# **CHAPTER II**

# **ESSAY**

# Situation Analysis of Developing Strategic Plan for Improving Health CenterPersonnel Academic Development in Chon Buri

# 2.1 Introduction

# 2.1.1 International Aspect on Human Resource Development

Countries continue to have significant imbalances in human resources for health (HRH). Frequently the failure in implementing human resources development (HRD) policies is blamed on the lack of a favorable economic environment and real political commitment in countries.

Policy-makers and planners must learn more about policy formulation processes in HRD. An assessment of different approaches in a variety of contexts (economic, social, stage of reform, etc.) can provide valuable lessons. (Dominique Egger,1998)

WHO has developed an analytical framework which categorized contextual factors, the health policy and human resource policies. Key findings are as follows

- The relationships (both direct and indirect) between the context and both national health policy and planning can be traced in most countries.
- HRD issues are often addressed primarily education and training.
- Stakeholders are often not sufficiently involved in policy formulation, or are involved late in the process.
- Policies are sometimes not well defined and are difficult to monitor and evaluate.
- Regular review mechanisms and structures are rarely thought about before policies get implemented.
- National capacities to develop and implement policies are still weak in many countries. (WHO, 1998)

In the face of health sector reform initiatives, often resulting from political and macroeconomic changes, many counties are reviewing their policies for health development with a view to formulating or improving new ones. Effective implementation requires a broad approach that takes into account all major contextual factors and key players and, even more important, their interlinkages.

# The Overall Policy Formulation Processes and Implementation Methods With A Special Focus on Human Resources for Health (WHO, 1998)

By providing country-specific information on the overall context and the health sector, the assessments will contribute to defining directions of change, identifying points along the way that constitute progress towards comprehensive approaches for human resource development, and highlight issues arising in the

course of moving towards this approach. In other words, these assessments will focus more on process than final products.

The dimensions of human resource development policies are shown with a list of questions, which will have to be adapted to the individual circumstances of each area and the determinants for health and human resource policy development, planning and resource allocation significance by the following questions:

- When does the last health policy and plan date from?
- When does the last human resource development policy and strategy date from?
- If the current health and human resource policies are not the first ones:
  - 1. Why was it necessary to review or formulate a new policy on human resource development?
  - 2. Have there been significant changes in the approach to health and human resource policy development, planning and resource allocation considering both processes?
- What has been the process for formulating the current human resource development policy plan?
- Are there any explicit or implicit links between the policy for human resource development and the overall national health policy both in terms of contents and processes?
- What are the top priorities for human resource development and how have these been determined and negotiated?

- Do these priorities include a policy/strategy for education and training? If yes, could you specify its content?
- Have there been significant shifts in human resource priorities and are these shifts reflected in the policy documents as well as in the budgetary/expenditure program? What are the areas of recent or ongoing major changes of policy content?
- Who has been involved, and at what stages in priority setting and strategic planning for Human Resource Development for Health (HRH)?
- What difficulties were encountered in priority setting and strategic planning for HRH?
- What is the role of departmental planning and technical assistance in priority setting and strategic planning for HRH? To what extent are recent developments due to strengthen institutional capacity?
- What have been the major supportive or impeding factors in priority setting and implementation of the organization's HRH strategies?
- What approaches and/or tools have been used in support of policy development?
- Is there a plan to build human resources capacity to support the implementation of the policy?

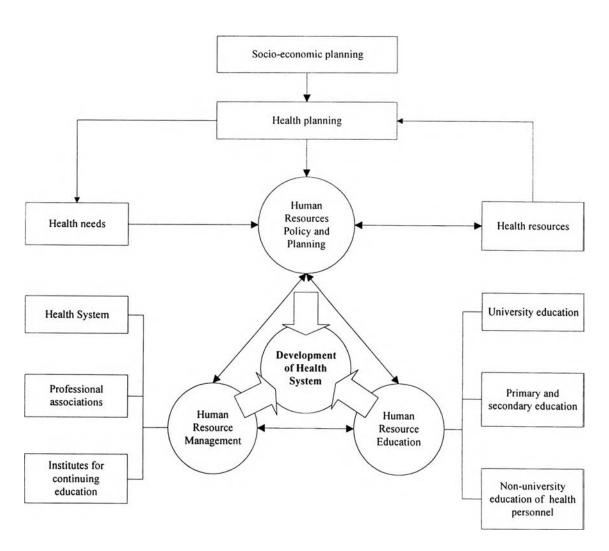
# Planning Process for Health Personnel Development

Human resource planning defines health system requirements for health workers and translates these into policies: human resources production provides

education and training: and human resource management ensures that health personnel are used effectively and their skills are maintained, evaluated and upgraded through continuing education to meet evolving job expectations. Experience gained at each stage of the process is valuable for the operation of the whole system.

