PERFORMANCE MANAGEMENT AND ACCOUNTABILITY PROJECT DECK

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STRATEGIC ANALYSIS, RESEARCH & TRAINING CENTER

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Agenda

Executive Summary

Situation & objective

- ☐ The Foundation believes better performance management in primary health care systems can improve health outputs and outcomes
- ☐ However, there is limited literature and knowledge around the effect of management on integrated health service delivery
- ☐ START team was engaged to conduct literature review to deepen understanding of performance management relative to delivery

Key insights

- ☐ The literature provides evidence that performance management can improve operational efficiencies, health outputs, and outcomes
  - ☐ Management and leadership are critical components of high-performing health care systems
  - ☐ Managers' individual characteristics and background influence staff engagement and organizational performance
  - ☐ Clinical staff engagement in management is critical to improving performance
  - ☐ Management as well as leadership practices can be taught, developed, and improved
  - ☐ Management orientation impacts organizational culture and clinical outputs

Gaps and next steps

- ☐ Gaps in evidence collected are primarily related to:
  - ☐ Low/middle-income country settings
  - ☐ Sustainability & institutionalization
  - ☐ Skills
- ☐ Potential next steps include investing in evidence, exploring partnership opportunities, and developing new standards

START team used word cloud technology to develop standardized search terms
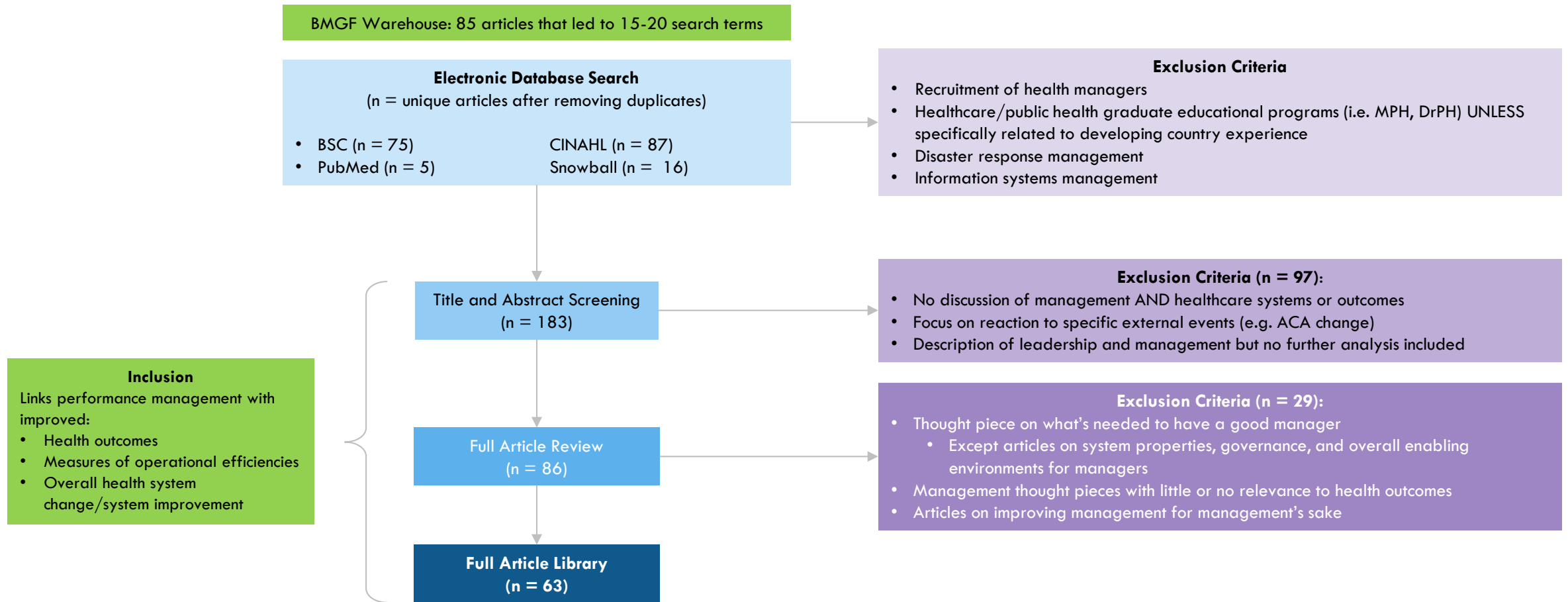
| **Original Article Warehouse** | **Word Cloud** | **Database Terminology** |

