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IMPROVING THE PREPAREDNESS OF INDEPENDENT PUBLIC HEALTHCARE INSTITUTIONS FOR NATIONAL DEFENSE NEEDS IN THE AREA OF OPERATIONAL ORGANIZATION

Abstract

The preparation of independent public healthcare institutions for the efficient provision of medical assistance under conditions of external threats to national security and during wartime currently represents one of the most significant challenges faced by the healthcare system in Poland. The scale of the necessary efforts, such as the need for a sufficient number of trained medical personnel and the provision of essential infrastructure, services, procedures, equipment, and supplies, creates a foundation for developing substantive grounds for implementing legal, structural, and organizational changes. The main objective of these changes is to enhance the readiness and operational capacity of the structures responsible for delivering medical assistance in crisis situations. In the event of an external threat to national

security or during wartime, independent public healthcare institutions that provide outpatient medical services, such as clinics, outpatient departments, health centers, infirmaries, or ambulatory units with inpatient rooms, will primarily continue performing their statutory peacetime duties, namely the ongoing provision of healthcare services. The primary beneficiaries of these services will be the civilian population. To ensure continuity in the delivery of healthcare services, it is necessary to prepare and improve the structures involved in medical activities in the period preceding a potential threat. Therefore, based on the author's own scientific research, this article identifies directions for improving organizational solutions aimed at preparing independent public healthcare institutions for the performance of tasks under conditions of external threats to national security and during wartime.

Keywords

defense preparations, defense needs, healthcare entity, operational organization

Introduction

The primary objective of the defense preparations of the Republic of Poland is to create organizational conditions that ensure sovereignty, territorial integrity, independence, the survival of the nation, and the continuity of state structures during external threats to national security and in times of war. The main goal of preparing medical entities to operate under conditions of external threats to national security and during wartime is, in turn, to establish legal and organizational conditions for the provision of healthcare services, that is, undertaking actions aimed at preserving, saving, restoring, or improving health. This goal can be achieved through the proper organization, preparation, and continuous improvement of the structures responsible for carrying out medical activities in the period preceding a potential threat.

Given the current political and military situation in the immediate vicinity of the Republic of Poland, marked by an increased likelihood of global-scale confrontation and a high degree of unpredictability, it is justified to recognize the necessity of improving solutions related to the preparedness of medical entities, including independent public healthcare institutions, for the performance of tasks under conditions of external threats to national security and during wartime.

Methodology

In the literature, it is generally accepted that the objective of scientific research may be either cognitive or practical in nature. For the purposes of this article, a utilitarian goal has been adopted, defined as identifying directions for improving the

preparedness of independent public healthcare institutions for the performance of tasks under conditions of external threats to national security and during wartime. The scientific research focused on independent public healthcare institutions (hereinafter referred to as SPZOZ) for which the founding body is the Capital City of Warsaw, and which provide outpatient medical services within ambulatory care facilities.

The article presents research findings obtained primarily through the use of internal legal regulation analysis and the diagnostic survey method, including questionnaire and expert interview techniques. The recipients of the questionnaire technique survey were individuals managing independent public healthcare institutions. The interview technique, on the other hand, was applied to SPZOZ employees responsible for tasks related to national defense within these medical entities. The results obtained by means of these methods made it possible to identify directions for the improvement of these institutions in the area of organizational operations aimed at carrying out tasks under conditions of external threats to national security and during wartime.

Effectiveness of operation

Currently, the so-called organizations, including independent public healthcare institutions, are required to demonstrate a high level of operational efficiency, which means the ability to take advantage of emerging opportunities. Operational efficiency, therefore, refers to the capacity to adapt to change and to build relationships with external partners, rather than striving to maintain stability. The discipline that focuses on identifying ways to improve all forms of activity[1] is praxeology.

When analyzing efficiency, it is necessary to apply diverse and practical criteria and measures that allow for a comprehensive evaluation. However, "the choice of these criteria is always the responsibility of the decision-maker. What is important, though, is that the assessment of efficiency be based on a set of criteria which reflects the entirety of the institution's performance outcomes."[2]

In praxeology, two main types of efficiency are generally distinguished: universal efficiency and synthetic efficiency, with the fundamental forms of universal efficiency being effectiveness, benefit, and cost-efficiency. Effectiveness refers to the ability to choose appropriate goals; therefore, effective action consists of performing activities that lead to the achievement of intended objectives. In such action, it is not necessary to attain the main goal directly. Achieving intermediate goals that enable the realization of the main goal is sufficient.

