National Strategies of Ophthalmic Education in Iran

A Entezari 1, MA Javadi 2, *B Einollahi 2

1Educational Development Center, Ministry of Health & Medical Education, Tehran, Iran
2Ophthalmology Research Center, Labbafi Nejad Hospital, Shaheed Beheshti University of Medical Sciences, Tehran, Iran

Introduction

Global academic medicine is in a state of dramatic transformation, fueled at the end of the 20th century by unprecedented advances in biomedical science and upheaval in the economics of health care. The turbulent external environment, coupled with increasing instability in internal leadership, creates unsettling organizational change. The significant growth and increasing importance of technology have dramatically affected the practice of clinical medicine over the past decades. Advances in information technology offer the prospect of a further acceleration in what services has to offer to health care. Changes in medicine can have a big impact on the traditional scope of medicine. The fast pace of ophthalmology evolution can become a double-edged sword to the specialty. As ophthalmology continues to evolve and grow, ophthalmologists must be concerned with preparing ophthalmology for the future. Decisions in capital investments, ophthalmic education, mergers, outpatient clinics, and payment and liability issues will require practicing ophthalmologists to develop and follow up managerial, interpersonal, and learning skills that were not as necessary in the past (1). To become adept in the new ophthalmology environment and be able to...

Abstract

Background: Academic medicine is in a state of dramatic transformation. For this reason strategic thinking is the most essential part of educational planning. The main purpose of the present study was developing the strategic educational planning of Ophthalmology in Iran from 2007 to 2010.

Methods: A qualitative investigation using focus group discussion has been implemented successfully for developing educational planning. Six to twelve representatives of key stakeholders in the ophthalmic education of Iran participated to this study.

Results: Strengths, weaknesses, opportunities and threats of ophthalmology education in Iran were analyzed. Strategic goals in education, research, and health service providing domains were being developed. Educational goals were defined as training of human resources in accordance with the community needs at the level of general practitioner, specialist, and fellowships in ophthalmology. Research goals of the program were defined as scientific inter-departmental and international communications, in order to promote the level of education, research, and treatment in the country. Also, in the field of health services according to the community needs, providing services by the means of advanced and cost effective methods were defined as strategic objectives.

Conclusion: Based on this strategic plan in the last three years ophthalmic education in Iran shall be many changes in educational, research and health care provision for social accountability.

Keywords: Strategy, Education, Ophthalmology, Iran

*Corresponding Author: Fax: +98-21-22770938, E-mail address: einolahi.ba@yahoo.com
manage change and deal with difficult decisions, ophthalmologists need to develop a road map and define strategies. The concept of strategy has been borrowed from the military and adapted for use in business. Strategy is a term that comes from the Greek strategia, meaning “generalship.” In the military, strategy often refers to maneuvering troops into position before an enemy is actually engaged. Substitute resources for troops and the transfer of the concept to the business world begins to take form. In business, as in the military, strategy bridges the gap between policy and tactics (2). Several definitions of strategy have been stated throughout the past 25 years. Despite many definitions of strategy, no single definition truly captures its different dimensions. Depending on the situation, a strategy may be viewed alternatively as a plan, a pattern, a position, or a perspective (3-6).

Originally conceived in the business world, strategic planning is often used in medical schools and teaching hospitals and their constituent departments as a process to develop priorities and coordinate direction. However, strategic planning in the setting of academic medicine raises unique issues that are not present in traditional business environments (7,8). A department without a strategic planning perspective, instead of moving steadily toward those goals, will continually swerve off course due to an endless series of distractions that can prevent pursuing a vision and mission (9).

Strategic planning does not focus on the day-to-day operations of the association instead; this work involves long-range planning for the association with integration of its mission and vision. It involves looking into the future to determine what will constitute success for the association years down the road. Setting the strategic direction for any association includes identifying a plan that serves as a road map for allocation of energy and resources. It is this plan that determines how resources related to projects undertaken by the association’s volunteers and staff members are used (10). Ophthalmologists need to develop their strategies in light of changing market conditions. From a planning perspective, it is advisable to know what other ophthalmic centers are doing across the world, but it is more important to keep up with the nuances of the local market. The 21st century will need a very different type of ophthalmologist, one trained not just in treatment of eye disease but also in the efficient management to reduce visual impairment and blindness globally (1).

