

ROLE OF MANAGEMENT IN ORGANIZATION OF PRIMARY HEALTH CARE IN UNITS OF REGIONAL GOVERNMENT

Klara Šćuka, univ.spec.oec.¹, Isabella Belić, univ.spec.oec.², Miroslav Jarić, univ.spec.oec.³

¹Brod- Posavina County, Republic of Croatia, kscuka@bpz.hr

²Brod- Posavina County, Republic of Croatia, izabela.belic@bpzupanija.t-com.hr

³Brod- Posavina County, Republic of Croatia, mjaric@bpz.hr

Abstract

The role of primary care is of great importance for the proper functioning of the health system. Social transformation in the last twenty year resulted in a fall of the interest of health care professionals to work in this segment of health care. At the same time, as a result of improving communications and increasing the available information, interested of individuals for their own health is growing. The first contact with an individual health care is in primary care segment, which must be equally accessible to all residents of Croatia, regardless of whether they live in rural or urban areas. Due to the reduced number of medical professionals who choose to work in primary health care, negative transformation of the health system and disconnect segments of primary health care that are organized through health centers, group practice or independent dealers, health care is not at the level of availability that is expected because the organization primary health care system has been left to the individual - doctor. Primary health care system lacks organization, which can be achieved by establishing health management at the level of regional governments.

JEL Classification: I11, R51

Keywords: health care, primary health care, management, regional governments.

Introduction

Health facilities in Croatia operate as public and as private. Public health institutions have agreements on financing the health care with the Croatian Institute for Health Insurance. Private health institutions can make agreement on health care services with the Croatian Institute for Health Insurance or may operate according to market principles. Since 2010. health care at the primary level operate

with a concession given by the regional authority. The regional authority on its territory, in accordance with the Law¹, are taking custody for the health care organization and coordinate the work of institutions, companies and individuals in their area. Mayor role in primary health care have family doctors which connects the entire health care system. A health management, which has the task to organize a functional and organized primary health care by family physicians in the field of regional government, will largely depend on the specialist health care. When the primary health care is available, and doctors in family health care are well coordinated, as result will be a reduction in the waiting lists, tensing and overloading the system at secondary and tertiary levels. The task of management is to coordinate regional government and linking different levels of health care.

1. Analysis of the regional authority health care system the on the example of the Brod – posavina County

Health care in Brod- Posavina County takes place at primary and secondary level. The County is the founder of the five health clinics: Medical Centre Slavonski Brod, Medical Centre “Doc. Andrija Štampar“ Nova Gradiška, Institute of Public Health of Brod – Posavina County, the Institute of Emergency Medicine of Brod – Posavina County and Health facilities and pharmacies Slavonski Brod.

The county ‘s foundering rights, in accordance with low which refers to the rehabilitation of public institution² : the institution of the General Hospital “ Dr. Josip Benčević “ Slavonski Brod” and General Hospital of Nova Gradiška, by Decision of the County parliament to invite the Croatian Government on the implementation of rehabilitation of 27 March 2013th, have transferred to Croatian Government. The reason for transferring the founder’s rights are debts of health care that the County could not be restored from the original income. Debts incurred as a result of reduced payments by the Croatian Institute for health insurance.

1.1. Primary health care

There are many definitions of primary health care. Primary health career present the integral part of the health system of the state, whose function and main focus of the overall social and economic development of the community. It is the first

¹ Public institution rehabilitation law, („Official Gazette“ nr. 136/12)

² Law on Rehabilitation of public institutions (“Official Gazette” br.136/12.)

level of contact of individuals, families and community with the national health system, approaching health care as much as possible to the place where people live and work, creating the first element in a continuous process of health care³.

Primary health care in Brod- Posavina County has carried out in health centers, private practice based on concessions, in County Department of Emergency Medicine and in the Department of Public Health of the County.

1.1.1. Health Centers

There are two health centers in the County. Health centers employs 61 physicians (of which 20 specialists) and 114 medical technicians / nurses. At the level of health centers the following activities has been accomplished: general (family) practitioners, visiting health care, health care for preschool children, dental care (multi-purpose), women's health care, medical transportation, palliative care patients, health care, occupational medicine.

1.1.2. Private practice based on the concessions

Since January 1, 2011th primary health care activities in general (family) medicine (59 teams), dental care (47 teams), the health care of infants and preschool children (4 teams), women's health care (2 teams), laboratory diagnostics (2 teams), health home care (50 teams) and occupational health (4 teams) performed pursuant to a concession.

