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THE ANALYSIS OF TRAINING NEEDS IN PUBLIC INSTITUTIONS OPERATING IN HEALTH CARE SECTOR IN THE PODKARPACIE PROVINCE

Tomasz Skica¹, Jacek Rodzinka²

Abstract

The article is an attempt at diagnosing training needs of the employees of units operating in health care sector in the Podkarpacie Province. In times of permanent changes affecting each sphere of economy, providers of health care services cannot afford to remain outside this trend. Improving qualifications, adaptability of the offer, influencing its quality, and above all, the awareness of the necessity of these changes, have become an element which is fully integrated also with this sphere of public sector operations. Taking into account the above, the article verifies not only training needs articulated by employees of Health Care Centers (HCC) operating in the Podkarpacie Province, but also the way they are perceived by the managers of these centers, the ability to define training needs and their compatibility with characteristic features of analyzed HCCs. Therefore special emphasis has been placed on demonstrating the variety of diagnosed training needs with reference to such criteria as the size of analyzed centers, the market serviced by them, and their location. These determinants allowed us to conduct a complex analysis of conditions and structure of voiced need for subject training, and as a consequence, contributed to diagnosing the expectations of the health care sector concerning initiatives improving the quality of public services in the health care services area.

JEL Classification: D60, H51, I11, I12, I19, L30

Keywords: health care, health care system, health care center (HCC), training needs, medical services market, demand for health care, providers of health-related services, health care economics

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Introduction

The current omnipresence of trends related to the necessity of constant improvement of possessed qualifications, confronted with conditions created by the information society force public sector organizations, such as health care centers (HCC), to actively operate in the training market. Taking into account the above-mentioned reasons, striving for self-improvement of the health care sector workers and the priority in shape of providing top quality services, is becoming an absolute necessity these days. We should make it clear here that the real quality of the organization's functioning is influenced mostly by its maturity, reflected in the awareness of own (endogenous) needs and a reply to them by means of training initiatives. Such organizations

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should be contrasted with units which initiate training needs as a reply to the trends observed in the sector. These actions are named indirect, as they are performed under the influence of changes identified in the nearest environment of health centers, and not as a result of identifying their own needs. These initiatives are nothing but adaptation to widely observed trends. It should be emphasized here that transposing and universalizing solutions only because of a widely observed trend and not in reaction to real needs, brings the risk of their relatively low effectiveness. Therefore, currently so much effort is made to diagnosing determinants of these changes and the background of real reasons shaping demand for training needs.

The aim of the article is to diagnose training needs of health care center employees in their Podkarpackie Province, selected for the purpose of the research. The main reason why the research has been conducted in this region is the boom market of offers addressed at providers of medical services. Apart from profiled specialist trainings addressed at a narrow group of clients, health care centers are increasingly often offered business and project-oriented trainings. Because of the above-indicated subject spectrum – it seems justifiable to pose a question whether health care centers from Podkarpackie possess any strategy of the areas which, in their managers' opinion, should be given priority in training. We are right to doubt whether HCCs in Podkarpackie really diagnose the areas requiring training support or whether there is no determined order in which such training needs will be satisfied. Secondly, some fears are aroused by the subject range of trainings that medical centers are interested in. This spectrum may be treated as a sign of the size of problems that units, as public sector centers, face and as an attempt at solving these problems by conducting regular and varied trainings.

The above-indicated lack of priorities concerning the training activities for HCCs, coupled with wide interest in so thematically-varied training offer – makes us think, on one hand, about professionalism and striving at self-development shown by employees of these centers, and on the other hand proves that numerous knowledge gaps – sometimes in totally different areas of knowledge exist. This fact then, accounts for a very unfavorable picture of HCCs. Thus, taking into account the above circumstances, the authors are attempting to verify the real background of training needs shown by representatives of public health care sector in the Podkarpackie Province. In order to do so, the analysis covers three main research issues, namely:

- 1) what types of trainings are in greatest demand by HCCs from Podkarpackie?
- 2) is professional experience of public HCC managers a factor differentiating demand for the training offer?

In relation to the above-defined issues, the following research hypothesis has been adopted. *„Between thematic areas of trainings which are of interest to public HCC managers, there are no major differences in the structure of indications. This fact proves that there is no hierarchy of importance of the training packages offered to HCCs and indicates that medical centers have problems in many areas covered by the training topics”*. This thesis was verified on the random sample of public health care centers located in the area of the Podkarpackie Province.

Identifying training needs in an organization

The issue of identifying training needs in public sector units is a sign of their attitude to free market. The awareness of one's own needs and the ability to diagnose them prove the maturity of the sector entities, perceived through the prism of the necessity of supplementing knowledge, referring to its resources in the organization and its constant updating (Skica and Żmuda, 2008; Żmuda and Skica, 2009).

Public sector entities are aware of the existence of competition and inevitability of fighting to maintain their position. This is even truer as the public services market is opening wider to private providers and bidders, changing its hermetic nature. As a result, it is inevitable to adapt to the public sector the tools of attracting customers, recently identified exclusively with private entities. Among them are implementation of quality standards and policies and project management as well as measuring customer satisfaction levels and diagnosing the market to optimize services provided, and finally systematic trainings. A common aspect combining the quality of public services provided with market reality, allowing to build competitive advantage of public organizations, seems to be their reference to training initiatives. It should be strongly emphasized that a public organization will be able to provide high quality services only when it becomes the synonym of quality itself, and the above-indicated trainings serve the purpose of assuring this quality. The above statement reminds us of the notion of an intelligent organization, that is an entity which values intangible resources, mostly the knowledge possessed by employees of the sector, both private and public (Krynicka, 2006, p. 200). As a result, it is not only rational but also desirable to take up any initiatives aiming at endogenous identification of knowledge gaps and filling them on the basis of dedicated thematic trainings (Cresson and Flynn, 1997).

