

# Health Transformation Program in Turkey

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# Executive Summary

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- ▶ **Fundamental changes in many areas;**
  - ▶ Service delivery
  - ▶ Financing
  - ▶ Human resources
  - ▶ Information system
- ▶ **The transformation movement both in;**
  - Preventive services & Curative services
- ▶ **Aim: To improve health system in a country, all needed is to get support of that country's political authority.**
  - ▶ In that manner, Turkey is lucky because of the strong political authority bw 2002- 2008.



# Executive Summary

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- ▶ The hospitals of other public institutions, including SSK, were transferred to the Ministry of Health
- ▶ The coverage of green card have been widened for low income groups
  - ▶ The health services and the pharmaceutical expenses of the green card holders within the scope of “outpatient services” are also now covered by the state.
- ▶ The VAT of the pharmaceuticals has been reduced and the medicine pricing system has been changed.
- ▶ “112 Emergency Health” services are delivered no only in cities but also in villages.



# Executive Summary

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- ▶ A total of 1249 health facilities are opened for service including 211 hospitals, 191 hospital outbuildings, 752 health centers.
- ▶ Primary health care services including preventive healthcare and mother-child healthcare services, are strengthened and expanded.
- ▶ Ahead of European average in all vaccines in terms of ratios.
- ▶ Significant progress in cancer screening in Turkey.



# Health Policies in Turkey

## Past to Present

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### ▶ Health Policies bw 1920-1923

- ▶ No good records
- ▶ The focus was mostly on recovering from the damages of the war and on developing legislation.

### ▶ Health Policies bw 1923- 1946

- ▶ The establishment and development of the health services in Turkey.
- ▶ “Single purpose service in a wide area/vertical organization” model
- ▶ “Preventive medicine” concept has been developed
- ▶ Diagnosis and treatment centers have been established in district centers beginning with the places with high population, the salaries of the physicians working in preventive health care services were increased.
- ▶ Ankara, Diyarbakir, Erzurum, Sivas, Haydarpasa Numune Hospitals were opened.



# Health Policies in Turkey

## Past to Present

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### ▶ Health Policies bw 1946-1960

- ▶ “First Ten Year National Health Plan”
- ▶ The inpatient treatment institutions were started to be managed from the center.
- ▶ There was high mortality in terms of children and due to infections and this led to the intensive implementation of the policies for increasing the population.
- ▶ Significant progress in health centers, delivery centers, infectious diseases centers and health human resources development.
- ▶ Average life expectancy at birth was 43.6 years in 1950-1955, 52.1 years in 1960-1965, 57.9 years in 1970-1975



# Health Policies in Turkey

## Past to Present

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### ▶ Health Policies bw 1946-1960

- ▶ When the years 1950 and 1960 are compared, physicians, nurses and midwives increased more than 100% for all.
- ▶ The number of hospitals and health centers was also increased as well as the number of beds.
- ▶ Tuberculosis related mortality had a significant decrease.
- ▶ Positive change in infant mortality rate.
- ▶ Workers' Insurances Administration was established (1946). Starting from 1952, health institutions and hospitals were opened for the insured workers.



# Health Policies in Turkey

## Past to Present

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### ▶ Health Policies bw 1960-1980

- ▶ The socialization in health actually began in 1963.
- ▶ Anti-natalist (population control) policy was adopted instead of pro-natalist (population rising) policy.
- ▶ “Multi dimensional service in narrow area” approach was adopted as an alternative to the “single dimensional service in wide area”.

### ▶ Health Policies bw 1980-2002

- ▶ The 1982 Constitution ensures citizens to have social security rights and the State to assume the implementation of this right.
  - ▶ Green card implementation has been introduced in 1992.
  - ▶ Including the needy part of the society in the health insurance was one of the efforts.
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# Health Policies in Turkey

## Past to Present

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### ▶ Health Policies bw 1980-2002

- ▶ The main components of The Health Reform, conducted in 1990's:
  - ▶ Establishment of a universal health insurance by gathering the social security institutions under one umbrella.
  - ▶ Development of the primary health care services in the framework of the family medicine.
  - ▶ Transformation of the hospitals into autonomous health facilities.
  - ▶ Providing a structure to the Ministry of Health which plans and supervises the health services prioritizing preventive health services.



# Health Policies in Turkey

## Past to Present

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- ▶ **Health Policies after 2003: Turkey's Health Transformation Program**
  - ▶ **The key objectives:**
    - ▶ Administrative and functional restructuring of the Ministry of Health
    - ▶ Covering all the citizens by the universal health insurance
    - ▶ Gathering the health institutions under one umbrella.
    - ▶ Providing the hospitals with an autonomous structure administratively and financially.
    - ▶ Introduction of the implementation of family medicine.
    - ▶ Giving special importance to mother and child healthcare.
    - ▶ Generalizing the preventive medicine.
    - ▶ Promoting the private sector to make investment in the field of health.
    - ▶ Devolution of the authorities to the lower echelons in all public institutions.
    - ▶ Eliminating the lack of health personnel in the areas which have priority in development.
    - ▶ Implementing the e-transformation in the field of the health.
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# Health Policies in Turkey

## Past to Present

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- ▶ Health Policies after 2003: Turkey's Health Transformation Program
    - ▶ The Urgent Action Plan
      - ▶ Ministry of Health as the planner and supervisor
      - ▶ Universal health insurance gathering everyone under single umbrella
      - ▶ Widespread, easily accessible and friendly health service system
      - ▶ Health manpower equipped with knowledge and skills and, working with high motivation
      - ▶ Education and science institutions to support the system
      - ▶ Quality and accreditation for qualified and efficient health services
      - ▶ Institutional structuring in the rational management of medicine and supplies
      - ▶ Access to effective information at decision making process: health information system
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# Health Policies in Turkey

## Past to Present

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- ▶ **Health Policies after 2003: Turkey's Health Transformation Program**
  - ▶ The matters subject public displeasure have changes.
  - ▶ The patient safety or patient satisfaction is being discussed rather than queues or access to health services.
  - ▶ The scope of social security and Universal Health Insurance are the main issues today, not the unreleased patients who could not afford to pay.
  - ▶ Instead of low number in vaccination rates, addition of new vaccines in the calendar has come up in agenda.
  - ▶ While health personnel used to suffer because of their low income, now they are in a position following up their continuous income.



# Health Policies in Turkey

## Past to Present

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- ▶ **Health Policies after 2003: Turkey's Health Transformation Program**
  - ▶ In 2007, 3 new topics introduced also;
    - ▶ Health promotion for a better future and healthy life programs
    - ▶ Multi-dimensional health accountability for mobilizing the parties and inter-sectoral collaboration
    - ▶ Cross-border health services which will increase the country's power in the international arena.
    - ▶



# A New Era in Health

## 1. Mentality Change toward Human-Centered Service Understanding

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- ▶ The health services are not the mercy of State but delivery of people's rights.
- ▶ “112 Emergency” service not only in cities by also in the villages.
- ▶ Consultation to any hospital, each citizen wishes.
- ▶ Family medicine practice that in initiated first in Duzce, is now active.
- ▶ The pregnant women and the infants followed delicately.
- ▶ One of the greatest medical rescue teams in Europe with 2526 specially trained health personnel ready to act in emergencies in 81 provinces.



# A New Era in Health

## 1. Mentality Change toward Human-Centered Service Understanding

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- ▶ Every hospital in Turkey includes a “Patient Rights” unit.
- ▶ 20.000 new hospital beds
- ▶ Increased the bed capacity of intensive care with 7.5 times
- ▶ Very important steps regarding the improvement of our health personnel’s income level and working environment.
- ▶ Employment of more than 110.000 new health personnel in public sector.



# A New Era in Health

## 2. Widespread and Equal Health Insurance: Universal Health Insurance

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- ▶ Important steps in the registration of health services, establishment of a joint database for all of the institutions and standardization of the service invoices.
- ▶ The discrimination between state hospitals and Social Security Institution hospitals was eradicated and thus unity was provided between public hospitals' operation models.
- ▶ An infrastructure providing the usage of a joint medicine database by all the social security institutions was developed.
- ▶ The harmonization works, carried out by the health service providers and the social security agencies that will pay for this service, are important steps which prepared the environment for the universal health insurance.





# A New Era in Health

## 2. Widespread and Equal Health Insurance: Universal Health Insurance

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- ▶ Public insurance consists of following, unified:
  - ▶ SSI
  - ▶ Social Security Organization for Artisans and Self-employed
  - ▶ Government Retirement Fund
  - ▶ Civil servants
  - ▶ Green card owners
- ▶ Now, all citizens are treated equally .
- ▶ The main objective of the social security reform is to form a financially sustainable system which is fair, easily accessible and supporting the poor.
- ▶ People insured with different instructions with different practices are equal.
- ▶ Children under the age of 18 benefit from health services without any specific conditions.



# A New Era in Health

## 2. Widespread and Equal Health Insurance: Universal Health Insurance

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- ▶ The additional fee which the service providers can get from the patients as a difference at most 30%.
- ▶ A ceiling for the fees to be received by the academicians for the healthcare services they provide.
- ▶ Retirement insurance has been altered significantly.
- ▶ A single retirement regime that will provide equal and fair services to the people within this system.
- ▶ The age, premium payment and insurance durationn of the actively insured people have been maintained in the same way.



# A New Era in Health

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- ▶ The age, premium payment and insurance duration of the actively insured people have been maintained in the same way.
- ▶ No change in the retirement age till 2035.



# A New Era in Health

## 2. Widespread and Equal Health Insurance: Universal Health Insurance

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- ▶ **Single daughters**, without age limits, will receive survivor's pension on condition that they do not have any incomes.
- ▶ **Sons**, will receive survivors' pension until the age of 18, if they are enrolling higher education until the age of 20, if enrolling universities until the age of 25.
- ▶ When the treatment is not possible within the country, all insured will be sent abroad for accurate treatment with the approval of Ministry of Health.
- ▶ No payment required for primary health care, since January 2007.



# A New Era in Health

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# A New Era in Health

## 3. Campaign for Primary Health Services

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- ▶ The main focus of this transformation is to improve the conditions of the individuals in general and patients and health staff in particular.
- ▶ To ensure access to healthy life programs will be the primary objective.
  - ▶ Long life expectancy
  - ▶ Combating against communicable diseases
  - ▶ Decreasing the patient load
  - ▶ To prevent chronic disease



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **A new face and new tasks for health center**

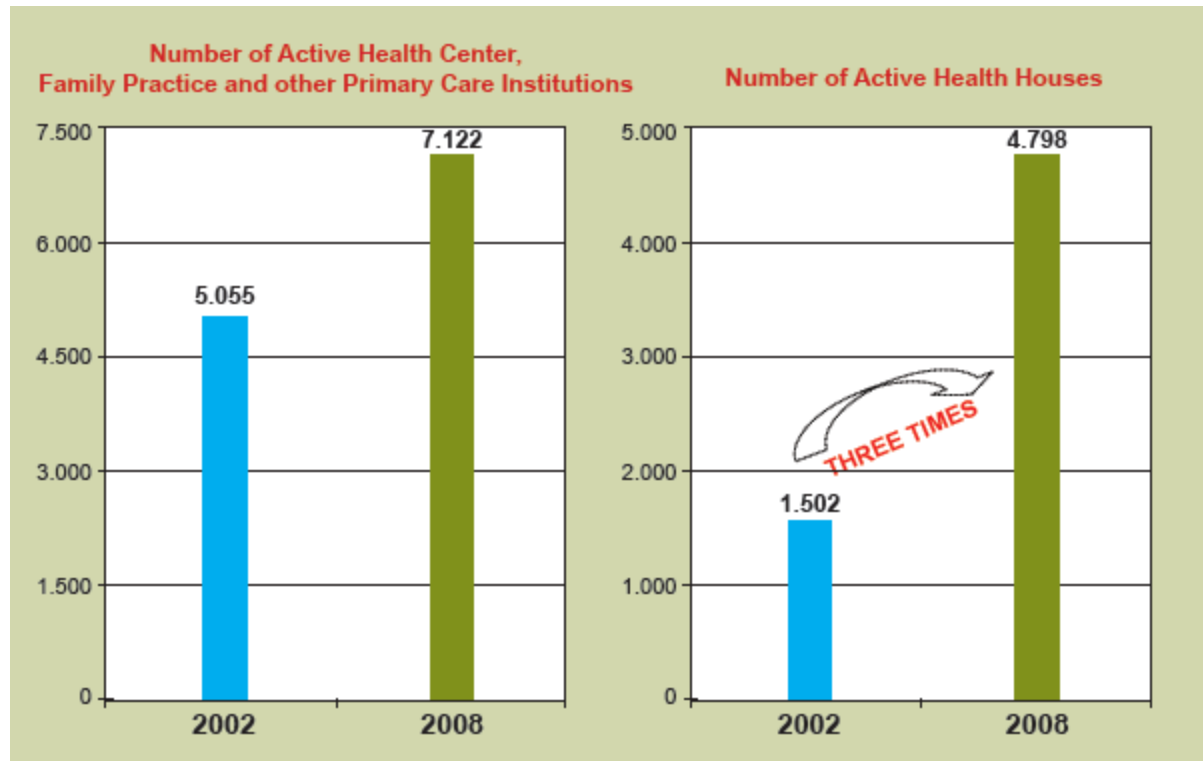
- ▶ “A room for each physicians” principle was turned into a campaign.
- ▶ The primary healthcare services have been restructured with the entry of the Family Health Centers and the Community Health Centers into the system.
- ▶ The examination rooms in the primary health care service institutions were increased by 155% in 6 years.



# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ A new face and new tasks for health center

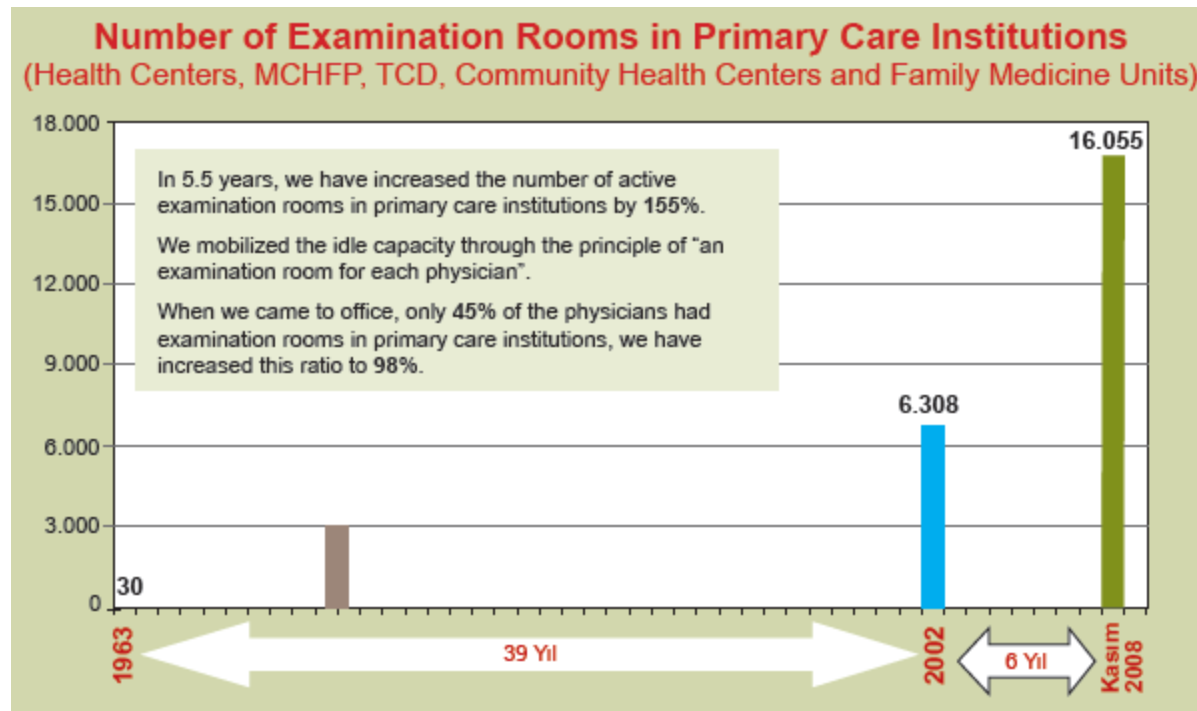




# A New Era in Health

## 3. Campaign for Primary Health Services

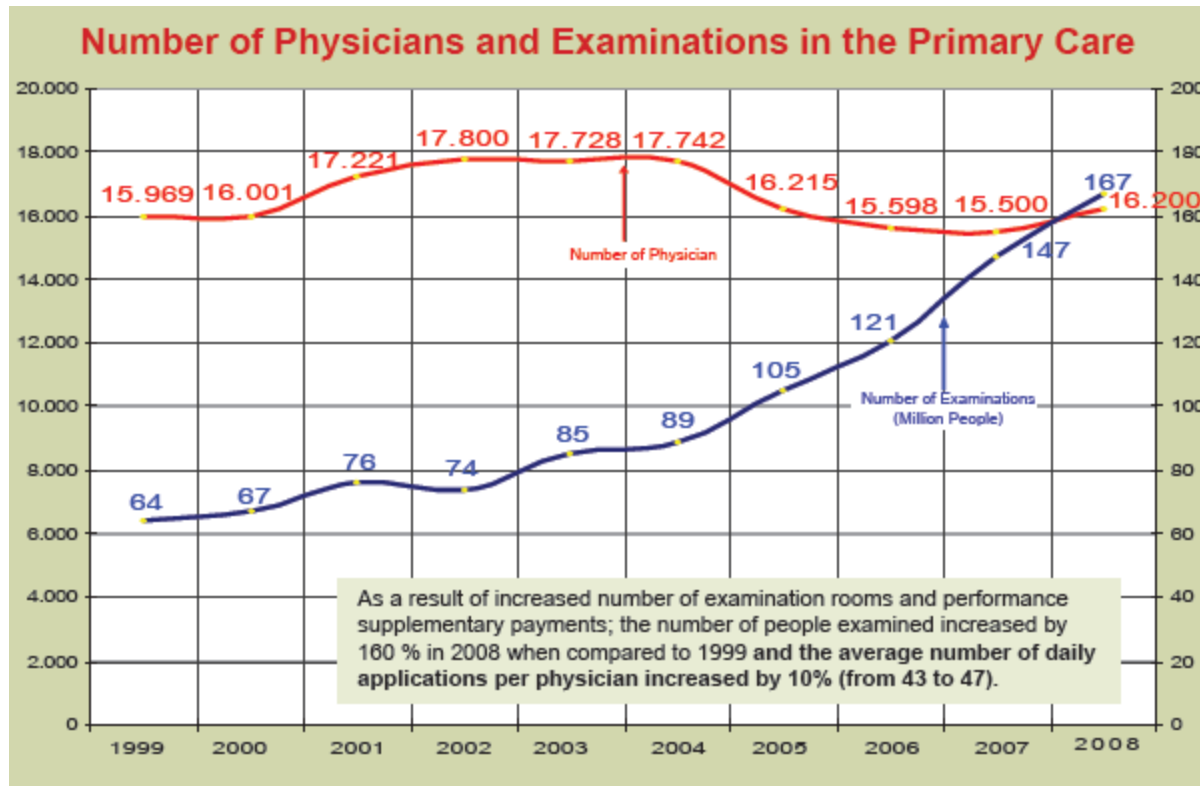
### ▶ A new face and new tasks for health center



# A New Era in Health

## 3. Campaign for Primary Health Services

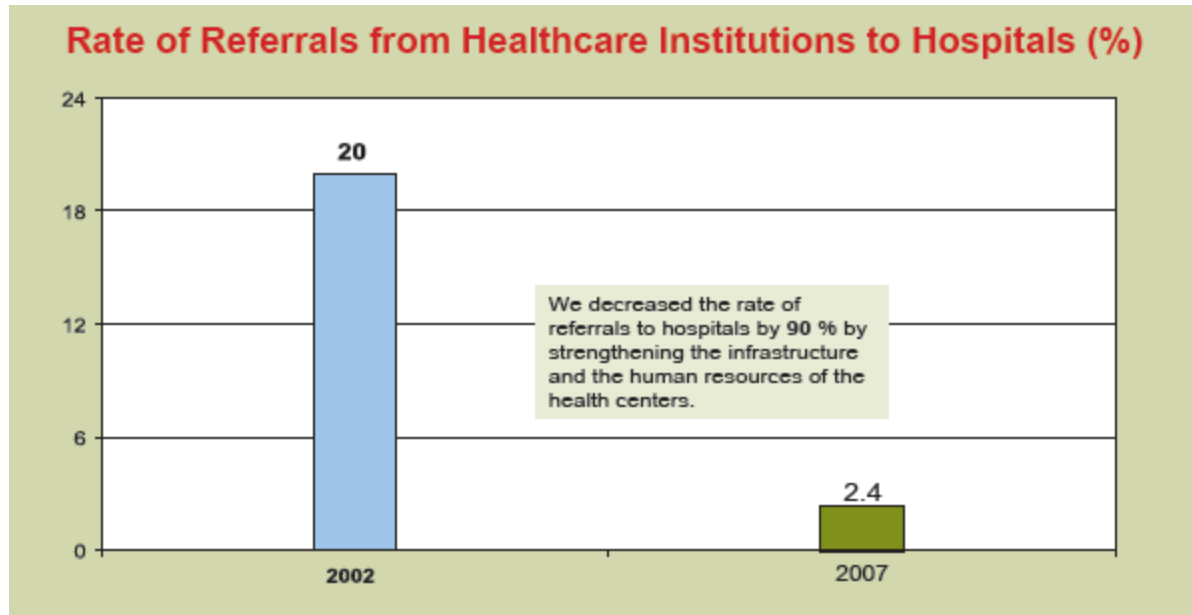
### ▶ A new face and new tasks for health center



# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ **A new face and new tasks for health center**



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Emergency Healthcare Services Gained Speed**

Thanks to the digital infrastructure:

- ▶ Calls can be received through Operation Management Software, delivering it automatically.
- ▶ Displaying the calling number.
- ▶ Voice recording from the beginning of the calls or the signals.
- ▶ Recording the information obtained into the database and sharing the info.
- ▶ Searching for the addresses on the numerical maps of the city.
- ▶ On-line follow-up of the ambulances through GPS
- ▶ Follow up of the spare beds in hospitals
- ▶ Provision incoming call regimes, daily case numbers, operator situations, team situations, access time, working forms.

