

Improving hospital management a priority

WITH a green paper released for public consultation, role-players and citizens have, for the first time, some concrete information as to how the South African health-care landscape is going to be transformed.

However, one of the early weaknesses identified in winning over South Africans to National Health Insurance (NHI) is the lack of confidence in public health, specifically public hospitals. This means that improving public hospitals is a priority.

Private sector health-care providers have been anxiously waiting to understand what their role is going to be, with Health Minister Dr Aaron Motsoaledi warning that the sector had to be regulated to curb the high cost of care.

Although Motsoaledi is itching to curb the high cost of private health care, he is under no illusion that he needs to partner with the private sector if NHI is to be successful.

The mood at the recent Hospital Association of SA (Hasa) conference was one of partnership and working together. The theme was "Reform Side by Side. Rethink. Reconnect. Reform."

In the early days, when NHI was still being discussed at ANC headquarters, some trade unions made no secret of the fact that they wanted to get rid of the private sector, whether it be the providers or medical schemes.

However, several speakers at the Hasa conference made it clear that they supported the principle of transforming the health system under the banner of NHI and felt that they had a role to play.

One of Motsoaledi and Health Director-General Precious Matsoso's biggest headaches is the management of hospitals. And while the department has some specific plans on how to deal with this headache, the question arises whether private sector hospitals could play a meaningful role.

In an interview, Mediclinic group executive Roly Buys said that for a long time "everyone knew of NHI, but nobody knew (anything) about it".

He said the green paper opened the door for them to enter the debate.

Buys said private hospital groups, such as Mediclinic, had much to offer, including the training of people to manage and govern hospitals, more than 20 years' experience in patient administration systems, pharmacy management, managing patients and raising a bill, understanding disease patterns and so on.

"There are important decisions to be made on how we transfer these skills."

Buys said most of their hospital managers had been trained internally after building up a wealth of experience on the job and studying at tertiary level.

Asked whether he thought that it was possible for the private sector and the government to sit around a table, Buys said Motsoaledi had been a breath of fresh air.

"He is really dedicated to the task and, entirely involved in his portfolio. But the

The health minister wants to curb private health care's high costs, but knows he must partner with this sector for NHI to succeed



ANSO THOM



A man collapses at Chris Hani Baragwanath Academic Hospital and a staff member comes to his aid. He is later moved to the front of the queue for further medical attention. Hospital and other managers must be recognised as the critical backbone of governance in the health system, says UCT's Professor Lucy Gilson. PICTURE: TRACY BERNARD

problem he faces is so big and I am not sure he has the capacity in the public sector to deal with it.

"But his vigour, interest, involvement and passion is very different from that of some of his predecessors. As long as there is consultation and robust debate, I think we can go forward."

Buys said the outlook was far more positive than a couple of years ago.

"There is a willingness on the side of the private sector to work – we want to find solutions."

In the short to medium term, Mediclinic would want to address the huge shortage of nurses.

"This is a critical area, which affects both the private and public sector equally and we need to address these shortages urgently."

In terms of addressing the management of health facilities, Buys said Mediclinic would be more than willing to help set up the infrastructure to improve this sector.

Professor Lucy Gilson of the Health Economics Unit at UCT responded to the question whether the private sector had a role to play.

"There are certainly lessons to be learnt about aspects of management. But we also need to acknowledge that managing public hospitals (as any public organisation) has some different and important dimensions.

"Because they work within complex

bureaucratic settings, they seek to create public value rather than shareholder value, they serve a more heterogeneous population with more heterogeneous demands, and are accountable to the population as citizens, not just to their patients, and so are subject to "political" as well as technical lines of accountability"

Matsoso is adamant that the improvement of hospital management is critical and urgent.

She is toying with the idea of insisting that hospital managers need some formal qualification that is focused on the management of health institutions.

"Over the years we have not been stringent in how we assigned people to these positions."

Matsoso pointed out that significant revenue is lost by hospitals unable to collect money due to them.

"You need competent managers to do this, but they also need to be given the responsibility and authority to do so. Authority needs to be delegated to these managers."

She confirmed that as part of the process, current hospital managers would have to reapply for their jobs, but "nobody will lose their job, they may be reassigned".

Gilson listed several ways in which hospital management could be improved:

• Recruit leaders and managers with

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Private-sector health-care providers feel private hospitals have a meaningful role to play in transforming the health system
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relevant experience and skills, and a range of technical, general management and emotional competencies.

• Raise the profile of and acknowledge and value those who work in these vital positions, get people to choose leadership as a career and develop career paths for those in leadership positions.

• Enable them to strengthen competencies over time through continuous learning – forms of training rooted in real workplace issues and problems, but also other forms of learning. They must also be able to share their experiences with one another, develop ideas through working with others, and provide them with time and space to stand back from their own experience and think about new ways of doing things.

• Hold them accountable for their hospitals and staff, but use accountability frameworks as ways of supporting not just disciplining.

Gilson said: "One of South Africa's critical health-care challenges is improving its responsiveness to population needs and expectations – and this requires the strengthening of leadership and governance across the health system."

"Public hospitals are particularly important, because for the majority of the population they are commonly the first port of call when they are sick and vulnerable.

"Hospital managers are not solely responsible for improving services at public hospitals, but can make an important difference. They must be recognised, along with other health managers, as the critical backbone of governance in the health system.

"Most are conscientiously and carefully managing often very difficult situations. While, like all health workers, they must be held accountable for their actions, they must also be acknowledged for the contributions they make in ensuring the health system serves the population.

"But to be effective they need sufficient decision-making authority to be responsive to the particular needs of their organisation, as well as the guidance and support that will support them in their roles.

"Also important are regular opportunities to share experiences and learn from one another, as well as refresh the wide range of technical, managerial and emotional competencies a strong leader requires. Public managers in general, and public hospital managers in particular, are vital in building a health system that serves South Africa's whole population"

– Health E-News