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Expert Panel

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(consensus measurement)
(consensus development)
(Delphi)

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(alpha internal consistency
coefficient)

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(Weighted)

Nominal Group Technique

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(Fink A. Kosecoff J, ()
Murphy .et al. 1984)

Medline (1966-1996)

Social PsychLIT (1974-1996) , ()
Science Citation Index (1990-1996)
ABI Inform and Sociofile

(Murphy M.et al. 1999) Meta Analysis

(Mays N. and Pope C.
.2004)

Consensus (consensus methods)
(Jones J.M.G.,
:Hunter D. 1995) (consensus measurement)
(consensus development)

Feedback

The Delphi process
The nominal group technique (NGT)
The consensus development conference

(Beers M.H.,) et al. • (key informant)
,1991 , Chin J., Sato P.A., et al 1990)
Khan J.P. S.J., et al • (Delphi,
(Fraser ; 1993; and Crotty M. 1993)
,C.E., et al 1992 Nominal Group, etc.)
(Moscovice •
I. et al 1988)

(Passannante

M.R., et al 1993)

(Mays N.

and Pope C. 2004)

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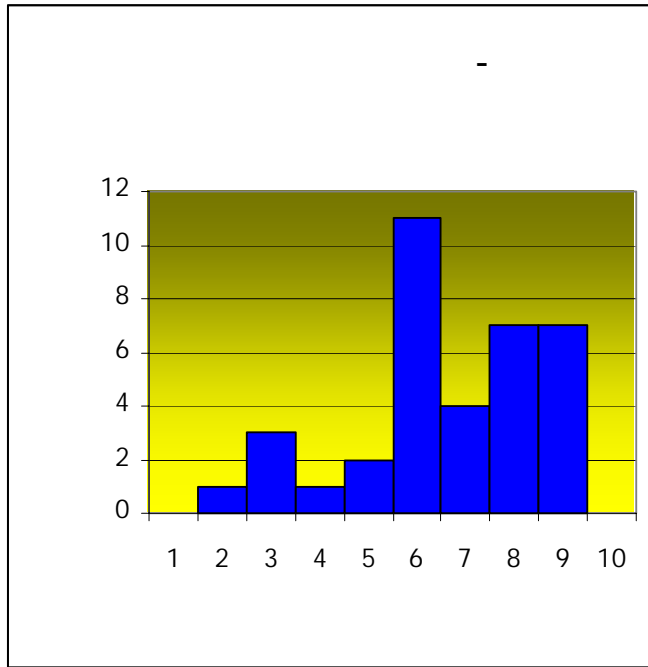
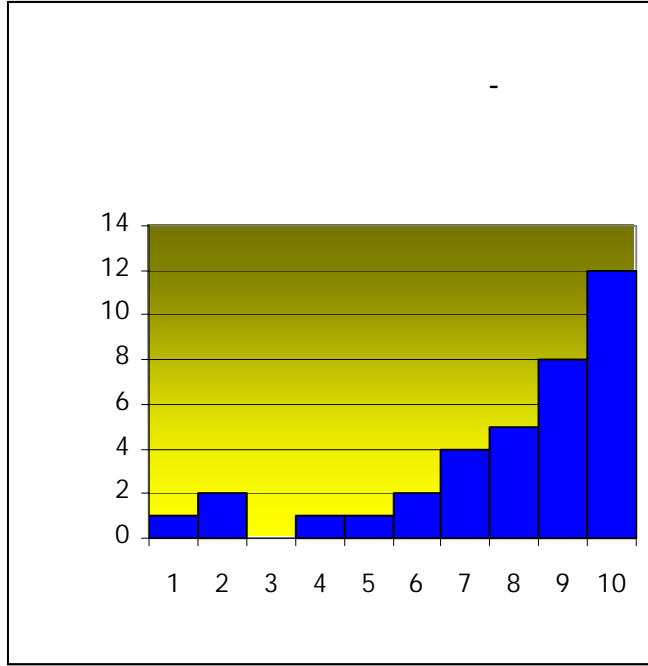
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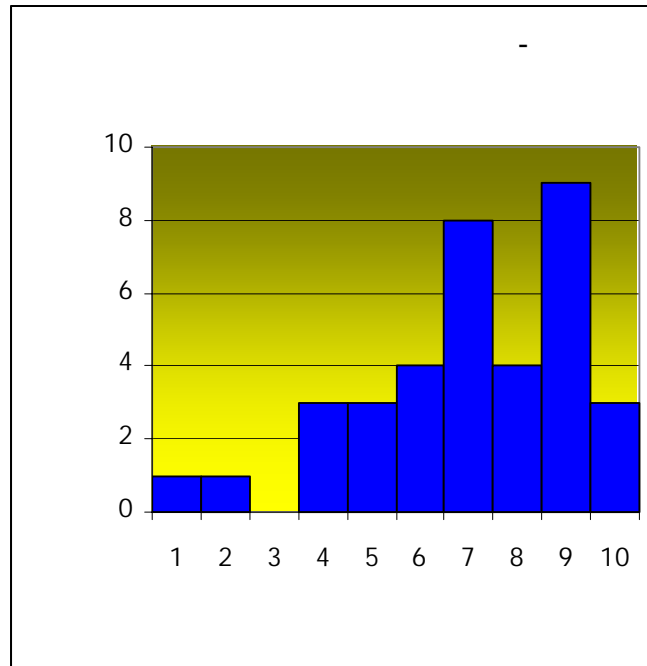
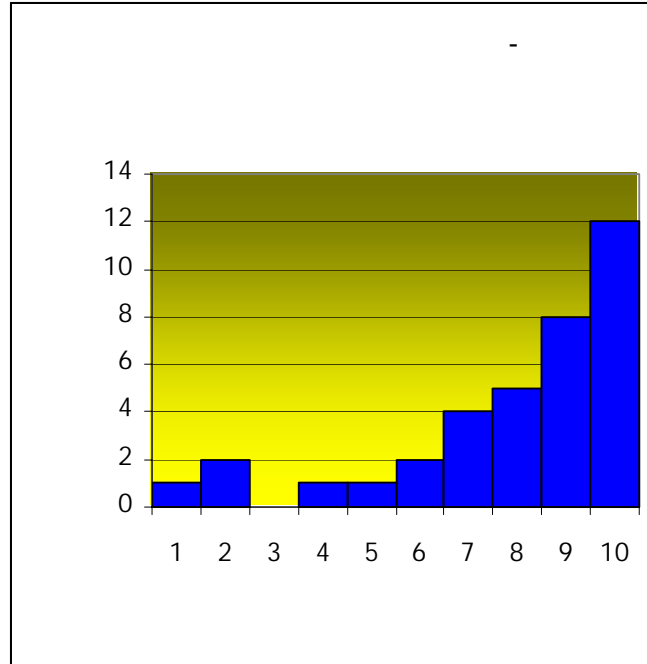
(Response rate)

