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IIHMR UNIVERSITY

Institute of Health Management Research

MBA Hospital and Health Management

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Health Management

Strategic Management

Term Examination

Time - 3 Hour **MM-70**

The question paper contains 5 printed pages.

Section A

Read the case and answer the questions below of section A -

A CASE STUDY: STRATEGIC PLANNING FOR HEALTH IN TURKEY

INTRODUCTION

This report explores the role of strategic planning in Turkey's successful transformation of its health sector since 2002, when the 59th Government of Turkey took power. The specific objectives of the report are to: document a country example of strategic planning in the health sector; understand the factors that made strategic planning for health in Turkey so successful; explore ways in which strategic planning in Turkey might be strengthened; and identify lessons learnt from Turkey's experience for other countries wishing to strengthen their strategic planning capacity.

Information and data for the report come from a combination of sources: published reports and articles available in print or on the internet; semi-structured interviews with key-informants; minutes of stakeholder meetings held in July 2012; and data from published reports, the WHO European Health for All database and data provided by the Ministry of Health of Turkey.

TURKEY BEFORE AND AFTER THE HEALTH TRANSFORMATION PROGRAMME

The health system was in poor shape when the new Minister of Health, Professor Recep Akdağ, took office on 18 November 2002. Health indicators, such as life expectancy and infant mortality, were among the lowest in the WHO European Region and out-of-pocket expenditure was high. Not surprisingly, the population rated their satisfaction with the health system very low. Ten years later, the health system had been transformed and all aspects of health system

performance had improved sharply from health indicators to financial protection to population satisfaction.

These achievements were the results of decisive political action and effective reforms that addressed the myriad root causes of the performance problems. Of course, the strong economic growth experienced in Turkey since 2002 and the political stability that ensued greatly facilitated the ability of the Ministry of Health to implement its reforms; however, a detailed discussion of these factors is beyond the scope of this report.

The Minister of Health moved quickly to tackle the problems facing Turkey's health system, publishing an emergency plan shortly after taking office. This plan identified 11 strategies designed to transform the Turkish health system. The Health Transformation Programme (HTP), based on these strategies, was initiated in early 2003. The aim of HTP was to develop a primary health care-based delivery system with universal access through a unified social insurance system for all residents in Turkey. The system would be re-organized and strengthened on a number of fronts (e.g., human resources, equipment, medicines, information technologies) to improve both the efficiency and quality of care.

Implementation began immediately and was performed in a very strategic manner, with easy changes made first, which helped build credibility and contributed to continued political support for the more difficult reforms, which were.

Strategic planning for health: a case study from Turkey more time consuming. But the strategic approach of the Minister and his team went considerably beyond the mere sequencing of reforms. Indeed, as the analysis in this report shows, strategic planning played an important role in the success of the HTP.

STRATEGIC PLANNING FOR HEALTH IN TURKEY

Before proceeding with the discussion of the role of strategic planning for health in Turkey, clarifying how the term s used in this report is important. In the context of national strategic health plans, there is little agreement about the definition of terms like policies, strategies and plans, and the terms are frequently used interchangeably. This report uses the following definition for strategic planning: the process of envisioning a future and translating this vision into defined goals, objectives, strategies, tactics, and making resource allocation decisions in pursuit of these objectives.

Although the first official strategic plan for health was not published until 2010, the roots of strategic planning originate in Public Law No. 5018 on Public Financial Administration and Control, passed in 2003. Article 9 of this law mandates that all public administrations prepare strategic plans; it also directed that they base their budgets and resource allocations on these plans. However, the law failed to identify who would be responsible for the preparation of the strategic plans. Until this flaw was rectified later, no formal strategic plans were prepared.

The absence of a formal mandate did not, however, prevent the Ministry of Health from approaching the design and implementation of the HTP in a manner that closely resembled strategic planning. Indeed, virtually all the steps and principles outlined in traditional strategic planning models were employed by the Ministry, except for an extensive consultative process with stakeholders and the publication of an official plan, which would have significantly delayed implementation of the HTP. Thus, even in the absence of a formal plan, strategic planning played an important role in the HTP.

