



Research Article

Missing of Required Skills among Health Care Providers and its Implication in Providing Quality Health Services in Tanzania: A Cross-Sectional Study

Henry A. Mollet* and Kwalya M Bilson

Department of Health Systems Management, School of Public Administration and Management, Mzumbe University, Tanzania

*Corresponding author: Henry Abraham Mollet, Professor, Department of Health Systems Management, School of Public Administration and Management, Mzumbe University, Tanzania

Citation: Mollet HA, Bilson KM (2022) Missing of required skills among health care providers and its implication in providing quality health services in Tanzania: A cross-sectional study. J Hosp Health Care Admin 6: 158. DOI: 10.29011/2688-6472.000158

Received Date: 11 March 2022; Accepted Date: 29 March 2022; Published Date: 04 April 2022

Abstract

Background: The study examined the existing Human Resource for Health skills gaps and its implications in service delivery. The study focused on skills gaps as per employees' Job descriptions and other duties assigned to them to fill the existing skills gaps by employee's satisfaction and operations efficiency and quality service delivery. **Methods:** A descriptive correlational research design that applied positivism philosophy. Data was collected from different regions. 05 regions were included in this study; 10 councils were involved. After group and individual consent was obtained participants participated in answering the questionnaires. The data collected in voice recording device and the analysis was done using content analysis. **Results:** The findings clearly indicated that missing of required skills has great impact in ensuring quality service delivery this predicts timely capacity building programs, enhance competitive advantage (High responsiveness, good empathy). **Conclusion:** This brings out the importance of hiring skilled and professional health care workers especially in peripheral areas towards improving quality health service delivery.

Background

Tanzania is faced with a chronic shortage of human resources for health (HRH) that has undermined the achievement of national strategic health goals, including HIV epidemic control. In its Human Resource for Health and Social Welfare Strategic Plan (2014-2019), the Government of Tanzania reported an average work force vacancy rate in the health sector of 56% [1]. Rural and hard-to-reach parts of the country have a vacancy rate of up to 70%. One of the strategies to address such shortage has been to enhance knowledge and skills of those available to increase their productivity while gradually filling the gap. This study evaluated capacity enhancement interventions by ascertaining the skills gaps in rural and urban localities focusing on three main areas TB, RCH, HIV and AIDS.

Methods

Study design and Setting

The study was a mixed research design conducted among employees of regional hospitals and council hospitals from whom data were collected through administered questionnaires (Focus group discussions and in-depth interviews) to establish clear missing skills in human resource for health and its implication in service delivery.

Study Population

The targeted population was the Regional Health Management Teams (RHMT), Regional Referral Health Management Teams (RRHMT), Council Health Management Teams (CHMT) and Hospital Management Teams (HMT) from 5 purposively selected

regions and 10 purposively selected councils in Tanzania.

Sampling Technique

Purposively sampling was used to select the regions and councils five regions selected; Manyara, Mara, Lindi, Dodoma and Dar es salaam. where the criteria used was prevalence of the disease (HIV/AIDS, TB & RCH): one with low and one with high prevalence council were selected, giving a total of 10 LGAs were covered [2].

Data Collection

Data were obtained from the participants using administered questionnaires with open ended questions, where by it allowed the respondents to answer questions to measure the existing skills gaps among different levels (district and regional level).

Data Management

The data was entered into reporting format(table), edited and coded. Data was analyzed using content analysis, starting with some ideas about themes that emerged and look for them in collected data.

Ethical Consideration

The research proposal was first approved by the Ministry of health community development, gender elderly and children (MoHCDGEC) and Presidents' Office Regional Administration and Local Government (PO-RALG). Furthermore, permission was obtained from Regional Administrative Secretaries in each region.

The researcher weighed the sensitivity of the matter in formulating data collection instruments, the participants were asked to give their consent prior to data collection activity. Thus, the study was guided by the principle of informed consent, The activity was total a voluntary participation [3].

Results

The study sought to determine missing of required skills among health care providers and its implication in providing quality health services in Tanzania. The vacancies (skills gap) obtained in Council and regional levels revealed in three ways: cross cutting skills, missing professional cadres/technical skills, inadequate number of staff compared to positions and the implication towards quality service delivery.

All RHMT and RRHMT reported to have requisite professional qualification and skills

Results for Cross Cutting Skills

Refers to additional skills in technical cadres should have in addition to their professional qualification and skills in order to perform their work well. This was particularly important at

the management levels (CHMT, HMT). For example, all CHMT members participate in budgeting and planning of human resources, thus they need these skills. Also, as coordinators in their respective disciplines, they need to have leadership and management skills including interpersonal skills for managing the health service delivery at that level.

“To be honest, with the exception of a Health Secretary, I am sure all of us are missing management and leadership skills. We are managing people, funds and we are involved in the planning but we are lacking these skills which is key in performing our functions (Respondent)”

Results for missing technical/professional cadres

Missing cadres have resulted from non-allocation of staff, attrition and wrong allocation of staff

Non-allocation

Many councils reported to compile their needs during the HRH planning process and their needs were communicated to higher level for action, but this indicates that the actual staff allocation depends on availability of budget.

Attrition

In some peripheral areas with limited infrastructures and conducive working environment. Thus, when staff are located in the area they don't stay.

Wrong allocation

Some of councils have reported being allocated cadres they did not ask for; thus, it affects the quality of service delivered, some councils received it with positivity while others have imposed negative view on this.

Results on Inadequate number compared to the needs

This is clearly shown in lower positions in some councils with high population density and high disease prevalence, it has also affected high cadres' staff.

This challenge is complicated as the few available staffs have to also perform other cross cutting duties, example in Njombe council one medical doctor has to undergo eight (08) surgeries per one night to save lives, but the same doctor has to fill more than six forms for each patient to document each and everything that has happened per patient [4].

Implication of Missing skills to service delivery

Unprofessionalism

Based on the results it very difficult to ensure professionalism while serving more than what you are really capable of doing.

Employees are not satisfied

Unhappy employee cannot serve a client with one heart, this is due to the fact that there's no any motivation for employees for work extra

Poor service delivery

Which may result to unnecessary complications and death.

Poor planning

No information no right to talk. Without adequate skills it is very difficult to document things professionally, thus loss of resources.

Conclusion

The study aim was to provide clear evidence based on the existing missing skills at various levels of health sectors and its implication in service delivery based on their scope of work. The identified skills gaps have implication in service delivery thus it calls for capacity building programs, where others can be filled in a mix of training programmes while others call for financial resources to recruit and retain qualified personnel.

Identified areas for learning/training

Monitoring and Evaluation

Planning and budgeting

Data use/Data management

Proposal writing

Leadership and management

Team work

Effective and supportive supervision

Effective communication

Human Resource for Health Planning

References

1. Human Resource for Health and Social Welfare Strategic Plan (2014-2019).
2. Amah OE, Oyetunde K. (2019) Determinants of high-performance organizations in Africa: A conceptual framework and research positions. *International Journal of Management, Economics and Social sciences* 8:319-333.
3. Babbie ER (2011) *Introduction to Social Research* Wadsworth Cengage Learning
4. Ntwiga PN, Muchara M, Kiriri P (2021) The Influence of Employee Empowerment on Competitive Advantage in Hospitals within Nairobi, Kenya. *East Afr Health Res J* 5: 26-35.