

Developing local hospitals for public health excellence

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ABSTRACT

The current study investigated the factors affecting the success of local hospital operations in promoting public health excellence in Thailand. A mixed method approach with focus groups and questionnaires was utilized. The study also depended on descriptive statistics and hierarchical regression analysis. According to the findings, public health providers agreed that the main factors leading to the success of local hospital operations were participation with people in the community, respect, and policy development. Other aspects included the use of devices, tools, medicine or medical supplies, training, and project organization. Meanwhile, the service recipients held the view that any suggestion of information, knowledge, or capability of personnel has an influence on operational guidelines. However, success at higher levels must rely on two things: 1) the location of a local hospital and 2) analysis of the guidelines for developing the services of local hospitals for promoting public health in the future. The study also relied on content analysis. According to the findings, appropriate operating guidelines for local hospitals would comprise policy development for promoting public health, participation by people in the community, and public services by the hospital, including training to increase the potential of personnel and project organization involving health promotion.

Key words:

operation; promotion; public health; local hospital

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INTRODUCTION

In 2009, the government in Thailand gave a policy statement about public health to Parliament. The purposes of the statement were to leverage public health centers to become local hospitals and to develop networks with efficiency at all levels, connecting to both private and public sectors. This is considered a further development of the primary healthcare service system in Thailand. The Ministry of Public Health announced the plan as the “Decade of Developing Local Hospitals and Primary Service System” between 2010 and 2019 with the aim of leveraging standard quality and improving potential¹. Accordingly, the Ministry of Public Health has set policy for local hospitals by revolutionizing the public health system to improve public health services. In particular, it aims to leverage health centers to become local hospitals. Furthermore, the Ministry of Public Health has an important policy of using identification cards to replace gold cards in receiving public health services, particularly for local hospitals.

Local hospitals, formerly known as “suk sala,” play an important part in the Thai public health system, because they are units that are close to the villagers in the community, who prefer to use local services with growing service demand. The important mission of local hospitals is to give first aid and rehabilitation at a primary level. Consequently, local hospitals play a vital role in nursing people and giving public service with a mixture of promoting health, controlling and preventing diseases, while providing medical treatment and rehabilitation together with managing health risk factors at the individual, family, community, and social levels in the areas under their responsibility. The focus is on

three aspects: proactive operations, 24-hour services, and connection-participation².

Community participation can build self-awareness as part of a society or community³. Meanwhile, in order to be efficient and effective, local hospitals must engage in operational activities and maintain connections with people, the community, and local government organizations. These must also be in line with the mission of the local hospital to provide first aid and rehabilitation as holistic care with consistency in addition to coordinating with the health service in accordance with quality standards set by the Ministry of Public Health and global standards. Local hospitals aim to provide health services and control diseases as defensive, in-service and proactive outside service places in the community, so people can receive the health services to which they are entitled with standard quality that is conclusive and equitable. Local hospitals accentuate managing the health service systems of the network with standard quality. This ensures that public health recipients and providers are happy and satisfied while being able to address and decrease the health problems of people in target areas. More importantly, local hospitals focus on raising coordination between the community and associated networks of all sectors in managing and nursing people's health, so they can be self-reliant according to the sufficient health philosophy. In this way, people can become healthy and reduce rates of illness and the burdens of physicians' supervision. Accordingly, local hospitals coordinate with the public sector to participate in any operation where policy development focuses on initiating a primary care unit. Local hospitals accentuate roles and missions based on the principles of family practice by acting as advisors for families in

their community, while connecting with public health units at any level and coordinating with any sector in developing public health⁴.

