



# Leadership & Governance for Family Physicians

## **Overview of Post-graduate Diploma in Healthcare Management**

Division Community Health  
Faculty Medicine and Health Sciences  
Stellenbosch University  
**Dr Kerrin Begg**



**Why?**



# Context

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- Health Act 2003 – mandate to ensure management capacity for health establishments
- Since 2011 MOH Dr A Motsoaledi - highlighted need to 'overhaul' the existing health system + review of current management practices
- AG & Media Reports since 2011 indicate chronic organisational failure and persistent shortcomings in leadership and management at all levels of public health care system – in arenas of financial governance, human resource management capacity and supply chain management
- In addition to systemic challenges, a range of new policy initiatives and strategies introduced by MOH - Top and senior managers = responsible for leading change process towards far reaching health care reform in public and private health sectors:
  - PHC Re-engineering
  - NHI
  - CEO's hospitals
  - National Core Standards
  - HRH Strategy



# Context

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- Health care consumes significant % budget
- Cost escalation, technological & clinical developments, complexity of managing health professionals to perform at their best in challenging circumstances with limited resources, constant changes to service delivery systems, patient and health needs – all pose challenges to health care leaders and managers
- Health care managers are required to manage health system transformation under conditions of financial constraint, to harness resources and use what resources they have effectively, to motivate staff, to engage in organisational restructuring and service changes to meet the new policy priorities.



# HR Strategy for Health Sector, 2011

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The Vision is:

To ensure a workforce fit for purpose to meet the needs of the re-engineered health system

*Through*

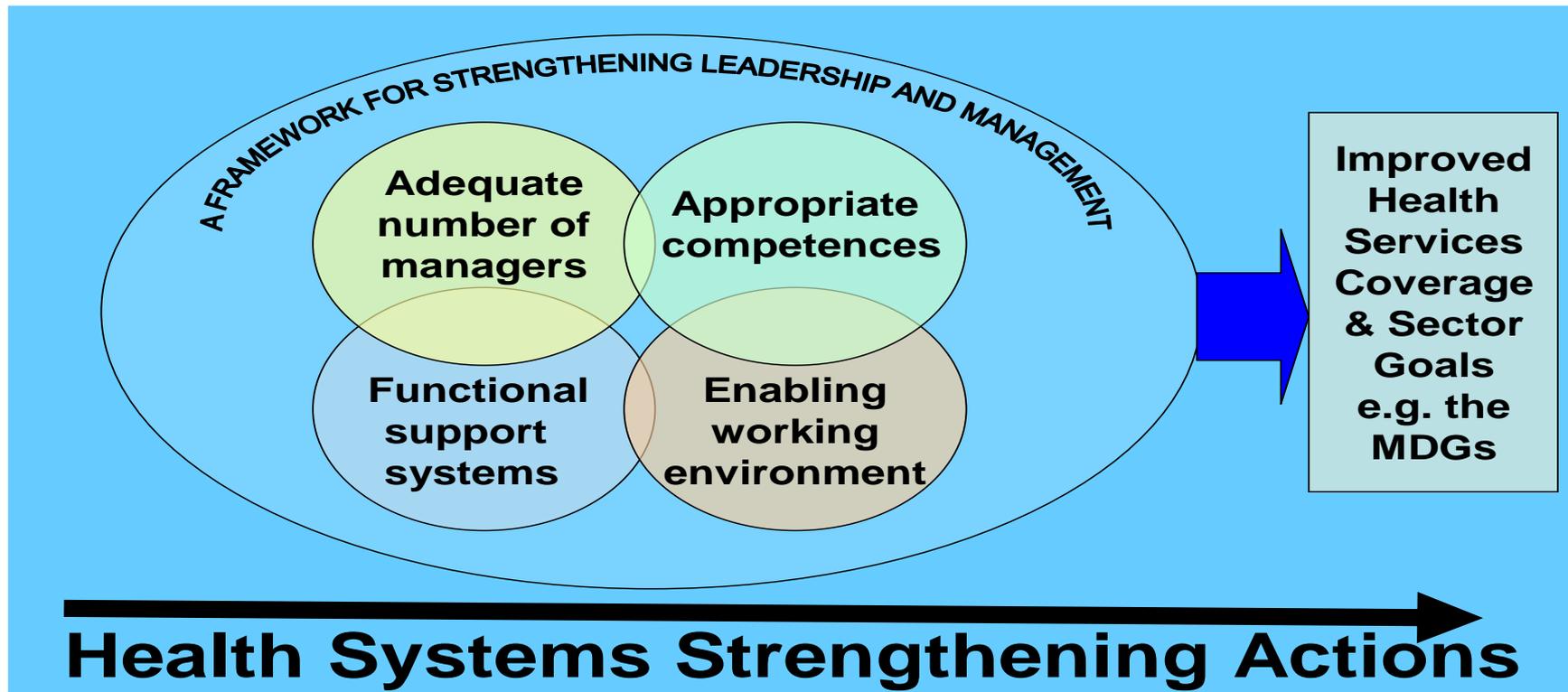
strengthened leadership and management structures in the health sector

