

Management of health services: A critical analysis of recent literature

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Abstract: This study aimed to analyze and synthesize scientific evidence on health services management published between 2020 and 2025 in the Scopus and Scielo databases. A qualitative documentary review was conducted, selecting nine peer-reviewed articles based on predefined inclusion criteria related to relevance, methodological rigor, and thematic alignment. The findings reveal that health services management constitutes a multifaceted field shaped by contextual, institutional, and systemic factors. While Scopus shows a substantial volume of scientific production on this topic, Scielo presents a more limited number of publications, which may restrict the dissemination of accessible knowledge in certain regions. The reviewed studies consistently highlight that effective hospital management depends not only on process optimization and technological innovation but also on equity in service provision, workforce integration, and organizational leadership. Furthermore, continuous professional training, evidence-based decision-making, and patient-centered strategies emerge as key determinants of improved healthcare performance, although their implementation varies across health systems. In conclusion, strengthening health services management requires an integrated approach that balances efficiency, equity, and human resource development. These findings have important implications for policymakers and healthcare administrators seeking to design more inclusive, efficient, and sustainable health systems.

Keywords: *Health management, Health services management, Health services, Healthcare services.*

1. Introduction

The management of health services plays an essential role in the well-being of individuals, serving as the foundation upon which public health policies are built worldwide [1]. Health systems, which range from primary to specialized care, require efficient administration to meet the needs of the population [2]. As society faces challenges such as an aging population, the rise of chronic diseases, and unexpected health crises like the COVID-19 pandemic, it becomes increasingly clear that the current management model must be adapted [3]. It is necessary to improve the distribution of resources and the quality of service, while also ensuring equity, to guarantee that all individuals, regardless of their circumstances, have access to adequate healthcare [4].

One of the greatest obstacles to effective management of health services is the integration between different levels of care, from basic to specialized, and the coordination among involved actors: doctors, administrators, patients, and institutions [5]. Although technology and healthcare personnel training have advanced significantly, coordination problems persist, leading to ineffective resource allocation, long waiting times, and sometimes low-quality care [6]. This situation is especially difficult in public health systems, where budget constraints and insufficient infrastructure hinder proper management.

In recent years, numerous studies have proposed various solutions to improve the management of health services, such as the implementation of data-driven policies, strengthening strategic planning, and enhancing the use of information technologies [7]. Furthermore, the importance of preventive approaches in public health has been recognized, focusing not only on treatment but also on promoting

healthy lifestyles to reduce the burden of chronic diseases and improve collective health in the long term [7].

Public health management, however, faces challenges that extend beyond the healthcare sector itself. Factors such as the economic context, political reforms, and social policies directly impact the ability of governments to ensure adequate care for their citizens. Investments in infrastructure and human resources are fundamental for the sustainability of the health system, but the distribution and allocation of these resources are complex tasks that must consider the social and economic realities of each country. Additionally, the active participation of citizens in decision-making regarding health policies has been identified as a key element in strengthening health systems and increasing their acceptance.

One of the most important tools for ensuring quality in the management of health services is the continuous evaluation of these services. Establishing clear and specific performance indicators is essential to measure not only efficiency in resource utilization but also patient satisfaction. This constant evaluation process allows for the identification of areas for improvement and the optimization of services, ensuring that resources are used efficiently [8]. However, there are significant obstacles, such as the lack of reliable data, resistance to change within institutions, and insufficient infrastructure in some areas, which hinder the implementation of a robust evaluation system.

Digital transformation in the healthcare sector is another growing challenge. The use of technologies such as telemedicine and health information systems has improved access to care, especially in rural areas or regions with limited resources. However, this digitalization also raises new issues related to the protection of personal data, ongoing training for healthcare personnel, and equity in access to technologies [9]. It is essential that while promoting technological advancements, it is also ensured that all citizens have equal opportunities to benefit from these advancements.