Over the past two to three decades, there has been a struggle to adjust health services in various aspects in Thailand, which closely connects to and engages with economic, social, and political systems. Meanwhile, the health system in Thailand has been strongly reformed, giving real hope to Thai society in the future, particularly in applying the concepts of a new form of public management to the public health systems of Thailand by managing public health services⁵. The purpose is to cover and present a new type of service with the aim of meeting public demands, whereas services have become people-centered due to the reform of concepts in public administration by focusing on meeting people's demands at a primary level. In this way, it is necessary to adjust the budget system in order to make administration more efficient, transparent, and verifiable with the ability to measure concrete success by using indicators and complying with strategic plans to develop health and respond to people's needs⁶. Thailand has divided health jurisdictions into 12 areas where each zone has its own local hospitals whose mission is to provide primary first aid. The focus is also on prevention, support, and rehabilitation. Therefore, local hospitals play a pivotal role in treating people attentively in addition to performance appraisals each year. Thus so far, Health Area 1 has eight local hospitals that have passed appraisal from the Ministry of Public Health in the fiscal year of 2018, mostly with scores of more than 80 percent. These local hospitals passed assessment criteria and received awards in the fiscal year of 2018 (Health Area 1). The assessment criteria for local hospitals with stars are divided into five categories: leading organization and good

management; focusing on target populations, communities, and stakeholders; focusing on human resources; organizing services for different types and groups of people of all ages; and results. The local hospitals also received the Primary Care Award with the aim of developing the quality of primary care units⁷ and complying with the policies of the Ministry of Public Health that place importance on primary levels as the top priority. However, in Thailand, the operation of local hospitals continues to face many persistent problems involving personnel, budget, and clear operation policies.

As a result, it is critical to investigate the operational development of local hospitals in order to promote public health excellence and make these hospitals efficient, effective, and influential in improving people's quality of life.

DEFINITIONS

Community participation means a government that gives rights to people so they can participate in the operation of the government at every stage due to the fact that people are regarded as integral parts of the government and can take part in any operational activity, including rendering opinions, brainstorming, collaborating, jointly appraising, and helping to find solutions to problems.

The mission of a local hospital means providing primary care by focusing on prevention, support, and restoration. Thus, local hospitals are regarded as hospitals that care for people from the womb to the tomb.

Local health service means primary medical examinations, antenatal care, immunization services, nutrition care, school health work, consumer protection, abnormal condition screening, treatment for diabetes, blood pressure, and breast cancer, taking care of the disabled and elderly, rehabilitation, and other services in the

community. What's more, the local hospital acts as an important place for internships for academic institutions.

The factors that impact the success of the operation of local hospitals that are excellent in promoting people's health include service providers, organizations, service recipients, and guidelines on developing the readiness of the government. These factors result in the operational success of local hospitals at different levels and can be divided as follows:

Internal factors included treatment, work characteristics, achievement, work security, pride in career, and officers' ability to work with others.

External factors included community participation, mutual respect, organizational culture, organizational structure, resources, and operational guidelines for developing government participation, policy development, participation development, public services, and other aspects. These factors have an influence on the success of local hospitals in appropriately promoting good health for people in the future.

Service Recipients: Internal factors are service time, treatment guidelines, knowledge and competence of officials, advice and information, etcetera.

External factors are location, operational guidelines on developing government readiness, policy development, participation development, public services, and other aspects that are influential to the success of local hospitals in appropriately promoting good health for people in the future.

METHODOLOGY

Participants

1) The key informants providing qualitative data via focus group will include a committee from the Ministry of Public Health, a committee from the Provincial Public Health Office, physicians, nurses, dental nurses, or personnel from local hospitals (Health Area 1) by purposive sampling of 28 samples from Lamphun, Lampang, Mae Hong Son, Nan, Phrae, and Chiang Rai Provinces, all of which are provinces in Health Area 1. Accordingly, the author divided the participants into six focus groups. When divided by province, there are six groups with four people per group in four provinces and six people per group in two provinces, with a total of 28 people. The organization of focus groups with the author and participants is shown in Table 1 below.

Table 1 Focus groups in Health Area 1 divided by province.