Figure 2.1 Interrelationships in Health Systems and Human Resources

Development



Source: WHO (1992)

# 2.1.2 The Eighth Five -Year National Health Development Plan (1997-2001)

A deliberate effort focused on human resource centered has been made in the formulation of the National Development Plan and facilitates integration of system. Human resources are considered as a determining factor in achievement the overall goals. Health, therefore, is a fundamental and key determinant for human resource development.

The 8<sup>th</sup> National Health Development Plan is targeted on "people" who will be considered as beneficiaries of improvements in health as well as leaders in self-care. Emphasis is needed on health management, decentralization, and intersectional collaboration between public and private sectors. Self determination through the local administration must be facilitated by encouraging the people's participation and community involvement throughout the decision-making process.

# Objectives of the Eighth Five -Year National Health Development Plan of Thailand

In order to ensure the good health of the Thai population and to support the government taking a leading role in this area, the objectives of the 8<sup>th</sup> National Health Development Plan are as follows:

 To ensure that people are knowledgeable in order to develop a positive attitude towards good health behaviors, both individually and collectively within the family;

- 2. To continue to support activities which decrease the rates of morbidity and mortality from diseases caused by risky behaviors and preventable diseases;
- To ensure that the people are entitled to health insurance and have access to integrated health services which are efficient and of high quality and equitable, particularly for the underprivileged and handicapped;
- 4. To provide consumers with a high standard of health-related products, enabling people to be knowledgeable and capable of protecting themselves by rational consumer choice;
- 5. To enable people to live and work in a pleasant and safe environment;
- 6. To support community organizations to look after the health of their members effectively and efficiency;
- 7. To enable families to be healthy, pregnant women and children, in particular, must be well protected with special care,
- 8. To assist the elderly to be healthy and to live with dignity;
- To enable the Thai to be capable of making use of health-related indigenous wisdom and to become potential leaders of health development at the regional level.

### Development Strategies

To ensure that the 8<sup>th</sup> National Health Development Plan is implemented and works toward achieving the desirable vision of development for health personnel, the following strategies have to be formulated:

1. Developing health personnel and human resources for health.

2. Promoting studies, research and development of health related products and public health technologies.

# 2.1.3 Background on Health System in Chon Buri

Chon Buri is a province in Thailand. There are 3 zones of health service areas in the province: the land zone, the sea zone and the mountain zone which are both agricultural and industrial areas and the social-economic demographic basis is both urban and rural the people of which have different choices for health service. There are both public and private health services, but most of the private health services are in the urban areas, so the health service for people in rural areas is the responsibility of government organizations.

The provincial administration (Figure 2.1) is under the supervision of the Office of the Permanent Secretary for Public Health. The Permanent Secretary is in charge of controlling and monitoring all provincial health activities so that they are implemented in accordance with MoPH's policies and programs. Agencies under the provincial health administration are as follows:

1. Provincial Public Health Office: The Public Health Office (CPHO) reports to the Office of the Permanent Secretary and is headed by the Provincial Chief Medical Officer (PCMO), who is in charge of all health activities at the provincial level and below, under the direct command of the Provincial Governor under the CPHO, there are a regional hospital,

general hospitals, and community (district) hospitals reporting to the PCMO.

- 2. District (and Sub-District) Health Office: The District / Sub-District Health Office in each district (10 Districts and 1 Sub-Districts) reports to the District Chief and is headed by the District/Sub-District Health Officer, who is in charge of management, support, promotion, monitoring and evaluation of activities implemented by health centers. The District/Sub-District Health Office is supervised and supported technically and administratively by the CPHO.
- 3. Health Centers: Health centers provide integrated health services, at the Tambol or village level, to the people in their designated rural areas. In Chon Buri, each health center covers a population of approximately 5,000. A health center is generally staffed by a health worker, a midwife and a technical nurse. Currently, the MoPH is in the process of assigning a dental auxiliary, a professional nurse and a health specialist to work at the large health centers throughout the country. (Department of Health Policy and Planning, 1998)

The health center is the smallest health service station nearest people in community, and health personnel in the health centers are important to provide people health-care to ensure their quality of life. Therefore the work capacity must be determined and what is practical for personnel to do in terms of work load. The assessment must be made whether personnel are qualify or not and what skills they need in performing their jobs (Vanussara Chaoniyom, 1998). The study regarding the

needs assessment of personal development in Chon Buri showed that all levels of health personnel need to develop both individual and career wise but the Tambon level health personnel have little development. And they always request for supporting from the provincial level to provide the opportunities in academic development. (Onwan Chutikorn, 1998) And when the results of the study were reported to the Director of CPHO, he said that, why do the health center personnel have fewer development opportunities than the other health personnel, although our province has provided equity in development to all health personnel. How can we improve this situation? The Personnel Development sector should be looking for strategies to solve this problem.