1 T. Kotarbiński, *Traktat o dobrej robocie*, Wrocław 1982, p. 352.

2 M. Czerska, *Organizacja przedsiębiorstw*, part II: *Metodologia zmian organizacyjnych*, Gdańsk 1996, p. 19–20.

Effectiveness is closely related to operational efficiency[3], which is one of the key issues in the theory of organization and management. In the literature, efficiency is typically understood as cost-efficiency, productivity, profitability, effectiveness, performance, etc. a common feature of both efficiency and effectiveness is that they are outcome-oriented evaluations of actions. The difference lies in the fact that effectiveness is concerned with achieving the intended goal, whereas efficiency focuses more on obtaining positive results. If the outcome of a given action is the production of valuable results (even if those results were unintended), such action can still be considered efficient. Therefore, every effective action is also efficient, but not every efficient action has to be effective.[4]

Another principle of efficiency is benefit, which should be understood as the difference between the useful outcome and the cost of the action. At the same time, various types of relationships between effectiveness and benefit can be distinguished.[5] The concept of the benefit of an action is, in a sense, a complement to the concept of the effectiveness of an action, "and the evaluation of an action in terms of its benefit serves as a complement to the evaluation in terms of its effectiveness."[6]

The third and final form of efficient action is cost-efficiency, which is measured by the ratio of useful outcomes to costs. This can be interpreted in two ways: alternatively as productivity or thrift.

In addition to the forms of efficient action, "which are primarily used to assess planned and completed actions, and thus constitute the so-called praxeological system of evaluation, there are also practical directives for efficient action which serve as guidelines aimed at improving that action. These take the form of recommendations for maximizing efficiency or warnings to avoid inefficiency. There are many types of practical directives, which differ in their level of generality. They can be categorized in various ways depending on the classification criteria used. For example, based on their internal structure, directives can be divided into simple and complex. In turn, based on their linguistic form, we distinguish between positive directives (recommendations) and negative directives (warnings)"[7]. The most important directive for efficient action is the organization of the action.

Organizational Structure of SPZOZ

To increase the effectiveness of actions undertaken as part of defense preparations across all categories of healthcare entities, it is essential to adapt the organizational

3 Both in academic literature and in everyday language, various qualifiers of efficiency are used, including: decision efficiency, operational efficiency, business efficiency, economic efficiency, financial efficiency, company efficiency, management efficiency, investment efficiency, leadership efficiency, macroeconomic efficiency, managerial efficiency, selection method efficiency, motivation efficiency, operational performance, enterprise efficiency, investment project efficiency, recruitment efficiency, training efficiency, and the efficiency of processes and workstations.

4 See: R. Socha, *Działania Policji w stanach nadzwyczajnych*, Warsaw 2013.

5 See: W. Kieżun, *Sprawne Zarządzanie Organizacją*, Warsaw 1997, p. 18–22.

6 J. Kurnal, *Zarys teorii organizacji i zarządzania*, Warsaw 1969, p. 343.

7 Further: R. Socha, *Działania Policji…*

structure to the needs arising from the defense preparedness of independent public healthcare institutions. An analysis of the organizational statutes of independent public healthcare institutions in the capital city revealed that not all entities include a defense-related position within their organizational structure, for example, the Independent Group of Public Outpatient Healthcare Institutions Warsaw-Wesoła[8] and the Group of Public Outpatient Healthcare Institutions Warsaw-Rembertów[9].

According to an expert from the Independent Public Healthcare Institution (SPZOZ) Warsaw-Ursynów, responsible for security matters, including defense preparedness, "a key factor in the area of operational organization aimed at improving the effectiveness of the preparedness of healthcare entities, including independent public healthcare institutions, for operating under conditions of external threats to national security and during wartime, is the standardization of the job titles related to 'defense matters', and most importantly, the standardization of the responsibilities associated with these positions."[10] This is confirmed by the results of the questionnaire technique survey, which primarily indicate a lack of awareness among management staff regarding the proper title of the position responsible for defense-related tasks within the healthcare entity. Responses to the question concerning the official title of a dedicated position created for national defense purposes did not correspond to the job titles specified in the organizational statutes of SPZOZ institutions. Furthermore, respondents referred to positions that serve entirely different purposes, such as occupational health and safety (OHS) or fire protection officers. This may indicate that defense preparedness is being overlooked within the managed facility. Therefore, the following section will present research findings focused on the analysis of current organizational structures of outpatient clinics in the capital city, specifically in the context of their readiness to perform defense-related tasks.

