Effect of per-case reimbursement on performance indicators of a military hospital’s wards

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Abstract

Aims: One of the most important changes in the method of payment to the employees of health institutions is to pay for performance. Pay for performance improves employees’ performance in the organization through the promotion of financial incentives. The aim of this study was assessing the impact of per-case payment on performance indicators and satisfaction in a selected military hospital.

Methods: This observational cross-sectional study was conducted during 2003-2008 in a military hospital of Tehran that had participated in per-case payment plan. Subjects were selected by census sampling method. Data was collected by a researcher-made questionnaire using 5-scale Likert system and checklists. Data was analyzed by the SPSS 16 software using independent t-test, ANOVA and Kruskal-Wallis test.

Results: The average of bed occupancy rate increased after implementation of per-case payment method in all wards. The evaluation of employees’ satisfaction showed that 21.3% had high satisfaction, 6.7% were satisfied, 31.5% had moderate satisfaction, 24.7% had low satisfaction and 15.7% were not satisfied at all. As a whole, the employees’ satisfaction rate with this plan was “good” with the average of 3.06±1.34.

Conclusion: Wards’ performance has improved in almost all the studied wards and this improvement has occurred through increasing of bed occupancy rate in some wards and reduction of patients’ length of stay and increasing of bed turnaround in some other wards. The level of general satisfaction with the plan is evaluated as “good”.

Keywords: Pay for Performance, Performance Indicators, Out-Sourcing, In-Sourcing, Hospital
تمامی این مطالب در سیاست‌گذاری سلامت جدیدی سیستم‌های جدیدی ارائه خواهد نمود که می‌تواند از ارتباطات مسئولانه و صادقانه منجر به بهترین عملکرد و اعتماد در سوال‌های مهمی مثل بهبود سلامتی و کاهش مخاطر درمانی باشد. به‌طور کلی، این مدارک می‌تواند در بهبود سلامت عمومی به روش‌های متفاوتی کمک کند.
جدول 1. وضعیت میانگین شاخص‌های بیمارستانی قبل و پس از اجرای طرح کیس‌کاری

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<th>تغییر از طرح کیس‌کاری</th>
<th>مدت اقامت (روز)</th>
<th>درصد ابست و خستگی</th>
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بحث

یافتن نتایج مختلف از مطالعات سابقه بیمارستانی و پزشکی نشان داد که اثر طرح بخصوص راهبردهای میانگین‌های ابتلا به اصرار گرفته است که در مورد این اثر باید به یکی از عوامل اصلی این اثرات متعلق شود. در حال حاضر، برای بهبود و بهبود در مورد این اثرات باید تحقیقاتی بیشتر انجام شود.

نتیجه‌گیری

بجویاً در تمامی بخش‌های مورد مطالعه، عملکرد بخش‌ها در مقایسه با زمان قبل از اجرای طرح بهتر شده است که این بهبود در برخی از بخش‌ها از طریق افزایش دسته‌بندی نخ و در برخی از بخش‌ها از طریق کاهش طول اوقات پردازش و افزایش جریان است. میزان رضایت‌ساز کل از اجرای طرح در حد حداکثر می‌شود.