

Health services management education in South Australia

CHRIS SELBY SMITH

Chris Selby Smith is Professor, Department of Business Management, Faculty of Business and Economics at Monash University.

ABSTRACT

In December 1994 the Australian College of Health Service Executives (SA Branch) sought 'a needs analysis for health management training programs within South Australia'. Although the college was interested in a range of matters, the central issue was whether the current Graduate Diploma in Health Administration (or a similar course) would continue to be provided in Adelaide. The college provided background material and discussions were held with students, the health industry, relevant professional associations and the universities. This commentary sets out some of the background factors and my conclusions, which have been accepted by the South Australian authorities.

Introduction

In December 1994 the Australian College of Health Service Executives asked me to 'undertake a needs analysis for health management training programs within South Australia'. Their decision arose from a perception that the University of South Australia planned to cease its involvement in the current postgraduate programs. An industry reference group had been established, which wished some postgraduate training program to continue.

Although the college was interested in a range of matters (and these were considered in the report to them), the central issue was whether the current Graduate Diploma in Health Administration (or a similar course) would continue to be provided in Adelaide.

The college provided background material and I visited Adelaide for discussions with students; the industry, including the South Australian Health Commission, the Australian College of Health Service Executives and the Royal Australian College of Medical Administrators; and the three universities.

Background

Developments at the University of South Australia

The former South Australian Institute of Technology—now the University of South Australia—had offered a Graduate Diploma in Health Administration since 1979. It was based on an approximate balance between specific health administration subjects and more general management subjects, with limited electives. Students undertaking the course were expected to have a degree (or equivalent) and at least two years relevant work experience. In the early 1980s competition for places intensified. The Elton Mayo School of Management increased the Graduate Diploma in Health Administration quota from 7.5 equivalent full-time students in 1982 to 12 in 1985. Student numbers rose from 15 in 1982 to 22 in 1985, but applications rose much faster—from 43 to 83. The 1982 survey revealed that 21 out of 28 graduates believed they had advanced their career prospects, whereas only seven believed that participation in the course had not advanced their career prospects (South Australian Institute of Technology 1986). An important element in the graduate diploma's success was the senior academic 'champion' at the South Australian Institute of Technology.

In 1987 the South Australian Institute of Technology program's advisory panel recommended developing a masters level course in health service management. Negotiations with Flinders University began in April 1988. The joint working party involved both educational institutions and the health industry: it included representatives from the Australian College of Health Service Executives, the Royal Australian College of Medical Administrators and the Royal College of Nursing, Australia, as well as the South Australian Institute of Technology and Flinders University. In 1990 the South Australian Institute of Technology Graduate School of Management—established in December 1989—proposed a Master of Business in Health Service Management with the Elton Mayo School of Management. The Graduate School of Management was responsible for masters programs, both by course work and research. The Graduate School of Management degree would be offered cooperatively with the School of Medicine at Flinders University, which was planning a Master of Science degree in health service management (South Australian Institute of Technology 1990).

Development of the International Graduate School of Management

The Graduate School of Management became the International Graduate School of Management in 1993. The latter has tended to focus on private business rather than public sector management, on overseas students and on a full-fee approach to course provision. Perhaps inevitably this raised questions about the International Graduate School's level of continuing commitment to health service management education programs in Adelaide. At the same time, the provision of undergraduate health services management education in the Elton Mayo School of Management was being reduced. The separate health services management stream within the Bachelor of Business was phased out in 1992, coinciding with the movement interstate of a long-serving staff member with strong interests in that area. No champion of health service management activities was appointed to the Elton Mayo School of Management; a coordinator for the Graduate Diploma in Health Administration was appointed in the International Graduate School of Management for a limited period of two years from October 1992 (and not renewed for 1995); there was little or no health services research or public comment undertaken; and there was no advisory group to link the education program with industry views after the undergraduate panel was discontinued. From 1994, student applicants for enrolment in the Graduate Diploma in Health Administration were not processed through the statewide SATAC arrangements, but directly by the International Graduate School of Management. The school did not accept suggestions that student and health industry feedback should be sought in relation to past performance and possible future changes (South Australian Institute of Technology 1993). The links between the health industry and the health services management program at the University of South Australia were being curtailed.

