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EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE
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ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΑΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
DEN EUROPEISKE OVERLEGEFORENING
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΑΪΑΙΑ ΝΑ ΣΤΑΡΣΗΤΕ ΒΟΛΝΗΧΝΗ ΛΕΚΑΡΗ
ASOCIAȚIA EUROPEANĂ A MEDICILOR DIN SPITALE**

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SPRING REPORT AUSTRIA – AEMH, FEMS MAY 2018

1) New Federal Government – Minister for Health and Social Affairs Beate Hartinger

After early elections took place in Oct. last year, Austria's new Federal Government led by chancellor S. Kurz (People's Party, ÖVP) was inaugurated on 18th Dec, 2017. The Ministry of Health, which has been merged with social affairs for the first time since the late 1990s, is led by healthcare manager Beate Hartinger-Klein (Freedom Party, FPÖ).

The government's programme for 2017-2022 sets out an ambitious plan for the health sector, partly touching upon some long-standing demands of the Austrian Medical Chamber. The five key areas of the programme are as follows:

- **Prevention and health promotion** (incl. promotion of vaccination, esp. for healthcare personnel, incentive-based medical check-ups, expansion of the mother-and-child healthcare programme)
- **A „customer focussed“ healthcare system** (e.g. strengthening of the self-employed general practitioner, establishment of primary care structures while easing the burden on outpatient hospital departments, possibility for doctors to hire other doctors, finance plan for teaching practices, evaluation of a possible introduction of a specialist in general medicine, reduction of waiting times for surgery, treatments and examinations)
- **A reformed social insurance system** (harmonisation of benefits across statutory social insurance providers, reduction of statutory social insurance providers)
- **Expansion of digitalisation and telemedicine** (e.g. improved user-friendliness of electronic health record ELGA, expansion of E-card (social insurance card) to include e-prescriptions, e-reports, e-medication)

An improved framework for the healthcare system (incl. deregulation measures for private healthcare providers, strengthening of non-medical healthcare professions according to international standards, reform of the Hospital Working Hours Act (KA-AZG))

2) Evaluation of medical training

On behalf of the federal body of employed doctors of the Austrian Medical Chamber, the Medical Quality Centre continuously carries out surveys addressed to all doctors in training in Austria about basic training as well as general and specialist medical training. The last evaluation was carried out in October 2017.

The training evaluation is focused on the specifics of medical training and therefore proceeds methodically depending on the part of the training, e.g. the basic medical training is evaluated as a whole, whereas in general medicine each department is assessed. The main topics of the

evaluation are workload, knowledge acquisition, feedback from supervisors, evaluation of learning success, and implementation of the training concept and work processes of the department. The basic training is evaluated shortly after completion of the training, the evaluation of the general medical training takes place after completion in each department, and specialists in training are invited annually to participate. An evaluation of the results for a department or hospital is only carried out if there is a minimum number of four feedbacks. The feedback is used for the political work of the Austrian Medical Chamber and the regional medical chambers in order to continuously improve the quality of training. The current results show that there is room for improvement when it comes to time and personnel resources and to administrative and documentation tasks, so that the young doctors have more time to complete their training.

3) E-Health: introduction of E-Medikation and e-referral

The main association of social insurance providers and the Austrian Medical Chamber have signed a contract for the introduction of “e-Medikation” as a feature of the electronic health record (ELGA). E-Medikation is an application in the form of a database containing information on the medications that have been prescribed and dispensed. However, e-Medikation is not equivalent to purely electronic prescribing, and the patient will continue to receive an ordinary paper prescription. A national roll out of e-Medikation has started at the beginning of 2018. It is mandatory for all self-employed doctors under contract with a health insurance fund. Patients have the possibility to opt out from the e-Medikation feature, or from ELGA as a whole.

The electronic communications service eKOS is also regulated in this contract. The aim is to introduce e-assignment, e-referral and e-prescription in the course of 2018. By the end of the year, these applications are intended to be used nationwide by all contract physicians.

4) Working time

As per 01.01.2018, several new regulations regarding doctors' working time have entered into force: According to the Hospital Working Hours Act, the average weekly working time is now 55 hours, subject to a corresponding employment agreement and an individual opt-out declaration. From 01.07.2021 onwards, the average weekly working time will be limited to 48 hours (no possibility for opting out after this date). Prolonged duties (32 hours or 49 hours) are no longer permitted; until 31.12.2020 duties must be limited to a maximum of 29 hours. From 01.01.2021 onwards, duties will be limited to a maximum of 25 hours.

There is strong pressure from the different federal countries who run most public hospitals in Austria on the government to prolong the current regulations after 2021.