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Passannante M.R., Restifo R.A., Reichman L.B. (1993) Preventive therapy for the patient with both universal indication and contraindication for isoniazid. *Chest* **103**:825-31.

Mays N., and Pope C. (2004) *Qualitative Research in Health Care* 2nd edition © BMJBookshop.com.

Fink A., Kosecoff J., Chassin M. and Brook R.H. (1984) Consensus methods: characteristics and guidelines for use. *American Journal of Public Health*. **74**:979-83.

Black, N., Murphy M., Lamping D., McKee M., Sanderson C., Askham J. and Marteau T (1999) Consensus development methods: a review of best practice in creating clinical guidelines. *J-Health-Serv-Res-Policy*. **4**(4): 236-48.

Jones J.M.G. and Hunter D. (1995) Consensus methods for medical and health services research. *Br-Med-J*. **311**:376-80.

Beers M.H., Ouslander J.G., Rollinger I., Reuben D.B., Brooks J. and Beck J.C. (1991) Explicit criteria for determining inappropriate use in nursing home residents. *Arch Intern Med* **151**:1825-32.

Chin J., Sato P.A. and Mann J.M. (1990) Projections of HIV infections and AIDS cases to the year 2000. *Bull-World-Health-Organ*. **68**:1-11.

Khan J.P., Bernstein S.J., Leape L.L., Hilborne L.H., Park R.E., Parker L., et al. (1994) Measuring the necessity of medical procedures. *Med Care* **32**:357-65.

Crotty M. (1993) The emerging role of the British nurse teacher in Project 2000 programmes: a Delphi survey. *J Adv Nurs* **18**:150-7.

Fraser C.E., Smith Q.W., Luchi R.J. (1992) Geriatric fellows' perceptions of the quality of their research training. *Acad-Med*. **67**:696-8.

Moscovice I., Armstrong P., Shortell S. (1988) Health services research for decision-makers: the use of the Delphi technique to determine health priorities. *J Health Polit Policy Law* **2**:388-410.

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Views and challenges regarding formation of new "Vice-Chancellor of Health" in Tehran University of Medical Sciences - a Delphi study

Yunesian M.,* (M. D., PhD.), Shariati M.(M.D, MPH), Zamani Gh.(M. D., PhD.)

To creation and measurement of consensus regarding formation of new Vice Chancellor of Health in Tehran University of Medical Sciences (TUMS).

Using a three-iteration Delphi procedure, consensus was built and measured among experts about different issues of joining of current Vice-Chancellors of Treatment and Health, and formation of new Health Vice-Chancellor in TUMS. Forty two experts of Ministry of Health, TUMS, other medical universities of Tehran, Management and Planning Organization, and other health researchers were entered this study. Feedback from the aggregate responses of the panel was used to construct questionnaires employed in subsequent iterations of the Delphi. Likert scale was used for assessment of opinions; and consensus was defined as agreement or disagreement of at least two third of respondent about a subject.

Consensus was attained in 27 out of 36 fields that were presented as the third round of study.

Consensus on the necessity and feasibility of the formation of new vice - chancellor in TUMS was achieved after three rounds of the Delphi process. The panel converged to form a consensus upon necessity of joining from different perspectives including shared duties of the two areas, strengthening community oriented approach, improvement of the quality of services delivered and accordance with ministry of health.

Conclusion: The experts participated in this study achieved consensus on the necessity and feasibility of formation of new vice - chancellor of Health in TUMS.

Key words: *Delphi, consensus, health, qualitative*