# WHO Framework



Global recognition of need to strengthen management capacity in order to strengthen health systems (JLI & WHO 2005, 2007)

## Leadership & Management for Health Systems Performance



International consultation on Strengthening Health leadership and management in low income countries, Accra Ghana, WHO 2007



# SAIHCM 2007

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- Industry report (by Univ of Pretoria SHSPH) in 2006 showed that of 148 health care managers (76% public sector) surveyed ***54% of these managers never had any form of management training***
- These managers in total managed 28 000 health care workers (& 8.5% of SA's GDP)
- the current curricula will only produce managers who will ***maintain the status quo***



Premise:

Leadership can be learnt

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**“Leaders are made not born”**

David Rooke and William Torbert  
Harvard Business Review, April 2005



# Approaches to developing leadership and management

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“We’ve learned the expensive way that training on its own does not solve management problems.”

*SAIHCM Conference delegate*



# Audit of District Management, HST 2008

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Strong focus on 'training':

- Multitude (>300) of management training courses in SA
- Range from 1-2 day certificate courses to postgraduate university degrees
- Poor alignment with desired competencies
- Limited experiential learning and implementation of knowledge



# Numbers and competencies

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- “Health systems lack people who have and use managerial competencies that match their responsibilities.”  
Filerman 2003
- “Small % of hospital and district managers competent to do their jobs”,  
HR Strategy 2011  
(NDOH, DBSA survey)



# District Management needs

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- Managers indicated preference for short courses that are needs-driven, participatory and aligned to work objectives
- Enabling environment needed
- *'as management we need fellowship'*
- Desire for more
  - mentoring, coaching,
  - team approaches,
  - and peer supported learning
  - Focused on real challenges in working environment

Byleveld et al. Report on district health management, HST, 2008.

Goliath C. SURMEPI draft report on training needs of rural health service providers, 2013.



# Competency frameworks reviewed

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- SA competency frameworks reviewed
- International frameworks reviewed
- Draft SU competency framework proposed
- Research underway in collaboration with SPL



# Draft Competency Framework

## Domain 1

*Leadership and professionalism  
in health care management:*

Leadership, Professionalism,  
Ethics, Relationships &  
Communication

## Domain 3

*Getting the basics right - business  
skills and knowledge:*

Financial management, Health & clinical  
informatics, Managing people,  
Technology & Infrastructure,  
Organisations, systems and processes,  
Risk management

## Leadership

## Domain 2

*Setting direction  
& delivering results:*

Strategic planning, Marketing,  
Project & Programme  
management, Quality

## Domain 4:

*Innovation & transformation in  
health care:*

Health economics, Innovation,  
Knowledge application for change,  
Entrepreneurship



**What?**



# Post-Graduate Diploma in Healthcare Management

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- The purpose of the PGDipHCM is to prepare graduates for advanced and specialized professional employment within the health system, and to contribute to the development of knowledge and skills in health care management at an advanced level in an applied work setting.