Over the last 25 years, Iran has made remarkable progress in the eye health with much improvement in various health indices but major challenges presently facing the health system. For this reason in Iran, as elsewhere, both the scientific community and educational policymakers are interested in setting the strategic planning for academic medicine. Therefore leaders in academic ophthalmology of Iran must create a vision for their academic activity embedded in a complex environment. A formal strategic planning process can be valuable to help shape a clear vision taking advantage of potential collaborations and to develop specific achievable long and short term goals. The present study attempted to determine a road map and strategic plan in ophthalmic education at the national level in Iran from 2007 to 2010. The authors describe the steps in a formal strategic planning process in ophthalmology in Iran.

Methods

A qualitative investigation using SWOT analysis (11) was implemented successfully for development of strategies of ophthalmic education in Iran. In this study a focus group discussion (FGD) was conducted on approximately 6-12 of representatives of key stakeholders in the ophthalmic education of Iran. Stakeholders were defined as the different agencies or interests involved in national level strategic planning, i.e. deputy of health of ministry of health
& medical education, deputy of education of ministry of health & medical education, and delegates of all residency programs of universities in Iran. FGD guided by a facilitator, during which group member's talk freely and spontaneously about a certain topics. A FGD aims to be more than a question-answer interaction (12-14). The idea is that group members discuss the topic among themselves, with guidance from the facilitator. Its purpose was to define vision, mission statement and core values and was to obtain in-depth information on strengths, weaknesses, opportunities, threats in ophthalmic education at national level in Iran (15). In the present study, a community & preventive medicine specialist with additional experience on strategic management in academic medicine was as facilitator and an ophthalmologist as moderator and a master of education as note-taker. Notes were initially handwritten in field notebooks, on the focus group guide and on special forms. After data collection, all handwritten notes were expanded into more complete narratives, and then entered into a computer. Typed transcripts were the most utilized form of focus group data. During the data analysis phase of the research, after data collection, transcripts were coded according to participants’ responses to each question and to the most salient themes emerging across the set of focus groups. Then a SWOT matrix for importance, force and impact of factor were developed and SWOT analysis was conducted.

SWOT analysis is an effective and simple planning technique which addresses one aspect of many strategic planning processes. Given the complex nature of modern health care systems, the ability to use this type of technique can enable health professionals to participate more fully in the analysis and implementation of health care improvement (16). After SWOT analysis, organizational direction in ophthalmic education in Iran was defined and strategic goals were developed.

**Results**

The vision of ophthalmology education in Iran for 2010 is integrated national process for training the competent ophthalmologists in educational and research activity to meet the public need for prevention, early diagnosis and effective treatment of eye problems.

The mission of ophthalmology education in Iran is enhancement in ophthalmic education, knowledge production and improves access to the highest quality eye care in order to preserve and restore vision for all peoples of the country.

Core values of ophthalmology education in Iran are holistic view, community orientation, continuous quality improvement, acquiescence of all stakeholders and improvement of social justice and medical ethics.

The results of SWOT analysis are shown in each of the four tables labeled ‘strengths’, ‘weaknesses’, ‘opportunities’ and ‘threats’ (Tables 1-4). SWOT matrix showed organizational direction of ophthalmology education in Iran is in strengths-threats (ST) position. Strategic goals in education, research, and health service providing domains were being developed. Educational goals were defined as training of human resources in accordance with the community needs at the level of general practitioner, specialist, and fellowships in ophthalmology, improvement of ophthalmology education in all levels and development of standard evaluation system, continuous improvement of knowledge, attitude and practice of ophthalmologist of the country and improvement of foreign resident acceptance. Research goals of the program were defined as scientific inter-departmental and international communications, in order to promote the level of education, research, and treatment in the country and improvement of applied community based researches. Also, in the field of health services according to the community needs, providing services by the means of advanced and cost effective methods and development of extra
frontier practice were defined as strategic goals. Thirty eight different systematic objectives and 182 actions and timelines were defined by consensus of all key stakeholders. Responsibility for each task was explicit and available for all universities and other policymakers and ministry of health and medical education. Furthermore, to motivate stakeholders, tasks were integrated in the current year’s objectives as performance criteria in each affected worker’s job description and performance review.