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Methodology: validating comprehension through saturation

BMGF Warehouse: 85 articles that led to 15-20 search terms

Electronic Database Search
(n = unique articles after removing duplicates)

- BSC (n = 75)   CINAHL (n = 87)
- PubMed (n = 5)   Snowball (n = 16)

Exclusion Criteria
- Recruitment of health managers
- Healthcare/public health graduate educational programs (i.e. MPH, DrPH) UNLESS specifically related to developing country experience
- Disaster response management
- Information systems management

Title and Abstract Screening
(n = 183)

Exclusion Criteria (n = 97):
- No discussion of management AND healthcare systems or outcomes
- Focus on reaction to specific external events (e.g. ACA change)
- Description of leadership and management but no further analysis included

Inclusion
Links performance management with improved:
- Health outcomes
- Measures of operational efficiencies
- Overall health system change/system improvement

Full Article Review
(n = 86)

Exclusion Criteria (n = 29):
- Thought piece on what's needed to have a good manager
  - Except articles on system properties, governance, and overall enabling environments for managers
- Management thought pieces with little or no relevance to health outcomes
- Articles on improving management for management's sake

Full Article Library
(n = 63)

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START Team leveraged existing resources to develop framework for analysis

Systematic Review by Lega, et al. (2013)

PHCPI Conceptual Framework

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Uncovering the role of the performance management in service delivery

System Properties
Governance, Policy, Infrastructure, Community, Political Economy

System Inputs
- Funding
- Workforce
- Supplies
- Facilities

SERVICE DELIVERY

PERF. MGMT. FRAMEWORK

Actors
Components

Management Practices
Manager Characteristics
Engagement in Management
Organizational Culture

Perf. Mgmt. Outcomes
- **People:** commitment, engagement, incentives, etc.
- **Operations:** patient flow, logistics, data monitoring, etc.

