

MASTER HEALTH SERVICE MANAGEMENT COMPETENCY FRAMEWORK



ACHSM Australasian College of
Health Service Management

Better leadership. Healthier communities.

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Introduction

The Australasian College of Health Service Management has developed this Framework for the guidance of all of its programs, to inform members of the College on the competencies¹ they need to master and to guide employers and policy makers on the competencies they should consider when employing, leading, managing and mentoring health service managers. This Framework builds on the work of the Global Consortium hosted by the International Hospitals Federation (2015). This version was approved by the ACHSM Board at its meeting on August 31, 2016.



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Background

Why a Competency Framework is necessary

Due to rapid developments in healthcare knowledge, methods and technology over the past half century healthcare organisations have increased considerably in size and complexity and are now capable of achieving a very wide range of favourable outcomes for consumers. Healthcare now consumes a greater proportion of national expenditure than ever before and healthcare providers are required to achieve compliance with complex sets of regulatory and care standards. As a consequence governments, the community and health service funders are rightly demanding a high level of competency from the professional managers charged with the responsibility of leading and managing individual healthcare services, large healthcare organisations and the overall health system. To meet these demands leaders and professional managers of healthcare services must achieve and demonstrate a high level of competency in their practice. The range of competencies required by leaders and managers can alter quickly in the rapidly changing healthcare environment and this necessitates frequent review of the competencies they are required to demonstrate by consumers, funders and, governing and regulatory bodies. This framework provides a contemporary and comprehensive list of competencies required of healthcare leaders and managers.

In recognition of the complexity and cost of healthcare a Global Consortium, under the guidance of the International Hospital Federation (IHF), is urgently calling on governments and the international healthcare community to recognise that healthcare performance and improvement are significantly dependent on the existence and quality of professional management of healthcare organisations. To assist this recognition the Global Consortium developed and released a set of competencies for health service leaders and manager which recognise the contemporary nature of health services management (International Hospital Federation, 2015).

This Framework

This framework is based on competencies compiled by the Global Consortium. It articulates the competencies necessary in those persons charged with the management and leadership of contemporary health services within Australia, New Zealand and Hong Kong. It contributes to the professionalisation of health service management by providing an authoritative, convenient and comprehensive description of the competencies health service managers and leaders need to be effective in their role. The modifications to the Global Consortium framework have

been made to reflect local and national priorities in relation to healthcare management and to change language and expression to suit users in the countries from which the ACHSM draws its members.



Figure 1 Relationship between Domains

The ACHSM Master Competency Framework captures the core competencies that are considered important for health service managers and leaders. This Framework, summarised in Figure 1, uses the five Domains of health service management competency adopted by the Global Consortium and the IHF. Figure 1 illustrates the relationship between the five Domains and highlights that the Domain of Leadership is associated with all the other domains. This framework is based on work by Stefl (2008).

In this paper there is one table for each Domain. These tables include a number of sub-Domains. Each of the proposed competency statements (column 2) in the tables are either adopted unchanged from the IHF competency, modified to capture contemporary or local concepts or are new competencies based on the ACHSM Competency Framework Committee's identification of gaps in the IHF list of competencies.

The statements include a description of the elements that make up often complex competencies and may include references to *knowledge, skill, ability, and personal characteristics*. Because of these complexities, some statements may need to be separated into their individual elements in the development of assessment tools. In addition, a competency statement in one Domain that has a particular focus, may consist of similar skills, abilities and knowledge to a competency statement in another Domain with a different focus. Consequently, in a number of cells cross-references are provided to identify similar competency statements. These cross-references may not be exhaustive in all circumstances where similarities occur.

In the interests of brevity and clarity words such as 'health service manager', 'manager', 'leader', 'health', 'healthcare', 'aged care', 'hospitals', etc., are not included in many of the competency statements as the reference to these concepts are assumed. While many of the competencies are generic to managers and leaders in other industries, the unique contribution of this framework is to bring together the combination of competencies and the emphasis within these competencies of the skills, knowledge and attributes necessary for leaders and managers in the health industry.

The intended use of the competency framework

The ACHSM Master Competency Framework is intended for use within, and by, health services, organisations and systems in Australia, New Zealand and Hong Kong. It is intended to be the basis from which individual competency tools can be developed by the ACHSM for use across the different works of the College. It is not, in itself, a measurement tool.

