

Addressing healthcare-management capacity building: The story of the African Institute for Healthcare Management

S M Sammut, MA, MBA, DBA candidate

Health Care Management Department, Wharton School, University of Pennsylvania, USA; and Institute of Healthcare Management, Strathmore University, Nairobi, Kenya

Corresponding author: S M Sammut (smsammut@wharton.upenn.edu)

The focus historically on human-resource needs in healthcare has been on the development and training of physicians, nurses and allied health professionals. While there is still a gap that remains in these necessary roles, another acute gap has emerged, that of a scarcity of professionally trained managers for health systems, health facilities and the other organisations that comprise the healthcare system. Arguably, many of the issues in health equity, such as the migration of physicians and nurses across borders, the operational inefficiencies of facilities and dysfunctional supply chains derive from sub-optimal management. Throughout the emerging markets, particularly in Africa, there have been some attempts to address the management gap, but there have been few, if any, degree programmes established for healthcare management. A full-scale healthcare-management MBA programme has been established at Strathmore University in Nairobi, Kenya. While the creation and development of the programme proceeded effectively and on schedule, the principals discovered that filling the ranks of qualified and experienced faculty in healthcare management was challenging. The faculty roster relied heavily on the recruitment of professors from healthcare-management departments in the USA and the UK. The attempts to design courses with locally relevant materials also revealed a serious lack of solid research and teaching materials. This article describes an approach to addressing the scarcity of Africa-oriented healthcare-management faculty, as well as the need for managerial teaching and learning materials focused on the African health context.

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As the United Nations' Millennium Development Goals aspired towards, and the Sustainability Development Goals reinforce, healthcare is a human right, but it has been in scarce supply in many regions of the world, particularly in Africa. While it is the case that there is a pressing need for the human-resource development of physicians, nurses and other healthcare professionals on the continent, it is also true that the development of a professional class of healthcare managers is just as urgently needed at every level of the healthcare value chain, whether they be health-unit managers, chief executives of large hospitals, or civic leaders of health ministries.

While healthcare facilities are often managed by healthcare practitioners, the full range of necessary skill sets is neither taught as part of medical or nursing education, nor acquired through experience. By way of example, healthcare professionals who wish to transition into management, and undertake a Master's programme, often find that the content misses key elements that support managerial practice and decision-making. The disciplines of economics and finance, human-resource management, operations research and supply-chain management, marketing management, relevant law, public-policy development, leadership

and change management, and other skill sets are badly needed in healthcare settings, especially in societies with a history of scarce resources. Indeed, Management Sciences for Health (MSH)^[1] points out, competent leadership and effective management systems are critical components of any organisation facing complex challenges and pressure to produce sustainable results. Leadership and management are especially important to health-service organisations and their managers in this era of rapid change, health-sector reform, the HIV and AIDS epidemic, and the crisis in human resources for health.

The aim of any degree programme, whether offered by a business school, school of public health, school of public policy or other institution, must be to provide students with the requisite knowledge and skills to improve population and community health through the application of sound healthcare management principles.

Formation of the African Institute for Healthcare Management (AIHM)

One of the greatest obstacles to creating and offering full-scale curricula in healthcare management at institutions of higher learning in Africa is the relative lack of experienced specialty

faculty to teach the wide range of subjects (arguably more than 30 disciplines) that encompass healthcare management. In order to promote the development of faculty for this purpose, representatives of three institutions – each acting of their own accord – Strathmore Business School (SBS) at Strathmore University in Nairobi, Kenya, the University of Cape Town (UCT) Business School in South Africa (SA) and the School of Public Health of the University of the Witwatersrand (Wits) in Johannesburg, SA, together with a representative from the SA Ministry of Health, have formed the African Institute for Healthcare Management (the Institute, or AIHM) to serve as a consortium of academic institutions and individuals focused on building a pool of world-class faculty, trainers and researchers that can be shared among programmes in healthcare management throughout Africa, whether Master of Business Administration (MBA), Master of Health Administration, Master of Public Administration, executive or other programmes.

The central premise of the Institute is that in the immediate future, African universities will accelerate the offering of advanced degrees and executive programmes in healthcare management, through schools of business, public health, public policy, or other academic structures. Most universities will have the resources to hire a small number of faculty to address some of the topics relevant to healthcare management, but it is unlikely that any one institution will have the resources to identify, hire and retain the full range of faculty needed to address the dozens of different specialised topics that such degrees or training programmes require, especially if the preference is to engage faculty on a full-time basis and encourage top-tier research.

