

PUBLIC SECTOR MANAGEMENT (VI)



Interview with Stela IURCIUC, Interim Director of the Timișoara Municipal Hospital. A senior physician, associate professor, and experienced manager, Stela Iurciuc began her medical career in 1994 as a resident physician. She specialized in internal medicine and cardiology, and in 2017, she took over the position of Medical Director of the CF Hospital in Timișoara. During the pandemic, she was

appointed manager of the institution, where she coordinated the modernization of the infrastructure and equipped the hospital with state-of-the-art medical devices. In doing so, she visibly improved the conditions for both patients and medical staff. Through the proper organization of internal activities, she increased the bed occupancy rate, leading to a more efficient use of available capacity and public resources. Her appointment comes at a time when the Municipal Hospital needs a new, patient-centered beginning. The Timișoara Municipality supports the transformation of the public medical system into a more professional one, closer to the people, and one that the citizens of Timișoara can trust.

Reporter: *What are the main challenges involved in managing such a hospital from the perspective of organization, planning, coordination, and activity control?*

Stela IURCIUC: The management of a municipal hospital – including the Municipal Emergency Clinical Hospital of Timișoara – faces major challenges related to organization, planning, coordination, and control. The most critical issues are staff shortages, legislative dysfunctions, inadequate infrastructure, financial pressure, and compliance with legal regulations. These are systemic problems typical of municipal hospitals, but they are also confirmed by recent official reports and audits.

In terms of organization:

- Outdated organizational structures that are not aligned with operational realities, requiring reorganization, departmental mergers, and adaptation to regulations (e.g., changes imposed by the Ministry of Health and the 2023 fiscal-budgetary legislation).
- Insufficient staffing levels and inadequate personnel allocation, especially in critical departments such as Intensive Care Units (ICU) and Emergency Departments, which affects service continuity. Staffing re-

gulations are not adequately adapted to current demands in the medical services market.

- Pavilion-type hospital operation, which complicates logistics, patient flow, and coordination.

In terms of planning:

- Deficient human resource planning due to high staff turnover within the hospital.
- Investment planning is hindered by outdated infrastructure.
- Difficulties in budget planning caused by financial constraints and dependence on public funding.

In terms of coordination:

- Difficult coordination between departments, especially in a pavilion-structured hospital with dispersed operational flows.
- Insufficient integration of IT systems, affecting reporting, traceability, and control processes.

In terms of control:

Insufficient quality control of medical services due to the lack of integrated performance indicators and staff overload.

R: *What major difficulties have you faced since the beginning of your mandate?*

SI: The major difficulties in managing a municipal hospital include:

- Chronic underfunding and dependence on the local budget.
- Shortage of medical and auxiliary staff, exacerbated by migration and the limited attractiveness of available positions.
- High pressure on Emergency Departments, as the hospital serves not only Timișoara but also the entire county and the western region.
- Outdated infrastructure, which is difficult to modernize without disrupting ongoing medical activities.
- Bureaucracy and frequent legislative changes, requiring repeated reorganizations.
- Managing medico-legal risks in a context of staff overload.
- Difficulties in implementing digitalization (electronic medical records, reporting systems, data management).

R: *What do you consider to be the main obstacles that must be overcome in order to achieve the hospital's strategic objectives?*

SI: **Main obstacles to achieving the strategic objectives of the Municipal Hospital of Timișoara**, based on official reports and analyses are:

Critical obstacles

1. Administrative dysfunctions and lack of compliance.
2. An organizational structure requiring continuous adaptation.
3. Dispersed pavilion infrastructure, which limits efficiency and increases costs.
4. High pressure on departments that provide unique services at county or regional level, leading to overload.
5. Lack of financial resources for modernization and staff recruitment.
6. Dysfunctions in the implementation of European-funded projects, sometimes involving contractual deviations.
7. Poor coordination between authorities, affecting strategic decision-making.

Secondary obstacles

- Resistance to change among staff.
- Lack of an organizational culture focused on performance.
- Sometimes insufficient internal communication.

R: The Hospital's most important achievements in recent years were the following:**SI: Modernization of the Main Building – Major Investment of Over €4.5 Million**

The hospital has implemented a large-scale rehabilitation and energy-efficiency project for the main building at the “New Clinics,” financed through the National Recovery and Resilience Plan (PNRR). The works include:

- thermal rehabilitation;
- modernization of heating, ventilation, air conditioning, and lighting systems;
- implementation of modern energy management systems;
- integration of renewable energy sources;
- improvement of medical circuits and spaces for patients and staff.

The project will reduce annual heating energy consumption by over 90%, while total primary energy consumption will decrease by approximately 53%, contributing to significantly lower operational costs.

