1332 - Presentation type: Oral Communication

Payment per-items of the service: The view of the Croatian General Practitioners
Z. Knezevic*, J. Buljan**, M. Vrcic Keglevic**

*Health Center Slavonski Brod, **Family Practice Velika Kopanica, Slavonski Brod,
***Department of Family Medicine, „A. Stampar“ School of Public Health, Medical School,
University of Zagreb, Croatia

Introduction: Payment per-capita was the only method of reimbursement in Croatian General Practice / Family Medicine (GPs) for a long time. Several years ago, payment per-items of the services was introduced as additional one. Evaluation study was performed to look what was going on in this field. The aim of this report is to search for the factors that motivate GPs to introduce more services in everyday work.

Method: All of the GPs working in the County of Slavonski Brod served as a sample. Two methods were used for data collection. The first, the collection of the official reports regarding the content and the number of per-item activities performed in 2011 and the second, questionnaire on the GPs motivation and satisfaction (5-point, Likert scale: 1 not important, 5 very much important).

Results: Out of the 54 GPs working within the County, 49 participated in the study. The most important motivating factor was the GP’s wish to bring the service near-patient, to fulfill the patients health needs (43/49 GPs marked with 4 and 5 points). The second was the quality improvement (44/49 GPs), and the third was widening the scope of the activities (38/49 GPs). The item on financial incentive has divided the GPs, half of them found important. The enabling factors, those necessary for the introduction of more services were: education (42/49 GPs), practice equipment (35/49 GPs), and the number of patients per day (25/49 GPs).

Conclusion: The results support a fact that intrinsic motivational factors are important (Page 88).

1340 - Presentation type: Workshop

Can portfolio based learning used in continuing professional development?
R. Kaldal1, J. Bednař2, M. Vrcic-Keglević3, E. Jurgova4

1 Department of Family Medicine, University of Tartu, Tartu, Estonia; 2 Department of General Practice, Charles University Prague, Prague, Czech Republic; 3 School of Public Health, University of Zagreb, Zagreb, Croatia; 4 Family Medicine, Family Medicine, Piešťany, Slovakia

There is increasing demand that all medial professionals will need to produce evidence of their continuous professional development activities. Portfolios provide a flexible, multifaceted means of collecting evidence of the achievement of competence over time. Although, portfolios are not new, their use especially in continuing professional development (CPD) in medicine is still very seldom. There is, however, good evidence that if well implemented, portfolios are effective and practical in increasing personal responsibility for learning and supporting professional development. Portfolio based
learning (PBL) bases on the principles of experiential learning, it encourages a adult learner to act and learn autonomously and reflectively, as well as to identify the future learning needs. In CPD more emphasis should be placed on continuing education that occurs when clinicians search for answers to questions that arise in clinical practice, instead of that which occurs at an arbitrary time designated for CME. Study of a CPD/CME Committee of a EURACT revealed that passive learning is highly more common among general practitioners in different European countries, PBL was used only in some cases. Why active learning methods are unpopular? In which circumstances can PBL be used in everyday clinical practice? What are advantages and disadvantages of PBL? What are the links of portfolios and CPD? This questions will be discussed in a workshop. Also, different methods of collection of learning experience as well as principles of PBL will be discussed. Disclosure: No conflict of interest declared (Page169)

1178 – Poster presentation

Passing ratio at the Croatian General Practice / Family Medicine specialist's exam
Vrcic-Keglevic M.

Department of Family Medicine, «A Stampar» School of Public Health, Medical School University of Zagreb, Croatia (mvrcic@snz.hr)

Introduction: Vocational training in General Practice/Family Medicine (GP/FM) in Croatia lasts 3 years and with specialist's exam. It consists of 2 parts: preparatory part including portfolio, 8 written essays, trainer's assessment of clinical competence, trainer's progress report and final part including written test, OSCE, and oral exam in front of three members jury. After six years of experience we provided the evaluation of the exam. The aim of this report is to see the passing ration at the final part.

