STRATEGIC MANAGEMENT OF BIOCHEMICAL AND BIOPHYSICAL CONTROL STRUCTURES AND SUSTAINABILITY HEALTH ACHIEVEMENT

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Abstract:
Scientific investigation of sustainability sanitary herein, matters to a) define the structure of the health sector; b) knowing the contents of the local health systems; c) to obtain information about the properties and characteristics associated with health in Romania; d) obtaining views on the mission, objectives, goals and targets pursued by health services; e) scheduling results, effects and positive consequences among human communities to ensure sustainable health in the framework of sustainable development of the country and, last but not least; f) it is intended to measure people's participation and the rule management process, based on biochemical and biophysical control structures. Mainly, it is considered that the sustainability and health have depicted conceptual content that must be secured effectively recovered, concrete operational activities of health systems in laboratories and hospitals.

Keywords and key phrases: management, economics, biochemical structure, biophysical structure, sustainability health, public health, laboratory, hospital, bio-economics, bio-management.

JEL Classification: A1/A10

1. Introduction
Biochemical and biophysical control structures are important in ensuring the sustainability of health, their contribution to the management reforms to improve public health, and for economic and social development.

It is recognized that health is a resource thesis undeniable and immeasurable human personality, the individual and society as a whole, placed among the most important national values.

In comparable terms, control of health situations biochemistry and biophysics and medical instruments involves management activities to reach the "sanitation and health in the country better than another health and health system of another country."

However, the terms management evaluation in the field are still imprecise, and the area analyzed to obtain representative finding is still uncertain. This conceptual blurring the area is recognized by the World Health Organization officials.

Definition of sustainable health is the subject of studies and analyzes in the art. They are justified by the need to know the dimensions and implications of biochemical and biophysical factors and hospital laboratories that produce disturbance of public health nationally and, on this basis, to confirm the formulas determining actions and effective measures to prevent and combat the deficiencies in the organization specific control and management structures.

Strategic Management of biochemical and biophysical control structures for health sustainability implies the need to remove at least some generic causes of the emergence of Biochemical and biophysical disturbances in health and health systems in laboratories and hospitals in Romania.

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2. Biochemical and biophysical control structures entered under strategic management to ensure health sustainability

General definition of biochemical control structures and/or biophysical systemic vision can start the process of quality medical instruments, health and specialized health facilities in Romania, based on general health sustainability.

In Figure 1 is shown schema for the definition of control structures with self Biochemistry and Biophysics, and in Figure 2 is shown schema for the self-regulating and self-organizing structure.

Fig.1. Control structure with self Biochemistry and Biophysics

Fig.2. Structure of biochemistry and biophysics of self control and self-organization

The descriptions of the two figures are symbolic notations meanings:

- $S =$ Biochemistry and Biophysics control structure (organization or body, ministry, hospital, laboratory, etc.);
- $R =$ regulator (element transformation, processing, resource material, financial, additional knowledge, innovative);
- $x + \Delta x =$ change inputs (material, financial, knowledge);
- $y + \Delta y =$ change output (resulting material, financial, knowledge);
- $y =$ output;
- $\Delta y =$ disturbances (disturbances, difficulties, negative situations);
- $z =$ value adjustment (correction) (additional resources);
- $zx =$ input set;
- $r =$ control interval;
- $t_e =$ effective control time;
- $t_m =$ dead time.

In this context, it is inferred that the value denoted by $x$ entry into $S$ (ie, the control structure biochemical and biophysical) range (reaching $x \pm \Delta x$), and the result output denoted $y$ when $y$ is $y \pm \Delta y$, is transmitted by feedback from regulator denoted by $R$.

In general, biochemical and biophysical control structures are denoted $y$ follows that the output is kept constant.

Based on theoretical notions of the concept of management in any field, such as in the health sector or in organizations or in laboratories and hospitals can design into a personal vision, a certain style of management to achieve the best results on health sustainability through conventional decisions correctly founded.

Decision management is the process of choosing a path of action to achieve objectives through the application of which influence the activity of at least one person other than the decision maker. [3]

Figure 3 presents the scheme self-regulating and self-organizing management system that fits the concept of the health system, health and medical sector in which the control structures of Biochemistry and Biophysics.
Health policy in Romania is part of the general management science, which in a decision system is applied in an area of national interest found in a difficult process of reform.