In the Independent Group of Public Outpatient Healthcare Institutions Warsaw–Ochota, there is a "Single-Person Independent Position of the Plenipotentiary for Civil Defense Affairs."[11] The responsibilities of this position include, in particular:

- carrying out tasks related to defense matters;
- ensuring proper conditions for the storage, rotation, maintenance, and integrity of specialized reserves;
- preparing and updating organizational and operational plans for the first aid medical unit;
- supervising the storage of equipment for the first aid medical unit;
- preparing and ensuring operational readiness of the independent general rescue team;

8 https://szpzlowesola.waw.pl/pl/strony/schemat-organizacyjny (access: 22.09.2024).

9 Organizational Statute of the Independent Group of Public Outpatient Healthcare Institutions Warsaw-Rembertów, section 56 – introduced by the Director's Order No. 01_04_2024_ZP on April 18, 2024.

10 Results of the author's own research using the diagnostic survey method in the form of an interview technique.

11 Organizational Statute of the Independent Group of Public Outpatient Healthcare Institutions (SZPZLO) Warsaw-Ochota, section 75 – annex to Order No. 167.2024 of the Director of SZPZLO Warsaw-Ochota dated October 31, 2024.

– maintaining a register of medical personnel for mobilization and defense purposes;
– conducting training for civil defense personnel;
– carrying out tasks within the Management Control System as defined by separate regulations.

In the Independent Group of Public Outpatient Healthcare Institutions Warsaw Praga-Południe, matters of defense are the responsibility of the "Coordinator for Defense and Reserves"[12], whose tasks include, in particular:

– preparing the Independent Group of Public Outpatient Healthcare Institutions (SZPZLO) for national defense needs;
– developing directives and guidelines related to defense;
– participating in briefings and training sessions on defense issues organized by the Health Policy Office and the Security and Crisis Management Office of the City of Warsaw;
– cooperating with defense-related authorities of the Praga-Południe district and the Capital City of Warsaw;
– cooperating with internal departments and external entities regarding the performed tasks;
– preparing applications for exemption from compulsory active military service in the event of mobilization during wartime.

In the Independent Public Group of Outpatient Healthcare Institutions Warsaw Żoliborz–Bielany, the position of "Civil Defense Inspector"[13] has been established, whose responsibilities include, among others:

– planning tasks aimed at protecting the population from threats;
– carrying out tasks and complying with orders, instructions, and guidelines issued by the Voivodeship Chief of Civil Defense;
– developing internal instructions related to Civil Defense;
– performing other duties assigned by the supervisor.

The "Defense Affairs Inspector"[14] is responsible for defense-related matters at the Independent Public Healthcare Institution Warsaw Wola–Śródmieście, and their duties include:

– planning and implementation of defense-related tasks, in particular planning and conducting defense training in accordance with the guidelines of the Department of Defense Affairs of the Ministry of Health, the Security and Crisis Management Office, and the Health Policy Office of the City of Warsaw,

12 Organizational Statute of the Independent Group of Public Outpatient Healthcare Institutions Warsaw (SZPZLO) Praga Południe, section 27 – annex to Order No. 86 of the Director of SZPZLO Warsaw-Praga Południe dated November 27, 2024.

13 Organizational Statute of the Independent Public Group of Outpatient Healthcare Institutions Warsaw Żoliborz-Bielany, section 23 – annex to Order No. 72/2024 of the Director of the Independent Public Group of Outpatient Healthcare Institutions Warsaw Żoliborz-Bielany dated October 10, 2024, concerning the introduction of the Organizational Statute of the Independent Public Group of Outpatient Healthcare Institutions Warsaw Żoliborz-Bielany.