- Development of the IT System and Hospital Digitalization

The hospital is implementing a digitalization project worth RON 5.87 million, fully financed through PNRR, aimed at:

- modernization of communication networks;
- implementation of clinical and non-clinical software;
- interoperability between systems;
- increased digital capacity for telemedicine and eHealth.

This project represents an essential step toward a modern hospital with integrated workflows and more efficient administrative control.

- Improving Medical Infrastructure and Patient Conditions

The modernization works also include:

- improvement of medical circuits;
- safer and more efficient spaces for staff;
- electric vehicle charging stations;
- reduction of CO₂ emissions by nearly 49%.

R: What Differentiates This Healthcare Unit from Other Similar Hospitals?**National Health Programs and Academic Activity**

SI: The hospital runs national health programs every year, some of which are unique at the national level (CEBOR). In addition to medical activity, the hospital is also involved in teaching and research.

- Strategic Role in Timișoara's and the Region's Medical Network

The hospital serves a large population and handles a high volume of emergencies, making it a key pillar of healthcare services in western Romania.

- Unique Local Specialties and Services

The hospital has departments and competencies that distinguish it within the local medical landscape, serving as a referral center for specific pathologies.

- Accelerated Infrastructure Modernization

Few municipal hospitals in Romania are simultaneously implementing:

- a major energy rehabilitation project;
- a full digitalization project;
- integrated modernization of medical circuits.

- Location in the University Area and Collaboration with the University of Medicine and Pharmacy Timișoara

This allows for:

- access to young medical professionals;
- teaching and research activities;
- rapid integration of new technologies.

- Focus on Sustainability and Energy Efficiency

Reducing energy consumption by over 50% and integrating renewable energy sources remain rare achievements among Romanian municipal hospitals.

R: What are the main strengths and vulnerabilities of the hospital in the current Romanian healthcare context?**SI: We can mention as strengths:**

Internal factors that provide a competitive advantage:

- Strategic role in Timișoara's medical network – emergency hospital with county-level unique departments (e.g., Ophthalmology, ENT, Plastic Surgery);
- Strategic location relative to the border area;



- High patient volume and strong clinical experience, which enhances professional expertise;
- Well-trained medical staff, including recognized specialists in certain fields;
- Medical equipment and infrastructure;
- Ongoing European-funded projects that support infrastructure modernization (energy efficiency, equipment, digitalization);
- Diversity of specialties, enabling a multidisciplinary approach;
- Support from the local authority (Timișoara City Hall), which can accelerate investments;

Access to medical universities and research activity.

The weaknesses are the following:

Internal limitations that affect performance:

- Underfunding of the healthcare system;
- Salary disparities between different staff categories, creating demotivation in the work process;
- Competition from private hospitals, which attract both personnel and higher-income patients;
- Dispersed pavilion structure (13 buildings), complicating workflows, logistics, and costs;
- Aging infrastructure, with outdated electrical, thermal, and fire safety systems that are difficult to modernize without interrupting activity;
- Human resource shortages, particularly in ICU, Emergency, nursing, and auxiliary staff;
- Resistance to change;
- Need for additional spaces;
- High maintenance and overhead costs due to the age of the buildings;
- Rising operational costs (medicines, consumables);
- Increased medico-legal risks due to overburdened services;
- Delays or blockages in European projects, which could result in penalties or loss of funding.

In terms of opportunities, external factors that can be leveraged:

- European funding opportunities for 2021–2027 for:
 - digitalization;
 - energy efficiency;
 - modernization of medical infrastructure;
 - state-of-the-art equipment;
- Growing demand for high-quality medical services in Timișoara and the metropolitan area;
- Partnerships with the private sector for auxiliary services (laboratory, imaging, catering, maintenance);
- Development of telemedicine and integrated patient management systems;
- Possibility of reorganizing the hospital structure thro-

ugh mergers, relocations, and workflow optimization;

- Attracting young professionals through collaboration with the University of Medicine and residency programs;
- Increasing transparency and public trust through digitalization and modern reporting systems.

R: The diversity of specialties and the quality of medical care are essential factors influencing patients' decision to choose your hospital.

- How do you manage the coordination of medical teams and maintain a high level of professional performance?

The answer would be by:

• Structure and leadership:

- Department/Unit heads with clearly defined responsibilities for organizing activities, work schedules, and on-call duties.
- An executive management committee (hospital manager, medical director, nursing director, financial director) that establishes clinical and operational directions.

• Coordination mechanisms:

- Regular departmental meetings (case discussions, workflow issues, protocol reviews).
- Multidisciplinary committees (tumor boards, complex case review boards, hospital-acquired infection committees).
- Internal clinical protocols and guidelines aligned with national and EU standards.

• Maintaining performance:

- Continuous medical education (courses, conferences, workshops, certifications).
- Periodic staff evaluations (professional and behavioral).
- Monitoring quality indicators: average length of stay, reintervention rates, healthcare-associated infections, complaints, adjusted mortality rates.
- Supervision and mentorship for residents and junior physicians.

