

Embed Graduate Capabilities: Revisit Undergraduate Health Administration Education @ UiTM

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Abstract: The bachelor of health administration program at UiTM was extensively revised in 2012 and 2015, respectively. This meant to ensure that it effectively suits the challenging and dynamic environment of health services management. This study literally define the systematic approach to the revisit of the undergraduate health administration program within the faculty of business and management. It mentioned the method and pro-active measurement undertaken, objectively in recognizing and highlighting generic graduate capabilities within the program that suits current market needs. The study concludes that application of outcomes-based and engaging with related key stakeholders provide this study an opportunity to identify and promote critical capabilities needed by junior administrator to support the health services industries. Further, research is required on how such graduates employability model drawn based on the capabilities found have an impact on the performance of graduates finished their industrial training.

Key words: Employability, graduates capabilities, health administration, health management, drawn

INTRODUCTION

What is known about the study?: Ability to produce effective health administrator who demonstrate both generic and transferable skills across the unique world of health services is important for excellent work performance and outcome. Identifying which current capabilities are demanded and how best to achieve it through the postgraduate education programs for junior health administrator is challenging.

What does this study explore?: This study outlines a qualitative approach used for illustrating and embedding generic capabilities within undergraduate education for junior health administration position. Given the health care industry in Malaysia is expanding, employment of health services administration is expected to grow faster than average for all occupations, thus junior entry for the position may play a bigger role. It mentions the processes applied to engage with key stakeholders from related health industry and academia to reach an agreement of holistic capabilities for a degree program. This study cannot assume the findings will maximize the effectiveness in graduate's management skills but at least it is functional within the current health management market needs.

What implications of studies for practitioners?: The method proposes a guideline for embedding generic graduate attributes into the curriculum under faculty of business and management. This meant to equip graduates for junior health administration position to strategically manage constant change occurring in the health industry and health service context.

The bachelor of health administration: The Bachelor of Health Administration (BHA) at the University Technology MARA, Malaysia was initially established in 2007 through faculty of office management and technology as the first undergraduate program in Malaysia. The 2011-2015 UiTM strategic planning then witnessed BHA officially run by Faculty of Business and Management as the whole courses under origin faculty will be administered through this new entity. Without a doubt, the future of health administration program under the umbrella of business school able to provide comparative advantage in core management competencies and arguably better prepare graduates for careers in healthcare finance, marketing and management information systems. Health managers from all over Malaysia are not necessarily undertake the program, however, seeing the importance that the program could offer and in line with Malaysia's increased demand for improved health care services, the program aims to

provide the best knowledge and training for health administration in the country. In addition, given the health care industry in Malaysia is expanding, employment of health services administration is expected to grow faster than average for all occupations, thus junior entry for the health management position may require similar attention. However, despite high enrolments and industry support for the program, a recent external environmental scan including feedbacks from industry revealed a new set of demands for health services workers with greater emphasis on procurement, leadership and management, supply chain, law and ethics and workforce flexibility. Hence, a comprehensive graduate's employability model was considered timely.

Why graduates capabilities?: Transformation in management education in Malaysia has been a recurrent process for >7 years with greater emphasis on the outcomes of education. This outcome-based education is seen different to previous innovation as it focus largely on student learning process. Previously, program in higher education experiencing greater pressure that is to be more workplace focused and nurture capabilities for lifelong learning (Shafie and Nayan, 2010; Mustapha and Abdullah, 2004). This however changed as the Ministry of Higher Education, Malaysia (MOHE) agreed upon the 7 learning outcomes that closely related to generic capabilities of graduates (MOHE):

- Communication skill
- Critical mind and problem solving skill
- Team work skill
- Continuous learning and information management
- Entrepreneurship skill
- Professional ethic and moral
- Leadership skill

As a condition of government funding, the program must has a statement of generic capabilities of its graduate that embed above related LO by MOHE and specific health administration skills. Although, there is no such specific definition of generic capabilities but are commonly understood as:

...The holistic skills, knowledge and ability that university community agrees its graduates should develop along their journey in the academic institutions. This generic skills not merely stand alone but go beyond, the disciplinary skills, ability and knowledge that has traditionally embedded within the program outcome'

The current set of attributes alarmed the department that academic program must move beyond traditional teaching by setting an assessment and learning process to a wider perspective. Universities seek to develop graduate who not merely master their areas of specialization yet absent of soft skills (Nurita *et al.*, 2006). The similar argued by Edwards and King (2002), Braithwaite (1993), since 2000 and 2004, they have assumed the health management education for the 21st century content must move beyond traditional teaching and learning method, disciplinary knowledge and limitations to a wider perspective. They state, this assumption is important so the universities is able to prepare the graduate students who can 'do' as well as 'know', who are able to think critically, analyses and solving problem as well good communication skills. The feedbacks gained from the industrial stakeholders and academia for the purpose of this study strengthen the assumption made by Edwards and Braithwaite.

