ABSTRACT

Analyzing the Coverage of Public Health Insurance in Iran, 2015

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ABSTRACT

Background: The aim of this study was to analyze the organization’s goals in the field of public insurance coverage across the country. This study analyzed the demographic situation and estimated the potential financial power of the Iranian households.

Methods: This study was an applied survey. The number of study population was 7,384,626 insured people and the sample size was 22,816 members (8,832 households) who were elected using pre-classification method. Data collection was performed in 31 provinces by income-cost questionnaire during 2015.

Results: About 83.7% of the covered households earn lower than one million Tomans per month. Sixteen percent were absolutely poor (with no income) and 44% were low-income households. Sixty percent of the households earned below the approved minimum wage of the government. The average of ability to pay for monthly insurance was 6,800 Toomans per person. The covered households with health insurance were in a weak status in education, occupation, earnings, ownership, enjoying the facilities and well-being.

Conclusion: Considering the financial contribution of 60% of the insured people, there is a capacity to provide appropriate health policies. The high rate of youth (mean = 32 years), the low rate of smoking (6%) and chronic diseases (2%) in the covered population, promises that with 98% of healthy members, a lower level of referral and losses will be imposed to the organization.

Keywords: Public Health Insurance, Iranian insurance, Insured persons ability, Insurance coverage, Health Insurance Organization of Iran.
**National Congress in Health Management**

26-28 October 2016, Tabriz, Iran

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**ABSTRACT**

**Background:** Knowledge management is critical in the universities - as an organization that seeks to advance and maintain a competitive advantage. The current study conducted to evaluate knowledge management and its effective factors in Ahvaz University of Medical Sciences.

**Methods:** This was a cross-sectional study. The sample was randomly determined using Cochran formula to be 83 faculty members of the university. Data Collection tools were questionnaire. Data analysis was conducted by descriptive statistics (frequency, percentage, etc.) and Spearman correlation coefficient at significant level of 0.05 and SPSS 16.0.

**Results:** The results showed that IT status at this university had high scores by frequency of 72.3%. Other aspects of knowledge management had moderate scores. There was a significant correlation between knowledge management and organizational culture, information technology, human resources and training (P<0.05). The highest and lowest correlations were between the organizational culture (0.747) and information technology (0.349), respectively.

**Conclusion:** According to results, there was a direct connection, among knowledge management, organizational culture factors, information technology, human resources and training. Paying special attention to such structures is needed to successful implementation of knowledge management.

**Keywords:** Knowledge management, Organizational culture, Knowledge.
ABSTRACT 3

The Level of Complying With the Patient’s Rights Charter for the Hospitalized Children in Tehran Public Hospitals

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ABSTRACT

Background: Few studies have evaluated the patient’s rights charter for children. The purpose of this study was to determine the level of complying with the patient’s rights charter for children by health care providers in Tehran public hospitals.

Methods: This was a descriptive-analytical study conducted in 2011. The setting was all children’s hospitals affiliated with a university in Tehran. The sample consisted of 251 parents of the children admitted in the hospitals. Data collection tool was the standard questionnaire of complying with the patient’s rights. Data analysis done using SPSS 7.

Results: According to results, the most of parental satisfaction were relate to the confidentiality of medical records, being treated with respect from the health care workers and access to nurses during hospital stay. Also the most of parental dissatisfaction were related to introducing nurses to parents and children on arrival, introducing the financial and social welfare centers to parents and giving enough information about tariffs and insurance coverage.

Conclusion: According to results, parents were more satisfied with complying with the occupational requirements, respect to the patient and access to nurse. They, also, were dissatisfied with the Lack of transparency aspects of financial costs of care.

Keywords: Observance, Children, The patient’s rights charter
ABSTRACT

Background: Due to the changing environments of organizations, providing new solutions, intelligent and use of maximum intellectual abilities in order to increase organizational agility is essential. This study aimed to determine the relationship between organizational intelligence and organizational agility among the staff of Tehran University of Medical Sciences.

Methods: This was a descriptive study carried out in 2016. The sample consisted of 231 employees of the deputy of University of Medical Sciences of Tehran who selected through stratified sampling. Albrecht and Goldman questionnaire was used to data collection. Data were analyzed by SPSS v. 23.

Results: Significant relationships were found between the organizational intelligence and its components with the organizational agility among the respondents. The most important components to predict agility were common fate, function press and application of knowledge.

Conclusion: In order to develop strategic plan there is a need for organizational intelligence training courses in order to alert the employees and managers of the organizations, which may lead to increased levels of agility and efficiency among the employees.

Keywords: Organizational intelligence, Organizational agility, employee
ABSTRACT

Background: Hospitals are the largest and the most expensive operational units of health systems and use the budget of health sector from 50% to 80%. The hospital efficiency indicates the correct use of the resources devoted to it. The purpose of this study was to assess the performance of hospitals in Tabriz-Iran using Pabon Lasso Model.

Methods: This was a cross-sectional study. Sampling was conducted and all hospitals in Tabriz were enrolled. In 2013, the data collected from 2008 to 2012 and analyzed by using SPSS v. 19.

Results: The average of 3 performance indices based on the Pabon Lasso Model in the 4 years were 67.6% for bed occupancy rate, 104.3 for bed turnover times and 2.48 days for the length of hospitalization, respectively. The bed occupancy index has increased 3% during 5 years, and bed turnover index has increased 8 times and the average stay days have been declining by 0.17%. On average 25.2% of the hospitals were in the first district, 23.5% were in the second, 26.1% in the third and 25.2% in the fourth district of the Pabon Lasso graph.

Conclusion: Only about 26% of the hospitals are located in the third district of Pabon Lasso graph, which represents the effective performance of those hospitals. These findings show that the hospitals in Tabriz do not have an acceptable performance and need to be promoted through interventions by the experts and health policy makers.

Keywords: Pabon Lasso Model, Performance, Hospital
ABSTRACT

Households’ Willingness to Pay for Dental Services Insurance Coverage in Isfahan-2015: An Application of Open Questions Analysis

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Background: Access to dental insurance is in relation with the greater use of dental services and oral health. This study’s purpose was to answer these questions: “What is the value of willingness to pay for dental services insurance?”; “What factors may be associated with willingness to pay?”

Methods: This was a cross-sectional study. Data were collected through a researcher made questionnaire according to instructions of contingent valuation. Its validity was confirmed by experts in economics and insurance. Open method was used to estimate the willingness to pay in 384 individuals referred to Isfahan dental clinics in 2015. The factors related to willingness to pay was calculated by linear regression.

Results: The mean of willingness to pay monthly for each member of the household for dental insurance was 162,612 Rials (SD = 15455.27). Regression analysis showed that people over 40 years significantly tend to pay less for dental insurance. Education status and gender, employment status of household head, household income, and oral health status of household members were not associated with willingness to pay for insurance coverage of the dental services.

Conclusion: The willingness to pay among households can be a guide for policymakers to determine premium dental services. According to the lack of relations for the model variables and willingness to pay for dental insurance, extended insurance policy requires raising awareness about the importance of oral health and dental education promotion.

Keywords: Contingent Valuation Method, Willingness to pay, Dental insurance, Household
National Congress in Health Management  
26-28 October 2016, Tabriz, Iran

ABSTRACT 7
Health System Accountability After the Implementation of Healthcare Reform in the Public and Private Hospitals of Tabriz - 2016

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ABSTRACT
Background: Responsiveness as one of the goals of the health system is very important for policy makers and managers. The purpose of this study was to evaluate the health system responsiveness in public and private hospitals after implementing the health reforms in Tabriz city.

Methods: This was a descriptive - cross sectional study carried out on 200 patients from four Tabriz hospitals (Two private and two educational hospitals). The World Health Organization questionnaire was used to collect information. Data were analyzed by SPSS.

Results: The findings of this study showed that the performance and compliance aspects of responsiveness in the hospital wards were as follows: Quick attention 55%, Respect for dignity 67%, Independence 41%, Privacy and confidentiality 98%, Selection 45% and the physical environment 83%.

Conclusion: According to the findings, quick attention, autonomy, and selections are in priority for more attention in interventional studies.

Keywords: Responsiveness, Healthcare, Reform plan

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ABSTRACT

Background: Human health is often a product of inter-sectoral activities in each country. In this article, we tried to analyze the structure of health care systems in some countries and to suggest a structural pattern to general policies of health.

Methods: This study was conducted in two phases. In the first phase, a conceptual framework was designed based on the sampling target of six experts selected from the health system. The experts participated in three focus group discussions. In the second phase, the researchers conducted a comparative study of the structural condition of health systems in the selected countries based on the conceptual framework agreed in the first phase.

Results: In the selected countries, the ministry of health as trustee of health was responsible for various aspects of health. In the structure of health system in Germany, stewardship is separated from other functions in the ministry of health. However, in countries like Turkey and France, stewardship is integrated in the service delivery and financing functions. In Iran, the ministry of health is the stewardship of health.

Conclusion: Based on the available evidence, in the selected countries the functional differentiation of health system carried out in different ways according to the conditions and level of development and improve the efficiency and effectiveness of health system performance. In Iran, seeking for capacity building and structural changes will lead to better function of health system.

Keywords: Architecture, Structure, General Health Policies, Health systems
Effect of Continuous Support of Delivery on Duration of Delivery and Early Apgar Scores in the First and Fifth Baby in Nulliparous Women Referred to Tabriz Taleghani Hospital – 2015

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ABSTRACT

Background: Delivery is the most profound emotional experience impacting the lives and the health of women. The aim of this study was to compare the effects of continuous support of midwives during delivery on the length of delivery and Apgar score among nulliparous women.

Methods: This was a double-blind randomized clinical trial on 80 nulliparous pregnant women. The subjects in the case (with caregiver) and the control (without caregiver) groups were enrolled. Data collection tools included a demographic data form and the partograph forms existed in the medical records of the women.

Results: The difference in the length of active phase of labor and the second phase in the two groups were statistically significant (P < 0.05), in a way that the length of active phase and the second phase of delivery were significantly shorter among the women in the case group, compared to those in the control group. No significant difference was found in the Apgar score at the first (P = 0.380) and the fifth (P = 0.268) minutes of delivery.

Conclusion: The continuous support of trained midwife during labor shortens the labor process. Considering the recent policy of the Ministry of Health to promote normal vaginal delivery, this method is a low cost, simple and applicable way to create a pleasant and positive delivery experience among mothers.

Keywords: Active Phase, Labor, Apgar score
ABSTRACT
The Impact of Healthcare Reform Plan on Official Payments of the Patients in Heart Ward, Qazvin Velayat Teaching Hospital

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Background: The absence of financial protection in health is known as one of the health system issues. In the Eleventh Iranian government, the ministry of Health and Medical Education formulated health care reform plan for financial support of people. The purpose of this study was to assess the impact of healthcare reform plan on the official payment of the patients in the heart ward of Velayat Teaching Hospital in Qazvin.

Methods: This was a time series cross-sectional comparative study. All the patients referring to the heart center in 2013 and 2014 constituted the study population. Using Morgan table and stratified random sampling respectively 120 and 154 samples of cases of heart were selected. Data extracted from the financial patients statements for research and statistics and were analyzed by t-test and SPSS.

Results: With the large increase in the tariffs for medical services during the project, the official patients payment have had no significant decrease. Considering the new mechanisms of insurance prevented from reaching the goal of plan to reduce the amount of direct payments of the patients to six percent of bills.

Conclusion: Results of this study suggests the impact of various factors on the patients’ payments such as mechanisms of insurance, treatment of tariff, individual insurance, outpatient or hospital stay. So the government needs to apply the results of the study in planning to increase the coverage and financial support of the patients.

Keywords: Official Payments, Healthcare reform plan, Costing Amount
The Accountability Level of Public and Private Physiotherapy Centers in Ahvaz From the Perspective of Physiotherapists

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ABSTRACT

Background: Addressing the non-clinical needs of patients is one of the objectives and priorities of health system. The purpose of this study was to determine the level of accountability of public and private physiotherapy centers in Ahvaz.

Methods: In this cross-sectional study implemented in 2014, the accountability level of the public and private physiotherapy centers in Ahvaz from the perspective of 68 physiotherapists was measured using a validated questionnaire “Evaluation of accountability”. This questionnaire measures the level accountability in 7 domains: independence, the patient’s dignity, confidentiality, quick attention, transparency in communication, the quality of basic amenities and the right to free choice.

Results: In this study, the most of subjects (61.8%) were female. The mean age of physiotherapists was 35.4 ± 8.8 years. The overall level of accountability in private physiotherapy centers were higher than those in the public centers (Private 27.3 ± 3.9 versus Public 23.7± 4.6; P=0.003). Also, the differences in the transparent communications (P=0.004), quality in basic amenities (P=0.001) and the right for free choice (P=0.004) were statistically different between the respondents from the two groups.

Conclusion: The public physiotherapy centers had lower levels of accountability. To increase the level of accountability, promoting the transparency in communication, quality of basic amenities, and freedom in selecting the are recommended.

Keywords: Physiotherapist, Accountability, Physiotherapy
ABSTRACT

Comparative Study of Efficiency in Iran Public Hospitals Using Hospital Services Production Function

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ABSTRACT

Background: One of the economic analyses for efficiency economics tools is hospitalized services production function. The purpose of the present study was to compare the efficiency in Iran public hospitals using hospital services production function.

Methods: This was a descriptive-analytical study conducted in 2013. The selected hospitals included 67 public hospitals that was randomly selected from total list of public hospitals across the country. To calculate the final production, the human resources, manpower and capital of active beds in the hospitals were used applying Cobb-Douglas production function in EView 7 software.

Results: The selected hospitals were from all the provinces, except for 4 provinces. Results showed that the production function of public hospitals, the total productivity of human resources in 26 hospitals, and total productivity of active beds capital in 21 hospitals were less than the average total productivity factors of production in the selected hospitals. Also, 15 hospitals were faced with the less than average for total productivity in both factors of production.

Conclusion: The Iranian hospitals require a better planning process to use the resources (especially manpower and active beds) more efficiently.

Keywords: Hospital, Production function, Efficiency
Rate of Satisfaction From Emergency Services Quality Among the Patients Referring to Public and Private Hospitals of Tabriz in 2015

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ABSTRACT

Background: The aim of this study was to evaluate the patients’ satisfaction about the quality of emergency services in public and private hospitals in Tabriz.

Methods: This was cross-sectional and descriptive-analytical study. A standard questionnaire was used to collect data from 322 people referring to emergency wards of public and private hospitals in Tabriz. Data were analyzed using SPSS 17.

Results: There was a significant difference (P<0.001) between public and private hospitals in terms of quality of service provided and between satisfaction for different occupational groups. The respondents announced their most satisfaction from “consent with the reception staff”, “satisfaction with the behavior of guarding staff” and “satisfaction of physicians’ behavior”.

Conclusion: In this study, satisfaction of people from the private hospitals was more than the public hospitals. Public hospitals such as private hospitals with equipment and specialists can find the better level of satisfaction.

Keywords: Patient satisfaction, Emergency ward, Public, Private, Hospital
ABSTRACT 14

Quality of Life among Patients With Chronic Kidney Disease Treated With Hemodialysis in Shiraz Namazi Hospital, 2014

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ABSTRACT

Background: Considering the impact of chronic kidney disease on the physical, social and mental health, measuring the quality of life in hemodialysis patients is important. This study conducted to evaluate the quality of life in patients with chronic kidney disease undergoing hemodialysis in the hospital Namazi in 2014.

Methods: This was a descriptive-analytical study which done as a cross-sectional study in 2014 on all 85 person in dialysis patients of Namazi hospital. In this study, quality of life measured using SF-36 questionnaire. The questionnaire contains 8 aspects that measures vitality, physical functioning, bodily pain, general health perceptions, physical role functioning, emotional role functioning, social role functioning, and mental health.

Results: Findings of this study showed the majority of patients were men (61.2%), in the age group 45-64 year (42.4%) and have social security insurance (37.6%). There was significant relationship between age, marital status, physical activity, location and level of education with quality of life health in hemodialysis patients. Also emotional health (64.4), mental limitations (63.3) and vitality (61.5) have the highest mean score of quality of life.

Conclusion: As demographic factors has a significant impact on quality of life and the average score for the patients’ quality of life was low, particular attention should be paid in terms of social, economic and spiritual domains to increase their quality of life.

Keywords: Quality of life, Chronic kidney disease, Hemodialysis, SF-36
ABSTRACT

The Perspectives of Managers and Hospitals’ Authorities in Babol University of Medical Sciences on the Implementation of Performance-Based Payment System

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ABSTRACT

Background: Payment system based on performance is one of the payment models that encourages providers to increase quantity and quality of health services. This study conducted to evaluate the perspectives of managers and hospitals’ authorities in Babol University of Medical Sciences on the implementation of payment system based on performance.

Methods: This cross-sectional study conducted in the spring of 2016. The sample included managers, supervisors and administrators of hospitals wards of Babol University of Medical Sciences that selected by census. Data collected by researcher made questionnaire and were analyzed by SPSS 23.

Results: The key informants presented the advantages, disadvantages, challenges and solutions of the performance-based payment system implementation about 167, 221, 180 and 156, respectively. Fifty-nine persons (46.7%) suggested the effectiveness and 55 (42.8%) agreed the available mechanisms to implement performance-based pay system. There was a significant association (P<0.05) between the place of employment, category management and the implementation of performance-based pay system and no significant relationship between gender, management experience, degree and the implementation of performance-based pay system.

Conclusion: This study showed many authorities are not agree to implementation of performance-based payment system. It is suggested to conduct appropriate interventions by identifying the problems and possible failures in the process of implementation of the system.

Keywords: Perspective, Managers, Authorities, Performance based payment
ABSTRACT

Strategies for Increasing Health Indicators of Drinking Water in Rural Areas: Experiences of Bostanabad County in East Azerbaijan Province, 2016

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Background: According to global statistics, many people lose their lives because of transmitted diseases caused by contaminated drinking water, especially in less developed countries. According to the World Health Organization indices, communities’ access to clean drinking water is one of the most important indices of development.

Methods: The interventions to increasing access to clean drinking water index was conducted, included updating and prioritizing the drinking water installations, designing and implementing the flowchart of water chlorination, implementation and construction of new projects, targeted education meetings, and public participation sessions. The results of interventions were analyzed as the number of villages covered by rural water and wastewater agency, the percentage of covered microbial sampling, the percentage of undesirable microbial results, the number of continuous chlorination, the percentage of residual chlorine monitoring at the point of consumption and the utility before and after treatment.

Results: The results showed that the intervention increased the number of covered villages from 42 to 52. The average percentage of microbial sampling increased from 56.3% to 94.6% and unfavorable microbial water results decreased from 12.07% to 4.17%. Colorimetric monitoring increased more than 3 times. The utility rate improved from 20.12% to 39.81%.

Conclusion: According to the results, promoting the rural drinking water health indices needs follow up of all those involved in this field, including Water Guardian and rural health workers. Inter-sectoral coordination with all departments associated with drinking water is inevitable.

Keywords: Rural drinking water, Health indices, Chlorination
ABSTRACT

A Study on Population Coverage of the Urban Family Physicians Plan in Fars Province, 2015

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ABSTRACT

Background: Due to a family physician program execution over the last few years in Fars province and establishment of community health system and universal coverage health systems in the country, conducting research and continuing health management program will be effective to address the existed issues. Thus, the rate of population covered by the program in the province in 2015 and the causes of the low coverage in the counties were investigated.

Methods: This was a descriptive cross-sectional study. Population information was collected and summarized thorough estimates of the census urban population data from Fars province, Iranian statics center, health information system of Shiraz University of Medical Sciences and data bases of health insurance.

Results: The estimated urban population was 3,842,821 from which 3,430,809 are covered by the family physician program. In terms of the number of physicians and the population covered, Lar county with 43% and Zarrin-dasht county with 63% had the lowest coverage rates. Eqild and Sepidan counties with close to 100% had the highest coverage rates.

Conclusion: Findings showed that urban family physician program in Fars province covers 91% (SD = 13.8%) of the total population The main reasons for the lower rates in Lar and Zarrin-dasht counties were lack of information, rural workers, migration and affordability of the residents which caused failure to register in the program.

Keywords: Urban, Family physician plan, Population
ABSTRACT 18

The Impact of Good Governance Quality on Health Expenditure Indicators Using Vector Error Correction Model (VECM)

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ABSTRACT

Background: According to the importance of health in the community, government investment in this area, known as one of the main tasks of the government and lack or failure in the delivery of health services in each country is considered as one of the weaknesses of the government.

Methods: In this study, applying the vector error correction model the relationships between the variables in G-20 countries was examined.

Results: The results of the estimate model showed that good governance by an amount of 18.23% and 5.17% have a significant relationship with total health costs of the GDP, and public health costs, respectively.

Conclusion: In economic development beside the quantitative production growth, social institutions have changed, as well. Good governance may be a major step in improving the public health of societies.

Keywords: Good governance, Health expenditure, Government, Vector error correction model
Quality of Emergency Services in Public and Private Hospitals in Tehran: The Patient’s Perspectives

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ABSTRACT

Background: Measurement of the patient’s perspective about the quality of health care as an important component in the evaluation of service quality has attracted a lot of attention in recent years. The aim of this study was to compare the quality of services in emergency departments in public and private hospitals in Tehran from the patients’ perspectives.

Methods: In this cross-sectional study, 373 discharged patients from the emergency departments in eight public and private hospitals were elected by convenience sampling. The instrument used was a 20-item questionnaire that its validity and reliability was confirmed. To analyze the data, descriptive statistics, Mann-Whitney tests and multiple regression were used.

Results: The mean of emergency services quality in private hospitals was 4.3 which was higher than those in public hospitals (3.9) (P ≤ 0.001). The 2 aspects of education before discharge and follow-up and the speed of service delivery were evaluated as the weaknesses of the emergency departments by the patients. There was a significant relationship between the quality of service by teaching the patient’s arrival, place of residence, age, and health status at discharge (P ≤ 0.05).

Conclusion: The quality of emergency services in the studied hospitals was in relatively good situation. The private hospitals had a better situation than the public hospitals. Hospital management should pay attention to the aspects of education before discharge and follow-up and deliver quick care to the patients.

Keywords: Emergency department, Patient expectations, Perspective, Quality of service
ABSTRACT

The Responsiveness of Private and Public Hospitals in Tehran From the Patients’ Perspective

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Background: Responsiveness is known as one of the three main objectives of health systems. This study was conducted to compare the responsiveness in public and private hospitals in Tehran from the patients’ perspectives.

Methods: In this descriptive-analytical study, 500 discharged patients by convenience sampling method from 2 public hospitals and three private hospitals were selected. To collect data standard 32-item questionnaire of World Health Organization was used. The reliability and validity of questionnaire was confirmed, descriptive statistics, $t$ test and regression by SPSS 19.0 was used to analyze data.

Results: The mean of responsiveness by admitted patients in private hospitals was 3.83 and higher than public hospitals (3.29) ($P \leq 0.001$). A significant relationship between responsiveness and length of stay, the patient’s history of hospitalization, marital status, education level and health status of discharged patient was observed ($P \leq 0.05$).

Conclusion: The level of responsiveness in the studied public hospitals was worse than those in the private hospitals. To improve responsiveness it is suggested that the patients to be involved in the treatment process, and to have right to choose their physician in hospital. Through the reorganization of human resources and the system of appointment and reengineering admission process, care delivery to the patients may be more quick.

Keywords: Public hospital, Private hospital, Inpatient services, Health system responsiveness
ABSTRACT 21

Knowledge on Patients’ Rights Among Medical and Nursing Students in Ahvaz University of Medical Sciences

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Background: Patients’ rights, resulting in improved patient satisfaction, quality of care and the responsiveness of hospitals. The aim of this study was to assess the knowledge of medical and nursing students in Ahvaz University of Medical science about patient’s rights.

Methods: In this cross-sectional study, 330 clinical students including nursing, midwifery and medicine were selected by stratified random sampling from medical, nursing and midwifery schools in Ahvaz University of Medical Sciences, 2015. Data collected through a valid and reliable questionnaire containing 18 questions and 5 domains regarding access to services, informed consent, individual freedom, awareness of the treatment process and confidentiality of the information. In this study, non-parametric tests of Spearman correlation coefficient, Mann-Whitney and Kruskal-Wallis were used for statistical analysis.

Results: The results showed a statistically significant relationship \( P \leq 0.001 \) between student’s knowledge on patients’ rights and educational level. Also, mean of knowledge score of the students was \( 2.09 \pm 14.9 \). The highest scores for knowledge of the patients rights among the students was found to be in access to services \( (0.93 \pm 5.2) \) and personal freedom \( (1.3 \pm 3.2) \).

Conclusion: The mean score of the majority of the students in the field of patient rights was moderate. Knowledge of students in the areas of informed consent, confidentiality and awareness of the treatment process was lower than the other areas.

Keywords: Knowledge, Medical students, Patients’ rights
ABSTRACT

Application of Queuing Network Theory to Enhance Equitable Access to Services: A Case Study in a University Hospital

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Background: A long waiting queue causes discontent and disturbances in response to patients, and is costly in economic terms for managers, as well. So companies can use management tools such as queuing theory and decreasing waiting time. This study was conducted to investigate the management of queues at clinics of Amir-Alam hospital.

Methods: This was a descriptive study that was conducted in 2013 among Tehran Amir-Alam hospital patients in different clinics. Data were collected from 150 patients by data collection forms and were analyzed by SPSS 21 software and regression.

Results: In terms of “average wait time”, the most of the waiting time was for surgical clinic patients (61.05 minutes). In terms of “average service time in each clinic medical offices” surgery ward patients were faced with the highest waiting time for receive service (26.84 minutes). The results of logistic regression analysis showed that all variables, including waiting time, service time, service delivery capacity, the number of physicians and disciplined queue, have a significant impact on the hospital’s queuing management.

Conclusion: According to the results, modifying processes, removal and use of scientific instruments to manage queues are important to reducing wait times, better service and better responsiveness.

Keywords: Clinic, Equitable access, Queuing theory
ABSTRACT 23

Internal Medicines Perceptions on the Concept of the Real Tariff of Medical Services in the Health System in Isfahan: A Qualitative Study

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ABSTRACT

Background: Tariff has impact on equity, efficiency, quality and responsiveness in the delivery of effective health services and it can influence the availability and use of services. In Iran, annual increasing the tariff for medical services, without attention to the identified basis causes different challenges in the health sector. This study was done to identify the real tariff base, challenges and damages caused by incorrect tariff of medical services.

Methods: This was a qualitative study with content analysis approach that was carried out in the years 2013-2014. Purposive sampling used and continued until data saturation. The participants included 10 internal medicine specialists in Isfahan city, who interviewed in depth about the purpose of the study. Data analysis in this study was based on analysis of a topic.

Results: The clinicians defined real tariff as four general categories including the concept of the real tariff, challenges, infrastructure and consequences which were in relation to the four areas of the Ministry of Health (physicians, patients and insurance organizations). The discontent as well as economic and behavior challenges were observed in all related sectors.

Conclusion: The findings in this study indicated that physicians believe on the significant difference between the current tariff and the current cost of services and physicians living costs.

Keywords: Out of pocket payment, Internal medicine, Tariffs, Price
Effects of the Health System Reform Plan on Patients’ Satisfaction in Public Hospitals of Tabriz

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ABSTRACT

Background: The main purpose of providing health care is maintaining public health. Health reforms plan was run by three main approaches; financial protection of the people, providing justice in access to health services and improving quality of services. This study investigated the effect of the implementation of health system reform plan on the patients’ satisfaction in public hospitals in Tabriz.

Methods: The study population consisted of patients admitted to public hospitals in Tabriz city. Data collected through a valid and reliable questionnaire and analyzed by SPSS.

Results: The results showed that with 95% of confidence interval it can be said that the implementation of health system reform was effective on patients consent in public hospitals in Tabriz. A unit increase in health reform plan can increase patients’ satisfaction by 0.693 in public hospitals in Tabriz.

Conclusion: The health system reform plan has an impact on patient satisfaction. Patient satisfaction was the most influenced by health reform plan.

Keywords: Health reform plan, Patient satisfaction, Tabriz
ABSTRACT

Background: Health reforms plan was run by three main approaches; financial protection of the people, providing justice in access to health services and improving quality of services. Job satisfaction is a very important factor in career success and may increase the efficiency and satisfaction of nurses. This study investigated the effect of health system reforms plan on nurses’ satisfaction in public hospitals in Tabriz.

Methods: The study's population consists of nurses who working in public hospitals in Tabriz city. The sample (106 nurses) working in these hospitals were selected. Data collected by questionnaires.

Results: The results showed that with 95% of confidence interval it can be said that the implementation of health system reform was effective on nurses’ satisfaction in public hospitals in Tabriz. A unit increase in health reform plan can increase nurses’ satisfaction by 0.195 in public hospitals in Tabriz.

Conclusion: The results showed that health system reforms plan has been effective on nurses’ satisfaction

Keywords: Health system reforms plan, Nurse, Job satisfaction, Tabriz
ABSTRACT

Causes and Motives of Informal Payments to Physicians for Hospitalization in General and Teaching Hospitals Affiliated to Iran University of Medical Sciences

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Background: Considering that one of the main goals of health reforms plan is to reduce out of pocket, the researchers believe that efforts to estimate the motivated and informal payments to physicians and also identifying the causes of these payments can be a useful step to promote efficient management of Iran’s health system.

Methods: This study was a cross-sectional survey. Study population was patients referred to all sectors of teaching hospitals of Iran University of Medical Sciences in the first 6 months of 2015. The final samples were 433 who elected through multistage cluster sampling. The method of data collection was interview and it was done by a questionnaire.

Results: The results showed that 8.5% of the respondents had informal payments to physicians. The average amount of informal payments to physicians was about 3 153 846 Tomans, and the most motivation to informal payment was the physicians’ request. There was a significant relationship between informal paid and care ward (P value = 0.00) and therapeutic intervention (P value = 0.04),

Conclusion: It seems that improving the quantity and quality of healthcare delivery, precise monitoring, educating patients may be effective in controlling the informal payments to physicians.

Keywords: Informal payments, Physicians, Bribe payment, teaching hospitals
ABSTRACT 27

The Satisfaction of Health Insured From the Health System Reform Plan in Kerman – 2015

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ABSTRACT

Background: Promoting the quality of services delivery and increase responsiveness in the health system is the ultimate goal of the implementation of healthcare reform in the country. Obviously, to achieve the above objective, increasing clients’ satisfaction may be one of the most important evaluation indices. This study was carried out to evaluate level of satisfaction and challenges among health insured individuals referred to Kerman university public hospitals.

Methods: This was a descriptive-analytic study carried out in the second quarter of 2015. Data gathered from insured hospitalized patients in Kerman by random sampling and questionnaire was used to collect data. SPSS and Excel were applied to analyze data. The sample size was determined by Cochran’s formulas.

Results: The findings showed that the most satisfaction were related to the field of insurance and discharge with 73% and 72%, respectively. The lowest satisfaction was related to surgery and security sector by 60% and 61%, respectively. The most of patient’s satisfaction was related to “health care staffs behaviour” and the most of the dissatisfaction of the patient was related to “health and safety facilities”.

Conclusion: Several actions may be helpful in increasing people’s satisfaction such as creating incentive mechanisms for committed medical staff, recruitment, completion of buildings under construction, assessment and implementation of courses for the personnel, re-engineering the treatment process, upgrading the health status sector and upgrading the hotelling status.

Keywords: Insured people, Satisfaction, Health insurance organization, Health system reform plan
ABSTRACT

Background: Health care system customers play a major role in improving the services by defining quality, evaluating services and stating their experiences. Customer quality refers to the knowledge of service recipients in relation to the services they received and their skill to proper care of themselves. The aim of this study was to evaluate the customer quality in periodic visits of the first grade students in health centers.

Methods: The study was cross-sectional and focused on the parents of the first grade students referring to periodic visits to health centers. The number of respondents was 805 who were randomly selected from 10 cities of the province. Researcher-made checklist was used to collect data that its validity and reliability were confirmed ($\alpha = 0.748$).

Results: The mean score of service provision was 91.3% in the health clinics and 43.9% in the health centers. The most and the least provided services at the centers, was vaccination (96.9%) and measuring blood pressure (58.7%), respectively. There was a significant difference in service provision between the health centers and the health clinics ($P = 0.013$).

Conclusion: The low level of the expected functions among the respondents may be related to the multiplicity of the services provided by a person which will drop down the quality of service. Creating proper employment standards, enabling service providers may improve the quality of service provision.

Keywords: Customer quality, First grade students, Periodic visit
ABSTRACT 29

Opportunities and Challenges of Health System Reforms Plan During the Post Joint Comprehensive Plan of Action

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ABSTRACT

Background: The continuity of health services reforms plan requires understanding of its opportunities and challenges. The aim of this study was to identify the opportunities and challenges for health system plan and providing necessary solutions to improve the implementation of this plan especially during the post Joint comprehensive plan of action (JCPA).

Methods: This was an applied study and conducted qualitatively. Collecting data was through study of literature and interviews with involved people in the field of health. Note-taking method was used and MAXQDA software and content analysis approach were applied to analyze the data.

Results: After data analyzing, fundamental challenges were extracted as follows: Lack of necessary infrastructure for the plan, lack of sustainable financial resources, lack of current sources responsiveness, and uncoordinated health insurance system with the plan, creating false induced demand, lack of attention to health and prevention, skyrocketing the medical tariffs, discrimination and inequality between the financing of medical and non medical staff, neglecting the human resources, and focusing the resources on treatment instead of primary prevention.

Conclusion: In this study, after identifying the challenges, opportunities, weaknesses and strengths of the plan, the suggestions in three field were recommended: Ministry of Health and treatment, basic insurance organizations and other related areas that offers solutions for policy makers and planners in the implementation of health system reform plan in the Post JCPA period.

Keywords: Health system reform plan, Challenges, Opportunities, Qualitative study
ABSTRACT

Impact of Health System Reform Plan on Hospital Performance Indicators in Rasht Poursina Hospital

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Background: Health system reform started at May 2014. After 2 years of implementation, considering as a costly plan for Iranian government, there are many positive and negative comments about its effectiveness. This study examines that whether the plan has been resulted in improving the performance indicators of Poursina hospital.

Methods: In this cross-sectional study the performance indicators of Rasht’s Poursina hospital in 2012 to 2015 were examined. The necessary information was entered into Excel software and statistical analysis was done on it and the results were compared before and after the reform.

Results: The improvement in all the indicators was approved except for the number of outpatients (-0.69%) and the number of procedures (-5.62%). The largest increase was occurred in the income index (40%), and improvement was found in the following indices: the hospital infections index (15.1%), the number of emergency department admissions (10.9%), inpatient discharge (6.18%), the number of patient admissions (6.01%), mortality (-4.76%), bed occupancy rate (4.34%) and the average length of hospitalization (2.06%).

Conclusion: Health system reform plan has increased inpatients admitted to public hospitals by reducing out of pocket payment. Due to the high volume of visits to public hospitals, taking facilities to deliver suitable services such as adequate beds and full-time physicians should be considered.

Keywords: Poursina hospital, Functional indicators, Health system reform plan
ABSTRACT


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Background: Today's hospitals are known as the most expensive care centers and their role in ensuring required care is undeniable. Because of devoting a large percentage of governmental budgets to the health sector, the necessity to evaluate the hospitals' performance is clear. This study aimed to investigate the effect of healthcare reforms on efficiency indicators in teaching hospitals of Bandar Abbas using Pabon Lasso model before and after the implementation. Methods: This was a descriptive cross-sectional research. Data collection tool were efficiency indices that are derived from Pabon Lasso model. The study population included all the patients of teaching hospitals in Bandar Abbas and data were analyzed using the software Excel 2013. Indicators approved by the Ministry of Health and its validity and reliability were proven. Results: The findings showed that the healthcare reforms plan increased the bed occupancy rate and bed turnover process, and consequently the patient length of hospitalization. Conclusion: Healthcare reform plan increase patients referred to governmental health centers by reducing out of pocket payments and resident physicians. The increase in average length of hospitalization in the hospitals leads to problems such as lack of beds, lack of human resources who provide services. These problems result in false use of the services which causes and induced demand for the system. Keywords: Healthcare Reform, Pabon Lasso model, Hospital
The Trend of Establishing and Implementing Suggestions System in Shahid Lavasani Hospital-2015

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ABSTRACT

Background: Today's, planning and goal setting by an individual or group alone is not possible and the use of participative management and utilization of valuable thoughts and ideas of individuals is a great option. Hospitals compelled to improve service quality and increase their competitiveness through applying such processes. Therefore, we examined the process of establishing and implementing of suggestions system in Tehran Shahid Lavasani hospital (affiliated to Social Welfare Organization).

Methods: This was a descriptive study performed for one year in the Shahid Lavasani hospital.

Results: A total of 108 suggestions were collected from June to February 2015. The participation rate, number of suggestions per capita, approved suggestions and the percentage of implemented suggestions were 11.45%, 28%, 98%, 28%, respectively. Employee participation in the suggestion system was not desirable considering the total number of human resources in the hospital (943 personnel).

Conclusion: Considering that the rate of participate in suggestion system in this hospital is lower than the international standard, planning in this regard is the important responsibilities of hospital managers. The major problem was insufficient hospital staff's participation in the delivery of suggestions. Certainly, one of the most important factors that reduce staff motivation in improving the suggestions system is related to the payments system.

