



*ZdravReform*  
*ЗдравРеформ*

**Trip Report 0888**

**Planning and Implementation  
of Three Regional Conferences on Dissemination  
of Health Care Reform Experience  
in Ukraine**

**October-December 1996**

by Zhanna Parkhomenko,  
*ZdravReform/Kiev*

submitted by *ZdravReform* Program to  
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Managed by ZdravReform Associates Inc.  
with offices in Bethesda, Maryland, USA,  
Moscow, Russia; Almaty, Kazakstan; Kiev, Ukraine

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The author will acknowledge and accept comments, recommendations and assessments of this report.

PARKHOMENKO ZHANNA

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## **1.0 EXECUTIVE SUMMARY**

This report describes the preparation, conduct and evaluation of results of three two-day regional conferences held October-December 1996 by the *ZdravReform* Program in L'viv, Odessa and Dniepropetrovsk, Ukraine. It is intended not only as a report of these conferences but as a guide for future conferences.

Over 300 administrators, managers, economists and practitioners from different levels of the health care system and from all oblasts of Ukraine and the Republic of the Crimea attended the conferences. Fourteen key presentations about reform experience in different regions of the country and abroad were specially prepared with assistance from an expatriate *ZdravReform* consultant who had worked in Ukraine. The information presented was expected to contribute to the knowledge of Ukrainian health care professionals and to help solve reform problems. During discussions and informal meetings, conference participants established contacts for further fruitful collaboration and exchange of experience.

The *ZdravReform* Program prepared and distributed to conference attendees more than nine reports and methodological materials on bed capacity restructuring issues, primary health care, financial and economic mechanisms of health care.

The final resolution of the three conferences, adopted at the last meeting, in Dniepropetrovsk, summed up the results of the work done and outlined further steps to reform. Conference delegates forwarded the resolution to the Ukrainian Cabinet of Ministers, Ministry of Health (MOH) and the press.

The analysis of the preparation and implementation of the conference, including participant evaluations, will provide guidance for the planning of future conferences.

## **2.0 BACKGROUND**

During the *ZdravReform* Program's two years of operation in Ukraine, substantial reform experience in health care finance and delivery has been gained by Program staff and the health care counterparts with whom they work. The *ZdravReform* strategy lies in implementing market reforms in health care and promoting those reforms which regional health care facilities have already begun, providing support through:

- technical assistance,
- training,
- dissemination of information, and
- limited provision of equipment to carry out new finance and care delivery methodologies.

In addition to its methodological, informational and technical assistance, *ZdravReform* provides moral support to health care professionals and facilities seeking innovative organizational, management and financing reform. These regional conference were organized to disseminate information on this reform experience.

### 3.0 CONFERENCE PREPARATION

#### 3.1 Conference Design

**Goal:** The goal of the conferences was to disseminate the experience of *ZdravReform* and its Ukrainian counterparts in reforming the health care system of Ukraine.

**Purpose** (distributed to each participant): Enable Ukrainian reformers who have designed, implemented and evaluated results of various approaches to health care reorganization to consolidate their experiences and to share with colleagues their successful accomplishments and lessons learned from failures. Major discussion topics should be:

- Development of primary care as the basic unit of the modern health care system; creation of an adequate methodological and resource base oriented to the general practitioner and family doctor.
- Changing principles of health management through evaluation of final results and decentralization of managerial functions.
- Redistribution of responsibility for health care among the state, the owner of production, and the individual.
- Changing principles of health care facility financing through transition from financing according to capacity to financing according to the volume and quality of care.
- Enhancement of efficient, rational and economical use of health care resources based on the actual need for health care.
- Attracting non-budget funding and material resources by means of user fees, leases, charitable contributions and other economic activities.
- Grant more statutory economic and financial autonomy to health care facilities.
- Ensure quality of care through licensing and accreditation.
- Creation of a medical services market of independent providers under conditions of free competition and choice of a partner/s.

**Tasks:** The following tasks were set out for the preparation of the conferences:

- Organize three regional conferences as a venue for dissemination of information about reform experience to health care experts representing all oblasts of Ukraine.
- Fund planning and implementation of the conferences.
- Help counterparts and other reformers to prepare reports on a high technical and professional level.
- Distribute to participants Program reports and other information materials about the results of *ZdravReform* and other reform experience.
- Collect, analyze and disseminate to all levels of health care management, including the Ministry of Health (MOH), information about new ideas, approaches and reform experience which crystallize in the course of discussions and informal intercourse.
- Define a strategy and direction for further health care reform in a conference resolution.
- Evaluate the experience of holding such meetings in terms of kind, level and scale.

### 3.2 Participating Sites

**Conference Sites:** In May 1995 L'viv Oblast was selected a *ZdravReform* Intensive Demonstration Site (IDS) which would focus on the following activities:

- Developing a per capita budget allocation method for rayons;
- Developing a patient classification system; and
- Restructuring health care facilities through (a) development of primary care and family medicine and (b) reorganizing the hospital system.

Projects included work on price setting, financial management, development of a system of patient registration information, management decentralization and autonomy and methods of continuous enhancement of quality, efficiency and accessibility of care. The following people were invited to speak about the results of the two-year-long cooperation on this IDS.

- Dr. Jemma Jafarova, chief doctor, and Mrs. Svetlana Bytchenko, Chief Economist, L'viv City Hospital No.1,
- Dr. Vyacheslav Veres, chief doctor, Zhovkva Central Rayon Hospital; and
- Mr. Sergei Hrubiy, director, Ukrainian Marketing Group.

Odessa Oblast also was chosen as a *ZdravReform*/Ukraine IDS in May 1995. Its workplan focused on the evaluation and roll out of four self-financed facilities as well as development of market-oriented methods (budget allocation, differential medical workers' labor remuneration and autonomy of management). Results of reform activities in this region were presented by:

- Dr. A. Litvak, deputy, Odessa Health Care Administration
- Dr. V. Borshch, chief doctor, Kodyma Central Rayon Hospital
- Dr. Anatoly Shubin, chief doctor, and Mrs. Galina Petrova, chief economist, Municipal Self-financing Polyclinic, Odessa
- Mrs. Olga Sknarina, chief economist, Odessa Oblast Clinic Hospital

Along with Kemerovo, St. Petersburg and Samara in Russia, **Dniepropetrovsk** Oblast was the leader in health care reform experimentation as far back as the Soviet period. Its focus was creation of a health care information system which would serve as a framework for the New Economic Mechanism. While Dneipropetrovsk is not an IDS (it is being considered for future IDS status), it has collaborated with *ZdravReform* in a number of ways. In 1994-95, a Program consultant did an assessment of the Medical Economics Automation System.

The Department of Social Hygiene, Health Management and Organization at the Dniepropetrovsk Medical Academy is known for its scientific development of health care reform programs. Department head Professor Valerie Lekhan, who also worked with *ZdravReform* economist Alexander Telyukov in working out the health insurance draft law, spoke about primary care reform at the conferences.

**Other Reform Sites:** In 1989, Dr. A. Mostipan founded in **Dnieprodzerzhinsk** an experimental self-financing family medicine polyclinic. The experience in organizing a family medicine polyclinic catering to the needs of about 12,000 patients (4 percent of the city resident population) is valuable. Patients are primarily employees of local enterprises and their families, who have coverage through agreements the enterprises have made with the polyclinic. The polyclinic also contracts with individuals. The polyclinic receives some budget funds. Certain kinds of services are partly or fully paid by patients.

With financial and organizational support from the MOH, the **Zhitomir** Oblast Health Administration has conducted wide-scale bed capacity restructuring, given official status to the general practitioner/family physician category, and instituted elements of health insurance. This work was discussed by oblast health reform leaders Dr. Valentin Pariy, deputy administrator, Oblast Health Administration, and Dr. Mikhail Borshchivsky, chief doctor, Oblast Clinical Hospital.

### **3.3 Participant Selection**

#### *Coordination with MOH*

As noted above, conferences were planned for the two IDSs, L'viv and Odessa, and Dniepropetrovsk. In the original conference plan, representatives from those oblasts and three oblasts adjacent to each were to be invited. In this case reform experience could be disseminated to 12 oblasts in all. However, in a preparation meeting with Deputy Health Minister Anatoly P. Kartish, *ZdravReform* was asked to include all oblasts in Ukraine.

In L'viv Oblast, 15 persons from each of the original oblasts (L'viv, Ternopol, Zakarpatiya, Ivano-Frankovsk) and four participants from surrounding oblasts (Volin, Vinnitsa, Khmel'nitsk, Chernovtsi, Zhitomir, Rivne oblasts and the city of Kiev) would be invited.

The Odessa meeting would invite 15 representatives from the oblasts of Odessa, Nikolayev, Kherson and Zaporozhiye (Zaporozhiye Oblast later was assigned to the Dniepropetrovsk conference at the request of the MOH.) as well as participants from Sumi and Kirovograd oblasts and the Republic of the Crimea.

Attending the Dniepropetrovsk conference would be representatives from the primary oblasts of Dniepropetrovsk, Donetsk, Kharkov and Poltava, and from the additional oblasts of Zaporozhiye, Lugansk, Chernigov, Cherkassi and Kiev.

In addition to representatives from pilot facilities, oblast-, city- and rayon-level officials from the host cities would be invited, as well as known health care reformers.

Participants lists appear in Annex 1.

### *Coordination with Oblast Health Administrators*

ZdravReform conference planners met with heads of oblast health administrations as well:

- In L'viv, ZdravReform/L'viv medical consultant Borys Uspenskiy and conference coordinator Zhanna Parkhomenko met with Oblast Health Administration chief Nicolai K. Hobzey on October 16.
- In Odessa, consultant A. Litvak and Parkhomenko met with Oblast Health Administration chief A.D. Korvetskiy on November 5.
- In Dnepropetrovsk, ZdravReform acting deputy director for Ukraine Annemarie Wouters met with chief A.V. Ipatov and with A.S. Fedosiyev, deputy for health care issues and social protection.

After getting approval from the oblast health care chief, letters were faxed to those same individuals inviting them to take part in the conference and to select participants from their oblast who best implement reforms. Unfortunately, selections were not made in a timely way, which impeded further preparation. Reasons for the delays were usual bureaucratic inertia, fear to make independent administrative decisions, and lack of enough knowledge about reforms to make appropriate selections. In the end administrators were given recommendations for choosing oblast health care representatives.

A list of invited participants is in Annex 4.

***Lessons Learned:*** To optimize selection of participants it is necessary to allow more time and work out a multi-stage algorithm. It will necessitate decision-makers familiarizing themselves with ZdravReform and conference goals, tasks and topics as well as with local reformers, in order to plan an appropriate delegation.

### **3.4 Preparation of Presentations**

ZdravReform consultant Bradford C. Else traveled to Ukraine in early October to assist 11 key speakers (see above) prepare their presentations. (Sergei Hrubiy later was added to the list of key speakers.) Presentations featured examples of a variety of reform experiments in order to give an overall picture of reform.

#### *Family Medicine*

- various approaches to introduction of family medicine in urban and rural areas;
- adequate training and retraining of family medicine doctors;
- patient satisfaction with family medicine as compared to treatment by district doctors and specialists, according to a sociological survey in the city of L'viv.

#### *New Economic/Finance Methodologies*

- introduction of new methods: cost analysis, decentralized budget control;
- integrated management and financial policy of restructuring;
- giving priority to the patient's wishes as a way to successful self-financing relations on the paid basis.

### *Health care policy*

- licensing and accreditation;
- training in market management methods in order to reinforce a positive attitude toward reform among health care managers;
- sociological surveys among medical community and patients as a feedback in realization of health care reform policy.

See Annex 2 for key presentation abstracts and Annex 3 for conference programs that list all speakers and presentation topics.

### **3.5 Conference Logistics**

Intensive logistics preparation started October 10, including the following activities:

- drawing up a list of participants,
- renting a conference hall, hotel, restaurant, equipment,
- preparation of printing materials for participants,
- preparation and provision of technical equipment,
- agenda and speakers' overview, and
- making financial arrangements for travel expenses of out-of-town participants.

### **3.6 Dissemination of Printed Materials**

The conferences disseminated information not only through presentations and discussions but also through distribution of printed materials. In addition to information about the conference (agenda, a summary of presentations), participants were given information about *ZdravReform* itself, a publications list and relevant reports, products and training manuals. At each successive conference the assortment became much wider. The list of materials disseminated among participants in the Odessa and Dniepropetrovsk is in Annex 5.

***Lessons Learned:*** Participants voiced the opinion that such printed information support is very important in health care reform. Economic and financial documents and reports drew the most interest.

The information office in Odessa should trace the documents flow generated by inquiries owing to information dissemination at the conferences, in order to evaluate directions of the activity, correct and develop a policy of the future activity.