Ministry of Public Health MInistry of Interior Permanent Secretary Permanent Secretary Technical Provinces Departments Office of Permanent Directors General Governors 75 Provincial Health Offoces Provincial Chief Medical Regional Centers 92 Regional and General Hospitals 713 Community Hospitals Directors Directors District Chief 794 District & 811Sub-district Health Office District & Sub-district Health Officers Line of Command Line of Technical Support 9,424 Health Centers 424 Community Health Post Chief Community Health Workers 6,562 Community Primary Health Care Centers Village Health Volunteers

Figure 2.2 The Structure of the Provincial Administration (1998)

Source: Department of Health Policy and Planning (1998)

# 2.2 Situation Analysis of Health Center Personnel in Chon Buri

The strategic plan of an organization is influenced by its stakeholders, the people and organizations involved or interested in the organization's activities. During the strategic planning process, it is important to identify the stakeholder groups and their needs because their influence can support or hurt the organization. This is the most difficult phase to apply in the strategic planning process because it requires in depth analysis of the ideas, beliefs and baselines of decision making (Goodstein, Nolan and Pfeiffer,1993). Moreover, we also need the intuition and foresight of the future for estimation and prediction of influential direction. Stakeholders can be identified by using critical thinking of problem solving for analyzing their status, relationships and activities that may effect the organization. (Goodstein, Nolan and Pfeiffer, 1993)

The health center organization in Chon Buri should propose that it's health personnel serve as multifunctional personnel who continually develop new skills. Personnel development must have the appropriate strategy, which is feasible and valuable. So, in strategic planning it should be subject to clear and systematic management to ensure good implementation. Once identified, the planning program will be created in order to meet both organization and individual needs and to effectively solve existing problems. Despite the emphasis on personnel development policy, in order to ensure successful implementation and future planning, the Chon Buri Public Health Office must study the situation affecting development management before beginning and methods which are valuable. It must also study actual decentralization and the participation of underlined organizations which will

contribute information and the situation analysis in strategic planning for their own development.

# Analysis of the Environmental Factors of Health Personnel Management in CPHO

"It's hard to solve a problem when you don't even know it exists" (Fred Heiser, Chairman, Heiser-Egan, Inc. cited in Fogg, 1994, p.130)

The process is to analyze the present situation (situation analysis) and the future desirable situation of health personnel academic development in CPHO and then to identify the gap (problem) and to formulate a program to fill the gap (Adit Laizuthai and Connelly, 1996). This planning process is a part of critical thinking problem solving.

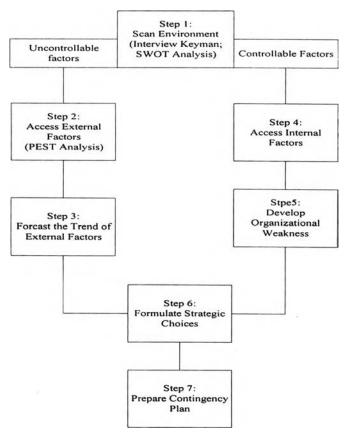
One important model which can serve as a guideline to the strategic planning approach is the TOWS Matrix Model (Dyson, 1990) shown in Figure 2.2 Step 1, which scans the environment by interviewing key personnel in order to find out the ideas and needs of the stakeholders as the first thing to consider. At the same time, it uses the SWOT Analysis to analyze opportunities or threats to the organization. Then the uncontrollable and controllable factors are identified. The uncontrollable factors, mostly the external factors, have to be assessed by using PEST Analysis (Step 2) and forecasting the trend of those factors which will impact the organization in the future (Step 3). The controllable factors are mainly internal factors of the organization,

showing strengths and weaknesses (Step 4). The weaknesses have to be eliminated in Step 5. Step 6 will use all utilitarian factors to formulate the strategic choices and finally prepare the contingency plan (Step 7)

This is a useful model, not only for finding the factors for formulating the strategic implementation program, but for developing the capacities of the organization.

