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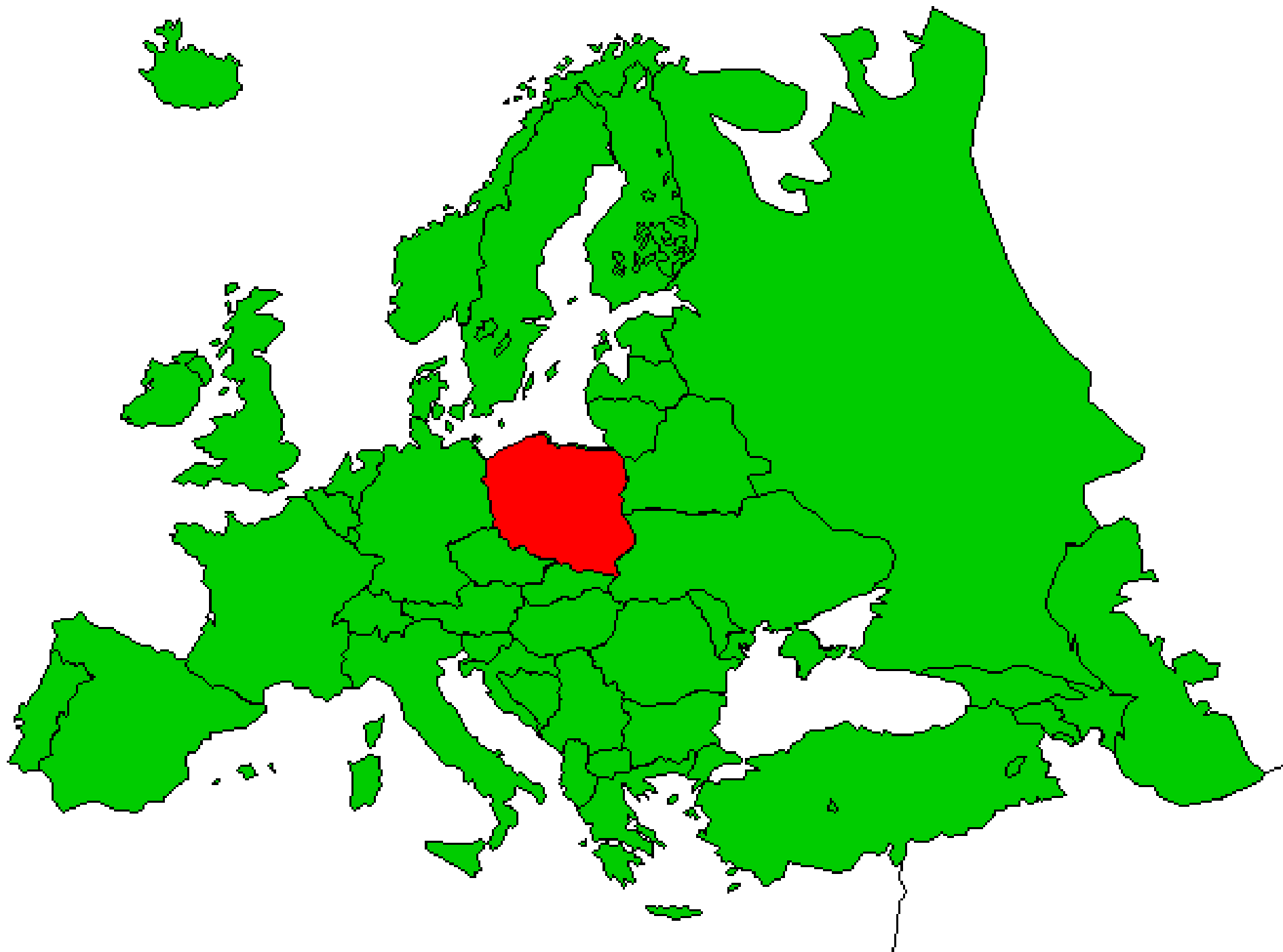
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**General medicine in neighboring countries
– why is the communication and good
cooperation necessary across the borders? –**

