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Title	The development of academic family medicine in central and eastern Europe since 1990
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Coláiste na hOllscoile Corcaigh

The Family Medicine in Middle and Eastern Europe (FATMEE) Study instrument.

No.	Indicator		Comments
Area I. Role in Health Care System			
1.1	Is there an official policy document presenting current role of family medicine in your country? If yes, what kind of document is it?	[parliamentary law/ministerial decree/ scientific paper/other]	
1.2	Is there an official policy document presenting future development of family medicine in your country? If yes, what kind of document is it?	[parliamentary law/ministerial decree/ scientific paper/other]	
1.3	Are the competences of family physicians clearly described? If so, on which level?	[Government/insurance company/college/local authorities/other]	
1.4	Who is responsible for organization of family medicine/general practice services?	[government/local authorities/insurance companies/other - name]	
1.5	Is specialty in family medicine/general practice formally recognized?	[Yes/No]	
1.6	If so, has it the same formal status as other specialties (e.g. neurology or cardiology)	[Yes/No]	
1.7	Do formal requirements exist for physicians (such as GPs/Family doctors) to work in PC?	[Yes/No]	
1.8	What kind of physicians can provide PC services?	[family physicians/ internists/ pediatricians/ gynecologists/ other specialists/ physicians without any specialization]	
1.9	What percent of all PC physicians have specialization in family medicine?		
1.10	What is the formal status of family physicians	[only state employee/mostly state employee/both state employee and independent contractor/mostly independent contractor/only independent contractor]	

<table>
<tr><td>1.11</td><td colspan="2">Total expenditure on PC as % of total expenditure on health</td><td></td><td></td></tr>
<tr><td>1.12</td><td colspan="2">Number of GP consultations per capita per year</td><td></td><td></td></tr>
<tr><td rowspan="5">1.13</td><td>1.13.1</td><td>Do PC physicians have their personal patient lists?</td><td>[yes/no]</td><td rowspan="4"></td></tr>
<tr><td>1.13.2</td><td>If [yes], what is an average list size?</td><td>[n]</td></tr>
<tr><td>1.13.3</td><td>Is there a minimum and maximum limit?</td><td>[yes: (n_{min}); (n_{max})/ no]</td></tr>
<tr><td>1.13.4</td><td>Are there any measures (e.g. in payment) employed to influence the maximum or minimum size of the list?</td><td>[yes/no]</td></tr>
<tr><td>1.13.5</td><td>If [yes] describe briefly</td><td></td><td></td></tr>
<tr><td rowspan="2">1.14</td><td>1.14.1</td><td>How PC services are paid?</td><td>[fixed budget/pure capitation/capitation with wages/fee for service/mixed system]</td><td rowspan="2"></td></tr>
<tr><td>1.14.2</td><td>If mixed system, what are the components?</td><td></td></tr>
<tr><td rowspan="2">1.15</td><td>1.15.1</td><td>How family physicians are paid?</td><td>[salary/ income from the contract/ by patients out of pocket/ mixed system]</td><td rowspan="2"></td></tr>
<tr><td>1.15.2</td><td>If mixed system, what are the components?</td><td>[please describe briefly]</td></tr>
<tr><td>1.16</td><td colspan="2">Are family physicians gate-keepers to specialist services?</td><td>[total/partial/ not at all]</td><td></td></tr>
<tr><td>1.17</td><td colspan="2">Which of the following specialties are accessible without referral from family physicians?</td><td>
<table>
<tr><td>Gynaecologist /obstetrician</td><td></td></tr>
<tr><td>Paediatrician</td><td></td></tr>
<tr><td>Internist</td><td></td></tr>
<tr><td>Ophthalmologist</td><td></td></tr>
<tr><td>ENT specialist</td><td></td></tr>
<tr><td>Oncologist</td><td></td></tr>
<tr><td>Dermatologist</td><td></td></tr>
<tr><td>Surgeon</td><td></td></tr>
<tr><td>Dentist</td><td></td></tr>
<tr><td>Psychiatrist</td><td></td></tr>
<tr><td>Other (name)</td><td></td></tr>
</table>
</td><td></td></tr>
</table>

