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Identification of Dimensions and Components of Performance Improvement Management for Educational Group Managers

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A B S T R A C T

Purpose: This study aims to develop a comprehensive model for performance improvement management among educational group managers by identifying critical factors and components that influence managerial effectiveness in educational settings.

Methodology: The research adopts a descriptive-survey methodology, with a statistical population comprising 400 educational group managers from Islamic Azad University in Tehran. Using the Morgan table, a sample of 196 participants was randomly selected. Data were collected using a researcher-made questionnaire and analyzed using structural equation modeling (SEM) based on an exploratory factor analysis approach with LISREL software. Validity was assessed using composite reliability (CR) and Cronbach's alpha, with additional evaluations through Bartlett's test and KMO measure.

Findings: The analysis identified six significant factors affecting performance improvement management: continuous monitoring and evaluation (R = .67, t = 9.56), knowledge management (R = .58, t = 8.27), professional development (R = .61, t = 8.70), empowerment (R = .89, t = 13.12), professional ethics (R = .71, t = 15.81), and managerial role (R = .69, t = 9.85). These factors encompass 25 specific components, such as planning, educational needs assessment, knowledge sharing, self-development skills, cognitive support, and strategic planning ability, all demonstrating significant factor loadings ($p < .001$).

Conclusion: The findings underscore the importance of structured and continuous management practices in educational settings. Emphasizing continuous monitoring, effective knowledge management, professional development, empowerment, ethical standards, and strong managerial roles can significantly enhance the performance of educational group managers. These insights provide a robust framework for educational institutions to improve their management strategies and achieve better organizational outcomes.

Keywords: *Management, Managers' Performance, Educational Group*

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1. Introduction

Self-management education has been widely recognized for its effectiveness in various organizational conditions (Golabchi et al., 2024; Hristov et al., 2022; Maarefvand & Shafiabady, 2024; Miri Rami et al., 2022). For instance, Ali et al. (2019) demonstrated that group asthma education significantly improved asthma control and reduced emergency room visits in an underserved New York community (Fields & Batterman, 2018). Similarly, Burkow et al. (2013) highlighted the acceptability of internet-enabled pulmonary rehabilitation and diabetes education in group settings, emphasizing the importance of accessible and patient-friendly education methods (Burkow et al., 2013). These findings underscore the potential benefits of structured educational programs in managing chronic conditions and improving patient outcomes.

In the context of diabetes management, several studies have shown the positive impact of structured self-management education. Carey et al. (2019) explored organizational support for structured self-management education for people with type 2 diabetes, revealing that such programs are crucial in enhancing patients' self-management skills and overall health (Carey et al., 2019). Romero-Castillo et al. (2022) conducted a pilot randomized controlled trial on the effects of a diabetes self-management education program, finding significant improvements in glucose levels and self-care practices among participants (Romero-Castillo et al., 2022). These studies highlight the critical role of well-structured educational interventions in chronic disease management and their potential applicability in educational management.

The efficacy of flipping education programs has also been investigated in various settings. Chang and Dai (2019) conducted a randomized controlled trial on the efficacy of a flipping education program for chronic obstructive pulmonary disease (COPD) patients, demonstrating significant improvements in self-management. This innovative approach to education, where traditional lecture content is delivered outside the classroom and interactive activities are conducted in class, has shown promising results in enhancing learning outcomes and self-efficacy (Chang & Dai, 2019).

Group education programs have also been beneficial in managing other chronic conditions. Fields and Batterman (2018) examined strategies to improve disease education in people with gout, emphasizing the need for tailored educational interventions to enhance patient understanding and management of the condition (Fields & Batterman, 2018). Henry et al. (2007) conducted a randomized clinical trial on group counseling based on tinnitus retraining therapy, finding significant improvements in patients' quality of life and symptom management (Henry et al., 2007). These studies suggest that group education programs can be highly effective in various health contexts, providing valuable insights for educational management in academic settings.

