

A REVIEW OF HEALTH LEADERSHIP AND MANAGEMENT CAPACITY IN SOLOMON ISLANDS



Technical summary

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This report describes the current health management and leadership capacity and issues that affect management performance in the Solomon Islands. The population in Solomon Islands is approximately 500,000. Many people are under the age of 15 and live in rural areas.

The country has experienced social and economic problems over the past decade which have slowed down developmental efforts. Armed conflict between rival ethnic groups contributed to the degradation of the economy between 1998 and 2003.

The Solomon Islands economy currently relies heavily on external donor support. In 2006, nearly half of the country's income was made up of overseas development assistance.

Accessing and using health care

Access to and use of health services were significantly disrupted by the armed conflicts that occurred in the Solomon Islands between 1998 and 2003. This is especially true in rural and remote areas.

There is currently one doctor for about 3,300 people. There are also about 13 nurses and midwives for 10,000 people. Despite low numbers of health workers, about 87% of people seek health care when sick.

Financing the health system

The Solomon Islands Government has placed a series of controls on ministerial goods and services budgets. This has reduced the budget by about 33%, impacting on provincial budgets and service delivery. Health Sector Support Program funds have been allocated to provinces so that services can continue. If donor funding continues, this strategy is likely to recur.

Provincial health accountants have received training in MYOB in 2009 but higher level accounting skills are still required.

Human resources for health

The shortage of doctors and specialists is a key challenge. In December 2010 there were a total of 2,728 health workers in the public sector in Solomon Islands. On average, staff costs take up 55% of provincial health grants.

The Ministry of Health and Medical Services is not able to employ new graduates as places created by the Public Service Division have been filled and there is no budget to create new positions. Therefore, the Solomon Islands is negotiating to send surplus nursing staff to Vanuatu.

The Solomon Islands has sent 75 students to Cuba to study Medicine. When the 75 medical officers return from Cuba in 2013, the challenge will be to access money to pay for these new doctors as well as the infrastructure needed to house, equip and

Improving health management and leadership capacity and performance has been identified by the Solomon Islands Ministry of Health and Medical Services as critical to improving health delivery and achieving the MDGs. **This review identified several issues that are affecting management and leadership capacity and performance at the provincial level**, where 10 provincial health directors are appointed.

maintain them on an ongoing basis. The desire of the Ministry of Health and Medical Services to strengthen management capacity is stated in the National Health Strategic Plan 2006–2010.

Health management structure

Provincial health managers work across a number of levels:

- on an operational level, responsive to local needs,
- on a managerial level, responsible to provincial governments, and
- they are also concerned with adherence to central Ministry of Health and Medical Services policy and Ministry of Finance and Public Service Division regulations.

Given the changing nature of the health care system and the fact that vertical programs are implemented at the local level, there is a need for guidelines to help clarify the responsibilities of health authorities at both the central and provincial levels.

Number and distribution of managers

Nine of the 10 positions of Provincial Health Director have experienced high turnover. Many of the new appointees are new graduates and need a more thorough work hand over.

Health services in the Honiara urban area are provided through the Honiara City Council. Church health services are staffed by government employees.

Competence of provincial health managers

Management skills are reportedly weak at the provincial level. The Regional Assistance Mission to Solomon Islands provides governance training to provincial government staff.

Provincial health departments have limited financial and human resource management capacity. They also have clinical backgrounds and no training in public health planning or health

services management, other than that provided by donors, the Regional Assistance Mission itself and the Ministry of Health and Medical Services.

Several management and leadership training activities have been organised. However, they appear to have been largely donor-driven and have had little impact on the ground. As in other Pacific Island countries, high staff turnover and movement mean that management and leadership training programs need to be available on a continuing basis.

Management working environment

Provincial health directors have limited control over health staff. New provincial health directors are not provided with effective management support and supervision. There are no performance management systems in place to ensure that staff are properly assessed and supported.

Provincial health directors need to improve coordination between the large number of non-government organisations working at the provincial level in youth and women's programs in order to avoid duplication, but this is not done.

Many managers have a dual role and this is one of the biggest obstacles to management effectiveness at the provincial level. The provincial health directors are clinicians and reportedly spend much of their time providing clinical services and less in planning and managing services.

Functioning of management support systems

Management support systems do not adequately support provincial health managers. The budgeting and financial management system, in particular, poses a significant challenge to provincial health directors. Due to limited budgeting and accounting skills within the health system, there are often delays in the release of funds to provinces from the central level, disrupting service provision and resulting in under-spending budgetary provisions at year's end.

The socio-cultural context

Socio-cultural issues such as favouritism based on kinship, discrimination against women and the 'big-man' culture have implications for effective management and strong health leadership.

These cultural features create situations where a manager may be reluctant to discipline a member of their clan, or where a person with cultural influence may be able to distort the system.

Conclusions

The emphasis on primary health care and strengthening provincial and sub-provincial services calls for management guidelines that detail the responsibilities of national and provincial health authorities. Out-of-date job descriptions, failure to structure work activities, lack of performance management systems and poor time and attendance records make it difficult to improve service performance, particularly where the roles, responsibilities and lines of accountability of staff extend beyond provincial to central authorities.

The health management information system is mostly concerned with annual planning and national reporting, rather than personnel management and resource-allocation decision making. It is reported that provincial health directors rarely use health data for management decision making. This may be because the data is not collected, information is not well-managed and/or provincial

health managers do not have the ability to analyse and understand the available data and apply it to operational and day-to-day management activities.

The challenges facing health managers and leaders in the Solomon Islands are similar to those of many low- and middle-income countries. These challenges relate both to the managerial competence of individual provincial health directors and the constraints of the national economy, organisational structures and the societies in which they operate. In order to strengthen management and leadership capacity, Solomon Islands will need to build the competence of individual managers while concurrently addressing the broader structural and systemic issues that constrain management performance.

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Dr Asante welcomes all further **queries and feedback**:
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