

Проблеми розвитку медичної галузі в Україні в умовах впровадження реформи децентралізації

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Анотація. Актуальність дослідження полягає в тому, що реформування медичної галузі є важливою складовою децентралізації. Стара модель функціонування медичних закладів є неефективною, тому виникає потреба в реорганізації, що проводиться шляхом ухвалення відповідних рішень. Медична галузь одна з найпроблемніших в Україні, особливо це стосується організації медичної допомоги саме в територіальних громадах. Тому реформування в умовах децентралізації є достатньо складним процесом для вирішення і введення в дію. Реформування медичної галузі передбачає створення нової системи територіальної організації, розвиток місцевого самоврядування та удосконалення регіональної державної політики. Розвиток медичної галузі є одним з основних чинників досягнення добробуту населення та національної безпеки. Більшість медичних закладів – це малопотужні лікарні, які мають застаріле технічне оснащення та зношені основні фонди. Необхідно запровадити нові підходи до розв'язання проблем громадського здоров'я. Мета дослідження – визначити основні проблеми, які негативно впливають на розвиток медичної галузі в Україні в умовах впровадження реформи децентралізації. Децентралізація уособлює можливість громад розпоряджатися ресурсами та мати повноваження на їх реалізацію. Механізм реформи децентралізації передбачає перерозподіл фінансових ресурсів і владних повноважень від центральних органів державної влади до регіональних або органів місцевого самоврядування. Реформа медичної галузі передбачає конкретні кроки для підвищення якості життя та наданих послуг, вона має концептуальне наповнення та чіткі рамки. В процесі децентралізації реалізується широкий спектр реформ регіональної політики та місцевого самоврядування. Її досягненнями є зменшення рівня корупції, поліпшення структури управління та активізація громад. Однак, варто підкреслити, що водночас даний процес супроводжується чисельними проблемами, викликами та ризиками в медичній системі, які необхідно доопрацювати та врахувати для подальшої успішної реалізації. Практична значимість полягає у виявленні проблемних факторів розвитку медичної системи та встановленні взаємозв'язків, що пригнічують реформування охорони здоров'я

Ключові слова: децентралізація, реформа, інфраструктура, місцеве самоврядування, медичні послуги, територіальні органи, фінансове забезпечення

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Problems of Development of the Medical Industry in Ukraine in the Context of the Decentralisation Reform

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Abstract. The relevance of the study lies in the fact that the reform of the medical industry is an important component of decentralisation. The old model of functioning of medical institutions is inefficient, so there is a need for reorganisation, which is carried out by making appropriate decisions. The medical industry is one of the most problematic in Ukraine, especially with regard to the organisation of medical care in territorial communities. Therefore, reform in the context of decentralisation is quite a complex process to solve and implement. The reform of the medical industry provides for the creation of a new system of territorial organisation, the development of local self-government, and the improvement of regional state policy. The development of the medical industry is one of the main factors for achieving the well-being of the population and national security. Most medical institutions are low-duty hospitals that have outdated technical equipment and worn-out fixed assets. It is necessary to introduce new approaches to solving public health problems. The purpose of the study is to identify the main problems that negatively affect the development of the medical industry in Ukraine in the context of the implementation of the decentralisation reform. Decentralisation represents the ability of communities to manage resources and have the authority to implement them. The mechanism of decentralisation reform provides for the redistribution of financial resources and power from central state authorities to regional or local self-government bodies. The reform of the medical industry provides for concrete steps to improve the quality of life and services provided, it has a conceptual content and a clear framework. In the process of decentralisation, a wide range of regional policy and local government reforms is being implemented. Its achievements include reducing corruption, improving governance, and activation of communities. However, it is worth emphasising that this process is accompanied by numerous problems, challenges, and risks in the medical system that need to be finalised and taken into account for further successful implementation. The practical importance lies in identifying problematic factors in the development of the medical system and establishing relationships that hinder health care reform

Keywords: decentralisation, reform, infrastructure, local self-government, medical services, territorial bodies, financial support

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Introduction

Decentralisation in the field of medicine is aimed at creating organisational, material, and financial conditions for providing territorial bodies with delegated and own powers. Local self-government bodies are tasked with implementing local programmes, providing high-quality public health services, and developing regional policies. For several years since the adoption of the laws, the process of creating communities in some regions of the country has not begun, which has led to a slowdown in the creation of a basic-level health network. Many radical changes have been made to the healthcare system of Ukraine, which are based on the latest model of focusing on the health of Ukrainian citizens. The application of reformed changes in the field of health care contributes to improving the health status of the population by selecting a medical worker and providing highly qualified personnel.

