A comparative study of healthcare management and leadership skills of health management systems

Mohammad Chand Jamali[*]
Research Scholar, Faculty of Management Studies and Law (FMS-WISDOM)
Banasthali Vidyapith, Banasthali, Rajasthan, India
*Corresponding author

Harsh Purohit
Professor and Dean, Faculty of Management Studies (FMS-WISDOM) and
Law, Banasthali Vidyapith

Vimlesh Tanwar
Academic Section, Faculty of Management Studies (FMS-WISDOM) andLaw,
Banasthali Vidyapith

Mohammed Abdalhamied M. Abushohada
Department of Health & Medical Sciences, Khawarizmi International College, Abu
Dhabi, United Arab Emirates

> ***Abstract---***The health care industry is characterized by constant advances to efficiently provide safe, effective, and high-quality services. Effective leadership is needed to steer and accelerate changes at all levels of the health system to realise the goals of the ongoing reforms in health care organisations. Because managerial and clinical workforces are equally represented in the health care sector, specific issues arise. This study explores the idea of leadership in light of recent efforts by healthcare organizations to pinpoint the essential skills and education needed by workforces in health management and leadership positions to do their jobs well. In order to accomplish organizational goals, a leader must be able to influence their subordinates' attitudes, convictions, and skills. Whether an organization performs well or poorly depends on it. Healthcare institutions need effective leadership to manage the changes in health service delivery. To make judgments based on the best available data, there was not enough information about the current situation of healthcare leaders. According to the study's conclusions, more research is needed to bolster the case for links between focused professional development interventions, individual competency of

leaders with experience in clinical care and health management, and organisational success. Thus, when concluding " A comparative study of Healthcare Management and Leadership Skills of Health Management Systems" our research included fact analysis and predictive analysis performed on pertinent records and data connected to our research purpose.

Keywords---health management, health leadership, global health, leadership skills, challenges.

Introduction

The future growth of indirect therapeutic and non-assisted living facilities is causing healthcare administration to become a more well-liked vocation. The definition of direct care settings by Buchbinder and Thompson (Thompson **J** et al., 2022) is "those organisations that give care directly to patients, residents or clients who request services from the organisation." Non-direct care settings help support the care of individuals by giving goods and services to direct care settings, but they are not actively involved in giving care to those who need medical attention. Over the years, there has been a significant shift in how people view the importance of healthcare. The second-largest economic sector in the world is thought to be healthcare, behind industrial sectors. As competition has expanded, medical technology has advanced, and patient expectations have risen, the health care systems have become complex organisations. Over the years, there has been a major shift in how people view the importance of healthcare. The second-largest economic sector in the world is thought to be healthcare, behind industrial sectors. As competition has expanded, medical technology has advanced, and patient expectations have risen, the health care systems have become complex organisations.

The healthcare sector is dynamic and complex, and it encounters difficulties that are particular to it and those that affect companies in other industries (Reuben Olugbenga et al., 2018). Some of these problems include internal constraints brought on by rising accountability and transparency standards, increased stakeholder involvement from political and social groups with financial and other interests in the business, and a shortage of healthcare workers due to staff members' aging. Along with the difficulties faced by the healthcare sector, the business is also significantly impacted by the population's changing demographics, economic problems, globalisation, governmental regulations, and medical and information technology advancements. The interaction of forces under its control and those outside it is causing changes in the healthcare industry. The shortage of qualified healthcare personnel is an increasing concern. "The United States might face a physician shortfall of up to 139,000 by 2033, according to a study by the Association of American Medical Colleges. The American Nurses Association reports that a growing shortage also affects the nursing field. A prominent factor in these shortages is the rise in the population of seniors, which is projected to rise by 45.1% by 2033".

This plethora affects both patients and specialists: Studies predict that in the next ten years, 2 in 5 currently practicing physicians will be 65 or older. Therefore, planning and control in healthcare have received increased attention during the past ten years in both practise and research. The demand for and cost of health care has increased, which has sparked this interest (Hans E et al., 2011). Healthcare organisations are working on redesigning processes to increase their effectiveness and productivity. The motivation for this academic endeavour came from the aforementioned modern healthcare trends, where there is an increasing need for regulation, effective healthcare management systems, and the opportunity to develop leadership skills among healthcare workers. The study focuses on the value and function of developing leadership abilities in the context of healthcare services and seeks to identify the optimum healthcare management system through comparative analyses of the many systems already in use.