Keyword: Suggestion system, Participative management, Hospital, Decision-making.
A Gap Analysis on the Perceived and Expected Services Quality Among Outpatients in the Hospitals Affiliated to Tehran University of Medical Sciences

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ABSTRACT

Background: Quality of services is defined as a comparison of the customer perspective about how the services should be (expectations) and how it is. If expectations are higher than perceptions, perceived service quality is low from the perspective of customer and leads to his dissatisfaction. This study aimed to determine the quality of services provided and expected from point of view of outpatients in the hospitals of Tehran University of Medical Sciences.

Methods: It was a cross-sectional analytical study. The study population included all patients attending the hospitals of Tehran University of Medical Sciences. SERVQUAL standard questionnaire including 22 items was used to collect data and measuring the gap between quality of services provided and expected from the viewpoints of the patients. Data were analyzed using SPSS software.

Results: The findings of the study showed that there was a gap in the quality and expectations of the patients on the services provided. The greatest gap was related to accountability (0.97) and the smallest gap related to tangible factors (0.69).

Conclusion: The results showed that none of the 5 patients’ expectations have been met. Taking action is necessary, especially on the accountability dimension.

Keywords: SERVQUAL, Quality of services provided, Expectations of patients
ABSTRACT

The Impact of Health System Reform on Hospital Performance Indicators in East Azerbaijan Province’s Health Care Network

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Background: The main mission of the health system is promoting public health and meeting the needs of community. These needs affected by economic, social and political conditions under continually changes. Responding to these changes is the most important reason to transform and promote the health system. Health system reform plan is one of the most important and fundamental changes in Iran health system that its impact must be reviewed in various aspects. The aim of this study was to assess the impact of healthcare reforms on the hospital performance indicators.

Methods: This was an analytic descriptive-analytical study. Study population was the hospitals of East Azerbaijan province’s health care network. Sample selected using census method. Data were collected from hospital statistics and information system (HSAl) from 2013 to 2014. The variables included hospital performance indicators (average length of hospitalization, bed occupancy and bed turnover rate). Data was analyzed using SPSS v. 17.

Results: Our results showed that in total of 15 provincial hospitals all performance indicators have been increased. After implementing the program the patient average length of hospitalization (4%), bed occupancy rate (11%) and bed turnover rate (9%) have been increased.

Conclusion: Healthcare reform implementation had a significant impact on hospital performance indicators which were differed by different hospitals.

Keywords: Hospital, Health system reform plan, Performance indicators
ABSTRACT 35

Evaluating the Performance of University Hospitals After Implementing the Health Reform Plan

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ABSTRACT

Background: Despite rapid advances in science and technology, health promotion as well as high-quality care are important goals for service provider. The healthcare reforms plan was designed for this purpose. This study aimed to evaluate the performance of Qazvin University of Medical Sciences hospitals after healthcare reforms plan.

Methods: A cross-sectional retrospective study was conducted in 2014 in hospitals of Qazvin University of Medical Sciences. Data were collected, using standard checklist of Ministry of Health to assess the hospitals’ effectiveness. In this study, 19 indicators (in 3 general categories including critical indicators (7), personnel indicators (6) and financial indicators (6)) were studied. To fill the checklist, the indicators of statistics units, department of treatment, and budget department were gathered according to previous year reports, from April to March 2014. Data were analyzed using excel software.

Results: In general, among 7 vital indices evaluated in the hospitals, 4 indicators in the most of hospitals have been increased, 3 indices were declined, and in the 6 personnel indicators almost all hospitals had improvements. In the 6 financial indicators, four were increased and two were significantly decreased.

Conclusion: One year after implementing the healthcare reforms plan, hospitals had significant improvements in the most of hospitals. Providing the adequate infrastructure by eliminating or reducing the effect of some implementation’s obstacles may lead to improvement of the indicators.

Keywords: Performance evaluation, Health care, Reform, Hospital, Performance improvement
ABSTRACT

Causes and Extent of Occupational Accidents and its Relationship With Employee Productivity in the Hospitals of Iran University of Medical Sciences

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ABSTRACT

Background: Awareness of the extent and causes of occupational accidents can help planners to find ways to reduce the risks and increase the level of productivity among employees. This study aimed to investigate the extent and causes of occupational accidents and its relationship with productivity in the hospitals of Iran University of Medical Sciences.

Methods: This was a descriptive-analytic study. The population included the clinical and Para-clinical staff of the hospitals of Iran University of Medical Sciences who were selected through multi-stage random sampling. Data collected through three questionnaires on occupational accidents rate, causes of occupational accidents and employee’s productivity. Validity and reliability of the scales were confirmed. Data analyzed using SPSS software.

Results: Finding showed that skin contact with blood or other fluids has the highest frequency. Also, fatigue and long shifts among respondents were the most common cause of occupational accidents. The productivity was decreased as the frequency of occupational accidents was increased.

Conclusion: The findings showed that the accidents are happening repeatedly. So, it is necessary to identify accident-prone situations and plan to prevent them.

Keywords: Occupational accidents, Productivity, Hospital staff, Employee performance
ABSTRACT

Assessing the Performance and Financial Indicators of Hazrat-e-Rasoul Hospital Before and After the Health System Reforms Plan

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Background: Hospitals always need to be monitored in terms of performance and identifying activity improvement trend. In this study we aimed to compare the performance and financial indicators of a hospital before and after implementing the healthcare reforms plan.

Methods: In this study, data on the performance and financial indices were extracted from the HIS and hospital financial system in April, September and August 2015 and 2016. The data were classified by support, therapy and laboratory groups and then analyzed by Excel 2010.

Results: Implementing health care reforms caused favorable and unfavorable indicators. For example, bed occupancy percentage, insurance income, total income, cat lab operations, mortality and morbidity rate, number of operations, number of laboratory and radiology services had been improved and, in contrast, the cash and discounting received from insurance, the waiting time in the emergency department, surgery cancellation monthly, number of cesarean sections, satisfaction and the number of consultations have been worsen. Moreover, the length of hospitalization and the average length of hospitalization in the emergency ward remained stable.

Conclusion: The results showed that the quantity of services has favorably improved and the quality has unfavorably worsened. Implementing health system reform has increased the number of patients but due to the lack of infrastructure and delay in paying insurance organizations, negative effects have been emerged in some indicators.

Keywords: Hospital, Performance indicators, Financial indicators, Health system reform
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Willingness to Pay for Complementary Health Insurances Using Contingent Evaluation Method in Kerman

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ABSTRACT

Background: In developing countries, out of pocket payment for health services has a significant contribution. One of the solutions to deal with this problem is health insurance. Due to increasing the medical advances, the possibility of providing all services in the form of a basic health insurance is not possible and many are turning to using complementary health insurance. This study tries to measure the willingness to pay and demand to obtain complementary health insurances.

Methods: This study examined 1023 households in Kerman using multi-stage sampling. To measure the willingness to pay repeated bidding strategy was used and for estimating the demand for complementary health insurances and the factors influencing it, the linear multiple regression with the ordinary least squares (OLS) were used. The STATA software and VIF test was used to check the linearity and Pagan test was conducted to examine the heterogeneity of the variance.

Results: The average level of willingness to pay for complementary health insurance per person each month was 220126.4 ± 76155 Rials. Risk aversion, household income, basic insurance coverage status, employment status and marital status were the factors affecting people’s willingness to pay. The price elasticity of demand for complementary health insurances was 1.54. Risk aversion had the greatest impact on the demand for complementary health insurances. The disease risk (individual risk) had no significant effect on the demand for complementary health insurances.

Conclusion: Optional insurance boxes with identifying the risk-averse people’s willingness to pay can reduce the exposure to large financial losses in addition to aggregation or accumulation of the risk.

Keywords: Complementary health insurances, Demand, Willingness to pay, Kerman
ABSTRACT

Background: In order to achieve organizational performance, health organizations can focus on accounting system and risk management. The purpose of this study was to investigate the relationship between management accounting systems, risk management and organizational performance in health and treatment centers of Rasht.

Methods: This was a cross-sectional descriptive study. Study population included 110 accouter and financial services' executive in 7 health and treatment centers in Rasht. Sample selected on a census. A standard 5-item Likert scale questionnaire was used for data gathering. Data analysis was performed using SPSS software by descriptive and analytical statistical. Validity and reliability the scale were approved.

Results: Data analysis showed that the relationship between risk management and management accounting systems and its dimensions was significant ($\alpha = 95\%$). Similarly, there was a significant positive relationship between risk management method and organizational performance in of the hospitals of Rasht.

Conclusion: More attention to management accounting systems and risk management methods in education and health centers can lead to better organizational performance.

Keywords: Accounting systems, Risk management, Organizational performance, Education and health centers

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National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT 40

Health Care Financing for the Victims of Traffic Accidents in Iran; Challenges and Solutions

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ABSTRACT

Background: Traffic accidents are the first cause of death in Iran and due to its necessity in the fourth and fifth socio-economic development plan, 2 laws were passed to provide immediate and free services to the traffic victims. The current study was designed to explore the challenges and complexities related to health care financing for this victims and to provide solutions.

Methods: In this applied research, the qualitative phenomenological approach was used. All interviews were conducted in 2013 by semi-structured interviews with 36 people including the managers at the Ministry of Health, Medical Sciences Universities, trauma specialized hospitals and basic insurances. Sampling was done using snowball, targeted and quota techniques. Data analysis was done using framework method and through Atlas Ti 5.2 software.

Results: Qualitative analysis emerged 3 main themes, 14 codes and 4 sub-codes. The main challenges of health care financing for victims of traffic accidents included challenges of financial integration, accumulation, distribution of financial resources and service purchasing.

Conclusion: Creating a process to collect more appropriate resources for article No. 92 at the Ministry of Health, compiling a services package and applying strong monitoring to improve the quality of services were found as mechanisms that can be used to obtain sustainable financing and quality in providing services to victims of traffic accidents.

Keywords: Financing, Victims of traffic accidents, Health care

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The Relationship Between Socio-Economic Characteristics and the Tendency to Choose the Type of Delivery: Comparing the Cesarean Section and Normal Delivery in Tabriz Hospitals

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ABSTRACT

Background: Cesarean section in recent years has attracted the attention of many pregnant women, while there is not enough awareness of the consequences. The aim of this study was to assess the relationship between socio-economic variables with a focus on selecting the type of delivery in Tabriz hospitals.

Methods: This cross-sectional study included 400 samples from pregnant women referred to Tabriz’s public and private hospitals in the first quarter of 2014. Data were collected using a reliable and valid questionnaire. Analysis of data was performed using SPSS software.

Results: About 72.3% of the respondents had cesarean section delivery. Average age of the participants was 27.3% and 67.6% of them were housewife with under diploma educational degree and no income. About 50.5% of their husbands had an income less than a million dollars per month. Also, 50.8% had social security insurance and 12.1% did not have any kind of insurance. This study showed that age, education, occupation and patient's income did not have significant impact in choosing the type of delivery (P<0.05) and, in contrast, the place of residence and the household head's income had significant impact on choosing the type of delivery (P>0.05).

Conclusion: Since the economic status and the place of residence had positive impact on tendency toward cesarean section, it is suggested that the authorities plan for change the attitude of women on considering CS as a luxurious mode if delivery.

Keywords: Socio-economic status, Cesarean section, Normal vaginal delivery
Factors Affecting Employee’s Empowerment in Tehran University of Medical Sciences in 2015

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**ABSTRACT**

**Background:** Among the production inputs, manpower is the most valuable factor. Empowerment is one of the effective ways to enhance employee productivity in order to achieve the organizational goals. This study aimed to investigate the factors affecting empowerment in Tehran University of Medical Sciences.

**Methods:** This was a descriptive analytic cross-sectional study. Study population was the staff of Tehran University of Medical Sciences and the sample included 150 respondents. Data collection tools were questionnaires. Data analysis was performed using descriptive statistics (mean and standard deviation) and t test and analysis of variance (ANOVA).

**Results:** The findings showed that “respect” was the highest dimension (mean = 3.83) and “decision-making” was the least one (mean = 3.43) among the dimensions of empowerment.

**Conclusion:** In this study there was a significant relationship between all aspects of empowerment. In order to move the organization on the path of growth and development and increase employee participation in activities, special attention should be paid to empowerment in the organization.

**Keywords:** Empowerment, Human resources, Staff
ABSTRACT 43

Evaluating the Implementation of the Health Reforms Plan Emphasizing Normal Delivery Promoting Program in Maragheh Faculty of Medical Sciences

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ABSTRACT

Background: In recent years, cesarean section delivery and its complications have become one of the concerns of health officials in health care systems. Normal delivery promoting program is one of the polices to deal with this concern. The aim of this study was to evaluate the implementation of the program in Maragheh Faculty of Medical Sciences.

Methods: This was a cross-sectional descriptive study. Data from 15871 deliveries in three continuous years before (2013) and after implementing the program (2014 and 2015) were gathered from medical record unit through retrospective method. Analysis was performed using Excel software.

Results: Among 5490 delivery in 2013 (before the program), 54.74% were cesarean section and 45.26% were normal delivery. In the first year of implementation of program among 5273 deliveries, 45.36% were cesarean section and 54.64% were normal delivery. In the second year of implementation of program from 5108 delivery 43.13% were cesarean section and 56.87% were normal delivery. The preventable cesarean sections were 28.42%, 16.6% and 6.45% in 2013, 2014 and 2015, respectively. The amount of credits allocated to each normal delivery scheme in the first year of program was 2 128 427 Rials and 995,869 Rials in the second year that shows 53.3% reduction per patient.

Conclusion: Successful implementation of program led to 9.38% and 2.23% reduction of cesarean section in 2014 and 2015, respectively. Although successful implementation of program had positive impact in reducing the cesarean section rate, it has descending trend that is aligned with the allocation.

Keywords: Normal vaginal delivery, Program planning, Healthcare reform plan, Evaluation, Cesarean section
Components of Patient Privacy in Order to Reduce Stress and Create a Healing Environment: Evaluation of 2 Selected Hospitals

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Background: In recent years, creating healing environments in hospitals and factors affecting it had a growing trend. The strategies should be designed to increase the ability to control and improve the privacy of patients to enhance health and healing. This study was conducted to assess the selected hospitals in Isfahan in terms of patient privacy standards by Dahl Pedersen Model.

Methods: This was a cross-sectional, descriptive-analytic study conducted in 2 selected hospitals of Isfahan. The validity of questionnaire was approved by experts (using the Delphi method) and its reliability was confirmed by Cronbach’s alpha coefficient (0.85). Descriptive statistics and frequency of nurses’ response were calculated and analyzed by SPSS 15.

Results: The average of visual privacy in the studied Hospitals was 0.78 and there was no significant difference between the two hospitals. In the audio privacy, the majority of nurses (46.8%) selected the “at all” option and the average score in this area was 0.63. To evaluate the possibility of solitude for patients the majority of nurses selected “at all” option (52%) and the average score in this area was 0.53. The two hospitals were differed significantly in the possibility of solitude scope (\( P < 0.05 \)). In the social relationships area, the majority of nurses opted “partly” option (57.7%) and the average score was 0.81.

Conclusion: Suggestions to increase patients’ privacy includes two general approaches: (1) creating facilities for patient privacy (2) training nurses and other health care provider staff on patients’ privacy and using embedded available facilities.

Keywords: Patient privacy, Healing environment, Assessment

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ABSTRACT

Background: Commitment to the standard principles of prescription writing by physicians increases the likelihood of proper and effective treatment and the patients’ recovery, as well. The present study aimed to explore the level of physicians’ commitment to the standard principles of prescription writing for the outpatients referring to the training hospitals in Ahvaz.

Methods: In this cross-sectional study, 550 prescriptions written by 22 physicians, cardiologists and geneticists for the outpatients referring to the hospitals affiliated to Ahvaz University of Medical Sciences were evaluated in 2015. From all the prescriptions, the issues related to legibility, medication form and order and identity information were extracted and recorded in a checklist prepared based on the WHO guidelines. The prescriptions were scored in the checklist ranged from 0 to 21 and, then, analyzed using descriptive statistics.

Results: The average number of drug items per prescription was 3.48. The highest and the lowest number of drugs per prescription were 5.2 and 2 items, respectively. In total, 1396 drugs (72.78%) were written legibly; 1032 drugs (58.81%) were prescribed in an incorrect form and 1281 drugs (66.07%) were prescribed in the correct order. The identity of doctors was written in 98.08% of the prescriptions and the identity of patients was written in 80.36% of the prescriptions. Finally, 1428 drugs were prescribed in consistent with the standards of prescription.

Conclusion: It was found that the most of prescribed medications were consistent with the prescription standards. However, the medication form and the order of use were not suitably mentioned in the prescriptions. Electronic prescribing may improve the accuracy of prescriptions in the training hospitals.

Keywords: Medications, Outpatients, Prescription writing
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

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Working Partnership Status Among Employees in a Medical Sciences University in South of Iran

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ABSTRACT

Background: Working partnership has an important role in health systems and may result in providing coordinated packages of services to patients and reducing the impact of organizational fragmentation. This study aimed to determine the level of working partnership among the employees in Zahedan University of Medical Sciences (ZAUMS), Iran.

Methods: Applying a cross-sectional study in 2015, 370 employees in ZAUMS were recruited to participate in the study through random multi-stage sampling. Working Partnership Questionnaire used for data gathering. The data were entered into SPSS (v. 21) and analyzed applying a series of Pearson, one-way analysis of variance (ANOVA) and logistic regression tests.

Results: In this study, 245 participants (66.2%) were female and the mean age of participants was 34.6±8.4 years. Significant differences were found in the working partnership by the age of employees (P = 0.007). Moreover, employees who had PhD degree had the highest score of partnership (53.6±3.1).

Conclusion: The younger employees with higher education had higher level of partnership in their working system. Supportive education for the staff to increase their level of working partnership in the organization is recommended.

Keywords: Working partnership, Medical staff, Employees
ABSTRACT

Background: Productivity means maximizing scientific usage of human resources, facilities and capital as well as decreasing in production expenses, developing markets and increasing employment to enhance actual wages and quality of life of the employees and consumers. This study determined the level of productivity among the health workers of Zahedan University of Medical Sciences (ZAUMS).

Methods: A cross-sectional study was performed in ZAUMS health center in 2015. The study population consisted of all health workers in ZAUMS (120 participants) who selected through stratified random sampling. Productivity standard questionnaire were used for data gathering. The data were analyzed in SPSS (v. 21) using Pearson, one-way analysis of variance (ANOVA) and logistic regression. The level of significance was considered as 0.05.

Results: In this study, 80 participants (67.2%) were female and the mean age of the participants’ was 35±8.6. The mean score of productivity among health workers was 52.6±11.5. Health workers with Ph.D. degree and younger in age had the highest score of productivity.

Conclusion: The health workers with higher education and younger in age had higher productivity score in their works. It is recommended to support health workers for higher education to increase the level of individual and organizational productivity.

Keywords: Productivity, Health workers, Health center
ABSTRACT

Employees' Systemic Thinking in Zahedan University of Medical Sciences

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ABSTRACT

Background: Systemic thinking is an approach to problem solving and involves much more than a reaction to present outcomes. It also demands a deeper understanding of the linkages, relationships, interactions and behaviors among the elements that characterize the entire system. This study determined the systemic thinking in the employees of a medical sciences university in the south of Iran.

Methods: A cross-sectional study was performed in Zahedan University of Medical Sciences (ZAUMS) in 2015. The study population consisted of all employees in ZAUMS (participants 370) who selected through stratified random sampling. Systemic thinking standard questionnaire were used for data gathering. The data were analyzed in SPSS (v. 21) using Pearson, one-way analysis of variance (ANOVA) and logistic regression tests. The level of significance was considered as 0.05.

Results: In this study, 225 participants (60.8%) were female and the mean age of the participants’ was 34.7±8.7. Systemic thinking was differed by marriage status of the participants (P=0.04). Systemic thinking among men and older staff was more than others in ZAUMS (P<0.001 and P=0.01, respectively).

Conclusion: The male staff had better systematic thinking in the organization. It is recommended that the managers should promote systematic thinking among staff especially females.

Keywords: Systemic thinking, Medical science university, Employees
ABSTRACT

Background: Type of delivery may associate with the women’s postpartum quality of life (QoL). No study has investigated QoL after cesarean section (CS), natural vaginal delivery (NVD) and NVD in water as a novel method. The aim of the study was to compare postpartum QoL after three types of delivery among women in Shiraz hospitals.

Methods: This cross-sectional study was conducted on the women after NVD, CS, and NVD in water 2 months postpartum using Quality of Life after Childbirth Questionnaire. Data were analyzed using descriptive statistics and one-way analysis of variance (ANOVA) in SPSS v. 18.

Results: Compared to the women with CS and NVD, the women with NVD in water had the highest mean score in the following domains of questionnaire: mothers’ feeling toward themselves, physical health, satisfaction with delivery, choice of the delivery method for future pregnancies and overall health status. However, the differences were not statistically significant. Significant differences were found in NVD and CS by less economic burden \((P<0.001)\) and feeling toward sexual intercourse \((P=0.012)\), respectively.

Conclusion: Pregnant women and obstetricians’ knowledge toward NVD in water should be improved through appropriate educational programs and delivery preparing courses.

Keywords: Cesarean section, Natural vaginal childbirth, Quality of life, Water birth
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

A Qualitative Study on Bottlenecks and Causes of Fractions for Dedicated Incomes of Health Centers: Providing Solutions for the Issue

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ABSTRACT

Background: Primary health care is one of the effective approaches for improving public health. Providing optimal care requires supplying various resources such as financial resources. “Fraction of incomes” in health centers is one of the remarkable problems for the domain of financial resources management in Iran. This study was aimed to identify bottlenecks and causes of fractions for incomes in health centers and solutions for their reduction.

Methods: The current study was conducted applying a qualitative content analysis method in East Azerbaijan province of Iran in 2014. Data collection method was focus group discussion and semi-structured interview. Purposive sampling was used for selecting the participants. Focus group discussions and interviews were conducted based on guidance semi-structured questionnaire and were continued till data saturation. Validity of the questionnaire was approved by panel of experts. Data were analyzed using content analysis method.

Results: Based on the opinions of participants, two and six themes were respectively extracted for bottlenecks and causes of fractions. Themes for bottlenecks of fractions included cash (monetary) and non-cash (non-monetary) fractions and themes for causes and solutions included causes and solutions for fractions per capita, insurance deductions, fractions related to sending documents, registration fractions, discounts fractions, and incomplete deposit of cash incomes.

Conclusion: All cash and non-cash incomes of health centers are subject to fractions. The causes of fractions are related to the whole process of converting services to incomes and insurance requirements. Identified solutions and interventions also should be focused on these areas.

Keywords: Health centers, Income, Fractions
ABSTRACT

Analysis of the Data Recorded on Neonatal Mortality and Their Application in Health Care System: A Cross-Sectional Study

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ABSTRACT

Background: One of the most important indicators for monitoring the status of community health is mortality. The ability to exchange and integrate data between health care programs is vital for the success of any overall health care information systems. This study aimed to investigate the infant deaths in the recorded data software in the health system.

Methods: In this cross-sectional descriptive study we used the data provided by the software system of newborns in Iran to investigate the causes of death in the current health system.

Results: Based on the results, the number of deaths of newborn in the neonatal deaths portal system of the Ministry of Health was 252 cases of infant death which was recorded for Tabriz University of Medical Sciences. Also among 485 cases of neonatal death210 neonatal deaths were reported from cities other than Tabriz.

Conclusion: Standardization of information for the purpose of introducing infant mortality data source for organizations and agencies needs better software for information registration.

Keywords: Mortality, Health System, Software
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

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Family Physician and Referral System Strengths and Weakness Point in Rural Areas of Iran: A Systematic Review
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ABSTRACT
Background: The aim of this study was to systematically review the family physician and referral system strengths and weaknesses in rural areas of Iran.
Methods: In this systematic review, SID, Science Direct and PubMed databases and Google search engines were searched with key words of family medicine, family physician, and referral system from January 1985 to June 2012 both in English and Persian. For identifying duplicated references Endnote software was used and for summarizing the results of the articles, Extraction Table was used.
Results: Strength and weakness points of family physician program and referral system in rural areas of Iran extracted from 29 studies. One-hundred fifteen weakness (3.96 per study) and 103 strength (3.55 per study) points were obtained. Applying content analysis 218 items summarized in 29 items. Strength points of family physician program were access of villagers to health services, filling out health documents for the clients, and improving services for pregnant mothers and family planning. The weakness points included repeated unnecessary referral of the clients and the lack of providing job stability.
Conclusion: the results of studies conducted in Iran showed that family physician and referral system in rural areas of Iran may not be successful enough and has many short-comings. Since urban family physician plan is to be implemented in the future, the results of this study on identifying problems, defects, and shortages of rural family physician plan could prevent the repetition of such problems and improve the efficiency of rural and urban family physician plan. Therefore, some suggestions are provided based on the results of this study in order to better and more effective implementation of urban family plan.
Keywords: Family physician, Referral system, Strength, Weakness, Rural areas, Urban area
ABSTRACT

A Plan for Health Reform in Iran: Previous Status, Reforms Agenda, Short-term Achievements and Health Economic Analysis

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ABSTRACT

Background: Despite noticeable progresses and visible modifications in Iranian health system, there are many shortages and gaps which make Iran’s health system far away from the ideal. This study analyzes the experiences of health system experts on the health system reforms and discusses the new lessons for other countries.

Methods: This was a debate study. The authors collected the data from published papers, reports and other references about health reform and then interpreted these data. Then a focus group discussion with 7 experts was held up and finally the results were analyzed using content analysis.

Results: Decrease in the out of pocket payment from 37% (only among in-patients) to 8.5%, 42% decline in every type of medical equipment use, decrease in the refer of people to pharmacies out of hospital from 100% to 3.2%, 9 million admission of patients during reform implementation until now, and insuring 10.2 million people and provision of health insurance for 95% of the population are the main outcomes of the reform. This reform has had many benefits including significant achievements in reducing out of pocket payments (most successful plan), having regulatory levels (Supervision on the good implementation of reforms) and extra lateral plans beyond main seven reform factors (like Air emergency).

Conclusion: Reforms have been a sophisticated process and we have to expect some problems and this should not affect reforms important values. We should not let political orientations to have adverse effects on this program and help health ministry to improve the population health. Because of scarce source of information on recent reforms, we collected data based on government and ministry of health published information from dispersed and different sources.

Keywords: Health reform, Policy making, Reforms Agenda, Iran
The Effect of PACS on Users in a Hospital in Amol-2016

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Background: PACS is an emerging technology that allows access to medical imaging through a network. The patient health records will be available with video and film details everywhere, at any time and at the minimal cost.

Methods: The present study was a cross-sectional study, which was conducted in 2016. In this study, a questionnaire was used. Structure validity of the questionnaire was confirmed through face and construct validity and its reliability was confirmed by Cronbach alpha (0.83). Data were entered into SPSS software and analyzed using Shapiro-Wilk and the binomial tests.

Results: Our results showed that 96% of the respondents believed that the application of PACS system may result in decrease on the treatment costs. Almost 68% of the respondents believed that using PACS system improves the treatment process and 72% believed the using this system cause more satisfaction among the users. Finally, 92% believed that using PACS system may result in better organization of the health information management.

Conclusion: PACS system is an important requirement. An appropriate PACS system and implementing a comprehensive health system plan for the hospitals of the country are the most effective factors to successful implementation of the PACS system in hospitals.

Keywords: PACS, hospital, healthcare providers, health information management
ABSTRACT

Background: Managed care is one of the key features of health care designed in order to detect the causes of increased health costs. In this study, the main characteristics of managed care were introduced and its effect on health insurance is examined.

Methods: A review-comparative study carried out among countries using managed care. A model suggested for Iranian health system.

Results: Compared with the previous years, using managed care decreased the laboratory tests and prescriptions and treatment costs in countries in which it was used. Therefore, managing and ameliorating care to the consumers of services through integrating health insurance system in managed care organizations (as a private sector) can be a beneficial step toward cost-effectiveness of health care services.

Conclusion: The experiences of countries using managed care could be helpful for Iranian health care system because of the following problems: lacking effective regulations for referring to specialized and high cost care, lack of supervision on health care delivery based on fee-for-service payment system, not having the coordination in drug prescription for patients and high medication costs.

Keywords: managed care, health protection organizations, refund management, health insurance
Implementation Challenges of Accreditation in Military and University Hospitals of Kerman city: Recommendations for Strategy Development

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Background: In regard to the special attention to the quality of health care services in current decade and implementation of accreditation as the most novel model of quality improvement in the hospitals affiliated to the Ministry of Health and Medical Education, the present study was designed to study the challenges of accreditation implementation in Kerman military and teaching hospitals and suggesting strategies for overcoming the challenges.

Methods: This qualitative study was done through phenomenology method in 2014. Participants were invited through purposive sampling from hospital managers and experts of implementation of accreditation working in three hospitals affiliated to Kerman University of Medical Sciences and three military hospitals in Kerman/ Iran. A total of 39 participants were interviewed. A semi-structured questionnaire was used for data collection and Colaizzi's 7-step method was used for data analysis.

Results: Six major themes and 19 codes were identified. The major themes included the viewpoints on accreditation model, the lack of proper policy in regard to the implementation of the model, educational problems of the model, human resources problems, problems in relation to the evaluation of the model and its different parts.

Conclusion: The accreditation model has been suggested for all the hospitals of the Ministry of Health and Medical Education and since implementation of this model has been associated with the fourth phase of health system reform plan aimed at improving educational performance and hoteling of the teaching hospitals, these hospitals, in comparison to other hospitals, have found a better chance for appropriate implementation of this model with suitable financial support. Therefore, military hospitals need the attention and support of the Ministry of Health and Medical Education to be improved in terms of quality assurance.

Keywords: Accreditation model, Military hospitals, Teaching hospitals, Challenge
ABSTRACT

Administrative Challenges of Clinical Governance in Military and University Hospitals of Kerman/Iran: Recommendations for Strategy Development

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ABSTRACT

Background: Clinical governance model has been applied to improve the quality of university and private hospitals in recent years. In addition to university hospitals, military hospitals have effective role in preservation and promotion of public health. Since challenges of clinical governance implementation have not been investigated in the mentioned hospitals, the present study was carried out to find these challenges and to suggest some strategies for overcoming the issues.

Methods: This qualitative study was carried out through phenomenology method in 2014. A sample of managers and experts in implementation and execution of Clinical Governance was purposefully invited from three university hospitals and three military hospitals in Kerman. In whole, 30 participants were interviewed. Data gathering was done through semi-structured interviews with open questions. Data analysis was done using pyramid framework analysis (internal combination of the Etzioni triangle).

Results: In this study, 9 themes and ninety codes were obtained. The main themes were structural problems, educational problems, limitations, human resources and inaccurate evaluation.

Conclusion: The analysis of the data showed mismatch between the implementation of clinical governance model and Etzioni model that have resulted ineffective implementation of the model. Since this system needs personnel cooperation and teamwork, for increasing the normative power and reducing the lack of motivation, trying to provide the appropriate culture, teaching basic concepts of system, and more participation of staff in decision-making are suggested.

Keywords: Challenges, Clinical governance, Military hospitals, University hospitals
ABSTRACT

Quality Evaluation of the Services Provided in the Nemazee Hospital Emergency Ward: The Viewpoints of the Patients

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BACKGROUND: The main mission of the hospitals in the health care system is to provide high quality care for patients and fulfilling their needs and expectations. The aim of this study was to evaluate the quality of the services provided in the emergency ward of Shiraz Nemazee hospital from the viewpoints of the patient.

METHODS: This study cross-sectional study was conducted from 2014 to 2015. The respondents of this study were 582 patients admitted to the emergency ward of the Nemazee hospital. Convenient sampling was employed and data were collected through SERVQUAL questionnaire. Questionnaire validity and reliability approved using expert panel and the Cronbach alpha coefficient (87%). Questionnaire measured quality gap in 6 dimensions including tangibles, ensure, assurance, empathy, responsiveness and access to services. Data were analyzed using SPSS software.

RESULTS: The results showed the highest and lowest gap in the dimensions of assurance (-0.55 ± 0.86) and responsiveness (-0.31 ± 0.98), respectively. There was significant difference between the expectations and perceptions in dimensions of tangibles, ensure, assurance, empathy, responsiveness and access to services (P>0.05) and there was no significant difference in the dimensions of responsiveness, assurance and empathy.

CONCLUSION: A appropriate status was found in the quality of services provided in the emergency ward of the hospital, however, significant gaps were found in some aspects of quality in the hospital which suggests that managers should pay more attention to the quality improvement programs to provide patients with more satisfaction.

KEYWORDS: Emergency, Quality gap, Expectations, Perceptions
ABSTRACT

Background: Tele-ICU is a central intensive care unit with audio-visual facilities that monitor and support ICUs that dispersed in different geographical areas. This study aimed to review the Tele-ICU models of care and human resource management.

Methods: This review study was done by reviewing theses, books and articles in the field of Tele-ICU.

Results: Tele-ICU models of care depend on the factors such as the number of patients and the level of patient consciousness, hospital sources (including human resources, equipment, Information Technology) and management planning. Three models of patient care included continuous, proactive and reactive models. Tele-ICU staffs may be grouped in four main categories: intensive care physicians, nurses with at least 5 years of experience in the intensive care units, secretaries, and information technology specialists. Such models of care reduce mortality and the length of hospitalization and also create a safe environment to improve patient care and financial performance.

Conclusion: Tele-ICU implementation requires resources allocation and changes in the structure and process. A successful Tele-ICU system requires health care system stakeholders’ support. It is likely that the project failed without specialized assessment of human resource and models of care and barriers identification.

Keywords: Tele-ICU, Human resource management, Models of care
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Background: Knowledge sharing among nurses is an important issue in recent years which may help nurses to perform based on evidence and use their findings, experiences and information for informed decision making in clinical practice. The purpose of this study was to identify the barriers of sharing knowledge among nurses in training hospitals of Kerman.

Methods: Applying qualitative approach, semi-structured interviews were conducted with 21 nurses from the training hospitals of Kerman, Iran. The interviews were tape-recorded, transcribed verbatim, and analyzed using Colaizzi method.

Results: The barriers of knowledge sharing were identified and categorized in six main domains: culture, financial facilities, politics, rules and regulations, communications, human resources, and management process.

Conclusion: for the barriers of knowledge sharing among the nurses were quite variant and may prohibit them from playing their role, effectively, while providing services in the hospitals. There is a necessity to adopt specific measures on the challenges facing knowledge sharing among nurses.

Keywords: Knowledge sharing, Nurses, Barriers

Barriers to Knowledge Sharing Among Nurses in Training Hospitals of Kerman

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ABSTRACT

Background: The increase in the rate of unnecessary caesarean section (CS) has become one of the serious concerns in some health systems. The present study aimed to assess the challenges and strategies of promotion in instructing vaginal delivery from the perspective of obstetricians and gynecologists in Isfahan in 2015.

Methods: In this qualitative study semi-structured interviews were conducted with the obstetricians. Purposeful sampling method was used and continued until saturation of data (9 interviews). The interviewees were assured that their information will remain confidential. Thematic analysis was used to analyze the data.

Results: Finding demonstrated that promotion of instructing natural childbirth has achieved the first 2 aims including “making the natural childbirth franchise free” and “reducing CS rate”. Thematic analysis showed that participants consider the factors including “culture ignorance”, “obligatory increase for natural delivery rate”, “no attention to law reforms at the natural childbirth”, “unacceptable payment system”, and “payment delays on new franchises” as the most significant challenges and shortages of above-mentioned instruction.

Conclusion: Promotion of instructing natural childbirth has somewhat happened in Isfahan, however, it has still significant shortages and limitations. Obligatory increase for natural delivery rate and medical ethics are the most prominent limitations which need to be studied in future studies.

Keywords: Obstetricians, Gynecologists, Promotion of vaginal delivery instruction, Iran
ABSTRACT

Investigating the Frequency of Informal Payments in Shiraz Hospitals

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Background: Informal payments are known as one of the biggest challenge in health care system and pose fundamental problems such as unbiased accessibility, sense of unreliability toward health care organization, unequal services and dissatisfaction among the clients. This survey investigated the frequency of informal payment in hospitals of Shiraz city.

Methods: This study was a cross-sectional study that conducted in surgical wards, internal medicine wards, emergency wards, ICU and CCU of two educational public hospitals of Shiraz medical university. Questionnaires were employed to gather the information and all data were analyzed using SPSS v. 15.

Results: A total of 201 respondents were questioned within which 44.8% were men and 55.2% were women. Among the 41 respondents who had committed informal payment, 16 subjects (39%) had paid it in cash, 4 subjects (9.8%) had bought for the stuffs things like medicine and medical instruments, 16 subjects (39%) provided gifts such as flowers, pastries and other stuffs and 5 subjects (12.2%) had committed informal payment in the form of job commitment.

Conclusion: Although the results showed that frequency of informal payment is not high, the point is that informal payment is considered as an illegal practice. Therefore the information provided by the respondents may not be accurate and we can presume that the likelihood of informal payment is worse than what we may imagine and more studies are required to elicit accurate information.

Keywords: Informal payments, Health care, Educational hospital, Iran
ABSTRACT 63

Development of Financial Indicators for Hospital Performance

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BACKGROUND: Managers need to valid financial indicators to monitor the financial performance, solve financial problems and achieve their mission. This study aimed to develop a set of financial indicators for Iranian hospitals through literature review and investigating the experts’ opinions.