Table 1: Projected number of teams in the Network of primary health care in BPŽ

Nr.	Health activities	Number of teams in the planned Network	Number of filled teams in the Network	Concession	Health center
1.	The general (family) medicine	92	77	59	18
2.	Dental Health Care	85	67	50	18
3.	Health of infants and preschool children	11	7	4	3
4.	Health care for women	11	10	2	8
5.	Health care in the home	51	51	51	0
6.	Laboratory diagnosis	4	4	4	0
7.	Health care in the home	8	8	4	4

Source: Department of Health and Social Welfare BPŽ

³ Joseph Mesarić: analysis of key aspects of conflict management in the field of primary health care: Economic Journal, No.1., July 2012th

1.1.3. County Institute of Emergency Medicine

County Institute of Emergency Medicine was founded in the 2010th, implementing the measures for emergency medicine in the BP County, providing co-operation in emergency medicine with neighboring local (regional) self-government, ensures and provides filling the teams in the area of the County, ensuring the implementation of identified equipment, vehicles and health care workers standards, provide emergency medical implemented standards for emergency medical transport by road, ensures the implementation of quality standards of work, participates in the planning and implementation of the education of health professionals, conducts technical and scientific research in the field of emergency medicine in cooperation with the Croatian Institute for emergency Medicine.

The Institute of Emergency Medicine has 95 employs 95, including 69 medical and 26 non-health professionals.

1.1.4. Institute of Public Health of the Brod-Posavina County

Institute of Public Health, the County conducts its activities in two locations in Slavonski Brod . The Institute counts 60 employs.

Institute of Public Health has an important role in the implementation of preventive measures to protect the population the County. The significant role of the Institute is to take preventive health care of children in primary, secondary schools and colleges, to perform microbiological activity, to analyze the suitability of water, the water supply situation, the safety of food and general items . Department of Public Health, mental health, prevention and outpatient treatment is the main carrier of prevention programs and non-institutional addiction treatment in the County .

1.1.5. Pharmaceutical activity

In the area of the BP County pharmacy services performed 38 pharmacies, of which eighteen (18) pharmacies in Slavonski Brod, four (4) in Nova Gradiska. Other pharmacies are located in community centers.

Pharmacy institution (founded by the BP County) its principal activity conduct through 9 pharmacies, four are located in the city of Slavonski Brod and 5 pharmacies in municipalities of County. The Institution employs 48 staff, of which 17 full-time employees pharmacists and 18 pharmacy technicians. This institution

is part of a team of primary health care, and pharmacists are the most easily available workers in primary health care. As, the primary disease prevention is focused at healthy people - through patient education about health and healthy life, advisory role in the pharmaceutical field is unavoidable.

1.2. Secondary health care

Stationary health care is carried out through the activity of hospitals in Slavonski Brod and Nova Gradiška.

1.2.1. General Hospital "Dr. Josip Benčević" Slavonski Brod, location Slavonski Brod

Medical institution conducts its primary activities within the specialist-advisory activities, hospital activities, supply of drugs and other medical products. Besides health activities Hospital performs the following activities: scientific- research activities, teaching and educational activities, publishing technical information and publications, professional and administrative work and service and support operations. Considering the number of departments, employees, the scope of the work performed and the number of patients, hospital activity has sub-regional significance and the following categorization of hospitals, according to the Regulations on the conditions for classification of hospitals will establish hospital to be classified in category II of county hospital regional importance.

The hospital employs 222 physicians: 163 specialists and 59 residents, the hospital has 511 beds contracted.

The hospital has a medical following organizational units : Department of Surgical Diseases, Department of Urological Diseases, Department of Anesthesiology, Resuscitation and Intensive Care, Department of Internal Medicine, Department of Dermatology and Venereology, Department of Infectious Diseases, Department of orthopedic diseases, Department of mental illness, the Department of nervous diseases, Department of Ophthalmology, Department of ear, throat, nose and head and neck surgery, Department of Obstetrics and Gynecology, Department of Pediatrics, Department of Rheumatic Diseases, physical Medicine and Rehabilitation.

The hospital performs activities of health care at the level of daily hospital within specialist - consultative health care for the treatment of acute patients.

1.2.2 . General Hospital “ Dr. Josip Benčević “ location Nova Gradiska

Institution is taking care for approximately 58,000 insured persons who live in the western part of Brod – Posavina County (former municipality Nova Gradiška), and provides health care at the level of secondary health care, as well as at the level of primary health care (laboratory) .

