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## HEALTH CARE ANTI-CRISIS MANAGEMENT ISSUES IN THE REALITY OF THE COVID-19 PANDEMIC

**Abstract.** *This paper summarizes the arguments and counterarguments within the scientific discussion on the issue health care anti-crisis management in the reality of the Covid-19 pandemic. The health care system is an important component in ensuring the national security of the state. The main purpose of the research is to assess the possibilities and generalization of data on anti-crisis activities of the organization that ensures the livelihood of the population in a global crisis caused by a complex of problems associated with the global pandemic coronavirus infection. The object of this study is the health care point of the Interregional Rapid Response Center of the State Emergency Service of Ukraine. The subject of the paper can be considered deployment and implementation of anti-crisis activities within the health care point. Systematization literary sources and approaches for solving the problem health care points indicates that it is necessary to develop anti-crisis regulation program to save them. Methodological tools of the research methods were system-structural method, induction method, analysis of statistic figures and facts, SWOT-analysis. The authors have analyzed the organizational structure of health points of the Interregional Rapid Response Center of the State Emergency Service of Ukraine and defined their main tasks. It is clear that the provision of anti-crisis activities on a regular basis allows to purposefully form an effective subsystem for managing a health care facility in crisis situations. The system of anti-crisis management measures is proposed, and the effect of their implementation is determined by authors. In particular, the anti-crisis plan for the health care point of the center suggests working with humanitarian organizations and private and legal sponsors, which can provide additional support to health care points in building and improving the material and technical base. The set of measures for anti-crisis activities should become systemic, which will help in the long run to the health care point of the Interregional Rapid Response Center of the State Emergency Service of Ukraine. The results of the study can be useful for researchers who have been conducting study on this topic, and students majoring in «Management and Administration in Health Care».*

**Keywords:** anti-crisis management, health care point, Interregional Rapid Response Center, State Emergency Service of Ukraine, SWOT-analysis of health care point.

**Introduction.** The problem of studying the possibilities to functioning in the global economic crisis is currently one of the most pressing problems for all economic entities. During 2020, the world community has been witnessing the global crisis caused by the coronavirus infection COVID-19 and its economic, social, and political consequences. Developing countries have become the most vulnerable to these crises under current conditions in the world. On this basis, organizations, especially those that provide vital

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activity and health care, have to adapt to the conditions created by external environmental factors. Internal managed factors should determine the possibility of anti-crisis activities and adaptation of its structure and activities. The provision of anti-crisis activities on a regular basis allows to purposefully form an effective subsystem of enterprise management in crisis situations. Awareness of the need to form, as well as the role, place and options for building a crisis management system in the enterprise or institution as a special and specific subsystem - an urgent problem that requires further consideration.

The object of this study is the health care point (HCP) of the Interregional Rapid Response Center (IRRC) of the State Emergency Service (SES) of Ukraine. The subject of the paper can be considered deployment and implementation of anti-crisis activities within the HCP.

The purpose of this article is to assess the possibilities and generalization of data on anti-crisis activities of the organization that ensures the livelihood of the population in a global crisis caused by a complex of problems associated with the global pandemic coronavirus infection caused by the virus Severe Acute Respiratory Syndrome Coronavirus 2.

**Literature Review.** Issues of anti-crisis management and establishing the role of public administration in shaping the concept of sustainable development of health care are studied in such papers (Markina and Al, 2016; UNDP Project, 2019), reforming medicine in Ukraine and abroad analyzed in the work (Yamnenko, 2018). In particular, Markina and Al (2016) analyzed the preconditions for the implementation of the idea of sustainable development in the field of health care in crisis situations and explored approaches to describing the processes of medical practice as a basis for developing a strategy at the national level. The role of the state in the formation and implementation of anti-crisis regulation strategy, as well as to substantiate the main methodological provisions of its formation was revealed by (Khalatur et al., 2020) on the example of the effective crisis management system of the USA, China, Japan, the EU, and Ukraine.

The health care system is an important component in ensuring the national security of the state. Thus, the mechanism of international economic security management and assessment of the directions for the state's innovative development have been presented in (Shkola et al., 2020).