Participation in AIHM

The Institute is open to multiple institutions in different parts of Africa. At the time of its formation in 2013, the board concluded that the Institute must develop evidence that it could be effective before seeking financial support and recruiting a wide range of members. The board's attention, therefore, focused on the new healthcare-management MBA programme at the SBS at Strathmore University, a private institution in Nairobi, Kenya. Strathmore admitted its first two cohorts in 2013 (19 students) and 2014 (34 students), both graduating in June of 2016. Three additional cohorts, with nearly 100 students, are currently in the programme. The students are from throughout the counties (i.e. provinces or states) of Kenya, which are now transitioning to a devolved health system. For the first time, the fifth cohort includes two students from outside Kenya.

AIHM is raising donor and grant funds for the purposes of recruiting, hiring and managing a group of faculty – 'Institute Fellows' – who can be shared and exchanged among participating institutions. The vision is to form a cadre of 20 or more Fellows over a period of 3 - 5 years. Fellows will be a mix of people at different points in their careers, and selected to assure the greatest possible range of expertise in the disciplines of healthcare management. While Fellows will typically be drawn from the academic world, experienced healthcare managers seeking to move their careers into teaching and research will also be eligible. For the younger Fellows, and those transitioning into academia, the Institute will provide postdoctoral fellowships at major affiliated institutions in

the USA, the UK and other countries, in order for them to hone their teaching and research skills. The Institute will allow participating institutions to draw from its pool of fellows – on a rotational basis – to teach courses in their respective curricula.

The Institute will not offer courses directly to university students or executives – that is the province of the participating institutions. The mission of the Institute is to promote the development and availability of experienced faculty for use by the participating institutions, as well as to foster research in healthcare management and economics, and develop teaching and learning materials.

The Institute does not require that participating institutions follow a specific curriculum. Rather, each participating institution develops its own degree programme(s), devises the related curriculum and applies all its own policies and procedures to the programme's administration. The design of any given degree programme is typically driven by an assessment of regional and local needs in healthcare management, epidemiological assessments and the guidance of accrediting agencies – an advisory function that the Institute will provide – but the preponderance of issues common to African countries suggests that there will be significant congruence in courses and content across the participating institutions, even in different degree programmes. The availability of a shared faculty that addresses the multitude of necessary subjects enhances the ability of any institution to provide comprehensive degree and executive-training programmes.

The Institute will maintain a library of curricula, course syllabi in use at participating institutions and teaching and learning materials as a reference resource. It will make recommendations, but it will not prescribe the use of any one programmatic approach.

The Institute is an inclusive organisation for all institutions in Africa committed to improving and expanding managerial human resources in healthcare through degree programmes, executive programmes or research. In addition, the Institute invites organisations, companies and individual scholars who share its ideals and objectives to participate as members. As such, the Institute has a variety of membership categories designed to meet the needs and organisational structures of interested institutions, non-academic organisations and individual professionals.

Leadership and governance

AIHM at the current time has a board of directors comprised of six individuals, who serve as the founders. Although each has a professional affiliation, they currently represent themselves individually on the board. They are:

Dr Shadrack Mazaza, Professor, Graduate School of Management, UCT (Chair)

Dr Debashis Basu, Professor, School of Public Health, Wits

Dr Thabo Lekalakala, head, North West Department of Health, South Africa

Dr Ben Ngoye, former Director of the Strathmore Healthcare MBA programme

Dr Felix Olale, partner, Healthcare Investments, Leapfrog Investments, and former Academic Director of the Strathmore Healthcare MBA programme

Stephen Sammut, Senior Fellow, Health Care Management



Department, Wharton School, University of Pennsylvania, and co-founder and visiting professor of the Strathmore Healthcare MBA programme.

The Institute will also have two advisory boards:

Academic Advisory Board. The board of directors shall determine the structure and composition of the Academic Advisory Board for the purpose of providing ongoing academic direction for the Institute and its Fellows in course content and research.

Industry Advisory Board. The board of directors shall determine the structure and composition of the Industry Advisory Board for the purpose of providing ongoing commercial direction for the Institute and its Fellows in course content and research.

Case study: The Healthcare-Management MBA programme at SBS

Strathmore University is a private institution in Nairobi. Among its schools is SBS, founded in 2006. The new programme in healthcare management at SBS was launched in August 2013. The curriculum provides an example of the range of courses that often comprise a programme in healthcare management and leadership. In the case of SBS, the programme is structured as an MBA, and includes the courses customary to a general MBA, but with those core courses structured around content relating the disciplines under study to healthcare. The SBS curriculum was designed around an assessment of needs ascertained from numerous healthcare leaders in Kenya, East Africa and other parts of the world. It also took into account assessments made by MSH and IntraHealth.