The argumentation for taking actions aiming at identifying training needs in public sector leaves no delusion about its purposefulness. There are, however, some definition-related doubts as far as the 'training needs' term is concerned, as well as the methodology of diagnosing them. In the classical approach, verification of training needs was limited to only narrowly understood needs of an organization. As a result their examination was restricted only to identification of the needs in the organizational sphere of the subject and transferring them onto operational and individual spheres of the organization³. On the other hand, the humanistic concept verifies training needs in terms of individual (employee's) self-development, realizing in the organization his or her vital needs, such as professional development and individual strive for perfection (Neczaj-Świdarska, 2011, p. 1). The center of gravity in the second presented approach was moved from the organization to individuals who create it (see Kudła, 1999). This fact, in turn, influences the methodology of examining needs in the sphere of trainings. Regardless of the accepted concept of diagnosing the reasons for training demand, the ability to define one's expectations seems to be of key importance here. This is best proved by the 'formula of long-term problem-solving' developed by M. J. Pedler, J. G. Bourgoyne and T. H. Boydell (1996). This formula is a specific algorithm, for which the beginning – data, is the problem (P) and the searched value – its solution (S). The quoted model, due to its retrospective nature, adopts 1950 as the starting point and analyzes directions of changes in approach to defining training needs in organizations in a 5-year or 10-year sequence. According to the diagnosis outcome, despite the fact that since 1950s there have been numerous approaches to identification of training needs⁴, abstracting from this complexity – the choice of tools used in examining training needs in the assumption sphere has been very stable. This fact is confirmed by the analyses results, according to which both in the past and at present, the aim of the applied instruments is not only to identify problems but also to examine

³ The operational sphere in organization's activities consists in dividing tasks into the so-called sequence of behavior, subject to modeling through training. On the other hand, individual sphere takes into account examination of discrepancies between the way of performing the tasks by employees and the standard developed by the organization or sector unit.

⁴ The approaches to identification of training needs resulted from the concepts postulating systematic training of organization's staff, continuous employee development, creating programs of personal development and finally, implementing the concept of a learning organization and the formula of life-long learning.

their frequency. This is subject to identification in the areas related, respectively, to the operations of the organization and the people employed by it.

T. Pont (2003) has interesting views in this issue, claiming that the analysis aiming at examining training needs of an organization should focus on three areas and cover:

- 1) needs on the organizational level (aiming at diagnosing departments or sections requiring training),
- 2) needs on the professional level (indicating needs of skills, knowledge and attitudes so that the duties in a particular job were fulfilled effectively and competently),
- 3) needs on the individual level (diagnosing individual demand for training and examining its structure, indicating activities desirable for bridging the gap between the present and the required state of knowledge – they constitute a specific process of needs evaluation (Pont, 2003, p. 8).

A totally different classification of training needs was presented by R. Dilts (2003), who, by indicating the addressee of the training, shifts the weight from the organization to the people creating it. Thus, diagnostic areas are:

- 1) environment (in which a person functions),
- 2) behavior of a particular person (or a group of people),
- 3) possibilities available for the employee,
- 4) beliefs of people employed in the organization,
- 5) the feeling of identity individuals have (Szkop-Gwiazda, 2006, p. 3; after: Dilts, 2003).

R. Dilts (2003), also claims that because of the subject of desirable trainings, the examination should also cover the spiritual aspect, that is the feeling of vocation and individual mission of the organization's employees. This constitutes a kind of supplement of analyzed spheres diagnosing training needs.

T. H. Boydell and M. Leary presented similar views on the needs analysis within organization's structure to those of T. Pont. They distinguished four areas in which training needs should be discerned, covering:

- 1) a person (individual) – beneficiary of the training,
- 2) a group participating in the training,
- 3) an organization subjected to training initiatives,
- 4) the environment of a learning organization (Boydell and Leary, 2001, p. 5).

The authors simultaneously postulate that each area be subject of analysis on three levels of effectiveness, that is:

- 1) on the level of implementation,
- 2) on the level of development,
- 3) on the level of introducing innovations (Boydell and Leary, 2001, p. 23).

The implementation level concerns performing professional duties and training needs appear in the areas related to their performance in which we note a gap between the desired and actual effectiveness – being the effect of lack of appropriate potential and skills on the staff side. On the other hand, the development level determines the improvement of the effectiveness of both staff and the whole organization via improving internal standards and continuous self-improvement. Finally, the issue of effectiveness is concluded with the introduction of innovations, that is the rules which leaving aside the current way of thinking about clients and organization's mission. The basis of implementing all innovations, both process and structural ones, is a review of the current approach to processes and aims in the organization (Boydell and Leary, 2001, p. 22-25). These three levels of effectiveness are needed to achieve all the organization's aims. Thanks

to the fact that in each of them different training methods are used, and all these levels are analyzed in view of the needs of individuals, groups, and the whole organization, the acquired knowledge allows us to develop a complex evaluation demand for training in each aspect of its operations (Boydell and Leary, 2001, p. 24 and next). This then allows us to eliminate those elements in the training offer structure which do not fit and to provide complementariness of selected topics, that is the spheres of supplemented knowledge.

The approaches presented above emphasize the complexity of analyses aiming at identifying problems in an organization, and thus the range of reasons to be taken into account when designing thematic trainings. This situation is further complicated by the complexity of the pool of instruments used in diagnosing organization's demand for training. Taking then into consideration the spheres in which training needs are analyzed and the indicated complexity of the decision-making process, we should present at this point analytical tools used in diagnostic processes. Table 1 offers their synthetic presentation.

