



**ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX
EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS
EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE
EUROPESE VERENIGING VAN STAFARTSEN
DEN EUROPÆISKE OVERLÆGEFORENING
ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΑΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
DEN EUROPEISKE OVERLEGEFORENING
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES
ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES
EUROPEISKA ÖVERLÄKARFÖRENINGEN
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVNIKOV
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΑΪΑΙΑ ΗΑ ΣΤΑΡΣΗΤΕ ΒΟΛΗΙΗΝΗ ΛΕΚΑΡΗ
ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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1. NATIONAL SURVEY AMONG HOSPITAL PHYSICIANS – CONDUCTED BY THE AUSTRIAN FEDERAL BODY OF EMPLOYED DOCTORS

Further to the surveys already conducted in the years 2003, 2006 and 2010, the *Austrian Federal Body of Employed Doctors* is going to conduct a fourth anonymous telephone survey among hospital doctors, again, in cooperation with the Austrian polling firm IFES.

The upcoming survey is going to contain once more key aspects such as working atmosphere, workload and job satisfaction. The results of this survey are, once again, considered a valuable contribution to the activities of the *Austrian Federal Body of Employed Doctors*.

2. EVALUATION OF MEDICAL TRAINING – SURVEY ABOUT TRAINING SITUATION

The project was initiated by the *Austrian Federal Body of Employed Doctors* in August 2011 and will run until autumn 2014.

Numerous doctors in training have been invited to take part in the online survey; participation in the survey so far has been very high, which reflects a strong interest of doctors in training in their training situation.

Participants may rate the quality of the training as well as the resulting learning achievement by allocating scores ranging from 1 to 5 (i.e. by means of school rates).

3. HEALTH CARE REFORM

As already mentioned in earlier national reports the Austrian federal government, the federal provinces and the social health insurance funds have been planning a health care reform without consulting and involving patients and the medical chamber; this reform will have a major impact on medical practice.

In the meantime the health care reform was agreed upon by the Council of Ministers and is now on its way to the plenary session of the national council (Nationalrat) and the federal council.

The health care reform was sharply criticised not only by the Austrian Medical Chamber but also by the Court of Auditors.

It focuses mainly on fiscal objectives and reduction of resources. Savings are expected by introducing a federal budget for health, joint planning, financing and management of the health system. The Austrian Medical Chamber has expressed great concern about the fact that spending on health will be bound to the average growth of the GDP, since it does not take into account the individual particular patient's needs and the future development of medicine.

The Austrian Medical Chamber, for its part, has developed a health policy program. This reform concept foresees among other key points strengthening of the health care system on behalf of the patients, better coordination between general practitioners and specialists in free practice to guarantee better treatment of patients. The basis of an optimal primary care is the repositioning of the GP as a trust doctor as a first contact to the health care system. Outpatient and inpatient care are to be funded from two different sources.

4. MULTIPLE SENIOR MANAGEMENT POSITIONS WITH A VIEW TO ACHIEVING SAVINGS

The Austrian Medical Chamber is still strongly against the fact that chief physicians shall be responsible for more than one senior management position.

This interferes with the responsible exercise of the medical profession. Furthermore, chief physicians who are responsible for more than one senior management position have to cope with unreasonable daily stress burden.

Multiple senior management positions may jeopardise the quality of health care in the long term, with consequences for the training of the next generation of medical profession.

In addition to the administrative workload there will also be a high responsibility pressure, when fulfilling their duties as head of more than one department.

The *Austrian Federal Body of Employed Doctors*, as a matter of principle, rejects multiple senior management positions, because this would not only lead to reduction of medical senior management in hospitals but also to relativization of its significance and value.

23.4.2013, Dr. Stärker/nh