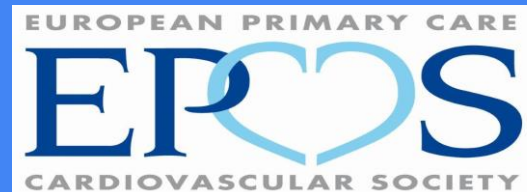


Organisation of primary care in Slovakia

Michaela Macháčová MD
SLOVAKIA

EPCCS Council Meeting, Stratford Upon Avon

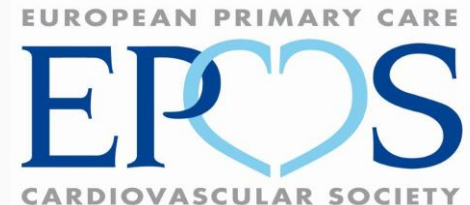


The Slovak Society of General Practice

SSGP was established in 1979

1400 GPs are the members of SSGP (2300 GP's in Slovakia)

Full member of WONCA



The Structure of SSGP

- President SSGP Peter Makara MD
- 15 members of the Committee, Supervisory Board
- Young Practitioners (President Ľudmila Resutíková MD) , part of VdGM
- Election -every 4 years
- Education- Conference, regional training, abroad - EFPC, WONCA, EQUIP

Annual Conference SSGP

- XXXVIII. Annual Conference SSGP... October, in High Tatras (every year)
- Number of GP's participantsalmost 1100
- Cooperation with specialists (cardiologist, angiologist, diabetologist...)
- Special guests from abroad.....every year
- WHO director of Slovakia, MoH

Activities of SSGP and interest in CVD

Clinical guidelines (recommendations) specifically for Slovak GP's

2014- Prevention of the stroke by patients with AF and screening of AF

2014- Diagnostical procedure and management of patients with CHF in primary care

Pre and **postgraduate training** on the Medical Faculties (as external teachers)

4 Medical Faculties in Slovakia

Cooperation with The Slovak Organisation of patients

Primary care in Slovakia

General medicine for adults (General Practitioner)

General care of children and adolescents (Pediatrician)

90% selfemployees-private practice (GP), 10 % (as employees in private centres)

GP'a - mandatory provide 24-hours/ 7 days

How many patients are in the registry of GP

1 GP cares about 2000 patients!!!! In the rural region3000-4000pts

Average number of patients per day50-60!!!!

WHY? Lack of GPs , especially in the rural region

Average annual number of visits to GP

Is almost twice as many as the OECD average

WHY? Due to legislative ban for GPs in Slovakia

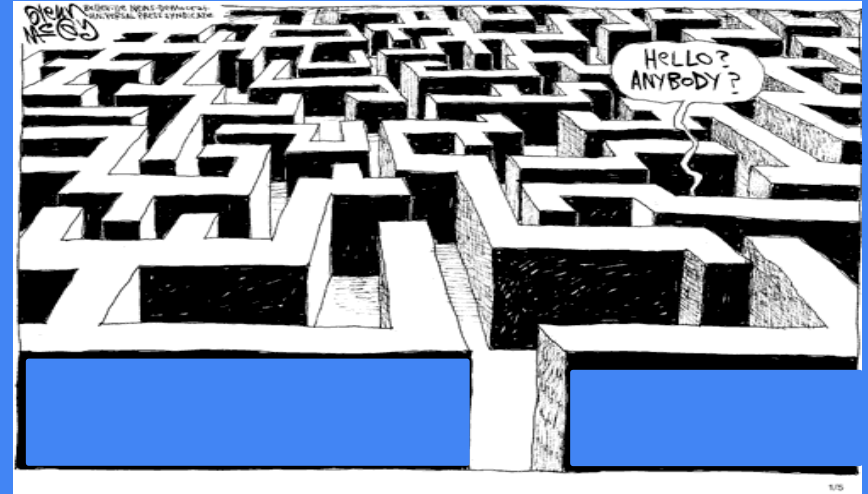
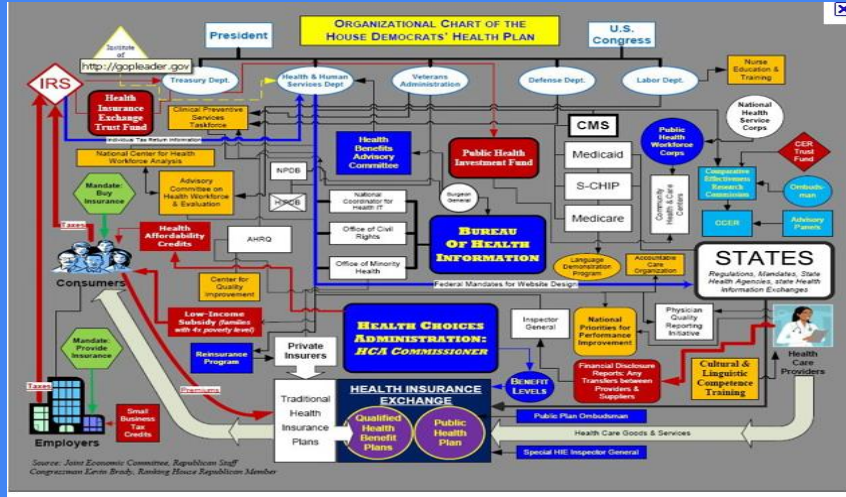
- Many drugs to treat common conditions can be prescribed by specialists
- Many tests (CT, MR, glycated haemoglobin, PSA...) only by specialists

Patients need to visit **first** GP who refer them to a specialist and then return back to GP.....1 day patient visits 2 doctors! **Because of legislative ban**

THE HEALTH CARE LABYRINTH

For the doctor

For the patient



Payment system for GPs

3- Health insurance companies (1 public, 2 private)

GP has contract with every HIC (mandatory for HIC)

Capitation fee.....80% per capita, 20% fee for service.....fundamental problem

The fundamental problem is underfinancing (average capitation fee 2,8

Euro/ptt/month) fee for service (preventive examination every 2 years, ECG - acute ptt, arterial hypertension which was found by GP...)

Data from the register of Slovak Medical Chamber

Years/ Age	<30	31-40	41-50	51-59	60-64	> 65	Total number
2005	10	299	788	847	251	229	2424
2016	2	160	477	557	550	564	2310
difference	-8	-139	-311	-290	+299	+335	-114

The rising age profile of GPs is alarming....

Human resources for PHC

Residential program for graduated GPs

Now there are 100 residents doctors in Slovakia.....new GPs in the coming 5 years

Interest in CVD

Key role of GP in screening of AF, anticoagulation therapy and well controlled

Focus on patient with CHF

Well controlled AH, reduce overweight/ obesity, prevention of atherosclerosis

ABI- in the patients with risk factors

Good compliance to treatment (patient is a partner)