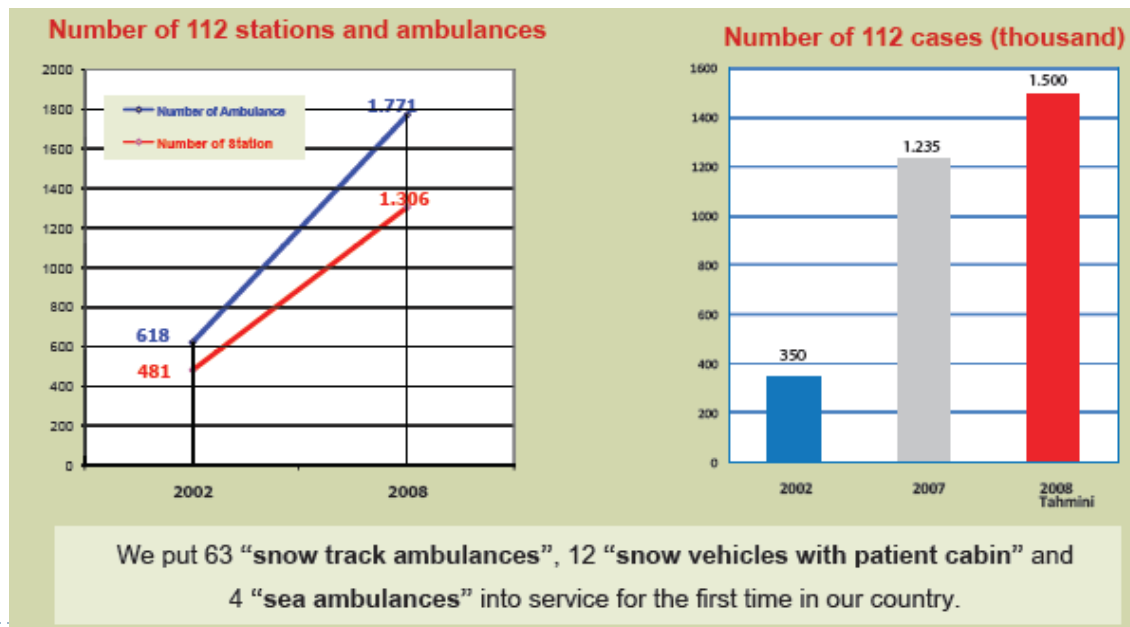


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ **Emergency Healthcare Services Gained Speed**

- ▶ In the last 5 years our capacity with regard to transportation of emergency patients improved 3 times.
- ▶ Now 112 is flying
- ▶ The Health Emergency Health Call-Center

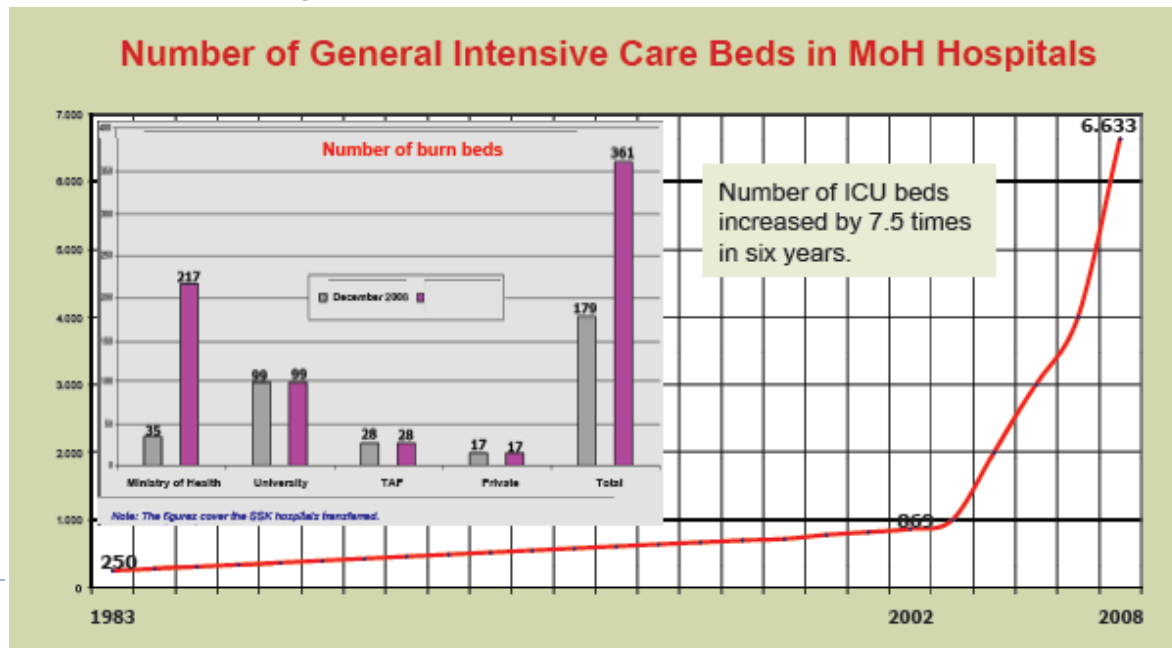


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ **Emergency Healthcare Services Gained Speed**

- ▶ Healthcare organization in disaster
  - ▶ The National Medical Rescue Teams (UMKEs) were established in order to carry out medical services during disasters in the 81 provinces.
- ▶ General intensive care and the number of the beds for the burnt
  - ▶ The general intensive care number was increased by 7.5 times in 2008 November compared to 2002 November.

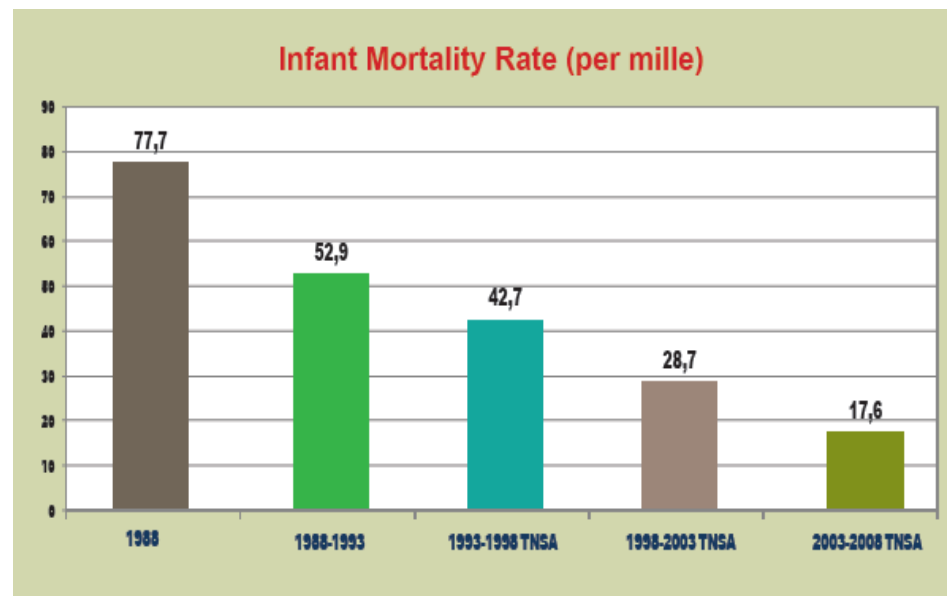
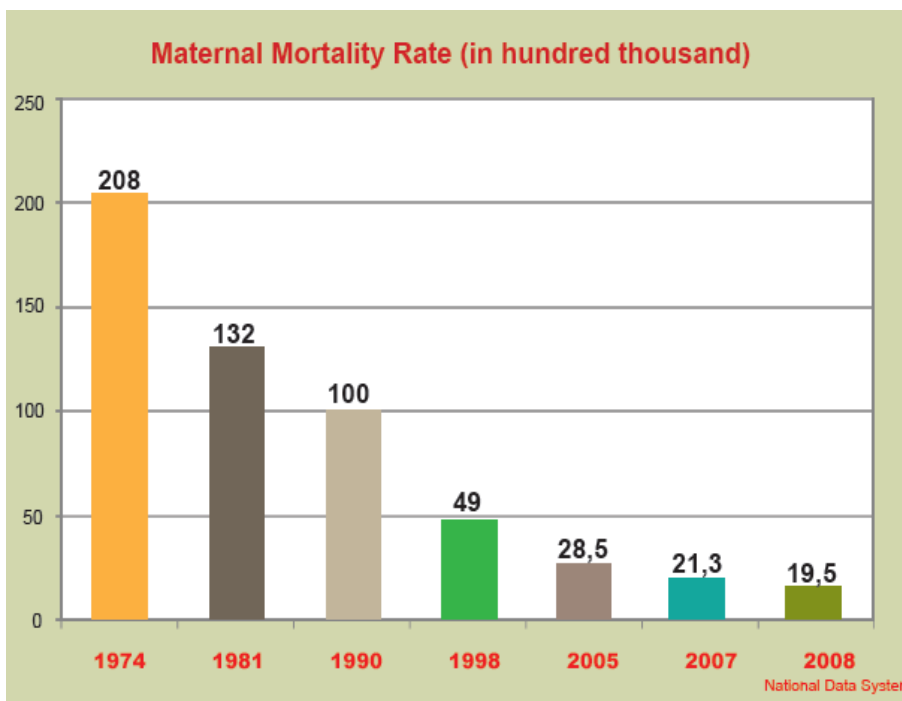


# A New Era in Health

## 3. Campaign for Primary Health Services

### ► For the future: Mother and Child Health

- In 2007, the mother mortality rate was 21.3 per a hundred thousand. In 2008, the rate was 19.5 according to the national data system.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **For the future: Mother and Child Health**

- ▶ In 2009, Turkey was the 6th country among the most successful countries reducing child mortality under the age of 5.

**Ranking of countries according to annual rates of decrease in child mortality under the age of 5**

COUNTRIES	CHILD MORTALITY UNDER 5 1990	CHILD MORTALITY UNDER 5 2007	AVERAGE ANNUAL RATE OF DECREASE 1990-2007	DEVELOPMENT COMPARED TO 19990
Thailand	31	7	8,8	77
Peru	78	20	8,0	74
Maldives	111	30	7,7	73
Portugal	15	4	7,8	73
Vietnam	56	15	7,7	73
<b>TURKEY</b>	<b>82</b>	<b>23</b>	<b>7,5</b>	<b>72</b>





# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **For the future: Mother and Child Health**

- ▶ More than half of the child mortalities in the world results from malnutrition.
- ▶ Babies should be given only breast-feeding in the first 6 months.
- ▶ Programs:
  - ▶ Promotion of Breast-feeding and Baby-friendly Hospitals
  - ▶ Iron-like Turkey
  - ▶ The Program on Prevention of Vitamin D Deficiency and Promotion of Bone Health
  - ▶ The Program on Iodine Deficiency Diseases and Iodization of Salt



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **For the future: Mother and Child Health**

- ▶ Promotion of Breast-feeding and Baby-friendly Hospitals
  - ▶ Ensure that more babies receive breast-feeding.
  - ▶ In the first 6 months were increased from 20.8% (2003) to 40.4% (2008)
  - ▶ The number of baby-friendly hospitals was 141 in 2002; in 2008 November was 619.
- ▶ Iron-like Turkey
  - ▶ Iron deficiency rate was above 30%.
  - ▶ In 2007, the iron deficiency rate decreased to 7%.
- ▶ The Program on Prevention of Vitamin D Deficiency and Promotion of Bone Health
  - ▶ Vitamin D is delivered free of charge and this service has been given 91% of the target group.
  - ▶ Vitamin D deficiency rate was 61 per a thousand between the ages of 0-3. In 2008 it was 1 per a thousand.
- ▶ The Program on Iodine Deficiency Diseases and Iodization of Salt
  - ▶ Usage of iodine salt was 18.2% in 1995, 64% in 2002, 80% at the end of 2003 and 85.4% in 2008 according to Turkey Population Health Research.



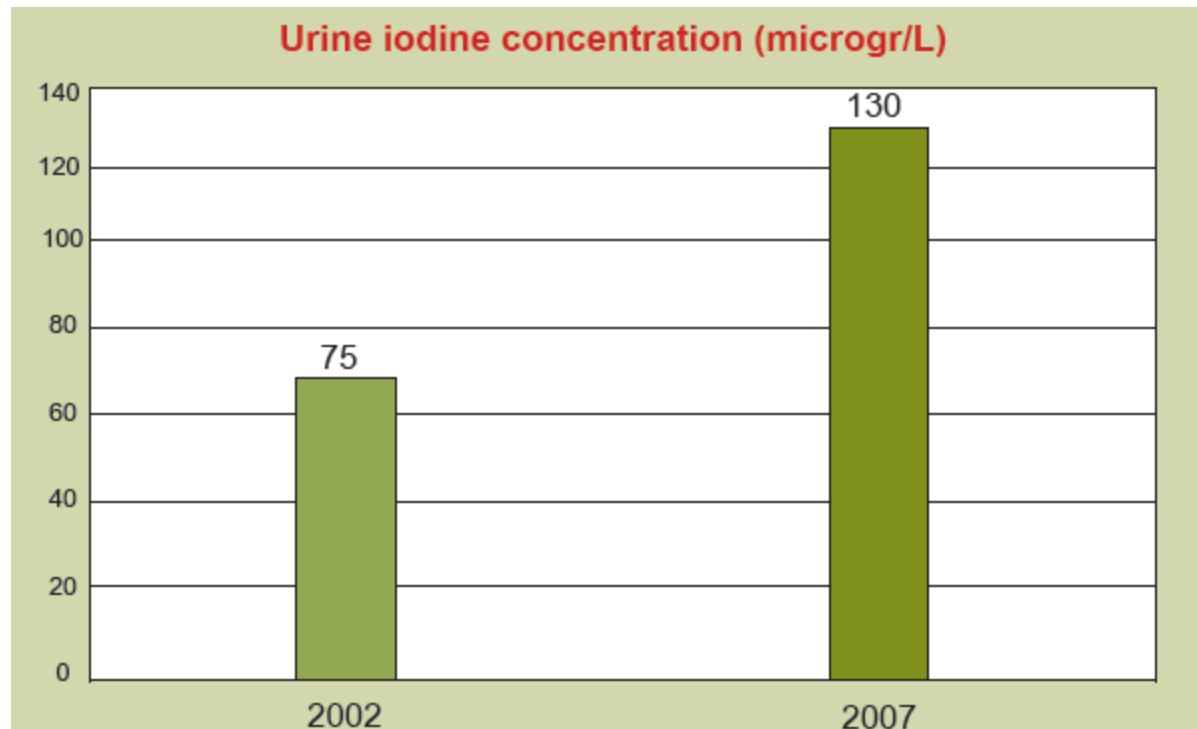
# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **For the future: Mother and Child Health**

