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Editorial

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Investigation of the Knowledge Level of Hospital Managers About Strategic Management Tools and Their Use

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Abstract

Aim: Effective and efficient implementation of all elements of strategic management is important for health organizations to achieve their future goals. This study aims to examine the knowledge levels of hospital managers about strategic management tools, their usage of these tools, and the priorities and needs in tool selection.

Methods: The population of the study is the managers working in private hospitals in Antalya Province. 90 managers constitute the sample of the study. The data were collected by face-to-face questionnaire method. The questionnaire includes sociodemographic characteristics form and statements to measure the level of knowledge and use of strategic management tools. Mann Whitney U and Kruskal-Wallis tests were applied to examine the differences between groups, and Spearman Correlation Analysis was applied to examine the relationships between variables. SPSS.25 Package Program was used to analyze the data obtained. Statistical significance was accepted at 0.05 level.

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Results: 59% of the participants were female, 63% had a bachelor's degree, and the majority (41%) were middle managers. Those who did not receive managerial training and strategic management training were the majority (54% and 71%, respectively). When the knowledge level of the managers about strategic management tools was analyzed, mission and vision (98.9%) received the highest score, and value chain analysis (73.3%) received the lowest score. It was observed that the priorities of the administrators in the selection of strategic management tools were different between the groups according to gender, level of education, and type of school graduated from. In addition, statistically significant relationships were found between the priorities in the selection of strategic management tools and age, professional experience and years of working in the organization.

Conclusion: Managers have limited knowledge and use of strategic management tools and there are differences in the selection of strategic management tools according to their sociodemographic status.

Keywords: Health management, strategic management, private hospitals

INTRODUCTION

The concept of strategy, which comes from the Greek word "strategos", initially emerged in the military field, but over time, the meaning of the concept has evolved and has been applied to other human activities, especially business strategies (Fuertes et al, 2020). In today's dynamic and competitive environment, it has become an indispensable part of the business world (Susanto et al, 2023). Strategy allows an organization to structure its resources and capabilities to meet the needs of the environment in order to gain competitive advantage. The process of undertaking a strategy is referred to as strategic management (Henry, 2021, p.7). The purpose of strategic management is summarized as the effective and efficient use of organizational resources in order to achieve the goals of the organization (Ülgen and Mirze, 2010). In this context, strategic management includes identifying the resources, strengths and weaknesses of the organization and creating an action plan that will enable the organization to achieve its long-term goals (Susanto et al, 2023).

Strategic thinking is a valuable tool that can help organizations consider their future direction and identify ways to stay relevant in an ever-changing world. It includes the evaluation of the evolving needs of an organization's stakeholders and the changing technological, social, demographic, economic, legal/political and competitive environment (Ginter et al, 2018, p.16). Scientists who use the concept of strategy in the field of business often associate this concept with

the competitive advantage of businesses. Kotler et al.'s (2014) definition of strategy is associated with the effective plans that businesses make to achieve their goals and the management of resource allocation in accordance with these plans. Porter (1996) underlined that strategy guides businesses in determining the actions that will differentiate them from their competitors while determining their fields of activity and talked about the original value of being unique. Henderson and Mcadam (1998), on the other hand, examined all the action plans developed by businesses to achieve competitive advantage and prepared to make the advantage sustainable, under the heading of strategy, and stated that they serve to differentiate businesses from their competitors by gaining awareness of advantages and disadvantages. Ülgen and Mirze (2010) explained all long-term, result-oriented decisions made as a result of businesses analyzing their competitors' activities and determining their own goals with the concept of strategy.

Determining strategies based on the structural characteristics of the business, its culture and existing resources, especially human resources, selecting the most appropriate strategy, implementing it and evaluating the results are of critical importance in increasing business performance. Strategies that act as a guide or compass to overcome uncertainty with the right approach make it easier to manage the future by giving the business a proactive perspective (Çubukçu, 2018).

Strategic management is the process of evaluating, developing, and implementing strategies to maintain or increase competitive advantage (Nicole et al, 2022). It is important in health services, as in all fields. Strategic management began to be used seriously in healthcare organizations since 1983 (Ginter et al, 2018). There are a number of issues that can be identified today that are driving health care organizations towards strategic management. One of these is changing customer demand. Healthcare organizations are trying to satisfy increasingly demanding users. In addition, organizations need internal changes to keep up with the rapid changes in technology (Speziale, 2015). Another is that the number of competitors is increasing every day, providing a strong competitive environment in the sector. Although the number of hospitals providing secondary and tertiary healthcare services in our country has increased over the years in all sectors, the most obvious increase has been in the private sector (Kurtluk and Altındağ, 2022).

In this context, the strategic thinking and management skills of the managers of healthcare organizations are very important. Underlining that the future of businesses lacking a strategy is

uncertain, regardless of the mission of the organization, researchers emphasize the importance of closely following medical and technological developments, resource use efficiency and costs in healthcare institutions, as well as changes and developments in all related sectors, since human health is in question. Every decision to be taken within the scope of strategic management should also be tested with scientific methods and analyzed regarding the current and future process of health policies (Soylu and İleri, 2010).

Clark (1997) defines strategic management tools as methodological tools that offer different methods, techniques and approaches to organizational managers in strategic decision-making processes. When the literature on strategic management tools is examined, it is seen that they are the subject of study by researchers in different fields. Within the scope of this research, 16 strategic management tools among the 25 strategic management tools included in Rigby and Bilodeau's (2013) study were discussed in terms of adaptability to private hospitals.

