Summary report on the

Capacity development workshop for hospital managers in the Eastern Mediterranean Region

WHO-EM/HCD/126/E

Cairo, Egypt 28 November–7 December 2015



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1. Introduction

A capacity development workshop for hospital managers in the Eastern Mediterranean Region took place in Cairo on 28 November to 7 December. The workshop was organized as part of WHO's effort to strengthen hospitals, which is a priority in the area of health care service provision as well as an important step in moving towards universal health coverage.

The objectives of the workshop were:

- to present the findings of a regional public hospital sector analysis and highlight challenges and priorities to strengthen hospital care;
- to enhance knowledge and skills of hospital managers in the Region;
- to introduce and share best practices on hospital care and management from countries inside and outside the Region; and
- to develop a network of hospital managers and policy-makers for further national and intercountry collaborative work on hospital care and management.

The workshop was attended by 32 hospital managers and policy-makers from 16 countries of the Region: Afghanistan, Bahrain, Djibouti, Egypt, Jordan, Islamic Republic of Iran, Iraq, Libya, Morocco, Oman, Palestine, Saudi Arabia, Somalia, Sudan, Tunisia and United Arab Emirates. The training was delivered by 17 facilitators from across the world including WHO professional staff.

In his opening message Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean, highlighted a range of challenges facing hospitals in the Region in areas related to governance and autonomy, strategic planning, financing, human resources, information management, quality of care, and preparedness and response in emergencies. He urged

participants to share their managerial experience and lessons learned and added that based on the success of this training, WHO will organize more training programmes in 2016. He also hoped to work with the Member States to replicate this course in their own countries, tailored to their specific needs, in order to train more managers at national and subnational levels.

The content of the training course took into consideration the findings of a regional training needs assessment of hospital managers, a review of different hospital management training programmes in selected countries across the world, a review of academic peer-reviewed articles and reports and two consultations of experts from within and outside the Region (in April and September 2015). The workshop was designed to be participatory, with interactive sessions, case studies and group work discussions.

2. Summary of discussions

The role and importance of strategic planning at hospital and ministerial level was discussed in detail and the challenges in alignment of hospital strategic plans with national plans were highlighted by participants. Participants discussed how a hospital strategic plan can be applied during unstable and uncertain situation. The participatory approach and stakeholder engagement in strategic planning were highlighted and the issue of the involvement of patients and communities in hospital strategic planning was addressed in detail. The need to strengthen the capacity of hospital managers for strategic planning in the Region was also emphasized by the participants during discussions.

A day was dedicated to the concepts of quality and safety, required steps towards quality improvement and the role of hospital leaders in

enhancing quality and safety. Inadequate linkage between quality improvement plans and hospital strategic plans was noted by participants, who discussed how managers can identify areas for improvement and prioritization criteria and processes. Different quality improvement tools and their pros and cons were introduced. Different patient safety initiatives including Patient Safety Friendly Hospital Initiative (PSFHI) were discussed and countries were urged to scale up PSFHI in their own countries. Selection of appropriate quality improvement and patient safety tools was highlighted, particularly for small hospitals and hospitals in emergency situations. The Plan-Do-Study-Act (PDSA) approach was introduced for quality improvement approaches. Development of monitoring indictors to assess quality and patient safety were stressed during group discussions.

Hospital information system (HIS) architecture and function was introduced along with different components of a HIS. The choice of appropriate HIS by hospital managers and challenges they face in this regard were discussed. Participants highlighted challenges that hospitals are facing in implementation of information management strategies, in using information for better clinical and managerial decision-making and in linking between the hospital information system and higher authorities. The role of medical records systems and unique patient record numbers was discussed. In addition, International Classification of Diseases (ICD) was introduced and its role in hospital management was discussed. There was a serious debate about the selection of a unique HIS for hospitals in a country and interoperability of different systems among hospitals as an important issue in information flow and the experiences of different countries have been shared.