14 Organizational Statute of the Independent Public Healthcare Institution Warsaw Wola – Śródmieście, section 13 item 12 sub-item 3.

as well as raising awareness, initiating and cooperating in the promotion and participation of SPZOZ employees in the implementation of defense matters;
- cooperation with the Personnel Process Support Department in handling exemption procedures for military reservists and maintaining records of persons subject to compulsory military service, including those with mobilization assignments to military units or organizational and mobilization assignment cards for service in Civil Defense Formations, and those exempt from compulsory military service in the event of mobilization or war;
- handling exemption procedures for employees subject to compulsory military service;
- preparing applications to Military Recruitment Commanders regarding the exemption of selected employees from compulsory military service in the event of mobilization or war;
- maintaining a register of material and personal services for defense purposes – developing and updating the "Institution's Defense Preparedness Plan", the "Set of Defense Tasks" to be carried out during threats to national security and wartime, documentation for the Permanent Duty System during periods of threat to national security and wartime, training the Permanent Duty staff, and participating in trainings;
- preparing a balance of medical personnel for national defense purposes;
- drafting regulations, instructions, guidelines, and other documents related to defense matters;
- organizing training sessions for individuals authorized to access restricted materials.

In the Independent Group of Public Outpatient Healthcare Institutions Warsaw – Wawer, a position titled "Inspector for Security, Crisis Management, Civil Protection and Emergency Affairs"[15] was established, while in the Independent Public Healthcare Institution Warsaw-Ursynów, a position titled "Security Specialist"[16] was created. In both entities, the scope of tasks is identical and includes:
- developing and updating documentation related to operational planning during periods of state security threats and war;
- maintaining the staffing register for periods of state security threats and war, as well as managing matters related to ensuring staffing of positions;
- handling matters related to submitting requests to local government authorities for imposing material and personal contributions on the entity during periods of state security threats and war;
- managing preparations for the allocation by healthcare entities in the Mazowieckie Voivodeship of bed capacity for uniformed services subordinate

15 Organizational Statute of the Independent Group of Public Outpatient Healthcare Institutions (SZPZLO) Warsaw Wawer, section 56 – appendix to the Director's Order of SZPZLO Warsaw-Wawer No. 03/06/2024 dated June 17, 2024.

16 Organizational Statute of SPZOZ Warsaw-Ursynów, section 62 – appendix to Order No. 89/2024 of the Director of SPZOZ Warsaw-Ursynów dated October 1, 2024.

to or supervised by the minister responsible for internal affairs, during periods of state security threats and war;
- developing and updating documentation on defense matters in accordance with the documentation of the Capital City of Warsaw in this area;
- developing and updating documentation in case of changes in regulations concerning defense matters issued by the Minister of Internal Affairs and Administration;
- carrying out tasks related to civil planning;
- preparing crisis management plans;
- preparing crisis response procedures;
- organizing the system for threat monitoring, warning, and alerting within the Independent Group of Public Outpatient Healthcare Institutions (SZPZLO);
- preparing procedures, instructions, and guidelines for informing patients about threats and appropriate responses in case of emergencies within the entity;
- organizing and supervising contracts and agreements related to the implementation of tasks included in the crisis management plan;
- creating reports for management concerning threats, risk maps, and priorities for responding to specific threats;
- developing and implementing procedures for critical infrastructure threat scenarios and supervising the protection of critical infrastructure;
- carrying out orders from authorized personnel concerning crisis management;
- participating in internal training sessions organized for employees.

In the Independent Group of Public Outpatient Healthcare Institutions Warsaw-Mokotów, the position of "Defense Specialist"[17] has been established, aimed at ensuring the mobility of the Independent Group of Public Outpatient Healthcare Institutions (SZPZLO) for the state's defense needs, as well as the mitigation of the effects of natural disasters and environmental threats. The Specialist's duties include:
- developing, coordinating, regular updating, and supervising the implementation of preparation plans for state defense needs by subordinate organizational units;
- organizing training in defense, evacuation, and general self-defense;
- monitoring subordinate organizational units' compliance with evacuation plans in in case of fire, natural disaster, or other local threats;
- cooperating with the Health Policy Office, the Security and Crisis Management Office of the Capital City of Warsaw, and other institutions;
- protecting classified information related to defense.

Similar terminology has been adopted in the Independent Group of Public Outpatient Healthcare Institutions Warsaw Bemowo-Włochy, where an "Independent Position for Defense Matters"[18] has been designated within the organizational structure.

17 Organizational Statute of the Independent Group of Public Outpatient Healthcare Institutions (SZPZLO) Warsaw-Mokotów, section 23 – annex to Order No. 84/2024 of the Director of SZPZLO Warsaw-Mokotów dated October 1, 2024.

