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Why are hospital in Thailand not the same standard

Nowaday, the vast majority of patients are treated at public hospitals, especially those under the ministry of public health. The patient was overflowing with state hospital. When the number of patients soared like this 296 hospitals of ministry of public health are take the most heavily burdened part from patients who overflow state hospitals, double number of patient compare between 2013 and 2017, causing personnel unable to take care of service quality as they should while bureaucratic manpower enhancement measures cannot keep up with both production, loading and retention of workforce, there are limitations. Fatigue conditions affect service quality that deteriorates with workload. People aside from having to wait for a long time doctors and nurses don't have time to pay attention. Dissatisfaction followed this situation. On the other hand, it is the disparity in the workload between personnel from different departments. Another part, it is the disparity in service quality that people receive. For some people who have enough power to pay when he was unstable to wait in line to receive treatment in public hospitals, he went to private hospital for treatment. Which has encountered another problem, which is the expensive medical expenses of private hospitals. partly, because of the private sector, they have to invest in building hospitals. It is a business with personal money in a free trade system. would have a risk and aim for profit in the business. With less confusion, the widespread number of patients and gaps in government services in the escort hospitals grew more and more, incidentally, concentrated in large cities, with hospital chains both nationally and internationally.

at that time, there was a problem of competition for human resources from the government, especially doctors and nurses, where one part of the hierarchy was with the hospital and the bureaucratic had to clean up even more. Community Medicine Center Ramathibodi hospital published research on treatment costs for private hospital from the case of providing critically ill patients found that quite a few private charge a really expensive service which comparing the drug list with the center hospital under the office of the permanent Secretary, ministry of Public health

found that the price varies from 60-400 times. In addition the private hospital also has a diagnosis than necessary. Society noted why the state does not intervene in private hospital care. Forgo the medical business to be free which private hospitals can enter the stock exchange. Therefore have to make a lot of profit. However, when consumers are calling on the government to help resolve the problem. Price control for private hospitals. Finally the department of internal trade ministry of commerce. So they entered into care by issuing a measure for all private hospitals to disclose and breakdown the price structure for the service. But still don't know how effective this method will be. In 2010, Thailand has a total of 66,139 doctors (both public and private. Compared to the population 69.43 million, the overall physician-to-population ratio is 1 per 1049. The number of doctors per population is not evenly distributed in all areas. The number of doctors in Bangkok is 29,763 while living in the provinces is 31516. This can explain to us that Doctors concentrated in large cities. This is a problem of disparities between regions. The thing above can tell that 1) public hospital personnel bear a very heavy burden. Service quality is inequality. 2) private hospitals are more convenient. But the cost is very expensive and we can't control the price 3) doctors are stay inside the city, not spreading to the countryside.

The situation and trends within Thailand's public health system as a whole lacks unity. Work and lack of systematic integration. There are disparities in the distribution of resources at the same time. People are also more likely to get sick with chronic NCDs and injuries and insufficient knowledge of their health. In addition, there is also a continuous trend of increasing health insurance expenditures, posing a fiscal risk. When we look more closer, we will found that Human resource management system of the ministry of public health as it is still unable to solve the problem of brain drainage (การสูญเสีย) and concentration of personnel because the more skilled power is produce ^{work in} ~~for~~ narrow and deep ^{work} ~~work~~, how much to produce is not enough, it will further aggravate social attitudes to become more dependent on experts. Expensive cost, including seeking behavior to go

to the hospital that is far away from home. Second, the work system of private hospitals has the capacity and efficiency in the administration. But still lacking a policy to use to develop the country. Currently, Thai private hospital system has grown and play a huge role in serving the people. Both in helping to fill the government sector and in economic development, tourism, and health of the country. Generating a large amount of income each year play role in enhancing the quality of service for people according to the market system, especially in the urban area. Foreign health tourists to increase the economy, including the country as a whole. But in another picture private hospital still have the potential to attract medical ~~pose~~ personnel. From the bureaucracy that cause the bribe to drain from the government the most. In addition, there is an unresolved problem in controlling the standard of medical expense; what kind of policy should a country have in place to bring the capacity of private hospitals to play the role in national development partnerships? Should not look at only negative or challenge the private hospital to become a defendant of society or a scapegoat. Because the private sector is also Thai each have a spirit of love the country and want to join in developing the country as well. At this time, the country wanted a policy to promote and support the role of private hospitals in public health care in a Public-Private Partnership (PPP) includes participation in solving problems and developing the health service system on the issue of effective public hospital administration. Joint investment, production and personnel distribution is serving the people and driving the national and regional-local economy towards Thailand 4.0. Third, The administration of the public service units remained centralized. Not reviewed structurally, in the direction of state affairs of countries, democracies develop around the world accept the principle of transferring or distributing general service for the people as the mission of local authorities because localities can better know the state of the area problem than the uni-central work as public health services, education, social work utilities safety of life property and waste management, but Thailand is not as it is

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because the government doesn't want change and there is resistance from the ministry executives who have passed on, including any excuse for inadequacy and impropriety make society and country losing opportunities in health care jobs that are not complicated or require very low professional expertise, especially in health promotion work prevent disease and rehabilitation instead of transferring it to the local area, helping to develop the way of the local people, instead of having been transferred to the local community, they continued to operate in the same trench,

Problems and causes of public health disparities have complex structural and systematic characteristics unable to analyze and distinguish the causal factors alone, so this all above would be the thing that I think it is the main point like government is path dependency and the view point on the private hospital that mainly think in only negative way.