### **3.7 Conference Halls**

The L'viv conference experience showed the importance of the right choice of a conference site for the conference to be a success. Because there was so little advance time before the conference, hotel conference facilities were not available, and the meeting was held in an assembly hall near the hotel.

In Odessa, conference meetings were held in a large restaurant of the "Victoria" hotel complex. The restaurant was arranged for holding sittings. Such adaptation of the premises lowers its efficiency.

The Dniepropetrovsk conference was held in a special hall of the "Rassvet" (Dawn) hotel complex. Unlike previous halls, this one was equipped with a large projection screen, special lightening for watching slides and good acoustics. It was the optimum choice.

**Lessons Learned:** To conduct a conference with such a large number of out-of-town participants it is most advantageous to rent a hotel complex with a restaurant and a conference hall.

### **3.8 Financing of Conferences**

All meeting expenses were assumed by the *ZdravReform* Program. It also covered the following participant expenses:

- travel (car park, train),
- hotel lodging (breakfast included), and
- board (coffee-breaks, luncheons, receptions).

Participants at all three conferences expressed their gratitude to the *ZdravReform* Program for providing them the opportunity to meet. They confirmed that the conferences could not have taken place without this financial and organizational assistance.

**Lessons Learned:** Coordinators first planned to provide one night of lodging; later, an additional night was allowed. The Dniepropetrovsk conference was the most expensive, in part because there is no Program office in the city and because transportation and organizational expenses were much higher than at other sites. Nevertheless, the quality of the hotel facilities and the convenience to conference organizers and participants of having lodgings, meals and meetings at a single site compensated for the extra expense.

### **3.9 Staff Coordination and Responsibilities**

Staff of all the three *ZdravReform*/Ukraine offices, Kiev, L'viv and Odessa, were involved in conference preparation and implementation. Before conference preparation began, Acting Ukraine Director Marty Makinen brought together office managers and conference coordinators and assistants from the three offices. Goals and tasks for each stage of preparation were determined and the person/s responsible for each task was assigned. Acting Deputy Director Annemarie Wouters oversaw the schedule of responsibilities staff member for the L'viv conference.

**Lessons Learned:** The approach for conference planning taken by the Kiev office directors—assigning responsibilities at a preliminary staff-meeting and making modifications as preparations progress—proved efficient value and was used for all the three conferences.

## 4.0 ANALYSIS AND EVALUATION

### 4.1 Participant Profile

The following table profiles participants for each conference by professional positions and their level in the health care system.

**Table 1**

	position	oblast level			municipal (city) level			rayon level			total
		L'viv	Odessa	Dniepr	L'viv	Odessa	Dniepr	L'viv	Odessa	Dniepr	
1	health administration heads	4	4	3	3	4	8	-	-	-	26
2	health administration deputies	11	2	12	1	1	1	-	-	-	28
3	economic department heads	2	2	1	-	1	1	-	-	-	-
4	econ department economist	2	3	1	-	-	1	-	-	-	7
5	chief doctor of hospital/polyclinic	7	4	8	16	11	16	14	4	28	108
6	deputy chief doctor	2	4	5	1	3	3	-	2	-	20
7	hospital economist	1	3	1	3	7	2	-	1	-	18
8	chief doctor of children's hospital	1	1	1	-	-	-	-	-	-	3
9	chief doctor of health center, clinic	4	3	5	-	2	2	-	-	-	16
10	heads of break-even and of private clinics	-	-	-	3	1	3	-	-	-	7
11	deputy heads of hospital/polyclinic departments	1	-	1	3	2	-	-	-	-	7
12	chief internist	2	-	-	-	-	-	-	-	-	2
13	chief surgeon	2	-	-	-	-	-	-	-	-	2
14	chief pediatrician	1	-	-	-	1	-	-	-	-	2
15	chief obstetrician-gynecologist	1	-	-	-	-	-	-	-	-	1
16	head of railroad health care	1	-	-	-	-	-	-	-	-	1
17	head of deputy commission	1	-	1	-	-	-	-	-	-	2
18	chief state sanitary doctor	1	-	1	-	1	1	-	-	-	4
19	chief specialist of health administration	7	1	1	-	-	-	-	-	-	9
20	deputy head of statistic and informational center	1	1	2	-	-	-	-	-	-	4
21	university	1	10	4	-	-	-	-	-	-	15
22	doctors' association	-	5	-	-	-	-	-	-	-	5
23	Ukraine MOH, and WHO	1	4	3							8
	TOTAL	54	47	50	30	34	38	14	7	28	302

Total in L'viv Oblast                      98 participants  
 Total in Odessa Oblast                    88 participants  
 Total in Dnipropetrovsk Oblast        116 participants

Oblast and city health care representatives were approximately equal in number at the conferences. However, rayon representatives at the Odessa, L'viv and Dniepropetrovsk conferences can be expressed in the following correlation 1:2:4.3. This made the Dniepropetrovsk conference the most numerous in terms of the number of participants. Thus, the distribution of participants according to the governmental management hierarchy (in %) is:

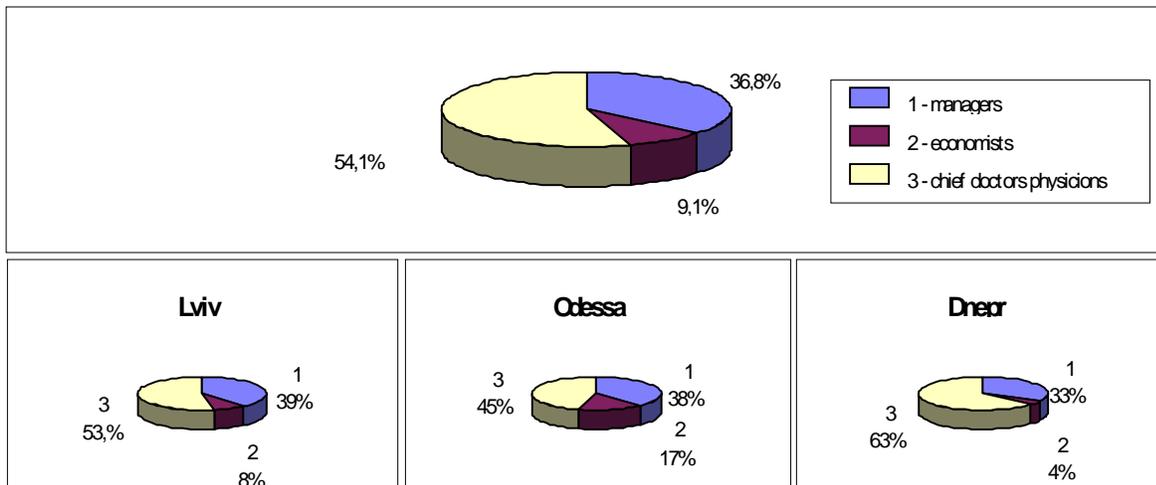
	<i>oblast</i>	<i>city</i>	<i>rayon</i>	<i>total</i>
L'viv Oblast	35,76	29,41	28,57	100
Odessa Oblast	31,13	33,33	14,29	100
Dniepropetrovsk Oblast	33,11	37,25	57,14	100

There was a low percentage of rayon health managers in the participation in Odessa because of unequal dissemination of information to the three levels. In L'viv, there were few top representatives of US Agency for International Development, the MOH, and the head of the L'viv Oblast Health Administration. This was noticed by participants (see sections on discussions and conference evaluation).

**Lessons Learned:** In decentralizing management it is necessary to encourage reform initiative at all levels of the system.

The participant profile in Table 1 was divided into three groups: managers, economists, and physician/managers. This is relative because many managers are chief doctors, economists are simultaneously managerial staff (oblast and city health administrations), and chief doctors are in fact managers of their own facilities.

	Distribution of participants according to conferences and categories						
	L'viv		Odessa		Dniepropetrovsk		Total
categories of participants	absolute	%	absolute	%	absolute	%	absolute
Managers (not economists)	38	38,8	34	38,6	39	36,8	111
Economists	8	8,1	15	17,1	5	9,1	28
Doctor-managers	52	53,1	39	44,3	72	54,1	163
Total	98	100	88	100	116	100	302



If managers of different level were approximately equal in number at all the three conferences, the number of physician/managers ranges within 4 percent, and the number of economists fluctuates most. For example, at the Odessa conference there were three times as many economists as at Dniepropetrovsk, one and nearly twice as many as at L'viv. This may be because of the finance/economic orientation in health care reform in Odessa Oblast.

## 4.2 Speeches and Discussions

In the course of the three conferences, the health care reform experiences presented were subjected to critical analysis by audience members. Following are audience comments taken from minutes of the conference proceedings.

**L'viv Conference:** On October 29, 1996, Marty Makinen, acting *ZdravReform*/Ukraine director, opened the L'viv conference. Nadia T. Melnik, Oblast Health Administration deputy chief, delivered the speech planned to be given by the chief administrator, Nicolai K. Khobzey. Janet Farrell, a Canadian licensing and accreditation specialist attended the conference.

The speakers made their speeches in keeping with the agenda (Annex 3.a). Discussion were based on the exchange of experience and on opinions on topical health care issues. Participants thanked *ZdravReform* for making possible such a fruitful meeting of health care organizers and managers because, the MOH had not convoked chief doctors of oblast hospitals for the past five years. To judge by the prepared audience family medicine issues are worked out and being put into practice at the highest level in this part of the country. On the second day, Professor Y.V. Voronenko, head of the Board on Educational Establishments under the MOH, made an unplanned speech as a guest at the conference. He focused on directions in staff policy reform and training and retraining of health workers. There was a uncertainty in questions put by regional-level managers regarding policy for health care facility staff reform, because the objective to reduce staff is not approved by the MOH either legally or methodologically.

Discussions included remarks, proposals and descriptions of individual experiences. For example, S. Kozodayev (Uzhgorod) made a proposal on behalf of the participants, which

suggested that the presence of MOH decision-makers is most desirable at such conferences and discussions which address conceptual issues and generate proposals.

Speakers from the Odessa Oblast were questioned about the organization of paid care, mechanisms of self-financing health care facilities, and ways to attract and legalize funds from sources other than the government budget and user fees.

Hospital managers interest was aroused by the speech on licensing and accreditation of facilities. Participants wanted to become acquainted with standards in order to prepare their facilities for this process. *ZdravReform* disseminated 15 copies of draft standards.

***Odessa Conference:*** Michelle Varnhagen, project officer at USAID/Kiev; Annemarie Wouters, acting *ZdravReform/Ukraine* deputy; and A.V. Kotsiubskiy, head of the MOH licensing and accreditation department opened the conference. (See also Annex 3.a). Dr. Korvetskiy, head of the Odessa Oblast Health Administration, spoke about possibilities of health care reform in the oblast. He was asked a great many of questions on the legislative and normative basis of reform, paid services and local taxes, not only by Odessa health care workers but also representatives from other regions.

Speeches by Dr. Jemma Jafarova, chief doctor, and Svetlana Bytchenko, chief economist of L'viv City Hospital No. 1, elicited questions: Mr. Koval voiced his distrust of financial autonomy of a family practice at that facility, because the practice had no separate accounts which meant it had no legal basis as an institution independent from the financial structure of the hospital. Many questions were about final results in terms of service and improvement of population's health status indicators. One participant said that, although family medicine was cheaper, the region was not prepared for introduction of such new structures. The situation regarding the location and legalization of ambulatory facilities and family doctor space, whether on the territory of a polyclinic or outside of it, was also unclear. Participants asked about the cost of maintaining such an organization, and they were interested whether there was costs saving with such autonomy, that is, they were interested in self-financing of such structures rather than in improving efficiency of health service.

Serhiy Hrubiy was thanked for correct social information and data about patient readiness to pay for health care. A widely held belief is that patients are unable and reluctant to pay.

A heated discussion followed the presentations of Drs. Pariy and Borschivskiy, both of whom described reforms in Zhitomir Oblast. A. Minakov (Crimea) criticized the approaches of the reformers, claiming that introduction of more expensive initial intensive therapy beds, was more progressive and profitable in terms of methodology and intensity of care. In his response, Dr. Pariy said the changes effected at the oblast hospital were not based on money but the patients' interests. The hospital administration first of all strives to economize the money of the patient and not of the hospital as the former pays 80 percent in his own money for care.

L'viv representatives said that from their experience that obstacles to reform were neither legal nor budgetary but psychological, with an inability to think creatively.

Mrs. Haldayeva (Crimea) pointed out that it was necessary draw a division line between oblast, city and rayon issues of health care reform in that all the three have different problems.

