

## The Institute of Public Health in Albania: Institutional Learning Survey

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### Abstract

The Institute of Public Health (IPH) in Tirana, Albania and its Department of Epidemiology of Non-Infectious Disease and Health Systems: Policy and Programs; received an overall average score of 2.94 from 3.2 that was in IBM Global CEO Study average of 756 interviewed managers. There were nine people who were interviewed, although the IPH has over 200 employees overall. Most of the people who were interviewed shared their concerns in some of the following anonymous comments: "More innovation is needed, publications, international cooperation. Healthcare is going in the bad direction; we need better management of it". Another one says: "We are not interconnected, everyone does on his own head, and these do not serve in meeting the objectives." The fourth person says: "We need to work hard in order to achieve results; this is done through cooperation of various institutions. Up to this moment the situation is dim". One other person pointed out: "There is no transfer of knowledge and short-term, mid-term, and long-term plans. There is much to be done". The seventh person who was interviewed made these remarks: "We need to seek deeper in the research and scientific development, there is place for innovation, creativity, entrepreneurship, and new foresight; despite from what we have achieved so far." The last person said: "More incentives for innovation, more room for initiatives, as well as moral and material rewards".

The IPH and the department in word have a very satisfactory score in collaboration and partnering with other institutions at their initiatives and programs. Although, they still need to work better at measuring their progress with an evaluation metrics system for Total Quality Management (TQM) to be achieved. Innovation is on the rise if steps are taken to reach it.

**Keywords:** Public health; Healthcare; Non-infectious disease; Foresight

### Introduction

The Institute of Public Health (IPH) in Albania took its current name in 1995, but previously was called the Institute of Hygiene and Epidemiology since its founding in 1969. It houses almost 200 employees and its basic function is scientific research and development in the field of public health. IPH has more than 14 national laboratories that do primary research in its headquarters as the most valuable artifacts of science and biotechnology in our country. Institute of Public Health (IPH) has several stakeholders or interested parties. First of all, the employees who work there is the most interested about the scientific research that is done in this institution, See Table 1.

S.NO	RandD Personnel	Number	
		Total	Female
1	Scientists	73	47
2	Technicians	38	22
3	Supporting Staff	84	50
	Total	195	119

**Table 1:** R and D Personnel of the Institute of Public Health in Albania on Year 2009 (Source: IPH).

These employees of IPH have several professions and degrees that make this institution well-qualified for research in the public health field, See Table 2.

S.NO	Scientists+Technicians+Support Staff	Number	
		Total	Female
1	Engineering	1	1
2	Natural Sciences	39	25
3	Medical Sciences	53	32
4	Agricultural Sciences	2	2
5	Social Sciences	8	5
6	Humanitarian Sciences	8	5
	Total	111	70

**Table 2:** Education level of IPH employees in Albania on Year 2009.

This primary research that was done a couple of months ago by myself shows that the IPH is made of many well-educated scientists, technicians, and supporting administrative staff. In the following table you will see the professions and educational majors that are represented by the IPH employees, See Table 3.

S.NO	Scientists+Technicians+Supporting Staff Education	Number	
		Total	Female
1	PhD	20	9
2	Master or equivalent	53	38
3	Bachelor Degree	38	22
4	Associative Degree	-	-
5	High School Education	78	45
6	Middle School Education	6	5
	Total	195	119

**Table 3:** Educational fields represented at IPH as of Year 2009 (Source: IPH).

Other IPH “customers” are the government and primarily the Ministry of Health (MoH), as well as the people of Albania that await its services such as vaccination, infectious diseases control, chronic diseases prevention, water-food-air sanitation, etc. There are no systematic RandD and innovation statistics in the Health sector in our country, but estimates suggest an annual gross expenditure on RandD (GERD) in total for the country of Albania is close to 15 million Euros, i.e., below 0.2 % of GDP. The MoH receives 2.6 % of GDP out of which

we spend 0.05% of GDP in SandT for Health in Albania or € 3,743,000 for 2007-2008. This is almost exclusively funded by the public sector and foreign sources. Although foreign aid amounts to 54%, the Albanian government is able to make use of only 35% of it. The Albanian health sector in its RandD and innovation efforts is lagging behind of OECD countries, but we are hopeful that will the proper guidance and expertise will overcome the current transitional problems [1].

## Methodology

All of the interviews for this survey were organized face-to-face in a very affective way. Each interview took approximately 20 to 30 minutes to be conducted. We wanted to learn what was on the managers and researchers of IPH innovation agendas, where their innovative energies were focused, and what they were doing to enable innovation. For the purposes of our discussions the IBM Global CEO Study 2006 had defined innovation as: “using new ideas or applying current thinking in fundamentally different ways to effect significant change” [1]. This was a departmental study in its core and upper management study in essence. The first nine questions of the survey divided in four sections provided enough quantitative data, and the 10th question that was open ended together with the comments made during the administration of this survey gave ample qualitative data that was sufficient for the proper analysis (Table 4).

IBM Global CEO Study 2006	IPH Innovation Horizon Survey
Americas-191 participants with 23 from Latin America	Deputy Director-1 participant HR Director-1 participant
Asia Pacific-307 participants with 49 from India and 62 from China	Department of Epidemiology of Non-Infectious Disease and Health Systems: Policy and Programs-7 participants with 1 Head of Department and 6 leading researchers
Europe-267 participants with 16 from Eastern Europe	
Total: 765	Total: 9

**Table 4:** Distribution of the participants interviewed by the innovation survey.

The questions conducted are described below in Appendixes A and B of this consultancy document. The Department of Epidemiology of Non-Infectious Disease and Health Systems: Policy and Programs has four different units: 1) Biostatistics and Health Indicators Unit, 2) Human Developmental Health Unit, 3) Health Operators Unit, 4) Health Systems: Policy and Programs Unit. All of the participants were collaborative.