This study aims to examine the knowledge levels of hospital managers about strategic management tools, their usage of these tools, and the priorities and needs in tool selection.

1. RESEARCH METHODOLOGY

The study was conducted using data obtained cross-sectionally with the quantitative research method.

Population and Sample

The population of the research consists of the employees who are working in managerial positions in the private hospitals in Antalya. There are 26 private hospitals in Antalya province. In the planning phase of the study, preliminary interviews were conducted with the managers of these hospitals throughout the province. According to the information obtained from the preliminary interviews, it was found that there were 130 people working in senior and middle management positions in the hospitals. No sampling was used in the study and an attempt was made to reach the entire population. However, institutional permission could be obtained from only 10 of the private hospitals. 100 people from these hospitals volunteered for the study and completed the questionnaire. When the questionnaires were examined, it was found that 10 of them were incomplete or completed by staff who were not part of the population. For this reason, inappropriate surveys were not included in the study. As a result, the study sample consisted of 90 people.

Data Collection Tool and Method

The data collection method used was a face-to-face survey. Parts of the survey are explained below.

Part 1: Questionnaire on socio-demographic characteristics: Sociodemographic statements were prepared by the researchers based on the literature reviewed. There are 9 questions for managers, asking about their age, gender, education level, professional experience, length of time working in the institution, school graduated from, position in the business, management education and strategic management training. In addition, the form includes questions about the duration of operation of the hospitals, the number of beds and the number of employees.

Part 2: Strategic management tools knowledge and usage levels survey: The survey form was taken from the report titled "Management and Tools and Trends 2009" prepared by D. Rigby and B. Bilodeau (Rigby & Bilodeau, 2013), translated and adapted to the healthcare sector by İpek Bilgin Demir. The survey in question was taken from Demir's master's thesis titled "A Research on Strategic Management Knowledge and Usage Levels of Hospital Managers" (Demir, 2015). It consists of 2 subsections. In the 1st subsection: There are statements regarding the level of knowledge and usage status of 16 strategic management tools. In this section, yes/no type answers are received. In the 2nd subsection there are 20 statements answered on a 5-point Likert type (1-5 points) for Measuring Priorities and Needs in the Selection of Strategic Management Tools. Increasing scores indicate that the level of agreement with the statement has increased positively. Statistical analysis: Before the analysis, skewness - kurtosis coefficients and Q-Q graphs were examined to determine whether the data showed a normal distribution, and it was determined that they did not show a normal distribution. In addition, the number of units remained below 30 in some test groups. For these reasons, it was decided to use non-parametric tests.

Mean and standard deviation values were examined in the descriptive statistics of the data. To examine the differences between groups, the Mann Whitney-U test was applied in the analysis between two groups and the Kruskal-Wallis test was applied between three or more groups. Spearman Correlation Analysis was applied for correlation-seeking analyses.

SPSS.25 (Statistical Package of Social Sciences) Package Program was used in the analysis of the data obtained. Statistical significance was accepted at the 0.05 level.

Ethical approach: Prior to the research, approval was received from Istinye University Social and Human Sciences Ethics Committee dated 28.07.2023 and numbered 2023/07 - 80. Then,

institutional permissions were obtained from hospitals to conduct the survey. Subsequently, the consent of the participants in hospitals with institutional permission was obtained before the interview, and the principle of volunteering was adhered to.

2. ANALYSIS

The average age of the research participants is 42±7.4 years, their professional experience is 18±7.7 years, and the duration of employment in the institution is 8±5.5 years. The majority are women (58.9%), have a bachelor's degree (63.3%), and are mid-level managers (41.1%). According to the type of school graduated from, most education was received at a business faculty (35.6%). Among the participants, the majority are those who have not received management training and strategic management training (54.4% and 71.1%, respectively). In terms of the characteristics of hospitals, the shortest period of operation is 5 years, and the longest period of operation is 23 years. Most of them have a bed capacity of 1-100 and employ over 300 people (Table 1).

Table 1: Descriptive Information for Administrators and Hospitals

Variables		Mean	SD					
Age (years)		42	7.4					
Professional Experience (years)		18	7.7					
Duration of Working in the Institutio	Duration of Working in the Institution (years)							
Characteristics of Participants	Groups	n	%					
Gender	Female	53	58.9					
	Male	37	41.1					
Education Level	Associate degree	6	6.7					
	Bachelor's degree	57	63.3					
	Postgraduate	15	16.7					
	Doctorate	12	13.3					
Graduation School	Medical School	13	14.4					
	Faculty of Management	32	35.6					
	Faculty of Economics	17	18.9					
	Faculty of Health Sciences	28	31.1					
Management Position	Senior Manager	13	14.4					
	Physician Manager	9	10.0					
	Administrative Services Manager	15	16.7					
	Nursing Services Manager	16	17.8					
	Other Mid-Level Manager	37	41.1					
Receiving Management Training	Yes	41	45.6					
	No	49	54.4					
Receiving Strategic Management	Yes	26	28.9					
Training	No	64	71.1					
Features of the Hospital		n	%					
Activity Duration (years)	5	1	10					
	10 -15	8	80					
	23	1	10					
Number of Beds	1-100	5	50					

	101-200	4	40
	201-300	1	10
Number of Employees	100-200	3	30
	201-300	3	30
	301 +	4	40

When the knowledge level of the participants regarding strategic management tools was examined, it was seen that they had the highest knowledge of the "mission and vision" statement, followed by "customer relationship management" and "total quality management" tools. It was observed that the lowest level of knowledge was "value chain analysis". Among these tools, the most used tools by the participants in the last five years are "social media and the internet", while the least used tool is "business process reengineering" (Table 2).

