

Abstract

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**ASSESSMENT AND INFLUENCE OF A FAMILY PHYSICIAN
ON THE HEALTH STATUS OF THE POPULATION OF
AMALGAMATED TERRITORIAL COMMUNITIES**

Introduction. Primary health care is the most important part of the health system. Family physicians, as representatives of this link, are key figures who are assigned a number of responsibilities for the prevention, diagnosis, and treatment of both adults and children. An indicator of the effectiveness of their work is the level of satisfaction of citizens with the quality of service. To understand the effectiveness of reform implementation, the authors evaluated the activities of the family physician and its influence on the health of citizens living on the entrusted territory.

The aim of the study is an empirical analysis of the selection criteria, frequency and reasons for the citizens' visits to a family physician in the amalgamated territorial communities of the Sumy region.

Materials and methods. During the research, methods of a systematic approach and comparative analysis were used. The study was conducted in the form of a survey. Calculations and processing of statistical information were carried out using the "OSA" application.

Study results and discussion. The paper shows the condition of primary care as a result of the health system reform. The sociological survey on the work of family physicians in the amalgamated territorial communities concerned the criteria for choosing a family physician, the frequency of requests for medical care, and the reasons for requests, in particular for preventive purposes. The analysis showed that the percentage of signing declarations is relatively high. However, a certain formality of this process was observed, since a significant percentage of citizens who signed the declaration have never met their family physician. The result indicates that citizens often do not seek medical care in outpatient clinics on the territory of the amalgamated territorial community, and they rarely visit the physician for preventive purposes. According to respondents, the reason for not seeking prevention is the lack of need.

Conclusion. A high percentage of residents of the amalgamated territorial communities signed declarations with family physicians. However, having analyzed the survey data, we can note a rather formal attitude to this procedure, since many residents seek medical services in other medical institutions. It is a consequence of the insufficient

effectiveness of the reform of primary health care and insufficient attention on the part of local authorities to provide outpatient clinics with qualified specialists. There is a need to raise awareness about the importance of preventive measures.

Keywords: family medicine, family physician, preventive work, declaration, communication.

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Резюме

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ОЦІНКА ТА ВПЛИВ СІМЕЙНОГО ЛІКАРЯ НА СТАН ЗДОРОВ'Я НАСЕЛЕННЯ ОБ'ЄДНАНИХ ТЕРИТОРІАЛЬНИХ ГРОМАД

Вступ. Первинна медична допомога є найважливішою ланкою системи охорони здоров'я. Сімейні лікарі, як представники даної ланки, виступають ключовими фігурами, на яких покладено ряд зобов'язань щодо профілактики, діагностики, лікування як дорослих так і дітей. Показником результативності їхньої роботи є рівень задоволення громадян якістю обслуговування. Для розуміння ефективності впровадження реформи автори оцінили діяльність сімейного лікаря та його вплив на стан здоров'я громадян, які проживають на підпорядкованій йому території.

Метою дослідження є емпіричний аналіз критеріїв вибору, частоти та причин звернень населення до сімейного лікаря в об'єднаних територіальних громадах Сумської області.

Матеріали та методи. В процесі дослідження використовувалися методи системного підходу, порівняльного аналізу. Форма дослідження – опитування. Розрахунки та обробка статистичної інформації проводилась за допомогою програми «ОСА».

Результати дослідження та обговорення. В статті обговорюються стан первинної ланки медичної допомоги в результаті реформи системи охорони здоров'я. Соціологічне опитування щодо роботи сімейних лікарів в об'єднаних територіальних громадах стосувалося критеріїв вибору сімейного лікаря, частоти звернень за медичною допомогою, причин звернень, зокрема в профілактичних цілях. Аналіз показав, що відсоток підписання декларацій досить високий, але відслідковується певна формальність цього процесу так як значний відсоток громадян, які підписали декларацію не знають свого сімейного лікаря. Результатом є той показник, що за медичною допомогою громадяни звертаються частіше не в амбулаторії на території об'єднаної територіальної громади, а в профілактичних цілях майже не звертаються зовсім. Причинами не звернення з метою профілактики зі слів респондентів є відсутність потреби.

Висновок. Високий відсоток жителів об'єднаних територіальних громад підписали декларації з сімейними лікарями. Проте аналізуючи дані опитування можемо говорити про досить формальне відношення до даної процедури, так значна частина мешканців звертаються за медичними послугами в інші медичні заклади. Це є наслідком недостатньої ефективності проведення реформи первинної ланки медичної допомоги та недостатня увага з боку органів місцевого самоврядування до забезпечення амбулаторій фахівцями відповідного рівня. Виникає необхідність проведення

роз'яснювальної роботи щодо важливості профілактичних мір.

