Building leadership and management capacity in health

This short aide-mémoire aims to assist in-country leaders, training providers, the international community and others to achieve more effective outcomes from their efforts to build leadership and management capacity in health.

Why is leadership and management building needed?

To achieve the health-related Millennium Development Goals (MDGs), many low-income countries need to significantly scale up coverage of priority health services. This will generally require additional national and international resources, but better leadership and management are key to using these resources effectively to achieve measurable results. “Good leadership and management are about providing direction to, and gaining commitment from, partners and staff, facilitating change and achieving better health services through efficient, creative and responsible deployment of people and other resources” (WHO/EIP/health systems/2005.1). While leaders set the strategic vision and mobilize the efforts towards its realization, good managers ensure effective organization and utilization of resources to achieve results and meet the aims.

A conceptual framework for thinking about how to build leadership and management capacity

For building leadership and management capacity in health, WHO proposes a framework which addresses the question: “What conditions are necessary for good leadership and management at the operational level?”

The framework proposes that good leadership and management at the operational level needs to have a balance between 4 areas:

1. ensuring an adequate number of managers at all levels of the health system
2. ensuring managers have appropriate competences
3. creating better critical management support systems
4. creating an enabling working environment

These four conditions are closely inter-related. Strengthening one without the others is not likely to work. Assessing the extent to which these four conditions are fulfilled and identifying how to get the balance right should help countries to deal more effectively with this complexity and help them address the all-important question: “What should we invest in to get services that are better managed?”

The framework makes the point that leadership and management strengthening activities are a means to an end – more effective health systems and services, and an integral part of health system strengthening. Better-functioning systems will, in turn, contribute to achieving the MDGs. The framework provides a simple but coherent approach to leadership and management strengthening within health systems and in each specific context, can be adapted or modified for use in local situations. The framework has a variety of uses, including: mapping current activities, needs assessment, planning leadership and management development strategies, and monitoring and evaluation.

What has to be managed?

When managing health systems and services, the nature of what has to be managed is very similar across many different settings. All programmes, projects, facilities and area health authorities, whether public or private, have to manage to different degrees three things:

- Volume and coverage of services (planning, implementation and evaluation)
- Resources (e.g. staff, budgets, drugs, equipment, buildings, information)
- External relations and partners - including users of services
Who are the managers?
Health service managers are those with primary responsibility for services, resources, and partnerships. The key health service managers in low-income countries are usually:

- Heads of sub-national health services (e.g. district medical officers, those in charge of health sub-districts)
- Programme/project managers
- Hospital and facility managers

The four conditions which facilitate good leadership and management at the operational level

1. Ensuring adequate numbers of managers
   - How many health service managers are employed? Do we know this?
   - What are the critical posts that managers are needed for?
   - How many combine the role of manager with clinical work?
   - How are the managers distributed throughout the country? At what levels of the health service?
   - What efforts have been employed to increase and maintain the pool of available managers?

2. Ensuring managers have appropriate competences
   - Is there a practical competency framework for the knowledge, skills, attitudes and behaviour required for various managerial posts?
   - How are competencies enhanced? Are off-site, on-the-job training, coaching or action learning methods used?
   - What qualifications and experience do managers have?
   - What are the principal limitations of current managers in terms of their own competencies?
   - Which managerial competencies have been targeted for development?
   - Have management approaches been piloted and later scaled up? What is known about their costs and effectiveness? Are the activities and achievements sustainable?

3. Creating better critical management support systems
   - How well do critical support systems function?
   - What are these critical systems? (The list could include planning and budgeting; financial management; personnel management; infrastructure and logistics management; procurement and distribution of drugs and other commodities; information management and monitoring.)
   - How successful (or not) are efforts to improve one or more of these support systems? Have any improvements been sustained?
   - How important were changes in these managerial support systems in terms of improving the performance of managers themselves?
   - Who are the management professionals running specific support systems and how qualified are they (e.g. accountants, logisticians, IT specialists)?

4. Creating an enabling working environment
   - Does the way the health system is organized encourage managers to perform well? (These include degree of autonomy, clear definition and communication of roles and responsibilities, fit between roles and structures, existence of national standards, rules and procedures, availability of help lines, regular meetings, etc.)
   - Is there adequate support for managers (e.g. access to relevant information and experiences; online help; supportive supervision or mentoring; regular meetings?)
   - What are the financial and non-financial incentives to encourage managers? Do these incentives have an impact on the performance of managers?
   - Have there been recent changes to organizational context, support and incentives? How do these changes affect managerial performance?
   - Are managers held accountable for their decisions and service results? Do they have to report on their achievements to their line ministries, local governments and the public?

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November 2007