The Polish perspective

Bojnice Slovakia, 15 -17 October 2009



Background information

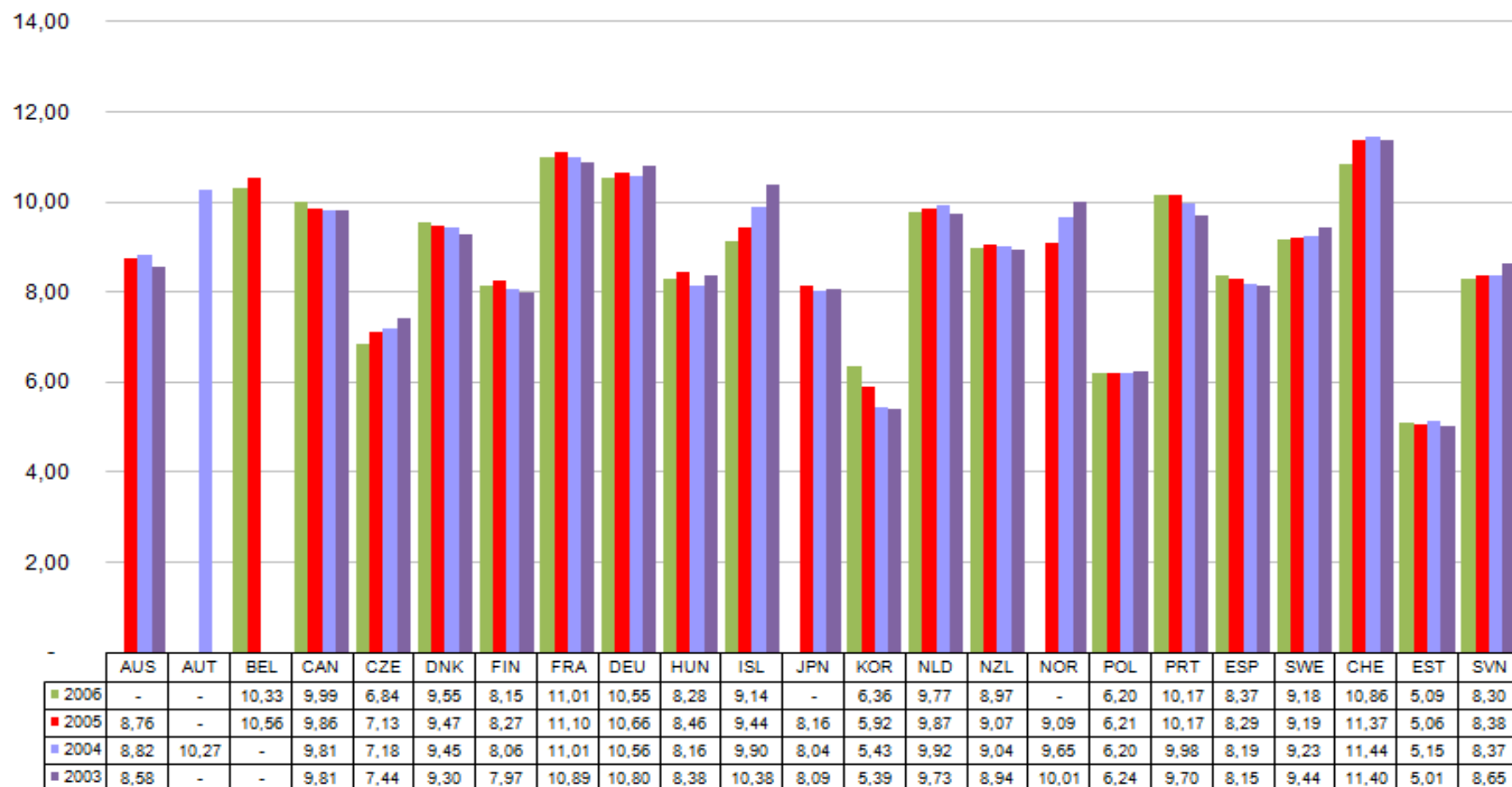
PRO-FAMILY DOCTOR



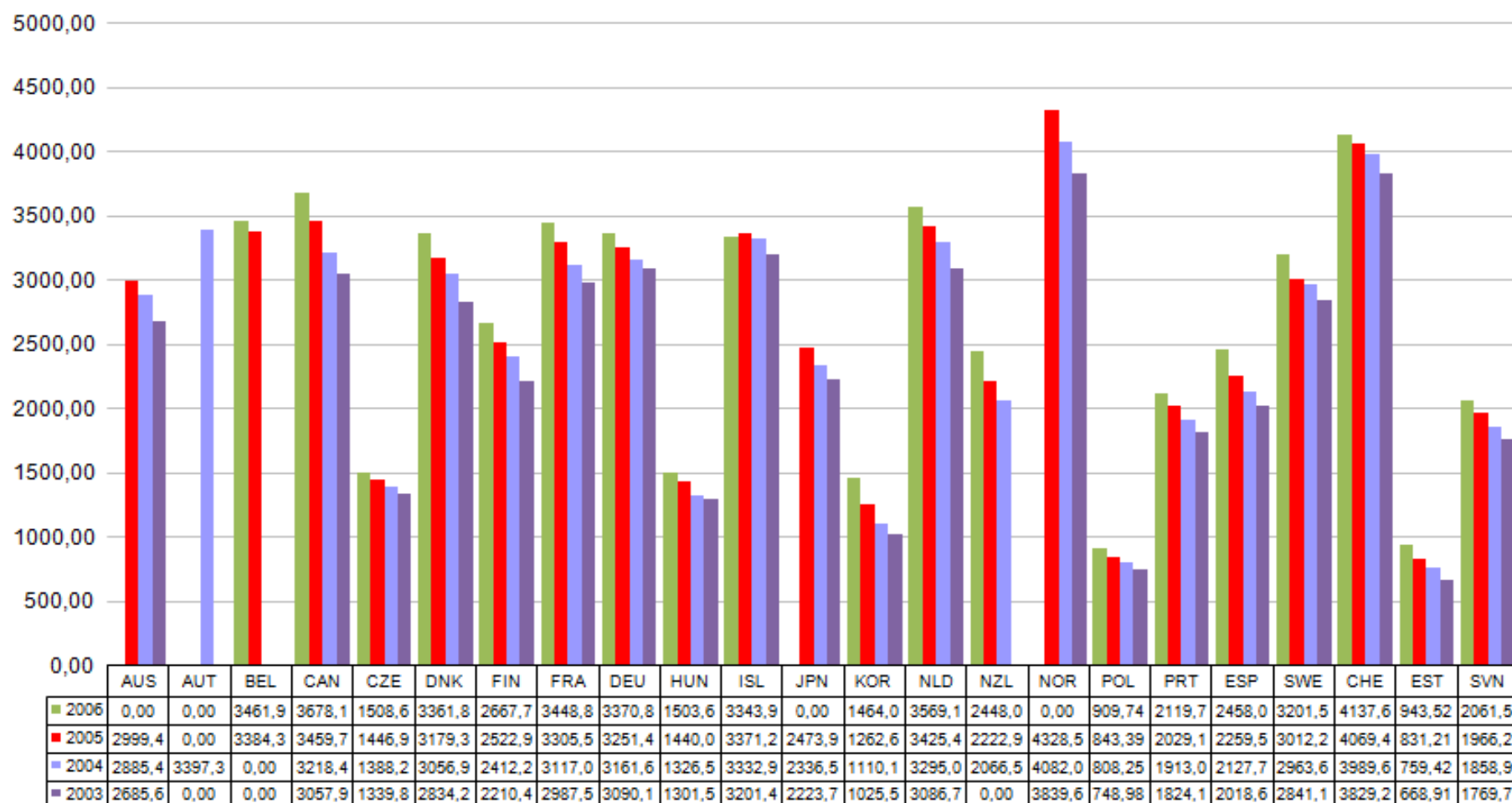
The Country, Its Population & Main Health System Statistics.

■ <i>Geographical location:</i>	<i>Central Europe</i>
■ <i>Population:</i>	<i>38.114.700</i>
- Urban population:	61,2 %
- Men 65 years and older & women 60years and older:	15,9 %
- Newborn mortality:	5,9 ‰
- Men life expectancy:	70,9 years
- Women life expectancy:	79,6 years

Total Health Expenditure as share of GDP, 2003 - 2006



Total Health Expenditure , per capita, USD PPP, 2003 - 2006



The country, its population & main health system statistics.