The hospital employs 63 doctors of which 41 specialists and 18 residents, 13 interns, disposes with 160 beds.

According to the Regulation on conditions for classification of hospitals, hospital is classified in the city category (local category) with following medical organizational units:

Activity of Internal Medicine, the surgical disease activity, activities of Gynecology and Obstetrics, the activity of Pediatrics, department of Neurology and Psychiatry, diagnostic and other specialty services, emergency medical services (emergency medical admission).

2. Human resources in health Brod- Posavina County

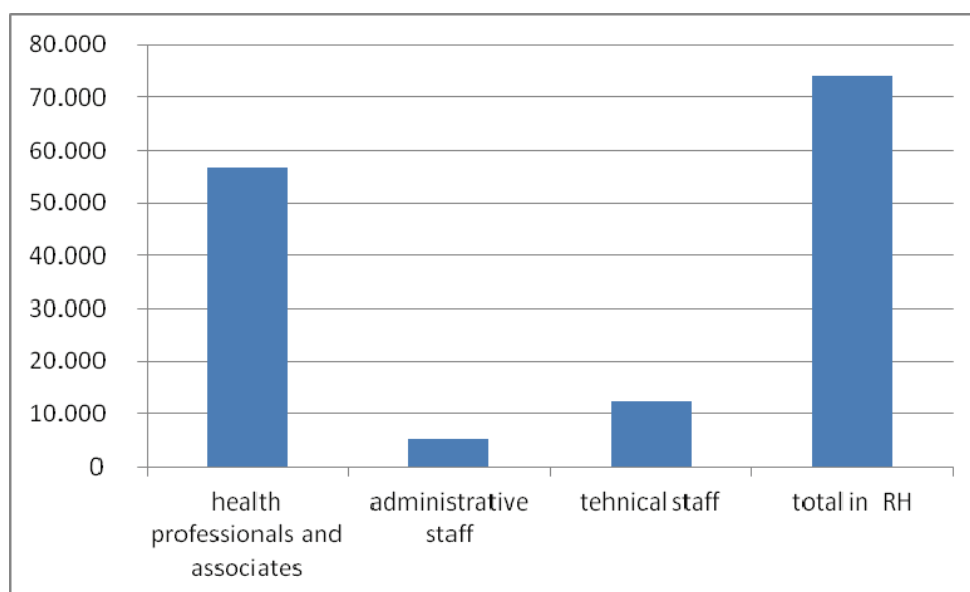
At the end of 2012., in the Croatian health care there were constantly employed 74,241 workers (2011th - 73,434) . Of these, 56,598 are health workers and associates, 5,173 are administrative and 12,470 are technical staff . In the structure of full-time employees, the proportion of health care workers with secondary school education is 37.8 %, administrative and technical workers participate with 23.8 % (2011th - 23.6 %), 17.3% of physicians, health professionals associate with high degrees 11.1 %, dentists 4.3%, pharmacists 4.0%, medical assistants with university degrees (psychologists, speech therapists, social workers, special education teachers and others) 1.2 % of employees and health care workers with lower qualifications are 0.5 % .

Employed at a definite period of time, there have been 7,149 (2011 th - 8418) of health care professionals and associates, and at the day 31.12.2012. was employed, for an indefinite and definite period of time, 63,747 (2011th - 64,255) health workers and associates .

Formation of 12,810 permanent staff physicians in the primary place of employment: 9705 works in institutions owned by the state, counties and city of Zagreb, 658 in private health institutions, and in private practices 2,447, of whom

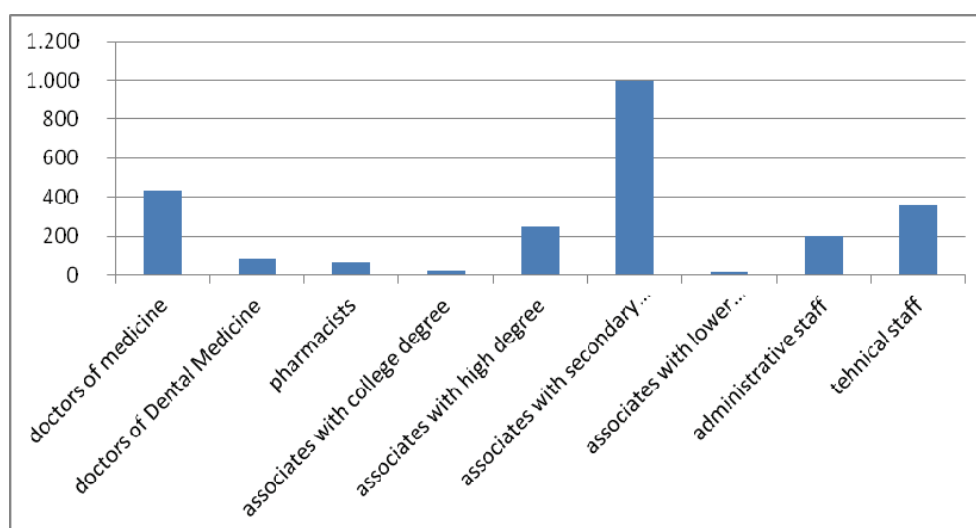
1,798 worked in the offices with the concession contract. In Brod- Posavina in the health care system employs a total of 1,777 employees.