Figure 2.3 The TOWS Matrix Model

# The Process of Strategy Formulation



Source: Dyson (1990)

# **External Environment Assessment**

An external assessment will look at the outside world which sometimes is difficult to understand and impossible to control. The external assessment will look for the relationship of factors and outside groups (stakeholders) that will have or influence or interact with the organization in past, present, and future situations. Johnson & Scholes (1993 – p 82) suggest three helpful questions as follows:

"What environmental factors are affecting the organization now?"

"Which of these are the most important at the present time?

"Which will be most important in the future?"

The first question will help to identify the critical influence from organizational environmental factors at that time. The second will help to identify the forces making changes in the organization, and the third will predict influential forces in the future.

The benefit of external environmental factor analysis is to know opportunities and threats which are useful in the planning action. This method helps the decision-makers manage the strategy for implementing the policy or program selected by creating the strategy from strengths and opportunities.

The external situation of managing health center personnel development in Chon Buri includes political power/ policy or national plan, socio-economic, environment policy and technology which influence implementation of the health personnel development strategic plan.

The opportunities and threats, identified in the external situation of the organization, should considered as follows:

Political Factors: Political power is represented by the top management, including policy and law. In this study the present situation shows that political power from the higher level (National level-the 8th Plan), middle level (Prabaromrajchanok Institute of MoPH) and local level (Director of CPHO) has strategic planning policies for human resource development appropriate to the provincial situation. However, these policies must be consolidated in a consistent manner for provincial health personnel development strategic planning.

However, political power showed more opportunities than threats, and advocates health personnel development strategic planning. In the future, CPHO will tend to have authority in strategic planning for itself, following the decentralization policy.

Economic Factors: The financial status of the population, level of education and social-demographic elements have changed, creating demand for a higher quality of life and expectations of high-quality health care, service and goods. From this study, the data showed an increase in the supply of money in 1980-1994 which caused people to expect high quality in health care services (The Health Development Committee, 1995). Now there is a good opportunity for improving and controlling the quality of health center personnel service through the personnel development strategic plan. The management of systematic development will also help to provide appropriate strategies

to develop the capacity of health personnel for meeting the health service demand of the public. So the government should closely oversee delivery in this respect.

Socio-demographic: Factors and competition," Social life is never static but always in flux, it is changing, renewing, and transforming itself" (Whitehold, 1929, Sheldon, 1954) Rapid changes in society initiate competition and demand in the ways of life such as competition in business, education, and luxury. For this study, the requirement of health centers personnel are advocate to formulate the strategies to increase their academic capacity, so the strategic plan will be the factors of consideration of CPHO administrators to supporting.

**Technology**: Numerous technology changes have occurred in recent years, and continued improvements are foreseen in machinery, equipment and information system. The increasing complexity of technology has created a lack of skill of health personnel knowledgeable in new technologies. This is an opportunity for health personnel academic development strategic planning.

The external environment still advocates creating the strategic plan. In the case of CPHO, this is undertaken by the MoPH, the formal actions of which have been backed by legislation. Therefore, the power of CPHO is strong enough to design its own strategies to implement a program which will benefit good human resource development under the central policy.

### **Internal Environmental Factors**

Information on the external environment is insufficient to make an immediate decision. It must be determined whether CPHO is ready to adopt appropriate personnel development management. The next step would be to study the internal factors of CPHO.

An internal assessment helps to identify the capability and possibility of supporting the systematic plan. Each sector of CPHO: departmental planning, operations and finance must be examined in turn, to identify strengths and weaknesses that could affect successful performance of the organization in the future.

Strengths can be used to defend the organization from outside threats and are advantage over the competition. Weaknesses are areas which CPHO needs to improve in order to strengthen and to turn into advantages.

The strengths and weaknesses, identified in the internal organization, should be to considered as follows:

Departmental Planning: This includes the talent of personnel development staff, the people in organization (administrators committee, The Chief of District Health office) as a whole, the structure of the organization and human resource management, the management style (criteria in decision making), the distribution of information, the training pattern, and the relationship and coordination of The Personnel Development staff and practitioner.