Table 2: Managers' Knowledge and use of Strategic Management Tools

Strategic Management Tools	Know	edge (yes)	Used in the Last 5 Years (ves)			
S to thought the same of the s	Number	Percentage	Number	Percentage		
	(n)	(%)	(n)	(%)		
Balanced Scorecard	28	31.1	18	20.0		
Benchmarking	77	85.6	36	40.0		
Business Process Reengineering	30	33.3	12	13.3		
Core Competencies	48	53.3	25	27.8		
Total Quality Management	88	97.8	71	78.9		
Customer Relationship Management	88	97.8	74	82.2		
Downsizing	47	52.2	15	16.7		
Mission and Vision Statements	89	98.9	73	81.1		
Outsourcing	82	91.1	63	70.0		
Strategic Planning	70	77.8	51	56.7		
Strategic Alliances	50	55.6	19	21.1		
Social media and Internet	87	96.7	76	84.4		
Value Chain Analysis	24	26.7	14	15.6		
Business Portfolio Analysis	32	35.6	17	18.9		
Supply Chain Management	78	86.7	65	72.2		
SWOT Analysis	75	83.3	40	44.4		

As shown in Table 3, when the managers' priorities in the selection of strategic management tools were evaluated according to their gender, statistically significant results were observed between the groups in some statements. In the answers given to the statements "Innovative activities are very important for the development of our business", "Our top managers do not hesitate to take higher risks in order to increase their earnings", "We are not selective in the supply of goods and services necessary for our business", "Our business has a structure that can carry out all its activities on its own" and "Our business operates by being aware of the capabilities it has", the average score of female managers is significantly higher than male managers (p=0.006; p<0.001;

p=0.038; p=0.019 and p=0.007, respectively). In addition, there was no significant difference between the groups according to whether the participants received management training and strategic management training or not (p>0.05).

Table 3: Priorities in Choosing Strategic Management Tools by Gender

		Ge	nder		Mana	agemen	ning	Strategic Management Training				
Statements for Determining the Priorities in the Selection of Strategic Management Tools	Groups	x	Sd	Z	Groups	x	Sd	Z	Groups	X	Sd	z
Organizational culture is as important a factor	Female	4.38	0.71	-1.021	Yes	4.27	0.92	-0.221	Yes	4.08	1.09	-0.930
as strategy in business success.	Male	4.05	1.15	1.021	No	4.22	0.94	0.221	No	4.31	0.85	0.730
Failure to give sufficient importance to	Female	4.57	0.69	-1.745	Yes	4.44	0.84	-0.065	Yes	4.38	0.90	-0.433
customers' opinions will harm our performance.	Male	4.32	0.82	-1./43	No	4.49	0.68	-0.063	No	4.50	0.69	-0.433
Innovative activities are very important for	Female	4.77	0.42	-2.775*	Yes	4.71	0.46	-0.973	Yes	4.65	0.56	-0.346
the development of our business.	Male	4.30	1.00	-2.113	No	4.47	0.92	-0.573	No	4.55	0.82	-0.540
All employees of our company are actively	Female	3.70	1.09	-0.142	Yes	3.80	1.08	-1.265	Yes	3.96	0.87	-1.245
involved in innovative activities.	Male	3.68	1.03	0.142	No	3.59	1.04	1.203	No	3.58	1.11	1.243
We make our decisions based on short-term	Female	2.49	1.15	-0.680	Yes	2.49	0.98	-0.933	Yes	2.54	1.07	-0.798
financial returns.	Male	2.30	1.00	0.000	No	2.35	1.18	0.733	No	2.36	1.10	0.770
We take into account possible future changes	Female	4.06	0.80	-0.038	Yes	4.20	0.72	-1.482	Yes	4.19	0.57	-0.580
when making decisions.	Male	4.05	0.85	-0.036	No	3.94	0.88	-1.402	No	4.00	0.89	-0.560
Our ability to adapt to change gives us a	Female	4.38	0.60	-1.784	Yes	4.20	0.95	-0.370	Yes	4.04	1.18	-0.191
significant competitive advantage.	Male	3.89	1.17	-1.704	No	4.16	0.87	-0.370	No	4.23	0.77	-0.171
We share our dreams with our employees and	Female	3.70	0.89	0.545	Yes	3.71	0.87	0.427	Yes	3.69	0.74	0.020
customers to better introduce ourselves to them.	Male	3.62	0.83	-0.547	No	3.63	0.86	-0.437	No	3.66	0.91	-0.029
We keep senior management's opinions at the	Female	4.04	0.88	1 745	Yes	3.90	0.89	-0.038	Yes	3.65	0.98	1 400
forefront when making long-term decisions.	Male	3.65	1.06	-1.745	No	3.86	1.04	-0.036	No	3.97	0.96	-1.426
Our top managers do not hesitate to take	Female	3.64	0.92		Yes	3.27	1.10		Yes	3.38	1.24	
higher risks in order to increase their earnings.	Male	2.81	1.13	-3.500*	No	3.33	1.09	-0.227	No	3.27	1.03	-0.609
We are not selective in the supply of goods	Female	2.77	1.38	2.0774	Yes	2.32	1.27	1 100	Yes	2.46	1.42	0.205
and services necessary for our business.	Male	2.16	1.28	-2.077*	No	2.69	1.43	-1.180	No	2.55	1.36	-0.395
Our business has a structure that can carry out	Female	3.30	1.05	2 220±	Yes	3.12	1.21	0.205	Yes	3.04	1.25	0.002
all its activities on its own.	Male	2.73	1.17	-2.339*	No	3.02	1.07	-0.385	No	3.08	1.09	-0.083
Our business operates by being aware of the	Female	3.92	0.87	2.7204	Yes	3.80	0.98	0.020	Yes	3.77	0.99	0.250
capabilities it has.	Male	3.38	1.01	-2.720*	No	3.61	0.95	-0.939	No	3.67	0.96	-0.358
The basis of the performance evaluation	Female	3.70	1.17	1 240	Yes	3.61	1.12	-0.039	Yes	3.81	0.85	0.700
process is the performance of our employees.	Male	3.49	1.07	-1.248	No	3.61	1.15	-0.039	No	3.53	1.22	-0.790
Our business does not see any harm in using	Female	4.13	0.56	-1.048	Yes	4.07	0.61	-0.217	Yes	3.92	0.74	-1.186
outsourcing in the areas it needs.	Male	3.97	0.69	-1.048	No	4.06	0.63	-0.217	No	4.13	0.55	-1.180
We continue our efforts towards sustainability	Female	3.42	0.95	-1.426	Yes	3.17	1.09	-1.001	Yes	3.08	1.13	-1.392
even if it negatively affects our profitability.	Male	3.11	0.97	-1.420	No	3.39	0.84	-1.001	No	3.38	0.88	-1.392
Nowadays, customers' loyalty to the brand is	Female	3.09	1.08	-0.157	Yes	3.05	1.14	-0.377	Yes	3.23	1.07	-0.801
less than it used to be.	Male	3.11	1.20	-0.137	No	3.14	1.12	-0.377	No	3.05	1.15	-0.601
Today's market leaders are expected to still be	Female	3.38	0.88	-0.445	Yes	3.37	0.99	-0.342	Yes	3.46	0.91	-0.223
leaders 5 years from now.	Male	3.43	1.19	-0.443	No	3.43	1.04	-0.342	No	3.38	1.06	-0.223
Over the next three years, we will focus on	Female	3.38	1.08	1 102	Yes	3.27	1.05	0.170	Yes	3.31	1.01	0.004
increasing our revenues rather than reducing our costs.	Male	3.14	1.03	-1.102	No	3.29	1.08	-0.178	No	3.27	1.09	-0.084
It is felt that economic conditions are	Female	2.55	1.07	-1.100	Yes	2.44	1.05	-0.025	Yes	2.42	1.07	0.142
improving in our sector.	Male	2.30	1.08	-1.100	No	49.00	2.45	1.100	No	2.45	1.08	-0.143

