



Assessing the current status of human resources in health care service centers of Zahedan University of Medical Sciences in 2020: A qualitative study

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Abstract

Introduction: There is a universal consensus that human resources are effective everywhere in the heart and soul of the health system. Currently, human resources in the health sector is an issue that has rarely been considered in policy formulation except recently. On the other hand, the health workforce of the 21st century must provide services of the desired quality along with the promotion of health values for all on an ongoing basis.

Objective: The aim of this study was to investigate the current situation of human resources in health care service centers of Zahedan University of Medical Sciences in 2020.

Methods: This study qualitative study was conducted on health personnel of Zahedan University of Medical Sciences. A non-randomized purposive method was used to select participants in the study and this continued until data saturation (15 people). The data collection tool was a semi-structured interview. Latent content analysis method was used to analyze the data.

Results: The results lead to the extraction of a main theme called the current state of human resources, including seven sub-themes; Human resource management, employment, salaries, education and development, communications, motivation and transformation.

Conclusion: health care policy makers can solve the existing problems by adopting a specific management model, not delegating the purchase of human resources services to companies with conflicts of interest with the university, timely payment of corporate employees and increasing the attractiveness of human resource motivation.

Keywords: human resources, health transformation plan, comprehensive health service centers

Introduction

Achieving the goals of the organization requires the ability of human resources to perform the assigned tasks. Manpower is one of the most important factors in advancing the goals and improving the productivity of organizations. Therefore, improving the performance and improving the human resources is an undeniable need for organizations [1]. However, although attention to economic and structural change has increased in many countries, manpower is still viewed only as a factor of production along with other factors [2]. According to human resource management research, the performance of the organization increases and while creating a continuous competitive advantage, also plays an essential role in increasing productivity [3]. One of the most important efforts in the field of human resources is the development of a comprehensive document on human resource management in the health sector. The purpose of compiling this document is to maximize the utilization of the human resources of the health system in order to achieve the goals of Vision 1404, by integrating various programs related to this field, in accordance with a comprehensive document [4]. Changing the service delivery structures in the Health Transformation Plan created comprehensive health service centers. Comprehensive health service center by transforming the existing health care center in the region (if not), creating (accepting referrals related to prevention, care and target diseases) infectious and non-communicable (nutrition and diet counseling, mental health, social and

addiction, Oral health, genetic counseling, developmental disorders and environmental and occupational health will be among the health bases, and in addition, it will be responsible for monitoring and managing the health of the region and the health bases under its auspices [5]. Human resource management is an aspect of the resource generation function. Human resources for health (HRH) refers to all the people who are engaged in promoting, preserving, maintaining, and improving the health community. In Iran, HRH includes both registered and unregistered workforces in public and private health organizations, different types of institutions providing different level of preventive care, medical care, and public health and health promotion. The human resources of unofficial health sectors, such as traditional practitioners, volunteers, and community caregivers, should also be added to this list [6]. Accordingly, this study intends to pay attention to the new structure of human resources by examining the human resources situation of comprehensive health service centers and draw conclusions.

Methods and materials

The present qualitative study was conducted by content analysis method in the Zahedan University of Medical Sciences on managers and health experts in 2020. Participants were selected using non-randomized purposive method. What was intended was to use people who provide the most information based on the purpose of the research.

Due to the quality of the research, the following four criteria were used for the validity and reliability of the research. 1-Credibility: We try to make what is mentioned in the research results the same as it was considered responsive. In order to achieve this important, the following methods were used. Prolonged contact with the research environment. Continuous observation, review by participants, self-review, review by other researchers, and researcher credibility.

2-Reliability: For the degree of reproducibility of the data by other researchers, the presence of two people was used to conduct the interview separately but in parallel, then the findings of the two researchers were compared and the results were very close.