In CPHO, the Personnel Development Sector management structure delegates responsibility and authority to lower levels by creating strategies to implement human resource development in the field by permitting all health personnel to go to training. to attend seminars and conferences two times a year and to continue education in needed specialty areas after the end of government support. This is a good internal coordination strategy and support development. Within this management structure, it is easy to distribute information to all practitioners. At the same time, the Chief of the District Health Office can inform the CPHO director about development requirements. Information distribution and the top to bottom relationship of the organization will establish acceptable collaboration for strategic plan implementation. CPHO is the center of health bureaucracy in the MoPH eastern region. Chon Buri has many facilities in the health field and various health problems and utilizes a wide range of health care procedures to deal with these problems. All of these factors make it an appropriate setting to develop health personnel. The problems of community health workers in Chon Buri have little affect on their performance at present. However, there is no coordination between the District Health Office and provincial departmental planning, and there is a lack of information dissemination, thereby preventing assessment of personnel needs.

In organization management, over all, weakness can be eliminated by systematic planning and collaboration with policy-makers to provide a strategic plan which is feasible to implement.

**Operations:** The operations will be identified in terms of development capability and adequacy of management facilities available to support the productivity to meet the expected growth and to achieve the objectives of the organization (Dyson, 1990)

At CPHO, Personnel Development staff have experience in training management for many years. In addition, Personnel Development staff have participated in the MoPH grand meeting and conference, so they know the situation, problems, and need for academic development but they lack of skill in implementation for strategic planning. Not only that, CPHO still has problems including an unclear policy for health personnel academic development, and the lack of collaboration among the departmental planing and sub-level organization.

For the most part, the capability of the staff and the facilities available in CPHO are strong to produce the systematic strategic plan, but The Personnel Development staff has to adjust the role and collaborative with the top and bottom level to make it possible since human resource's mission was to develop a plan quickly, make it simple and implement the process immediately. (Goodstein,1993)

**Finance**: The capital structure, financing, financial planning and the accounting system of the organization are the necessary fundamentals for formulation and implementation of a project or program. Even though the CPHO is a government and non-profit sector, providing funding to support and maintain the program is a heavy burden on the government. Financial planning and good accounting system for

health center personnel strategic planning are necessary to consider for the long term survival of the plan.

CPHO has supported the budget for administration from MoPH. It has authority in financial management by itself with the limitation and cover the cost of capital. This means CPHO must be careful in setting whatever development program for its personnel; it should be worthy and reasonable for the situation in the long run. This is a guideline for planning. Normally, CPHO has allocated the budget for academic development around 100,000 bath per year which Personnel Development sector have to manage for supporting personnel academic development. It is a little amount of money provided to this function, since in the past, there was a little of project or activities in provincial which created for academic development. So Personnel Development sector have to improve its role in creating or supporting any academic development for defense budget allocation.

Other Factors: This evaluation will focus on the factors which are the strengths and weaknesses of the organization, prominent during a particular time period (Dyson, 1990)

In October, 1997, the CPHO contacted College of Public Health, Chulalongkorn University by the collaboration of Praboromrajchanok Institute, Ministry of Public Health, to support the curriculum of Master of Public Health Degree for health personnel in Chon Buri. This offers a good chance for health personnel all level enter a human resource development program and improve their capacity in problem base learning.

In summary, Environmental can results yield dramatic changes which organization implements through a company-wide skills and competency assessment process to figure out what skills already were in house, and which ones might need to be acquired in the future. This suggests the organization needs to implement a much more focused training and development program, and to address re-engineering and process improvement issues. "It becomes a much more tailored thing when you know that certain roles have got to absolutely hum, so you align your training, your pay, your benefits and your reward strategies, everything to support those that make or break the business." (Smith, 1992)

Analysis of internal environmental factors of the CPHO found that there were more strengths than weakness. CPHO is prepared to have the systematic strategic plan to implement for health centers personnel development. Although an unsystematic plan exists, if planning process are developed and clearly implement, it would provide the opportunities for health centers personnel development.

# 2.3 Planning Process for Health Personnel Development

#### The Role of the Staff Planner

The staff planner has four basic functions with regard to the planning process. First, he plays a role in the initiation of the process. This role is shared with other staff specialists, who provide informational input to planning, and it is also shared with top management. Second, the staff planner is the facilitator of the planning process. He/She schedules all aspects of the process and makes sure that they are carried out.

The third major staff planning function is that of review and evaluation. Staff planners review the various plans prepared by line managers, evaluate them for a consistency with each other and with the assumptions and guidelines that have been laid down, and synthesize them into a plan, which is then passed on to other staff specialists, e.g., financial analysts in the Planning and Evaluating sector, and finally to the Director of organization for a review. The Director can then approve the plans or send them back through the cycle to be redone. The fourth function of the staff planner is consultation. She/he must be available for consultation with task force members during the planning process so that they have access to such items as interpretations of assumptions and forecasts, clarification of planning guidelines, and preliminary evaluation of the feasibility of plans.