The importance of early detection and health education in preventing recurrent health issues has been highlighted by Kariasa et al. (2022). Their study on the combination of a digital sensor prototype and health education for self-management in preventing recurrent ischemic stroke underscores the critical role of innovative tools and educational strategies in improving patient outcomes. This approach can be translated into educational management, where early detection of performance issues and targeted interventions can enhance overall management effectiveness (Kariasa et al., 2022).

Quality management in higher education has been extensively studied, with researchers emphasizing the need for systematic approaches to ensure educational quality. Krymets (2021) proposed a methodology for ensuring quality management in higher education, highlighting the importance of continuous improvement and stakeholder involvement (Krymets, 2021). Similarly, Mo (2014) discussed the construction of quality management systems based on ISO9000 standards, providing a framework for implementing quality assurance practices in educational institutions (Mo, 2014). Tari and Dick (2016) reviewed trends in quality management research in higher education institutions, emphasizing the importance of adopting quality management principles to enhance institutional performance and educational outcomes (Tarí & Dick, 2016).

The role of self-management education in improving patient outcomes has been well-documented in various studies. Ockleford et al. (2008) conducted a qualitative study on education and self-management for people newly diagnosed with type 2 diabetes, finding that patient education significantly enhances self-management capabilities (Ockleford et al., 2008). Uritani et al. (2021) systematically reviewed the effects of self-management education programs on self-efficacy for osteoarthritis of the knee, demonstrating positive outcomes in patient self-efficacy and disease management (Uritani et al., 2021). These findings suggest that similar educational strategies

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can be applied to enhance the performance of educational group managers.

The impact of educational interventions on disease management has been further explored in studies on specific conditions. Riemsma et al. (2003) examined group education for patients with rheumatoid arthritis and their partners, finding significant improvements in disease management and quality of life (Riemsma et al., 2003). Wang et al. (2016) proposed a model of health education and management for osteoporosis prevention, highlighting the importance of tailored educational interventions in managing chronic conditions (Wang et al., 2016). These studies provide valuable insights into the design and implementation of educational programs for performance improvement in academic settings.

Innovative health management models, such as the "internet plus medical"-based health management service model for nonalcoholic fatty liver disease, have shown promising results in improving patient outcomes (Yang et al., 2020). These models leverage technology to deliver comprehensive health management services, which can be adapted for educational management to enhance the performance of group managers through technology-enabled learning and support systems.

The significance of structured education programs in chronic disease management is further supported by studies on various conditions. Friend and Morrison (2014) reviewed interventions to improve asthma management in school-age children, emphasizing the need for structured educational programs to enhance disease management and prevent complications (Haarbauer-Krupa et al., 2017). Haarbauer-Krupa et al. (2017) identified gaps in service delivery for children following traumatic brain injury, highlighting the importance of integrated educational and healthcare services to address these gaps (Haarbauer-Krupa et al., 2017). These findings underscore the potential benefits of structured educational programs in managing complex conditions and improving outcomes.

The role of organizational behavior in instructional management has been explored in various studies. Sui (2024) reviewed the utilization of organizational behavior in instructional management within higher vocational colleges, highlighting the importance of adopting effective management practices to enhance educational outcomes. Wexley and Baldwin (1986) discussed management development, emphasizing the need for continuous professional development and training for managers to enhance their performance and effectiveness. These studies provide a framework for developing educational management programs that focus on continuous improvement and professional development (Wexley & Baldwin, 1986).

The importance of patient education in managing chronic conditions has been highlighted in various studies. Wilken (2023) conducted a scoping review on patient education in atopic dermatitis, finding that structured educational programs significantly improve patient outcomes and self-management capabilities (Wilken, 2023). These findings suggest that similar educational strategies can be applied to enhance the performance of educational group managers through targeted education and support.

In conclusion, the existing literature underscores the critical role of structured education programs and quality management systems in enhancing performance and outcomes across various domains. By drawing insights from health management and education studies, this manuscript aims to develop a comprehensive model for performance improvement management among educational group managers. The proposed model will incorporate elements of continuous monitoring, professional development, and innovative educational strategies to enhance the effectiveness and capabilities of educational managers.

