

## " Leadership & Governance and How to Improve Hospital Management? "

### Authors

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### **Abstract:**

One of the most important challenges facing Egypt and other developing countries is the lack of effective leadership and the lack of a future vision for development, in addition to the weakness of human resources, which leads to the failure of health systems.

In this research, we discuss the development in the governance of hospitals in health development, and we recommend amendments in the framework of work on the governance of health development

And based on the report of the World Health Organization in the year 2000, it identified 4 functions or goals for health systems, the most important of which are providing health services in a good and patient manner, finding funding, continuous supervision and finding the necessary resources. The report uses the term governance and management interchangeably and gives a definition to the agent as the person responsible for managing the property of others

The HarperCollins Dictionary defines the word “control” with several names, such as: managing - curbing - directing - mastering - processing - arranging - disciplining - leading. The role of governance for the presidency is not limited to a supervisory role only, but extends to more than that of an executive directing role as well. (3)(6)(9).

**Key words:**

Leadership, Governance, hospital, supervision, Control.

**Introduction**

The health care sector is considered different from the rest of the other sectors as an industry and the main driving factor for it is humanity. It is very clear by providing preventive, rehabilitative and curative help to patients. Therefore, the medical sector is committed to high ethical standards so that no distinction is made between any patient and another or excluded and provides services without regard to religion, race, or gender.

Therefore, the constitution of Egypt supports the law of the right for health for any citizen because it is the basis for a distinguished and fair health care system.

Despite the number of reforms and efforts being implemented to improve health care services, there are still huge challenges that lead to reducing achievements and making them unnoticeable with low efficiency.

As an initial step for the development of the health care sector, we begin by researching hospitals and working on the implementation of governance and here we define the basic principles of hospital governance.

### **Methodology:**

In some African and Asian developing countries, principles and guidelines have been developed to support a curriculum designed from the experiences of other countries.

In Egypt, governance can be a guiding concept that enhances and develops the health care sector. There are principles and guidelines for governance that can provoke a comprehensive and radical change by implementing these concepts.

By understanding these guidelines and principles, a distinguished health care sector will be established in Egypt, which will work to achieve the well-being of Egyptians, and also “individual hospitals can be developed and transformed into successful, well-performing and sustainable organizations and push the health care system forward.”

This will lead to the best results in caring for patients and meeting their needs to the fullest and increasing the feeling of satisfaction among both patients and medical service providers as well.

### **Discussion**

The new and original term alive instead of (leadership) in health development is (governance) in health development, since the Ministry of Health is the primary authority for governance, which chooses to delegate a number of functions

The six areas of governance of the World Health Organization include effective external movements for health, efficiency in resource allocation, and equity in

health service delivery, political and economic stability, ethical practices in health service delivery, and the development of necessary reforms.

Therefore, it is not necessary to set an independent goal for the hospital, even by improving the overall performance through the best practices in hospital management

Accordingly, sound management requires health care institutions to clearly define separate responsibilities and roles in order to achieve a high level of performance and meet the needs of patients with the best guidance and implementation correctly and in the best way

