

Policy of healthcare for the chronically ill in contemporary Poland (summary)

This dissertation is a study in which the author analyzes the actions of public authority and NFZ documents to paint a picture of public healthcare for the chronically ill in years 2009-2015. In this thesis the emphasis is put on the social and financial aspect of the chronically ill situation. The medical aspect is left for the sciences of the public health.

The scientific purpose of this work is:

1. to determine the quality and the relationship between measures and decisions of the political authorities in Poland and the reality of the health of citizens suffering from chronic diseases in the last decade;
2. to determine the place of the chronically ill in the thinking of the political authorities and paint the picture of their social sensitivity;
3. to determine the presence and the political role of the financial component, as a regulator of the healthcare policy for chronically ill.

The applicable purpose of this thesis is to develop and provide policy-makers with factual material indicating the importance of relationships and social aspects of financial solutions for constructing policy in the area of healthcare for the chronically ill. Both of those purposes co-create justification for scientific research having its roots in the theory of social policy and should be instrumental in deepening the knowledge of an important area that is exploring the mechanisms of political pragmatism.

There are 4 hypothesis in this dissertation:

1. introduction of the decree No. 105/2008/DSOZ signed by the President of the National Health Fund on November fifth 2008 has improved significantly the level of care for patients with chronic disease, which was noticeable in the researched entity;
2. the 2015 change in the provision of additional services as a result of the cessation of funding by the National Health Fund, significantly deteriorated health situation of chronically ill in the non-public institutions;
3. the state does not show proper interest in the fate of this group of patients;
4. healthcare policy in Poland is non-systematic and incompetent, it's marked by randomness and short-sightedness.

All of the hypothesis were verified positively. One of the major conclusions of the presented research is the notion that sudden deprivation of funding for additional specialized services

for chronically ill has placed considerable group of patients of the Gdańsk-South Private Health Care Unit, in a situation that is dramatic and unacceptable. Unexpected limitation in accessibility to treatment is the proof that Polish policy makers lack social sensitivity.