The above presented research tools have their advantages and drawbacks, their effectiveness in diagnosing training needs depends on their combination and appropriate coordination with the subject of the research. Experience proves that a generally effective tool may prove ineffective not due to its relatively low evaluation of effectiveness, but due to inappropriate coordination with the subject of analyses. Paradoxically, sometimes it is the appropriate choice of an instrument rather than its formula that determines proper diagnosis of training needs.

The instruments presented above is not enumerative and only presents the key diagnostic methods in the training sphere. However, in spite of its synthetic nature, it ideally reflects the accuracy of statements concerning a number of possible configurations in methodological identification of training needs. As a supplement, we should add that equally vital source of information about the structure of demand for training services is the so-called "training quintet", consisting of:

- 1) senior management representative,
- 2) direct supervisor of trained people,
- 3) head of the training department (or a person occupying an equal post),
- 4) trainees,
- 5) and trainer, that is the training person (see Rae, 1999).

The information obtained from the above people, their interests and expectations related to training, may be totally different and sometimes even divergent. This contradiction, however, may appear to be creative. It often allows us to indicate areas which, due to their weight, will enable us to outline a long-term strategy of trainings in an organization. Thus we reduce the costs of diagnosing training needs every time we organize training and our activities in this area cease to be chaotic. Instead, they are replaced with a coherent in its assumptions and stable path of successive creation of the organization's potential.

Summing up, training in an organization should support its vision, mission and development objectives. Therefore, while planning any training activities, it is absolutely necessary to take into consideration the needs, that is the gap between the current and the desirable state of knowledge in an organization. As study analyses proved, the effectiveness of activities for diagnosing training needs is determined by many variables. The wider the spectrum of verifiable reasons influencing decisions on the area and the subject of training, the more credible the process of diagnosing training needs will be. Undoubtedly, the extension of the pool of determinants taken into account when evaluating demand for training serves this purpose. The greater the scale of these parameters, the large the scope of information that needs analyzing, but also the lower the risk of poor structural adjustment in the sphere of demand and supply of training services.

**Table 1: The most frequently used research tools
in the process of identifying an organization's training needs**

Research tool	Characteristics
1. Direct interview	covers survey of opinions about an organization, not objective facts related to it (an example of direct interview is a structured conversation with persons from the company environment, its clients, etc.),
2. Focused interview	is used to verify the information from exploration survey (as an example we can quote a scenario with questions, developed on the basis of expectations voiced by the organization commissioning diagnosis of its training needs),
3. Questionnaire survey	has wide exploratory and qualitative use, which, with significant anonymity and low costs offers a possibility of surveying a large number of respondents,
4. Socio-metric techniques	identify informal structures within an organization, allowing effective choice of employee motivation tools (these techniques cover, for example sociogram, and participative observation),
5. Job description	constitutes a basic element of documenting the organizational structure, allowing development of the range of duties for employees, resulting from the training needs analysis (Nalepka, 1986; Nalepka, 2001),
6. Tests	help us determine the properties of a unit (organization), including training needs (Zaborowski, 1973, p. 359), allowing measuring the examined feature and external results of a given process,
7. Analysis of secondary sources	reflects surveys of trade reports, results of analyses from previous audits, trade journals, promotional materials and brochures about an organization, being the secondary source of information about its needs,
8. Observation and simulation	observation as a research activity consists in gathering data through observations (Pilch, 1977, p. 128), while simulation is an element of operations research allowing us to analyze a section of reality and to provide quantitative evaluation of results for various configurations of considered decisions,
9. Case study	is a scheme of qualitative research, aiming at creating a single theory of a general phenomenon (Plawgo, 2011, p. 10), which allows us to outline coherent patterns of behavior in similar organizations,
10. Diagnostic sheet	Is a quality tool enabling diagnosis of, for example, potential of resources within the organization in context of feasibility of development plans in an analyzed unit (subject) and related demand for training.

Source: Own elaboration

Introduction to the research problem

Taking into account the number and variety of public providers of medical services in Podkarpackie which have the status of HCC⁵, our survey covered the sample of 50 centers, omitting for

⁵ The term of a health care center (HCC) was based on the definition contained in article 2 of the Act of 30th August 1991 on Health care Centers (Journal of Law from 2007, No 14, position 89, with subsequent changes).

example clinics, health centers, outpatients' clinics, inpatients' clinics and hospices. We also omitted medical diagnosis laboratories, dental prosthetic centers, care and treatment centers and sanatoriums. In this way we obtained a coherent and relatively homogenous (as far as services offered are concerned) structure of public providers of medical services (see Table 2).

Table 2: Territorial location of the surveyed HCCs

District/city with district right	Numbered of surveyed HCCs	District/city with district right	Number of surveyed HCCs
Dębica	4	Kolbuszowa	2
Jarosław	1	Krosno	1
Jasło	3	Leżajsk	1
Lubaczów	1	Mielec	2
Nisko	2	Przemyśl	1
Przeworsk	1	Ropczyce-Sędziszów	2
Rzeszów	2	Sanok	1
Stalowa Wola	6	Strzyżów	1
Tarnobrzeg	1	Brzozów	1
City of Krosno	1	City of Przemyśl	3
City of Rzeszów	12	City of Tarnobrzeg	1

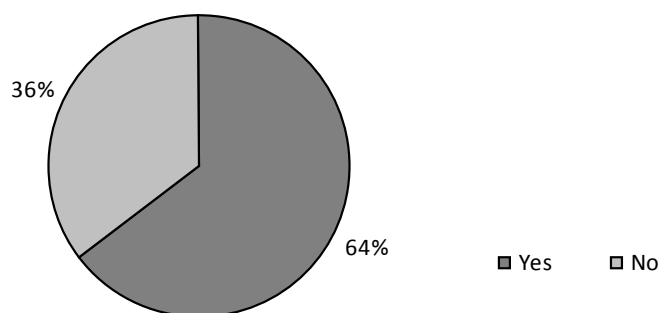
Source: Own elaboration on the basis of questionnaire survey results

The survey used the questionnaire filled by people visiting selected HCCs. Due to direct contact with the sector centers, the required number of questionnaires were obtained, guaranteeing the methodological appropriateness of research. The preserved territorial cross-section of the analyzed health care centers allowed us to preserve objectivity and credibility of conclusions and evaluations made.

