



**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
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΙΑΪΙΑ ΗΑ ΣΤΑΡΣΗΤΕ ΒΟΛΗΙΗΙΝΗ ΛΕΚΑΡΗ
ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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Working conditions of hospital doctors

In September 2014 consensual agreement on working conditions for hospital doctors between doctors' syndicate and Ministry of Health was not reached and 70% of hospital doctors went on strike. The strike was strongly opposed by Minister of Health. The wages of all doctors involved were lowered. After some time (months) a decision on compulsory working obligation was proscribed which practically unable participants to legally continue with strike. However, the Constitutional Court of the Republic of Croatia found this decision to be against the principles of law and constitution and annulled it. The strike could continue but the Doctors' Syndicate decided to put it on hold for indefinite time.

This was not the last doctors' problem as since January 2014 new decision from Minister of Health has passed: instead of on-call work, hospital doctors were demanded to work in shifts. New organizational scheme demanded more workforce than available and existing at all. Namely, since Croatian accession to the European Union in July 2013 with free access to the labour market many doctors decided to go abroad and continue working in the EU countries. This workforce migration (est. to 400 - according to the Croatian Medical Chamber data) has had a huge impact on health care service in hospitals especially after introduction of work shifts.

Another obstacle for normal function of hospitals was strict implementation of the Working Time Directive (2003/88/EC) with working time being limited to 48 hours/week. According to Croatian Labor Law overtime work only up to 180 hours/year is allowed and even doctors who are willing to "opt out" would not be paid for extra hours.

Working for several employers

Croatian health legislation allows hospital doctors to contract their services with another employer (usually private clinics) up to one third of their working time. This has been for years well accepted way for hospital doctors to improve their income and on the other hand an acceptable way for private clinics to survive without having employed so many specialists for full-time. Although this possibility exists in bylaws, in reality the Minister of Health strongly disagrees this type of merged public and private initiative. Only very few hospital doctors were granted with a permission to provide their services with another employer.

"Master-plan" for hospitals

Master plan – a national plan for future Croatian Hospital System development is a 200.000 € worth project, performed by French consulting company upon directives given by the World Bank. The final version was brought into public in April 2014. Master plan is meant to be strategic document in helping Croatian hospitals to improve their imperfections. This plan envisions merger of 21 county

hospitals, decrease of hospital stay duration (hospital days) and reduction of the number of hospital beds (by 30%). Notwithstanding the fact that Croatian hospitals urge for re-organization and improvement all medical professional organizations (together with Medical Chamber) were disappointed that neither input nor consultation was prior asked or accepted.

Croatian Health Insurance Fund

After a decade of being part of the state treasury, the Croatian Health Insurance Fund – sole insurer for obligatory health insurance in Croatia – insisted recently to become independent and to spend money collected only for health care, that was otherwise being used, i.a. for other public purposes. However, this separation was stopped and deferred for unknown period. As Croatian prime minister stated this change is expected to happen after 2015.

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