Healthcare Management System Normative Parameters

Ensuring healthy lifestyles and promoting well-being at all ages are necessary for sustainable development. As a result, countries around the world try to create better and more efficient ways to cure illnesses, as well as to prevent them, increase life expectancy, and promote population health (Keskinocak P and Savva N., 2019). Public and population health also play a crucial role in this endeavour, emphasizing the prevention and promotion of healthy behaviours, even though advances in medicine, medical technology, and information technology often take centre stage (e.g., through education or policy). Studies show that there are growing differences between the living standards of industrialised and developing nations (Séror A., 2001).

Although the cost of medical supplies is constantly rising, difficulties in developing nations are more due to organisational and moral problems than a lack of money. Due to changing health requirements, increased public expectations, and aspirational new health objectives, the bar is being raised for health systems to provide healthcare of higher quality and more social value. It is essential to have top-notch healthcare systems that reliably provide care focused at enhancing or maintaining health, are respected and trusted by everybody, and are adaptable enough to meet the changing demands of the population. Quality should be embedded in all healthcare systems, not just for the wealthy or as a goal for the future. Additionally, health systems cannot improve health without high-quality care, negating the value of the human right to health (Kruk M et al., 2018).

Healthcare systems differ from one country to the next depending on the economic development and political systems in place. Health care is significant and a concern on a global scale. The three primary goals of a health care system are to keep people healthy, treat those who are ill, and protect families from financial collapse due to the medical expenses. There are about 200 countries on our planet, and each has a unique set of strategies to accomplish these goals. A universal healthcare system should incorporate the following essential components:

- Leadership and governance
- Financing
- Health Workforce
- Healthcare Products
- Healthcare Infrastructure
- Health Information Systems

In many parts of the world today, integration into the healthcare system is still unsuccessful, even if we realise that rehabilitation is delivered in conjunction with other high-quality treatments in the context of a specific health condition. Others claim that this is because the authority for integrating rehabilitation into the healthcare systems was improperly distributed. Since rehabilitation is more usually associated with disabilities and is frequently supervised and administered by social welfare services, governance is split between the departments of health and social welfare in several nations.

Evaluation of Healthcare Management Performance is Required

The two most important frameworks for describing health care systems are "the WHO's Building Blocks framework and the World Bank/Harvard Control Knobs framework."

'Building Blocks' Framework

WHO published a framework in 2007 that has come to be known as the "WHO building blocks" to concentrate on the requirement to construct health systems and to provide a consistent conceptual understanding of what makes up a health system. According to this structure, there are six primary responsibilities or components that make up the organisation of the health system. This infrastructure is made up of several structural components, such as the delivery of services, the health workforce (human resources), information (data and data systems), drugs, vaccines, and technology, as well as funding, leadership, and governance (stewardship).
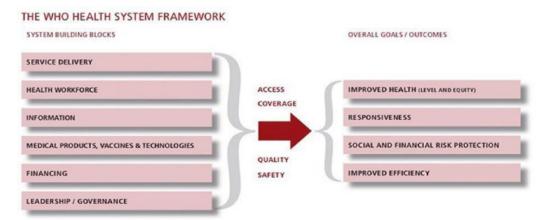

Figure 1: Structure of WHO's 'Building Blocks' Framework
Source: www.futurelearn.com

These six foundational elements need to be strong in order for a health system to achieve its overarching goals, which include "improving health, responsiveness (i.e., how well the system responds to changing health requirements or other changes in the system), social and financial risk reduction, and improved efficiency." The intermediate goals include access, coverage, quality, and safety. The building blocks framework was criticised for failing to recognise how the building blocks were interconnected and interacted with one another and for ignoring the patients and communities at the centre of the healthcare systems. This criticism came even though the framework had been widely adopted. In 2009, WHO released a ground-breaking study on systems thinking that included an updated version of the building blocks idea. This puts "humans" at the centre and shows how interconnected the different components are.

Control Knobs' Framework

Roberts et al. released a methodology in 2008 for assessing the efficacy of healthcare facilities and focusing efforts on their development. The Harvard University School of Public Health and the World Bank Institute (WBI) developed this plan. According to this paradigm, five "control knobs" can be changed or adjusted to support health systems. These five switches are as follows:

- o Financing
- o Payment
- o Organization
- o Regulation
- o Behaviour

Processes for Developing Leadership Skills and Their Relevance in Healthcare Management

The epidemiological, demographic, and sociological landscapes are constantly changing, and so are health systems. Global health has a complex agenda due to emerging technologies and political, economic, social, and environmental issues. Non-state organisations are playing a more prominent role in population demand management and fostering innovation. The concept of "collaborative governance," is one in which stakeholders from the non-health and health sectors work together to support the provision of healthcare services globally to address changing demands and new goals. Particularly in low- and middle-income countries, "the Sustainable Development Goals (SDGs) and the objective of universal health coverage (UHC)" have been significant impetuses. Reforms aimed at enhancing the effectiveness, equity of access, and general caliber of public services have been infused with agendas for change (Figueroa C et al., 2019).