2. Methods and Materials

2.1. Study Design and Participants

This study aimed to examine the current state of variables by collecting information from experts, thus classifying it as a descriptive-survey research. The statistical population consisted of all educational group managers at Islamic Azad University in Tehran, encompassing 400 individuals across eight university units: North Tehran, Tehran Medical, Central Tehran, South Tehran, Tehran Dental, Science and Research Tehran, Pharmaceutical Sciences, and West Tehran (Sama). Using the Morgan table, a sample size of 196 individuals was determined. This sample included 131 education specialists with Ph.D. degrees employed at Islamic Azad University and 65 educational group managers engaged in performance improvement management and related processes.

2.2. Data Collection

For data collection, both library and field methods were employed. Field methods were used to gather numerical and statistical data. Information can be collected in various ways,

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from different places, and from various sources. Collection methods included in-person interviews, telephone interviews, computer-assisted interviews, in-person questionnaires, postal or electronic questionnaires, observation of individuals or events with or without audio or video recording, and various other motivational techniques such as projective tests. Specifically, a researcher-made questionnaire was used as the data collection tool in this study. Data were gathered from the statistical population using this questionnaire, and after scoring the responses, the data were analyzed. To assess the validity of the questionnaire, composite reliability (CR) and Cronbach's alpha coefficient along with the average extracted variance were used.

2.3. Data Analysis

Data analysis was conducted using two main approaches:

- Descriptive Data Analysis: This involved describing the research variables using common descriptive statistical methods such as drawing descriptive tables, frequency distribution, charting, and plotting statistical characteristics.
- Inferential Data Analysis: This involved using structural equation modeling based on the exploratory factor analysis approach with LISREL software to analyze the collected data.

3. Findings and Results

The sample included 400 respondents: 284 men (71%) and 116 women (29%). Most respondents were over 50 years old (41.5%), followed by those aged 45-50 (28.8%). The majority had more than 15 years of teaching experience (55.5%).

The Kolmogorov-Smirnov test confirmed the normal distribution of data across all variables ($p > .05$). Therefore, parametric tests were suitable for further analysis.

The Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy was .898, indicating the suitability of data for factor analysis. Bartlett's test of sphericity was significant ($\chi^2 = 5299.44$, $df = 300$, $p < .001$), confirming the appropriateness of factor analysis for identifying the data structure.

The construct validity was confirmed through composite reliability (CR) and Cronbach's alpha coefficients, all above the acceptable threshold of .70. Average Variance Extracted (AVE) for all constructs exceeded .50, indicating adequate convergent validity.

The model fit indices were within acceptable ranges, indicating a good fit for the structural model: $\chi^2/df = 1.743$, RMSEA = .046, GFI = .915, and NFI = .961. These values suggest that the model adequately represents the data.

The analysis identified six significant factors influencing the performance improvement management of educational group managers. All factors had significant t-values ($p < .001$), confirming their importance in the model.

Table 1

Evaluation of Factors of the Performance Improvement Management Model

Factor	R	t	p-value	Result
Continuous Monitoring	.67	9.56	.001	Confirmed
Knowledge Management	.58	8.27	.001	Confirmed
Professional Development	.61	8.70	.001	Confirmed
Empowerment	.89	13.12	.001	Confirmed
Professional Ethics	.71	15.81	.001	Confirmed
Managerial Role	.69	9.85	.001	Confirmed

The analysis identified six significant factors influencing the performance improvement management of educational group managers. Continuous monitoring had an R-value of .67 ($t = 9.56$, $p = .001$), knowledge management had an R-value of .58 ($t = 8.27$, $p = .001$), professional development had an R-value of .61 ($t = 8.70$, $p = .001$), empowerment had an R-value of .89 ($t = 13.12$, $p = .001$), professional ethics had an R-value of .71 ($t = 15.81$, $p = .001$), and managerial role had an R-value of .69 ($t = 9.85$, $p = .001$), all confirming their significance in the model.