But equally important was the fact that strategic planning was embedded in a broader strategic management approach promoted by the Government of Turkey. As a result, strategic planning was accompanied by strategic implementation and strategic control. Reflecting this approach, when the Government of Turkey implemented the mandate that all public administrations prepare strategic plans, it issued regulations that required each plan to consist of sections on strategic analysis, strategic design and strategic implementation, as well as monitoring and evaluation. To ensure that the plans would also comply with high-level policies (both domestically and internationally), they also had to contain a section on the relevance of the strategic plan to high-level policy. The plans also had to be developed with extensive consultations with a wide array of stakeholders. These requirements were reflected in the preparation and content of the first formal strategic plan for health, published in 2010 (Strategic Plan 2010–2014), as well as in the second plan, prepared in 2012 for 2013–2017, to reflect the new roles and responsibilities of the Ministry established by Statutory Decree No. 663 issued in 2011.

SUCCESS FACTORS OF TURKEY'S STRATEGIC PLANNING FOR HEALTH

Strategic planning for health in Turkey has been successful for several reasons. Conceptually speaking, there are two sets of reasons. The first has to do with the characteristics of the strategic plans and the way in which they were prepared, and the second with the way in which they were operationalized. As discussed above, the first strategic plan – the HTP from 2003–2009 – was not a full-fledged strategic plan yet came quite close and provided achievable and realistic goals along with the necessary directions (strategies) for achieving them. It was not externally led, so the Ministry had full ownership of the plan. In short, it avoided three common pitfalls of strategic plans: a wish list (as opposed to a strategy); not including concrete, operational and realistic goals; and not taking full ownership.

The Ministry of Health was very strategic in its use of strategic planning. It did not invest to first build its capacity to prepare formal strategic plans, which would have been time consuming, but rather built that capacity incrementally in line with the new roles and responsibilities of the Ministry. The increased capacity is reflected in the evolution of the quality of the strategic plans over time, which has evolved from informal plans to formally endorsed plans prepared with wide stakeholder consultations. Indeed, the most recent strategic plan in many ways is a sound reference for strategic plans. This reference is based on a standard developed by an international partnership of international organizations, countries and other development partners (International Health Partnership), to assess strategic plans in low-income countries, and

contains a number of attributes and criteria that almost all apply equally to strategies developed by middle- or high-income countries. On the vast majority of these attributes and indicators, Turkey's strategic plan fulfils the expectations.

The second reason why strategic planning has been so successful is that it was embedded in a broader strategic management framework that paid equal attention to implementation and to monitoring and evaluation (M&E). As a result, plans were turned into actions that were piloted and tested before they were scaled up nationally. Furthermore, implementation teams on the ground provided not only support to the implementing agencies, but also direct feedback to the senior management in the Ministry of Health, which then took action to address systemic problems. In addition, a strong M&E system was put in place and progress was followed very closely with action plans developed as soon as problems were identified.

RECOMMENDATIONS FOR TURKEY'S CONTINUED DEVELOPMENT OF STRATEGIC PLANNING

The analysis in this report shows that strategic planning has been not only successful, but also that the capacity to plan has been evolving over time. In order to increase the effectiveness of the strategic planning, it would be beneficial to create a closer link between the strategic planning process and the health systems performance assessment process. Furthermore, future strategic plans would be well served by expanding the situation analysis to go beyond the mandated strengths, weaknesses, opportunities and threats (SWOT) analysis, preferably by expanding the content of the "Strategic Issues" section of the strategic plans to include a root-cause analysis, which would form the basis for identification of the strategic issues that the organization (and the strategic plan) has to address.

Section A

Answer the following – (Each question carries 20 marks)

Question A-1: In the light of the above case, determine the future strategies for Turkey health system. You may list down Strengths, Weaknesses, Opportunities and Threats and use a TOWS matrix to determine the strategies?

(20 marks)

Question A-2: In the context of new strategies to be adopted by the Turkey Health System, determine Mission, Vision, Goals and Objectives of the health system and a brief idea of the operational plan.

(20 Marks)

Section B

Answer the following – (Each question carries 10 marks)

Question B-1: Explain any two types of Control, for a strategic plan and where it can be best used.

(10 marks)

"Oxfam's vision is a just world without poverty. We envisage a world in which people can influence decisions that affect their lives, enjoy their rights, and assume their responsibilities—a world in which everyone is valued and treated equally."

"Our purpose is to help create lasting solutions to the injustice of poverty. We are part of a global movement for change, empowering people to create a future that is secure, just, and free from poverty." Analyze the mission statement of OXFAM. Find out what is missing in the mission statement.

Question B-2: Analyze the Vision and Mission statement of OXFAM. Find out what is missing in the vision statement and write about any two contraction strategies.

(10 marks)

Write short answer of any two (Each question carries 5 marks)

Question B-3 Define strategic Management and nature of strategic management

Question B-4 What do you understand by Stake holder analysis.

Question B-5 Define "Steering Control" and its effective use in Strategic management