The World Health Organization's (WHO) essential publication, "Working together for health," highlighted the critical scarcity of health-related human resources that must be available to satisfy current and future population health demands internationally. This problem still prevents the SDGs from being achieved. The challenges faced by health systems in terms of human resources for health are highly complex and varied, notwithstanding the modest global advances in the size of the typical health workforce. These include worker restrictions, weariness,

unequal skill distribution, underrepresentation in some geographic areas, and problems with interprofessional collaboration. Effective health leadership and workforce management are crucial to managing the demands placed on human resources within health systems and building capacity at the regional and international levels.

In its historic publication "Working together for health," the World Health Organization (WHO) emphasised the urgent need for more healthcare professionals worldwide as well as the crucial role that management and leadership play in developing global health systems. Recently, the Global Consortium for Healthcare Management Professionalization was established to raise professional management's profile in healthcare and, more specifically, to identify the health management skills required to meet the demands of the current and future global health workforce. The Consortium has made a strong case for the need for a global and context-specific viewpoint on valuing and fostering the progress of health service managers (Harrison R et al., 2019).

The significant objectives and goals for patient care are made by those in leadership and management positions in the healthcare industry. These tactics may include putting new medical technology into practice or ensuring that a new healthcare law enhances patient benefits. They could also develop plans of action in response to market circumstances that have an effect on the healthcare industry, like new technological developments or value-based care models. In order to maximise the delivery of patient care, executives and managers in the healthcare sector develop facility goals.

Healthcare Management System Standards

Sarah Dossaji (2012), analysed a variety of significant American managed care plans, identifying factors that influence effectiveness, and then sought to understand why Kaiser Permanente was regarded as the best. In terms of quality and performance indicators, the Geisinger Healthcare System, Intermountain Healthcare, and the NHS of England were contrasted with Kaiser Permanente. The HEDIS indicators of "effectiveness of care" show that all Kaiser Permanente regions performed better overall than the national average. In addition, Kaiser outperformed Intermountain Healthcare and Geisinger Healthcare System on a level with or better.

Kaplan Dönmez et al. (2020) enhanced the desirability optimization models to create a global healthcare competitiveness index (GHCI) for 53 countries with a GDP per capita (GDP PC) of more than $10,000. According to this work's description, the GHCI measures the advancement and efficiency of healthcare systems in countries where patients have easier access to medical treatment. The study's findings were viewed as the cornerstones of any potential hypotheses that might be produced in the wake of it to build a new index to measure the efficacy of healthcare systems around the world in diverse countries.

Healthcare Leadership Skill Development Needs and Initiatives

Based on their personal views and ideas, Slipicevic and Masic's (2012)

conversation established the groundwork for further discussion on various issues connected to health managers' ongoing education and professional development. By quantifying all the skills and knowledge required to successfully carry out managerial activities, the study's findings helped the health managers working in the BIH environment conceptually and practically. Additionally, this study offers a clear profile of the managerial competencies that health managers must possess to carry out their responsibilities and a preliminary model of the essential skills and competencies that make up an effective health manager. The systematic evaluation of skill levels about demands is the significant contribution of this work.

Kiros Teame et al. (2020) assessed the effectiveness of healthcare leadership and associated factors among managers working at public health institutions in Addis Abeba, Ethiopia 2020. According to the report, healthcare managers are not very good at inspiring followership, carrying out visions, or developing new ones. This holds, especially for their capacity to develop original visions. Lack of leadership expertise and skills and a tendency toward autocratic management were obstacles to successful leadership in the healthcare industry. In order to improve the way that health care is run, they advised increasing emotional stability and giving managers greater authority.

Niki, Aspasia, George, Anastasios, and Marios (2021), provided information on the effects of leadership training on developing essential clinical leadership skills in the European Health Sector. Their study revealed that participation in health leadership programs positively impacted the talent management, leadership behaviours, and the leadership potential of health professionals. However, additional factors affect leadership qualities, such as team dynamics, organisational and national culture, and structure. This study discovered that healthcare systems become more effective and efficient as more professionals participate in management, governance, and administration.

