Table 2 Definitions of the value concepts and subconcepts of the proposed value-based framework (thematic synthesis), Islamic Republic of Iran

Value class and selected definitions of value concept

Mission values

Medical education: Engaging medical students, resident physicians and fellows is critical for longstanding improvements in practice (19).

Health research has high value to society. It can provide important information about disease trends, risk factors, outcomes of treatment, public health interventions, functional abilities, patterns of care and health care costs (19).

The aim of health care is to promote public health, prevent and treat diseases, and relieve suffering (19).

Principal values

God-centred: Religion and spirituality are the 2 levels proposed for the concept God-centred. Religion is guided by shared beliefs and practices, whose believers adhere to a particular understanding of the divine and participate in sacred rituals, while Spirituality refers to an individual's internal sense of connection to the sacred (God) (7,32).

Justice and equity in health implies the idea that patients with similar demands are treated with the same principles, and also that everyone should have a fair opportunity to attain his or her full health potential (19).

Clinician's virtues: Moral virtues, good intention, utility of action, and ethical decisions are the 4 levels proposed for the concept of clinician's virtues. The character traits constitute the medical virtues include the following as a minimum: altruism, compassion, effacement of self-interest, fidelity, truth telling and courage (18,19).

Ethical decisions: These include using ethical values, ideals and principles concerning right and wrong and with the moral consequences of human actions to help proper, beneficial and non-harmful decision making (7,20).

Human health rights: The right to health is one of a set of internationally agreed human rights standards (7,19,20).

Procedural values

Social accountability: The concept of social accountability is defined as the obligation of medical schools to direct their education, research and service activities to address the health concerns of the community, region and nation (1,7,19).

Professionalism: The term professionalism is used to describe those skills, attitudes and behaviours which we have come to expect from individuals during the practice of their profession. Professionalism is central to sustaining the public's trust in the medical profession and it is the essence of the doctor-patient relationship (2,19).

Efficiency: The ability to perform well or achieve a result without wasted resources (19).

Effectiveness: In the health field, this is a measure of the output from those health services that contribute towards reducing the dimension of a problem or improving an unsatisfactory situation (19).

Accessibility: A measure of the ease with which a specific population can obtain appropriate health services and be served by facilities within the health care system. This concept is used to detect inequity in the availability of health services for different populations (25). Accessibility has 3 levels: physical accessibility, economic accessibility or affordability and information accessibility (2-4,19,21).

Transparency: Transparency is responding with reliable information to ensure quality and safety. Health care providers must respond with sufficient information to ensure patients can make thoughtful decisions to achieve better outcomes (10,21,27).

Collaboration: Collaboration involves multiple people interacting to achieve a common goal in health care and medical education (19,22). The 4 elements proposed for the concept of collaboration (22) are described as:

Coordination: working to achieve shared goals

Cooperation: contributing to the team, understanding and valuing the contributions

Shared decision-making: relying on negotiation, communication, openness and trust (2).

Cohesion/solidarity: solidarity in the health system means the participation of government in funding the health system costs and the participation of people in different insurance plans is an instance of solidarity in the Iranian health system (12).

Innovation: Generating new ideas, processes, products and finding innovative solutions for complex public health challenges will add value (such as better quality or efficiency) to health care and medical education system in future (19).

Implementation values

Competency-based: Competency-based medical education is an approach to preparing physicians for practice that is fundamentally oriented to graduate outcome abilities and organized around competencies derived from an analysis of societal and patient needs (23).

Community-based: Community-based education, is a form of instruction where trainees learn professional competencies in a community setting focusing on population groups and also individuals and their everyday problems (19,14).

Evidence-based medicine: This is the integration of the best research evidence with clinical decision-making and doing the right thing for the patient (25).

Workforce planning: Establish responsibilities and align training requirements for different health professionals. Shifting the centres of medical education away from more highly specialized, urban centres to rural areas can have a positive impact on learning outcomes and can encourage students to pursue careers in primary care in rural areas (30). Workforce planning aims to resolve maldistribution of health practitioners.

Preventive-based medical education: In preventive-based medical education, physicians are trained in both clinical medicine and public health. They have the skills needed to understand and reduce the risks of disease, disability and death in individuals and in population groups.

Preventive-based care: Providing care including primary, secondary and tertiary health care and rehabilitation responding to individual preferences and needs (4,26).

Table 2 Definitions of the value concepts and subconcepts of the proposed value-based framework (thematic synthesis), Islamic Republic of Iran (concluded)

Value class and selected definitions of value concept

Ideal (outcome)values

Quality: If health professionals and medical education institutions had incentives to prioritize evidence-based medical practice and education, and if systems were in place to better ensure that well-trained doctors and health care providers administered that treatment skilfully and consistently, quality would improve uniformly (19,26).

Safety: Patient safety is defined as "the prevention of harm to patients." In the analysed policy documents, the establishment of a patient safety culture is a vital step in providing quality service to patients. In our proposed framework, patient safety is the cornerstone of high-quality health care and medical education (26,27).

Health promotion: The process of enabling individuals to increase control over and improve their health. It involves the population as a whole in the context of their everyday lives, and is directed toward action on the determinants or causes of health (3,26).

Self-sufficiency and independence: The value independence and self-determination, placing importance on the role of the individual in shaping the future through one's choices, abilities and efforts (7,29).

Scientific authority: A concept that has changed over the years is nowadays a common discourse in Iranian universities and academic societies. The 4 levels proposed for the concept of scientific authority are scientific hegemony, authority in a scientific discipline, institutional authority and authority of pioneers (28).

Commitment to excellence: Dedicate ourselves to continuous improvement in all that we do and strive to be leaders for others. We take pride in what we do (4).

Progress: Health has become a more central concern in development, both as a contributor to and an indicator of sustainable development (29).