Training needs of HCCs in Podkarpacie in light of the research results

The analysis of training needs of health care center employees should be started with a question on the extent to which activities aiming at improving professional qualifications use external trainings. The breakdown of the answers to this question is presented below I Figure 1.

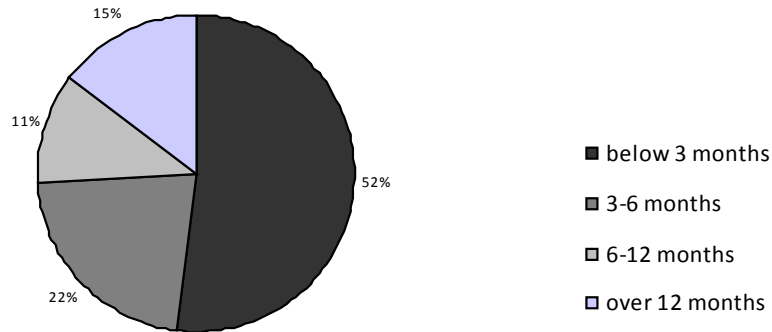
Figure 1: Participation of the respondents in external trainings



Source: Own elaboration on the basis of questionnaire results

More than two thirds of respondents declared that that had recently participated in various external trainings. The first question was the filtering one. If the respondent gave the ‘No’ answer, the person conducting the survey did not ask the second one. In this question respondents who had recently participated in external trainings were asked to indicate the time that passed since their last external training. The results can be seen in Figure 2.

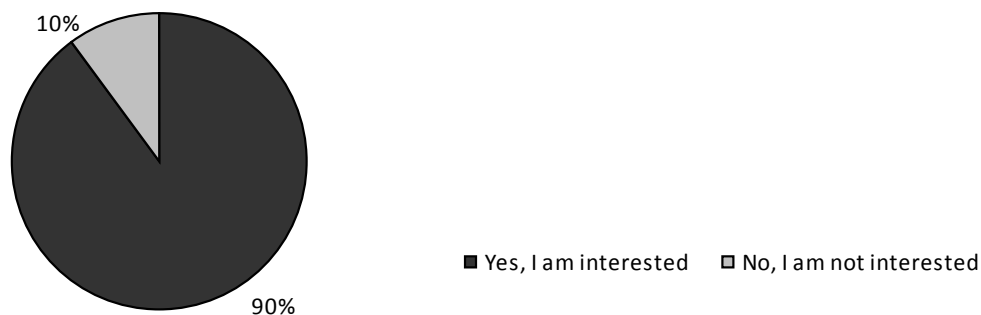
Figure 2: The time that passed since the last external training related to HCC’s operations



Source: Own elaboration on the basis of questionnaire results

More than half of respondents participated in external training in the period of three months before the survey. Slightly over one fifth of respondents participated in such training from 3 to 6 months before the survey. Simultaneously, over 10% of employees in Podkarpacie HCCs indicated that the time that passed since their last training was 6-12 months, while 15% stated that it was more than a year before the survey. The gathered data confirm relatively high frequency of trainings offered to employees of health care sector and prove that such trainings enjoy great popularity, as they are a formula for improving professional qualifications for employees of Podkarpacie HCCs. As important as the question concerning the participation in trainings so far was the question about future plans related to this form of supplementing and developing knowledge resources. The results the questionnaire brought are presented in Figure 3.

Figure 3: Declared interest in participating in external trainings concerning issues related to HCC operations this year

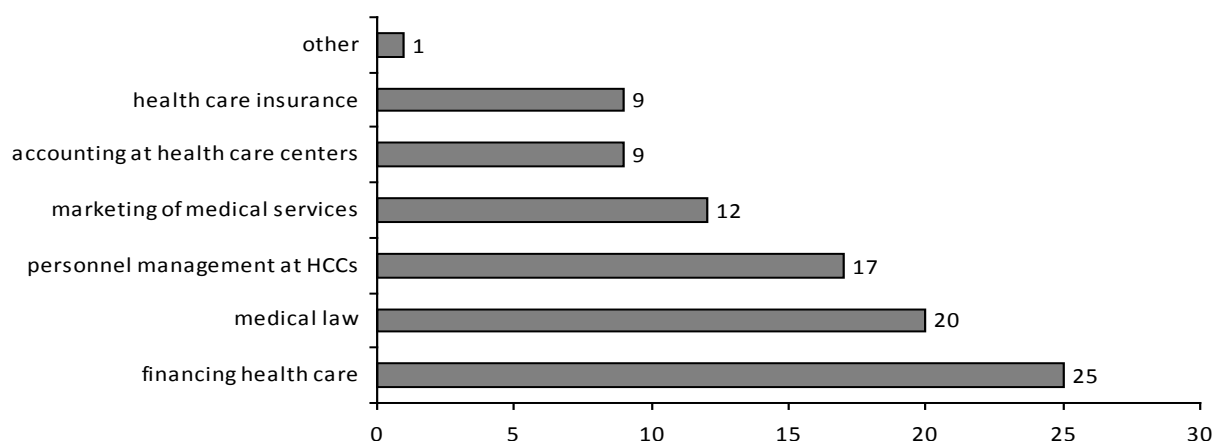


Source: own elaboration on the basis of questionnaire results

The overwhelming majority (as many as 90%) of the surveyed employees of HCCs in Podkarpacie were interested in participating in external subject trainings this year. This fact confirms their belief that it is necessary to constantly upgrade one’s professional qualifications and that

some actions were taken to do so. People who expressed their wish to participate in the trainings were also asked to indicate the area they would be interested in. The surveyed people could mention more than one, but maximum three answer. The results obtained in this way are demonstrated in Figure 4.

