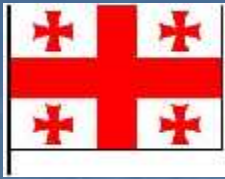


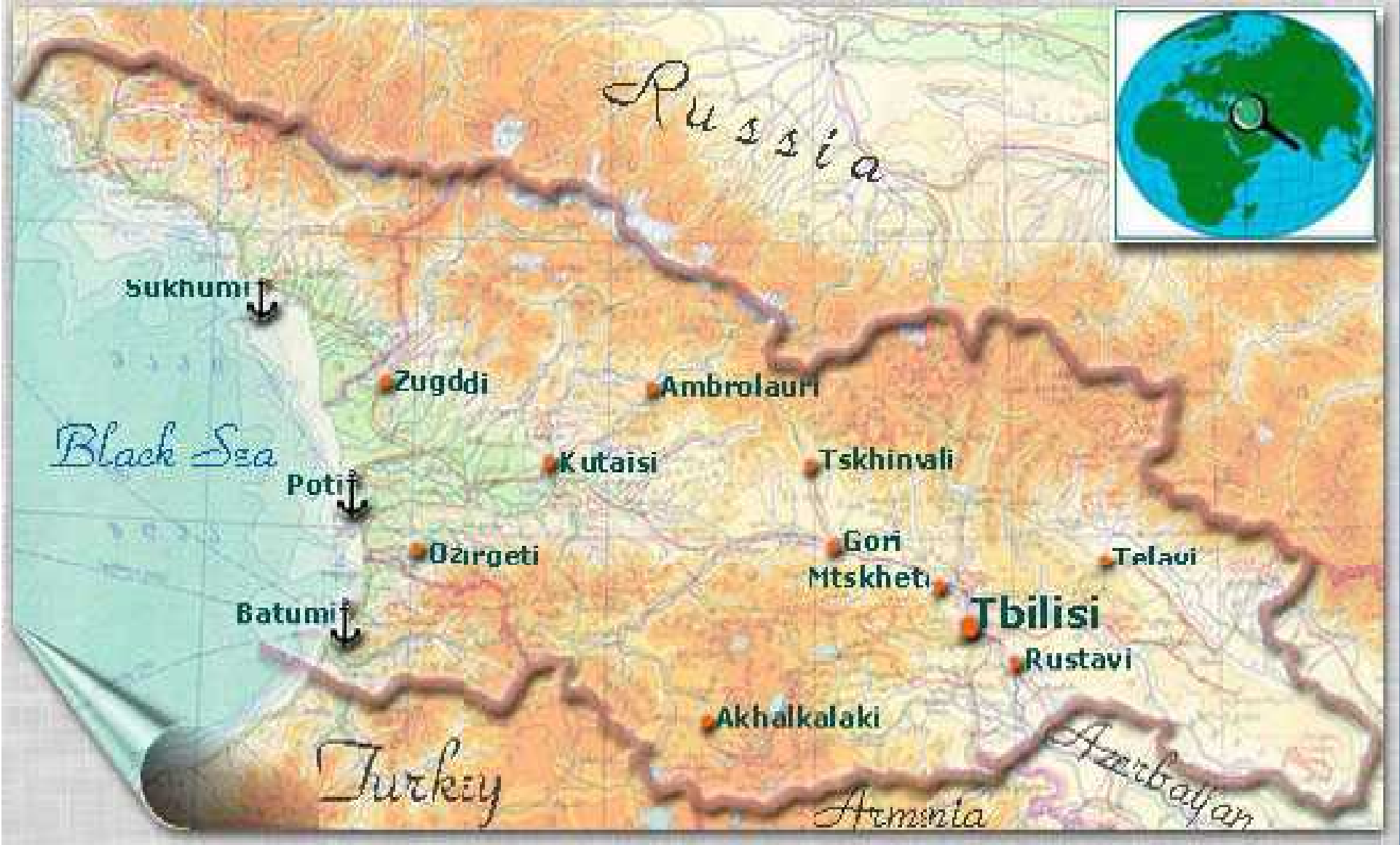


Academic Issues of Family Medicine in Georgia: Tbilisi Columbia, MO Partnership

Tataradze R, Gabunia T, Simonia G,
Avaliani Z, Chabashvili N, Blaike R,
Blair T



GEORGIA





GEORGIA

Country data

- Population – 5.4 million
- Capital- Tbilisi, population 1.253.000
- Surface area – 69.700 sq. km
- Population per sq. km – 78
- Birth rate (May 1, 1998) – 11.2 %
- Maternal mortality rate-19,3%
- Mortality rate-7,7 % (May 1, 1998)
- Life expectancy (2002) – 72.63 years
- Population absolute poverty rate (1999)–20%
- GDP (US \$) – 995 per capita (1998)