Such educational system, in Romania, the government, politicians, decision makers at the country level, health is priority declarative centered realities and national traditions.

In this context it appears that evaluating health services aimed at identifying vulnerabilities, slippages or strengths and the setting of a holistic, integrative, generating performance laboratories and hospitals in Romania.

We find equally that in Romania, the health system is under a decentralization process covering the entire public administration. [4]

In addition to national legislation, the Romanian medical system shall harmonize domestic regulations with the regulations set out in the European Parliament and of the Council of Europe within the area.

On the other hand, health is a fundamental constitutional right and, equally, a "national treasure", which supports the development of society. From this perspective it is clear that there is equivalence between the concept of health and quality of life. [2]

Health system and public health are long-term investments, which require effective links between politics and other social policy field Romanian state, helping to ensure a flexible human capital, able to handle any situation and likely development environment to ensure that people operates.

In recent years, experts have assessed the health system and the Romanian medical and governors charged with this power, and focused attention on the economic analysis of health management and medical arrangements for public health assessment.

National Strategy for rationalization of hospitals, approved by Government No. 303 / 23.03.2011, prepared by the Ministry of Health in collaboration with World Bank experts and personalities with expertise in the medical field, brought to the fore the difficulties the health system in Romania, formulating recommendations, as the implementation can only contribute to "improve" not "development" Romanian health system.
3. Operation of biochemistry, biophysics and infrastructure of hospitals under biosafety and biocontainment

In the context of preliminary analytical field shows that faults of Biochemical and Biophysical health and health systems in laboratories and hospitals in Romania, mainly refers to:

- Lack of quantity and quality sustainable health services to serve at least satisfactory population;
- The health system in Romania answer still inefficient major health problems in laboratory and hospital staff, the current model focusing on curative care and mainly on the biochemical and biophysical hospital in aggression at the expense of outpatient and primary care;
- Degradation of human health, due to inadequate health services, including cases caused by aggression biochemical and biophysical laboratories and hospitals;
- Increased damage to human health in communities increasingly larger national territory;
- Decreased biological indices, respectively disruption general human development because health services inadequate, substandard, derogatory increasing intensity;
- Poor control and poor management of health security status of biochemical and biophysical influence among the people, with the cumulative effects more common cases of mental trauma, injuries somatic biophysical effects, recessive genetic mutation, etc.;
- Biophysical mutagenic agents as operators of chromosomal translocations negative so as not to reach the long future periods to decrease the genetic quality of human evolution, etc.

The need for a new theory of management control structures Biochemistry and Biophysics confirms that lack strategic vision for the transition to sustainable development processes based on using advanced knowledge, human and natural resources in Romania.

Exemplary aspect involves replacing ascertaining above chlorinated organic insecticides and organo-mercury, increased fine chemical synthesis aiming clean industrial microbiology and molecular stereochemistry directed, health awareness achieving sustainability culture using modern information technologies, and especially encouraging that new biochemical and biophysical knowledge in the context of the information society and knowledge-building in Romania about to participate in the emergence of eco-technologies.

Degree of problem, from the perspective of strategic management of biochemical and biophysical control structures to ensure sustainability of health should be determined by focusing on doctrine, concepts, principles, developed so far in developing management models of control structures global sphere of public health and health sustainability.

As such, the economy and performance management solutions of biochemical and biophysical control structures to ensure sustainability of health contribute to deepening sense of development and more efficient organization and management in public health. [1]

Effective strategic management control structures biochemical and biophysical sustainability formalize health by performing correlative articulation of results and conclusions:
• complex analysis and conceptual approaches and theoretical grounding practical biochemical and biophysical control structures, public health and sustainability of health;
• Research management control structures biochemical and biophysical public health and health sustainability in terms of ensuring sustainable human health laboratories, hospitals and the environment by implementing control measures quasi-continuous health;
• Estimates of potential sustainability of health insurance under control biochemistry and biophysics quasi-continuous for a sustainable public health in Romania;
• Determining sanitary procedures implementing sustainability in the health system in Romania;
Elucidation of the lack of sustainability impact health and human manifestation of poor health on economic development and the potential for development of the country competitive in the current environment.

