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IDENTIFY FACTORS AFFECTING THE PRODUCTIVITY OF HOSPITAL COMMITTEES' AUTHORITIES VIEW: A QUALITATIVE STUDY

Hassan AmirabadiZadeh¹, *MohamadReza Maleki², Soodabeh Vatankhah³ and Masoud Salehi⁴

¹ *MSC, Ph.D. Student of Health Care Services Management, , School of Management and Medical Information Sciences, International Campus (IUMS-IC), Iran University of Medical Sciences, Tehran, Iran, Tehran*

² *Associate Professor of Health Care Management, Health Management and Economic Sciences Research Center, School of Management and Medical Information Sciences, Iran University of Medical Sciences, Tehran, Iran. Head of Development Management and Administrative Reform, Ministry of Health and Medical Education.*

³ *Assistant professor of Health Care Management Department, , Health Management and Economic Sciences Research Center, faculty of Management and Medical Information Sciences, Iran University of Medical Sciences, Tehran, Iran*

⁴ *Assistant Professor of Biostatistics Department of Biostatistics, Member of Health Management and Economics Research Center, Faculty of Public Health, Iran University of Medical Sciences, Tehran, Iran.*

ABSTRACT

As hospital is responsible for several tasks, Authorities are required personally or with other colleagues` help effort to manage hospital ideally. As anybody alone wouldn't be able to cope with the hospital administration, Utilization of hospital committees is essential. The low rate of productivity growth in our country, despite the rich human resources, Necessity of research and careful attention on discovering the causes of low productivity rates, especially human resource productivity and finding scientific and practical ways to improve are noted. Based on the study of Geranded theory, experience of 40 employed managers in smallest and biggest hospital in the centers of Sistan and Baluchestan, Razavi Khorasan and South Khorasan provinces and deputy of treatment schools in three provinces and the Ministry of Health were examined. The research data was collected through interviews and based on Strauss and Corbin's approach (1998), the open, axial and selective coding was employed. Based on the analysis of obtained data, Factors affecting the productivity of hospital committees at the district hospital level, provincial and state were considered. The code consists of five sub-categories in three main categories including: A) Quality of committee meetings B) The decisions taken by committees and C) Approval of committee. Based on the results of the participants' experiences with more confident, Managers and officials, would rely on the discretionary based on scientific findings, Their management activities designed and implemented in such a way that the maximum use can be coordinated with three levels of hospital committees, hospitals, universities and ministries Considering the quality of the meetings of the Committee, the Committee adopted the results obtained from the implementation of the legislation committee at the hospital goals to improve the quality of health services.

Keywords: Productivity, Hospital committees, Authorities view, Qualitative

INTRODUCTION

In today's world productivity as a method, concept and an attitude about work, life, and beyond that, it means it is culture. In fact productivity is one of the factors which guarantee the Organizations survive in the present competitive world (Aqdasi, 1994) productivity is one of the most effective ways to achieve economic growth (Rouh-Alah and Javad, 2012). On the other hand, emphasizes the significance of productivity in line with what was mentioned in the legal documents are traceable in the country. The following briefly points out the most important in order to further clarification of the importance of research. In this regard Council of Ministers, in the meeting dated 24.04.2000, According to one hundred and thirty eight constitution of the Islamic Republic of Iran approved that: All executive agencies are

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required to establish the productivity of the management cycle (criteria design, Analysis of factors, Planning and Implementation) and apply them towards the end of September of the following year (2000).

A) Defining and measuring parameters related to productivity in coordination with the National Iranian Productivity organization

B) Productivity improvement program of organization (The Fourth, 2004)