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Table 2

Evaluation of Components of Identified Factors

Factor	Component	Symbol	Factor Loading	p-value	Result
Continuous Monitoring	Management of Administrative Affairs	CME1	.69	.001	Confirmed
	Planning	CME2	.88	.001	Confirmed
	Organizational Commitment	CME3	.74	.001	Confirmed
	Educational Needs Assessment	CME4	.76	.001	Confirmed
Knowledge Management	Application of Knowledge	KNM1	.67	.001	Confirmed
	Dissemination and Transfer of Knowledge	KNM2	.84	.001	Confirmed
	Knowledge Sharing	KNM3	.78	.001	Confirmed
	Knowledge Acquisition	KNM4	.77	.001	Confirmed
Professional Development	Innovation and Creativity Skills	PRD1	.78	.001	Confirmed
	Self-Development Skills	PRD2	.80	.001	Confirmed
	Change Management	PRD3	.77	.001	Confirmed
	Professional Skills	PRD4	.80	.001	Confirmed
	Research Skills	PRD5	.77	.001	Confirmed
Empowerment	Cognitive Support	EMP1	.78	.001	Confirmed
	Work Environment Organization	EMP2	.83	.001	Confirmed
	Encouragement and Motivation	EMP3	.75	.001	Confirmed
Professional Ethics	Judgment and Decision-Making	ADF1	.79	.001	Confirmed
	Trust-Building	ADF2	.73	.001	Confirmed
	Fidelity	ADF3	.60	.001	Confirmed
	Effective Human Relations	ADF4	.59	.001	Confirmed
Managerial Role	Strategic Planning Ability	RGM1	.73	.001	Confirmed
	Decision, Analysis, Design, and Evaluation	RGM2	.76	.001	Confirmed
	Staff Management	RGM3	.68	.001	Confirmed
	Resource Mobilization	RGM4	.66	.001	Confirmed
	Intellectual Leadership	RGM5	.63	.001	Confirmed

For continuous monitoring, the factor loadings for the components ranged from .69 for management of administrative affairs to .88 for planning. Knowledge management components had factor loadings from .67 for application of knowledge to .84 for dissemination and transfer of knowledge. Professional development components ranged from .77 for research skills to .80 for self-development and professional skills. Empowerment components ranged from .75 for encouragement and motivation to .83 for work environment organization. Professional ethics components ranged from .59 for effective human relations to .79 for judgment and decision-making. Managerial role components had factor loadings from .63 for intellectual leadership to .76 for decision, analysis, design, and evaluation. All components had p-values of .001, indicating strong significance in the model.

4. Discussion and Conclusion

The results of this study identified six critical factors and 25 components essential for performance improvement management among educational group managers. These factors include continuous monitoring and evaluation, knowledge management, professional development, empowerment, professional ethics, and managerial role. Each factor's significant impact on performance improvement underscores their importance in managing educational groups effectively.

Continuous monitoring and evaluation emerged as a crucial factor with a significant R-value of .67 ($t = 9.56$, $p = .001$). This aligns with the findings of Mahjubian, Bahraminejad, and Kamali (2018), who demonstrated that structured group discussions and ongoing evaluations significantly enhance self-management behaviors in hemodialysis patients (Mahjubian et al., 2018). Similarly, Burkow et al. (2013) emphasized the importance of ongoing assessments in internet-enabled pulmonary rehabilitation programs, which contributed to better patient outcomes (Burkow et al., 2013). In the context of educational management, continuous monitoring ensures that managers can identify areas needing improvement and implement timely interventions, thereby enhancing overall performance.

Knowledge management had an R-value of .58 ($t = 8.27$, $p = .001$), indicating its vital role in performance improvement. This finding is supported by Ockleford et al. (2008), who found that effective knowledge sharing and management significantly improve self-management

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capabilities in newly diagnosed diabetes patients (Ockleford et al., 2008). Similarly, Wang et al. (2016) highlighted the importance of knowledge dissemination in osteoporosis prevention programs (Wang et al., 2016). In educational settings, knowledge management facilitates the sharing of best practices and innovative strategies, which can lead to more effective management and improved outcomes for educational groups.