Dr. Victor Gulkovskiy, president of the Physicians' Association of Nikolayev Oblast, pointed out that *ZdravReform* should orient its activity to assistance in improving the legal basis of the health care reform on the national scale. He spoke to participants, making the following main points: The character of many discussions has started to resemble former approaches, i.e., expansion of paid services, bed and staff reductions, and economizing scarce resources. Key issues must be brought up. Why don't health care managers implement reform through the so-called state order? There is no money in health care at all. If we look into the future, no money will appear until agreement is reached between the government and the health care system expressly stipulating an annual amount of health care financing, for a number of years; and stipulating the volume of tasks to be accomplished by the each level of the system during this period. The agreement should be signed by the minister of health, who should be responsible for work volume; and by the prime minister, regarding the budget. Regional chief health administrators and chief state administrators are responsible and should have no claim on one another as regards workloads, because they have been defined. This is the way to ensure a basic level of care. This issue should be posed now to the President and the government. In addition, the public should be told honestly that state-owned health facilities will provide free care within a certain volume of financing. It is necessary to calculate precise prices various kinds of health care. Financial managers should then decide, based on their budgets, the amount of services they can buy for their citizens. Only after this key approach of financing is solved will it be possible to deal with details. Everybody is waiting for our move: health care workers, who receive no wages for months at a time, and the public, who receive almost no services. We have approached a perilous edge beyond which is social upheaval, and we should be aware of it. We will have to create conditions for health care workers, who are on the verge of being redundant, to relocate themselves in the health care services market which must be created. Reducing prices and raising quality are possible in a system with powerful financial mechanisms. This requires privatization of a some facilities or widescale introduction of paid services at state-owned facilities. But there is Article 49 of the Constitution. Still, this article stimulates an answer to this question: We must decide how many state-owned health care facilities we need; the rest should be leased, converted into joint stock facilities, etc. Solution of these issues is the right way in health care reform".

On the second day of the conference, during discussion of licensing and accreditation, participants expressed apprehensions that many facilities would not be able to comply with the material and technical standards. Mrs. Streltsova told about her three-month experience with accreditation standards at the Odessa Oblast Hospital. Dr. Kotsiubinskiy, head of the MOH accreditation and licensing department, assured the audience that the MOH was seeking constructive ways to solve these problems. A Astahov (Crimea) said that accreditation of a HCF should be based on the insurance responsibility of the doctor.

Following the presentation by Dr. Mostipan on his experience with family medicine clinic in Dnieprodzherzhinsk, many in the audience agreed that his was a transition model for health care

financing. In his answer to the question whether the term "family" as regards a polyclinic corresponds to the definition "family doctor" he said it reflected financial relations in that case and the model of the polyclinic did not correspond to the insurance law.

Other presentations looked at computerization and its indirect effect on accountant staff reductions, Moldova's switch to per capita financing in 1997, criteria for bed capacity reduction, neglect of reform of maternal and child care, and a proposal to set up an association of Odessa health care facilities with a fund to solve financial problems.

***Dniepropetrovsk Conference:*** The Dniepropetrovsk conference also was opened by Michelle Varnhagen and Marty Makinen. In attendance was USAID/Washington's Mary Ann Micka, who made a brief speech about health care problems in East European countries (Czech Republic, Slovakia, Romania, Poland).

In his opening speech, A.V. Ipatov, head of the Oblast Health Administration, expressed gratitude for naming Dniepropetrovsk as a conference site, summed up the oblast's health reform results, discussed future health care policy and voiced his certitude that the oblast would be capable of coping with many problems. The MOH was represented by Taisiya Vladimirovna Loboda, head of health care main department and Inna Borisovna Demchenko, advisor to the Minister. Loboda assured the audience that the MOH was working on the legislation to ensure an adequate volume of financing to operate the health care delivery system.

Presentations of note covered topics such as quality standards for care delivery, management training, and international experience in health care reform. The entire program is in Appendix 3.

As usual, certain topics engendered the most discussion: Dr. Vitaliy Borsch, health administrator of Kodyma rayon (Odessa Oblast), discussed obstacles in transplanting family medicine to Ukraine and the need for privatization of health care facilities.

Zhitomir representatives Pariy and Borschivskiy stirred discussion with their presentation about their experience with voluntary health insurance agreements made with enterprises and collective farms, reform in pharmacy service in the oblast polyclinic, and other activities which aroused interest and approval from their counterparts.

In response to the presentation about primary health care and financing issues by Dniepropetrovsk Medical Academy's Lekhan, some participants claimed that Ukraine was psychologically unready for market relations. A. Gook, a L'viv Oblast Hospital physician and a *ZdravReform* technical consultant, responded by pointing out that many patients who buy cars are at the same time reluctant to pay anything for health care.

***Lessons Learned:*** Despite doubts about individual reforms, the general tone of the discussions demonstrated a high level of readiness for sweeping reforms and discontent with the slow pace of developing reform legislation, new economic mechanisms and transformation of the mentality of many health care managers.

As a result, participants adopted a conference Resolution calling for progress. The Resolution was sent to the Cabinet of Ministers of Ukraine and publicized in the press. The full text of the resolution is in Annex 6.

## **5.0 CONFERENCE EVALUATION**

To get feedback from participants about the content and organization of the conferences, an evaluation questionnaire was administered at each conference. The questionnaires for each conference are in Annex 7.

### **5.1 L’viv Results**

The L’viv office staff wrote the questionnaire, completed by thirty-three participants. The questionnaire asked open-ended questions, which resulted in a wide variety of responses. For analysis, the diversity of answers was divided into the following nine groups (clusters

1. Primary health care/family medicine,
2. Health insurance,
3. Standardization of care delivery and accreditation and licensing of health care facilities,
4. Restructuring of bed capacity,
5. Decentralization of management and financing,
6. Private medicine,
7. User fees,
8. “Right way” (a phrase for psychological encouragement of reform, meaning certitude that we are following the right way),
9. Need for having appropriate MOH representatives participate in conferences.

The reforms most commonly implemented already are restructuring of hospital bed capacity and introduction of user fees. The greatest challenges are implementation of family medicine; standardization of health care delivery, licensing and accreditation; and decentralization of health care management and financing.

Over half of the respondents reported that hearing about the accomplishments of their colleagues boosted the confidence of reformers and provided psychological reinforcement that they are following the “right way.”

Respondents were unanimous in their high estimate of conference organization, the importance of holding similar conferences, and the need for MOH representation at the conferences.

Table 1, below, shows the distribution of answers according to cluster.

**Table 2**

Questions	Distribution of answers according to the Clusters								
	1	2	3	4	5	6	7	8	9
1. Which topics did you find most interesting?	10		8	3					
2. What can be improved when we organize a similar conference next time?	3	8	9		10	8			33
3. What information which will help you in your work? How can you benefit by it?	11		4	3				10	
4. What is the most fresh idea that you heard?			4		15	3		9	
5. Which of the reforms are you implementing yourself?				12			8		
6. Have you implemented any reforms not mentioned at the conference?			2		6		9		
<b>Total</b>	<b>33</b>	<b>8</b>	<b>27</b>	<b>18</b>	<b>31</b>	<b>11</b>	<b>17</b>	<b>19</b>	<b>33</b>

## 5.2 Odessa and Dniepropetrovsk Results

Because of the low return rate of questionnaires and difficulty of analyzing responses in L'viv, conference organizers developed a new questionnaire for Odessa and Dniepropetrovsk. Participants were asked to rate various aspects of the conference on a 5-point scale. In Odessa, 41 questionnaires were returned, in Dniepropetrovsk, 32. The overall rating given to the significance of holding a conference was 4.7 in Odessa and 4.9 in Dniepropetrovsk. The following table rates presensters according to the topicality and applicability of their work.

**Table 3**

		Odessa	Dniepropetrovsk
1	Jafarove J. and Bytchenko S.	4,4	4,5
2	Grubiy S.	4,2	4,0
3	Pariy V., Borschivskiy M.	4,1	4,5
4	Litvak A.	4,0	4,2
5	Borsch V.	3,9	4,3
6	Omelchenko V. and Olexiiuk T.	4,3	4,7
7	Sknarina O.	4,2	-
8	Shubin A. Petrova G.(Odessa)	3,8	4,0
9	Lekhan V. Ipatov A.	-	4,4
10	Mostipan A. Anisimov V.	4,2	4,0
	<i>Total average grade</i>	<b>4,1</b>	<b>4,3</b>

In summary, discussion of the experience of L'viv Polyclinic No. 1, licensing and accreditation, Zhitomir experience in bed restructuring, and primary health care development aroused most participant interest.

Table 4 shows Odessa respondents' opinions about various health care reforms discussed at the conference.

**Table 4**

Reform directions, presented at the conference	Distribution of respondents' opinions						
	yes abs	yes %	no abs	no %	don't know	don't know %	Total %
1. Restructuring of hospital bed capacity	35	85,4	-	-	6	14,6	100
2. Implementation of family medicine (a) ambulatory	31	75,6	2	4,9	8	19,5	100
(b) polyclinic departments	16	39,0	10	24,4	15	36,6	100
(c) polyclinic	18	43,9	6	14,6	17	41,5	100
3. Formation of mobile teams	24	58,5	4	9,8	13	31,7	100
4. Economic reforms: (a) differential remuneration	33	80,5	1	2,4	7	17,1	100
(b) decentralization of the budget	32	78,1	3	7,3	6	14,6	100
(c) cost management; paid medical services	34	82,9	-	-	7	17,1	100
5. Standardization of quality of care	35	85,4	-	-	6	14,6	100

Table 5 shows Dniepropetrovsk responses:

**Table 5**

Reform directions, presented at the conference	Distribution of respondents' opinions						
	yes abs	yes %	no abs	no %	don't know	don't know%	Total %
1. Hospital bed capacity restructuring	29	90,6	-	-	3	9,4	100
2. Family medicine implementation (a) ambulatory facilities	30	93,8	-	-	2	6,2	100
(b) polyclinic departments	12	37,5	5	15,6	15	46,9	100
(c) polyclinic	18	56,2	6	18,8	8	25,0	100
3. Formation of mobile teams	24	75,0	1	3,1	7	21,9	100
4. Economic reforms: (a) differential remuneration	29	90,6	-	-	3	9,4	100
(b) decentralization of the budget	28	87,4	2	6,3	2	6,3	100
(c) cost management; paid medical services	31	96,9	-	-	1	3,1	100
5. Standardization of quality of care	31	96,9	-	-	1	3,1	100

According to this data, participants approved reform directions on the whole. There is some reservation among Odessa participants regarding establishing family medicine departments at polyclinics and separate family medicine polyclinics.

Table 6 shows Odessa responses about already-implemented health care which was presented at the conference

**Table 6**

Reform directions, presented at the conference	Distribution of respondents' opinions						
	yes abs	yes %	no abs	no %	don't know	don't know	Total %
1. Hospital bed capacity restructuring	32	78,0	5	12,2	4	9,75	100
2. Family medicine implementation	5	12,2	24	58,5	12	29,3	100
(a) ambulatory							
(b) polyclinic departments	4	9,8	20	48,8	17	41,4	100
(c) polyclinic	3	7,3	22	53,6	16	39,0	100
3. Formation of mobile teams	4	9,8	19	46,3	18	43,9	100
4. Economic reforms:	12	29,3	18	43,9	11	26,8	100
(a) differential remuneration							
(b) decentralization of the budget	10	24,4	16	39,0	15	36,6	100
(c) cost management; paid medical services	26	63,4	6	14,6	11	26,8	100
5. Standardization of quality of care	11	26,8	15	36,6	15	36,6	100

As in L'viv, hospital bed capacity restructuring appeared to be the most widespread reform already implemented, followed different forms of implementation of user fee services.

Table 7 shows results from the Dnipropetrovsk conference.

**Table 7**

Reform directions, presented at the conference	Distribution of respondents' opinions						
	yes abs	yes %	no abs	no %	don't know	don't know %	Total %
1. Hospital bed capacity restructuring	28	87,5	-	-	4	12,5	100
2. Family medicine implementation	5	15,6	11	34,4	16	50,0	100
(a) ambulatory							
(b) polyclinic departments	2	6,2	16	50,0	14	43,8	100
(c) polyclinic	3	9,4	10	31,2	19	59,4	100
3. Formation of mobile teams	5	15,6	12	37,5	15	46,9	100
4. Economic reforms	18	56,3	4	12,5	10	31,2	100
(a) differential remuneration							
(b) decentralization of the budget	6	18,6	8	25,0	18	56,2	100
(c) cost management; paid medical services	12	37,5	6	18,8	14	43,7	100
5. Standardization of quality of care	5	15,6	15	46,9	12	37,5	100

Like L'viv and Odessa, hospital bed capacity restructuring was most widespread. Here, it was followed by the introduction of differential labor remuneration, cost management; and paid medical services.

The number of “don't know” responses from the eastern regions of Ukraine demonstrated a lower level of familiarity with reform implementation in comparison with those regions where *ZdravReform* operates. This indicates the need for the MOH to accelerate information activities in the region and throughout Ukraine.

Other reforms mentioned were health insurance and other forms of paid services.