In the documents reviewed during the development of this Draft Master Competency Framework, a number of competency statements appear to apply to, and are worded for, a specific level of management.¹ The competency statements in this draft are intended to apply across all levels of management and for a range of applications with the College. For this purpose, the term 'health unit/organisation/system' (U/O/S) is included in several competency statements. This enables individual tools to be developed, based on this Master, which will be applicable to a specific level of management. For example, a competency statement used at the Fellowship level within the College may make reference to the health 'system' whereas a competency tool used at the emerging manager level may make reference to the health 'unit'.

Individual tools will be developed to target specific ACHSM groups (e.g., emerging leaders, middle managers, Fellows etc.) in the future. Where these individual tools are developed within the College they will:

- be approved by the appropriate Committee of the ACHSM Board;
- maintain the established **Domain** and **Short Title** framework;
- contain individual behavioural statements worded appropriately for the particularly management level, which may mean that some competencies in the Master Framework could generate more than one behavioural statement in an individual tool; and

¹ For example, the Global Consortium (International Hospital Federation, 2015) framework makes references to the 'health system', the ACHSM tool (Australasian College of Health Services Management, 2010) to the 'unit' and the MCAP tends to refer the 'organisation'. This suggests that the IHF competency statements are intended to apply to very senior management; for example, it includes the statement 'Create and maintain a system of governance that assures appropriate oversight to the organisation'. On the other hand the competency statements developed by the Management Competency Assessment Project (MCAP) (Liang & et al, 2015) tends to apply to junior or middle management; for example it includes the competency statement 'Interprets basic financial statements (G2.3)'.

- use qualifying words such as 'basic', 'moderate', 'comprehensive', 'expert', to apply to the specific target group, for example, 'demonstrates **basic** budgeting skills', 'demonstrates **comprehensive** understanding of all organisational governance processes' so as to reflect the focus of the manager/leader that that level.

The following five tables each contain the sub-Domains, short title and competency statements for each of the five Domains.



Table 1 Leadership Competency Statements

COMPETENCY DOMAIN: 1. LEADERSHIP	
Short title	Competency statement
Sub-Domain	1.1. Leadership Skills and Behaviours
Articulates mission	1.1.1. Articulates and communicates the mission, vision, objectives, values and priorities of the Unit /Organisation /Sector (henceforth U/O/S) to internal and external entities [see also 4.2.2, and 4.2.3]
Encourages staff commitment	1.1.2. Encourages a high level of commitment from staff to the U/O/S's mission, vision, objectives, values and priorities
Balances competing organisational priorities	1.1.3. Achieves a balance between potentially competing U/O/S and professional values and priorities [see also 2.1.5]
Exhibits flexible leadership style	1.1.4. Exhibits collective and collaborative leadership by adapting leadership style to suit the situation
Exhibits leadership qualities	1.1.5. Demonstrates leadership qualities (for example: focus, perseverance, energy, commitment, enthusiasm, tolerance of ambiguity and calmness under pressure)
Encourages decision-making	1.1.6. Encourages decision-making through consultation, problem analysis, promotion of solutions and new ideas [see also 4.1.2, 4.1.3]
Sub-Domain	1.2. Influences Organisational Climate
Creates trust, transparency and service improvement	1.2.1. Creates an organisational climate built on respect, mutual trust and transparency [see also subdomain 3.8, 4.1.2 and 4.1.4]
Influences decision makers	1.2.2. Favourably influences decision makers [see also 4.1.1]
Demonstrates accountability	1.2.3. Holds self and others accountable to achieve and surpass U/O/S goals
Sub-Domain	1.3. Leading Change
Promotes learning and improvement	1.3.1. Promotes ongoing learning and improvement in the U/O/S
Leads change	1.3.2. Responds to the need for change and leads the change process using evidence-based methods
Encourages diversity of thought	1.3.3. Encourages diversity of thought to support innovation, creativity and improvement