The reliable health care system ensures the quality of the country's intellectual capital. One of the important factors influencing the level of intellectual capital is the state of health of the population, especially in the reality of the Covid-19 pandemic (Shcherbachenko et al, 2020). New approaches to the management of health care facilities in market conditions are proposed in the works (Semchuk et al., 2020; Dmitruk, 2018). Directions of state regulation of innovative development of health care in Ukraine are identified in the work (Yurynets and Petrukh, 2018). A priority system of stabilization policy and anti-crisis measures under the new global financial and economic crisis caused by the spread of the coronavirus epidemic were suggested by (Danylyshyn and Bohdan, 2020). Actual tools of health emergency and disaster risk management were described in book (Chan and Wong, 2020; Woynarowska-Soldan et al., 2018).

However, despite significant scientific advances, the problem of anti-crisis management in Ukrainian health care facilities in the pandemic remains unresolved and needs deeper consideration.

**Methodology and research methods.** The system-structural method made it possible to investigate legal issues that regulate HCPs within the IRRC structure. The research methodology is grounded on the inductive method as a way of getting conclusions based on statistic figures and facts. SWOT-analysis have been used to analyse the state and prospects of HCPs of IRRC of SES of Ukraine that helps to develop anti-crisis management program.

The empirical results allowed us to assume the following research hypothesis: modern theoretical principles definition and development of proposals for anti-crisis management of the HCP of the IRRC of the SES of Ukraine are the main drivers for achieving stable functioning in the field of health care.

**Results.** The HCP is a medical and preventive health care institution within the structure of the IRRC of the SES of Ukraine, which was established to ensure the organization and provision of health care in several major medical specialties to patients and preventive measures and reducing morbidity, disability

and mortality, early detection of diseases. The HCP provides the help of such specialists as physician, surgeon, dentist, otolaryngologist, ophthalmologist, neurologist. It reports to the head of the IRRC, and reports on the organization of medical activities to the head of the HCP of the center and is the governing body of the IRRC on medical issues. In its work, the HCP is guided by the Constitution and laws of Ukraine, decrees of the President of Ukraine, resolutions of the Verkhovna Rada of Ukraine adopted in accordance with the Constitution and laws of Ukraine, acts of the Cabinet of Ministers of Ukraine, other regulations concerning health care, IRRC Statute and Regulation (Regulations on the State Service of Ukraine for Emergencies, 2015; Order on approval of the Procedure for the organization of medical care in the system of the State Service of Ukraine for Emergencies, 2014).

The HCP is staffed by doctors with relevant specialties, paramedics and drivers. It has the status of a medical unit of the medical service of the IRRC with its name, round seal and corner stamp for registration of medical documents. The issues of the HCP are defined according to the main tasks of IRRS, a state of health, physical development, level and character of morbidity of persons of ordinary and chief structure, conditions of their placement (life), including during performance of tasks on purpose, sanitary and epidemiological situation, climate-geographical features of the territory (district) of emergency rescue operations and the scale of medical and sanitary consequences of emergencies. The HCP is designed to provide emergency medical care, outpatient care to the attached contingent at the point of permanent deployment and personnel in the performance of assigned tasks, sanitary and anti-epidemic work, medical expert work, medical supplies, organization of medical and psychological rehabilitation and sanitation resort treatment, registration and maintenance of medical accounting and reporting documentation.

The main functions of the HCP are:

- carrying out systematic work to preserve the health of rescuers, IRRC staff and pensioners of the SES;
- provision of emergency care and treatment in the conditions of the HCP, hospitalization of patients to medical institutions by sanitary transport of the HCP, carrying out dispensary supervision, planned and antirelapse treatment to persons with chronic diseases;
- organization and conduct of preliminary and periodic medical examinations of the IRRC personnel and employees;
- monitoring the health of drivers and persons on duty; monitoring the health of persons treated outside the IRRC;
- organization and conduct of medical examination of candidates for service and persons dismissed from service, persons entering higher educational institutions of the SES of Ukraine;
- selection and referral of personnel and family members for medical and psychological rehabilitation and sanatorium treatment;
- ensuring the continuity of the principles of treatment and prevention work with medical institutions of other ministries and departments;
- providing units and persons from among the attached contingent with medicines and medicines in accordance with the requirements of the guiding documents;
- organization and conduct of medical training in the system of in-service training with the IRRC staff and students on the basis of structural divisions of the IRRC;
- implementation of statistical accounting of morbidity and injuries of personnel and employees of the IRRC;
- participation in conducting command and staff, tactical and special exercises on operational medical response to emergencies;
- medical support of sports competitions and other mass events held on the basis of the IRRC;
- conducting sanitary and educational work and promoting a healthy lifestyle among the staff and staff of the IRRC.