Table 1: Strengths of ophthalmology education in Iran

| Competent academic staff in ophthalmology programs |
| Effective communication between ophthalmology programs |
| Appropriate fellowship programs in universities |
| Elite physician as ophthalmology residents |
| Appropriate distribution of ophthalmology programs in country |
| Effective communication with educational policy makers |
| Existence of creditable publications |
| Wealth & variety of patients |
| Existence of appropriate ophthalmic research centers in country |
| Existence of ophthalmic research network in country |
| Reputat of Iranian ophthalmologist in the east Mediterranean region |
| Effective competition between ophthalmology programs in the country |

Table 2: Weaknesses of ophthalmology education in Iran

| Self direction of academic staff in ophthalmology programs |
| Inappropriate distribution of fellowships in country |
| Unplanned fellowships training in the country |
| Induced false demands by alumnus of ophthalmology in Iran |
| Deficient full time academic staff in ophthalmology programs |
| Transmittance of incompetent Iranian ophthalmology residents from other countries |
| Inappropriateness between researches and community needs (lack of domestic researches) |
| Lack of information about distribution of diseases in the country |
| Interest of alumnus of ophthalmology for invasive procedures |
| Lack of educational activity about low vision in all universities of the country |

Table 3: Opportunities of ophthalmology education in Iran

| 1 | Formation of formal strategic planning committee by ministry of health |
| 2 | Conferment of evaluation system of residents to all medical universities |
| 3 | Existence of cooperate scientific society in the country |
| 4 | Implementation of vision 20/20 program in health system of Iran |
| 5 | Available advanced technology in education in all medical universities |
| 6 | Available advanced technology for diagnosis & treatment in all medical universities |
| 7 | Interest of elite physicians for entrance in ophthalmology residency programs |
| 8 | Interest of private sector for advanced technologies |
| 9 | Partially good market for alumnus of ophthalmology in Iran |
Table 4: Threats of ophthalmology education in Iran

|   |                                                                                           |
|---|-------------------------------------------------------------------------------------------|
| 1 | Unstable health policies in country                                                        |
| 2 | Inequity in distribution of advanced technologies in country                               |
| 3 | Inequity in distribution of therapeutic equipments in country                              |
| 4 | Inadequate support of educational departments for equipments                               |
| 5 | Overloaded service provision in academic center                                            |
| 6 | Lack of laws for reception of foreign physician                                            |
| 7 | Lack of controlling system for import of new technologies in country                       |
| 8 | Inadequate support of advanced technology in country                                       |
| 9 | Lack of supervision system for educational publicity in mass media                         |
| 10| Lack of supportive system for special patients                                              |
| 11| Interest of ophthalmologist for special practice (Plastic & refractive surgery)            |
| 12| Inadequate insurance system coverage                                                       |
| 13| Lack of patient education for low vision                                                    |
| 14| Boycott and problems in purvey of special equipments                                       |
| 15| Lack of screening programs for common eye disease                                          |
| 16| Inadequate budgets for common eye disease                                                   |
| 17| Unsuitable international communications                                                     |

Discussion

A number of articles in the literature have articulated the relevance of specific strategic concepts to the practice of ophthalmology. Some of these articles have addressed value innovation, curriculum development, and activity-based costing. An even larger number of article covering various strategic concepts are available in the general health care management literature (1, 5, 17). Nevertheless, national educational strategies in medical sciences are still to be published.