Due to the specific characteristics of the health sector, productivity and accurate assessment of their scarce resources for optimal use of resources to provide, maintain and improve human health is very important. In fact, resource allocation and productivity with the effective participation at all levels of society with full respect for equal justice and quality of the health services sector is considered one of the major and early issues. Productivity and its importance in the health sector, will intensify when Enhance productivity and make it about hospitals and healthcare providers, we rose. (Sajjadi et al, 2008). Also, due to resource constraints in health economics is important in all areas of performance management particularly in hospitals. (Najafi et al, 2010). Since the committees can be involved in decisions, although the ultimate responsible for a decision are the managers, through the use of committees, the burden of responsibilities would be shared. Group discussion and judgment can be the benefits of decisions by committee. When the responsible departments and specialists are involved in the decision, complex problems are solved more easily (Tomy, 1988). The productivity field in hospitals is relied on the development process of any part and environment (Brossart, 2008). Efficiency Unit's goal is to provide health care through information and skills for identifying regions of employees and determine the time required for each activity, which is the improvement(Ashton, 2010) with regards to each section has different features and potential productivity of a sector with other sectors varies according to the facilities available at each sector, different methods for efficiency can be used.(Webinar, 2013) To enhance the efficiency of different types of hospital, research conducted in Australia has found that private hospitals provide health care more efficiently than the public sector.(Report PCR, 2009) According to the annual report of the Ministry of Health in Canada (2008) the following are among the hospital Committee problems:

Conflict between hospital and community goals with targets specific groups

Lack of skills related to information technology and legal information as well as low committee members
Priorities in a hospital can affect people who are representative of a particular desire or have a specific agenda to be exposed. Problems associated with the lack of practical tips that hospitals are expressed by researchers and investigators (ARotOotAGo, 2008). With regard to the items mentioned earlier, we all know that understanding the factors that influence the efficiency of hospital committees, enabling managers to focus in order to identify barriers and facilitating factors, planning, and as a result of monitor to achieve higher levels of productivity can be achieved.

MATERIALS AND METHODS

Since most studies on hospital committees, are quantitative, So in order to identify factors influencing hospital utilization committee `s review and a deeper understanding of the experiences of managers, this qualitative study was carried out. And trying to answer the question: What are the factors influencing the efficiency of hospital committees, However, understanding the factors influencing the efficiency of hospital committees need to pay attention to the experiences, beliefs and values in an atmosphere based on mutual communication and authority in the workplace, hospitals and administrative levels is very close which is The importance of attention to their experiences and the experiences of experts, and information on hospital committees are highest.

In this study of 40 people aware and rich in experience in the hospital due to job responsibilities, and virtually are familiar with the problems of the hospital's Committee and the most are familiar with committees, They spend a lot of time in committee meetings, Purposive sampling method and the personal satisfaction and their perceptions of a clear expression of interest to participate in the study and were based on data saturation were interviewed (Ranjbar et al, 2012) Since this article is part of a Ph.D.

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thesis and dissertation research community, the smallest and largest public hospitals in Sistan and Baluchestan province centers (Zahedan), South Khorasan (Birjand) and Khorasan (Mashhad) were studied was undertaken qualitatively the same community (non-uniform performance of great and small hospitals) In each hospital, the President, Vice President, Manager, Director of Nursing (metron) and Supervisor of hospital were interviewed to get data. In order to experience a higher level managers at Headquarters, Deputy Medical Director of the hospital treatment and the Expert Committee and the ministry's expert committee of the hospital, were interviewed for January 2012th till Jun 2013. Interviewed face-to-face semi-structured (The most common form of interview) Interview was conducted with consideration to avoid any prejudice, and the use of leading questions. The objectives of the study were explained to the respondents and more, interviews were recorded with the permission of the interviewees. Along with interviews conducted by the researcher, the most sayings of the participants were recorded. Given the current position and time, each interview lasted between 30 to 60 minutes. All interviews were recorded and typed and written word by word, in order to be analyzed. For this purpose, the researcher listened carefully to interviews several times; the transcript of their interviews was read several times. Strauss and Corbin analysis method was conducted concurrently with the data. In this way, qualitative data obtained from interviews manually, the coding method in three steps

