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Determinants affecting the Business Success of the Private Hospital: A Case of ITO Sai Gon - Dong Nai

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Abstract: Vietnam now has more than 170 private hospitals, with the right development direction, gradually meeting the needs of patients. The efforts of the non-public health sector are contributing to limiting the "bleeding foreign currency" according to people going abroad for medical treatment. The right development strategy helps private hospitals succeed to attract patients; private hospitals are constantly exploring the needs of the community, responding from the attitudes of care, to the service style, especially to professional qualifications and ability to treat complex pathologies. The long-term strategy of most private hospitals is to go in the direction of intensive development. The study results showed that there were 550 patients who interviewed and answered about 27 questions.
Data collected from December2016 to April 2017. This study had been analyzed Cronbach's Alpha, KMO testing and the result of KMO testing used for the next research of the regression. Patients' responses measured through an adapted questionnaire on a 5-point Likert scale (Conventions: 1: Completely disagree, 2: Disagree, 3: Normal; 4: Agree; 5: completely agree). Hard copy and online questionnaire distributed among 40.000 patients. I addition,seven components affecting the business success of ITO the private hospital with significance level 5 percent and then the researcher has policies improving the business success of the private hospital in the future.

Keywords:Private hospital, healthcare services, patient, service qualityand LHU

INTRODUCTION

The fierce competition of the market mechanism caused many private clinics and hospitals to lose money because they did not attract patients. But many private hospitals have the right direction, always uphold medical ethics; advanced medicine that has confirmed its position. Besides, the private health development are reducing overload for public hospitals that implementing the policy of socialization of public health services. And the private health sector has developed rapidly, helping to improve both the quantity and quality of public health. Moreover, the healthcare services are meeting the needs of the people better and better. In 2015, the country has more than 170 private hospitals, more than 30,000 private clinics. Many large hospitals with 400-500 beds invested in modern medical equipment, quality medical examination and treatment increasingly.

Private hospitals have a strategic vision and a long-term investment plan; private facilities have invested in medical equipment and technology not less than public hospitals such as MRI, radiotherapy, endoscopy, CT. In addition, Private hospitals have the multi-layered laser cutting, automated testing machine, semi-automatic... staffing system, doctors of private hospitals are well trained. Private hospitals are caring patients with bringing patients peace of mind, comfortable treatment here. Patients have begun to choose between private or public hospital treatment, and the development of private hospitals is contributing to the burden of overloading the public hospital system. The private hospital always wishes to bring the patients the opportunity to provide good quality and standardized medical treatment at a reasonable cost. Along with investing in modern equipment, the hospital is always interested in attracting qualified physicians, skilled training and medical ethics for medical staff. All doctors, staff and staff in the system are always aiming to serve the most attentive patients.

The above mentioned things, the researcher had chosen topic ***"Determinants affecting the business success of the private hospital: a case of ITO Sai Gon - Dong Nai"*** as a paper. This paper helps mangers of ITO who apply the research results for improving policy on the quality of healthcare services in the future.

LITERATURE REVIEW

Health care or healthcare is the maintenance or improvement of health via the diagnosis, treatment, and prevention of disease, illness, injury, and other physical and mental impairments in human beings. Healthcare is delivered by health professionals (providers or practitioners) in allied health professions, chiropractic, physicians, physician associates, dentistry, midwifery, nursing, medicine, optometry, pharmacy, psychology, and other health professions. It includes the work done in providing primary care, secondary care, and tertiary care, as well as in public health.

Access to healthcare varies across countries, groups, and individuals, largely influenced by social and economic conditions as well as the health policies in place. Countries and jurisdictions have different policies and plans in relation to the personal and population-based healthcare goals within their societies. Healthcare systems are organizations established to meet the health needs of target populations. Their exact configuration varies between national and subnational entities. In some countries and jurisdictions,

healthcare planning is distributed among market participants, whereas in others, planning occurs more centrally among governments or other coordinating bodies. In all cases, according to the World Health Organization (WHO), a well-functioning healthcare system requires a robust financing mechanism; a well-trained and adequately-paid workforce; reliable information on which to base decisions and policies; and well maintained health facilities and logistics to deliver quality medicines and technologies. **World Health Organization. Definition of Terms. Retrieved 26 August 2014.**

Human resource quality: Kaufman, Bruce E. (2008) showed that the human resources are the people who make up the workforce of an organization, business sector, or economy. "Human capital" is sometimes used synonymously with "human resources", although human capital typically refers to a more narrow view (i.e., the knowledge the individuals embody and economic growth). Likewise, other terms sometimes used include "manpower", "talent", "labour", "personnel", or simply "people".