- Total healthcare expenditures 909\$ (2006)

public:	68,7%	624\$
private:	31,3%	285\$
- Hospital beds per 10.000 people: 46,3
- Physicians per 10.000 people: 20,3
- PHC consultations per person: 4,2

Healthcare system in transition since 1989

- *Budgetary system before 1999*
- *General public insurance since January 1, 1999 (17 independent funds)*
- *National Health Fund since April 1, 2003, (re-established in July 1, 2004)*
- *Payroll tax premium*
- *General coverage*

Primary healthcare reform



Primary Health Care in transition

- Replacement of traditionally multi-specialist clinics
- Growing number of independent family practices since 1995
- Decisions in hands of provincial or local governments

Key features of family practice

- Lists of patients since 1999
- Gate keeper function (with exceptions)
- Per capita payment

Scope of responsibilities

- Office and home consultations
- Preventive & curative care for both children and adults
- Basic laboratory analyses
- Basic X-ray and ultrasound procedures
- Community nursing
- Community midwife's care

Milestones of implementation

- 1991 Family Doctor Task Force
- 1992 College of Family Physicians in Poland
- 1993 Responsibility of Polish Family Physicians
- 1994 Vocational Training and specialization
- 1995 first independent practices
- 1996 first educational journal "Lekarz Rodzinny" (The Family Physician)
- 1999 Scientific journal "Problemy Medycyny Rodzinnej" (Topics in Family Medicine)
- 2004 Strong political representation of PHC providers „Porozumienie Zielonogórskie"

