

## Providing Support Services in Selected Decentralized Hospital

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### Abstract

**Background:** Upon the implementation of the plans of the selected hospitals in Paragraph (C) Article [88] of the Law of the Fourth Development Plan, the amount of assessment relative to the execution of each of the Paragraphs related to the directives or guidelines of the mode of managing these hospitals is compulsory. The present article has made efforts to assess the implementation basis of Paragraph [9] of the above-mentioned directives and a survey of conditions as to the performance of the support services in these hospitals.

**Methods:** This study rested on the performance of 14 supporting activities of 18 selected decentralized hospitals that took place in 2007. Data were collected from questionnaire that had 6 parts about support services and how they were done in each hospital. Then the data were analyzed with Excel software.

**Results:** In hospitals 35.60% of the activities are performed by the contractor. The materials utilized in activities are 10.34 percent, equipping is 26.48% and equipment repair is 31.47% of the cases are secured by the contractor. Results pertaining to the survey of manpower engaged in activities show that 62.71% of the manpower engaged has an intermediate level of education and the relative average of manpower active in such work as of functional beds can be stated as 0.64, likewise, the average satisfaction rate of the services rendered was 71%.

**Conclusion:** A strategy leading to a decrease of incumbency and an elevation in the support service quality can bring about an increment in the quality of support services being presently rendered in hospitals which could prove effective.

**Keywords:** Support services, Decentralized hospitals, Outsourcing

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### Introduction

Organizations make efforts to exercise concentration and competence principally; majorities of them relinquish or transfer the various operational dimensions that are taken into consideration and thereby, the principle incentive culminating from this decision, mostly leads to a decrement in costs and a renewal in the organizational structure(1).

In Iran, support services, in all sections and particularly in public sectors are transferred to private sectors (2). Therefore, due to the obstacles of the health and treatment section and according to regulations, particularly those of the third (3) and fourth (4) plans regarding social, economic and cultural development of the country, private sectors are taken into consideration as in paragraph 9 of the guidelines

which allows the hospitals to take advantage of private sector companies(9).

The current article has made an effort to assess the amount of strategic implementation, in respect to the decrease of incumbency and the elevation of the quality of support services of the selected hospitals, of the Board of Trustees Plan subsequent to the initial year of implementation of the said.

### Material and Methods

The present research is of a descriptive, sectional and applicable kind and the comprehensive research which is according to the sample research, the total number of selected hospitals of the administrative plan of the Board of Trustees of Hospitals, that comprise of 18 hospitals. The fields of activities under study also

comprise of activities such as cleaning, garbage transport, nutrition, laundry, gardening, central sterilization room (CSR), nursing assistance, tailoring unit, commuting of personnel, internal and out station missions, kinder garden, copying, postal services (letters), vehicle repairs, maintenance of equipment and installations that are 14 activities, as well as duration spheres of assessments performed on the above mentioned activities in the beginning of the year 2007. The indexes relative to this research has taken vocation from lawful material of the Third and Fourth Development Plans, relative notices and decrees, strategic objectives designed and for a better reliability as to the accuracy, authenticity and conviction, views of specialists and project executors have been sought. Methods of research data collection have also been performed by the survey of documents related to transfers or entrusting done in these hospitals, including the rendering of questionnaires, interviews with the heads, managers and experts of hospitals that have taken place. Data were collected from questionnaire that has 6 parts about support services and how they were done in each hospital. In addition to which, finally, the data was analyzed and assimilated by utilizing the Excel software.

## **Results**

Results obtained from the research in particular with connection to the 14 activities under survey show that in 39.33% of the cases these activities pertain to the hospitals and in 60.35% of the cases, the activities are performed by the contractors. Likewise, the results obtained from the studies state that amidst the activities that are done by the contractor 31.26 of the contract entrusting or transfer is in the form of man/day and 68.73 % of the transferring contract is in a voluminous form.

In connection to studies performed on the methods of securing consumption materials for utilizing the same in the 14 activities, the result that has come to hand states that in 61.13% of

the cases these materials are rendered by the hospital, in 10.43% of the cases the contractor makes provisions and in 4.86% of the cases the consumption materials utilized for these activities are secured in partnership between hospital and the contractor.

In relative to the surveys performed as to the method of acquiring equipment required in the 14 number of activities mentioned, the result obtained is that the material consumption for utilization in the activities under study in 64.82% of the cases this pertains to the hospital, in 26.48% of the cases it is performed by the contractor and in 8.7% it is in the form of partnership between the hospital and the contractor. As to the studies performed in regards to the mode of repairing equipment utilized in the 14 number of activities, in this context results quote that in 58.57% of the cases the hospital is liable, in 31.47% of the cases, the contractor and in 9.96% of the cases it is performed in the form of partnership between the hospital and contractor.

