

Concept of Healthcare in General Medicine Discipline.

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Ministry of Health of Slovak Republic according to paragraph 45 art. 1a, law no. 576/2004 on healthcare and healthcare services and changes of other laws in consent with further regulatios, issues this concept:

1. Content of healthcare in the discipline

Content and main goals of healthcare in the discipline, specification of activities

General medicine is a specialization aimed at primary healthcare provided in general practitioner's office, and creates the basis of healthcare system in Slovakia. As a scientific discipline, it has it's own specifications of healthcare providing, managing, research, networking, information database, education and quality management.

Content and aim of discipline:

- to provide the first contact with healthcare provider,
- to provide equity in access to free and non limited general office healthcare,
- to decide on the matter of healthcare providing using the own potencial, reffering to office of specialist, or hospital – it meens gatekeeping and selection desicions,
- to provide integration of healthcare, it's continuation and availability during the life-cycle of person,
- to ensure providing of complex and continuous healthcare to adults regardless of age, race, gender and religion,
- ensure the management of healthcare of the person,
- ensure quality and effectiveness of whole system of healthcare providing

General practitioner in the process of decision making evaluates all the categories of health problems, taking to acccount socio-economic factors and the enviroment, in which the person works and lives. Specialization has multidisciplinary character and integrates own findings with the findings of respective specialisations, leading to complex management of person's health. It is the closest and the most available healthcare. Unreplaceble is the role of general practitioner as an adviser in the situation of pesimal crisis of the patient – acting also as an adviser in the complex of social and personal problems.

Characteristics of healthcare in the discipline

Characteristics of the healthcare in the discipline is a complex range of activities on the level of general healthcare: health support, prevention, early and rapid diagnosis, diferential diagnosis, complex therapy, rehabilitation, and other therapy, including first aid. General practitioner provides the healthcare with all the available knowledge, using own resourses and utilities. If needed, he/she provides effective use of other healthcare services. In his work he follows the integration and coordination principals of general medicine, including the management of health status of the person. During his specialised work he takes to account the regional problems and the state healthcare situation.

In prevention general practioner knows and applies:

- state prevention programs, and applies them in his work - mainly vaccination, depistage, screening, faith against alcohol and drug abuses,
- methods and system of dispensarisation of healthy, potentially ill and chronically ill,
- methods of depistage and faith against the infectious illnesses and rules of cooperation with the offices of public healthcare,
- basis of hygiene surveillance and control in certain area, community, fabrics and other objects,
- organization and methods of preventive checks,
- rules of healthcare education of population,
- evaluation of ability of person for certain activities.
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In diagnostic and treatment procedures general practioner knows and realises:

- basic and complex examination of person in the office, domestic all other natural enviroment of the person,
- utilisation of diagnostic and treatment methods in the office and outside the office – methods, utilities and tools,
- indications for laboratory, functional and other supportive examinations, indications for special examinations and hospital addmition,
- diagnosis an cure of emergency situations (disconsciousness, shock, acute cardiovascular and respiriory failure, acute intoxications, acute vascular and abdominal attacks, disorders of electrolyte and water balance, coma, other disorders of consciousness and behaviour),
- differential diagnosis of illnesses using person's history, own examination, laboratory and other examinations, including ECG,
- evaluation of own resourses and abilities to diagnose and treat the condition and early reffering to specialist,
- first aid and resuscitation of vascular and respiratory disorders, extracorporate cardiac massage, pain relief, treatment of shock and coma,
- first aid during accidents and bleedings,
- first aid during the partus,
- monitoring and usage of new treatment methods and new innovative medicaments,
- acupuncture, homeopathy and other complementary treatment methods,
- diagnosis of death, basics of autopsy and forensic medicine.

As a part of rehabilitation general practioner knows:

- basic methods of curative and labour rehabilitation, functional examination of motion system,
- indications and applications of rehabilitation techniques, indications and basic methods of manipulation therapy, soft technigues amd massages,
- prevention and tretment with rehabilitation,
- indications of rehabilitation methods in domestic enviroment,
- pooperative treatment and care of person in domestic enviroment.