Students

Students in the Graduate Diploma in Health Administration at the University of South Australia and in the masters program at Flinders University tend to be part-time and female, particularly at the University of South Australia, and internal. Student numbers in the graduate diploma have stayed approximately constant (41 in 1991; 47 in 1992; 42 in 1993; and 41 in 1994), but have fallen slightly in terms of equivalent full-time

students (16.6, 20.8, 16.8 and 15.3 respectively). During 1994 the International Graduate School of Management decided not to accept overseas students into the Graduate Diploma in Health Administration for 1995, even if they were prepared to pay full fees and were academically of an acceptable standard. There was no intake of new students into the Graduate Diploma in Health Administration at the University of South Australia in 1995.

At Flinders University, with much less uncertainty about the course's future, enrolments rose substantially—from 10 masters students in 1991 to 19 in 1994 (from 5.5 equivalent full-time students to 7.3)—but from a significantly lower base. There continued to be a normal intake into the masters course in 1995. Flinders University enrolled new Graduate Diploma in Health Administration students in the masters course for 1995, although at that stage no graduate diploma was available from Flinders University. The masters degree can be taken either by course work (12 topics of 6 units), or as course work (36 units) plus thesis (36 units). The course draws on senior practising managers at Flinders Medical Centre and the research and teaching expertise available at Flinders University. It enrolled five international students in 1995.

From 1989 to 1993, first preferences from students for the Graduate Diploma in Health Administration course varied from 45 to 64 and total preferences ranged from 103 to 133 per year. This suggests a substantial demand for health services management education at graduate diploma level. Annual first-year offers ranged from 30 to 36 and first-year enrolments from 17 to 26, with no obvious declining trend over time. However, in 1994, with the International Graduate School of Management changing direction, health industry concerns and anxiety among potential students about longer term developments, first-year offers fell to 15 and first-year enrolments to 12 (three more students entered the second learning cycle of first semester). Enrolments continued to be predominantly female.

Students completing the Graduate Diploma in Health Administration numbered 16 in 1989; 17 in 1990; 14 in 1991; 11 in 1992; 20 in 1993; and 16 in 1994.

There are many more female than male students enrolled in the graduate diploma (22 to 3 in 1993; and 11 to 1 in 1994). This is interesting, given that the general situation in Australian industry, including the health service, is that the ratio of males to females increases at more senior levels of management. The Karpin Report (Industry Task Force on Leadership

and Management Skills 1995) has recommended that management courses have a minimum of 40 per cent females; see also Sinclair (1994). The graduate diploma students were drawn from a wide range of professions/disciplines and employment areas. Many of the staff and students with whom the program was discussed favourably emphasised the diversity of their experiences and interests. Statistics on the masters course showed that there were more females than males enrolled, but the imbalance was less striking than in the graduate diploma and the total number was smaller. Again the students were from a wide spread of professions/disciplines and employment areas.

Comparison with other graduate diploma courses at the University of South Australia

A comparison of three graduate diploma programs at the University of South Australia (in health services management, arts administration, and occupational health and safety) shows that there are significant annual fluctuations in enrolments. Nevertheless, prior to 1994 the health course did not appear to have been in any lesser demand from the South Australian community than the other two courses—if anything, the reverse. This is despite the fact that both the arts course and the occupational health and safety course apparently have full-time directors who are able to invest significant energy in teaching, course development, program promotion, and interaction with their respective industries.

