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Assess the situation accountability Teaching Hospital in Imam Reza (AS) from the perspective of nurse's Kermanshah 2013

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ABSTRACT: hospitals to meet the need's health care, people formed. It must therefore be accountable in front of people. The purpose of this study was to evaluate accountability in Teaching Hospital of Imam Reza (AS) Kermanshah.This study was cross-sectional and descriptive. And is the correlation type. Data were collected using a questionnaire. Statistical population consisted of all nurses in Medical Center of Imam Reza (AS) Kermanshah (493 persons). Sample size, using Cochran's formula (216 cases), respectively. reliability ,using Cronbach's alpha equal to 786. Obtained. And validity of the method the contents (use of opinions of teachers and experts) were reviewed and approved.Our results show that, dimension financial, with 38.3% as poor, aspects of Legal (48.6%), management (29.9%), institutional (47.7%), professionals (47.7%) performance by 49.1% on average and aspect of personal (40.2%) were supreme. And finally accountability in the center, with 53.7% of was average.based on results, hospitals have programs for greater accountability, including incentive programs, employee empowerment programs to enhance the quality and…design and implement their To the satisfaction of patients and staff there to increase.
Keywords: accountability, financial, functional, professional, Teaching Hospital Imam Reza (AS)

INTRODUCTION

accountability, "to process is said to be based on citizens, government officials, to the actions, are responsible (Acne, 2000). One of the discussions that take large amounts of data and is important for the government's health issues. In many cases the development of a country on the parameters of health care, it is stated (Delavi, 2012). Day-to-day world governments to provide health care services effectively, efficiently, and technical to face a lot of pressure. changes and empowerment efforts, in developed countries and developing similar approaches to the health-care system to better performance except, such as downsizing, privatization, competition in services, performance and participation people. All these methods of accountability as a fundamental element in implementing Transformations and improving health system performance Emphasize. The current management system has many variations over the last decade according to which quality and efficiency of services as a result of these changes improved but much this change has not been done yet (Brinkerhoff 2004). Growing costs of hospital beds, the use of advanced technologies in the diagnosis of complex and expensive procedures, the need for competition with the private sector the absorption patients reflect and this is not practical unless improve the quality of services provided by public Hospitals (Sadaghiani, 2001). Today, major changes have been made in behavior of patients referred to the hospital. Patients more than ever official medical centers, doctors and nurses on how to treat, care and their own rights expect (mahbobi 2013). And according to Charter of Rights Act patient, this expectation is well justified and reasonable and hospitals are committed to improve the quality of their services increase public awareness of citizens in different communities, their expectations of government agencies, has undergone many changes. Citizens expect their organization's morals, laws, justice, equality, saving resources, efficiency in production, engage and empower them (clients) to give more attention (Shahbazi et al. 2012). Polls show that patients referred the public hospital, the way services are not satisfied. Shortage of hospital beds, lack of fitness facilities with a number of customers, limited facilities and resources, legal of funds getting out of hospital bills, especially in hospital beds are occupied, some of the problems referred to government hospitals and patient dissatisfaction. In other words, the weakness of public accountability, has tarnished the image of the hospital (Mahboubi et al. 2013), (Danaeefard et al. 1389). Due to the above factors, this research seeks to find answers to the question of how accountability in hospitals? It results Renani and Hajipour (2011) suggested that the use of information

technology (telephone, fax and e-banking services) will increase the accountability in the Bank. Khanlu and Zahedi (2011) in their study have concluded which increase or decrease ability of NGOs in the field of health and care and public participation in nongovernmental activities, two uncertainties facing these organizations are Iran 1404. It results Khanbashy et al (2011) suggests a positive effect of the variable accountability, the promotion of public confidence in the country. The results Mahboubi et al (2013) showed that, comparative fit index dimensions of questioning, which represents the degree of concordance the model and the data real. In this study agrees with, the one obtained, which indicated that the one-dimensional model research results Shahbazi et al (2012) suggests a direct and positive impact of public accountability, the confidence of the citizens of Metropolis Qom. Research results Danaeefard et al (2010) suggests that between moral competence administrators, and public accountability and positive significant relationship, there is about 0.04 percent.

METHOD

This research is cross-sectional, descriptive and is the correlation type. Data were collected using a questionnaire. Question was, likert spectrum five options of (very weak, weak, moderate, excellent and very excellent). Statistical population (493 person) includes all the nurses in Medical Center of Imam Reza (AS) Kermanshah. The sample size was calculated using the formula Cochran (216 cases) was obtained the reliability using Cronbach's alpha equal to 786. The content validity was obtained by the method (use of opinions of faculties and experts) was investigated confirmation.

Table 1. Abundance of and percentage of each Dimension

total		very excellent		excellent		moderate		weak		very weak		accountability Dimensions	Row
Percent	Abundance	Percent	Abundance	Percent	Abundance	Percent	Abundance	Percent	Abundance	Percent	Abundance		
100	214	8.4	18	11.7	25	49.1	105	25.2	54	5.6	12	Functional	1
100	214	2.8	6	3.7	8	34.1	73	38.3	82	21	45	Financial	2
100	214	5.1	11	18.2	39	48.6	104	22.4	48	5.6	12	Legal	3
100	214	11.7	25	26.6	57	29.9	64	24.3	52	7.5	16	Management	4
100	214	7.5	16	22.4	48	47.7	102	19.2	41	3.3	7	Organizational	5
100	214	5.1	11	29.9	64	47.7	102	9.8	21	7.5	16	Professional	6
100	214	17.3	37	40.2	86	27.1	58	13.1	28	2.3	5	personal	7
100	214	5.1	11	21.5	46	53.7	115	14	30	5.6	12	accountability	8

According to Table (1): The functional accountability by 49.1 percent on average by the nurses in the hospital was evaluated, Financial aspect with (38.3), percent poor form, legal Dimensions (48.6%), management (29.9%), organizations (47.7%), professionals (47.7%), as were average. An aspect of personal (40.2%) were assessed as excellent. It is also the accountability of the center with 53.7% moderate.

