

PH052430: MAJOR HEALTH SYSTEMS DEVELOPMENT

KEY WORDS: MANAGEMENT PERFORMANCE, CONTRACTING UNITS,  
PRIMARY CARE, DISTRICT HEALTH SYSTEMS

JUDY MWAURA: MANAGEMENT PERFORMANCE OF CONTRACTING UNITS  
FOR PRIMARY CARE IN AYUTTHAYA PROVINCE, THAILAND

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In 2002, Thailand has introduced “universal coverage with health care” on the basis of tax-based financing of health care for 74% of its population. Primary care is purchased from “Contracting Units for Primary Care” (CUP), which generally comprise a hospital and a network of primary care units (PCU) in a district. Management of a CUP is not expected to be as efficient as desirable. It was introduced rapidly and some administrative regulations at district level are not supportive.

This study investigates CUP management performance in order to identify strengths and weaknesses for future planning. Its design is cross-sectional with correlation of some of the findings to detect factors determining performance. The CUP-management teams of all 16 districts in Ayutthaya Province were surveyed. On average 5 members of each CUP answered self-administered questions on CUP management structure and functions. In addition, the director of the CUP management was interviewed in-depth. Findings are presented as scores calculated as percentage of points achieved from possible points for the fulfillment of criteria related to the different management aspects.

According to the findings, the respondents’ overall mean score for management performance was 66%. A score of  $\geq 70\%$ , which was seen as “satisfying management performance” was reached by 5 of 16 CUPs (31%). Scores for functions ranged from highest 79% for human resource management to lowest 45% for financial management. Degree of autonomy in decision-making, support by key actors and availability of a management guide were positively correlated with CUP management performance with p-values  $< 0.001$ ,  $0.001$  and  $0.048$  respectively after controlling for age and gender. Age and gender were confounding factors for previous management-related work experience  $p=0.072$ .

The finding that 69% of districts do not seem to perform satisfactorily suggests that changes are required. Official regulations should assure that the districts health sector operates under one common leadership even before political changes are introduced. A “Guide” for CUP-management should be written, which allows sufficient adaptation to local conditions. The functions of district health director, district public health director, district hospital director, and director of the hospital-PCU should be executed by four different professionals rather than one or two in the current setting. Training and guidance should focus on planning, financial management, and stronger involvement of local authorities and communities. Training should be tailored to local needs and target the whole team.

**Field of study:** Health Systems Development

**Student’s signature:** .....

**Academic Year:** 2005 .....

**Advisor’s signature:** .....