In Odessa, 97 percent of the participants deemed it necessary to hold similar conferences in the future; in Dnipropetrovsk there was a 100 percent approval of this suggestion.

Odessa participants made the following suggestions for discussion topics at future conferences:

- “scientific” approaches health care organizers,
- the Vinnitsa firm "Intex,"
- mechanisms for evaluation of health care quality,
- health insurance,
- paid services, calculation of their cost, legal basis,
- legal and taxation aspects of self-financing,
- financial relationship between HCFs,
- reform of health care delivery for children.

It should be noted that the first proposal of Odessa respondents was taken into account during the preparation of the Dnipropetrovsk conference, where Drs. Lekhan and Makinen made their speeches. Dnipropetrovsk suggestions for future conferences are almost identical and therefore are not listed separately here.

## **6.0 CONCLUSION**

1. These *ZdravReform* regional conferences allowed more than 300 health care administrators and managers from different level of the Ukrainian health care system and from all oblasts of Ukraine and the Republic of the Crimea to learn about and analyze the experience, accomplishments and mistakes made in health care reform to date, thus realizing the conference goal.

2. *ZdravReform* assistance in the preparation of presentations ensured they were well organized and technically relevant.

3. Distribution of participants from all health care sectors was unfortunately uneven at each conference. L'viv lacked representation from the MOH and USAID. In Odessa, there were relatively few chief doctors; in Dnipropetrovsk few economists. Decentralization of health care management and other reforms involve levels of the system. Three weeks were not sufficient to select participants.

4. The discussion of reforms heightened the awareness of administrators and managers of other regions and confirmed to them that they indeed are on the “right way.”
5. Discussions and evaluation results showed that reforms proposed by *ZdravReform* were approved by the participants on the whole.
  - Of most interest to participants were the experience of the L’viv Polyclinic No. 1, issues of licensing and accreditation, bed capacity restructuring at the Zhitomir Oblast Hospital and prospects for primary health care development in Dniepropetrovsk.
  - Reforms most commonly taking place are bed capacity restructuring and attempts to introduce user fees.
6. Informational dissemination is essential to the reform program. Great interest was aroused by the speeches and printed materials distributed at the conferences, which can apply to their own work and share with their local counterparts.
7. Preparation of conferences on such a scale and requires financing and staff orientation, organization, and coordination.
8. The most significant result was adoption by conference participants of the Resolution calling for acceleration of reform legislation and their decision to submit the Resolution to the Cabinet of Ministers and MOH and publish it in the press. This document was an assessment of the current health care situation and an outline for future reform strategy.

## **7.0 RECOMMENDATIONS**

1. Additional dissemination of the information about health care reform experiences and about the conferences themselves should be done.
2. For future conferences, participant selection should be done not less than three weeks in advance, and a multi-stage algorithm should be used. It is necessary that administrators doing the selection be familiar with *ZdravReform* goals and conference topic; they must evaluate the make-up of an entire delegation, which should include active reformers and oblast health administrators and proportional representation from all levels of the health care system.
3. Identify from among participants the most active, reform-minded and creative managers and include them in a database as prospects for future collaboration.
4. Shorten the length of the conference to one day, even though this will reduce the scope of issues discussed and limit speech length to 15 minutes.
5. Most useful is questionnaire survey a feedback which allows to constantly follow the program, evaluate, elaborate and correct problematic points and use creative proposals.
6. Incorporate participants' suggestions for topics and speakers into future programs.

7. The information dissemination office should take note of document at the conference and use the information to evaluate its activity.
8. Hold future conferences with similar large numbers of out-of-town at a hotel complex with a restaurant and a conference hall.
9. Assign clear duties and deadlines to each staff member involved in conference preparation and implementation organizer at a staff meeting held before preparation begins. Announce modifications of these duties as the need arises.

## **ANNEX 1: PARTICIPANT LISTS**

### **PARTICIPANTS IN THE L'VIV CONFERENCE**

#### **TERNOPIL OBLAST**

1. Grabovska - Deputy Head of Oblast Health Administration
2. Kozak - Deputy Head of Oblast Health Administration
3. Vishtikaliuk - Chief Internist of Oblast Health Administration
4. Basistiuk - Chief Surgeon of Oblast Health Administration
5. Golyk - Chief Pediatrician of Oblast Health Administration
6. Oniskin - Chief Surgeon-obstetrician of Oblast Health Administration
7. Gnatiuk - Chief Specialist of Oblast Health Administration
8. Levchencko - Chief Specialist of Oblast Health Administration
9. Baydalka - Economist of Oblast Health Administration
10. Girnyak - Chief Doctor of Oblast Clinic Hospital
11. Bobko - Chief Doctor of Information and Statistics Center
12. Kravetts

#### **IVANO-FRANKIVSK OBLAST**

1. M. Petryna - Head of Oblast Health Administration
2. O. Kiriak - Chief of Oblast Epidemiology Department
3. M. Kulayets - Deputy Head of Oblast Health Administration
4. A. Gulyi - Deputy Head of Oblast Health Administration
5. I. Kropelnitskiy - Head of Economic Department of Oblast Health Administration
6. R. Ostiak - Head of Ivano-Frankivsk City Health Administration
7. M. Oliniytschuk - Chief Doctor of Goropenkivskiy Rayon
8. M. Yavorskiy - Chief Doctor of Tlumatskiy Rayon
9. E. Protsiuk - Chief Doctor of Kalunskiy Rayon
10. V. Olexin - Chief Doctor of Rozhniativskiy Rayon
11. V. Romanchuk - Chief Doctor of Oblast Oncology Hospital

#### **ZAKARPATSKA OBLAST**

1. M.G. Lukatch - Chief Economist of Oblast Health Administration
2. S.L. Kozodayev - Chief Specialist of Oblast Health Administration
3. Y.M. Rogatch - Chief doctor of Oblast Clinic Hospital
4. V.M. Roman - Chief doctor of Khust Central Rayon Hospital
5. M.M. Zayats - Deputy Chief doctor of Oblast Clinic Hospital
6. V.G. Tsiptack - Chief Economist of Mukatchiv Central Rayon Hospital
7. O.I. Kyshko - Chief of Deputy Health Care Committee
8. V. Stoiko

## **L'VIV CITY**

1. J.Jafarova - Chief Doctor of City Clinic Hospital #1
2. S. Bichencko - Chief Economist, City Clinic Hospital #1
3. V. Oliynick - Medical Director, City Polyclinic #2
4. T. Sheremeta - Head of Surgery Department of Polyclinic #2
5. C. Levitska - Chief doctor of City Stomatological Polyclinic #1
6. N. Melnyk - Deputy Head of L'viv Oblast Health Administration
7. Z. Huzar - Head of L'viv City Health Administration
8. R. Honcharova - Deputy Head on User Fees, L'viv City Hospital #1
9. N. Dyachyk - Economic Director, Dentist Policlinic
10. S. Antonenko - Chief Doctor of "Bogdan" Private Hospital
11. Y. Zarembo - Chief of Family Medicine Department, L'viv Medicine University

## **L'VIV OBLAST**

1. M. Veres - Chief Doctor, Zhovkva Rayon
2. M. Pavelko - Chief Doctor, Staryi Sambir Rayon
3. S. Kryvko - Chief Doctor, L'viv Oblast Clinic Hospital
4. M.S. Paenok - Deputy Chief Doctor, L'viv Oblast Clinic Hospital
5. I.V. Kovalchuk - Chief Doctor of Oblast Oncology Health Center
6. Y.OstroverhaA - Chief Doctor Oblast Health Center
7. I.Kostyuk - Head of Phisicians' Association of L'viv Railroad
8. R. Gulchyy - Deputy Chief Doctor Oblast Psychiatry Hospital

## **VOLIN OBLAST**

1. Vashchilin - Deputy Head of Oblast Health Admiistration
2. Koshel - Head of City Health Administration
3. Shkarovetskiy - Deputy Chief Doctor of Oblast Hospital
4. Yemchyk - Chief Doctor of Volodymyro-Volynsk

## **CHERNOVTSI OBLAST**

- O.I. Hrushko - Head of Oblast Health Administration

## **KHMELNITSK OBLAST**

1. A.K. Pinchuk - Head of Oblast Health Administration
2. N. Guliaeva - Deputy Chief Doctor of Oblast Hospital
3. A. Svoshko - Chief Doctor of Kamenets-Podilsk City Hospital
4. B. Tsvigun - Chief of Urology Department, Kamenets-Podilsk City Hospital

## **ZHITOMIR OBLAST**

1. Z.M. Paramonov - Head of Oblast Health Administration
2. V. Pariy - Medical Director of Oblast Health Administration
3. M. Borshchivskiy - Chief Doctor of Oblast Hospital
4. Y. Homyk - Chief Doctor of City Hospital
5. V. Mushkivskiy - Chief Doctor of Rayon Hospital
6. M. Kupriychuk - Chief Doctor of City Hospital #1

## **VINNITSA OBLAST**

1. V. Mironiuk - Deputy Chief of Oblast Health Administration
2. M. Mikoliuk - Chief Doctor of Mogiliov-Podilsk CRH
3. K. Kuzminova - Chief Doctor of City Hospital #4
4. A. Hilenko - Chief Doctor of Trostianets CRH

## **RIVNE OBLAST**

1. V. Babak - Deputy Chief of Oblast Health Administration
2. V. Dubovik - Deputy Chief Doctor of Oblast Hospital
3. Y. Kucheruk - Chief Doctor
4. G. Stetsiuk - Chief doctor of Radzeviliv CRH

## **KIEV**

1. V.V. Zavgorodniy - Deputy Head of City Health Administration
2. Ponomar - Director General of Vatutin Public Territory Medical Amalgamation
3. O. Kovalenko - Deputy Director General of Staro-Kyyiv Public Territory
4. L. Sytnik - Chief of the MOH Licencing and Accreditation Department
5. H. Safronova - Chief Doctor, Zaliznitchniy Rayon Public Territory Medical Amalgamation, City of Kiev
6. R. Smigulska - Chief Doctor of Zhovtneva Rayon Public Territory Medical Amalgamation, City of Kiev

## **DNIEPRODZERZHINSK OBLAST**

- O. Mospitan - Chief Doctor of Family Medicine Polyclinic

## PARTICIPANTS IN THE ODESSA CONFERENCE

<sup>1</sup>	<b>Family name First Name Patronymic</b>	<b>Position</b>	<b>Organization</b>
	<b><u>CRIMEA</u></b>		
1	Minakov Alexey Andreyevitch	chief doctor	Fedosiya city territorial medical amalgamation
2	Astakhov Anatoliy Andreyevitch	chief doctor	republican diagnostic center
3	Holdeyeva Inna Vasilievna	doctor-methodologist	informational and methodological department of the Sevastopol children hospital
4	Kolpakova Irina Felixovna	chief pediatrician	Yevpatoria city health administration
	<b><u>KIROVOGRAD OBLAST</u></b>		
1	Kiseliov Y.P.	head	
2	Bondarenko V.V.	chief doctor	children oblast hospital
3	Shevchuk N.G.	chief doctor	oblast hospital
4	Maiskiy N.I.	head	city health administration
5	Chernishova N.A.	deputy head on economic issues	children oblast hospital
6	Yarmakova N.P.	economic department head	city health administration
7	Kononova A.P.	chief economic specialist	oblast health administration
8	Golovanova L.V.	deputy head on economic issues	oblast hospital
	<b><u>SEVASTOPOL</u></b>		
1	Krikun Anna Ivanovna	deputy head on economic issues	health administration
2	Shpilleyko Ilia Vladimirovitch	deputy head	hospital <sup>1</sup> 1
3	Neizhpapa Leonid Ivanovitch	chief specialist	emergency care
4	Timoshin Victor Valyeriyevitch	chief doctor	hospital <sup>1</sup> 7
5	Belenko Nataliya Constantinovna	chief doctor	hospital <sup>1</sup> 1
6	Holopov Valeriy Vasiliyevitch	deputy head on economic issues	hospital <sup>1</sup> 1
	<b><u>SUMI</u></b>		
1	Pavliuchenko Valentina Trofimovna	deputy head on economic issues	Konotopi city CRH
2	Zaharchenko Alexandra	deputy head on	Hospital for World War II invalids