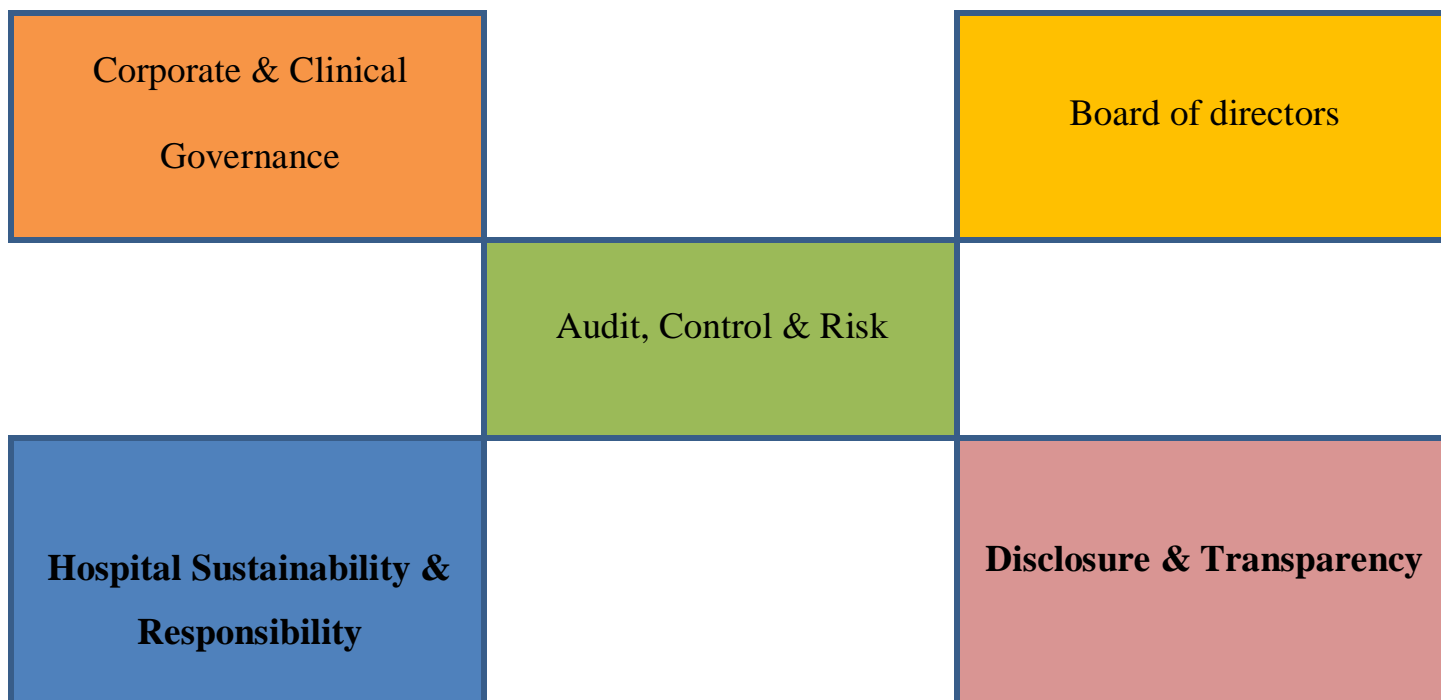
### **Object of labor:**

Spotting a light-weight on the governance and leadership in hospital management intends to establish a memorial in reaching high levels of Egyptian hospitals politics allowing the system of healthcare raise the perform of its duties for the demands of the Egyptians and recognize its capabilities. Impending these points from a company governance perspective (1).

Guidelines and propositions are promised to assist individual hospitals in developing their governance and clarity processes. Being a tool to assist hospitals directors obtaining strength the levels of continuous and culpable growth, enlargement and institutionalization are their major goals. This might cause flourishing organizations, which serve for the advantages of engaged patients and other collaborator. Also, this Guide is meant to assist policy generators in setting national structure for politics of hospitals. Furthermore, it is planning to help the domestic community organizations and the society to evaluate hospitals from governance aspects (1).

The propositions and their various guidelines give five dominant domains within the situations of the hospitals. They incorporate and overlap within the manufacture of upgrading the general administrations methods in the hospitals in Egypt.

**The five domains are:**



**Corporate& clinical governance:**

Corporate governance induces accomplishment and overall competence of organizations by display the best leadership, progress information flow alongside strategic planning and decision-making process. (1)

**Corporate Governance**

Corporate governance knows the basis of the trouble (1)

The institutional frame work for hospital governance equate the rules of efficient of economy plus sustainability of fiscal, beside patient service and the basis of society. (2)

**Corporate governance objectives**

Its fundamental objective is to raise the worth of the organization for its concerned by perfection of accountability and organizational work. (1)



### **Corporate Governance Frame work:**

The structure of hospitals governing gives it the ability to defying its pass, obtain its mission, act efficiently and alleviate susceptibility to depravity. (1)

Its frame work also segregates in to 4 different groups namely. Each group of them has its own responsibilities, group of competencies and its own roles. (1)

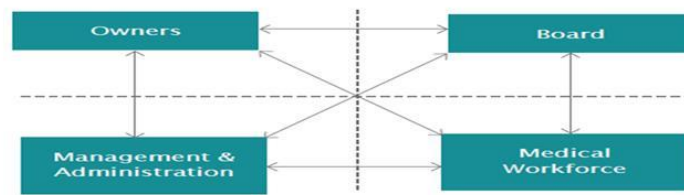
The permanent basis of the level of care within the hospital is the main aim of clinical governance and this can be achieved through sub objectives like: (1)

