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Healthcare Problems and Ensuring Sustainable Development among Employees

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Abstract

The article offers a synthetic presentation of the results of analyses of diverse data resources and other scientific information concerning the healthcare in Poland. These studies were conducted in order to put forward positive changes that are not only to prevent the fall of the system, which is highly probable, but also to improve the availability of medical services and increase their quality. These studies are of major importance because the availability of medical (healthcare) services is largely determined by whether it is possible to implement the idea of sustainable development among employees, which indirectly determines the possibility of implementing sustainable development principles incorporated into legal circulation under one of the first articles of the Constitution of the Republic of Poland.

The concept of sustainable development is not only one of the important reasons which call for modernisation of the functioning of the healthcare system, but also an idea which, once applied, may be helpful in solving healthcare problems. Considering the fact that the largest problem of this system in Poland lies in the shortage of employees, it becomes

clear that by trying to ensure sustainable development of employees working in other industries, first, it is necessary to take care of their health, which must lead through sustainable development of healthcare workers.

The aim of the article is to present the comprehensive nature of the idea of sustainable development of employees, the role of health protection in achieving a balance by employees, and to show the way to build integrated programmes to maintain the health of employees and their families against the background of the limitations of the Polish healthcare system.

Keywords: healthcare, sustainable development, human capital, employees, benefits

JEL Classification Code: M52

Introduction

The concept of sustainable development is a highly inspiring idea and its postulates are based on actual challenges of the economy and, broadly speaking, the life of societies. Undoubtedly, the implementation of this concept is not possible without involving enterprises and other institutions. It is obvious that organisations do not work ‘by themselves,’ and their main driving force are their employees. In this manner, it can be pointed out that an important, if not the most important, element which is critical to the implementation of the idea of sustainable development lies in the introduction of the concept of sustainable development of employees.

Health is an important area which balances other areas. Usually in public opinion polls it is indicated as one of the most important. Therefore, in order to examine the possibility of implementing the concept of sustainable development of employees, it is necessary to examine the possibility of introducing this concept in the healthcare first. This means that healthcare must be analysed from at least two perspectives, i.e. as:

1. a system that enables the implementation of postulates for sustainable development of employees, and
2. a system in which the implementation of the concept of sustainable management should be implemented first.

This is justified not only by the significance of healthcare for all citizens, but also by objective reasons – problems which are currently encountered by the healthcare system.

Sustainable development of employees

The concept of sustainable development has gained immense popularity. This took place despite the fact that it has not achieved a fully satisfactory operationalisation yet. It seems that all the attempts to establish a common definition were fruitless. These results, among other things, from the fact that ‘sustainable development’ is the concept used both by researchers, practitioners, activists and politicians.

The above facts do not prevent the prism of ‘sustainable development’ from being defined more and more often as part of international, national, and local policies. Adherence to the ‘principles of sustainable development’ is intended to be the path to a better life for both present and future inhabitants of the Earth.

It is relatively easy to criticise this approach because its scientific grounds seem to be fragile. However, it certainly cannot be denied its significant potential to bring about positive change. On the other hand, it would be hard not to notice that the postulates of sustainable development were also included in the Polish law. Art. 5 of the Constitution of the Republic of Poland stipulates the main tasks of the Republic of Poland, such as protecting independence and integrity of the borders, ensuring freedoms and rights of a human and citizen, security, protection of national heritage, and ensuring environmental protection, and all these tasks should be carried out in accordance with the principle of sustainable development (the Constitution of the Republic of Poland).

Naturally, it would be impossible to argue with the idea of balance itself, and it is particularly difficult to do so due to economics established within the framework of many ideas concerning the balance of diversified needs, interests, and forces. It is much more difficult to come up with answers as to what criteria should be taken into account and how they would be ‘balanced.’ In view of the magnitude of partially inconsistent, and often contradictory approaches regarding the idea of balance, the difficulty of this task seems to be similar to that of objective measurement of usefulness, and one could assume with high probability that the results may be similar as well. Particular proposals of theorists and practitioners give rise to discussions, and the problems they reveal seem to be often insolvable or quite the opposite – they propose a great deal of solutions. Choosing the most accurate one is complicated also due to the lack of reliable measurement tools for individual areas subjected to ‘balancing’ and the subjective nature of many of the criteria that could be potentially taken into account.

