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Comparing Performance Indicators of Obstetrics and Gynecology Ward at Yazd Educational Hospitals with Expected Limits of Indicators, 2015

Roohollah Askari [a,b], Milad Shafii [a], Najmeh Baghian [c,*]

[a]Department of HealthCare Management, School of Public Health, Shahid Sadoughi University of Medical Sciences, Yazd, Iran.
[b]Hospital Management Research Center, Shahid Sadoughi Hospital, Shahid Sadoughi University of Medical Sciences, Yazd, Iran.
[c]Health Policy Research Center, School of Public Health, Shahid Sadoughi University of Medical Sciences, Yazd, Iran.

Abstract

Objectives: The purpose of this study was to evaluate the performance indicators for obstetrics and gynecology wards in Iran.

Methods: This study was designed as a cross-sectional study and was carried out in obstetrics and gynecology wards of Afshar and Shahid Sadoughi hospitals in 2015. The information required for the performance indicators was gathered through questionnaires, statistical forms, and direct observation. In several tables, performance rating and performance status are presented using the Likert scale index based on the expected limits.

Results: According to the results of the categories of input indicators, the bed occupancy rate of Afshar Hospital's obstetrics and gynecology ward was, at 83%, higher than expected (79%), and that in Shahid Sadoughi Hospital (at 69%) was lower than expected. For medicinal methods and nonmedicinal methods of pain alleviation, the index process at Afshar Hospital was much lower than expected (40%). In Afshar Hospital, patient satisfaction at discharge was about 66.74%.

Conclusion: Effective steps can be taken to improve the input and output criteria: allocating appropriate physical space, examining the reasons for low bed occupancy rate by using complex analytical models, and in order to study the reasons for large number of cesarean section childbirth, it was recommended to place more emphasis on training of pregnant mothers and to inform them about the side effects of cesarean section and advantages of natural childbirth.

*Corresponding author.
E-mail: n.baghian@yahoo.com (N. Baghian).

1. Introduction

There are important aspects of system performance assessment of each organization that help evaluators gauge how it is doing based on established standards including assessment of the use of resources, objectives, and strategies [1].

The healthcare sector, especially organizations such as hospitals, provides the best way to ensure that good quality health services are widely available [2]. In addition, key units of hospitals in the healthcare system play a key role in providing health services and treatment [3]. To evaluate healthcare, each country has its own standards and criteria that feature standards from other countries and even different regions. However, the healthcare system (be it in partnership with the public sector or the private sector) should establish clear and comprehensive standards to evaluate the performance of healthcare establishments. Therefore, to assess hospitals, we need to adopt effective and appropriate measures. Different sources of different definitions of the term index or indicator are provided.

According to the World Health Organization definition, indicators or markers are variables that directly or indirectly contribute to measurable changes. This means that a given case is clear and therefore can be used to measure changes [4,5]. The feature common to all definitions is that the information provided by performance indicators (10) reflects the quality of the healthcare system and acts as a guide to determine the course of future actions and research mark required by health executives [6]. There are a variety of statistical indicators measuring the performance of healthcare institutions that can serve as a precise strategy and remove obstacles from the development of health services [7].

The use of indicators suggested different ways to classify them. The common classification criteria are divided into five categories.

Indicators of inputs, process, outputs, outcomes, and indicators in determining this classification system are based on a logical framework in which the inputs to outputs are as follows:

1. Indicators of input: specifically point out that the slides are activities to be done
2. Parameters of the process: monitoring and supervising of operational activities
3. Indicators of output: results of operations measures include knowledge, attitude, and behavior changes resulting from the activities
4. Indicators related to outcome: the long-term effects of specific activities or results and include changes in the health status of the community
5. Key indicators: refer to causes of diseases, or other issues such as environmental factors or unsanitary environmental conditions [8,9]

Because of the weak performance monitoring system in hospitals across Europe, the World Health Organization Regional Office for Europe is gathering evidence on the performance of hospitals. To this end, a new project whose aim is to benefit the 52-nation region by developing and publishing a comprehensive and flexible framework for evaluating the performance of hospitals, has began to establish "performance assessment tools to improve the quality of hospital" [10].

Several studies have been conducted on measuring performance indicators for hospitals. In some studies [11,12], indicators such as average bed occupancy, bed turnover interval, and number of cesarean deliveries had been used.

Ebadi Fard et al [13] used indicators such as rooming-in technique, breastfeeding, staff and patient satisfaction, as well as round and morning reports in evaluating the performance of obstetrics and gynecology wards.

As we know, the Gynecology and Obstetrics Hospital as one of the main public hospital, the only part that human life starts since fetal and maternal and fetal health issue which arises. Development of indicators and evaluations using these indicators in obstetrics and gynecology wards will help us gauge how well this section performs and if the sector is functioning effectively within hospitals and in service to their patients. As a result of this study, we decided to evaluate the functional status of the obstetrics and gynecology ward in Yazd educational hospitals using the indicators that we have developed.

2. Materials and methods

This study was designed as a cross-sectional study and was carried out in the obstetrics and gynecology wards of Afshar and Shahid Sadoughi hospitals in 2015. The information required for the performance indicators covering input, process, and output was obtained through questionnaires, statistical forms and questionnaires, data forms, direct observations, and interviews. The study was performed in two separate phases, as discussed in the following subsections.

2.1. First phase: development of indicators

In the first phase of the study (review of literature), 60 articles were reviewed, of which 42 were complete papers and 18 were abstracts. Forty-five performance indicators were found to be related to obstetrics and gynecology wards.

Next, these indices were classified as input, process, and output parts, and the data were gathered in the form of a questionnaire. In the second phase, these forms were given to 20 specialists in this field (5 obstetricians and gynecologists, 8 authorities from obstetrics and gynecology wards, and 7 validation experts). These