METHODS: This study consists of three steps. At the first step, using a literature review and three focus group discussions, the financial indicators that were deemed to be important measures of hospital financial performance were identified. As the second step, a multidisciplinary panel of experts rated the indicators via two-round Delphi technique. Through the third step, the panel assessed the indicators at one consensus meeting.

RESULTS: Among 102 indicators identified at the first step, 79 indicators were selected in the Delphi technique. In the panel consensus meeting, the positive consensus was achieved on the 34 indicators. Upon the experts’ opinion, eight indicators were added after few modifications and 13 new indicators were developed. Finally, 55 indicators were selected as financial indicators for assessing the hospital performance.

CONCLUSION: This study developed a set of financial indicators for Iranian hospitals, that helps hospital managers to identify hospital financial trends over a period of time and compare their performance with peer hospitals. The information derived from these indicators may guide plans and decisions to improve hospital financial performance.

KEYWORDS: Delphi technique, Financial indicator, Financial performance, Hospital
ABSTRACT

Identifying Key Indicators for Assessing Hospitals’ Financial Performance: A Systematic Review

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BACKGROUND: Monitoring the financial performance helps hospitals achieve financial viability. Many hospital executives use key financial indicators to measure financial performance that is critical for the success of hospitals. We undertook a systematic review to determine the hospital’s key financial indicators.

METHODS: A systematic review of the literature was performed. PubMed, Web of Knowledge, Science Direct, SID and Magiran were searched for articles published in English and Persian from January 2000 to March 2013. Search terms were: “financial performance”, “ratio analysis”, “financial analysis”, “financial evaluation”, “financial assessment”, “financial management”, “financial audit”, “financial health”, “financial system” and “hospital finance”.

RESULTS: Ninety-seven financial indicators were identified in the included articles. Among them, 14 indicators were selected as the most frequently used indicators. These indicators were: current ratio, total margin, operating margin, return on asset, days cash on hand, net days revenue in accounts receivable, debt service coverage, average age of plant, return on equity, equity financing, long-term debt to capitalization, outpatient revenue to total revenue, salaries to total expenses and debt to equity. In addition, advantages and limitations of these indicators were extracted from the included articles.

CONCLUSION: The identified indicators could not provide a comprehensive insight into the hospital’s financial strategies. Therefore, we proposed four indicators- cash flow margin, acid test ratio, net present value and modified internal rate of return- that seem necessary to evaluate hospital’s financial strategies. Eighteen key financial indicators were selected as final indicators.

KEYWORDS: Financial Indicator, Financial Performance, Financial Strategy, Hospital Financial System
ABSTRACT 65

Health Care System Responsiveness Domains in Iran, Europe, and Other Countries: A Concise Review

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BACKGROUND: According to the World Health Organization (WHO) definition of health, there are factors that can affect people's health besides the medical needs. These factors are the way that patients are treated and the environment in which they receive services, the aspect which is defined as "Responsiveness".

METHODS: In this review we have had a brief look at previous studies on responsiveness in health care systems in Iran and some other countries to find the most important responsiveness domains in health care systems. The required information were collected by searching keywords of "Responsiveness", "non-clinical factors", "non-clinical aspects" in national and international literature including PubMed, Ovid, Science Direct, Magiran and SID.

RESULTS: Responsiveness, as a tool for assessment of people’s opinion about health care system was first introduced by WHO with eight domains. The most important aspects of responsiveness in health care systems which have been indicated in the most of the studies are clear communication, dignity and autonomy. Other important domains which can be placed in the second grade of importance are prompt attention, quality of basic amenities, access to social support and choice of care provider.

CONCLUSION: The expectation of people from health care system is specific for every country which cannot be expandable. Assessing each domain of responsiveness helps the concept to be improved in each country. Therefore, in order to take the most efficient steps toward people satisfaction of health care system, most important and specific domains of responsiveness must to be defined by health policy makers according to the specific situation of that country and to be used for policy making.

KEYWORDS: Responsiveness, Non-clinical factors, Non-clinical aspects
ABSTRACT

Assessing Quality of Hospital Services applying the SERVQUAL Model in Ahvaz

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Background: Service quality is the judgment of patients based on their perception on the services they have received. The perception will be compared with patients’ expectations in order to have a judgment about services quality. The aim of this study was to determine the gap analysis between expectation-perception of service quality from the patients’ viewpoint.

Methods: This was a descriptive study involving 550 outpatients in Ahvaz University of Medical Sciences teaching hospitals during 2015. SERVQUAL questionnaire was used to data gathering (Cronbach α for expectation scale = 0.88 and Cronbach α for perception scale = 0.85). Descriptive statistics as well as Friedman test and t-test were performed using SPSS16 for data analysis.

Results: A significant difference was observed between the patients’ perception and expectation based on the aspects of service quality questionnaire (P ≤ 0.004). The smallest gap resulting from differences in perceptions and expectations was associated to the item of having the right of choosing between the clinics (-0.05). On the other hand, the greatest gap between the perception and expectation of the patients was for the item of “waiting less than 15 minutes in the waiting area” with the value of -1.84. From the patients’ viewpoint, respect (Mean= 6.96) was the most important item and prevention with the mean score of 4.98 had the lowest importance.

Conclusion: Patients’ dissatisfaction may be resolved by employing proper strategies based on the priority dimensions identified in this study. Patients, experiences in hospitals is a major challenge to the managers. This study had reported useful information about patients’ perception on service quality which would be as a base for policy making.

Keywords: Hospital, Outpatient, Service quality, SERVQUAL
ABSTRACT 67

Association Between Health Expenditure and Health Indices: A Cross-Country Study

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ABSTRACT

Background: Over the past few decades, with the growth of living standards and welfare in different societies there has been a significant increase in health costs. One of the most important factors affecting a country’s health indicator is economic factors including health expenditure. This study aimed to compare the changing trends in health expenditure per capita and health indicators in several developed and developing countries.

Methods: This was an applied comparative research in which the health indices of the WHO and the World Bank for the years 2003 to 2013 were employed in order to compare the changes in health expenditure and health indices in the following countries: Denmark, the Netherlands, Saudi Arabia, Turkey, Iran, Nigeria, and Liberia.

Results: Saudi Arabia with costs more than those of Turkey and Iran had higher total fertility rate and an annual population growth because of Saudi women’s high fertility background as the result of cultural and religious issues and low literacy rate of women. Iran with health expenditure per capita less than Turkey had a lower total mortality rate of infants and children under 5 years of age and lower total fertility rate due to its wide and organized network of primary health care, covering nearly 100% vaccination of children as well as the widespread implementation of family planning policy in Iran.

Conclusion: The increase in health expenditure per capita in selected countries did not have a significant impact on the changing trends in health indicators. Infrastructure improvement of the health system is very costly, thus an increase or decrease in health expenditure per capita in the short term is unable to make significant changes in health indices. Accordingly, it is necessary to consider indices for measuring the development of health system infrastructure.

Keywords: Comparative study, Health expenditure per capita, Health indicators, Selected countries

http://journals.tbzmed.ac.ir/HPP

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A Quality Analysis of Medical Tourism Services: A Systematic Review

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ABSTRACT

Background: Medical Tourism was defined as providing cost-effectiveness medical care with assistant of tourism industry for patients required surgery or other special treatments. This study was performed to systematically review literature in the field of medical tourism and analyse the service quality of this industry for future applied research.

Methods: A systematic literature search was carried out base on the four electronic databases including PubMed, Science Direct, Scopus, and Thomson Reuters until June 2015. Also, the references of the final selected articles were reviewed to identify the relevant articles. Search strategy included the following combination of keywords: “Medical tourism”, service quality. From 128 articles that were identified in the first search, 16 articles were included in the final review. One article from the selected articles were extracted and performed content analyses in regards to the type of intervention.

Results: Nine out of the 17 articles completely related to the research questions were from the Scopus database. Fourteen articles were descriptive. The most of the articles were conducted in Asia (13 articles). In 8 of these papers a questionnaire was used. Ten studies were done in hospitals. The main topics of study were included SERVQUAL, the necessary changes, patient satisfaction, motivations, patients’ expectations, patients’ perceptions, patients’ concerns and service quality factors.

Conclusion: Healthcare organizations are looking for various ways to service quality assessment and its improvement. The obtained results showed good reliability, validity and internal consistency for SERVQUAL questionnaire to be used for medical tourists. The results indicated that the application of SERVQUAL model enables hospital managers to evaluate the quality of services as evaluated by patients as their most important clients and enhance the quality of such services through proper planning and removal of deficiencies.

Keywords: Medical tourism, Service quality, Systematic review
ABSTRACT

Reallocation of Beds in Shafa Hospital of Kerman Using Goal Programming Model

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Background: In order to improve health among communities the hospital sources such as beds and staffing should be properly allocated and used. The aim of this study was to reallocate the beds of Shafa hospital of Kerman using goal-programming model.

Methods: This was a cross-sectional study used goal programming model and software WinQSB to optimize beds allocation. Applying review of the literatures and interviews with experts, the constraints in beds allocation were identified and using the collected data the desired model was designed.

Results: Hospital beds were redistributed based on the constraints of the goal-programming model and objectives. The results showed that there was a shortage of beds in departments such as burns, GICU, HICU, cardiac surgery, emergency, and orthopedics and excess of beds in the ear, nose, and throat (ENT), ophthalmology, and neurology departments.

Conclusion: It is anticipated that the optimal allocation of hospital beds regarding hospital activity indicators can lead to greater justice in the provision of services and a better distribution of resources.

Keywords: Goal programming, Inpatient bed, Bed allocation
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Toward a Better Nutritional Aiding in Disasters: Relying on Lessons Learnt From Bam Earthquake

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ABSTRACT

Background: Examining various problems in the aftermath of the disasters is very important to the disaster victims. Managing and coordinating Food supply and its distribution among the victims is one of the most important problems after an earthquake. Therefore, the purpose of this study was to recognize problems and experiences in the field of nutritional aiding during Bam earthquake.

Methods: This qualitative phenomenological study. Using the purposive sampling method, 10 people who had experienced nutritional aiding in Bam earthquake were interviewed. Colaizzi’s method of analysis was used to analyze the data.

Results: The findings of this study identified 4 main categories and 19 subcategories concerning challenges in the nutritional aiding in Bam earthquake. The main topics included managerial, aiding, infrastructural and administrative problems.

Conclusion: The major problems in nutritional aiding included the lack of prediction and development of a specific program on suitable nutritional pattern and nutritional assessment of the victims in a critical condition. Forming specialized teams, educating team members about nutrition and making use of experts’ knowledge are the most important steps to resolve these problems in the critical conditions. These measures are the duties of the relevant authorities.

Keywords: Earthquake, Nutritional aiding, Disasters, Bam
Health Services Utilization and Responsiveness: A Comparison of Slum and Non-slum Regions in Iran

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ABSTRACT

Background: The aim of this study was to compare health care utilization and responsiveness between Akhmaqaya slum region and a representative sample of Tabriz, Iran.

Methods: A cross-sectional study (n= 592 households) was conducted using Cluster sampling. Using a valid questionnaire, responsiveness and utilization were analyzed applying score and item analyzing, respectively.

Results: Almost 15% of Akhmaqaya slum households had used inpatient services compared to 20.1% of the Tabriz representative sample. Preventive services were the most used services by Akhmaqaya slum households. Responsiveness level in both regions was low.

Conclusion: Generally socio-economic differences seemed to contribute with the health services utilization inequities between Akhmaqaya slum and Tabriz representative sample.

Keywords: Health care utilization, Responsiveness, Residency
ABSTRACT

Health Systems Control Knobs in Iranian Primary Health Care System: A Systematic Review

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ABSTRACT

Background: After the establishment of primary health care (PHC) program in Iran, health indicators in this country have improved every year. This progress was so rapid that a number of shortcomings and weaknesses of the PHC program remained silent behind the success of the PHC program. This study aimed to assess the status of PHC system (Strengths, weaknesses, opportunities and threats) in terms of health systems’ control knobs.

Methods: The study search conducted through four English databases of Science Direct, Web of Knowledge, PubMed, Springer and 2 Persian databases of Magiran and SID. Keywords were selected from MeSH and included primary health care, PHC and Iran in both Persian and English. No time limit was considered.

Results: Iran’s PHC system has numerous successes in dealing with health system control knobs, which a large part of that is related to the health network implementation and the role of Behvarz in improvement of health indicators in rural areas and the elimination of urban-rural inequality. However, there are some weaknesses, opportunities and threats in the Iranian PHC system, as well.

Conclusion: Considering strengths of the primary health care system in Iran, the current structure could be improved with some modification in coordination with various influencing factors including increasing the number of screening programs for non-communicable diseases and related risk factors, road accidents and population aging. Also PHC’s current manual information and documentation system does not provide the required information for decision makers and policy makers. Therefore, it needs to be changed and moved toward electronic information system.

Keywords: Primary health care, Health system, Control knob
ABSTRACT 73

Health Professional’s Perspective on Clinical Governance Components in Iranian Primary Health Care System

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ABSTRACT

Background: Despite huge advances in improving the most of health indicators, primary health care (PHC) in Iran has faced several problems in improving the quality of care inside the health care system. Developed countries with similar problems have used various models of PHC governance for improving quality in their PHC system. This study aimed to obtain health professionals’ perspectives on the suitable pillars and components of Iran’s PHC governance model.

Methods: A purposeful sampling method was used to select seven participants who had a minimum of five years of experience in PHC and background education in the field of medical sciences. Three focus group discussions were conducted and data were analyzed using the conventional content analysis method.

Results: After data analysis, eight main categories were identified: management and leadership, effectiveness of PHC, human resource development, safety, quality improvement, health information management, community involvement and customer participation and health care evaluation and audit.

Conclusion: Each country must identify an appropriate model for quality improvement. According to health experts’ perspectives in this study, using the aforementioned pillars and their subsets, Iranian PHC system may achieve great progress.

Keywords: Primary health care, Clinical governance, Quality, Pillar, Qualitative research, Iran
ABSTRACT

The Impact of Delivery Type on Women’s Postpartum Quality of Life

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BACKGROUND: Type of delivery has impact on women’s postpartum quality of life (QoL). No study has investigated ad compared QoL after cesarean section (CS), natural vaginal delivery (NVD) and NVD with water birth as a novel method. The aim of the study was to compare women postpartum QoL after three delivery modes in Shiraz hospitals.

METHODS: This cross-sectional study was conducted on women after NVD, CS, and NVD with water birth at 2 months postpartum using a standard specific questionnaire of QoL after child birth. Then, the data were analyzed using descriptive statistics and one-way analysis of variance (ANOVA) in SPSS, version 18.

RESULTS: NVD with water birth had highest mean score for mothers’ feeling toward themselves, physical health, satisfaction with delivery, choice of delivery method for future pregnancies and global health status compared to the CS and NVD groups. However, there was no significant association. There was significant association between NVD and CS with less economic burden (P<0.001) and feeling toward sexual intercourse (P=0.012), respectively.

CONCLUSION: The type of delivery had association with women postpartum QoL in two dimension of economic burden and sexual intercourse. It is suggested that pregnant women and obstetricians’ knowledge toward NVD with water birth should be improved through appropriate education in delivery preparing courses.

KEYWORDS: Cesarean section, Natural childbirth, Quality of life, Water birth
Auditing Tabriz General Dentistry Offices to Assess their Compliance With National Licensure Standards in 2015

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ABSTRACT

Background: In licensure process, a government authority grants permission to an individual practitioner or healthcare organization to operate in a defined profession. The purpose of this study was to audit Tabriz general dentistry offices to assess their compliance with national licensure standards in 2015.

Methods: This was a cross-sectional study within which 197 general dentistry offices in Tabriz city were randomly assessed using a researcher-made checklist. After descriptive analyzing, the statistical relationship between background variables and audit scores was assessed using the t test and ANOVA. All analyses were performed with the SPSS software v. 19.

Results: The study results showed that the total mean score of compliance with licensure standards in Tabriz dentistry offices was 78.5%, within which the medical records dimension (92.3%) and the non-medical equipment dimension (66.4%) had the most and the least compliances, respectively. The results illustrated a significant relationship between the job experience of dentists with standards compliance score in law and policy consideration and hygiene and infection control dimensions. The dentists with 16-20 years of job experience compared to the dentists with 11-15 years of job experiences achieved more score in law and policy consideration dimensions. The dentists with 1-10 years of job experience compared to the dentists with 11-15 years of job experience achieved more score in hygiene and infection control dimension.

Conclusion: The compliance of national licensure standards in Tabriz general dentistry offices was relatively acceptable but some of standards especially in non-medical dimension need to be improved.

Keywords: Audit, General dentists, Licensure, Office
The Incidence of Needle Sticks Injuries Among Medical Students in Tabriz Imam Reza Hospital - 2014

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ABSTRACT

Background: Needle stick injuries are a common and serious occupational hazard in the medical settings. So, this study was aimed to assess the incidence of needle stick injury among medical students at Tabriz Imam Reza Hospital in 2014.

Methods: This was a cross-sectional study. Data were collected from 211 medical students in Tabriz Imam Reza Hospital. A valid and reliable researcher’s made questionnaire was used for data collection in December 2014 after getting informed consent form from all the participants. The questionnaire had two main parts; the demographic variables and the phenomenon of needle stick injuries and its relevant parameters. The data were firstly analyzed descriptively and the obtained results were reported in the form of frequency (percentage) for the qualitative variables and the mean (standard deviation) for the quantitative variables. All the analyses were conducted using SPSS software.

Results: The findings showed that 36% of the medical students had experienced needle stick injuries in the last year (with confidence interval of 95%) and the mean annual frequency was 3.11 times per person. There was a statistical relationship between needle stick exposure and age ($P=0.019$), educational level ($P=0.001$) and the hospital ward ($P=0.004$). The students older than 30, medical research fellows and students working in the surgery and pathology wards experienced needle stick injuries more than the others, significantly.

Conclusion: This study showed a high incidence rate of needle stick injuries among medical students and highlighted the need for implementing precise interventions.

Keywords: Medical students, Needle stick injuries
ABSTRACT

Improvement of Visit Quality in Health Sector Evolution Plan of Iran: Evidence Based or Imitation Based?

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Background: Evidence based visit quality is a crucial aspect of patient-doctor relationship and its inadequacy can negatively influence the treatment efficiency. What is the quality improvement plan of visit in Iran? Evidence based or imitation based? This study aimed to survey visit quality as a domain of the Health Sector Evolution Plan (HSEP) of Iran.

Methods: A sample of 540 patients referred to the outpatient clinics of Sheikh-Al-Raeis of Tabriz province (North West of Iran during 2014) was randomly selected and surveyed. Data were collected by a researcher-made checklist based on Donabedian quality model and summarized using descriptive statistical methods by SPSS-19.

Results: The average visit length was found to be 8.52 minutes, which is significantly lower than the minimum average of 15 min. approved by the Iranian Ministry of Health and Medical Educations (MOHME). The average of waiting time was found to be 101.57 min. for patients. The results showed that the structural quality, the process quality and the outcome quality (patients’ satisfaction) were found to be 51.36%, 62.69% and 50.82%, respectively. The results showed that the quality improvement plan of visit was less than expected.

Conclusion: The starting point of health care delivery to patients is consultation. Visit length was shorter than those reported in other developed and developing countries, which may result in non-evidence based plan. This study showed that quality improvement plan of visit has to be reviewed, because it has not been successful in the part of visit quality of doctors.

Keywords: Visit quality, Evidence-based quality, Health Sector Evolution Plan (HSEP)
ABSTRACT

Background: This study aimed to identify the functional requirements for Computerized Provider Order Entry (CPOE) software and the designation of this software in Iran.

Methods: This applied study was conducted using literature review, interview, and focus group discussions in Shiraz University of Medical Sciences (SUMS) in 2013-2015. The study sample consisted of physicians (n=12) and nurses (n=2) in the largest hospital in south of Iran and information technology (IT) experts (n=5) in SUMS. The CPOE functional requirements were examined in 3 phases. Finally, the functional requirements were distributed in 4 levels and, accordingly, the CPOE was designed.

Results: The CPOE software had 7 main dimensions, namely (1) data entry, (2) drug interactions management system, (3) warning system, (4) treatment services, (5) ability to write in software, (6) reporting from all sections of the software, and (7) technical capabilities of the software. The nurses and physicians emphasized quick access to the CPOE software, order prescription section, and applicability of the software. The software was found with some items that have not been mentioned in other studies. After all, the software was designed by a specialized company of hospital information system in Iran.

Conclusion: This study was the first specific investigation of the CPOE software design in Iran. Based on the results, this software is suggested to be implemented in hospitals.

Keywords: Computerized provider order entry system, Nurse, Physician, Hospital
ABSTRACT

Assessment of Research Systems in “Universal Health Coverage”

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Background: Universal health coverage (UHC) is the desired goal of achieving universal access to health services without having to endure pain and financial difficulties. Multiple factors can help steer countries toward UHC. The current study was conducted to outline the status of research systems in UHC–related organizations and to identify their system’s existing barriers.

Methods: Firstly, the UHC–related organizations (in Iran) were identified. Then, the semi-structured interviews were held. Thematic analysis was used to analyze the interviews. Categories and sub-categories were deductively extracted from the text on the basis of research system performance, as follows: resource provision, production & utilization of knowledge, existing resources and stewardship. Then, the themes were inductively extracted from the interviews.

Results: Many barriers existed for performing research in UHC–related organizations. The stewardship barrier seemed to play a key role in this matter, such that structural changes in organizations affected the production & utilization of the evidence. Limited Financial and human resources were evident in the most of organizations. Research questions were not comprehensively identified. The conducted studies either were not designed to answer the relevant questions and/or were not appropriately reported to policy makers. As a result, their implementation in decision making did not reach the ideal status.

Conclusion: Research utilization aimed at achieving UHC address the issue only if research is conducted to product evidence required for decision–making and implementation. Therefore, in addition to the interventions recommended by the World Health Organization (WHO), we must design and implement interventions tailored to the UHC–related organization’s local barriers and needs.

Keywords: Universal health coverage, Research systems, Iran
ABSTRACT

The Perspective of Health Sector Reforms; Challenges and Opportunities

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Background: Health sector reform, with a special look at health, was an important plan in the Iranian health sector. Performing this plan has covered some problems of the patients with moderate and weak economical levels. However, this plan has many challenges and consequences. In this article we discuss about such cases.

Methods: This was a review study. The search strategy conducted in the databases PubMed, Google, Magiran and Iranmedex. Also, we searched librarian resources and journals. Finally 84 related articles included in the review.

Results: The result showed that performing health sector reform has some consequences for health indices, such as increasing access to health services, decreasing unessential charges and increasing the client satisfaction. On the other hand, the lack of effective and continuous of the physicians, decreasing the quality of services in governmental hospitals, lack of enough nurses, increasing the work load of personnel, increasing dissatisfaction in personnel, consumption of the hoteling budget in renovation and maintenance of other sectors and equipment are the most important challenges in this field.

Conclusion: The result of this study showed that some goals of this plan has been met but there are some problems in other goals that needs for correct intervention in regional and national level. Performing health sector reform cause to decreasing the patients’ out of pocket and consequently increasing the patients’ satisfaction in governmental hospitals and, also, increasing the hospital bed coefficient.

Keywords: Health sector reforms, Challenges, Opportunity, Hospital system, Public health Policy
ABSTRACT 81

The Impact of Health Reforms on Mother and Infant Health Indicators in Developing Countries: A Systematic Review

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ABSTRACT

Background: The need for fundamental and structural reforms in all health systems is more crucial than ever. The aim of this study was to assess the impact of health reforms plan on mother and infant health indicators in developing countries.

Methods: This study was conducted as systematic review by searching in the Persian and English databases during 2000-2016 with relevant keywords. According to inclusion and exclusion criteria, the result of this search was 2837 articles that were refined step by step and finally six articles were selected. Then, the findings were entered in summarized tables and in the next step, they were reviewed and concluded.

Results: The most important indicators were the rate of normal vaginal delivery, the ratio of cesarean section to normal vaginal delivery, obstetric complications, IMR, MMR and stillbirth rate. The results of this study were consistent with those in the other studies within which these indicators were introduced as the priority indicators that may be affected by health reforms. The results showed that the reforms have had positive impacts on the mother and infant health indicators.

Conclusion: The main reason for the improvement of indicators was to expand health system, increase labor and more governmental support from the health sector. The reforms should confront with challenges of health system. The government should develop and implement effective policies. The stakeholders should support interventions based on evidence for mothers and infants’ health.

Keywords: Health reform, Mother, Infant, Health indicators
ABSTRACT 82

Quality Evaluation of the Emergency Ward Services in Shiraz Nemazee Hospital: The Patients’ Viewpoint

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ABSTRACT

Background: The main mission of the hospitals in the health system is provision of quality care for patients and fulfilling their needs and expectations. The aim of this study was to evaluate the quality of care provided in the emergency ward services of Shiraz Nemazee hospital from the patient’s viewpoint.

Methods: This was a cross-sectional study conducted in 2014-2015. The population of this study was all patients admitted to the emergency ward of the Nemazee hospital. Simple sampling was employed and sample size was determined to be 582 patients. Data were collected through a questionnaire SERVQUAL. Questionnaire validity and reliability approved using experts panel and Cronbach alpha (0.87). The questionnaire measured the quality gaps in six dimensions including: tangibles, ensure, assurance, empathy, responsiveness and access to services. Data were analyzed using SPSS software.

Results: The highest and the lowest gaps were in the dimensions of assurance (-0.55 ± 0.86) and responsiveness (-0.31 ± 0.98), respectively. There was significant difference between expectations and perceptions in tangibles, ensure, assurance, empathy, responsiveness and access to services (P > 0.05) dimensions.

Conclusion: There was an appropriate status in the quality of services in the emergency ward of the hospital but significant gaps in some aspects of quality in the hospital suggest that managers pay more attention to the quality improvement programs to provide more satisfaction for the patients.

Keywords: Emergency, Quality gap, Expectations, Perceptions
ABSTRACT

National Health Information Network as the Base of Effective Health Management

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Background: The lack of coherence and rupture in the health sectors and then the rupture in health information systems and the lack of and information are the important issues that face health managers with serious challenges. This study aims to find the appropriate solutions for these challenges.

Methods: In this review study, we used related keywords in terms of study subject (national health information network) and search the scientific databases and other valid sources. Overall, over the 50 papers, documents and governmental reports were retrieved and extracted.

Results: National health information network can have an important role in effective health management through sharing the data and information, tracking facility, disease monitoring, identifying disease prevalence, managing cost of healthcare services, and secondary use of health data. The early results from the national health information network in the United States confirm these issues.

Conclusion: Although designing and initiating the national health information network needs considering some factors, the role in effective management of healthcare is undeniable. In order to prevent the previous fault experiences especially in national level, designing and initiating a health information network is suggested.

Keywords: National health information network, Effectiveness, Healthcare management
Patient Safety Culture in Shahid Arefian Hospital, Urmia, 2014

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ABSTRACT

Background: Quality of care includes some elements within which patient’s safety is of great importance. Patient safety culture is one of factors that have an effective role in promoting patient safety level in healthcare centers.

Methods: This was a cross-sectional study conducted in 2014. The study populations included all nurses, lab and radiology staff working in the hospital. We used a standard questionnaire in patient safety culture. The data analyzed using t test and one way ANOVA in SPSS v. 20.

Results: The participants completed 214 questionnaire. The mean of patient safety score in the hospital was 2.28 out of 4. Based on ANOVA test there was significant relations between the safety culture dimensions and work unit, job line, time of work in a week, number of reported events, having work background in a job and having work background in hospital (P < 0.05).

Conclusion: Although the total score of patients’ safety culture was in an acceptable position, the frequency of error reporting, lack of punishment response to error, lack of staff, team work between the units and total perception of safety were the safety domains needing promotion in the hospital.

Keywords: Hospital, Medical error, Evaluation, Patient safety culture
The Viewpoints of Physicians and Nurses on the Health Sector Reforms

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ABSTRACT

Background: Health sector reforms were conducted to support people financially, provide justice in accessibility to health services and promote the quality of services in Iran. As the satisfaction of care provider has direct impact on the clients, success in implementing this plan would be impossible without support and collaboration of the health team.

Methods: This was a cross-sectional descriptive study. The sample of study included 313 nurses and 25 physicians, respectively. Data collected using the health sector evolution questionnaire. The data analyzed using SPSS v. 18 and the information presented in diagrams.

Results: The dissatisfaction rate of the specialists from the health sector reforms and changing in incomes were 87% and 47%, respectively. The dissatisfaction rate of the nurses from the quality of therapeutic and diagnostic activities and referral rate were 36.95%, 73.91%, respectively.

Conclusion: Based on the viewpoints of physicians and nurses, the dissatisfaction rate has been increased due to the increasing rate of referral, incorrect behavior and the people’s high expectations from the personnel since initiating the heath sector reforms.

Keywords: Health sector evolution, Nurse, Physician
ABSTRACT

**Background:** Health promotion and maintaining the health of communities are important pillars in community development. Due to the rapid changes happened in people's nutritional behaviors, lifestyle has become one of substantial factors on population health. The aim of this study was to review the impact of lifestyle on population health.

**Methods:** This was a review study conducted on the literature existed in the libraries.

**Conclusion:** Health is one of the essential needs in human life and is the essential base for human progress. Based on the review it was found that type of lifestyle that people choose has a direct impact on people health. In many studies, the positive relations between healthy lifestyle and health have been approved. We can help healthy lifestyle promotion through public education.

**Keywords:** Lifestyle, Health, Health promotion

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ABSTRACT

The Role of Implementing Clinical Guidelines in Promoting Health Services

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ABSTRACT

Background: Clinical guidelines are systematic recommendations that help patients and physicians in decision making for exposure with a specific clinical situation. If being set as correct, scientific and appropriate with community, such guidelines can promote the quality and quantity of health services. In this paper, we studied the role of implementing clinical guidelines in promoting health services.

Methods: In this review we searched the Internet and librarian databases.

Results: Utilizing the clinical guidelines in clinical teaching can promote the performance of physicians in giving optimized decisions. Indeed, clinical guidelines are a document that is based on setting the hospital protocols, assists the physicians in taking insurance policy and pay for performance. It may also be an appropriate tool in managing the deniable decision, managing the common high cost diseases. Clinical guidelines make the clinical audience possible through extracting standards and expectable outcomes.

Conclusion: Clinical guidelines are the recommendations that if to be prepares systemically can result in increasing the efficacy of interventions and promoting the justice in access to services. There are some considerations when implementing these guidelines including: how to be presented to the target group, how to be prepared the guide map as officially authorized document, how to be determined the criterion for supervision on performance based on the guidelines and how to be coded the strategies for service purchasing.

Keywords: Health promotion, Clinical effectiveness, Clinical guidelines
ABSTRACT

Policies and Programs on Diabetes Control and Prevention in Iran: A Documents Analysis

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Background: Analysis of trends between 2005 and 2011 showed an increase rate of 35% in the prevalence of diabetes in Iran. Considering the high prevalence of diabetes and its growing prevalence rate in Iran, the review and analysis of policies and programs on diabetes prevention and control is important. The purpose of this study was to analyze the policies and programs related to the prevention and control of diabetes in Iran.

Methods: This study was a policy analysis using content analysis of key documents on policies and programs for prevention and control of diabetes in Iran. The policy triangle conceptual framework was used in this study. PubMed and Science Direct databases were searched for relevant studies between 1989 and 2014. Hand searching of the journal articles and references of the included studies was conducted. Selected documents in this study were analyzed by MAXQDA 10.

Results: The main reasons for considering diabetes in the country were the World Health Organization report in 1989 and calling on the countries to plan and take action, as well as the increasing prevalence of diabetes in the country and allocation of revenues from the tax on sugary drinks to the diabetes programs. The main challenges for performing the program includes the difficulties in referral levels of diabetes program, lack of sufficient funds to implement the program, the lack of coordination between the public sector and the private sector and limitations in information and reporting at professional levels of the program.

Conclusion: The government should strengthen the referral system, allocate more funds to the diabetes prevention and control programs and pay more attention to the educational programs at the community level. Also non-governmental organizations and the private sector should be more involved in the formulation and implementation of programs related to diabetes in the country.

Keywords: Document analysis, Policy analysis, Diabetes, Prevention, Control
ABSTRACT

Globalization in the Post Joint Comprehensive Plan of Action

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BACKGROUND: Iran’s health system was severely suffered following the sanctions imposed by Europe and the United States in 2012. After the agreement made on 23 July 2015 and the lifting off the sanctions, some the obstacles and difficulties were removed and many opportunities were provided in the field of health. This study focused on exploring the cross-border opportunities of health care system in the Post Joint Comprehensive Plan of Action.

METHODS: Valid databases such as Google Scholar, PubMed, Biomed Central and Science Direct were searched with keywords such as sanction, health tourism, globalization and medical tourism. Then, the studies related to the sanctions, existing opportunities in the Post Joint Comprehensive Plan of Action, globalization and health system tourism were retrieved.

RESULTS: At the international level, there are many globalization opportunities such as providing services for patients in regional and international level, providing and developing the telemedicine services, and health/medical tourism development. But, taking advantage of these opportunities requires the development of technology infrastructure, equipment and human resources with appropriate skills.

CONCLUSION: Islamic Republic of Iran due to factors such as geographic location and skilled manpower, and physical infrastructure has a considerable potential in globalizing of health system. In health tourism areas there have been some international administrative obstacles that seems to be resolved during the the Post Joint Comprehensive Plan of Action.

KEYWORDS: Sanction, Globalization, Health tourism, Medical tourism
Health Insurance and the Consequences of Fragmentation in Health System; A Review Study

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ABSTRACT

Background: Public health coverage is faced with many challenges in some developing countries because of the large payments cash. The World Health Organization has considered the medical payments as an important obstacle to use health care. It has been mentioned that the only way to reduce cash payments is encouraging the governments to approach to the prepayment risk accumulation.

Methods: This was a review article. The search for relevant articles conducted in science direct, SID, PubMed, and Google Scholar using the keywords of Insurance Fund, Integration, fragmentation and Health care insurance. Finally, 50 articles were found and after processing articles, 10 articles were retrieved.

Results: The findings of this study extracted in four important parts including: the health insurance situation, the consequence of the fragmentation of health insurance, policies to deal with the fragmentation of healthcare and health challenges of public health coverage.

Conclusion: The multiple aspects of the health insurance system may lead to consequences such as inefficient health insurance, weak financial protection and the lack of transparency. Decreasing the fragmentation of health insurance is essential to promote equity in using health services. Policymakers should focus on this issue and the strategies to resolve the issue. In this regard, strategies such as merging the health insurance funds are recommended.

Keywords: Merging the insurance, Health insurance, Health coverage, Fragmentation
ABSTRACT

Background: Statistics and information are the main sources of power in organizations and are the sources of all management activities. Information science system in the health sector organizations is also important and assists the managers in decision making for the systems and hospital information systems.

Methods: This study was a literature review and to find the related articles a search was conducted in Persian and foreign databases from 2005 to 2016. Keywords used included health information and hospital information systems. After the search, 61 articles were obtained and after a duplicate removal of unrelated and similar studies, 27 articles (abstracts or full texts) were finally retrieved. The selection criteria were the articles with access to the full-texts or abstract in the field of health information system (HIS). In the preliminary study, the abstracts were studied and if needed the full texts were studied.

Results: The results of this study showed that hospital information system plays a considerable role in improving the performance of the hospital management and medical staff. The HIS use was recommended in all the articles. Also the use of these systems has been considered as a necessary system in management reforms. Also, the majority of articles noted that taking decisions based on real information leads to increased efficiency and development of the management system.

Conclusion: Hospital managers are encouraged to create and develop hospital information systems and the experts and health managers should receive training in order to provide empirical data and produce relevant knowledge.

Keywords: Health information system, Hospital efficiency, Hospital information systems, Hospital management
ABSTRACT 92

Barriers of Accreditation Standards in Public Hospitals and Hospitals Affiliated to the Social Security Organization

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ABSTRACT

Background: Accreditation is one of the evaluation models of health care systems, especially in hospitals. In Iran, accreditation has been considered at the top of priorities of the Ministry of Health. Since, the implementation of hospitals accreditation in Iran is new, it has initially been met with resistance and constraints. This study was conducted at the end of 2014 as a narrative review.

Methods: The research focused on the studies that surveyed and criticized the accreditation program or expressed the experiences of implementing this program. We searched Google Scholar and Web of Knowledge with keywords like “negative points in accreditation” and “Weaknesses in accreditation” from 2007 to 2014. Also, in this study we used the experience of 50 officials and experts of social security hospitals for completing the contents of analysis.

Results: The challenges were found in six areas (contribution, technical knowledge, quality, assessment, resource and quantity) of barriers and confounding factors in accreditation. Along these lines, the strategies and programs have been proposed. These challenges hinder the proper implementation of the accreditation program and reaching to the accreditation goals in hospitals.

Conclusion: Implementation of these standards requires changing in the attitudes of employees, organizational culture, continuous training on the concepts of accreditation and quality improvement.

Keywords: Accreditation standards, Barriers, Hospital, Review study

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Critical Thinking in Nursing Process, Nursing Education and Decision-Making in Problem-Solving

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Background: Critical thinking and clinical decision making is an essential skill in professional nursing. As like as the multiple roles of nurse, including the role of care, education, counseling, management, and support it is necessary for nurses to have these two skills. By reviewing the literature, the impact of creative thinking and decision making on problem-solving process were assessed in this study.

Methods: This was a narrative review and the search conducted in Google Scholar, PubMed, clinical Medline, Magiran, SID, Iranmedex and Medlib using the following terms: nursing process, nursing education, making good decisions. Finally, 50 papers were found and the results were extracted from 34 papers.

