推展聯盟醫院資訊系統整合之探討-以國軍醫院爲例

The Study of Integrated Information System for Alliance Hospital–An Example of Military Hospitals

中文摘要

公立醫院體系擁有聯盟之特性，其藉由行政體制的指揮權及公務預算的補助，統籌掌理特定醫療任務與社會服務工作，理因擁有競爭優勢，但公立醫療體系受限於行政程序，組織僵化、缺乏彈性，加上近年公務預算逐年減少，相較於私人醫院體系的靈活，公立醫療體系樹立之績效與形象已不若既往。

國防部於民國 91 年底，奉監察院要求參照行政院衛生署中部辦公室成功發展署立醫院策略聯盟資訊系統(簡稱 SAIS)的方式，推展國軍醫院資訊系統整合 (簡稱 MISI) ，國防部軍醫局自 92 年推展迄今，已完成共同資訊系統導入七家國軍醫院。本研究藉已上線之醫院爲個案，瞭解 MISI 在推展中可掌握的關鍵成功因素有那些？並比較 MISI 與 SAIS 二者間的差異，以作爲國軍導入後續醫院、推展二代資訊系統時策略調整的依據。

本研究爲了比較 MISI 與 SAIS 間關鍵成功因素的差異，?照行政院衛生署中部辦公室發展署立醫院策略聯盟資訊系統關鍵成功因素之研究，以?意抽樣選取 4 位院長，7 位 CIO 組成得爾菲小組調查蒐集資?，以描述性統計彙總研究結果提出研究成果與 16 項結?與建議。

本研究針對 MISI 歸納出五?16 項關鍵成功因素，其中成本優勢構面與 SAIS 同爲最顯著影響因素，環境構面與資源構面之重要性則與 SAIS 不同。成本優勢包括經濟規模、交互關係、成本分攤三個因素，皆能帶給?盟成員實質??，而藉由?盟資訊系統推展，能爲?盟醫院明顯?低成本、提昇競爭?，這與傳統觀?資訊系統在企業所扮演角色有很大差?。16 項因素中，平均比重大於 4 之關鍵成功因素有 8 項：依序爲同業競爭、交互關係、政府政策明確、掌控預算、強迫加入、成本分攤、經濟規模、公務預算逐?遞減等，與 SAIS 之關鍵成功因素重要序位上略有差?；顯示，雖然同屬公務之二個醫療體系，會因組織性質、資源不同而有所差異。因此在推展聯盟資訊系統整合時，應視組織特性略作調整。另本研究顯示國軍醫院聯盟以強迫加入方式，爲重要之關鍵成功因素，而高階主管支持在本研究之重要性相對偏低，與一般概念有落差。

英文摘要

Public hospitals possess usually alliance hospital’s characteristic that is to leverage public financial subvention and administrative command to serve specific medical mission and social work. As might be expected when facing the competition for public hospital, in particular, there were more advantages with respect to those resources provided by government. Nevertheless, opportunities for more proactive

management of public operation were missed due to bureaucratic structure and the decreasing budget from government. As a result, compared to the flexibility of private hospitals, the image and efficiency of public system have been faded gradually.

At the end of year 2002, the Control Yuan has requested the Ministry of National Defense to establish Military Hospital Information System Integration (MISI) in terms of the Strategic Alliance Information System (SAIS) developed by the Department of Health (DOH). Up to year 2003, the Medical Affairs Bureau has achieved to implement the MISI into seven different military hospitals. In this research, we compare the difference between MISI and SAIS from these seven hospitals and find out the critical success factors when developing the MISI, which will also act as a basis for the bureau to adjust strategy while promoting the 2nd generation MISI and ongoing implementation.

To identify the difference of critical success factors between MISI and SAIS, we have followed the study of strategic alliance hospitals as developed in DOH and determined the sampling of 4 superintendents, 7 CIO to be the members of Delphi panel who are well positioned to investigate、collect information and formulate 16 propositions based on statistic description and result. Upon the completion of data analysis, conclusions and suggestions were drawn from the findings of this study. This research has concluded 5 classes and 16 propositions as the critical success factors while developing MISI. Specifically, the cost advantage is the most influential factor for both MISI and SAIS; the environment and resource factors have different degree of importance between MISI and SAIS. The cost advantage comprises economic scale、interaction relationship、cost sharing that bring significant benefits to alliance members. Involvement in MISI development is found to be particularly useful and rewarding compared to traditional information system, members will be enhanced to fully integrate routine requirements and have potential to consolidate competitiveness and drive down cost. Among these 16 factors, there are 8 critical success factors averaged higher than 4 and the priority is also different from SAIS, which are : competition in the same domain、interaction relationship、precise government policy、budget control、compulsory participation、cost sharing、economic scale and decreasing governmental budget support. On the other side, this research also point out the result will be varied according to different resource allocation and structure even two hospitals are under the same public medical system. It is essential to review and adjust with organizational characteristics while integrating alliance information system to ensure all needs and elements are fully considered. Further, one of the keys to successful implementation is compulsory participation of MISI, the role of top management support is relatively

marginal from the viewpoint of general business cognition. Public hospitals possess usually alliance hospital's characteristic that is to leverage public financial subvention and administrative command to serve specific medical mission and social work. As might be expected when facing the competition for public hospital, in particular, there were more advantages with respect to those resources provided by government. Nevertheless, opportunities for more proactive management of public operation were missed due to bureaucratic structure and the decreasing budget from government. As a result, compared to the flexibility of private hospitals, the image and efficiency of public system have been faded gradually.

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