Health Outputs
- Utilization
- Coverage

Health Outcomes
- Improved health status

Greatest leverage point to improve performance is investing in middle managers
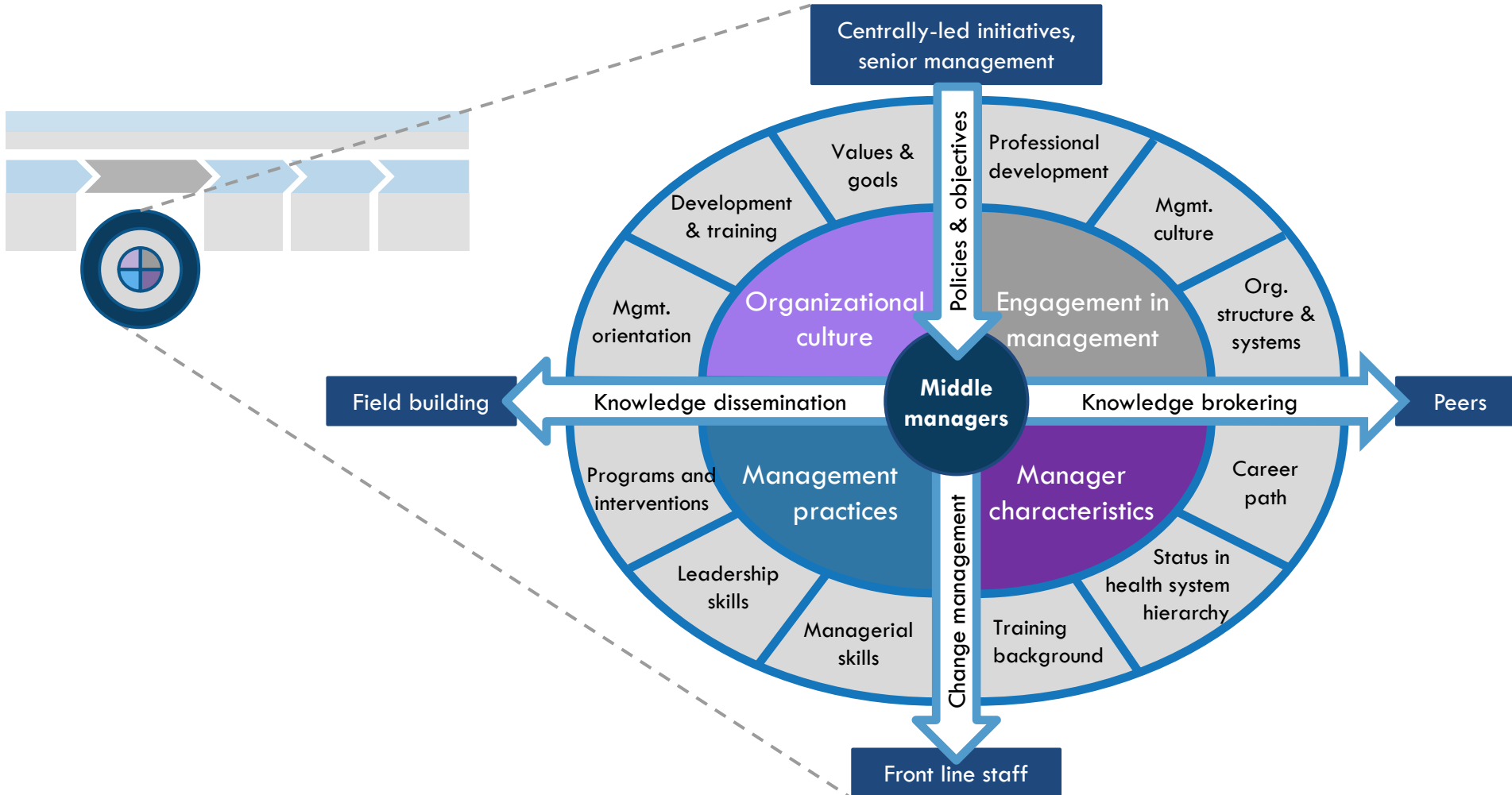
Organizational culture enables managers to empower teams and improve performance
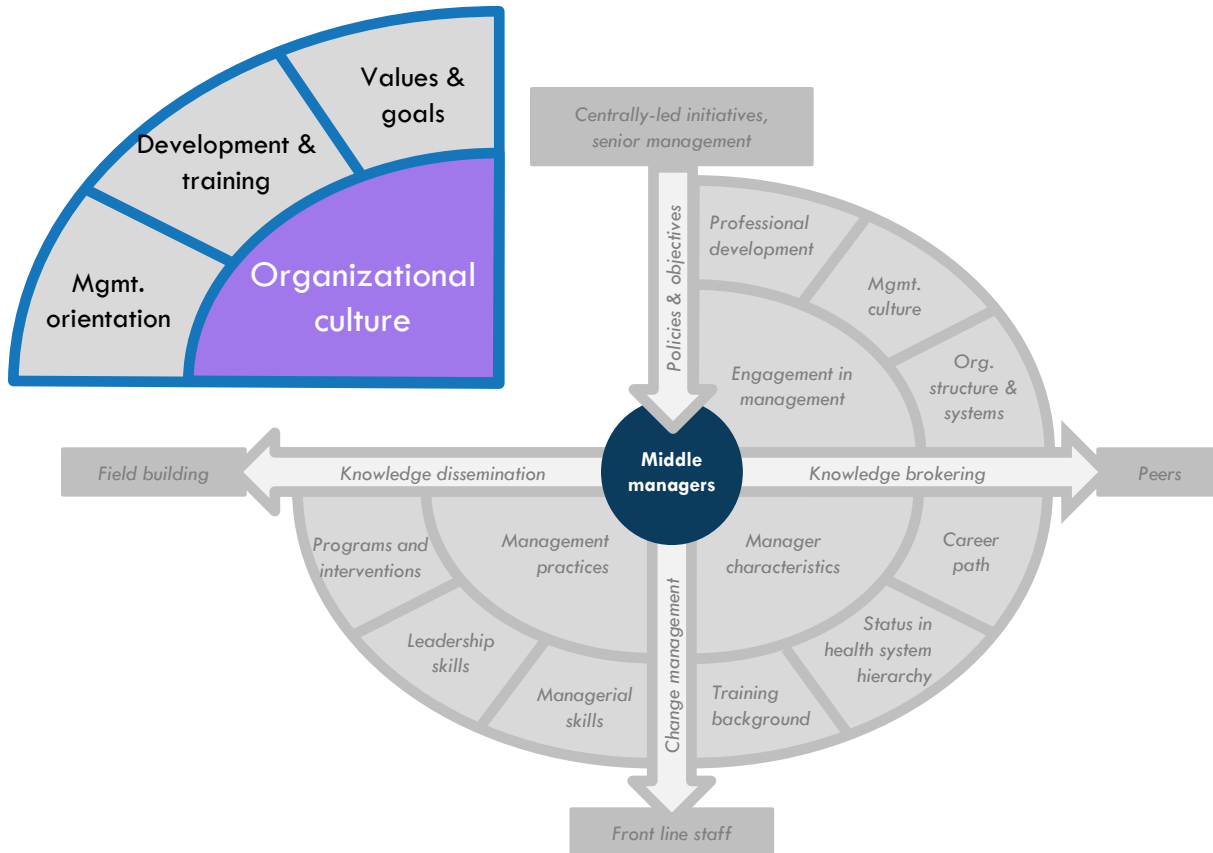
Component Description	Corresponding Hypotheses
Management orientation refers to goals and managerial processes and tools such as strategic planning, budgeting, and business planning are associated with high performers	• Management matters • Middle managers are important change agents
Development and training coupled with management practices can enhance organizational commitment and clinician engagement	• Management skills are developed and reinforced • Clinical leaders are necessary • Short / long term views
Values and goals enable broad staff involvement and communication among groups, promoting problem solving and diverse protocols	• Problem solving and data monitoring