Office hours in the practice

08.00 - 09.00 Registration, blood
sample collection

09.00 - 12.00 Office consultations

12.00 - 13.00 Home visits

13.00 - 14.00 Lunch & administrative

14.00 - 17.00 Office consultations

17.00 - 18.00 Home visits

18.00 - 08.00 Deputizing service





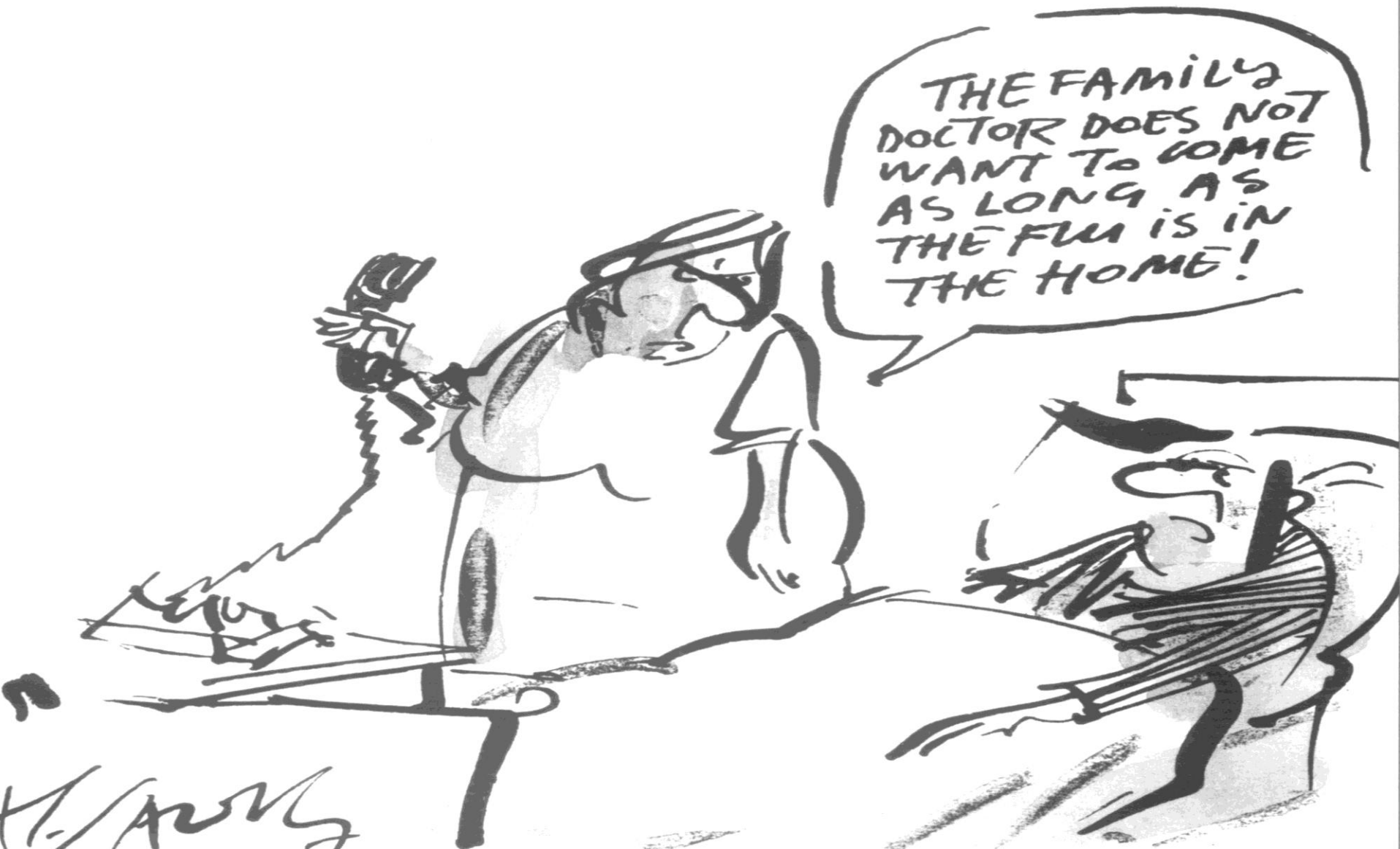


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Education



Medical education.

- 11 university medical schools (2387 physicians & 753 dentists graduated in 2004)
 - Family medicine - subject for undergraduate students
- Compulsory postgraduate internship
- Non-compulsory specialization
 - Family medicine - independent medical specialization since 1994.
 - Over 10500 physicians with diploma in family medicine