Open coding, axial and selective were analyzed. Since this method of data collection and analysis are done simultaneously. After each interview, the researcher wrote down the transcripts and reviewed the data line by line and extracts the main idea (381code) and two way of coding in this method were: Respondents' use of language and vocabulary as well as codes and key concepts that the researcher based on the concept of data is extracting. and then with the use of axial coding, The concept is based on broad themes that emerged from the data and the extracted interview questions were classified (extracting 5 subclasses) and a link set between the raw data. Then, to make sure floors are separated from each other, each class or category compared to other categories Identify the following categories, axial coding, the researcher sought to find the relationship between the categories, sub-categories and main floor, features of each class were arranged. In the third stage of coding this is called selective coding. According to concepts and identifying codes the final selection was done. Researcher seeks to integrate and refine their analysis and as the result three main categories was extracted. (Ghafghazi -Al-Asl Shadi JMHRAS, 2011) To ensure the reliability and validity of the evaluation procedure, Lincoln and Guba (which is equivalent to validity and reliability in quantitative research) was used (Lincoln and Guba, 1985). Therefore, this method is based on four criteria of reliability and validity (credibility), transferability, dependability and confirmability assessment were considered. For each of these criteria, the following tasks were performed: Credibility: Spending enough time to research, interview data confirmed by interviewees in some interviews after transcription, verification process by some experts, ensure uniform coding approach by using two encoders for coding a sample of interviews, writing notes during the interview.

Transferability: Opinion of some hospital administrators who have not participated in the research findings.

Dependability: Capture every detail in all steps of doing research and taking notes

Confirmability: Documenting and maintaining documentation of all steps in the research process, research methods were described in detail, drawing on data entry tables, contradictory and negative cases were checked to determine the reason for the inconsistency in findings, the initial interview was provided to a number of qualitative research professors to be approved by the coding process.

To ensure a rational and transparent semi-structured interview questions, three pilot interviews with hospital officials was done and the type and order of the questions were determined. And also the questions which were unclear for interviewees were modified and the final interview questions were formed.

RESULTS AND DISCUSSION

Descriptive findings of the study reveal that out of 40 interviewees (4 of Hospital President, 4 Vice hospitals, three executive managers, 8 Merton, 7 supervisors, 6 Coordinating Committees, 3 Medical

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Director, 3 Expert Committee on the Medical Department, Two deputy health expert at the Ministry of Health and Medical Education) 21 were male and 19 were female. Here are the results of the respondents' views on factors affecting (inhibiting factors and facilitator) will focus on the efficiency of hospital committees that are offered in the following 5 subclasses and at the end of the subclasses converted and presented into three main categories.

Factors associated with failure of the Executive Committee of the Hospital

The number of factors extracted from the perspective of the interviewees following comments, categories and codes are:

The most proposed issues were financial 2-Neglecting the implementation of the act, 3-The lack of a designated track for approval 4-Factors associated with hospital administration 5-Factors related to hospital staffing 6-Factors associated with hospital committee members 8 -Factors related to the units 9-Legal problems 10- other issues including: part look at the type of hospital specialties, failure to read and review the status of implementation or review of decisions of administrative barriers, drop the resolution adopted at the meeting without a final decision

Barrier to hospital committee formation :

Extracting factors, out of interviewees view in order of number of views, are as follow:

Disregarding the significance and influence of committee for hospitals

The role of the hospital president (chairman 3- Failure to follow the Committee

4-Lack of participation of committee members 5-Lack of administrative approvals

6- Lack of supervision by higher levels of hospital 7-High number of Committees

8-Lack of action plan for the committee 10-Lack of proper committee conduct (delay in meeting 11-

Other items, including a great variety of hospital problems, low commitment and understanding members of the hospital's problems, work interference with other committees, sub-committees to assist non-expert committee's main task.

Factors affecting the efficiency of hospital committee meetings

Extracted from the perspective of the respondents, respectively, the number of comments is as follows:

Set the agenda of the meeting 2-The rate of implementation of decisions of the previous committee 3- Active participation of committee members.

4-Application of appropriate legislation is adopted 5-The role of Chairman

6-The role of committee secretary 7-Determine the time required for the implementation of the Act. 8-

The importance of hospital committees.9-Holding a programmed committee

10-Set person responsible for tracking legislation 11-Appreciating the Committee on the activists

12-Other matters. Among the items discussed include: review of financial legislation; invite an expert in hospital and higher-level officials (deputy department and university); prevention of deviant and marginal use of external relations part, determining the expectations of the committee and ...

Factors facilitating the participation of experienced and expert managers and employees in hospital committees

Extracted from the perspective of the respondents, respectively, the number of comments is as follows:

Rewarding 2-The importance of the opinions of individuals 3-The amount of legislation passed by the Executive Committee 4-Motivating people 5-Encouraging individuals in public.6-Other items, including: attention to Moral character and personality of members, Investigate the reasons for non-participation, Displacement of unable ones with capable.