The objectives in the strategic management of configuration control structures biochemical and biophysical sustainability sanitary Romania are: delineation and retention of what fits into the local plan of economic and managerial theory and practice of sustainable international health, identification and analysis sustainability features sanitary Romania, European and international level in terms of public health safeguards offered, determine the main mechanisms and the means to prevent and combat diseases of biochemistry and biophysics laboratories or hospitals nationwide, highlighting the importance biochemical and biophysical control measures to prevent and combat negative health conditions among the population and the environment.

In such a vision in sight invoice operational conceptual design requirement of a regulatory document, defining the operation of biochemistry, biophysics laboratories and hospitals in biosafety and biocontainment conditions.

Such an approach should take into account: scientific abstraction; classification and comparison; analysis and synthesis; group statistical formulas, and calculation using dynamic strings trends, induction and deduction management; tabular and graphic techniques; approaches profiles laboratories and hospitals system procedure compared, investigating evolutionary processes health management, private events and phenomena studied etc.

Advanced strategic management knowledge is quantified by the systematization of information, data, conclusions, recommendations validated managerial and economic literature specialist. It is useful to consider the legal system valences national, European and international governing work in healthcare and health.

Recourse to aggregate various statistical data, information materials of various professional bodies of public institutions, reports of bodies from Romania, the European and international (European Commission, National Statistics Institute, the World Health Organization, Ministry of Public Health, State Sanitary Inspection, Directorate General for Health and Consumer Protection of the European Commission, etc.), public authorities, scientific studies etc.

Moreover, the methodological basis of the approach may include a wide range of analytical approaches and synthesis for the determination of specific traits - particular and general medical processes, health and management control structures biochemical and biophysical assessments generalization particular etc.

As the main sources of information for research on formalization of strategic management control structures biochemical and biophysical sustainability plumbing can be used, predominantly, statistics Ministry of Public Health of Romania, National Institute of Statistics of Romania, national legislation and international statistical reports of international organizations, other sources of information in the field.

When selecting information sources is appropriate considering the field of study, but also the issues of updating and comparability of data used, relying on general knowledge of cyberspace, internet and intranet. [5]

It appears that most of the topics on the agenda of formalization approaches of strategic management control structures biochemical and biophysical sustainability sanitary include general aspects of organization and management of sustainable, coupled with the emergence of new knowledge-based economy, which liberalizes the basis for the study of management control structures in question.

Against such an alignment of approaches consisting in the field, is visible the preliminary conclusion that the issues addressed have focused on the analysis of theoretical
and methodological issues of economics and management control structures biochemical and biophysical.

It proves equally important factors that determine potential managerial analysis of biochemical and biophysical control structures to ensure sustainability of health, sustainability sanitary laboratories.

Management aspects of biochemical and biophysical structures that produce disturbances on health sustainability deduced closely with state general sustainability and health damage in biochemical and biophysical effects in some laboratories and hospitals in Romania.

Therefore, retained elements relating to management methods and techniques that fit to be proposed for health sustainability, combating biological risks, biochemical and biophysical laboratories and hospitals in Romania.

Public health assessment involves the use of indicators representing specific sizes measuring the likely developments and its determinants, including the biochemical and biophysical.

As a standardized unit of structured information, health indicators measured interrelations of phenomena associated with the data available in a form which permits identification of components and changes in the system of health care.

It appears that centralized decision making in the organization and management of the health system of the medical and laboratory, when applied to the new hospital reform conditions, is detrimental to the efficient functioning.

According to centralized management, the public health system in Romania is divided into different sectors with independent operation.

From this point of view, it is concluded that there is insufficient functional connections between primary and hospital care between health promotion and curative health.

It appears that the disadvantage form of organization and management described above is reflected in the plan mismanagement of the health system-specific information.

The public health system in Romania, according to the results of studies on the subject, there have been cases improperly managed makers, focussing on issues of patient safety, quality assurance and risk management in the medical field.

A major problem faced by healthcare centralized in Romania is that it has generated increasing number of medical units.

Hospital constitute legal entity which provides health services, preventive, curative and rehabilitation.

At this stage of the reform, we find that the health system in Romania still focus on hospital care at the expense of integrated service networks preventive, curative and rehabilitation.

It follows that the real plan, this approach has resulted in the transfer of responsibility to ensure the health and sustainability of health in local public authorities, who have faced a shortage of financial resources.