Provinces	Total
Lamphun	4
Lampang	4
Mae Hong Son	6
Nan	4
Phrae	6
Chiang Rai	4

2) . Quantitative Population and Samples: Personnel who work at local hospitals in the aforementioned provinces have passed evaluation criteria and received

awards (Health Area 1) . Criteria and rewards refer to areas with up to eight local hospitals that have passed the Ministry of Public Health's performance appraisal in

fiscal year of 2018 with scores of more than 80 percent, while passing the assessment criteria and receiving awards in the same year (Health Area 1). These local hospitals received five stars in five categories (leading organization and good management; focusing on target populations, communities, and stakeholders; focusing on human resources; organizing services covering types and population groups of all ages and results). The hospitals also received the Primary Care Award for developing the quality of primary units.⁷ The population from Group 1 consisted of 120 people who worked at local hospitals in the aforementioned provinces and had passed evaluation criteria and received awards (Health Area 1). Therefore, a group of 92 samples comprised personnel who worked at local hospitals in the aforementioned provinces, had passed evaluation criteria and received awards (Health Area 1). The sample size was determined by using the formula table of Krejcie and Morgan⁸, which suggests the use of 92 samples before stratifying the samples again to include representatives from eight local hospitals. Group 2 included those who came to receive services from local hospitals and totaled 41,590 people (received services from local hospitals) that were calculated by the formula of Yamane⁹, which yielded 396 samples before

stratifying the samples again to act as the representatives of eight local hospitals.

Research Instrumentation

The research instruments used for data collection were focus groups and a questionnaire.

Data Analysis

Qualitative data analysis was done through content analysis. Meanwhile, quantitative analysis depended on descriptive statistics, namely mean, standard deviation, and inferential statistics (hierarchical multiple regression analysis) for hypothesis testing.

Research Ethics

The research ethics received approval on December 19, 2019 with Certificate of Approval No.2019/266.1712 and MUSSIRB No.2019/324 (B1) from the Office of Research Ethics in Human Subjects, Social Science, and Faculty of Social Sciences and Humanities, Mahidol University.

RESULTS

1) Identification of the factors responsible for the success of local hospital operations in promoting public health excellence.

1.1) Service providers (officers).

Table 2 Service provider (officer) factors influencing the future success of local hospitals in appropriately promoting public health by using hierarchical multiple regression analysis.

Variables	F	Sig.	R	R²
Step 1 – Internal Variables	1.647	0.156	.296	.087
1. Treatment				
2. Job Success and Security				
3. Job Characteristics				
4. Professional Pride				
5. Officers’ Ability to Collaborate with Others				
Step 2 – External Variables				

Variables	F	Sig.	R	R ²
1. Community Participation	3.495	0.001**	.549	.301
2. Mutual Respect				
3. Organizational Culture				
4. Organizational Structure				
5. Resources				
Step 3 – Guidelines for the Operation of Local Hospitals	4.863	0.000**	.685	.469
1. Development of Government Readiness				
2. Policy Development				
3. Development on Participation and Public Service				
4. Other				

** $p < 0.01$

The relationships affecting the success of the operation of local hospitals in appropriately promoting public health in the future revealed that, when testing internal factors, no variables affected the operational guidelines of local hospitals in appropriately promoting public health in the future by 8.70%. In Step 2, external variables were tested. The external variables influential to the operational guidelines of local hospitals for appropriately promoting public health in the future accounted for 30.10%. In Step 3, after the operational guidelines of the hospitals were tested, they were found to account for 46.90% (Table 2), which is considered to have increased by almost half. Accordingly, it can be concluded that the factors the officials see as leading to the success of the operation of local hospitals in appropriately promoting public health in the future are reinforced by the support of external factors. These factors act as important variables leading to the success of the operation of local hospitals. Moreover, the operational guidelines of local hospitals should be made consistent in order to bring about the success of local hospital operations.