The provision of material and technical base takes place within the framework of opportunities provided by the IRRC and relevant revenues from the SES of Ukraine, as well as humanitarian organizations and private sponsors. The material and technical support of the HCP within the activities of physicians, neurologists, ophthalmologists and otolaryngologists is within the minimum limits of the approximate table of material and technical equipment of health care facilities and individuals - entrepreneurs who provide primary care. In the direction of the dental profile, the equipment is outdated, so that it has developed a material resource and does not meet the requirements of today. Provision of dental care takes place on equipment that is on a lease basis by a full-time dentist. The surgical profile is provided only within the framework of advisory assistance due to the lack of opportunities, conditions and material and technical base for the provision of assistance of the relevant profile.

Funding for HCP is provided by the IRRC under protected and unprotected funding items from the SES of Ukraine within the annual budget of the SES and the Ministry of Internal Affairs of Ukraine. Funding for medicines and drugs is provided by a protected article by the SES through the funding of the IRRC in the relevant profile, but is problematic due to the inability to conduct adequate procurement as a result of working with companies not as a licensed medical entity. Funding is provided from the ICRC funding fund within the framework of salaries, and the corresponding allowances approved by orders of the SES, the Ministry of Internal Affairs, the Ministry of Finance and the Cabinet of Ministers of Ukraine.

The health care system in Ukraine is at the stage of permanent reform, and although we can now see in practice the positive aspects of reform, such as primary care reform, but there are significant gaps in both primary and other reform. parts of the health care system such as secondary care, ambulance reform and interaction with medical units of other ministries and agencies. For example, the system of the SES of Ukraine in recent years also entered the stage of reform, including the reform of the medical system of the service, which at the beginning of the epidemic was considered almost rudimentary and tried to downsize to the level of individual paramedics. Moreover, in 2020 both the world and Ukraine faced a pandemic of coronavirus infection SARS-Cov 2, which in turn affected both the Ministry of Health and the SES, causing partial paralysis in the work of both structures, especially on the issue of coordinated medical treatment, work, financing of standardization and licensing. Lack of coordination and agreement, and sometimes lack of understanding of the principles and needs of primary care in the SES system leads to the impossibility of further adequate work and development of health centers and health facilities of the SES, not the possibility of funding from the National health services and reduction of funding from the SES of Ukraine. The results of SWOT-analysys of HCPs of IRRC of SES of Ukraine are presented in Table 1.

**Table 1. SWOT-analysys of HCPs of IRRC of SES of Ukraine**

Strengths	Opportunities
<ul style="list-style-type: none"> <li>- Highly skilled workers.</li> <li>- Security compared to health facilities under the Ministry of Health.</li> <li>- Lack of competition within the service structure.</li> <li>- Systematic receipt of funding.</li> <li>- Ability to work (provide medical care for the center) without a license from the National Health Service (NHS).</li> <li>- Stable material support of the personnel.</li> <li>- Availability of a minimum material and technical base and appropriate areas to provide medical care by a physician, neurologist, otolaryngologist and ophthalmologist.</li> </ul>	<ul style="list-style-type: none"> <li>- The possibility of transition from medical care to the provision of medical services.</li> <li>- Possibility to expand the profile of medical services.</li> <li>- Opportunity to increase funding by receiving funds from the NHS, after licensing and accreditation of HCP.</li> <li>- Increasing the number of people who can be provided with medical services.</li> <li>- Improving the material and technical base of HCP by increasing funding from the SES and NHS in the case of obtaining a license and further accreditation.</li> <li>- Obtaining new areas and facilities in the framework of medical activities of the HCP, which better meet the requirements of sanitary requirements and SES, in the case of assistance from the IRRC and SES.</li> </ul>

