

## Research Article

# Leadership Development and Functioning in Primary Health Care in Peja

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## Abstract

Leadership development is seen as central to the modernization agenda of the NHS. The purpose is to evaluate the managerial behaviors of managers of health institutions (MF), which refer to the following skills: motivating others, delegating tasks, planning, communicating, encouraging and decision-making. This paper reviews the evidence concerning leadership development in nursing. Two major concepts at the core of these evolving roles are innovation and interdependency. Reflective practice, continuing education, and other educational efforts can target these concepts as a way of augmenting knowledge, skills, and abilities in care coordination and clinical leadership the conclusion reached is that leadership is only one element in the changes that need to occur in health care.

**Aim:** The purpose is to evaluate the managerial behaviors of managers of health institutions (MF), which refer to the following skills: motivating others, delegating tasks, planning, communicating, encouraging and decision making.

**Material and method:** The research is of a quantitative type. Through this research, we will reflect the real state of leadership being explored through the Health Personnel Survey, where this type of observation is structured on the basis of certain criteria for leadership in primary care. Data collection technique - evaluation of closed and open anonymous type questionnaire. Data analysis techniques involve collecting numerical information using frequency, percentage statistical methods. The target group was MFMC health personnel in Peja. The total number of subjects in the research was 40. Activities undertaken to increase the knowledge of the PC nurses.

The Center for Continuing Vocational Nursing Education, established by the Ministry of Health, is tasked with developing and organizing continuing education for nurses, which represents another achievement of the Health Ministry (HM) towards the development of human resources in the health sector.

**Purpose of the research:** The main purpose of this research is to identify the causes of injuries caused by firearms, assessment of vital signs, severity of injuries at the system level, geographical distribution, emergency medical care in pre-hospital and hospital settings, increasing the survival of victims of transport, the accident site to the hospital and reducing the morbidity, disability and mortality of victims.

**Keywords:** Leadership; Nursing leadership; Development; Primary care; Health; Institutions

## Introduction

Primary Health Care principles internationally; the development of the progressive Primary Health Care movement; and experimentation with new models of health service delivery and primary care. Since 1999, Kosovo has made significant progress in developing health services. The latest report "Tracking Universal Health Coverage: The First Monitoring Report" (WHO and World Bank Group 2015) shows that we are far from achieving it [1]. The report, which is the first of its kind to measure health coverage and financial protection to assess countries' progress towards Universal Health Coverage (UHC), looked at the global approach to basic health services in 2013 including family planning, antenatal care, children, immunization of children, antiretroviral therapy, treatment of tuberculosis and access to clean water and sanitation.

WHO and the World Bank Group (2015) "recommend that countries pursuing UHC should aim to achieve a minimum of 80% population coverage with basic health services and that everyone everywhere should be protected from catastrophic and depleting payments health [1].

Health worker shortages and inequities in resource distribution; shortcomings of political, public sector and medical /health leadership; and a complex and protracted health transition. The Action Plan (2010-2014) is a strategic document that informs all health institutions, donors and other partners in the health sector on the key priorities of the MF. Strong management and leadership competencies have been identified as critical in enhancing health system performance [2,3].

The AP is an operational document aimed at detailing the strategic priorities, results and actions, through which the SSH will positively impact the development of the health system and health status of the population of Kosovo Findings suggest that the sub-district is located within a hierarchical governance context, with performance monitored through the use of multiple accountability mechanisms including standard operating procedures, facility audits and target setting processes [3,4].

While our data suggest that gains in leadership were emerging, our experience is of a system struggling to shift from a hierarchical to a more relational understanding of how to enable improvements in performance, and to implement these changes in practice [5-7].

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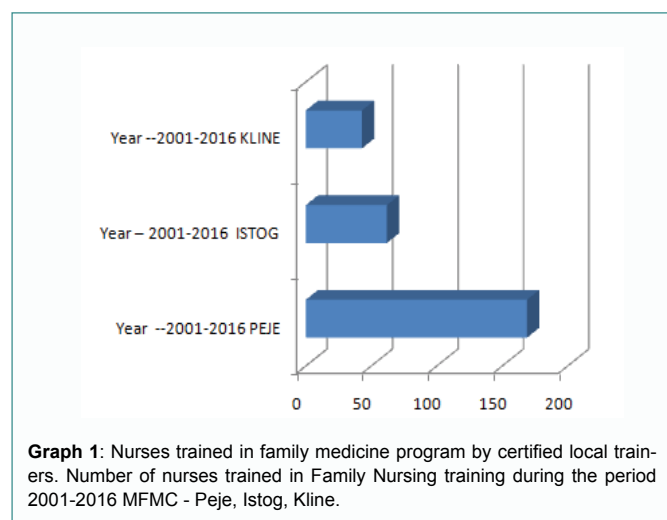
## Material and Methods

The research is of a quantitative type. Through this research, we will reflect the real state of leadership being explored through the Health Personnel Survey, where this type of observation is structured on the basis of certain criteria for leadership in primary care. Data collection technique-evaluation of closed and open anonymous type questionnaire. Data analysis techniques involve collecting numerical information using frequency, percentage statistical methods [8].