Clinical engagement in management is a means to achieving organizational performance
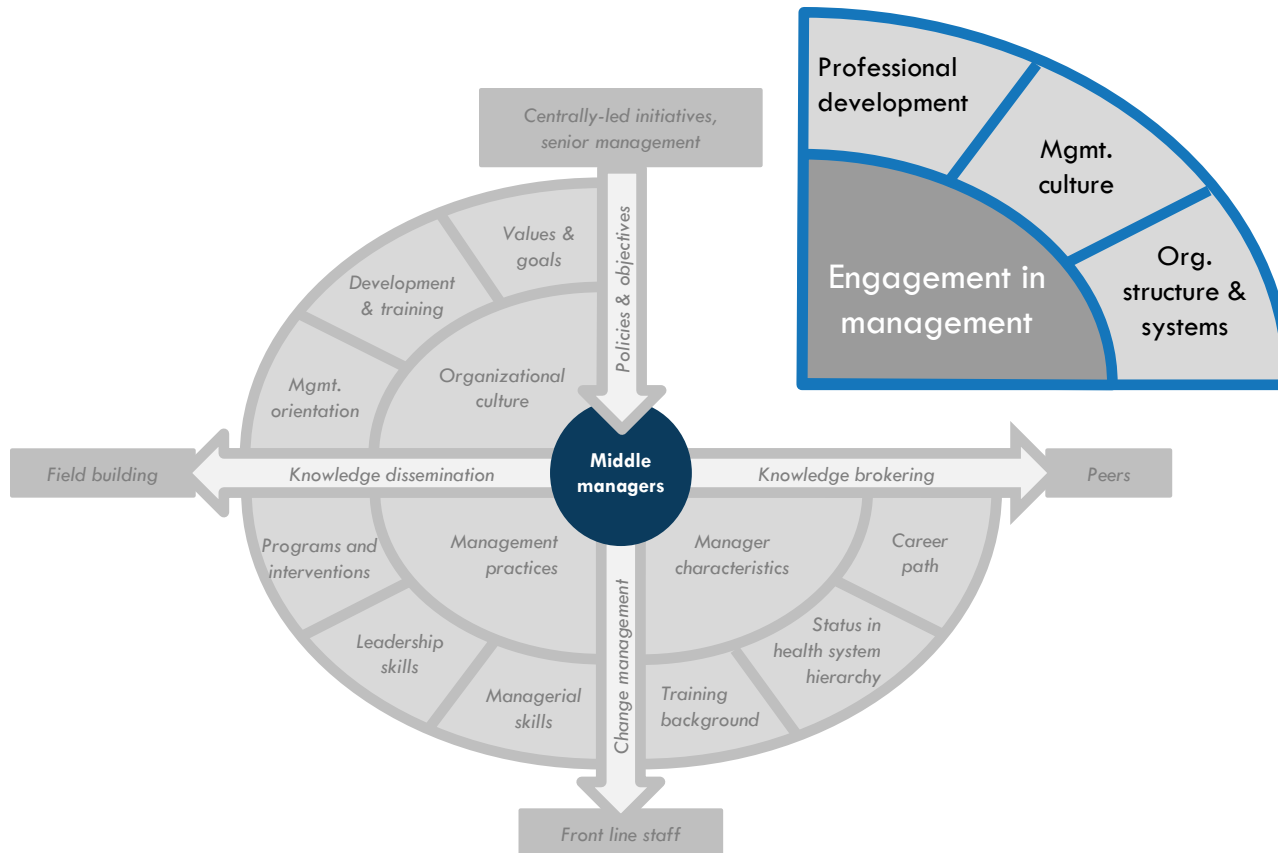
Component Description	Corresponding Hypotheses
Professional development refers to effective training and development plans for staff involved in taking on new managerial and resource management responsibilities	• Management skills are developed and reinforced
Management and culture must be one of trust and respect with a common focus on shared values, goals, and organizational objectives	• Leadership skills are complementary to management
Organizational structures and systems must aim to build effective linkages and flows between management and staff	• Management Matters • Middle managers are important change agents

