

CHAPTER 6 CONCLUSION AND RECOMMENDATION

The objective of this study is to answer a research question of which strategic issues do effect the mission of the DHCCs in Khonkaen. To acquire the answer the investigator has examined the strength and weakness of the DHCCs, factors which maintain the existing DHCCs. The investigator tries to illustrate the existing DHCCs and looks forward to the prospective performance of DHCCs.

Conclusion

Present Roles of DHCCs

DHCCs accept and absorb their burden assigned by the MOPH. The activities of DHCCs, understood by the three interacted sector are as follow :

1. Form a committee using criteria suggested by the MOPH. Some DHCCs have readjusted some criteria such as ratio of members between DHO and CH. (The number of potential personnel in each district may vary from office to office.)
2. Set up a health information Center. However, data collection, up dating and system to circulate/distribute information may not exist in every DHCC. The most important was the collector do not utilize this data to solve problems in their respective areas. Therefore the quality of data collected is not of their major concerns.
3. Design Health Development Plans at district level, using data from BMN and HSSD, to defense for budget allocation. The DHO also set operational plans to utilize budget. However, not all DHCCs have operational plans.
4. The present roles of CH in supporting DHCC are to organize academic training for health personnel in health center, and to provide medicine and medical equipments to health centers.
5. A health team will be appointed by the DHCC to supervise health centers. The DHCC will evaluate the performance of the health team afterward.
6. DHCCs have been appointed by PHO as a device of Health Development at district level. However, PHO does not provide

opportunities for DHCCs to present their performance, nor allocate budget to support their activities.

7. Only some not all DHCCs involve in budget and personnel management. This is due to uncrystalized policies of the MOPH as far as authority is concerned.

Strength of DHCCs

Mission of DHCCs in the perception of leaders at district level is to co-ordinate activities between DHO and CH. Some of its members are the "authorizer" of the officers. Hence, the DHCCs seem to be able to make decision. Because some of the members are administrators, the importance of DHCCs are recognized and the co-operation is achieved. From reasons mentioned above, they make the performance of DHCCs feasible.(The experts' opinion tended to increase and in accordance with mission of DHCC.)

Weakness of DHCCs

As mentioned earlier, the actual mission of DHCCs is to co-ordinate activities at district level but practically, it is a plural committee. It causes the confusion to the members because they will not be sure to what extent the decision can be made. (There was a trend for difference the opinions between the directors of CH and DHO versus the officers of PHO for statement No.32 and 35 which deals with the budget and personnel management.) DHCCs are also inspectors of PHO and the MOPH at district level. Their images to the public or any interacted organizations can be either positive or negative.

The investigator has reviewed papers related to DHCCs. It was stated that roles of committee should be clarified especially the responsibilities and the authority. There is no paper mentioned that DHCCs were given authority to make decision. They are only organizations which appointed to co-ordinate activities. However from interviewing administrators and reviewing of DHCCs meeting reports, the investigator found that PHO passed unofficial authority to DHCCs to decide in issues related to budget. It may be a weak point of DHCCs in Khonkaen.

Strategic Issues

From the definition of strategic issues, this study found 3 main issues which may affect the mission of DHCCs :

1. Supporting each other between DHO and CH . It can be done through sharing or co-managing some budget. As the missions of DHCCs are to co-ordinate, plan, and work side by side between DHO and CH, hence, budget planning must be done together compromisingly, otherwise there won't be any progression of DHCCs.

2. Evaluation of the DHCCs' performance to conclude obstacles in order to suggest and recommend for improvement. It must be done continuously, Furthermore, it also stimulates interacted organizations to evaluate the performance of themselves which will benefit the development both short and long term of the organization.(The experts' opinion tended to increase and in accordance in this issue.)

3. The DHCCs perform supervision to health centers, hence they know the problems, limitation of DHO and other health services sections. These data should be taken into consideration whenever budget is allocated. (The experts' opinion tended to increase and in accordance with this issue. Also this issue related with the information system and budget management.)

Implications of the current findings:

DHCCs and PHO tended to differ in their perceptions about the authority of DHCC. Most DHCC officers thought that the authority of DHCC should increase (statement No.31 to statement No.35). The notion coincides with the current trend for decentralization in which more authority and autonomy should be given to the more peripheral level. This will require a desirable level of information updating and sharing (statement No.14, 15 and 16), a plan to strengthen the capacity of DHCC (statement 20) a stronger support and interaction with PHO (statement 27 and 29) and a systematic evaluation and monitoring of progress and performance of DHCC. Until these become materialized, the DHCC will not fulfill its role as an effective organization of the Ministry of Public Health.