Lyons et al. (2021) [27] carried out a systematic study to collect new empirical data in various methods about the components of medical leadership development programs that were associated with outcomes at the clinical and organisational levels. The researchers searched the Ovid MEDLINE database using free text and Medical Subject Headings. After that, a detailed hand search of referencing was done in well-known assessments of healthcare leadership development. The Medical Education Research Study Quality Indicator (MERSQI) and the Joanna Briggs Institute (JBI) Critical Appraisal Tool were used to evaluate the study's dependability. A conceptual strategy was then used to combine the results. They found that learning techniques were more crucial for organisational effectiveness than overall curricular content.

Conclusion

The healthcare sector is complex and characterised by ongoing reforms. Since there is a complex web of interrelated components, management and leadership workforces must be strong and trained to oversee reforms for effective and efficient health care delivery. The workforces in clinical and health management are spread out, which creates extra difficulties for leadership development. Others

may exercise their leadership from a clinical role, while other clinical leaders may occupy management positions. There have been several studies on the subject conducted in numerous nations since the turn of the century, which is a reflection of the growing interest brought on by the need for professional management and leadership workforces. In the literature on health management and leadership, there is a clear trend toward focusing more on identifying and assessing the essential competencies required of leaders with backgrounds in both clinical and health management for successful performance in leadership roles. The study's goals are focused on fundamentals that should help improve India's operating healthcare systems. The research's findings are also expected to indicate if India's healthcare systems are likely to improve their level of competition and integrate into the global healthcare value chain.

References

1. An overview of different health systems frameworks. Future Learn. https://www.futurelearn.com/info/courses/health-systems-strengthening/0/steps/57232. Published 2022. Accessed September 5, 2022.

2. Barzdins J. Developing health care management skills in times of crisis: A review from Baltic region. *Int J Healthc Manag*. 2012;5(3):129-140. doi:10.1179/2047971912y.0000000015

3. Dönmez N, Atalan A, Dönmez C. Desirability Optimization Models to Create the Global Healthcare Competitiveness Index. *Arab J Sci Eng*. 2020;45(8):7065-7076. doi:10.1007/s13369-020-04718-w

4. Dossaji S. a Comparative Analysis of Healthcare Systems. *California State University*. 2012. Witter S, Palmer N, Balabanova D et al. Health system strengthening Reflections on its meaning, assessment, and our state of knowledge. *Int J Health Plann Manage*. 2019;34(4). doi:10.1002/hpm.2882

5. Figueroa C, Harrison R, Chauhan A, Meyer L. Priorities, and challenges for health leadership and workforce management globally: a rapid review. *BMC Health Serv Res*. 2019;19(1). doi:10.1186/s12913-019-4080-7

6. Hans E, Houdenhoven M, Hulshof P. A Framework for Health Care Planning and Control. *University of Twente*. 2011.

7. Harrison R, Meyer L, Chauhan A, Agaliotis M. What qualities are required for globally relevant health service managers? An exploratory analysis of health systems internationally. *Global Health*. 2019;15(1). doi:10.1186/s12992-019-0452-3

8. Health Care Systems - Four Basic Models | Physicians for a National Health Program. Pnhp.org.https://www.pnhp.org/single_payer_resources/health_care_systems_four_basic_models.phpPublished 2010. Accessed September 5, 2022.

9. Healthcare Administration vs. Leadership and Management | Maryville Online. Maryville Online. https://online.maryville.edu/online-masters-degrees/management-and-leadership/careers/healthcare-administration-vs-leadership-management/. Published 2022. Accessed September 5, 2022.

10. Keskinocak P, Savva N. A Review of the Healthcare-Management (Modeling). *M&SOM*. 2019.

11. Kruk M, Gage A, Arsenault, Jordan K, Leslie, High-quality health systems in

the Sustainable Development Goals era: time for a revolution. *The Lancet Global Health Commission*. 2018:1-57. https://www.thelancet.com/action/showPdf?pii=S2214-109X%2818%2930386-3. Accessed September 5, 2022.

12. Niki, K., Aspasia, G., George, P., Anastasios, S., & Marios, A. (2021). Leadership Development in Health Care: The Role of Clinical Leaders. *Journal Of Human Resource And Sustainability Studies*, *09*(02), 231-249. doi: 10.4236/jhrss.2021.92015

13. Rasa J. Developing effective health leaders: the critical elements for success. *J Hosp Manag Health Policy*. 2020; 4:6-6. doi:10.21037/jhmhp.2019.11.02

14. Séror A. The Internet, Global Healthcare Management Systems, and Sustainable Development: Future Scenarios. *Electronic Journal of Information Systems in Developing Countries*. 2001;5(1):1-18.

15. Thompson J, Buchbinder S, Shanks N. An Overview of Healthcare Management. In: *The Need for Managers and Their Perspectives*. Burlington: Jones & Bartlett Learning; 2022: 1-15.