- ▶ The Program on Iodine Deficiency Diseases and Iodization of Salt



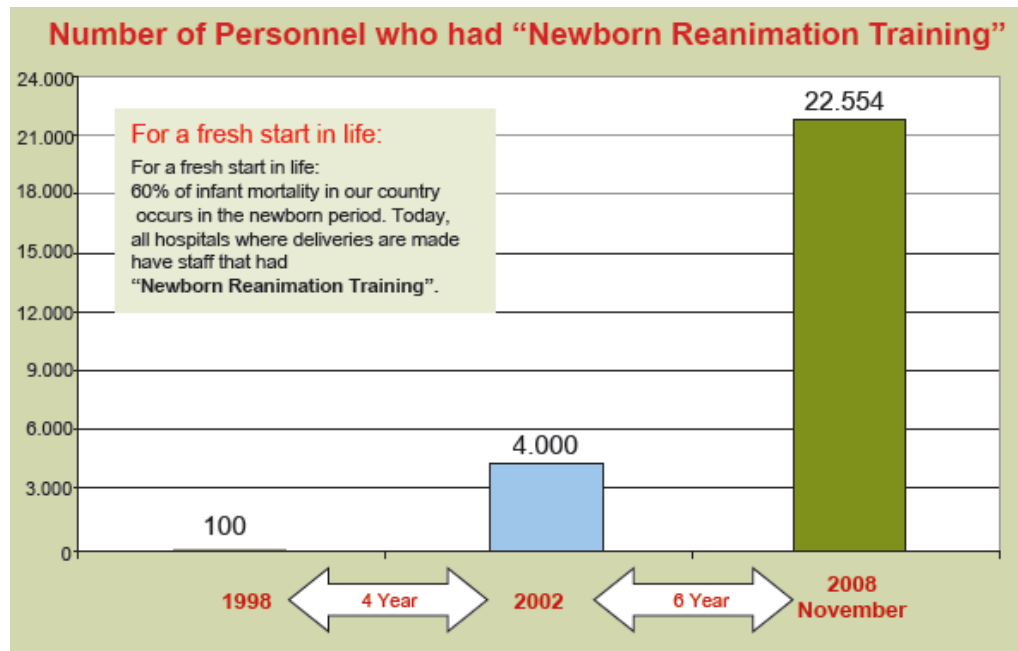
# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ For the future: Mother and Child Health

#### ▶ Neonatal Resuscitation Program:

- ▶ 60% of baby mortality happens in the first days after the delivery.
- ▶ 22,554 health personnel have been trained since the beginning of the newborn reanimation program until November 2008.



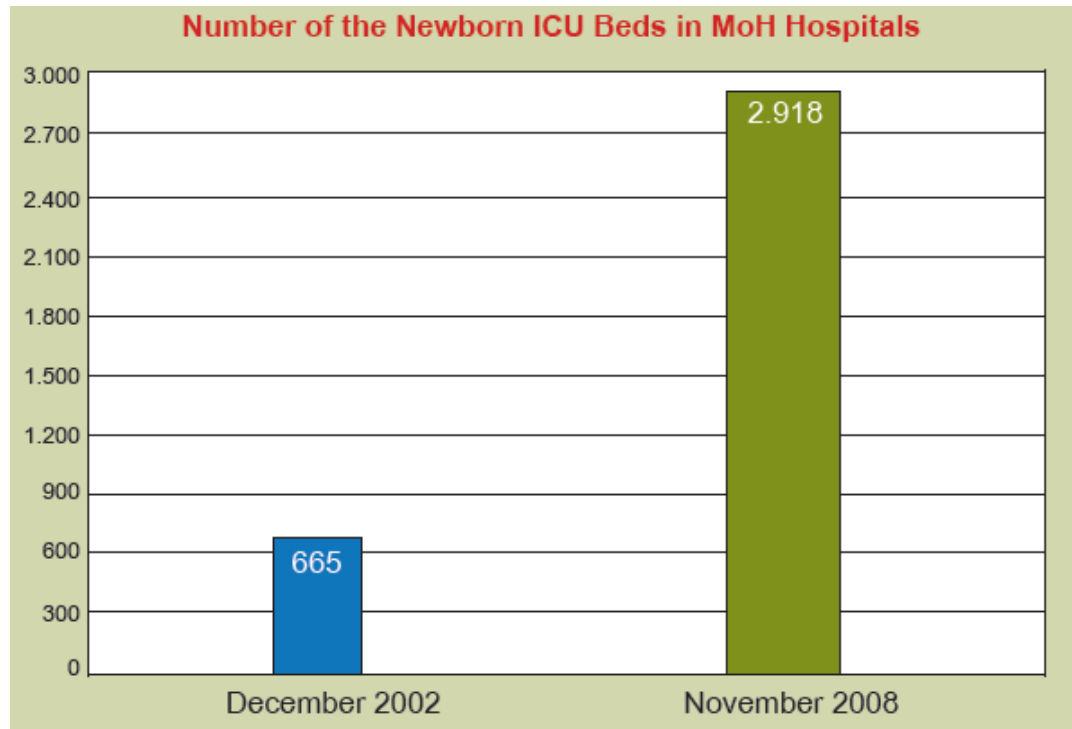
# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **For the future: Mother and Child Health**

- ▶ Number of Intensive Care Bed for Newborns



# A New Era in Health

## 3. Campaign for Primary Health Services

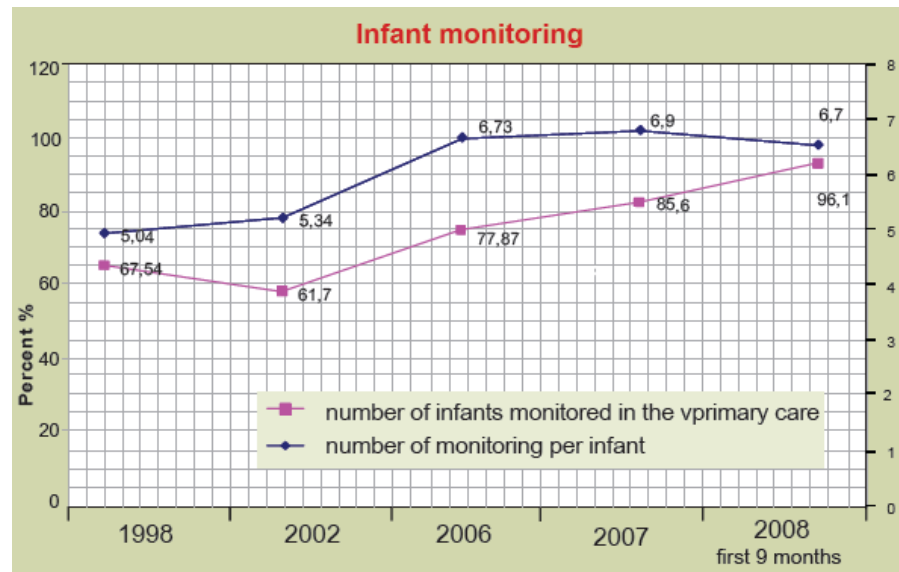
### ▶ For the future: Mother and Child Health

#### ▶ Newborn Screening Programs

##### ▶ Phenilketonuria and Congenital Hypo-thyroid and Biotinidasis:

- For phenilketonuria and congeital hypo-thyroid scanning 89% of the target group was reached in 2007.
- In 2008, another metabolic disease biotinidasis was included into the scanning program.

##### ▶ Baby Monitoring: Monitoring babies not only when they are sick, but also when they are healthy.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **For the future: Mother and Child Health**

#### ▶ Newborn Screening Programs

##### ▶ Hearing Screening:

- Establishment of Newborn Hearing Screening Units was completed and hearing screenings were started in 75 provinces, in 143 institutions under our Ministry.
- Since the beginning of the program, 730 thousand babies were performed hearing screening procedure until the end of November 2008.

##### ▶ Conditional Cash Transfer: Cash financial aid at a value of 20 TL per month for each pregnancy, additionally given 60 TL for each child on condition.

##### ▶ Conscious Mother Healthy Baby Program:

- To inform mothers on the basic issues related to themselves and their baby's health before they leave the hospital.
- "Conscious Mother Healthy Baby Guideline" distributed to almost 4 million mothers, up to the present.

##### ▶ Toy and Additional Food Safety

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# A New Era in Health

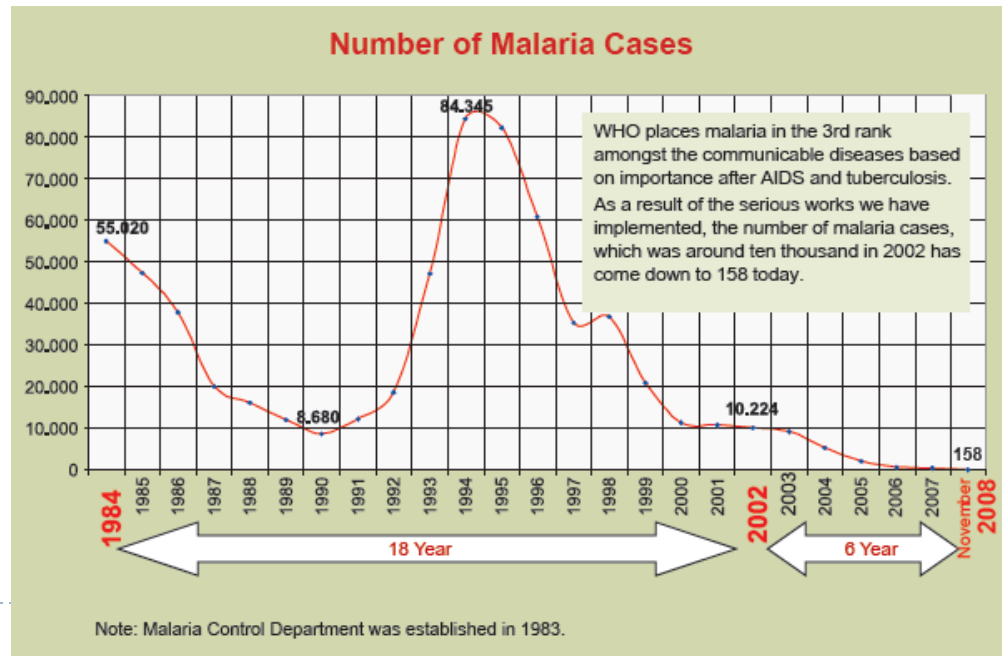
## 3. Campaign for Primary Health Services

### ▶ **Effective Combat against Communicable Diseases**

#### ▶ Malaria

#### ▶ Victory in combat against malaria: determination and stability

- ▶ One to one treatment of the patients with malaria diagnosis was performed.
- ▶ Temporary workers were assigned during the malaria season





