

**Table 2 Ranking of proposed implementation mechanisms for general health policies**

	<b>Mechanisms</b>	<b>Mean rating (<math>\pm</math>SD)</b>	<b>Median</b>	<b>Quarterfinal</b>
1	Organizing the referral system through a family physician programme	9.88 ( $\pm$ 0.34)	10	10
2	Considering general health policies in formulation processes of 5-year economic, social, and cultural plans	9.72 ( $\pm$ 0.46)	10	10
3	Allocation of grants to the national needs of health sector	9.72 ( $\pm$ 0.46)	10	10
4	Preparations for electronic health records	9.63 ( $\pm$ 0.49)	10	10
5	Covering the cost-effectiveness of screening and preventive activities by insurance organizations	9.50 ( $\pm$ 0.51)	9.5	10
6	Developing standards, protocols and clinical guidelines and necessary controls	9.38 ( $\pm$ 0.49)	9	10
7	Identify and managing hazards and environmental pollution of hospitals and clinical centres	9.19 ( $\pm$ 0.59)	9	10
8	Identify and introducing each person/household to the role of controlling and reducing health-threatening pollution	9.00 ( $\pm$ 0.62)	9	9
9	Construction of agricultural facilities to produce organic foods and cultivate medicinal plants at each medical sciences university	8.97 ( $\pm$ 1.18)	9.5	10
10	Holding international conferences to introduce Iranian traditional medicine	8.69 ( $\pm$ 1.26)	9	10
11	Establish prevention clinics in hospitals affiliated to the Ministry of Health and Medical Education	8.44 ( $\pm$ 1.37)	8	10
12	Focus on economic evaluation and health technology assessment in the process of purchasing, manufacturing and even researching high-tech medicines and medical equipment	8.06 ( $\pm$ 1.44)	8	9.5
13	Subsidizing the consumption of healthy food (targeted subsidies to promote health)	7.94 ( $\pm$ 1.44)	8	9
14	Food fortification with micronutrients based on geographical distribution of micronutrient and vitamin deficiencies in the Islamic Republic of Iran	7.75 ( $\pm$ 1.39)	8	9
15	Establishing clinics of traditional medicine in the hospitals affiliated to the Ministry of Health and Medical Education	7.59 ( $\pm$ 1.21)	7	8
16	Offering financial incentives by insurance companies to maintain health through risk reduction and lifestyle promotion	7.47 ( $\pm$ 1.16)	7	8
17	Qualitative and quantitative progress in the education of academic traditional medicine and traditional pharmacy at universities	7.28 ( $\pm$ 1.08)	7	8
18	Equitable needs-based increase in the number of health care centres in the cities and provinces	7.19 ( $\pm$ 0.64)	7	8
19	Financial support for documentation of traditional medicine	7.09 ( $\pm$ 0.59)	7	7
20	Identifying and introducing healthy and unhealthy foods at the community level	7.06 ( $\pm$ 0.67)	7	7
21	Formulation of suitable financial controls for patients and doctors, in order to avoid excessive demands on the health care system	6.94 ( $\pm$ 0.76)	7	7