The target group was MFMC health personnel in Peja. The total number of subjects in the research was 40. Activities undertaken to increase the knowledge of the PC nurses. The Center for Continuing Vocational Nursing Education, established by the Ministry of Health, is tasked with developing and organizing continuing education for nurses, which represents another achievement of the Healthy Ministry (HM) towards the development of human resources in the health sector.

## Results

The data are taken from the sources of the UCCK archive - Primary care Peja (Graph 1).

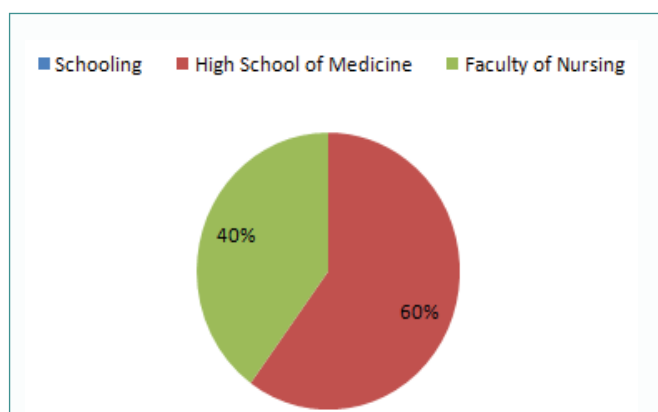


So far in 2016, in Peja this training is held 2 hours a year for 6 months and they have the right to be sent to training for 10-12 nurses per year which means sending maximum 5-6 nurses to training for each organization. 6 months training. These and other initiatives taken by the central level demonstrate the commitment of the Health Ministry (MSH) to meet one of the objectives of the Kosovo health strategy.

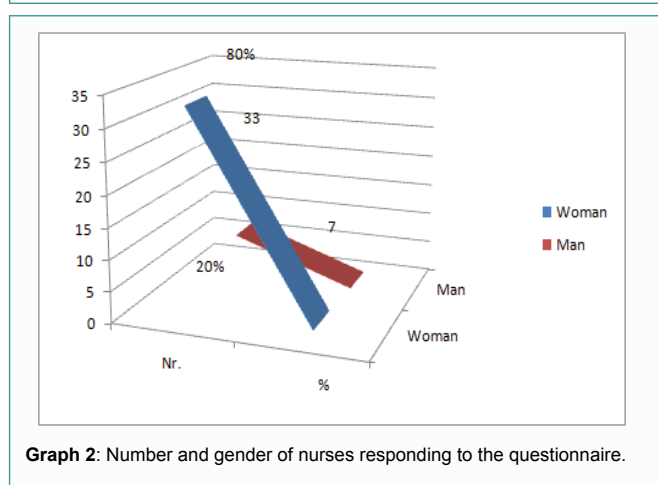
We can freely say that Kosovo today is not starting from the zero point, as significant progress has been made in recent years. Providing quality and accessible health services based on the needs of the population will be a challenge (Figure 1) (Graph 2).

### Results of Questionnaire No.1

Leadership Development and Functioning at MFMC Peja Out of 40 (100%) of the research subjects give the following results from the answers to the questionnaire: From the first question, - To what extent do you know about the concept of management, 23 (46%) of the participants answered that they have a lot of knowledge about management, whereas 10 (34%) have little knowledge of the concept of management, and 7 (20%) have no knowledge of management.



**Figure 1:** School qualification. Of the 40 (100%) subjects, 24 (65%) were in medical high school, and 16 (35%) were in the faculty of nursing.



### How motivated are you by managers?

Of the 40 respondents 10 (25%) agree that they are highly motivated by managers, 10 (25%) responded that they are slightly motivated by managers, while 8 (20%) think that they do not sufficiently motivate health workers. Whereas, only 12 (30%) of the subjects answered that managers do not motivate health workers.

How satisfied are you with the working conditions? Out of 40 respondents, 20 (50%) are not very satisfied with working conditions, 9 (21%) are slightly satisfied with working conditions, 7 (18%) are satisfied with working conditions, 4 (11%) are not satisfied with working conditions at all.

### How much are senior management nurses trained on?

Of the total number of respondents 17 (42%) of them answered that they have no management training, whereas 11 (34%) of the respondents think that there is little management training, and 6 (12%) think that are not trained enough to manage, and only 6 (12%) say that many are trained to manage.

### How many nurses participate in decision making?

From this question it results that 16 respondents (39%) answered that few participate in decision making, 12 (35.6%) are not very involved in decision making, 8 (14.4%) are not involved in decision making, while 6 (11%) of the subjects think that they are very involved in decision making.

### Do you collaborate with staff in decision making?

Only 10 respondents (25%) from no. Overall, 40 (respondents) say that few cooperate in decision making, 10 (25%) do not cooperate much in decision making, 10 (25%) do not cooperate in decision making, while 10 (25%) of the subjects think that many cooperate with staff in decision making.