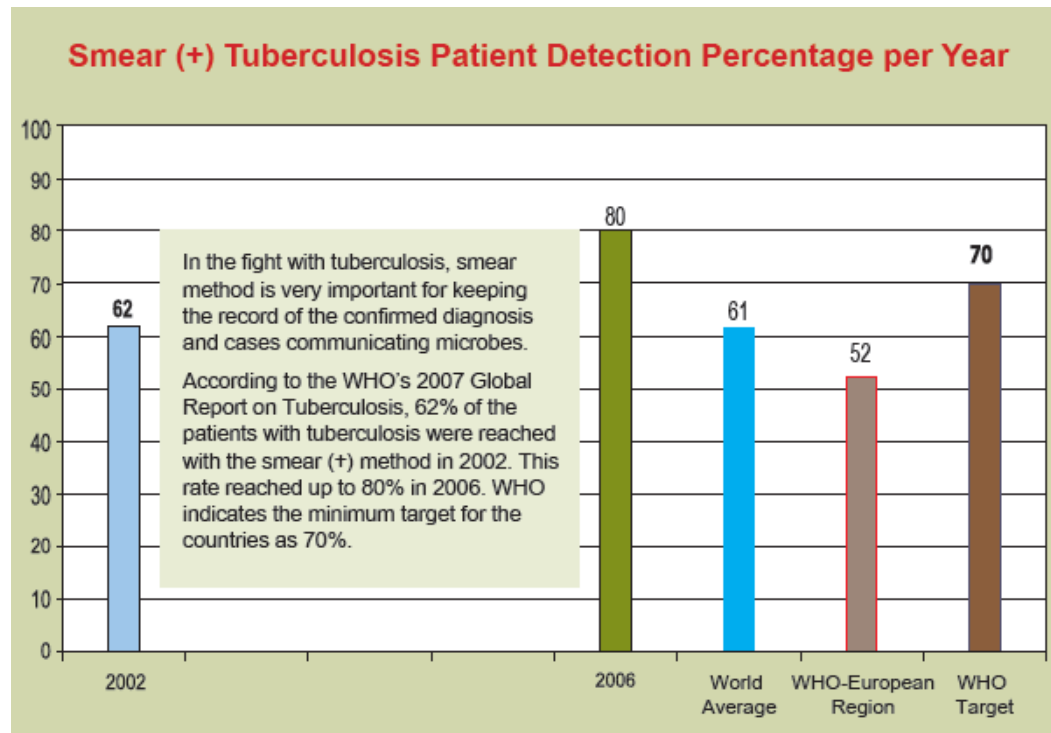
# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ **Effective Combat against Communicable Diseases**

#### ▶ Tuberculosis

- ▶ WHO Global Report, tuberculosis incidence of our country is 29 per hundred thousand and tuberculosis prevalence is 32 per hundred thousand.



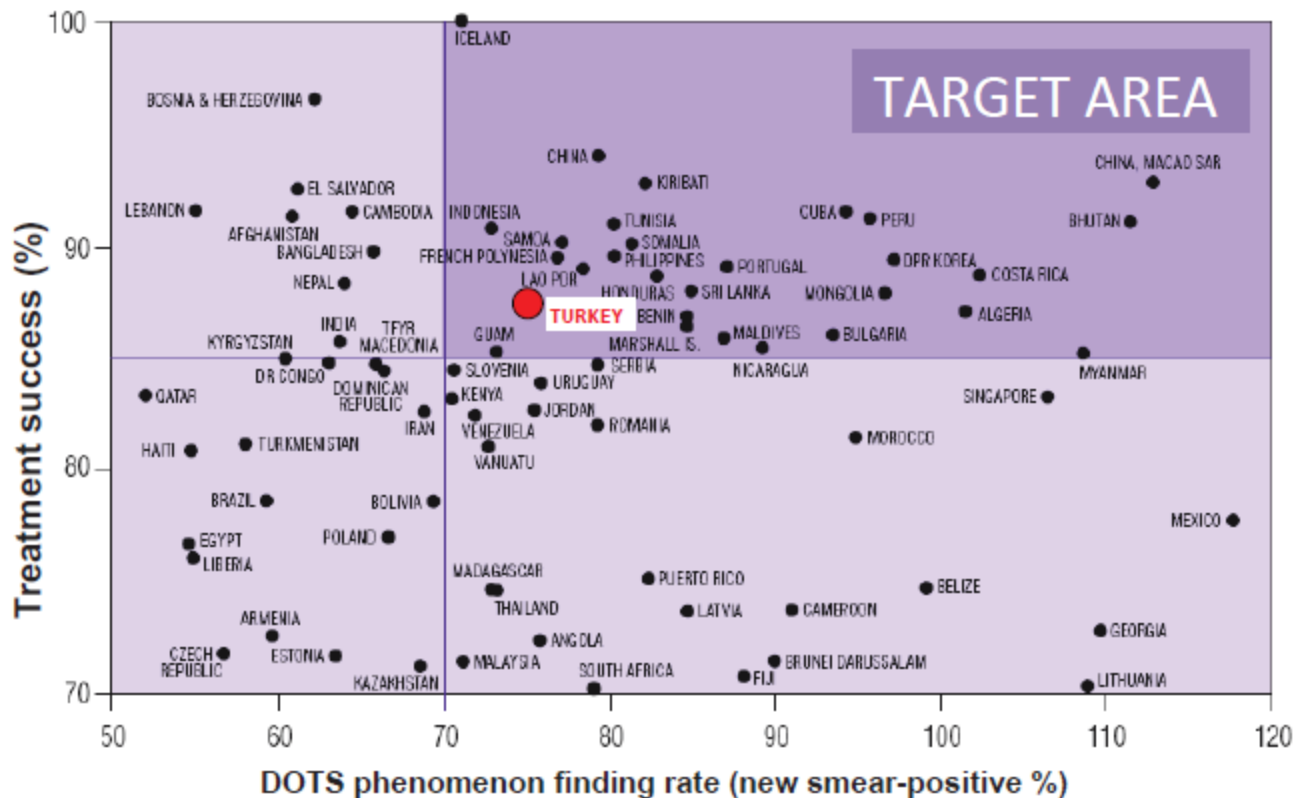
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## 3. Campaign for Primary Health Services

### ▶ Effective Combat against Communicable Diseases

#### ▶ Tuberculosis

Situation of Access to Target Region in terms of Case Detection and Treatment Success Percentages of the Countries



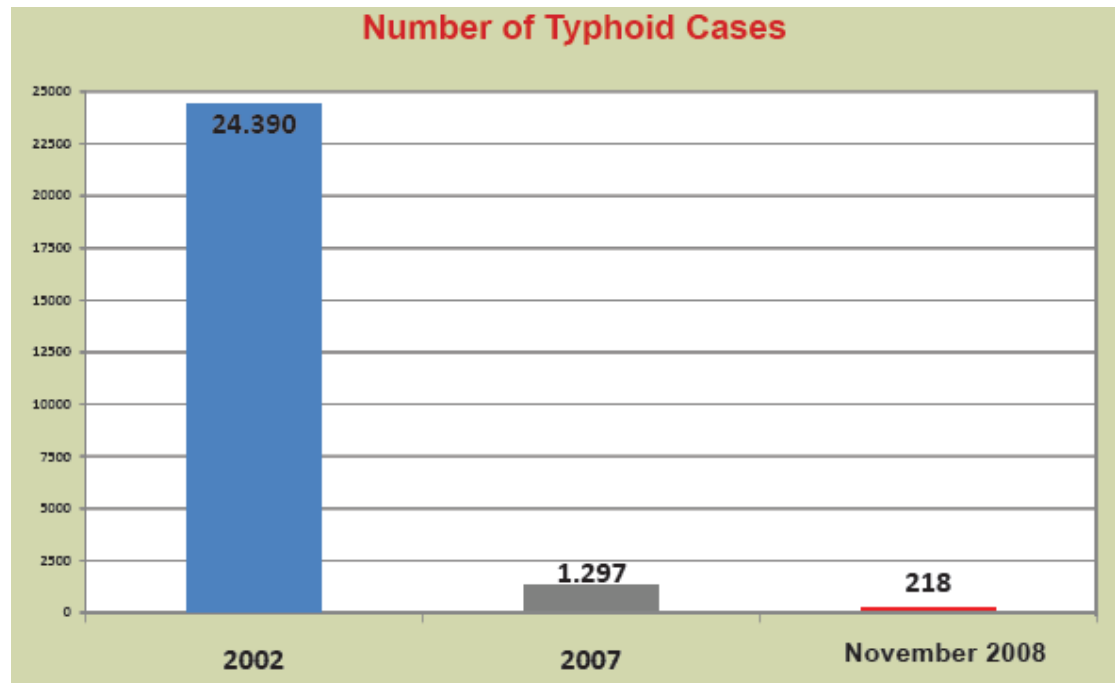
# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ **Effective Combat against Communicable Diseases**

#### ▶ Waterborne and Food-Borne Diseases

- ▶ The number of dysentery/acute bloody diarrhea cases was 27.550, deaths were 4 in 2002 and 6.670
- ▶ Typhoid fever



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Effective Combat against Communicable Diseases**

#### ▶ Other Communicable Diseases

#### ▶ Crimean-Congo Hemorrhagic Fever

- ▶ With the scope of public awareness raising and information activities a total of 400.000 brochures and 200.000 posters were distributed to Provincial Health Directorates.

#### ▶ Norovirus

- ▶ With the coordination of RSHCP, National Enteric Pathogens Laboratory Surveillance Network was established in 2007.

#### ▶ Prevention of Hospital-acquired Infections

- ▶ Despite the developments in medicine, hospital infections are a great health problem all over the world.
- ▶ Infection control trainings, conducted since 2007, up to the present, 145 infection control physicians and 365 infection control nurses have been given National Certificates.
- ▶ In 2006, the number of notifying institutions was 937.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Immunization Programs: Vaccines**

- ▶ Vaccination was administered for 7 diseases up the end of 2005.
  - ▶ Diphtheria
  - ▶ Pertussis
  - ▶ Tetanus
  - ▶ Polio
  - ▶ Measles
  - ▶ Hepatitis B
  - ▶ Tuberculosis

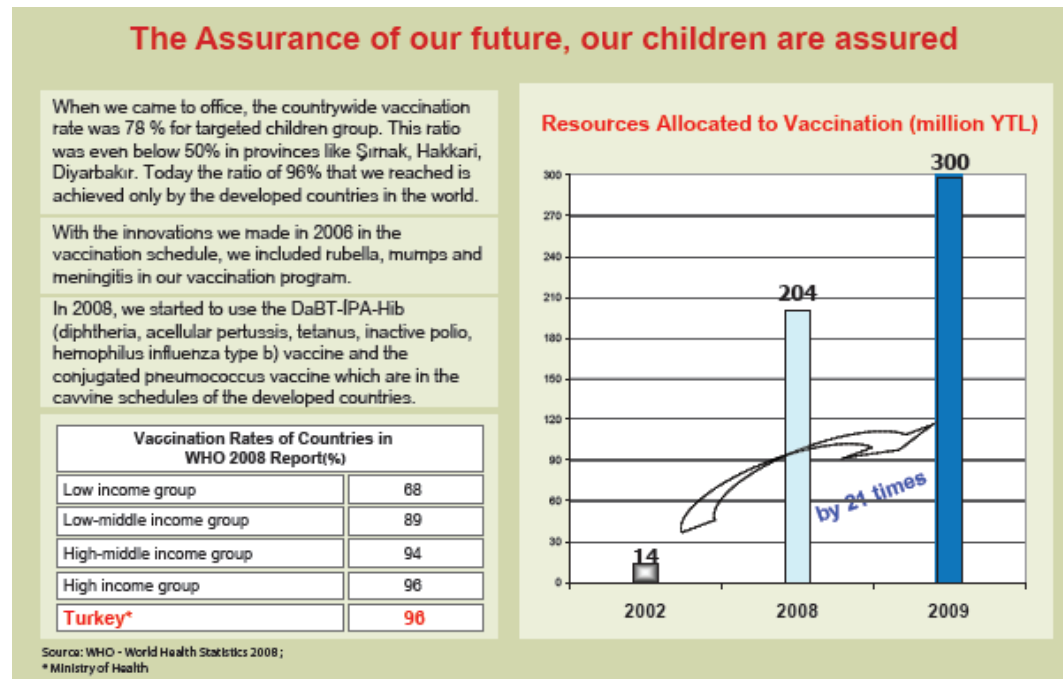


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Immunization Programs: Vaccines

- ▶ In year 2008, the total number of injections up to the completion of the first stage, decreased to 8 from 11.
- ▶ The number of vaccination visits decreased to 6 from 7.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Immunization Programs: Vaccines**

