

Restructuring Regional Rural Health Services to Enhance the Role of Primary Care

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Kharkiv – La Crosse Partnership

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Kharkiv – La Crosse Partnership

Partnership activities started in 1999

US partners - Gundersen Lutheran Medical Center, Franciscan Scemp Health System and University of Wisconsin

Ukrainian partners - Kharkiv Oblast Health Administration, Oblast Students' Hospital and Chuguev Central Rayon Hospital

PHC clinics were opened in January 2000 at Kharkiv Aerospace University and at Korobochkino village ambulatory

Opening of the Rural Primary Care clinic in Korobochikino

- Gaining support of from Rayon Government, Central Rayon Hospital and ambulatory facility personnel
- Training of the clinic staff in US partnerships institutions and Kharkiv Medical Academy for Post-Graduate Education
- Reconstruction and renovation of the facility using the funds of oblast budget, community and sponsors' investments
- Equipment of the clinic to the standard list for AIHA model PHC clinics
- In June 2004 the clinics receives a status of Family Medicine Center

Challenges in Developing Family Medicine Program

1998-2000 – 306 physicians were trained in Family Medicine in Kharkiv Postgraduate Medical Academy.

- Lack of workplaces for family physicians
- Lack of legislative status
- Unclear list of responsibilities for family practitioners

Development of Rural Family Medicine.

Goals

- To improve access of rural population to primary health care services
- To reorient PHC to family medicine (wider scope of services, emphasis on prevention, services for all age groups, integration of emergency care services, etc.)
- To improve the quality of primary care:
 - equipment
 - training of staff
 - wider range of services

Steps in Developing Family Medicine Clinics Network

- To identify the scope of specialized services provided by family physicians
- To determine the list of equipment for FM Clinics
- To organize the training of physicians in various subspecialty areas
- To ensure family doctor's mobility (to provide vehicles for family medicine clinics)
- To ensure support of the Clinics by rayon administration, hospital administration and the community

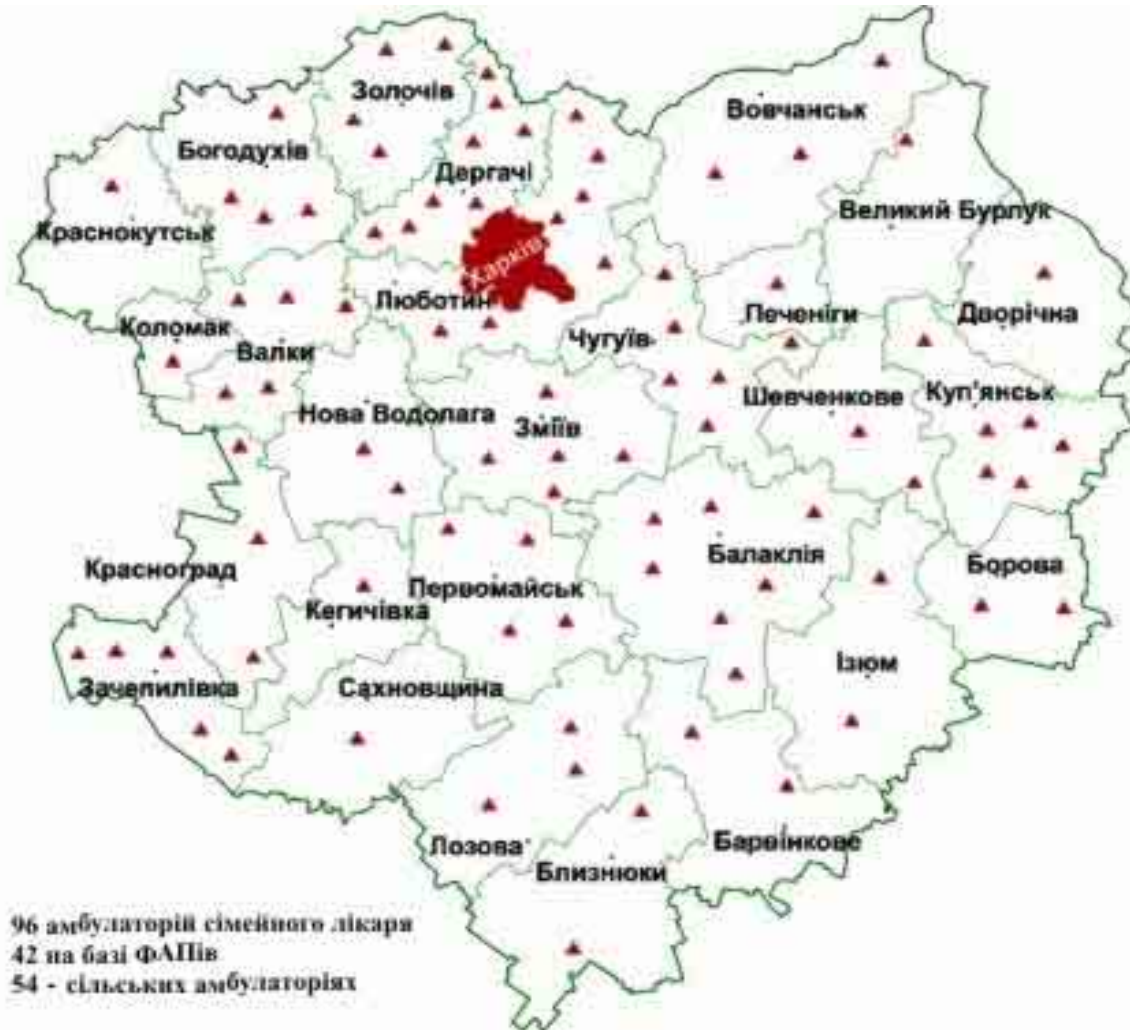
Achievements

Oblast Administration adopted “Program on improving rural health care on the principles of family medicine”

In 2001 42 new family medicine clinics were opened at former FAPs (feldsher stations) and 54 at rural ambulatories:

- Local community funded the renovation of the facilities
- Oblast Administration provided medical equipment and vehicles

Family Medicine Clinics in 2002



Positive Results

- Community support of family medicine program received
- Local government is involved in the reform process
- Leaders of rayon health care institutions changed their vision of family medicine
- Community acceptance of the new type of physician was obtained

Success Indicators

- Two-fold increase in patient visits numbers
- 20% increase in numbers of preventive visits
- 10% decrease in referrals to specialists
- 15% decrease in the number of inpatient cases, and 13% increase in the number of cases treated on the outpatient basis
- Development of alternative types of inpatient care (daycare hospitals, home-based care facilities)
- 14 % decrease in the number of ambulance calls

Problems To Be Solved

- Need for further continuous education of family physicians and nurses
- Need to improve clinical skills of medical professionals and their access to information by establishing the network of Training and Research Centers
- Need to seek for additional funding sources and mechanisms (health insurance)

Objectives For The Future

To provide better access of rural population to primary care services (196 family medicine clinics and offices will be opened in 2002)

To increase efficiency and quality of health care services

To develop and implement health education programs for the community promoting healthy lifestyles

Future Development of FM Clinics Network