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12/9/15 | 10

Manager characteristics influence management practices and organizational performance
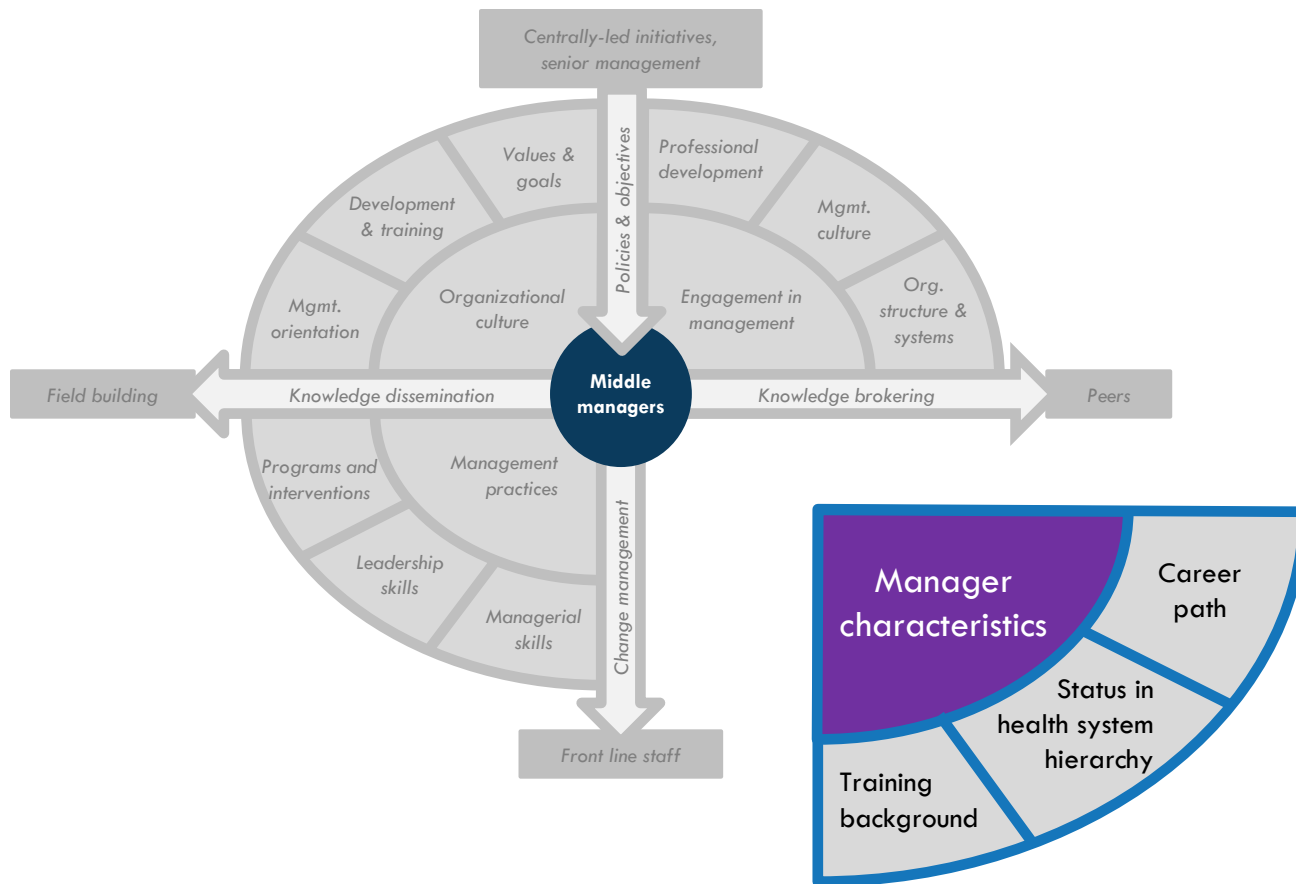
Component Description	Corresponding Hypotheses
Career paths that provide varied experiences and exposure to different health care structures can influence a manager's performance level	• Management matters • Clinical leaders are necessary
Status in health system hierarchy influences middle managers' ability to broker knowledge upward and downward within an organization	• Management matters • Middle managers are important change agents
Training background, either clinical or professional, is associated with better management practices	• Clinical leaders are necessary

Management and leadership skills can be taught, developed, and improved

Component Description	Corresponding Hypotheses
Managerial skills form the basis of middle managers' capabilities in execution and sharing of knowledge	• Problem solving and data monitoring
Leadership skills enable managers to more effectively implement performance management initiatives and build goodwill among staff	• Leadership skills are complementary to management
Programs and interventions that use tested and proven models to improve management practices should be replicated and scaled to accelerate impact	• Management matters • Management skills are developed and reinforced

All hypotheses validated*, but evidence strength and applicability are variable

Hypothesis description**	Origin	LMIC[†] Evidence?	PHC[†] Evidence?	Strength of Evidence[‡]
Management matters for better PHC delivery		✓	✓	Strong
Data is available for **problem-solving; data monitoring** must link to goals and operations		✓	✓	Strong
Short and long term views on the work are necessary; success requires short-term champions and long-term institutionalization	BMGF	✓	✗	Moderate
Adult learning frameworks are essential and should **develop/systematically reinforce management skills**; managers need priorities, skills, motivation, autonomy, and data		✓	✓	Moderate
Citizens have a stake in health system performance and improvement; managers must be **responsive to citizens, especially the poor** through customer feedback and accountability mechanisms within service delivery		✗	✗	Weak
Leadership skills are complementary to management and support PHC strengthening		✓	✓	Strong
Clinical leaders are better able to influence their colleagues than are nonmedical managers	START	✗	✗	Strong
Middle managers play an important role as change intermediaries because they interface between an organization's senior managers and the front line employees		✓	✓	Moderate