^{*}p<0.05

When analyzed according to the educational level of the managers, a statistically significant difference was found between the groups in the answers given to the statement "Today's market leaders are expected to still be leaders 5 years from now" (p=0.021). The score of the participants with a bachelor's degree is higher than the others. There was a statistically significant difference between the groups in the responses to the statement "Innovative activities are very important for the development of our business" according to the type of school graduated from (p=0.041). Participants who graduated from business school had the highest average score. According to the management position, there was no statistically significant difference between the groups in any of the statements (p>0.05) (Table 4).

Table 4: Priorities in Choosing Strategic Management Tools by Management Position, Education Level, and Type

Statements for Determining	Manag	gemei	nt Pos	sition	Education Level				Education Type			
the Priorities in the Selection of Strategic Management Tools	Groups	x	Sd	Н	Groups	x	Sd	Н	Groups	x	Sd	Н
	SM	4.46	0.66		Associate	4.17	1.60		Medical School	4.23	0.73	
Organizational culture is as	PM	4.22	0.67		Bachelor's	4.19	0.97		Management	4.50	0.51	
important a factor as strategy	ASM	4.27	1.03	1.188	Postgraduate	4.40	0.51	0.782	Economics	4.00	1.23	2.390
in business success.	NSM	4.38	0.62		Doctorate	4.33	0.78		Health Sciences	4.11	1.13	
	Other	4.11	1.13			4.55	0.78			4.11	1.13	
	SM	4.46	0.66		Associate	4.50	0.55		Medical School	4.38	0.65	
Failure to give sufficient	PM	4.44	0.53		Bachelor's	4.44	0.85		Management	4.66	0.48	
importance to customers' opinions will harm our	ASM	4.53	0.52	3.103	Postgraduate	4.60	0.51	0.463	Economics	4.00	1.23	4.995
performance.	NSM Other	4.75 4.32	0.45		Doctorate	4.42	0.67		Health Sciences	4.57	0.57	
	SM	4.62	0.65		Associate	4.83	0.41		Medical School	4.46	0.66	
Innovative activities are very	PM	4.44	0.53	3.808	Bachelor's	4.51	0.85	2.884	Management	4.72	0.52	8.253*
important for the development	ASM	4.33	1.11		Postgraduate	4.80	0.41		Economics	4.24	0.97	
of our business.	NSM Other	4.81	0.40		Doctorate	4.50	0.67		Health Sciences	4.68	0.82	
All employees of our company	SM	3.54	0.76		Associate	4.33	0.82		Medical School	3.62	0.77	
are actively involved in	PM	3.44	0.73		Bachelor's	3.60	1.15		Management	3.63	1.04	
innovative activities.	ASM	3.53	0.73	6.463	Postgraduate	3.80	0.94	2.628	Economics	3.65	1.12	1.021
	NSM Other	4.25	0.86	0.403	Doctorate	3.67	0.78	2.020	Health Sciences	3.82	1.19	1.021
We make our decisions based	SM	2.31	1.38		Associate	2.83	0.98		Medical School	2.08	0.86	
on short-term financial	PM	2.22	0.97		Bachelor's	2.51	1.18		Management	2.28	1.09	
returns.	ASM	1.87	0.74	6.384	Postgraduate	2.27	0.88	4.200	Economics	2.59	1.33	2.820
	NSM	2.56	1.09		Doctorate				Health Sciences			
	Other	2.65	1.09			1.92	0.79			2.61	1.03	
We take into account possible	SM	4.23	0.93		Associate	4.33	0.52		Medical School	4.00	0.58	
future changes when making	PM	3.89	0.33		Bachelor's	4.00	0.89		Management	4.13	0.79	
decisions.	ASM	4.20	0.86	6.823	Postgraduate	4.33	0.49	3.362	Economics	4.00	1.06	0.886
	NSM Other	4.31	0.60		Doctorate	3.83	0.84		Health Sciences	4.04	0.79	

