a few shifts
- Stand at registration during a busy morning
- Write down everything, across every unit

Gaurav Phogat
gauravphogat.com



WEEK ONE DATA

Ask for what exists, however imperfect

- Enquiries by source, specialty and unit
- Appointments booked and attended, by doctor and unit
- Admissions and procedures with payer mix
- Marketing spend by channel and unit, and the contracts
- Doctor availability against demand, feedback and reviews

Enquiries that cannot be linked to appointments is itself a finding, often the most important one.

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WHO TO MEET

In order of influence, not seniority

FIRST	The medical director, in week one
SECOND	Unit heads, contact centre, front office, billing
THIRD	CFO, head of IT, head of HR
FOURTH	High-volume consultants, new joiners, one sceptic
LAST	Agencies and vendors. They can wait.

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DAYS 30 TO 60

Find the leaks and rank them

- Calls unanswered at peak times
- Web enquiries waiting too long for a callback
- Doctor unavailable while a colleague has open slots
- International and insurer enquiries in inboxes nobody reviews
- Listings with wrong timings or old phone numbers

Share the ranked list with unit heads first. If it surprises them, you have got something wrong.

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gauravphogat.com



FIX ONE THING

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Pick one leak that is important, visible to frontline teams and fixable within weeks without new budget or technology.

Credit the frontline team generously. The story must be about the hospital, not about marketing.

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gauravphogat.com



NOT YET

Tempting and almost always premature

- Rebrand
- Replace the CRM or the website
- Change agencies, unless one is clearly causing harm
- Launch a big campaign into a leaking machine
- Reorganise the team in the first weeks

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DAYS 60 TO 100

Write the plan they will sign

1. What you found, in plain language, leaks ranked
2. What to fix first, and who owns each fix
3. What you need: decisions, access, people, budget
4. How progress is reported, in measures finance agrees with

Review the draft with the medical director and two unit heads before the CEO sees it.

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READ THE FULL GUIDE

The first hundred days, in full

- Reading the monthly pack with finance
- The trap of agreeing to every early request
- A Monday-to-Monday starting schedule
- gauravphogat.com/first-hundred-days-hospital-growth-role

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