Services and Performance Comparisons between Self-Operated And Totally Outsourced Taiwan Public Hospital-Based Nursing Homes: A Case Study

Chiu-Chin Huang, PhD Chung-Liang Lai, MD Roger Amidon, PhD

Case -- Public hospital-based nursing homes

- All subordinating to the Department of Health, Executive Yuan
- Location -- central and southern Taiwan
- 2 District and 4 Regional Hospital-based
- 3 Self-operated (SO) and 3 Totally outsourced (TO)
- Most founded around 1998-2000 -- policy
- All started with self-operated

Methods

- Combination of Qualitative and Quantitative methods
- The responsible person of those nursing homes filled out the questionnaire
 - Services provided and staffing structure
- Key persons' interview
 - History and Reasons
 - Points of view and factors of the differences
- 4 persons interviewed

Reasons for deciding SO or TO -Hospital side of view

- Leadership and vision of top-level managers
- NH management team
- Cost
- Quality
- Policy and Regulation -- the Enforcement Rules of Law for promotion of Private Participation in Infrastructure Projects in 2000
- Flexibility in operation

Reasons for taking the contracts (Outsourcing management firm's view)

- Reputation of public hospitals
- With fully set-up capital equipment facility

Occupancy Rate

SO: Ave 99.5%

TO: Ave 80%

- Vertical integration
 - Hospitals of SO NH are stronger in Acute Care
 - SO: More residents from the own Hospitals

Staffing

- SO: Nursing ratio -1:9, CNA ratio --1:4
- TO: Nursing ratio -1:10.5, CNA ratio --1:5.5
- SO without foreign CAN, TO nearly 30% of Foreign CNA
- Higher personnel cost for SO
 - Government employees
 - Bench-mark NHs

Care Provided

- Residents in SO more severe -- more skilled nursing care needs
- SO providing more PT and OT services
 - National Health Insurance
 - Integration and resources
- More Physician visits in SO
- More Recreation offered in SO
- More residents restraint in TO

NH Charges

- Cost of staying TO is only 2/3 of SO
- More government support residents in TO
 - location
 - market segment

From SO to TO

- More revenue
- Lack of cooperation (Both side)
- One hospital decided to get back to SO
 - Strategy

Conclusion

- Quality issues
- Safety issues
- Responsibility