Ключові слова: сімейна медицина, сімейний лікар, профілактична робота, декларація, комунікація.

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Introduction

Quality medical care plays an extremely important role in every person's life. In the process of reforming the health care system, family medicine and the family physician have become the leading players in primary care. The supervision of the entrusted people's health starts with the family physician. In addition to the physician's primary task to prevent the disease in time or detect it at an early stage, family physicians have some other tasks and responsibilities.

Primary health care should be accessible to all segments of the population, and it is through signing declarations with family doctors that a patient is entitled to free care and treatment for a number of diseases. However, public awareness of the innovations that have occurred as a result of medical reform is rather insufficient. Therefore, there are many gaps in citizens' awareness of the services that have become available locally and the advantages that include the free choice of a family physician, a guaranteed package of free primary health care, patient orientation through observation, awareness about lifestyle, environment and other factors that may directly or indirectly influence their life and health. In the process of physician-patient interaction, the focus is on disease prevention. Accordingly, the most important principle of family medicine is the preventive activity, that is, in daily work, the physician should promote his patients' health, that can influence the effectiveness of the medical system as a whole.

The goal of health care reform is to provide citizens with affordable medical care. It is up to the users of these services to assess the quality of assistance provided, and accordingly, after its evaluation, we can speak of success or failure of this reform.

Study results and discussion. With the introduction of the health system reform, family physicians represent the primary care sector. Family physicians have huge responsibility. They must not only work with a patient, but also study the lifestyle, health and psychological

characteristics of the family as a whole to ensure planning of preventive measures [1]. After all, the possession of information about family characteristics, knowledge of hereditary diseases allows you to prevent specific health problems in other members of a particular individual family. Due to family medicine, the patient is continuously monitored from birth to old age. The duties of a family physician, which are defined by the legislation of Ukraine, are numerous: from prevention and consultation to the provision of necessary medical care and health monitoring [2]. The World organization of family physicians has created six basic requirements for the responsibilities of family physicians. All these rules and regulations are aimed at improving the standards of patient care and, as a result, improving the quality of life. In world practice, about 80% of all health problems are solved at the level of primary care [3].

Approaches to studying the activities of family physicians are diverse. When studying the effectiveness of work, scientists consider various aspects that are components in the responsibilities of each primary care medical worker. This includes, first of all, assessment of medical skills and competencies, psychological aspects, administrative and legal support. According to L. Lyman, the competence of a family physician, which is divided into professional, cultural, legal, and individual, is an important mechanism of competitiveness that makes it possible to improve the quality of medical care [4]. Psychological aspects and communication skills of a family physician play almost the most important role. Proper and positive communication between the physician and the patient contributes to the formation of a trusting relationship, which in turn leads to improvement in the emotional state of the latter, and as a result, a better attitude to the treatment process by the patient himself [5].

In the process of practical research of the family physicians' work, questions arise related to the organization of direct communication of the people with the health care professionals, awareness regarding family physicians'

responsibilities, signing of declarations, rights and duties of existing patients and citizens in general.

To assess the state of primary health care reform, a survey was conducted in the amalgamated territorial communities using a closed questionnaire, which asked the residents of the amalgamated territorial communities about the assessment of the activities of the family physician, the impact of the family physician on the state of health and attitude to health prophylaxis.

Since the family physician is a relatively new concept in the domestic system of medical care, it is important to know how well citizens are familiar with the family physicians' work principles and tasks.

The signing of declarations with family physicians is an integral part of interactions between the physician and the patient. The declaration gives the patient the right to receive free assistance for a number of services approved by the Order of the Ministry of health of Ukraine No. 504 of 19.03.2018 "On approval of the procedure for providing primary medical care" [6].

The survey showed that in Bezdryk ATC 73% of the respondents had signed a declaration with a family physician, 17.6% do not have a signed declaration and did not try to do it, and 9.2% did not sign a declaration, but tried. In Khotyn ATC

the situation is slightly different. 89.6% of the respondents have signed a declaration with a family physician, 9% do not have a signed declaration and did not try to do it, and 1.5% did not sign a declaration, but tried. At the same time, the main reasons why the respondents did not sign the declaration in the Bezdryk ATC are: 6.7% of respondents do not believe that it is necessary and did not have time for it; 2.5% of individuals do not have anyone to choose. 9.2% of individuals found it difficult to answer the question. In Khotyn ATC, 6% of individuals do not think that this is necessary and 4.5% believe that there is no one to choose.