Innovation strategy is like a new planning paradigm. Irene Sanders states that “The new planning paradigm describes a dynamic, emergent planning process that has three major components: strategic thinking, strategy development, and the allocation of resources, which together result in a clear but flexible and constantly evolving plan of action and implementation” [2]. Business strategy is more rigid, deals with hard facts, quantitative data, financial ratios, etc.; while innovation strategy is more vivid, fluid, and all-encompassing and it involves a more gut feeling. The gut feeling is described by Alden Hayashi as: “To describe that vague feeling of knowing something without knowing exactly how or why, they used words like “professional judgment,” “intuition,” “gut instinct,” “inner voice,” and

“hunch,” but they couldn't describe the process much beyond that” [3]. Gary Oster says that “Successful innovation almost never begins with a minuscule incremental improvement of an existing product, service, or idea” [4]. Therefore, the IPH needs to show innovation in its results through the definitions defined above in this document.

## Results

“The world is changing very fast. Big will not beat small anymore. It will be the fast beating the slow.”

– Rupert Murdoch, Chairman and CEO, News Corporation [5].

“You can only win the ‘war’ with ideas, not with spending cuts.”

– Klaus Kleinfeld, President and CEO, Siemens AG [6].

Overall, the Institute of Public Health (IPH) and the department in word is somewhat innovative organization. The overall average score that IPH receives through this Innovation Horizon Survey is 2.94, which is a bit lower than the average of the IBM Survey outcomes with 756 CEOs at 3.2 in whole. In the first section on innovation agenda,

the IPH needs to have a broader agenda and a more structured one, in planning to apply. Change has been received well in the past (3.33) and this is encouraging, although in tentative of applying a point measurement system there has been some resistance from the employees and the departmental heads. This is the reason why under leadership and culture and on the metric and incentives it has received the lowest score: 2.00. IPH has a great collaboration and partnering experience with other institutions and NGOs in country and abroad, this is shown by the highest score of 3.89.

“The aspect of innovation most exciting to me, and the one most critical to this industry, is the broad collaboration required to make an idea a reality.”

–Rashid Skaf, President and CEO, AMX Corporation [7].

For more information on the specific questions and their score, please refer to Appendix A and B of this report. Thanks to the high collaboration and partnering score, we believe that innovation at IPH will be possible in the future at much more ease than the other counterparts in the healthcare industry.

## Recommendations

The enclosed Institutional Learning Survey provides a baseline that describes existing “Innovation Learning Competencies” for Institute of Public Health in Albania (IPH). The innovation audit found that you and your team have a good collaboration and partnership with other institutions, as well as a good integration of business and technology at your institute. However, the IPH lags behind in institutional structured innovation agenda and in a measurement system of metrics and incentives application. At Regent University we believe that these competencies contribute to the advancement of innovation with any institution or organization.

Blessed are those who hunger and thirst for righteousness, for they shall be filled (Matthew 5:6). This beatitude speaks to the need of the leader to be in a right relationship with (1) God, (2) other individuals, and (3) even one’s self. The leader who seeks righteousness will be filled with it. The result is a unique perspective gained on what is “right” for the organization. A Christian leader will not be motivated by selfish ambitions, but rather that which is righteous and pleasing to God—the key to seeking what is right for the organization. At IPH we need leaders that will seek what is right for the organization and not selfish ambitions of lavishing the organization [8,9].

“Great leaders do not seek positions of respect, but often gain them as a result of their caring for others. The focus in this beatitude is one of empathy, “mourning with those who mourn.” It implies caring for those around us, showing concern for employees and others, and considering them carefully in the decisions we make.” Caring for your employees it means that they can live comfortably because otherwise they will focus on how they are going to pay the next bill and not at the job at hand, the reason why you want to free people so they can be focused on their job is because it is the right thing to do. All you got to do is ‘agapao’ or love them. “This Greek word refers to a moral love, doing the right thing at the right time for the right reason” [10].

The upper management and leadership at IPH needs to care for its people by showing genuine concern for their employees contracts, benefits, infringements, work conditions, internet and computer access, telephone lines, reconstructed facilities, cooling and heating systems, database warehousing, laboratory standards, storage space, bonuses and vacations, etc. Only, when they show “agapao” love they

will succeed in making a difference in employees’ lives and eventually in people who will be touched by these employees: scientists, technicians and supporting staff at IPH in Albania. Edward Deming has said that 85% of the problems are organizational; therefore Dr. Bruce Winston infers that eventually 85% of the institutional problems are caused by the leadership of these organizations. These problems stop growth and stifle innovation. Thus, we recommend the following for each category under the study:

## Innovation agenda

Prioritize and broader innovation, through supporting new ideas, rewarding new scientists.

Develop institutional policies on innovation, research and development.

## Leadership and culture

Leadership should cast the vision out.

Manage things and not people; provide “Super-Vision” for people and not things.

Create positive culture for innovation to bring about behavioral change.

## Collaboration and partnering

Learn from other successful partners who are on the cutting edge of innovation.

Twinning or become sister institutions with other public health institutes.

## Business and technology

Upgrade your laboratory equipments, computers, servers, biotechnology.

## R&D

Empower this unit to provide RandD grants for all innovative scientists: application, implementation, monitoring and evaluation.

Create a database for all past, present, and future projects.

Make room for: Foresight, Entrepreneurship, Creativity, and Innovation.

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