



COMMUNIQUÉ ISSUED AT THE END OF THE 35TH ANNUAL GENERAL MEETING OF THE ASSOCIATION OF HEALTH SERVICES ADMINISTRATORS, GHANA HELD FROM 15TH - 18TH NOVEMBER, 2011 IN KUMASI, ASHANTI REGION

Preamble

The Association of Health Services Administrators, Ghana (AHSAG) is a registered professional association and trade union with membership comprising Health Services Administrators in the public, private, mission, military, police and other quasi-government health institutions across the country. Its prime objective is to bring together all Health Services Administrators in Ghana as a unified body and to promote excellence in the profession of health service management in the country. In line with this objective, the Association organizes Annual General Meetings (AGM) with education-oriented workshops to enhance the knowledge and professional skills of its members. Apart from serving as a major platform for continuous education and advocacy for the professional development of Health Services Administrators in the country, the AHSAG AGM has also evolved as a major forum for discussing critical health issues for key health policy development and implementation.

The 35th Annual General Meeting of AHSAG was held at Miklin Hotel, Kumasi in the Ashanti Region from 15th -19th November, 2011. It was attended by over 240 Health Services Administrators from the private and public sectors including quasi-government hospitals and faith-based hospitals in Ghana.

The theme for the AGM was “**Strengthening Health System Governance through Effective Information Management – The Role of the Health Services Administrator**”. Participants were taken through presentations on the under-listed five thematic areas:

- Electronic healthcare records in Ghana: The discourse and action
- The national e-health policy and strategy - The journey so far
- An overview of the upgraded District Health Management Information System (DHMIS II)
- Managing records/information as strategic resources for good corporate governance
- Evidence based decision making and practice through operational research.

Discussions, Conclusions and Recommendations

The following best reflect the spirit of the deliberations as well as the recommendations agreed by the AGM:

1. Right to Information Bill

The Association notes with admiration efforts by government to have the Right to Information Bill passed into law.

The passage of the bill into law will lead to unimpeded access to official information which will culminate into good governance.

The Association however, notes with concern, the undue delay associated with the passage of the bill into law. We therefore make a passionate appeal to Government to expedite action in getting the bill passed into law as a matter of urgency.

2 Promoting Use of ICT for Health

The Association commends Government for putting in place a regulatory framework for ICT in Ghana with a component for the health sector. We also note with appreciation

- the development of a health sector ICT Policy and Strategy as well as eHealth Strategy by the Ministry of Health as a practical demonstration of their commitment towards the implementation of this important government policy
- the establishment of an Enterprise Architecture framework to address the ICT needs of the health sector in particular in line with our country's eGovernance Project.

In furtherance of these programmes, the Association urges the leadership of the Ghana Health Service including Regional and District Directors, Medical Superintendents as well as its members to ensure that IT Governance structures required for the implementation of the above-mentioned strategies are put in place to

- bridge the access inequality gap to health using information technology such as mobile devices towards improving health outcomes for the populace
- address interoperability, capacity building for professional staff in the health sector and human resource issues regarding IT professionals, among others
- achieve confidentiality of data and information with regards to patients/ clients and other correspondence.

The Association wishes to assure the Ministry of Health and other key players of its cooperation and commitment to the eHealth programme and the other interventions introduced by government to promote information management, good governance and national development.

3. District Health Information Management System

The Association further commends the Ministry of Health for upgrading the District Health Information Management System (DHIMS II). DHIMS II offers tremendous opportunity to address the perennial challenges of our health system by enhancing

accessibility to timely and complete data on health service delivery and other health indicators to encourage evidence-based decision making at all levels of the healthcare delivery system.

The Association therefore, calls on Health Services Administrators in particular and other health facility managers in general to mobilize resources to support the full implementation of DHIMS II in the health sector.

4. Managing Medical Records in Health Institutions

The management of Medical Records continues to pose enormous challenge to most Health Institutions in Ghana especially in the public sector in spite of its potential to contribute significantly to quality healthcare delivery.

Health Institutions have not taken the management of medical records seriously enough although most information required for effective decision making in these institutions emanates from their own record system. Medical records are largely kept manually with inadequate storage space and manpower to ensure good record keeping. The biggest problem is the lack of adequate professional staff to handle health information. In most cases, the management of this important function is left entirely in the hands of non-professionals who lack basic training and orientation in records management.

To improve the management of medical records, the Association is proposing the appointment of professionally trained Biostatisticians as well as health information officers for all health facilities.

Furthermore, the Ministry of Health/ Ghana Health Service should provide resources including modern information and communication technologies with adequate backup systems to improve the management of health information for better decision making.