- ▶ Meternal Neonatal Tetanus (MNT) Elimination Program started in 1994, updated in 2005.
- ▶ The newborn tetanus is at elimination stege.
- ▶ No diphtheria case was reported since 2004.
- ▶ Conjugated pneumococcus vaccination in 2008.
- ▶ Vaccine Symposium
  - ▶ The first in 2005, the second in 2007 and the third in 2009 of the National Symposium on Vaccine

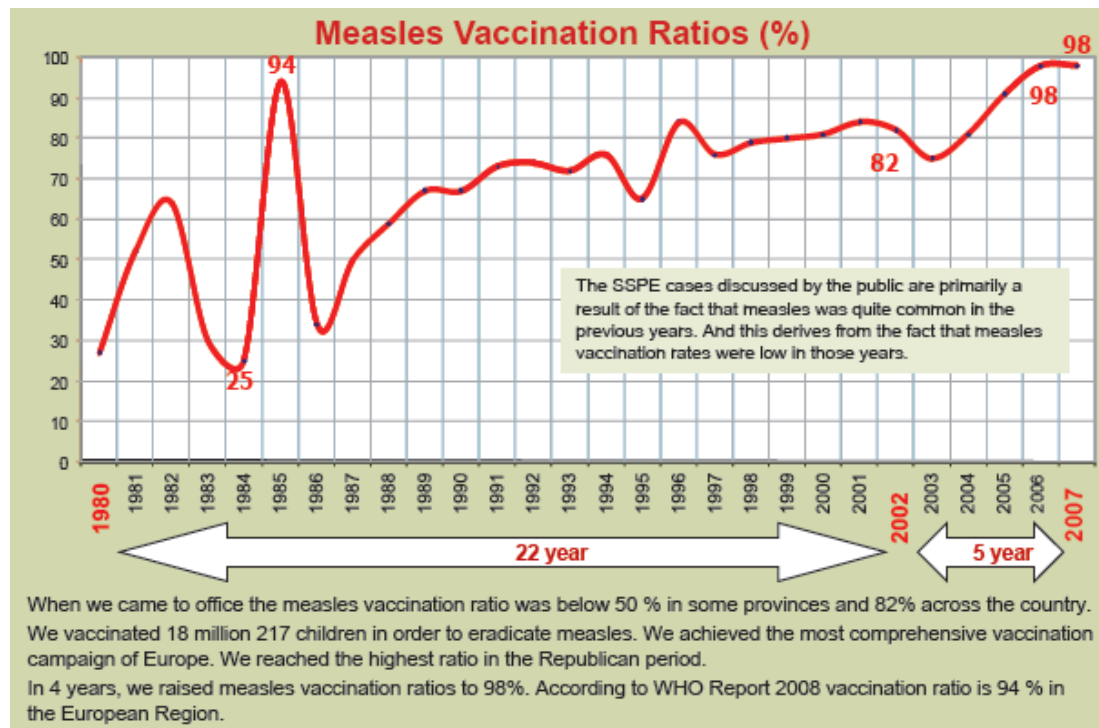


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Immunization Programs: Vaccines

- ▶ 84 TL million budget allocated for the implementation.
- ▶ With this resource, the budget allocated to the vaccination will reach up to 205 TL million.

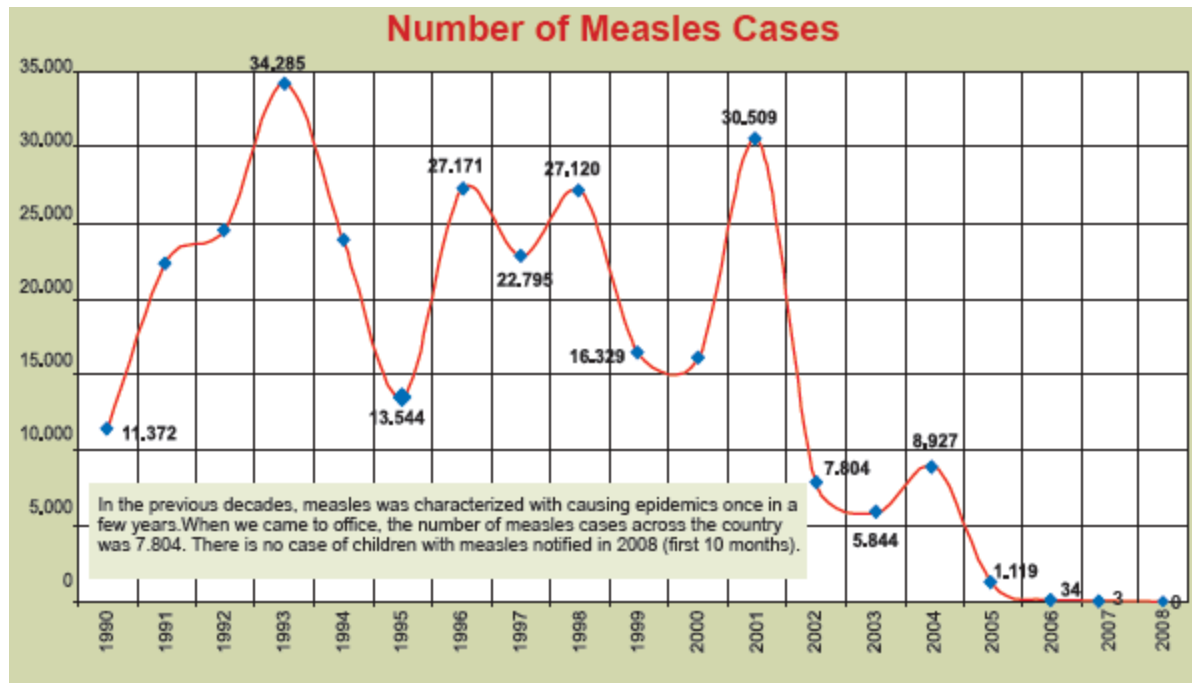




# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Immunization Programs: Vaccines



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Sexual Health and Reproductive Health Program**

#### ▶ **Turkey's Program on Reproductive Health**

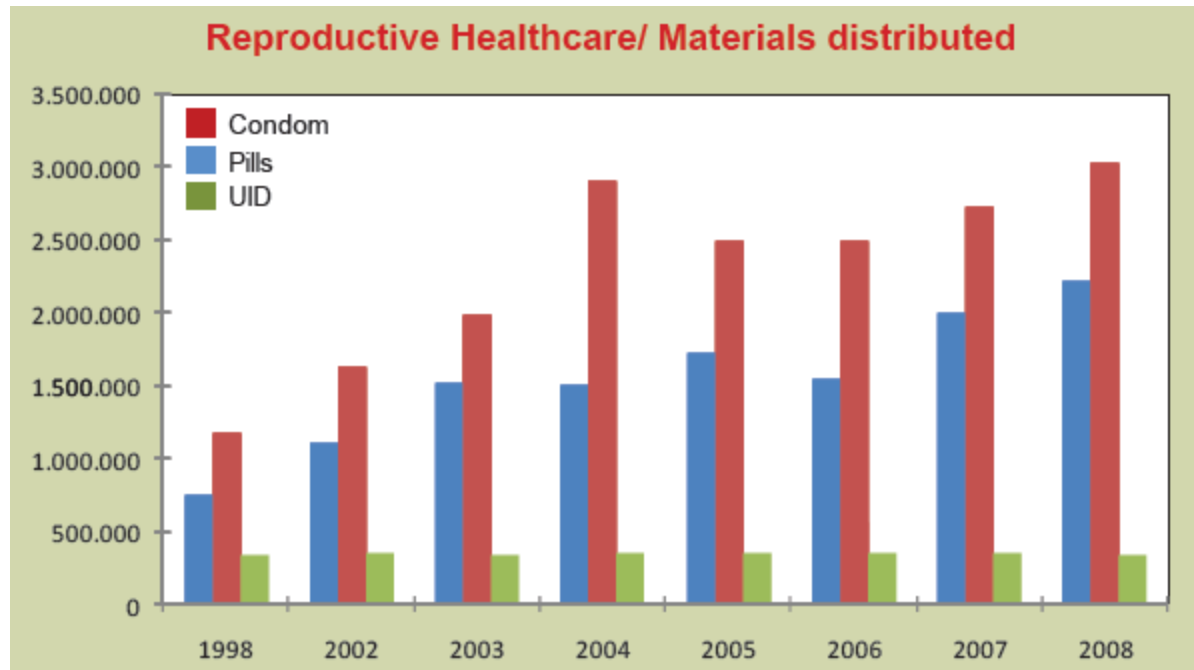
- ▶ Turkey's Program on Reproductive Health (TPRH)
- ▶ Issues such as:
  - Safe Motherhood and Emergency Enstetric Care
  - Family Planning
  - Sexually Transmitted Diseases
  - Youth-friendly Reproductive Health
- ▶ 88 projects were conducted with 108 non-governmental organizations on all reproductive health related areas.
- ▶ Direct trainin was provided for 5 million individuals within the scope of projects.



# A New Era in Health

## 3. Campaign for Primary Health Services

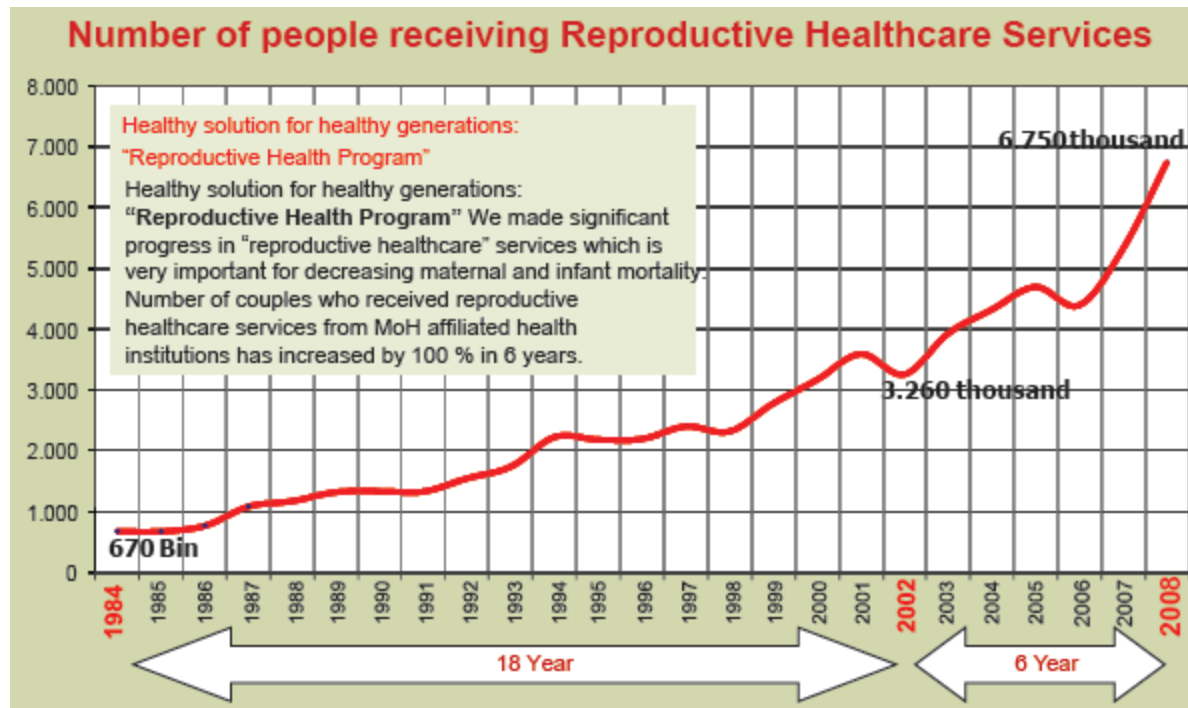
- ▶ **Sexual Health and Reproductive Health Program**
  - ▶ **Turkey's Program on Reproductive Health**



# A New Era in Health

## 3. Campaign for Primary Health Services

- ▶ **Sexual Health and Reproductive Health Program**
  - ▶ **Turkey's Program on Reproductive Health**



# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Sexual Health and Reproductive Health Program

#### ▶ Pre-marriage and pre-pregnancy consultation program

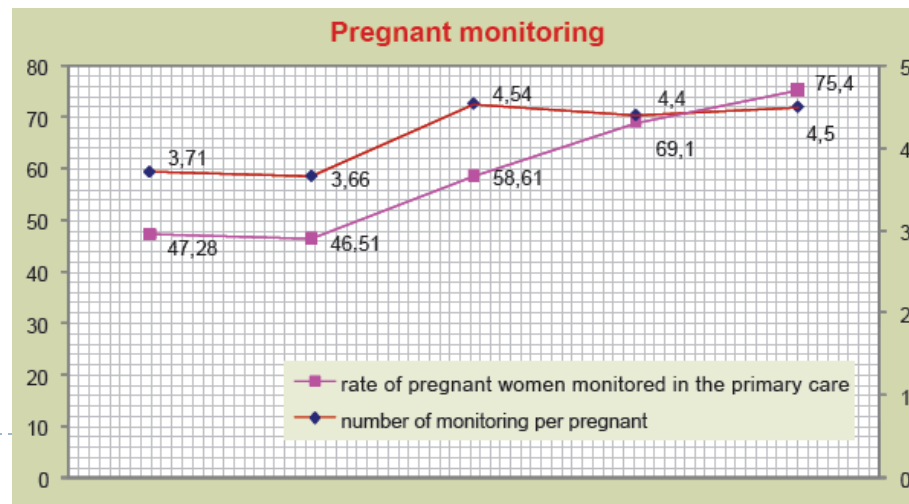
- ▶ For a happy and healthy start, consultancy service on reproductive health and support is given to the couples.