# Post-Graduate Diploma in Healthcare Management

To develop graduates who have the following attributes and competencies:

- Well-developed **sense of self** and able to **engage and lead others**
- Manage and ensure **organisational direction and effectiveness** within health system
- Align **organizational & technical health management skills** with professional ethics & behavior
- Demonstrate **responsibility to patients and communities**
- Demonstrate dedication to **lifelong learning**
- Understand & apply **ethical principles in patient care** & management of health care org's
- Ability to **communicate clearly & concisely** with customers of health care organisations
- Establish & maintain **relationships** & facilitate constructive interactions with indiv's & grps
- Ability to apply business principles & practices to ensure the effective management
- Able **to set direction and achieve results**
- Able to set direction to ensure **quality patient care**
- Understand and apply the principles of the **economics and financing of health care**
- Able to identify and **manage the challenges** in health care organisations
- Able to develop and implement **innovative solutions** to health care organisational problems
- Understand **contemporary issues** in health policy and health systems



# Post-Graduate Diploma in Healthcare Management

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- HEQF 8
- 2 years – 8 contact weeks
- 10 Modules
  - All compulsory
  - 10 credits each
- + 1 Health Management Report
  - 20 credits



# PGDipHCM

Module name	NQF level of the module	Credits per module	Compulsory / Optional	Year 1, 2	Total credits per year
Module 1: Health systems, policy and financing	HEQF 8	10	Compulsory	1	10
Module 2: Leadership and innovation in health care	HEQF 8	10	Compulsory	1	10
Module 3: Strategy, marketing and communication	HEQF 8	10	Compulsory	1	10
Module 4: Managing self and others for optimal service delivery	HEQF 8	10	Compulsory	1	10
Module 5: Evidence and information in health management	HEQF 8	10	Compulsory	1	10
Module 6: Financial leadership and governance for effective health care delivery	HEQF 8	10	Compulsory	2	10
Module 7: Managing Operations	HEQF 8	10	Compulsory	2	10
Module 8: Managing Health Technology and Infrastructure	HEQF 8	10	Compulsory	2	10
Module 9: Quality improvement, clinical governance & patient care	HEQF 8	10	Compulsory	2	10
Module 10: Project management	HEQF 8	10	Compulsory	2	10
Module 11: Health Management Report	HEQF 8	20	Compulsory	2	20

