Analysis of Productivity Improvement Act for Clinical Staff Working in the Health System: A Qualitative Study

Leila Vali1, Seyed Saeed Tabatabaei2, Rohollah Kalhor3,4, Saeed Amini5 & Mohammad Zakaria Kiaei3,4
1 Environmental Health Engineering Research Center, Kerman University of Medical Sciences, Kerman, Iran
2 Health Information Management Research Center, Hormozgan University of Medical Sciences, Bandar Abbas, Iran
3 Social Determinants of Health Research Center, Qazvin University of medical sciences, Qazvin, Iran
4 Health Services Management Department, School of Public Health, Qazvin University of Medical Sciences, Qazvin, Iran
5 Research Center for Health Services Management, Institute for Futures Studies in Health, Kerman University of Medical Sciences, Kerman, Iran

Correspondence: Mohammad Zakaria Kiaei, School of Public Health, Qazvin University of Medical Sciences, Qazvin, Iran. Tel: 98-912-381-1517. E-mail: kiaei_mzsa@yahoo.com

Received: March 10, 2015   Accepted: May 4, 2015   Online Published: June 11, 2015
doi:10.5539/gjhs.v8n2p106          URL: http://dx.doi.org/10.5539/gjhs.v8n2p106

Abstract

Introduction: The productivity of healthcare staff is one of the main issues for health managers. This study explores the concept of executive regulation of Productivity Improvement Act of clinical staff in health.

Methods: In this study phenomenological methodology has been employed. The data were collected through semi-structured interviews and focus group composed of 10 hospital experts and experts in human resources department working in headquarter of Mashhad University of Medical Sciences and 16 nursing managers working in public and private hospitals of Mashhad using purposive sampling. Findings were analyzed using Colaizzi's seven step method.

Results: The strengths of this Act included increasing spirit of hope in nurses, paying attention to quality of nursing care and decreasing problems related to the work plan development. Some of the weaknesses of Productivity Improvement Act included lack of required executive mechanisms, lack of considering nursing productivity indicator, increasing non-public hospitals problems, discrimination between employees, and removal of resting on night shifts. Suggestions were introduced to strengthen the Act such as increased organizational posts, use of a coefficient for wage in unusual work shifts and consideration of a performance indicator.

Conclusion: The results may be used as a proper tool for long term management planning at organization level. Finally, if high quality care by health system staff is expected, in the first step, we should take care of them through proper policy making and focusing on occupational characteristics of the target group so that it does not result in discrimination among the staff.

Keywords: productivity improvement Act, health care system, clinical staff, Iran