The latter aspect of this consultative role is of primary importance. Although the staff planner performs a review and evaluation function, it is clearly inefficient for the process to become so formal that plans are developed and then rejected on the basis of criteria that could be communicated between staff planner and managerial planner early enough in the planning process to avoid wasted planning effort. (WHO,1993). At the national level of Thailand, the department responsible for these function in Human Resource Development for the health field is The Praboromrajanok Institute of MoPH. It has the responsibilities in the role of National staff planner mentioned, and facilitators of the public health office all country by decentralization and personnel participation.

Therefore, the concept of the Personnel Development staff's role in a provincial planning staff assumes that planning has been decentralized to the line managers who will be responsible for implementing the plans; and the planning activity is tightly coordinated, monitored, and evaluated by a headquarters central planning staff, thus centralizing policy and strategic functions. Other staff activities (such as those in support of the current operations), are separated from strategic planning so that operational problems do not drive out longer range planning activities.

The planning staff (which sometimes is the administrators committee) exists to oversee the total organizational planning function-to see that the planning is done but not to do the planning. Such a staff can examine the total planning and provide the organizational mechanisms and facilitation services required to support planning throughout the entire organization. (William R. King, 1978)

The Personnel Development sector in the Chon Buri Public Health Office is the planning sector for health personnel academic development. It is responsible for personnel development project design, training curriculum planning and searching for an intervention and technique in personnel academic development including strategic planning. (Department of Health Manpower Production and Development,1992) The management of health center personnel is also its function. In the role of Provincial Departmental personnel planning, it is necessary to look at the appropriate strategy to provide opportunities for health center personnel development in Chon Buri. But the process of planning requires steps to address the organization's specific situation

(Goodstein,1993). Accordingly, Personnel Development Sector must respond to the 8th Plan for health center personnel development planning which focus on human resource development. An analysis of the situation to understand the opportunities or the constraints of providing health center personnel development should be done in Chon Buri, there is not any clear strategic plan for human resource development, therefore it is essential to look for a methodological approach to set up strategies in order to improve academic development problems by analyzing the environment. (Kertsiri Chaitongsri, 1998) What is the desired situation? What is the gap between the actual and the desired situation? The study results will precede strategies that have a reasonable probability of success.

# **Guidelines for Implementation and Evaluation**

For effective plan implementation, it is necessary to improve the capacity of Health Planning and Evaluating Units at national, ministerial and provincial levels. These units must be reoriented for working in a concerted effort under a consistent plan. In addition, restructuring must be redirected towards decentralization to the provincial level. It is important to set up an annual operational plan which functions as an effective coordinating mechanism. This would enable health and other relevant organizations to collaborate in the work towards achieving decentralization.

Moreover, an efficient evaluation system with clear indicators and impact targets must be set up. An annual follow-up mechanism and evaluation process must

be implemented so that refinement of the plan and strategic adjustment will be possible. (Department of Health Policy and Planning, 1998)

# The Alternatives to Select An Approach

Even though distribution of public and private hospitals has improved, problems concerning quality of services and inequity of health services remain a concern. Hospitals, medical personnel, and medical equipment are still concentrated in Bangkok and major cities. Thus, it's significant to develop the capacity of community health workers in rural areas to improve the quality and reduce the inequity of health service (Department of Health Policy and Planning, MoPH, 1998)

More specially, the management of health personnel is concerned with:

- Determining the most appropriate skills for each specific job; answers to the questions:
  - 1. What is our current situation for situation?
  - 2. What do we want the future situation to be?
  - 3. What might inhibit us in improving the situation?
  - 4. What actions should we take to achieve our objectives?

Adequate answers to these questions require that a broad range of environmental information be analyzed and that the knowledge and experience of many organizational managers be marshaled and utilized. Such a broad and comprehensive process intrinsically requires that a systems viewpoint be adopted and that a systems-oriented process be implemented. A systems-oriented process is one

that focuses on overall organizational effectiveness within the context of conflicting sub-unit objectives. It also motivates "strategic system planning," in which the real, or underlying causes of symptoms are identified, and the identification of opportunities, which are often suggested by organizational problems.

A system of plans is the planning product, or output, which is sufficiently complex to enable the organization to cope with and influence the future environment.

