AGENCY SCOPE

Scoping a hospital digital agency properly

What a complete scope covers, what stays in-house, and the red flags that mean walk away. Written from the client side.

Swipe →

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A COMPLETE SCOPE

Nine areas every scope must name

SCOPE	Service lines and units, in priority, with a demand goal
CHANNELS	Search, social, SEO, content, listings, and what is excluded
ASSETS	Hospital owns accounts, analytics, listings; agency gets access
DATA	Who configures tracking, how leads and outcomes flow
MEASURE	Definitions and targets through to treated patients

Plus compliance, deliverables, named people and commercials with fees separate from media.

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KEEP IN-HOUSE

Never outsource these five

- Patient conversations: contact centre and WhatsApp inbox
- Consent, patient data and CRM configuration
- Clinical review of every medical claim and content piece
- Brand architecture and positioning decisions
- Final approval of spend by service line and unit

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BEFORE SIGNING

Six questions to ask

1. Which hospital clients have you worked with? Can we speak to one?
2. How will you get outcome data back from our CRM?
3. Who owns the ad accounts, pages and content if we part?
4. How do you check medical claims and advertising compliance?
5. Who exactly works on our account, and how senior are they?

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RED FLAGS

Walk away when you see these

- The agency wants to create and own your ad accounts
- Guaranteed rankings, leads or AI citations
- Reports full of impressions and clicks, no appointments
- Senior team in the pitch, junior team on the account
- Media and fees bundled so you cannot see either

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HOW TO MEASURE

Leads are a start, but booked appointments, honoured appointments and cost per treated patient are what matter. Agree definitions in writing.

A qualified lead means different things to different teams.

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MONTHLY SCORECARD

Six lines, reviewed every month

- Enquiries by channel and service line, with source quality
- Booked and honoured appointments from agency channels
- Cost per treated patient where data allows
- Delivery against plan, compliance issues raised and resolved

Review monthly on the scorecard, quarterly on strategy.

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START AND END WELL

Onboarding and exit, written in at the start

ACCESS	Grant hospital-owned accounts; never let them create new ones
SHARE	Stages, sources, claims library and review process
INTRODUCE	The contact centre and CRM team, outcomes depend on them
EXIT	Confirm ownership, remove access, collect documentation, hand over

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READ THE FULL GUIDE

Hospital agency scope, in full

- The scope template, section by section
- One agency or several for multi-unit groups
- The RFP template for shortlisted agencies
- gauravphogat.com/hospital-digital-agency-scope

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