In doing these, the management of the transition from the existing manual system to a full blown electronic one should be given maximum attention so that medical record staff could cope with the change.

5. Health Research

The Association notes with satisfaction the establishment of four world class research centres in the country precisely at Akwapim Mampong, Navrongo, Kintampo and Dodowa. These centres turn out valuable health research materials and information that impact greatly on health and health related activities. The centers are also a resource for both local and international research and therefore make our country a major source of health information that influence local and international health policy formulation and implementation.

Despite this enormous responsibility, the research centers are facing numerous challenges which include inadequate finance, infrastructure and logistics.

They are also faced with the problem of non-implementation of their findings by stakeholders.

The Association therefore calls on government to, as a matter of priority improve, funding for the implementation of relevant research findings that have the potential of improving health care delivery and human development.

Government should also facilitate effective collaboration between research and health service delivery including manufacturing industry to accelerate the pace of development of the economy.

6. Health Bill

The Association wishes to reiterate its concerns about the proposed Health Bill currently before Parliament to which the Association has already petitioned the relevant stakeholders. We wish to remind Government to take a second look at the issues raised in our petition concerning the new health bill and its potential for further fragmenting and weakening the health system.

7. Placement of Health Services Administrators on the Single Spine Salary Structure (SSSS)

The Association commends the government for taking the courage to implement the Single Spine Salary Policy for the public sector to promote equity, fairness and increased productivity.

The Ghana Health Service and Teaching Hospitals Act, (Act 525) and the Ministry of Health acknowledge the critical, important and strategic role the Health Service Administrator plays in healthcare delivery. Ironically this acknowledgement has not been translated into the appointment, remuneration and general conditions of service of the Health Service Administrator.

The Association reiterates the fact that the health sector is multi-disciplinary and so requires teamwork and mutual respect for each team member to foster smooth service delivery in the country. So then, the break-up of the health workforce into clinical and non-clinical staffs for remuneration would not only lead to a breakdown of team spirit but also negatively affect productivity in the health service in general.

The Association takes a serious view of the aberrant distortions in the salary relativities created in the health sector and the unfavourable placement of Health Service Administrators despite the enormous responsibilities placed on them by Act 525 for smooth service delivery.

The Association therefore calls on Fair Wages and Salaries Commission, the leadership of the Ghana Health Service and the Teaching Hospitals and the Government to:

- a. Place the Health Service Administrator appropriately and pay commensurate and rewarding premium;
- b. Ensure fairness and equity in the new pay policy for health workers and all other government workers;
- c. Pay public sector workers for what they do and not for who they are;
- d. Pursue the principle of equal pay for work of equal value in line with the letter and the spirit of the 1992 Constitution and the Labour Law (Act 651) vigorously and without fear or favour;
- e. Institute measures to exact commensurate productivity from public sector workers; and
- f. Review the structure of grading in the health sector with the view of merging the over 80 list of grades into fewer generic ones similar to the grading in the security forces. This will pave the way for flatter hierarchy of grades and reduction in salary disparities while at the same time promoting cooperation and teamwork in the health sector.

8. Accounting, Treasury and Financial (ATF) Rules and Regulations

The Association is concerned about the recent revision of ATF rules and regulations by the Ministry of Health which does not highlight the roles of all stakeholders in the financial management of health institutions. The revised ATF regulations portray financial management as the preserve of certain staff, thus defeating the essence of teamwork in financial management. It is the view of the Association that this has arisen as a result of the lack of consultations amongst all the relevant stakeholders responsible for financial management in health institutions. The Association calls for the review of the ATF regulations to include the concerns of all stakeholders whose functions and duties provide checks on the main actors to ensure harmony in the management of health institutions.

9. Delays in Reimbursement of Health Insurance Claims

The Association notes with grave concern the unexplained delays in the reimbursement of health insurance claims to health providers in the country. These delays are adversely affecting healthcare delivery at all levels of service provision and also affecting local businesses that do business with healthcare providers.

The Association is calling on the National Health Insurance Authority (NHIA) to as a matter of urgency come out to explain the cause(s) of these delays and take the necessary steps to pay all outstanding claims to service providers.

We also wish to remind the NHIA to stop the self commendation and get serious with the issue of reimbursement of claims submitted by providers that are in arrears since July, 2011 to date. This is the only way to sustain and save service provision from collapsing.

**ARBERT ASIEDU-OFFEI
(PRESIDENT, AHSAG)
AHSAG)**

**MICAH ASARE-BEDIAKO
(GENERAL SECRETARY,
AHSAG)**