

**ADDRESS BY MR. AUGUSTINE YAW BOAMAH, THE PRESIDENT OF
THE ASSOCIATION OF HEALTH SERVICE ADMINISTRATORS ON THE
OCCASION OF THE ASSOCIATION'S ANNUAL GENERAL MEETING
HELD AT ELMINA BEACH RESORT IN CENTRAL REGION,
FROM 28TH NOVEMBER -2ND DECEMBER, 2006**

*Nana Chairman,
Hon. Regional Minister, Central Region,
Director General, Ghana Health Service,
Regional Director of Health Services, Central Region,
Colleagues,
Invited Guests
Members of the Press,
Ladies and Gentlemen,*

Today marks the 1st Term of office of my Administration and the 30th milestone in the history of the Association of Health Services Administrators – Ghana. It is gratifying that we have been able to convene to acquaint ourselves with the tenets of the new paradigm shift of the Ministry of Health/Ghana Health Service, undertake retrospective appraisal of our activities and to chart the next course of action. I, on behalf of the NEC welcome you all to this meeting.

Nana Chairman, the year under review can best be described as mixed. There were gains as well as challenges. On the positive side, there were promotions of all grades of Administrators and significant of note is the promotions of some Headquarters Unit Heads and Regional Health Administrators to the position of Deputy Directors.

I am also happy to note that no adverse report was received from the regions about the conduct of any Administrator and we need to congratulate ourselves for this.

I am again pleased to announce that the AHSAG Secretariat Block, which had reached the roofing stage during last year, has been roofed and plastered. Some of the electrical cables have been laid and all the plumbing items have been procured and ready to be fixed. It is (also) envisaged that by the end of the year, door and window frames would have been fixed.

On the flip side, Nana Chairman, let me announce with regret that the Association lost one of its hardworking ladies in the person of Mrs. Emelia Ahiable of the Volta Municipal Hospital. May her soul rest in peace! I wish to congratulate colleagues from all over the country who attended the funeral to wish our sister fare well. Your participation and contributions were really marvelous.

Mr. Chairman, permit me to digress a bit and talk about the implementation of the new salary structure for health workers. The implementation of the new salary reforms has been fraught with inequity and lack of transparency resulting in agitations and strike actions. In fact for the first time in the history of the Association, we

had to be part of the striking health workers to register our disgust at the manner the process had been derailed from the original intent.

Although by the nature of our training and the managerial role played in delivering health service, we are averse to strike actions, for once, Nana Chairman, we (the) Administrators had to be part of the strike action to express our disgust at the attempt to undermine the spirit of teamwork in the delivery health service.

We reiterate our position of ensuring equity and fair play in the administration of the new salary scheme to all health workers and hope that the Appellate Body, set up by the government, will (serve as a window of opportunity that will) take a second look at the entire process and come out with an acceptable scheme that will ensure equity and fairness which is the hallmark of any successful salary administration.

Nana Chairman, at our last conference, we all lauded the implementation of the National Health Insurance Scheme for the nation and suggested ways of improving its implementation. It is sad to note that most of our facilities are not helping to give this laudable idea the needed support.

There have been reported cases of NHIS-card-bearing-patients having to spend several hours to trace their cards or folders at the OPD because they are not paying cash. Instances of over-prescription of drugs for patients, derogatory remarks about the scheme and fraudulent practices by some staff are some of the problems militating against the smooth implementation of the scheme.

It is necessary that, Nana Chairman, the Authorities spend some time to visit our hospitals to acquaint themselves with the operation of the scheme and design strategies to address these shortcomings. We can also hasten the success of the scheme if we intensify the campaign to educate our staff and the general public on the usefulness of the scheme especially for the poor.

Allow me, Nana Chairman, to also highlight one key area of concern, which borders on the review of the Ghana Health Service and Teaching Hospital Act (ACT 525 of 1996). Since the promulgation of the Act, the Ghana Health Service and the Teaching Hospitals and to some extent the MOH have tried to implement it albeit with some difficulty. The Association appreciates the effort being made by the MOH to review the Act to address the operational difficulties revealed since the Act came into force. In doing so, however, the Association wishes to implore the MOH to critically look at the design of the Divisions and Internal Management Structures both at the GHS headquarters and hospitals. The Association is of the view that the structures should respond more to organization-wide interest or to the needs of the service delivery as a system rather than ideological concerns of some sectional interest.