Choosing a family physician is a responsible step, so everyone who signs the declaration must find out the issues that are important for everyone personally. Therefore, when interviewing citizens about their motives for choosing, the following was announced: it should be a physician who is trusted, the physician should conduct an appointment geographically close, it is the previous district physician, or a physician that has been advised by other people.

The respondents' answers to the question if you have chosen or planning to choose your family physician, what considerations were you guided by are shown in Figure 1 and Figure 2.

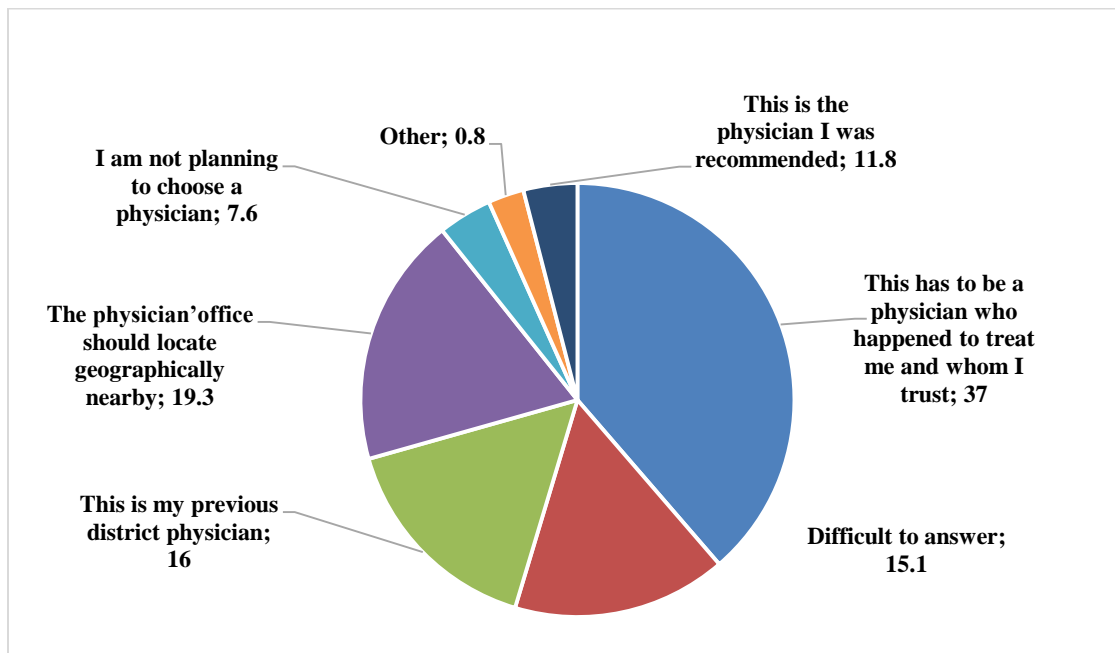


Figure 1 – Bezdryk ATC

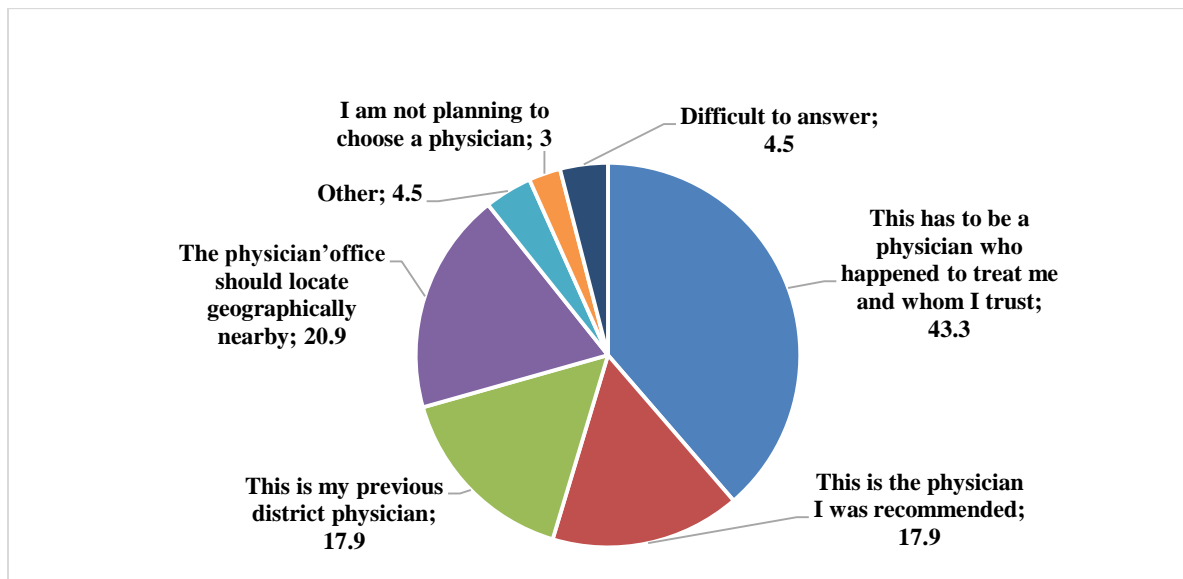


Figure 2 – Khotyn ATC

The main indicators of choice is the confidence either in the physician whose services have already been sought, or who was recommended by someone else. Trust is based on the provision of qualified assistance, and therefore, there is a great need for highly qualified specialists in ATC.

Attention should be paid to the category of those respondents who do not plan to choose a physician at all. After all, citizens who have not signed a declaration with a family physician will not be able to receive free medical care. On the other hand, such a patient will be able to purchase the medical services that they will need at their own expense, but the quality assessment of such services will be outside of state quality control. Refusal to choose a family physician and sign a declaration indicates that citizens are not aware of their rights and opportunities.

According to the study, signing declarations is not a confirmation that citizens have taken this step responsibly and with understanding. Conducted surveys have shown that 63.9% of respondents in Bezdryk ATC know their family physician, and 36.1% said that they do not know. In Khotyn ATC, 80.6% of respondents know their family physician, while 19.4% don't.