Methods Meth	Statements for Determining the Priorities in the Selection	Manag	emei	nt Pos	sition	Educ	ation	Leve	el	Education		Type		
Meshari to adaptite of advantage SM	of Strategic Management	Groups	x	Sd	Н	Groups	x	Sd	H	Groups	x	Sd	Н	
gives us a significant competitive advantage. PM 4.00 0.50 bit MSM 4.81 do. 0.2 bit MSM 4.11 loop loctorate		SM	4.54	0.66		Associate	4.33	0.52		Medical School	4.08	0.64		
Postprietrive advantage. ASM 3.93 0.96 0.275	gives us a significant	PM				Bachelor's				Management				
Meshare our dreams with our employees and customers to better introduce ourselves to them.	competitive advantage.				6.277	Postgraduate		0.83	1.753	Economics			2.055	
Management Man						Doctorate				Health Sciences				
Marchiter introduce ourselves to them: PM 3.0 0.87		Other	4.11	1.10			4.17	0.72			4.21	0.74		
No. No.		SM	3.69	0.86		Associate	4.17	0.41		Medical School	3.08	0.76		
them. from them. from them. from them. from them. for th		PM	3.00			Bachelor's	3.65	0.83		Management	3.78	0.83		
Minimal Mini		ASM	3.53	0.92	6.448	Postgraduate	3.93	0.96	7.285	Economics	3.65	0.86	7.475	
We keep senior managements SM	them.	NSM	3.81	0.91		Doctorate	2.17	0.04		Health Sciences	2.02	0.06		
opinions at the forefront weaking log-term decisions, making log-term decisions, and the performance making log-term decisions, and the performance making log-term decisions, and the performance making log-term decisions, and the performance of uncertainty likes. The perform		Other	3.81	0.78			3.1/	0.84			3.82	0.86		
Management Man		SM	4.08	0.95		Associate	4.33	0.82		Medical School	3.69	1.03		
ASM ASM		PM	3.67	1.00		Bachelor's	3.82	1.02		Management	4.00	0.88		
Other Australia Australi	making long-term decisions.	ASM	3.47	0.99	4.244	Postgraduate	4.00	0.76	1.671	Economics	3.88	1.22	1.177	
Outrop managers do not hesitate to take higher risks in order to increase their earnings. SM 3.15 0.09 0.00 0		NSM	3.94	0.93		Doctorate	2.75	1.06		Health Sciences	2.02	0.01		
hesitate to take higher risks in order to increase their earnings. PM 3.33 1.00 ASM 3.00 0.85 4.76 Bachelor's 3.25 1.11 Choopstraduate ordinates of the care in crease their earnings. Management of the care in crease their earnings. Management ordinates of the performance of our business. Management ordinates of the performance of our evaluation process is the performance of our evaluation process is the performance of our evaluation process is the performance of our evaluation process is the performance of our evaluation process is the areas it needs. Management ordinates of the performance of our evaluation process is the performance of our evaluation process is the areas it needs. Management ordinates of the performance of our evaluation process is		Other	4.00	0.97			3./3	1.06			3.82	0.91		
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ASM 3.00 0.85 NSM 3.81 1.11 Other 3.24 1.21 Other 3.25 3.23 Other 3.25 Other 3.25 3.23 Other 3.25 Other Other 3.25 Other 3.25 Other 3.25 Other 3.25 Other Other 3.25 Other 3.25 Other 3.25 Other 3.25 Other 3.25 Other Other 3.25 Other Other 3.25 Other Other Other Other Other Other Other Other Ot	C	PM	3.33	1.00		Bachelor's	3.25	1.11		Management	3.13	1.19		
Mode are not selective in the supply of goods and services necessary for our business. PM		ASM	3.00	0.85	4.768	Postgraduate	3.27	1.22	1.584	Economics	3.35	0.86	2.335	
Management Man		NSM	3.81			Doctorate	3 33	0.99		Health Sciences	3 54	1 14		
Supply of goods and services necessary for our business necessary for our business. PM		Other	3.24	1.21			3.33	0.77			3.34	1.17		
Postgraduate 1,000		SM	2.54	1.45				1.75			2.00	1.00		
ASM 2.69 1.45 1.51 1.51 2.59 Economics 2.94 1.35 3.236 1.781 1.51 2.59 Economics 2.94 1.35 3.236 1.51 2.59 Economics 2.94 1.52 2.59 Economics 2.94 1.52 2.59 Economics 2.94 1.51 2.59 Economics 2.94 1.52 2.59 Economics 2.94 2		PM	1.89						2.579	•			3.236	
Other Column Co	necessary for our outsiness.	ASM	2.53	1.36	1.781		2.47	1.51			2.94	1.35		
Other 2.59 1.42 1.01 1.45 1.06 1.05 1.05 1.01 1.05						Doctorate	2.00	1.04		Health Sciences	2.64	1.52		
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Our business operates by being aware of the capabilities it has.						Doctorate	2.92	1.08		Health Sciences	3.00	1.02		
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Other 3.51 1.19					4.995		3.87	1.06	4.498		3.88	1.05	2.522	
The basis of the performance evaluation process is the performance of our employees.						Doctorate	3.83	0.58		Health Sciences	3.75	1.08		
PM 3.56 0.73 ASM 3.53 0.99 NSM 3.81 1.38 Other 3.54 1.28 Doctorate ASM 3.85 0.38 NSM 4.11 0.60 ASM 4.25 0.78 Other 4.08 0.68 Other 4.08 0.66 Other 4.08 0.68	The basis of the performance					Associate	4 00	0.89		Medical School	3.62	0.65		
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NSM 3.81 1.38 Doctorate 3.58 0.67 Health Sciences 3.50 1.35					2.220	Postgraduate			1.405	<u> </u>			1.721	
Other 3.54 1.28	employees.				2,220				100	Health Sciences			1.,,21	
Our business does not see any harm in using outsourcing in the areas it needs.							3.58	0.67			3.50	1.35		
PM 4.11 0.60 ASM 4.00 0.38 A.19 Postgraduate 3.93 0.70 2.803 Economics 3.94 0.75 5.533	Our business does not see any					Associate	4.00	0.63		Medical School	4.00	0.58		
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Other										Health Sciences				
Me continue our efforts towards sustainability even if it negatively affects our profitability.							3.92	0.52			4.29	0.66		
towards sustainability even if it negatively affects our profitability. PM 3.33 1.00 ASM 3.13 0.92 NSM 3.50 1.10	We continue our efforts					Associate	3.33	1.03		Medical School	3.46	0.88		
ASM 3.13 0.92 1.987 Postgraduate 3.27 1.16 2.408 Economics 2.82 1.13 3.977						Bachelor's				Management				
NSM 3.50 1.10 Doctorate 3.67 0.49 Health Sciences 3.46 1.04					1.987	Postgraduate			2.408				3.977	
13 67 10 49 1 1 3 46 1 104 1	promaomity.					Doctorate				Health Sciences				
Other 3.19 1.02		Other	3.19	1.02			3.67	0.49			3.46	1.04		

