

Impact of Outsourcing Healthcare Services Management on the Quality of these Services

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Abstract

Background and Objectives: Outsourcing healthcare and the associated services has proven as an effective strategy for enhancing hospital performance and improving quality of services. Despite, the concept is relatively new in Iran, calling for studies investigating different aspects of the issue and its potential benefits. Thus, this study was conducted to explore the impact of outsourcing management of healthcare services on quality of these services in a number of teaching hospitals in Iran.

Methods: A sample of 113 managers from six teaching hospitals of Tehran University of Medical Sciences (TUMS) was surveyed. A 14-item researcher-made questionnaire was used to record the perception of hospital managers towards the quality of healthcare services before and after signing management contract. Paired t-test was used to compare the mean values.

Findings: The quality of healthcare services after outsourcing was found to be significantly higher ($P < 0.05$) as perceived by the hospital managers, compared with the period before outsourcing.

Conclusions: Our results provide further support for the notion that outsourcing management of healthcare services can lead to an improved quality of these services, thereby higher patient satisfaction and enhanced hospital performance.

Keywords: Healthcare services; Hospital management; Outsourcing; Health services quality

Background and Objectives

The non-governmental sector is expanding throughout the world today. Public institutions in developing and developed countries with varying degrees of severity and is having successes. Activities of private investment are an important factor in economic growth in developing countries, Economists and policy makers need to consider how long it has been attracted. Policies in developed countries which were decreased in 1980, has now grown increasingly And in the 1990s has been more important. In the 1960s and 1970s, governments have an important role in the development of the expansion of the newly independent nations [1]. In these

circumstances the government as the most effective transition for service members was known to the public. Hence the planning system in the city and the country's ability to provide construction to community resources and monitor and control the allocation of resources in order to take effective steps. In the mid-1980s, numerous factors were globally that led the government to reassess and whisper a new development plan in the developing countries was raised [2]. Strategic purchasing policy and contract services to improve health system performance are a key policy. Passively purchase health services should often involve retrospective payments to suppliers of services, on strategic purchasing policy which will actively purchasing decisions about the services that must be purchased services, period that should be bought, people who buy them must be followed and the results that we are done. From signing the contract for the purchase of primary health care in the health needs of special populations [4].

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Considering that the whole country in the 2006 Budget Law, Hospitals to manage the enormous amount has been allocated as the Board also in accordance with Article 9 of the instructions contained in the budget for hospital management, After approval of the Board of Trustees can directly support and service for tasks with non-certified companies qualify based on specific activities, given the workload of each unit price and total price contracts should be transparent [5].

Signing the contract for the purchase of health care in developed countries like America, Finland, Holland and England, is common in middle-income countries, especially in Latin America, and Central Europe management is pervasive in the contract. In recent decades, Latin America signing the contract has been a common policy. In signing the convention in developing countries every day more and more attracted to the government. On this basis, in signing a contract with the private sector in Iran 88 and 192 of the Third Development Plan was emphasized. In addition to its other regulatory approvals by the Management and Planning Organization and Administrative Council has been issued [6, 7].

The health system in Iran two decades ago, many efforts have been made in the field of outsourcing most of them in the form of legal materials 144,33,88 Ongoing projects and regulated part of the government financial regulations in the field of transfer services [8]. Initial studies in our public hospitals seem not only to contracts above and under a coordinated and systematic framework is not clear but are not scientifically accurate and contracts based on existing standards, the World Bank and other major international centers, also, weak supervision and monitoring and evaluation of the above contracts, public hospitals have been faced with countless problems. This study focuses on the effect of the alliance management practices in hospitals affiliated to Tehran University of Medical Service quality deals.

Methods

Study and a cross sectional survey was conducted. The study population consisted of all teaching hospitals - handling choice in 2012 was affiliated to Tehran University of Medical Sciences. With hospitals in this study were above in 2012 at least one of them was used in the management contract. The hospitals were: Ziyayyan, Akbar-Abadi, Shariati, Sina, Motahari and Firoozgar. Number of senior managers, middle and operational in the six hospitals was 127 people of which 113 completed the study questionnaire. Departments and units that the methods used to manage the contract had been identified in Table 1. The research instrument was a researcher based on a questionnaire survey of satisfaction and service quality made Parasuraman and Zeithaml [9]. Because

the relationship with the alliance management techniques for the inventory adjustment of criteria and indicators about the health ministry in the transfer unit was used [8]. The questionnaire had 14 questions. To confirm its validity, 7 cases of respected professors of health services management and 4 experts in the field of Health and Medical Sciences in Tehran. Its reliability was assessed using Cronbach's alpha. The coefficient for the implementation of the management contract 0.76 and for questions related to the implementation of the management contract was 0.87. For data analysis techniques in the study of descriptive statistics such as mean, standard deviation and percentages were used. Also, methods to obtain the success rate management contract, the paired t test in SPSS program were used.

Results

Of 113 participants studied, 85 (75.2%) female and 28 participants (24.8%) were male. The age group most of the 53 (46.9 percent) were in the age group below 30 years. Also, 96 (85%) of participants were from the post of Director of Operations. Finally, in terms of job categories, the highest number of participants 53 (46.9 percent) were from nursing job categories. (Table 2)

Table 3, Average and SD before and after implementation of quality management methods contract shows.