Responses from graduates

Of the 20 Graduate Diploma in Health Administration graduates in 1992, 16 responded to a questionnaire in early 1993 (a response rate of 80 per cent). Results of the questionnaire showed that 94 per cent of respondents were employed; and the median salary of those working full-time in Australia was \$47 000. Of the 16 respondents, 13 were working full-time; one was working full-time but wanted another job; one was working part-time and wanted a full-time job; and only one was not working but wanted employment. Most respondents were in the metropolitan area (12 out of 15). All who answered this question had been in their present (full-time) job for 12 months or more. Eight of the 14 claimed that their employment was directly related to their graduate diploma studies; the other six claimed it was 'somewhat related'. There was a generally supportive evaluation of the graduate diploma by students.

Other aspects

Five other aspects are noted. Firstly, at the University of South Australia there are related areas of study where the availability of health services management electives would be welcome. They include nursing, physiotherapy, social work and occupational therapy.

Secondly, there appears to be a demand for health services management subjects through distance education. Reasons for studying externally may include particular subjects offered or convenience for particular students (for example, personal preference, remote location, frequent absence from regular place of work or shift work). External study is not inconsistent with occasional face-to-face seminars or meetings, for discussions and networking. During 1994 the University of South Australia and the South Australian Health Commission discussed the possibility of introducing a graduate certificate by external delivery, but no agreement was reached.

Thirdly, there appear to be a number of members of the health work force, or potential work force, who are not seeking full undergraduate or postgraduate enrolment (and, on an academic basis, may be unlikely to compete successfully for entry; *a fortiori* now that the undergraduate program has been terminated) but who would benefit from access to further health services management studies. The benefit could be for their immediate work performance, their longer term career prospects or their more general educational aspirations. Although it was not possible to quantify this demand, it was suggested that it is fairly widespread in the South Australian health system and is not being adequately met at present.

Fourthly, there is the University of Adelaide with its central city location, its established Faculty of Medicine and its strong research reputation. The faculty offers a Bachelor of Health Sciences which provides 'a relevant course for students who wish to make a career in the important areas of health and hospital administration and planning'. The course structure enables students to orientate their subject choice towards the social sciences or the medical sciences. Subjects offered in dentistry or other medical departments of the faculty can be included and an honours program is available. In 1994 a new subject, Public health management, was introduced. The faculty also provides graduate diplomas in occupational health and in public health.

Fifthly, there is the Health Industry Development Council. It was established in 1986 to coordinate a number of South Australian Health

Commission training initiatives, to identify common organisational needs for staff development and to develop management and staff training programs. The council is chaired by a senior officer of the South Australian Health Commission, reports to the State Minister for Health and had expenditure totalling \$817 014 in 1993–94. The Health Industry Development Council's training programs have a focus on practical assistance to employees to improve their performance in the workplace. The Health Industry Development Centre, located in central Adelaide, had a staff of seven (6.6 full-time equivalents) and provided education, training and development strategies and services. In 1993–94 there were 72 Health Industry Development Centre courses, 1206 participants and 3885 equivalent training days. Of those who attended, 68 per cent were females, 21 per cent were from the country and 67 per cent from hospitals. Administrative staff comprised 54 per cent of course participants (compared to 6 per cent technical, 8 per cent professional, 8 per cent operational and 10 per cent nurses).

Conclusions

Undergraduate program

There was broad consensus that an undergraduate health services management course is not currently required in South Australia. However, suitable electives available for undergraduate students were supported (whether in health-related or more general courses). The electives could be provided by the university postgraduate program, through the Health Industry Development Council or by another health industry organisation. The Health Sciences School at Flinders University is developing an undergraduate program with a health management major.

Graduate diploma/masters program

Industry representatives argued strongly for continuing a health services management course at graduate diploma and masters level. Although the course's position had weakened recently, particularly at graduate diploma level, representatives argued that it could be financially viable within two to three years, given effective support from the health industry and an Adelaide university. While health service managers can usefully be developed in a range of ways (for example, through general courses,

specialist preparation in specific areas or Master of Business Administration programs), a postgraduate preparation for management with a health services focus should continue to be one of the options available in South Australia.