A human-resources department (HR department) of an organization performs human resource management, overseeing various aspects of employment, such as compliance with labor law and employment standards, administration of employee benefits, and some aspects of recruitment and dismissal.

Physical facilities: It is not fully standardized yet, but that is the goal, since fully standardized equipment provides the highest level of safety. The complexity and variety in equipment vendors and models is immense, and this complexity creates more errors. This weakness the lack of equipment standardization was pointed out continually in using failure and effects mode analysis. Therefore, St. Joseph's is evolving toward equipment standardization. The hospital was able to purchase limited new patient monitoring equipment, and took care to assure that new and existing equipment were from the same vendor to give the user a similar feel and functionality, regardless of which equipment they were using. The hospital will continue to utilize this process to guarantee long-term equipment standardization within the facility.

Technology capability*:* It is for harnessing of Information and data play a critical role in the quality service delivery in hospitals (Allen, 2001). Investments in Technology that facilitate service assessment and improvement process is essential (Dutton and Starbuck, 2002). The hospital must show four main commitments: a willingness to invest in Information Technology; investments in Information Technology and in Quality Insurance departments with qualified staff that abstract medical records, analyze data, and facilitate the Quality Insurance process (Cibulskis and Hiawalyer, 2002). According to the Government of Kenya (2001) report: successful Technology strategy that needs to be employed by hospitals and this must involve four main commitments: a willingness to invest in Information Technology. Working with physicians and others to customize an information system to meet specific needs and culture of the institution; nurturing and encouraging buy in so new systems will be utilized and their benefits will be realized and devising information technology systems that provide real-time feedback to providers as they are caring for patients (GOK, 2001).

Management capability*:* it is the most important aspect of the Service delivery as Communication with patients is vital to delivering service satisfaction because when hospital staff takes the time to answer questions of concern to patients, it can alleviate many feelings of uncertainty (EFP, 2006). In addition, when the medical tests and the nature of the treatment are clearly explained, it can alleviate their sense of vulnerability (Friedman and Kelman, 2006). This component of service is valued highly as reflected in the in-depth interviews and influences patient satisfaction levels significantly (Pickton and Broderick, 2001). In addition, there is very little that is as important as finding a great CEO and leadership of a hospital. If there is one place to over invest in, it is leadership. A leader must be able to block and tackle plus be a business and marketing guru and generate cases and business for the hospital. It is a multi-faceted job that requires great talent.

Fund capability: Funds in service organizations, has been a constraint and an obstacle to other functions that contribute to service delivery (Adams and Colebourne, 1999). They suggest an enlightened approach to finance in service organizations. This consists of more participative and positive approach where far from being an obstacle, it contributes to strategic planning, costing systems, personnel motivation, quality control, continued solvency, and keeping outsiders‟ confidence in management (Arhin-Tenkorang, 2000).

In particular, there is a need to distinguish good costs that improves organizational capabilities and quality service delivery from bad costs that increase bureaucracy hence becoming obstacles to service delivery (Sun and Shibo, 2005). Allocated resources for health flow through various layers of national and local governments' institutions on their way to the health facilities (Blas and Limbambala, 2001). Financial accountability using monitoring, auditing and accounting mechanisms defined by the country legal and institutional framework is a prerequisite to ensure that allocated funds are used for the intended purposes (Oliveira-Cruz, Hanson, and Mills. 2001).

Information systems: It reflects the hospital commitment and willingness to invest in the tools that promote quality (Davis, Hughes and Audet, 2002). Nerenz and Neil (2001), he recommended the kinds of quality-related Information Technology investments that the hospitals need to make include. Moving to a paperless system that provides information at the right time (electronic medical records, e-hospital notes with input at bedside). Moving toward bar-coded medications and automatic dispensing. Coordinating patient admissions with bed capacity, immediate tracking of filled beds and daily changes in nursing needs (MacAuley, 2001).

A patient is any recipient of healthcare services. The patient is most often ill or injured and in need of treatment by a physiotherapist, physician, physician assistant, advanced

practice registered nurse, psychologist, podiatrist, veterinarian, or other healthcare provider.