The main priority is the financial protection of the nation by providing high-quality and modern medical services according to equal and uniform rules for everyone. Medical reform should encourage efficient and equitable allocation of resources, focusing their costs on the provision of medical services, rather than the maintenance of medical institutions. The decentralisation reform seeks to ensure a high level of transparency by providing the necessary information about health care in full [1]. The system of medical care in Ukraine operates on the budget support of medical institutions. The lack of mechanisms for flexible distribution of services by level of medical care does not make it possible to effectively and efficiently organise high-quality medical care and optimally manage the budget. The modern industry of municipal and state healthcare institutions does not maintain the medical sector in a satisfactory condition for providing services and efficient operation. The main problems that slow down the effective functioning of the medical sector are considered to be: irrational distribution of finances, dominant hierarchy, not established information management system and personnel management system [2]. The possibility of implementing reforms depends on the implementation of changes at the legislative level. The main subject in the implementation of improvements in the medical industry is professional and moral readiness to implement changes. Their key task is to promote reforms productively. After all, political expediency often prevails over rational arguments, especially in such an area as healthcare. A number of obstacles hinder the implementation of medical policy. That is why it is necessary to popularise the importance of medicine in general and change the consciousness of the population, since distrust of the professionalism of doctors and medical institutions is a barrier to the adaptation of decentralisation [3-4].

The concept of development of the public health system in Ukraine lays the foundations for reorienting the medical system from the policy of treatment to the policy of preventing, strengthening, and preserving the health of the nation. One of the most important purposes of the international community is precisely to preserve and ensure the health and high-quality life of the population, which are reflected in the principles of European policy. This strategy is based on recognition of success at all levels if effective funding for health services is implemented to improve the quality of treatment, improve collective leadership and the quality of treatment for all segments of the population. According to the reform of the territorial organisation of power in Ukraine and local self-government, the responsibility for organising the implementation and provision of medical care is borne by communities that provide primary care services, disease prevention, and emergency medical care. Local self-government bodies are responsible for providing specialised medical services at the secondary level and forming a network of hospital districts [5-6].

The purpose of the study is to identify the main problems that negatively affect the development of the medical industry in Ukraine in the context of the implementation of the decentralisation reform.

Materials and Methods

A set of scientific methods and approaches was applied to work out the problems raised. The theoretical and methodological provisions are based on fundamental research of Ukrainian specialists and scientists in the field of development of state medical reform in Ukraine. The application of the regional approach as the basis for methodological support of reform problems is characterised by a discrepancy in demographic, economic, and political characteristics of different regions, which considerably affects the development of motivation of local government officials and administrative executive power involved in the decentralisation process. Using the search-problem method, a problem was found and recognised, which will be solved in the future by selecting the best option. Comparative legal and comparative functional approaches helped to establish the specifics of implementing medical reform in Ukraine in the context of decentralisation and analyse world experience in this matter.

The scientific approach was used in the analysis of legislation, which identified gaps in the legal regulation of the implementation of state medical reform. The results obtained identified the issues of ensuring strategies for reforming the medical industry based on the activities of organisational, technological, and economic systems. At the same time, the system of economic relations acts as

the basis for reforming and moving to progressive models of organising medical services at all stages of its provision. Using a comparative methodology, organisational and legal aspects of solving the problems of healthcare institutions during the unification of territorial communities are analysed. And the approach of system analysis contributed to the comparison of diverse regulations that control relations of the organisational and legal aspect at the time of planning the territorial structure. To assess trends in the decentralisation of the healthcare system in Ukraine, which is an important element of adaptation and reform, the study uses the theoretical basis of the theory of public economic sector, its disadvantages and advantages in the functioning of various systems.

