



Kerman University of Medical Sciences

School of Management and Medical Information

In Partial Fulfillment of the Requirements For the Degree MSc

Title:

**Investigation of Financial Resource Allocation to Implementation
the IRAPEN 2017-19 Period in Kerman City: Challenges and
Solutions.**

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تخصیص منابع مالی، معیارهای تخصیص، مرجع تصمیم‌گیری، چالش‌های تخصیص منابع مالی و منبع تامین اعتبار)، 21 کد و 15 زیرکد می‌باشد که به عنوان چارچوب شناسایی رویکرد و فرایند تخصیص اعتبارات مربوط به برنامه ایرانپن استخراج شده است را نشان می‌دهد.

نتیجه‌گیری

اتخاذ رویکردهایی از قبیل تامین منابع مالی از طریق مالیات انتخاب روش‌های تأمین مالی صعودی طراحی و عملیاتی نمودن نظام جامع اطلاعات، تعیین تعرفه خدمات درمانی به قیمت، واقعی ارتباط منسجم بین بخش خصوصی و بخش دولتی در ارائه خدمات درمانی شفاف نمودن سهم مشارکت مردم و دولت در تأمین منابع مالی نظام سلامت ساماندهی وضعیت خیریه‌ها در کشور از لحاظ منابع ورودی و صرف هزینه می‌تواند در زمینه تولید منابع مالی جدید مؤثر واقع گشته و اثر بخشی سیاست‌های بهداشتی و درمانی و عدالت محور بودن آنها را افزایش دهد. سیاست‌گذاران و مدیران نظام سلامت باید نیازهای واقعی نظام سلامت را اولویت بندی کنند و منابع مالی حاصل از مشارکت سازمان‌ها، مردم و دولت را بر مبنای این اولویت‌ها سازماندهی نمایند.

کلیدواژه‌ها:

ایرانپن، بیماری‌های غیرواگیر، تخصیص، منابع مالی

Abstract

Introduction and Objective: Non-communicable diseases are recognized as a clear threat not only to human health but also to the growth and economic development of communities. Given the limited resources for managing non-communicable diseases in developing countries, prioritizing and decision-making regarding the type of population-centric preventive interventions and strategies is crucial. Therefore, the present study aims to investigate the allocation of financial resources to the Iranpan program for its implementation in a case study in Kerman County.

Materials and Methods: This study is a qualitative study conducted in Kerman County during the years 1399-1401 (2020-2022). The study consisted of four phases: domain review, interviews, focus groups, and institutional mapping. In the domain review phase, documents and materials related to the Iranpan program, financial guidelines, and relevant reports were examined. In the second phase, 13 interviews were conducted with stakeholders and experts within the university and relevant organizations. The first interviews were in-depth, and then, based on the theoretical framework of the Iranpan program and the allocation model, semi-structured interviews were

continued until saturation was achieved. Then, the interviews were implemented. In the third phase, a focused working group of 6 individuals from different stakeholders was formed to review and summarize the previous steps, as well as examine the financial reporting and auditing framework of the Iranpan program if necessary. The data obtained from the research stages were coded using MaxQDA version 20.

Results: Based on the research results, data, and information gathered from the literature review or domain review, five categories were identified, including decision-making authority, resource mobilization, financial allocation models, allocation criteria, and challenges in financial allocation. The results of the interview phase yielded 5 categories (financial allocation models, allocation criteria, decision-making authority, challenges in financial allocation, and resource mobilization) with 21 codes and 15 sub-codes, outlining the framework for the approach and process of allocating credits related to the Iranpan program.

Conclusion: Adopting approaches such as financing through taxes, designing and operationalizing ascending financial procurement methods, establishing a comprehensive information system, determining healthcare service tariffs realistically, creating a coherent relationship between the private and public sectors in healthcare service provision, clarifying the role of public and government participation in financing the healthcare system, and organizing the status of charities in the country in terms of input and expenditure resources can be effective in generating new financial resources and increasing the effectiveness of health and healthcare policies with an equity focus. Policymakers and healthcare system managers should prioritize the real needs of the healthcare system and organize financial resources obtained from the participation of organizations, the public, and the government based on these priorities.

Keywords: IRAPEN, Non-communicable Diseases, Allocation, Financial Resources, Kerman

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