

***“Privatisation” without
private ownership***

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„Lifebuoys for hospitals” study rationale

- Long-lasting problems with acute hospitals' care:
 - Too many of them (perceived)
 - Persistent indebtedness
- Each government tries to do “something”
 - Several waves of bailouts '95-'05
 - Moving hospitals under local government supervision
 - Change into from budgetary „autonomous units” in '95-'98
 - Restructuring projects '00 and '05
 - Capacity planning attempts (hospitals' networks, master plans) '98, 06'
- Results not sustainable (1-2 years improvement – and again the same)
- Good existing experience needs to be promoted
 - Ambulatory care
 - Some hospitals

The aim of the study

to develop a **model of change** for hospitals, in order to enable:

- provision of healthcare services at the appropriate level and mix (acute hospital services, ambulatory care, long-term care);
- solving the problem of existing hospitals debts;
- protection against future financial collapse.

Report recommendations

1) change in legal structure

- From „autonomous healthcare units” into *Trade Code* companies

2) debts clearing

- Bonds, loans of owners

3) service restructuring

- Into LTC
- High tech ambulatory and day care

Project observations

- Most of ambulatory health care settings in Poland have been privatized in recent 10-15 years, and most were contracted by the National Health Fund
- Hospitals were restructured several time but the results below expectations; debts remain a problem, rare significant change of services portfolio
- A new tendency since 2002: a change of legal status of hospitals without *privatization*
- Public hesitation towards private hospitals ownerships

The governmental programme launched on 27th of April 2009

- Entitled: „we rescue hospitals”
- Hospitals converted to Ltd.s and SAs will be bailed out
- The Ltds and SAs has to remain public (over 51% shares public)
- Often the real estates belong local governments and leased to companies.

Expected results within 2-3 years

- Approx. 100 hospitals converted
- Euro 500m for covering debts
- Services portfolio adapting to NHF purchasing plans
- 5-10% of income from the private market
- Up to 20% reduction of personnel
- Infrastructure improvement



Koło ratunkowe dla szpitali

Od doświadczeń do modelu restrukturyzacji

Pod red. Adama Koziarkiewicza

*A lifebuoy for hospitals
For experience to a recipe for restructuring*