

Productivity and Efficiency of City Hospitals: A Semiotic Analysis for Turkey Case

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Abstract: City hospitals are new trends in especially growing economies. Although the main idea of collecting all health services and branches within a complex structure seems to be logical, there have been some negative applications and criticisms on city hospitals. Since health is a global public good, it was aimed in the research to evaluate city hospitals and their advantages and disadvantages based on hospital managers and health professionals. In the research, a semi-conducted interview was applied to 20 health managers. Results of the study showed that city hospitals are good solution for interdisciplinary bounding of health services within a city or a territory. On the other hand, past experiments and current public opportunities such as transportation, accommodations show that it is not useful to collect all health service labor and opportunities in a one center. In addition, managers attempted to the research stated that centralization of health services may cause difficulties in management functions.

Keywords: City hospitals, health, public health.

INTRODUCTION:

Developments in technology bring new health opportunities and technical equipments. In addition to these developments, increase in population also affects health services and health management. Growing cities have high volume of population, and their health service requirements constitute a mass of health services. Cities have their own structures and different social stratum. In theory, all people whatever their social stratum is have right to get needed health services. On the other hand, social stratum are not in theory, and they are part of daily life. Thus, private and public health services differ based on social and economic classes (Wei and Gao, 2017; Fisher et al, 2017; Kim et al, 2014). Even they are private or public organizations; their social environment affects their quality.

Differences within cities also affect health services given to the public. Moreover, differences in social structure also vary health service process. In low income or economic stratum, health organizations are more difficult due to criminal events in health organizations. Statistics on violence in health organizations show that criminal events in health organizations are more common low income social territories (Amoah, 2018; Evans et al, 2018; Lennartsson et al, 2018; Fiorati et al, 2018; Hall, 2018; Simandan, 2018; Fisher et al, 2017; Li et al, 2017). Thus, social variety also affects health services, and health organizations within a city differ based on their social stratum within a city.

City hospitals are new concept for health management compared to classical health services. In fact, it may be interpreted as centralization of health services. In developed countries, cities have their own characteristics, and it is not easier to built city hospitals as in developed countries. Thus, it may be argued that city hospitals are more common and a reality of developing and undeveloped countries. In addition, developing of city hospitals are also related with development of construction sector of the country (Kumar

et al, 2018; Ballou et al, 2017). For instance, Turkey has increased its construction sector value within the world for last two decades, and city hospitals has become more popular and important public projects.

In public health services, productivity and efficiency are two important concepts, since health is a public good. In addition, health is also an issue human rights and all individuals have right to reach needed health services. For this reason, increase in efficiency and productivity of health services also means increase in efficiently use of public goods. City hospitals with their high volume financial structure expenses are needed to be evaluated in this respect. For this reason, it was aimed in the research to evaluate efficiency and productivity of city hospitals in Turkey.

METHOD:

In this descriptive analysis designed research, focus group data collection method was used with semi-conducted interview. In data collection stage, researcher prepared following questions based on literature review;

1. What are the advantages of city hospitals?
2. What are disadvantages of city hospitals?
3. Do city hospitals give positive contribution to public health sector in overall evaluation?
4. What are lacks of city hospitals?

In order to get more sophisticated and effected results, focus group was conducted as five participants in a group. Participants were coded as P1, P2, P3 etc. Participants were selected from public and private hospital managers. Collected data were evaluated by using semiotics.

RESULTS:

Demographic properties of participants were given in the Table 1.

Table 1. Demographic properties of participants

Parameter	Value, n (%)
Gender	
Male	14 (70.0)
Female	6 (30.0)
Age	
Under 35 years	8 (40.0)
36-45 years	6 (30.0)
46 years and higher	6 (30.0)
Experiment	
Under 10 years	7 (35.0)
10-15 years	8 (40.0)
16 years and higher	5 (25.0)
Hospital type	
Public	16 (80.0)
Private	4 (20.0)

In the research, 14 male and 30 female hospital managers attempted to survey. 40.0% of them had under 35 years age, 30.0% of 36-45 years and 30.0% of had 46 years or higher age. 7 of participants had less than 10

years, 8 of had 10-15 years and 5 of participants had 16 years or higher job experiences. In total, 16 public and 4 private hospital managers were subjected to survey. According to semiotic analysis, results were given as in the follows by semi-conducted interview results.