Results: Nowadays, making decisions on some issues needs complex processes of thought, especially critical thinking which in turn promotes appropriate decision making in hospital. Different studies have provided different strategies to promote critical thinking. Learning two critical thinking and decision making skills is required for providing high quality nursing care. Using modern methods of teaching, especially problem based learning methods and concept mapping was found to be effective in developing critical thinking.

Conclusion: Decision-making in relation to the patient care is an important role in nursing. Having more attention to critical thinking on current curriculum and applying innovative approaches are necessities for nursing education. It was concluded that a combination of different educational methods has an important role in fostering critical thinking.

Keywords: Nursing education, Appropriate decisions, Nursing process, Problem solving
A Systematic Review on the Cost-Effectiveness of Self-care Educational Interventions

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ABSTRACT

Background: A lot of educational programs have been carried out to encourage self-care, improve patient safety, reduce the cost of patient and health system. The aim of this study was to investigate the cost-effectiveness of self-care educational interventions.

Methods: The search was conducted in Medline and ISI Web of Science for obtaining titles and abstracts containing the results in terms of cost-effectiveness of educational interventions associated with patient care. Finally, by examining the full text of 64 retrieved articles, the results were analyzed.

Results: The most of studies have shown that patient care was cost effective or cost-saving. However, due to lack in study design and especially the lack of accurate determination of related costs and short follow-up periods, the overall quality of economic evaluations was poor.

Conclusion: Self-care may be an appropriate substitute for hospital admissions in hospitals. Considering the shortages in hospitals’ beds, self-care education should be considered by policy makers. Therefore, promoting self-care can save large amounts of money and may help the country’s economy.

Keywords: Self-care education, Intervention, Systematic review, Cost-effectiveness
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

**Background:** nursing errors means a deviation from the standard of care. Determining the etiology of errors is considered as the first step in the prevention of errors. Therefore, this study aimed to determine the factors underlying errors in nursing.

**Methods:** In this review we searched some databases including web of knowledge, PubMed, Scopus, CINAHL, Ovid, science direct, Google Scholar, Iranmedex, SID and Magiran using keywords such as contributory factors, errors, root cause, medical, patient safety and nursing. After applying the inclusion criteria, 48 articles were selected.

**Results:** According to surveys conducted, underlying factors in the occurrence of nursing errors includes eight general aspects: service recipient factors, service provider factors, teamwork and communication factors, equipment factors, environmental factors, managerial and organizational factors, training and functional factors. Also in another category, the causes of nursing errors were analyzed in four dimension: systemic, technical, human and other factors.

**Conclusion:** Human resource management, team work, continuous training and justifying the person at the time of admission, continuous monitoring programs, engaging the patient in treatment, medical equipment management and standardizing, increasing the accountability of the people around the hospital in regard the patient safety, establishing clear policies and procedures and ensuring the availability of appropriate technology to improve the process of performance and health services are effective measures to prevent errors in nursing care.

**Keywords:** Influencing factors, Error, Nursing, The root causes, Patient safety
The Relationship Between the Distribution of Inpatient Beds and Household Expenditure in Iran

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ABSTRACT

Background: Inequality in the distribution of hospital resources like hospital beds has great importance in optimal provision of health services. The present study aimed to determine the relationship between distribution of hospital beds and household expenditure- as one of the indicators assessed for analyzing the economic and social well-being in different countries.

Methods: In this documentary research, data related to the household expenditures by the place of residency (urban-rural) in 2013 were received from Iran's Statistics Center. Also, the necessary data relating to distribution of active inpatient beds in 31 provinces (in the same year) were received from the ministry of health. Using SPSS software the correlation between the distribution of inpatient beds and household expenditure was determined and the Gini coefficient was compared to measure the rate of inequality.

Results: Yazd city had the most optimal distribution of inpatient, general and surgical beds and Ilam had the most optimal distribution of intensive care beds. In the distribution of all inpatient and general beds, Alborz, Sistan-o-Baluchestan and Kohgiluye-o-Boyerahmad were the most deprived provinces in the distribution of general, surgical, and intensive care beds, respectively., There was a significant relationship between food and non-food costs and distribution of surgical, general and intensive care beds in the urban household of all provinces. The Gini coefficient was 0.281.

Conclusion: Inequality in the distribution of inpatient beds between the provinces was somewhat significant. Medical equipment and outpatient services had also similar distribution. On the other hand, inequality in the distribution of these expenditures in the households of all the provinces was high.

Keywords: Inpatient bed, Distribution of bed, Gini coefficient, Household expenditure, Inequality
ABSTRACT

Background: Different methods have been used for improving quality of services in Iranian health system. One of these approaches is clinical governance which seeks to create a framework for organizations to provide clinical services to help them in responsiveness toward the continuous quality improvement and standards of services. The aim of this research was to study the level of success in implementing clinical governance approach in the teaching hospitals of Kerman using 9-step Karsh model.

Methods: This was a cross-sectional and analytical study. The study settings were teaching hospitals of Kerman and the study sample was 94 respondents including managers and nurse administrators, clinical governance experts, head nurses and nurses involved in clinical governance. The necessary data were gathered using a researcher-made questionnaire consisting 38 items based on 3 options Likert scaling (good, average, weak). The Karsh model comprised 9 steps including: Senior management commitment for change, accountability for change, creating structured approach for change, education, pilot implementation, communication, feedback, simulation and final user’s participation. Data analysis was carried out using descriptive and analytical statistics through SPSS software version 16.

Results: About 81% of the respondents were woman. The majority (74.5%) were formal staff and bachelor of nursing. The status of clinical governance in the teaching hospitals was assessed as weak by 56% of the respondents. There was a significant relationship between responsiveness and organizational position \( P = 0.012 \) and the field of study \( P = 0.00 \). Also, there was a significant relationship between structured approach and the organizational position \( P = 0.007 \). The relationship between communication and demographic characteristics, between final user’s participation and organizational position was statistically significant \( P = 0.000 \) and \( P = 0.03 \), respectively.

Conclusion: Clinical governance should be implemented based on proper need assessment and participation of all stakeholders to insure its performance in practice and its ability in quality improvement of the services.

Keywords: Clinical governance, Teaching hospitals, Nurses, Karsh model, Administrators
ABSTRACT

Quantitative Optimization of Nurses in an Emergency Department of a Teaching Hospital: A Case Study

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ABSTRACT

Background: Nursing staff are the main part of human resources in the hospitals, as about 62% of hospitals’ manpower and 36% of the costs in the hospitals are related to the nurses. Emergency departments according to their sensitive role in providing hostel and immediate medical care, require sufficient number of nurses. So, the present study aimed to optimize the number of nurses in an emergency department.

Methods: This was an applied research conducted in the first quarter of 1393 using Linear programming model. The study population consisted of all the nurses in the emergency department (n = 84) and all the patients who came to this department (n = 3342). Health information system of the hospital and Human Resource Information Database were used for collecting the number of patients and nurses. After extracting descriptive statistics, linear programming model was created using librarian review and specialized counseling and performed in WinQSB software.

Results: The number of nurses required was 26 in the morning shift, 24 in the afternoon shift and 34 in the night shift before implementation the model. After implementing the model, the optimized number of nurses in the emergency department was obtained to be 62 from which 17 nurses were required for the morning shift, 17 nurses for the afternoon shift and 28 nurses for the night shift. These numbers were reduced to 60 people after sensitivity analysis.

Conclusion: The number of estimated nurses using linear programming model were less than the number of employed nurses in the emergency department. The difference could be reduced with scientific understanding of the effective factors in allocating and distributing the nurses in the emergency department.

Keywords: Emergency department, Teaching hospital, Quantitative optimization, Nurses, Linear programming model
The Impact of Health Sector Evolution Plan on Hospital Performance Indicators in Shahid Beheshti University of Medical Sciences

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ABSTRACT

Background: Equitable access to hospital services is one of the aims of Health Sector Evolution Plan and the final aim is public health coverage. One of the methods to measure the level of achievement to these aims is measuring hospital performance indicators. The present study was conducted to assess the impact of Health Sector Evolution Plan on performance indicators in hospitals affiliated to Shahid Beheshti University of Medical Sciences.

Methods: This was a descriptive-analytical study conducted using performance data during 2012 to 2015 - two years before and 2 years after the implementation of Health Sector Evolution Plan. The study population consisted of all hospitals affiliated to Shahid Beheshti University. The required data were collected through statistical units of studied hospitals. The research data were analyzed by statistical tests such as Shapiro-Wilk, paired t test and Wilcoxon non-parametric test through SPSS software version 16.

Results: Bed occupancy rate, bed turnover rate, average inpatient, outpatient and emergency visits and the number of surgeries have been increased after implementation of the plan and the differences were statistically significant. Also, the average length of stay in hospital has been decreased by 0.2 day which was statistically significant.

Conclusion: The level of hospital services use has been increased significantly after the implementation of Health Sector Evolution Plan which may lead to provision of more services to many patients, increase in access to health services and finally development of health equity.

Keywords: Performance indicators, Governmental hospital, Health Sector Evolution Plan
The Response Time of Providing Pre-hospital Emergency Services in the Emergency Response Center of Kermanshah

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Background: The aim of present research was to study the response time in providing pre-hospital emergency services in the emergency response center of Kermanshah.

Methods: This was a descriptive retrospective study. Five hundred records of the patients from September 2012 up to September 2013 were selected and studied using non-probability method. The measuring tool was a preset cases record sheet which referred to the patients’ cases. Data analysis was done using descriptive and inferential statistics through SPSS version 18.

Results: The average time interval from getting the mission up to arriving to the scene, and arriving to the scene up to leaving the scene and the leaving the scene to arriving to the healthcare center were 7.28, 16.73 and 7.28 minutes, respectively. The overall mean of response time from the scene to the health center was 11.34 minutes.

Conclusion: Several interventions may be conducted to reduce the number of deaths and disabilities caused by the traffic accidents including increasing the speed of service delivery, reducing response times, equipped ambulances and required facilities, validity and reliability of the recorded data in the emergency dispatch departments, continues educating of ambulance staffs, employing higher educated staffs such as nurses, creating job satisfaction and increasing coordination between other departments involved in the process.

Keywords: Performance, Pre-hospital Emergency, Emergency Medical Services, Response time
ABSTRACT

Background: Medical services pricing is one of the most important tools for health policy makers. Tariff has effects on equity, efficiency, quality and accountability of services. Some groups believe that medical tariffs are real while others believe they are unreal. The present study aimed to understand and recognize the real concept of medical services tariffs from the perspective of health managers.

Methods: This was a qualitative study. Sampling was purposive and continued until data saturation. Participants were 12 health managers of Tehran, Isfahan and Tabriz interviewed according to the aim of study. Data analysis was based on thematic analysis. “Reliable information”, “trustworthy”, “reliability” and “validity” of data were the criteria that was considered.

Results: According to the participants’ point of view, the real tariffs consisted of two aspects: “definition of the right tariff” and “practical formulation of the real tariff”. The practical part of real tariff was formulated in four aspects: technical, health system’s policies, geographical differences and services’ ownership.

Conclusion: According to all participants’ perception, the current situation of tariffs is inappropriate. In this study, neglecting the effects of some factors in setting the medical tariffs was mentioned. It was emphasised that to determine the real tariff, paying attention to the technical aspects, health system’s policies, geographical differences and services’ ownership is necessary.

Keywords: The real tariffs, Tariffs, Medical Services
ABSTRACT

The Effect of Health Sector Evolution Plan on Outcome Indicators in Hospitals of Tehran & Iran University of Medical Sciences

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ABSTRACT

Background: Health sector evolution plan started with three approaches consisted of financial protecting of people, creating equitable access to health services and improving the quality of services. This research aimed to study the effect of health sector evolution plan on the outcome indicators in the hospitals affiliated to Tehran and Iran Universities of Medical Sciences.

Methods: This was a descriptive-analytical research. Fourteen outcome indicators were assessed in the periods of 12 months before and 12 months after the implementation of the health sector evolution plan. For statistical analysis SPSS version 22 was applied.

Results: According to the test's results, the number of patients who left emergency departments within 12 hours, the number of patients with complains and the number of normal vaginal deliveries have been increased after implementation of the plan and the differences were statistically significant. On the other hand, the number of cesarean section deliveries and hospital infection cases have significantly been decreased after implementing the plan.

Conclusion: Health sector evolution plan has had positive effects on the performance of hospitals. Implementation of normal vaginal delivery promotion plan and the residency of the specialized physicians may have resulted in the increase in the outcome indicators, like the number of patients left emergency departments within 12 hours and the number of normal vaginal deliveries.

Keywords: Hospitals, Outcome indicators, Health Sector Evolution Plan
ABSTRACT 103

Factors Affecting the Technical Efficiency of General Hospitals in Iran

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ABSTRACT

Background: Restrictions in resource accessibility and the optimal application of resources are the main challenges in organizations, nowadays. The aim of this research was to study the technical efficiency and its related factors in Tehran general hospitals.

Methods: This descriptive analytical study was conducted retrospectively in 2014. Fifty-four private, public, and social security hospitals from were randomly selected to be included into the study. Data were collected using a checklist with three sections: demographic variables, inputs, and outputs.

Results: Seventeen (31.48%) hospitals had an efficiency score of 1 (the highest efficiency level). The highest average score for efficiency was in social security hospitals (84.32). Private and public hospitals ranked next with an average of 84.29 and 79.64, respectively. Analytical results showed that there was a significant relationship between hospital size, ownership, and the hospital type (public/specific) and the technical efficiency. There was no significant relationship between the activity type of the hospital and technical efficiency.

Conclusion: The most of the studied hospitals were at a low level of technical efficiency. Therefore, policymakers should plan to improve the hospital operations and promote hospitals to an optimal level of efficiency.

Keywords: Technical efficiency, Ownership, Hospital
Abstract 104

Perspectives of the Management and Informatics School Students in Tabriz University of Medical Sciences About the Evaluation Criteria for the Medical Teachers

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Background: University is one of the most productive social institutions that should help to promote creativity in the community. University teachers have a significant role in coordinating the growing needs of the community and the changes occurring as a result of the advances in science. This study examined the characteristics of a good university teacher.

Methods: This was a descriptive-analytical study. Data were collected by a designed questionnaire. Statistical analysis was performed using the SPSS 17.0. The population research included the students studying at the School of Management and Informatics, Tabriz University of Medical Sciences and the sample was census of all students. To confirm the validity of the questionnaire, the content validity was used. To verify the reliability internal consistency and Cronbach alpha coefficient was used (96%).

Results: The criteria that were in priority included the scientific expertise of the teacher in the lessons (total score = 1379), the power of explanation and the realization of the content (total score = 1350) and respect and giving credit to students (total score = 1350). There was a significant relationship between the level of education and compliance to the principles and rules of education.

Conclusion: The highest priority criteria was scientific expertise of the teacher in teaching the course, and the least important criteria was the impact of class attendance in the final score. The students also gave a top priority to the teachers’ personality.

Keywords: Criteria, Evaluation, Medical teacher, Students
National Congress in Health Management  
26-28 October 2016, Tabriz, Iran

ABSTRACT

Background: due to the integration of population growth plan costs into the public health insurance and the growth in the tariffs in 2015, there was a growth in the admission fee across the country. In Fars province in addition to the above-mentioned programs, the implementation of family physician program has been added to the growing admission fee and this case is unique to this province.

Methods: This was a descriptive study. Data was obtained from the existing medical records system in the health insurance organization. To assess the trend of cost the descriptive statistics tools and statistics indices were used.

Results: In total, the admission fee was 5,644,052 million Rials which included 4,792,989 million Rials for the ordinary expenses, 486,356 million Rials for the insured franchise and 77,953 million Rials as the organization franchise portion.

Conclusion: in 2015, the insured people portion in non-referral system was 10% and in the referral system was 5%. As the insured’s portion was 8.6%, so the organization’s cost for inpatient sector in Fars province is 1.4% more than those in the other provinces. The reason that all the insured people do not use the province’s benefits may be due to the lack in informing the people. Another reason may be the application of supplemental insurance. Further researches are recommended.

Keywords: Urban family physician plan, Health care reform plan, Public health coverage, Referral system
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Background: Nursing Organization in Iran with more than 150 thousand members and more than a decade activity in guild, social and cultural areas to promote health tries to apply mutual interaction for not only improving public health, but also providing occupational-social-welfare-spiritual promotion of members across the country.

Methods: Studying the Statute of Nursing Council and its strategy plan, may be helpful in clarifying the role of the council in human resource management, education, research, and extensive inter-sector interactions.

Results: The findings indicated that NGOs can be considered as the executive and intellectual arms of the government which not only may cause mutual participation between the public and stakeholders to reach the government goals, but also promote the efficiency and effectiveness, and resource management in the health system.

Conclusion: This study relied on specific goals set by the researchers and achieved good results presented in the conference.

Keywords: Health transformation, Nursing Council, NGO, Government
ABSTRACT

Background: Motivation is an important factor in optimum performance of human resources. Paying attention to the factors associated with staff motivation in organizations is one of the most important duties of managers. The aim of this study was to investigate job motivation among personnel in Pasteur hospital of Bam.

Methods: In this descriptive-analytical study, all the staff workers of Bam Pasteur hospital were included in the study through census in 2015. Data were collected through a reliable and valid questionnaire and analyzed by SPSS v. 18 Software.

Results: The mean score of job motivation was 1286.8 ±509.2. Among the personnel, “the nature of work”, “characteristics of managers”, “relationships of employee”, “opportunities to growth” and “salary” were ranked from the first to the fifth priorities, respectively. The Spearman correlation coefficient showed the significant associations between “growth opportunities” (r = 0.806), “salary” (0.773) and job motivation.

Conclusion: Giving credit to the employees’ job, appreciating the employees can increase staff motivation and the efficiency of the system.

Keywords: Motivation, Hospital, Staff, Occupation, Staff workers

Job Motivation Among the Personnel of Bam Pasteur Hospital, 2015

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ABSTRACT

Background: In the definition of World Health Organization (WHO), from social accountability the educational institutions are obliged to conduct all the activities, services, education and research to eliminate the concerns and priorities of the public health. According to the definition of accountability indicators in previous studies, the aim of this study was to measure social accountability of family physician in one-month period of internship in health centers of Shiraz University of Medical Sciences.

Methods: All the students participating in the internship period of family physician internship (30 person) answered the researcher-made questionnaire with 10 questions on the accountability indicators including increasing clinical training experiences, enhancing clinical skills, emphasizing inter disciplinary services, education, professionalism, characteristics of deprived society, community needs issues, prevention issues, eliminating the need for learning, reference systems and educational fields.

Results: Over 50% of the participants believed the course was effective. Clinical education experiences for family physicians, educating social issues, educational fields of nutrition, mental health, midwifery and referral system and follow-up methods were the most important issues in social accountability.

Conclusion: considering the success of Responsive Education as the output of the education system, it is suggested to be implemented continuously and the plan of family physician fellowship to be implemented in the university.

Keywords: Family physician, Accountability indicator, Internship
The Maturity Level of Process in Service Provision and the Patients’ Level of Satisfaction in Emergency Departments

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ABSTRACT

Background: Hospital is the most important institution to provide health and treatment services. Emergency department is one of the essential elements in hospitals. Paying attention to the three fundamental elements of structure, process and practices is necessary and may result in a high level of quality services.

Methods: This was an applied descriptive study. The population of study was the personnel of hospitals in the emergency departments in Hafez and Shahid Dastgheib hospitals (70 persons). Data collection tool was a reliable and valid questionnaire. In order to data analysis, one-sample t test, Kolmogorov-Smirnov and Friedman tests were used.

Results: There was found a significant relationship between the maturity level of process in the emergency department and the patients’ satisfaction. Also, significant relationships were found between the dimensions of maturity level of process and patient satisfaction. The dimensions of process maturity including analysis, responsibility and planning had the most impact and monitoring and learning had the least impact on patients’ satisfaction.

Conclusion: Based on the results, the maturity level of process has a great impact on patients’ satisfaction. Therefore, managers may improve the process quality through focusing on the aspects of maturity level of process and consequently improve patients’ satisfaction.

Keywords: Emergency department, The maturity of process, Patient satisfaction
ABSTRACT

Background: Observance of the standards in the dressing procedures may help to reduce the cost of treatment, duration of hospital stay, the efficient use of manpower and materials. In this study the level of compliance with standards in the process of children burn dressing in the burns ward of Sina hospital were investigated.

Methods: this was a cross-sectional study. A researcher-made checklist containing 47 items on the processes before, during and after the burn wound dressing was used to data collection. Content and face validity approved by expert panel and the reliability was calculated using Cronbach $\alpha$ (0.9). Study sample was estimated to be 78 based on the previous studies. The sampling method was simple sampling. The collected data was analyzed using the software SPSS v. 21.

Results: The process of performing and exchanging the wound dressing in the burns ward was in accordance with the standard by 71%. Also, the compliance with the standards in the three stages before, during and after dressing was 72.37%, 87.27%, and 25.38%, respectively.

Conclusion: the results showed that the dressings quality in the child burns ward in the stages before and during the burn dressing is relatively acceptable. However, this process is weak in the stage after dressing. The quality of dressing may be promoted by providing good quality materials, in-service training for staff, establishing more safety control on nursing processes, washing equipment after use, washing hands after dressing and recording the observations about the wound and dressing.

Keywords: wound dressing, Observance of the standards, Child burns ward, Hospital
The Impact of Health System Reforms Plan on the Managerial Aspects of the Operation and Emergency Departments of Yazd Mohammad Afshar Hospital

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ABSTRACT

Background: Operating and emergency departments are the most important wards in the hospital. The aim of this study was to compare the managerial aspects of these wards before and after of health system reform plan in Mohammad Afshar hospital, Yazd.

Methods: This was a before-after study that assessed the changes induced by the health system reforms plan in operating rooms and emergency department in Mohammad Afshar hospital. For data collection, a researcher-made checklist was used with the following dimensions: structure, space and physical facilities, human resources, management and safety. Data were gathered between 2013 and 2016 through direct observation and interviews with section’s technical staff. SPSS v. 20 was used to analyze the data.

Results: The results showed that the physical facilities and space dimensions of operating room and emergency ward (73% vs. 78%) have been increased (25% vs. 75%). The scores of equipment dimension in the operating room (88.88% vs. 100%) and emergency departments (75% vs. 91.6%) have also been increased. Also, in the operating room the score of workforce domain (70% vs. 90%) increased and the management domain have been decreased (100% vs. 60%). In total, the emergency department (48.5% vs. 70.5%) and the operating room (% 83/4 vs. % 52/2) have the most and the least changes, respectively.

Conclusion: The results showed that in terms of management the emergency department was in a better situation than the operating room department. In addition to improving the quality of clinical services, management processes in these departments should be promoted.

Keywords: Operating room, emergency department, Teaching hospital, Yazd, Health reforms plan
ABSTRACT

The Impact of Health System Reforms Plan on the Managerial Aspects in Para Clinic Wards of a Hospital in Yazd: A Comparative Study

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ABSTRACT

Background: The importance of management in the different wards of hospitals is undeniable. All the departments of a hospital are involved in managerial processes that may affect the quality and quantity of services provided. The aim of this study was to compare the management aspects in para clinic wards, before and after the implementation of health system reforms.

Methods: this was a before- after study conducted after the implementation of healthcare reforms plan in the para clinic wards (pharmacy, radiology and laboratory) in one of the Yazd teaching hospitals. The data gathering tool was a researcher-made checklist. The dimensions examined were structure, space and physical facilities, human resources, management and safety. Collecting data were performed in two time periods (2013 and 2016). Data collection was performed by direct observation and interviews with technical staff. Finally, the data were analyzed by SPSS v. 20.

Results: The dimensions of space and physical facilities in both pharmacy 55.55% vs. 77.77%) and radiology (50% vs. 60%) wards have been increased and in the laboratories have been decreased (66.8% vs. 33.7%). The rate of workforce score in the radiology ward has been dropped from 100% to 75% and in the laboratory wards have been increased from 33.33% to 88.88%. The rate of safety in the radiology (100% vs. 80%) and laboratory (80% vs. 60%) wards have been decreased.

Conclusion: Among the studied wards, the pharmacy and laboratory departments have had progress and in contrast the radiology ward has had degradation in management aspects. Although reforms plan could improve the necessary conditions to increase the quality of provided services in the para clinics, less attention has been paid to facilitate management processes and its effective dimensions. Management aspects should be strongly considered in the para clinic wards.

Keywords: Para clinic departments, Hospital, Health reform plan
ABSTRACT

Background: One of the most important approaches to social justice and equality in the health care system is easy access of community members to required health services. The aim of this study was to assess the relationships between elderly mental health and access to health services in Bandar-Gaz city.

Methods: This was an applied cross-sectional research. The population of the study included all the elderly of Bandar-Gaz city. This study was based on data collected from 362 elderly people, according to Morgan sample selected through stratified sampling method. Questionnaires were distributed. Pearson correlation test and multiple linear regression were used for data analysis.

Results: The findings showed significant positive relationship between access to health services and elderly mental health ($r = 0.478$ and $P < 0.01$). Also, significant associations were found between the dimensions of access to health services, including availability of services, access to social services and utilization based on need with elderly mental health.

Conclusion: Considering the results, paying attention to justice in geographical distribution of health care centers, reducing physical barriers in deprived regions, resolving deficiencies of family physician program to increase access to health services to the elderly seems essential.

Keywords: Accessibility, Health services, Availability, Social services, Utilization, Mental health, Elderly
ABSTRACT

Impossible Mission: A Critique on the Problems of Iranian Health System Evolution

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ABSTRACT

Background: Health sector evolution as a comprehensive plan will have major impacts on the present and future of Iranian health system. The aim of this study was to criticize the issues of evolution plan before, during and after the implementation stages.

Methods: This was a qualitative study conducted using expert opinions. The number of participants was 18 and the mean time of each interview was 45 minutes. Qualitative content analysis method was used to analyze and categorize the opinions.

Results: Lack of situation analysis and failure to dealing with pre-requirements were the most important problems in the formulation and pre-implementation stage. A mismatch between the objectives of plan with health needs and lack of attention to the exhaustion of facilities and human resources were the most important problems in implementing stage. Increasing the long term expectation of client/caregiver and health professionals are the most important problems after running the plan.

Conclusion: With no doubt, continuing this plan without considering the above-mentioned problems will have severe effects on health system outcomes in the long term.

Keywords: Health Sector evolution, Critique, Problems
ABSTRACT

Background: The health system in Iran and many countries has been categorized to promote the efficiency and effectiveness of the health services. The referral system works as a bridge between the different levels of health services. The aim of this study was to investigate the referral system in a number of developed and developing countries.

Methods: This was a comparative study within which the referral system of 9 countries (England, Netherlands, Norway, Switzerland, Malaysia, Turkey, Thailand, Lebanon and Iran) were studied. Different databases were searched in terms of the referral system, the referral levels and service providers.

Results: In the studied countries there was a general practitioner at the forefront line of providing services. People register to visit a GP based on the geographical distance. Primary health care is provided by physicians in office or clinic. If a patient requires more specialized services, according to the family physician considerations will be referred to the second and third levels. Self-referential in emergency situations and in the specialties like women, children, ENT and skin in some countries are allowed.

Conclusion: The comparison of the systems in the countries showed that referring to the higher levels performs in the form of a logical referral system and family physician program. Some of the countries also benefit from the private sector in the provision of health services. Effectiveness of the referral system depends on the trust of patients to different levels of the health care system.

Keywords: Referral system, Comparative study, Health system
ABSTRACT 116

Effect of Personality Traits on the Nurses’ Creativity Using the Big Five Model: A Case Study

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ABSTRACT

Background: This paper examined the influence of personality traits on nurses’ creativity in Tabriz Imam Reza Hospital. To study the personality traits the Big Five Model was used.

Methods: The population of study consisted of nurses working in Imam Reza hospital of Tabriz. Based on the primary sampling, the final sample size was 142 nurses. Applying simple sampling, the data were collected through a researcher-made questionnaire with 35 questions. To analyze the data, descriptive and inferential statistics and regression analysis were used.

Results: Among the five personality traits three features including extroversion, consciousness and emotional stability had influence on the nurses’ creativity, and these three factors together could explain 43% of changes in dependent variable. The Durbin-Watson coefficient was 2.01 suggesting that there was no correlation between the independent variables in this study.

Discussion: The findings of the study showed that personality traits of nurses have may take effects on their creativity power, which should be considered while designing interventional programs aiming at critical thinking and creativity skill among nurses.

Keywords: Personality, Creativity, Personality traits, Big Five, Nurses
ABSTRACT

Background: The presence or absence of performance evaluation system has a direct relationship with life and death of an organization. The importance of performance assessment in hospitals is high considering their role in promoting public health. A proper techniques to compare the hospitals’ performance based on the indicators is the graphical model of “Pabon Lasso”. The aim of this study was to evaluate the efficiency of private hospitals based on this model.

Methods: This cross-sectional descriptive study was conducted in eight private hospitals in Tehran, to evaluate the performance of hospitals Pabon Lasso model was used and data were analyzed by SPSS v.18.

Results: In this study, the average of bed occupancy rate, length of stay and bed turnover rate in the hospitals were 43.02%, 2.8 days, and 62.94% per year, respectively. Considering the model, one hospital was located in the first region, three hospitals in the second region, two hospitals in the third region and two hospitals were located in the fourth region. Finally only two hospitals were efficient.

Conclusion: The findings of this study indicated that only 2 hospitals (25%) of a total of eight hospitals had the desired performance. In the hospitals located in the first region, the managers had done serious actions to optimize the use of limited resources.

Keywords: Performance assessment, Efficiency, Hospital, Pabon Lasso model

The Efficiency of Private Hospitals in Tehran

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ABSTRACT

Effect of the Results Feedback of Lumbosacral MRI to the Requesting Physicians on the Costs of Health Insurance Organization

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ABSTRACT

Background: In Iran, the excessive use of imaging equipment and increasing the costs of MRI centers along with the annual increase in the insurance tariffs and failure to reduce the burden of clients are the major challenges of insurance organizations. The aim of this study was to assess the effect of results feedback of lumbosacral MRI to requesting physicians on the costs of health insurance organization in four centers in Isfahan.

Methods: The contract documents of the four MRI centers and the MRI prescription of lumbosacral (lumbar) were evaluated and the feedbacks were given to the requesting physicians. Then, after three months the number of prescriptions and the results of MRI reports were evaluated in these centers again. The MRI results of 1898 patients referred to these centers were evaluated in 6 months and the prescriptions of 26 physicians with the highest number of requests to the centers were sent to them in the first 3 month. The results included the normal or abnormal reports.

Results: The findings showed that feedback of prescription results during this period had no significant impact on reducing the costs and the clients.

Conclusion: Beside the feedback of results, other mechanisms including public awareness through the media and training courses in this field are suggested.

Keywords: MRI, Health insurance, Lumbosacral
ABSTRACT

The Quality of Life Comparison Before and After Angioplasty Among Coronary Heart Disease Patients in Educational Hospitals of Tehran-2016

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BACKGROUND: Paying attention to the quality of life of coronary artery disease (CAD) patients underwent angioplasty operation is essential, because of the prevalence of this operation in the country. This study aimed to investigate the quality of life of coronary artery disease patients, before and after angioplasty in Tehran educational hospitals.

METHODS: A quasi-experimental, before-after study was done on 473 CAD patients admitted to educational hospitals of Tehran University of Medical Sciences in 2015-16. Sampling Method was consecutive non-probability one. Quality of life was assessed before and 1 and 3 months after angioplasty operation by SF36 (Short Form -36) questionnaire. Reliability of the questionnaire was reported in previous studies by Cronbach's alpha equal to 0.86. In order to compare two dependent samples means, Wilcoxon test was used and for assessing the relationship between demographic variables and quality of life domains, Kruskal–Wallis and Mann-Whitney-U tests in SPSS 22 were used.

RESULTS: Angioplasty operation increased the score of all 8 domains and total quality of life score 1 and 3 months after operation (P ≤ 0.01). The relationship between all demographic characteristics of patients (age, marital status, occupation, education, residency, housing and type of insurance) except sex with quality of life, were significant (P ≤ 0.01).

CONCLUSION: The angioplasty operation could improve the quality of life of patients in different domains and it can be recommended as a procedure with positive effects on quality of life.

KEYWORDS: Quality of life, Coronary heart disease, Angioplasty

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ABSTRACT

Effects of Health Reforms Plan on the Performance Indicators of the Cancer Hospital in Mashhad

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Background: In recent years, the health system has resulted in main improvements in community health. Considering the increasing rate of cancer in the world, it was decided to study the effect of health reforms plan on the most important performance indicators of the specialized cancer hospital in Mashhad.

Methods: This was a descriptive-analytic study conducted as time-series to study the trend of changes in the most important performance indicators (bed turn over interval, bed occupancy rate, the bed turnover rate, and average length of stay) at two years before and after the implementation of reforms plan in the hospital. Data was gathered by experts applying valid and reliable checklist. All the analyses were performed by SPSS.

Results: In general, two indicators – bed occupancy rate and bed turnover interval – increased after the implementation of reforms plan. However, the turnover ratio and the average length of stay were significantly dropped.

Conclusion: Cancer is an incurable disease. Identifying the factors that affect key performance indicators is the main task of hospital manager and needs appropriate program planning.

Keywords: Hospital, Cancer, Performance indicators, Health reforms plan

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Diagnostic Accuracy of Transient Elastography for Staging the Fibrosis Among People With Liver Disease: Systematic Review

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ABSTRACT

Background: Ultrasound-based transient elastography is a promising noninvasive alternative to liver biopsy for detecting hepatic fibrosis. However, its overall test performance in various settings remains unknown. The aims of this study were to perform a systematic review and meta-analysis of diagnostic accuracy studies comparing ultrasound-based transient elastography with liver biopsy for hepatic fibrosis.

Methods: Electronic and manual bibliographic searches to identify potential studies were performed in January 2015. Selection of studies was based on reported accuracy of ultrasound-based transient elastography compared with liver biopsy. Data extraction was performed independently by 2 reviewers. QUADAS-2 was used for appraising the quality of included studies. The analyses of the effectiveness outcomes were performed in the form of meta-analysis using Meta-Disc 1.4 and RevMan 5.3 packages.

Results: Of the 458 studies initially found, 17 were included in the study. According to the meta-analysis conducted, areas under the receiver operating characteristic curve (95% confidence interval) were 0.87 (0.85–0.89) for the patients with significant fibrosis (F > 2), and 0.95 (0.94–0.97) for the patients with cirrhosis. For chronic disease patients with cirrhosis, the pooled estimates for sensitivity were 76% (95% CI, 65%-84%), specificity 90% (95% CI, 87%-93%), positive likelihood ratio 8.2 (95% CI, 4.9-13.7), and negative likelihood ratio 0.22 (95% CI, 0.09-0.50).

Conclusion: Ultrasound-based transient elastography appears to be a clinically useful test for detecting cirrhosis.

Keywords: Ultrasound-based transient elastography, biopsy, liver disease
ABSTRACT 122

Barriers and Problems in Establishment of Operational Budgeting System for Health Management Improvement in Tabriz University of Medical Sciences

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Background: The aim of this research was to identify the barriers and problems in establishment of operational budgeting system for health management improvement in Tabriz University of Medical Sciences. Considering the shortage of budgeting resources, operational budgeting in Ministry of Health and Medial Education is inevitable.

Methods: The study population was the financial and budget experts, financial affair directors of subsidiary units and heads of budgeting and financial affairs. Data were gathered in three domains: organizational and managerial, personal and environmental via questionnaire and interview in order to identify the barriers in 2014. The data were analyzed by Expert Choice software with analytic hierarchy process (AHP) by assigning weight to factors and then paired comparisons were made.

Results: The first priority problem was organizational and managerial (sub-domain of lacking strategic plan and not having the accounting of complete cost accounting) the second one was personal barriers (lacking efficacious human resources and sufficient experts in operational budgeting and not having the training courses for managers in operational budgeting). The third priority was the environmental barriers (lacking will and belief among top managers).

Conclusion: In order to achieve a system with improved performance and better resource allocation, the following interventions should be implemented: sound strategic planning for establishing the commitment accounting for extracting the final costs of services, using strong and intelligent soft wares, standardizing and improving the processes and staff training.

Keywords: Budget, Operational budgeting, Barriers
Satisfaction of the Nurses Working in the Hospitals Non-affiliated to the Ministry of Health After the Implementation of the Healthcare Reforms Plan

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ABSTRACT

Background: Nurses are important human resources in the health system, in a way that their satisfaction or non-satisfaction from the health system could be success or failure of the plan. The aim of this study was to measure the satisfaction of nurses working in non-affiliated departments of the Ministry of Health from the health reforms plan.

Methods: This cross-sectional study was conducted in the spring of 2016. A total of 2230 nurses working in non-affiliated to the Ministry of Health was chosen as sample. The standard questionnaires were provided to assess the health reforms plan, which included demographic information and questions on measuring satisfaction. The questionnaire was distributed electronically among the nurses. Finally, data collected were analyzed using SPSS software for descriptive statistics and findings presented in the form of graphs and tables.

Results: Based on the findings, nurses were satisfied with slight differences from the implementation of the plan and their expectations have been met. About 57% of the studied population expressed their satisfaction to the project. The highest satisfaction rate was related to the quality assessment and the least satisfaction was related to handling the requests.

Conclusion: As the nurses do not have a high satisfaction rate from implementing the plan, it seems that health authorities should give more consideration to nurse’s needs, and their satisfaction may lead to the improvement of this plan.