Quality assurance and process assurance are prioritizing and assigning installing systems to support a practice. Based approach developing and teaching workers. (1)

The frame work of clinical governance

In order to reach the goals of clinical governance, the hospital must be committed to retaining qualified doctors, its necessary to try effort with a little cost to observe and dominance the medication described by the doctors working on the premises, also the establishment of links between the clinical governance system and the main hospital department. (1)

## 1-Key to good clinical governance:



- Education – training - staff accreditation - professional development. (1)
- The optimal selection of clinical staff and their appointment and not abandoning them. (2)
- Development and education of medical personnel and maintaining their professional standards. (2)
- Maintaining continues identification of professional development needs and priorities. (2)
- We must ensure that there are systems based on proof of evidence. (1)
- Ensure that the latest steps and methods are provided under an appropriate control and monitoring system. (1)

## 2 -Development and research:

The hospital should do a search for:

- Continues production of proven, robust, research- Based data. (2)
- Ensure that the results are correct by reviewing and documenting them. (2)
- Create a package of evidence for enhanced results. (2)
- Find and detect damage from harmful effects. (2)

## 3 -Audit of clinical:

Clinical audit can be a big name that contains many strategies for better quality. (1)

It's generally considered a method of continuous assessment and improvement of clinical practice by systematically reviewing established standards and comparing them with the care provided. (1)

#### **4-Clinical Efficacy:**

It connects patient's expectations with individual clinicians' clinical experience and provides the best evidence for effective outcomes. (1)

#### **5- Department for management of risk:**

This management involves mechanisms that assess the anticipation of negative things and take the necessary measures for stopping. (1)

The health institution is a component of risk management. (1)

Patients are exposed to risks, so regular interrogation and review of systems can reduce these risks. (1)

Practitioners are also exposed to some risks, so doctors must be immunized against infectious diseases and ensure from that. (1)

#### **6- Management of information:**

In order to achieve the goals of leadership and governance, more attention must be paid to the data represent and presentation of information is a major key to present ideas, exchange of information for fruitful and constructive communication. (1)

#### **7-Electronic Records in all health aspects and history of case:**

The health institution has an integrated fully system for use and management of data it's made in an exceedingly way: (1)

- Supports higher cognitive process (2)
- It helps in detection of deviation and errors and construction of corrective procedures (2)
- It plays role in prediction of problems which may be happen in the future and outlines of precautionary measures (2)
- Work to appreciate and support distinguished medical competencies and continuous development (2)



- Supports the idea of clinical evidence-based and scientific research methodology (2)

## **8- The system of screening and investigations:**

Obligatory reports:

- Reporting mistakes that lead to severe health problems and mortality. (1)
- Accidents reports:
- It reports accidents from very simple to severe ones. (1)

Optional reports:

Points out mistakes that may result in weak impairment to cases. Help to decrease the incident of impairing. (1)

Outcrop reports:

Using signals for death- rate. (1)

## **The Board of Directors:**

Councils of directors in hospital are chosen for being professional

They must be dynamic, distinct in terms of its size, composition, and attitude. (1)

Including the correct mix with the assembly of the council builds the concerted knowledge wanted to guide the organism. (2)

## **Composition Direction, Council Purpose, Oversight & Structure**

To provide the proper direction to realize the strategy of hospital and long-term sustainability it's chargeable for putting the mission and vision of the hospital.

### **Board composition:**

The board composed into non-executive directors and the chief.