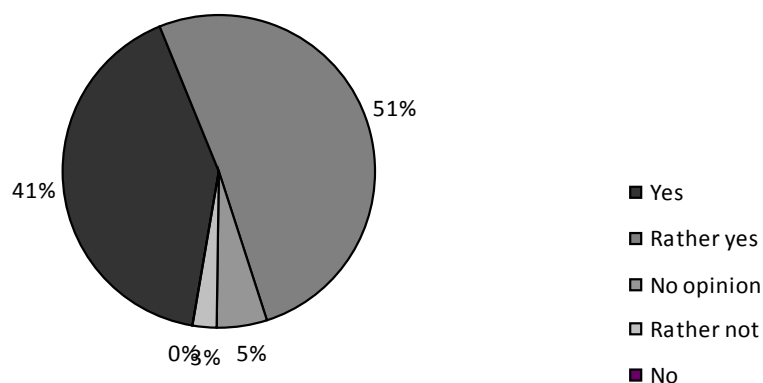
Figure 4: Desirable areas of trainings according to employees of HCCs in Podkarpacie



Source: Own elaboration on the basis of questionnaire results

The survey results clearly prove that respondents are mostly interested in trainings in financing health care. Every fourth respondent expressed their interest in such training. Only slightly less popular were trainings in medical law and HCC personnel management. They were of interest to nearly a quarter of respondents. One out of ten respondents declared interest in trainings in marketing of medical services, accounting at HCCs and insurance in health care. Simultaneously, only one indication referred to trainings in public procurement. The obtained results diagnosing training needs of employees in health care sector transfer the gravity point in knowledge deficit towards financing the sector. This is understandable. In view of the limited financial resources of National Health Fund (NFZ), HCCs try to examine the market in the context of alternative sources of financing their activities. The third party payer is becoming not only an insufficient source but also the insecure one, while the operations of health care centers, apart from financing the services offered, requires expenditure ensuring their appropriate standard. This activates further capital requirements, financed on the basis of external sources. The more complete the knowledge of managers of public health sector related to possible forms and sources of financing their activities, the greater the possibilities of successful acquisition of means and diversification of associated risk. This fact is confirmed by the results of conducted research, which prove that there is not only awareness of the need to build knowledge of finance, but also such activities are initiated, due to, for example, profiled thematic trainings. A specific completion of the observations presented so far related to training needs of the employees of HCCs in Podkarpacie was the question about the possibility of perceiving trainings as a motivating factor. In other words, the aim of the question formulated in this way was to obtain some indications proving to what extent the possibility of taking part in the trainings and similar forms of improving professional qualifications can be a motivating factor and to what extent it should be perceived as a duty resulting from the specificity of the job performed. The obtained results are presented in Figure 5.

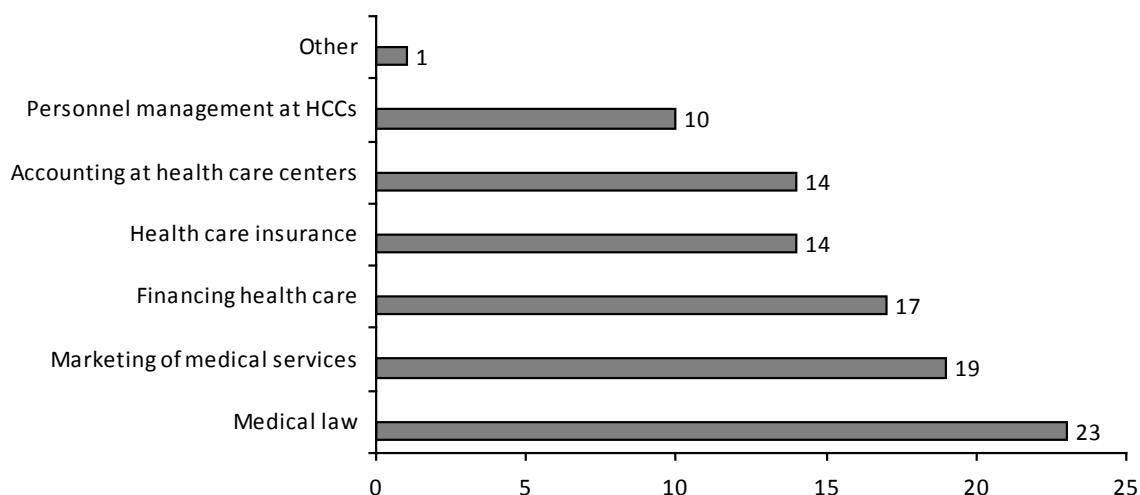
Figure 5: Are external trainings an important motivation factor?



Source: own elaboration on the basis of questionnaire results

The results of the survey do not leave any space for doubts. The whopping majority declared that trainings are an important or quite important motivation factor for employees. Around 5% of respondents had no opinion on this issue, while around 3% declared that trainings do not motivate. Being aware of the weight of trainings for effective performance of tasks in the public health sector and the significance attached to them by employees of the sector, the questionnaire asked about the most useful trainings from the perspective of the specificity of a given job. The respondents could choose up to three answers. The results are presented in Figure 6.