<b>1</b>	<b>Family name First Name Patronymic</b>	<b>Position</b>	<b>Organization</b>
	Alexeyevna	economic issues	
<b>3</b>	Kuchma Yelena Anatoliyevna	economist	health administration
	<b><u>KHERSON</u></b>		
<b>1</b>	Mitkovskiy Vladimir Grigoriyevitch	head	oblast health administration
<b>2</b>	Chursina Veronika	deputy chief doctor	children oblast hospital
<b>3</b>	Karabelish Yevgeniy Yevgenienitch	chief doctor	Suvorov rayon hospital of the city of Kherson
<b>4</b>	Remiga Leonid Timofeevitch	chief doctor	Komsomol rayon hospital of the city of Kherson
<b>5</b>	Popenko Oleg Ivanovitch	chief economist	Tsiuriupin territorial medical amalgamation
	<b><u>NIKOLAYEV OBLAST</u></b>		
<b>1</b>	Stadnichenko A.V.	head	Nikolayev city health administration
<b>2</b>	Tikhonov L.Y.	deputy head	health administrartion
<b>3</b>	Polishchuk Y.G.	manager	Nikolayev state health department
<b>4</b>	Gunchenko V.K.	chief doctor	city hospital <sup>1</sup> 3
<b>5</b>	Yarovoy A.I.	chief doctor	emergency care hospital
<b>6</b>	Aleshkov I.I.	chief doctor	CRH
<b>7</b>	Stepanova O.V.	deputy chief doctor	CRH
<b>8</b>	Glukhovskiy V.V.	president	Doctors' Association
<b>9</b>	Yurgel S.P.	executive secretary of the association, chief doctor of the oblast policlinic	Doctors' Association
<b>10</b>	Romaniuk G.P.	vice-president of the association, head of Municipal Affairs Department	Doctors' Association
<b>11</b>	Yeremchuk V.A.	vice-president of the association, chief doctor of city hospital #2	Doctors' Association
	<b><u>ODESSA OBLAST</u></b>		
<b>1</b>	Gorashchuk Natalia Petrovna	deputy head on economic issues	dentist policlinic <sup>1</sup> 5
<b>2</b>	Hapin Alexandr Alexandrovitch	chief doctor	maternity home <sup>1</sup> 1

<sup>1</sup>	<b>Family name First Name Patronymic</b>	<b>Position</b>	<b>Organization</b>
3	Ariychuk Yevgeniy Korniyevitch	head	policlinic <sup>1</sup> 29
4	Yarmoldinets Mark Alexandrovitch	chief doctor	hospital <sup>1</sup> 3
5	Chernetskiy Veniamin Nikolayevitch	chief doctor	hospital <sup>1</sup> 10
6	Koval Vladimir Ivanovitch	deputy head on economic issues	hospital <sup>1</sup> 10
7	Shubin Anatoliy Dmitriyevitch	chief doctor	consultative policlinic
8	Petrova Galina Mikhailovna	economist	consultative policlinic
9	Bespoyasnaya Valentina Viliyevna	director	Health and family center
10	Molochkova Liudmila Nikolayevna	chief economist	Health and family center
11	Borshch Vitaliy Ivanovotch	chief doctor	Kodima city
12	Galayko Boris Ivanovitch	chief doctor	Beliayevka city
13	Kachurovskiy Ivan Stepanovitch	chief doctor	Izmail city
14	Tiutiunko Zoya Dmitrievna	deputy chief accountant	Izmail city
15	Gogulenko Vasiliy Pimenovitch	chief doctor	oblast hospital
16	Snarina Olga Mikhailovna	chief economist	oblast hospital
17	Streltsova Svetlana Petrovna	deputy chief doctor	oblast hospital
18	Bondariuk Andrey Ivanovitch	chief doctor	policlinic <sup>1</sup> 2
19	Zhukovskiy V.I.	head of the oblast medical association	mental clinic
20	Zviagintseva Natalia Ivanovna	deputy head on economic issues	maternity home <sup>1</sup> 1
21	Nepomniashchiy Lev Yefimovitch	head of the department	hospital <sup>1</sup> 7
22	Sichev Vladimir Petrovitch	doctor on sanitary issues	junction railroad station
23	Litvak Akim Izralievitch	advisor	oblast health board
24	Litvak Emilia	doctor	policlinic <sup>1</sup> 2
25	Trushkina Ludmila Pavlovna	chief doctor	oblast clinical hospital
26	Blihar Orisia		
	<b><u>ODESSA MEDICAL UNIVERSITY (OMU)</u></b>		
1	Chuyev Petr Nikolayevitch	deputy rector	OMU

<b>1</b>	<b>Family name First Name Patronymic</b>	<b>Position</b>	<b>Organization</b>
2	Kolodenko Vladimir Alexandrovitch	pro-rector on therapeutic activity	OMU
3	Korvetskiy Alexandr Dmitrievitch	head	Odessa oblast health administration
4	Ariayev Nikolay Lvovitch	foreign issues professor	OMU, children disease department
5	Brezeleva Natalia Constantinovna	assistant on the children disease department	OMU
6	Tsigankova Valentina Gavrilovna	head	small enterprise "INTEX"
7	Chernaya Galina Vasilievna	programmer	small enterprise "INTEX"
8	Kienko-Romaniuk Valeriy Ivanovitch	programmer	small enterprise "INTEX"
	<b><u>DNIEPRODZERZHINSK</u></b>		
	Kramarenko M.V.	reviewer	Dnieprodzerzhinsk city family medicine policlinic
	<b><u>MOLDOVA</u></b>		
	Yetsko Constantin	social hygiene department professor	
	<b><u>ZHITOMIR</u></b>		
	Savchenko Vladimir Leonidovitch	deputy chief doctor	Zhitomir oblast hospital
	<b><u>L'VIV</u></b>		
	Guzar Zinoviy	head of state administration	
	Zaremba Yevgenia		L'viv Medical University
	<b><u>KIEV</u></b>		
1	Kotsiubskiy Vladimir Viketiyeitch	head	MOH, licensing and accreditation department
2	Progunova Natalia	worker	WHO
	<b><u>LIST OF CONFERENCE SPEAKERS</u></b>		
1	Varnhagen Michele		USAID
2	Annemary Wouters	acting director	ZdravReform Program in Ukraine
3	Jafarova Jemma	chief doctor	L'viv City Hospital #1
4	Bytchenko Svetlana	deputy head on economic issues	L'viv City Hospital #1
5	Grubiy Sergey		Ukrainian Marketing Group
6	Pariy Valentin	deputy head on health	Zhitomir oblast health administration

<sup>1</sup>	<b>Family name First Name Patronymic</b>	<b>Position</b>	<b>Organization</b>
		care issues	
7	Mostipan Alexandr	chief doctor	Dnieprodzerzhinsk city family medicine polyclinic
8	Subbotin Yuriy	head	WHO department on coordination with Ukraine
9	Oleksiuk Tatiana Aleksandrovna	specialist	MOH, licensing and accreditation department
	<b><u>MASS MEDIA</u></b>		
1	Kats Inna Rafailovna		Odessa business news (newspapers)
2	Kravchenko Sergey Shkel Lina Alexandrovna		"ART" TV company
3	Brodskaya Yekaterina Semenovna	correspondent	"GLAS" Radio
4	Olenetskaya Irina		Odessa state television
5	Gurtovoy Anatoliy	operator	Odessa sate television, channel 7
6	Dukova Dora Nikolayevna	journalist	"Vecherniya Odessa"
7	Dolinskaya Ludmila Petrovna	journalist	"Glasnost"
8	Goliayeva Alisa Borisovna	correspondent	"Commersant Yuga"

**PARTICIPANTS AT THE DNIETROPETROVSK CONFERENCE**

<b>1</b>	<b>Family name First name Patronimic</b>	<b>Position</b>	<b>Organization</b>	<b>Telephone, Fax</b>
<b><u>DONETSK OBLAST</u></b>				
<b>1</b>	Grachkova Alla Victorovna	deputy head of the administration on economy	health administration	
<b>2</b>	Blakitnaya Lidia Alexeyevna	deputy head of the administration	health administration	
<b>3</b>	Fedorchenko Olga Alexeyevna	chief doctor	oblast clinical hospital	
<b>4</b>	Makarenko Raisa Sidorovna	director of the center	medical statistics and information science center	
<b>5</b>	Kokarev Viatcheslav Anatolievitch	chief doctor	Dnieprodzerdzhinsk city central hospital	
<b>6</b>	Protaschik Anna Iliytchna	head of the administration	Makeevsk city health administration	
<b>7</b>	Klimovitskiy Vladimir Garievitch	chief doctor	oblast clinical traumatology hospital	
<b>8</b>	Sashenko Irina Ivanovna	deputy chief doctor	oblast sanitary epidemiological station	
<b>9</b>	Popadinets Alexandr Anatolievitch	chief doctor	oblast anti-tumor center	
<b>10</b>	Tkatchuk S.V.	chief doctor	Donetsk city hospital	
<b><u>KIEV OBLAST</u></b>				
<b>1</b>	Alexeyenko Alexandr Alexandrovitch	deputy head of the administration	health care administration	
<b>2</b>	Sitnik Anatoliy Pavlovitch	chief doctor	Mironov rayon	
<b>3</b>	Polozun Liudmila Vitalievna	chief doctor	Obukhov rayon	
<b>4</b>	Gaydayev Yuriy Alexandrovitch	deputy chief doctor	oblast clinical hospital	
<b>5</b>	Hanenko R.A.	chief doctor	policlinic	

**CHERKASSI OBLAST**

1	Mikhailitchenko Petr Dmitrievitch	deputy head of the administration	health administration of the oblast state administration	
2	Tokunov Sergey Ivanovitch	head	Uman	
3	Lihogrud Nadezhda Petrovna	deputy chief doctor	MHI oblast hospital	
4	Ruchko Vladimir Ivanovitch	chief doctor	Cherkassi city hospital #1	
5	Krot Vasiliy Ivanovitch	chief doctor	Cherkassi rayon	
6	Maysiuk Anatoliy Vasiliyevitch	chief doctor	Talnovsk rayon	
7	Tronts Timofey Vladimirovitch	doctor-inspector	<b>health administration</b>	
8	Kutcher Alexandr Arsientievitch	chief doctor	Khristinovsk rayon	

**CHERNIGOV OBLAST**

1	Zoob Vasiliy Sergeyeitch	head of the health administration	Chernigov oblast health administration	
2	Shvidchenko Anatoliy Ivanovitch.	cardiologist	oblast hospital	
3	Potapko P.I.	deputy head of the department	oblast hospital	
4	Ivaschenko V.I.	chief doctor	Chernigovsk rayon	
5	Todoriko F.O.	chief doctor	Bobrovitskiy rayon	
6	Feyer I.I.	chief doctor	Nezhinskiy rayon	
7	Buzan Mikhail Fedorovitch	chief doctor	Semenovsk rayon	

**POLTAVA OBLAST**

1	Tretiakov A.M..	head of the department	investment prtogram department of the city executive committee	
2	Sutkovitch V.S.	deputy head of the administration	oblast health administration	
3	Lisenko N.Y.	chief doctor	statistics center	
4	Chumak V.A.	deputy chief doctor on economic issues	oblast mental hospital	
5	Prezlo L.A.	head of the economy	Oblast clinical hospital #1	

		department		
6	Pirogov I.A.	deputy chief doctor	oblast infant hospital	
7	Demochko A.P.	chief doctor	Globinsk central rayon hospital	
8	Manzhas Lubov Petrovna	deduty head of the health administration	oblast health administrartion	

<b><u>ZAPOROZHIYE OBLAST</u></b>				
1	Lashkul Z.V.	deputy head	oblast health administration	
2	Sevalnev Alexandr Ivanovitch	chief doctor	oblast epidemiology station	
3	Antirskiy	director general	association "Phthisiatria"	
4	Kotliar I.V.	manager	Berdiansk health administration	
5	Sheyko A.E.	manager	Zaporozhiye health administration	
6	Tulina G.I.	chief doctor	city hospital #10	
7	Shmirina N..O.	chief doctor	city policlinic #2	
8	Burlay V.Z.	chief doctor	experimental medicine center	

<b><u>LUGANSK OBLAST</u></b>				
1	Scherbakov Victor Anatolievitch	director of the Coordination center (deputy head of health administration)	Health administration	
2	Beletskaya Ludmila Mikhailovna	deputy head of Maternity and children administration	Health administration	
3	Marshal Vladimir Grigorievitch	head of the administration	Lugansk city health administration	
4	Galinkin Valeriy Yosifovitch	chief doctor	Lugansk policlinic #12	
5	Chizhevskaya Irina Nikolayevna	chief economist	Lugansk city health administration	
6	Lugovskov Alexey Dmitrievitch	assistant professor of health care organization department	Lugansk medical university	
7	Hunov Yuriy Aidamovitch	chief doctor	Svatovsk rayon	
8	Gelunenko Alexandr	chief doctor	Krasniy Lutch	

