

Strengthening Health Governance Structures in the Free State Province

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Date: 27 September 2007



Background cont.

- Part of the work of the South African Equity Gauge
- HST commissioned to provide training to health governance structures in the Free State Province.
- Envisaged as a 3 phase project
- Phase 1: Formative research to understand the general and specific contextual factors impacting upon the effective functioning of various governance structures.



Objectives

- To get input on successes and challenges of governance structures
- Empower governance structures
- Ensure that health systems are strengthened



Methodology

- Focus group discussions
- Key informant interviews
- Four FS districts
 - District Health Management teams
 - District Health Councils
 - Hospital Boards
 - Clinic Committees
- Two days were allocated for discussions
- Discussions divided into two
 - Session1: Presentation outlining the FS/HST governance structure strengthening plan
 - Session 2: Health management and health governance structure's input
- Discussion tool guide explored:
 - Nomination procedures
 - Internal functioning systems
 - Operational issues
 - Relationships between committees
 - Training needs of committees



Findings

- **Processes of nomination and appointment**
 - “I was nominated and appointed by the local chief at community meeting that he had called”
 - “The hospital CEO would look at people who are likely to remain on the hospital board and ask them for their CVs”
- **Roles and Responsibilities**
 - “Our roles are not very clear to us because when we do our job we are told we are interfering with management’s role”
- **Communication channels and relationships**
 - “There is a bad relationship between the committee and the managers of the clinics because the managers think that the committee are depriving them of some their powers
 - “...the CEO said that the hospital was going to be closed because the HB were being difficult and did not want to listen to management”



Findings cont.

- **Term of office**
 - “I have been in the clinic committee for 7 years”
- **Finance and funding**
 - “We get R180 and other HB get R400”
- **Administrative and operational issues**
 - “The problem is that the minutes are taken by one of the management’s administrator and this sometimes makes it difficult to access the minutes”
 - “We do not get agendas”
 - “Some[times] we want to meet alone as the HB and we cannot as management is always there.”



Identified Needs

Training needs have been identified as follows:

- Roles and functions
 - Nomination and appointment processes onto governance structures
 - Different functions and responsibilities of management and governance structures
 - Governance structures accountability
- Management of committees
 - Conducting meetings
 - Taking minutes and adopting minutes
 - Effective communication
 - Administration and maintenance
- Identifying and understanding community needs
 - Understanding and defining communities
 - Conducting community meetings
 - partnerships between communities and health facilities
 - Advocacy and lobbying
 - Understanding health and development



Influencing Factors

- Support of the FS provincial government
- Lack of clear legislation



Future Plans

Phase two

- Developing training manuals
- Pilot training

Phase three

- Training roll-out to all FS districts
- Local community liaison officers to take over the training: train - the - trainer
- Extending training to other provinces



Acknowledgements

- FS Health Provincial Government
- FS Health District Managers
- District - Community Development Liaison Officers
- All health governance structure participants
- Support from HST's colleagues