A planning process is a systematic procedure for producing adaptive plans in an effective and efficient manner in a situation that involves many individuals, parochial interests, and conflicting personal objectives.

A decision subsystem represents a way in which the organization can explicitly consider the choices that are often only implicit in planning. A planning-management subsystem permits the overall planning system to be managed in the same way as other organizational activities are managed.

The organization's information system, as well as the organization itself, must be designed to facilitate, and not deter, effective planning. Organizations and information systems primarily designed to support the efficient operations of the organization are generally not well equipped to support planning. Therefore, new organizational and informational concepts must be applied if planning is to be facilitated by these elements of the organization.

# **Justification to Select Approach**

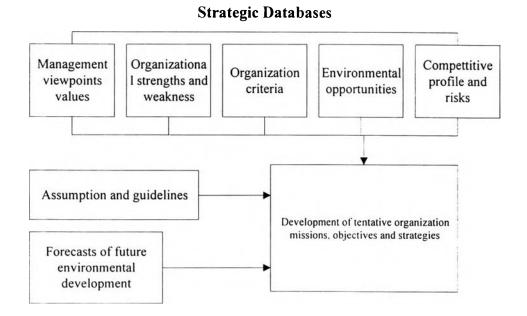
The health center personnel are the health staff in the community responsible for people's health care. There are 3-4 persons in each health center. Most of them graduated a professional diploma (but lack of sufficient disciplines. And since many job functions have been assigned to each person including the routine work in nursing care and health service and since the center is open 24 hours. However, for people's quality of life, quality in Primary Health Care is required. Health personnel should develop their capacity in community work such as creating The Health Technician position in health centers by training one person with a bachelors degree for academic work in the health centers. But there are problems in unclear job descriptions which frequently mix functions in actual practice and in the development of only one person which has little value in improving the situation). MoPH has set policy to continue to develop health technician personnel. Training curriculum might be formulated continuous education for health centers staff to improve specific techniques or knowledge might be provided. These alternative would be a more appropriate method for health centers than the first because it is more effective in increasing the quality of all health center personnel through training or education. And in the procedure to manage personnel for training or education, there must be monitoring and evaluating. But in Chon Buri health personnel management in training or education is not functional (and does not cover the lower levels). Health center personnel have fewer development opportunities than other health personnel with higher levels of education (Onwan Chutikorn, 1998). So, in departmental planning, there should be determined

strategies which are functionally integrated with the health personnel management planning process is significant in producing good plans for successful implementation.

# The Strategic Management and Planning Approach:

The primary mechanisms through which the first substantive issue of management and planning, the current situation assessment, is addressed. This is important because the development of such managing information cannot be readily made by staff specialists. For instance, an assessment of the important organization strengths and weakness, if it is to be useful in planning, must result from discussion, negotiation and argument among representatives of various interest groups within the organization. It is strength weakness assessment is not so accomplished, it is likely to have little compact.

Figure 2.4 Substantive Strategic Planning Process



Source: Grant, John H. (1975)

The Application of Strategic Planning

This study refers to reference from The Applied Strategic Planning Model

(Goodstein, 1993) as a guideline of the strategic planning approach shown in figure 2.3

The model involves nine sequential phases, with two of these phases (performance

audit and gap analysis) essentially two differentiated aspects of a single phase. The

model also includes two continuous functions (environmental monitoring and

application considerations), both of which are involved at each of the sequential

phases. The Applied Strategic Planning model places three of the sequential phases

(valves scan, strategic business modeling, and integrating action plans) in ovals rather

than rectangles to differentiate those elements that are different from the usual

approaches to strategic management and planning.

In the sequential steps, after gap analysis, there is a choice (represented in the

model by arrows). If the gap between the strategic business model and the performance

audit identified in the gap analysis can be readily resolved, the process can move on

the next phase – integrating action plans.

