

31st ANNUAL CONFERENCE OF THE ASSOCIATION OF HEALTH SERVICE ADMINISTRATORS, GHANA (AHSAG)

THEME	: 50 YEARS OF HEALTH SERVICES ADMINISTRATION AND MANAGEMENT IN GHANA- ACHIEVEMENTS, CHALLENGES AND PROSPECTS
DATE	: 16TH– 19TH DECEMBER 2007
VENUE	: CAPITAL VIEW HOTEL, KOFORIDUA, EASTERN REGION

WHY THE THEME

The health care field in Ghana has since independence continued to undergo fundamental and far-reaching changes that are having profound and sustained effects on the delivery of health services and the professionals providing these services. The changes taking place in the health care field are not occurring in a vacuum but rather reflect broader socio-economic, technological and public policy imperatives.

Hospitals are increasingly becoming larger and are offering broader range of services with much attention to cost, access and quality considerations. There is also a rapidly expanding professional work force and the need to integrate these professionals in a manner that assures high quality and cost effective services. The evolving system has shown itself in the expansion of the scope and breadth of the practice of health services administration in the last 50 years.

In the light of the changing demands in the health care field, it was necessary for the Association to take retrospective look at the achievement and the forces affecting health service administration since independence, the likely direction of those forces in the future, and the relative effectiveness of various strategic responses to those forces.

OPENING CEREMONY

The opening ceremony was chaired by Professor Emeritus Daasebre Oti Boateng, the Omanhene of the New Juabeng Traditional Area. Also at the ceremony were the Eastern Regional Minister (Hon. Kwadwo Afram Asiedu), the Director General of Ghana Health Service (Dr. Elias Sory), the Eastern Regional Director of Health Services (Dr. Ebenezer Appiah Denkyira) and the Medical Director of Koforidua Regional Hospital (Dr. Obeng Apori).

Various solidarity messages were delivered by other Professional Associations in the health sector including Health Accounting Staff Association of Ghana (HASSAG), Ghana Association of Biomedical Scientists (GABMS), Ghana Nurse Anaesthetist Association (GNAA), Ghana Association of Quasi Government Health Institutions (GAQHI), Christian Health Association of Ghana (CHAG) and the Health Service Workers' Union (HSWU).

Cultural troops and the Koforidua Regional Health Administration Choir entertained the gathering.

Group Pictures at the Opening Ceremony

Address by AHSAG President (Mr. August Yaw Boamah)

Picture(president)

Once again we are meeting as a family to retrospectively appraise our performance and chart a new course as we take an in-depth assessment of our role over the last 50 years. I on behalf of the NEC welcome you all to this meeting.

It is always gratifying when we meet at a bigger forum like this to share ideas and best practices that impact positively on our output and consequently the health of the people of Ghana.

Nana Chairman, the past year was full of many opportunities and challenges. On the positive side, training and developing young Administrators to meet current challenges in the health sector was seen as paramount. Consequently, for the first time in many years, some young Administrators as a group benefited from a training workshop organized by the Directorate of HASS in conjunction with the NEC on 'Administrative Procedures' in Kumasi. Due to inadequate funding, we could not cover as many Administrators as we would have wished. Nonetheless the Directorate intends to organize another session for those who could not benefit.

Nana Chairman, one of the highlights of the year was the grand installation of the Deputy Director - Administration for Central Region, Mr. Owusu Boampong as the Nifahene of the Ofinso Traditional Area with the stool name Nana Kwaku Dua II. Members of the National Executive Council were at Ofinso to support and grace the occasion.

As a first step to foster collaboration with our sister association in the United States of America, Mr. Brobbey Mpiani, Deputy Director – Administration at the Headquarters was sponsored by General Electric to participate in the conference of the American Association of Health Services Administrators. We hope that the GHS/MOH will secure sponsorship for more Administrators to participate in such sister conferences in future. The American Association of Health Services Administrators has also expressed the desire to participate in our conferences in future if they are invited.

On the flip side, Nana Chairman the Association was plunged into one of its darkest moments when one of its promising members was grotesquely murdered by the people of Atronie in the Brong Ahafo Region, on Easter Sunday. The Association received the news with great shock and the spontaneous reaction from NEC coupled with the massive attendance at the funeral demonstrated the love members had for the late Hon. Yeboah Boateng. Your participation and contributions at the funeral was overwhelming and indeed unprecedented.