The structure of the council promotes variety in age, gender and expertise. There's an honest equilibrium between people have medical and

healthcare knowledge and people from other knowledge including managerial disciplines ,hospitality legal, and financial.(1)

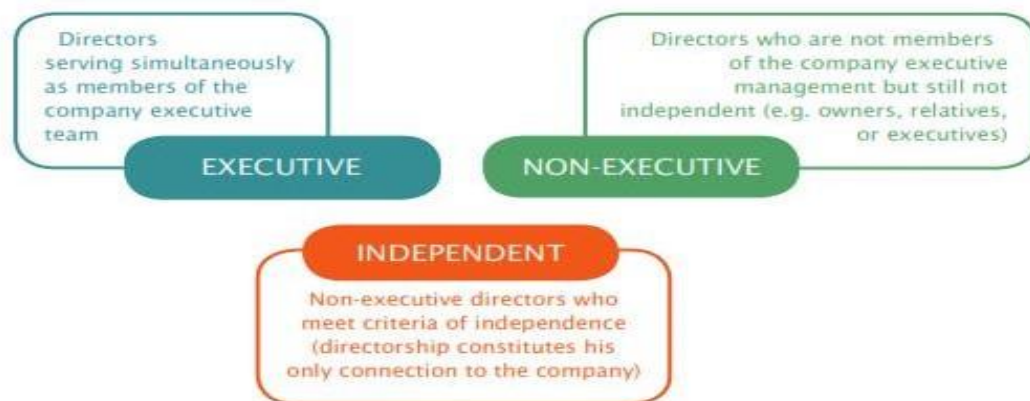
Optimal size of the council depend the stage of development in addition as its dimensions of the hospital and operations

## **Directors**

The duty to advance the organization needs is the mission of directors.

### **Independent Directors**

Council has a proper figure of non-executives, independent directors and it is recommended.



### **The Chairman role:**

The chairman is that the center of the Board and has the responsibility of the chiefship of the council and his effective organism.

### **Duality of chairman and CEO:**

There is a transparent schism between a chief executive and boss, to be sure that a balance of authority is maintained and power.

## The role of the Chief officer(CEO) contra the role of the chairman:



### Board's Secretary:

He does an significant function for support the council efficiency and for the arranging the council meetings and taking care of the time of meeting, the task to ensure the event of, compliance with, and recurrent review of the association's governance practices & policies.(1)

### Independent, Informed, Professional & Decision-Making:

Mangers make enquiries to the arrangement to have news that necessary to pleasure their decisions & don't perform as inactive receiver of knowledge.

### Board Practices:

The meetings of hospital's Board occur on the basis of everyday from four to eight times at a year. The topics of agenda are putted on the right priorities. Highlighting special topics every session. The attendance of mangers is reported.

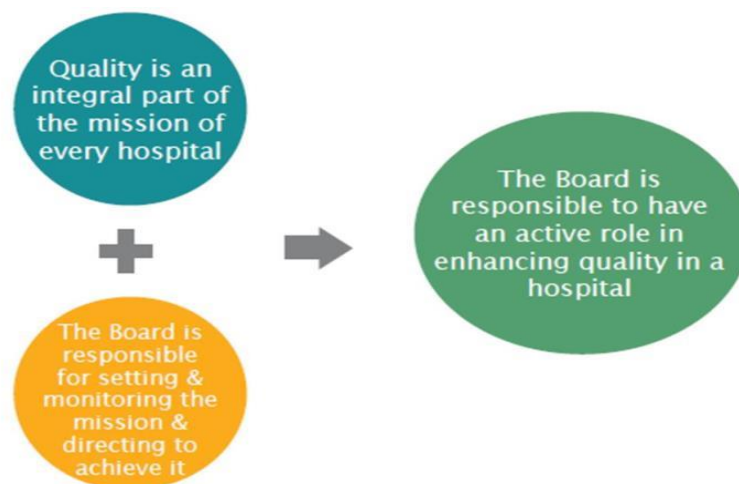
Hospital non-executive mangers meet daily without the presence of management.

## Evaluation, Appointments, and Succession:

CEO may be a non-medical administrative like an arrangement expert, when the doctors run their clinics and departments. The council makes sure that the non-medical executive has knowledge of the particular issues concerned to a hospital to be comparing with other firms.

The Board will make sure that clinical staff of the hospital and the management succession plans for senior executives is in situ. Plans shall begin requirements of the positions and the desired qualifications.

## Patient Safety Oversight and Quality Performance:



## Board Specialized Committees:

These committees must be built by officially delegated objectives, tasks, tenure & authorities

Committee's presence helps the council to know its tasks. Committee's analyses special thing and make advice to the council on them with best practicing, the council shall establish a minimum of some committees:

- Quality committee
- Remuneration and Nomination committee
- Audit committee

### **Quality Committee:**

The quality committee is very helpful to the Board to do its tasks in hospital by very quality oversight. Support the hospital for achieving best practices in clinical governance. (2)

It is responsible for:

- Outcomes progress and clinical performance.
- Credentials of hospital staff and their satisfaction.
- Satisfaction and Patient safety.

