COURSE DATA

DATA SUBJECT

Code: 34506
Name: Health planning and clinical administration
Cycle: Undergraduate Studies
ECTS Credits: 4.5
Academic year: 2026-27

STUDY (S)

Degree	Center	Acad. year	Period
1204 - Degree in Medicine	Facultat de Medicina i Odontologia	4	First quarter

SUBJECT-MATTER

Degree	Subject-matter	Character
1204 - Degree in Medicine	Optional subjects	ELECTIVES

COORDINATION

ALFONSO SANCHEZ JOSE LUIS

SUMMARY

In this subject, theoretical and practical lessons are combined, with a pragmatic approach towards the adaptation to health care systems and a preparation for a good 'clinical governance'. In theoretical classes, the professor will explain the content, methods and techniques, in order to contribute to the development of knowledge and expected skills for this subject.

In practical classes, both practise in small groups and problem-solving activities will be done, according to the objectives and specific content in each one of the sessions, as well as the presentation of results to an audience, i.e., in front of other students, supported by the use of audiovisual resources.

Among the training activities, exercises regarding the descriptors of this subject will be included, which are explained in the corresponding section.

Furthermore, the subject will include practise so that students can develop the capacity to work in teams, as well as communicative skills with new information technologies, bibliographic research and communication skills.

OTHER REQUIREMENTS

It is recommended that students have passed the first 3 academic years.

PREVIOUS KNOWLEDGE

RELATIONSHIP TO OTHER SUBJECTS OF THE SAME DEGREE

There are no specified enrollment restrictions with other subjects of the curriculum.

OTHER REQUIREMENTS

It is recommended to have completed the first three years.

COMPETENCES / LEARNING OUTCOMES

1204 - Degree in Medicine

Acknowledge diversity and multiculturality.

Capacity for communicating with professional circles from other domains.

Consideration of ethics as a fundamental value in the professional practise.

Criticism and self-criticism skills.

Know how to use the sources of clinical and biomedical information available, and value them critically in order to obtain, organise, interpret and communicate scientific and sanitary information.

Proper organisation and planning of the workload and timing in professional activities.

Recognise health determinants in population, such as genetic ones, dependent on sex, lifestyle, demographic, environmental, social, economic, psychological and cultural.

Students must be able to apply their knowledge to their work or vocation in a professional manner and have acquired the competences required for the preparation and defence of arguments and for problem solving in their field of study.

Students must have the ability to gather and interpret relevant data (usually in their field of study) to make judgements that take relevant social, scientific or ethical issues into consideration.

Team-working skills and engaging with other people in the same line of work or different.

Working capacity to function in an international context.

DESCRIPTION OF CONTENTS

1. THEORETICAL CLASSES
In this subject, classes will be taught in English.

1. What is managing? The administrative cycle or the classic elements of management: planning, organisation, direction and control. Strategic thinking.

2. Introduction to health care models and systems in the world.

3. The national health care system in Spain. Health Organisation in Spain.
General Health Law, Cohesion and Quality.

4. Primary health care.

5. Hospital care. Hospital benchmarking.

6. Socio-health care.

7. Systems of health information. Useful indicators in health care planning. Indicators of the population-hospital relationship. Management of hospitalisation: the value of medium stay, hospital readmissions. The MBDS. Case mix: GRDs, PMCs, RUGs. Diagnosis-related groups (DRG).

8. Necessity, supply, demand and use of health services. Measurement and comparation of results found in health care practise.

9. Qualitative and consensus techniques in health care planning. IT. Delphi method. Nominal group techniques. Other techniques.

10. Prioritisation techniques in health care planning. The OPS method and others.

11. Management and good clinical governance. Medicine based on evidence. Variability in the clinical practise. Guides and clinical protocols.

12. Health economy. Microeconomics. Macroeconomics. Public sector. Supply-demand Law. Elasticity. Macroeconomic indicators.

13. Concepts regarding economic evaluation: effectiveness, efficiency and efficacy criteria. Economic information system in the Valencian Community. Techniques: cost-minimisation, cost-effectivity, cost-benefit, and cost-income.

14. Efficiency analysis. DEA and non-parametrictechniques.

15.Evaluation of health technologies. Evaluating the appropriate use of resources.

16. Analysis of clinical decisions.

17. Health reforms and management of health systems. Introduction to the approach of health policies regarding the objective of a good clinical governance. Medicine based on values.

2. PRACTICAL CLASSES

1. Project on the administrative cycle and discussion.

2. Discussion in groups with a chairperson about the advantages of different health care models in the world.

3.Guided seminary about the evolution of the national health care system in Spain and its social determinants.

4. Practical study of indicators related to the evolution of health in the Spanish population and its chronological-legislative relationship.

5. Structural dimensioning, of personnel, and of internal functioning of a health care centre.

6. Critics of the current hospital model.

7. Practise about Benchmarking between private and public hospitals, and of mixed formulae.

8. Assignment about the classification of dependences according to the current legislation.

9. Calculation of supply-demand indicators.

10. Practical application of planning through consensus methods.

11. Practise and presentation regarding prioritisation in health care planning.

12 .Use of health indicators in the planning. The Spanish example.

13 .Practise regarding the comparison between hospitals by using DRG.