Patient satisfaction is a measure of the extent to which a patient is content with the healthcare that they received from their healthcare provider. In evaluations of healthcare quality, patient satisfaction is a performance indicator measured in a self-report study and a specific type of customer satisfaction metric.

METHODS OF RESEARCH

In this study, the business success of ITO private hospital is the dependent variable but manpower, physical facilities, technology, funds, management, information system and patient that are independent variables.Methods and techniques of the study satisfy the need for methodological consideration and tools for data collection, analysis and presentation in virtual communities. This paper covers studies on various types of virtual communities, making this reference a comprehensive source of research for those in the social sciences and humanities.

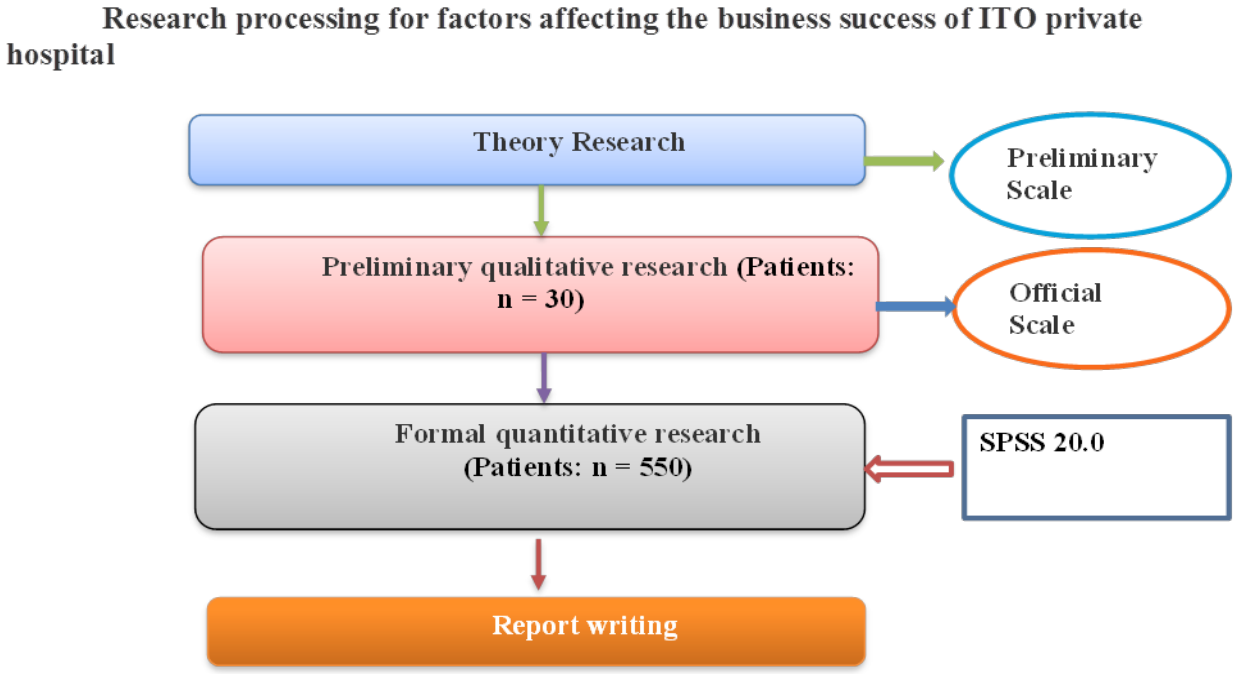

Figure 1: Research processing for the factors affecting the business success of ITO private hospital

After preliminary investigations, formal research is done by using quantitative methods questionnaire survey of 550 patients who related and answered nearly 27 questions. The reason tested measurement models, model and test research hypotheses. Data collected were tested by the reliability index (excluding variables with correlation coefficients lower < 0.30 and variable coefficient Cronbach's alpha < 0.60), factor analysis explored (remove the variable low load factor < 0.50). The hypothesis was tested through multiple regression analysis with linear Enter method. Conventions: 1: Completely disagree, 2: Disagree, 3: Normal; 4: Agree; 5: completely agree. Data collected were tested by the reliability index (excluding variables with correlation coefficients lower < 0.30 and variable coefficient Cronbach's alpha < 0.60), factor analysis explored (remove the variable low load factor < 0.50).