### **Nomination & Remuneration Committee:**

It is very helpful for the council to assure appropriate decisions, remuneration matters, policies & procedures to regulate inauguration.

### **The Nomination & Remuneration Committee's main responsibilities are:**

- Survey succession plans for key executives including senior managers and CEO.
- The members in committee are only non-executive managers.
- Suggest methods to survey the efficiency of the council.
- Advise to the CEO and the council the remuneration of every manager.
- Survey composition of board of directors ,nominate and Identify new directors
- Survey the remuneration of senior medical staff and other senior management.

### **Audit Committee:**

The responsibility is for helping the council of managers in achieving surveillance tasks.

Overseeing the reports of financial process, the audit process, system of control, and therefore the company's process for monitoring compliance with regulations, laws and the code of conduct. The committee includes a minimum of three members, they are all non-executive managers. The cornerstone of this committee is the independency. (1)(2)(8)(10)

### **Auditing, Control & Risk management**

The hospital has the duty to incorporate proper activities concerning internal supervision, risk management and command with the correlated procedures, structures and systems. (1)

### **Auditing**

May be the corner stone of governance into practice in hospitals. Auditing system includes a scientific and unbiased steps to get evidence based results that accommodate processes, information, and control systems regarding operational and financial situation of the hospital and also the results are reported and disclosed to interested participants. (2)

Any organization audit system structure is based mainly on the following three items :

- Internal Audit.
- External Audit.
- Audit Committee.

### **Internal Audit**

Internal Audit several activities adds value to any hospital. These start with the information of financial management, referred to as an audited account, which gives reasonable confidence to the Board that the financial situation information of the hospital they get is error free, reliable, understandable and occurring at the appropriate time .These activities assist for the decisions making techniques in the hospital .(1)

The following chart shows the value of the internal audit getting the best practices and accelerating the achievement of corporate objectives



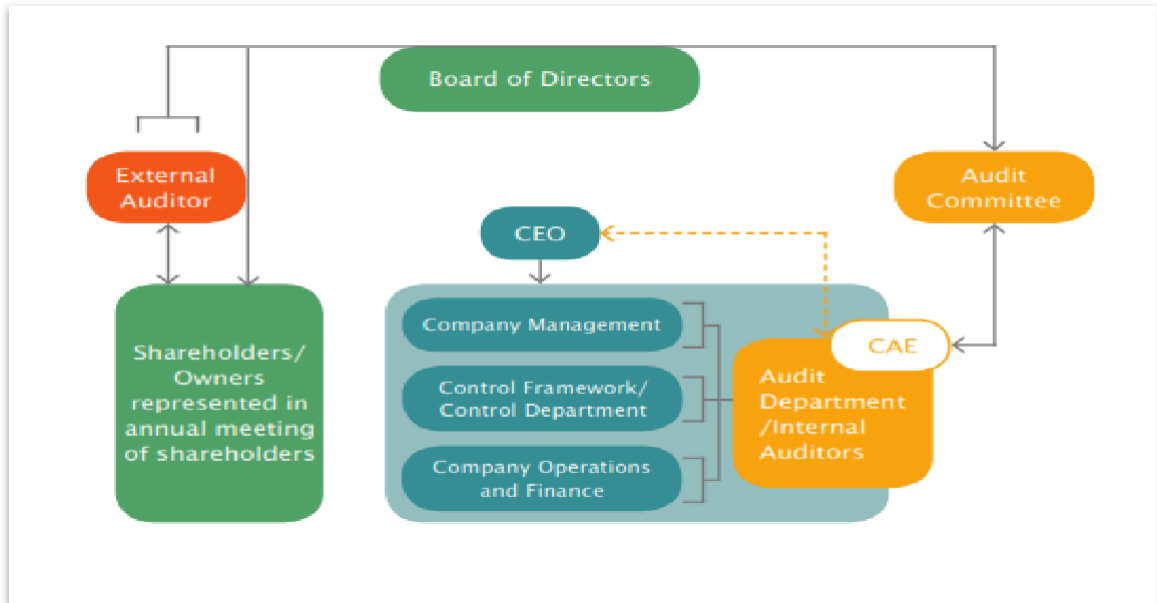
### **External Audit:**

External auditors are likely to have numerous acceptable, ethical and regulatory requirements. External audit consider professional third arm which performs hospital's financial records independent reviews. (1)

