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Health status and well being of the people in the nation is the responsibility of those in authority. The people should be able to access quality health care services at any given time and at an affordable cost irrespective of where one is situated. To provide quality services to the people, the national ensure that it allocates at different levels people with managerial skills and know how to coordinate the operations at the medical care facilities in terms of finance, resource allocation, and to ensure qualified professionals offer services to the public. The people appointed to this work also ensure that the professionals keep to date with the advancing technology keeping quality of services offered at same level with the development.   
The organisational structure and leadership of public health services in the united states is divided into three categories or rather levels namely the federal, state and local level. These levels have different powers and responsibilities in ensuring quality services is given to the public. The founding fathers of the U. S. constitution did not put this factor into consideration, but it was later considered. Federal level of managing public health has several responsibilities, and it is headed by top government officials responsible in matters of public health. Matters of public health in the nation is under the Department of Health and Human Services (HHS) (Healey & Lesneski, 2011). The president is the top head and one who appoints the person who is responsible for health department and status of the nation. Other federal agencies come under this such as the department of agriculture responsible for the supply of healthy and enough food to the nation. These agencies help in carrying out research activities to improve the services offered by this department. Centers for Disease Control and Prevention (CDC) also fall under this department and are answerable to them.   
At the state level, the structure in the management of public health matters differs from one state to the other depending on some factors. Professionalism, efficiency and resources are some of the factors that contribute to the difference in structure. Some states have a free standing public agency and the board of health that is headed by health professional with managerial skills. Other states adopt a district structure a situation whereby management and running of health care facilities and services is divided on a district basis. Specific leaders in the districts are appointed to coordinate the activities and provide the necessary information to the state leaders in the health department. At the state level, another technique applied in the organisation of the structures is the centralisation and the decentralisation. Centralisation involves a situation whereby the board in a state controls in not all the majority of health issues such as resources and decision making aspect. In the decentralisation, small boards with few members are selected to head the different parts of the state or rather counties and responsible for the decisions made in these parts unless a critical decision has to be made.   
At the local level, a great change has taken place in the structure of governance of the health care provision services to the society. Local level is the lowest level among the federal, state and the local level. Most decisions made at the local level are highly affected by the state especially at a centralised system of management where a central governing body makes the major decisions and run the activities. Just like the state, the structure in local level also varies from one part to the other of the local areas in what individuals in the area find best in ensuring that quality services are provided (Ivanov & Blue 2010). Local Health Department is the head of health matters in the area at the local level. In some areas, this department has control over a particular city or county. In some cases of a regionalised area, the department can have control over multiple counties depending on what is seen to work best.   
Variation in the organisational structure seen at the different levels is caused by several factors. Population served is the first factor that brings about the variation. A structure that serves a bigger population needs to be well structured in terms of generalisation, resources and high skilled management techniques to make it more efficient in one way or the other. Resources available is another factor that contributes to the difference in structure. Federal level has a higher resources which it needs to distribute over the many states as compared to the resources available in the state and the same applies to the local level. Managerial skills determine the structure that can be used especially at the state and local level which comprises of things such as centralisation and decentralisation.   
On the other hand, leader at the state level is responsible for several things. First is the offering of training and the necessary assistance at any level required. At this level, the leaders use the gathered information to ensure that the necessary changes in training and education is made to help offer quality services to the people. State laboratory services are also controlled at this point by the leaders. Local leaders are responsible in making decisions concerning the technicality in the services offered in the field of medicine. In health care facilities, challenges faced are sorted by the leaders at this point by making decisions that affect the patients directly or indirectly.   
In conclusion, health is a very important matter in a particular nation. The management of health department as a whole plays a very vital role in ensuring that quality services are offered to the people in medical centres to ensure safety in physical, mental and emotional status of an individual in a particular nation. The available techniques of management and apprehended structures should be utilised well to ensure that services offered in a particular place is of maximum benefit to the people in that area. More investment should be done in carrying out research on better management skills and techniques to help improve the structures that will in turn improve the quality of services offered at medical facilities.

## References

Ivanov, L. L., & Blue, C. L. (2010). Public health nursing: Leadership, policy, & practice. Australia: Delmar Cengage Delmar.   
Healey, B. J., & Lesneski, C. D. (2011). Transforming public health practice: Leadership and management essentials. San Francisco: Jossey-Bass.