The data collected by the researcher and be analyzed by SPSS 20.0. Before having analyzed, the data screened to delete outliners to secure reliability. Creative research systems offers complete data processing services. I provide presentation-quality tables, text reports and graphics. In addition to or instead of paper copies, the researcher can provide the tables, reports and graphics on disk, ready for you to incorporate into a document or research presentation. the researcher can enter data from paper questionnaires or use a data file you provide. Most interviewing, scanning and database packages can produce a data file we can use. If you use the survey system, interviewing and tabulation software, the researcher can provide instruction files you can use for further analysis.

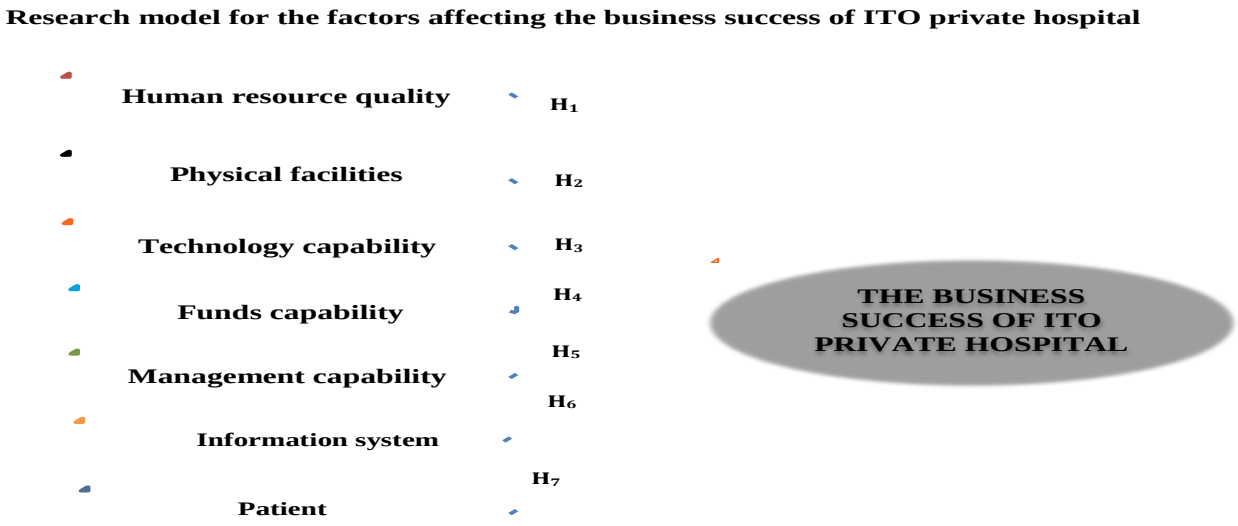

Figure 2: Proposed research model for the factors affecting the business success of ITO private hospital

Figure 2 showed that the sustainability of the private hospitals is the dependent variable but we had seven various factors: manpower, physical facilities, technologycapability, fund capability, managementcapability, information system and patient that are independent variables.Based on the aforementioned research questions the following hypotheses used to investigate each question:There areall of seven factors that have positive with the business success of ITO private hospital.

RESEARCH RESULTS

Table 1: Descriptive Statisticsand Cronbach's Alphafor factors affectingthe business success of ITO private hospital