Keywords: Satisfaction, Health transformation plan, Nurse
ABSTRACT

Relationships Between Organization Structures and the Possibility of Conducting 360-Degrees Assessment System in Ahvaz Health Centers

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ABSTRACT

Background: Assessment of the human resources should be conducted to develop the abilities of individual and their satisfaction. This opportunity may provide a 360-degree performance evaluation. This study aimed to determine the relationships between Robbins-based organizational structure and the possibility of conducting 360-degrees assessment.

Methods: This cross-sectional study conducted in 2015. Among all health centers in Ahvaz, 7 urban and rural health centers were randomly selected. Using cluster sampling, 320 employees were enrolled. To collect the data, two standard questionnaires were used. For statistical analysis of data normality test, t-test and Pearson's correlation test were used.

Results: In this study, the levels of formality and concentration were above the average level and the level of complexity was lower than the average and this difference was statistically significant. The organizational structure and its dimensions and the possibility of conducting the 360-degrees evaluation, was showed to be statistically significant (P < 0.05).

Conclusion: The results showed that organizational structure was a significant predictor for deployment of 360-degrees assessment method.

Keywords: Organization Structure, 360-degree performance assessment system
Health Reforms Coincide Measures to Reduce Social Harms

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ABSTRACT

Background: The health system is strongly being influenced by social harms. However, the formation, growth and diversification of these injuries are often influenced by the factors related to the function of all other sectors. The aim of this study was to investigate the measures for social rehabilitation of social harms coincide with the health reforms program.

Methods: In this research, available statistics and documents as descriptive were used to explore and evaluate the results of practices to rehabilitate social damages by organizations and influential institutions under supervision of the Ministry of Health and Medical Education as a coincide measure with the implementation of health reforms program.

Results: Analysis of data showed that along with the implementation of health reforms program, several measures have been conducted to decrease the burden of social harms including reducing the amount of outpatient and inpatient payments, increasing beds in treatment centers, providing social work services, establishment of pilot centers that treated addicted children, Detoxification of children, supporting about 25 thousand underprivileged or unsupervised children, creating 200 centers to decrease addiction, implementing mental health programs to ten millions of marginalized people, the implementation of health assistant plan for 15 thousand people in Tehran.

Conclusion: Based on the strengths and weaknesses of the country in the field of controlling and reduction of social damages, policy and scientific methods or procedures should be applied coincides with the implementation of health reforms plan to eliminate the origins of such deviations throughout the country.

Keywords: Health system reforms, Social harms, Treatment, Deviations, Mental health
The Status of Outsourced Pharmacies Affiliated to Shiraz University of Medical Sciences in 2010-2012: A Before-After Comparison

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ABSTRACT

Background: Due to low the efficiency and productivity of state enterprises, poor quality of delivered services and in line with the act number 44 of constitution on decentralization, outsource services seems to be a perfect solution for addressing the health issues. This study was aimed to compare the situation of pharmacies affiliated to Shiraz University of Medical Sciences from 2011 to 2013 before and after outsource servicing.

Methods: A descriptive analytical study was conducted on data related to outsourced pharmacies affiliated to Shiraz University of Medical Sciences from 2010 to 2013. This retrospective study was done in 2015 from the perspective of public sector. Five outsourced pharmacies were entered in the study. Three groups of indicators (economic indicators, service accessibility indicators, and quality indicators) were used to assess outsourced pharmacies.

Results: Loss reduction and benefit increase for governmental sector and increase in the number of employees and clients were found in all of the five cases (except for one case due to the low rental payment) after outsourcing. The rate of patients‘ satisfaction with pharmacies, employers‘ satisfaction with contractor, and the related departments‘ satisfaction with pharmacies were 73.2%, 60%, and 74.12%, respectively.

Conclusion: The results represented that outsourcing health services (like pharmacies) to private sector was a successful strategy due to the increase found in the profit and the promotion found in the accessibility indicators.

Keywords: Outsourcing, Pharmacy, Health
ABSTRACT

Background: A large portion of hospital’s revenue is obtained from the contracts with insurance companies. Every year, a considerable amount of hospital’s revenues is subtracted as deductions. According to the hospital autonomy project it seems to be necessary to reduce deductions. So, the aim of this study was to investigate the extent and causes of deductions imposed to hospitalized patient’s bill covered by Social Security Organization (SSO) in Alir-Almomenin hospital of Zabol.

Methods: This descriptive study was performed in 2014. Census method was used for sampling and all patients’ medical records covered by SSO in the first quarter of 2014 were studied. Data gathering was performed using checklist. The SPSS version 18 was used to data analysis and results represented through descriptive statistics.

Results: Among all the causes, the highest deduction rate was due to the consumer goods followed by deductions imposed by the surgeons and anesthesiologists. The least amount of insurance deduction was due to the cost of CT scan and ultrasound.

Conclusion: Given that Amir-Almomenin is the only teaching hospital in Zabol, many mistakes were occurred due to the lack of trained personnel and the high work load. These mistakes causes financial burden and consequently increases insurance deduction rate, which may be reduced through hiring expert workforce.

Keywords: Insurance, Insurance deductions, Inpatients medical records
The Effect of Quality Management System on Insurance Deduction in Surgery Department of Vali-Asr Hospital: A Participatory Action Research

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ABSTRACT

Background: The health sector of Iran is faced with unlimited demand and scarce resources. Insurance organizations that have a major role in financing the health sector, may not reimburse a part of the hospitals revenues due to bill's deduction. The aim of this study was to investigate the effect of quality management system insurance deduction in surgery department of Vali-Asr hospital.

Methods: This applied study conducted with participation action research approach. Quality improvement team was formed in surgery department. This team formulated a plan to reduce deductions in surgery department based on Mosadeghrad's quality management model. Comparing the amount of deduction in the first half of 2015 with the same time in 2014 was performed to determine the effect of quality management in deduction rate.

Results: In the first half of 2014, there was a deduction amount by 339572 Rials per patient. Illegible and not completed surgery description and anesthesia pages, incorrect coding of surgical procedures, low or high request for surgical fees, and high request for anesthesia hours were the most causes of insurance deductions. A plan was designed and applied after determining feasible solutions. The rate of deductions reduced from 6.9% to 3.8%. The average amount of deduction per patient was 262818 Rials in the first half of 2015.

Conclusion: Applying quality management system, formulation quality improvement team, and promoting work procedures, reducing the deduction rate and increasing hospital revenues are possible.

Keywords: Quality management, Continues quality improvement, Deduction, Hospital, Action research
The Effect of Health Sector Evolution on Deduction Applied by Social Security Insurance on the Accounts of Imam Khomeini Hospital

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ABSTRACT

Background: Reducing the amount of insurance deductions lead to increase in hospital efficiency and revenue. The aim of this study was to compare the amounts of deductions applied by Social Security Insurance (SSI) on the accounts of Imam Khomeini Hospital before and after notification of E-Tariff Services Book.

Methods: This descriptive-analytical study was performed on data from reports of applied deductions by SSI on patients and inpatients bills in the last half of 2014 and 2015. Data were analyzed using SPSS software.

Results: In the second half of 2014, there was a deduction rate by 2.1%. The average rate of deduction was 11.1% in the second half of 2015. In other words, there was 9% increase in the deductions which was significant statistically. The highest imposed deductions in 2014 and 2015 were related to surgical and radiotherapy services, respectively. Before the new e-tariff, there were deductions in the average of 21025 Rials per hospitalized patient and 50281 Rials per outpatient. These amounts changed to 116142 Rials per hospitalized patient and 1079193 Rials per outpatient after notification of the new e-tariff.

Conclusion: After implementation of new e-tariff, imposed deductions increased by 5% for inpatients and 13% for outpatients. So, due to the change of e-tariff and its impact on deductions, it is necessary to identify new causes of deductions and apply training programs on the basis of them to reduce deductions.

Keywords: Hospital, Social Security Insurance, Relative value book, Deduction
ABSTRACT

Background: Health Sector Reforms (HSR) plan is one of the governmental interventions to promote community health. This study was aimed to investigate the factors associated with the nurse’s satisfaction and identifying problems and shortcomings.

Methods: This was an applied research conducted as a descriptive-analytical and retrospective study. Census method was used for sampling and all of 195 nurses were entered to the study. A check list approved by Ministry of Health was used for data gathering. Data analysis was performed using one-way ANOVA and t test.

Results: Results showed that the satisfaction rate of the studied nurses in different domains were as follow; number of clients (64.1%), quality of diagnosis and treatment services (37.4%), following the requests and offers (38.5%), dealing with patients and their relatives (55.4%), amenities and accommodation in work site (33.8%), and basic salary (44.6%). They were moderately satisfied with the training programs related to HSR (42.1%). Finally, it can be concluded that the highest and the lowest satisfaction rate was related to training programs and number of clients, respectively.

Conclusion: The results showed that the mean score of satisfaction of HSR among the nurses was 12.89 (moderate to absolute level of dissatisfaction). It is necessary to enhance nurse’s satisfaction through increase in the number of nurses, increase job motivation by paying bonus and provide amenities and accommodation.

Keywords: Nurse, Satisfaction, Hospital, Health Sector Reforms Plan
ABSTRACT

Achievements and Challenges of Health Sector Reforms Plan from the Perspective of Managers and Faculty Members

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Background: Health Sector Reforms (HSR) plan with 7 programs was applied in Iran from 2015. Although HSR has led to people satisfaction, its continuation faces with some challenges. This study was aimed to investigate the achievements and challenges of HSR from the perspective of managers and faculty members of Babol University of Medical Sciences.

Methods: This descriptive study was done in 2016. The study sample was 98 persons including heads, deputies, matrons, supervisors, and faculty members. Data was classified manually.

Results: Renovation of welfare equipment (30 persons), increase in visit number (29 persons), increase the accessibility to physicians (23 persons), provide required drugs and equipment for patients (20 persons), reality of service's tariff (18 persons), increase in the percentage of natural childbirth (17 persons), and the satisfaction of patients and physicians (11 persons) were the most frequent achievements of HSR. Unstable financial resources (22 persons), workforce shortage in emergency department (21 persons), decrease in pharmacy company's interest to support hospitals (17 persons), lack of enforcement mechanism to improve services (12 persons), mismatch between hoteling and physical situation of hospitals with the standards (12 persons), uncontrolled increase of diagnosis services delivery (11 persons), and unwillingness of some physicians to contribute in HSE were the challenges that were declared by the participants.

Conclusion: The results of study represented that HSR implementation is faced with some concerns to be ongoing, despite its tangible success.

Keywords: Achievements, Challenges, Manager, Portfolio, Health sector reforms plan
ABSTRACT

What Suggestions Do Managers and Faculty Members Have About Revising Health Sector Reforms Plan?

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Background: Health Sector Reforms (HSR) is a national program aiming to financial protection, quality improvement, and increase access to healthcare that was applied in Iran from 2015. The aim of this study was to collect corrective suggestions of managers and faculty members in regard with revising HSR plan.

Methods: This descriptive study was done in 2016 in Babol University of Medical Sciences. The study sample was included with heads, deputies, matrons, supervisors, and faculty members that were involved in HSR implementation. Data was classified manually.

Results: We collect 331 suggestions from 71 persons (72.5%) of total sample (98 persons). There was 4.7 opinion per capita based on repeatability in the national and university level. Most frequent suggests in the national level were prioritizing prevention over treatment (32 persons), determine the source of financing (25 persons), equity in the payment to staff (23 persons), assess effectiveness of the plan (19 persons), issuing permits to provide manpower (15 persons), and promotion in public awareness (14 persons). In university level, there were some extracted suggestions including make justice in payments (15 persons), strength the cohesiveness between family physician plan and HSR (13 persons), continuous monitoring of HSR implementation (13 persons), following financing problems (11 persons), provide expert manpower (9 persons), and reflect the structural problems (9 persons).

Conclusion: The results of study represented that the necessity of attention to prevention, financing, supply human resources, and correct payments to staff in national and university level.

Keywords: Health Sector Reforms, Suggestion, Manager, Perspective
ABSTRACT 133

Clinical Audit Circle Application to Promote the Process of Patient Education in Sina Teaching Hospital of Tabriz

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ABSTRACT

Background: Patient education (PE) is an important part of the process of care and treatment. Considering the significant impact of PE on increasing the patients' and their relatives' satisfaction, reducing complications and improving the quality of delivered care, compliance with PE standards is essential. Clinical audit as a method of improving the quality of care can be an effective role in this regard. The aim of this study was to promote the PE process in Sina teaching hospital of Tabriz.

Methods: This was an interventional study based on clinical audit that was performed in male and female internal wards. Clinical audit was done in six steps and PE was investigated in three phase included reception, hospitalization and discharge.

Results: In the baseline, the rate of matching with PE standards in reception, hospitalization and discharge were 60%, 39%, and 65%. After intervention, these values were increased to 73%, 68%, and 78%, respectively.

Conclusion: The results showed that the PE process in the studied wards was too far from the existing standards. However, the level of standards was increased after intervention.

Keywords: Quality improvement, Clinical audit, Patient education
Management of Teaching Hospitals: Opportunities and Threats

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ABSTRACT

Background: The plan to integrate medical schools in the health system was approved in 1985. One of the consequences of this plan was the creation of the teaching hospitals. The aim of this study was to investigate the difficulties of managing teaching hospitals.

Methods: This was a qualitative study conducted through interviews with 16 experts about the integration of medical education in 1985 and the difficulties of managing the teaching hospitals. The method of data collection was interview. The text was transcribed for reliability and verifiability and the results of analysis presented to participants and their corrective suggestions were applied. Data analysis was conducted based on the framework analysis.

Results: The findings of this study identified 6 main categories and 20 subcategories in the field of teaching hospitals challenges. The main topics were the weakness of integration of education and treatment, the strengths of the integration of education and treatment, challenges of teaching hospitals management, weaknesses of the separation of education and health, strengths of the separation of education and health, and organizational communications.

Conclusion: Management of teaching hospitals is more complex and difficult than the non-teaching hospitals. Many of these problems are caused by the lack of sufficient authority of the hospital managers. Thus, the problems may be reduced by delegating to the hospital managers.

Keywords: Integration, Medical education, Teaching hospitals, Management
ABSTRACT

Background: Constant evaluation of hospital services is an important issue which needs to be performed to promote resource efficiency and improve the quality of services. The main objective of this study was to determine the appropriateness of services delivered in the teaching hospitals of Kerman University of Medical Sciences.

Methods: Determining the appropriateness of hospital services was done through a prospective study of 300 patients in teaching hospitals of Kerman. Appropriateness Evaluation Protocol, the most common tool for evaluating the appropriateness exploitation of hospital resources, was used for data collection. Data analysis was done using chi-square and one-way ANOVA tests.

Results: The results of this study showed that the rate of inappropriate reception and hospitalization in three hospitals were 8% and 14%, respectively. There were no significant correlation between inappropriate reception and hospitalization with studied variables, whereas a significant relationship was found between inappropriate hospitalization and age, length of stay and insurance.

Conclusion: Inappropriate reception and hospitalization can be due to services shortage in the lower levels and inefficient referral system. It is suggested to provide clinical facilities, promote referral system performance, use evaluation protocols in patient's clinical records, promote incomplete procedures, and reform the insurance system and payment methods.

Keywords: Appropriateness Evaluation Protocol, Inappropriateness, Reception, Hospitalization, Hospital
National Congress in Health Management  
26-28 October 2016, Tabriz, Iran

**ABSTRACT**

**Background:** The pharmaceutical industry as a strategic industry plays an important role in the health and social security which has always been of interest for economists and policy makers. The aim of this study was to evaluate the trends and challenges of pharmaceutical policy in Iran.

**Methods:** This was a review study conducted to evaluate Iranian drug policies. The contents were extracted through 36 articles related to the subject of research. The search for documents was done through Google Scholar, Ovid and Elsevier databases.

**Results:** Medication is of such importance that all governments prefer to take the responsibility of controlling and monitoring the production and distribution of it. Iranian government is responsible for monitoring drug and they have tried to develop a drug policy in format of the five years development plans.

**Conclusion:** In order to deal with the multi-sectorial challenges in the field of pharmaceutical policies, it is expected from the eleventh government to primarily restore predictability to macroeconomic environment of Iran. In the face of increasing predictability, not only pharmaceutical policies, but also all other economic and noneconomic sectors will be able to design and implement appropriate policies to improve their situation.

**Keywords:** Pharmaceutical policy, Challenges, Review study, Iran

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**ABSTRACT 136**

**Pharmaceutical Policy Trends and Challenges**

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ABSTRACT

Barriers of Participation in Sports and Recreational Activities Among Hospital Staff Using Hierarchical Model

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Background: The relationship between leisure time and work has long been considered as a factor in creating job motivation and job satisfaction. The aim of this study was to investigate the barriers of participation in sports and recreational activities among hospital staff using hierarchical model.

Methods: This research was an applied descriptive-analytical study. The study population consisted of all personnel of teaching hospitals in Tehran. The sample was chosen through multistage cluster method along with the classification according to class size. Based on Morgan approach, the total sample size for this study was 384. The required data was collected through questionnaires that were distributed among participants. In this study, factor analysis was used to analyze the data.

Results: The results of the analysis showed that the sequence of the three factors (personal, interpersonal and structural) was not according to hierarchical model of leisure. This order was as structural factors, personal factors and eventually interpersonal factors.

Conclusion: It is necessary to increase participation of individuals in physical activity through attempt to mitigate and minimize structural hindering factors and create appropriate situation to participate in sport activities by cultural intervention.

Keywords: Leisure time, Recreational activities, Personnel, Hospital
ABSTRACT

Background: According to the World Health Organization prediction, in the next 20 years people will suffer from mental disorders such as anxiety and depression more than any other diseases. To promote mental health, it seems to be a necessary evaluation system. This study aimed to evaluate the programs of case detection, care, and follow-up of mental disorders and psychiatric diseases using CIPP (context, input, process, and product) approach.

Methods: This was a cross-sectional study conducted in 2015. Data collection tool was a researcher-made checklist that its validity and reliability were tested and approved by experts. Evaluation was carried out at four levels including health houses, urban health center, health center of city and province. Data analyzed by descriptive statistics and Excel software.

Results: The highest evaluation scores were related to health house (88.23%), provincial health center (87.5%), urban health center (70.37%) and community healthcare center (42.6%), respectively. In this study the case detection rate in the covered population was about 5%.

Conclusion: The results showed that the management of case detection program is strongly supported by health authorities. Also, the importance of mental health has been institutionalized in the community. Continuous evaluation helps to assess the strengths and weaknesses of the programs and improve its quality.

Keywords: Evaluation, Mental health, CIPP approach
ABSTRACT

Background: Expansion of urban areas and unavailability of the services provided by the health system for the urban population as well as increasing the rate of non-communicable diseases and behavioral disorders resulted in more attention to mental health in the Health Sector Reforms plan.

Methods: This was a cross-sectional and descriptive study. The population was all urban community individuals referring to health centers. The respondents were screened in accordance with a standard screening form in three domains including mental health, substance abuse prevention and social health during a three-month period. Statistical analysis was performed using Excel software and descriptive statistical tests.

Results: The results showed that 6% of the urban population was screened in mental health programs in the first quarter of 2016 by health care providers. About 16% in the initial screening were diagnosed with mental health disorders, 3.6% with substance abuse, and 3.3% with social health problems, among which 65% of the cases with mental disorders, 56% of those with substance misuse and 64.3% of those with social health problems received a variety of services after referral to a physician or mental health specialist.

Conclusion: The results showed that the role of health care providers in providing screening health services at the community health centers and identifying individuals with behavioral problems is significant.

Keywords: Health care providers, Screening, Mental health, Community health center
ABSTRACT

Background: Family physician program was considered in Health Sector Reforms plan. In this study the causes of low persistence of family physicians after the establishment of health sector reforms plan was investigated.

Methods: This was a cross-sectional study. The study population consisted of all physicians contracted to family physician centers (284). Study tool was a researcher-made questionnaire that was approved in term of content validity and reliability (Cronbach alpha = 0.81). Questions were designed in Likert scale (score 1-5, scores was calculated of 100 point) then, were employed to collect data from the family physicians. Data was entered to the SPSS software and were analyzed using t test, ANOVA and Pearson correlation at a significance level of 0.05.

Results: Mean score of low persistence of family physicians was high (72%). The highest score of low persistence was related to the areas of performance evaluation (84%) and planning (77%). There was no significant relationship between the total score of low persistence with demographic factors (p > 0.05). The most important causes of low persistence based on priorities were the high workload, health record documentation, time-consuming and unsuitable performance of the evaluation and referral system.

Conclusion: Due to the high scores in the areas of performance evaluation and planning in low persistence of physicians, some actions like correct performance evaluation program, amendments to the laws on the basis of coordinated planning, establishing the electronic medical records and cultural interventions may be effective in reducing family physicians turnover.

Keywords: Family physicians, Persistence, Health Sector Reforms Plan
ABSTRACT 141

The Impact of Health Reform Plan on Key Indicators of Performance in Qazvin Shahid Rajai Hospital

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ABSTRACT

Background: The key indicators show hospital performance and the status of its community. Therefore, this study aimed at determining the impact of the health reform plan on key indicators of performance in Shahid Rajai in Qazvin medical and educational center.

Methods: This was a cross-sectional study. The information on key indicators of hospital and other existing resources extracted to HIS software in the period of 2013 to 2015. Data analyzed using the software Excel and SPSS v.16.

Results: The findings of this study represent a substantial increase in the patients of the center. There was a 13.7% increasing in patient satisfaction, 7.4% increasing in bed occupancy rate, 1.9% bed turnover and also reduces the average length of stay from 3.2 days to 2.7. Changes in all the domains, also has increased the income of hospital by 2.7 times compared to the year before running the health reform plan.

Conclusion: The results indicated a positive impact of health reform plan on the key indicators of hospital performance.

Keywords: Hospital, Key indicators, Reform plan, Health system
ABSTRACT

Implementation of Natural Delivery Guideline Proposed by Health Reform Program on the Rates of Natural Delivery and Cesarean Among Women in Shahr-e-Kord -2016

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ABSTRACT

Background: Natural vaginal delivery (NVD) promotion was considered as a component of health system reform program to maintain and improve the health of mothers and babies and improve labor conditions. Therefore, the universities were obliged to reduce the rate of cesarean section (CS) to 10%. This study attempts to investigate the impact of implementation of NVD promotion guideline proposed by the health reform program on the rates of NVDs and CS among pregnant women referring to Hajar hospital of Shahr-e-Kord.

Methods: This cross-sectional study was conducted in two parts. A) Indicators of CS and NVD were evaluated according to the number of delivery, before and after health reform plan. B) a study was conducted on 837 pregnant women participating in natural childbirth education classes during 2014-2015. The data was analyzed using Excel software.

Results: In the first year of the project, the rate of CS decreased from 56.8% to 49.2% and increased to 55.9% at the end of 2015. The rate CS among the first parity mothers decreased to 35.28% in 2013 and to 29.08% in 2014 and to 29% in 2015. The NVD among the first parity mothers increased from 36.42% in 2013 to 41.16% in 2014 and decreased to 38% in 2015. Among the 837 trained mothers delivered by the end of 2015, 705 person had NVD (70.55%).

Conclusion: implementation of NVD promotion proposed by the health reform program was effective in reducing the CS rate. It seems that the removal of encouraging tariff for NVD was negatively effective in increasing the rate of CS in the second year.

Keywords: Health reform plan, Natural vaginal delivery, Cesarean section

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ABSTRACT 143

Sociological Explanation of Factors Related to Attitudes Toward Health System Reform Plan Among Zanjan Citizens

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ABSTRACT

Background: The health system reform plan has been developed in order to solve the health issues of people. The aim of this study was to assess the factors affecting to attitude of society towards the performance and the efficiency of health system reform plan. Thus, the dimensions of this plan were examined using the theory of Parsons (family influence on its members), Simmel (Effect of friends), Schramm (persuasion through the media) and Kurt Lewin’s theory of social control.

Methods: In this study as a field research, self-administered questionnaire was used. The population of this research was all the Zanjan citizens. The sample was 340 people. This random sample filled out the questionnaires voluntarily. SPSS software was used for data analysis.

Results: The results suggested that the factors of family (0.26) and group of friends (0.11) had the highest positive relation to the dependent variable. In general, 75.6% of the dependent variable changes were predicted by the independent variables (family, group of friends, the media, agent of social control, education level and gender).

Conclusion: In general, married educated men that were under the influence of family and friends and pursued the media and were sensitive to the social control of the project, had a positive attitude towards the efficiency of the health system reform plan.

Keywords: Health system, family, group of friends, media, social control, attitude
Geographic Disparities in Incidence and Severity of Catastrophic Health Care Costs in Iran During 2008-2014: Evidence From the Health Sector Reform Plan

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ABSTRACT

Background: The exposure of households with catastrophic health expenditures (CHE) is a measure for monitoring and evaluation of the financial protection in the health sector payments. This study was conducted with the aim of geographical differences in the rate of households exposed to CHE in 2008-2014.

Methods: This retrospective descriptive study was conducted based on the survey data of the cost-income of the rural and urban households in Statistics Center of Iran during 2008 to 2014. The households in which the portion of health expenditures were at least 40% of their income after the deduction of livelihood expenses was considered as the exposed households to CHE. Severity of CHE exposure was calculated which represents the average amount of health expenditure over the threshold of 40%. In addition, the relative poverty line and the percentage of families below the poverty line by residency was also estimated. The social factors affecting CHE exposure were determined.

Results: CHE exposure has had an increasing trend except for the years 2011 and 2012. The incidence of CHE in this period has fluctuated from 0.30% to 0.71%. The monthly average of monetary value for health expenditure of the households in rural areas was less than those in urban areas. However, the proportion of households faced with CHE in rural areas was more than those in urban areas. Social factors that had an impact on the incidence of CHE included the number of family members, elderly person, the use of inpatient and outpatient services, income and residency.

Conclusion: A significant difference was observed between the average rate of CHE and the aim defined in the fourth and the fifth Five-Year National Development Plan (1%). Rural areas were faced with a higher rate of CHE compared to the urban counterparts. These findings urges the need for reorienting the policies of improving financial protection in the health sector along with providing financing mechanisms.

Keywords: Health expenditures, Fair financing, Health policy, Iran
ABSTRACT

The Relationship Between Organizational Silent and Stability of Management in the Health Centers of Hamadan

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ABSTRACT

Background: One of the priorities in the Fourth Development Plan is improvement and development of management indicators in health sector. The aim of this study was to investigate the relationship between organizational silence and management stability in the health centers of Hamadan.

Methods: This was a cross-sectional study. The instrument for data collection was the Organizational Silence Questionnaire developed by Vakola and Dimiritis and the checklist of managers history.

Results: There was no significant correlation between organizational silence and management stability (P = 0.055). Organizational silence mean was 24.4 ± 47.27 and the maximum score was 38.

Conclusion: Considering the importance of stability in the management of health centers in Hamadan and in order to make effective management and increasing the quality of decision-making, training decision-making skills to the staff may promote health system.

Keywords: Management stability, Organizational silence, Health Centers of Hamadan
ABSTRACT

Technical Quality of the Services Provided for Patients With Intestinal Inflammation in Tabriz Care Centers

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Background: Inflammatory bowel disease is one of the chronic diseases that require complex treatment. The aim of this study was to evaluate the care provided to patients with intestinal inflammation based on the standards.

Methods: This cross-sectional study was accomplished on 2015 patients through interview and simple random sampling in Imam Reza (AS) and Tabriz Golgash clinic in 2013. Inclusion criteria for the study were those patients with IBD and medical records in the examined field, and with willingness to participate in the study. Data collection tool was a valid and reliable researcher-made questionnaire. To investigate the correlation between demographic variables and compliance with the standards Chi Square test was used.

Results: The findings showed that “visit by the expert doctor” and “diet recommended by nutritionists” had the least and the most level of compatibility with the standard, respectively, and “teach smokers about the role of smoking and its association with inflammatory bowel disease” is only care which is 100% in compliance with the standard. In total, the compliance of the cares related to the “disease severity” (20%) and “the care provided by other experts” (10%) with the standard was very low.

Conclusion: The results of this study indicated that a gap between the cares provided to the patients with intestinal inflammation and the relevant standards.

Keywords: Inflammatory bowel disease, Technical quality, Care
The Audit of Tabriz General Practitioners’ Office Based on the Iranian licensing Standards, 2015

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ABSTRACT

Background: Licensing is the process by which a government license to a health service provider or organization to work in a particular profession. This study was conducted with the aim of auditing the general physicians’ offices based on the Iranian licensing standards in Tabriz.

Methods: This was a cross-sectional study on 228 general practitioners’ office in Tabriz where selected randomly and according to Morgan table. Data collected using a validated researcher-made checklist. The SPSS version 19 was used for analysis.

Results: The average of compliance with the standards in the offices was 78.9% within which the most level of compliance was in the domain of the medical records and information (99.1%) and the least level was in the domain of health (56.2%). There was a statistically significant relationship between the number of visits to physicians’ offices with the compliance with the standards at the domain of human resources as well as between the doctor’s work experience and the compliance with the standards at the domain of medical and non-medical equipment (P < 0.05).

Conclusion: The results showed that the operation of general practitioners in their office in Tabriz is acceptable but there is a need that the licensing authorities be more careful on the domain of health in these offices.

Keywords: Licensing, Audit, General practitioner, Office
Client Satisfaction From the Hospital Services
Supply Chain in Health System Reform Plan:
Kerman Shafa Hospital in 2015

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ABSTRACT

Background: This study was investigated considering the importance of the supply chain in the function of hospitals and the novelty of supply chain in the health system reform plan.

Methods: This was a quantitative study. The study population was all the patients referring to the SHAFA hospital. Closed questions of questionnaire analyzed with descriptive and inferential statistics. Open questions that revealed the barriers of implementation of referral chain were categorized as descriptive after the coding and thematic analysis.

Results: The total average of satisfaction score was 4.13 out of 5 (SD = 0.52). Lack of ambulance, coordination problems and delays in providing the answer by specialists were the most important barriers for satisfaction.

Conclusion: The supply chain of health sector is complex. Consistency, to share information with all levels of the supply chain, promoting cooperation and partnership based on mutual trust and confidence, reducing response time across the supply chain, the use of different suppliers, providing products or services in appointed time, effective use of information systems are effective factors in the success of the supply chain.

Keywords: Supply Chain, Patient satisfaction, Health
ABSTRACT

Cross-Country Experiences in Implementing Public-Private Partnership (PPP) for the Provision of Hospital Services

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ABSTRACT

Background: Public-Private Partnership (PPP) can be a powerful political tool for improving the life of public hospitals and quality of their services. The current study was conducted to investigate the experiences of some countries in the use of public-private partnerships in the provision of hospital services.

Methods: This applied comparative study was conducted in 2015. To collect data, valid databases, as well as articles, theses, reports and related books in the field of private sector participation in hospital services were searched. Applying purposeful sampling the experiences of Britain, Spain, Canada, Turkey, Australia, Lesotho in the use of PPP in hospital services were investigated. The selected countries were examined in terms of four general variables including: used commonly pattern of PPP in the hospital, the contribution and the division of responsibilities between each of the public and private partners, as well as the achievements and outcomes of the implementation of PPP in the hospital sectors.

Results: In the selected countries successful experiences has been observed in the use of PPP in the provision of hospital services. In the all of studied countries design, construction, tooling and maintenance have been the responsibility of the private sector. In the United Kingdom and Canada, project financing was the responsibility of the private sector. In the United Kingdom, Spain, and Canada provision of non-clinical services and in Australia and Lesotho clinical and non-clinical services were the responsibilities of the private sector.

Conclusion: The use of PPP patterns had variety forms in the different countries. In each of the studied countries, the application of the PPP has brought consequences and great achievements for government, the people and the health sector.

Keywords: Hospital services, Comparative study, Public-Private Partnership
ABSTRACT

Background: One of the recent health system reforms is rural insurance with a focus on family physicians program and referral system. The aim of this study was to evaluate and explain the family physician program based on the SWOT model.

Methods: This review study was carried out using internal (SID) and external (PubMed, Science Direct) resources and domestic creditable journals in this field.

Results: Article 91 of the Fourth Development Plan emphasizes on the establishment of health insurance with a focus on family physician and referral system. Studies show that if the service classification is organized with referral system, 80%-90% of health needs can be provided on the first level services. The most important strength of this project is having the ready infrastructure to public services and organizational commitments and the most important weakness is the information gap between providers and recipients of services. The most important chance is Supreme Leader emphasis, commitment and national determination to do it in government and parliament and finally, the most important threat is lack of appropriate intersectoral collaboration.

Conclusion: The Islamic Republic of Iran has taken important steps to implement the family physician and referral system plan with the enjoyment of Islamic values and rich cultural background on the one hand and relying on the valuable international experience on the other hand. The steps include successful implementation as a pilot project in some provinces, employment increase for doctors and paramedical groups, justice, social satisfaction, etc.).

Keywords: Family physician plan, SWOT, Referral system

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The Effective Factors in Utilization of the Health Services

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Background: Every country devotes a part of its national income to the community health improvement. An important issue in this regard is the people utilization of the health services. Necessary information from various aspects of health services for reasonable planning and evaluation of health services is required. This study aimed at explaining the factors affecting the utilization of health services.

Methods: This study has been conducted through systematic analysis of internal and external papers.

Results: The results showed that, underlying variables (age, sex, occupation, etc.), accessibility, physical barriers, unawareness of service providing, lack of affordability, unacceptable service providing place and service providers from the cultural and social aspects, inappropriate time of service delivery and imbalance of supply and demand could be among the influencing factors.

Conclusion: Considering the importance of public health and its place in the community, the role of health provider and organizations providing health services, utilization of the health services is considered a necessary priority to people in the community. Some effective factors such as underlying variables (age, sex, and occupation), accessibility, distance and cultural factors are more effective than other ones that the proper analysis of this information can be a great help to policy makers, planners, administrators and health care providers.

Keywords: Utilization, Health services, Accessibility
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Achieving the Goals in the Normal Vaginal Delivery Development Program in Health Evolution Plan: A Case Study in a Large Public Hospital in Tehran

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ABSTRACT

**Background:** One of the goals of health evolution plan is promoting normal vaginal delivery and reducing cesarean section. This study aimed to determine the achievement rate of objectives in the normal vaginal delivery development package in health evolution plan at a hospital in Tehran.

**Methods:** This cross-sectional study was conducted in one of the hospitals in Tehran in 2016. Data were collected from hospital information systems. Statistics of deliveries, both vaginal and cesarean, done in the mentioned hospital in years 2013-2015 were obtained. 2013 statistics was considered as a base. The data obtained were analyzed using descriptive statistics and Friedman and Wilcoxon tests and SPSS 21.

**Results:** In the first year evolution plan, 2014, the hospital was successful in reducing cesarean to 6.2% which was not statistically significant ($P = 0.08$). In the second year of the plan, cesarean with 14.1% compared to the base year had a significant reduction ($P = 0.04$). All physicians in the hospital managed to reduce the rate of caesarean section ranging from 11.9% to 18.7%.

**Conclusion:** It seems that the implementation of healthcare evolution plan has been effective in reducing cesarean. Given the significant reduction of cesarean in the second year of the plan, it seems that appropriate policy and supervising the implementation and continuation of the plan could have a significant impact on achieving health goals closer to global standards.

**Keywords:** Natural childbirth development package, Cesarean, Healthcare evolution plan

© 2016 The Author(s). This is an open access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.
Comparison of Inpatient Quality of Care Indicators in Teaching – Treatment Hospitals Affiliated to Shahid Beheshti University of Medical Sciences in 2014

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ABSTRACT
Background: One of the criteria of hospital quality assessment is measuring quality indicators and comparing them with standards. Therefore, the purpose of this study was comparing the quality of inpatient care indicators in teaching-treatment hospitals affiliated to Shahid Beheshti University of Medical Sciences with national/ international standards.

Methods: This applied - descriptive and cross-sectional study was done at teaching hospitals of Shahid Beheshti University of Medical Sciences in Tehran, 2014. Ten markers reflecting the quality of health care outcomes based on their availability and recording in the studied hospitals were selected. Collecting these indicators was done through documentation review in the hospital. Data analysis was done through descriptive statistics using SPSS 21.

Results: Based on the results of the study, the status of caesarean section delivery, cancellation of surgery, patient satisfaction with hospital services, discharge against medical advice (DAMA), average time of triage, unsuccessful Cpr were below standard and net mortality indicator was at standard level and also indicators of falling out of bed, average time of triage in levels two, three, four and five were above standard.

Conclusion: In this study, although the majority of indicators were in a standard or above minimum national standard level, despite the official data of the present study, the data doesn’t seem reliable enough as long as there is not a standard recording system in public hospitals and supervision of the superior on registration and measuring methods.

Keywords: Qualitative indicators, Standard, Quality
ABSTRACT

The Challenges and Achievements of the Promoting Normal Vaginal Delivery Implementation in a Teaching Hospital

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Background: Promoting normal vaginal delivery program, one of the programs in health reform plan, has taken an important step toward promoting normal vaginal delivery. This study aimed at examining the challenges and achievements of promoting normal vaginal delivery program implementation in one of the teaching hospitals of Tehran University of Medical Sciences.

Methods: This was cross-sectional descriptive study. The data of 8510 deliveries in three consecutive years before and after the program has been provided using patients retrospective medical record. Calculations were done using Excel software.