The recognition and exploitation of a significant practical potential of a given approach does not require its prior full operationalisation or a clear definition. Therefore, in parallel with the concept of sustainable development, a sustainable

enterprise approach began to emerge which, while implementing sustainable development concepts, ensures economic, social and environmental benefits at the same time. The above list of 3 criteria can certainly be extended by dividing the criteria into their components, as well as by adding new areas to the list. It is worth pointing out that these criteria do not constitute a list, but a plane or dimensions and, as a result, an attempt to define a sustainable enterprise is not so much a definition of a list of features that an enterprise should meet, but rather a set or matrix of features that should be constantly characterised by undertaking all actions, and these features remain in complex relationships with each other.

An attempt to come up with a more precise definition of sustainable enterprise must have affected its employees, and so the term ‘sustainable human resources management’ has appeared in the literature. An analysis of the theoretical proposals for sustainable human capital management may refer to, among others, the balancing areas:

1. Professional life (work) – private life;
2. Appeal to a specific employer – attractiveness on the labour market (employability);
3. Implementation of the guidelines imposed – employee autonomy;
4. Exploitation of competencies already held by the employee – development of competencies;
5. Short period – long period;
6. Workplace safety and comfort – profitable employment conditions;
7. Motivation for improving performance – the safety and health of employees (compare Zaleśna & Wyrzykowska, 2017).

An attempt to come up with a dynamic identification of the issue of human capital management will always focus on the volatility of human capital and the possibility of an intentional impact on this capital through conscious decisions. This means that the essence of change is to strive for the development of human capital and the development of human capital management in the organisation. The combination of a dynamic approach to HCM and the concept of sustainable development translates into sustainable development of human capital or, within the framework of a slightly simplified approach, of employees.

At this point, it should be noted that the above-mentioned balancing areas should not be understood dichotomically. On the contrary, an appropriate approach would involve an attempt to combine them creatively. In other words, it would be unfair to identify balance through the concept of bargaining or compromise, but rather through the concept of searching for a synergy effect and obtaining additional benefits instead of sacrificing resources or own interests. For example, the most valuable inspiration from the sustainable approach cannot be to design jobs in such a way as to have the least negative impact on the company’s financial performance. The

aim should be to design work processes and workplaces in such a way that greater comfort of work is accompanied by greater safety for employees. Additionally, in order for the implemented solution to be conducive to the development of employees' competences, it should also necessarily increase the profits of the organisation at the same time. The proposed solutions within the framework of the sustainable approach should, therefore, implement simultaneously as many demands as possible addressed to both people and organisations they create as entities constantly striving for perfection in many areas at the same time, and not in one or two areas at the expense of all the others.

The role of healthcare in the sustainable development of employees

Among the most important elements shaping the value of human capital on the macro scale, one can indicate such elements as the education system or the system of labour market institutions, but also the healthcare system. The latter has an enormous influence on the others and can be called fundamental (Domański, 1990). The loss of health by employees means at least partial loss of effectiveness.

It is worth pointing out that European countries, although not exclusively, are currently very active in all macroeconomic factors affecting the value of human capital. This makes it possible to monitor the effectiveness of such solutions. As the observation of the practice of attempts to solve the problem of the healthcare in Poland shows, not only is the state not able to secure the needs of its citizens, but also to define them ('basket of benefits'). Obviously, it is possible to indicate examples of other countries that manage this task much better. However, it should be remembered that there are countries where the state has never played any significant role in this area, and yet they have achieved a very high level of quality and availability of services.

The state is able to create numerous pathologies, which must be combated with private funds. Unfortunately, it also seems that the incompetent private financing of medical care causes pathologies. However, at this stage of research it is impossible to compare in a satisfactory way the positive and negative consequence of using public and private solutions.

Simplifying, it can be said that:

1. The health of employees is a fundamental category, whose ultimate significance and necessity for balancing is revealed when a valuable employee dies by overwork – *karoshi* (cf. Nishiyama & Johnson, 1997).