3-Verification capability: For this purpose, without using mentality and personal data, any personal bias and conflict of interest was avoided and the raw data, interpretations, suggestions and findings were carefully collected and analyzed by the research team. 4-Transferability: In order to be able to generalize the research results to other areas related to the different levels of medical sciences, and also instead of external validity in quantitative research, this criterion was used so that the study data set during the phase Data collection was described in great detail and the extent of development of each class with the relevant subclasses was determined. Also, in the data analysis stage, a clear and understandable coding and classification model was used.

Based on the objectives of the study, open and semi-structured interviews with specific question tools were used in the study. The place and time of the interviews were determined by coordinating and obtaining the verbal consent of the participants. Initially, the interviews were started by asking a general question and then the detailed questions were addressed. Some questions were included: What is the human resource status of comprehensive health service centers?, What is the status of human resource management in comprehensive health service centers?.

Interviews were conducted until the results were saturated. In addition, with the permission and verbal consent of the participants in the study, the sounds were recorded and immediately after the interview, the content was word-for-word transcribed on paper and data analysis began at the same time as data collection. After the implementation of the interviews on paper, each one was read several times and during the review, while performing the criteria of validity and reliability of the research, important content containing the code was marked in red and appropriate concepts or open codes were determined. The theme was identified. After that, based on the existing similarities and differences and continuous comparison, open codes were placed in similar categories based on the relevant theme. Also, duplicate codes were removed and open codes were placed in the same category based on similarity. What was relevant to each class was written in a table in front of the relevant class, which formed the sub-classes, and finally a number of important interviewees codes were recorded in quotation marks in the respective codes of the sub themes.

Results

A total of 11 people, including 7 men and 5 women, participated in this study. The average age of the participants in the interview was 39 years, and the majority had a work experience of 26-21 years, and the respondents had at least a bachelor's degree in medical sciences. The results of this study showed: The current situation of human

resources in comprehensive health service centers of Zahedan University of Medical Sciences includes a main theme as follows: Current status of human resources: Includes 7 themes: human resource management, employment, payroll, education and development, communication, motivation and transformation, which summarizes the themes, subthemes and examples of codes related to the current status of human resources in the university's comprehensive health service centers.

Human resources management

Physicalism at different levels of management has led to the lack of monitoring and evaluation based on goals and increases the likelihood of gambling at the level of comprehensive health service centers. Trial and error cannot bring the system to its goals. The interviewees stated that considering that from the very beginning, planning and management in the Ministry of Health was and is the responsibility of only doctors, therefore, from the top to the bottom, only doctor's care. It was mentioned somewhere that the authorities think that the higher your degree, the higher the literacy and management, and according to a tradition and norm, doctors are used as managers in all categories. The remarks of a participant who was a doctor himself: "In fact, the reason goes back to the old attitude of the ministry itself, that is, from the minister to the deputies, all of them are usually doctors in the same way."

Employment

The participants' statements showed that they did not wait for administrative formalities to strengthen the health team and recruited most of the health and service personnel in the form of companies beyond the organizational chart to complete the health staff based on the purchase of services. "A number of staff were recruited as a company and out of the organizational chart," says another manager.

Salary

Paying at the end of each month is one of the most important concerns for any workforce. And the employer is obliged to determine the financial resources payable to the labor force before hiring human resources in order to ensure the minimum attractiveness of human resources. What was found at the level of Zahedan University of Medical Sciences, in addition to delays in the payment of corporate salaries, there is inconsistency in the amounts paid by service purchasing companies. "I am also a nutritionist with a bachelor's degree, as well as my contract with a core company, but he is another company. Interestingly, our salary difference is close to 300 thousand tomans," says an expert in comprehensive health service centers. "The year of work experience as a company states that when they are hired, they think about their salary. We will get paid very soon. It is two months later to talk. They say this is the company."

Education and development

The interviewees stated that the health teams in the centers pay little attention to prevention, so that people expect more health services from the health team.