• Modern tools:

- IT systems that enable traceability of medical care, clinical audits, and real-time reporting.
- Working groups dedicated to updating protocols and implementing new technologies.

R: What is the hospital's patient catchment area, and how has patient volume evolved in recent years?

SI: The Municipal Hospital has a broad catchment area. We primarily serve the municipality of **Timișoara**, as well as the entire **Timiș County**, and for certain specialties, we act as a referral center for the entire western region. In recent years, we have observed a steady increase in patient demand, particularly in emergency care. More and more patients present directly to the Emergency Department, including for conditions that could be managed in outpatient settings or by family physicians.

We have also seen an increase in elderly patients with multiple comorbidities, as well as complex cases referred from smaller hospitals and rural areas. This evolution requires us to continuously adapt our capacity and organizational model.

R: *How do you believe the delivery of medical care has changed over recent decades at the level of a municipal hospital?*

SI: Over the past five years, particularly in the post-pandemic period, we have faced a nationwide decline in public trust regarding health policies. Rebuilding this trust is a shared goal of the medical community, achieved through respect, attentiveness, professionalism, and transparency. The changes have been substantial. Two or three decades ago, the emphasis was on prolonged hospitalization and inpatient-only treatment. Today, we speak of shorter hospital stays, day surgery, minimally invasive procedures, and continuity of care. Medical practice has shifted from an individual-centered approach to a multidisciplinary one. Complex cases are discussed within teams, and therapeutic decisions are made collaboratively. Digitalization has fundamentally transformed how we work: we now use integrated IT systems, electronic reporting, standardized protocols, and significantly improved traceability of interventions. In addition, patients are far more informed and actively involved in decision-making. Patients' rights, communication, and patient satisfaction have become central elements in evaluating the quality of healthcare services.

R: *Have you observed changes in case typology, diagnostic methods, and therapeutic approaches?*

SI: Yes, these changes are evident. Case typology has evolved alongside demographic and epidemiological trends. We are seeing increasing numbers of chronic illnesses, elderly patients with multiple conditions, and a rise in oncological pathology. Diagnosis has become faster and more precise thanks to broader access to advanced imaging and specialized laboratory testing. As for treatment, the trend is clear: minimally invasive procedures, personalized therapies, and standardized protocols. Modern medicine focuses on rapid recovery, complication reduction, and reintegration of patients into everyday life.

R: *To what extent do you believe current medical practices in Romania are aligned with those in other European healthcare systems?*

SI: Romania is in a continuous process of alignment with European standards, and in many fields we are already very close. Clinical guidelines in major specialties are largely harmonized with European standards, and treatment protocols for conditions such as myocardial infarction, stroke, and cancer are similar to those applied across the EU.

Areas where we are well aligned:

- Clinical guidelines in major specialties (cardiology, oncology, intensive care, surgery) are largely harmonized with European standards (ESC, ESMO, ERS, etc.).
- Treatment protocols for major pathologies are comparable to those used across the EU.

- Participation in clinical trials and European projects within university centers.

Areas where gaps remain:

- Unequal access to modern technology and innovative medications between large and smaller hospitals.
- Underfunding, which limits the full implementation of standards (staffing levels, equipment, consumables).
- Aging infrastructure in many municipal hospitals, affecting the quality of the care environment.
- Incomplete digitalization and lack of interoperability between systems.

Overall trend:

The direction is clearly toward European alignment, although progress is uneven. University centers and large hospitals are generally closer to EU standards, while smaller hospitals and some municipal institutions still lag behind — a reality we acknowledge with great regret. Nevertheless, the Romanian healthcare system is modernizing, and municipal hospitals, including ours, are making constant efforts to meet European standards in terms of quality, safety, and efficiency of medical care.

Patient safety is a major priority in hospital management, and healthcare-associated infections remain a constant challenge.

R: *What measures are implemented in the hospital to prevent and control healthcare-associated infections?*

SI: Preventing healthcare-associated infections is an absolute priority for our hospital. We have implemented an integrated infection control system that includes both preventive measures and rapid intervention mechanisms.

First, we apply standardized protocols for hand hygiene, the use of personal protective equipment, sterilization, and terminal cleaning. All procedures are aligned with national legislation and European recommendations. Secondly, we conduct ongoing training programs for both medical and auxiliary staff, ensuring that all employees remain up to date with best practices. In addition, we have invested in modern disinfection equipment, air quality monitoring systems, and optimized medical circuits. In high-risk departments such as the ICU and Surgery, we apply additional isolation measures and microbiological surveillance. Our goal is to reduce the risk of transmission and ensure the safest possible environment for both patients and staff. Last but not least, the management team of Spitalul Clinic Municipal de Urgență Timișoara introduced, for the first time, the role of “observer” in the ICU and operating block—an initiative praised by the Romanian Minister of Health, which resulted in amendments to staffing regulations for ICU departments and the inclusion of the epidemiologist physician in the official staffing standards.