During the study, a questionnaire was used to identify the problems of territorial communities. This analysis is the result of collecting information obtained during group interviews. The procedure itself involved filling out a questionnaire form. The study was conducted in order to identify the main possible reasons related to the implementation of medical reform in the context of decentralisation and resistance on the part of various groups that somehow relate to the issue under consideration. The development of recommendations in the communication and information spheres for government agencies is the result of a survey. Other theoretical methods were also used: systematisation, comparison, synthesis, summary of empirical and generalisation of theoretical research results.

With the help of gradual distribution, the complex state of medical and preventive institutions was analysed, the basic principles of creating territorial communities and the stages of the process of implementing reforms in the context of decentralisation were described. It was determined that an effective way to optimise the networks of preventive and medical institutions is to form an integral space in the medical industry, which should be based on the integration of health care institutions owned by different territorial communities. Such a benchmark of reforms requires an effective management strategy in the medical system and political decentralisation in order to achieve affordable and high-quality healthcare. Having identified the main factors of the relevant strategy in the field of medicine and the level of funding organisation, it is possible to analyse typical development models in foreign countries with different dominant mechanisms.

Results and Discussion

At the present stage of development of Ukraine, the issue of effective implementation and fulfilment of medical reform by the state at all its stages, including regulation of the medical services market, has become particularly relevant. The lack of scientific research and the presence of imperfect management mechanisms for this industry

are considerable reasons for the implementation of state medical reform in Ukraine. The state policy is aimed at effective and high-quality implementation of the reform, which is characterised by the introduction of reference prices for certain medicines and the further development of family medicine. Comprehensive renewal of the medical, humanitarian, and social spheres is one of the best ways to bring the industry out of a large-scale deep crisis. Indicators of public health act as an index of the development of an economic and social factor, as well as a generalising characteristic of the standard of living in general. The level of national security of the state is also directly related to the reform of healthcare [7-8].

The main areas of medical reform in Ukraine are polyclinic departments, primary care institutions, and medical workers. Every citizen of the state has the opportunity to choose a doctor. The patient signs a contract based on which specific medical services are provided to him. At the moment, there is a positive trend in the implementation of medical reform in Ukraine. The state partially meets specific expectations and citizens feel the productivity of the parties of the reform since a certain analysis of the reform of the medical industry has been carried out. The features of their implementation and the specific combinations of mechanisms that are successfully used to solve health issues always differ from each other in different countries of the world. Therefore, it is impossible to create a single concept of reform that could be used on the example of other countries. Such changes embody the differences between many economic and conceptual factors of development and the transition process [9].

In accordance with the international requirements of Ukraine and with the support of international organisations, the process of reforming the medical industry is being conducted. Within the framework of the association agreement between the European Union and Ukraine, the medical system is being implemented and strengthened through reforms. This makes it possible to provide society with the necessary and high-quality medicines, avoiding corruption. Attempts to discredit the reform programme and block a number of fundamental innovations by some political forces contributed to stagnation of work and put the transformation of the reform process at risk [10]. The rejection and distrust that have formed in the community threaten to the implementation of reforms. The main threats are: inadequate financial support for programmes in the local and state budgets, incomplete structural adjustment of the industry, changes in the political vector of state development. Prolonged depression has created distrust of the health care system.

Sociological studies show that the most tangible understanding and adoption of the reform is observed in those areas where the programmes are confirmed

by practical implementation. With the introduction of health insurance and the emergence of a large number of private medical institutions, attention to the quality of services provided has increased and competition has emerged in the medical services market. One of the most important tasks of the management of healthcare institutions is to achieve competitiveness and innovation of management technologies. The ability to fully meet the needs of consumers by providing high-quality medical services, economic efficiency and safety are the main factors of competitiveness of a medical institution. The management system should be based on modern information technologies, which will be the basis for automating accounting for medical services and information [11].

The development of the medical industry in Ukraine is accompanied by considerable difficulties. The reform is carried out simultaneously with the transformation and restructuring of the state administrative apparatus. In these conditions, the health of society acts as a socio-economic value. Consequently, the activities and problems of the medical system, which are aimed at preserving the potential and increasing it, require constant attention and support from the state. Health care is considered as one of the priority and important areas of national security and state policy. Information materials of the system analysis of the Ministry of Health indicate that the level of public health at the present stage qualifies as unsatisfactory.