Applied Strategic Planning is the process by which the guiding members of an

organization envision its future and develop the necessary procedures and operations

to achieve that future. This vision of the organization's future state provides a direction

in which the organization should move and the energy to begin that move. Although

most organizations do some kind of long-range or strategy planning, usually these

planning processes are poorly implemented. The Applied Strategic Planning in this content contains the following phase: planning to plan, value scan, mission formulation, strategic business modeling, performance audit, gap analysis, both the vertical and horizontal integration of plans, contingency planning, and implementation. It also provides for applying the plan throughout the planning process and for continually monitoring the environment. (Goodstein, 1993)

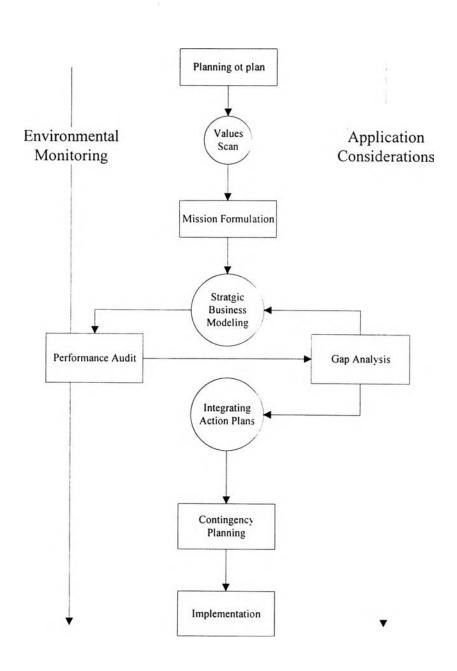


Figure 2.5 The Applied Strategic Planning Model

Source: Goodstein (1993)

One of the most striking bits of direct evidence that no strategic plan is in place is the lack of any clear-cut guidelines for deploying an organization resources, especially human resources. Such guidelines are a necessary outcome of a strategic planning process. Without them, each resource-allocation decision must be made in a vacuum, greatly stressing the system and all its members, because decision will be contradictory, unpatterned, and disruptive to a smooth flow of operations.

The need for strategic plan is necessary to use the data from many sorts of information within the organizations to be interpreted to the top managers of the organization to alert them about the risks to which the organization is exposed and referred by the acronym SWOT, an organization must look at its strengths, weakness, opportunities, and threats. The internal Human Resource Development professional can be invaluable in contributing to this analysis.

## 2.4 Conclusion

CPHO should offer the situation analysis, as one method to approach the systematic strategic planning for increase health center personnel academic development opportunities, to improve current situation, and to improve the role of The Personnel Development staff in terms of providing good implementation plan for personnel academic development. The outcome of systematic strategic planning in providing good implementation will be a tool to evaluate the efficiency of Chon Buri human resource management.

Interestingly, the whole people-planning redesign also has helped the organization identify the gaps in its human resource systems and processes – such as reward systems, performance systems, and training and development systems. The Personnel Development Sector now has a new agenda for the next three years as a result. For example; it's implementing a compensation and benefits structure review, and updating its executive – exchange process and its training-and-development agendas bases on the needs of personnel and their organization.

And in present, the new way of the 8th Socio-Economic Policy Plan addressed human resource development which determine the direction of human resource management for each sub-organization and increased human resource's visibility as a strategic partner. To be sure, the management no longer can run efficiently without the appropriate strategies to implement, and conversely. Human resource can't action correctly unless it understands what the stakeholder needs and plans are. But human resource sector also has strengthened its own internal focus since it almost demands a partnership between the organization–planning process and the human resource systems (Hayes, 1992).

#### References

- 1. Adit Laxiuthai, and Connley, T.J. Planning and public health. <u>Journal of Demography</u> 12, 31-43. (1996).
- 2. Butler, R. <u>Designing Organizations: A decision-making perspective</u>. London and New York: Routledge, (1991).
- 3. Craig, J.C., and Robert, M.G. Strategic Planning. London: Kogan Page, (1993).
- Cassels, A. <u>Aid instruments and health systems development</u>: an analysis of <u>Current practice</u> 11, 354 – 368. Health Policy and Planning, (1996).
- Conn, C.P., Jenkins, P., and Touray, S.M. Health Policy and Planning:
   Strengthening health management: Experience of district team in the Gambia.
   A Journal on Health in development 11, 64-71. (1996).
- 6. Department of Policy and Planning, MoPH. Ministry of Public Health and Health

  Policy and Planning. Nontaburi: Ministry of Public Health, (1998).
- 7. Dyson, R.G.(1990). Strategic Planning. West Sussex: John Wiley & Sons.
- 8. Fogg, C.Davis. <u>Team-Based Strategic Planning: A Complete Guide to Structuring, Facilitation, and Implementating the process.</u> New Yourk: Amacom, (1994).
- 9. Goodstein, L., Nolan, T., and Pfeiffer, J.W. <u>Applied Strategic Planning</u>. New York: McGraw-Hill, (1993).
- 10. Johnson, G., and Scholes, K. Explore Corporate Strategy: Text and cases. third edition. Printice-Hall, (1993).