Nana chairman, one of the most pertinent issues that is having a negative impact on young Administrators in their quest to give off their best on the job after their internship is the delay in formally appointing them. Some of our junior colleagues have worked for the past 2 years and yet have not had their names mechanized even though they are working as full time Administrators in hospitals.

The situation where the Health Services Administrator who has been trained solely for the health sector as a manager is put in the category of general paramedical staff who are trained not for the health sector specific but for the entire labour market needs to be looked at again and the Health Services Administrator placed in his rightful place.

Again, it takes the blend of the clinical and non-clinical staff to manage a hospital and therefore the apparent discrimination against non-clinical staff when recruitments are made should be carefully examined to reflect the realities on the ground.

Nana Chairman, the theme for this year's conference is: '50 years of Health Administration and Management in Ghana; Achievements, Challenges and Prospects'. I hope you will all agree with me that the role and contribution of the Health Services Administrators in the delivery of health services from pre- and post-independence as well as contemporary times cannot be overemphasized.

Health Administration and Management especially in our hospitals has undergone tremendous changes from the era of one man Doctor/Administrator through the Doctor and Matron/Administrator to the era of the Tripartite Committee comprising the Doctor, the Matron and the Hospital Secretary as he was then known. In fact since the days of the Hospital Secretary, he has been in-charge of the day-to-day administration of the hospital and in the performance of his job; most decisions had to be consented to by his boss, the Medical Superintendent.

Nana Chairman, the Health Services Administrator of today is a highly skilled and well motivated health professional who does not only administer but also helps in the development and shaping of policies at the level at which he finds himself. Indeed a well skilled and qualified Administrator is an indispensable asset to his organization.

The contemporary Health Services Administrator should be able to provide leadership to manage his office in a manner that will move the hospital or his office from a state of inertia to a state of bounty using the scarce resources at his disposal. He should be seen to be fair, compassionate, disciplined and firm. He should be able to motivate his staff and exact the best from them.

While this is the case, Nana Chairman, I must admit that not all of us are living up to the expectation. How many of us, for instance, go on round to inspect the facilities in our institutions? It is not uncommon to find cobwebs in the corners of most hospital wards. Yet there are Orderlies who have been paid to clean our facilities to ensure that quality standards are maintained. Supervision generally has been relaxed and we need to sit up. The increasing workload, coupled with the shortage of staff and the need to improvise at certain times in our hospitals call for creativity and innovation to stand up to the challenges.

As I always jokingly say, "You don't need foreign exchange to remove a cobweb". We should not be seen as armchair Administrators but as Administrators who have absolute control of whatever goes on in our organizations. I implore you to eschew selfishness, graft and corrupt practices as well as get-rich-quick attitude which would eventually send you to the Public Accounts Committee of Parliament. Indeed, issues of transparency, accountability, responsibility and sound management should be our guiding principles.

Nana Chairman, permit me to touch on a looming reality which Administrators in the hospitals would have to face in the not too distant future. At the last conference I implored all Administrators especially those in the hospitals to lend their unflinching support to the National Health Insurance Scheme which is one of the good things ever to happen to Ghanaians. The time has come for Hospital Managers to apply themselves diligently to the management of their Health Insurance Funds in the face of dwindling government subvention to hospital. Our ability to prudently manage our internally generated funds (IGF) and our ability to inspire confidence in our patients would measure, to a large extent, our efficiency and competitiveness in the business of providing health care.

I wish, Nana Chairman, to emphasize the need for Health Services Administrators to continue seeking knowledge by exploring the use of Information, Communication and Technology in the day-to-day running of their hospitals and offices especially with the increasing workload associated with the NHIS. In this way, we will be able to contribute effectively toward the vision of moving the country into the middle-income status by 2015.

Nana Chairman, Ladies and Gentlemen, let me conclude by stating that we shall be electing new officers to take over from the current leadership. I would like to appeal to my colleagues to elect new officers who are capable, committed and have the association at heart since the office demands a lot of sacrifices. I wish to thank you all for the support you gave me during my tenure and hope that the same support would be given to the new officers who would be elected.