#### ▶ Hemoglobinopathy control program

- ▶ Screening tests are administered to the couples to be married and measures are tried to be taken.

#### ▶ Pregnancy monitoring

- ▶ The proper follow-up of the risky pregnancies and emergency interventions save the lives of lots of mothers and babies.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Sexual Health and Reproductive Health Program**

- ▶ Iron Support for the Pregnant
  - ▶ Provide iron preparation for each pregnant woman for 9 months.
  - ▶ 5 million boxes of iron have been distributed to pregnant women to date.
- ▶ The number of hospital deliveries is increasing

Year	Deliveries Made at the Hospital
2002	806.367
2003	788.206
2004	824.443
2005	857.156
2006	988.168
2007	1.127.092
2008*	838.553

\*2008 first 9 months

# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Sexual Health and Reproductive Health Program**

- ▶ Cooperation with the Turkis Armed Forces
  - ▶ Every year 500.000 young men is trained on reproductive health when released from the military service and set off to go back home.
  - ▶ Since April 2004, 2 million military men have been trained.

### ▶ **Healthy Environment Healthy Humans**

- ▶ Healthy Villages Project in order to provide the establishment of the necessary condisitons for environmental and social health in villages just as in the urban areas.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Healthy Environment Healthy Humans**

#### ▶ Control of Biocidal Products

- ▶ More than 2.000 persons were trained within this scope.

#### ▶ Food Toxicology

- ▶ The necessary laboratory has been established in order to determine the problem and give support for the solution of the problem and also to help the Justice for judicial issues.

#### ▶ Water Safety

- ▶ 119 spring water, 11 drinking water, 36 natural mineral water, 137 spa, 10 thalassotherapy, 4 pleoid production and packing establishments

#### ▶ Air Quality Control





# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Healthy Environment Healthy Humans**

- ▶ Control of Cleaning Substances
- ▶ Control of Products for Medical Purpose and Internal Nutrition Products
  - ▶ These products are controlled through market surveillance where they are placed on the market.
  - ▶ Chemical Biological Radioactive and Nuclear Hazardous Substances (CBRN)



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Healthy Nutrition for a Healthy Future**

- ▶ “Department of Nutrition and Physical Activities”
- ▶ Increasing the awareness in the society on nutrition, preventing obesity and nutrition problems with high prevalence in society and executing works for promoting a more active lifestyle.
- ▶ **Program for raising awareness on nutrition society**
  - ▶ **“Let’s eat healthily and protect our heart” Project (2004)**
  - ▶ **Nutrition Guide Specific to Turkey (2004)**
  - ▶ **White Flay Project (2006)**
  - ▶ **Turkey’s Program for Counteracting Obesity**



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Decreasing the Harms of Alcohol, Drug and Tobacco**

#### ▶ **Alcohol Control Program**

- ▶ Informing, training and raising awareness in the society on the health, economic and social harms of alcohol; and decreasing the alcohol-related harms such as domestic violence.

#### ▶ **Tobacco Control Program**

- ▶ Tobacco consumption rate in men is %50.6 and in women 16.6% in 2006.
    - Public information, raising awareness and training activities
    - Promoting and facilitating of smoking cessation
    - Price and taxation policies
    - Prevention of exposure to circumferential tobacco smoke
    - Organizing advertisement, promotion and sponsorship activities
    - Preventing illegal trade
    - Preventing youth's access to tobacco products
    - Tobacco production and alternative policies
    - Monitoring and evaluation of tobacco use
- 



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Decreasing the Harms of Alcohol, Drug and Tobacco**

#### ▶ **Tobacco Control Program**

- ▶ The WHO gave award to Turkey's Minister of Health for effective efforts in the field of tobacco control.
- ▶ Campaign with the slogans "Protect your air" and "Smoke-free air zone" to inform citizens, raise awareness and cause behavioral changes.

#### ▶ **Counteracting Material Addiction**



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Mental and Psychological Health (Happy Individuals)**

- ▶ “Enhancing the Community based Mental Health Services for Chronic Schizophrenia Patients” program put into practice
- ▶ The aim of the project: to increase the community-based mental health service capacity for the treatment of schizophrenic and mentally retarded patients.
- ▶ “Improving the Services for the Disabled”

Hospital	Maintained For More Than a Year
Bakırköy	235
Elazığ	120
Adana	14
Manisa	70
Samsun	41
<b>Total</b>	<b>480</b>



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Mental and Psychological Health (Happy Individuals)**

#### ▶ **Mental Health Control Program**

##### ▶ WHO's seven modules:

- Mental health system should be community-based, should be integrated with the general health system and primary care,
- Community-based rehabilitation works should be carried out,
- The money allocated for the mental health field should be increased,
- The quality of mental health services should be increased,
- Laws should be enacted related to mental health field,
- Patient rights should be defended against stamping,
- Trainings, Researches and Human Resources should be increased in mental health field.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Mental and Psychological Health (Happy Individuals)**

#### ▶ **Mental Health Control Program**

##### ▶ The activities in the Draft Action Plan

- Ensuring that mentally-ill patients receive the services appropriate to the nature of their illness in the natural habitat, providing community-based mental health service,
- Increasing the number of beds allocated for psychiatry patients,
- Increasing the number of people working in the field of mental health,
- Caring patients who have heavy mental illness and employment of mental health patients,
- Performing legal arrangements in the field of mental health and opening high security judicial psychiatry hospitals,
- Advocacy activities in the field of mental health,
- Training and research in the field of mental health,
- Increasing the budget allocated to the field of mental health,



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Mental and Psychological Health (Happy Individuals)**

#### ▶ **Supporting Program for the Psychosocial Development of Children Age 0-6**

- ▶ To ensure early intervention by early determining the risk factors and pathologies.
- ▶ Currently implemented in 41 provinces and targeted to be rolled out to 81 provinces by the end of 2009.
- ▶ In the case of any negligence and exploitation against woman-babies and children, program implementers were informed about:
  - How to treat the case,
  - Issues needs to be paid attention during physical examination in negligence and exploitation cases,
  - In exploitation cases, the responsibilities of health personnel, notification and initiating the required legal procedures.





# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Mental and Psychological Health (Happy Individuals)**

#### ▶ **Suicide Phenomenon and Its Prevention**

- ▶ Suicide rate in our country is 3.30 per hundred thousand, according to TurkStat's 2002 data.
- ▶ The training of 16.056 health personnel was completed.
- ▶ A booklet named "Suicide Phenomenon and Its Prevention" was prepared and published in 2004.
- ▶ Apart from the patients who have any kind of suicide risk and have attempted suicide, the main service areas are defined as domestic violence, exploitation phenomena, losses, harsh living conditions occurring in natural or artificial ways.
- ▶ The training of 17.667 health professionals and 4.926 staff from other occupations were completed.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

- ▶ The combination of supports provided on especially health education, and also organizational, economical and environmental basis with the purpose of forming behavioral change directed towards health protection and promotion, and ensuring that citizens would become claimants and decision makers on the issues regarding their own health is called health promotion or health development.
- ▶ Activities are;
  - ▶ Helps to reduce the mortality rate
  - ▶ Addresses the leading risk factors and underlying determinants of health
  - ▶ Helps to strengthen the sustainable health systems
  - ▶ Puts the health at the center of agenda of the large scale development.  
(WHO)



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

- ▶ WHO defines five priorities in the 21st century:
  - ▶ Promote social responsibility for health
  - ▶ Increase investments for health development
  - ▶ Expand intersectoral partnerships for health promotion
  - ▶ Increase community capacity and empower the individual
  - ▶ Secure an infrastructure for health promotion
- ▶ The aim is to provide the right health behaviours are to be implemented into people in mass.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

#### ▶ “Department of Health Promotion”

##### ▶ Activities:

- To train the citizens together with media
- National and/or international institutions
- NGOs
- Through using the social marketing techniques and to ensure they make their decisions on their own health;
- Execution of information campaigns directed towards health professionals and public
- Activities providing health consultancy hotlines and accurate health information resources;
- Production and distribution of any kind of material (posters, brochures, guidebooks, books, mass media spots, etc.) within the scop of health promotio
- Meetings, organizations and introduction activities.

#### ▶ “Department of Chronic Cases and Diseases”

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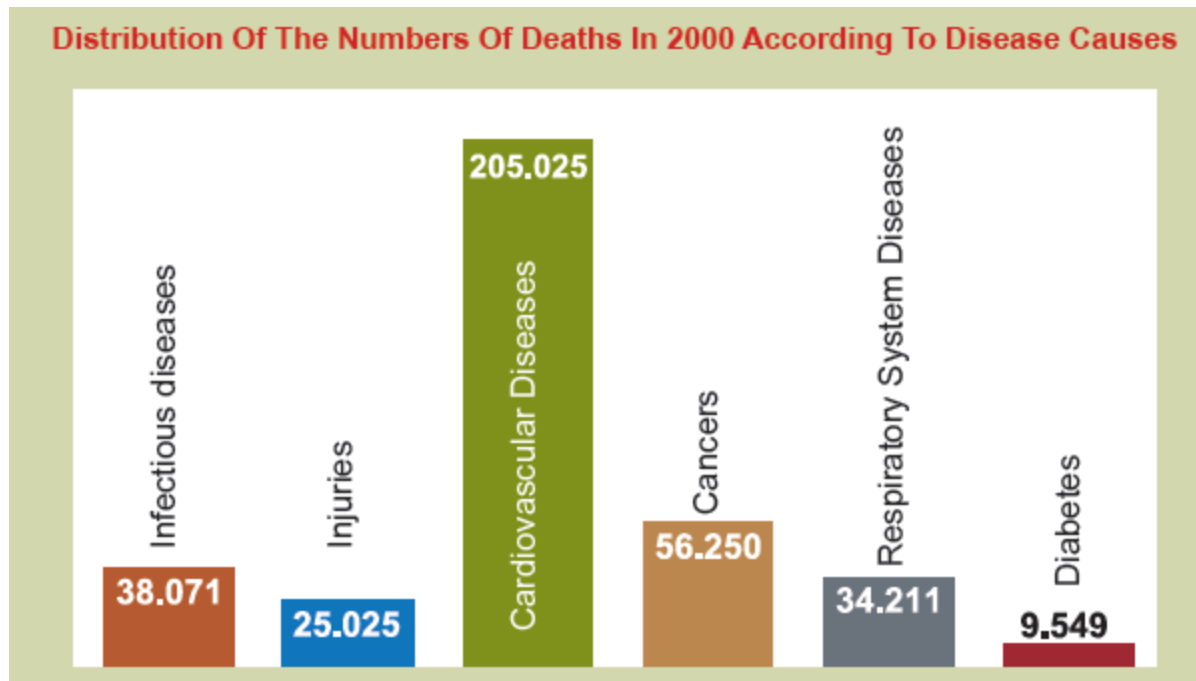