Table 2. the Kolmogorov-Smirnov test for normality of the measurement data

		accountability	Functional	Financial	Legal	Management	Organizational	Professional	personal
N		214	214	214	214	214	214	214	214
Normal parameters [a,b]	Mean	3.0654	2.9206	2.2897	2.9486	3.1121	3.1168	3.1542	3.5701
	Standard deviation	.88568	.96329	.93457	.91527	1.13689	.91436	.93926	.99870
Most Extreme Differences	total	.274	.266	.215	.244	.166	.252	.262	.241
	positive	.263	.266	.215	.244	.156	.252	.215	.161
	negatives	-.274	-.224	-.183	-.242	-.166	-.225	-.262	-.241
Kolmogorov-Smirnov z		4.013	3.894	3.148	3.569	2.425	3.683	3.831	3.530
Asymp. Sig. (2-tailed)		.000	.000	.000	.000	.000	.000	.000	.000

a. Test distribution is Normal.
b. Calculated from data.

According to Table 2, the results suggest that Sig accountability all Dimensions are less than 05. (Sig =. 000) Thus, assuming normality of the data is not accepted, in other words, non-normal data.

RESULTS

The results of descriptive variables: gender perspective, 42.1% men and 57.9% women. In terms of age, 28.5% were under 30 years of age, 59.8% between 31-40 years, 10.7% between 41-50 and 9% more than

50 years of age. From the perspective of a degree, diploma, 4.7%, 4.7%, Associate Degree, Bachelor's 77.6 percent and 13.1 percent were senior and higher. . In terms of marital status, 68.7% were married and 31.3% were single. From the perspective of experience, 22% of under five years, 26.2% between 6-10 years, 34.6% between 11-15 years, 7.9% between 16-20 years and 9.3% had more than 20 years experience.

Table 3. the relationship between dimensions of accountability with accountability using Spearman

accountability Dimensions			accountability
		R	.613
	Functional	Sig	.000
		N	214
		R	.455
	Financial	Sig	.000
		N	214
		R	.413
	Legal	Sig	.000
		N	214
		R	.510
Spearman's test.	Management	Sig	.000
		N	214
		R	.608
	Organizational	Sig	.000
		N	214
		R	.520
	Professional	Sig	.000
		N	214
		R	.522
	personal	Sig	.000
		N	214

According to Table (3) The results show that all aspects of accountability with improving accountability, there is a significant positive correlation (Sig =. 000), and the correlation between them is relatively high.

CONCLUSION

results show that dimension functional accountability was 49.1 percent on average; Financial aspects with 38.3% are poor, Legal Dimensions (48.6%), management (29.9%), institutional (47.7%), professionals (47.7%) Moderately Andaspect of personal (40.2%) were assessed as excellent with 53.7% as well as the accountability of the medium and expresses serious attention administrators and hospital officials in order to improve the quantity and quality of service, attention to employee satisfaction, and providing programs to increase accountability in the center. Between all Dimensions accountability with improving accountability, there are positive correlation shares (Sig =. 000), and the correlation between them is relatively high and this implies accountability at all levels of stakeholders, patients and internal customers or employee is. That increase job satisfaction, improve their quality of life and provide motivation can be improved accountability. Furthermore, findings of this study Consistent and compatible research results, Renani and Hajipour (2011), Mahbobi et al (2013), Shahbazi et al (2012), Danaeefard et al (2010), which expresses the necessity attention hospitals, to accountability as one important tool is providing better services patients and society.

REFERENSES

Aucoin P, Heintzman R.2000.The Dialectics of Accountability for Performance in Public Management Reforms. International Review Of Administrative Sciences, V.66.pp.45.

Brinkerhoff DW.2004.Accountability and health systems: Toward conceptual clarity and policy relevance, Health Policy and Planning 19: 371–9.

Danaeeifard H, Rajabzadeh A, Dervish A. 2010. explain the role Islamic moral competence, and service culture, in promoting public accountability in government hospitals. Journal of Medical Ethics and History of Medicine, the third (No. 4).

Delavi MR, ghorbani H, Symkany F. 2012. Evaluation of Hospital Information Systems ten public hospital under the supervision of Medical Sciences. Health information management, issue of the first (term I).

Khanbashy M, Zahedi ShS, Alvani M.2011. accountabillity of admission to strengthen public confidence. Journal of order, security and safety, the second number (fourth year).

Mahbobi M.2013. Design pattern to improve accountability in the teaching hospital iran. Thesis for PhD degree. Islamic Azad University, Science and Research.

Mahboubi M, Tabibi SJ, ghahramani F, Nasiripour AA, Gohary MR.2012. Model evaluation and validation of the various dimensions accountability in teaching hospitals in the country. Health Information Management.; 51 (16).

Sdqyany I.2001. organization and hospital management, Volume I and II, published by PC World, Second Edition.

Shahbazi M, Darwish H, Zareei F.2012. The impact of public accountability, to improve citizens' public confidence. Journal of managing public organizations; the first year (number one).

Sharifi Renani H, Hajipour M.2011. role of information technology in improving accountability to customers from the perspective of administrators and employees of the bank. Journal of Ethics in Science and Technology; number three (of six).

Zahdi ShS, Khanlu N.2011. Future studies accountability of NGOs in health and hygiene Iran 1404. Journal of Management Sciences; sixth year (No. 21): 47-76.