Results obtained from the survey of manpower engaged in activities under study, the results that have come to hand is that the manpower engaged in activities in 71.62% of the cases have an intermediate level of education, in 25.30% of the cases, the mentioned have diplomas, 0.96% of the cases are undergraduates and 2.11 % are graduates.

In the surveys conducted during these studies, in particular in relative with the manpower employed and active in the support system shows that the average of this relative in hospitals and activities under study are 0.64%. The maximum of the mentioned are related to Shahid Dr. Faghihi (Shiraz) with 1.39 and the minimum are relative to Amin Hospital (Esfahan) with a 0.16%.

In studies performed in particular to do with the average amount of approval of patients and personnel as to the functioning of the support system of the hospital, the result that has come to hand is that the contentment expressed by patients from the support services rendered is

72.92% and the average amount of agreement of personnel from these services is 70.00%.

In surveying the correlation coefficient between two variable coefficients relating to occupied beds and the relative manpower engaged in the support department as of the number of functional or active beds in hospitals that are under study, the result attained was that between two variable facets mentioned above, a significant relationship does not exist (correlation coefficient = 0.03).

As to the survey of the correlation between two variable amounts of approval and the amount of functions performed by the contractor, as well as eliminating the presence of the connection between the two variable aspects (correlation coefficient = - 0.11).

Likewise, with due attention to the results of the research, there is no correlation between securing consumption materials by the contractor and so too in securing equipping materials as well as the amount of approval involved (correlation coefficient for consumption materials = -0.006 and for equipping = - 0.04).

## **Discussion**

With due attention to transferring of over 60 % of the activities under study, it can be surmised that, this amount of achievement is due to the abundance of advantages of privatization activities of support services and or else these transfers were performed based on the obligated plan and decrees of that specific period and or due to the prevention of the absorption of manpower in support services. Hospitals were compelled to transfer such tasks (support services) to non-government sections which have brought about contracts relevant to man/day, that too to the amount of 18.87% were compelled to a certain extent to determine the said.

With due attention to the fact that about 60% of the activities under study regarding the materials consumed by the hospitals are purchased, this could be an indication that hospitals do not incline towards a circulation in securing consumption materials by the contractor.

In 64% of the activities under study, the supplies or equipment utilized, are secured by the hospitals. This could state the fact that hospitals do not incline towards a circulation in securing supplies to be utilized in activities by the contractor and till date, relative to acquiring supplies by the contractor, there are problems en route the hospitals and the contractors.

In 58% of the activities under study in regards to the repair of equipment utilized by the hospitals, this could express the fact that though hospitals show a better inclination of having equipment repaired by the contractor, but in general, hospitals do not persuade the circulation of repairing equipment utilized in activities in regards to the contractor and till date in this aspect problems are present.

In 71% of the manpower engaged in 14 support activities under study are in the intermediate level as regards education and likewise, in view of the special condition of the hospital, tutorials to the specified manpower has to be an integral part of the programs of the hospitals; as tutoring the engaged manpower in support tasks will lead to an elevation in the performance of such functions and an increment in the amount of contentment of those gaining these services.

In relative to the deviation of criteria to a great extent in connection with the manpower engaged in the support tasks relative to the active beds, this result can be attained that, a clear standard in relation to the manpower employed in supporting functions and bed throughout the Country is lacking and all the hospitals in this respect exercise this matter according to preference. Moreover, the lack of presence of a significant correlation between the manpower engaged in supporting tasks and the number of functional beds, including the coefficient of bed occupancy, is another reason for the absence of specified standards for the supporting manpower. Therefore, it is essential that programming in this aspect, so as to determine the standards in this relative has to be performed as a priority of tasks, as the lack of manpower in connection with has an impact on the quality of

work performance and on the other hand, a surplus of manpower could also elevate the costs and expenditure of the hospital.

Finally, it can be concluded that the strategy of decrementing incumbency and promoting the quality of supportive services can prove beneficial as this would increase the quality of these services rendered in hospitals. In order to implement the said, apart from government support as to the programs of the private sector and the selection of an optimum method of privatization, as well as concluding the most exercising and competent contract, a suitable bed for management and expert level tutorials pertaining to the contract and supervisors of hospitals as well as those employed in supporting tasks, recognition of the work volume, materials and equipping required, present costs for work performance, the employment of specialized manpower to supervise an affective efficiency as to contracts that takes place.

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