Figure 6: Subjects of trainings considered useful by employees of HCCs in Podkarpacie (in numbers)

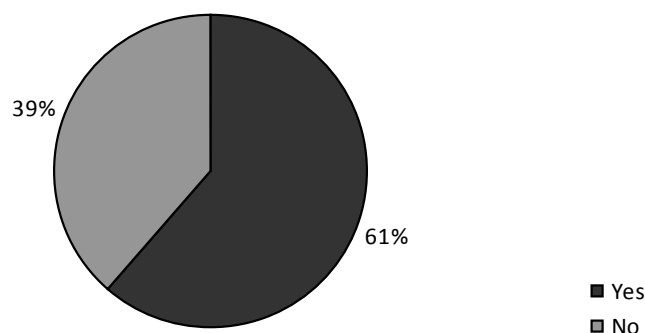


Source: Own elaboration on the basis of questionnaire results

The most frequently chosen and the most valued from the perspective of health care sector employees was medical law training, followed by marketing of medical services, financing health care and insurance. Accounting and personnel management at HCCs trainings proved slightly less popular. Bearing in mind how often trainings were indicated as an instrument optimizing acquisition of knowledge, an essential question is the one about the sources of means enabling us to finance activities for developing knowledge resources and financing statutory activities of the surveyed HCCs. The market is full of various forms of financial support based on one common foundation – EU

funds. These funds determine a wide range of varied instruments of financial support available also to HCCs. This factor was the source of inspiration for the question about sources of financing the operations of health care sector entities in light of their use of EU support (see Figure 7).

Figure 7: Did your HCC use EU funds as a source of financing its activities?



Source: Own elaboration on the basis of questionnaire results

Over 60% of respondents admitted that their HCC was financed from EU funds. On one hand, this indicator should be considered fully satisfactory. On the other hand, though, we might ask why this number was not higher. The answer to the questions formulated in this way can be found in Tables 3 and 4 below, which present the answers to the next two questions concerning interest in participating in trainings about winning funds from the EU. When answering the questions, respondents could choose out of five answers to these questions, namely: yes, rather yes, no opinion, rather not, no. The table below presents the breakdown of answers proving the demand for this type of knowledge.

Table 3: Respondents' interests in participation in trainings devoted to acquiring funds (%)

Subject of the training	Type of answer				
	Yes	Rather yes	I have no opinion	Rather not	No
Acquiring EU funds	61.5	17.9	5.1	7.4	7.7
Financing HCC from other sources than EU funds	64.1	23.1	5.1	5.1	2.6

Source: Own elaboration on the basis of questionnaire results

As the survey has shown, a large majority of respondents expressed their interest in trainings in acquiring funds to finance HCC operations. It should be pointed out, however, that respondents show larger interest in other than EU funds resources. They show considerable skepticism towards EU funds. As a result, over 15% of them are not interested in trainings in this field. This fact corresponds with the indications presented in Figure 8, which is the foundation for further questions about sources of financing HCCs alternative to EU funds. The research has shown that HCCs in Podkarpacie are interested (though to various extent) generally in every kind of external financing. They are also interested in internal financing. Searching for the justification for obtained results we should notice that the surveyed units of health care sector, despite their public nature, are forcefully entering market reality. On one hand, this reality is imposed

on them by legislation changes, but on the other hand, it is the result of the maturity of certain HCC structures and a further step on their development path. Regardless of the reasons for increased interest in the sphere of financing their activities, the level of knowledge in this area is still far from satisfactory, which is implied by intense interest in trainings as an instrument of supplementing poor knowledge.

Further questionnaire questions concerned respectively the issues related to instruments of shaping economic balance at HCCs (see Table 4) and thematic issues tailored directly to the specificity of a given unit operating in health care sector (see Table 5).

Table 4: Interest in participation in training on instruments shaping economic balance of an HCC (number of indications)

Subject of the training	Type of answer				
	Yes	Rather yes	I have no opinion	Rather not	No
Controlling and budgeting	16	7	2	0	0
Joint service centers	7	4	0	0	0
Outsourcing	4	3	2	0	0
Pharma-economics	6	3	1	0	0
Others, please specify	0	0	1	0	0
Total	33	17	6	0	0

Source: Own elaboration on the basis of questionnaire results

According to the questionnaire results, 50 respondents provided answers to the questions about interest in training devoted to the subjects listed in Table 4. Among these trainings – respondents most frequently chose trainings on controlling and budgeting, joint service centers, pharmacology and outsourcing. In further questions respondents expressed the degree of their interest in trainings in various fields directly related to HCC operations (see Table 5). Respondents indicated their interest in each of the trainings listed in Table 5 separately.

Table 5: Respondents' interest in participation in thematic trainings (number of indications)

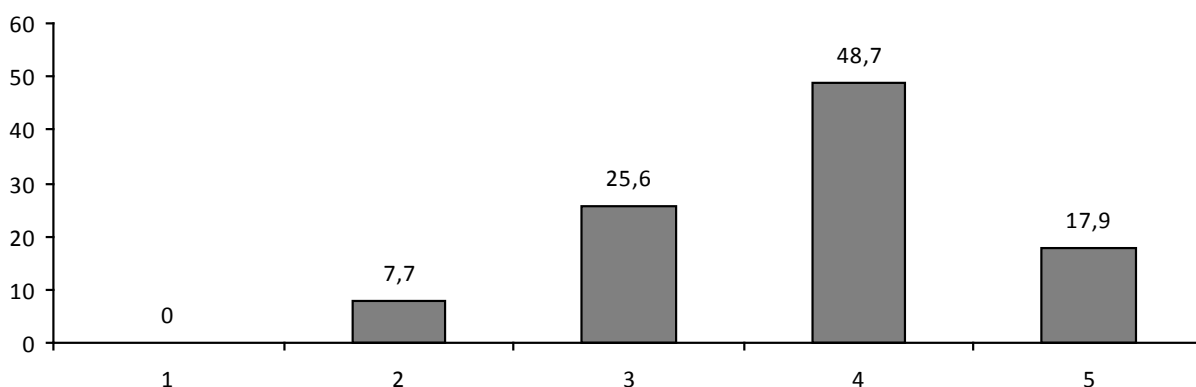
Subject of the training	Type of answer				
	Yes	Rather yes	I have no opinion	Rather not	No
Changes in public finance sector (PFS) caused by the new Act on public Finance	22	12	4	1	0
Patient's rights	17	13	3	2	4
Legal responsibility of HCC and its employees	25	10	2	2	0
Principles of medical services marketing	16	15	4	2	2
Using the Internet in managing an HCC	20	10	3	3	3
Public relations in HCC operations	18	11	3	5	2

