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| Title | The development of academic family medicine in central and eastern Europe since 1990 |
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UCC

University College Cork, Ireland
 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] | |

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

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| 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: | <ol style="list-style-type: none"> 1. Rota of duties shared by several practices (physician) 2. Deputizing service hired 3. Emergency service 4. Hospital-based centres 5. Other <i>(please describe briefly)</i> | |
| 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: | | |

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| | 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 | <i>[please name it]</i> | |
| 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] | |

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| | 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 | |

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| | | <i>describe briefly</i>) | |
| 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? | | |
| 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 | |

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| | | | 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 (<i>please describe briefly</i>)/ 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] | |

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| | 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 <i>(please describe briefly)</i>] | |
| 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] | |