



MANIFEST

ISSUE BRIEF

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Professionalising the cadre of facility health managers

KEY MESSAGE

The professionalization of managers in the staffing structure of health facilities will lead to more commitment to their roles and hence contribute to the improvement of quality services at that level.



Across-section of district trainees attending a short course in health services management at Makerere University School of Public Health (Image Credit: Kakaire Kirunda)

The Issue

Under the decentralized system of governance, health facilities are not only points of delivery but also hold resources that require management. At health facility level, a manager commonly referred to as an in-charge plays the role of planning and managing the resources for quality service delivery. The management of health facilities is therefore important in ensuring continuous improvement of quality at service delivery points. In Uganda, management carries extra assignments to health workers working at Health Centre IV and below. Health workers are primarily appointed to provide clinical, nursing or medical services to the clients served. In addition, the position doesn't attract any extra benefits although it's highly demanding, as it's a full managerial position that requires a set of skills to perform.

The MANIFEST Experience

The findings of this issue brief are based on 22 key informant interviews undertaken among health facility managers and select district health team members of three rural districts in Eastern Uganda. Pallisa, Kibuku and Kamuli were the districts in which Makerere University School of Public Health through the MANIFEST study intervened to improve management practices among health facility managers among other things. The intervention involved training managers in a set of managerial skills as well as actively involving them in the implementation of the MANIFEST project whose approach was participatory action research. This issue brief describes best practices in professionalizing health facility managers as studied in the three districts.

Findings

The need to professionalize health managers was drawn from a backdrop of health managers' experiences.

Having the freedom to become a manager highlighted the fact that some health managers felt compelled or forced into the role. Informants explained that at the time of being assigned a management role, most of them were simply clinicians straight from school with very limited exposure to management, with some expressing disinterest in the role. This posed challenges to their identity as well as their productivity as managers because they had been appointed as clinicians. Feelings of frustration, failure and being overwhelmed were common.

For some of the managers, they would rather be clinicians seeing patients as reflected in their training and appointment. Other managers clearly wished to develop their careers in the direction of management. However, this needed to be by choice as well as by official appointment as noted by the informants.

Similarly, given the limited experience that most managers had when they were first assigned the role, obtaining academic qualifications was found to be essential to them. Formal training offered informants an opportunity to appreciate the concept and roles of management. It served as an essential introduction to the basic functions and tools of management.

Finally, the recognition of the role of health managers at health center level of the health system was deemed essential for professionalizing health managers. The informants lauded this as a means of legitimizing and clarifying their roles as well as motivating them. This recognition was also viewed as enabling the process of making an informed career decision as well as providing specific benefits to the role bearers.

Key message to Ministry of Health, Districts and Health Facility Managers:

The professionalisation of managers in the staffing structure of health facilities will create more commitment to their roles and hence contribute to the improvement of quality services.

About MANIFEST

MANIFEST was a 4 year study (2012-2015) involving the Makerere University School of Public Health and the districts of Kamuli, Pallisa and Kibuku. The study was funded by Comic Relief with technical assistance from the Future Health Systems Research Consortium. We used a participatory action research approach, in which the different stakeholders worked as partners rather than study subjects. In 2012, we engaged various stakeholders in the design of a sustainable and scalable intervention aimed at improving maternal and newborn health outcomes. The resulting design had three major components, with district health teams leading on their implementation. The components included:

- Community Mobilization and Sensitization
- Savings and Transport
- Health Systems Strengthening

Credits

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