No	HUMAN RESOURCE QUALITY (HR); Cronbach's Alpha is 0.920	Mean	S.D
1	HR1: ITO has the qualification of the doctors who are professional, proficient processes and task-solving skills	3.9582	.95527
2	HR2: ITO has the competence expertise such as the doctors who are understand about master patients or healthcare professional	3.3555	1.10455
3	HR3: ITO has the commitment such as the doctors who are the commitment of healthcare professional	3.6141	1.30541
4	HR4: ITO needs to place great emphasis on recruiting and retaining top-level physicians and nurses, accompanied by an effort to encourage these professionals	3.3042	1.36020
	FACILITIES CAPABILITY (F); Cronbach's Alpha is 0.886		
5	F1: ITO has the physical condition that is spacious and well-equipped, comfortable such as desks and chairs, hot and cold drinking water, air conditioning, clean bathrooms for all patients	3.136	.94026
6	F2: ITO has the organization chart of hospitals, tables, shelves document that are layout, scientific arrangement and easy for all patients to find	3.287	1.00252
7	F3: ITO has the hospital equipment that is invested modern and upgraded each yearfor all patients to join	3.344	.91414
8	F4: ITO has the hospital facilities that is enough rooms and good beds for all patients	3.262	.92561
	TECHNOLOGY CAPABILITY (T); Cronbach's Alpha is 0.758		
9	T1: ITO has the hospital technology that is invested modern and upgraded each yearfor all patients	2.975	.86705
10	T2: ITO has the hospital technology that is very helpful and modern for all patients	2.612	1.56685
11	T3: ITO has the hospital technology that is very helpful and wonderful to help all patients to solve the problem of healthcare	2.882	1.47402
12	T4: ITO has the hospital technology that is very quickly and feels confident for all patients to use them.	3.332	1.28343
	FUNDS CAPABILITY (FC); Cronbach's Alpha is 0.991		
13	FC1: ITO has the hospital funds that are enough money for all poor patients to use them.	3.536	1.09789
14	FC2: ITO has the hospital funds that are enough money for all doctors to research science and transfer to all patients.	3.555	1.09710
15	FC3: ITO has the hospital funds that are enough money for all doctors to study higher such as postgraduate, major 1, major 2, professional skills and knowledge...	3.539	1.10468
	MANAGEMENT CAPABILITY (M); Cronbach's Alpha is 0.783		
16	M1: ITO has the hospital staffs who are enthusiastically supported and solve any issues for the all patients	2.893	.87291
17	M2: ITO has the hospital management system that is very modern, polite for all patients and the "one stop model" in resolving the administrative procedures applied in the hospital.	2.910	.73653
18	M3: ITO has the hospital staffs who are fairness, equality at work for all patients and the administrative procedures are in the field of simple and straight forward patients	2.756	.91844
	INFORMATION SYSTEM (I); Cronbach's Alpha is 0.806		
19	I1: ITO has the website of the hospital that is regularly updated and provides full documentation, patient guidelines more	3.304	1.04502

	quickly		
20	I2: ITO has the hospital modern software system that applied online healthcare to help the patients convenient and save time, costs more than the previous system	3.342	.94254
21	I3: ITO has the Data transmission of the patients that is responsive to online and more quickly	3.045	.95310
	PATIENT (P); Cronbach's Alpha is 0.735		
22	P1: The patients who completely satisfied with the healthcare skills of the staffs at the ITO	2.935	1.39099
23	P2: The patients completely satisfied with the professional knowledge of the doctors at the ITO	2.963	1.03308
24	P3: The patients completely satisfied with the good behavior of the staffs at the ITO	3.112	1.29054
	GENERAL ASSESSMENT (GA); Cronbach's Alpha is 0.718		
25	GA1: The patients completely satisfied with the healthcare service quality of the hospitals such as doctors, management, facility, technology, information system…	3.319	.66238
26	GA2: The patient will introduce the friends to the ITO	3.243	.74941
27	GA3: The patient will go to the ITO again if The patient has the problem of healthcare	3.359	.66345

(Source: The researcher's collecting data and SPSS)

Table 1 showed that there were 550 patients who interviewed and answered about 27 questions but 526 samples processed and 24 samples lack of information. Data collected from December 2016 to April 2017.Std. Deviation (S.D) is around 1.00.Table 1 showed that all of Cronbach's Alpha is high >0.6; this is very high reliability statistics. All of variables surveyed Corrected Item-Total Correlation greater than 0.3 and Cronbach's Alpha if Item deleted greater than 0.5 and Cronbach's Alpha is very reliability. Such observations make it eligible for the survey variables after testing scale. This showed that data was suitable and reliability for researching.