R: *How is the monitoring and control system for healthcare-associated infections organized at the department level?*

SI: The monitoring system is coordinated by SPIAM, which functions as the central surveillance unit. Each department has a designated infection control →

officer who works directly with the team. Monitoring is carried out daily through:

- reporting suspected or confirmed cases;
 - monitoring antibiotic consumption;
 - verifying compliance with hygiene protocols;
 - conducting periodic internal audits;
- performing microbiological analyses and screening in high-risk departments.

The data is centralized in an IT system, allowing us to quickly identify potential outbreaks, analyze trends, and intervene promptly. Every month, SPIAM presents a detailed report to the Executive Board, based on which prevention measures are reviewed and adjusted.

R: What are the main difficulties encountered in managing this type of risk?

SI: Managing healthcare-associated infections is a challenge for any hospital, and the difficulties are multiple. First, we are dealing with aging infrastructure that was not originally designed to meet current infection control standards. Modernization is underway, but it requires significant time and resources. Secondly, we face high pressure in emergency and ICU departments, where patients are critically ill and the risk of infection is higher. Staff overload can affect strict compliance with all procedures. Another major challenge is bacterial resistance to antibiotics, a global issue that complicates treatment and requires careful monitoring of antimicrobial use. In addition, there are challenges related to human behavior: maintaining constant compliance with protocols is difficult in a fast-paced environment with complex cases. Nevertheless, through continuous training, internal audits, and ongoing investments in infrastructure and technology, we are able to maintain effective risk control and continuously improve patient safety.

R: As an experienced manager and professional: what advice would you offer to young doctors at the beginning of their careers?

SI: I always tell young doctors that medicine is a profession that requires great sacrifice, but it also offers tremendous rewards. My first piece of advice is to remain curious, open-minded, and consistent in learning. Medicine evolves rapidly, and what you learn today may become outdated within just a few years. Invest in continuous education, acquire new competencies, and focus on developing practical skills. My second piece of advice is never to forget that empathy and communication are just as important as medical technique. Patients need clear explanations, trust, and a doctor who genuinely listens to them. Thirdly, I encourage them to seek mentors and embrace teamwork. Modern medicine is multidisciplinary, and collaboration is key to success. And perhaps most importantly, they should preserve their personal balance. Being a doctor is highly demanding, but if you protect your physical and emotional well-being, you will be able to build a long and fulfilling career.

R: What are the most important achievements of the manager of the Municipal Hospital of Timișoara?

SI: Although I have been at this hospital for less than a year (while also bringing five years of experience as manager of the CF Clinical Hospital in Timișoara), together with the team we have already launched several essential projects aimed at modernizing the hospital. One of our most significant achievements is the initiation and implementation of major rehabilitation and energy-efficiency projects, which will transform the hospital's infrastructure and significantly reduce operational costs. Another important accomplishment is the accelerated digitalization of the hospital through projects funded by the National Recovery and Resilience Plan (PNRR). We have modernized IT networks, introduced integrated data management systems, and laid the groundwork for telemedicine and fully digital reporting. We have also strengthened internal control mechanisms and quality management processes, improved coordination among medical teams, and invested in staff training. We have succeeded in increasing transparency, optimizing workflows, and improving internal communication. Last but not least, we have managed to attract external funding and develop partnerships with local authorities and the academic environment, enabling us to adapt more quickly to the current demands of the healthcare system.

R: How do you see the evolution of hospital management in Romania over the coming years?

SI: Hospital management in Romania is currently at a moment of profound transformation. In the coming years, I would like to see progress in three major directions. The first is the professionalization of management. Hospitals will need leaders with strong competencies in management, finance, human resources, and strategy—not only in the medical field. The complexity of the system requires a modern, data-driven approach based on performance indicators. The second direction is full digitalization. Electronic health records, system interoperability, real-time reporting, and data analysis will become essential tools for decision-making. Hospitals that fail to adapt will inevitably fall behind. The third direction is a stronger focus on patients and service quality. European standards will become mandatory, and hospitals will increasingly be evaluated based on clinical outcomes, patient safety, and patient satisfaction. Overall, I would like to see a system in which hospitals are better organized, more efficient, and more transparent. It is a long journey, but the direction is clear, and municipal hospitals—including ours—have an important role to play in this evolution.

Interview translated by: Liliana Carja

*Recorded by: Georgeta Popovici, MD
Interview with Octavia Sorina HONTARU,
Stela IURCIUC, Interim Director of the Timișoara Municipal Hospital*