In conclusion, when comparing to find correlations that are influential to the

success of local hospitals in appropriately promoting public health in the future, it was revealed in Step 3 that the operational guidelines for developing government readiness have the most influence on the success of local hospitals in appropriately promoting public health in the future at 46.90%. This was followed by Step 2, indicating the organizational factors (local hospitals) that are influential to the operational guidelines of local hospitals for appropriately promoting public health in the future were at 30.10%. Meanwhile, Step 1, was an individual factor of the officials influential to the success of local hospitals in appropriately promoting public health in the future at 8.70%. Therefore, it can be concluded that service providers (officials) see that the factors leading to the success of the operation of local hospitals in appropriately promoting public health in the future are the operational guidelines in developing the readiness of the government, which comprised policy development, development of participation and public services, and other aspects such as training and performing projects, which should be supported as the operational policy of local hospitals in the future.

Table 3 Hierarchical multiple regression analysis model for testing variables on official opinions towards individual factors leading to the successful operation of local hospitals for appropriately promoting public health in the future

Variables	B	SE	B	T	p-value
Step 1 – Internal Variables					
Constant	4.479	.519		8.635	0.000
1. Treatment	-.076	.037	-.073	-.701	.485
2. Job Success and Security	.056	.047	.102	1.028	.307
3. Job Characteristics	.004	.067	.035	.350	.728
4. Professional Pride	-.061	.058	-.055	-.542	.590
5. Officer's Ability to Collaborate with Others	-.013	.059	-.063	-.657	.513
Step 2 – External Variables					
Constant	3.935	.712		5.524	0.000
1. Community Participation	.168	.052	.338	3.203	.002**
2. Mutual Respect	-.125	.043	-.288	-2.903	.005**
3. Organizational Culture	.020	.054	.036	.367	.715
4. Organizational Structure	.023	.042	.056	.543	.589
5. Resources	-.012	.063	-.018	-.187	.852
Step 3 – Guidelines in the Operation of Local Hospitals					
Constants	2.267	.763		2.973	0.004*
1. Development of Government Readiness	.085	.049	.151	1.738	.086
2. Policy Development	.174	.051	.319	3.436	.001**
3. Development of Participation and Public Service	.041	.067	.067	.618	.538
4. Other	.118	.040	.270	2.950	.004**

** $p < 0.01$

Once all of the variables had been tested, it was shown that external factors resulting in the success of the operation of local hospitals in appropriately promoting public health in the future included two aspects: participation with people in the community ($\beta = .338$, $p = .002$) and mutual respect ($\beta = -.288$, $p = 0.005$), both of which were influential to the success of the operation of local hospitals. It was also discovered that the operational guidelines of local hospitals for appropriately promoting public health in the future included policy development

($\beta = .319$, $p = .001$) and other aspects such as training and project creation, ($\beta = .270$, $p = .004$), both of which contributed to the success of the local hospitals' operations (Table 3). Consequently, if the officials of local hospitals gain respect from people in their community and participate with them in going into the field for health checks or participate in activities with the community on any occasion, together with setting policy for local agencies to participate with people and providing training for giving knowledge to personnel and networks as

usual, the success of the operation of local hospitals in appropriately promoting public

health with the people in their community will be assured in the future.

1.2) Service Recipients (individuals)

Table 4 Factors such as service recipients (people) that are influential to the success of local hospitals in appropriately promoting public health in the future by hierarchical multiple regression analysis.

Variables	F	Sig.	R	R ²
Step 1: Internal Variables	9.2990	0.000**	.326	.106
1. Length of Service				
2. Treatment Guidelines				
3. Introduction to Various Information				
4. Knowledge and Capability of Personnel				
5. Other				
Step 2: External Variables	14.375	0.000**	.426	.181
1. Local Hospital Location				
Step 3: Local Hospital Operational Guidelines	52.301	0.000**	.774	.600
1. Government Readiness Development				
2. Policy Development				
3. Development of Participation and Public Service				
4. Other				

** $p < 0.01$

The relationships influencing the success of the operation of local hospitals for appropriately promoting public health in the future indicated that the internal variables tested had an influence of 10.60% on the operational guidelines of local hospitals for appropriately promoting public health in the future, which is considered to be a low level. In Step 2, the external variables were subsequently tested. The external variables influencing the operational guidelines of local hospitals for appropriately promoting public health in the future were found to have an influence of 18.10%, which is considered a higher level. However, when the operational

guidelines of local hospitals were represented as variables in Step 3, it was shown that the level of success of the local hospital became higher by 60.00% (Table 4). Therefore, it can be concluded that the factors viewed by the service recipients that could lead to the success of the operations of local hospitals in appropriately promoting public health in the future included the support received from both internal and external variables. These three variables play an important role in the success of the operation of local hospitals as they represent the perspectives of people or service recipients.

