



## **Health workers for all - CASE STUDY**

**POLAND**

**The introduction of physicians and paediatricians into primary health care in Poland**



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## **WHO Code\* correspondence:**

**Article 3.1** The health of all people is fundamental to the attainment of peace and security and is dependent upon the fullest cooperation of individuals and states. Governments have a responsibility for the health of their people, which can be fulfilled only by the provision of adequate health and social measures. Member States should take the Code into account when developing their national health policies and cooperating with each other, as appropriate.

**Article 5.4** As the health workforce is central to sustainable health systems, Member States should take effective measures to educate, retain and sustain a health workforce that is appropriate for the specific conditions of each country, including areas of greatest need, and is built upon an evidence-based health workforce plan. All Member States should strive to meet their health personnel needs with their own human resources for health, as far as possible.

\* WHO Global Code of Practice on the International Recruitment of Health Personnel

## 1) The context

Article 5.4 of the WHO Global Code of Practice on the International Recruitment of Health Personnel states that: 'As the health workforce is central to sustainable health systems, Member States should take effective measures to educate, retain and sustain a health workforce that is appropriate for the specific conditions of each country, including areas of greatest need, and is built upon an evidence-based health workforce plan. All Member States should strive to meet their health personnel needs with their own human resources for health, as far as possible'. In response, in 2014, the Polish government adopted a new law on health care services, which allowed paediatricians and physicians (specialists in internal medicine) to open primary health care practices. This change, which was the result of public consultations, should lead to better access to primary health care, especially for children.

In Poland, there are currently a significant number of well-trained and experienced physicians and paediatricians. However, due to system solutions adopted years ago, physicians and paediatricians have been virtually excluded from primary care and outpatient specialist care, and limited in the practice of their profession to hospital wards for internal medicine and paediatrics. Primary health care practices could only be led by specialists in family medicine or by physicians and paediatricians who worked in primary health care for many years. While young physicians and paediatricians (after completing their specialisation) might gain employment in a hospital or even in an institution of primary health care, specialisation in family medicine was a precondition for the establishment of a primary health care practice. A lack of employment prospects thus discouraged medical graduates from undertaking specialisation in internal medicine and paediatrics. Such specialists are essential to ensure the smooth functioning of the entire health care system. In the field of primary health care for children, it is currently difficult to get access to a paediatrician in many situations. Although there are certain ideal primary health care institutions, where each child is examined by a paediatrician and subject to proper prevention, the majority of primary health care institutions do not employ paediatricians and children are treated by other specialists, such as a surgeon who becomes a family doctor after six months of training in family medicine.

It can be concluded that the previous law on public health care services drastically restricted the right to choose a doctor for one's child, with parents of a sick child generally not in the position to have a paediatrician treating their child. Experts also point out that as a result of the aging population, increasing numbers of people suffer from several diseases at any one time and thus require competent, comprehensive medical care. Such medical care can be ensured only by well-prepared specialists in internal medicine.

## **2) Description of the case**

The new act, adopted in 2014, introduces changes to the provision of primary health care in terms of changes to the public health insurance system, which will now cover the provision of primary health care by paediatricians and physicians, and thus not only by doctors who specialise in the field of family medicine or who undergo specialist training in the field, or those with a second-degree specialisation in general medicine, as stated in the previous Act on public health care services.

According to the Ministry of Health, the change will encourage more doctors to work in primary care. Moreover, parents will be able to choose whether their child is treated by a family doctor or a paediatrician in a primary health care institution.

The Polish Ministry of Health believes that allowing primary health care practices to be established jointly by physicians and paediatricians, will not lead to a situation in which paediatricians treat adults and physicians treat children. In fact, the new Act explicitly states that within primary health care practice these doctors may perform duties only to the extent of their competence.

Polish family medicine specialists have tended to disapprove of the new law. They argue that the training of specialists in internal medicine and paediatrics occurs in hospitals and these specialists are not prepared to work in the field of primary care, which requires a holistic approach and a family and community-oriented perspective. According to them, the need for the recruitment of more specialists in family medicine should be strongly emphasised, and the quality of their training should be guaranteed.

However, the Polish population seems to be of a different opinion. According to a survey conducted by the Public Opinion Research Centre, commissioned by the Polish Paediatric Society, the Federation of Associations of Paediatricians and 111 associations of parents of sick children, as many as 96 percent of Poles would like paediatricians to work in primary health care. The study was conducted on a representative group of 2,000 people, excluding anyone involved in the medical field, and especially paediatricians and family doctors.

### **3) What is to be learned?**

In a situation where there is disagreement between the parties affected by a new law such as this, one should not forget that it is the patient's welfare that is paramount, and the welfare of children should be undisputed. Changing the law undoubtedly leads to greater accessibility and effectiveness of services in the field of primary health care. However, this amendment has only just been introduced into Polish law and its effects can only be assessed further into the future.