Factors affecting quality enhancement committees

Extracted from the perspective of the respondents, respectively, the number of comments is as follows:

Role of committee members. 2-Status of Committee Implementation 3-Make use Of all individuals associated with the session.4-Existence of timetable for the committee. 5-The role of Chairman . 6-Committee`s secretary tracking. 7-Other items: Training and briefing sessions for new members and hospital personnel, not large numbers of committees, Based on the nature of the hospital committee

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meetings are to be suit up and be held in the Hospital, Invite people from other levels and organizations as a visiting scholar or member, Much supervision of higher levels on committee performance.

On the level of town :

In continuous 5 subclasses in Axial coding stage are expressed, three main categories factors affecting productivity enhancement of hospital committees in the following were extracted (selective coding) Extracted instances from the cases mentioned in the interview are as follows:

1-Holding efficient meetings:

- An action plan and Gantt chart for hospital committees
- Training of hospital staff members and committees
- Select interested members, capable and well-thought
- Inviting higher level authorities
- Follow active president and chairman of the hospital committee
- avoiding formal and useless meetings
- Processes designed to collect personnel suggestions for the committee project.

2. Status of committee's legislation:

- Evaluation of the implementation of legislation
- Informing employees of the hospital staff in order to further understanding the performance and power of committees
- Encourage the committee at the end of the year
- Announcing the level of cooperation at various levels within and outside the hospital
- To celebrate the success
- In regard to the financial relationship between good performances with active committees
- investigating effect of the Committee on the Accreditation of Hospitals
- Conducting periodic surveys of members and staff of the committee

3 - Good resolutions adopted by the Committee:

- Being applicable legislation
- Experting the approval prior to meeting by sub-committees
- Good session management
- Set a follow-up legislation
- Create the active participation of members and guests
- Modeled from other hospitals Committee
- Avoid approvals remain undecided
- reading pervious minutes and investigate the progress of legislation of previous meetings

B. province level:

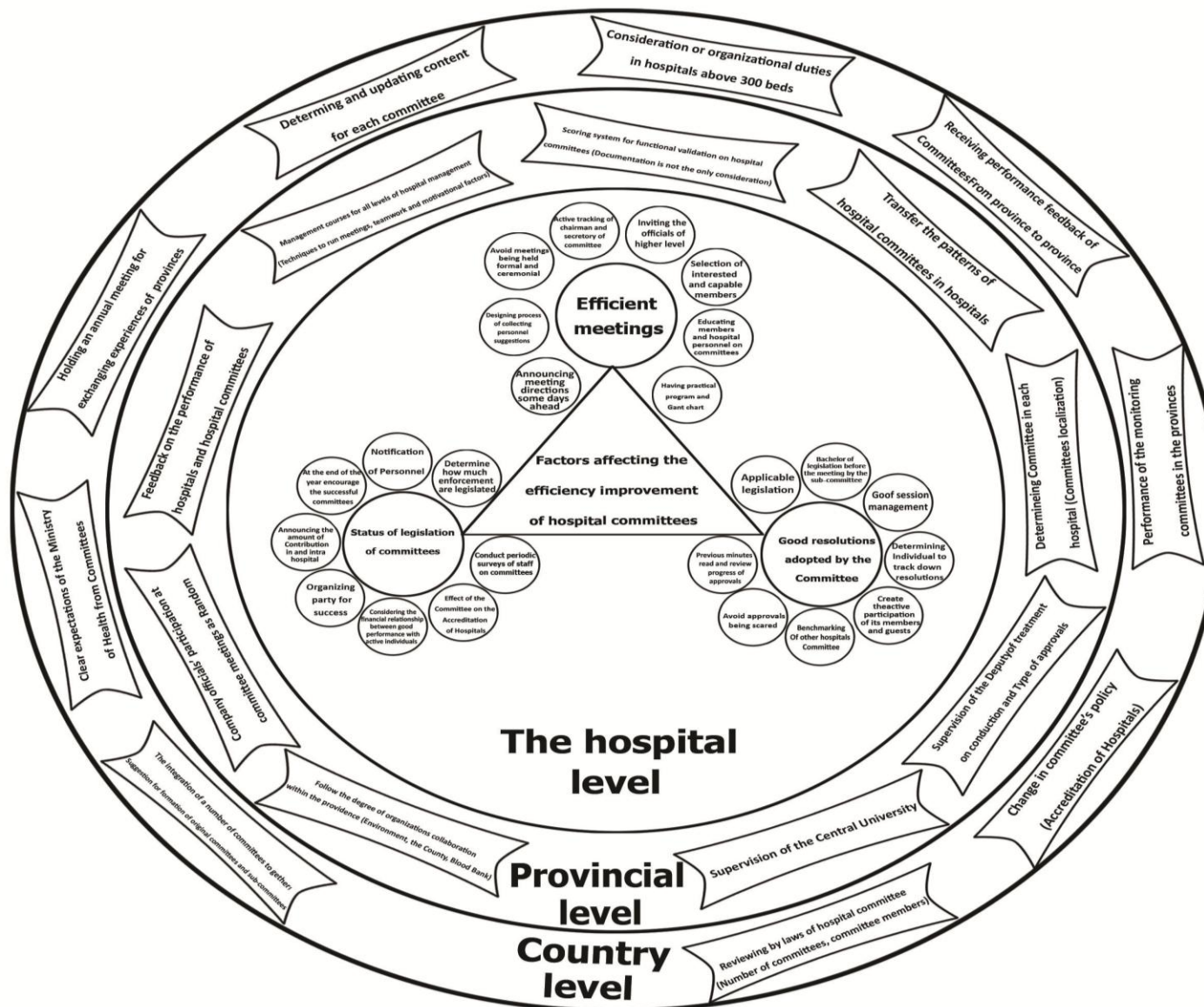
- Follow the degree of collaboration within the State to solve problems
- Participation of authorities in the case of committee meetings
- Feedback on the performance of hospitals and hospital committees.
- Management courses for all levels of hospital
- Functional validation system in order to rating hospital committees
- Transmission of successful models of hospital committees among province hospitals
- Determine the type of required committee in each hospital
- Supervision of Deputy Therapy on how to hold and type of approvals
- Supervision of the Central University