Every citizen is responsible for his or her own health. On the one hand, people's interest in regularly contacting a family physician for preventive purposes increases the chances of timely detection of possible diseases and, consequently, successful treatment; to prevent the appearance of

the disease through lifestyle adjustments, etc. On the other hand, to carry out full-fledged preventive measures, it is necessary to have fruitful cooperation between medical professionals, government agencies and residents themselves [7]. In other words, citizens' awareness of prevention increases the chances of a satisfactory state of health and an overall standard of living. It is the family physicians who have a great responsibility for carrying out these activities. In addition to maintaining the patients' health, they must convince and educate awareness of the need to lead a healthy lifestyle, develop skills to preserve and promote health, and undergo regular medical examinations. For example, over the past 12 months, in the ATC where the survey was conducted, residents turned to medical professionals for preventive purposes, but the requests' frequency was quite low.

Among the interviewed residents of Bezdryk ATC only almost every second respondent, that is, 48.7 % sought a family physician's medical assistance. The percentage of respondents who did not visit a family physician during the year is quite significant: 42% and 9.2% of respondents found it difficult to answer the question. Among those citizens who visited medical institutions in general over the past 12 months, 40.3% of respondents visited a local outpatient clinic; 15.1% – the Sumy CRH; 8.4% – hospitals and polyclinics in Sumy; and 5.9% – private clinics. That is, 30% of ATC residents seek medical care and preventative purposes away from their place of residence.