1.18	1.18.1 Is there a number weekly of working hours/doctor's availability in practice regulated?	[yes/no]	
	1.18.2 If [yes], how much is it?	[*n*]	
	1.18.3. If [yes] are doctors obliged to spend number of hours in office, how many?	[yes/no] 1.18.4 [*n*]	
1.19	Is out- of- hour care (nights, weekends, holidays & festivals) part of PC contract?	[obligatory/voluntary/ not at all]	
1.20	How is out-of-hour care organized:	1. Rota of duties shared by several practices (physician) 2. Deputizing service hired 3. Emergency service 4. Hospital-based centres 5. Other *(please describe briefly)*	
1.21	What kind of services are normally provided by family practices?		
	1.21.1 Curative care for children	[always/ sometimes/ never]	
	1.21.2 Curative care for adults	[always/ sometimes/ never]	
	1.21.3 Minor surgery	[always/ sometimes/ never]	
	1.21.4 Prenatal and pregnancy care	[always/ sometimes/ never]	
	1.21.5 Children surveillance and preventive care	[always/ sometimes/ never]	
	1.21.6 Adults screening and preventive programs	[always/ sometimes/ never]	
	1.21.7 Assessment/medical certification for social services/social insurance purposes	[always/ sometimes/ never]	
1.22	What are the forms of services provided by family physician:		

	1.22.1 Office consultation		[yes/no]	
	1.22.2 Home visits		[yes/no]	
	1.22.3 Telephone consultations		[yes/no]	
	1.22.4 Group sessions		[yes/no]	
	1.22.5. Assessment for social services		[yes/no]	
	1.22.6 Other		[*please name it*]	
1.23	What are the forms of patients records		[EMR only/ both paper and EMR/ paper only]	
1.24	What is the level of computerization of family practices in the country:			
	1.24.1	For administrative purposes	[nearly all practices computerized/ more than half/ some/ none]	
	1.24.2	For clinical care (EMR)	[nearly all practices computerized/ more than half/ some/ none]	
	1.24.3	Other reasons	[nearly all practices computerized/ more than half/ some/ none]	
1.25	Rank the following organizational forms of family practices:		1. [predominant] 2. [less frequent] 3. [rare] 4. [not existing]	
	1.25.1	Single handed (solo)		
	1.25.2	Group practice of 2 or 3 family physicians		
	1.25.3	Health centers with many family physicians		
	1.25.4	Health centers with family physicians and other specialists		
1.26	Total nr. of specialists in family medicine and total number		[n1][n2]	

	of all physicians in the country.			
1.27	Average age of working family doctors in the country		[*n*]	
1.28	Is there a shortage of family physicians in the country?		[severe/moderate/not at all]	
1.29	What is yearly number of qualified GPs/FDs emigrating/immigrating		[*n*] (*please enter the year*) [not available]	
1.30	Is WONCA definition of family medicine recognized and implemented by health authorities and policy makers?		[yes/no]	
Area II: Quality of care				
2.1	Please name important voluntary mechanisms in your country to maintain and improve the quality of care (e.g. clinical guidelines, voluntary peer-review mechanisms).		[voluntary quality improvement mechanism]	
2.2	Have evidence-based clinical guidelines been produced for specific use by family physicians?		[yes/no]	
2.3	Is there any system of registration and reporting medical errors in PHC in function?		[yes/no]	
2.4	2.41	Is there an accreditation system of family practices in the country?	[obligatory/ voluntary/ do not exist]	
	2.42	If one exists, who is responsible for it?	[governmental body/ GP association/ other NGO/other (please, name it)]	
2.5	Which part of family practices is accredited?		[nearly all/ majority/ minority/ very few]	
2.6	Are there any incentives to undergo accreditation process?		[financial (e.g. higher fee)/better chance to get the contract/internal motivation only/ other (please describe briefly)]	
2.7	2.7.1	Do family practices undergo any other common accreditation (e.g. ISO)?	[nearly all/majority/minority/very few/any]	
	2.7.2	If they undergo – please name the most popular accreditation systems	[….]	
2.8	2.8.1	Do peer-review groups exist in your country?	[yes/no]	
	2.8.2	If [yes], what part of family physicians is involved?	[nearly all/ majority/ minority/ very few]	
2.9	Are there any incentives to participate in the peer-review process?		[financial *(e.g. higher fee)/*better chance to get the contract/internal motivation only/ other *(please*	