Statements for Determining	Manag	emei	nt Pos	sition	Educa	ation	Leve	l	Educa	tion '	Гуре	
the Priorities in the Selection of Strategic Management Tools	Groups	x	Sd	Н	Groups	x	Sd	Н	Groups	x	Sd	Н
Nowadays, customers' loyalty	SM	3.31	1.11		Associate	2.67	1.37		Medical School	3.23	1.17	
to the brand is less than it used to be.	PM	3.22	1.30		Bachelor's	3.05	1.17		Management	3.28	1.02	
to be.	ASM	3.27	1.10	1.652	Postgraduate	3.27	0.80	2.042	Economics	3.18	1.24	3.276
	NSM	3.00	0.97		Doctorate	3.33	1.16		Health Sciences	2.79	1.13	
	Other	2.97	1.19			3.33	1.10			2.19	1.13	
Today's market leaders are	SM	3.23	1.30		Associate	2.83	1.17		Medical School	2.77	1.09	
expected to still be leaders 5 years from now.	PM	3.00	1.23		Bachelor's	3.61	0.94		Management	3.63	0.98	6.579
years from now.	ASM	3.67	1.11	3.322	Postgraduate	3.40	0.91	9.709*	Economics	3.53	1.18	
	NSM	3.25	0.78		Doctorate	2.67	1.07		Health Sciences	3.36	0.83	
	Other	3.51	0.90			2.07	1.07			3.30	0.83	
Over the next three years, we	SM	3.31	0.95		Associate	4.00	1.10		Medical School	3.15	0.90	
will focus on increasing our revenues rather than reducing	PM	3.33	0.87		Bachelor's	3.39	1.05		Management	3.22	1.10	
our costs.	ASM	3.13	1.25	1.486	Postgraduate	2.87	1.06	7.381	Economics	3.41	1.23	0.705
	NSM	3.06	1.00		Doctorate	2.92	0.90	2.00	Health Sciences	3.32	1.02	
	Other	3.41	1.12			2.92	0.90			3.32	1.02	
It is felt that economic	SM	2.46	1.13		Associate	2.67	1.03		Medical School	2.38	0.96	
conditions are improving in our sector.	PM	2.44	1.13		Bachelor's	2.47	1.14		Management	2.25	1.11	
	ASM	2.13	1.06	1.653	Postgraduate	2.47	1.06	1.162	Economics	2.88	1.27	3.401
	NSM	2.56	1.03		Doctorate	2.17	0.84		Health Sciences	2.43	0.92	
	Other	2.51	1.10			2.17	0.64			2.43	0.92	

SM: Senior Manager, PM: Physician Manager, ASM: Administrative Services Manager, NSM: Nursing Services Manager, Other: Other Mid-Level Manager

In Table 5, the relationships between managers' priorities in the selection of strategic management tools and age, years of professional experience and duration of working in the institution are examined.