In fact, the health teams based in the centers are not trained in a community to seek to identify and solve people's problems, but rather wait for someone with symptoms to come to them and the health team to start a treatment

protocol. "We did not train the doctor, the nutritionist and the psychiatrist to be social. The nutritionist, as long as he is a student, teaches him to see the patient and write a treatment protocol for him. In fact, they are waiting for a person with symptoms to come," said one participant. "Before them to treat him."

Communications

Participants stated that when a physician is a manager and is unable to communicate with forces, he or she will not be able to evaluate based on existing criteria and design effective interventions for problems. Lack of communication with the health team and lack of supervision by the physician provide the necessary conditions for the formation of informal groups to prefer personal and team interests to organizational interests. The expert's statements with the former executive in the Deputy Minister of Health are the reason for pointing out this issue: "Teams have been formed that, in connection with the above, read everything to themselves and do not allow anyone to do so."

Motivation

Motivation is an important driving force in the targeted movement of human resources. And every organization seeks incentives or tries to keep the minimum to motivate. The results of interviews in Zahedan Medical Sciences showed that the staff of comprehensive health service centers are not motivated enough on many issues. Because some participants believe that career advancement, like the provision of other amenities, is based on lobbying and for specific teams. The health care worker says, "Sir, we do not want anything to improve our rights for ourselves and their families," or when we asked a participant with experience and specialized management skills why he does not play a role in the responsibilities of the health center, he said, "This "All words are not our responsibility, for those who have all the facilities of the university, even if they are not literate."

Transformation

Given that in the last 35 years the structure of manpower and the composition of the health team has not changed almost anything, if the demographic structure of the people has completely changed and consequently the health problems of the people have changed compared to the past, it was necessary to The composition of the health teams should be reconsidered. The participants stated; That attention to health prevention has been limited to paper and instructions, but apparently the most attention has been paid to treatment; On the other hand, infectious diseases were replaced by non-communicable diseases, and the Ministry of Health decided to take an important step in the transformation of health by making a general change in the composition of health teams and the way services are provided. Quote from one participant: "The other forces that were ready did not work beyond the treatment of the area, that is, they did not work on prevention or the first level."

Discussion

As the Ministry of Health seeks a major breakthrough in the provision of health services to the people, it is necessary to pay special attention to the human resources situation of comprehensive health service centers. The present study showed that due to the change in human resources of comprehensive health service centers by the Ministry of

Health, there are still weaknesses in the implementation of these changes at the provincial and city levels. As Peykanpour *et al.*, As a result of a review study on the achievements and challenges of the Health System Transformation Plan of Iran, inefficient human resource management was introduced as one of the important challenges of the Health Transformation Plan [7]. There are great weaknesses in human resource management, including physiology in managing affairs, lack of a clear management model, lack of index-based targeting, etc. in Zahedan Medical Sciences.

Behzad Damari *et al.* In the study Status of Human resources management in Iran's health sector and the path to development Showed: Lack of a comprehensive human resources management policy and inattention to the human resources management in the developmental plans are some of the most common problems in Iran's health sector [8].

The motivation of another class of this research was that in its subcategories it was found that employees are not only reluctant to improve their jobs but also have no plans for the quality of services and intervention to solve problems. Raikkonen *et al.* Employees who do not have sufficient support from senior officials, the quality of their services is low, and on the other hand, having the support of senior officials will increase the quality of services [9].

Bani Davoodi *et al.* In the study of the relationship between the effectiveness of in-service courses and job outcomes in Abuzar Hospital in Ahvaz showed that the relationship between in-service training and job satisfaction, organizational commitment and citizenship behavior is significant [10]. Education and research shows that the lack of standardization of training and the inadequacy of in-service training and staff needs is one of the problems of human resources in comprehensive medical service centers in Zahedan to the extent that it has caused lack of motivation among staff

Keshvari and his colleagues showed that university recruitment and hospital restrictions on staff selection, lack of performance-based payment system, lack of motivation and distrust of staff in solving problems are the challenges of optimal human resource management in the hospital [11]. Research shows that comprehensive health service centers and even the city health center have no role in the selection and employment of human resources, and the employment of personnel is outside the organizational chart and outside the rules. According to a study by Keshvari *et al.*, Salaries as a challenging category in research refer to late payments, lack of uniform understanding of payment instructions by financial experts, as well as differences in pay for a job by several companies as human resource problems.