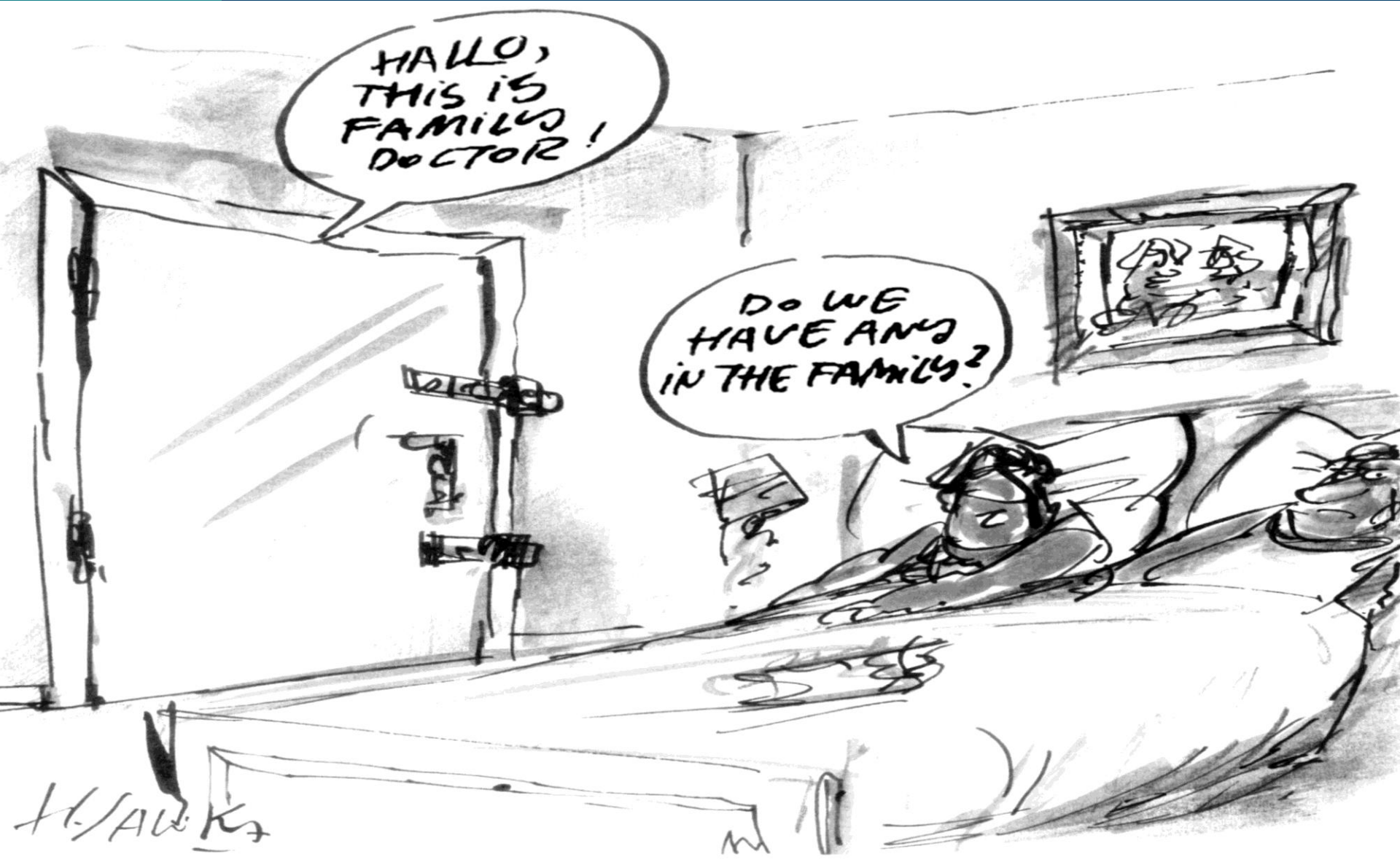
Vocational training

- Introduction to family medicine:
 - 2 months
- Hospital rotations:
 - 22 months
- Advanced family medicine
 - 24 months
- Special courses
 - 44 days

ASSESSMENT

- The national end-point specialist exam includes:
 - MCQ
 - OSCE
 - Oral
- Regular feedback to the trainees by their tutors regarding their performance.

Training of trainers



Selection criteria for trainers

Professional values
High standard of clinical competence
Experience as a doctor
Active in continuing professional development and quality assurance
Ability to communicate with the trainee
Teaching skills
Commitment to teaching
Time for teaching
Availability and accessibility to patients

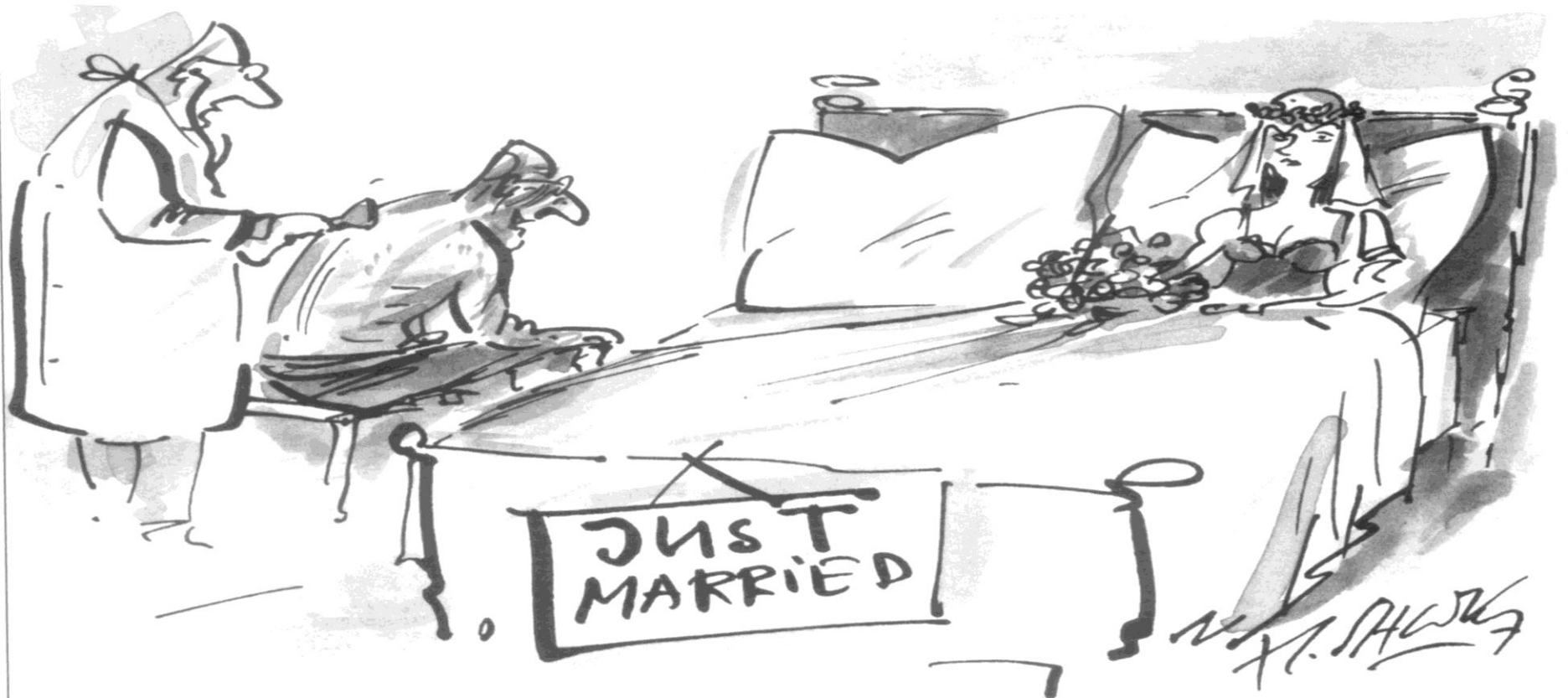
Leonardo EURACT course for trainers in family medicine