Negative and weak relationships were observed between age and the statements "We make our decisions based on short-term financial returns" (r=-0.367; p<0.001), "We are not selective in the supply of goods and services necessary for our business" (r=-0.245; p=0.020), "Over the next three years, we will focus on increasing our revenues rather than reducing our costs" (r=-0.220; p=0.037) and "It is felt that economic conditions are improving in our sector" (r=-0.216; p=0.041).

Negative and weak relationships were observed between professional experience and the statements "We make our decisions based on short-term financial returns" (r=-0.221; p=0.036) and "We are not selective in the supply of goods and services necessary for our business" (r=-0.236; p=0.025).

There are positive and weak relationship between the duration of working in the institution and the statements "Failure to give sufficient importance to customers' opinions will harm our performance" (r=0.282; p=0.007), "Innovative activities are very important for the development of our business" (r=0.210; p=0.047), "We share our dreams with our employees and customers to

better introduce ourselves to them" (r=0.262; p=0.013) and "We continue our efforts towards sustainability even if it negatively affects our profitability" (r=0.228; p=0.031). On the other hand, a negative and weak relationship was observed between the statement "Over the next three years, we will focus on increasing our revenues rather than reducing our costs" and the duration of working in the institution (r=-0.224; p=0.034).

Table 5: The Relationship Between Managers' Priorities in Choosing Strategic Management Tools and Age, Professional Experience and Years of Working in the Organization

Statements for Determining the Priorities in the Selection of Strategic Management Tools		Age	Professional Experience	Working Duration in the Institution
Organizational culture is as important a factor as strategy in business success.	r	0.014	-0.025	-0.054
Failure to give sufficient importance to customers' opinions will harm our performance.	r	-0.095	0.033	0.282**
Innovative activities are very important for the development of our business.	r	-0.041	0.004	0.210*
All employees of our company are actively involved in innovative activities.	r	-0.015	0.026	0.180
We make our decisions based on short-term financial returns.	r	-0.367**	-0.221*	0.029
We take into account possible future changes when making decisions.	r	-0.042	-0.025	0.011
Our ability to adapt to change gives us a significant competitive advantage.	r	-0.057	-0.043	0.174
We share our dreams with our employees and customers to better introduce ourselves to them.	r	-0.025	0.005	0.262*
We keep senior management's opinions at the forefront when making long-term decisions.	r	-0.113	-0.111	0.007
Our top managers do not hesitate to take higher risks in order to increase their earnings.	r	0.000	0.098	0.173
We are not selective in the supply of goods and services necessary for our business.	r	-0.245*	-0.236*	0.060
Our business has a structure that can carry out all its activities on its own.	r	-0.034	-0.042	0.140
Our business operates by being aware of the capabilities it has.	r	-0.037	-0.017	0.101
The basis of the performance evaluation process is the performance of our employees.	r	0.019	-0.021	-0.159
Our business does not see any harm in using outsourcing in the areas it needs.	r	-0.165	-0.135	0.001
We continue our efforts towards sustainability even if it negatively affects our profitability.	r	0.159	0.166	0.228*
Nowadays, customers' loyalty to the brand is less than it used to be.	r	0.129	0.013	0.057
Today's market leaders are expected to still be leaders 5 years from now.	r	-0.089	-0.130	0.019
Over the next three years, we will focus on increasing our revenues rather than reducing our costs.	r	-0.220*	-0.154	-0.224*
It is felt that economic conditions are improving in our sector.	r	-0.216*	-0.172	-0.054

^{*}p<0.05 ** p<0.01

3. DISCUSSION

Healthcare organizations are businesses that provide uninterrupted services with intensive labor and overtime of teams of professionals trained in different fields (Swayne et al, 2006). Health services worldwide are becoming increasingly complex (Plsek & Greenhalgh, 2001). Strategic management is important for them to be managed effectively.

In this study, the level of knowledge of middle and senior managers of ten private hospitals operating in Antalya Province about strategic management tools, their use of these tools, and their priorities and needs in tool selection were examined.

Similar to the results of this study, previous studies show that hospital managers have the highest level of knowledge about strategic management tools and that the tools they use are mission and vision statements, SWOT analysis, total quality management, social media tools and strategic planning with the internet (Rigby & Bilodeau, 2007, 2009, 2013; Erbaşı & Ünüvar, 2012; Bilgin Demir, 2015; Çınar et al., 2019).

Similar to the results of this study, previous studies reveal that the least preferred strategic management tools used by hospital managers are business process reengineering, downsizing, balanced scorecard and value chain analysis (Rigby & Bilodeau, 2007). In addition, Rigby and Blodeau's (2013) study, which included all sector managers on a global scale, found that the rate of use of strategic management tools was moderate (61-83%). Similarly, in the research of Çınar et al. (2019), it was observed that the rate of managers' use of strategic management tools was between 50-80%.

However, studies, including this study, show that managers' knowledge of strategic management tools and therefore their use of strategic management tools remain at a limited level. Rigby (2007) stated that the success of strategic management tools depends on managers' knowledge of the strengths and weaknesses of each tool, its integration with their needs, and its use in the right place and at the right time and emphasized that in the absence of objective data about the tools, the selection and use of these tools risk dangerous consequences for organizations. In this direction, it is thought that it would be important to develop skills to increase the knowledge and usage levels of managers.