Source: Own elaboration on the basis of questionnaire results

The biggest number of indications concerned the proposal of trainings on legal responsibility of HCC and its employees. As many as 35 respondents ticked this subject of training as top priority. 34 people opted for trainings concerning changes in public finance sector caused by the new Act on Public Finance. At the same time 31 surveyed HCC employees expressed their interest in training on marketing and 30 people chose trainings on patient's rights and use of the Internet in managing an HCC.

Respondents were also asked to evaluate the state of their knowledge of management in health care. They were to evaluate its level on a 1-5 scale, where 5 was the highest mark (see Figure 8).

Figure 8: Evaluation of the respondents' level of knowledge in health care management in Podkarpacie (%)

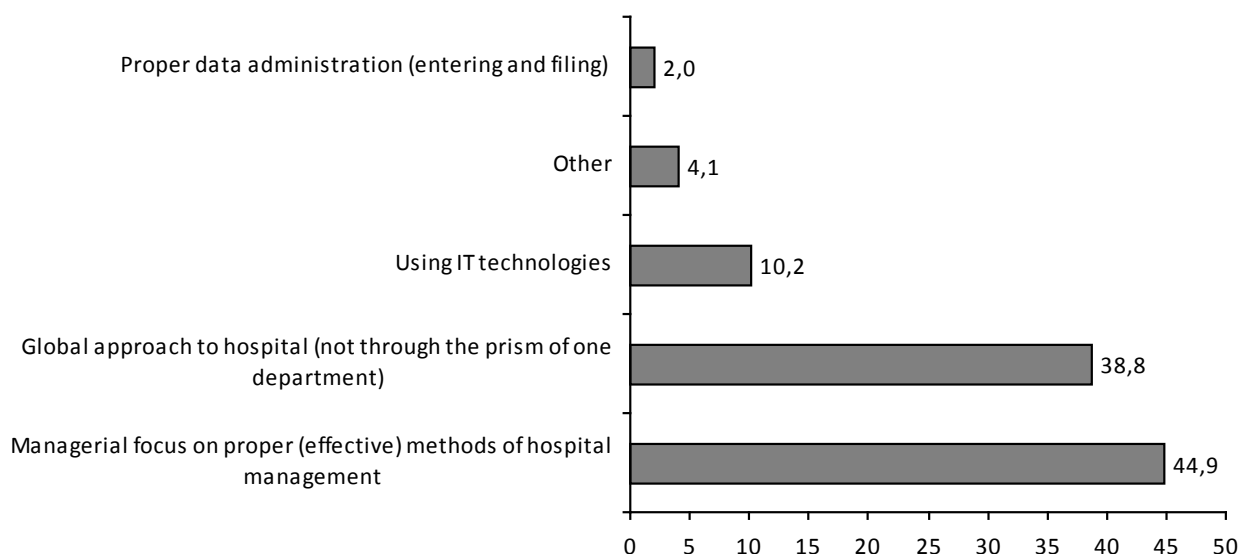


Source: Own elaboration on the basis of questionnaire results

Respondents quite highly evaluate the level of their knowledge in the area of health care management. Nearly one in five surveyed people considers this level to be very high, while nearly half of respondents give themselves grade 4. Every fourth HCC employee claims that their level of knowledge of health care management deserves grade 3 on a five-grade scale. Almost 8% of respondents evaluated their knowledge on a low level – 2. Nobody thought their knowledge was so bad it could only be given grade 1. This fact arouses some doubts. Firstly, it does not correspond to the results obtained from the question on the level of financial knowledge possessed by sector employees, and secondly, it is not reflected in the financial results achieved by HCCs. It should be assumed then, that these evaluations might be too high. The state of managerial knowledge possessed by health care sector managers should be verified not only through the prism of familiarity with rules and procedures of applying for resources in accordance with NHF standards. For full evaluation of management quality it is necessary to take into consideration such elements as the ability to use modern forms of management (such as New Public Management) in practical activities of HCCs, or knowledge of constraints resulting from the status of the legal and organizational form possessed by PFS units, or finally the knowledge of how to build systems evaluating the effectiveness of operations of particular HCC sections or HCCs as a whole.

Taking into account the above observations, the results provided by next questionnaire questions seem significant. Respondents were asked then to indicate which of the listed factors related to HCC management determine, in their view, financial success of a unit. Respondents could choose only one of the provided answers. The breakdown of the obtained indications is presented in Figure 9 below.

Figure 9: factors determining, in respondents' opinion, financial success of HCCs (%)



Source: Own elaboration on the basis of questionnaire results

According to the respondents the key determinant of the unit's financial success is managerial focus on proper (effective) methods of health care center management. This answer was chosen by nearly a half of all respondents. Slightly less, 40%, indicated global approach to hospital (that is, not concentrating on a particular department). Finally, only one out of ten respondents indicated the use of IT technologies as the most important factor determining HCC results. The presented results confirm those obtained in further questionnaire points. Respondents were asked whether they would be interested in participation in training concentrating on principles of effective HCC management. Overwhelming majority of them (58% chose 'yes' answer, while 28% picked 'rather yes' option) provided positive answers. They also indicated that the optimal formula of expanding knowledge in this area are conferences (38%), external trainings (37%) and practical workshops (3%).

