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PUBLIC-PRIVATE PARTNERSHIP IN MODEL OF ADVISORY-DIAGNOSTIC CENTER

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Abstract

Introduction The transition of the Ukrainian health care system to progressive development models that ensure its structural efficiency is an actual problem.

Purpose: to design the functional-organizational model of the Consultative and Diagnostic Center (CDC) on the principles of public-private partnership (PPP).

Materials and methods General scientific methods of analysis, synthesis, generalization, interpretation of scientific data, as well as systemic and structural-functional approaches were applied.

Results The model of the consulting and diagnostic center is developed as a new organizational and legal form of medical services for the population on the principles of PPP.

Conclusions

The developed model is a new organizational and legal form of medical services for the population, implements the transition of communal services to the mechanisms of public-private partnership, provides attraction of private investments to achieve medical, social and economic efficiency of CDC and increasing the availability and quality of medical care.

Key words: functional-organizational model, consulting and diagnostic center, public-private partnership.

Actuality of theme

Today, governments and international organizations in Europe are working together to form a pan-European regulatory framework for public-private partnerships (PPP) [1].

The aspiration of Ukraine to bring the health care system closer to European standards requires a substantial upgrade of the system of organization of provision of medical care, substantiation of the possibilities of using the PPP in the health care system and regulating its components [2].

In terms of the limited financial capacity of the public sector, a significant reduction in costs for outpatient medical care, lack of material and technical equipment of the municipal outpatient healthcare facilities (HCF), it is necessary for private investment that can provide economic stability of institutions and the possibility of population quality medical care [3-6].

The purpose of the study: to develop a functional and organizational model of the consulting and diagnostic center (KDC) on the principle of a public-private partnership (PPP).

Materials and methods

In order to achieve this goal, the general scientific methods of analysis, synthesis, synthesis, interpretation of scientific data, as well as systemic and structural-functional approaches were used in the work.

Research results

In recent years, the legal and regulatory framework has been substantially improved in Ukraine, which defines the procedures, rights and obligations of the parties in PPP projects. Accepted: Law of Ukraine dated 01.07. 2010 № 2404-VI "On public-private partnership"; Law of Ukraine of 24.11.2015 number 817-VIII «On amending some laws of Ukraine to eliminate regulatory barriers to the development of public-private partnerships and encourage investment in Ukraine" [7-8], which cluster with regulatory and legal bases of development models in for QBO on public-private partnerships.

In order to develop the most optimal variant of the functional and organizational model of KDC, we solved the immediate problems of modeling, that is, defined the initial data of the model: the administrative and legal status of the model, the organizational structure of the model, the features of its functions and processes, taking into account the materials studied in terms of organizational and legal functioning of the functioning on the basis of PPP.

Taking into account the systemic, integrated approach, the interest of the city authorities in providing all the population with quality consulting and diagnostic and medical care, and also taking into account the interests of private investors, the most optimal variant of the model, in our opinion, is the model of the consulting and diagnostic center on the principles of PPP, which in its composition should combine two divisions - communal and commercial and display the properties, interconnections, structural and functional characteristics that form "mixed economy ". The KDC model on PPP principles should have a cost-effective management mechanism inherent in the private sector, have modern diagnostic equipment and production technologies, highly skilled personnel, provide high quality of services, availability of consultative-diagnostic and medical care for all segments of the population.

Partners and subjects of the management of the KCC on the principles of PPP are: - strategic - city or district state administration, legal - legal entity with private capital and economic - an independent institution - KCTS. Interaction of partners is fixed on the official, legal basis in the charter of the KCC. Other agreements with the city (district) state administration for the period of 5 to 15 years are signed , which include :

- an investment agreement defining the rights to a newly created financially and economically independent entity - KDC with a new economic mechanism on the principles of public-private partnership;

- contract - orders for the volume of services provided in the communal department of the KCC, and their financing;

- real financing of services of the communal department of the KTC for the term of the contract;

- service contracts - contracts (maintenance, operation, management contracts);

- The symmetric distribution of chances and risks between partners, which is carried out in accordance with the principle that everyone assumes the risks with which he can handle a better than another partner.

The administrative and legal status of a model can be defined as a set of its rights and responsibilities, the range of which implies, within the limits of administrative legal personality, independence in the decision-making, the definition of goals and tasks necessary for the performance of its functions, participation in administrative relations with the state executive authorities and city council bodies.