Table 2: KMO and Bartlett's Test for factorsaffecting the business success of ITO private hospital

KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.795
Bartlett's Test of Sphericity	Approx. Chi-Square	9459.432
	df	276
	Sig.	.000

Total Variance Explained

Com.	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	5.076	21.149	21.149	5.076	21.149	21.149	3.455	14.396	14.396
2	4.418	18.408	39.558	4.418	18.408	39.558	3.045	12.688	27.084
3	2.386	9.944	49.501	2.386	9.944	49.501	3.002	12.507	39.591
4	2.208	9.201	58.703	2.208	9.201	58.703	2.619	10.911	50.503
5	1.926	8.024	66.727	1.926	8.024	66.727	2.166	9.023	59.526
6	1.172	4.883	71.610	1.172	4.883	71.610	2.151	8.964	68.490
7	1.100	4.583	76.193	1.100	4.583	76.193	1.849	7.704	76.193
8	.754	3.143	79.336						
9	.677	2.819	82.155						
10	.561	2.337	84.492						
11	.501	2.087	86.579						
12	.481	2.004	88.583						
13	.417	1.738	90.321						
14	.393	1.638	91.959						
15	.345	1.438	93.396						
16	.304	1.267	94.663						
17	.281	1.169	95.833						
18	.260	1.085	96.917						
19	.246	1.027	97.944						
20	.180	.751	98.695						
21	.157	.653	99.348						
22	.108	.450	99.798						
23	.028	.116	99.914						
24	.021	.086	100.000						

(Source: The researcher's collecting data and SPSS)

Table 2 showed that Kaiser-Meyer-Olkin Measure of Sampling Adequacy was statistically significant and high data reliability (KMO = 0.795> 0.6). This result was very good for data analysis. Table 2 showed that Cumulative percent was statistically significant and high data reliability was 76.193 % (> 60 %). There are 24 items for the factors that affecting the business success of ITO private hospital.

Table 3: Structure Matrix for factorsaffecting the business success of ITO private hospital

Code	Component						
	X1	X2	X3	X4	X5	X6	X7
HR1	.927						
HR4	.916						
HR3	.868						
HR2	.829						
F3		.864					
F2		.850					
F4		.801					
F1		.781					
FC1			.966				
FC2			.965				
FC3			.963				
T2				.820			
T3				.805			
T1				.708			
T4				.667			
M2					.889		
M3					.830		
M1					.770		
I1						.886	
I2						.778	
I3						.715	
P3							.865
P2							.801
P1							.523

(Source: The researcher's collecting data and SPSS)

Table 3 showed that Structure Matrix had seven Components. Component 1 was human resource quality(X1), Component 2 was physical facilities (X2), Component 3 was fund capability (X3), Component 4 is technology capability (X4), Component 5 was management capability (X5), Component 6 was information system (X6) and Component 7 was patient (X7) for affecting the business success of ITO private hospital.

Table 4: KMO and Bartlett's Test for the business success of ITO private hospital

KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.652
Bartlett's Test of Sphericity	Approx. Chi-Square	325.277
	df	3
	Sig.	.000

Total Variance Explained

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	1.920	63.996	63.996	1.920	63.996	63.996
2	.649	21.648	85.643			
3	.431	14.357	100.000			

Component Matrix[a]

Code	Component
	1
GA2	.846
GA3	.817
GA1	.733

(Source: The researcher's collecting data and SPSS)

Table 4 showed that the result was very good for data analysis. The business success of ITO private hospital showed that Cumulative percent was statistically significant and high data reliability was 63.996 % (> 60 %). Extraction Method: Principal Component Analysis. Rotation Method: Promax with Kaiser Normalization.KMO and Bartlett's Test for the sustainability showed that Kaiser-Meyer-Olkin Measure of Sampling Adequacy was statistically significant and high data reliability (KMO = 0.652> 0.6).Y: The business success of ITO private hospital.

Table 5: Factors affecting the business success of ITO private hospital

Model Summary[b]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.879[a]	.772	.769	.26639	1.689

a. Predictors: (Constant), X7, X2, X5, X3, X1, X4, X6

b. Dependent Variable: Y

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
	Regression	124.329	7	17.761	250.278	.000[b]
	Residual	36.761	518	.071		
	Total	161.089	525			

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
		B	Std. Error	Beta			Tolerance	VIF
	(Constant)	.064	.092		.694	.488		
	X1	.182	.012	.351	14.957	.000	.801	1.248
	X2	.234	.018	.344	13.239	.000	.651	1.537
	X3	.049	.012	.097	4.255	.000	.848	1.180
	X4	.170	.013	.309	13.104	.000	.792	1.262
	X5	.103	.017	.132	6.021	.000	.921	1.086
	X6	.136	.017	.204	8.011	.000	.681	1.468
	X7	.143	.014	.260	10.336	.000	.698	1.433