Continued Table 1

Weaknesses	Threats
<ul style="list-style-type: none"> <li>- Lack of a license from the NHS.</li> <li>- Quality of service provision due to the lack of sufficient diagnostic equipment.</li> <li>- Problems with financing the provision of medical equipment and its maintenance.</li> <li>- Problems with procurement of medicines and equipment due to lack of licensing.</li> <li>- Insufficiency and obsolescence of equipment in the framework of the activities of doctors, both therapeutic and surgical with a dental profile.</li> <li>- Use of property by some specialists on the terms of free lease.</li> <li>- Lack of accreditation (as the next step after licensing) for paid medical services.</li> <li>- Availability of only minimum areas for medical care in the required profiles in accordance with the relevant sanitary and hygienic standards and construction SES.</li> <li>- Lack of the required level of education of junior medical staff (to work with some equipment).</li> <li>- Insufficient number of junior medical staff.</li> <li>- Regulatory framework (regulation by both the Ministry of Health and the SES).</li> <li>- It is not possible to carry out sufficient diagnostic activities due to the lack of appropriate equipment and specialists.</li> </ul>	<ul style="list-style-type: none"> <li>- Reduction of the center and medical staff within the HCP due to the incapacity of key units.</li> <li>- Termination of the center in case of incapacity or disruption of the main departments of the center.</li> <li>- Violation of funding of the center by the SES, as a result of redistribution of funding within the service</li> <li>- Reducing funding from the SES does not result in obtaining a license or other adverse conditions.</li> <li>- Failure to obtain further accreditation of HCP, which will make it impossible to provide paid services.</li> </ul>

Sources: developed by the authors

In general, the key issues in the activities of the HCP of the SES are:

- inconsistency of activities between the Ministry of Health and the SES of Ukraine;
- lack of modern medical technologies, insufficient ownership of them;
- lack of financial and, above all, budgetary resources to ensure effective operation;
- the difficulty of obtaining licenses from the NHS;
- the difficulty of obtaining further accreditation of the institution;
- imperfection of normative-legal acts, which regulate the work of health care points both within the SES and within the Ministry of Health;

It should also be noted that the effects of these problems are greatly exacerbated by the presence of a pandemic in Ukraine.

At the present stage of development, the health care center is in a strong grip between two government agencies - the State Emergency Service of Ukraine and the Ministry of Health of Ukraine. The lack of understanding between them leads to a decrease in funding from the SES and the lack of funding mechanisms from the Ministry of Health or the National Health Service, except for the licensing of the HCP as a health care institution with subsequent accreditation for paid services. Therefore, the best way to improve the health of the IRRC is to make every effort to obtain a license. But on the way to this, there are low capacities of the SES structure in centralized consulting on obtaining a license, and the actions required for this. That is, the first step to licensing is to collect as much information as possible at the HCP level about obtaining a license for medical activities as a health care facility.

When obtaining a license, the next step in anti-crisis activities in the HCP should be to consider the possibility of establishing a staff medical expert commission, which will serve training units within the IRRC of the SES (newly arrived cynologists and divers and their instructors). In turn, although it is not a paid

service, it significantly saves both time and IRRC resources as a whole and in the context of the COVID-19 pandemic provides a holistic continuous training regime for young professionals in training units.

To form the structure of the Medical Expert Commission (MEC), it is necessary to expand the staff structure of the HCP with the approval of the appropriate structure of specialists in the SES. At the same time, it is necessary to increase the number of nurses to comply with the staffing standards approved by the Ministry of Health.

The expansion of health care facilities also leads to the need to analyze the infrastructure of the HCP at the current stage of overcoming the crisis, to identify opportunities to expand the facilities involved at the expense of other IRRC facilities, and their appropriate training at the IRRC.

Continuing to monitor the problems in HCP, including due to the epidemic raging in the country, we must not forget about the level of training, both doctors and paramedics, and therefore at the first opportunity to make a plan for continuous professional development of staff and monitor its implementation, which will allow to constantly influence the quality of medical care provided to personnel. While improving the quality of personnel assistance, the positive effect of staff recovery will be felt at the level of the entire interregional rapid response center, as well as protect the staff of the center, including from the negative effects of the pandemic.

Also, a separate item of the anti-crisis plan for the health point of the center is the work with humanitarian organizations and private and legal sponsors, which can provide additional support to the HCP in building and improving the material and technical base. Such work needs to be developed both among organizations in Ukraine and abroad. The first stage of such work is monitoring of network information and creation of the list of the organizations which could be interested in the help of health point of IRRS of SES as the representative of structure providing vital activity of the population in any conditions (pandemics, emergencies of any character, etc.) and is mandatory and not voluntary as organizations such as the Red Cross, the Salvation Army and others.