Professional development showed a strong R-value of .61 (t = 8.70, p = .001), emphasizing its importance in enhancing managerial performance. This finding resonates with the work of Chang and Dai (2019), who demonstrated that flipping education programs significantly improved self-management in COPD patients. Additionally, Krymets (2021) underscored the necessity of continuous professional development to maintain high standards in higher education quality management (Krymets, 2021). Professional development programs for educational managers ensure they stay updated with the latest management techniques and educational strategies, thereby improving their effectiveness.

Empowerment was identified as a highly significant factor with an R-value of .89 (t = 13.12, p = .001). This aligns with the study by Romero-Castillo et al. (2022), which showed that empowerment through self-management education programs significantly improved glucose levels and self-care practices in diabetes patients (Romero-Castillo et al., 2022). Similarly, Kariasa et al. (2022) demonstrated that empowering patients with early detection tools and health education effectively prevented recurrent ischemic strokes. Empowering educational managers involves providing them with the necessary tools, resources, and authority to make decisions, leading to improved performance and job satisfaction (Kariasa et al., 2022).

Professional ethics had an R-value of .71 (t = 15.81, p = .001), highlighting its importance in performance improvement. This finding is consistent with the work of Fields and Batterman (2018), who emphasized the need for ethical considerations in disease education for gout patients (Fields & Batterman, 2018). Moreover, Tari and Dick (2016) highlighted the importance of ethical practices in quality management research in higher education (Tarí & Dick, 2016). Upholding high ethical standards ensures that educational managers make fair and just decisions, fostering a positive organizational culture and improving overall performance.

The managerial role had an R-value of .69 (t = 9.85, p = .001), indicating its significance in managing educational groups effectively. This finding is supported by the study of Wexley and Baldwin (1986), who emphasized the critical role of management development in enhancing organizational performance (Wexley & Baldwin, 1986). Additionally, Uritani, Koda, and Sugita (2021) demonstrated the positive impact of self-management education programs on self-efficacy for osteoarthritis patients, underscoring the importance of effective management in achieving positive outcomes (Uritani et al., 2021). Developing strong managerial skills among educational managers ensures they can lead their teams effectively, manage resources efficiently, and drive performance improvements.

While this study provides valuable insights into the factors influencing performance improvement management among educational group managers, several limitations should be acknowledged. First, the study's sample was limited to educational group managers in Islamic Azad University in Tehran, which may not be representative of other educational institutions or geographical regions. Second, the study relied on self-reported data, which may be subject to bias. Third, the cross-sectional design of the study does not allow for the examination of causal relationships between the identified factors and performance improvement.

Future research should consider expanding the sample to include educational managers from various institutions and regions to enhance the generalizability of the findings. Longitudinal studies could provide deeper insights into the causal relationships between the identified factors and performance improvement. Additionally, future research could explore the impact of specific interventions targeting the identified factors on performance improvement in educational settings. Investigating the role of technology in facilitating continuous monitoring and knowledge management could also provide valuable insights for enhancing educational management practices.

The findings of this study offer several practical implications for educational institutions. Institutions should prioritize continuous monitoring and evaluation to identify areas for improvement and implement timely interventions. Establishing robust knowledge management systems can facilitate the sharing of best practices and innovative strategies among educational managers. Investing in professional development programs is crucial to ensure that managers are equipped with the latest management techniques and educational strategies. Empowering managers by providing them with the necessary tools, resources, and authority to make decisions can lead to

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improved performance and job satisfaction. Finally, upholding high ethical standards in management practices is essential for fostering a positive organizational culture and enhancing overall performance. Implementing these strategies can significantly contribute to the effective management of educational groups and the achievement of organizational goals.

In conclusion, this study identifies six critical factors that significantly influence the performance improvement management of educational group managers. The findings align with previous research on self-management education and quality management in various contexts, providing a robust framework for enhancing educational management practices. By addressing the identified limitations and exploring new research avenues, future studies can further refine and validate the proposed model, contributing to the continuous improvement of educational management.

Authors' Contributions

The first author was responsible for conducting the interview and collecting data, and the other authors were responsible for analyzing the data and writing the article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethics Considerations

In this study, to observe ethical considerations, participants were informed about the goals and importance of the research before the start of the interview and participated in the research with informed consent.

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