Course content

There was considerable consensus about aspects of course content, for example, to include general management and health-specific subjects; as wide a range of electives as possible, to appeal to a broad range of managers in the diverse health sector; close collaboration between educational institutions and industry representatives (advisory committees, guest lecturers, even running individual units where appropriate); a significant element of project work; and research on health services management and public comment as well as teaching.

Location of course

There are three possible locations for a graduate diploma/masters level program in health services management: the University of South Australia, Flinders University or Adelaide University. Wherever the program is located, it will require strong support within the educational institution and also from the health industry. Ideally, the university advocate should be well respected academically and by industry. There are a number of influential industry supporters, including the Australian College of Health Service Executives, the Royal Australian College of Medical Administrators, the Private Hospitals' Association, the Aged Care Organisations Association, the Hospitals and Health Services Association and the Health Industry Development Council. Their continuing involvement and support is most important. However, the role of the South Australian Health Commission is crucial: in speaking for the (diverse) health sector as a whole; fostering the vision of improved health management education; and facilitating its potential contribution to better health services and value for money in the State (SA Audit Commission 1994—especially chapter 13; Victorian Health System Review 1992, Recommendation 54). The report of the Industry Task Force on Leadership and Management Skills has stressed the importance of leadership in keeping management education on the industry agenda (1995).

In March 1995 the South Australian Health Commission endorsed the

establishment of a Health Management Development Unit within the Faculty of Health Sciences at Flinders University, to be headed by Professor Blandford and supported by a three-year grant of \$250 000 per year. The unit's role is expected to include development of full-fee programs such as a masters level course in health services management, courses for clinicians as managers, a range of postgraduate offerings and certificate courses. The unit's advisory mechanism will include representation from the public and private sectors and relevant professional associations.

Other matters

A number of other specific matters arose during the investigation. They included the following.

- a. The importance of mentoring, career development and work rotation for developing health service managers. More generally, it was argued that greater attention should be given to the fostering in health workplaces of an environment where people are encouraged to study, to achieve and to improve their performance in health services management (as in many other areas, including clinical care). Karpin has stressed that 'excellent leaders and managers require well structured, systematic education and continual development' (Industry Task Force on Leadership and Management Skills 1995, p 2). This is a responsibility of all employers, but a leadership role devolves on the South Australian Health Commission.
- b. The desirability of providing improved management training opportunities for lower level staff within the health system (including certificate and associate diploma courses and articulation possibilities). Karpin has emphasised, *inter alia*, the importance of upgrading TAFE's capacity to deliver best practice management development programs and services (Industry Task Force on Leadership and Management Skills 1995, for example, Recommendation 4, p xxviii).
- c. There are considerable unmet needs throughout the State for continuing education in health services management. It was apparent that the development of 'customised' courses as a rapid response to changing industry needs, while important in the field, may be less attractive to traditional academic programs. Close attention needs to be given to the incentives facing those who might develop and

provide such courses.

- d. Encouragement of research in health services management, including the establishment of fellowship(s).
- e. External study opportunities continue to be needed, but do not necessarily have to be provided by South Australian institutions. Aspects identified included gaps in existing provisions; the desirability of links to local courses even when provided from outside the State (for example, for networking and topics of special relevance to South Australia); and longer term possibilities for Adelaide-based programs. Distance education can be important in meeting rural health policy aims; and there are enhanced opportunities offered by new communication technologies.

The investigation which is reported here provided an opportunity for cooperation between health educators and industry practitioners in South Australia, between the Australian College of Health Service Executives, the Society for Health Administration Programs in Education and the South Australian Health Commission. An important problem was cooperatively addressed, its resolution facilitated and the basis provided for effective future development in health services management education and training in South Australia. The episode illustrates the mutually beneficial collaboration between industry and management educators which has been strongly recommended by Karpin (Industry Task Force on Leadership and Management Skills 1995).

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