Table 5 Model of testing variable based on the opinions of service recipients (people) leading to the success of the operation of local hospitals for appropriately promoting public health in the future by using hierarchical multiple regression analysis.

Variables	B	SE	B	T	p-value
Step 1: Internal Variables					
Constants	2.513	.335		7.508	.000**
1. Service Time	.016	.035	.023	.471	.638
2. Treatment	.068	.036	.092	1.898	.058
3. Introduction to Various Information	.202	.034	.284	5.869	.000**
4. Knowledge and Capability of Personnel	.065	.032	.098	2.036	.042*
5. Others	.068	.041	.080	1.671	.095
Step 2: External Variables					
Constant	1.697	.349		4.867	.000**
1. Location of Local Hospitals	.185	.031	.276	5.972	.000**
Step 3 Operational Guidelines of Local Hospitals					
Constant	-1.775	.322		-5.508	0.000**
1. Development of Government Readiness	.283	.027	.348	10.412	.000**
2. Policy Development	.305	.040	.341	7.574	.000**
3. Development on Participation and Public Service	.297	.045	.352	6.633	.000**
4. Other	.252	.025	.337	10.227	.000**

** $p < 0.01$, * $p < 0.05$

When all variables were tested, it was discovered that two factors influenced the success of the operation of local hospitals in appropriately promoting public health in the future: introduction to various information ($\beta = .284$, $p = 0.000$) and knowledge and capability of personnel ($\beta = .098$, $p = 0.042$). Accordingly, service recipients agreed that these two variables were influential to the operational guidelines of local hospitals for appropriately promoting public health in the future. Nonetheless, service recipients believed that external variables, such as the location of local hospitals ($\beta = .276$, $p = 0.000$), play key roles in the success of local hospital operations in appropriately promoting public health in the future. Additionally, the operating guidelines of local hospitals in all variables with the greatest influence on the success of the

Table 6 Results of hierarchical multiple regression.

operation of local hospitals included the development of government readiness ($\beta = .348$, $p = 0.000$), policy development ($\beta = .341$, $p = 0.000$), participation and public service development ($\beta = .352$, $p = 0.000$), and other aspects ($\beta = .337$, $p = 0.000$) (Table 5).

Consequently, it can be concluded that service recipients (people) agreed that the variables leading to the success of the operation of local hospitals in appropriately promoting public health in the future are as follows: introduction to various aspects of information, knowledge and capability of personnel, location of local hospitals, development of government readiness, policy development, development of participation and public service, and other aspects. These variables can be determined as the key factors for promoting the success of the operation of local hospitals.

Model	R	R ²	Adj.R ²	R ² Change	F Change	p-value
Model 1	.294	.087	.034	.087	1.647	0.000
Model 2	.549	.301	.215	.214	4.963	0.000
Model 3	.685	.469	.373	.168	6.089	0.000
Model 4	.326	.106	.095	.106	9.290	0.004*
Model 5	.426	.181	.169	.075	35.668	0.000**
Model 6	.774	.600	.588	.418	80.243	0.000**

** $p < 0.01$, * $p < 0.05$

This model has a $R^2 = .600$ and $Adj.R^2 = .588$, which shows that this model has predictive influence at 58.8% (Table 6).

Table 7 Exhibits the regression coefficient of the predictive variable in the form of raw scores (B) and standard scores (β); multiple regression was utilized to predict the factors influencing the success of local hospitals in appropriately promoting public health in the future.