Over the past decade, Ukraine has seen an increase in the overall mortality rate of society, while in European economically developed countries it has decreased over the specified period of time. The main priorities of the state policy in the field of medicine should be to improve the efficiency of healthcare, ensure social justice, and improve the financing of the industry in order to use the resources provided to the full. Achieving the purpose is possible with the use of a set of national measures that provide for: creating conditions for improving the well-being of the population, organising effective environmental protection, carrying out economic reforms to form a complete state budget, ensuring labour protection and safety in all industries, updating demographic policy to increase the birth rate and reduce mortality in society [12-13].

The state policy of Ukraine in the field of healthcare is aimed at improving the quality of life, preserving the gene pool of the Ukrainian nation and improving the level of health. Ensuring its implementation should contribute to the introduction of new mechanisms for managing and financing the industry and qualified medical

care for every citizen. The level of satisfaction of the needs of an individual and the whole society is an indicator of the effectiveness of the state policy of decentralisation in medicine. The ongoing reforms partially ensure the transition of the healthcare system from socially costly to socially investment, the prerequisites for which are the intensive development of the system as a whole.

Thus, optimisation of the public needs of the healthcare system of Ukraine requires the invention of new ways to implement and form the reform of medicine and the application of advanced foreign experience. The primary tasks of state policy are to recognise the right of every citizen to ensure protection, healthcare, and guarantee the exercise of their rights in this area. To fully ensure the functioning of an independent democratic state, it is necessary to introduce and approve relevant legislative acts regulating the legitimate activities of the public health sector. Evidently, the health system's efforts to solve problems are not enough. The interest of citizens in strengthening and maintaining health also forms social responsibility, contributes to the creation of a healthy environment and develops the medical industry in the area of innovative technological progress [14]. Given the need to introduce quarantine in Ukraine due to the spread of the coronavirus disease COVID-19, the issue of maintaining the constancy and quality of state bodies and medical institutions' functioning has become acute. To introduce the practice of remote work, changes were recorded to the standard rules of internal service regulations on civil service issues registered in the Ministry of Justice of Ukraine. Consequently, civil servants were given the opportunity to perform tasks outside the administrative building of a state body. Based on this, a survey was conducted, in which all interested civil servants of different levels of state bodies and different categories of positions were able to take part [15]. According to the results of the survey, it was determined that as of April 2020:

37.6% – work normally, perform their official duties within the administrative building of a state body;

31.3% – switched to remote work, so they work from home;

29% – work from home, and visit the workplace in accordance with the duty schedule;

2.1% – do not work, are on sick leave/on long-term leave (Figure 1).

The dynamics of growth in the percentage of civil servants who switched to remote work can be traced with the growth of the level of the state body. Accordingly, the higher the level of the state body, the more civil servants switched to remote work (Table 1).