Table 2 Health and Healthcare Environments Competency Statements

COMPETENCY DOMAIN: 2. HEALTH AND HEALTHCARE ENVIRONMENT	
Short title	Competency statement
Sub-Domain	2.1. Health Systems and Organisations
Understands the regulatory environment	2.1.1. Understands and considers the role and function of government and of regulatory, professional and accreditation agencies
Understands political and social environment	2.1.2. Understands and considers the impact of external factors (political, social, technical and economic) on the U/O/S
Understands how the health system works	2.1.3. Understands and considers the impact of the wider health system structure, funding and organisation on the health U/O/S
Understands and abides by relevant legislation	2.1.4. Understand and abides by relevant legislation and regulations that apply to the U/O/S
Balances competing health system priorities	2.1.5. Effectively balances the competing healthcare priorities and interrelationships across issues such as access, quality, safety, cost, resource allocation, accountability, competition, care setting, community need and professional roles [see also 1.1.3]
Assesses healthcare trends	2.1.6. Assesses the current performance of the U/O against benchmarks and best practice and compared to the wider health system
Uses quality monitoring systems	2.1.7. Understands and uses monitoring systems, that incorporate quality indicators, to identify opportunities for continuous improvement, to set and monitor performance standards and to improve quality [see also 3.8.1, 3.8.2, 5.1.4]
Encourages community participation	2.1.8. Encourages/establishes engagement and networks to enable community and network participation in the health U/O/S
Sub-Domain	2.2. Health Workforce
Manages health workforce	2.2.1. Manages the health workforce (volume, supply, skill mix, scope of practice) to deliver high quality healthcare for the U/O/S
Manages inappropriate behaviours	2.2.2. Manages the workforce to protect staff from bullying, harassment and other inappropriate behaviours
Sub-Domain	2.3. Partnering with consumers
Promotes cultural safety and Indigenous rights	2.3.1. Promotes cultural safety and Indigenous rights with respect to all treaty and/or partnership arrangements
Partners with consumers	2.3.2. Partners with consumers (including family and carers) in the planning, designing and monitoring of care
Promotes the preferences of population groups	2.3.3. Promotes the preferences of both majority and minority communities, particularly Indigenous groups, in relation to health practices and priorities
Responds to diverse health needs	2.3.4. Creates initiatives and approaches that appropriately reflect the diverse health needs of the community

COMPETENCY DOMAIN: 2. HEALTH AND HEALTHCARE ENVIRONMENT

Short title	Competency statement
Sub-Domain	2.4. Population Health
Demonstrates commitment to improving the health of the community	2.4.1. Pursues goals and objectives for improving the health of the community; which demonstrate an understanding of the social determinants of health and of the socioeconomic environment [See also sub 5.4.1 and 5.4.2]
Uses data to control threats to health	2.4.2. Uses organisational, community, national and global public health data for surveillance and control of threats to the health of the community.

Table 3 Business Skills Competency Statements

COMPETENCY DOMAIN: 3. BUSINESS SKILLS	
Short title	Competency statement
Sub-Domain	3.1. Evidence Informed Decision-Making
Anticipates the need for evidence	3.1.1. Anticipates the need for evidence and data (including new information) for healthcare and business decisions [see also 3.2.1, 3.2.2]
Uses data for decision making	3.1.2. Sources, understands and evaluates a variety of data and information (both quantitative and qualitative) <i>from internal and/or external sources</i> to support effective business, and healthcare decisions [see also 3.2.1, 3.2.2]
Sub-Domain	3.2. Financial and Resource Management
Uses financial management	3.2.1. Understands, effectively uses and effectively communicates financial data, statements and reports [see also 3.1.1, 3.1.2]
Uses financial principles	3.2.2. Understands and effectively uses key accounting principles and financial management tools such as financial plans and measures of performance (e.g. performance indicators) [see also 3.1.1, 3.1.2]
Creates and controls budgets	3.2.3. Creates and controls operational and capital budgets to meet health U/O/S goals
Manages resources	3.2.4. Plans, organises, effectively uses and monitors the [non-financial] resources of the organisation to ensure optimal health outcomes and effective quality and cost controls [see also 5.1.2]
Sub-Domain	3.3. Human Resource Management
Plans workforce	3.3.1. Plans for an appropriate workforce at the health U/O/S level, within available resources
Manages human resources	3.3.2. Manages U/O/S human resource functions and processes within the strategic operational framework
Promotes staff performance	3.3.3. Promotes staff performance through recognition of staff development needs and working conditions
Manages staff well-being	3.3.4. Creates an environment that monitors and supports staff health, wellbeing and satisfaction and responds appropriately to stress in the workplace
Sub-Domain	3.4. Organisational Dynamics And Governance
Uses relevant theory	3.4.1. Effectively applies knowledge of organisational systems theories and behaviours
Manages external changes	3.4.2. Interprets public policy, legislative and advocacy processes within the U/O/S
Understands governance	3.4.3. Understands, effectively navigates and manages within the corporate governance structure and responsibilities of the health U/O/S
Understands leadership within governance	3.4.4. Understands the role of leadership within the U/O/S governance structure
Creates appropriate governance structure	3.4.5. Creates and maintains a system of corporate governance that assures appropriate oversight of the U/O/S
Sub-Domain	3.5. Planning and Marketing
Leads strategic and business	3.5.1. Leads the development of key planning documents,