a. Dependent Variable: Y

Bootstrap for Coefficients

Model		B	Bootstrap[a]				
			Bias	Std. Error	Sig. (2-tailed)	95% Confidence Interval	
						Lower	Upper
	(Constant)	.064	.000	.084	.434	-.106	.224
	X1	.182	.000	.013	.000	.157	.207
	X2	.234	.000	.015	.000	.204	.264
	X3	.049	6.828E-005	.012	.000	.027	.072
	X4	.170	.000	.012	.000	.147	.194
	X5	.103	-.001	.016	.000	.072	.135
	X6	.136	.000	.017	.000	.101	.167
	X7	.143	.000	.014	.000	.115	.171

a. Unless otherwise noted, bootstrap results are based on 2000 bootstrap samples

(Source: The researcher's collecting data and SPSS)

Table 5 showed that Adjusted R Square (= 0.769) was statistically significant and high data reliability. In addition, Adjusted R Square reached 76.9 %. The results showed that all t value > 2 was statistically significant and high data reliability. Besides, the regression coefficients were positive. Multicollinearity (MC): Variance Inflation Factor (VIF) and Tolerance are two measures that can guide a researcher in identifying MC. VIF < 10 (1 < VIF < 10). This showed that there was not Multicollinearity. All factors affecting the sustainability of private hospitals with significance level of 5%. Besides, F = 250.278, sig = 0.00. This model is very good for policies improving the business success of the ITO private hospital.

CONCLUSIONS AND RECOMMENDATIONS

CONCLUSIONS

The study results showed that there were 550 patients who interviewed and answered about 27 questions. Data collected from December 2016 to April 2017. This study had been analyzed Cronbach's Alpha, KMO testing and the result of KMO testing used for the next research of the regression. Patients' responses measured through an adapted questionnaire on a 5-point Likert scale (Conventions: 1: Completely disagree, 2: Disagree, 3: Normal; 4: Agree; 5: completely agree). Hard copy and online questionnaire distributed among 40.000 patients. I addition, seven components affecting the business success of ITO the private hospital with significance level 5 percent and then the researcher has policies improving the business success of the private hospital following.

RECOMMENDATIONS

The above-mentioned things, the next research should survey more than 550 patients. This helps the data that is more significant. The study topic is very big area. The next research should survey more than 27 the questions (items) of other private hospitals in other provinces of Vietnam.Besides,the researcher has policies improving the business success of the private hospital following: (1) ITO continuesto perform the tasks of people's health care in the future, the health sector continues to determine interest, focused on the training and retraining of personnel; managers of hospital; enlist the resources invested in the training and retraining of personnel; implement the training of medical staffs in the future. (2) ITO continues to invest modern facilities that are to provide active support to physicians in the work of protecting and caring for the

people's health. However, at present, human resources are responsible for the exploitation, use, maintenance; repair and calibration of medical equipment in health facilities are both lacking and weak. (3) ITO continues to invest modern technologythat is a special kind of commodities of various types, always updated with the application of new scientific and technological advances, the technological change is always changing; medical equipment technicians must Regularly update professional knowledge and professional to meet the requirements. (4) ITO continues improving the training of new human resources is a long-term development strategy, but for the immediate future and in the coming years, it must rely on the existing human resources. Healthcare facilities should send technicians to large medical facilities; have strong and effective Medical Devices and Materials Rooms to study in the same workplace as personnel. It takes about 1 to 3 months or 6 to 12 months... If you have the conditions, send staff to study abroad in large centers for maintenance and repair of medical equipment. (5) ITO continues the development and application of information technology, electronic medical records and remote medical solutions are becoming an urgent need for reducing hospital admissions, reducing waiting times, reducing costs and improving the quality of health care benefits the community. (6) ITO continues improve the role and responsibility of nurses in treating and caring for patients. Nursing is one of the important tasks of the hospital. The combination of treatment with care, nourishment and recovery for patients is essential to improve the quality of comprehensive treatment. To accomplish the task, the nurse must apply professional knowledge with the attitude of dealing with close and caring behavior in the process of treatment. (7) ITO continues improve health insurance. It is the more necessary work now is to strengthen the application of information technology in the management and inspection of health insurance; payment of medical examination and treatment costs of new health insurance can overcome the above problems. At present, the Ministry of Health is working with ministries and social insurance agencies to develop common electronic work management software that may be applied at health facilities, healing in 2017.

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