As can be seen in Table 3, Total quality service and standard deviation is 2.94 ± 0.18 before the CM, the mean of the average quality of service after the transfer is 3.1 ± 0.15 , is lower.

Table 4, Results of paired t-test for the quality of service before and after out-sourcing the service shows.

As shown in the table above, the paired t-test for quality of service is significant at the 95% confidence level ($P < 0.005$). Given a positive difference in the quality of service (2.23009) of the contract approach to manage quality of service has increased.

Discussion

The main objective of this study to determine the effect of alliance management practices on quality of service in hospitals affiliated to Tehran University of Medical Sciences in 2011. Average quality management services agreement before implementation methods was 2.94 out of 5 that compared to the contract after the implementation of management procedures (3.10 out of 5) was lower. Statistical test results showed that the relationship between quality of service before and after leaving the service, there was significant ($P < 0.005$).

Several studies have stated that an important advantage over the outside and outsourcing services to improve the

Table 1 Hospitals and research units that have used management contracts

Name of Hospital	Units that have been delegated with the management contract
Ziyayyan	Lab, Physical Therapy, Audiometry, Optometry, Radiology
Akbar-Abadi	Laboratories, Genetics Laboratories, Ambulance
Shariati	Laboratory, Emergency Ultrasound, CT Scan and MRI
Sina	Nuclear Medicine, Department of Rehabilitation
Firoozgar	Ambulance, Radiology, Laboratory, Department of Neurology, NICU ward, Pharmacy
Motahari	Ambulance

quality of activities and products and more effective organization. Mortazavi said that waiting and reduce cost of operations and products manage tasks, difficult or uncontrollable and benefit from the expertise and skilled manpower is owned by the suppliers of the benefits of outsourcing. Dracker also cut costs, reduce bureaucracy and management activities and eliminating complicated and time consuming administrative Marat has mentioned the benefits of outsourcing [10, 11]. The results also showed that implementation of the Convention approach to managing quality of service are increasing.

Other studies in connection with the outsourcing of information systems in organizations are done [12-14]. Results showed that the outsourcing of information systems has increased the quality of information systems.

But all studies of quality management in the implementation of the contract have not been confirmed [15]. Bahrami noted that in their study and assignment outsourcing services to reduce and monitor the outsourcing activities that can lead to reduced quality of products and services [16] with inconsistent results.

In a study measuring attitudes Jan Fada as management of public hospitals in Yazd province in the assignment of work to private contractors to purchase the service concluded that privatization has led to the declining quantity and quality of service [17]. This finding is also consistent with the results of this study. But in several studies of important advantages over outsourcing and services to enhance the quality of service have mentioned. Should be said that the global competitive environment requires that organizations create value and strategic management are to survive, alliance management as an option for achieving competitive advantage and ensure the growth and globalization has been and is inevitable [18,19]. Although short-term assignment in the service of employees and the subsequent reduction of unemployment, they are satisfied, But in the

Table 2 Demographic characteristics of the study sample

variable	N	%
Sex		
Male	75	75.2
Female	24	24.8
Age		
< 30 years	53	46.9
30-35	19	16.8
36-40	14	12.4
>= 40	28	23.9
Organizational		
Senior	3	2.6
Middle Manager	14	12.4
Operations Manager	96	85
Job Categories		
Nurse	53	46.9
Para clinic	11	9.7
Physician	13	11.5
Administrative and Financial	36	31.9

long-term incidence of creativity, technical advancement and development of skilled and trained work force, will lead to the emergence of new products and services. Thus, outsourcing can lead to increased efficiency and productivity of any organization [14]. Service hospital tends to be the recipient, must be able to adjust its activities to provide the ability to control and supervise the affairs of [20, 21].

But after examining the different experiences of alliance management seems to be the main activities that have no goals and mission of the organization, be granted and only activities that relate to the main activities of the organization or the price and terms it is better, it can be done by the hospital [22,23].

Table 3 Average quality of healthcare services before and after the transfer

	Average	Standard Deviation
Before CM	2.94	0.18
After CM	3.1	0.15

Table 4 Results of paired t-test before and after the transfer of service quality

t	df	Sig. (2-tailed)	Paired Differences	
			Mean	S.D
2.847	112	.005	2.23009	8.32596

Conclusions

Finally, if hospital could transfer their activities to create and maintain long term relationship, they will be more successful. Contract management of service quality can be treated with caution, but is needed in this area. The only activities that are the core goals and mission of the organization to be entrusted management contract and also the quality of service to other aspects such as employee and customer satisfaction in hospitals and hospital management issues are also considered.

Competing Interests

The authors declare that they have no competing interest.

Authors' Contributions

MZH and HS jointly designed the study and determined the settings. RKZ contributed to data collection and analysis, interpretation of the results, and editing the draft manuscript. AA and RKZ were involved in statistical analysis and interpretation of the results. ST revised and finalized the manuscript. All authors read and approved the final manuscript.

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