Conclusion

Based on this study, we conclude that the human resources situation of comprehensive health service centers in Zahedan has the following characteristics: human resource management without a specific pattern, employment outside the organizational chart, misunderstanding of financial experts about payroll instructions Inadequate training and organizational and individual needs, informal communication for the benefit of the person, human resources are unmotivated.

Adopting a specific management model and employing management specialists at the helm of comprehensive health service centers, consulting for the development of health

care at the level of medical universities, organizing staff recruitment, not delegating the purchase of human resources services to companies with conflicts of interest with the university, Allocating and providing financial resources for timely payment of corporate employees' salaries, holding training courses based on the needs of the organization, eliminating lobbying teams and groups that have influence in non-specialized communications and decisions, and increasing the attractiveness of human resource motivation can Solve existing problems.

References

1. Aghighi A, Amerioun A, Sadeghi A, Tavasoli M. Assessing the readiness of selected military hospitals against unexpected events. *Journal of Physician and Nurse in War*,2012;7:18:4-7.
2. Pan American Health Organization (PAHO) and WHO 45th directing council. PAHO and WHO. Washington DC: PAHO and WHO, 2004
3. Bahrami Susan, Rajaepour Saeed, Aghahosseini Taghi, Bakhtiar Hassanali, Abadi Nasr. A clarification of simple and multiple relationships between strategic human resource management and technical innovation in the public universities of Isfahan. *Transformation Management Journal*. Serial Number 2 Summer and Autumn,2011:3(2):96-115.
4. Asghari saremi Ali, Markazi moghaddam Nader . Analysis of Success Crucial Factors for Human Resource Development at Health Sector Based on Q Methodology .*Quarterly Journal of Public Administration*,2015:3(11):27-46.
5. Abedi G, Soltani Kontai SA, Marvi A, Mazidi S, Abedini E, Abbasi Chaleshtary A. SWOT Analysis of Health Reform Plan on Healthcare Sector from the Stakeholder Perspective. *J Mazandaran Univ Med Sci*,2018;28:(166):199-212.
6. Bertone MP, Witter S. The complex remuneration of human resources for health in low-income settings: policy implications and a research agenda for designing effective financial incentives. *Hum Resour Health*,2015;13(1):1.
7. Mohammad Peikanpour, Sajjad Esmaeli, Nazila Yousefi, Ahmad Aryaeinezhad, Hamidreza Rasekh. A review of achievements and challenges of Iran's health transformation plan. *Payesh*,2018;17:(5):481-494.
8. Damari B, Ehsani-Chimeh E. Status of Human resources management in Iran's health sector and the path to development: A qualitative study. *Med J Islam Repub Iran*.(16Jul),2019;33:69. <https://doi.org/10.47176/mjiri.33.69>
9. Raikkonen O, Perala ML, Kahanpaa A. Staffing adequacy, supervisory support and quality of care in long- term care setting: staff perceptions. *J Nurs Adm*,2007;60:(6):615-26.
10. Banidavoodi Shohreh, Atabi Mahin. The Relationship between the Effectiveness of In-Service Training of Employees and Occupational Consequences in Aboozar Hospital in Ahvaz, Iran. *Payavard Salamat*,2017;11:2:94 – 103
11. Keshvari M, Arash Shirdel A, Taheri Mirghaedi M, Yusefi AR. Challenges in the Optimal
12. Management of Human Resources in Hospitals: A Qualitative Study. *J Qual Res Health Sci*,2019;7:(4):349-360.