Studies and analyzes show indeed increasingly more that the effectiveness or hospital management in Romania is initiated by planning, forecasting or "planning" as a first step the cumulative decisions on defining objectives and its structural components establish the sequence of actions that are to take place circumscribed.

On this basis should spend the allocation of resources in line with operational stages, establishing responsibilities and timetable or schedule for implementation of activities.

Hospitals and biochemical-biophysical Romanian laboratories are funded by groups Diagnostic System (GDS / DRG), even if the criterion is invoked declaratively or financing principle "money follows the patient".

The system for allocating funds SGD type, patients are divided into homogeneous diagnostic groups in terms of clinical disease and of treatment, and the hospital is
reimbursed a rate per weighted case (TCP), which is an average cost, pre-calculated and weighted, that diagnosis group.

Diagnostic groups are designed to cover acute type associated pathology patients who require hospitalization.

Authorship of this system is attributed to Yale University in the USA and emerged from the need to create a unified framework to monitor the use of hospital services.

However, it appears that while the medical system in Romania is designed and based on considerable territorial dispersion, the 8 regions in that it has a wide range of actions (county hospitals, township, etc.) management must prioritize the use of information flows (IT) rather than direct observation, which typically alter or delay the relevant information so necessary control, including biochemistry and biophysics, in the substantiation and adopting optimal healthcare decisions.

From this point of view, we consider that nationally there is still an integrated, efficient, collection and management of medical and health information.

Research on the economics and management of biochemical and biophysical control structures to ensure sustainability of health, with applications in economic and productive environment in Romania, biochemical and biophysical laboratories, hospitals, based on the theoretical considerations and economic realities and managerial above.

It is noted that in Romania health services affected by biochemical and biophysical structures, along with the education and equality of opportunity or opportunities or human rights, their distribution fit the local resources in human society.

In such a framework affecting sustainability occurs because health inequalities on the distribution of health services in Romania in the same generation of people.

In the literature of economics and common management, resource distribution and inequality issues are discussed and analyzed frequently, especially in revenue.

Romania is still negative valence position in Europe according to the inequality of income distribution.

Some opinions state that in fact most of the people can live better, in a sustainable manner (including health), if there is a domestic social contract whereby rich categories of the population to agree to cede a portion of their income categories poor.

In fact, Christine Lagarde, managing director of the International Monetary Fund (IMF), in a presentation made to the Financial Times (21 September 2012) requires the leaders of the world "to remember that in too many countries the benefits of growth advantage less people. This is not a recipe for sustainability and stability."

On the same line of ideas and concepts in the field, Byanyma Winnie, Director General of the International Confederation Oxfam, the World Economic Forum in Davos stated in the report "Working for the few" (quoted by Ioana Tudor Bogdan Cajocaru in the publication ZF International Business, Jan. 21, 2014, p.1) that "the growing disparity of income is due distribuirii monopolization of power by elites, which would be taken over the political process to manipulate the rules of the economic system in their favor." That is 1% of households own 46% of world wealth.

It legitimized the view that providing uncompromised ability of future generations to meet their own health needs should benefit equally the same intensity and importance of activities related to other resources of society as possible in their entirety.

4. Conclusions

- Sustainability of Health has distributed original meaning in health services according to the needs of local subsistence and human biosocial find that participating in the operational framework of sustainable development, including the application of medical instruments and hospital laboratories.
• We conclude that biochemical and biophysical phenomena and processes occurring naturally and among those artificial, man-made and its direct or indirect activities, units, participate in defining or health sustainability.

• Technical, technological, procedural, phenomenological, etc. Biochemical and biophysical laboratories and hospitals are found to participate in the sustainable development of Romania, namely having constructive role, the factors generating added value, utility and consumer uses, production, reproduction and functioning of human societies and related infrastructure or serve aggressive, intrusive, detrimental, destructive, etc. structures of human life. When the proportion of records equivalence trends above, then it is considered operability health as zero sum.

• Control structures (in this case specialized structures for biochemical control or biophysical laboratories and hospitals in Romania), in turn, be organized and managed.

• By creating proposals to formalize the strategy of ensuring sustainable health, we recommend that management control structures toward the establishment of as many loops reactive (reverse side) input corrections or adjusting the final ordering processors attainment scheduled, planned synthetic characterized health sustainability ensured.

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