

Possible Problems in the Introduction in Ukraine of Medical Reform and the Practice of a Family Medicine Doctor

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Abstract: Currently, Ukraine is developing and phased implementation of medical reform, which involves the organization of work at the primary level of providing qualified medical help by a family medicine doctor. This reform can be accompanied by the development of possible medical and social and financial problems. The transfer of funding to the primary medical level and the possibility of allocating funds allocated to a specific number of residents assigned to a family medicine doctor can lead to the following problems:

1. The examination of patients only by a family medicine doctor in order to save the allocated financial resources and not performing complex laboratory and modern apparatus-instrumental additional researchers can lead to the establishment of an incorrect diagnosis, which will lead to the choice of the wrong treatment tactic and to the patient's serious condition, and in some cases and to death.
2. Treatment of patients only by a family medicine physician in order to save allocated financial resources and failing to consult with related specialists at the second and third levels of medical care, delay in hospitalization of patients to the hospital, may lead to the establishment of an incorrect diagnosis and the choice of the wrong treatment tactics, to a serious condition the patient, and to his death.

It is necessary to develop serious control conditions that will avoid the development of these problems when introducing medical reform in Ukraine.

Keywords: Medical reform, Problems, Family doctor

Introduction

The reform will start with primary care, that is, family doctors, physicians and pediatricians. Patients may apply to a family doctor, therapist or pediatrician, as soon as they feel the need for examination or treatment. In developed countries, primary care physicians without hospitalization resolve up to 80% of medical treatment using modern knowledge, basic equipment and most commonly used analyzes and medications.

All these services will be 100% covered by the state budget. A doctor will become a family agent in the health system. He will monitor health and fully provide primary diagnosis. For this, the doctor must be motivated, above all - financially.

From 2018, primary health care providers who have contracted with the National Health Service will start financing under the new model - an annual flat-rate payment for the maintenance of each patient with whom the doctors of the facility signed the contract. At the same time, the size of the payment for young people and the elderly will differ significantly in view of the increase in the number of appeals due to age characteristics.

It is important to remember that the primary link institution receives funds from patients and when they are healthy. The less they are ill, the less the doctor works, and the incomes are the same. So, we encourage doctors to take care of their patients. This model operates globally.

What Services Will Your Doctor Give You?

A primary care physician is a specialist who has all the information about the health of his patients. Because of this, he sees the relationship and can determine at what stage the intervention of a profile specialist is required.

Information about the patient's health will be contained in the electronic health system. Even when a citizen goes to another doctor, all information will be available.

The primary duty of the primary care physician is to prevent or detect early onset of the disease in a timely manner. And also to provide urgent help in acute conditions and sudden deterioration of health: high body temperature, acute and sudden pain, cardiac rhythm, bleeding, other conditions, diseases, poisonings and injuries in need of emergency care.

Method

Will this doctor treat the disease?

So. The primary care physician, in accordance with the protocol of treatment, examines the patient and assigns the necessary tests, most of which will be carried out immediately in the outpatient clinic. On the basis of the received information, the family doctor decides on the treatment of both acute and chronic conditions of the patient.

If necessary, the family doctor gives directions to profile specialists.

What else will be included in his duties?

- prevention of diseases at risk groups;
- vaccination;
- issuance of medical certificates and sick leave;
- Issuing recipes for the cost of the drug "Available medicines", including recipes for medicines for chronic patients.

In the villages of a family doctor, the local community chooses. Tariff wage rates for a primary care physician will be canceled. Rural communities will finally be able to substantially improve their primary care. By creating good conditions for life and work for a doctor, villagers will be able to invite promising specialists. A decent wage will be provided by the state.

Qualified doctors are ready to work in villages if, in addition to having a good salary, they will have accommodation with water and heating, equipped with a job and reimbursement of fuel costs for public transport.

If a small number of people live in a village, one family doctor can serve a few populated areas that are nearby. In this case, the doctor receives support from several local communities.

From 2020, the state will cover the examination, consultation and appointment of a doctor by a specialist or highly specialized medical establishment only upon referral from a primary care physician. As, according to statistics, the majority of appeals of citizens are within the competence of the family doctor without the involvement of a specialist or are in urgent calls.

A family doctor cannot write a referral to a particular specialist and / or a specific institution. He only indicates the profile of a highly specialized doctor. The patient independently decides where to contact him.

By 2020, to address the doctors of specialized or highly specialized medical institutions, patients can either on a direction, or on their own.

Results and Discussion

Primary reform does not cancel pediatricians. On the contrary, pediatricians will receive financial incentives under the same conditions as family doctors, since they are also primary care doctors. At the same time, the annual fixed payment for each child will be even higher than the average.

Like a family doctor, citizens can choose a pediatrician for their child separately. Or to serve the whole family in one family doctor. However, the Declaration on the choice of physician must be signed for each member of the family separately.

The pediatrician vaccines children free of charge in accordance with the schedule of preventive vaccinations

When a citizen needs urgent specialized assistance, he or she addresses to any emergency facility. The treatment of life-threatening cases will be 100% covered by the state.

Reforming the model of financing of specialized medical care institutions will start in 2019 and the highly specialized - from 2020. By this time, the reform of the primary care system will take place and the necessary statistics will be collected in order to translate changes into the secondary and tertiary links. At the level of specialized and highly specialized assistance, the state will pay directly to the medical institution for each medical service provided for transparent and uniform tariffs for the whole country. The tariff will include all expenses: both for medicines, for equipment repair, and for the work of doctors.

Each year, the volume of services guaranteed by the state and tariffs will be approved by the Verkhovna Rada within the framework of the State Budget, this document will be called the program of medical guarantees. The first program of medical guarantees will be approved by 2020, when a new financing model will work at all levels. All tariffs will be reasonable and open.

This means that within the state-guaranteed healthcare package, the state will cover 100% of the cost of treatment, including expendable materials and medicines.

Conclusion

The transfer of funding to the primary medical level and the possibility of allocating funds allocated to a specific number of residents assigned to a family medicine doctor can lead to the following problems:

The examination of patients only by a family medicine doctor in order to save the allocated financial resources and not performing complex laboratory and modern apparatus-instrumental additional researchers can lead to the establishment of an incorrect diagnosis, which will lead to the choice of the wrong treatment tactic and to the patient's serious condition, and in some cases and to death.

Treatment of patients only by a family medicine physician in order to save allocated financial resources and failing to consult with related specialists at the second and third levels of medical care, delay in hospitalization of patients to the hospital, may lead to the establishment of an incorrect diagnosis and the choice of the wrong treatment tactics, to a serious condition the patient, and to his death.

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References

For materials:

офіційного сайту Верховної Ради України (rada.gov.ua)

Урядового порталу (www.kmu.gov.ua)

офіційного сайту МОЗ (moz.gov.ua)

Український медичний часопис (www.umj.com.ua)

Медсправа (www.medsprava.com.ua)

Здоровінфо (zdorov-info.com.ua)

BBC (www.bbc.com)

DW (www.dw.com)

Аптека (www.apteka.ua)

НВ (nv.ua)

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