Colleagues, as we endear ourselves to these aforementioned issues at this conference, I will urge you to comport yourselves and listen attentively to our facilitators so that at the end of the conference we would have enriched our knowledge and experience

Nana Chairman, our meeting has been made possible by the support and contributions of the Director General of Ghana Health Service, Anest Printing Press, the Eastern Regional Director of Health Services and his able lieutenants and of course, the Management and Staff of New Capital View Hotel for accepting to host us. We really appreciate their contributions and wish to extend our appreciation to them.

Once again, I wish to thank our Chairman, Daasebre Oti Boateng, the Eastern Regional Minister, Hon. Kwadwo Afram Asiedu, the Director General, GHS, Dr. Elias Sory, the Eastern Regional Health Director and his team, the press and all invited guests for honoring our invitation and gracing the conference.

Thank you and May God bless us all.

SCIENTIFIC SESSION (TRAINING WORKSHOP)

Workshop Objectives

The workshop objectives included:

- To take stock of the concept of Health Management and Administration in Ghana since independence
- To appraise the challenges, and subsequently outline the prospects of Health Services Management and Administration in Ghana
- To reflect inwardly on the ethics of Health Services Administration

Topics Discussed

Key topics discussed included:

- Overview of Health Administration and Management in Ghana
- Challenges and Prospects of Health Administration and Management in Ghana
- Ethics of the practice of Health Administration and Management in Ghana, an inner reflection

Resource Persons

- Mr. Emmanuel Ackon – Council Member, GHS and Former Director, Medical Services, Ashanti Gold
- Mrs. Victoria Dako- Former Director, Health Administration & Support Services (HASS) Division, GHS
- Mr. Addai Donkoh – Director, Stores, Supply and Drug Management (SSDM), GHS

BUSINESS SESSION

General Secretary's Report for 2007

The AHSAG General Secretary's report highlighted the association's activities, achievements and the challenges for 2007 as well as the way forward for 2008.

Planned Activities for 2007

- i. Improving organization and management of AHSAG
- ii. Improving financial resources of the association
- iii. Strengthening public relations and improving professional image of the association
- iv. Strengthening continuing education of members
- v. Construction of the secretariat project
- vi. Sustaining welfare packages and establishing closer links with members

Organization and Management of AHSAG

The National Executive Committee (NEC) prepared a POW for implementation. The NEC held its meetings at Ridge Hospital, Accra. Decisions for implementation were taken at

these meetings and issues that needed to be communicated to the Deputy Directors of Administration (DDAs) were accordingly done.

Until we finish with the construction of our secretariat project, NEC members will continue to operate from their various offices. This makes running the secretariat very difficult.

The support provided by our colleagues at Ridge Hospital for the hosting of the NECD meetings has been very tremendous and we are most grateful for that.

Improving Financial Resources of the Association

Colleagues, as you should be aware, the only source of funding the activities of our association is by membership subscription. It is however unfortunate that a good number of us do not pay the dues.

We may assign reasons for not paying the dues but whatever it is, you would agree with me that non-payment of dues shows non-commitment on the part of the members concerned. It is important for us to understand that those who are not in good standing are not recognized as members of the Association. Each one is therefore expected to pay his or her dues to continue to be recognized as part of the Association.

The treasurer will give details of our finances including the 2006 conference held in Cape Coast.

Strengthening Public Relation and Improving Professional Image of the Association

The association continues to be a paid-up member of the International Hospital Federation and the Ghana Institute of Management. The association's website www.ahsag.org is being upgraded and given a facelift. The PRO will talk more on that.

We have still not been able to come out with the Health Service Manager, our Newsletter. I wish to suggest that we reconstitute the editorial board for the newsletter and charge them to come out with an edition within the first quarter of 2008. We urge all members to send articles to the editorial board to enable the board publish the newsletter.

Our members continue to contribute to major policy issues in the Ministry. In collaboration with other health professionals, some of our senior colleagues have been part of teams to develop operational manuals for the MOH and the GHS. The PRO's report will give details about PR activities carried out.

Strengthening Continuing Education of Members

The 2006 seminar on the new health policy came off successfully at Cape Coast. During the year, a workshop in Administration and Management was also organized for our younger colleagues to improve upon their knowledge and skills.