This is the first strategic plan of ophthalmic education at national level but recently every Iranian organization conducts strategic planning and the formality of the process varies greatly from one organization to the next. Conceptually, the process is simple: managers at every level of hierarchy must ultimately agree on a detailed, integrated plan of action for the coming year or period. A strategic plan is a management tool that yields fundamental decisions and actions that shape and guide what an organization is, what it does, and why it does it, with a focus on the future. As with any management tool, it is used for one purpose only: to help an organization do a better job—to focus its energy, to ensure that members of the organization are working toward the same goals, to assess and adjust the organization’s direction in response to a changing environment. The strategic planning process helps organizations identify various strategic options to make intelligent choices in developing strategic directions and plans. The process is about planning because it involves intentionally setting goals (i.e., choosing a desired future) and developing an approach to achieving those goals. Organizations start formulating their strategies by considering a set of decisions to make.

SWOT analysis plays an important role in providing an organization’s constituents with a set of forecasts and assumptions about the future activity. It is of high importance to ensure that all stakeholders have access to the same set
SWOT analysis is not designed to determine whether the situation is "good" or "bad." It is a tool used to map the different forces acting at a given moment. This SWOT analysis shows that there are clear and substantial strengths and weaknesses in the current ophthalmic education program in Iran, intrinsically in groups. There are also a number of threats that may jeopardize the success of the current program, the most important being the unstable health policies in Iran.

In conclusion, changes are occurring rapidly in the education and practice of ophthalmology. The extensive demand for technology advances, epidemiologic transition, new ownership structure and competitive markets, and the trend of medical education in Iran have left educational organizations with the need to plan for their futures. Based on this strategic plan in the last three years ophthalmic education in Iran shall be many changes in educational, research and health care provision for social accountability. Results of this study amplify the necessity for supports of health decision makers in Iran.

**Ethical considerations**

Ethical issues (Including plagiarism, Informed Consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc) have been completely observed by the authors.

**Acknowledgements**

Financial source of this study was from Ministry of Health & Medical Education. The authors declare that there is no conflict of interests.

**References**

1. Tso M, Goldberg M, Lee AG et al. (2007). An International Strategic Plan to Preserve and Restore Vision: Four Curricula of Ophthalmic Education. *AJO*, 143(5): 859-865.
2. Nickols F. Strategy: definitions and meaning. Available from: http://www.home.att.net.
3. Drucker P (1994). *The theory of business*. Harvard Bus Rev, pp 24-29.
4. Mintzberg H (1994). *The rise and fall of strategic planning*. New York: Free Press, pp 63-72.
5. Andrews K (1980). *The concept of corporate strategy*. 2nd. New York: Dow-Jones Irwin, pp 20-24.
6. Porter M (1996). *What is strategy?* Harvard Bus Rev, pp 52-58.
7. Gordon J, Hazlett C, Cate O et al. (2000). Strategic planning in medical education: enhancing the learning environment for students in clinical settings. *Med Educ*, 34 (10) pp 841-850.
8. Schaefer AI (2002). The fault lines of academic medicine. *Persp Biol Med;*45 (3) PP 416–425.
9. Weitkamp MR, Thomdyke LE, Evarts CM (1996). Strategic planning for academic health centers. *Am J Med*, 101 (3) pp 309–315.
10. Levin R, Bhak K, Moy E et al. (1998). Organizational, financial, and environmental factors influencing deans' tenure. *Acad Med*, 73 (3) pp 640–644.
11. Pearce C (2007). Ten steps to carrying out a SWOT analysis. *Nursing Manag (Harrow)*, 14(2) p 25.
12. Kitzinger J (1994). The methodology of focus groups: the importance of interaction between research participants. *Social Health Illness*, 16 (1) pp 103-121.
13. Green J, Britten N (1998). Qualitative research and evidence based medicine, *BMJ*, 316 (18) pp 1230-1240.
14. Britten N (1995). Qualitative Research: Qualitative interviews in medical research. *BMJ*, 311(6999) pp 251-253.
15. Spallina JM (2004). Strategic planning—getting started: mission, vision, and values. *J Oncol Manag*, 13(1) pp 10-11.
16. Levinson W, Axler H (2007). Strategic planning in a complex academic environment: lessons from one academic health center. *Acad Med*, 82(8): 806-11.
17. Roy H (2001). International Ophthalmology Strategic Plan to Preserve and Restore Vision—Vision in the Future. *AJO*, 132 (3) pp 403–404.