1. What are the advantages of city hospitals?

According to hospital managers, the main advantage of city hospitals is increasing opportunities with various clinics, doctors, equipments (P1-P20). Second indicator collected from interview is new working area and new environment (P2, P3, P4, P5, P6, P7, P11, P12, P13, P14, P16-P20). In addition, the most of managers stated that increasing interest on health is another advantage (P1-P18). Six of managers stated that city hospitals also support innovation and productivity in health sector (P1, P2, P6, P9, P19, P20).

2. What are disadvantages of city hospitals?

All of the managers argued that the main disadvantage of city hospitals is transportation (P1-P20). Another important indicator of the research was difficulties in management and centralization (P1-P14, P16-P20). Participants think that managing more complicated structure is more difficult than decentralized health organizations. Other indicators were lack of finance (), economically unnecessary (), monotony of health services ().

3. Do city hospitals give positive contribution to public health sector in overall evaluation?

Only two of managers in private hospital (P7, P11) stated that overall contribution of city hospitals are negative. On the other hand, all other managers (P1-P6, P8-P10, P12-P20) argued that city hospitals will have positive contribution to public health. Managers also stated that its contribution will be realized not today, but in the near future.

4. What are lacks of city hospitals?

Managers' answers on this question were different. There were more indicators than other answers. Most used indicator was lack of transportation (P1-P18). Other indicators were difficulties in management (P1-P8, P10-P17, P19, P20), qualified managers within the country (P2, P6, P7, P11, P16), vocational educations in this area (P8, P12, P13, P17-P20), and technologic infrastructure (P2, P6, P11, P15, P16).

DISCUSSION:

City hospitals bring some advantages and disadvantages in health sector and especially for public health services. In theory, their construction and structures have modern opportunities and new facilities. In addition, new structures and buildings give opportunity to fulfill new requirements (Amoah, 2018; Evans et al, 2018; Lennartsson et al, 2018; Fiorati et al, 2018; Hall, 2018; Simandan, 2018; Fisher et al, 2017; Li et al, 2017). On the other hand, their productivity and efficiency are not only related with their structures, but also related with their environmental interactions.

First of all, transportation is one of the most important issues for city hospitals. Especially in emergence services, time to delivery has vital importance for reaching of hospitals. In addition, daily or routine clinics also must be easy to reach. Customers of hospitals as a service sector are ill or sick people. Thus, their transportation opportunities become more important then healthy people. However, city hospitals in Turkey have not enough transportation opportunities to meet requirements for patient transfer. Moreover, transportation in big cities is also a serious problem. It is reported that transportation opportunities are vital problems in Turkey. In future, transportation problems may be solved by new opportunities, ways and vehicles. On the other hand, their accessibility is not enough for today and near future.

Another important disadvantage of these city hospitals is difficulties in management. In organization management, literature reports that delegation of authority and decentralization are two main important management devices in modern organizations. They are not only needed to manage organizations, but they are also important for constructing more mobilized, dynamic, innovative and manageable organizations. On the other hand, it is difficult to manage a high volume organization than decentralized organizations.

CONCLUSION:

According to results of the study, it was seen that city hospitals have more disadvantages than their advantages. There may be many reasons for this result, but the main reasons are lack of public opportunities and difficulties in management functions.

In the past, Turkey has experienced specialized hospitals. In theory, specialized hospitals were logical, and suitable for decentralization and specialization. On the other hand, field experiment and results showed that all health organizations need some basic health clinics such as emergency, internal medicine etc. The main reason for this result was that individuals do not have a behavior to go hospitals or health controls unless they experience a health problem. As a result, it was experienced that a patient having lung disease for example also had another chronic disease related with the main health problem attempted to hospital for. Moreover, treatment of a disease was related with comorbid disease, and there was not this clinic in specialized hospitals. In short, it was seen that specialized hospitals are not efficient in the country.

City hospitals may be interpreted as a solution for problems faced in the specialized hospitals. On the other hand, there are still other problems related with city hospitals. In addition, some samples in the world such as UK showed that their economic values are not feasible and applicable. According to these results and reasons, it is recommended to evaluate city hospitals with multidisciplinary approach, especially including city and urban planning experts as well as economy.

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