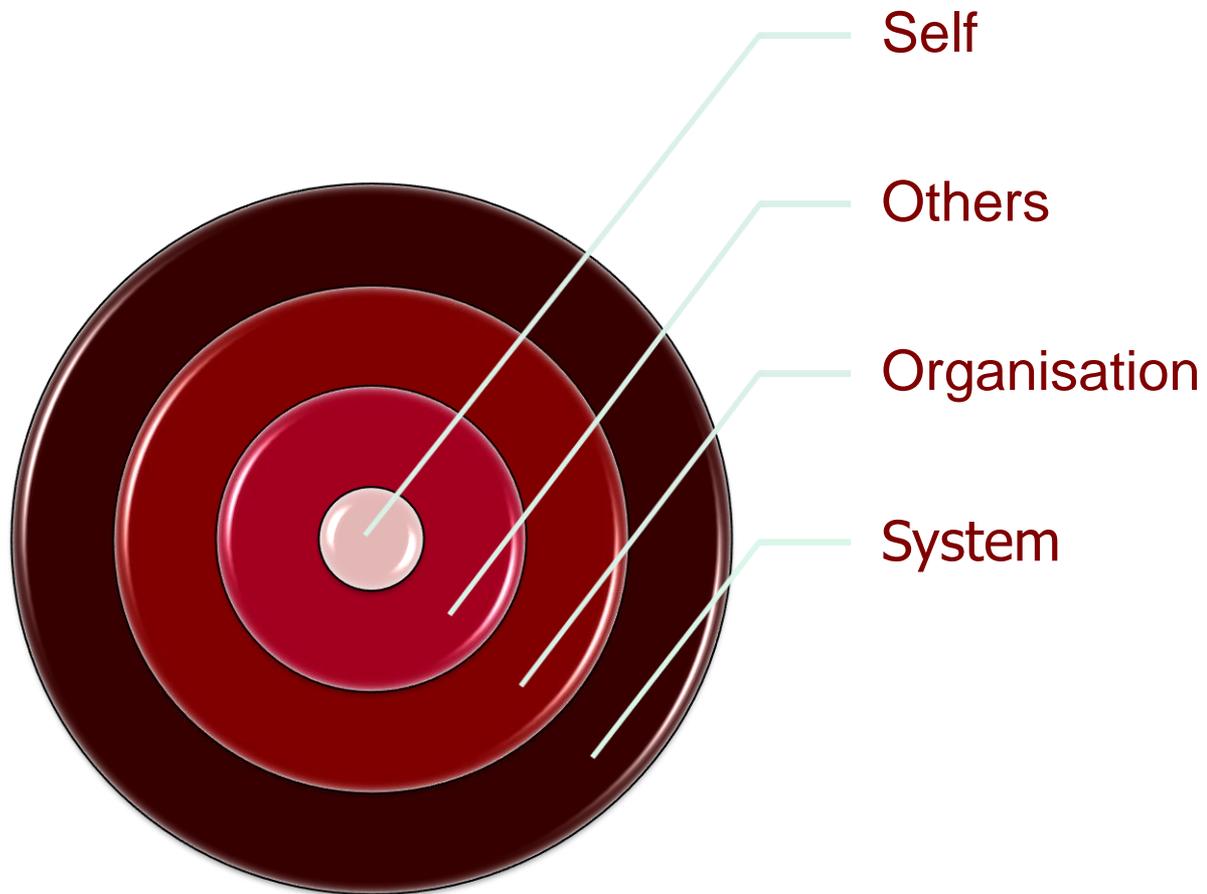


# PGDipHCM

	Semester 1	Semester 2
<b>Year 1</b>	Leadership and Innovation	
	Health systems, policy & financing	Managing Self & Others
	Strategy, Marketing & Communications	Evidence & Information
<b>Year 2</b>	Leadership and Innovation	
	Finance & Governance	Quality, CG & Patient Care Project Management
	Managing Operations	Health Technology & Infrastructure

# PGDipHCM

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# PGDipHCM

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- **Module 1: Health systems, policy and financing**
  - Health policy
  - Health system goals and objectives
  - Health systems design and functions, namely stewardship, governance and organization, financing, service delivery, demand generation and performance monitoring & evaluation
  - Global trends in health systems reform
  - Innovation in health systems



# PGDipHCM

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- **Module 2: Leadership and innovation in health care**
  - The context of leadership
  - Leadership: concepts and theory
  - Leadership approaches
  - Strategic leadership and management in SA context
  - Transformation leadership and change management
  - Leading in learning organisations
  - Leading in situations of adaptive problems
  - Change management and innovation
  - Change management in the organisational context



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- **Module 3: Strategy, Marketing and Communication**
  - Key strategic issues
  - Organisation's current strategic position, operating environment and future strategic options
  - Concepts of strategic management
  - The link between strategy and marketing
  - The marketing mix
  - Market analysis & research; positioning; segmentation
  - Competitor analysis
  - Consumer behaviour and decision making
  - Social marketing in health care
  - Brand management and Corporate Social Responsibility



# PGDipHCM

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- **Module 4: Managing self and others for optimal service delivery**
  - The importance of EQ
  - Self-assessment and overcoming individual weaknesses in relation to managing people
  - Managing diversity
  - Communicating for optimal performance
  - Constructive criticism
  - Performance management
  - Selection and recruitment
  - Work-force succession and career planning
  - Legislative and regulatory requirements
  - Developing a people management strategy



# PGDipHCM

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- **Module 5: Evidence and information in health management**
  - Develop an information systems strategy
  - Manage information systems implementations
  - Assess the value of information systems to an individual and/or their organisation
  - Analyse data from health information systems
  - Ask appropriate research questions, search the literature, appraise, and apply relevant research evidence in decision making
  - Understand and apply research evidence and information in the public and private health sectors in South Africa



# PGDipHCM

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- **Module 6: Financial leadership and governance for effective health care delivery**
  - Financial management cycle: financial planning and, budget execution, in year and annual reporting
  - Financial management system: legislative/policy frameworks, roles and responsibilities, delegations, internal control environment, IT systems etc
  - Budgeting (linking planning and budgeting , costing, medium term revenue and cost drivers)
  - Budget execution: supply chain management, revenue management
  - Asset and inventory management, liability management
  - Using in-year financial and delivery reports as proactive management instruments
  - Overseeing the audit process to ensure clean audits