18 Organizational Statute of the Independent Group of Public Outpatient Healthcare Institutions Warsaw Bemowo-Włochy from March 2024, annex no. 1.

In the Independent Group of Public Outpatient Healthcare Institutions Warsaw Białołęka-Targówek, the "Coordinator for Civil Defense"[19] is responsible for defense matters, whose duties include:

- developing and maintaining up-to-date documentation related to defense matters as required by the Health Policy Office of the Capital City of Warsaw for times of peace and war;
- preparing analyses and reports on the execution of defense tasks;
- conducting defense training for the management staff and employees of SZPZLO;
- cooperating with the Health Policy Office of the Capital City of Warsaw in the implementation of defense and crisis management tasks;
- developing plans and conducting training with regard to medical evacuation of SZPZLO and procedures in case of emerging threats.

An analysis of the scope of tasks designated for positions created to carry out tasks related to the preparation and utilization of independent public healthcare institutions, whose founding authority is the Capital City of Warsaw, and which provide medical services in the form of outpatient care, for the needs of state defense reveals a number of discrepancies that may affect the effectiveness of defense preparations in this category of healthcare entities. The main shortcomings include, in particular:

- lack of uniformity in the titles of positions created to perform tasks related to state defense needs, which in turn leads to a variety of job responsibilities for these positions;
- lack of knowledge among both the management of the healthcare entity and the individuals assigned to carry out these tasks regarding current legal bases in the area of state defense (e.g., use of terms such as "exemption", "civil defense," despite the repeal of the legal basis, i.e., the 1967 Act on the *Universal Duty of Defense of the Republic of Poland*, or use of the term Military Recruitment Commander, now replaced by Head of the Military Recruitment Center);
- lack of familiarity with security science terminology among persons performing tasks in this area, e.g., the phrase "in case of mobilization (missing conjunction 'and') during war," which changes the meaning;
- assignment of tasks that should belong to the duties of other positions (e.g., organizing training sessions for persons authorized to access classified materials – Data Protection Inspector; supervising subordinate organizational units' compliance with evacuation plans in case of fire – fire protection inspector);
- assignment of security-related tasks unrelated to defense preparations (e.g., creating reports for management concerning threats, risk maps, priorities in

19 Organizational Statute of the Independent Team of Public Outpatient Healthcare Institutions (SZPZLO) Warsaw Białołęka-Targówek from September 2024, section 10 point 13 – annex to Order No. 84/2024 of the Director of SZPZLO Warsaw-Mokotów dated October 1, 2024.

responding to specific threats, which is justified if the job title is not limited solely to defense matters);
– assignment of security-related tasks that are not foreseen for independent public healthcare institutions (e.g., preparation of crisis management plans; development and implementation of procedures in the event of critical infrastructure threats and supervision of critical infrastructure protection).

Taking into account the above, as well as, according to an expert, "considering the provisions of the Act of December 5, 2024, on *Population Protection and Civil Defense*, which imposes additional tasks on healthcare entities in the area of preparedness for action both in conditions of non-military and military threats"[20], it is necessary to consider the creation of a position entitled "Coordinator (Plenipotentiary) for the Preparation of (name of the healthcare entity) for State Defense, Population Protection, and Civil Defense", which should be included in the organizational structures of all healthcare entities, including independent public healthcare institutions. Furthermore, it is essential to standardize the scope of duties assigned to this position. Based on the research results obtained, the key tasks of the coordinator should include:

– developing and updating the "Preparation Plan of the Independent Public Healthcare Institution for State Defense Needs";
– cooperation[21] with relevant entities in the development of plans and procedures concerning the implementation of defense tasks and the provision of services for defense purposes[22];
– exempting personnel from the obligation to perform active military service in the event of mobilization and during wartime;
– carrying out imposed material and personal contributions;
– planning and preparing the transformation of the independent public healthcare institution from a civil protection entity to a civil defense entity;
– organizing the system of information, warning, and alerting;
– planning and preparing protective buildings;
– preparing personnel and patients for appropriate behavior in emergency situations;
– organizing training for staff in the areas of civil protection, civil defense, and defense preparations,
– implementation of other actions necessary for the preparation and use of the independent public healthcare institution for the purposes of national defense, civil protection, and civil defense.