- ✓ Partnership of the Leonardo da Vinci project run by the College of Family Physicians in Poland European Academy of Teachers in General Practice (EURACT)
- ✓ Comprehensive, 4 days course on principles of training in family practice
- ✓ European implementation
- ✓ 450 graduates in Poland



Support for professionals

FIRST CONTACT DOCTOR

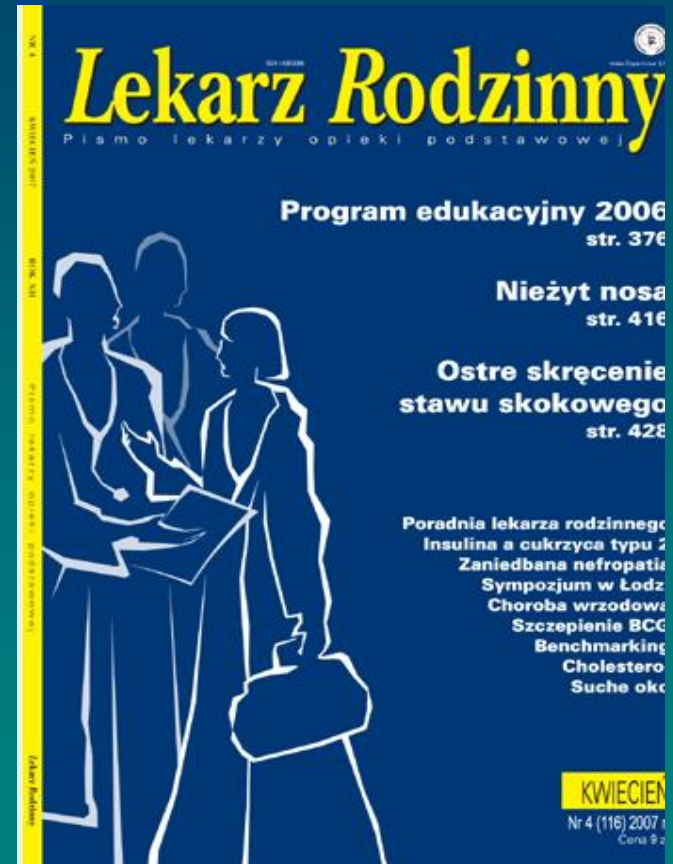




established in 1992

Educational journal

- Published monthly since 1996
- 15 000 copies
- Independent publisher
- Editor in Chief and Editorial Board from the College
- Free platform for the College



Scientific journal

- Published quarterly since 1999
- 2 000 copies
- Independent publisher
- Editor in Chief and Editorial Board from the College