In the current study, it was found that female managers gave higher scores to some statements in priorities in the selection of strategic management tools. In Ergül's (2017) study, it was determined that the level of knowledge of strategic management tools of male participants

was higher than that of female participants and the use of strategic management tools in the last one year was higher in female participants than male participants. Çağatay (2019) compared the gender of the participants and their perspectives on the use of strategic management tools in his study and stated that there was no significant difference according to the gender of the participants as a result of the analysis.

When it was examined whether the priorities of hospital managers in the selection of strategic management tools differed according to their educational status, it was observed that the educational status differed only in the response to the statement "Today's market leaders are expected to still be leaders 5 years from now". Unlike this study, Bilgin Demir (2015) grouped the educational status of the participants as undergraduate and graduate and observed that there was no significant difference between the educational status of hospital managers and their priorities in the selection of strategic management tools. In Ergül's (2017) study, it was determined that there was a difference between the educational level of the participants and the use of strategic management tools in the last year, satisfaction level and requirement level, but the use of strategic management tools in the next year and the level of use of strategic management tools did not differ according to the educational level of the participants. In Çağatay's (2019) study, participants' perspectives on the use of strategic management tools were examined according to their educational level. As a result of the research in which the level of education was gathered in 7 categories; it was seen that participants with higher education, 4-year faculty and master's degree used more strategic management tools than the participants in the medical specialty group.

In the research, as managers' professional experience increased, negative relationships were observed in the statements "We make our decisions based on short-term financial returns" and "We are not selective in the supply of goods and services necessary for our business". These results show that the time spent in the profession has an impact on managers' perspective on short-term investments and their tendency to act selectively. In Ergül's (2017) study, it was observed that the level of knowledge of strategic management tools, usage status in the last year, usage status in the future, satisfaction level and need level differed according to the participants' working period in the institution, while the level of strategic management tools usage level did not differ according to the participants' working period in the institution. In Çağatay's (2019) study, the total working years of managers were examined by dividing them into 5 categories, and it was observed that

those with a total working time of 21 years or more used more strategic management tools compared to those with a working time of 1-5 years.

Finally, the relationship between the years of working in the organization and the determination of the priorities in the selection of strategic management tools is examined. There is a positive and significant relationship between the working duration and the statements "Not giving enough importance to the opinions of customers will harm our performance", "Innovative activities are very important for the development of our business", "We share our dreams with our employees and customers in order to introduce ourselves better to them", "We continue our efforts towards sustainability even if it negatively affects our profitability" and "In the next three years, we will focus on increasing our revenues rather than reducing our costs" and years of service in the organization. When these results are analyzed, it is seen that as the time spent by the managers in the organization increases, they gain awareness about the opinions of the customers, the importance they attach to sustainability increases, and they focus on the benefits of profitability rather than reducing costs. It also suggests that common dreams reinforce the sense of belonging and the effects on organizational culture increase the tendency of managers to take positive steps. In Ergül's (2017) study, it was observed that the level of knowledge of strategic management tools, the level of use in the last year, the level of use in the future, the level of satisfaction, and the level of need-requirement differed according to the participants' working time in the organization, while the level of use of strategic management tools did not differ according to the participants' working time in the organization.

4. CONCLUSIONS

The health sector, which is about improving the health of individuals and society, is an open system that is affected by the changes in the environment in a very fast and multifaceted way. At the same time, with its structural and functional characteristics, it makes it compulsory to evaluate both the service delivery activities and the elements of management and operation of health enterprises, which have both a dynamic and complex organizational chart, in integrity by taking all aspects.

As a result of this study, it was determined that managers have knowledge of strategic management tools and actively use some of these tools. However, it is seen that some management tools are used very little. Accordingly, it is possible to say that managers' knowledge of strategic management tools is limited. In addition, it was observed that female managers received higher

scores than male managers in both the priorities in the selection of strategic management tools and the level of institutionalization. In addition, significant differences were observed between the groups in terms of educational level and type of school graduated in the priorities of the managers in the selection of strategic management tools. In addition, there are significant relationships between these choices and the participants' age, years of professional experience and years of working in the organization.

In the light of these results, the following recommendations have been developed;

- When considering the importance of employing individuals with training in management and strategic management in hospital administration for predicting success, it becomes crucial to enhance the skills and knowledge of current managers in this field. It is recommended to provide both in-service and out-of-service training to improve their competency. Additionally, creating mentoring programs where experienced managers offer support to younger managers is advised.
- On the other hand, it is thought-provoking that there was no significant difference between the groups who received both management and strategic management training and those who did not. This result reminds us of the necessity to review the content and quality of these trainings and the importance of conducting studies to improve them at the academic level.
- Since this study covers private health organizations, it should be taken into consideration that
 the element of competition stands out. For this reason, conducting studies in which public and
 private sector health organizations will be compared within themselves or between groups
 will contribute to the literature.
- Since this study was conducted on a sample limited to Antalya province, it is thought that
 there is a need for more comprehensive studies that will increase the generalizability of the
 results and address different geographical regions of Turkey.

Limitations: There are some limitations in the research. This research sample is limited to the participation of employees working as senior and mid-level managers in private hospitals in Antalya Province. The research is limited to data collected between August - November 2023.

Conflicts of Interest: The authors report that there are no competing interests to declare.

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