Senior colleagues continue to train housemen for posting to the various institutions. Unfortunately, housemanship training has not been as effective as expected in recent years. The housemanship period is to help the would-be HSA to have practical experience of the job. It is possible that housemen are in a hurry to be posted out and

so do not take their time to learn or our senior colleagues, who are the trainers, do not have enough time for these housemen and so they are not exposed to a lot of things that the houseman is expected to go through. We urge all housemen and their trainers to take the housemanship very serious.

We urge all DDAs (RHAs) and Directors of Administration (DOAs) to submit reports on all housemen in their region/institution who complete their housemanship training, highlighting areas of weakness so that top-ups can be organized before they attend interviews. It is a dent on the association as a professional body if our members perform poorly on the job.

Construction of Secretariat Project

Construction of the office block of the secretariat of the association had to be suspended during the year due to lack of funds. Unfortunately, no member paid the project levy of GH¢50. Let us discuss and increase yearly the project levy to about GH¢200. I must commend Mr. Yahyah Khasem for his commitment and untiring effort in supervising the project up to this stage.

The block has been roofed, all plumbing lines fixed, all electrical piping completed, plastering has been completed and suck away for kitchen and cesspit tank for washrooms completed. However, we are yet to fix doors and windows, tile the floors, fix the ceiling, fix electrical and plumbing fittings, paint and furnish. We urge members to visit the project site. Mr. Yahyah Khasem will provide any necessary details on the project.

Welfare of Members

Sadly, we recorded 2 deaths during the year, Messrs Gabriel Adu and Anthony Yeboah Boateng. We commend members for the attendance and voluntary contributions. May we observe a minute silence in their memory. Members were mobilized to mourn with those who lost relations

The NEC continues to pay approved welfare benefit to members. We urge members to endeavour to attend such functions. We also urge members to inform the secretariat on time so that the information can be communicated to all members.

Negotiation for the new salaries for health professionals was beset with a lot of problems. Gladly, a new salary level has been paid. We urge members to exercise restraint if there are still few issues to resolve. The PRO will provide any other necessary details on the new salary scheme.

With regard to the building plots for members, NEC was not satisfied with the performance of the agent who was negotiating the land for the Association. Consequently, the idea has been abandoned. Any member who has paid money into the account of the association in respect of the plots of land should contact the Treasurer with the pay in slip for a refund.

Challenges

Commitment of Members

The issue of members' commitment to the activities of the association remains the biggest challenge facing the Association. Some of us do not pay our dues. Some of us do not attend our annual general meetings whilst others have never attended any social function of the association. The link between DDAs/DOAs and NEC is very weak and needs to be improved upon.

Funding

The association is in a precarious financial position as a lot of the members are not paying their dues which is the only source of funding the activities of the Association. We urge all members to source for sponsorship for the association, especially for the construction of the secretariat project. Without adequate funding, we will not be able to finish with the construction of the block.

Training and Posting of Housemen

Housemann training has not been as effective as is expected. We urge all trainers and trainees to take the housemanship training very serious. Trainers should have time for trainees and trainees should humble themselves to be trained. They should not be in a hurry to catch up with their senior colleagues for their time will definitely come.

Both trainers and trainees should use the housemanship training manual as guide in the housemanship training and we urge all DDAs and DOAs to submit reports on all housemen on their suitability for appointment.

Another area of concern is the posting of very junior colleagues to relatively bigger facilities whilst their senior colleagues are posted to or allowed to remain in relatively smaller facilities. Traditionally, newly qualified members are posted to smaller facilities and as they gain experience over the years, they are posted to bigger facilities. Let us spend some time to discuss this new development.

Lack of Permanent Secretariat

The association still lacks permanent secretariat. Members of the Executive Committee continue to operate from their various offices. The association's documents are therefore kept in various offices at the headquarters of the GHS.

The Health Service Manager

Our newsletter could not be published due to the inactivity of the editorial board and lack of articles from members. We urge all members to submit articles for publication in the newsletter.

Delay in Appointment of Newly Qualified Members

We are still grappling with the long time it takes to get our newly qualified members employed. Is it not possible to post our newly qualified members as soon as they complete their housemanship and a satisfactory report is submitted on them before they are formally issued with appointment letters? Does the HRDD submit names of newly qualified members to the Ministry of Finance for financial clearance at all? We urge D/HASS to liaise with D/HRD on how best to shorten the length of time it takes to get newly qualified members employed.