The essentials of human resources management in hospital settings, norms and standards for health workforce in hospitals and the WHO

workload indicators of staffing need (WISN) methodology were introduced. A model of fundamental competencies for health care managers was discussed. The practical steps toward recruitment, distribution and retention of staff in hospital setting in developing countries, including countries from the Region were discussed and inputs from different country groups were provided. There was a detailed discussion about the staff job description in hospitals as well. Different techniques for staff performance appraisal along with video presentations were introduced. Definition of dual practice and challenges that hospitals and health systems are facing in this regard were discussed and the experience of Jordan, as the only country in the region that dual practice is not allowed by law, was shared. Collaboration and coordination with Ministry of Higher Education for developing more effective programmes for health workforce training to respond to the needs of hospitals was highlighted. A comprehensive case study covering different aspects of human resources management was introduced and extensively discussed.

During two days financial management module, important issue in financial management and accounting in hospital setting were taught and discussed. Financing of hospitals, role and importance of accounting and financial management in hospitals over three different countries were presented. Different type of hospital costs and methods toward hospital services costing were introduced. Practical steps toward hospital budgeting process and also different types of hospital payment were other issues debated during this module. It was emphasized that hospital should move from line item budget to activity based costing. Inadequate linkage between strategic plans and hospital budgets was clearly highlighted by the participants. It was discussed that the different hospital departments should contribute in hospital budgeting. Use of different tools including economic evaluation and feasibility studies for better clinical and managerial decision making

was discussed. Cost containment strategies, services utilization review and efficiency issues were discussed and at the end issue of contracting in and out were briefly introduced. Lack of knowledge and skills among hospital managers were highlighted by participants and they suggested that areas of financial responsibility of hospital managers should be defined. Some of the participants requested for more training programs on costing of hospital services. In addition, participants requested that the experiences of best practices in terms of hospital financial management needs to be shared among countries.

The role of hospital managers in strategic purchasing was discussed along with quality and efficiency issues. Participants cited the lack of expertise in the area of supply chain management among health managers, which results in high cost purchasing. It was suggested that use of software can help in better supply management. The countries were advised to start health technology assessment at ministerial and hospital level; the experience of the Islamic Republic of Iran was introduced as a good example in this regard.

Different tools and guidelines are available for waste management and it was suggested that related standards should be embedded in the hospital accreditation programmes in countries. The role of hospital managers in improving waste management at hospital level was discussed. Participants highlighted the lack of comprehensive waste management in many countries and inadequacy of training and awareness about the importance of hospital waste management. It was that countries should meet the minimum suggested requirements to protect human health through development of a national waste management plan along with a dedicated budget. Hospitals should have clear plan, dedicated committee and budget for managing their waste. Contracting out for hospital waste management, as a successful experience in Saudi Arabia, was discussed. The

importance of monitoring and evaluation plans with clear performance indicators was also highlighted. Environmental health in health care facilities were introduced with special focus on water, sanitation, health care waste and hygiene and their importance in reducing nosocomial infections in health care facilities and improving health care services was also discussed.

Simulation activities, case studies and group work addressed different aspects and components of hospital disaster preparedness and management. It was highlighted that more than half of the countries are facing emergency situations and clear planning and appropriate responses are needed from the hospital sector. Concepts of hazards, emergencies, disasters and vulnerability and elements of hospital resilience were discussed using real examples. Practical steps towards mass casualty management in pre-hospital and hospital settings were introduced. In addition, the WHO tool for assessment of hospital safety index was introduced.

This was the first regional capacity building workshop for hospital managers that highlighted the need for training on hospital care and management components for the hospital managers within the Region. The participants provided feedback for better organizing the course, this course will provide a good starting point to conduct more effective and tailored made course for the different groups of countries in the Region. It is proposed to organize a shorter course (7 days) at subregional levels for countries with similar situations. WHO will also support countries to build their own capacities to replicate similar courses at national and local levels.

3. The way forward

Participants closed the meeting with plans for future actions based on the discussions and knowledge acquired during the workshop.

- Brief ministers of health, high level decision-makers and hospital managers about the workshop.
- Revise, update or develop hospital management strategic plans.
- Organize training courses for hospital managers.
- Develop a pilot committee, pilot hospital and pilot training course in hospitals.
- Start coordinating with colleges of management and continuous training department(s) on hospital care management, and integrate hospital care management training into public health curricula.
- Establish an internet site for hospital care management, and promote networking in order to exchange experiences and good practices.