COMPETENCY DOMAIN: 3. BUSINESS SKILLS

Short title	Competency statement
planning	including corporate and strategic plans, business plans, service plans and business cases for new services
Develops strategic objectives	3.5.2. Develops and monitors operating unit strategic objectives that are aligned with the mission and strategic objectives
Evaluates actions against plans	3.5.3. Evaluates whether a proposed action aligns with the U/O/S business/strategic plan
Plans for business continuity	3.5.4. Plans for business continuity in the event of disasters [See also 3.7.3]
Sub-Domain	3.6. Information Management
Uses data to assess performance	3.6.1. Uses data sets to assess performance, establish targets, monitor indicators and trends, and determine if deliverables are met
Applies privacy protection	3.6.2. Understands and applies privacy and security requirements to protect private information
Uses health information	3.6.3. Promotes the effective management, analysis and communication of health information [see also 4.2.2]
Sub-Domain	3.7. Risk Management and Clinical Governance
Manages corporate risk	3.7.1. Effectively applies risk management principles and programs (such as risk assessment and risk mitigation) for corporate risk management and business continuity.
Manages clinical risk	3.7.2. Effectively applies risk management principles and programs (such as risk assessment and risk mitigation) for risk management within clinical care
Manages workplace risk	3.7.3. Effectively applies risk management principles and programs (such as risk assessment and risk mitigation) for workplace risk management [See also 3.5.4]
Understands insurance management	3.7.4. Understands the principles of, and manages the U/O/S need for, insurance
Sub-Domain	3.8. Quality and Safety
Implements quality and safety programs	3.8.1. Develops, implements and evaluates quality improvement and patient safety programs within the U/O/S according to national/state/local initiatives [see also 5.1.4, 2.1.7]
Measures consumer satisfaction	3.8.2. Apply tools to measure consumer (patients and carers) experience for continuous improvement U/O/S [see also 5.1.4, 2.1.7]
Sub-Domain	3.9. Project, Supply Chain and Facilities Management
Manages supply chain	3.9.1. Effectively manages supply chain from suppliers to end users to achieve timelines and efficiency of delivery, warehousing, and distribution in a cost effective manner
Manages projects	3.9.2. Manages U/O/S projects within budget and timelines
Manages supply contracts	3.9.3. Understands how to manage contracts with external suppliers (includes the preparation and evaluation of tenders) that comply with organisational policy and legal requirements
Manages facilities	3.9.4. Ensures that facilities are fit for purpose (including an understanding of the role of the environment of care in promoting wellness) and are legislatively compliant

Table 4 Communications and Relationship Management Competency Statements

COMPETENCY DOMAIN: 4. COMMUNICATIONS AND RELATIONSHIP MANAGEMENT	
Short title	Competency statement
Sub-Domain	4.1. Relationship Management
Maintains effective stakeholder relationships	4.1.1. Establishes, develops and maintains effective interpersonal relationships, using collaborative techniques, with internal and external stakeholders [see also 1.2.2]
Works effectively in a team	4.1.2. Builds teams and works collaboratively, and effectively, with people from a wide range of professional and social backgrounds and who are both internal and external to the organisation [see also 1.1.6, 1.2.1]
Delegates effectively	4.1.3. Delegates effectively by empowering others
Values diversity	4.1.4. Values and respects diversity within individuals and groups [see also 1.2.1]
Sub-Domain	4.2. Communication Skills
Listens and responds	4.2.1. Listens with understanding and empathy and responds appropriately, both verbally and non-verbally, with confidence
Demonstrates appropriate verbal and presentation skills	4.2.2. Verbally and visually communicates data and information that is factual, credible and understandable to the target audience (both internal and external) [see also 1.1.1, 3.6.3, 4.2.1]
Demonstrates effective writing skills	4.2.3. Communicates succinctly, clearly and appropriately (in language, style and format) in a manner that is appropriate for both audience and purpose [see also 1.1.1, 3.6.3]
Demonstrates effective public relations skills	4.2.4. Demonstrates effective public relations skills through appropriate communications with the media and external organisations
Applies marketing tools and principles	4.2.5. Applies marketing principles and tools to develop marketing strategies that are appropriate to the needs of the community and the organisation
Sub-Domain	4.3. Conflict and Problem Management
Manages conflict	4.3.1. Manage conflict through mediation, negotiation and other dispute resolution techniques
Manages conflict of interest	4.3.2. Manages conflict of interest situations as defined by organisational bylaws, policies and procedures
Demonstrates problem solving skills	4.3.3. Demonstrates problem solving skills