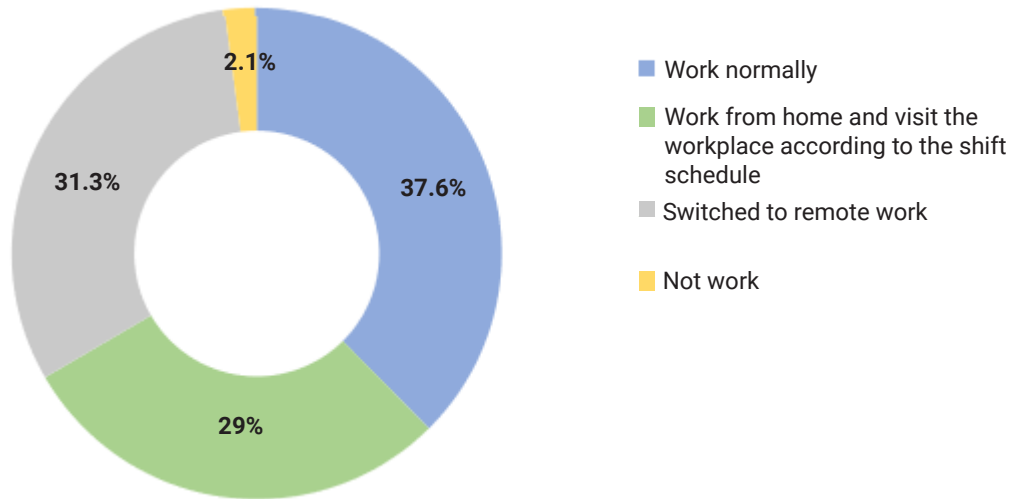


Figure 1. Working hours of civil servants as of April 2020

Table 1. Working hours of civil servants in state bodies of various levels

Working schedule	Level 1	Level 2	Level 3	Level 4	Level 5
In normal mode	18.2%	17.5%	30%	44.5%	55.2%
Remotely	40.9%	29.8%	28.8%	26.6%	30.1%
Remotely, and the workplace is visited according to the duty schedule	40.9%	51.5%	37.5%	27.1%	11.7%
Do not work	0%	1.2%	3.8%	1.7%	3.1%

The dominant means of telecommunications interaction, both during the normal and remote mode, remain the telephone and work email. At the same time, the frequency of using personal email, Viber, and the electronic document management system for remote work is increasing. It is worth noting that the percentage of use of the electronic document management system (51.4%) remains quite low in remote work conditions. Percentages

for the use of remote work organisation tools (Trello, Slack) and online meeting organisation (Skype, Zoom, Meet, Cisco Webex) are growing slightly, but remain critically low. A comparison was made based on the level of the state body regarding the use of telecommunications equipment by civil servants for interaction within their structural division (Table 2).

Table 2. Application of telecommunication means in the organisation of work and interaction within a structural division

Means of communications	Level 1	Level 2	Level 3	Level 4	Level 5
Email (working)	86.4%	72.5%	65%	65.5%	61.3%
Email (personal)	72.7%	55%	56.3%	56.8%	34.4%
Telegram	68.2%	29.8%	18.8%	7.9%	9.8%
Viber	40.9%	66.7%	75%	79.5%	62.6%
WhatsApp	40.9%	39.8%	21.3%	18.8%	11.7%
Slack	0%	3.5%	11.3%	0.4%	0.6%
Facebook	13.6%	16.4%	8.8%	19.2%	17.8%
Instagram	4.5%	1.8%	0%	1.3%	1.8%
Trello	0%	5.8%	5%	0.4%	0.6%

Table 2, Continued

Means of communications	Level 1	Level 2	Level 3	Level 4	Level 5
Skype	13.6%	14.6%	3.8%	6.6%	6.1%
Zoom	36.4%	28.7%	20%	20.5%	11.7%
Cisco Webex	4.5%	3.5%	3.8%	0.9%	1.2%
Meet	0%	3.5%	1.3%	0%	0%
Google Docs	50%	40.9%	28.8%	12.7%	6.7%
Electronic document management system	50%	70.8%	52.5%	38.9%	16%
Telephone	77.3%	78.9%	75%	80.3%	73.6%
Other means of communications	18.2%	12.3%	11.3%	6.1%	8.6%
Do not use any	0%	1.8%	2.5%	7%	14.7%

From the table above, it is evident that at all levels of government agencies, most employees use telephone, work email, and personal email (except for the fifth level) to interact within a structural division. Telegram is most in demand among representatives of the first level, and Viber is most in demand among representatives of other levels of government agencies. Among representatives of the first level of government agencies, 50% use Google Docs, while in other government agencies there is a downward trend in the use of this tool in accordance with the decrease in the level of jurisdiction. The electronic document management system is mainly used at the first and third levels of state bodies. This may be due to the lack of such a system in most government agencies of the fourth and fifth levels.

Based on the results of the analysis, it can be assumed that in quarantine conditions, when some civil servants work remotely, and some continue to work normally, there are certain difficulties and inconveniences regarding communication, interaction, and organisation of work. An important factor in productive interaction in remote work is the quality of communication. A significant percentage of civil servants noted that they are in constant contact with colleagues (77.6%) and receive feedback on the work done (61.6%). At the same time, some respondents feel some isolation from the team when working remotely. It was identified that men are less likely to receive feedback about work performed remotely than women. And category "B" employees are less likely to receive feedback than category "C" employees. A causal relationship has been established between public service experience, work experience in the position held, and receiving feedback: employees with more experience

receive less feedback about work performed remotely. It was established that the bigger an employee has work experience in his position, the less he believes that he is in constant contact with colleagues of the structural division and the manager. There is a change in the level of employees' sense of constant contact with colleagues, receiving feedback, depending on the level of the state body: the higher the level of the state body, the higher these indicators are [16].