2. Work has an impact not only on health, but also on the desire for both professional life and personal life as a whole, which is fully revealed by *Karojisatsu* – ‘suicide in connection with work’ (cf. Amagasa, Nakayama, & Takahashi, 2005).
3. The health of employees is a graded category:
 - a. Work can have a negative impact on the health of employees (reducing their well-being and life expectancy);
 - b. Work can have a neutral impact on the health of employees;
 - c. Work can have a positive impact on the health of employees.
4. Employee health is an objective category (it is possible to objectively assess someone’s health), but subjective assessments of well-being may be of significant and even key importance.
5. Both the objective character of the tasks and the way they are performed, as well as working conditions, working atmosphere and implemented management tools have a direct or indirect impact on the life and health of employees.
6. There is a link between the health of employees and the effectiveness of their work and the effectiveness of the organisation, but it is not a link that automatically improves the effectiveness and it is expected that the incompetently implemented solutions aimed at improving the health (welfare) and well-being of employees will have a negative impact on the effectiveness of the organisation not only in the short term, but also in the long term.

The most spectacular evidence of the importance of employees’ health protection is provided by the failures in this area in the form of mass suicides in specific companies, accidents at work, sudden injuries or fatalities caused by a heart attack or stroke at the workplace. It is wrong to see health protection as a task to be carried out in response to an employee’s disease.

Diseases are very often the result of negligence, often long-term, and often deliberate actions directly or indirectly resulting from professional activity. In order to prevent such treatment of the problem of employees’ health, a whole series of complicated obligations and procedures have been imposed on employers, which, however, are often only superficial in nature and, according to the observation of the practice, rarely fulfil their purpose.

It seems that most of the actions taken by employers in the context of employee protection are based on the following premises:

1. Performance of obligations imposed by law (‘periodic check-ups,’ ‘occupational medicine’);
2. Response to problems which are a reaction to an employee’s disease (access to a physician in the event of a sudden deterioration of their health condition in order to restore their health and occupational activities quickly);

3. Responding to problems wasting employees' time that could be used for professional work (access to specialised physicians at convenient hours to avoid routine visits, e.g. to obtain prescriptions for medicines or standard health check-ups);
4. Positive distinction on the labour market (offering higher standard 'medical care packages' is perceived as one of the methods allowing for effective recruitment of valuable employees, and in some countries where medical services are expensive (e.g. the USA), it may be one of the main reasons for taking up a permanent job).

In addition, enterprises engage in other activities that have the promotion of health, life satisfaction (including with professional life), efficiency and well-being as their purpose or one of their objectives. An example of such initiatives is the mass provision of membership cards to fitness clubs to employees. The offer of this type of activity is expanding constantly and rapidly. Examples include the promotion of healthy eating and the provision of 'access to healthy products and beverages,' rather than just the possibility for employees to eat.

The observation of reality shows that in most cases these actions are not coherent programmes and are implemented mainly because of their short-term benefits. The effectiveness of such activities requires long-term research, and therefore, it is possible that current programmes are harmful in the longer term. For example, easy access to physicians may motivate people to give up or at least reduce their priority to periodic examinations and preventive actions in favour of easily accessible reactive actions. This is only a thesis, but certainly worth verification, because the behaviour to which employees with additional medical insurance are motivated is the exact opposite of what health experts recommend.

At this point, it should be noted that in addition to the public system, there is a private healthcare system operating and constantly developing. It is estimated that the share of private medical services will account for over 45% of the market in 2020 (PMR, 2017). This data can be seen as an assessment of the effectiveness of the public health system, but also of its priorities, which consistently ignore the health issues of 'efficient citizens,' i.e. those who are net taxpayers and on whom the task of maintaining the state, its services and, to an ever-increasing extent, other citizens has been imposed.

Health as part of sustainable employee development

The development of each sustainable action programme should start with specifying a set of objectives and assessment criteria that will reflect all areas subject to balancing.

The next step is to define sustainability as such. It can be interpreted as the implementation of a set of objectives at the expense of another, e.g. we will produce less, but to a lesser extent we will endanger the safety of employees, or as the pursuit of joint implementation of legitimate postulates, e.g. we will produce more, while reducing the risk for the safety of employees and unnecessary costs of operation and better matching products to the needs of customers.

Where any action is to affect employees, it is necessary to take into account the differences between people, their needs, aspirations and subjective assessments of the various phenomena and the objective situations in which they find themselves. This means taking into account the individualisation of the process, but at the same time ensuring its consistency within the organisation. In other words, taking into account both the need for universalisation of activities under the programme and individual needs, which is also a sign of a balanced approach. Here it can be pointed out that if the creators of a given programme concentrate on universalisation or individualisation, the cost will be the limitations of optimisation opportunities for the organisation and its employees. However, if the creators focus on the sustainable approach, the result can and should be a better match with the needs of both the organisation and the employees. It stems from the fact that it is possible to use employees' creativity to design a programme and thus to improve not only the programme, but also its objectives and the way it is implemented and executed.