Model (6)	Predictor	Unstandardized Coefficients		Standardized Coefficients Beta	T	Sig.	Correlation		
		B	Std. Error				Zero- order	Partial	Part
Factor 1	Constant	-	.322		-5.508	0.000**			
		1.775							
	X1	.305	.040	.341	7.574	0.000	.393	.361	.245
	X2	.297	.045	.352	6.633	0.000	.431	.321	.214
	X3	.252	.025	.337	10.227	0.000	.441	.463	.330
	X4	2.246	.042	.189	5.803	0.000	.216	.284	.187

Predictive equation in the form of standard scores.

The factors influencing local hospitals' success in appropriately promoting public health in the future (Table 7)

$$= -1.775 + 2.246(X4) + .305(X1) + .297(X2) + .252(X3)$$

According to the values in the equation, the best form for prediction is Model 6, with a predictive influence of 58.8%. When in the form of the equation, the variables in descending order were as follows:

X4 = Other elements, such as devices, tools, medicine, or medical supplies

X1 = Advancement in the government's readiness

X2 = Policy development

X3 = Participation and public service development

According to hypothesis testing on the factors influential to the success of local hospitals in appropriately promoting public health in the future (service providers and service recipients), it was indicated that the factors influencing the successful operation of local hospitals for promoting public

health from the perspectives of service recipients were as follows:

As for the factors influential to the success of local hospitals in appropriately promoting public health in the future, it was found that the service providers (officers) agreed that variables such as participation with people in the community, mutual respect, policy development, and other aspects, such as training and making projects, play contributing roles in the achievements of local hospitals. Meanwhile, people viewed that aspects such as introduction to various aspects of information, knowledge and capability of officers, location, policy development, government readiness, development of participation and public services, and other aspects, such as instruments, could contribute to the success of local hospitals in promoting public health.

2) Guidelines for local hospital operations for appropriately promoting public health in the future.

According to the focus group discussions with the key informants on the issue of “operational guidelines of local hospitals for appropriately promoting public health in the future,” the research findings indicated seven appropriate guidelines as follows:

1) Increasing the number of personnel/ experts by allocating human resources to be consistent with the demands of service recipients, together with preparing staff to cover all aspects of administering treatment as well as distributing additional personnel to local hospitals in need.

2) Improving and proposing clearer and more efficient operational guidelines.

3) Engaging in collaborative brainstorming and planning in any development in addition to correcting and improving any operations.

4) Developing models of participation, particularly collaborative work, across all sectors.

5) Having a clear operational policy or set of guidelines, which necessitates the creation of long-term operational plans.

6) Recognizing the importance of village health volunteers, who play an important role in collaborating with local hospitals; these village health volunteers must be compensated appropriately for their efforts.

7) Increasing officer performance incentives, such as career advancement and accommodations, in accordance with supporting budgets commensurate with duties of personnel.

As for the operational guidelines of local hospitals for appropriately promoting public health in the future based on the opinions of service providers (officials), the guidelines comprised policy development and other aspects. Meanwhile, the operational guidelines of local hospitals from the perspectives of service recipients (people) included policy development, participation and public service development, and other aspects. When these development guidelines are put into practice, the operation of local hospitals for appropriately promoting public health will be more efficient and effective in the future.

DISCUSSION

According to the study “Developing of Local Hospitals for Public Health Excellence”, the author reviewed concepts and theories related to New Public Service, Participation Theory, Street-Level Bureaucracy Theory, New Public Governance, concepts of local hospitals, and other related research works to be used for discussion in this research. According to the findings, the key issues can be discussed as follows:

According to research findings, the factors influential to the successful operation of local hospitals in promoting public health excellence were divided into two groups of informants. Opinions between service providers and service recipients toward the success of success show inconsistent factors. Service providers perceived more influencing factors than service recipients. This is consistent with research by Sinjungleed¹⁰, who found that effective operational guidelines of local hospitals in Nakhon Ratchasima Province were composed of health promotion, whereas service recipients agreed that effective operational guidelines of local hospitals comprised length of service, treatment guidelines, and others. This is in line with research conducted by Nunthanert et al.¹¹, who found that the operational process of providing public health service is a merge between proactive service and defensive services, comprising health promotion, disease control and prevention, medical treatment, rehabilitation, and management of health risk factors at the individual, family, and social levels.