Results: Of 2309 deliveries in year 2013 (before the program), 69% were cesarean section and 31% normal vaginal delivery, in the first year of implementation, of the 2989 deliveries, 70.8% cesarean section and 29.2% normal vaginal delivery, in the second year of implementation, of the 3212 deliveries, 71.3% cesarean section and 28.6% normal vaginal delivery. Preventable cesarean rate in year 2013 was 21.6%, in 2014, 14.8% and in 2015, 15%.

Conclusion: Although the hospital has not managed to reduce the rate of cesarean section, with respect to reason for cesarean section, 6.7% of preventable caesarean deliveries including elective ones decreased. This hospital has a large number of critically ill patients referred from other centers for caesarean and the rate is high. Two important factors in the implementation of the program are pleasant atmosphere of the delivery room with birth center criteria and an increase in human resources and skilled and ethical midwives. Thus, a comprehensive plan should be done to promote normal vaginal delivery.

Keywords: Normal vaginal delivery, Healthcare reform plan, Evaluation
Calculating the Training Cost of Dental Students of Tehran University of Medical Sciences in Each Level – Field Through Activity-Based Costing (ABC)

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ABSTRACT

Background: The aim of this study was to estimate the training cost of dental students of Tehran University of Medical Sciences in each level-field through activity-based costing in the academic year 2013-2014.

Methods: This applied study was done using a retrospective descriptive cross sectional method. The studied sample were all the costs, financial and statistical information of the school during the academic year 2013-2014. Data analysis was done using the Excel software.

Results: The highest cost was devoted to operative dentistry which was 1091 million rials (Iran currency) per student in an academic year and the lowest cost to undergraduate dental prostheses and then PhD in dentistry which were 113 and 128 million rials respectively. The average cost per capita for specialty was estimated 682 million rials. The lowest price among the specialties was in the field of maxillofacial surgery, 309 million rials.

Conclusion: The findings of this study can give a better view to policy makers in terms of various disciplines cost and requirements of students with regard to conditions. In addition to reducing the cost of services in government organizations, activity-based costing system can develop benefits of executive cost allocation system improvement, more accurate and reasonable pricing, controlling and monitoring operations in accordance with carried out plans and more accurate and transparent evaluation of the managers’ performance and organization by establishing a logical relationship between budgeting and planning.

Keywords: Training, Cost, Dental students, Education
Clinical Audit at Hospital Discharge Against Medical Advice at Shahid Arefian Hospital, Urmia

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ABSTRACT

Background: Discharge against medical advice occurs when a patient or his relatives have decided to leave the hospital before the treating physician lets him discharged. This study aimed at examining the factors influencing discharge against medical advice and effective interventions to reduce it.

Methods: This study was an interventional study conducted in the Shahid Arefian hospital, Urmia in 2013-2014. First data was extracted through discharge against medical advice (DAMA) forms in the hospital and the hospital HIS system and the reasons and rate of DAMA were analyzed. Statistical population of total DAMA was 78 cases in 2013. After prioritizing interventions and apply the results, the analysis was done again after 3 months and the results were compared before the intervention one. The data was analyzed using statistical software Excel and SPSS 20.

Results: The DAMA before intervention was 0.8%. The rate reduced to 0.6% after 3 months of intervention. Personal reasons of the patient including failure to afford, family problems, dissatisfaction with the course of treatment and continued treatment in more equipped centers were the most common causes of DAMA in the hospital respectively.

Conclusion: There are several reasons for discharge from the hospital despite the advice of doctors. Identification of these factors for early intervention to prevent the excessive consequences and increasing health care cost seem essential. Training of personnel, informing patients, good relations between patients and service providers while providing services can be appropriate interventions in reducing this amount.

Keywords: Hospital, Discharge, Personal satisfaction, Clinical audit
ABSTRACT

The Impact of Urban Family Physician Program on the Performance Cost of the Main Health Insurance Office in Fars Province

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Background: Urban family physician programs aiming at improving the delivery of justice in accessibility to services is the major goal of health system. This article has examined the impact of urban family physician on the performance cost in main health insurance office in Fars province. Considering the novelty of the program and its implementing only in Mazandaran and Fars, the results are important for the national implementing.

Methods: In this cross-sectional descriptive study, the data was obtained in details from Medical Records Administration office of health insurance center in Fars and systemic available data in the medical record system of health insurance due to lack of systematic organizational urban family physician plan in health system organization. Descriptive statistical tools and statistics indicators were used to study the cost and referring times during the period and also to compare the cost and times before and after implementing urban family physician program.

Results: On average, 41% of the total population of the system is related to the insured in the Central health insurance office in Fars province. The mentioned program led to 11.21% increase of the cost in central health insurance, of which 0.81% was related to omitting drug franchises prescribed by urban family physician which was not previously paid, 5.22% referral rewarding to specialists and subspecialists done with beginning of the program, 0.7% decrease of hospitalization services franchises and 4.48% to family physician capitation. If, with the new tariff, visiting fee were just before, the cost of specialists and subspecialists visiting ward would be about one-third.

Conclusion: The costs of central health insurance office has increased 11.21% in Fars province in 2015 with implementation urban family physicians program. However, based on the utility definitions, in economy, if the desirability satisfaction of the insured with this treatment, as well as the health of the insured population were more than 11%, it would be considered a successful one.

Keywords: Urban family physicians, Healthcare reform plan, Public coverage program, Referral system
Efficacy Evaluation of Dental Units in Iran Using Data Envelopment Analysis Approach

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ABSTRACT

Background: In the past decade, the number of dental units in the country has remarkably had little growth. However, meanwhile, there was no improvement in the oral health status in the country. The aim of this study was to evaluate the efficiency of dentistry units using data envelopment analysis approach (DEA).

Methods: The study population is 31 provinces of the country. The output DMFT and dmft variables were the students of the provinces and the input variables were the number of universities of medical sciences units, general and specialist dentists in provinces and the dentists at university of medical sciences. Variable returns to scale was used to assess efficiency. Data analysis was done using Deap 2.1 software.

Results: The lowest efficiency scale was of Tehran province (0.204) and Isfahan province was secondary to it (0.205). Isfahan, Khorasan Razavi, Kerman, Zanjan, Hamadan, Kordestan, Yazd and Tehran provinces had decreasing returns to scale and Gilan, West Azerbaijan, Mazandaran, Fars, Kermanshah, Markazi, Lorestan, Qazvin, Sistan and Baluchestan, Bushehr, Alborz, Hormozgan and Khuzestan provinces had increasing returns to scale.

Conclusion: Although Isfahan, Khorasan Razavi, Kerman, Zanjan, Hamadan, Kordestan, Yazd and Tehran provinces had better position than the other provinces in terms of indicators including the number of dental units, the number of dentists practicing in universities, the number of general and specialist dentists, they had decreasing returns to scale. Investing in training, prevention and health programs can have more cost-effective outcomes than investment in human resources and equipment.

Keywords: Data envelopment analysis, The number of decayed missing and filled teeth, Efficiency
Determined the Reasons for Failure to Register the Insured of Health Insurance in Urban Family Physician Program in Fars Province in 2015

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ABSTRACT

Background: Fars is one of the 2 provinces in which urban family physician program is implemented. Therefore, this is a special opportunity available to us to carry out a study in this field to help performers reform the defects. We try to find out what have caused a significant population of the health insured in Fars province not participate in the program yet despite the running of the program and its advantages.

Methods: The population of this descriptive study is the insured of health insurance (44330 people including 11000 households) who have not registered in the program by the end of the 2015. The sample size have been obtained from 350 households in the province. The data was obtained from the main insured through phone whose phone number was obtained from database of health insurance organization.

Results: In employee fund, 150 employees of education office (43%) did not feel a need to register in the program due to having golden insurance. 4% of the main insured were completely unaware of the program in Fars province. 16% failed to enroll the program despite referring to treatment centers. It should be noted that we faced with 50 people during the polls and they declared that from the very beginning of the program they have registered but their national codes were not registered in the system.

Conclusion: Based on the above percentages, it can be concluded that some policies must be done in terms of registering people having all inclusive insurance in the program. Although the number of people registered was low, their national code was not recorded, finally, we concluded that some doctors must enroll the people and provide them with services in case of full capacity. The reason is that some people leave, they can replace them.

Keywords: Urban family physician program, Health insurance, IEHS system
ABSTRACT

Challenges in Partnership With the Private Sector After the Implementation of Healthcare Evolution Plan

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ABSTRACT

Background: One of the basic strategies of health system restructuring is privatization and reliance on the market. Lack of attention to the partnership obstacles and challenges with the private sector may lead to project failure and cause irreparable damage to the health system structure. Hence, this paper aimed at identifying the partnership challenges with the private sector in health evolution plan.

Methods: This qualitative study with content analysis approach was carried as cross sectional study in 2015. Purposive sampling continued until data saturation. The study population included 16 experts in the field of privatization, managers of hospitals and health care centers. Data collection was done through in-depth interviews. Data analysis was content analysis which was done with regard to the authenticity, reliability, and data consolidation criteria.

Results: The findings of the study included seven main themes and 49 sub-themes. The main themes include: economic issues (4 sub-themes), structural problems (15 sub-themes), human resources (7 sub-themes), responsibility and accountability (5 sub-themes), planning (8 sub-themes), efficiency (5 sub-themes) and private companies (5 sub-themes).

Conclusion: The partnership challenges with the private sector has adverse effects for health systems and people. Identification of these factors and subsequently examining the strategies to overcome them can subsequently be a great help in the process of doing this project. And the structural problems as one of the main issues raised by all the interviewees. It is hoped that these results pave the way for decision-makers and policy makers in the health care system.

Keywords: The private sector, Health system evolution plan, Delegation
ABSTRACT 161

Communication Barriers and Facilitators Between Insurance Companies and Hospitals in Tehran in 2015

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ABSTRACT

Background: The health system has increasing role in maintaining and improving health in the community. Due to increased health care costs and slow economic growth in developing countries, the hospital has become one of the most important and costly organizations. With the establishment of the health evolution plan in university hospitals, relationships and activities of insurance organizations and hospitals have been changed. The aim of this study was to identify barriers and facilitating factors for activities and communications between the two organizations and to provide guidelines for the solution.

Methods: The study population consisted of 74 personnel of public, private and military hospitals in Tehran (manager, matron, financial experts and chief accountant) as well as basic insurance organizations and supplementary insurance (insurance agents resident in hospitals, experts and managers of the insurer). Data collection tool was interview and data analysis was done using qualitative data analysis framework.

Results: The most important obstacles were the lack of commitment in some cases by insurance, multiple and contradictory laws and circulars, lack of intervention, staff engagement and inappropriate treatment of the two organizations with each other and the facilitating factors identified were the elimination of deductions, timely payment of hospital costs by the insurance organizations, providing facilities for resident of insurance agents by hospitals and coordination among the various insurances.

Conclusion: Given the changes resulting from the implementation of various plans, particularly health evolution plan, it may be satisfying to benefit from health evolution plan and using and strengthening facilitators in order to reduce the raised barriers, improve relations and eventually community health.

Keywords: Communications, Hospitals, Facilitator, Basic and complementary insurance organizations, Obstacles
The Compliance of Teaching Hospitals With Organization Centered Standards of International Joint Commission on Attracting Medical Tourists in Shahid Beheshti University of Medical Sciences, 2016

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ABSTRACT

Background: In the era of globalization, people are purchasing appropriate health services around the world which has led to the wide development of health tourism phenomenon. This study aimed to determine the compliance of Shahid Beheshti University of Medical Sciences teaching hospitals with organization-centered standards of International Joint Commission on attracting medical tourists.

Methods: This descriptive - analytic study has been conducted in four selected hospitals of Taleghani, Imam Hussein, Luqman Hakim and Tajrish in Tehran. Standard checklist of organization-based International Joint Commission has been used to collect data. Descriptive statistics techniques and regression used to analyze the data.

Results: The highest standardization respect was related to educational standards and qualifications of employees (100 and the lowest to infection prevention and control (9/61 percent) %) in Masih Daneshvari Hospital. The mean score of Masih Daneshvari hospital (86.6%) was higher than Imam Hossein (AS) (82.5%) and the other two Taleghani and Luqman hospitals.

Conclusion: Considering the determination of the strengths and weaknesses of each study hospital, they can take the advantages of the model analysis of strengths, weaknesses, opportunities and threats to enhance their capabilities. It is recommended a mechanism for accreditation of medical centers in the country, such as the accreditation standards of International Joint Commission be created to increase the quality of services and attract more health tourists.

Keywords: Medical Tourism, International Joint Commission, Standards-based organization
ABSTRACT

Background: Changes in the hospital environment, technology and methods of service delivery, increasing the share of overhead costs in providing services caused hospital administration to look for useful information about the cost and the production factors. An important principle in the success of the health system is the accurate calculation of costs. Determining the exact costs enables managers and policy makers to allocate resources optimally by informed decisions. This paper examined and compared the results of activity-based costing (ABC) and time driven activity-based costing (TDABC) to calculate the cost of hospital diagnostic wards.

Methods: This is a review study. The information necessary to carry out this research was through internal and external review of literature as well as related books using key words of ABC, TDABC.

Results: The results of the studies showed that the ABC method cannot meet the needs. Therefore, the researchers introduced TDABC. The simplicity of the system, updating, the use of small and large companies with simple and complex processes, periodical economic evaluation of activities, demonstrating the effectiveness of activities are among the advantages of this method.

Conclusion: The successful development of TDABC has led to an accurate account of the cost of products and services and help managers assess diagnostic section performance.

Keywords: Activity-based costing (ABC), Time driven activity-based costing (TDABC), Hospital, Overall costs
ABSTRACT

Background: In today competitive and unpredictable environment, organizations need to adapt to their environment and flexibility of human resources as one of the aspects of flexibility has focused on the adaptability staff characteristics with changing environmental. Studying the flexible relationship of human resources with rural insurance deductions and value creation can help better plan for the improvement of health status and reduce rural insurance deductions. Therefore, this study was conducted with the above mentioned aim in Ahvaz West Health Centre.

Methods: The present study is cross-sectional in terms of time, applied in terms of results and descriptive analytic in terms of method. Statistical population in this study included all midwives and rural family physicians working in Ahvaz west health centers (N = 104) and were enrolled through census. The data collection tools include final standard national check list of the health insurance experts, demographic questionnaire, quarterly statistical report forms in terms of the vital horoscope in rural health centers, and the flexibility of human resources questionnaire. Field method was used for data collection, descriptive statistics to describe the demographic variables, and Spearman correlation coefficient to determine the relationship between listed goals and assumptions and SPSS 20 were used for data analysis.

Results: No significant relationship was found between rural insurance deductions and flexibility (functional, technical and behavioral). There was a significant relationship between rural insurance deductions caused by moderated quantity and deductions caused by moderated monitoring score with the flexibility of human resources ($P = 0.002$). But there is no significant relationship between the deductions due to population moderation and deductions resulting from FFS services with the flexibility of the three components. And also there was a strong significant relationship between the studied indicators for value creation in the organization with the flexibility of human resources, ($P = 0.012$).

Conclusion: Considering the results, it can be said that the staff flexibility (functional, technical and behavioral) are more conducive to creating value and improving health indicators. However, functional, technical and behavioral flexibility do not have much impact on rural insurance deductions. And only reduces the amount of rural health insurance deductions caused by moderated quantity and deductions due to the moderated monitoring score.

Keywords: Flexibility, Human resources, Rural insurance, Value creation, Health center
ABSTRACT 165

Comparison of Factors Affecting Medical Waste Supplies From the Viewpoint of Administrators in Esfahan Feiz Hospital Before and After the Implementation Of Healthcare Evolution Plan

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ABSTRACT

Background: Art of management is efficient use of limited resources to unlimited needs with maximum efficiency and minimum cost. One of the major sources of hospital is medical appliances and equipment allocated a significant part of hospital costs which is invisible, due to the wastage and abuse of the mentioned, but most of the costs can be prevented. This study aimed to determine the factors affecting medical waste equipment from the viewpoint of administrators in Isfahan’s Feiz hospital in 2016 and comparing the results with a study in this regard carried out before the implementation of healthcare evolution plan in Feiz hospital in 2012.

Methods: This cross sectional study was done in Isfahan’s Feiz hospital in 2016. Data collection tool was a researcher-made questionnaire whose validity and reliability were expert approved by the experts and Cronbach alpha respectively.

Results: Based on the examinations carried out in the Feiz hospital in 2016, in the field of affecting factors medical waste supplies, of the seven studied areas, the highest score was allocated to expendable medical supplies (the most favorable conditions) and the lowest one to (undesirable most items) violation area.

Conclusion: Based on the results obtained in the three areas (purchase of consumer goods, offenses and staff training) of the seven areas studied, the hospital status in 2016 was more favorable than in 2012.

Keywords: Wastage, Expendable medical supplies, Hospital, Health system evolution plan
Comparison of the Subsidy Share for Drug Safety and Medical Expendable Equipment in Various Main Insurance in Shahid Faghihi Hospital Before and After Health Evolution Plan

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ABSTRACT

Background: One of the objectives of reducing out-of-pocket cost to patient package in the healthcare evolution plan is reducing the cost of patient hospitalization with basic insurance to 10% of the total cost. Given that medicine and medical expendable equipment used in the treatment of patients as an essential good are a larger proportion of healthcare costs and are subject to health subsidies, therefore, we studied its share in the credits of healthcare evolution plan.

Methods: This cross-sectional study was conducted among 288 hospitalized patients in years 2013 and 2015. The data obtained from hospital information systems and then analyzed using SPSS 22.

Results: Average percentage of health subsidies for the medicines used in the ward and operating room, equipment used in ward and operating room to the total cost of each were 24%, 28%, 49% and 44%, respectively. The average percentage of basic insurance payments after the implementation of plan for each of these items were 6%, 29% and 29%, respectively. The values were 24%, 72%, 43% and 18% respectively before health evolution plan. The average percentage of patient's pay for each of these items were 7%, 6%, 10% and 8% after the plan. These values were 24%, 24%, 76% and 58% respectively after the plan. Percentage of pay except out-of-pocket cost to patient after implementation of the plan for medicine and expendable equipment were 30%, 79%, 88% and 74%, respectively.

Conclusion: Based on the results of the study, patients pay for medicines and medical expendable equipment has been decreased after health evolution plan. However, this plan has not decreased the hospitalization fees to 10% of the total costs.

Keywords: Medicine, Evolution plan, Health subsidies
ABSTRACT

TheImpact of Health Evolution Plan on Statistical, Clinical, Paraclinical and Surgical Indicators at Aqqala Alejalil Hospital From 2012 to 2015

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ABSTRACT

Background: The importance of health system reform and the service quantity and quality improvement as one of the most important results have always been taken into consideration. In this regard, the efficiency and effectiveness of the hospital activities and appropriate use of resources using performance indicators are assessed. This study aimed at assessing the impact of the evolution plan implementation on hospital indicators.

Methods: The statistical population of this descriptive-analytic study is Alejalil hospital. Data collection tool is the information available in the HIS system. Paired t-test was used to compare values in two time periods 2012-2013 and 2014-2015 and repeated measure ANOVA test was used to evaluate the significance of variables change trend. SPSS18 was used to assess and analyze the data.

Results: The results obtained from the comparison of the years 2012-2015 showed that there was an increased admission in the inpatient and outpatient wards after health evolution plan. Considering the results, the indicators of bed occupancy coefficient, average length of stay, referring to emergency, outpatient and paraclinic wards have increased.

Conclusion: The evolution plan had a positive effect on increasing the efficiency of hospital.

Keywords: Aq Qala, Hospitals, Indicator
The Impact of Healthcare Evolution Plan on Referring Times to Para-clinic Services (Laboratory) in Teaching Hospitals of Bandar Abbas in 2016

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ABSTRACT

Background: Laboratory is considered as a cost center to a hospital in addition to its importance in the diagnosis and treatment of patients. Despite the fact that increased referring times as an efficiency indicator of can improve laboratory performance, the cost also increases sharply as a result of this increase. Due to the effectiveness of health system evolution plan, reducing the amount pay by patients had several challenges that the experts believe that there is the possibility of induced demand in paraclinical service.

Methods: The population of this descriptive cross-sectional study were the patients referring to laboratories of the teaching hospital in Hormozgan University of Medical Sciences of which two hospitals were purposefully chosen. Data collection was done through statistics and HIS system in Excell format.

Results: Before the health system evolution plan there were four tests for each outpatient patient and 4 for each inpatient at Children hospital and in Shariati hospital 6 for each outpatient and 10 for each inpatient and after healthcare evolution plan, there were 8 for each outpatient and 14 for each at Children hospital and in Shariati hospital, 9 for each outpatient and 14 for each inpatient. Per capita growth rate in tests for patients at Children Hospital was120% 63% for outpatients, and inpatients respectively and at Shariati hospital, 55% and 78% for outpatients, and inpatients respectively.

Conclusion: Considering the constancy of the conditions, it seems that the relationship between staff and doctors salaries and the amount and volume of services, leading to calls for Induced service is one of the reasons for the increased test times per capita.

Keywords: Laboratory, Time clients, Healthcare evolution plan
ABSTRACT 169

The Relationship of Rural Family Physician Performance With Indicators of Mental Health Screening

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Background: The family physician program is a major development in the delivery of health care in Iran and examining the relationship between the family physicians performance and mental health indicators can help improve the community mental health. This study was conducted with the above mentioned aim in Golestan province.

Methods: The population of this cross-sectional, descriptive analytical study was rural family physicians working in rural health centers in Golestan province which was studied through census (N=161). The data collection tools were monitoring standard check list of national family physician, demographic questionnaire and mental health screening statistics in health centers. Data collection method was field method and SPSS was used for data analysis.

Results: The mean score of family physicians performance in mental health was 87% of the expected limit and the total amount of screening indicators in mental health was 16 per thousand in the province population. There was no significant relationship between rural family physicians performance and mental health screening indicators of the province, however, there was positive relation between the number of performance variables and some mental health screening criteria, including identifying mental diseases with severe psychological screening indicator (P=0.002), provision of medicines with mild mental screening indicator (P=0.047), supplying medicines and reporting with epilepsy screening indicator (P=0.007) and (P=0.000) and the recognition of mental diseases and drug supply with other mental disorders screening indicator (P=0.001) and (P=0.012).

Conclusion: The desirable score obtained from family physicians performance and general rate of mental health screening indicator which is more than country indicator (15 per thousand) can be a sign of desirable impact of family physicians performance in screening, although there was no significant relationship between the total score of the rural family physicians and mental health screening indicator in the province. Therefore, further study to assess other interventional factors impact on mental health screening indicators in the province and country are suggested.

Keywords: Mental health screening, Family physician, Performance
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

The Factors Affecting the Failure to Report Medication Errors from the Viewpoints of Nurses

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ABSTRACT

Background: Medication errors are the most common types of medical errors that significantly endanger patients' safety. Timely and accurate reporting of medication errors could effectively lead to the design and implementation of appropriate interventions to reduce the occurrence of these errors. This study aimed to examine the causes and influencing factors on not reporting medication errors among nurses in Abbasi hospital, Miandoab.

Methods: The population of this descriptive cross-sectional study was nurses working in Abbasi Hospital, Miandoab affiliated to Urmia University of Medical Sciences. All nurses working in different parts of the hospital (n =100) were enrolled through census. Data collection tool was a questionnaire including 19 questions in three areas and its validity and reliability were approved. SPSS 19 and ANOVA, χ² and t tests were used for data analysis.

Results: Based on the results, the main reasons for not reporting medication errors were related to the areas of management factors (3.56±0.996), reporting process (3.32 ±0.797), fear of the reporting consequences (3.01±1.039). ANOVA statistical test also showed a significant relation between type of employment and fear from the consequences of reporting medication errors (P<0.008).

Conclusion: The results suggested that management factors had the most important role in not reporting medication errors. A systematic designing for accurate and timely reporting of medical errors, training nurses in this regard and above all, creating a mechanism to improve the quality rather than getting them can lead to improved safety in patients.

Keywords: Patient safety, Medication errors, Hospital, Reporting
ABSTRACT

Background: One of the issues of concern in most developing countries is the efficiency of the health sector because more than 5% of gross domestic product (GDP) and 5% to 10% of government expenditures are allocated to this sector. In this regard, the hospitals as an enterprise need to use modern methods of management and economic analysis to the best use of facilities and resources available. In this study, we tried to improve medical records from admission to discharge, uptake of dedicated revenue in the pilot hospitals of Hormozgan University of Medical Sciences and Health Services, Bandar Abbas, Iran.

Methods: This applied and analytical case study was done in three pilot hospitals in Hormozgan University of Medical Sciences and Health Services. Relevant data was obtained from the hospital with the presence of the researcher using field method and another part of the information also prepared by researchers – made check list, based on the consensus of experts collected and analyzed based on objectives of the study.

Results and Conclusion: Given that this research is still running and not yet completed, it is expected that at the end of the research, results such as examining medical documentation before discharge, reducing insurance deductions of insurance companies and increasing hospitals dedicated revenue to 30%-50%, creating income and preventing self-censorship by personnel be obtained.

Keywords: Reengineering, Dedicated income, Admission, Discharge
ABSTRACT

The Impact of the Health Evolution Plan on Normal Vaginal Delivery and Cesarean Section in Shiraz University of Medical Sciences, 2015

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Background: The uncontrolled increase in cesarean section rate is one of the main challenges for policymakers in the field of health in countries. According to the World Health Organization recommendation, the rate of cesarean sections should be 5%-15%. This study aimed to examine the effects of the healthcare evolution plan on the number of normal vaginal delivery and cesarean section and government’s economic policy in increasing normal vaginal delivery.

Methods: This was an applied descriptive-analytic study. Statistics and information of the hospitals affiliated to Shiraz University of Medical Sciences were collected from the Maternal Health Office of Medical University using library method. Descriptive statistics of the indicators studied in study period (2013-2014) were expressed in numbers and percentage. T tests and Wilcoxon tests were used for statistical hypothesis.

Results: The findings suggest that 64.7% of the deliveries were caesarean sections in 2013. Whereas, 58.6 percent of which were via cesarean section in 2014 (P=0.772). In addition, considering the number and percentage of normal natural deliveries in 2013 and 2014 (P=0.000), it can be noticed that the number of normal natural deliveries was 35.3 percent in 2013 and 41.4% in 2014. In general, normal vaginal delivery increased 6% and cesarean section decreased 6%. Healthcare evolution plan also increased the number and percentage of the normal vaginal deliveries in public hospitals but decreased in private hospitals.

Conclusion: The implementation of the healthcare evolution plan increased normal vaginal delivery and reduced cesarean section in hospitals of Shiraz University of Medical Sciences in 2014. In addition, considering the policies adopted in limited number of hospitals to promote normal vaginal delivery (use of private midwife for delivery and use of analgesia in labor) implementation of healthcare evolution plan have not been influential.

Keywords: Normal vaginal delivery, Cesarean section, Healthcare evolution plan
ABSTRACT

Background: Proper implementation of health evolution plan as a health reform program plays a major role in the national health system and individuals health. On the other hand, considering various aspects of healthcare evolution plan and peer review of its effects must always be taken into consideration in the calculations related to healthcare planning and policymaking. Due to the importance of the issue, we decided to examine the performance of the Al Zahra hospital as the main referral center in the province, after the implementation of healthcare evolution plan.

Methods: This study was done in 3 phases: the first phase included the study and review of the healthcare evolution plan and determining the performance indicators of Al Zahra Hospital, using focus group discussion (FGD) with the participation of experts, the second phase, the selected performance indicators of the hospital (s) at intervals of 3, 6 and 9 months were extracted and analyzed and finally in the third phase, the indirect effects of each healthcare evolution plan package after implementation of the plan in Al Zahra hospital were examined using FGD and the participation of senior officials and experts involved in the healthcare evolution plan.

Results: There was significant difference among averages of occupied bed days, bed turnover interval and percentage of bed occupancy indicators before and after the implementation of healthcare evolution plan. There was a significant difference in average of hospital stay in year 2014 compared to 2012 and the average of active bed of the center in 2014 compared to 2013.

Conclusion: Pay out of pocket package has been somewhat close to target by reducing the proportion of patient's costs for services in government hospitals. But this is only part of the public share of health cost and other items must also be considered. Further exploitation of hospital facilities will make the evolution plan face with new challenges, including long waits for inpatient beds. The level of patient satisfaction has not changed significantly which still needs stronger policies.

Keywords: Performance indicators, Health system, Hospitals, Healthcare evolution plan, Pay out of pocket, Patients
national congress in health management
26-28 october 2016, tabriz, iran

abstract

the effect of psychological capital on organizational citizenship behavior of faculty members in tabriz university of medical sciences

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abstract

background: an organization requires meta role reflecting individuals’ interest to its long-term success. these behaviors are the organizational citizenship behaviors. since the organizational citizenship behavior plays a major role among faculty members of tabriz university of medical science, therefore this study aimed at studying effect of psychological capital on organizational citizenship behavior of faculty members at university of tabriz medical sciences and providing recommendations to promote organizational citizenship behavior in the target group.

methods: this was descriptive and correlational study conducted in 2016. the study population was faculty members of tabriz university of medical sciences and cluster sampling was done. descriptive and inferential statistical methods were used to analyze the data. so, descriptive and inferential statistics were used to summarize, classify and interpret the statistical data, the kolmogorov-smirnov test, pearson, spearman and regression tests were used to test the study hypotheses using spss.

results: the total number of samples in this study were 300 people and percent of accountability was 85. based on the results, the average psychological capital of faculty members at tabriz university of medical science was 4.82, and the average organizational citizenship behavior was 3.75. the average of various aspects of psychological capital, including self-efficacy, hope, resiliency and optimism, were 5.22, 5.19, 4.62 and 4.30, respectively. spearman correlation coefficient to determine the correlation between psychological capital and organizational citizenship behavior was 0.258 and \( p = 0.000 \). the mathematical relationship of psychological capital on organizational citizenship behavior of faculty members at tabriz university of medical science was \( y = 3/427 + 0/068x \).

conclusion: the results of this study showed that 8% of organizational citizenship behavior changes of the faculty members were explained by psychological capital changes. as a result, it can be concluded that an increase in psychological capital caused 0.068 increase in organizational citizenship behavior of faculty members at tabriz university of medical science.

keywords: psychological capital, organizational citizenship behavior, faculty members, tabriz
ABSTRACT 175

Frequency, Type of Error and the Verdicts Issued by Preliminary Medical Disciplinary Board in Amol, Iran, 2011-2014

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ABSTRACT

Background: Error is an integral part of human life. Regardless of how skilled, committed and careful healthcare staff are, they can make errors in conducting their professional skills. Carelessness can happen in two types, legal and professional. This study aimed at determining the type and number of verdicts issued to these errors, and their relationship with the medical staff’s errors in Amol.

Methods: The study was analytic and case in terms of aim, cross-sectional in terms of time and applied in terms of result. The total files which included verdicts issued by preliminary board from 2011 to 2014 were 66 which were examined using random stratified sampling, that is 50% cases per year. The data were collected quantitatively, by researcher-made form and note taking.

Results: The verdicts issued in this study were three, the presumption of innocence, warning or oral reprimand in presence of the local medical board and written warning or reprimands placed in the local Medical Council file. Most complaints were related to not doing their best in using their professional and legal responsibilities to examine and treat patients. The group that received highest number of complaints was orthopedic.

Conclusion: Clarifying some complications of therapeutic interventions by medical staff during treatment and at the end of the treatment period to avoid unnecessary complaints, Informing in the form of videos, pamphlets, posters, in terms of necessary conditions to deliver the complaint to the Medical Council to follow, reviewing reasons for complaints by Medical Council and feedback to staff to reduce the reference times.

Keywords: Verdict, Medical Disciplinary Board, Error, Medical staff
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Evaluating the Performance of the Hospitals Affiliated to Urmia University of Medical Sciences Before and After the Implementation of Healthcare Evolution Plan

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ABSTRACT

Background: To review performance and efficiency as one of the factors affecting the efficacy of the health system evolution plan can help designers and executive team recognize he strengths and weaknesses of the plan and try to improve. Therefore, this study aimed to compare the efficiency of hospitals affiliated to Urmia University of Medical Sciences, before and after the implementation of healthcare evolution plan.

Methods: This descriptive- analytical study was conducted during the years 2013 to 2014. Data were collected through the check list containing hospital specifications and required variables (inputs include: the number of physicians, nurses and midwives, and other personnel and active bed and outputs include: bed occupancy rate, the number of the discharged patients, and the number of the surgeries). The extracted data was used to calculate the technical, scale and management efficiencies of each using data envelopment analysis (DEA) and Win Deap software.

Results: Healthcare evolution plan influenced the technical, managerial and scale efficacies and their average were 0.772 ± 0.225, 0.877 ± 0.193 and 0.878 ± 0.144 in 2013 (before the implementation of the plan) respectively, and the averages were 0.886 ± 0.141, 0.941 ± 0.116 and 0.941 ± 0.090 in 2014 respectively (after the implementation of the plan) reflecting improved performance in the implementation of the healthcare evolution plan. Generally 21.74% of hospitals worked inefficiently before the plan (less than 0.6). While after the plan, the rate dropped to 8.70%. The technical, managerial and scale efficacies of some hospitals were dramatically reduced after the implementation of the healthcare evolution plan.

Conclusion: Based on the results of this study, it seems that despite the potential benefits of healthcare evolution plan, it had defects in some aspects and requires monitoring and periodic evaluation of the performance to eliminate them. After the implementation of healthcare evolution plan and a significant reduction in healthcare costs, hospitals in the country faced with unprecedented refer of the patients and increase in bed occupancy. Failure to provide required facilities and manpower in accordance with the increased load of refer times for the provision of care in these hospitals were the most common causes of performance reduction.

Keywords: Hospital, Health system evolution plan, Performance, Efficiency, Data envelopment analysis (DEA)
Family Physicians’ Job Satisfaction After the Establishment of Healthcare Evolution Plan in Mashhad University of Medical Sciences in 2015

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ABSTRACT

Background: This study aimed to determine the job satisfaction level of family physicians at Mashhad University of Medical Sciences after the establishment of the healthcare evolution plan.

Methods: The population of this descriptive analytical and applied study was all family physicians working at Mashhad University of Medical Sciences (284 samples). Data collection tool was Van Laren standard questionnaires that examined the medical job satisfaction area. The data collection was field method and it was analyzed using SPSS, t tests, one-way ANOVA at a significance level of 0.05.

Results: Physicians’ job satisfaction mean was 55%. The majority of doctors agreed with specific working goals which create capacity to work (78%) and were partly satisfied with the training provided (45%). Most were not satisfied with the availability of adequate working conditions, approved and appreciated by the superiors director and career growth possibilities (60%). There was a direct and significant relationship between job satisfaction and overall satisfaction (r = 0.407, P = 0.00). This is not significant with respect to demographic factors (P > 0.05).

Conclusion: The total score of job satisfaction among physicians is moderate. It seems that the family physician plan has not provided the necessary conditions to improve personal abilities and career growth possibilities for physicians. Policymakers can provide the development of physicians’ abilities and increase their job satisfaction level through family physicians’ participation in decision-making, increasing manpower, providing safe transportations means for going fields, removal of the diagnostic limitations and providing a degree of independence in the performance of the physicians.

Keywords: Family physician, Job satisfaction, Satisfaction
ABSTRACT 178

Designing and Implementing Management Intervention (Setting up Small Operating Room) Using FOCUS PDCA Method in Asadabadi Hospital, Tabriz

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ABSTRACT

Background: Minor surgery refers to minimally invasive surgical procedures in which only the skin, mucous membranes and connective tissue are incised. Studies have shown that doing minor surgery in outpatient clinics rather than doing it in the advanced operating room reduces costs up to 3.8 times. This study aimed to set up small operating room in Asadabadi hospital, Tabriz using FOCUS PDCA method.

Methods: This is an interventional study using FOCUS PDCA method. After reviewing the current situation and determining the process to improve, a team of process owners was formed. Standards physical space and equipment were extracted through literature review and action plan for implementation of interventions was developed. Finally, the impact of these actions on the process was assessed.

Results: In order to set up small operating room, the equipment, personnel and physical space should be focused to improve. A suitable atmosphere was created, the necessary equipment was purchased and staff training was done by focusing on these three parameters. Five months after intervention, 196 surgeries were performed and clients’ satisfaction increase to 6%.

Conclusion: The traditional approach is not responsive to qualities any more, in order to run properly and promote the quality and success of a center, it is essential that systems, processes and organizational units be appropriately evaluated and improved when necessary. In this study, we were able to achieve the objectives through the improvement in physical space, equipment and supplies development and training of human resources.

Keywords: Processes promotion, Minor operating room, FOCUS PDCA
ABSTRACT 179

Household’s Out-of-Pocket Payments in Low and Middle Income Countries: A Systematic Review

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Background: Out-of-pocket payment is known as the main financing resource in low and middle income countries. Considering health costs and control them in these countries is of a great importance. The aim of this systematic review is to determine the households’ out of pocket payments in low and middle income countries.

Methods: A systematic search was performed on Pubmed, Scopus, Web of Science databases in September 2015. The original and review articles studying the out of pocket were selected. Out-of-pocket was determined as a percent of GDP and household’s expenditures.

Results: Considering the inclusion and exclusion criteria, among 3714 studies in Vietnam, Nigeria, Pakistan, India, Indonesia, Ghana, Lesotho, Tanzania, Kenya, Yemen, Brazil, China, Turkey, Iran, Colombia, Botswana, were assessed in this study. 13 studies were from countries with low income and 12 from middle income and 5 were from the both. The mean out of pocket payment in low and middle income countries was 0.76 % of household income and 5.20% of their GDP.