Nana Chairman, the theme for this year's conference, which is, 'creating Wealth through Health: the new Health Policy- the Role of Health Managers in its Effective Implementation' is apt and timely.

Ghana's developmental agenda is being shaped in principle by the GPRS I and II, which envisages Ghana to be transformed into a middle-income country by 2015. Critical to the realization of this goal is human resource development. To advance the realization of the goal, a new health policy is being fashioned out with the theme "*creating wealth through health*".

This new policy described as a new paradigm for Ghana's development, seeks to promote a radical shift towards health promotion, better nutrition and healthy lifestyles. The new paradigm also recognizes that health is not the preserve of only the MOH and its agencies but also calls for closer collaboration between the MOH and other Ministries like Education, Water Resources Works and Housing, Rural Development, Environment and Science and Agriculture.

Nana Chairman, let me briefly remind ourselves of some of the benefits of this new paradigm shift: Ghana has become home to major diseases such diabetes, malnutrition, stroke, cancer, malaria , HIV/AIDS, injuries through accidents, poor mental health and so on due to:

- ◆ Poor nutrition consisting of foods saturated with fat, sugar and salt
- ◆ Eating contaminated food and consuming unsafe water
- ◆ Our reckless lifestyle filled with alcohol and drug abuse
- ◆ Lack of exercise, rest, recreation and personal hygiene
- ◆ Unsanitary environment
- ◆ Indiscipline in our society and specifically on our roads,

All the diseases mentioned have cost implications to the individual, the family, the community, the employer and the nation as a whole in terms of:

- ◆ Cost of drugs as well as training and maintaining health care providers
- ◆ Cost of transporting the sick to health facilities
- ◆ Cost of labour (man hours) lost to sick leave or permanent disability
- ◆ Cost of building and maintaining health facilities; and
- ◆ Cost of lost productivity due to weak and unhealthy human capital.

These costs, as you would all agree with me, pose negative impact on the national economy and militate against the President's vision of moving the country into the middle-income status by 2015. Improving our health, by seeking to take a more proactive rather than defensive orientation, will immensely cut down these costs to both employers and to the economy as whole. There are also benefits to us as individuals: not only are we likely to be economically better off by being in work but there is also a clear link between being at work and the wellbeing of an individual. Health enhances economic prosperity. Or to summarize it - health equals wealth.

For the new shift in paradigm, Ladies and Gentlemen, we are faced with the challenge of giving up the out-dated conception of a health system that is belatedly reacting and only repairing ill-health in favour of a system that promotes prevention of illnesses. As Administrators, we need to take heed of this new change and give up the conception of a disease system in favour of a health system. Changing this perception will mean new ways of doing things, especially in the workplace. We need to look at how we can build efficient and effective health support systems that can better promote good health in our workplaces and communities.

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 our objectives **would** have been met.

Let me conclude by expressing my hope that by remaining committed to this new paradigm shift, we will be able to collectively make a tangible contribution towards improving the health situation in Ghana. In this way, we will be able to achieve the vision of moving the country into the middle-income (country) status by 2015.

Mr. Chairman, our meeting has been made possible by the support and contributions of the GHS and the MOH, Nestle Ghana Ltd, Anerst Printing Press, Taylor and Taylor Laboratory Services, Philips (F Malawi Engineering Ltd), the RDHS and his able lieutenants and of course, Management and staff of Elmina Beach Hotel for accepting to host us. We really appreciate their contributions and we wish to extend our heartfelt thanks to them.

I wish to thank our Chairman, the Hon. Minister of Health, the Hon Regional Minister, the Director General GHS, the RDHS and his team, the press and all invited guests for honouring our invitation and gracing the conference.

Thank you and May God bless us all.