The effect of the implementation of anti-crisis measures:

1. Upon receipt of licensing of medical activities from the Ministry of Health will expand the range of opportunities in the activity, namely:
  - transition from medical care to the provision of services (initially only to employees and employees within the SES);
  - expanding opportunities to provide medicines with HCP, as part of the ability to work on procurement with suppliers, rather than pharmacy chains;
  - creation of a full-time medical expert commission;
  - the possibility of further accreditation for the provision of paid services.
2. Creating a structure of staff MEC will have the following effects:
  - saving money and time of employees (when conducting MEC on the spot does not require moving to the garrison - regional MEC);
  - Ensuring a continuous and integrated educational process for the educational units of the center;
  - Reducing the costs of ICRC for the training of its own specialists in its own training centers and reducing the cost of training in these centers for specialists from other structures and centers of the SES and the Ministry of Internal Affairs in general.
3. The prospect of obtaining accreditation for the provision of medical services, which will increase the capacity of both the health center and the center as a whole.
4. Improving the conditions for providing and providing medical care in HCP.
5. Improving the material and technical base.
6. Improving the quality of assistance to the staff of the center and beyond and improving the level of combat capability of the IRRC SES as a whole.

**Conclusions.** In current realities and the state of affairs at the HCP of the IRRC of the SES of Ukraine, against the background of the escalation of the pandemic in the country and the complex of accumulated problems over the decades of existence there is a need for anti-crisis measures. Based on the analysis of the issues of anti-crisis activity, it becomes clear the complexity and versatility of this process. During the activities to overcome the crisis, the anti-crisis strategy in this particular example will be gradually improved and changed to achieve this goal. In the case of full implementation of anti-crisis measures, namely the priority of obtaining a license and further necessary steps that follow, the crisis in the HCP and the possibility of its disbandment will be overcome and may allow its further development.

Nevertheless, it is necessary to constantly monitor the situation to prevent the accumulation of new problems that could provoke a new round of crisis in the HCP. Therefore, the set of measures for anti-crisis activities should become systemic, which will help in the long run the HCP of the IRRC of the SES of Ukraine.

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**Завдання антикризового управління у сфері охорони здоров'я в умовах пандемії COVID-19**

У цій роботі узагальнено аргументи та контраргументи в рамках наукової дискусії щодо проблеми антикризового управління охороною здоров'я в реальності пандемії Covid-19. Система охорони здоров'я є важливою складовою в забезпеченні національної безпеки держави. Основною метою дослідження є оцінка можливостей та узагальнення даних про антикризову діяльність організації, що забезпечує життєдіяльність населення в умовах світової кризи, спричиненої комплексом проблем, пов'язаних із глобальною пандемічною коронавірусною інфекцією. Об'єктом цього дослідження є пункт охорони здоров'я Міжрегіонального центру швидкого реагування Державної служби з надзвичайних ситуацій України. Предметом статті є розгортання та реалізація антикризових заходів в межах пункту охорони здоров'я. Систематизація літературних джерел та підходів до вирішення проблеми пунктів охорони здоров'я свідчить про необхідність детального вивчення функціонування пунктів охорони здоров'я та розробки антикризової програми регулювання діяльності пунктів охорони здоров'я для їх збереження. Методологічними інструментами методів дослідження були системно-структурний метод, метод індукції, аналіз статистичних даних і фактів. Автори проаналізували організаційну структуру пунктів охорони здоров'я Міжрегіонального центру швидкого реагування Державної служби з надзвичайних ситуацій України, їх основні завдання. Визначено, що забезпечення антикризової діяльності на постійній основі дає змогу цілеспрямовано формувати ефективну підсистему управління закладом охорони здоров'я в кризових ситуаціях. Запропоновано систему заходів антикризового менеджменту та визначено ефект від їх впровадження. Зокрема, запропоновано в антикризового плані для пункту охорони здоров'я центру робота з гуманітарними організаціями та приватними та юридичними спонсорами, що може дати додаткову підтримку пунктам охорони здоров'я в нарощуванні і поліпшенні матеріально-технічної бази. Комплекс заходів з антикризової діяльності повинен набути системного характеру, що допоможе в довгостроковій перспективі роботі пункту охорони здоров'я Міжрегіонального центру швидкого реагування ДСНС України. Результати дослідження можуть бути корисними для науковців, що проводять дослідження з даної тематики, та студентів спеціальності «Менеджмент та адміністрування в охороні здоров'я».

Ключові слова: антикризове управління, Державна служба України з надзвичайних ситуацій, Міжрегіональний центр швидкого реагування, пункт охорони здоров'я, SWOT-аналіз пункту охорони здоров'я.

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