It is also worth analyzing the relationship between the interest in trainings and the length of service in health care institutions. Table 6 presents the percentage of people who declared a particular length of service in health care with indications concerning the subject of trainings.

Table 6: Interest in trainings and length of service in health care institutions

Subject of the training	between 2 and 5 years	between 5 and 10 years	more than 10 years
Financing health care	100.00%	66.67%	60.71%
Medical law	50.00%	33.33%	57.14%
HCC personnel management	100.00%	44.44%	39.29%
Marketing of health services	0.00%	22.22%	35.71%
Accounting at health care centers	0.00%	11.11%	28.57%
Health care insurance	0.00%	11.11%	28.57%
Other	0.00%	0.00%	3.57%

Source: Own elaboration on the basis of questionnaire results

Comparing the interest in trainings expressed by HCC employees with their length of service in health care institutions we cannot prove the relation between each type of training and the length of service. However, if we consider respondents' behavior related to each subject separately, we can state that in case of trainings in financing health care and HCC personnel management, the interest in them decreases along with the lengthening of employees' period of service. This seems to be a logical consequence of the knowledge and experience gained while working for HCCs. As a result, a lot of information related to the field covered by the trainings has already been known to respondents, which eliminates the necessity to supplement it.

In case of trainings in marketing of health services, accounting at HCCs and health care insurance, the longer the period of service, the greater the interest in trainings. People with longer period of service are usually older, educated and brought up in the old economic system, in which there was no need to use any marketing techniques or to choose the best insurance company. Such people probably did not gain this type of knowledge during their education. Therefore, they do not feel comfortable in new areas of activities and as a result are more interested in expanding their knowledge in these areas than young people, so they want to take advantage of profiled trainings.

In conclusion, we should relate the obtained results to the structure of the research sample. The survey covered 39 health care centers in Podkarpacie. The surveyed group consisted of 27 men and 12 women. 21 respondents were people aged 51-60. The second age group (12 people) was 41-50. Five respondents were aged 30-40, and only one person was aged below 30. The surveyed had quite impressive length of service in health care sector. 28 people worked in widely defined health care institutions for over 10 years, nine had 5-10 years' work experience and only two people declared that they worked between 2 and 5 years. The personal data prove that obtained indications, due to both length of service and professional experience of the surveyed people, are a reliable source of information on the training needs in health care sector in Podkarpacie.

Conclusions and research findings

According to the results of the research, as many as 56.4% of the surveyed HCCs were centers with staff below 100 people. Also 53.8% of them stated that their area of operations is the area of the district. 20.5% of them indicated respectively the commune and the province as their area of operations, while only 5% of the surveyed HCCs claimed that their offer is also directed at people from outside the province (covering the whole region). An essential element for building credibility of the survey was the experience possessed by the surveyed HCC managers. Nearly 72% of them had more than 10 years' length of service in health care sector, while further 23.1% had experience of 5-10 years. This data is extremely important for the credibility of gathered source material. The knowledge of the needs and the reality of medical center operations is the best proof of credibility of the source material and the quality of the research based on it. The statistics concerning the frequency of using external trainings by HCCs are extremely interesting. As many as 64.1% of the surveyed centers indicated that they have used such trainings recently. Only in the last three months before the survey was conducted, nearly 36% of respondents confirmed completion of some kind of external training, while 15.4% claimed that the last training they had was less than half a year before. The analysis of training needs is even more favorable. 89.7% of the surveyed HCCs confirmed their interest in participation in trainings on HCC functioning, proving that there are some areas of their activities which need the support of training. The analysis of primary data has proved that HCCs in Podkarpacie were mostly interested in: financing health care (26.9%), medical law (21.5%), and HCC personnel management (18.3%).

The least popular were: accounting at medical centers (9.7%) and insurance at HCCs (9.7%). The gap between the most and the least expected trainings was 17.2%.

In line with the growing demand for trainings expressed by province HCCs, we can witness growing awareness of their pro-motivational influence on direct beneficiaries of such initiatives. Over 90% of the surveyed HCCs were of the opinion that external trainings are a significant motivation factor. This is an important fact in building and profiling systems of motivating employees. As the survey has proved, employees of health care sector in Podkarpacie perceive trainings as a profit, not only as their duty. This allows us to claim that the interest in trainings expressed by HCCs is not only caused by the necessity to upgrade personnel competencies, but is also used deliberately as stimulation of the staff.

Summing up, we should point out that the health care sector shows considerable inefficiencies in many areas, especially in the area of specialist financial knowledge, which is clearly proved by the results of the conducted survey. These results confirm the first part of the hypothesis made at the beginning of this article. The observed regularity is especially vital due to constant shortages in the sphere of financing health care, and the growing and accumulating needs – both investment and current ones. As a result, all actions aiming at improving the situation in the health care sector, not only imposed (by legislative changes) but also those initiated at the bottom, should be treated as actions strengthening the sector structures. The best measure of these actions is the scale of participation in initiatives aimed at expanding knowledge resources, expressed for example by frequent participation in trainings and their thematic range. This thematic range verifies negatively the second part of our research hypothesis. The survey has indicated that the differentiation of interest in particular training subjects is a reflection of the length of service in the sector. According to the survey results, the sphere of training needs changes along with the changes in the length of service. It should be stated then, that the training needs of sector employees are huge and they are not universal (regardless of the surveyed center). As the research proves, it is not the territory of operations or variety of serviced patients that determine the subjects of trainings but the employees length of service. This indicates the necessity to create solutions dedicated to a particular unit of health care center, and the necessity to avoid creating solutions artificially unifying the offer for all entities with HCC status. As we may suppose, large and growing training needs of health care center employees can be partly explained by not only dynamics of changes taking place within the sector, but by the offers poorly adjusted to real needs, their general nature and not taking into account while diagnosing training demand such criteria as length of service in the sector, financial state of the center or its legal and organizational form.

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