	Markovitch			
9	Pelih Nikolay Anatolievitch	chief doctor	medical unit	
<b><u>KHARKOV OBLAST</u></b>				
1	Patoka Ludmila Niklayevna	deputy head of the administration	oblast health administration	
2	Zinoviev Ivan Dmitrievitch	chief doctor	oblast hospital	
3	Dmitrenko N.P.	chief doctor	Kharkov oblast hospital	
4	Seroshtan Galina Nikolayevna	chief doctor	oblast TB clinic	
5	Yavorskiy Vladimir Vladimirovitch	head of the polyclinic	city polyclinic	
6	Prihodko Mikhail Ivanovitch	chief doctor	Lazovski rayon	
<b><u>DNIETROPETROVSK OBLAST</u></b>				
1	Vasilchenko S.L.	head	city health administration	
2	Lukiyanenko A.L.	deputy head of the city health administration	city of Krivoy Rog	
3	Shuma N.B.	chief doctor	Yuriyevsk CRH	
4	Sozonova T.V.	chief internist		
5	Bevz Alexandr Ivanovitch	head of the city health administration	city of Nikopol	
6	Shutofedov Georgiy Dorofeyevitch	chief doctor	Ordzhenikidze city central rayon hospital	
7	Vasilishin Roman Yosifovitch	head of the administration	Health administration of Dniepropetrovsk city executive committee	
8	Halemendik Vladimir Anatolievitch	chief doctor	Mezhevsk rayon	
9	Kanivets Vladimir Fomitch	chief doctor	Pavlograd central city hospital	
10	Kradko Nikolay Markovitch	chief doctor	Ternovki central city hospital	
11	Safronov Oleg Ivanovitch	chief doctor	Shirokovsk rayon	
12	Oleynik Anatoliy Vasilievitch	chief doctor	Tomakovsk rayon	
13	Tolubets Victor	chief doctor	Petropavlovsk rayon	

	Andreyevitch			
14	Mozheyko Alexandr Nikolayevitch	chief doctor	Pavlograd central rayon hospital	
15	Rakutskiy Viatcheslav Nikolayevitch	chief doctor	Nikopol rayon	
16	Grinberg Dina Alexandrovna	chief doctor	Krivoy Rog rayon	
17	Kalyada Iudmila Mikhailovana	deputy chief doctor	Pokrovskiy rayon	
18	Himchak T.S.	acting chief doctor	Sofiev rayon	
19	Ravlinko A. A.	chief doctor		
20	Zalevskiy Victor Ivanovitch			
21	Lavrenko V.A.	chief doctor	oblast narcology clinic	
22	Gayduk Andrey Ivanovitch	director	family medicine clinic	
23	Diachenko Vladimir Grigorievitch	chief doctor	city hospital #7	
24	Zadoya Sergey Borisovitch	chief doctor	Dneprodzerzhinsk city hospital #3	
25	Yefimov V.A.	deputy chief doctor	oblast children hospital	
26	Tkatch Victor Ivanovitch	deputy chief doctor	Volnogorsk CRH	
27	Priymak Anatoliy Grigorievitch			
28	Kublitskiy A.I.	chief doctor	emergency care hospital	
29	Kulikovitch Y.N.	director	Dr. Kulikovitch clinic	
30	Alpatov Anatoliy Petrovitch	professor	Dniepropetrovsk medical academy	
31	Leskovskiy N.	deputy chief doctor	Petrikovskiy rayon	
32	Shostak S.I.	chief doctor	city children hospital	
33	Muha Tatiana Grigorievna	deputy chief doctor	Volnogorsk CRH	
34	Kornilova S.N.	chief doctor	oblast health center of Dniepropetrovsk	

<b><i>SPECIALLY INVITED:</i></b>	
Solonenko Ivan Nikolayevitch	Kiev state management academy
Loboda taisiya Vladimirovna	MOH
Mary Ann Mika	USAID (Washington)



**LIST OF  
CONFERENCE  
SPEAKERS**

<b>1</b>	Varnhagen Michele		USAID
<b>2</b>	Marty Makinen	Director	ZdravReform Program
<b>3</b>	Jafarova Jemma	chief doctor	L'viv city hospital #1
<b>4</b>	Bitchenko Svetlana	deputy chief doctor on economic issues	L'viv city hospital #1
<b>5</b>	Grubiy Sergey		Ukrainian Marketing Group
<b>6</b>	Pariy Valentin	deputy head of the administration on health care issues	Zhitomir oblast health administration
<b>7</b>	Mikhail Borschivskiy	chief doctor	Zhotomir oblast hospital
<b>8</b>	Alexandr Mostipan	chief doctor	Dnieprodzerzhinsk city family medicine policlinic
<b>9</b>	Victor Anisimov	deputy head	Dniepropetrovsk oblast health administration
<b>10</b>	Anatoliy Shubin	chief doctor	Odessa city self-financing policlinic
<b>11</b>	Valeria Lekhan	head of the social medicine, health organization and management department	Dniepropetrovsk medical academy
<b>12</b>	Anatoliy Ipatov	head of the administration	Dniepropetrovsk oblast health administration
<b>13</b>	Vitaliy Borsch	chief doctor	Kodima central rayon hospital
<b>14</b>	Akim Litvak	consultant of the administration	Odessa oblast health administration
<b>15</b>	Olexiyuk Tatiana Alexandrovna	specialist	HCF licernsing and accreditation department of the MOH
<b>16</b>	Demchenko Inna	advisor to the minister of health	

## ANNEX 2 PRESENTATION SUMMARY AND THEIR ILLUSTRATIVE MATERIAL

### **Dr. Vitaly Borsch**

*Chief doctor, Kodyma Rayon Central Hospital*

#### **“Restructuring Rural Hospital Delivery Services Considering Severe Resource Constraints and Social Concerns”**

Dr. Borsch will discuss restructuring efforts in this rural hospital serving the Kodyma Rayon area during a period of severe resource constraints and important social concerns. The discussion will highlight the problems, methods, and results of re-organizing certain underutilized and overstaffed clinics. This includes discussion about the creation of a “mobile brigade” as substitute for certain satellite clinics, the resulting reduction of staffing costs, and selected efforts to apply computer automation for improving efficiency in services.

### **Dr. Anatoli Shubin**

*Chief doctor, Municipal Self-Financing Clinic, Odessa*

#### **“Obstacles & Factors of Success for Municipal Self-Financing”**

The Municipal Self-financing Polyclinic (MSFP) was established in 1958 by municipal decree to provide consultative health care to the general population of Odessa on a fee for service basis. At the time, the MSFP was one of a few health facilities in the Soviet Union that were allowed to experiment with self-financing. Prior to 1991, the payments collected from patients were turned over to the municipality and the municipality in turn paid for salaries and other costs. Since 1991, the MSFP has been completely autonomous financially: it receives no funding from the Government and relies entirely on payments collected from patients.

The purpose of this report is to discuss the experience of the MSFP and its implications for health care delivery in Ukraine. The author hopes to inform the discussion over four main questions: Is self-financing a feasible option for improving health care delivery in Ukraine? Is self-financing a desirable option? If self-financing is both feasible and desirable, what are the operational considerations for a facility that is considering self-financing? If self-financing is desirable, what can or should the government do to encourage self-financing?

### **Dr. Akim Litvak**

*Deputy, Odessa Health Care Administration*

#### **“Attitudes of Management Toward Health Care Reform: A Survey”**

Dr. Litvak recently completed a survey of key managers in the Odessa region. The results of this survey are indicative of the problems and opportunities facing health care managers in their effort to promote concrete reform. Two groups of managers were interviewed. One group of managers were those involved in reform efforts. A second group were those outside of the reform effort. Dr.

Litvak will provide a comparative analysis of the two groups and a revealing look at the opportunities and challenges facing those seeking constructive reform.

**Dr. Valentin D. Pariy & Dr. Mikhail Borshchivisky**

*Deputy Administrator - Zhitomir Oblast Health Care Administration and the Chief Physician - Zhitomir Regional Hospital*

**“Perspectives and Methods for Reorganizing Health Care Delivery: Experiences in Reforming for Improved Efficiency and Effectiveness”**

The Zhitomir Oblast has been implementing reforms for a number of years. The reforms have had a positive effect on the efficiency and effectiveness of health care delivery. First, Dr. Pariy will briefly discuss the situation in the Oblast before 1991 and then relate the various reforms at an Oblast level after 1991. The discussion will include specific insight into what and how the reforms were accomplished as well as the results. Dr. Borshchivisky will then share a more specific reform experience of improving bed utilization through reorganization within his large regional facility. His discussion will include a before and after look at the structure of reforms as well as insight into key factors that were involved in the reform process including physician incentives.

**Dr. Lydia Sitnik & Dr. Victor Omelchenko**

*Dr. Sitnik is the Head - Department of Licensing and Accreditation -Ministry of Health; Dr. Omelchenko is Neurosurgeon and a Medical Consultant - ZdravReform Program*

**“Hospital Licensing and Accreditation in the Ukraine: A Fundamental Step to Reform”**

By order of the Ministry of Health, a licensing and accreditation program for hospitals in the Ukraine has been implemented and is currently being tested at selected hospitals in the Ukraine. The importance, process, and current status of the licensing and accreditation effort will be discussed. The presentation will include a specific look at one of the numerous “standards” of accreditation and offer conference participants an opportunity to ask questions regarding this important topic.

**Dr. Alexander Mostipan**

*Dr. Mostipan is the Chief doctor at the Family Medicine Polyclinic, Dneprodzerzhinsk*

**“The Family Medicine Polyclinic in Dneprodzerzhinsk: Background and Recommendations for the Future”**

The Polyclinic of Family Medicine in Dneprodzerzhinsk was founded in 1989 by Dr. A. V. Mostipan as a private practice providing primary care family medicine under its own insurance plan. Over time, the Polyclinic has evolved through various stages of funding mechanisms and has, like others, been challenged to meet the severe economic circumstances of the past few years. The Polyclinic is now composed of about 25 physicians, and continues to be guided by a series of underlying principles including a focus on a “service” orientation toward the patient. Dr. Mostipan will present an overview of the Polyclinic and offer specific recommendations for the future.

**Marty Makinen**

*ZdravReform Director in Ukraine, Byelorussia and Moldova*

**"Possibilities of health economy reform"**

Dr. Marty Makinen will focus his speech on the key economic tenets to be allowed for in working out strategic directions for health care reform.

**Prof. Valerie Lekhan, head**

*Department of Social Hygiene, Health Management and Organization, Dnepropetrovsk State Medical Academy*

**"Prospects of primary care development in Ukraine"**

Prof. V.N. Lekhan and Dr. Ipatov will set forth scientific approaches and technology of practical steps to restructure primary medical care as well as principles of financing and labor remuneration for primary care physicians.

**Dr. Yevgeniya Zaremba**

*Dr. Zaremba is the Department Head - Medical University of L'viv, Department of Family Medicine*

**"Family Medicine: What, Why, and How."**

Family Medicine and its role in health care reform is a frequent area of interest to health care organizations seeking opportunities for improving health care delivery. Dr. Zaremba will explain what is Family Medicine and its importance in the reform effort. In addition, the doctor will provide a brief overview of the development of the Family Medicine Program in L'viv, insight into the European experience as discussed at a recent conference in Strasbourg, and details about the available educational curriculum being offered in L'viv.

**Dr. Vyacheslav Veres**

*Dr. Veres is the Chief doctor of the Zhovka Rayon Hospital*

Pressing economic concerns and realities has caused the Zhovka Hospital to implement aggressive reforms with important social, economic and organizational considerations. Dr. Veres will offer an overview of the reforms implemented, the methods and tactics used to implement the reforms, as well as insight into the results.

**Dr. Jemma Jafarova & Ms. Svetlana Bitchenko**

*Dr. Jafarova is the Chief doctor of City Hospital #1, and Ms. Bitchenko the Head Economist*

The City Hospital #1 in L'viv has implemented a variety of reforms. These include organizational and clinical reforms as well as a variety of economic reforms. Specifically, Dr. Jafarova will discuss the role of Family Medicine, rotational services, and clinical pathways while Ms. Bitchenko will discuss specific economic reforms including salary incentives, decentralized budgets, cost management and user fees.

