AEMH Spring Online General Assembly
8th May 2021

Summary for Portugal
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• Current Pandemic Status and Statistics
• Government and Health Authorities Measures
• Vaccination
• Health Professional Reward/Compensations
  - COVID-19 activity
  - Non-COVID-19 activity recovery
• Unchanged Basal Conditions
• Conclusions
Current Pandemic Status and Statistics

• On 2 March 2020 – first case of SARS-Cov2 infection (60-year-old medical doctor) who travelled to the north of Italy on vacation.

• 1\textsuperscript{st} wave: March – April 2020 (“Portuguese miracle”)
• 2\textsuperscript{nd} wave: October – November 2020
• 3\textsuperscript{rd} wave: after – January 2021

• In mid-January 2021, Portugal registered the highest number of SARS-CoV-2 infections in Europe per capita.
Current Pandemic Status and Statistics

Por data de início de sintomas ou diagnóstico/notificação

https://covid19.min-saude.pt

Until 5th of May 2021
Current Pandemic Status and Statistics

Until 5th of May 2021

https://covid19.min-saude.pt
**Current Pandemic Status and Statistics**

**TOTAL DE ÓBITOS**

♂ 8 923

♀ 8 065

Until 5th of May 2021

Datos até dia 05-05-2021 23:59:59

https://covid19.min-saude.pt
Current Pandemic Status and Statistics

INCIDÊNCIA

Nacional: 61,3 casos de infeção por SARS-CoV-2/ COVID-19 por 100 000 hab.
Continente: 59,0 casos de infeção por SARS-CoV-2/ COVID-19 por 100 000 hab.

R(t)

Nacional: 0,95
Continente: 0,95

https://covid19.min-saude.pt
Current Pandemic Status and Statistics

TOTAL DE CASOS E VARIAÇÃO

Active
22,535 | - 170
Recovered
798,952 | +538
Deaths
16,988 | +5
Surveillance contacts
22,010 | - 713
Confirmed
838,475 | +373

TOTAL DE CASOS, DE ÓBITOS E VARIAÇÃO POR REGIÃO

Açores
4,844 | +16
31 | -

Madeira
9,315 | +16
68 | -

Hospital Admission
283 | - 14
ICU
77 | - 6

Dados até dia 05-05-2021 23:59:59

https://covid19.min-saude.pt
Government and Health Authorities Measures

- Due to restrictive measures and vaccination, Portugal recovered and keeps a positive trajectory.

- 15\textsuperscript{th} of January – 15\textsuperscript{th} March 2021: nationwide lockdown

- Plan for releasing COVID-19 containment measures:
  - Stage 1 – 15\textsuperscript{th} March 2021
  - Stage 2 – 5\textsuperscript{th} April 2021
  - Stage 3 – 19\textsuperscript{th} April 2021
  - Stage 4 – 1\textsuperscript{st} May 2021
Government and Health Authorities Measures

• Until today we have opened:
  o All schools (basic, secondary and universities) with presentia classes.
  o Cinemas, theatres, auditoriums, restaurants, cafes and pastry shops.
  o Fairs and non-food markets
  o All shops and shopping centres
  o All sports are allowed, also outdoors physical activity and indoors gyms
  o Land borders with Spain

Government canceled the State of Emergency on the 1st May 2021, and we are facing now the State of Calamity.
Vaccination

The entire population in Portugal may be vaccinated, as long as it is eligible according to the clinical indications approved for each vaccine in EU

**Stage 1**
- December 2020:
  - Health professionals
  - Professionals in armed and security forces
  - Critical services
  - Residents in Residential Structures for the Elderly
  - National Integrated Continuing Care Network professionals and users

- After February 2021:
  - ≥50 years with cardiac insufficiency, coronary heart disease, renal insufficiency, chronic respiratory disease
  - ≥80

**Stage 2**
- After April 2021:
  - ≥65 years who have not been previously vaccinated
  - Between 50 and 64 years with active cancer, diabetes, hypertension, obesity, chronic renal failure.

**Stage 3**
- Expectation: 70% of the adult population vaccinated with achievement of group immunity by September 2021
Vaccination

• Until 4\textsuperscript{th} of May 2021:
  o 3.5 million inoculations >> 2.6 million at least one dose (25%).
  o 915 thousand are already immunized with the complete vaccine.
  o 1.2 million doses ≥ 80 years old.
  o 1.3 million doses 65 – 79 years old.

• In the 1\textsuperscript{st} week of May the rate of vaccination accelerated again, with an average of 61,000 daily doses
Health Professional Reward/Compensations

COVID-19 activity

- Only professionals who have performed, in a continuous and relevant manner, acts directly related to suspects and patients infected with COVID-19 had some compensation, **so only during a very short time frame.**

- 1st wave: single extraordinary payment ~50% of basic salary + 1 vacation extra-day for every 80 hours.

- 3rd wave: 20% extra of basic monthly remuneration but **is being proportionally paid to the worked days, so some doctors are receiving only daily payments.**

- During both periods, there was a 50% increase of supplemental hours.
Health Professional Reward/Compensations

Non-COVID-19 activity recovery

• Incentives were established for additional production for **first consultations and surgeries**, without prejudice of contractually basal care activity.

• Yet, additional production must be carried **outside teams' working hours**, namely on weekends.

• In the **primary care setting**, doctors will only be paid if they extend their activity until **10 pm daily** and if they **achieve pre-defined objectives**.

• The maximum limit of the amount paid to health professionals for additional production is **+95% for first consultations** and **+75% for surgeries**.

• **BUT** the difference is only ~20 to 30% bonus of the habitual payment for additional production in surgery. **BESIDES**, reimbursement has not been equal across institutions for the same complexity of patients.
Unchanged Basal Conditions

• Medical doctors in Portugues NHS is urgently needed, but also other health professionals, namely nurses, operational assistants.

• We need to free medical doctors for assistance and non-assistance activities, rise productivity and quality of health care delivered to population.

• There has been no improvement in working conditions, which were already frail before COVID-19 pandemic.
Unchanged Basal Conditions

- The imbalance between capacities of medical faculties training and medical internships increased.
- Every year hundreds of young doctors do not find a place in specialized training, and many emigrate.
- In addition, after medical residency, many doctors exchange the NHS for private health services, namely in large private groups or emigrate to countries that offer more attractive working and remunerative conditions.
Conclusions

• In Portugal it is imperative to **review medical careers** and **improve working conditions**, including **remuneration**.

• However, the Portuguese Health Minister continues to refuse a meeting with Medical Unions.

• Medical doctors in Portugal try to keep doing their best, in the setting of COVID-19 pandemic and recovering activity, despite difficult working conditions.

• Both **Portuguese Medical Unions** and **Portuguese Medical Board** continue to demand necessary resources to better outcomes, for the best interest of NHS and population in Portugal.