In the area of work organisation general practioner knows and realises:

- concept of specialisation and it's practical application,
- principals of managing, work organisation and control,
- principals of control of work safety

- cooperation with regional institutes, state institutes, health insurance companies and social insurance company,
- cooperation with community social network,
- activities for health institutes, health statistics, mandatory reporting of illnesses,
- cooperation with scientific societies and healthcare organisations,
- conditions for organisation and participation on activities of continuous education, including clinical days
- basics of psychology

1.3. Cooperation with other specialisations:

Detailed description of general practitioner's activities for respective organ systems describes the competences of general practitioner and principals of cooperation with other disciplines. As an appendix to concept of general medicine it will be detailed in structure:

- clinical knowledge,
- organizational knowledge,
- practical abilities,
- competences.

1.4 Scientific and methodology management of care in the specialization:

Basic working place in specialization of general medicine is general practitioner's office. The care is also provided in domestic or other natural environment of the person. General care is provided by general practitioner, or medical doctor in the process of preparation for the specialization of general medicine and nurse with appropriate knowledge.

Offices of general medicine are a part of public minimal network.

The discipline is managed by Ministry of Health of Slovak Republic and by the main expert for the discipline of general medicine, who closely cooperates with scientific and professional organizations of general practitioners as Slovak Medical Chamber, Slovak Medical Society, Slovak Society of General Practice, section of general practitioners by the Association of Private Doctors in Slovak Republic. He also cooperates with labour union and the regional doctors.

General medicine has its own scientific activities in the discipline, aimed at specific questions. Theoretical and practical medical disciplines investigate mainly general rules of medicine. Their proof at the level of certain person or population sample is in the competencies of the specialization of general medicine. Appropriate is mainly concentration on clinical manifestation of illnesses, early diagnosis, natural course of illnesses.

Epidemiological problems are characterized by the structure of morbidity and mortality in certain region during the long-term follow-up. Monitoring the risk factors, mainly those, which could be influenced, is of special significance. Social problems and early medical help, social structure of the family and its influence on person are of special importance. Important is also monitoring compliance, and its influence on drug efficacy and adverse events.

1.5. Compulsory reporting and evaluation of statistical data:

General practitioner monitors and reports in specific format certain data required by the law.

2. Development of care in the discipline

2.1. Trends in the development of care

Following the transformation steps in healthcare, the centre of healthcare will be in general practitioner's office. General practitioner will play the key role in the area of prevention, diagnosis, treatment and integration of healthcare and management of the person.

2.1.1. Prevention

Prevention is unreplaceable part of general practitioner's work.

It is realised by regular preventive checks, including vaccination. General practitioner realises periodical checks of employees, taking in mind risk of certain professions. Performing the regular preventive checks concentrated at frequently occurring illnesses, their treatment and education of persons will lead to global social impact and improvement of health status of population.

In the area of prevention general practitioner concentrates at nosology subjects according to priorities of state health policy:

- cardiovascular disease (arterial hypertension, CAD, strokes)
- other illnesses with social impact as diabetes mellitus, disorders of lipid metabolism, osteoporosis, malignancies, mental and behaviour disorders, alcohol and nicotine abuses, drug abuses.
- In depistage of illnesses general practitioner concentrates on person's history, questionnaires prepared on the basis of international guidelines. He recommends subsequent necessary laboratory and specialised examinations. In the prevention of malignancies he recommends examination of specific cancer markers after the age of 40 in 3-5 years interval, according to the medical history questionnaire.

2.1.2. Management of medical care of the person

In the hierarchy of office healthcare general practitioner manages the care, his unreplaceable role is gatekeeping and integration of all examinations and treatment, their continuity and availability. Managing of person is based on effective consonance of diagnostic and therapeutic procedures, with the aim of earliest possible beginning and successful course of the treatment. Managing of person by GP helps to avoid excessive examinations and drug prescriptions, which could be harmful for the person. GP concentrates on effective use of public resources of health insurance, on effective investments in healthcare status of population.

2.1.3. Preparation of general practitioner to new tasks

Education of GP will be inevitably adapted to final version of healthcare system. It will be inevitable to maintain the advantages of national system of healthcare providing and education and guarantee the demands of EU on the quality of healthcare provided. Research will be more and more closer to respective person and sample of population, leading to detection of the potential epidemiological consequences between the environment, habits and action of the person and his health status, and health status of the population. It will be inevitable to create integrated information system, enabling continuous evaluation of data, their availability in the management of health care. The results of data capture will support the

creation of databases and national guidelines, standards and quality indicators. This will lead to measuring the health status, quality of healthcare, effectiveness of resources usage at all levels of healthcare management. Shift of competences to general practice will lead to allocation of financial and personal resources, consolidation of the discipline with experienced general practitioners, prepared to work in the field.