C. At the country level:

- Integration with each other and offer a number of committees and sub-committees of the main committee
- Clear the expectations of the Ministry of Health of the hospital Committee
- Hold an annual meeting and exchanging experiences for provinces
- Determine and update the content and task of each committee
- considering the duties or organizational position in hospitals with over 300 beds and a staff of Medical Assistance
- Get feedback from committee action, province to province
- Supervision on committee's performance in the provinces.
- Change of committee's policy
- Review bylaws of hospital committee

RESULTS

Based on the results of the participants' experiences with more confident, Managers and officials, would rely on the discretionary based on scientific findings, Their management activities designed and implemented in such a way that the maximum use can be coordinated with three levels of hospital committees, hospitals, universities and ministries Considering the quality of the meetings of the Committee, the Committee adopted the results obtained from the implementation of the legislation committee at the hospital goals and assists in planning, organizing and coordinating activities to provide hospital and reduce or eliminate the problems quality services and improve the quality of health services are looking for.



Model for determining the factor affecting the productivity of hospital committees

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Discussion

The studies which investigated the factors affecting the labor productivity and hospital committees which emphasize the importance of productivity with the results are taken from conducted interviews will be discussed briefly below:

Bordbar study showed that the rank orders of the factors affecting staff productivity are: Managerial and organizational factors, factors of organizational support and compensation system, Physical and psychological factors, environmental factors and the level of freedom and independence in the conduct of the staff, individual factors, creating an atmosphere of intimacy and collaboration in hospital planning and conduct of employee performance, foster a sense of commitment and loyalty of the employees (Bordbar, 2013) Rezayian in another study has concluded that the relationship between diversity management and labor productivity is positive and significant (Rezaeian and Ghasemi, 2010). Our study also identified factors that show similar results. Example of the lack of administrators, hospital committee, and the chairman of the second-tier factors have been identified such as: "Those are the head of the hospital's whose view is pursuing excellence. Managers and chief executives are the main problems of hospitals, As long as in the country, president of the hospitals elected in this way, we would reach nowhere. Who says the head of the hospital should be faculty? I read or have doctors or specialists, hospital management should be a doctor. It should be mixed (medical science, management science). (Hospital Administrator)" Regarding the attention to the basic needs, providing employee benefits, and incentives, this is the first factor in recruiting individuals with experience in hospital committees as follows:

"financial encouragement or encouraging through the encouraging tablet would help the one who is in charge of the committee and the approvals of the related committee is being Executive in the best way, appreciate him (paper or money). (Expert of Medical Assistance of university).

