## Brief Critiques on Chain of Command, Unity of Command, Span of Control and Leadership in Health Sector of Nepal.

## Chain of command, unity of command, span of control and leadership are some fundamental principles of management. Public health management must abide by these principles for sound functioning of district health system. Human Resource for Health is the key practice player of these principles through the hierarchy of health net work under organizational setting of Ministry of Health and Population including International/Non Government Organization, private health sectors, Community Based Organizations and other health agencies. Organizational structure and function with Human Resource for Health in diverse role and responsibilities, authority and accountability keep it in track if in sound management and administration. New Health Policy, 1990 and HRH policy, 2003 2017 and likely other health documents has not yet been modified even population increase in the country by three folds since its formulation.

In Nepal, Ministry of Health and Population constitutes 5 Regional Health Directorates, 60 District Health Offices and 15 District Public Health Offices headed by senior ones, mostly medical background and few ones from pure public health background. Positions designed and sanctioned of different cadres have become old fashioned with need less proportions and in want of re structure reflecting current changing scenarios. Currently, such dignities are supposed to neglect and carelessness over the very basic principles of public health practicing in context of National Health System. District supervisors in practice deal with public health officers like horizontal organizational behavior and cross public health sections in most of the situations by jumping the immediate supervisors/sub ordinates i.e. public health cadres/managers and move around District Health Officers only as psycho fancy in all scenario of the district health system resulting in mal practices of public health constructs regarding public health management/ administration. It is just a one example.

## **Critiques:**

Ministry of Health and Population has been commanded

## Shravan Kumar Nayak

Senior Public Health Officer, District Health Office Gulmi nayak.shravankumar@yahoo.com

by 2 secretaries (1 for health and 1 for population). It has been created steady conflict in all aspect of ministerial direction, leadership, policy circulation. So, unity of command must be a single dignity. Unity of command should comprise at least a group of cadres with designed and defined public health constructs. Chain of command and span of control from Ministry of Health and Population to Sub Health Post net work has been widely disrupted with diverse known and unknown factors. Staff posting, recruitment, transfer, deputation are some particular fluctuating practices and mostly commanded, controlled and led by higher authority. It significantly need level wise command, control and leading role in both structurally and functionally. Horizontal and vertical organizational behavior must be re structured with well term of reference/job responsibilities, delegation of authority, accountability. Likely, health sector institutions, organizations, agencies and partners with government sectors are also in poorly coordinated, collaborated and communicated under week command, control and leading situation in context of district health system.