ANNEX 3 CONFERENCE PROGRAMS

USAID/ZdravReform Program  
 Ministry of Health of Ukraine  
 The L'viv oblast health administration  
 L'viv Medical University

Regional conference  
 Roll-out of health care reform experience  
 October 28--29 1996

will take place in the assembly  
 hall the State University  
 "L'viv Polytechnics"

*Agenda*  
 October 28 1996

8.30-9.30	<i>Registration. The central hall of the Dnister hotel. Coffee.</i>
10.00-10.10	<b>Opening of the conference.</b> Michele Varnhagen (USAID, Kiev) Marty Makinen (ZRP Director in Ukraine)
10.10-10.20	<b>Kartish</b> (deputy minister of health of Ukraine)
10.20-10.45	<b>Dr. Hobzey M.</b> Head of the L'viv oblast health administration "The oblast population health status. Economic state of health care in the oblast and reform directions"
10.45-11.15	<b>Drs. Pariy Valentin and Borschivskiy M.</b> Deputy head of the administration on health care issue in Zhitomir oblast. Chief doctor of the Zhitomir oblast hospital. <b><u>"Perspectives and Methods for Reorganizing Health Care Delivery: Experiences in Reforming for Improved Efficiency and Effectiveness"</u></b>
11.15-11.45	<i>Discussion</i>
11.45-12.15	<b>Dr. Borshch Vitaliy</b> Chief doctor of the Kodyma central rayon hospital <b><u>"Restructuring Rural Hospital Delivery Services Considering Severe Resource Constraints and Social Concerns"</u></b>
12.15-12.30	<i>Discussion</i>
12.30-14.00	<i>Lunch.</i>
14.30-15.00	<b>Grubiy Sergey</b> Ukrainian Marketing Group "Research of patients' satisfaction with family medicine"
15.00-15.15	<i>Discussion</i>
15.15-15.30	<i>Coffee. Coffee break room of L'viv polytechnics University</i>

15.30-16.00	<b>Dr. Jemma Jafarova &amp; Ms. Svetlana Bitchenko</b> <i>Dr. Jafarova, Chief Doctor of City Hospital #1, and Ms. Bitchenko, Chief Economist</i> <b>“Reforms at city hospital #1, L’viv”</b>
16.00-16.15	<i>Discussion</i>
16.15-16.45	<b>Dr. Lydia Sitnik &amp; Dr. Victor Omelchenko</b> <i>Dr. Sitnik, Head - Department of Licensing and Accreditation -Ministry of Health; Dr. Omelchenko, Neurosurgeon and a ZRP Medical Consultant</i> <b>“Hospital Licensing and Accreditation in the Ukraine: A Fundamental Step to Reform”</b>
16.45-17.15	<i>Discussion</i>
18.30-19.30	<i>Banquet</i>

**October 29 1996**

9.00-9.30	<b>Dr. Veres V.</b> <i>Dr. Veres is the Chief doctor of the Zhovka Rayon Hospital</i> <b>“Restructuring health care delivery in Zhovkva”</b>
9.30-10.00	<i>Discussion</i>
10.00-10.30	<b>Dr. Akim Litvak</b> <i>Deputy, Odessa Health Care Administration</i> <b>“Attitudes of Management Toward Health Care Reform: A Survey”</b>
10.30-11.00	<i>Discussion</i>
11.00-11.15	<i>Coffee. Coffee break room of L’viv polytechnics University</i>
11.15-11.45	<b>Dr. Alexander Mostipan</b> <i>Dr. Mostipan, Chief Doctor at the Family Medicine Polyclinic, Dnieprodzerzhinsk</i> <b>“The Family Medicine Polyclinic in Dnieprodzerzhinsk: Background and Recommendations for the Future”</b>
11.45-12.15	<i>Discussion</i>
12.15-14.00	<i>Lunch</i>
14.00-14.30	<b>Dr. Anatoliy Shubin</b> <i>Chief Doctor, Municipal Self-Financing Clinic- Odessa</i> <b>“Obstacles &amp; Factors of Success for Municipal Self-Financing”</b>
14.30-15.00	<i>Discussion</i>
15.00-15.15	<b>Closing of the conference. Marty Makinen</b> <i>ZRP Director in Ukraine</i>
15.30-15.45	<i>Coffee.</i>

**USAID/ZdravReform Program  
Ministry of Health of Ukraine  
The Odessa L'viv oblast health administration**

**Regional Conference  
Health Care Reform in Ukraine  
November 21-22, 1996**

**The Conference will take place at:  
the Conference Hall  
of Hotel "Victoria"**

**Agenda**

**November 21, 1996**

<b>9.00-10.00</b>	<b>Registration at Restaurant, Hotel "Victoria" Coffee will be available</b>
<b>10.00-10.10</b>	<b>Opening of the Conference.</b>
<b>10.10-10.15</b>	<b>Michele Varnhagen (USAID)</b>
<b>10.15-10.30</b>	<b>Annemarie Wouters (Acting Director, ZRP)</b>
	<b>Representative from the Minister of Health</b>
<b>10.30-11.00</b>	<b>Dr. Alexander Dmitrievich Karvetkiy</b> <i>Head of Oblast Health Administration</i> <b>Opening Remarks</b>
<b>11.00-11.30</b>	<b>Dr. J. Jafarova (Chief doctor, L'viv City Hospital #1) and</b> <b>Mrs. S. Bytchenko (Chief Economist)</b> <b>"Reforms at L'viv City Hospital #1"</b>
<b>11.30-12.00</b>	<b>Discussion</b>
<b>12.00-12.30</b>	<b>Mr. S. Hrybiy</b> <i>Ukrainian Marketing Group</i> <b>"Family Medicine Patient Satisfaction Survey"</b>
<b>12.30-12.45</b>	<b>Discussion</b>
<b>12.45-14.00</b>	<b>Lunch</b>
<b>14.00-14.30</b>	<b>Dr. V. Pariy (Zhytomyr Oblast Health Administrator Deputy) and</b> <b>Dr. M. Borshchivsky (Chief doctor of Zhytomyr Oblast Clinical Hospital)</b> <b>"Perspectives and Methods for Reorganizing Health Care Delivery: Experiences in Reforming for Improved Efficiency and Effectiveness"</b>
<b>14.30-15.00</b>	<b>Discussion</b>
<b>15.00-15.30</b>	<b>Dr. A. Litvak (Deputy, Odessa Health Care Administration)</b> <b>"Attitudes of Management Towards Health Care Reform: A Survey"</b>

15.30-15.45	<i>Discussion</i>
15.45-16.00	<i>Coffee-Break</i>
16.00-16.30	<b>Dr. V.Borshch</b> <i>Chief doctor of Kodyma Central Rayon Hospital</i> <b>“Restructuring Rural Hospital Delivery Services Considering Severe Resource Constraints and Social Concerns“</b>
16.30-17.00	<i>Discussion</i>
18.30-19.30	<i>Reception, Restaurant, Hotel Victoria</i>

*November 22, 1996*

9.00-9.30	<b>Dr. Tatayana Olexiouk</b> ( <i>Department of Licensing and Accreditation, Ministry of Health</i> ) <b>Dr. V.Omelchenko</b> ( <i>Medical Consultant, ZRP</i> ) <b>“Hospital Licensing and Accreditation in Ukraine: A Fundamental Step to Reform”</b>
9.30-10.00	<i>Discussion</i>
10.00-10.30	<b>Dr. A.Mostipan</b> <i>Chief doctor, Family Medicine Polyclinic, Dnieprodzerzhinsk</i> <b>“The Family Medicine Polyclinic in Dnieprodzerzhinsk: Background and Recommendations for the Future”</b>
10.30-11.00	<i>Discussion</i>
11.00-11.15	<i>Coffee Break</i>
11.15-11.45	<b>Mrs. Olga Sknarina</b> ( <i>Chief Economist, Odessa Oblast Clinic Hospital</i> ) <b>"Computerization of Financial Functions in Centralized Accounting"</b>
11.45-12.00	<i>Discussion</i>
12.00-12.30	<b>Mrs. Galina Petrova</b> ( <i>Chief Economist, Municipal Self-financing Polyclinic</i> ) <b>"Obstacles and Factors of Success for Municipal Self-Financing"</b>
12.30-12.45	<i>Discussion</i>
12.45-14.00	<i>Lunch</i> <i>Restaurant Victoria</i>
14.00-14.30	<b>Youri Soubotin</b> ( <i>National Professional Officer</i> ) WHO Liaison Office <b>“Results of Recent International Conference on Health Care Reform in E.Europe”</b>
14.30-15.00	<i>Discussion</i>
15.00-15.15	<b>Annemarie Wouters</b> ( <i>Acting Director ZRP/Ukraine</i> ) <b>Closing Remarks.</b>

**USAID/ZdravReform Program  
Ministry of Health of Ukraine  
The Dniepropetrovsk oblast health administration**

**Regional Conference**

*Health Care Reform in Ukraine*

*December 11 and 12, 1996*

**The Conference will take place at:**  
*the Conference Hall  
of Hotel "Rassvet"  
Dniepropetrovsk*

**Agenda (DRAFT as of 11/27)**

***December 11, 1996***

<b>9.00-10.00</b>	<b><i>Registration at Hotel "Rassvet"</i></b> <b>Coffee will be available</b>
<b>10.00-10.10</b> <b>10.10-10.20</b> <b>10.20-10.30</b>	<b>Opening of the Conference.</b> <b>Greg Huger, David Sprague or Michele Varnhagen,(USAID)</b> <b>Marty Makinen (Director, ZRP/Ukraine)</b> <b>Representative from the Ministry of Health</b>
<b>10.30-11.00</b>	<b>Dr. Alexander Sergeyeovich Fedesseyev</b> <i>Deputy Head of Dniepropetrovsk Oblast Administration on Health Care and Social Protection</i> <b>Opening Remarks</b>
<b>11.00-11.30</b>	<b>Dr. J.Jafarova (Chief doctor, L'viv City Hospital #1) and</b> <b>Mrs. S.Bytchenko (Chief Economist)</b> <b>"Reforms at L'viv City Hospital #1"</b>
<b>11.30-11.50</b>	<b><i>D i s c u s s i o n</i></b>
<b>11.50-12.20</b>	<b>Dr. Anatoly Shubin (Chief doctor, Self-Financing Polyclinic, Odessa)</b> <b>Mrs. Vera Morenko (Chief Accountant)</b> <b>"Obstacles and Factors of Success for Municipal Self-Financing"</b>
<b>12.20-12.45</b>	<b><i>D i s c u s s i o n</i></b>
<b>12.45-14.00</b>	<b><i>Lunch</i></b> <b><i>Hotel Rassvet</i></b>
<b>14.00-14.30</b>	<b>Mr. S. Hrybiy Ukrainian Marketing Group, L'viv</b> <b>"Family Medicine Patient Satisfaction Survey"</b>
<b>14.30-15.00</b>	<b><i>D i s c u s s i o n</i></b>
<b>15.00-15.30</b>	<b>Dr. V. Borsch, Chief doctor of Kodyma Central Rayon Hospital</b> <b>Restructuring Rural Hospital Delivery Services Considering Severe Resource Constraints and Social Concerns"</b>
<b>15.30-15.45</b>	<b><i>D i s c u s s i o n</i></b>

15.45-16.00	<i>Coffee-Break</i>
16.00-16.30	<b>Dr. V.Pariy</b> ( <i>Zhytomyr Oblast Health Administrator Deputy</i> ) <b>and</b> <b>Dr. M.Borshchivsky</b> ( <i>Chief doctor of Zhytomyr Oblast Clinical Hospital</i> ) <b>“Perspectives and Methods for Reorganizing Health Care Delivery: Experiences in Reforming for Improved Efficiency and Effectiveness”</b>
16.30-17.00	<i>D i s c u s s i o n</i>
18.30-19.30	<i>Reception, Restaurant, Hotel Rassvet</i> <i>December 12, 1996</i>

9.00-9.30	<b>Dr. Marty Makinen</b> ( <i>Director, ZRP Program</i> ) <b>Health Care Reform: The Role of Health Economics</b>
9.30-10.00	<i>D i s c u s s i o n</i>
10.00-10.30	<b>Dr. A.Mostipan</b> ( <i>Chief doctor, Family Medicine Polyclinic, Dnieprodzerzhinsk</i> ) <b>and</b> <b>Dr. V. Anisimov</b> ( <i>Deputy Head, Dniepropetrovsk Oblast Health Administration</i> ) <b>“The Family Medicine Polyclinic in Dnieprodzerzhinsk: Background and Recommendations for the Future”</b>
10.30-11.00	<i>D i s c u s s i o n</i>
11.00-11.15	<i>Coffee Break</i>
11.15-11.45	<b>Prof. Valerie Lekhan</b> ( <i>Head, Dept. of Social Hygiene, Health Management and Organization, Dniepropetrovsk State Medical Academy</i> ) <b>Topic: TBD</b>
11.45-12.00	<i>D i s c u s s i o n</i>
12.00-12.30	<b>Dr. Tatayana Olexiouk</b> ( <i>Department of Licensing and Accreditation, Ministry of Health</i> ) <b>Dr. V.Omelchenko</b> ( <i>Medical Consultant, ZRP</i> ) <b>“Hospital Licensing and Accreditation in Ukraine: A Fundamental Step to Reform”</b>
12.30-12.45	<i>D i s c u s s i o n</i>
12.45-14.00	<i>Lunch</i> <i>Hotel Rassvet</i>
14.00-14.30	<b>Dr.A. Litvak</b> ( <i>Deputy, Odessa Health Care Administration</i> ) <b>“Attitudes of Management Towards Health Care Reform: A Survey”</b>
14.30-15.00	<i>D i s c u s s i o n</i>
15.00-15.15	<b>Marty Makinen</b> ( <i>Director ZRP/Ukraine</i> ) <b>Closing Remarks.</b>