The KDC model on the basis of PPP is aimed at solving social problems taking into account interests:

- the state, in the person of district state administrations, in order to provide the population with high-quality and affordable outpatient medical aid in various segments of the population in a socially and economically acceptable form;

- population - to provide affordable and high quality outpatient care in a socially, economically acceptable and attractive organizational form, the choice of a department and a doctor;

- medical personnel - to ensure decent wages; professional and social security; independence of the choice (within the law) of the form, place of work, professional conduct; opportunities for regular refresher training.

The main task, which is designed to solve the model of KDC on the principles of PPP in its activities, is to ensure the constitutional right of citizens to health care and medical care, which is expressed in the provision of timely, affordable, high-quality medical care.

Model functions are fixed in a normative order and contain what should be executed by the administration and collective of the model of KDC in order to achieve the set goals and objectives.

According to the Statute, the model in the course of its activities acts not only as a HZ , but also as an economic entity that has a logistical base for the implementation of its core activities, in this connection, it has to solve its tasks and the exercise of functions, the corresponding scope of rights and responsibilities. Rights and responsibilities are one of the most important elements of the administrative and legal status of the KCC as a medical institution.

Model KDC on the principles of PPP we are considered as a second-level GHS, providing secondary care, that is, secondary outpatient counseling and diagnostic assistance.

The functional-organizational model of the KDC should have:

- an administrative-economic unit with an automated control system . For each physician, an automated workplace should be created , integrated into a single automated local area network. For the statistical processing of information, an automated information system "Statistics" should be created.

- in the prophylaxis;

- a medical unit consisting of two consulting medical diagnostic departments: a commercial, which operates under contracts with patients on the basis of contractual prices for paid services, and

a communal service that performs services under contracts - orders concluded with buyers of services - district state administrations. The communal department includes a children's department;

- auxiliary unit, which includes a diagnostic, laboratory, physiotherapy department;
- a day care unit that consists of an operating room and a day care home.

The presence of two medical departments in the Medical Center, one that operates on the basis of paid medical care and communal services, which provides guaranteed amounts of free medical care for certain groups of population, promotes observance of the key rights to life and health of a person, principles of availability of medical services, their adequacy, objectivity, and also the flexibility of regulation of socio-economic relations, adequate to the current state of the economy and the organization of health care, consumer expectations.

The municipal department of the KDC model provides ambulatory medical care to the secondary level of the attached population in accordance with Article 49 of the Constitution of Ukraine and Articles 4 and 5 of the Law of Ukraine "Fundamentals of Ukrainian Health Law", Law of Ukraine No. 796 IIX, dated January 4, 1991. "on status and social protection of citizens affected by the Chernobyl disaster" and other documents that establish the right to free medical assistance in full. The department is financed by district state administrations and on the basis of contracts of orders.

The commercial department operates on the basis of self-financing and provides high-quality services with high service and modern high-value technologies. Funded by a private investor.

The activities of the commercial division are an integral component of the model, has its own niche and the ability to meet the demand of a certain part of the population, provides additional funds to the KCC's budget. The implementation of the medical diagnostic process in the department will be carried out on the basis of economic analysis, which is especially important in the organization of paid medical services. The commercial department brings an element of market relations into the scope of the model, provides the principle of choosing a patient for medical services, actively affects the quality of services and professionalism of employees. In addition, paid health care sector in the structure of QBO is an important incentive for citizens as to preserve their health, increased attention to the available types of preventive maintenance.

On the other hand, the commercial division of the KDC model performs an equally important function of innovation in applying scientific and technological advances and best practices in providing outpatient counseling and diagnostic care to the population.

Auxiliary departments (diagnostic, laboratory, physiotherapeutic), which are part of the structure of the model KDC, have mixed funding. Mr. Dan the hospital has the usual Chamber and Chamber Superior and also has a mixed funding.

In economically developed countries, the most justified form of organization of medical institutions are recognized as powerful medical centers. Creating them allows to achieve the best clinical results while maintaining the resources. In our studies, we came to a similar conclusion, and we also believe that the creation of a powerful independent advisory and diagnostic center on the principles of public-private partnership requires the introduction of a new strategy in the organization of diagnostic work. On the basis of such centers, it is also necessary to concentrate organizational and methodical work with the centers of the secondary education of the district.

Conclusions

The developed model is a new organizational and legal form of medical care of the population, which implements the transition of communal KCs to mechanisms of public-private partnership, provides for the attraction of private investments to achieve the medical, social and economic efficiency of the KCC and is through increasing the availability and quality of medical care.

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