Finally, it is important to understand that the management of health services cannot be seen as an isolated process from other public policies. Health is closely connected to other factors such as education, employment, infrastructure, and social security [6]. The success of health service management depends on the government's ability to coordinate these sectors and ensure that all policies are aligned to achieve the overall well-being of the population. Health, in this sense, is a right that must be guaranteed through a robust and equitable system that considers the needs of each individual and community [3].

For the reasons stated, the following question was posed: What recent literature has been published regarding the management of health services, 2020–2025? This study focused on analyzing scientific articles published between 2020 and 2025 in the Scopus and Scielo databases, with an emphasis on health service management. The specific objectives included: identifying various concepts related to health service management, exploring the main dimensions of the variable, and summarizing the most significant conclusions regarding the research topic.

To select the studies, literature selection criteria were established. Included were those works that were directly related to the variable of interest, based on empirical data and literature published between 2020 and 2025. On the other hand, studies that did not focus on public management or that did not specifically address the main topic of analysis were excluded, as well as those that were not fully presented on the websites.

2. Methodology

The review was conducted using academic platforms such as Scielo and Scopus, which provide relevant sources of information. Scielo is particularly important in the Latin American context, serving as an essential tool for accessing pertinent content in the region, while Scopus is used as a platform to find suitable literature at a global level.

To optimize the search, specific criteria were defined to select articles, ensuring priority was given to those meeting the established requirements and corresponding to the defined time period, specifically the last five years.

During this search, we employed key terms in search engines, such as "health services," "service management," "health management," and "public health." Organized tables were created with the keywords and their respective codes to efficiently manage the obtained information.

Table 1.

Levels of Analysis and their codes.

Search Terms	Code
"Health services"	1
"Health services management"	2
"Health management"	3
"Public health"	4

3. Results

A thorough analysis of the literature was conducted using both qualitative and quantitative approaches, complemented by the review of specialized articles and other relevant sources, totaling nine documents analyzed. Regarding the findings obtained from different databases, the search for the term "health services" yielded 976 articles in Scielo and 75,765 publications in Scopus for the period from 2020 to 2025.

On the other hand, the exploration of the concept "services management" revealed 296 articles in Scielo and 5,539 records in Scopus within the same timeframe. Regarding the phrase "health management," 178 articles were identified in Scielo and 9,555 publications in Scopus. Finally, the term "public health" generated 966 results in Scielo and 14,692 in Scopus.

Table 2.

Summary table of selected scientific articles from 2020-2025 according to scientific repositories.

Number of Documents in Scielo				
Search Terms	Code	Number of Documents	Type of Documents	
			Empirical Articles	Review Articles
"Health services"	1	976	847	129
"Health services management"	2	296	227	69
"Health management"	3	178	131	47
"Public health"	4	966	903	63
Number of Documents in Scopus				
"Health services"	1	75,765	71450	4315
"Health services management"	2	5,539	5278	261
"Health management"	3	9,555	9176	379
"Public health"	4	14,692	13478	1214

Table 3.
Summary Table of the Variable “Health Services Management”.

Author(s)	Country	Definition	Dimensions	Results/Conclusions
Velázquez-López et al. [10]	<i>Spain</i>	Human processes aimed at resolving complaints presented and managed through a web application or in person regarding a patient's health	Emerging information, continuous improvement	The study involved 326 users who submitted a total of 358 complaints specifically related to treatment and information.
Mohabati et al. [11]	<i>Iran</i>	Efficiency in the practical training of students in healthcare management.	Not applicable	13 key problems were identified in practical training, which are reflected in user care.
Tanis et al. [12]	<i>Greece</i>	Digital transformation in the provision of healthcare services	Digital applications, modern adaptation.	Age significantly influences healthcare staff's self-efficacy in using technology.
Lsloum et al. [13]	<i>Saudi Arabia</i>	Hospital management models and practices for performance improvement.	Patient care quality, operational efficiency.	Effective models such as Lean Management, Six Sigma, Patient-Centered Care, and TQM improve hospital performance.
Hosseini et al. [14]	<i>Canada</i>	Not applicable	Career paths, integration with the healthcare system.	It was recommended to define clear career paths and review the employment categories approved by the Ministry of Health.
Xia et al. [15]	<i>China</i>	Not applicable	Preventive care and services, exclusion factors in management	Factors such as higher education level, alcohol consumption, and lack of medical guidance reduce the likelihood of inclusion in the program.
Baumann and Wyss [16]	<i>Sweden</i>	Capacity to use evidence in the planning and management of healthcare services.	Not applicable	The capacity to generate or commission evidence was high, but the availability of tools, training programs, and process documentation was limited.
Baumann and Wyss [16]	<i>Australia</i>	Monitoring and management of performance in the public health system.	Does not specify.	Identification of deficiencies in personnel availability, essential medications, and medical equipment.
Copcă et al. [1]	<i>Rumania</i>	Regional disparities in the provision of hospitalization services.	Does not specify.	Significant differences were observed in insurance coverage, age distribution, and the urban-rural gap, highlighting the need for more equitable public policies in access to hospital services.