In addition, according to the research findings, it can be analyzed and discussed that the factors influencing the success of the operation of local hospitals includes career pride. This is in accordance with research by Sukjareon et al.,¹² who found that the “factors related to operations according to the nursing capacity of nurses working for a local hospital in Nakhon Pathom” are operations according to nursing capacity, career pride, and the ability of officers to collaborate with others at high levels. In terms of organizational structure, the findings are consistent with research by Popum¹³, who found that the factors influencing the administration of Banphaeo General Hospital comprised the organizational structure, which had the greatest influence on the administration of

Banphaeo General Hospital. The findings are also in line with a study by Kongseup et al.,¹⁴ who revealed that factors influential to the success of the quality development operation of local hospitals in Tid Daow Sub-district were the structure of group work organization, clear delegation, and resources. This finding is additionally consistent with the study by Kenny et al.,¹⁵ who found that a good environment leads to a rising interest by the community in healthcare as well as career pride.

With respect to operational guidelines for developing participation and public service, the findings are consistent with a study by Winterbaue et al.,¹⁶ who found that the use of community cooperation in community networks, together with public relations by providing knowledge to people, can reinforce operations with efficiency. This finding is in accordance with the theory of New Public Service, which affirms that a new public administration leads to changes in many public systems and public strategies as concrete administrative guidelines aimed at providing quality service for people¹⁷.

According to New Public Service, the factors affecting the success of the operation of local hospitals in promoting public health excellence indicated that new public management is a fundamental concept leading to changes in improving service quality for people. Meanwhile, the agencies have independent operations, together with giving performance awards at organizational and individual levels and building support systems for personnel and technology, with the aim of helping agencies achieve their objectives¹⁷.

As for guidelines in the operational development of local hospitals for appropriately promoting public health in the future, when the New Public Service Theory was analyzed, it was found that, if the public sector is negligent in adjusting

and improving public management to become a modern organization based on good governance, the competitiveness of the country will be undermined, in addition to facing obstacles to the economic and social development in the future¹⁷. Hence, the public sector should adapt, leading to changes in the system, so people can receive any service with efficiency. This condition is consistent with the Participation Theory in that, if a local hospital prioritizes participation, it will be an indicator showing people in local areas taking part or playing important roles in the public sector. Apparently, the public sector becomes responsible for developing any aspects in a better way because local hospitals are an integral part of communities in need of consistent community development.

RECOMMENDATIONS

1. Practical Recommendations

1.1) The Ministry of Public Health plays a key role in promoting and developing technology for the operation of local hospitals to keep up with changes in science and technology, in addition to preparing to develop the state of knowledge, operational guidelines, personnel, and budgets to contribute to the operation of local hospitals. Moreover, the Ministry of Public Health is recommended to set policy in line with the roles and functions of local hospitals in promoting public health in addition to putting the policy into practice, so its objectives can be achieved, particularly in the area of promoting public health by increasing the number of personnel and the expertise responsible for providing counsel and medical support, and allocating human resources to be consistent with the needs of service recipients. In addition, the Ministry of Public Health is advised to consider promotion of personnel in addition to appropriately adjusting base salaries.

1.2) The Ministry of Public Health and Provincial Public Health need to provide more training for personnel in order to increase potential in terms of knowledge in addition to developing training projects to provide knowledge to personnel and community networks on a regular basis.

1.3) Collaboration with other agencies requires network building in addition to coordination and help from any sector from community leaders, and village public health volunteers in order to exchange ideas, learn about operational systems and obtain a better collaborative network.