Annual scientific meeting

- 1500 - 2000 participants
- Plenary and 8-9 parallel sessions
- Scientific, educational and social programme
- One organizer since 2001



Regional educational meetings

- Joint venture of the College, journal publisher and conference organizer
- 6 - 7 programmes every year
- About 70 conferences every year
- Scientific supervision of the College



Distance learning programme

- Produced by Leonardo da Vinci project
- 32 thematic modules
- Simple structure
- Self assessment part
- Over 1200 users



Guidelines

- Hypertension, asthma, COPD, chronic pain, Hp eradication, influenza, smoking cessation, diabetes mellitus
- Collaboration with other associations
- Financed by projects
- Mainly Delphi procedure
- Wide distribution and implementation



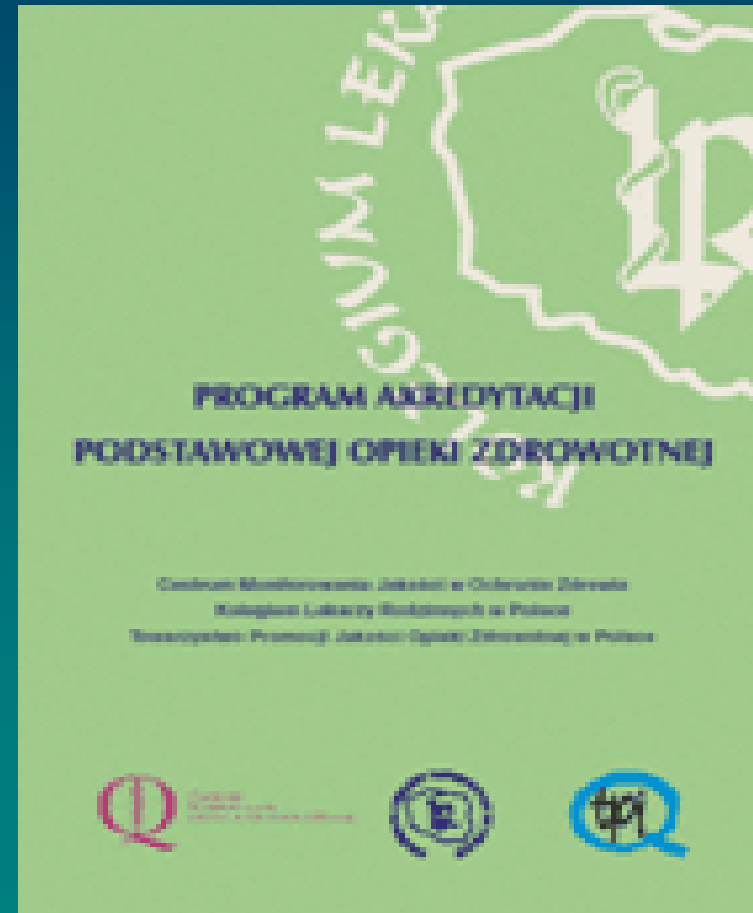
Courses and schools

- Leonardo EURACT course for trainers
- Asthma Summer School
- School of Tutors
- School of Prevention and Prophylaxis
- Research course



Accreditation programme

- Collaboration with governmental agency and other associations
- Voluntary participation
- Standards set by the College
- Training provided by the College



Practice software

- Partnership with software company
- Contents fully developed by the College
- Special prices for members



Position statements

- Responsibilities of Polish Family Physicians
- Health care system
- Contracting rules
- Educational principles
- Preventive activities



Where are we?



Lessons learned

- Family medicine is fully recognized specialty in Poland with its own clinical, educational and research agenda.
- New model accepted by patients
- Long way behind us and much longer to go!
- Expected needs in near future:
 - clear rules in the system
 - financial stabilization
 - effective use of resources
 - QA system
 - research on nature of family medicine

Why together?

- *Shared background and history*
- *Common problems and perspectives*
- *Exchange of information and experiences*
- *Better audibility at home and in Europe*

Already together?

- Yes, of course!

- ISGP _ Prague 2006
- ISGP 2 study
- RENECOP project
- FATMEE project
- PHAMEU project

Which way further?

- International projects (EU, WONCA, Vysehrad, other)
 - Healthcare systems
 - Public health
 - Research
 - Education
- Inter College collaboration