"Members have accepted concessions (interesting) Always assume sake do not be so broad that people are obliged to do so. Creating motivation for members (metron)."

Also Musazadeh research shows that management-related factors, factors related to job satisfaction and employee motivation, customer-related factors, factors related to human resource development, organizational culture and factors related to technology and hospital equipment have a huge impact on productivity (Mousa Zadeh, 2005) Ellis and Dick on their research concluded that applying a collaborative style and teamwork improves productivity. (Ellis and Dick, 2003) Our study reveals that role of hospital president and Officials involved in the committee as well as factors related to employee satisfaction and motivational factors in the success and efficiency of hospital committees are very effective. "I think the less committees formed the less motivation is, committees are responsible for not being motivated and the most important are decisions made in previous meeting and not put in action yet, When you see a committee to review a decision taken after a few times and still not implemented, Sure people say this committee and other committees are the same.

So why take part? What special event happened? And ... (Medical Director)"

"Committees do not function as expected because of too faint to be seen by the authorities, Working groups will be formed in hospitals to know why legislation is not implemented (the Committee chief)."

Other studies, including Mehrabian study showed that organizational culture, motivational factors, environment, empowerment and leadership style in order to enhance labor productivity is an important factor. (Mehrabian et al, 2011)

Gaynor and et.als described a number of benefits resulting from such a committee: increased personal awareness and involvement in decision-making, communicating convenient and consistent with the committee members and staff at all levels of skills, experience supervisor (leadership) can be used in other sectors. (Gaynor et al, 1994)

The results of our study, reveals the administrative agent, the person (individual factors) and the Community are of the most important factors influencing the quality and efficiency of meetings and employee participation on hospital committees.

"Cooperative method should be applied; the decisions will be made in the opinion to be heard, Consultation should be discussed and comments should be mentioned it shouldn't be the way that the

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boss takes the decisions because on long time the staff lose the motivation, all being justified about the committee, managers has positive perspective on committees .He should believe that the legislation will affect the performance, Personnel know they can make suggestions and comments to improve hospital performance. "(Department of the Ministry)

"The authorities cannot explain how important they are and they do not know how important that is, legislation can be effective in the trend of most hospitals, a large number of committees. Some committees could be superficial; the number of committees not being large which makes is boring."(Department of the Ministry)

Nasiri Pour study showed Organizational culture, environment, motivational factors, and empowerment and leadership style factors are increasing labor productivity in the workplace.(Nasiri pour et al, 2010) On the other side ,Henry showed that there is a significant relationship between the welfare of employees , environmental factors and attention to the nature of work and labor productivity.(Henry et al, 2006) also Wright and et.als studied the elements of organizational culture on increasing employee motivation as well as improving the efficient productivity.(Wright and Perrell Gloet, 2008)

In our study, style and amount of cooperation of Chairman, positive relationships between staff, familiarity with the work of hospital committees and creating motivational factors were identified important determinants from the experiences of the interviewees.

"The Committee is effective for the hospital. Place for thinking. Place to communicate with personnel managers. Place these committees are recognizing the ability of the staff." (Vice Hospital)

"Familiarize personnel with committees and expressing committee duties and justifying them and proper communication between the Chairman and the members can be effective, too" (supervisors)

"The first step in culture for different categories including service forces which cooperate in identifying problems. (Committees` responsible)."

Conclusion

With regard to needing the ongoing effort to improve the efficiency and the efforts being the result of a correct understanding of the efficiency and utilization of factors affecting productivity, Also the productivity and its importance in the health sector , will be the more severe when the subject of productivity and its promotion is discussed in hospitals and health care centers .According to received Regulations from Ministry of Health, hospital committees are expected to try in the areas of policy and performance goals based on standards and guidelines for hospitals and university ministry , design and implementation plan for achieving the goals , identify problems and main problems in hospital and navigation functions to solve them, continuous efforts to increase the quality and performance improvement and satisfaction with hospital care recipients , follow the process of quality improvement of hospital services and regular and continuous evaluation of the ir activities within the hospital .