20 Results of the author's own research using the diagnostic survey method in the form of an interview technique.

21 See: C. Tomiczek, R. Ščurek, *Cooperation of health care units with uniformed formations in the area of public security,* "Security Forum" 2022, Volume 6 No. 2.

22 See: Ordinance No. 49/2016 of the Mayor of the Capital City of Warsaw of 18 January 2016 on the adoption of the internal organizational statute of the Health Policy Office of the Municipal Office of the Capital City of Warsaw, including amendments introduced by Ordinance No. 46/2019 of the Mayor of the Capital City of Warsaw of 16 January 2019, sections 10 and 11.

Preparation of Management Staff and Personnel

The readiness of independent public healthcare institutions to operate under conditions of external threats to national security and during wartime also depends on the preparation of both management staff and personnel, as well as their awareness of the necessity to provide services for defense purposes. Unfortunately, in the healthcare sector, "no real importance is attached to defense preparedness. As a result, tasks in this area of security are either not carried out at all, or they are undertaken sporadically and only as a response to 'immediate needs', i.e., as a reaction to initiatives imposed from above by authorities responsible for organizing, imposing, supervising, and monitoring defense tasks"[23], states an expert from SPZOZ Warsaw-Ursynów. Hence, "one can only expect ad hoc changes prompted by the situation at hand or by post-control recommendations."[24] The already presented survey results confirm these statements, indicating that defense preparedness is not implemented in as many as 49% of outpatient clinics in the capital. Using medical terminology, the remedy for changing this approach, according to the expert, is "raising awareness among both medical and non-medical staff about the role and significance of defense preparedness within the national security system of the Republic of Poland,"[25] as well as "introducing the climate of commonness of defense preparedness within healthcare entities, including independent public healthcare institutions."[26] In order to increase the effectiveness of the preparedness of independent public healthcare institutions (SPZOZ) for the national defense needs, in addition to adapting the staffing structure to the requirements arising from defense preparations and introducing the "climate of commonness," it is essential to avoid "assigning tasks in this area to random individuals"[27], notes an expert from SZPLO Warsaw-Wawer.

Another area for improvement involves the acquisition of competencies and skills by medical personnel in the field of counteracting the effects of armed conflict. The assessment of the healthcare system's capabilities indicates limitations in the availability of a sufficient number of trained medical personnel who could guarantee effective action in mitigating the consequences of mass casualties resulting from armed conflict. a fundamental shift in this area should involve raising awareness of "what battlefield injuries are and how to organize rescue operations for affected individuals. Knowledge of Tactical Combat Casualty Care (TCCC) should no longer be a skill possessed only by a handful of enthusiasts, but a widespread and deeply internalized responsibility of all medical

23 Results of the author's own research using the diagnostic survey method in the form of an interview technique.
24 Ibidem.
25 Ibidem.
26 Ibidem.
27 Ibidem.

personnel."[28] In this area, training for SPZOZ medical personnel should cover pre-hospital care for the wounded and injured, procedures and interventions aimed at stabilizing vital functions, as well as qualification and preparation for transport — medical evacuation. "In today's circumstances, and considering the fact that the knowledge and practical experience in this domain is currently the domain of the Military Health Service (WSZ), it should be considered obvious that at the early stage training should be conducted by experienced WSZ medical personnel using the facilities of military hospitals and training centers, and based on the curriculum currently used in the Armed Forces. At a later stage, certified training centers located at medical universities and in key postgraduate (specialization) training institutions may take part in the education process. For this reason, it is necessary to begin planning the modification of undergraduate and postgraduate training programs to supplement their content with a comprehensive package of theoretical and practical topics related to battlefield medicine."[29]

Training Organization

An essential element in improving the operational readiness of independent public healthcare institutions (SPZOZ) to function in conditions of external threats to national security and during wartime is the proper organization of both internal and external training. The training must be based on a properly conducted identification of training needs and delivered by individuals with knowledge and experience in the relevant field. According to an expert, "the training topics should primarily take into account planning scenarios and defense tasks specified in operational functioning plans, considering the specific characteristics resulting from the assessment of the military threat in the respective voivodeship."[30] Therefore, "the organization of a coherent training system for individuals responsible for defense preparedness in healthcare institutions" is highly desirable.[31] It would also be advisable to "include the management personnel of independent public healthcare institutions (SPZOZ) in the defense training cycle"[32], as research shows that defense preparedness training was conducted in 53% of clinics, with a quarter of those trainings attended solely by the management of these entities.[33] The situation is slightly better when it comes to experts, as only one of them reported that in the SPZOZ where they carry out defense-related tasks, such training is not organized. In turn, in two cases, defense-related

28 G. Gielerak, *System ochrony zdrowia na miarę potrzeb oraz współczesnych wyzwań i zagrożeń*, „Menedżer Zdrowia" 2022, No. 5-6, p. 20.