Strategic Health Plan of Georgia for the years 2000-2009

Main points

- Emphasis on improving primary and preventive services rather than on curative care
- Shifting considerable resources to primary care from hospital services
- Strengthening Primary Health Care with the introduction of family physicians and developing new nursing PHC services



Challenge: Lack of appropriately trained Human Resources

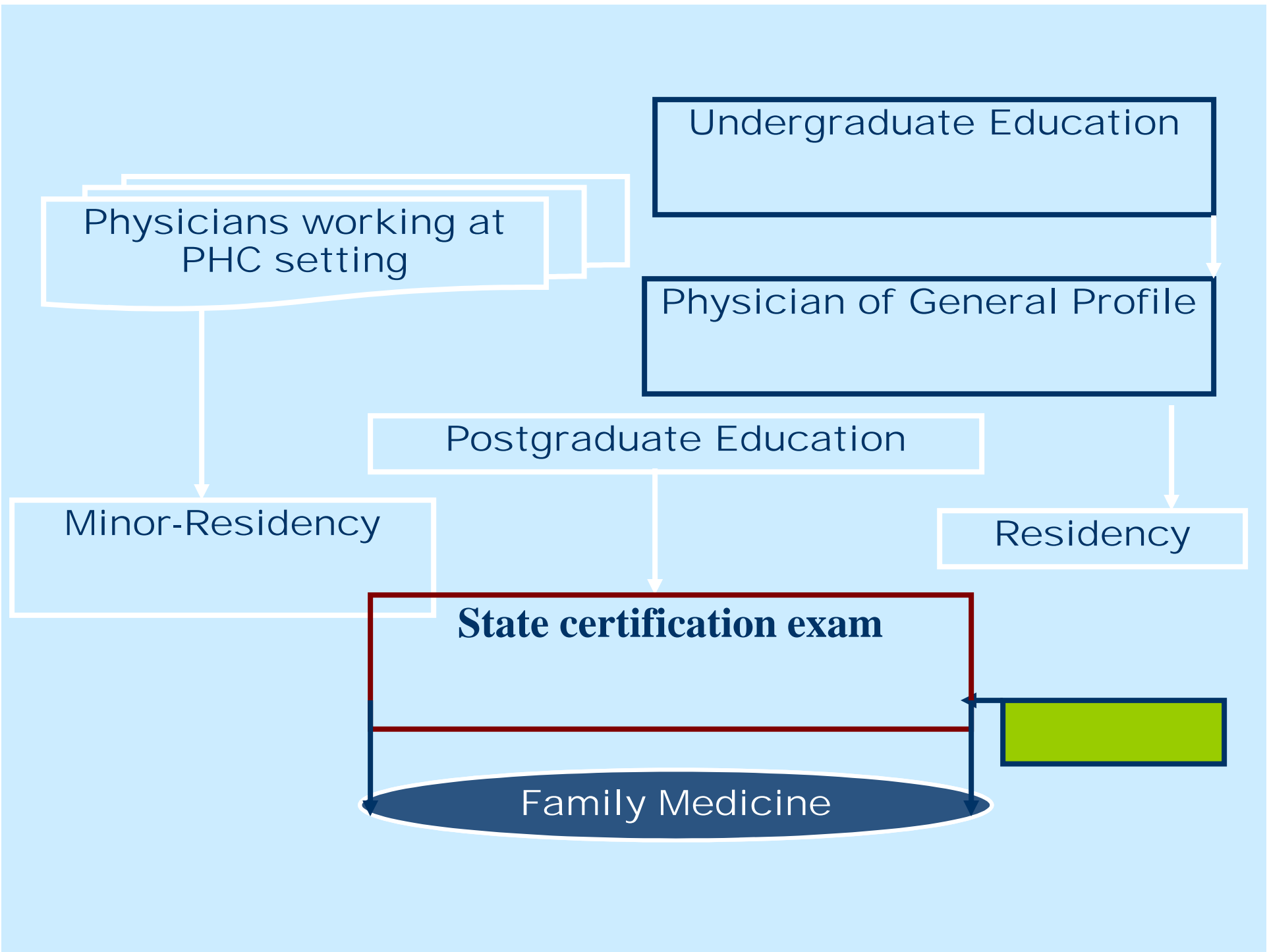
Key issues

Who are they?