Table 5 Professional and Social Responsibility Competency Statements

COMPETENCY DOMAIN: 5. PROFESSIONAL AND SOCIAL RESPONSIBILITY	
Short title	Competency statement
Sub-Domain	5.1. Professionalism
Demonstrates commitment to policy advocacy and capacity	5.1.1. Advocates for policy changes, at the government, professional and organisational level that will enhance outcomes for individuals and communities [see also 5.1.1, 5.4.1 and 5.4.2]
Practices fiduciary responsibility	5.1.2. Practices due diligence to meet fiduciary responsibilities [see also 3.2.4]
Demonstrates commitment to competency, integrity and altruism	5.1.3. Demonstrates a commitment to competence, integrity, altruism and the promotion of the public good
Demonstrates commitment to quality and safety	5.1.4. Understands and promotes quality, safety of care and social commitment, in the delivery of healthcare [see also 3.8.1, 3.8.2, 2.1.7]
Sub-Domain	5.2. Profession and Professional Development
Demonstrates commitment to personal development	5.2.1. Demonstrates commitment to self-development including continuing education, networking, reflection and personal improvement
Demonstrates commitment to profession development	5.2.2. Demonstrates a commitment and contribution to advancing the profession of health management by sharing knowledge and experience [see also 5.1.1]
Demonstrates a commitment to developing others	5.2.3. Demonstrates a commitment to developing others by mentoring, advising, coaching, teaching and serving as a role model
Balances professional and personal accountability	5.2.4. Maintains a balance between personal and professional accountability, recognising that the central focus is the needs of the patient/ community
Sub-Domain	5.3. Self-Awareness
Knows own attributes	5.3.1. Uses self-assessment and feedback from others, to develop an awareness of one's own assumptions, values, strengths and limitations, and the impact these attributes have on communication and decision making, and on others
Displays emotional intelligence	5.3.2. Demonstrates self-control over own emotions and impulses
Sub-Domain	5.4. Social Responsibility
Understands social responsibility	5.4.1. Understands and considers the impact the U/O/S has on the wider community and environment [see also 2.4.2, 5.1.1]
Balances corporate and social responsibility	5.4.2. Balances the needs of the U/O/S with those of the wider community and the environment [see also 2.4.2, 5.1.1]
Demonstrates a commitment to ethical conduct	5.4.3. Demonstrates high ethical conduct, a commitment to transparency, and accountability for one's own actions and uses established structures to resolve ethical issues

Appendix 1: Table of Acronyms and Table of Definitions

Table 6 Acronyms

ACHSM	Australasian College of Health Service Management
IHF	International Hospital Federation
MCAP	Managerial Competency Assessment Partnership Confirmation Study – Australasia lead by La Trobe University
U/O/S	Health Unit/ Organisation/ System

Table 7 Definitions

Term	Definition
Business skills	The ability to apply business principles, including systems thinking, to the healthcare environment. (American College of Healthcare Executives, 2015)
Communication and Relationship Management	The ability to communicate clearly and concisely with internal and external customers, establish and maintain relationships, and facilitate constructive interactions with individuals and groups. (American College of Healthcare Executives, 2015)
Competency	Competence is context-dependent and is a statement of the relationship between an ability (in the person), a task (in the world), and the ecology of the health systems ... in which the tasks occur. (Epstein & Hundert, 2002)
Health and the Healthcare Environment	The understanding of the healthcare system and the environment in which healthcare managers and providers function. (American College of Healthcare Executives, 2015)
Health System/ healthcare system	This includes national, state, province, district or local health system. It applies to primary, acute, rehabilitation and long term care health services delivered as inpatient, residential or home based care. It applies to both health and the aged care systems and to parallel systems such as defence, immigration, justice and veterans.
Leadership	Health leadership has been defined in Australia to have five components: leads self, engages others, achieves outcomes, drives innovation and shapes systems. (Health Workforce Australia, 2013)
Professional and Social Responsibility	The ability to align personal and organisational conduct with ethical and professional standards that include a responsibility to the patient and community, a service orientation, and a commitment to lifelong learning and improvement (American College of Healthcare Executives, 2015). Social responsibility gives consideration to the impact of organisational decision making and behaviour on the wider community and environment (Brandao, Rego, Duarte, & Nunes, 2012).

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