Conclusion: Considering the included studies, households in low and middle income countries are encountered with high out of pocket payment in health sector. They have numerous challenges in health system financing. This leads to low access of households to health sector. Results emphasize the importance of household financial protection in health costs.

Keywords: Out-of-pocket payment, Household, Low and middle income countries, Systematic review
Background: Crisis management and emergency response in hospitals is essential for their success in providing quality services in dealing with crisis and disaster. The aim of this study was to evaluate emergency response in dealing with crisis and disasters in Tabriz hospitals.

Methods: This cross-sectional descriptive study was conducted in 2015 at 18 hospitals in Tabriz. Data was collected by WHO hospital emergency response checklists with 90 questions in 9 fields (command and control, communication, safety and security, triage, surge capacity, continuity of essential services, human resources, logistics and supply management, post-disaster recovery). Descriptive tests were used for data analysis using SPSS-20.

Results: The mean emergency response in dealing with crisis and disasters in Tabriz hospitals was 54.26%. The highest response among the studied fields was related to communication (58.95%) and the worst preparedness of the hospitals to increasing hospital capacity field with an average of 48.07%. Sepah hospital had the highest response to the disaster (67.22%) and the least to the private and charitable hospitals with an average of 49.45%.

Conclusion: According to the WHO checklist, the response rate to the crisis and disasters in Tabriz hospitals was 54.26%. Therefore, considering the low emergency response of the hospitals, planning and systematic and scientific evidence-based framework and its implementation to deal with crisis and disasters is essential in all studied hospitals. And the highlighted role of hospitals in services delivery should not also be ignored in time of crisis and the hospital itself must not be in crisis and critical periods.

Keywords: Crisis management, Emergency response, Disaster, Hospital
Identifying Factors Affecting the Implementation of Clinical Pathways in Hospitals: A Systematic Scoping Review

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ABSTRACT

Background: Clinical pathways are tools for linking the best evidence to performance and converting clinical guidelines to local protocols. These tools improve the safety, efficiency, and quality of health care. This systematic directional review was done to identify indicators influenced by the implementation of clinical pathways in hospitals.

Methods: This study was a systematic review conducted by searching online databases, Web of Science, Scopus, OVID, Science Direct, ProQuest, EMBASE, PubMed. And the search was conducted in the period from 1980 to 2016. Combinations of keywords were used to search the related studies. Studies found examined in three phases, and data extraction tables were designed based on objectives of study to check the articles included in the study.

Results: Searching online databases led to identification of 1988 of which 59 quality papers having the inclusion criteria were used after reviewing the article titles, abstracts and full articles. Review of the studies led to the identification of 62 indicators that the process indicators had highest number of the indicators and input indicators had the lowest. Average stay in hospital, hospital complication rate, readmission rate, mortality rate and hospital costs have allocated themselves the highest number of indicators respectively.

Conclusion: Implementation of clinical pathways have affected various economic, organizational, clinical and quality indicators and may have different effects on various indicators and different situations.

Keywords: Clinical pathway, Evidence-based care, Hospital, Indicator
ABSTRACT

Background: One of the most important factors that increases the burden of chronic diseases such as asthma is lack of attention to the patient pivotal role in the process of prevention and treatment. Customer quality has characteristics and features that customers in health system need to effectively participate in decision making and appropriate treatment actions and improving the quality of care provided. This study aimed to measure customer quality from the perspective of asthmatic patients referred to the Sheikhalraees clinic of Tabriz University of Medical Sciences in 2014.

Methods: This descriptive cross-sectional study was conducted with the participation of 180 patients with asthma through available sampling. Customer quality was measured from patients’ viewpoints in three dimensions of knowledge, skills and self-confidence and self-management in four levels using measuring patient activity questionnaire whose validity and reliability had been confirmed by experts. Chi-square test and Fisher exact tests and SPSS16 were used for data analysis, statistical significance level was considered 0.05.

Results: The mean score of customer quality was 66.5%. 4.5 percent of participants in the study were at the lowest level of self-management. 18.3% did not have the necessary ability to take effective action to prevent and treat their disease, while 82% had the ability to take effective action. Only 45% of people were able to obtain Level 4 score in the highest level of self-management, indicating the ability of these patients to change their lifestyle in an effective action even under difficult conditions and stress. There was no significant relationship between the variables such as age, sex, education level, disease and continuing services and customer quality score. The only significant relationship was between the patients control state and the customer quality score. And those who better controlled their disease had scored higher customer quality score.

Conclusion: Considering mean score of the customer quality which was less than 75 as well as the low percentage of people in the top level of self-management, customer quality is not desirable in asthma patients which requires more attention of health policy makers in relation to self-management programs, knowledge and skills in this field and more support of these patients.

Keywords: Customer quality, Self-management, Self-care, Asthma
ABSTRACT 183

The Causes of Falling Down From Bed Among the Patients Hospitalized at Shahid Madani Hospital in 2015

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ABSTRACT

Background: Falling out of bed is one of the most common problems for patients and the challenges hospitals face, whose injuries and consequences lead to decreased quality of life of patients, length of hospital stay, and increased health care costs. The aim of this study was to investigate the causes of falling out of bed inpatients at Shahid Madani hospital.

Methods: This is a descriptive cross-sectional study related to patients falling out of bed done in 2015. The study population is inpatient wards. Due to the high statistics of falling out of bed in the both men internal medicine ward and women surgery ward, the patients of these two wards were selected by census sampling method. Data collection tool was the checklist designed based on national guidelines of falling out of bed. And data collection was done through surveys error report forms, records of patient falling out of bed, interviews with nurses and observation.

Results: Most patients falling out of bed happened in the evening shift in patients’ rooms coming down from the bed, of which one led to the patient’s death. Based on nurses’ viewpoints the causes of patients falling out of bed were disease and care-related factors (85%), factors related to equipment (80%) and environmental factors (54%) in the studied wards. Underlying problems (such as age, medical history, etc), dizziness, mental illness and balance disorder were the most important factors related to the disease and care that led to the falling.

Conclusion: Patient falling is one of the important indicators of patient safety and periodic review of risk of fall could be a good strategy to prevent falling. Therefore, to enhance patient safety and to prevent falls, designing proper interventions is needed to prevent the incidence.

Keywords: Patient safety, Hospital, Falling down, Bed
Reviewing and Improving Safe Injection in Neurology Ward in Tabriz Imam Reza Hospital Using Clinical Audit Method

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ABSTRACT

Background: Injections is one of the most common methods of medical treatment. Nearly 16 billion injections are administered in the third world countries each year. Safe injection is the one that does not harm the patient, does not put the staff at unnecessary risk and the discarded needle and syringes does not damage the society. This study aimed to examine the compliance of injection in the neurology ward of Tabriz Imam Reza hospital with available standards, to identify strengths and weaknesses and to improve the process if necessary.

Method: This descriptive - intervention study was done in the neurology ward of Tabriz Imam Reza hospital in the first eight months of 2013. The tool used was a questionnaire consisting of 37 questions using the safe injection guidelines provided by the Ministry of Health whose validity was confirmed by experts in the field of nursing and CVI = 0.95 and CVR = 0.97 were obtained. Its reliability was assessed and Spearman-Brown = 0.958 and Kendall's W =0.847 were obtained and the reliability was approved in both times. In this study, 150 injections were observed using sampling method and the results were analyzed using SPSS 16.

Results: The results obtained from checklist indicated that 66.3% of the standards for safe injection have been respected in the neurological ward and 5 items of the standards have never been respected (0%). However, after the intervention, respecting of these standards reached to 71.05%.

Conclusion: Considering the wide injections in the treatment process and the risks of unsafe injections, many efforts must be done to improve the present situation, especially in relation to issues such staff safety that safe injections standards are less considered.

Keywords: Process, Safe injection, Safe injection guidelines, Neurology
ABSTRACT 185

The Effect of Occupational Factors and Job Environment on Job Turnover Intentions Among Nurses in Public Hospitals of Yazd and Babol

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ABSTRACT

Background: Serious need to modify and decrease turnover rates in different occupations has prompted many researchers to study how and why they tend to leave. There is a complicated relationship between a desire to leave and predictions and the consequences. This study only focused on predictors of intention to leave in nurses and studied three general categories of factors related to job, occupational and demographic environment.

Methods: The study population consisted of nurses in public hospitals in Yazd and Babol. Stratified sampling was used to select the participants, and questionnaire was used to measure the variable.

Results: The results showed that demographic factors had a significant effect on turnover intention in nurses. And factors related to job and job environment indirectly affect turnover intentions through job satisfaction, organizational commitment and job burnout.

Conclusion: It was found that overall, occupational factors compared to environment factors have more severe impact on job turnover intention. At the end, recommendations have been made for the future research as well as managers particularly hospital managers.

Keywords: Occupational factors, Environmental factors, Job turnover intention, Nurses
ABSTRACT

Evaluating and Comparing the Financial Resources of Hospitals Affiliated to Isfahan University of Medical Sciences Before and After the Implementation of Healthcare Evolution Plan

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Background: Hospitals as the largest and most costly operational unit of the health system using the vast majority of financial, human and capital resources have specific sensitivity and importance in health economics and evaluation of financial sources of hospitals, especially after the healthcare evolution plan is important.

Methods: This descriptive-analytical study was conducted as cross-sectional and retrospective study on hospitals affiliated to Isfahan University of Medical Sciences. Of all downtown hospitals and independent hospitals in the city, a total of 20 centers were selected. Financial data for the years 2013 and 2014 extracted using budget software, accrual accounting and financial balance and summarized and analyzed using Excel software.

Results: The share of financial resources of hospitals from public funds, ranking notification, health evolution plan, Article 37 (traffic accident), specific funding (income) in 2013 were 21.7%, 3.6%, 0%, 4.8% and 69.9% respectively, in 2014, they were 18.2%, 1.4%, 16.2%, 3.9%, 60.3% respectively. The percentage of hospitals income increase in 2013 to 2012 and 2014 to 2013 were 27 and 58, respectively. The proportion of cash (out of people pocket) to total income in the years 2013 and 2014 were 25 and 15% respectively. Average income from per occupied bed days was 3.5 and 5.4 million rials (Iran currency). The income from documents sent to insurance organizations in the two years were 75% and 85% respectively.

Conclusion: In 2014, the share of hospital financial resources from the funds of the evolution plan was about 16.2% showing heavy dependency of hospitals on this source. Healthcare evolution plan has had very positive impact on the hospitals income. The percentage of out-of-public pocket has also decreased and in turn more income was related to the documents sent to insurance organizations.

Keywords: Evaluation, Hospital, Occupied bed days, Healthcare evolution plan, Financial resources
ABSTRACT

Background: This study aimed to evaluate the impact of health evolution plan on mode of delivery at Alejalil hospital.

Methods: This cross-sectional descriptive study was conducted at Aq-qala Al-e-jalil hospital in 2016. Data were collected from hospital information system and the number of normal vaginal deliveries and cesarean sections in years 2013, 2014 and 2015 for all of obstetricians and gynecologists were analyzed using descriptive statistics.

Results: The number of deliveries in the years 2013, 2014 and 2015 were 2614, 2832 and 2948 respectively. The percentage of cesarean section in the years 2013, 2014 and 2015 were 40.25% (1048 cases), 34.14% (964 cases) and 33.26% (984 cases), respectively, of which 22.55% (590 cases) cesarean sections were for year 2013, 23.55% (672 cases) for 2014 and 24.1% (718 cases) for 2015 because of repeated cesarean sections. The results also showed that all hospital doctors in 2015 reduced cesarean sections compared to 2013.

Conclusion: The results suggest that hospital has been successful in achieving the goal of health evolution plan in reducing cesarean rates.

Keywords: Normal vaginal delivery, Cesarean section, Health evolution plan
ABSTRACT

Recognizing Challenges in Hospital Management

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Background: The hospital management has faced several challenges in recent decades. Identifying and solving these challenges can promote the efficiency and effectiveness of the activities of the hospital. This study was conducted to identify and explain the challenges that the hospital management faced. The aim of this study was to explain the challenges of the hospital management in Shiraz hospitals.

Methods: This qualitative study with content analysis approach was carried out at Shiraz University of Medical Sciences in 2014-2015. The study population included administrators of teaching and treatment hospitals, University staff managers, faculty members and graduate students of Shiraz University of Medical Sciences, of whom a total of 24 people were purposefully selected. In this study, interviews and focus group discussions were used to collect data. In addition, the content analysis was used to analyze the data.

Results: In this study, the hospital management challenges were divided into five themes (structure and academic organizations, rules and guidelines, resources and facilities, weaknesses of training, the macro policies and upstream). Changing the culture and beliefs, modifying restructure, organization and training and empowerment were mentioned as strategies for passing through the challenges.

Conclusion: This study showed that hospital administrators are facing with several challenges, most of which are organizational and process problems. Support and adequate planning of senior managers can be the most important factors to reduce and pass through these challenges.

Keywords: Hospital Management, Hospital, Challenge, Qualitative study
ABSTRACT

Examining the Participatory Management and Staff Resistance to Change in Yazd Teaching Hospitals From the Managers’ Perspective

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ABSTRACT

Background: Organizations have to adapt to environmental changing to survive. Participative management can be one of the ways in reducing resistance to change through increasing participation and staff commitment to the organization. This study aimed to determine the participative management and staff resistance to changing at Yazd teaching hospitals from the managers’ perspective.

Methods: This descriptive cross-sectional study, a type of correlational study was carried out on 80 senior, middle and operational managers working at teaching hospitals of Shahid Sadoughi University of Medical Sciences, Yazd, 2013. Two researcher-made questionnaires on participative management and resistance to change were used in order to collect data. The content and face validity of the study tools (questionnaires) was confirmed by faculty members and experts in this regard and the reliability of 78% and 70% were obtained by Cronbach alpha coefficient respectively. Descriptive statistical tests and SPSS19 were used for data analysis.

Results: The results showed that the highest average of participative management was in hospital A (67.52 ±6.91) and lowest was in hospital B (60.23 ± 8.27). Also, maximum resistance to change was in hospital C (40.8 ± 8.74) and lowest was in the hospital A (37.64 ± 7.72).

Conclusion: Considering the results obtained, the hospitals in which participative management average was higher; the average of resistance to change in personnel was at a lower level; So, participative management style can be used to create fundamental and constructive changes in the organization to reduce staff resistance to change.

Keywords: Teaching hospitals, Hospital administrators, Participative management, Resistance to change.
National Congress in Health Management  
26-28 October 2016, Tabriz, Iran

ABSTRACT

Comparison of Hospitals Performance Affiliated to Yazd University of Medical Sciences With the National Standards Before and After the Implementation of Healthcare Evolution Plan

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Background: The hospital indicators are important in showing hospital performance and are applied tools in comparing the service with standards or assessing the health centers services. This study aimed at comparing the hospitals performance affiliated to Yazd University of Medical Sciences with the national standards before and after the implementation of healthcare evolution plan.

Methods: This cross-sectional descriptive study with practical results was conducted in the second half of the 2013 and 2014. Due to the limited population size, sampling was not done, census was used instead. Data collection was done using 201 forms of statistical and medical records unit of treatment deputy and they were compared and assessed using Excel software.

Results: Overall, of the study performance indicators, the bed occupancy increased 2.6% in second half of 2013 and 2014 and the average of length of stay and Turnover indicators decreased by 6% and 28% respectively. Considering 5.53% reduction of surgery indicator compared to 2013, it has been distanced from the national standard and optimal situation.

Conclusion: Comparing the results of bed occupancy, average length of stay and bed turnover interval indicators in hospitals affiliated to Yazd University of Medical Sciences, the national standards showed a better performance and a more favorable situation in the second half of 2014 compared to 2013 years. So it can be concluded that healthcare evolution plan could have a positive effect on the performance of hospitals.

Keywords: Hospitals, Performance indicators, Healthcare evolution plan
ABSTRACT

Background: Reducing inappropriate use of health services is one of the ways to limit costs without harming the quality of these services. This study aimed to assess the unnecessary admission and hospitalization and direct financial burden estimation resulting from it in the internal wards of selected hospitals at Alborz University of Medical Sciences.

Methods: This descriptive cross-sectional study was done with the participation of 310 patients hospitalized in the internal medicine ward in 2014. The data collection tool was the Appropriateness Evaluation Protocol, the most common tool used to evaluate the necessary admission and hospitalization. Data analyzed using chi-square tests, t-test and logistic regression and SPSS18.

Results: 5.8% of hospital admissions and 9.93% of staying days were unnecessary and 20.3% of the patients in the hospital at least had one day of unnecessary hospitalization. The most important cause of unnecessary hospitalization day was evaluated to be due to clinical trials follow-up and delay in timely visits of doctors. The financial burden of unnecessary hospitalization during the study period was estimated to be 125 928 000 rials as well as the financial burden resulting from unnecessary stay of the people who were absent from work was estimated 24 241 600 rials.

Conclusion: Unnecessary admission and hospitalization are due to the lack of health care services at lower levels, poor referral system, lack of coordination between clinical wards and hospitalization, delays in timely visits of doctors, increase in non-hospital health facilities to reduce referrals to higher level centers, promoting referral system performance, using the Appropriateness Evaluation Protocol on the patient’s clinical records and training of health staff in the field, reforming defective processes by the promoting quality method and setting up resident physician plan at the hospital to reduce unnecessary admission and hospitalization are recommended.

Keywords: Unnecessary admission, Unnecessary hospitalization, Hospital, Appropriateness evaluation protocol
ABSTRACT 192

Comparison of Quality of Work Life Expressed by Family Physicians Before and After the Implementation of Healthcare Evolution Plan

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ABSTRACT

Background: The healthcare evolution plan was carried out at Mashhad University of Medical Sciences simultaneously with other universities after a long discussion in May 2014. This study aimed to compare the quality of working life of family physicians after the establishment of healthcare evolution plan at Mashhad University of Medical Sciences with results similar to study in Mazandaran before the plan.

Methods: This descriptive analytical study studied all family physicians at Mashhad University of Medical Sciences (284 people). Data collection tool was Van Laren Working life quality questionnaire which examined quality of working life in six different areas (tool used in Mazandaran study). Data analysis was done using SPSS and independent t test and ANOVA. Significant level was considered 0.05.

Results: The total average of quality of physicians working life, stress at work, general health status, control at work, job satisfaction, working conditions and work-home relation areas before the plan were 46%, 47%, 48%, 52%, 46%, 43%, 41% and 57% respectively and they were 62%, 62%, 59%, 55%, 54%, 52% after the plan respectively. There was no significant relationship between the quality of working life with demographic factors before the implementation of the plan, and there was significant relationship between settling in the region (P = 0.005) and work experience (P = 0.04).

Conclusion: Not much difference was seen in the quality of family physicians working life compared to before plan. It seems that managers can provide better results in improving the quality of working life, in addition to current efforts of evolution plan with re-forming performance evaluation system, salary calculation mechanism and the balance between work and personal life of doctors.

Keywords: Healthcare evolution plan, Family physician, The quality of working life
The Effect of Relative Value of Health Services Implementation Book on the Insured Payment of Health Insurance Among Outpatients in Hajar Hospital, Shahrekord

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ABSTRACT

Background: After Iran Islamic Revolution, many efforts have been made to promote the healthcare system and public healthcare of the country. In this regard, health policy makers attempted to compile the book on relative value of health services. The main objectives of healthcare evolution plan has been to reduce the franchises paid by people and insured and increase the state and health insurances share of the healthcare cost.

Methods: This is descriptive- analytical and retrospective study using field method, it is applied in terms of nature and cross-sectional in terms of the time. The study population consisted of all prescriptions for specialty and subspecialty outpatient subsidiary services at Hajar governmental hospital, Shahrekord in August 2014 and January 2015 for providing services for the insured of health insurance. Data were collected using a questionnaire.

Results: Based on the results, the number of the referred has been increased 8 times with the implementation of healthcare evolution plan. In addition, 15% subsidizing to the insured and reducing the franchises of patients in paraclinical wards from 30% to 15% in the public sector are the causes for the reduction of the out of pocket pay compared to services payment tariff. The average growth cost per visit in total sent prescriptions was 1018%.

Conclusion: implementation of the relative value of health book along with 15% subsidies from the targeted subsidies led to the balance of the insured pay out of pocket, establishing justice in the outpatient health services sector including public sector and the reduction of patients’ financial burden in most services.

Keywords: Relative value book, Health evolution plan, Health insurance, Payment franchises
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Identifying and Prioritizing the Competitive Factors Affecting Performance of Public and Private Hospitals Based on Porter’s Generic Strategies

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BACKGROUND: Proper understanding of competitive strategies and organizational performance can provide accurate recognition for managers' decision making. In this regard, Porter believes that superior performance in a competitive industry can be achieved through public strategies. The present study aimed to identify and prioritize the competitive factors affecting performance of Kashan public and private hospitals based on Porter’s generic strategies.

METHODS: The statistical population of this descriptive-survey study included all managers, deputies, heads of various departments and experienced nurses in Kashan public and private hospitals in 2014. Kolmogorov-Smirnov, Friedman, Kaiser Meyer, Bartlett, Exploratory and Confirmatory factor analysis tests were used to examine the research questions.

RESULTS: Based on the obtained results, the focus strategies, differentiation and cost saving are the top three priorities explaining competitive factors affecting the performance. Twelve, 14 and 10 competitive factors were identified and prioritized on focus strategies, differentiation and cost control, respectively.

CONCLUSION: Improving competitive factors affecting performance could lead to an increase in hospitals competitive advantages compared with other competitors. Thus, considering the importance, strength and weaknesses of each factor require the investment and attention by hospital managers.

KEYWORDS: Competitiveness, Porter generic strategy, Focus strategy, Differentiation strategy, Cost control strategy

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ABSTRACT

The Relationship Between Organizational Spirituality and Workaholism Among the Nurses Working in Yazd Teaching Hospitals in 2014

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Background: Spirituality in the workplace improves performance, satisfaction and motivation among employees and increases productivity of the organization. On the other hand, too much working called workaholism gets the organization to achieve its goals. This study examined the relationship between organizational spirituality and workaholism.

Methods: This descriptive and correlational study was done as a cross-sectional one in 2014. The study population was nurses at Yazd educational hospitals of whom 170 cases were selected through stratified and systematic sampling. Millman organizational spirituality questionnaire and Spence and Robbins workaholism questionnaire were used to collect data. SPSS, t test, chi-square and Pearson correlation coefficient statistical tests were used for data analysis.

Results: The mean score of organizational spirituality was 62.72 and workaholism mean score was 70.08. The results showed that there was a positive and meaningful relationship between organizational spirituality and workaholism.

Conclusion: Results showed that organizational spirituality was one of variables affecting workaholism. Therefore, the policy makers of organizations can take advantage of spirituality to use the maximum power of the staff for achieving the organization goals and make appropriate strategies for the staff health who are workaholics.

Keywords: Organizational spirituality, Workaholism, Nurses
ABSTRACT

Background: Cancer is one of the main causes of mortality in the world and is considered among the most expensive treatments, and the financial burden imposed on the governments has been taken into consideration. Today, the lack of financial protection in health has been raised as a problem and a disease in health systems. In many countries, the measures are planned and implemented to support cancer patients. In Iran, heavy costs on the one hand and the rising incidence of cancer on the other hand have made health authorities allocate one of the priorities of the health evolution plan to this problem. The aim of this study was to evaluate the performance of the plan in cancer patients in the Sari Imam hospital.

Methods: In this cross-sectional analytical study, cost records of all leukemia cases admitted to the hospital in the period of 6 months from 4 May until November 4, 2014 and the similar period (from 4 May until November 4, 2013) were examined. Required data were collected from hospital information systems. T test was used for data analysis using SPSS 21 and Excel software.

Results: The patient's share of the total treatment cost was 17.12% in 2013 and it was 3.02% in 2014. The share of drug costs paid by patients 16.8% in 2013 which dropped to 7.7% after implementation of the plan in 2014.

Conclusion: Out-of-pocket cost paid by the patients had significant decline after implementation of the plan in 2014. However, the cost of medication, despite a decrease of 9% compared to the previous year was not statistically significant. Therefore, new policies in relation to the cost of the drug in order to reduce the cost of drugs due to its importance in the treatment chain along with early diagnosis and screening in healthcare evolution plan could reduce the financial barriers faced by patients.

Keywords: Cancer, Treatment, Healthcare evolution plan, Pay out of patient's pocket, Justice in payment

The Comparison of the Total Out-of-Pocket Payment and the Drug Share Among Leukemia Patients, Before and After the Healthcare Evolution Plan in Sari Imam Khomeini Hospital, 2014

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ABSTRACT 197

Examining the Relationship Between Role Ambiguity and flexibility Among Health Workers Working in Ahvaz West Health Center

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ABSTRACT

Background: Behavior, decisions and performance of health workers in the organization are formed based on their perception of the role and demand status. If the organization success is achieved through human resources, skills of health workers working in health house can be critical and strategic management of human resource researchers believe that profitability, productivity and effectiveness of the organization lie in having flexible human resources. This study was conducted to determine the relationship between role ambiguity and flexibility of health workers.

Methods: The present study is correlational. The study population consisted of health workers working at the Ahvaz West Health Center (N = 260) and were selected by census method. In this study, descriptive statistics and Mann-Whitney and Kruskal-Wallis test, Pearson correlation and path analysis were used and LISREL statistical software was used for data analysis.

Results: Results showed that there was a significant relationship between role ambiguity and gender, marital status, multi-job and education. The results of Pearson correlation showed a significant relationship between role ambiguity and flexibility of health workers.

Conclusion: The less role ambiguity the staff show, more flexibility they show in the workplace and vice versa.

Keywords: Role ambiguity, Responsibility flexibility, Skill flexibility, Behavior flexibility, Health workers
ABSTRACT

Effect of Removing Communication Barriers Between Health Team Members and Health Workers on the Quality of Health Services Provided in the Ahvaz West Health Center

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Background: Health services clients generally demand quality healthcare. The effective communication among service providers in the process of providing healthcare services for the patients has a significant impact on the quality of care. Therefore, this study was conducted to reduce interventional communication barriers to identify communication barriers among health team members and health workers and patients’ perception from quality healthcare.

Methods: This was a quasi-experimental study. The study population included health workers (N = 260) enrolled by the Census and patients (N = 375) selected randomly. The doctors were selected by screening for the both experimental and control groups (N = 56). Descriptive statistics, paired t tests were used for data analysis.

Results: The study indicated the effect of training on removing communication barriers between health team members and health workers, and the hypothesis is acceptable with 98% confidence.

Conclusion: The results showed the poor relationship between health team members and health workers, improper quality of services from patients’ viewpoints and low satisfaction. To improve the current situation, services recipients should purposefully get information about their rights. It is essential that service providers know enough about the patients’ rights and the possible consequences in case they are not met and also learn how to response to these rights.

Keywords: Training, Communication barriers, Health teams, Health workers, Quality of service
Evaluation of the Relationship Between Individual Skills and Organizational Behavior of Time Management Among Managers in the Tabriz Hospitals, 2014

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ABSTRACT

Background: Time management is one of the effective management principles requiring some skills. The skills are divided into 2 groups of individual skills and organizational behaviors of time management. This study aimed to examine the relationship between personal skills and organizational behavior of time management as well as their relationship with some demographic characteristics of the managers of the hospitals affiliated to Tabriz University of Medical Sciences.

Methods: The population of this cross-sectional descriptive study were all the managers and matrons of the hospitals affiliated to Tabriz University of Medical Sciences who were selected through census sampling. The assessment tool was a questionnaire consisting of 2 parts whose first part assessed the individual time management skill and the second part assessed organizational time management skill and its 6 dimensions. Descriptive statistics and Pearson correlation, t test and ANOVA tests were used for data analysis using SPSS16.

Results: The results showed that there was a positive and non-significant relationship between individual and organizational skills of time management (R = 0.37 and P = 0.165). There was no significant between individual skill and organizational skill dimensions. Also, no statistically significant relationship was seen while comparing time-management skills regarding the demographic characteristics of managers with any of the variables.

Conclusion: Based on the findings of this study there is non-significant positive relationship between individual skills and organizational skills of time management. Therefore, the organizational time management skills cannot be explained on the basis of their individual time management skills.

Keywords: Time management, Individual skills, Organizational skills
ABSTRACT

Background: Virtual education has become an agreed approach in the medical education development. This study aimed to search and report the impact of the implementation of virtual training in providing educational and treatment services process at Gonabad 22-Bahman Hospital.

Methods: Action implementation process included four stages of the problem diagnosis, planning, implementation and evaluating. The first phase included interviews and focus groups with university and hospital managers. In the second phase, the solution was searched. Brainstorming and literature review were the most important tool in this phase. Implementation lasted 8 months, including buying and installing software and holding training classes. Qualitative-quantitative approach used for evaluation included interviews with students, teachers and hospitals managers and completing questionnaire and checklists.

Results: The integration of virtual education in providing the process of educational-treatment process of hospital led to taking advantage of the 4 main innovations. First, the E-Clinic, based on virtual communication and online health centers with hospital specialized clinic was established and it was along with results such as reducing of referrals, reducing out of pocket, promoting education quality with an emphasis on rural and urban health centers and increasing patient satisfaction with the general practitioners. Joint clinic was another innovation based on online and virtual communication of specialist clinics for diabetes and eye. Increasing the quality of care, multi- area education of medical students and continuing education of students in different clinical rotation were the most important results. The third innovation was the online morning reports with the presence of Iranian scholars abroad resulting in the quality of education increase and satisfaction of the students and the faculty. The production of digital educational content was another achievement which was the result of using virtual education in hospital bed.

Conclusion: Integration of virtual education and electronic communication in the educational-treatment process can be a base of beneficial changes in the service delivery process at very low cost in Iranian hospitals. Participatory action research by leading of skilled researchers and can have lasting effects beyond the results defined and institutionalize the quality improvement in the service delivery process.

Keywords: E-learning, Medical education, Virtual education, Hospitals, Hospital management
Supporting Self-care in the Health System

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ABSTRACT

Background: Self-care is learned and purposeful actions and activities that people do for themselves and other family members to take care of their physical and mental health. People can prevent illness or accidents using self-care. According to the findings of studies, 65% to 85% of all health care are done by person himself or relatives without intervention of professionals. Self-care leads to medical advice reduction and public participation in planning and decision-making for their own health actions.

Methods: Articles in this review study were examined using databases such as PubMed, Science Direct, JAMA and words related to Self-care.

Results: Self-care is of great importance in the health system and improves health and quality of life and reduces health costs etc. Therefore, wide support should be done for self-care. This support could provide conditions to empower individuals for self-care. Supporting self-care means highlighting self-care-role in the healthcare system and supporting programs and infrastructure that is based on self-care approach. Self-care can dramatically reduce the cost of health care, therefore full support should be done for self-care. In this paper, the impact of self-care support in health system has been examined, in addition to definition of self-care.

Conclusion: Supporting self-care improves health and quality of life, increases patient satisfaction, reduces costs and so on. Thus, supporting the programs in which self-care approach is taken into consideration must be on the agenda.

Keywords: Supporting self-care, Self-care, Health system
ABSTRACT

Evaluating the Quality of Services in Cardiac Surgery Wards of the Hospitals Affiliated to Mashhad University of Medical Sciences Based on SERVUSE in 2014

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BACKGROUND: Providing superior service through maintaining high-quality service is a prerequisite for service providing organizations success. This study evaluated the quality of services delivery at the hospitals of Mashhad University of Medical Sciences in 2014 based on SERVUSE.

METHODS: This descriptive cross-sectional study was conducted on 130 patients admitted to cardiac surgery wards of Imam Reza, Ghaem and Shriati hospitals affiliated to Mashhad University of Medical Sciences by available sampling in 2014 using the SERVUSE questionnaire. The questionnaire included dimensions: tangibles, reliability, responsiveness, assurance, empathy and usability. Validity and reliability of the mentioned tool were evaluated through content validity and Cronbach alpha and localized. Nonparametric tests were used for data analysis using SPSS.

RESULTS: The results showed that the highest admission (47.7%) was related to Imam Reza hospital. 57.7% of the patients were male and the average age of all patients was 52.82 ± 11.86. In this study, there was a gap between the quality expected and the quality perceived by the patients from hospital services. The difference between perception and expectations of the patients from quality of service were in terms of tangibles (-0.52), usability (-0.23), reliability (-0.22), assurance (-0.21), responsiveness (-0.11) and empathy (0.06), respectively.

CONCLUSION: Negative scores of service quality indicate that service quality need to be improved in the mentioned dimensions in hospitals. Generally the tangibles dimension, with the highest gap, has low quality. In this regard, substantial funding to organize the appearance and tangible factors in the hospital to reduce the gap seems necessary.

KEYWORDS: Hospital, Cardiac surgery, Quality of service, SERVUSE model
ABSTRACT

Background: Considering the need for adequate attention to quality and educational development programs, and the need to prevent deterioration of curriculum, this study aimed to do comparative analysis of health services management curriculum in postgraduate level in Iran and selected countries.

Methods: This applied study with "descriptive-comparative" method was carried out in 2015. Several criteria were considered for selecting universities and information needed were collected through the library documents and electronic search and correspondence with universities in some countries including the United States, France, Canada, England, Australia, Germany, Italy, Ireland, Finland, Denmark, the Netherlands, Turkey, Egypt, Malaysia, India and Singapore. In the second stage, the data analyzed was done using Bereday model.

Results: Curriculum variables were classified in the form of tables. The similarities and differences between universities were determined and finally, in comparison with the Iranian program: 8 disciplines, core/compulsory courses similar to the 7 axis; 25 other core/compulsory courses, 48 optional/compensatory courses; 13 educational purposes; 25 graduates abilities and capabilities; job opportunities in 4 categories and 13 variables influencing graduates' access to educational goals and promotion of graduates' capabilities include: length of the educational course, condition of the entrance interview, a condition for related work experience, supplementary credits and a selection of major at the end of the first year, selection of field of study at the end of the first year considering the needs of the country, choosing thesis topic at the end of the first year, requiring a short article related to field studied as a prerequisite for thesis, current student assessment methods, hours and titles of internship, internship effectiveness, residency program and employment certificate were presented.

Conclusion: The results showed that there was a significant differences between Iran with 24 prestigious universities in 15 countries in the axis studied in postgraduate level of the Healthcare Services Management. Therefore, it seems necessary that optional courses, residency program, selection of field of study at the end of the first year, employment certificate, internship interview, job experience, choosing thesis topic at the end of the first year, a short article as a prerequisite for thesis and revision of other variables extracted in this study be reviewed and added to the current curriculum.

Keywords: Higher education, Course review, Comparative study
ABSTRACT

Professional Regulations, Health System Need Today: A Review Study

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Background: Today, supervision and regulation is one of the basic professional needs of the health system due to the changes in health needs of the community, conditions and nature of health professions after globalization, technological advances and newfound diseases to develop appropriate regulations and guidelines and safety services guides fitting with the community needs. In the present study we have tried to address factors affecting the formation, history and philosophical infrastructural point of view and its challenges in addition to defining the monitoring and regulation.

Methods: This was a review study. Related articles collected using supervision and regulation, regulators, legislative key words and PubMed, Science Direct, Ovid, ProQuest databases and 42 article, 1 statement of the World Health Organization, one report of the Mediterranean Regional branch and one report of the International Council of Nurses were selected based on inclusion criteria. Inclusion criteria and selection of the articles in English and Persian and relevance of the subject to the supervision and regulation was done between the years 1970-2015. The contents extracted about regulating definition system, history, philosophical perspectives and its challenges were classified using thematic analysis. Selection of articles and data analysis were carried out by 2 researchers simultaneously.

Results: The theoretical infrastructures refer to the theory of society will, dominant and conquer and economic position and open systems theory. There are three types of legal self-monitoring, voluntary and authoritative models in professional regulations based on the type and scope of profession members authority for the professional regulations. The role of regulation institutions in the studies included the governmental, executive, supportive, delegated, regulatory and supervisory roles and supervisory approaches are in a spectrum of self-monitoring/self-regulating of professional regulation, delegated self-monitoring / self-regulating, participatory self-monitoring/self-regulating and government regulation.

Conclusion: Factors affecting professional regulation are the changes in society needs, scientific and technological progress and economic and political changes and professional regulations is what the health systems need today in order to comply with them.

Keywords: Professional regulations, Legislation, Review study, Regulation institutions
ABSTRACT

The Relationship Between Vaccinations and Consumption of Electrical Energy (Electricity) in Ahvaz West Health Center

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**ABSTRACT**

**Background:** Based on the statistics, comparing energy consumption in Iran with the rest of the world, you see wasting a lot of energy. This study aimed at estimating the electrical energy consumption and its relationship with the vaccination indicators in Ahvaz West Health Center.

**Methods:** This is an applied and correlational study. Sampling was done by census from all health centers in Ahvaz West health center. Information related to the cost and power consumption were obtained from the Regional Electric Company. Also, the vaccination indicators were obtained from the information archived in the statistics department. ANOVA, Pearson correlation, regression methods were used to extract the results.

**Results:** Average power consumption for vaccination in the targeted health centers was 39.5 kW/d. There was a significant positive correlation between vaccination variables and power consumption (significance level: 0.05).

**Conclusion:** It is possible to optimize energy consumption and reduce running costs in health centers through establishing energy consumption committee, creating a position as special energy observer in health centers, using energy management systems, purposeful planning for optimizing, training and culture making for energy consumption between staff and managers and promoting innovative solutions.