**Question 2:** Developing and Functioning Leadership in Primary Health Care - Peja.

### Question: 1. What do you think would contribute to the effectiveness of being a family nursing leader?

This chart shows that 50% of respondents respond that discipline and awareness at work contributes to the efficiency of being a family nursing leader and 20% to working with colleagues.

### What are the problems you encounter most when exercising your position as a nursing leader?

Chart 2 shows that 54% of respondents say that the problem when exercising their position as Head of Nursing is the lack of medicines, and 46% say the problem lies because we do not have access to decision-making.

### How will you overcome the problems that may arise during work?

From this graph. It turns out that 60% of the respondents think that problems at work are overcome by professional development in the workplace and 40% think that they are overcome by proper cooperation with colleagues.

### What should be done from your position to raise the level of quality of health care services in Primary Care?

From this graph. We see that the results of the question: What to do from your position to raise the level of quality of health services in Primary Care, 29% of respondents think Extra Training, 25% Management Motivation and Salary high 46% of participants think. Is management an innate or acquired quality? Respondents think that management is a quality born 25% and gained 53%.

### What is the difference between a manager and a leader?

We see that 74% of respondents see managers as leaders and 26% as leaders.

### Do you think wage increases affect labor productivity?

As a result, 80% of respondents think that wage increases affect labor productivity and 20% do not.

### Do you think a good manager can detect and eliminate service vulnerabilities?

From this answer we see that 86.60% of respondents think that a good manager can detect and eliminate service weaknesses while 13.40% disagree.

### Should managers participate in the development of human resources policy?

From this answer we see that 72% of the respondents think that managers should participate in the development of human resources policy while 28% do not have this opinion.

### Do you think that the manager's work affects the achievement of the planned objectives?

From graph. We see that 80% of the respondents think that the manager's work affects the achievement of the planned objectives, while 14% say that it does not.

## Discussion

Relational leadership-associated with practices such as mentoring/coaching others, and enabling the relationships and commitment needed to work together to achieve common purpose-has been identified as important in strengthening the performance of health systems.

The First Monitoring Report" (WHO and World Bank Group 2015) shows that we are far from achieving it [1]. The report, which is the first of its kind to measure health coverage and financial protection to assess countries' progress towards Universal Health Coverage (UHC), looked at the global approach to basic health services in 2013 including family planning, antenatal care, children, immunization of children, antiretroviral therapy, treatment of tuberculosis and access to clean water and sanitation [9-11].

In our experience, the ethos of action learning, on the other hand, is able to generate the rich, context specific lessons not only about what may be needed to strengthen leadership in similar settings but also what sort of effects the LD response might be generating [8,12-16].

## Conclusion

Family medicine leadership should be provided with institutional support (either at central or local level) regarding the services they provide to the population. Of course, by improving the conditions of health workers, health services to patients in general will also improve. But very important is the development of an employee performance appraisal system. Throughout this research we understand that health workers have the feeling that their evaluation should be done by their peers, rather than related to the management action of an organization.

From this research we also understand that improving the management of health systems requires cross-sectoral efforts by all stakeholders at all levels. Nurses, who provide most healthcare services in collaboration with colleagues in both the health and non-health sectors, have an important role to play in this process. It must be ensured that nursing is continually changing in response to the demands of the time in order to improve the quality and quality of care provided through professional management through proper management, access to health policy and decision making. From the results obtained from this research we also understand that more should be invested in motivating nurses for superior education and job classification and pay by education grade.

## Recommendation

Proper management by the nurses as well as the performance of duties with moral, ethical and professional responsibility having in mind the clear job description and the delegation of responsibilities. Work harder on schooling and salary levels. Provide better working conditions, do not miss Emergency and elementary health services. Work more on the part of the Ministry of Health for health insurance. Provide funds from Municipalities and Government for setting up the Principal Center of Family Medical Care Etc.

Improving the health status of the population and the quality of health care services improving management and leadership at all levels of the health system. Improvement of existing resource management

and quality of services related to quality of care improvement and Strategic Goals.

Functional reorganization and completion of existing infrastructure in a comprehensive priority focusing on improving key health services, emphasizing prevention and having a positive impact on the health status of the population of Kosovo.

The healthcare network and its infrastructure should function according to the prioritized needs of the population, Strengthen capacities in GPs of family medicine and maternal and child health. Improve the healthy lifestyle of the most vulnerable groups of the population. Reduce the burden of chronic non-communicable diseases and life-threatening diseases, reduced infectious disease burden. Development and implementation of the Health Information System Develop a modern, quality, transparent and accountable public health sector that responds to the needs and demands of the population and able to manage citizens' contributions efficiently, delivering optimal health outcomes that can be regionally comparable and consistent with the requirements for European integration.

In conclusion, this experience suggests that processes of relational LD can promote the relationships necessary for effective team engagements, can encourage actors to trust each other to exercise productive discretion and can enhance the ability of managers to engage with their colleagues in a more supportive way.

## Disclosure

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