It will be inevitable to widen the network with psychological and social services, amend the structure of domestic healthcare. Aging of population will lead to creation of daily sanatoriums, rehabilitation offices and other services in the region managed by general practitioner. General practitioner will play the key role in solving the problems with aging population.

2.2. System of quality control in the discipline

General practitioner realises various system of quality control, according to practice in EU. System of quality is any system documented in writing, with the goal of effectively managed planning, organisation and managing of GP's activities to achieve better results. The goal is to achieve the match between the office activities and the demand of all involved (GPs and other specialisations, MoH, HIC).

To achieve above mentioned goals, the system of quality has to contain:

- a, specification of quality, creation of standards and indicators of efficacy,
- b, monitoring and measuring the efficacy of processes, control of quality markers, e.g. by quality indicators,
- c, possibilities of implementation and improvement of quality system in GP's office,
- d, continuous improvement of quality, maximalisation of satisfaction of target population,
- e, minimalisation of mistakes in target population and mistakes of personnel providing healthcare and in management of healthcare,
- f, evaluation and certification of quality system.

Ensuring the quality system by general practitioner has following conditions:

- a, all the personnel and technical conditions stated separately has to be fulfilled
- b, in the process of healthcare providing the healthcare law and other respective laws has to be applied, in case of missing, the scientific knowledge generally accepted and in the accordance with good clinical practice will be applied,
- c, the result of this effort will be the best possible improvement of healthcare status of the person,
- d, enabling the patient's right to receive information on diagnostic and therapeutic procedures and risks,
- e, fulfilling the demands of various interest groups, including the demand for patient's safety,
- f, services has to be of high quality and efficacy, provided at high level and generally available, taking in account patient needs and effective and transparent usage of resources.

General practitioner in creation and maintaining of quality systems concentrates at all activities which could influence patient's health or course of his treatment, making the results evaluable according to national indicators of healthcare and health status of population stated by MoH. GP in creation and maintaining of quality system also concentrates at matching the standard diagnostic and therapeutic procedures and standards for minimal personnel and technical equipment needed for ensuring the safety of patient. Selection of appropriate quality indicators for GP will be in accordance with state healthcare policy.

2.3. Main problems in the discipline

Main problems in the discipline of general medicine are:

A, insufficient quality of services in GP's offices

Proposal for solution is realisation of the concept of general medicine.

B, high age average of GPs in Slovak Republic

Proposal for solution is strategic plan for motivation of students to choose the specialisation of general medicine, solution for financing the specialization process, financing and functioning of accredited GP offices, improving the financial and social evaluation of GPs.

C, insufficient allocation of financial resources of health insurance in to general practice.

Solution is better usage of motivation payments for GPs in accordance with the state healthcare policy.

2.4. International cooperation

Representatives of general practitioners are actively working in international organizations. Slovak republic is a member of: European Union of General Practitioners (EUMO), World Organization of Family Doctors (WONCA), European Academy of Teachers in General Practice (EURACT), Permanent working group of general practitioners in private practice (EANA), Regional union of general practitioners (RENECOP).

The relations with scientific societies of GPs in Czech Republic and Hungaria are very vivacious.

3. Education of specialists in the discipline

3.1. Specialised studies

Specialised studies of healthcare professionals in the specialisation of general medicine are performed in accredited specialised study programmes and certification programmes according to separately stated conditions.

3.2. Certification programmes

Healthcare professionals could further specialise in certificated activities.

3.3. Continuous education

Continuous education of healthcare professionals is performed according to separately stated conditions. Continuous education of healthcare professionals is organized and performed according to conditions stated by MoH: scientific societies of Slovak Medical Society, Slovak Society of General Practice, Slovak Medical University, faculties of medicine, Slovak Medical Chamber, professional organizations (e.g. Association of Private Doctors in Slovakia).

Continuous education is controlled by Slovak Medical Chamber.

4. Rejection conditions

The concept of general medicine, stated in part 21-22 of Official Publication of Ministry of Health, issued in September 1, 1980 is rejected.

5. Efficacy

This concept is effective since July 1, 2006.

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Minister of Health