REORGANISATION OF PUBLIC HEALTH SERVICES IN SLOVENIA

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PUBLIC HEALTH ORGANISATIONS IN SLOVENIA BEFORE 2014

- **Long tradition**
  
  Central institute for hygiene was established in 1923  
  Regional preventive organisations were established shortly after that

- **After 2nd world war**
  
  Central Institution owned by national government  
  Regional Institutions owned by local government  
  Very weak or no influence of national Institute on working field and development of regional institutions
PUBLIC HEALTH ORGANISATIONS IN SLOVENIA BEFORE 2014

- 1992- First Health Act in Slovenia

Independent National and Regional Institutes of PH were founded by state

The field and mode of work as well the cooperation between them was weakly stated by the law

The orientation in providing services for fee remind predominant. Especially the regional institutes compete on the rather small market.
Due to the orientation into the market activities in order to get as big as possible share on the market, the development of public health functions was not the priority.

The cooperation between regional institutes of PH and National institute was not satisfactory with the only exception in the field of communicable disease and health statistics.
2004: The beginning of the reorganizational process of Public Health in Slovenia

- Several activities initiated by the Ministry of health involved the professionals and other stakeholders in public health in order to establish an effective organizational model.

2012: Intensive activities in reorganizational process

- Preparation of Public Health services development strategy
- Changes of Health Act
Year 2013

- National and nine regional Institutes of Public Health have been merged into
  
  National Institute of Public Health (NIJZ)

  National laboratory for Health, Environment and Food (NLZOH)

Both institutions started to operate on 1st of January 2014
ADDED VALUE OF NEW ORGANISATION

- All public health functions are covered by one organisation
- Unified conduction of preventive programmes in the whole country
  - defining of priorities according to the needs of the population
  - increasing the availability of prevention programs among all that are entitled to
  - more effective implementation of programs
- Development of new areas of work - economics in health care
- Implementation of all functions of public health according to the needs of the population in entire country
MAIN CHALLENGES

NEW ORGANISATION

- Big differences in the way of work between different locations
- Coordinating the work of employees in different locations
- Obtaining additional personal and financial resources to develop all public health functions
MAIN CHALLENGES

CHANGES IN THE FIELD OF WORK

- Establishing the process oriented work flow
- Definition of the field of work, methods of work and approach to the each individual tasks and indicators of outcome
- Need to strengthening the knowledge and skills of employees

People who were previously working independent are now working in team on programmes that are now different or at least differently processed as they were used to