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Towards an effort of the revisit the undergraduate health administration program, the recommendations from multiple perspectives on the core curriculum of the program have found a new perspectives. Current market request for, to name few, supply chain management and marketing skills. Although, its trend have been seen over the past couple years, however its importance expected to continue inclusive of provider and supplier partnership. In addition, hospital management but need to be integrated and understood within Malaysia health service contexts. Using an evidence-based approach to develop the health service workforce requested similar attention from the program. The uniqueness of health care industry

constantly promising challenging of medical industry, an ever-expanding medical technology and knowledge, psycho-social factors of consumers in making health decisions were some of the predictor in shaping future health practice (Bourbonnais *et al.*, 2005). Based on these predictions, the undergraduate program should encompass life-long learning that enable them to cope with and adapt to rapid changes and indirectly injecting professional development of students (Anderson and McDaniel, 2000). These set the clearer path for shaping a set of desired graduate capabilities.

The bachelor of Health Services Management (HSM) graduate: The current HSM aims to foster in our students the following suite of graduates capabilities:

- Ability to appraise fundamentals of organizational management
- Utilize information and data to decision making and problem solving
- Ability to adapt accordingly and take responsibilities
- Ability to demonstrate ethical standards and professionalism in the workplace
- Ability to lead, communicate and work in teams
- Ability to select appropriate methodology in gathering and analyzing information for decision-making
- Ability to relate current issues and events in their specialized areas
- Ability to display entrepreneurial capabilities in managerial and organizational decisions

MATERIALS AND METHODS

External environmental scan-stakeholders involvement:

A few data gathering approach were applied in gaining a solid and dominant input of the effective junior health administrator. The approach is outlined:

- Review of the related literature, journal articles on health administration contexts, health workforce trends and needs of managers
- Review of professional competency standards in Cawangan Amalan Perubatan, Malaysia
- Interviews with senior and junior health managers working at both Private and Government sectors including representatives from: the KPJ, Pusrawi Hospital, Sungai Buloh General Hospital and Med consult. Using round-table discussion method, we sought the stakeholder's views related to strength and weakness of the current program. As well as view point about the critical capabilities required for junior health administrator

- Review of current program with academia, professor from University of Griffith was included during the process of program development
- Feedback gained from the final year student's after the industrial placement

Evidences from these five sources was analyzed. The key input and themes were systematically gathered. These data used as the foundation in searching the existence of new capabilities of junior health service position and the current syllabus. For instance, the literature and MOHE (LO) standard highlighted the importance of marketing and Information management skills, align with the feedback gathered from the round table discussion.

RESULTS AND DISCUSSION

Findings of the proposed graduates capabilities: The findings of the discussion lead to a key three major area of graduate's capabilities: cognitive, technical and communication skills (soft skills and personal attributes).

These variables replicated two graduates employability framework: National Employability Framework and UiTM undergraduate health administration program. Critical to the program development was not merely active engagement from the curriculum development team. The mutual agreement on the new suggested set of graduate's capabilities require similar attention. Definitely this was sometimes challenging. To add to the complexity, given the program park under Faculty of Business and Management, issues of who should teaching what program become an agenda and curriculum team putting extra effort to ensure each and individual topics are health management related but elements of business and management were offered. Based on the environmental scanning process, the set of graduate capabilities are summarized in Table 1.

Based on data given (during RTD), the core and specialization courses have been mapped according to graduate attributes. This meant to illustrate the extent to which the course seeks to promote the graduate attributes set for the bachelor of health administration program.

Key

/-Foundation/introductory: The course offer introductory content and learning activities for nurturing this attribute.

//-Developing: The course provides content and activities to assist students gain a developing capability in this attribute.

///-Advanced: The course provides in-depth content and activities to assist student gain advanced capability in this attribute.

Table 1: Graduate capabilities

Knowledge and ability to	Apply and understanding of population health and health care system	Interpret and use information and data to support decision-making	Interpret current issues towards change and innovation
Ability to appraise fundamentals of organizational management			
Managing health care organization ©	/	/	/
Health care economics and financial management (S)	/	/	/
Health informatics and health project (S)	/	/	//
Healthcare marketing (S)	/	/	//
Medical coding and terminology (S)	/	/	//
Law, ethics and issues (S)	/	/	//
Management of health records (S)	/	/	/
Health services communication (S)	/	/	/

Blank space: The course does not seeks to nurture the specific graduate attribute.

- C: Core
- S: Specialization

Challenges and new rules learned: Unlike health services management program in other country to name one in Australia, the program funded and govern by professional body known as Australasian College of Health Services Management (ACHSM). It establishments meant for bring in together managers working in health services in the country. To date, the institutions actively working towards to improved competency of health services management workforce. However, the similar does not found in Malaysia and arguably the importance of health services managers is poorly recognized for various reasons including a lack of clarity regarding managerial competency requirements and the accepted competency standards. Our experience suggests that to have a body that play similar role as mentioned above may play greater impact to enhance health services management program.