In the case of sustainable development of employees taking into account health problems outside typical activities in the area of HRM, such as determining the direction of the employee's development, ensuring appropriate development opportunities, providing resources for development, including, in particular, time and access to knowledge (competences), it is necessary to take into account a wide range of elements affecting the health of the patient. This means taking into account, among others, his/her family situation, risks, habits, etc. In this way, it will be possible to develop an individualised programme for maintaining health or developing the condition and well-being of employees, covering, for example, such elements of life as anticipation of health risks, periodic examinations, medical check-ups, nurses, other medical specialists, diet, movement, sports exercises, etc. The development of an integrated and sustainable programme will make it possible to include other areas of activity such as family life, hobbies, etc., for example, by preparing meals with children or pursuing hobbies on the way to work or in connection with the work performed.

It seems that such a programme could deliver a whole range of benefits, including financial benefits (RAND, 2014; AMA, 2019), but there are numerous problems in its implementation.

Healthcare problems in Poland and possibilities of solving them

There are many reasons for the lack of mass introduction of an integrated approach to patient health. Among them, one can mention both ethical (is it appropriate for the employer to interfere in such private aspects of life as the health of their employees?), financial (is extending the life expectancy of citizens indefinitely an action that will accelerate the bankruptcy of the state?), as well as competence (do we have appropriately competent employees to offer comprehensive healthcare services?), and effectiveness (do we have enough human resources to be able to think about expanding the existing range of healthcare services?).

First of all, it should be pointed out that Poland has the lowest number of physicians available per 100,000 residents in Europe (including non-EU countries such as Switzerland, Norway, Serbia or Albania). It is estimated that there are 2.4 physicians per 100,000 residents available in Poland (in Germany: 4.3). A similar situation applies to nursing staff (Rostkowski, Strzemiński, & Szymański, 2019a). In the years 2012–2019, the number of places in medical studies was increased by 50% by a decision of the subsequent Ministers of Health pursuant to the Act (Higher Education Act), which means that the upper limit of the capacity of the medical training system in its current form has been approached. Currently, it takes a dozen or so years to train a physician to be considered a fully functional professional. This means that the measures now being taken are not intended to improve the situation, but rather to avoid a tragedy. According to the SGH research team's estimates, assuming a very high involvement of physicians (readiness to work at the retirement age) similar to the current one and a huge involvement of forces and resources, Poland will be able to reach the level of availability of medical personnel currently experienced by countries such as Lithuania or Slovakia within 15 years, and it will be possible to reach the level of Hungary after about 20 years. Irrespective of the scenario, reaching the level of Germany at any given time requires significant changes in the system of educating physicians (Rostkowski, Strzemiński, & Szymański, 2019b). The above facts clearly indicate that the challenge in Poland is to maintain continuity and availability of health services at any level. The above statement is true while maintaining the current approach to healthcare system management based on the recognition that a greater number of services is possible to provide primarily due to the increase in the number of available staff and the shared, but undeniably erroneous, conviction that increasing the financing of the healthcare in Poland will improve the availability and quality of medical services.

When adopting the sustainable approach, it is possible to change the paradigm of healthcare and provide more services without the need to increase rapidly the

availability of medical personnel (which is not possible), and at the same time expand the spectrum of provided services, improve their quality, and significantly improve citizens' opinions on them.

Some of the healthcare problems in Poland seem obvious and result from comparative research (cf. OECD, 2017), the NIK research (NIK, 2018), or observation of the practices of countries with a similar economic potential and better developed medical services such as the Czech Republic. These types of problems include:

1. Too many hospitals and hospital beds in Poland;
2. Too high fragmentation of medical specialisations;
3. Too high fragmentation of specialisations in other professional groups and too high fragmentation of professional groups as such;
4. Waste of resources within a 'system' (unnecessary hospitalisations, unnecessary research, etc.), resulting from the fact that the healthcare 'system' in Poland is not a systemic solution, but rather a collection of randomly built units and institutions;
5. Lack of solutions to the problem of reluctance of Poles to co-pay for medical services despite the fact that a large part of medical services is already financed from private funds (cf. Kolasa, Leśniowska, & Borek, 2018).