4. Discussion

A recent study on health service management examined scientific publications from 2020 to 2025, gathered from databases such as Scopus and Scielo. The findings revealed a marked difference in the availability of literature on both platforms. While in Scielo, despite the precise use of keywords, only a few relevant articles were identified, Scopus presented a wide scientific output, consolidating its impact on the academic community. These results indicate that, although the topic is of great importance, the dissemination and accessibility of research may be restricted in certain sources.

The analysis of the reviewed studies demonstrates that health service management faces diverse challenges depending on the context and the approach of each study to establish a consensus definition. Efficiency in health training [11] and digital transformation [12] emerge as key factors for optimizing hospital performance and patient care quality. However, the results also reveal disparities in the implementation of strategies, equity in access, and the availability of resources, as evidenced in the study by Copcă et al. [1] on regional differences in hospital services in Romania. In this regard, health service management is consistently treated as a process aimed at improving patients' quality of life.

The analysis of the dimensions addressed in the reviewed studies allows for the identification of key trends in health service management. While some research focuses on the modernization of processes and operational efficiency, others emphasize equity in access to services and the integration of professionals into the healthcare system. This suggests that improvement in hospital management cannot rely solely on a single axis of intervention but requires a comprehensive approach that encompasses training, technology, and equity policies.

Velázquez-López et al. [10] identify two key dimensions in managing complaints within the health system: emerging information and continuous improvement. These dimensions reflect a conflict-resolution-oriented approach and the optimization of care quality based on systematic analysis of patient complaints. In contrast, Tanis et al. [12] address digital transformation from the dimensions of digital applications and modern adaptation, highlighting the importance of technology use in enhancing the efficiency and coordination of healthcare personnel.

The analysis of conclusions from reviewed studies allows for the identification of common patterns and key differences in health service management. Generally, the findings suggest that efficiency in healthcare management depends on factors such as professional training, digital transformation, equity in service delivery, and the integration of evidence in decision-making. However, approaches vary depending on the context and priorities of each healthcare system.

Mohabati et al. [11] conclude that there are critical shortcomings in the practical training of students in health management, which directly impact the quality of patient care. The lack of adequate preparation in hospital management leads to inefficiencies in service delivery, weak leadership capacities, and fragmented decision-making processes, ultimately affecting the overall user experience and satisfaction.

Another relevant aspect identified in the literature is the role of governance and institutional leadership in health service management. Several studies emphasize that effective leadership structures facilitate the alignment of organizational objectives with patient-centered care models. In systems where governance mechanisms are weak or poorly coordinated, reforms in management practices tend to be slower and less sustainable over time.

Furthermore, the reviewed studies underline the growing importance of evidence-based management in healthcare institutions. The incorporation of data analytics, performance indicators, and continuous monitoring systems allows managers to identify gaps in service delivery and implement corrective actions in a timely manner. This approach not only improves efficiency but also strengthens accountability and transparency within health organizations.