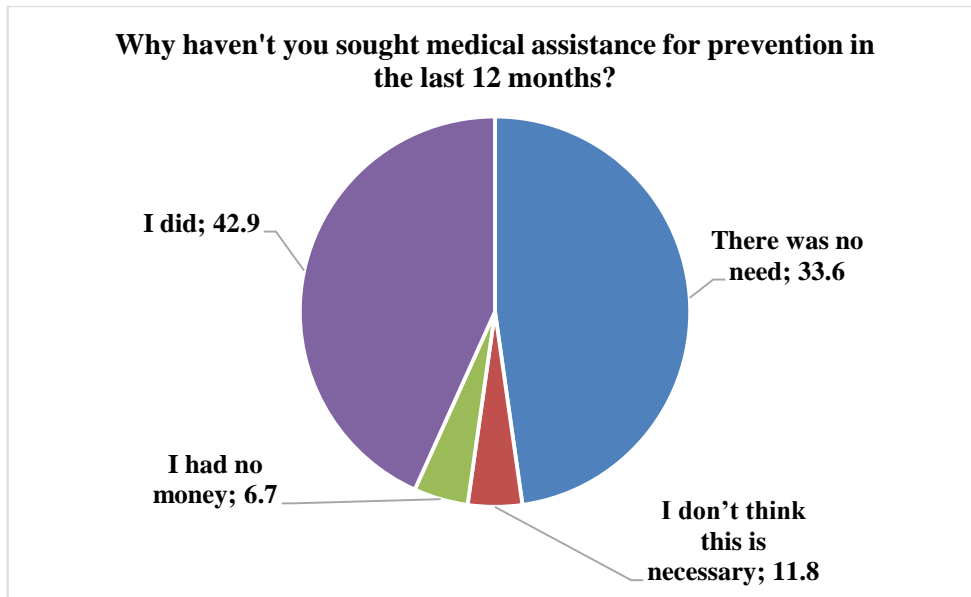


Figure 3 – Bezdryk ATC

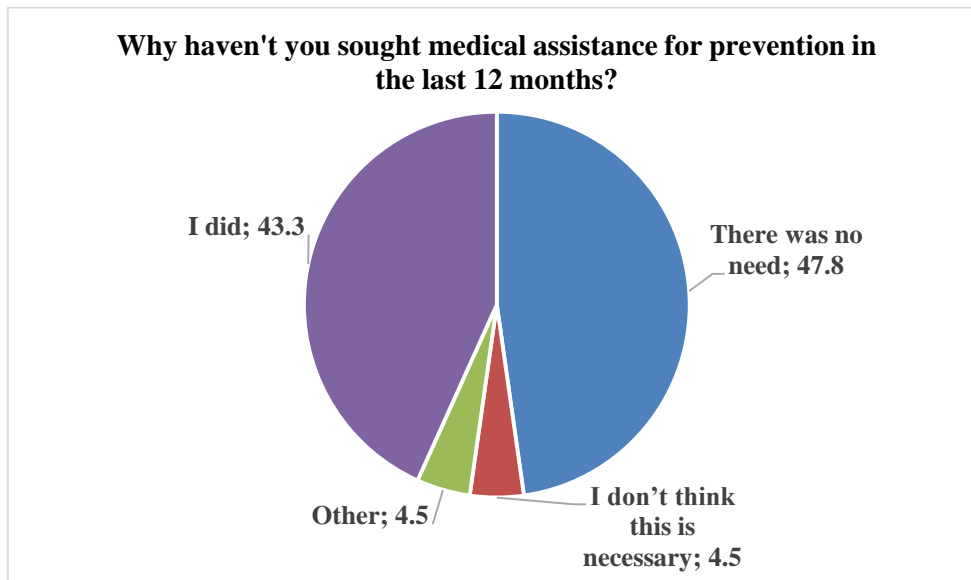


Figure 4 – Khotyn ATC

In Khotyn ATC, 59.7% respondents gave affirmative answer. 40.3% of the respondents did not visit medical professionals for preventive purposes. Over the past 12 months, 55.2% of respondents visited the local outpatient clinic; 17.9% – Sumy CRH; 10.4% – private clinics and only 1.5% – hospitals and polyclinics in Sumy. As in Bezdryk ATC, about 30% of the residents of this ATC visit health care facilities outside their place of residence.

As for the reasons for not seeking medical assistance for preventive purposes, the main reasons are the lack of need (33.6%); 11.8% do

not believe that this is necessary; and 6.7% lack of money.

In Khotyn ATC, 47.8% say that there is no need; 4.5% do not believe that it is necessary.

Almost the same number of citizens had visited a physician, but the number is not very high. A significant percentage of people not visiting physicians for periodic screening and examinations is threatening and is the result of insufficient explanatory work and awareness among community residents about the need for such a procedure, low personal responsibility for health, insufficient work of local authorities, and low funding.

Conclusions

The introduction of a new approach to the health system in the territories of the amalgamated territorial communities has shown both positive changes and a number of shortcomings. Family physicians, who should be the basis of preventive measures and primary health care, have not yet gained sufficient popularity among community residents. A fairly high percentage of citizens still seek primary medical care in medical institutions that are located outside their ATC, rather than in

local outpatient clinic. This indicates a lack of appropriate level specialists and a lack of confidence in local specialists. Lack and unreliability of information about the work of family physicians and payment for services lead to distrust on the part of patients to the introduced medical care system. A significant percentage of citizens who have not signed declarations with family physicians and who do not visit medical institutions for prophylaxis, speaks about the problems of reform implementation.

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Conflict of interest

The authors declare no conflict of interest.

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