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Organization of the medical profession:

Physician Act is primary law for medical profession in RoC (published in Official Gazette No. 121/03). Act defines medical profession itself, organization and conditions for practicing medicine. According to law, doctor is defined as essential, independent and responsible carrier of health care profession, which is considered as profession of special interest to RoC that insures health care to every individual and population in RoC.

For all doctors that are working in medical profession membership in Croatian Medical Chamber (CMC) is mandatory. CMC has currently 15.203 licensed doctors as members. Work in CMC is divided and conducted through seven different Committees. President of each Committee is member of Executive Board of CMC. Issues concerning senior hospital doctors are mostly in concern of Committee for Specialist, Hospital and Public health activities. Supervision of professional work of hospital doctors is under Committee for Professional Issues and Professional Surveillance and Committee for Medical Ethics and Deontology of CMC.

Also, majority of senior hospital doctors are members of Croatian Medical Association (voluntary professional organization). Problems concerning labor issues are in domain of Croatian Medical Syndicate (largest syndicate representing employed doctors).

Almost 55% of physicians are employed in hospitals.

Current aspects of general health care:

Health Care Act (published in Official Gazette No. 121/03) is fundamental law on principles, measures and organization of health care in RoC. Regarding ownership structure of hospital, majority of them is founded as public institution (that is founded by state, county or city).

Currently, health care reform is still in process. Patients Right Act (published in Official Gazette No. 169/04) has been passed in November 2004 (in force from December 11, 2004). Also, Government has proposed in April 2005. Amendments on Health Care Act. We are also expecting amendments on other laws and by-laws that are dealing with health care issues. Government is also trying to achieve cost reduction of all expenditures, including the expenditure of health sector.

Current situation:

The situation in Croatian hospitals did not change very much since our last report in April 2004. Whole last year (still current!) was spent in negotiations between doctors’ and nurses’ syndicates and the Ministry of health and social affairs about working conditions and salaries of health workers. Finally, at the end of December, a solution was found for both professions and Collective Agreements were signed, separately for doctors and for nurses (including other hospital employees). Unfortunately, only the one for nurses is in full force.
According to the negotiations’ results, the doctors should receive a 10% rise of salaries every January in next 5 years, and will that way reach the income of comparable professions outside health service in 6 years (judges). For some working places, posing danger to ones health, additional payment was foreseen. Hospitals were also obliged to take care and pay for the CME/CPD.

The nurses syndicate brought an action against the signed Collective Agreement for doctors, complaining that they were cheated, because the overall cost of increased salaries for 6.500 hospital doctors was almost equal to that for 25.000 nurses. For the first time in history one syndicate was fighting against what another syndicate has achieved with the employer (state). The newly nominated Minister of health (former minister deputy) decided that the nurses’ contract has to be executed and the doctors’ contract was suspended until the court brings judgment. Money for doctors’ salaries was waiting in the state treasury but our Collective Agreement couldn’t come into power. The doctors’ syndicate announced and conducted strike from March 11th, till March 13th 2005, while the court forbade the strike. Currently, disappointed colleagues work regularly and wait for the final decision of the Supreme Court.

Public opinion does not quite understand position of doctors regarding their demands of salary increase. People generally agree that medical profession is very demanding and hard, but when it comes to salaries, that is another question. For example, journalists compare salaries outside health sector (for regular 176 hours monthly) with doctors’ incomes (salary + overtime = 300 hours per month). Due to mentioned calculation, among other things, an average citizen cannot understand and support doctors’ claims.

At the same time a diminished interest for studying medicine is leading to first obvious consequences. In the last two years the number of unemployed young doctors decreased from 1.200 to less than 200. In Croatia working time directive is not an obligation and working time on wards is not limited. There are examples during the holidays-season of younger colleagues in hospitals working up to 100 hours weekly. If we take into account that it takes at least ten years to become a specialist, we’re facing a very turbulent time.

Also, number of actions against hospitals and hospital doctors is rising. Due to the mentioned reasons, CMC has proposes, and is working on, “non-compensation model” for resolving disputes between health institutions, doctors and patients and raising quality of doctor-patient relationship.

We are all hoping that authorities of Roc will urgently find adequate solutions, for all health workers and patients, having in mind that law suits will not attract more students to the schools of medicine, nor improve the safety of patients and quality of health care.

**Working time directive (WID):**

Since last years report the situation has not changed. Also, Croatian medical chamber has just received proposed amendments of Health Care Act, from Ministry of health and social welfare of RoC, to give its opinion. According to proposed provisions, among other changes, full-time employed physicians (in hospitals, private practice, health institutes etc.) may work after regular work hours, in hospitals where they are employed, or for other employer, but no longer than 1/3 time period of their regular full-time employment.

Dr. Hrvoje Šobat, 28.4.2005.