Equity emerges as a cross-cutting theme in health service management, particularly in contexts characterized by socioeconomic and regional disparities. The literature highlights that unequal distribution of resources, workforce shortages, and infrastructure limitations significantly affect access to quality healthcare. Addressing these inequities requires targeted public policies and coordinated efforts between national and local health authorities.

The integration of healthcare professionals into management processes is also identified as a critical factor. Studies suggest that participatory management models, which involve clinicians and administrative staff in decision-making, contribute to improved organizational commitment and better implementation of institutional strategies. This integration fosters a shared vision focused on quality improvement and patient safety.

In addition, digital transformation is not limited to adopting technological tools but also involves cultural and organizational change. The literature emphasizes that resistance to change, lack of digital competencies, and insufficient infrastructure can hinder the successful implementation of digital solutions in healthcare settings. Therefore, digitalization strategies must be accompanied by continuous training and change management initiatives.

Patient-centered care remains a central objective across all reviewed studies. Health service management is increasingly oriented toward understanding patient needs, expectations, and experiences as key inputs for improving service quality. Mechanisms such as satisfaction surveys, complaint management systems, and feedback platforms are considered essential for aligning management practices with patient perspectives.

Finally, the synthesis of the reviewed literature indicates that health service management is a dynamic and multidimensional field. Its effectiveness depends on the interaction between human resources, technology, governance, and social context. Future research should prioritize comparative studies and longitudinal analyses to better understand how different management models influence health outcomes and system sustainability over time.

5. Conclusions

A recent study on health service management analyzed scientific publications published between 2020 and 2025, gathered from databases such as Scopus and Scielo. The results reflected a notable difference in the amount of available literature on both platforms. While in Scielo, despite using precise search terms, only a few relevant studies were found; Scopus had a large number of publications, consolidating its importance in the academic field. These findings highlight that, although health service management is a crucial topic, access to and dissemination of research may be limited depending on the source consulted, directly impacting the ability to generate accessible knowledge for all.

The analysis of the reviewed studies shows that health service management faces varied challenges, depending on the context and the focus of each research. This emphasizes that health management is not just a matter of efficiency; its central purpose is to improve the quality of life for patients, ensuring that everyone has access to dignified and effective care.

Exploring the various perspectives addressed in these studies allows for the recognition of essential patterns in hospital administration. While some studies prioritize the optimization of processes and increases in operational productivity, others emphasize the importance of ensuring equitable distribution of medical services and the effective integration of healthcare personnel within the care system.

A detailed examination of the conclusions of these works reveals significant similarities and contrasts in health service management. Generally, efficient performance in this field is conditioned by multiple elements, such as human resource training, the adoption of new technologies, equity in access to medical care, and the use of evidence-based data to inform decisions. However, the way these aspects are implemented varies according to the particularities of each health system and its specific priorities.

Transparency:

The author confirms that the manuscript is an honest, accurate, and transparent account of the study; that no vital features of the study have been omitted; and that any discrepancies from the study as planned have been explained. This study followed all ethical practices during writing.