* Hypothesis validation was based on (1) qualitative assessment of whether an article supported the hypothesis and (2) the number of articles supporting that hypothesis
** Other BMGF hypotheses were deemed out of scope for this project
† Checkmark indicates the presence of at least one article from LMIC and/or PHC settings that related to that hypothesis; x-mark indicates articles found that support that hypothesis were either from high income country and/or tertiary care settings
‡ Strength of evidence rating was based on absolute composite score of evidence type (scoring: study with quantitative measures = 3 points, purely qualitative study = 2 points, thought piece = 1 point)

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Hypothesis exclusion was based on scope and literature evidence-base

Hypothesis description	Out of Scope	Lack of Evidence*
Particular systems properties are required to sustain change	✓	
Effective governance is needed to drive system change	✓	
Sufficient financing resources must exist in the system to drive and sustain change		✓
Better management is especially beneficial in low-resource settings		✓
Changes must be at the country and the sub-national level to generate change	✓	
Financial and non-financial incentives must align to drive performance and system change		✓
Build the Field	✓	

* Evidence may exist in more targeted search criteria and may be proven or disproven with further evaluation

Success factors for select management and leadership training models in LMICs

Program name	Geography	Intervention Model	Evidence Type	Improved Outcomes	Key Success Factors
CDC Sustainable Management Development Program (SMDP)	Vietnam: Nat'l TB Program	Train-the-trainer model, reinforced with visits from CDC staff	Impact evaluation	• Case detection rate • Sputum sample quality • TB follow-up rates	**Applied** nature of training, **team** model, **accountability**, & trainee status as a leader.
	Nicaragua MoH		Case study (no control)	• Pap smear test quality	Focus on creating **in-country expertise**, training capacity.
MSH Leadership Development Program (LDP)	Egypt MoH	Team-based, workshop series, empowerment model	Case study (no control)	• Maternal mortality rate	Focus on **collaborative**, not individual problem-solving.
	Tanzania MoHSW			• New family planning clients/site/month	Promoting **analytical thinking** (Challenge Model, root-cause).
Centre for Rural Health	South Africa	Action learning groups	Qualitative study	• Enhanced teamwork & collaboration • Problem-solving	Learning by sharing real problems helps managers resolve problems in their institutions and develop team work skills.
Ethiopia Millennium Rural Initiative (EMRI)		Overall health systems strengthening, focus on human resources	Mixed methods, ex-post	• Antenatal care utilization rates • Skilled birth attendance rates • HIV testing rates in antenatal care	**Managerial problem solving capacity** was linked to the greatest improvement in primary healthcare unit performance after EMRI intervention
Ethiopian Hospital Management Initiative (EHMI)		(1) Intro. of management standards (2) Hospital CEOs (3) Enrollment in 2-year MHA program	Impact evaluation	• Adherence to established set of management standards rose from 27% to 51% over 12-month period	Embedding a new facility-level management role and academic degree program is a **systems-based approach** likely to be sustained. **Implementation guides** accompanied with **training** in the new standards is a best practice.

Opportunities exist for future investigation to inform performance management

Evidence Gaps	Questions	Potential next steps
Low/Middle-Income Countries	☐ Do middle managers in LMICs require a unique skillset? ☐ In LMICs, what is a greater predictor of better PHC performance; management skills or leadership skills?	☐ Invest in studies and evaluations that build evidence around the role and required skill set of middle managers in PHC delivery in LMICs.
Sustainability & institutional-ization	☐ Can management interventions be institutionalized and affect outcomes that are sustained over the long-term? ☐ What kind of models support institutionalization and sustainability of management practices? ☐ How do we ensure continued investment in PHC performance management in the face of a changing funding landscape?	☐ Explore opportunities to support partnerships between US academic institutions and Universities in LMICs that train new leaders in PHC management based on evidence-based learning frameworks.
Skills	☐ What clinician manager characteristics determine their better performance compared to managers with other backgrounds? ☐ Are the management skills identified accurate measures? Do they result in better health outcomes?	☐ Support the development of a common set of standardized management and leadership skills and practices for middle managers in LMICs.

Appendix

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1/28/2016 | 17