Way Forward

Membership

We need to strengthen our membership. We need to formally admit members into the association. Prospective members should be made to formally apply to be admitted into the association. Their applications should be vetted and approved after which they should be formally inducted into the association. In this way we shall be sure that disciplined members are being admitted into the association. We must also orientate all newly admitted members into the association and the profession with emphasis on ethics, integrity, moral uprightness and respect for seniority.

Completion of the Secretariat Project

Completion of the office block of the secretariat project will go a long way to enhance management and administration of the association. The NEC will continue to look for funds to complete the project.

Operational Committees

All operational committees of the association as specified in the constitution should be reactivated in 2008. We urge members who will be nominated to show commitment and accept to serve on these committees.

Conclusion

We have come a long way and a long way do we have to go. We must be a united, disciplined, formidable and respected association. We have reached where we are today because some individuals (members) made hard sacrifices for us to enjoy today the fruits of their labour. It is our turn now to make sacrifices and sustain the association for posterity.

The NEC commends all who in diverse ways made sacrifices to move the association forward. We make passionate appeal to all members to show commitment towards the affairs of the association.

On behalf of NEC and on my own behalf, I wish you all Merry X'mas, Happy and a prosperous new year in advance.

Thank you

COMMUNIQUE

Preamble

The AHSAG at its 31st Annual General Meeting held at the Koforidua New Capital View Hotel in the Eastern Region from 16th -19th December, 2007 on the theme: "**50 Years of Health Service Administration and Management in Ghana; Achievements, Challenges and Prospects**" and having deliberated on related topical issues adopted the following communiqué.

1. Development of Managerial Competencies

The health sector is a dynamic and complex industry. With the expansion of services, enlightenment of clientele of their rights and responsibilities as enshrined in the Patient Charter, increased utilization of service as a consequence of the National Health Insurance Scheme, and under funding, management of the health sector has become more challenging.

Health Managers therefore need to continually develop their managerial competences and skills to adequately cope with these challenges.

We therefore call on the Ministry of Health to commit the necessary funding for staff training and development.

2. Strengthening District Health Directorates

The Association notes with concern the weaknesses in the District Health Management system due to the absence of certain key Health Professionals notably Pharmacists and Health Services Administrators at the District Health Directorates.

To improve the management capacity at that level we recommend the appointment of District Pharmacists and District Health Service Administrators to all District Health Directorates in the country.

In the light of the afore mentioned concerns, we urgently appeal to the Ministry of Health as well as Ministry of Finance and Economic Planning to **hasten** the appointment of these and other health professionals to give practical meaning to the decentralisation process.

3. Improvement in Health Sector Salaries

The Association wishes to commend the Government of Ghana for improving the health sector salaries. We appeal to all health workers to reciprocate the improvement with increased productivity and better attitude towards work.

While commending government, we appeal that any existing relativity problems be addressed expeditiously.

Again, mindful of the fact that improvement in salaries alone cannot bring about increased productivity, we appeal to government to improve upon the availability of other health inputs.

4. Unified workforce in Industrial Relations

The Association considers as worrisome the current situation where Medical Doctors in the public sector on the one side and all other health workers (Health Workers Group) on the other side appear to be pitched against each other in negotiating for better conditions of service.

We therefore recommend a unified workforce to promote better industrial relation and minimize the rampant industrial unrest in the health sector.

5. Operational Challenges in the National Health Insurance Scheme

The Association further notes with concern certain key challenges that can negate the gains in the NHIS if not properly managed. Notable among these challenges are:

- i. The undue delay in reimbursement by the schemes to the service providers;
- ii. Delay in issuing membership cards to registrants; and
- iii. Fraudulent practices by some providers and schemes.

The Association urgently appeals to the National Health Insurance Authority to play a leading role in addressing these problems.

6. Amendment of the Act 525 of 1996

It is the conviction of the Association that the current Ghana Health Service and Teaching Hospitals Act, Act 525 of 1996 does not promote a continuum of health care delivery in the country in the sense that the Teaching Hospitals are not part of the Ghana Health service. This situation has created and continues to create unhealthy rivalry between the Teaching Hospitals and the Ghana Health Service.

The Ministry's decision to promote a unitary health service in the country is commendable and should therefore be pursued relentlessly.

Photographs of the Conference (Link- gallery)