Graph 1: Composition of employees in health care in medical institutions in Croatia



Source: Health Statistical Yearbook 2012th

Graph 2: Structure of employees in the health institutions in the area of the County



Source: Calculated by the survey authors believe

Health facilities in the Brod- Posavina County are in average of Croatia according to number of health and non-health professionals, and in a favorable relations for specialists which have worked in 20 departments and services in the General Hospital “ Dr. Josip Benčević “ Slavonski Brod and in 14 departments and services in the General Hospital Nova Gradiška.

In the area of the County lives 163 322 insured persons, in conformity with, which is visible, in Brod- Posavina County is lack of primary care physicians and primary health care is not equally available to all residents of the county. In the future we should take into account the investment in infrastructure of ambulances and equipment for the same to create conditions for completing the Network and better availability online and available primary health care to all residents of the county.

3. The management of health institution

In practice, we find different definitions of management and Heinz Weihrich defines management as a process of designing and maintaining an environment in which individuals, working together in groups, effectively generates selected targets. According to that, the key determinants of the process of management is to make decision, to influence, to communicate, coordinate and to connect. The key role of managers is to making decisions⁴ independently how much are they heavy and how they, in short term, brings negative publicity to the company or health organization. Top managers must make decisions that will have long-term effects and which are oriented towards to service users or patients.

The role of management in the health system regional government can be observed on the level of primary health care through voluntary participation of doctors in a special duty, which is not required by law, but it has been given the possibility of contracting with the Croatian Institute for Health Insurance .

In Brod- Posavina County, in the area of family medicine, works 77 physicians, 59 physicians based on concessions, given by the District and 18 physicians which are working in health centers.

⁴ Tom Peters; Robert H.Wateman, ml.: The pursuit of excellence, Profile, Zagreb (2008)., P.62

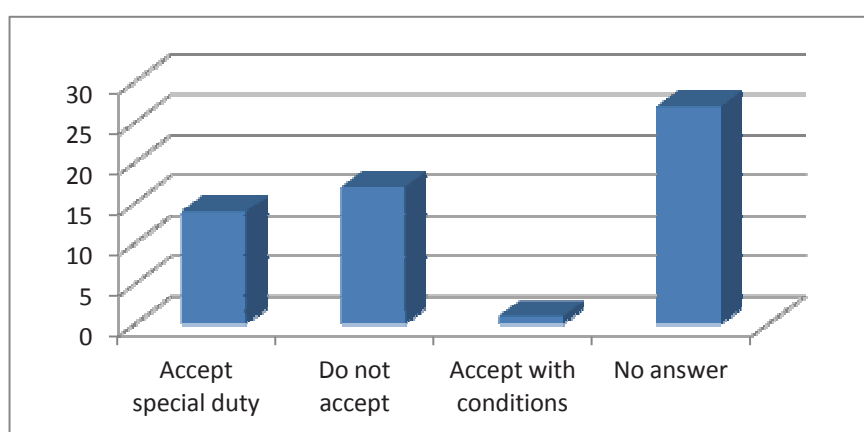
County, based on the low⁵, coordinate the work of health institutions and all natural and legal persons in their area . County, by the Administrative Department of Health and Social Welfare, has invited practitioners to participate in the implementation of a special duty, witch will be organized on Saturdays after 15 pm, Sundays and holidays . Considering the number of family physicians, which works in the County, special duty will be manned by doctors 3-5 times per year in one shift . Doctors were offered an agreement with HZZO to a payment duty (55 kn per executed inspection) . Based on experiences, the number of patients which comes to doctors on duty is 50-80 patients per shift . The ability to income, trough enforced contracts, is in the amount of 2750-4400 kn. The result of the survey was disappointed, 59 of surveyed family physicians (18 physicians, which works in health centers) only 14 of them accepted the work of the special duty.