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REFERENCES

- Aqdasi A (1994)**. A step-by- step approach to improving productivity.Tehran.National Iranian productivity organization. Proceedings of the first national congress of productivity.
- ARotOotAGo O (2008)**. Hospital board governance. Ontario ministry of health and Long-Term Care.,
- Ashton T (2010)**. Improving the productivity of hospital wards the university of Auckland New Zealand: http://hpm.org/en/Surveys/The_University_of_Auckland_-_New_Zealand/16/Improving_the_productivity_of_hospital_wards.html; [cited 16].

Research Article

Bordbar G (2013). Factors affecting labor productivity techniques using multi criteria decision making: A case study of Yazd hospital staff. Health management department of business administration.;16 (51):70-83.

Brossart B (2008). The productive ward <http://www.institute.nhs.uk/international/the-productive-ward.htm#sthash.KZ1vGoey.dput> [23/03/2014].

Ellis S and Dick P (2003). Introduction to organizational behavior. Mc- Graw Hill.

Gaynor S, Reschack G, Verdin J (1994). Evaluating a committee structure. Journal of nursing administration. 24(7-8).

Ghafghazi -Al-Asl Shadi JMHRAS (2011). Factors motivating and inhibiting participation in the persian Wikipedia. Mashhad Ferdousi university faculti of psychology and educational sciencesA research journal in library and information:89-107.

Henry H, Rezaeian A, kozah chian H, Ehsani M (2006). The relationship between motivation and productivity of human resources in the physical education organization of iran. Move. Allameh Tabatabai University. 27:45-54.

Lincoln YS and Guba EG (1985). Naturalistic inquiry Beverly Hills,CA :Sage.retrieved june.

Mehrabian F, Nasiri Pour AA, Keshavarz Mohamadian S (2011). Assessing the importance of the factors in manpower productivity in staff and faculty members' views of Guilan University of Medical Sciences Zanzan University Medical sciences. Islamic Azad University of Tehran, Branch of Science and Research,Management and health care group.19(75):94-106

Mousa Zadeh M (2005). Factors affecting the productivity in educational and public hospitals of Sari,Ghaem Shahr and Behshahr- Hospitals Of the Mazandaran mniversity of medical sciences. Tehran: Tehran university of medical sciences.

Najafi B, Beheshti dehgardy A, Emami Meibodi M (2010). Efficiency of public hospital in Ardabil(2000-2006). ghazvin university medical sciences;14(4):64-70.

Nasiri pour A, Raëisee P, Tayebi S, Mehrabin F, farmonbar R (2010). Measuring the productivity of human resources components. Gilan university . Medical sciences. Islamic azad university of Tehran, Faculty of Management and economy, branch of science and research.19(74):58-67.

Ranjbar H, Haghdooost A-A, Salsali M, Khoshdel A, Soleimani M, Bahrami N (2012). Sampling in qualitative research: A Guide for beginning. J Army Univ Med Sci. 10 (3): 238-50

Report PCR (2009). productivity commission 2009, public and private hospitals, research report, Canberra.

Rezaeian A and Ghasemi M (2010). The relationship between diversity management and workforce productivity. Vision for public management . Zabol university ,agriculture faculty.;1(4):9-22.

Rouh-Alah MS and Javad MSS (2012). Factors affecting the productivity of human resources in major crops cultivated in the central part of the mamasani city. Department of rural development . Industrial colledge of Isfahan research, journal of agricultural economics , fifth year No2(14).;4(2):155-74.

Sajjadi HS, Hadi M, Hariri MH, Harirchiyan MM, Toughiani A (2008). The impact of productivity committees being established in different hospitals of the isfahan university of medical sciences in.

PubMed ID:

Tomy AM (1988). Guide to nurse management ed r, editor. U.S.A. 27-30 p.

Webinar, C. (2013). IHA hospital productivity management Program: <http://www.ihonline.org/imis/iHaonline/information/hospital-productivity-program>.

Wright P, Perrell Gloet M (2008). behavior and productivity in China: A conceptual framework for practicing managers. Management decision. Cultural values/ workplace. 46(5):797-812.