It was determined that the use of such methods as conducting online conferences, online meetings of working groups, exchanging electronic documents, working together on documents online, setting tasks, planning and monitoring, telephone communication, messaging, correspondence, affect whether an employee who is in constant contact with colleagues of his structural division and the manager feels that he always receives feedback about remotely performed work and believes that the level of work communication has remained unchanged. Using such a method as working together on documents online affects employees' assessment of remote work of colleagues. In other words, the less work is done together on documents online, the more employees believe that colleagues who have switched to remote work are not doing anything. The establishment of such a connection indicates that online collaboration can be used as a way of communication in order to establish interaction and accept changes in the working hours of employees, establish a favourable climate for remote work [17].

The majority of civil servants surveyed (68.1%) would like to combine remote work with full-time work in the future, 19.6% would not like to work remotely, and 12.3% would like to switch to remote work mode (Figure 2).

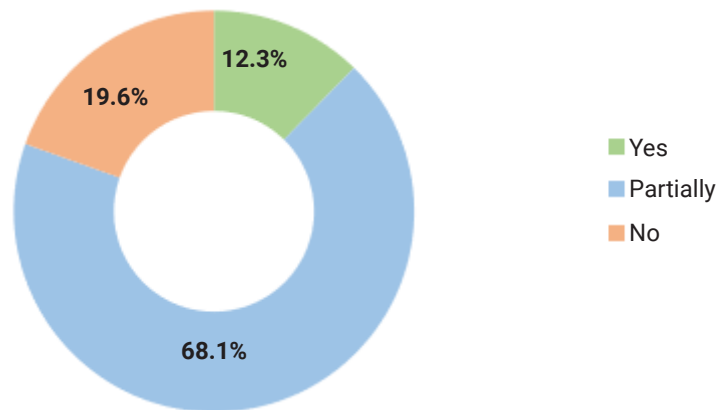


Figure 2. Would you like to continue working remotely in the future?

Correlations were established between how the respondent evaluates the effectiveness, quality, and performance discipline of a structural unit or state body and his desire to continue working remotely: the higher civil servants evaluate efficiency, quality, and performance discipline, the more they want to work remotely in the future. It was established that the more methods of organising remote work are used when working remotely, the more civil servants would like to continue working remotely in the future [18-19]. Civil servants tend to work more remotely if they use the following telecommunication tools: Telegram, WhatsApp, Slack, Trello, Skype, Zoom, Meet, Google Docs, electronic document management system, and telephone. Respondents noted that if the decision depended on them, 65.7% would allow employees of their structural division to switch to partially remote work (combine remote work with full-time), 20.8% would allow them to fully switch to remote work mode, and 13.5% would not allow [20].

Conclusions

Current challenges and changes require the implementation of policies to achieve and maintain health for the entire population through the implementation of appropriate national and regional policies. To implement the successful implementation of reforms in the healthcare system in Ukraine, a balanced programme is required that will form the areas of development, taking into account the necessary number of legislative acts, depending on the conditions of their existence. The latest models of reform management serve as an impetus for

the transition of the healthcare system to modern mechanisms of functioning. The main priority area should be the theoretical basis for state executive authorities and local self-government bodies to create appropriate conditions for improving and preserving the health of the nation, activities in health management. The activities of medical institutions in modern conditions should take into account unpredictable challenges and strengthen control over their work.

Analysing the problems of functioning and development of the medical industry in the context of the implementation of the decentralisation reform, it is important to note that at the present stage the medical system is on the list of the most problematic areas that require effective and rational reform. This is especially true for the organisation of medical care in territorial communities. That is why the decentralisation reform is a complex process that should result in affordable and high-quality medical services for the entire population of Ukraine. The main characteristic of the transformation of the healthcare system is the vector of increasing the level of decentralisation while maintaining the principle of financial solidarity. Health protection and promotion should be one of the main priorities not only of local self-government bodies and state bodies, but also of society itself. The key task of the government of Ukraine is to further refine the medical reform, provide considerable financial support, and inform members of self-government communities about changes that are taking place in the process of providing medical services.

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