Where they are from?

Where?

How?



Undergraduate Education

Physicians working at
PHC setting

Physician of General Profile

Postgraduate Education

Minor-Residency

Residency

State certification exam



Family Medicine

Family Medicine in Undergraduate Education

- Tbilisi State Medical Institute (1986)

Department of Polyclinic and Emergency Medicine:

Syndrome Based diagnostics in Ambulatory Setting,
Prevention, Continuous medical care, common
problems encountered in general practice

- Medical Faculty of the Tbilisi State University

Module: Polyclinic Care with the elements of Family
Medicine

Physicians working at PHC
setting

1997 . . .

Family Medicine

1997-1999

Key Achievements

- The specialty “General Medical Practice/ Family Physician” had been included in the list of medical specialties
- Re-training programme for Family Physicians was developed (940 hours)
- Assessment tools for certification of FPs was prepared

1997-1999

Key Achievements

- Were trained the first Family Physician's trainers who were awarded as a honorary overseas GP Tutors at Deanery of postgraduate general practice education at the University of London

2000-2003

Key Achievements

- IN-SERVICE TRAINING for FM HR introduced and implemented
- NFMTC and four FMTC in Tbilisi and Mtskheta-Mtianeti Regional Training Center established and fully operational
- Re-training programme for Family Physicians was revised and Temporary Training programs for Family physicians, nurses and managers approved by the MoLHSA in April 2002
- Temporary statutes for Family Physicians, Nurses and Managers were developed and approved

Key Achievements

2000-2003

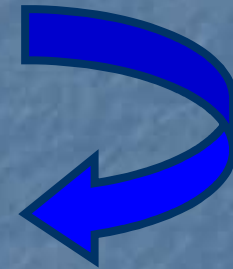
- Training materials for FPs, GPN and PMs were developed
- The first Georgian textbook in Family Medicine was issued with support of NIHS



CME for FPs and FPTs

Focus:
Performance

Quality





- Training took place in FM training Centers
- Training programmes were led by Family Physician's Trainers, General Practice Nurse Trainers and Manager Trainers

PHC team Building

Multiprofessional training



Residency Programmes in family Medicine

- The state has been providing financing for 3-4 physicians for family medicine residency program per year since 2002
- Columbia Missouri medical school and its department of Family and Community medicine is working with the Tbilisi State Medical University to establish joint MU-TSMU Family Medicine Residency programme in Georgia

2004. . .

Challenges:

- Family Medicine new discipline without strong academic background
- Very limited opportunities for research and professional development
- Still no clear vision-What should "Georgian" Family Physician do?

The role of the Georgia Family Medicine Association

- **Setting and maintaining high professional standards**
- **Evaluating functional characteristics of family medicine model**
- **Contributing towards the professional development and growth of FM HR through participating in developing of postgraduate and undergraduate professional training programmes for FM human resources**
- **Developing evidence based clinical and practice management guidelines and contribute to it's implementation**
- **Introducing research methodology at PHC setting which may lead to improved problem identification, setting specific problem solving ways and quality improvement**

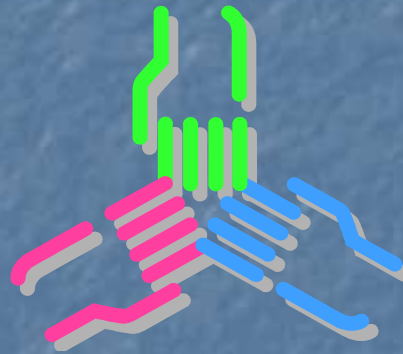
Cooperation

MOLHSA

International
Organizations

Medical
Schools &
Universities

Other
organizations



Regional
Departments of
Health & Social
Affairs

Professional
Associations

WONCA