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Factors Affecting Public Health Performance Evaluation of Sub-district Health Promoting Hospital Directors

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Abstract

The aim of this research is to study individual attributes and administrative factors that influencing on the Public Health Performance Evaluation of sub-district health promoting hospital directors in Nakhon Ratchasima province, Thailand. This research is imperative to study due to all sub-district health promoting hospital directors in this province are required to lead their public health services towards the Sub-district Health Promoting Hospital Development Plan Project. This cross sectional descriptive design was employed and conducted for duration of time from year 2011 to 2012. A total of 220 samples drawn from a population of 350 sub-district health promoting hospital directors by using systematic sampling technique. Research instrument is a self-administered questionnaire which developed by researchers. The questionnaire contained of four session including seven items on general information, 36 items and 30 items five-rating Likert scale on administrative resources and public health performance evaluation respectively. In addition, respondents are required to give problems and suggestions at the last session of the instrument as three open ended questions. Findings revealed that the level of administrative resources was high (mean value = 3.86 ± 0.61). When looking at each resource, it was found that method possessed the highest mean score (4.05 ± 0.61) while money was at the lowest mean score (3.73 ± 0.79). The level of public health performance evaluation as a whole was high (mean value = 3.91 ± 0.61). The highest mean score was data defining (4.00 ± 0.59) whereas the lowest mean score was interpreting and reporting (3.79 ± 0.72). Specifically man, money, materials and method had moderate and positive relationship with the performance evaluation with r value ranged from 0.493 to 0.672 at the significant level as 0.001. Finally, findings showed that there are three significant predictors which contributed 60.90 percent of the total variance of the Public Health Performance Evaluation. The three significant predictors are method, materials, and man.

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1. Introduction

In 2008, the Thai government launched a public health policy to improve the quality and effectiveness of the national healthcare system. The government set out plans to invest in the health care system at all levels. Healthcare facilities in public sector were promoted and referral networks were improved to enhance connections between facilities in the public and private sectors. The policy aimed to strengthen the Universal Coverage Scheme by improving both service quality and accessibility (Bureau of Health Administration, 2007). A Sub-district Health Promoting Hospital Development Plan (2009-2012) was introduced by the Ministry of Public Health in 2009 as one of the vital policy initiatives. The core of this plan was to transform all health centers into sub-district health promoting hospitals within three years; the health centers had been the smallest healthcare facilities in Thailand and functioned as Primary Care Units (PCUs) (Suphawong et al., 2009).

As a result, sub-district health promoting hospitals have emerged as a new version of frontline healthcare facilities. Their primary roles were to provide proactive health services, continuous care, networking and participation (Suphawong et al., 2009). Sub-district health promoting hospitals, which are located in every sub-district, are engaged in fulfilling the pledge to enhance accessibility and equity in primary health care facilities for Thai people. With their new brand of outlook and roles, sub-district health promoting hospitals are required to engage in multifaceted activities, such as those involved in the Thai Khem Kaeng (Strong Thailand) projects and the 3S Hospital Project. However, to achieve the expected outcomes, an effective administration is considered to be an essential key factor.

Sub-district health promoting hospital directors are expected to lead their organizations efficiently. As leaders, hospital directors need to know both the strengths and weaknesses of their hospitals, and hospital performance therefore needs to be thoroughly evaluated. Weiss (1972) defined evaluation as the systematic assessment of performance in any activity in order to improve the whole process, both in the current situation and in the future. Nowadays, it is perceived as a straight forward way for development rather than something to be proved. It is a truly important tool for leaders as it guarantees the supply of information essential for decision making. Evaluation is therefore a key factor for the success of a leader at any level in an organization.

The process of performance evaluation in public health services encompasses six stages. These are the stating of objectives, data definition, establishing the method of collecting data, data collection, data analysis, and the interpretation and reporting of results (Bouphan, 2007). Sub-district health promoting hospital directors need to possess the relevant knowledge and skills to perform effectively. Schermerhorn, Hunt and Osborn (2003) suggested that effective performance is influenced by certain factors such as individual attributes. However, Dechthai (2002) suggested that administrative resources which include man or manpower, number of appropriately qualified employees in the sub-district health promoting hospital, money or funding, financial resources available to the director of the sub-district health promoting hospital, materials or equipment, physical facilities in the sub-district health promoting hospital, and method, organizational systems/procedures used in the sub-district health promoting hospital are factors that affecting public health performance evaluation.

2. Problem statement

In 2011, the fiscal policies emphasizing the main projects of Ministry of Public Health, which applied to the responsibilities of the Nakhon Ratchasima Public Health Office, were the Sub-district Health Promoting Hospital Development Plan Project, the Thai Khem Kaeng Project and the 3S Hospital Project (Nakhon Ratchasima Public Health Office, 2011). All sub-district health promoting hospital directors in the province were required to lead their facilities towards achieving the goals of these projects. Consequently, performance evaluation has become a virtual obligation.

This research, therefore, aimed to study how individual attributes and administrative resources related to the evaluation of public health performance by sub-district health promoting hospital directors in Nakhon Ratchasima province, Thailand. A previous study conducted by Meeprom (2008) indicated that certain personal attributes affected the administration of a good governance scheme by the chiefs of primary care units in Sakon Nakhon province.

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