3. PRACTICAL CLASSES II

14. Learning about the design of clinical protocols.

15. Practical differences in the design of assessment techniques to evaluate health technologies.

16. Discussion of articles on supply-demand of health care professionals.

17. Practise based on the interpretation of health care expenditure in the Spanish autonomous communities.

18. Project about the quality-of-life indicator EQ5D.

19. Practise using articles about different techniques for economic evaluation.

20. Group revision of the information that the Economic Information System provides.

21. Revision of two published articles on DEA applied to Health Services.

22. Management through clinical processes.

23. Design of a health care quality plan in a Clinical Department.

24. Articulation of strategies for the safety of patients. Practical cases.

25. Evaluation of health technologies. Ethical, technical, organisational, social and economic dimensions.

26. Practise about health care policy and communication.

WORKLOAD

PRESENCIAL ACTIVITIES

Activity	Hours
Theory	19,00
Seminar	26,00
Total hours	**45,00**

NON PRESENCIAL ACTIVITIES

Activity	Hours
Attendance at other activities	0,00
Individual or group project	30,00
Independent study and work	0,00
Preparation of lessons	0,00
Preparation for assessment activities	7,50
Resolution of case studies	30,00
Total hours	**67,50**

TEACHING METHODOLOGY

In the **theoretical classes**, the teacher will present, through a master lesson, the most important concepts and content in a structured way, to obtain the knowledge and skills that the students must acquire. Student participation will be enhanced. The teaching material used by the teacher will be available, if the teacher considers it appropriate, from the electronic resource of the Virtual Classroom.

Classroom practices. Seminars. In small groups the teacher will present in-depth specialized topics, case studies, bibliography management, current affairs... Group work and oral presentation will be encouraged. It could be understood as cooperative learning.

The gender perspective, the respect for diversity, and the sustainable development goals (SDGs) will be incorporated into teaching, whenever possible.

EVALUATION

Theoretical assessment: 50% of the final mark. It will be done through a written or oral test which will be based on theoretical contents and will assess students' knowledge acquisition.

Practical assessment: 50% of the final mark. It will be done by evaluating students' participation in different activities and through a test which will show the acquisition of skills related to general and specific competencies.

In this subject students will not be allowed to write their test (or even take it before the agreed date) if they have not completed their training (internship).

In order to access to an advance on the call of this subject, it is a requirement that the student has coursed all his/her practices.

Attendance at practical activities is mandatory. The student is considered to meet this requirement if he or she has attended a minimum of 80% of these activities and has adequately justified the impossibility of attending the remaining sessions due to the occurrence of a cause of force majeure. It will be essential to comply with this requirement to pass the subject.

Students are reminded of the importance of carrying out evaluation surveys on all the teaching staff of the degree subjects.

REFERENCES

- 1. Del Llano J, Ortún V, Martin-Moreno JM et al. "Gestión sanitaria. Innovaciones y desafíos". Barcelona: Masson S.A., 1998.
- 2. Asenjo, M.A. y cols. "Gestión diaria del hospital". Barcelona: Masson S.A., 2001.
- 3. Ribera J et al. Gestión en el Sector de la Salud. Gestión del Sistema y de sus Instituciones. Madrid: Pearson Educación S.A., 2005
- 4. Cullis, John G. y West, Peter A. (1984): Introducción a la Economía de la Salud, ed. Desclée de Brouwer, Bilbao, pp. 43-52.
- 5. Wright J, Hill P. Gobierno Clínico. Madrid: Elsevier, 2006.
- 6. Ruiz-Iglesias L. Claves para la Gestión Clínica. Madrid: Cátedra Pfizer McGrawHill, 2004
- 7. Muñoz-Seca B, Riverola J. Del buen pensar y mejor hacer: mejora permanente y gestión del conocimiento. Madrid: McGraw Hill, 2003.
- 8.- RECURSOS e-Salut:

- ClinicalKey Student Medicina, Odontologia y Enfermería [https://uv-es.libguides.com/RecursosSalut]
- Acces Medicina [https://uv-es.libguides.com/Access_Medicina]
- Médica Panamericana [https://uv-es.libguides.com/Medica_Panamericana]

- 1. Samuelson, Paul A. y Nordhaus, William D. (2002): Economía, ed. McGraw-Hill, 17ª edición, pp. 3-53.
- 2. Amado J.; Alegre, E. y Bel, E. "Gestión Empresarial Farmacéutica". Ciss, S.A., Valencia, 1998.
- 3. Drummond, Michael F.; Stoddart, Greg L. y Torrance, George W. Métodos para la evaluación económica de los Programas de Atención de la Salud, ed. Madrid: Díaz de Santos, 1991.
- 4. Errasti, F. "Principios de Gestión Sanitaria". Madrid: Díaz de Santos, 1996.
- 5. López i Casasnovas G, Ortún Vicente. Economía y Salud. Fundamentos y políticas. Madrid: ediciones Encuentro, 1998
- 6. McGuire, Alistair; Henderson, John y Mooney, Gavin (1988): The Economics of Health Care, ed. Routledge (reimpresión de 1992).
- 7. Ortún V. La Economía en Sanidad y Medicina: Instrumentos y Limitaciones. Barcelona: La Llar del Llibre, 1992.
- 8. Sacristán JA, Badía X, Rovira J. "Farmacoeconomía: Evaluación Económica de medicamentos",. Madrid: Ed. Médicos, S.A., 1995.
- 9. Cabiedes, Laura: "Reformas sanitarias recientes", capítulo 9 del Informe Anual 2003 del Observatorio del Sistema Nacional de Salud, Ministerio de Sanidad y Consumo.
- 10. Cabiedes, Laura (2003): Evaluación Económica de Tecnologías Sanitarias, Monográfico del III Curso de Actualización en Medicina de Familia y Atención Primaria, SEMERGEN-Asturias.
- 11. Rodríguez, Marisol (1992): "Corrientes económicas y criterios de equidad en Sanidad", Revista de Economía, nº 12, pp. 55-60.