The Strathmore MBA in Healthcare Management parallels the MSH teaching by developing:

- the management and leadership of priority health programmes, health organisations, and multisectoral partnerships
- the management systems of health organisations in the public and private sectors
- the governance and management of health organisations and multisectoral partnerships.

In addition, the SBS programme imparts the full range of knowledge necessary to guide the ethical operation of healthcare organisations, including accounting, economics, finance, human-resource management, quality management, supply-chain management, organisational behaviour, change management and medical sociology.

For illustrative purposes, the curriculum currently in place at SBS includes the following courses:

Core and leadership course titles

- Financial and Managerial Accounting in Healthcare Organisations
- Healthcare Entrepreneurship and New Venture Management
- Healthcare Management Information Systems
- Quantitative Analysis and Statistics for Healthcare Management
- Organisational Behaviour and Change Management in Healthcare Organisations
- Strategic Management in Healthcare Organisations
- Managerial Health Economics

- Research Methods in Healthcare Management
- Marketing Management for Healthcare Enterprises
- Management Communications and Media Relations in the Healthcare Environment
- Decision Analysis for Healthcare Managers
- Healthcare Organisation Ethics and Governance.

Advanced healthcare courses

- National Public and Private Healthcare Systems
- Managing Healthcare Human Resources
- Managing for Quality Patient Care and Efficient Operations
- Financial Management of Healthcare Organisations (corporate finance applied to healthcare organisations)
- Healthcare Law and Policy
- Healthcare Financing and Health Equity (financing of a healthcare system, including insurance).

Pending electives

- Epidemiology as Applied to Management
- Medical Anthropology and Sociology in Healthcare Management
- The Pharmaceutical, Biotechnology and Medical-Device Industries
- Healthcare Delivery for Traditional Cultures.

Students are also required to complete a dissertation on an approved healthcare topic.

The curriculum is presented here by way of illustration. It is not intended to delineate a programme to be adopted by other member institutions. It is available in whole or in part for other institutions.

The need for AIHM

Using the scope of the SBS curriculum as an indicator, a typical graduate programme in healthcare management, in addition to requiring faculty qualified to teach traditional core courses built around healthcare content, would need up to 30 additional instructors to address the application of the core courses to healthcare management situations and the various topics under the headings of the course titles above. SBS is approaching this challenge with a combination of current faculty members who are committed to adding material relevant to healthcare, local guest faculty and faculty drawn from the Wharton School, Johns Hopkins University, the Harvard School of Public Health, Boston University, the University of North Carolina School of Public Health, the Anderson School of Management at the University of California, Los Angeles, and other institutions. While this approach has proven effective, and provides all the opportunities needed for learning by the students, it would be even more effective with a specialised, dedicated faculty that focuses on African healthcare issues. For this purpose, the visiting international faculty have prepared the local Strathmore faculty to assume full teaching responsibility for the majority of the courses in the curriculum.

A programme offered under the auspices of a school of public health or public policy would likely have significant congruence with the content of an MBA programme, but with obvious differences related to the core missions of those schools. For

example, a school of public health might want to emphasise more epidemiology, community-health principles, health indicators and specific health services such as maternal and child health. A public-policy school, similarly, would likely place more emphasis on the legal grounding of healthcare services, and the research and development of new policies addressing health needs. Having pointed out these differences, however, any degree programme purporting to prepare students for a career in some aspect of healthcare management would likely provide learning opportunities similar to those in the SBS curriculum. Similarly, institutions offering healthcare-management education through a business curriculum have a lot to learn from schools of public health and public policy, to say nothing of the rich contribution that can be made to curricular content by associate members and practitioner members of the Institute.

A regiment of Fellows associated with an institute can provide teaching services across most of the spectrum of topics required in any particular degree programme. As mentioned above, researchers in healthcare economics or aspects of management tend to focus

on local geographies. Developing a critical mass of faculty, i.e. a concentration beyond the means of any one institution, primarily focused on the specific needs of African countries and regions, is most likely to occur when that faculty is assembled in Africa. Establishing a consortium of Fellows is a powerful, cost-effective and sustainable strategy to meet those needs and objectives.

Conclusion and an invitation

As the Institute develops, deans and faculty of business or public-health schools throughout Africa are invited to reach out to the author or any one of the board members for further discussion. The Institute is eager to expand healthcare-management education throughout the continent, and to offer its services in curriculum design, course content and faculty development.

1. Management Sciences for Health. Leadership, Management and Governance. <http://www.msh.org/our-work/health-system/leadership-management-governance> (accessed 15 October 2011).