Table 1: Survey of doctors on the implementation of a special duty

Accept special duty	Do not accept duty	Accept with conditions	Did not answered	Total
14	17	1	27	59
23,73%	28,81%	1,69%	45,76%	100%

Source: Calculated by the survey authors believe

Figure 3: results of a survey on the participation of physicians in a special duty to BPŽ



Source: Calculated by the survey authors believe

⁵ Article 9., Health Care Act, Official Gazette “. 150 / 08th, 71/10. 139/10., 22 / 11th, 84 / 11th 12/12., 35/12., 70/12. 144/12., 82/13

The results indicate the needs for a different organization of health management to plan, to organize, to motivate and make decisions that will ensure a complete, functional and accessible health care in the county . Chester Barnard talks about management that there is no doubt that the development of the crisis which occurs, due to an unbalanced treatment of all factors, is opportunity for correct functioning of executive directors who have a sense of complete picture. Formal and orderly perception is rarely present, perhaps even rarely possible, except for the few people which are executive genius or in several executive organizations, whose staff are very sensitive and well integrated⁶ .

One of the important role of management is to motivate all factors and all employees in the system and in management system in to increase system effectiveness. When we talk about the management of health care, specific medical institution cannot be considered as a unit, but the system as a whole, there must be communication managers of various health institutions in order to organize health care in which the patient will be satisfied with the quality, efficiency and availability of services .

Conclusion

The organization and management of primary health care is fragmented and inefficient. Decisions are made autonomously in some clinics, without sufficient information and looking at the whole perspective. Such a decision-making process result in a disorganized system. In Brod- Posavina County, decisions are made in 64 units (59 concessionaires and 5 medical institutions). This results in making decisions which are opposite with the fundamental principle that health care must be complete, comprehensive and acceptable. Improvement of the system is only possible by connecting the management of all units which operates on the principle of contracting health care with the Croatian Institute for Health Insurance. Management will then make decisions which will be enforceable and binding for all participants in the health care system. Regulation and better organization of primary health care will create preconditions for better and more efficient operation of the entire system of health protection at the local level and will reduce errors caused by organizational problems.

⁶ Tom Peters; Robert H.Wateman, ml.: In pursuit of excellence, Profile, Zagreb (2008)., P.119

References :

- Barković, D. (2009). Menadžersko odlučivanje, Sveučilište Josipa Jurja Strossmayera Ekonomski Fakultet, Osijek
- Barković, D.(1999). Uvod u organizacijski management,, Sveučilište Josipa Jurja Strossmayera Ekonomski Fakultet, Osijek 1999.
- Čičin-Šain, D., pred.: Skripta iz osnova menadžmenta, Visoka škola za turistički menadžment Šibenik
- Peters, T.&Watwrman, R. H.(2008): U potrazi za izvrsnošću,Profil, Zagreb
- Weihrich, H.& Koontz, H. 1994). Menadžment, Mate, Zagreb
- Robins P. S.& Judge A. T. (2009):Organizacijsko ponašanje,Mate d.o.o., Zagreb
- Marković, B. & Vukić, S.: Modeli organizacije i financiranja zdravstvenog sustava u odabranim zemljama svijeta,
- Gorjanski, D. (2009) .Je li hrvatski zdravstveni sustav – sustav?, Matica hrvatska Ogranak Osijek, Osijek
- Kovač, N. (2013) - Financiranje zdravstva – situacija u Hrvatskoj, Ekonomski vjesnik, hrcak.srce.hr
- Mesarić J. (2012): Analiza ključnih aspekata upravljanja konfliktima u području primarne zdravstvene zaštite: Ekonomski vjesnik, No.1., srpanj.
- www.journals.lww.com/jphmp/Fulltext/2014/03000/A_Simple_Strategy_to_Transform_Health_All_Over.1.aspx (20.03.2014.)
- http://www.akaz.ba/Publikacije/Dokumenti/prirucnici/Prirucnik_za_menadzere_ZR_revizija2.pdf (27.03.2014.)
- WHO, 2013. World health statistics 2013.: European health for all database (HFA-DB),World Health Organization Regional Office for Europe,Updated: July 2013: <http://www.euro.who.int/en/data-and-evidence/databases>
- Zakona o sanaciji javnih ustanova („Narodne novine“ br.136/12.)