			describe briefly)]	
2.10	Is your country represented in EQUiP?		[yes/no]	
Area III: Teaching				
3.1	How many medical faculties at the university level are there in your country? (some of universities may have more than one faculty)		[*n*]	
3.2	How many medical faculties have departments of family medicine?		[*n*]	
3.3	How many departments are chaired by family physicians with professor title?		[*n*]	
3.4	How many departments are chaired by professors of other disciplines?		[*n*]	
3.5	% of medical faculties at university level with a postgraduate program in family medicine		[*n*]	
3.6	3.61	Is family medicine subject in the undergraduate medical curriculum?	[yes/no]	
	3.62	If [yes], how many universities teaches it?		
3.7	3.71	Is there within medical undergraduate curriculum minimum number of teaching hours in family medicine?	[yes/no]	
	3.72	If [yes] – how many?	[*n*]	
3.8	Are there any quality measures or requirements for teaching practices?		[none/ yes, but not applied /yes, applied / accreditation necessary]	
3.9	Who organize specialist training in family medicine?		[special postgraduate centre/ universities/ hospitals/ GP association/ other/ not applicable – there is no specialty in family medicine/	
3.10	What is the duration of specialist training in family medicine in your country (in months)?		[*n*]	
3.11	What is the duration of specialist training in family medicine in primary care setting (in months)?		[*n*]	
3.12	Are the residents (trainees) in family practice paid?		[not paid/paid by trainers/paid by state or local	

			government/paid by insurance/paid by hospital]	
3.13	3.13.1	Is there any formal exam at the end of specialist training?	[yes/no]	
	3.13.2	If [yes]	[MCQ/ written/ oral/ practical/ other (please, describe briefly)]	
3.14	3.14.1	Are there in your country any courses for family medicine teachers available (e.g. Leonardo EURACT)?	[yes/no]	
	3.14.2	If [yes], how many family medicine teachers completed them?	[*n*]	
3.15	What are the incentives to undertake specialty training in family medicine?		[better professional perspectives/ higher salary as a trainee/ higher future salary/ easy access to specialization/ other *(please describe briefly)*/ no special incentives]	
3.16	What is the number of trainees starting (yearly) the postgraduate program in GP ?		[*n*]	
3.17	Is there any formal recertification of family physicians in your country?		[voluntary/ obligatory/ not at all]	
3.18	Is your country represented in EURACT?		[yes/no]	
3.19	Has EURACT Educational Agenda been translated and/or implemented in the country?		[translated and implemented/translated but not implemented/ not translated but implemented/ not translated and not implemented]	
Area IV: Research				
4.1	Are there postgraduate programs (Ph.D.) in GP/FM available and functioning		[no/ yes, less than 5GPs in program/yes, more than 5GPs in the program]	
4.2	Do scientific organization of family physicians exist in your country?		[yes/no]	
4.3	Is this organization full member of WONCA?		[yes/no]	
4.4	Is your country represented in EGPRN?		[yes/no]	
4.5	4.5.1	Is there a scientific peer-reviewed journal on family medicine published in this country?	[yes/no]	

	4.5.2	If [yes], how many issues a year are published?	[*n*]	
4.6	4.6.1	Are there scientific conferences on national level regularly being organized?	[yes/no]	
	4.6.2	If [yes], how often?	[twice a year or more often/annually/biannually/other *(please describe briefly)*]	
4.7	How many GPs do usually attend WONCA Europe conference		[less than 5/ 5-15/15-30/more than 30]	
4.8	How many abstracts are presented at WONCA conferences		[n]	
4.9	Are there special funds to carry on research in family medicine available?		[yes/no]	
4.10	4.10.1	Is there in the country a research network of family physicians/family practices?	[yes/no]	
	4.10.1	If [yes] how many doctors/practices are involved?	[*n*]	