**ANNEX 4**     *Data on invitation of participants to the L'viv conference*

oblast	Surname First name Patronymic of oblast health administration head	Deputy secretary	telephone	fax
Ternopil oblast	Kniazevitch Vasil Mikhailovitch	Ganna Svitlana Mikolaivna	03522 - 2-10-7 2-11-12	2-25-83
Ivano-Frankivsk oblast	Pertyna Miron Ivanovitch	Vasyl Mikhailovitch	03422 2-50-14	2-47-01
Zakarpattia	Vainachiy Vasil Mikhailovitch	Kozuba Sergiy Petrovitch	05522- 3-53-16 3-20-39	3-71- 06
Volynsk oblast	Ivaniuk Volodimir Antonovitch		0322 4-35-59	3- 43- 24
Chernovtsi oblast	Grushko Olexandr Ivanovitch	Ivan Federovitch	03722 - 5 -32- 58\ 5-05-23	55-15-07
Khmelnitsk oblast	Pinchuk Anatoliy Konstantinovitch		03822- 6-52-03	6-61-65
Zhitomir oblast	Paramonov Zinoviy Mikhailovitch	Pariy Valentin Dmitrovitch	0412 37-24-80 34-61-00	22-88-68 (22-87-27)
Rivne oblast	Shcherbatiy Anatoliy Yosipovitch	Nina Pavlivna	03622 2-20-89	6-95-92
city of Kiev	Zagorodniy Volodimir Vasiliovitch		(044)216-96-92	220-57-85
Vinnitsa	Pryhodskiy Olexandr Olexandrovitch	Mironiuk Volodimir Olexandrovitch	0432 - 32-19-97	

*Data on invitation of participants to the Odessa conference*

oblast	Surname First name Patronymic of oblast health administration head	Deputy secretary	telephone	fax
Kirovograd oblast	Kisiliov Yuriy Petrovitch	316022, Kirovograd, Dzerzhinskogo,74	0522-24-04- 71	55-51-60
Nikolayev oblast	Stadnitchenko Anatoliy Vasiliyevitch	333005 Simferopol, Kirov,13	0512-35-20- 42	35-11-17
Kherson oblast	Mitkovskiy Vladimir Grigoriyevitch	310084, Kharkov, Svoboda Sq.,1	05522-2-30- 51	4-83-72

Sumi oblast	Petrinenko Viatcheslav Yuriyevitch	244021, Sumi, Kirov,138	0542-27-71-10	27-72-11
Crimea (minister)	Pedayev andrey Vladimirovitch	316022, Kirovograd, Gertsen,31	0652-29-23-55	29-26-13: 27-04-17
Sevastopol (city)	Tokariov Anatoliy Grigorievitch		0692-52-23-67	45-61-91
Odessa	Korvetskiy Alexandr Dmitrievitch			

***Data on invitation of participants to the Dniepropetrovsk conference***

Chernigov oblast	Zoob Vasiliy Sergeyevitch deputy head		04622-4-01-82 4-11-17; 7-98-34	4-42-88
Donetsk oblast	Orda Alexandr Nikolayevitch	Natalia Yuriyevna	0622-90-75-64 93-17-65	90-74-87
×âðêàñêâÿ	Ðóáëíâñüêéé Áíàðîêéé Èââíîâè÷	Ìàðèÿ Äìèððèââíà	0472-47-93-39	45-34-58
Poltava oblast	Kasiyanenko Anatoliy Sergeyevitch 1) Pilipenko Alexey Stepanovitch <i>Valentina Stepanovna</i>	Ludmila Sergeyevna	05322-7-33-66 7-34-59 2-68-30	2-68-30
Zaporizhia oblast	Balashov German Victorovitch	Lidiya Stepanovna	0612-34-83-53	34-95-11
Lugansk oblast	Troshchenko genadiy Vladimirovitch	Liuba	0642-52-73-29	52-55-47
Kiev oblast	Avramenko Alexandr Ivanovitch 2) <i>Tretiakova Tamara Nikolayevna</i>		044-219-10-21 244-55-91	244-57-57
Kharkov oblast	Yavorskiy Vladimir Stepanovitch 2) <i>Patoka Liudmila Nikolayevna</i>		0572-43-14-61  47-11-08	43-25-67

## ANNEX 5 LIST OF PUBLISHED MATERIALS DISSEMINATED

Name of the documents	CONFERENCE	number
	<i>L'viv conference</i>	
Vital Signs		80
Updates		100
	<i>Odessa conference</i>	
Updates		100
<u>Technical reports:</u>		
TR-9 (Ukrainian)	Improving Efficiency, Quality & Access under Global Budgeting in City Hospital One, L'viv, Ukraine	100
TR-10 (Ukrainian)	An Assessment of Plans to Implement per Capita Financing in the Health System of L'viv Oblast (Draft)	100
TR-13 (Ukrainian)	L'viv Intensive Demonstration Site: A Tool Kit for Implementing User Fees and Decentralized Management Accounting Systems in City Hospital #1	110
TR-15 (Ukrainian)	Internal Control and Cash Management Manual and Questionnaires	90
TR-17 (Russian)	Self-Financing and Cost Recovery in Odessa, Ukraine	110
TR-21 (Russian)	Implementing Management Accounting and Control Reforms in the NIS	120
TR-22 (Ukrainian)	The Status of Private Medicine and the Possible Direction for its Development in the Health Care System	50
TR-24	Estimates of Private, Out-of-Pocket Spending on Physician Services in L'viv Oblast, Ukraine	5
<u>ZRP Briefs:</u>		
ZB5	NIS West Monthly Update (Oct, Nov, Dec/Jan, Feb, Mar, Apr, May, June)	100
ZB7		100
<u>ZRP Products:</u>		
ZRP Pr.II.A	Successful Integration of Medical Insurance, Private Practice, and Family Medicine in Dneprodzerzhinsk, Ukraine	100
ZRP Pr.I.C	Guidelines for Allocation Oblast Health Budget Among Rayons and Cities	100
	<i>Dniepropetrovsk conference</i>	
<u>Technical reports:</u>		
TR-9	Improving Efficiency, Quality & Access under Global Budgeting in City Hospital One, L'viv, Ukraine	98
TR-10	An Assessment of Plans to Implement per Capita Financing in the Health System of L'viv Oblast (Draft)	50
TR-13	L'viv Intensive Demonstration Site: A Tool Kit for Implementing User Fees and Decentralized Management Accounting Systems in City Hospital #1	90
TR-15	Internal Control and Cash Management Manual and Questionnaires	120

TR-16	Institutional Improved Cost Management and Internal Control Systems and Reviving User Fees at Polyclinic #2 in L'viv, Ukraine	120
TR-17	Self-Financing and Cost Recovery in Odessa, Ukraine	120
TR-21	Implementing Management Accounting and Control Reforms in the NIS	120
TR-24	Estimates of Private, Out-of-Pocket Spending on Physician Services in L'viv Oblast, Ukraine	120
TR-25	Dnipropetrovsk Health Information Systems: Technical Assessment and Policy Recommendations	120
<u>Technical notes:</u>		
TN-17		120
<u>ZRP Briefs:</u>		
ZB5	NIS West Monthly Update (Oct, Nov, Dec/Jan, Feb, Mar, Apr, May, June)	170
ZB7		120
<u>ZRP Products:</u>		
ZRP Pr.II.A	Successful Integration of Medical Insurance, Private Practice, and Family Medicine in Dneprodzerzhinsk, Ukraine	118
ZRP Pr.I.C	Guidelines for Allocation Oblast Health Budget Among Rayons and Cities	107

## ANNEX 6 RESOLUTION

### THE CONCLUDING DOCUMENT OF THE CONFERENCE "ROLL-OUT OF HEALTH CARE REFORM EXPERIENCE IN UKRAINE"

Representatives from all oblasts and Republic of the Crimea attended the three conferences (head and deputy heads of the city health administrations, chief doctors from oblast, city, rayon hospitals - more than 300 attendees).

Conference participants think that the health care situation is critical. The only way to ward off the eventual collapse of the branch is a speedy system reform.

During the work of the three conferences (L'viv, Odessa, Dniepropetrovsk) a critical analysis of the gathered health care reform experience in various regions was made.

The results attest to the fact that at present a rather high level of readiness has been reached to launch and implement a wide-scale health care reform throughout the country. In particular, health care restructuring models have been created (Zhitomir), family medicine polyclinics have been established (L'viv, Dneprodzerzhinsk), experience in primary care reform has been gained (Dniepropetrovsk), paid service organization (Odessa), etc.

At the same time conference participants state that notwithstanding some intensification of the MOH work during the last months, the pace of the reform across the republic is extremely slow.

The discussion of the mooted issues showed that health care reform was inhibited because of the lacking normative and legal basis, underdeveloped economic mechanisms in the branch as well as unreadiness of a number heads to operate in the present socio-economic environment.

- To bring about sweeping changes in health care sector, it is necessary to adopt imperatively normative, legal and legislative acts, above all, laws on health care financing, health insurance, primary medical care, retraining for health care managers, promotion of up-to-date organizational and managerial models of care delivery, financing, medical care quality evaluation on the oblast, rayon and the separate HCF level.
- It is also necessary to expedite working models of up-to-date medical care on the oblast, rayon and facility levels in order to develop new approaches to management, financing, quality assessment which, in the long run, will improve key health care indicators.

The results of the Ukrainian-American cooperation in health care demonstrated fruitful joint work although the technical assistance volume in health care economy sphere is insufficient.

Conference participants extend their gratitude to the leadership and workers of the *ZdravReform* Program for highly qualified assistance they rendered to promote practical health care and consider further collaboration with the ZRP most advisable on all levels of technical assistance in health care economy, law, licensing and accreditation, primary care restructuring, creation of a universal informational zone by means of holding regional and international conferences, roundtables and technical workshops on the most topical reform issues.

## ANNEX 7 EVALUATION QUESTIONNAIRES

*L'viv, October 28-29, 1996*

1. What did you like most as regards topics of the conference?
2. What can be improved when we organize a similar conference next time?
3. What information which will help you in your work, did you hear during the conference? How can you benefit by it?
4. What is the most fresh idea you heard, do you think?
5. Which of the mentioned reforms are you implementing yourself?
6. Do you implement any reforms which were not mentioned at the conference?

*Odessa, November 21-22 1996*

1. On a 5-point scale, give your opinion of the significance of holding this health care experience roll-out conference:

min 1, 2, 3, 4, 5 max

2. Evaluate the topical importance and applicability in your work of information contained in the following speeches.

1	Jafarova J. and Bytchenko S.	1	2	3	4	5
2	Grubiy S.	1	2	3	4	5
3	Pariy V., Borshchivskiy M.	1	2	3	4	5
4	Lytvak A.	1	2	3	4	5
5	Borshch V.	1	2	3	4	5
6	Omelchenko V., Olexiuk T.	1	2	3	4	5
7	Sknarina O.	1	2	3	4	5
8	Petrova G.	1	2	3	4	5
9	Mostipan A.	1	2	3	4	5

3. Do you consider important the reform directions listed below, the experience of which is presented at the conference?:

- |                                                             |     |     |               |
|-------------------------------------------------------------|-----|-----|---------------|
| 1. Hospital bed capacity restructuring                      | yes | no  | don't know    |
| 2. Family medicine implementation (a) ambulatory facilities |     | yes | no don't know |
| (b) polyclinic departments                                  | yes | no  | don't know    |
| (c) polyclinic                                              | yes | no  | don't know    |
| 3. Formation of mobile teams                                | yes | no  | don't know    |
| 4. Economic reforms: (a) differential remuneration          |     | yes | no don't know |
| (b) decentralization of the budget                          | yes | no  | don't know    |
| (c) cost management; paid medical services                  | yes | no  | don't know    |
| 5. Standardization of the care delivery quality.            | yes | no  | don't know    |

4. Indicate which of the presented reform directions is already being realized in your region:

1. Hospital bed capacity restructuring	yes	no	don't know	
2. Family medicine implementation (a) ambulatory facilities		yes	no	don't know
(b) polyclinic departments	yes	no	don't know	
(c) polyclinic		yes	no	don't know
3. Formation of mobile teams	yes	no	don't know	
4. Economic reforms: (a) differential remuneration		yes	no	don't know
(b) decentralization of the budget	yes	no	don't know	
(c) cost management; paid medical services	yes	no	don't know	
5. Standardization of the care delivery quality	yes	no	don't know	

5. Indicate other reform directions carried out in your region.

6. Do you think it necessary to hold such conferences in the future?

yes, no, don't know.

7. On a 5-point scale, evaluate the level of organization of the conference.

min 1, 2, 3, 4, 5 max

8. Indicate what should be considered during preparation of analogous conferences in the future:

(a) as regards *topics*;

(b) as regards *organizational activity*.