Competencies of Healthcare Managers in Public Hospitals

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Extensive Summary

The competencies of managers should also be included in the evaluation process in order to realize the performance expectations of the organizations (Shirazi and Mortazavi, 2009). Cockerill and Hunt and Schroder (1995) state that the status, experience, and competencies of managers are effective in achieving the performance that organizations are aiming for. Managers’ performance (output), their job-related knowledge and experience (input competencies), and their personality traits and talents (process competencies) are identified as determinants of managerial performance. Competence for managers, can be expressed as the sum of knowledge, skills and social roles of managers (Zaccaro and Banks, 2004). Competencies are managers’ micro-skills and they are a part of the values that the organizations have.

Due to the competitive nature of healthcare enterprises the need for highly motivated managers has a significant impact on the success of the organization (Broscio and Scherer, 2003; Rollins, 2003; Finley, Ivanitskaya and Kennedy, 2007; Kubica, 2008). The roles and competencies of the healthcare manager influence the success of the hospital administrator. In the field of health, changes in the patient perception level, patient satisfaction, and quality service expectations are directly related to the competence of managers in health care institutions.

The aim of this study is to determine the managerial competencies of healthcare managers. In this study, a questionire prepared by using Healthcare Executives Competencies Assessment Tool which was translated to Turkish by Erigüç, Kurul ve Tekin Numanoğlu 2014). ACHE for the purpose of using self-assessment tool for healthcare managers. The questionnaire have been applied a total of 400 healthcare managers in public hospitals.

In the competence scoring assessed by the health care managers, 1 indicates the lowest competence level and 5 indicates the highest competence level. There are 65 expressions in five areas of competence: leadership (11), professionalism (12), communication and interpersonal relationship management (13), management
knowledge and skill level (16), health sector knowledge level (13). The Competencies Assessment Tool was prepared a likert-type scale including five competences. The data that is obtain from the questionnaires is analyzed by the SPSS and AMOS package program. The Competencies Assessment Tool accounts for %50.22 of the total variance. KMO was 0.79 and Bartlett's test of Sphericity was 0:00 and these values showed that data was suitable for the factor analysis. Cronbach's alpha value of the scale used to measure the competency was found as 0.80 which verified its reliability.

From the competencies of the healthcare managers, who participated in the research, competency level of leadership is determined as the highest area of competency while level of knowledge in healthcare sector is the lowest area of competency. Knowledge level of the healthcare managers having different job roles in healthcare sector is the lowest area of competency because 82% of the healthcare managers did not receive the training on healthcare management.

It was determined that there was statistically no significant relationship between demographic features, titles, gender, age, work experience, and competence of health care managers. On the other hand, a statistically significant and weak correlation was determined between the training and competence of the health care managers. Previous studies show that there are improvements in managerial areas with manager education. When the work experiences of health managers are evaluated, it is determined that they are usually between 6-10 years. While professional experience is an important criterion for management, in the process of adapting to the rapid changes in the health sector, it is necessary to reflect the experiences of health care managers in the professional development process.

Health managers with leadership competence play a leading role for the health workers to reach the output of qualified health services. In terms of leadership competence level of the health managers, who are 31-40 years of age, and have 6-10 years of work experience and post-graduate education, the average score of leadership competence is determined as high. According to a study, a relationship was determined between the leadership development of the health care managers and the results of the health service delivery. The training program in the study content affected the health care delivery results positively (Oliver and Carnall, 2011). Although the health managers bear features such as competence level, professional judgement and skills, the leadership skills become different in terms of individual, team, and health institution. Many countries are implementing formal leadership programs for a success plan in the health care. These programs provide opportunities for health care managers to assess their specific skill needs individually (Salome et al., 2011).

The jobs of the managers, who perform administrative functions in health institutions, are not the same. The hierarchical positions of the managers and the tasks they undertake vary. In this context, there was no statistical significance between the competency levels and the managerial status of the health managers included in the study.

According to the results of the research, the suggestions are as follows:

- Employment policies should be developed in the health sector for those, who are trained in health management.
• In the selection of the administrators for the health manager status, the recruitment processes applied in the private hospitals, such as work experience, skill, personal characteristics, should be applied in the public sector, as well.

• Concerning the social state perception, conclusion-oriented models should be developed in the management of the health services offered mainly by the public sector.

• New business models should be produced that will gauge the effect of competencies gained through health management education on the employment and output of those, who receive training in this field.

• In-service training programs should be implemented, in which healthcare managers develop their competencies.

• The effectiveness of training programs, which will provide competence for the healthcare managers, should be assessed in terms of managerial success.