**Keywords:** Indicator, Immunization, Cold chain, Electrical energy
Explaining the Facilitator of Optimal Nursing Regulations: Content Analysis
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ABSTRACT
Background: Today, regulations is one of the basic professional needs of the health system due to the changes in health needs of the community, conditions and nature of health professions after globalization, technological advances and newfound diseases to develop appropriate regulations and guidelines and safety services guides fitting with the community needs. Despite the importance of desirable professional regulations, so far, no study has been conducted to identify optimal facilitators in regulations. Therefore, the present study aimed at explaining the facilitator of optimal nursing regulations.

Methods: This study was conducted using qualitative approach and content analysis. The data was collected using semi-structured interviews with 26 Iranian nursing regulations experts. The data was analyzed using traditional/agreement content analysis. And then optimal nursing regulations facilitators were identified after coding and formation of main classes. To improve the accuracy of the data, the data analysis and coding were done by 2 researchers separately.

Results: Nursing regulations features were meritocracy, justice, accountability and the main classes of optimal nursing regulations facilitators were meritocracy, open to criticism, comprehensive regulations approach and unity/cohesion of nursing regulations organizations, synergistic interaction of monitoring/regulations organizations at lower levels and with staff whose outcome was increased support, confidence and staff satisfaction and community health promotion.

Conclusion: Professional regulations with the meritocracy, justice, accountability features is one of the basic needs of the health system to ensure providing safe and respectful care and optimal professional regulations outcome was increased support, confidence and staff satisfaction and community health promotion.

Keywords: Professional regulations, Legislative, Content analysis, Optimal professional regulation, Nursing
ABSTRACT 207

The Causes of Delay to Reach Patient in Pre-hospital Emergency in Mashhad

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ABSTRACT

Background: The aim of this study was to assess the causes of delay to reach patients in Pre-hospital emergency unit in Mashhad, Iran.

Methods: This was a descriptive, cross-sectional study. Study population was 21142 missions of emergency units in of pre-hospital services in Mashhad. A total of 640 missions were selected by systematic sampling method to determine the most important causes of delay in 115 emergencies. Data analysis was done by descriptive statistical methods (frequency, mean and standard deviation) by Excel 2013.

Results: About 60% of injured people were male, 23% female and 17% unknown. Mean age of the injured was 29.8±15.9. 30% of injured were in 16-25 age group. The average time between getting the message to reaching to the patient was 9 minutes and 1 second. The most common causes of delay were the missions out of operational area and traffic.

Conclusion: In metropolitans such as Mashhad, it is necessary to have special measures. Setting up new stations and completing the number of ambulances and manpower, intervention in causes of traffic as well as educating the public about emergencies, can reduce the number of missions and the increase their speed and quality.

Keywords: Pre-hospital Emergencies, Response time, Mashhad city, Factors related to delay
ABSTRACT

Management Problems in Iranian Health System Evolution Plan and its Solutions

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ABSTRACT

Background: There are different problems in health evolution plan, in spite of financial and human resources allocation and its positive characteristics that is result of personal and organizational efforts in the country. It is necessary to design appropriate model to reach the health system goals that is maintaining and promoting health, and developing access and equity. In this study the weaknesses of managerial levels of health system investigated in Iran were as follows: problems in policy making in health evolution plan, inappropriate distribution of financial resources, ineffective organizational structure of health sector, weakness of human resource management, discrepancy of staff payment, knowledge management and organizational information weakness

Methods: This research is a descriptive review study based on experiences and library studies and using Internet sites.

Results: Examining studies and experiences in Iran and other countries showed that it should be get away from the treatment approach and avoid using scares resources in a way that has few consequences for people’s health.

Conclusion: Evolution toward an effective system in health needs a wide spectrum of experts in health system management, improvement of the managers’ knowledge in this regard, appropriate distribution of resources in preventive measures, equity in payment and using empowered managers

Keywords: Management, Health system, inefficiency
ABSTRACT 209

The Effect of Communication on Managers’ Interpersonal Conflicts and Staff Desertion in Ahvaz West Health Center

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ABSTRACT

Background: Continuous conflict in work causes negative effects on mental and physical health, reduces the effectiveness and cooperation and increases the rate of desertion. This study focused on the effective communication and its effect on organizational conflicts and desertion in Ahvaz West Health Center.

Methods: A cross-sectional correlational study was done on managers and staff of the West health center in Ahvaz (N = 694). Using Cochrane sample size formula and stratified sampling, 250 participants selected. Data were analyzed by descriptive and analytic statistical methods.

Results: The mean score of interpersonal conflict was 2.55 that is less than standard score (3). Effective communication variables were appropriate. There was a significant association between communication and conflict variables. There was no significant relation between empathy and conflict in regression analysis.

Conclusion: A significant and reverse association was found between communication and conflict. Using effective communication in a supportive environment along with transferring positive feelings in interpersonal relations causes less conflict.

Keywords: Communication, Interpersonal conflict, Managers, Staff
ABSTRACT

The Problem of Medication Taking in Iran After Health Evolution Plan and Solutions to Improve it

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Background: After health evolution plan a large part of health resources spent on providing drugs needed to society. Nevertheless, most of the time patients are encountered with the problem of getting drugs. Sometimes this problem is more serious but always existed.

Methods: A descriptive review study was done based on library study and observations and using Internet sites.

Results: Because of lowering the proportion of patients in paying for drugs, prescribing and using antibiotic in excess resulted in resistant bacteria in nosocomial infections and occurrence of dangerous complications, resulting in imposing more financial and clinical damage for the health system. Community unawareness about effect and complications of drugs can be the cause of most of the problems and costs for family and society and developmental health plans.

Conclusion: It seems that there is a crucial need for policy making and franchise drugs and educational planning and evaluation of drug distribution in hospitals. Educational programs for physicians and pharmacists and families for reforming the drug prescription and use are essential.

Keywords: Medication, Health system, Drug use, Cost of drug
ABSTRACT

Error is an integral part of human life. Health care providers, regardless of how skilled, committed and careful they are, have errors. Negligence has two types: Legal and professional. This study aimed to identify judgments for these errors and their relationship with errors of health care providers in Amol.

Methods: An analytic, case study, cross-sectional and applied research was conducted on 66 judgment files of primitive committee in 2011-2014. Files were selected by stratified random sampling, 50% of files each year. Data were gathered by a form and note taking.

Results: There were 3 kinds of judgments: Innocence, oral warning or reprimand in the presence of board of directors of medical council, written warning or reprimand with record in file. The most common complaint was due to not doing the best on professional and legal responsibilities to assess and treat patients. Orthopedic surgeons were the most who got the complaints.

Conclusion: Clarifying the complications of procedures by medical staff during and at the end of treatment period, awareness by videos, pamphlets, posters on how to send complaints to medical council for better follow-ups, assessing the causes of complaints and feedback to medical staff in order to less visits are important.

Keywords: Judgments, Primitive disciplinary medical committee, Error, Medical staff
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

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Measuring Technical Quality of Care for Heart Attack Patients From Patients’ Viewpoints in Shahid Madani Clinic, Tabriz 2014

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ABSTRACT

Background: Quality in health care has three domains: technical, service and client. Technical quality is what the client is received and reflects the issues related to care providers and their knowledge and competencies. This study aimed to determine the technical quality of care for heart attack patients

Methods: A descriptive, cross-sectional study was conducted with participation of 164 patients with heart attack referred to Shahid Madani heart clinic. Data gathered by a researcher made questionnaire whose content validity was confirmed. SPSS 16 was used for data analysis.

Results: 75% of study population were male, most of them were at 51-65 age group (44.4%). The mean score of service quality was 16% (15±). Weight control domain had the least score (0.23) and blood pressure control and using drugs with 76% and 80% had the highest score respectively.

Conclusion: Service quality to patients with cardiac attack in Shahid Madani heart clinic is inappropriate. Training care providers and access to national guidelines and empowering patients are necessary.

Keywords: Quality assessment, Heart attack, Technical quality, Standard compatibility, Service Quality, Patient's reports

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ABSTRACT

Background: Health evolution plan was implemented based on documents such as fifth development plan and policies issues by supreme leader in 2014 with three important goals. One of these goals was financial protection of people against health costs. This study aimed to investigate the trend of catastrophic costs from the implementation of fourth developmental plan till health evolution plan as a systematic review.

Methods: This was a quantitative and applied research. Data were gathered from documents in ministry of health.

Results: 1.8% of households had catastrophic health costs in 2003. This figure with gradual reduction reached to 1.5% in 2006. In rural area the proportion of population encountered catastrophic health costs was 2.66% in 2003 and 2.15% in 2004 with decreasing trend. In 2005, there was a little increase (2.97%) and in 2006, it reached to 2.88%. Based on repetition of this research in 2008, most of the direct payment was in outpatient and by rural population for diagnostic procedures and by urban population for drug costs. After implementation of health evolution plan it halved (1.7% rural and 0.5% urban).

Conclusion: Considering activities done by ministry of health, a significant reduction in catastrophic costs was observed.

Keywords: Catastrophic costs, Health evolution plan, Poverty induced costs
ABSTRACT

**Background:** Megatrends are major fundamental changes at the level of communities whose effects can persist for years. As the health system is affected by providing satisfactory services as well as the level of quality of services, satisfaction from the services, it is a good indicator for measuring the quality. Quality improvement service package of hoteling in health evolution plan tries to satisfy the clients. This study aimed to investigate the megatrends of quality improvement service package of hoteling.

**Methods:** A qualitative, applied research was done on documents in ministry of health and interview with experts. Trend analysis macro to micro was done.

**Results:** Megatrends in service package of quality improvement in hoteling in health evolution plan were as follow: futurism in order to intergenerational investment, financing and service providing aim to responsiveness (providing suitable services), infrastructure development, considering health economics, service providing by governmental and non-governmental providers, integration of qualitative and quantitative hoteling services (creating the same definition of quality), responsiveness to expectations and standardization (scoring and quality improvement of services) and promoting a competitive atmosphere.

**Conclusion:** Policy making based on megatrends can provide essential keys in health system. Considering proper infrastructure development, hoteling service package can make a good vision in demographic, political and economic domains for policy making in health system.

**Keywords:** Megatrends, Hospital hoteling, Health evolution.
ABSTRACT

**Background:** The most tangible effect of stewardship is observed on policy making cycle. These measures are targeted at the Ministry of Health and Medical Education with implementation of health evolution plan since 2014. This study aimed to investigate the context of continuation of health evolution plan and stability of its achievements focusing on stewardship of ministry of health and medical education as its proctor.

**Methods:** Descriptive and explorative study of scenarios effective in continuation health evolution plan and stewardship of health ministry was examined by document searching with reactive approach in the ministry.

**Results:** The continuation of the plan in the context of stewardship could be followed by the following issues: Active networking and coalition participation of stakeholders for policy making, organizing policy-making, decision-making system to stabilize the organization and eliminate overlapping policies with the aim of reviewing the role and composition of the Policy Council with involving stakeholders in health system, development of inter-sectoral coordination, stability of financing, empowerment and development of human resources, strengthen infrastructure to encourage public and private investment, designing and compiling descriptive and analytical report covers the performance of each university and hospital using functional indices periodically.

**Conclusion:** Considering approaches such as determining the vision and direction of health policy perspective, the impact of health evolution plan through legislative plans to advance a coherent policy framework trustee’s activities in this field guarantees the Ministry of Health in continuation the project.

**Keywords:** Stewardship, Health evolution plan, Ministry of Health.
National Congress in Health Management  
26-28 October 2016, Tabriz, Iran

ABSTRACT 216

A Survey on the Relationship Between Educational Level, Place of Living, Employment of Students With Attitude Toward Field of Study and Job Prospect

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Background: Health and treatment systems, benefiting from expert managers can provide effective and efficient services with client satisfaction. Providing suitable educational infrastructures and better growth context is a way toward this goal. This study aimed to investigate relationship between educational level, place of living, employment of students with attitude toward field of study and job prospect.

Methods: In this descriptive, cross-sectional study done on students of health system management in Tehran universities as study population, 350 students entered to the study by census. Data gathering tools were 2 researcher –made questionnaires, attitudes toward field of study (18 items) and job prospect (16 items) Data analysis was done by ANOVA, chi square and t test.

Results: The mean score of attitude toward field of study (48.43) was greater than theoretical score (45) but the mean of attitude toward job prospect (39.51) was less (40). A relationship observed between employment of students and all domains of study. There was a statistical significant relationship between content of field of study and level (P=0.002) and place of living (P=0.039): there was a significant relationship between attitude toward field of study and job prospect (r=0.373)

Conclusion: Content of lessons and its effect on job conditions was more important for male students. Students’ place of living of had significant relationship with attitude toward content of lessons, teachers and study continuation and overall attitudes toward field of study.

Keywords: Job prospect, Attitude toward the field of study, Employment
ABSTRACT 217

Evaluation and Comparison of Hospital Performance in Isfahan Province Before and After Implementation of Health System Evolution Plan Using Pabon Lasso Model

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ABSTRACT

Background: Evaluation of indicators have always been considered in performance analysis and economic utilization. This research conducted to evaluate three key indicators simultaneously using Pabon Lasso Model.

Methods: A descriptive analytic cross section and retrospective study was conducted. Study population were Isfahan hospitals consisting of 43 educational and non-educational hospitals. Data of 4 years, 2012-2015, was received from treatment deputy. Performance indicators were extracted by formula using Excel.

Results: Of all centers in 2012, 17 (39.5%) were in zone 1, 9 (20.9%) zone 2, 9 (20.9%) zone 3, 8 (18.6%) in zone 4. In 2013, 16 (37.2%) were in zone 1, 11 (25.6%) zone 2, 8 (18.6%) zone 3 and 8 (18.6%) in zone 4. In 2014, 13 centers (30.2%) were in zone 1, 12 (27.9%) in zone 2, 10(23.3%) in zone 3, 8 (18.6%) in zone 4. In 2014, 9 centers were in zone 1 (20.9%), 10 in zone 2(23.3%), 16 (37.2%) in zone 3 and 8 (18.6%) in zone 4.

Conclusion: After implementing health evolution plan, bed occupancy rate and bed turn-over rate were decreased. Also better performance centers increased and poor performance ones decreased. These changes were more in educational hospitals. In educational hospitals in central city, the performance increased from the first year (2014) and in districts from the second year ( 2015) after implementation of health evolution plan. Better performance centers increased and the number of centers in zone 4 were steady in the years of study.

Keywords: Bed occupancy rate, Pabon Lasso, Bed turnover, Health system evolution plan, Length of stay
Factors Affecting Hospital Management in Iranian Social Security Organization Hospitals

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ABSTRACT

Background: Hospitals as the main providers of health services require a scientific management and efficient governance at all levels. This study aimed to identify factors affecting the way of managing social security organization hospitals in Iran.

Methods: An applied study using review and quantitative methods was conducted. Data gathering tools were: note taking, comparative table and researcher made questionnaire with confirmed validity and reliability by expert panel and computing Cronbach alpha of 0.867. Data analysis was done by exploratory and confirmatory factor analysis and structural equation.

Results: Five factors were found to be effective in hospital management: financing, decision making process, stakeholders, responsibility and mission. Among these factors, responsibility with factor weight of 0.94 and stakeholders with 0.69 had the most and least effect on management respectively.

Conclusion: Factors improving hospital management are as follow: developing mission, vision and objectives as strategic planning of the hospital, giving the right of decision making regarding staff affairs, financing and asset management, improving financing and budgeting and payment system of physicians and staff, internal and external stakeholder analysis and using suitable responsibility mechanisms.

Keywords: Social security hospitals, Hospital management method
ABSTRACT

Health System Evolution Plan in Health Center of West Ahvaz: Achievements and Challenges (A Qualitative Research)

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ABSTRACT

Background: Health system evolution plan designed and implemented in order to meet the challenges of public health. Ahvaz Jundishapur University could manage three-phases implementation of the program despite the initial delay in implementing the program at the same time. This study assessed the program implementation in a pioneer health center in Ahvaz Jundishapur University.

Methods: A qualitative study with content analysis method and purposive sampling was done. Deep structured interviews were conducted with three groups at central administrative units with urban and rural health centers' staff and clients till saturation of data.

Results: Extracted codes were categorized into two groups: strengths and challenges. Strengths were in two levels: technical and administrative challenges. The lack of unity in out resourcing the health facilities across the country and the need to improve the capacity to manage contractor, were the challenges of the program.

Conclusion: Results show success in some objectives, but the program encounters important challenges. Lack of suitable context for change, due to rush in planning and implementation have made some troubles. It is suggested that health evolution plan as a big national intervention, be assessed from the perspective of economic, organizational, social and legal issues.

Keywords: Iran, Health evolution plan, Health sector
ABSTRACT

Knowledge Management in Hospitals

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BACKGROUND: Improving the management and development of indicators in the health sector is important. Knowledge management can be effective in improvement of the hospitals performance. Knowledge management is one of the achievements of the information and knowledge era, and considering its features, today, successful organizations are desperately needed to get benefited from it. This article aimed to assess the status of knowledge management in hospitals.

METHODS: This study is a review article done in 2016, reviewing indexed articles in PubMed, SID and Magiran databases and other related sites of Ministry of Health and Medical Education.

RESULTS: The aim of knowledge based activities in organizations - especially hospitals- is assurance of growth and continuity of activities, continuous acquisition of knowledge and the development of new knowledge. The factors affected knowledge management in the hospitals are knowledge refining (94%), knowledge storage (67%), knowledge culture building (67%), and knowledge assessment (52%). The major barrier to effective implementation of knowledge management in the organization is lack of the culture of sharing knowledge and lack of understanding the numerous advantages of knowledge management among employees.

CONCLUSION: Given that knowledge along with experience is the most important principle for efficiency, economic competitiveness and development, and human resources are the most important tool to achieve political and economic goals, the knowledge management in hospitals will be very important. Knowledge management has direct relationship with intellectual capital and quality of services provided.

KEYWORDS: Economy, Hospital, Knowledge management

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ABSTRACT

The Impact of Spiritual Leadership on Organizational Commitment Among Administrative Employees in Shiraz University of Medical Sciences

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Background: Today’s organizations operate in an environment that is very complex and dynamic with rapid and unpredictable changes in their environment. As a result, they are looking for creating a work environment that attract, retain, promote and motivate a team of skilled staff and expert employees. To create such an environment, creating a sense of spirituality and purpose among staff as a basic necessity have been suggested. The main objective of this study was to evaluate the effect of spiritual leadership on organizational commitment in staff of Shiraz University of Medical Sciences.

Methods: A cross-sectional study was conducted among administrative employees of Shiraz University of Medical Sciences. The total number of employees was 124, the sample size was determined using the Cochrane formula equal to 94 people. Two questionnaires were used for data collection: organizational commitment and the spiritual leadership. The validity and reliability were reviewed and approved. In order to test the hypotheses, regression analysis was used.

Results: The coefficient of spiritual leadership equal to 0.495 was statistically significant, regarding T statistics and statistical significance, in 95% (t = 5.469, P = 0.000). Therefore, the effect of spiritual leadership on organizational commitment in Shiraz University of Medical Sciences is positive and statistically significant. All the domains of spiritual leadership but altruism had positive and statistically significant effect on organizational commitment (P < 0.05).

Conclusion: Spiritual leadership has a positive effect on organizational commitment. So in Shiraz University of Medical Sciences using spiritual leadership for coping with profound changes should be considered.

Keywords: Spiritual leadership, Organizational commitment, Admin
ABSTRACT

Background: Today, although world has become small due to changes in economic, technological, social, cultural and political life of the individual and the organization, increasing cultural diversity has created a major challenge for the individual and the organization. Considering aforementioned explanation, this study aimed to investigate the relationship between cultural intelligence and job performance among managers of Tehran University of Medical Sciences in 2015.

Methods: A descriptive analytic study was done on all top managers in three levels as study population. The questionnaire used in this study composed of three parts: demographic characteristics, cultural intelligence and performance questions. Descriptive (percentage, mean, standard deviation) and analytic statistics (ANOVA and Pearson correlation coefficient) were used through SPSS to analyze the data.

Results: 55% (32) of participants were men and 45% women. 52% (30) of managers were at operational level. There was no significant relationship between cultural intelligence and “background of managers” and “managers’ place of work”. There was a significant direct relationship between cognitive and metacognitive strategies and managers’ performance. However, there was no statistical relationship between motivational and behavioral strategies and performance of managers.

Conclusion: Cultural intelligence has positive effect on employees’ performance. It is suggested that managers of medical sciences universities should be aware of different cultures through interacting, adapting their cultural knowledge and assessing the accuracy of their knowledge with different cultures in order to continue this effectiveness.

Keywords: Cultural intelligence, Performance, Managers
ABSTRACT 223

Designing the Model of Factors Human Resource Efficiency in Central Administrative Unit of Kermanshah University of Medical Sciences

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ABSTRACT

Background: This study tries to investigate different models of human efficiency and design a comprehensive model for human resource efficiency.

Methods: A descriptive-analytic, and cross-sectional study was conducted in 2014. Data were gathered by a researcher-made questionnaire and its validity was assessed by expert panel and reliability was assessed by a pilot study on 30 participants using Cronbach’s alpha equal to 0.769 which was relatively favorable. Data were analyzed by SPSS 21. The study population were all (290) staff of central administrative unit of Kermanshah University of Medical Sciences. Sample size was estimated by Cochrane formula equal to 165.

Results: There was a positive and significant relationship between efficiency domains and efficiency. There was no relationship between education domain and human resource empowerment.

Conclusion: Results indicates the ability and correlation of model and its applicability.

Keywords: Efficiency, Human resources, University of Medical Sciences
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

**ABSTRACT**

Pathology of Human Resources in an Educational Hospital in Tehran University of Medical Sciences-2015

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**ABSTRACT**

**Background:** Nowadays, considering organizations exposure to challenges, rapid and unforeseen changes in equipment, environmental changes and increasing global competition, organizational pathology are no secret. Organizational pathology is the most sensitive area of organizational improvement plan. Considering this importance this study was to determine the pathology of human resources in educational hospitals at Tehran University of Medical Sciences in 2015.

**Methods:** This study was an applied, descriptive survey conducted in 2015. The study population were 3150 staff. The sample size was 342 personnel determined by Cochrane formula. Simple random method was used for sampling. A questionnaire with two sections, demographic information and 40 questions for measuring structural and contextual domains, was used for data gathering. Descriptive and analytic statistics were used for data analysis.

**Results:** Women were 64% of the participants. Participants with Bachelor degree were 53.3% and 51.6% of staff were executive staff. The highest mean and standard deviation were in motivation and job satisfaction domain (3.51±1.02) and the lowest was in methods improvement (2.81±0.84). Behavioral and contextual components had the highest and lowest scores respectively.

**Conclusion:** Paying attention to the most important and competitive resource in organizations, committed, motivated and loyal staff, are the key factors for high quality service providing and customer satisfaction. Although the findings of this study emphasized on behavioral factors, it does not mean that structural and contextual factors are not important. Taking into account the all effective factors and their importance in providing favorable services in pathology of organization is essential.

**Keywords:** Pathology, Human resources, Hospital
The Effect of Outsourcing on Performance of Radiology Services in Hospitals of Tehran

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ABSTRACT

Background: Nowadays outsourcing health services is an important and cost-effective solution in most countries that has made the service-provider organization ready for competition. This study aimed to determine the effect of outsourcing on the performance of radiology units.

Methods: A cross-sectional, case control study was done in two public hospitals in Tehran. Financial documents were used for analyzing expenses and income of hospital in years 2012-2013. Data were analyzed by SPSS 21 using chi-square and Fisher exact tests.

Results: In outsourcing radiology units, expenses were reduced 44% comparing with non-outsourcing units. Outsourcing had positive effect on the proportion of income to expenses, ratio of qualified imaging to non-used (P = 0.0003). It had no effect on the ratio of equipment on personnel.

Conclusion: Outsourcing reduces costs. Non material aspects of outsourcing and its effects on patients, staff, their relationship and environment should be considered. Monitoring and evaluation should be increased in outsourcing units in health sector.

Keywords: Outsourcing, Hospital efficiency
ABSTRACT

Background: This study aimed to determine the relationship between perceived organizational justice and with extra efforts of nurses at Al-Zahra hospital in Gilangharb.

Methods: A descriptive correlational study was done on all nurses using census (N=100) of Alzahra hospital in Gilangharb. Field and library methods were used to gather data. AMOS20 was used for analyzing the data.

Results: Distributive justice had direct effect on extra effort before (0.95) and after (0.33) patient's surgery. Procedural justice had direct effect on extra effort during surgery (0.36). Procedural justice had direct effect on extra effort after surgery (0.88). Interactional justice had direct effect on extra effort during (0.14) and after (0.21) surgery. Organizational justice had direct effect on extra effort (0.57).

Conclusion: Organizational justice increases efforts of nurses who are the most important and most valuable organizational resources. Considering this resource leads to more success of the organization. Managers trying to establish the organizational justice could create commitment on employees.

Keywords: Organizational justice, Organizational expectations, Extra effort
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Medication Error in Educational Hospitals of Kermanshah

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ABSTRACT

Background: Medication errors can be considered a threat to patient safety. To prevent the medication errors, it is essential that they be reported. The aim of this study was to evaluate the medication errors in Kermanshah educational hospitals.

Methods: A descriptive, analytic applied survey was conducted. Error report form of ministry of health was used for data gathering. The study population were all educational hospitals’ staff. The study sample were the staff reported the errors. Descriptive statistical methods and chi-square test were used by SPSS 18 to analyze the data.

Results: The highest rate of the errors was related to the incorrect use of medicines and the lowest to inappropriate dose, and most errors happened in the morning shift. The most common cause of errors was staff negligence and the least was lack of knowledge.

Conclusion: Health system should create an atmosphere for detecting and reporting errors through health personnel and identifying related factors causing errors, educating personnel and creating a good working environment and workload consistent with the standards.

Keywords: Medication error, Educational hospital
ABSTRACT

Background: Despite numerous scientific advances in the diagnosis and treatment of diseases and the increasing complaints against physicians and staff, this study aimed to determine the most important complaints from Kermanshah educational hospitals in 2012.

Methods: A descriptive, cross-sectional study was conducted to determine the most important causes of complaints in 7 educational hospitals in Kermanshah in 2012. Data were gathered from forms sent from hospitals to university authority and analyzed using SPSS 18.

Results: Among all inpatient and outpatient admissions, 80% of complaints were by patients or his family and 20% by others. 15 complaints (1.5%) was resolved in the unit, 1169 (93%) in the level of hospital, and 70 (5.5%) in uppermost levels. Most of the complaints were on quality of care (42.5%).

Conclusion: Health care providers should be trained on better patient selection, scientific skills, and communication skills with patients in order to reduce the dissatisfaction and complaints.

Keywords: Hospital, Complaints

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Evaluation of the Performance of Gorgan University of Medical Sciences’ Hospitals Using Pabon Lasso Model

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ABSTRACT

Background: The aim of this study is to evaluate the performance of Gorgan University of Medical Sciences’ hospitals using Pabon Lasso Model

Methods: Seven hospitals in Gorgan University of Medical Sciences were evaluated. Indexes used were mean length of stay, bed occupancy rate (BOR), bed turnover interval (BTI). Data were gathered using standard ministry of health’s forms. SPSS 22 was used for statistical analysis.

Results: Among 7 hospitals, Shohada was at first zone, Azar 5 and Sayyad hospitals were at third and Taleghani, Amiralmomenin and Imam Khomeini hospitals were at fourth zone.

Conclusion: Most of the hospitals at fourth zone showed high BOR and low BTI. The high proportion of severe disease, prolonged and unnecessary hospitalization, predominance of chronic diseases are the characteristics of this area

Keywords: Performance, Evaluation, Pabon Lasso Model, Gorgan University of Medical Sciences
The Evaluation of the Health Information System (HIS) in Imam Reza Hospital, Kermanshah

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ABSTRACT

Background: Health information system (HIS) helps the services providers with better decision making for patients providing them with information and patients’ history. This study aimed to evaluate HIS in Imam Reza hospital.

Methods: A descriptive-cross sectional and applied research was conducted in 2013. The data gathering tool was a questionnaire whose validity was obtained by expert panel and reliability with Cronbach alpha 89%. In this study 300 staff of Imam Reza hospital in Kermanshah were enrolled after systematic sampling. One sample t test in SPSS 21 was used for statistical analysis.

Results: Content and time domains had the highest average (14.79 and 7.43 respectively) and structure domain had the lowest average (5.64).

Conclusion: Using information software in health sector is essential. They should be designed by staff and authorities’ participation and be relevant to needs of each unit and awareness should be given to users after evaluation in order to accelerate the process and reduce the complications.

Keywords: Hospital information system, Evaluation, Hospitals, Alitof and Neyman model
Factors Related to Length of Stay Among Kidney Transplant Patients With Unplanned Re-admissions

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ABSTRACT

Background: More than half of kidney transplant recipients, experience unplanned re-admissions in the first year after transplantation. This study aimed to study factors related to length of stay of kidney transplant patients in unplanned re-admissions in transplant hospital in Mashhad from 2011-2014.

Methods: In this retrospective study, files of 426 patients having transplant in 2011-2014 in Montaserieh hospital were studied. Data gathering was done in the field and a checklist was used for it. Data were analyzed using SPSS 18.

Results: Among patients with re-admission, 53.5% were female, 64.8% married and 93.4% in 15-60 age group. Most of the patients were recipient from cadaver (80.7%). Infection was the first cause of admission (60.7%). The mean length of stay was 8 days. There was a statistical significant relation with age (P=0.013), type of donor (P=0.029), infection (P=0.047) and side effects (P=0.023) were as 2 causes of re-admission after discharge.

Conclusion: Paying attention to variables increase re-admission or length of stay and managing variables including age, type of donor and factors can reduce re-admission and length of stay in these patients.

Keywords: Re-admission, Kidney transplant, Length of stay
ABSTRACT

Background: The cost of hospital services has been increased in most countries and this caused particular attention to reducing hospital costs. Attention to resource management and effective use of resources is essential. This study aimed to compare regulation and verification of medical records of global and non-global inpatients in educational hospitals in order to offer an appropriate way for regulation and verification of documents, resource management and reducing costs.

Methods: A descriptive, cross-sectional and applied study was performed. Data were gathered by using all medical records in winter 2015 in Qazvin educational hospitals using a 12-item questionnaire. Data were analyzed using SPSS.

Results: Staff regulating records were more satisfied with the global records. The least deductions by insurance organizations was for global records in Qods hospital (0.01%) and the most one was in Bouali hospital (5%). The least deductions for non-global records was for Kowsar hospital (3%) and the most was in Rajaii hospital (7.5%). The least time for regulating monthly global records was for Velayat hospital (2 days) and the most for Kowsar hospital (28 days). The least for non-global records was for Rajaii hospital (14 days) and the most for Bouali hospital (35 days). The most global records relative to all records was seen in Kowsar hospital (57%) and the least in Bouali hospital (9.79%).

Conclusion: Considering the study on six educational hospitals in Qazvin, revising the global re-payment and implementing prospective payment system for other diagnosis is suggested

Keywords: Medical records, Deductions, Iran global system
ABSTRACT 233

Prioritization and Comparison of Rewarding Methods for Nursing Services in a Public Hospital by AHP Model: A Survey From Iran

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ABSTRACT

Background: Determining the factors effecting the satisfaction rate of hospital staff specially nurses and knowing its importance is one of the most important ways in purposive motivation. This study aimed to prioritize and compare the rewarding methods for nursing services in a public hospital.

Methods: This study was a cross-sectional, descriptive, analytic study performed in 2014 in one of the hospitals in Urmia University of Medical Sciences. A total of 100 nurses selected as census, completed a researcher-made questionnaire which was designed by paired comparison. Data analysis was done by AHP method, using Expert Choice 11 software.

Results: Fee for service based on performance and reducing the work hours’ components had the highest importance among other rewarding nurses in hospitals with relative importance of 0.184 and 0.145 respectively.

Conclusion: The organization should consider factors such as regulation, appropriate salary and benefits, participation in decision making and appreciation for motivating and satisfying nurses and consider equity in work hours and shifts and salaries among nurses.

Keywords: Nursing, Staff satisfaction, AHP, Hospital
ABSTRACT

Identifying and Prioritizing the Better Allocation of ICU Beds: Systematic Review and Analytic Hierarchy Process (AHP)

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Background: Hospital has a health, treatment and social roles in strategic planning in countries. This study aimed to determine the number of needed ICU beds and the factors for distribution of these beds in different geographic areas of country.

Methods: A critical appraisal was done on extracted studies from databases. Considering the low number of studies on the number of beds, at first these studies were appraised and then the criteria for establishing ICU and weight of each criterion were determined by analytic hierarchy process (AHP) method and using the Expert Choice software.

Results: The number of beds in Iran was close to the number of European countries but their expansion had no framework. Two main criteria were determined for establishing the ICU beds: social and hospital based. Each of these criteria had 9 subgroups among 18 criteria as follow: criteria for political support, merchantability, number of centers, rate of occurrence of events, proportion of elderly to all population, total population, trend of disease incidence and prevalence and bed per capita. The main criteria were political support with inconsistency ratio of 0.161.

Conclusion: In circumstances with no standard for bed in Iran and other countries, and above all not having the allocation criteria as an indicator for establishing and expanding the number of ICU beds, it is concluded that most of the ICU beds are established in places with least efficacy and effectiveness and developmental plans should consider criteria particularly life expectancy criteria.

Keywords: Systematic review, ICU beds, AHP, Hospitals
ABSTRACT 235
The Effects of Health Evolution Plan on Insurance Functions; A Case Study of Health Insurance in Kerman Province

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ABSTRACT

Background: Health evolution plan is the priority of Ministry of Health and medical education in Iran, based on 8 service packages. The first package is the program of decreasing the payments by inpatients in ministry’s hospitals. One of the most important stakeholders of the program are the health insurance organizations. This study aimed to determine the effects of health evolution plan on health insurance functions in Kerman (2016) in order to help policy makers in successful implementing of this plan.

Methods: This study is part of qualitative studies in 2016. The case is the insurance organizations in Kerman. Study population is all the health insurance staff in Kerman province entered the study by purposive sampling method. A semi-structured interview was performed with 12 experts, after 9 interviews the data were saturated. Framework analysis was used to analyze the data.

Conclusion: If health insurance move toward full funding and have sufficient and sustainable resources, it can play a good role as tertiary payer and main part of financing in health evolution plan. Hope it is used in modeling from other countries, conversation, ideology and political, social and economic circumstances.

Keywords: Health evolution plan, Health insurance, Insurance functions
National Congress in Health Management
26-28 October 2016, Tabriz, Iran

ABSTRACT

Estimating the Elasticity of Treatment Services Demand Using Almost Ideal Demand System (AIDS): A Descriptive–Analytic Study

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ABSTRACT

Background: The aim of this study is to estimate the elasticity of treatment services demand using AIDS for better decision making.

Methods: This study is a descriptive–analytic study on Iranian population between 1959-2011. Data were gathered from Central Bank of Islamic Republic of Iran. Health services demand was estimating by AIDS and seemingly unrelated regressions (SUR).

Results: Based on the estimates, income elasticity of health and treatment services in household’s budget was more than one. Its self-price of elasticity was near one and cross elasticity between the change of housing price and proportion of health services was negative and near zero and the cross elasticity between food price and health services was positive and near zero and between clothing price and health services was zero.

Conclusion: Considering the income elasticity of health and treatment services, this service seems a luxury one. Furthermore, the price elasticity is one. It means that the percent of increasing the price of health services is equal to the proportion of this services in household’s budget. Cross elasticity between housing price and proportion of health services showed that this good and service are completing each other. Increasing the costs of housing can be in line with growth of health services costs. Besides, cross elasticity between food price and the proportion of health services showed that this good and services could be replaced. Cross elasticity between the price of clothing and the proportion of health services illustrated no relations.

Keyword: Health and treatment services demand, Price elasticity of demand
ABSTRACT

Pathology of Health Evolution Plan in Iran

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ABSTRACT

Background: Universal health care helps the sustainable development through increasing the life expectancy and reducing poverty. A plan was performed in Iran to reform health system by Ministry of Health and Medical Education, with an executive packages. The aim of this study was to analyses the cost-benefit and cost-effectiveness of this plan and offering solutions for its challenges.

Methods: Analysis of the documents and a comprehensive review was performed in this study. Eight national and international databases were studied. The results of studies from May 2013 –September 2015 in health evolution plan were synthesized and analyzed. All the studies were assessed qualitatively. The way of establishment of plan in all the provinces was assessed. Cost-benefit and cost-effectiveness analysis was done by key indexes.

Results: Health evolution plan has increased the vertical and horizontal coverage of health insurance. It decreased the out of pocket and improved the university hospitals’ services. Sometimes unnecessary services were done. Patients’ satisfaction from logistic services and the service cost increase. Nevertheless, according to the workload of hospitals, dissatisfaction was observed in nurses and clinical staff. Physicians’ satisfaction was high at the first steps of the plan and then it was declined. On the other hand, not covering some services by insurance companies and increasing the tariffs due to relative value of services book, decreased the positive effects of health evolution plan on out of pocket payments.

Conclusion: The following issues can increase the usefulness of the plan: having an articulate, long term plan for universal health coverage, coordination between different packages of the health system evolution plan especially between treatment and health packages, and targeted implementation. Furthermore, some implementation solutions for increasing the positive effects and reducing the undesirable impacts of this plan is discussed in this study.

Keywords: Health Evolution Plan, Pathology, Challenges, Iran