

Efficiency and Organizational Arrangements in the Utilization of Resources at Primary Health Care (PHC) in Machakos County, Kenya

Health care is costly and there is need for rational use of health care resources for the world to achieve universal health coverage (UHC). The preventive Primary Health Care (PHC) service is cheaper than the Secondary Health Care (SHC). PHC is strengthened through gatekeeper system, so the emphasis on the PHC for cost control is self-explanatory. This study aimed at determining the efficiency and organizational arrangements using human resources for health (HRH), laboratory services and supply of drugs as the performance indicators that determined rational use of resources in Machakos County, Kenya. This was a convergent parallel mixed methods cross-sectional study that employed qualitative and quantitative data collection techniques. The study targeted facility health managers in charges and policy implementers namely the Chief Officer of health, the Director of Prevention and PHC and the Medical Superintendents and patients seeking health care. A response rate of 83% was achieved (n=83), of whom 84.3% were nurses and 15.7% diploma medicine practitioners. Over (70%) of the health facilities had less than 3 professional health workers. Exactly 75% of the community-based self-referrals cases would be treated at PHC level. Self referrals were largely due to patients' perceived need for laboratory services (53.8%) and medicines (60%). On the contrary, 89.6% of the residents of Machakos County, Kenya were informed about PHC services, 91.7% were accessible to PHC and 93.7% had faith in health care providers at PHC level. The HRH, diagnostic equipment and essential drugs were not the main reasons for self-referrals, but perceived needs for drugs and laboratory services. The inverse and disproportionate attendances of patients at both PHC and SHC levels caused dissonance in service delivery and subsequent inefficiency in service delivery in Machakos County, Kenya. Proper supervision and implementation of referral policy available at county level should be emphasized.

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