29 Ibidem; see: G. Gielerak, *System z(de)mobilizowany*, „Menedżer Zdrowia" 2023, No. 9-10.

30 Results of the author's own research using the diagnostic survey method in the form of an interview technique.

31 Ibidem.

32 Ibidem.

33 Results of the author's own research using the diagnostic survey method in the form of a questionnaire technique.

issues are part of onboarding training for new employees, and in two other cases, they are addressed within the framework of general safety training. Only in one case were training sessions organized exclusively for defense preparedness. It is concerning that only 7% of respondents identified the need for organizing training as a requirement for preparing SPZOZ to operate under conditions of external threats to national security and during wartime in the area of organizational functioning.[34]

Integration of Tasks Performed as Part of Defense Preparations with Non-Defense Tasks

A necessary premise affecting the implementation of defense-related tasks by independent public healthcare institutions during peacetime is "the integration of tasks carried out within the framework of defense preparations with tasks not falling within this scope"[35], i.e., with statutory duties focused on the provision of health services. These involve actions aimed at preserving, saving, restoring, or improving health. According to an expert, "the integration of activities is essential due to the still limited state funding for defense preparations. Financial difficulties impose constraints on how independent public healthcare institutions can organize their operations for defense purposes. However, the insufficient amount of financial resources cannot be an excuse for stagnation in the execution of defense-related tasks. Therefore, the financing of broadly understood security, including defense preparations, should be a state priority."[36] It should also be remembered that maintaining continuity of medical care for the civilian population in conditions of threat will additionally require actions such as:

- ensuring the safety of medical personnel;[37]
- ensuring the protection of facilities;
- securing sources of supply for medicines, medical equipment, and materials;
- ensuring access to water;
- securing sources of electrical power;
- providing means of communication and transportation;
- marking the facility in accordance with relevant conventions.[38]

Therefore, in peacetime, it is necessary (in addition to maintaining treatment capacity, infrastructure essential for providing health services along with personnel, appropriate equipment, and diagnostic facilities, carrying out investment initiatives, including construction projects and capital expenditures, as well as performing renovations and repairs of facilities and equipment to ensure that the infrastructure is

34 Ibidem.

35 Results of own research using the diagnostic survey method in the form of an interview technique.

36 Ibidem.

37 See: R. Socha, D. Haldar, *Infectious disease – a challenge for international security,* „Security Forum" 2022, Volume 6 No. 2.

38 See: G. Gielerak, Zdrowy pomysł, „Menedżer Zdrowia" 2022, No. 5–6/2022, p. 22.

prepared for national defense purposes[39]) to make use of human and equipment resources, as well as infrastructure, in a manner that maximizes the effectiveness and efficiency of actions taken under threat conditions.

Conclusion

In conclusion, only the effective and skillful combination of knowledge and experience can guarantee that independent public healthcare institutions are prepared to operate under conditions of external threats to national security and during wartime – preparation that "offers a chance for comprehensive and lasting protection, in the context of a new and unstable reality, of the state's most valuable asset: its citizens."[40] However, the results of scientific research indicate that as many as 77% of respondents, i.e., individuals managing healthcare entities categorized as outpatient clinics, do not perceive a need for improvement in the area of operational organization. Only a small number of managers recognize the necessity of enhancing procedures related to operations, the imposition of in-kind performance, the organization of training sessions and exercises, and maintaining continuity of operations in the event of communication loss.[41]

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39 See: Decision No. 122/MON of the Minister of National Defense of 27 September 2024 on the commissioned tasks in the field of national defense and security carried out by independent public healthcare institutions supervised by the Minister of National Defense and by research institutes of the military health service (Official Journal of the Ministry of National Defense, item 152), section 3.

40 G. Gielerak, *Zdrowy pomysł*…, p. 24.

41 Results of the author's own research using the diagnostic survey method in the form of a questionnaire technique.

W. Kieżun, *Sprawne Zarządzanie Organizacją*, Warsaw 1997.

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