Apart of professional body, it has been suggested by universities offering the similar program to include international perspectives in health services workforce may has significant implications on graduate’s capabilities (Davidson *et al.*, 2000). Although, during the discussion, this capability was not highlighted, we would like to suggest the point that this must be nurtured in our graduates. To witness the current phenomenon in this country, new regulations that allow massive foreigner workers with permit, not to mention without permit. The current government-based model of migrant workers is likely affect management skill needed for health management position. To make the point more concrete, Malaysia is known as one of the top health tourism country (Aniza *et al.*, 2009), understanding international perspectives may likely play similar importance. This study cannot assume this will maximize the effectiveness of the management skill within graduates but as we

mentioned in our introduction and the similar repeated here, at least it is functional within the current market needs.

Reviewing the literature, a number of writers have suggested on the realignment of graduate capabilities. We referred to Milton in his study suggested that to include generic capabilities in professional capabilities may likely change the direction of the real environment of professional practice that is perhaps current program focus largely on professional skills and missed other generic capabilities required. Writing to this level, it is worth to note, our experience suggest that Milton is right in regards to what inclusive in effective professional performance is useful for the development of the professional education in health management context. However, researcher would like to make a standard assumptions that it is crucial to nurture specific capabilities and this is fundamental to reflect faculty requirement, national needs, standards and level.

CONCLUSION

As a result of consultations from experts and consultation with the academic team cum lecturers of health administration, the program was restructured around (11) revised core subjects; two subjects were superseded and replaced with two new relevant courses. This decision made to address the agreed capabilities and the program name bachelor of health administration maintained as it was. The redesign used current courses as a reference but with few suggested new courses to seek expert’s advices in regards its contribution on graduate’s capabilities such as epidemiology for health manager, healthcare quality management and health planning and evaluation. Suggestion made by expert to initiate a stronger emphasis on features that were not previously embedded that is national health services management aspect to allow students have a better understanding on national health system. This point was made with regards to common of reference books made use are international basis, thus graduates may likely

missed the national version on health management. National reference to the graduates learning activities may made the effort to the graduate capabilities clear. Along the process, possibility of overlaps or gaps in the program were as well identified and then small group dialogue on how this could be best addressed and solved. This offer better opportunity for a better gauge to be taken across the curriculum development to strategically addressed graduates capabilities needs.

RECOMMENDATIONS

Above of all, to ensure the effort worthwhile, the mapped graduate's capabilities will then be implemented and the outcome will be measured. This process will include an evaluation from students and academics teaching the program. The measurement of new sets capabilities will be tested on final year students after completing their industrial training.

For further information on Bachelor in Health Administration, <http://fbm.uitm.edu.my/programmes/undergraduate/38-degree/464-om235-bachelor-of-health-administration-hons.html>

ACKNOWLEDGEMENT

This researcher was supported in part by UITM under Grant Ref. Code: RAGS/1/2014/SS05/UITM/16.

REFERENCES

Anderson, R.A. and R.R. McDaniel, 2000. Managing health care organizations: Where professionalism meets complexity science. *Health Care Manage. Rev.*, 25: 83-92.

- Aniza, I., M. Aidalina, R. Nirmalini, M.C.H. Inggit and T.E. Ajeng, 2009. Health tourism in Malaysia: The strenght and weaknesses. *J. Community Health*, 15: 7-15.
- Bourbonnais, R., C. Brisson, R. Malenfant and M. Vezina, 2005. Health care restructuring, work environment and health of nurses. *Am. J. Ind. Med.*, 47: 54-64.
- Braithwaite, J., 1993. Strategic management and organisational structure: Transformational processes atwork in hospitals. *Aust. Health Rev.*, 16: 383-404.
- Davidson, P.L., R.M. Andersen, D.W. Hilberman and T.T. Nakazono, 2000. A framework for evaluating the impact of health services management education. *J. Health Administration Educ.*, 18: 63-110.
- Edwards, H. and L. King, 2002. Monash graduate attributes in the undergraduate curriculum: Report of a joint faculty-CHEQ pilot project. Master Thesis, Monash University, Melbourne, Australia.
- Mustapha, R. and A. Abdullah, 2004. Malaysia transitions toward a knowledge-based economy. *J. Technol. Stud.*, 30: 51-61.
- Nurita, J. and A. Samah, A. Jauhariah and Y. Shaharuddin, 2006. Perceived employability skills of graduating students: Implications for SMES. Proceedings of the Conference on SME-Entrepreneurship Global, October 17-18, 2006, Sunway Resorts Hotel, Subang Jaya, Malaysia, pp: 1-2.
- Shafie, L.A. and S. Nayan, 2010. Employability awareness among Malaysian undergraduates. *Int. J. Bus. Manage.*, 5: 119-123.