



Responsiveness: A Measure to Improve Performance of Rehabilitation Organizations in Developing Countries

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Dear Editor-in-Chief

Nowadays, rehabilitation services and specialties are increasing. This expansion of services has led to competition in providing services between organizations. Therefore, rehabilitation organizations need to create a competitive advantage for their organization. One of the reasons why an organization needs to find a competitive advantage is to increase efficiency and improve organizational performance (1,2).

Different frameworks for assessing the performance of health organizations have been identified. The most famous of these is the framework provided by the WHO in 2000. This framework has been developed to measure the quality of non-clinical dimensions. In other words, organizations are responsive to patients' rational expectations. The Responsiveness Measure has eight dimensions in two categories. Respect to person is the first category that includes dignity, autonomy, confidentiality, and communication. The second category is called the customer-oriented, which has four dimensions: Right to choose, prompt attention, quality of basic amenities, and access to social support (3).

Why is responsiveness essential for assessing the performance of rehabilitation services?

In developing countries, rehabilitation services have a different structure than conventional medical services. There are differences such as poor insurance coverage, lack of rehabilitation departments in public hospitals, low access levels for people with disabilities, and so on (4,5). Therefore, measuring the response status in rehabilitation services is also different from the usual health services. People with disabilities (PWDs) as a citizen have a special status in the community. They also have special health and social needs. The social needs of these people are more impressive. Given that responsiveness dimensions are also social (non-clinical), then PWD's perspective is the most important factor in measuring the performance of rehabilitation centers (6). In some studies (7,8), there is a significance relationship between responsiveness and important outcomes of health services has been observed, such as better compliance with physician's orders, patient satisfaction, less resource consumption, and so on. However, few studies have done about the responsiveness status and its impact on



rehabilitation services in developing countries. The responsiveness status of rehabilitation organizations was examined for the first time in Iran (9). The results of this study showed that the responsiveness of the rehabilitation centers (governmental and private) was moderate to low. Among the eight aspects, social support, right to choose, dignity, and confidentiality were more important for Iranians PWDs (9).

What are the strategies for improving responsiveness in the rehabilitation system?

Since poor responsiveness can lead to discontent with service recipients and subsequently disruptions to the organizational process, addressing this issue should always be a priority for rehabilitation managers. Using responsiveness measures approved by rehabilitation trustee organizations (for example, The State Welfare Organization in Iran) can be an effective step to improve the responsiveness of centers.

Responsiveness promotion can be done at no cost or at a low cost. For example, training rehabilitation personnel/staff in communication, respect to person, and preserve dignity can be done with little cost. Increasing the rehab sectors for less waiting time, creating a social support system (such as creating special spaces for the patient's family), and providing opportunities for patient speaking with therapists (for the right to choose) are simple ways to improve accountability dimensions.

In general, more quantitative and qualitative studies are needed to investigate strategies for improving responsiveness and subsequently improving performance in the rehabilitation system.

Conflict of interest

The authors declare that there is no conflict of interest.

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