### **Audit Committee:**

The audit committee consists mainly of independent directors or external directors who are member of the board of directors of the organization, but not a member of the executive management team. Those members are qualified and approved by the Board's agent for assurance and that committee has three sources :

- Management
- Internal auditors
- External auditors (2)



**Control:**

The function of control is to insure that specified objectives are achieved by prepared plan. A control system which is efficient can contribute to complete hospital quality performance in several vital sides of the hospital.

The main sorts of control establish by hospital management systems which are:

- Detective: to detect and observe any undesirable events.
- Preventive: to avoid incidence of any unwanted events

Directive: to encourage and direct all desirable and preferable events. (1)

**Control framework can be structured as the following:**

**Manpower:**

Development programs help to retain the right people, grow profits, helps employees learn specific knowledge or skills to improve performance in their current roles and keeping them updated on recent policies and guidelines. Employees also must receive suitable information about responsibilities of other different parts of the hospital. (1)



### **Organization managers authority:**

This can be called segregation of responsibilities as no one can perform all duties of any section of the hospital. The actions required to provide this responsibilities are performed by managers. The hospital managers allow changes in structures as, objectives, policies and plans change. (1)

### **Procedures, policies and guidelines:**

It is important to clearly state a systematically organized written policies or other publications approved to reduce the error occurrence and to coordinate in a way that continuously checked by another independent members. As organization grows up and get powerful enough, the need for state formal and written policies is reduced also. (1)

### **Budgeting and Accounting:**

Certain members of employees participate within the budget preparation, since they are responsible for meeting it. These employees analyze and compare budget with actual situation and shows causes for any significant variations. Accounting helps managers for reasoned decision-making rather than set down a textbox or checklist. Accounting is especially provides lines of responsibility in the hospital. (1)

### **Receiving reports:**

Reports which are accurate, meaningful, timely, and economical are likely to help the management functions and making decisions in most organizations including hospitals (1)

### **Risk Management:**

The hospital to achieve its objectives, risk taking is unavoidable. So, the hospitals that actively control risks, not only show potential threats but also show

potential opportunities. Those hospitals that are more risk aware appreciate and that provide them with a competitive and strong features (1)

The priority and tonality for risk management must start at the highest to be effective.

Risk management is the duty of senior management while the general responsibility rests with the Board of directors. Senior management remodels strategic directions about risk management announced by the Board regarding the policies and guidelines to establish many efficient steps for implementing those policies and programmers.

The directions are approved from the board to make sure that policies and programs of the hospital are fit with the risk guidelines of shareholders. (1)

This can be summarized as the following:



### **Hospital Sustainability & Responsibility:**



The hospital must implement balanced policies and take into account the preservation of its own environment, its economy and the social dimension entrusted with its provision. Sustainability is a key part and objective of sound governance practices.

Achieving hospital sustainability ultimately means aligning social, environmental and economic goals for the collective good of all stakeholders

We must take into account the various interrelated dimensions of sustainability, and realize their importance and necessity in order to be able to implement all its aspects

### **Organizational frameworks for stakeholders:**

A hospital can be part of the community in which it is located. No one can deny the fact that it provides a service with a social dimension that differs from one hospital to another, each according to the policies, regulations and laws that regulate the nature of work, but in the end, the hospital is an integral part of the society in which it is located.

### **The Rights of stakeholders:**

These rights include the following:

- Rights of patients.
- Rights of employees.
- Rights of suppliers.
- Rights of institutional payer rights shareholder, owners & investors.