At least in part, these problems are very easy to solve. An example is the proposal to use the existing hospitals and redundant hospital beds for long-term care of patients in Poland. However, regardless of the actual ease of their solution, they are usually considered to be 'political' problems, which, as the observation of the practice confirms, automatically makes them not so much difficult as impossible to solve in the eyes of most experts. For these reasons, the team of experts from SGH Warsaw School of Economics and the Ministry of Health accepted the challenge of identifying opportunities for radical and real improvements of the situation in the healthcare in Poland in the short term. Every action that increases the availability of benefits by at least 25% was considered a radical improvement. As real solutions are considered those changes that do not postulate a sudden increase in the number of staff (in the absence of such a possibility), and do not postulate a surge in healthcare expenditure (the experience gained so far with increasing the financing of the healthcare in Poland does not seem to be encouraging because the main problem does not concern financing, but the scarcity of available resources and therefore, it is realistic that an increase in the financing of services leads to a decline in their availability).

One of the sources of inspiration for the development of these recommendations was an integrated and balanced approach to the design and management of complex systems. As a result, a number of changes have been identified that are potentially interesting and relatively easy to implement. These include:

1. Reducing the number and cost of unjustified hospitalisation services (e.g. patients abandoned by their families/legal guardians for holidays or longer periods of time – ‘derelicts’);
2. Reducing bureaucracy in terms of keeping minimum double documentation, reporting and process automation with the use of simple IT solutions;
3. Use of service design on an example of SOR (ER), and more broadly, in-patient service;
4. Clear identification of tasks and roles of medical personnel and certification of professional competence;
5. Accreditation and possibility of improving the HCM mechanisms.

The proposals are based on the idea of sustainability. The first one balances substantive and legal obligations and is based on the principle of cooperation between public institutions (police, prosecutor’s office, court, hospital, social assistance). The second proposal is to balance automated duties with those requiring vigilance and attention from the staff performing them. The third proposal is to use the concept of balanced responsibility for health, covering both medical personnel and patients. The fourth concept is the idea of balancing the currently dominant, theoretical way of preparing for the practical performance of professional duties. The last proposal concerns the application of an integrated and sustainable approach to human capital management in the healthcare in Poland.

Conclusion

Sustainable development of employees, similarly to a sustainable enterprise or organisation and sustainable development of a country or the world, can be defined in very different ways. It is impossible not to notice that the idea of sustainable development is used by various ideologues that want to change societies to conform to their own vision of what is good. Apart from the resulting risks, it should be pointed out that an unacceptable approach to defining sustainable development is the definition according to which one should resign from some good resulting from development to support another. A much greater creative potential can be found in such an approach to sustainable development which assumes that development in one area should be implemented simultaneously with development in others, and therefore, only such an approach should be considered appropriate in the area of human capital management.

Undoubtedly, the health of citizens/workers is an extremely important aspect of the operation of states, societies, companies, and organisations. Work can and should have a positive impact on other areas of life, but it can also have a negative impact.

Moreover, potential non-occupational health hazards affect work efficiency. On the other hand, the introduction of sustainable employee development programmes requires the resolution of very important problems, including ethical ones.

In Poland, there is a difficulty in implementing the idea of sustainable development of employees, unique in Europe. This is due to many years of omissions not only in the area of healthcare management, but also, and above all, to the total incapacity of the state. This incapacity is so serious that it is not so much about ensuring access to health services for citizens, as about defining these services and, in consequence, effectively ensuring human capital capable of delivering them. These problems are not attributable to employees or citizens who generously sponsor the healthcare, which, as a quasi-system, is not even able to answer the question of what services it feels responsible for, of what quality and when they will be offered. The state monopolised key decisions, including those concerning the education of medical personnel. As the analysis of the current situation shows, it did not have the competence to make such decisions properly or even to imagine the scale of the difficulties of such decisions. The scope of information necessary to make decisions of this type was also not known. As a result, the state simply did not have and does not have the necessary knowledge about the available resources, existing needs, and possibilities of satisfying them, and now it tries to fill these gaps.

Regardless of the reasons for the current state of affairs, the modernisation of the healthcare cannot be based on the improvement of currently adopted methods of operation. There are neither financial resources nor a sufficient number of suitably competent contractors available. The necessary improvement measures may be based, among other things, on inspirations from the concept of sustainable development.

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