1.4) It is necessary to develop public relations and provide knowledge about health promotion, basic self-care, and exercise in the community through public relations materials such as brochures, wired audio, and posters.

1.5) It is important that public health volunteers at the village and community levels participate with local hospitals in operations such as performing health checks, promoting health activities, and screening for disease risks with frequency and consistency.

2. Policy Recommendations

The Ministry of Public Health should ensure readiness in supporting the operation of local hospitals by promoting and developing operational technology alongside developing state of knowledge and operational guidelines, workforce, work, and budgets. Moreover, the government sector should set policies consistent with roles, functions, and potential of local hospitals to promote public health by relying on clear policies in the short, medium, and long term.

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REFERENCES

1. Chanmaneerat S, Wiwat Pongpat K, Pradit Batakuta S. Evaluation of Knowledge, Opinions, and Results of Implementation among the Tambon Health Promoting Hospital Policy of Chiefs of Health Center in Public Health Inspection Region 5. The 2nd STOU Graduate Research Conference, Sukhothai Thammathirat Open University, Thailand. 2012:1-13.
2. Rae Sub-District Health Promoting Hospital. Roles and duties of Tambon Health Promoting Hospital [Internet]. [Cited 2019 April 3]. Available from: http://raepk.blogspot.com/2011/01/blog-post_30.html.
3. Kokpon A. Citizen Participation Handbook for Local Administrators. Bangkok: Charansanitwong Printing. 2009
4. ASEAN Institute for Health Development, Mahidol University. Sub-District Health Promoting Hospital Development Policy Monitoring Report. Bangkok: Health Systems Research Institute. 2011.
5. Ministry of Public Health. Sub-District Health Promotion Hospital Selection Performance Report District Health Office and Outstanding Personnel. Bangkok: Office of the Permanent Secretary, Ministry of Public Health. 2018.
6. Promsataprot W. Local health service. Bangkok: Expernet. 2007.
7. Ministry of Public Health. Criteria for evaluating star hospitals. Bangkok: Ministry of Public Health. 2017.
8. Krejcie RV, Morgan DW. Determining Sample Size for Research Activities. *Educational and Psychological Measurement*. 1970;30(3): 607-610.
9. Yamane T. *Statistics: An Introductory Analysis*. New York: Harper and Row Publication. 1973.
10. Sinjungleed J. The effectiveness of services at health promotion hospitals in Nakhon Ratchasima province. *Journal of Health Research and Development*. 2016; 2(1): 114-124.
11. Nunthanert J, Somboontham J, Suksanguan N, Thuankwan M, Arakpotchong W. Efficiency in Public Health Services Development of Health Promoting Hospital, Tumbon Bansuan, Chonburi. *Integrated Social Science Journal*. 2018: 161-181.
12. Sukjareon Y, Klumrat K. Factors Related to the Job Performance Competency among Registered Nurses in Sub-district Health Promotion Hospitals, Nakhon Pathom Province. Princess of Naradhiwas University. *Journal of Humanities and Social Sciences*. 2015;2(2): 14-26.
13. Powpum C. Factor affecting Banphaeow Hospital (Public Organization) Management. *APHEIT International Journal*. 2013; 20(3): 112-123.
14. Kongseup H, Ruangrattanatrai W. Success Factors in the Implementation of Quality Development of the Sub-district Health Promoting Hospital Tid Dao. *Journal of Health Research and Development, Nakhon Ratchasima Public Health Provincial Office*. (2019);5(1): 72-84.
15. Kenny A, Hyett N, Sawtell J, Dickson-Swift V, Farmer J, O'Meara P. Community participation in rural health: a scoping review. *BMC Health Services Research*. 2013; 1-8.

16. Winterbauer N, Bekemeier B, VanRaemdonck L, Anna GH. Applying community-based participatory research partnership principles to public health practice-based research networks. *SAGE Open*. 2016: 1-13.
17. Meksawan T. Government sector reform to a desirable state: how to do it, who is responsible. *Civil-service e Journal*. 1997;42 (2): 24-43.