### **The responsibility:**

Hospitals exercise their role by implementing activities and practices within the framework of regulations and laws regulating work. The implementation of these activities results in a package of results, whether positive or negative, and the hospital must bear all these consequences, directly or even indirectly. (1)

### **Ethical frameworks regulating work:**

The basis that should govern transactions and relationships, whether inside the hospital, between employees of all categories, or between the hospital and its patients and beneficiaries, is to maintain moral and human values. Therefore, each hospital must develop its own ethical vision and work on spreading and emphasizing it and offering behavior that is commensurate with this vision.(1)

### **Preserving the environment:**

The management of hospitals and health facilities must be aware of the importance of maintaining a healthy and clean environment free of pollutants, and that there should be a permanent balance between providing the required health services without compromising environmental security or harming those around and maintaining the health and safety of workers. (1)

### **Facilities and services that must be available**


We must support health institutions with the required services and provide them with the necessary infrastructure, whether water, energy, sewage, oxygen, heating and cooling networks, taking into account the preservation of the surrounding environment and not harming it. (2)

### **The societal role:**

It is necessary and important for health institutions to play their social role entrusted with supporting patients who are unable to provide them with the full required health care and to achieve the required balance between achieving the desired profitability, especially if the hospital is an investment and achieving the humanitarian aspect, in order to maintain the sustainability of the service. (1)

### **Disclosure & Transparency:**


The hospital merges the practices of transparency into the heart of the system of the organization and obligates itself to full disclosure. (1)

 DISCLOSURE

Disclosure is the release or transmittal of previously hidden, confidential or unknown information.

 TRANSPARENCY INTERNATIONAL (TI) DEFINITION OF TRANSPARENCY

Transparency is a characteristic of governments, companies, organisations and individuals that are open in the clear disclosure of information, rules, plans, processes and actions.

 DIFFERENCE "DISCLOSURE" & "TRANSPARENCY"

Disclosure means simply making information available to the public or specific stakeholder groups. Transparency means to do so in a way that the recipient can easily access and understand the information needed and with the expectation that one will be held accountable for them.

### **External transparency:**

It is very important and critical method for building and making strong relationships with potential partners and external stakeholders. And this can help those stakeholders to see if they want to cooperate or interact with the health organization or not. THIS can play great role as a good marketing tool for marketing for the hospital as a chief and main organization (1)

### **Internal transparency:**

This matter is vital and necessary in the frame of performance of hospital and overall efficiency to upgrade and enhance all levels of organization and increase of productivity THIS improves the processes of decision-making as well as being a serious step to detect and frustrate the corruption ,fraud or other inappropriate behaviors.(1)

## **The Main Tools of Disclosure process:**

It is important for every recipient or stakeholder, there are some correct tool(s) and Successful methods of disclosure process include:

- Internal network.
- Wall posters.
- Annual reports.
- Webpage.
- Flyers.
- Brochures.
- Presentations.
- Mobile applications.
- Hand-outs.
- The communication via direct methods such as :phone, message or emails.(1)

## **Conclusion:**

The purpose of this study is to evaluate all the research points that were raised, studied and discussed which indicates strongly and clearly that application of leadership and governance are an imperative, urgent and vital requirement for upgrading the performance of the healthcare systems and different institutions.

The mechanism for implementing this new brand depends mainly on:

- The transfer of powers from the main centers to the sub-districts and localities
- Constant and vigorous monitoring of results (output)
- More focus on improving performance efficiency in health institution
- Granting more incentives and rewards to the distinguished and talented in all health sectors.

Only the implementation of leadership and governance methods is capable of raising the level of technical and service performance and achieves our dreams in the health sector. (3)(5)

### **Recommendations:**

The collected data must be analyzed through frequencies and percentages to enable the researches come up with conclusions and suggestions for the study.

- Recommend to see patients' needs and categorize them to attain the most goal of health sector.
- Recommend to determine the effect of developed governance on the performance of the health sector.
- Recommend to determine developed policy and regulatory frameworks in health sector.
- Recommend to determine descriptive survey research design.
- Recommend to represent the collected data within the style of graphs , tables and charts.
- Recommend for the health sector players to boost in financing of critical health investment areas.
- Recommend to pay more attention for quality development and improvement in health sector.
- Recommend to pay more attention to grasp of medical risks ,threats and mistakes and to forestall it.
- Recommend to organize and enhance the use of technological methods (especially the digital one) which improve the health care.
- leaders and chiefs of health care altogether settings a clear vision for sustainable development and continuous learning in health sector.(3)(6)(7)

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