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- **Module 7: Managing Operations**
  - Operations strategy
  - Process design and process mapping
  - Basic inventory management
  - Capacity planning with respect to capital resource planning, aggregate (medium term) planning, and scheduling
  - Performance measurement and visual management
  - Creating 'thinking people' for continuous improvement
  - Designing and implementing an improvement strategy
  - Standard work as the underpinning of sustaining
  - Standard work for managers



# PGDipHCM

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- **Module 8: Managing and assessing of health technology and infrastructure**
  - Health technology overview, planning and acquisition
  - Health technology assessment
  - Health facility design, planning, briefing and assessment;
  - Asset management and maintenance
  - Hospital engineering and facilities management
  - Management information systems
  - Clinical engineering & risk management re: medical equipment
  - eHealth, mHealth and telehealth/telemedicine
  - Airborne infection control
  - Fundamentals of project management systems thinking
  - Integrated healthcare



# PGDipHCM

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- **Module 9: Quality improvement, clinical governance and patient care**
  - Strategic and operational aspects of leading and managing quality and patient care
  - Information management for quality
  - Communication on quality management and patient care
  - Performance and quality measurement and improvement
  - Patient safety



# PGDipHCM

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- **Module 10: Project management**
  - Define project and programme management
  - Integrate business strategies with project and programme objectives and outcomes
  - Understand, be able to use and lead project management and programme methodologies
  - Implement aspects of the project management process: staffing, resourcing, reporting, risk and conflict management
  - Understand why projects and programmes fail and how to ensure success
  - Know how to develop project and programme leaders and champions.



# PGDipHCM

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- **Module 11 Health management report**
  - 5000-word report on relevant healthcare management topic
  - Students will have the opportunity to learn the necessary skills to undertake researching and writing the report.
  - The overall objective of the Health Management Report is to integrate the skills and knowledge learned in the programme, as well as develop research, writing and critical analysis skills.



How?

**Table 11:** Advantages of training approaches in achieving selected goals

Training Approach	Formal	On-the-job	Action Learning	Non-formal
1. Acquire knowledge	●	◐	●	●
2. Understand concepts	●	○	●	◐
3. Understand techniques	●	◐	●	●
4. Acquire skills in use of techniques	◐	●	●	○
5. Acquire skills in analysis of organisation problem	◐	●	●	○
6. Acquire skills in developing and implementing action plans	◐	◐	●	○

Source: Kerrigan and Luke, (1987)

Key: ● High potential    ◐ Medium potential    ○ Low to no potential



# Action learning

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Action learning (AL) is an approach to the development of people within organisations that uses real-life tasks as the vehicle for learning.

*"It is based on the premise that there is no learning without action and no sober and deliberate action without learning"*

Pedler (1991)



# Learning Philosophy & Approach

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- **Curriculum design:** based on workplace leadership and managerial roles, with assignments that are practical and applied, and include an applied professional assignment which resembles workplace experience and challenges in health care context of the student.
- **Learning** is experiential and action-oriented with an emphasis on learning new behaviour and attitudes, as well as gaining new knowledge and skills.



# Good Practice Principles

<b>Health outcomes</b>	Health leadership and management (L&M) strengthening is a critical ingredient in achieving the MDGs; leaders and managers need to be held accountable for results.
<b>Evidence based</b>	L&M development should draw on available evidence and national and international good practice; be practical & feasible, and progress in performance be monitored over time.
<b>Aligned</b>	L&M strengthening should not take place in isolation; it has to be part of the broader health sector strategy and reflected in human resource development plans.
<b>Long term</b>	Improvements have to be introduced sequentially, flexibly and incrementally, starting on what can be improved immediately; building on efforts that already exist, and sustaining support over the long term.
<b>Transformational</b>	Addressing L&M challenges requires a transformational approach, giving attention to all four dimensions of the framework (numbers; competences; support systems; and working environment) taking account of country goals and aspirations, and overall available resources.
<b>Harmonized</b>	Greater effectiveness in L&M development will be achieved through harnessing and harmonizing all available internal and external resources involved.

International consultation on Strengthening Health leadership and management in low income countries, Accra Ghana, WHO 2007



Thank you