Managing the Values of the Key Stakeholders in a Health-Care Setting

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Introduction

- Who are the key stakeholders in a health-care setting?
- Types of stakeholders in a health-care setting: (internal, external and interface)
- Importance of stakeholders management study
  1. To navigate its external environment and political issues
  2. For organizational success or goals
Literature Review

- Managing or collaborating with the key stakeholders
- Identifying the key stakeholders of a health-care setting (Kobrak, 2002)
- The stakeholder's vote approach
- The Analytical Hierarchy Process (AHP) of key stakeholders with health-care operational goals (Jackson, 2001)
Exploring Values of Key Stakeholders

- Medical staff
  - High clinical quality and innovations
- Patients
  - Clinical quality, access to health-care
- Hospital management
  - Profitability and cost containment
Exploring Values of Key Stakeholders

- Corporate office
  - Profitability and cost containment
- Media
  - Quality services and innovations
- Third party payers
  - Market expansion for service delivery
Exploring Values of Key Stakeholders

- Professional staffs (nurses)
  - High clinical quality and innovations
- Board of trustees
  - Profitability, meeting the organization's
- Federal government
  - Maintaining regulations, access to health-care and cost containment
- Elected public officials
  - Food service delivery to their constituency and cost containment
Research Questions

- Is managing the values of the key stakeholders of a health-care setting necessary...
  - To achieve organizational goals (merit)?
  - To achieve it's (worth)?
  - To determine it's significance?
Method

- **Design**
  - Cross-sectional
  - Survey of persons and groups that have interest in health-care setting

- A needs assessment of key stakeholder's values for unmet performance need of health-care setting

- Rating the values of key stakeholders; the numeric weight and sum and the qualitative weight and sum

- Value mapping
Needs Assessment to Identify Values

- The numeric weight and sum approach
  - Rating the values of key stakeholders
- The values are rated as
  - 3 - extremely necessary
  - 2 - moderately necessary
  - 1 - Not very (low) necessary
Objectives for Rating Values

- To determine the criteria of merit of values for unmet performance needs in a health-care setting.
- To identify essential values for achieving the unmet performance needs.
Weighting Values

- This consists of generating a grading rubric order corresponding to a metric of merit.
- The rated values are assigned weight percentages (0% – 100%).
- The grade percentage is calculated to generate a pairwise comparison.
Grading

- The overall grading is determined by
  - $90\% < x \leq 100\% = A - Excellent$
  - $80\% < x \leq 90\% = B - Very good$
  - $70\% < x \leq 80\% = C - Good$
  - $60\% < x \leq 70\% = E - Poor$
Weaknesses of Qualitative Weight and Sum

- Measurement problems resulting from arbitrary assignment of weights
- Inconsistency in quantifying values may impact the data and the weighted scores
Qualitative Weight and Sum

- Uses five levels for criteria of merit: E = essential, 0 = zero (not necessary), * star = very important, + + double plus = important and + minor important. (Scriven, 1991)
- A qualitative weight and sum of key stakeholders value for an unmet performance need.
- The ratings is justified based on the importance of values to achieve an unmet performance need.
Qualitative Weight and Sum

- The ratings is justified based on the importance of values to achieve an unmet performance need
- Values are rated as
  - Excellent = extremely necessary
  - Very good = moderately necessary
  - Good = Very necessary
  - Poor = Not very necessary
Conclusions

- Evaluative conclusions for satisfactory performance of a health-care setting can be defined as:
  - Extremely necessary values = Exemplary performance, real deficiency of consequence will exit for satisfactory performance
  - Moderately necessary values = Not exemplary performance, real deficiency of consequence for satisfactory performance
  - Not very necessary values = No real deficiency of consequences will exist for satisfactory performance
Value Mapping

Values -> Needs Assessment

Needs Assessment

- Primary Priority
- Secondary Priority

Secondary Priority

Unmet Performance Needs
Conclusion

- Managing the values of its key stakeholders will enable a health-care setting to evaluate merit, worth, and significance through:
  - Planning its operation
  - Vision
  - Justification of goals
  - Management procedures and activities
Conclusion

- Prioritize the stakeholders through its performance needs, the direct and indirect, the intended and unintended effects to achieving the organizational goals.