Methods: A sample consists of the 675 candidates applied for the final part of the exam. The results of the passing scores at the written, OSCE and oral part of the exam were recorded as well as demographic data of the candidates.

Results: The overall passing ration at the final part of the exam was 84,4%. 15,6% candidates failed and should repeat certain parts. The most of them failed at the written part (17,1%), followed by the failure at the oral part (3,8%). OSCE exam have to repeat 2,1% candidates. There were no differences regarding the sociodemographic data of the candidates.

Conclusion: Even we found high passing ratio, we considered that the failure at the exam is wasting the financial and human resources, therefore we discussed this results with the trainers of those candidates who failed (Page 286).

1184 – Poster presentation

A role of General Practitioners / Family Doctors in the provision of the contraceptive care for the Croatian women
Bencic Miro*, Vrcic-Keglevic Mladenka**

*Health Center „Zagreb County“, Family Medicine Surgery „Brdovec“, Croatia
**Department of Family Medicine, „A. Stampar“ School of Public Health, Medical School, University of Zagreb, Croatia
**Introduction:** Primary Health Care in Croatia is based on General Practice/Family Medicine, paediatricians and gynecology. The women’s health is somehow divided between GPs/FDs. It is a question who is responsible for what? The aim of this report is to present the results of the survey of the women opinions regarding a role of GP/FD in the provision of the contraceptive care.

**Methods:** The survey of the different aspects of contraception was carried on in two small communities, rural and urban, near Zagreb. 5% of the female population from 18 to 45 years was involved as a sample. Validated questionnaire, designed for the study purposes, consist of 35 questions, investigating women's opinion on different aspect of the contraception, including a role of GP/FD.

**Results:** Out of 329 participants, 41% are women from rural and 58% from urban setting. Gynaecologists were the persons most frequently consulted while choosing the contraceptive methods (41.3%). A consultation among the partners was at the second place (30.5%). Personal decision was present in 17.8% women. 7.5% women asked friends or consulted a literature. Only two women (0.9%) consult their GPs/FD. 83.2% of the women did not recognize GPs/FDs as the professionals to consult. Lack of knowledge and experience in the field of contraception was the reason for some of them not to consult GPs/FDs. There were no differences regarding the socio-demographic characteristics of the sample.

**Conclusion:** The professional organizations and organizers of health care should take into the consideration the fact that, for Croatian women, the role of GPs/FDs in the field of contraception is not important (Page 1335).

1335 – Poster presentation

**Do the patients discuss about self-administered alternative/complementary medicine with their General Practitioners**

H. Jasa*, M. Vrcic-Keglevic**

*Health Center Zagreb – Centar, Zagreb, Croatia, **Department of Family Medicine, „A. Stampar“ School of Public Health, Medical School, University of Zagreb

**Introduction:** Complementary/alternative medicine (CAM) is popular within Croatia population. The researches have shown that 20% to 40% of the population is temporary or permanent users. It is also well known that the patients informed their General Practitioners / Family Doctors (GPs/FDs) very rarely. What is a situation in Croatia is the question we would like to answer.

**Methods:** A cross-sectional survey was carried out in 15 GPs/FDs practices all around Croatia. A sample consisted of the patients, consumers of the different CAM methods, and come to the practice within predefined two days. Validated and for the purpose of this study developed questionnaire, contains 35 questions including those related to the role of GPs/FDs.

**Results:** Out of 244 participants, 121 of them discussed with their GPs/FDs the CAM methods they used. 52.9% of the patients informed their GPs/FDs because they believed that doctors have enough knowledge about CAM necessary for discussion. Additional 18.2% patients thought that their GPs/FDs had enough knowledge and also were ready to discuss. Opinions that the use of CAM methods were patient’s personal choice was the main reason why the patients did not inform their GPs/FDs. Lack of doctor’s interest (20.3) and lack of knowledge (10.6) were the other reasons. The elderly were more ready to discuss (χ² =10.873, df=2, p=0.0043). We did not found any other differences regarding patient’s socio-demographic characteristics.
Conclusions: Those responsible for the education as well as the professional organization should take in consideration the results of this study (Page 1563).