

Letters to the editor

Administrative Posts in Public Health Institutions

In the past all administrative posts in the Ministry of Health and many administrative posts in the districts were held by qualified public health personnel, until the time of establishment of the specialty of Medical Administration quite recently. Since then there have been efforts to secure all administrative posts by the Medical Administrators, disregarding the difference between general administrative posts and administrative posts in public health institutions.

A public health institution, for the purpose of this discussion, may be defined as an institution through which the national policies of the Ministry of Health related to the public health services, which include preventive and promotive services, are planned, implemented, monitored and evaluated. Therefore, the management of public health institutions require the technical expertise in the relevant field of public health and the related skills, in addition to the managerial and leadership skills required by a general administrator. A similar argument, namely the need of a knowledge of Medicine for administrative grade posts in the Department of Health Services was used by medical officers when SLAS officers were posted to such posts. The MD Community Medicine training programme is one of the pioneering courses established at the Post Graduate Institute of Medicine, catering to the needs of the country in the field of public health by producing the required specialists to give leadership and manage these institutions competently.

Everyone is aware of the high status of health achieved by our country as reflected in the relevant health indices by our country, despite being a developing nation. It is crystal clear that these achievements were due to the untiring efforts of our predecessors, whose versatility and strong public health background led them to strive towards attaining this prestigious status. It is obligatory on the part of the younger generation of public health specialists to carry forward their good work. After all, all of us have a duty by our country and nation, and that is to provide services of the highest quality to the society. Are we justified in jeopardizing all our past achievements, because of a divide in the decision as to who should administer these preventive health programmes which are the backbone of the health services of our nation?

The College of Community Physicians Sri Lanka (CCPSL) has been instrumental in addressing this issue right from the beginning and has been constantly vigilant over the developments which have taken place without the CCPSL being considered as a stakeholder in the discussions that ensued in regard to the above-mentioned actions. The stance of the CCPSL throughout (since the origin of this issue) has been that, all these posts should be held by qualified public health personnel, considering the technical expertise required for the sustainable provision of comprehensive preventive health services throughout the country. The final scenario was the Supreme Court case following which the "Beligaswatte Report" (BR) emerged.

According to the recommendations of the BR there are seventeen Senior Administrative Grade posts (SAG posts) namely, the posts of Director, Anti-Malaria Campaign (AMC), Director, Anti-Filariasis Campaign (AFC), Director, National Programme for Tuberculosis Control and Chest Diseases (NPTC & CD), Director, National STD and AIDS Control Programme (NSACP), Director, National Institute of Health Sciences, Director, Nutrition, Director, Environmental and Occupational Health (E&OH), Director, Anti Leprosy Campaign (ALC), Director, Quarantine Services, Director, International Health, Director, Youth, Elderly, Displaced and Disabled (YEDD), Director, Non-Communicable Disease Prevention (NCD), Director, Estate and Urban Health, Director, Health Education Bureau (HEB), Director, Family Health Bureau (FHB), Chief Epidemiologist and Director, Nutrition Coordination Division and four Deputy Director General (DDG) Posts (DDG, Public Health Services I & II, DDG, Education, Training & Research, and DDG, Planning Public Health Services [to be created new]) that should be exclusively held by Community Physicians.

Although the Community Physicians appear to benefit from the recommendations, there are three main issues that need to be addressed if we are to reap all the benefits of this gain. Firstly, is the issue pertaining to the interim provisions included in Section 22.1 of the BR. In implementing this circular those officers already in the Senior Administrative Grade will remain in the same grade irrespective of the posts currently held by them. Further, the mandatory qualifications for Senior Administrative Grade posts mentioned in the Cabinet Paper No. 06/0698/213/ 028 -1 entitled "Re-organization of Medical Administrative Grade" dated 10.04.2006,

subject to the proposed amendments set out in this report, shall not apply to those who are already in the Senior Administrative Grade. Hence they are free to apply to any post with respect to transfers and promotions. Therefore, there will be a time lag between today and the dawn of the day that all of the identified public health posts will be held exclusively by public health specialists.

The second issue is on eligibility to apply for the "Deputy Administrative Grade posts" (DAG posts). The BR has ignored the need for DAG posts Public Health Institutions to be held by those possessing public health qualifications. Unless this is fulfilled at this stage there is no way of grooming those eligible public health specialists to apply for SAG posts of public health institutions. The CCPSL having identified this need is in the process of developing a marking scheme for the DAG posts too, so that only those with a public health background will be selected for those posts as well.

All the above will be to no avail, if we as Community Physicians/ Public Health Specialists lack interest, commitment and the devotion to safeguard our profession and take the responsibility of moving forwards, at least at the current pace, if not faster. All of us have our own unique capabilities and interests and we must all strive to develop them to the maximum capacity and reach the pinnacle. However, one's individual achievements should run parallel to the advancement of our discipline and it should in no way impede the forward march of another fellow professional who is striving to reach his or her own goals. A group of professionals excelling in different capacities joined together will no doubt enrich our discipline, with the resultant benefits directed towards improvement of our national preventive programmes. Unity is the strength which can build empires. Therefore, as a professional body we urge all our fellow members to rally round in the name of our discipline and try to save it from the dangers of imminent disintegration.

It is high time that we take steps to find remedial action. We need to identify and groom the younger professionals to take up the responsibilities that lay ahead, which all of us as responsible citizens owe for the country. It is our obligation to protect and espouse the hard earned achievements of our predecessors. It is important that more and more public health personnel take up to administration, and there is a pool of them in the DAG posts which is the stepping stone to the SAG posts, which in turn makes one eligible to move into the highest position

as the heads of these key public health institutions. How can we complain of injustice if there are no eligible contenders for a given post when it falls vacant? One cannot expect the authorities to keep these vacancies open indefinitely until qualified public health personnel decide to take to administration. They have an obligation to the society to fill such vacancies with the next most suitable person. In such circumstances, we have no grounds to request for justice even in a court of law.

We live in an era in which moral values and ethical principles are fast deteriorating from our society, and we as professionals not only watch the situation silently, but promulgate it within, by adopting such attitudes and paying disregard to the resultant erosion taking place of a profession which was once revered with veneration. With such a situation there is no way one could build mutual trust and unity between fellow professionals. There will not be a way forward unless each one is mindful of the other's individual rights and one's dues.

Let us take all this into consideration and step into the correct path. We shall keep moving forwards while paving the way for the future leaders and managers and strive to achieve our own goals and objectives in life as well. The ultimate benefit of all this no doubt would be for our country and the nation.

Let us build our discipline mindful of our duties and obligations!

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