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References

- [1] N. Copcă, C. Mihăescu-Pinția, M.-D. Agafiței, S. Stamule, and I. Nimerenco, "Sustainable healthcare development in Romania: Comparative cluster analysis of hospitalisation indicators from 2019 and 2023 highlighting regional disparities," *Economic Computation and Economic Cybernetics Studies and Research*, vol. 58, no. 4, pp. 242–255, 2024.
- [2] S. Moody, S. Senior, and K. Khan, "Investigating healthcare pathway management and inequalities using a novel data source: An observational study using linked, routinely collected data from a digital health system," *International Journal of Healthcare Management*, pp. 1–9, 2024. <https://doi.org/10.1080/20479700.2024.2405325>
- [3] A. A. Rawabdeh, "Health services management: The inclusive sceneries of higher education quality enhancement endeavours for the college of medicine at Yarmouk University," *Journal of Health Management*, vol. 27, no. 2, pp. 244–267, 2025. <https://doi.org/10.1177/09720634241246328>
- [4] S. Hashtarkhani, D. L. Schwartz, and A. Shaban-Nejad, "Enhancing health care accessibility and equity through a geoprocessing toolbox for spatial accessibility analysis: Development and case study," *JMIR Formative Research*, vol. 8, p. e51727, 2024. <https://doi.org/10.2196/51727>
- [5] L. Pratici, A. Francesconi, G. Lanza, A. Zangrandi, and S. Fanelli, "The managerial role of healthcare professionals in public hospitals: A time-driven analysis of their activities," *BMC Health Services Research*, vol. 23, no. 1, p. 465, 2023. <https://doi.org/10.1186/s12913-023-09395-7>
- [6] M. Torres *et al.*, "Consensus on post COVID in the Spanish national health system: Results of the CIBERPOSTCOVID eDelphi study," *Journal of Infection and Public Health*, vol. 16, no. 11, pp. 1784–1792, 2023. <https://doi.org/10.1016/j.jiph.2023.08.022>
- [7] D. Cassel and K. Jacobs, "Gestaltungsbedarf eines funktionsfähigen Wettbewerbs in der sozialen Krankenversicherung," *Gesundheitsökonomie & Qualitätsmanagement*, vol. 28, no. 04, pp. 185–192, 2023. <https://doi.org/10.1055/a-2117-0222>
- [8] C. A. O'Leary, L. Piu, and G. Braitberg, "Evaluating the impact of junior doctors in quality improvement—a 10-year review," *Australian Health Review*, vol. 47, no. 4, pp. 441–447, 2023. <https://doi.org/10.1071/AH23037>
- [9] I. Scolfaro, B. Albanesi, and S. Campagna, "The use of health information systems for planning community care," *Assistenza Infermieristica e Ricerca: AIR*, vol. 42, no. 2, pp. 111–118, 2023. <https://doi.org/10.1702/4050.40317>
- [10] M. F. Velázquez-López, M. García-Pérez, M. Souto-Pereira, and J. M. Vazquez-Lago, "Descriptive study of claims in primary care during the year 2022 in a health area of Spain," *Clinics*, vol. 80, p. 100546, 2025. <https://doi.org/10.1016/j.clinsp.2024.100546>
- [11] F. Mohabati, M. Arefi, and S. P. Hedayati, "Revamping field practicum: Insights for future health services management professionals," *BMC Medical Education*, vol. 25, p. 81, 2025. <https://doi.org/10.1186/s12909-024-06486-9>
- [12] T. Tanis, C. Chatzigeorgiou, I. Simeli, and E. Stalika, "Digital transformation management in health services: Health professionals perceptions as an implementation factor," *Global Clinical Engineering Journal*, vol. 6, pp. 12–24, 2024. <https://doi.org/10.31354/globalce.v6iSI6.270>
- [13] M. M. A. Lsloum *et al.*, "Strategies for effective health services management in hospitals: A systematic review of key models and practices," *Journal of Ecohumanism*, vol. 3, no. 8, pp. 881–888, 2024. <https://doi.org/10.62754/joe.v3i8.4775>
- [14] M. M. Hosseini, A. Koohpaei, H. Ebrahimipour, and S. T. M. Hosseini, "Policy options to address the effectiveness of health service management graduates in solving Iranian health system challenges: a mixed scoping review and policy Delphi approach," *EClinicalMedicine*, vol. 77, p. 102875, 2024. <https://doi.org/10.1016/j.eclinm.2024.102875>
- [15] Y. Xia *et al.*, "Analysis on the present situation of basic public health service management and blood pressure control in patients with hypertension in ethnic minorities at high altitud," *Modern Preventive Medicine*, vol. 51, no. 13, pp. 2411–2416, 2024. <https://doi.org/10.20043/j.cnki.MPM.202403295>
- [16] A. Baumann and K. Wyss, "Exploring evidence use and capacity for health services management and planning in Swiss health administrations: A mixed-method interview study," *Plos One*, vol. 19, no. 5, p. e0302864, 2024. <https://doi.org/10.1371/journal.pone.0302864>