# A New Era in Health

## 3. Campaign for Primary Health Services

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- ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**
  - ▶ Chronic Diseases and Combat Against Risk Factors

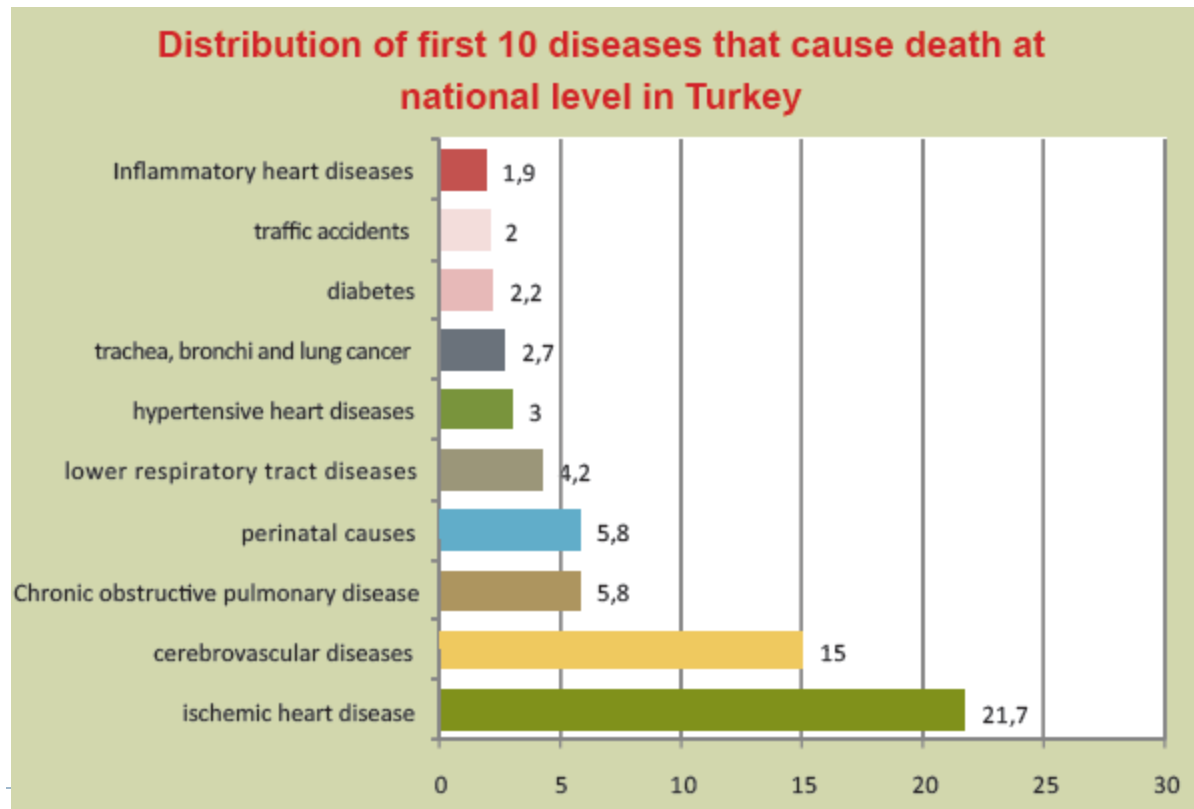


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

#### ▶ Chronic Diseases and Combat Against Risk Factors



# A New Era in Health

## 3. Campaign for Primary Health Services

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- ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**
  - ▶ Prevention and Control Program for Cardiovascular Diseases
    - ▶ In 2005, approximately 17.5 million people died because of cardiovascular diseases, 30% of global deaths.
    - ▶ For healthier Turkey, “Turkey Prevention and Control Program for Cardiovascular Diseases, Strategic Plan and Action Plan for Risk Factors”
  - ▶ GARD: The Global Alliance Against Chronic Respiratory Diseases
    - ▶ To decrease the diseases and deaths related to asthma and COPD and the economic burden which took along with.
    - ▶ “GARD Turkey Action Plan” is the first action plan prepared in the world on this issue.



# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Health Promotion, Social Movement and Awareness for Chronic Diseases

#### ▶ Diabetes Control Program

- ▶ More than 180 million people in the world suffering from diabetes
- ▶ 2005, 1.1 million people died because of diabetes.

**Diabetes Mellitus In Turkey And The Incidence And Prevalence Rates Of Its Complications**

Disease Categories	incidence (100.000)			prevaillance (1000)		
	Men	Women	Total	Men	Women	Total
Diabetes Mellitus	3210,200	4280,100	3820,000	46,500	62,800	55,800
Diabetic Foot	386,600	411,500	398,900	2,000	2,100	2,000
Neuropathy	92,600	110,200	101,300	8,600	9,300	8,900
Retinopathy- Blindness	2,400	2,200	2,300	0,200	0,200	0,200
Amputation	6,800	5,000	5,900	0,100	0,100	0,100

Source: National Burden of Disease and Cost Effectiveness Study Burden of Disease final Report, Ankara 2005



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

#### ▶ The Disabled

- ▶ In 2006, the disabled people were 261 and in 2007 it raised to 337.

#### ▶ WHO Europe Region CINDI (Countrywide Integrated Noncommunicable Diseases Intervention) Program

- ▶ 29 countries participated in the CINDI Program
- ▶ 3 candidate countries
- ▶ To join the program, Turkey is taking necessary steps.

#### ▶ Chronic Diseases Risk Factors and Health Promotion Symposium

#### ▶ “Protect Your Heart. It Holds Your Beloved Ones” Project

- ▶ A non-formal training work was started to conduct in 81 provinces through the organization of Provincial Health Directorates
  - ▶ 3.000 general practitioners participated in trainings
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# A New Era in Health

## 3. Campaign for Primary Health Services

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# A New Era in Health

## 3. Campaign for Primary Health Services

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# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

#### ▶ Healthy Aging

#### ▶ Cancer

- ▶ In collaboration with WHO, IARC, IACR, UICC, NCI, APOCP, MECC, NHS

#### ▶ Cancer Registration

- ▶ Active system: Cancer registry form filled by physicians or other health staff is sent to Provincial Health Directorate and entered into the computer program.
  - ▶ Passive system: The pillar of the active system is cancer registry staff. Examines patient one by one and transfer information into cancer registry forms.
- 

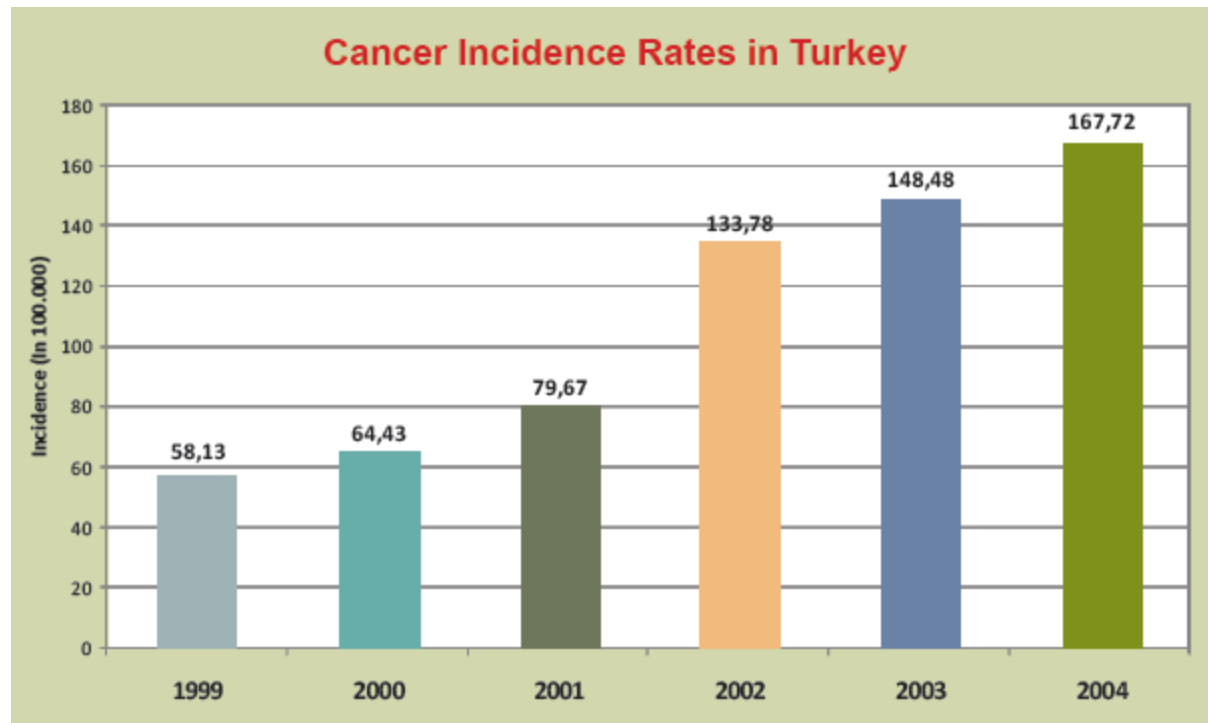


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Health Promotion, Social Movement and Awareness for Chronic Diseases

#### ▶ Cancer Registration:

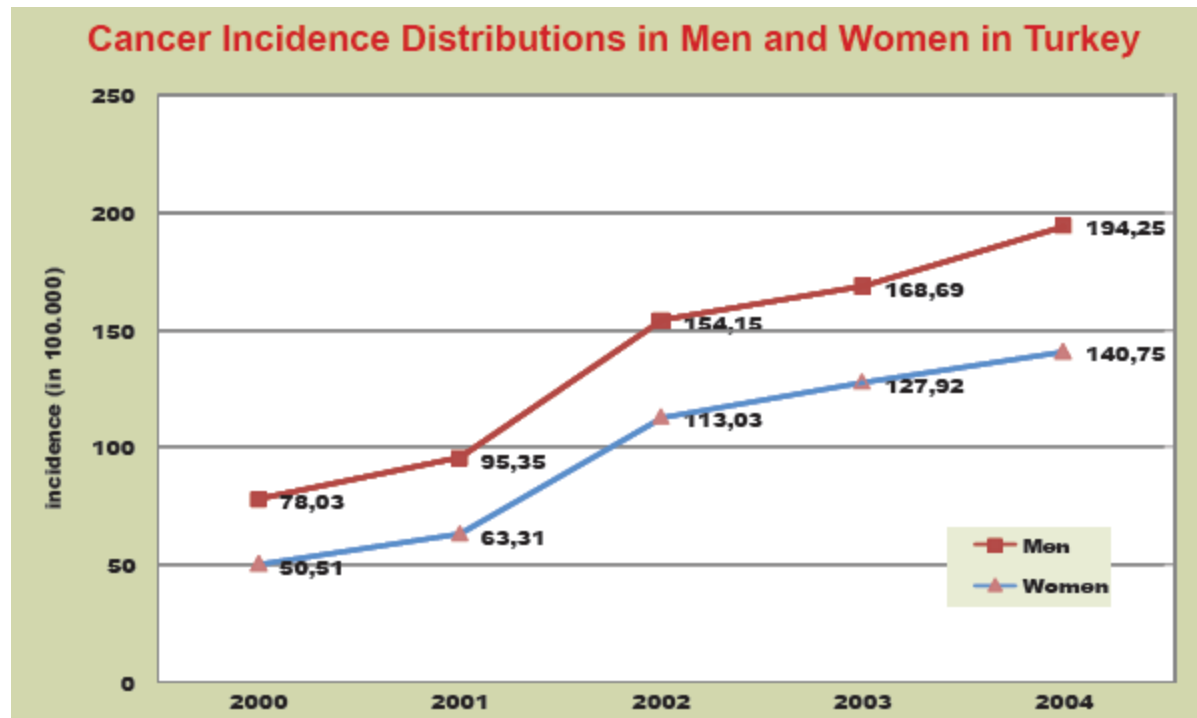


# A New Era in Health

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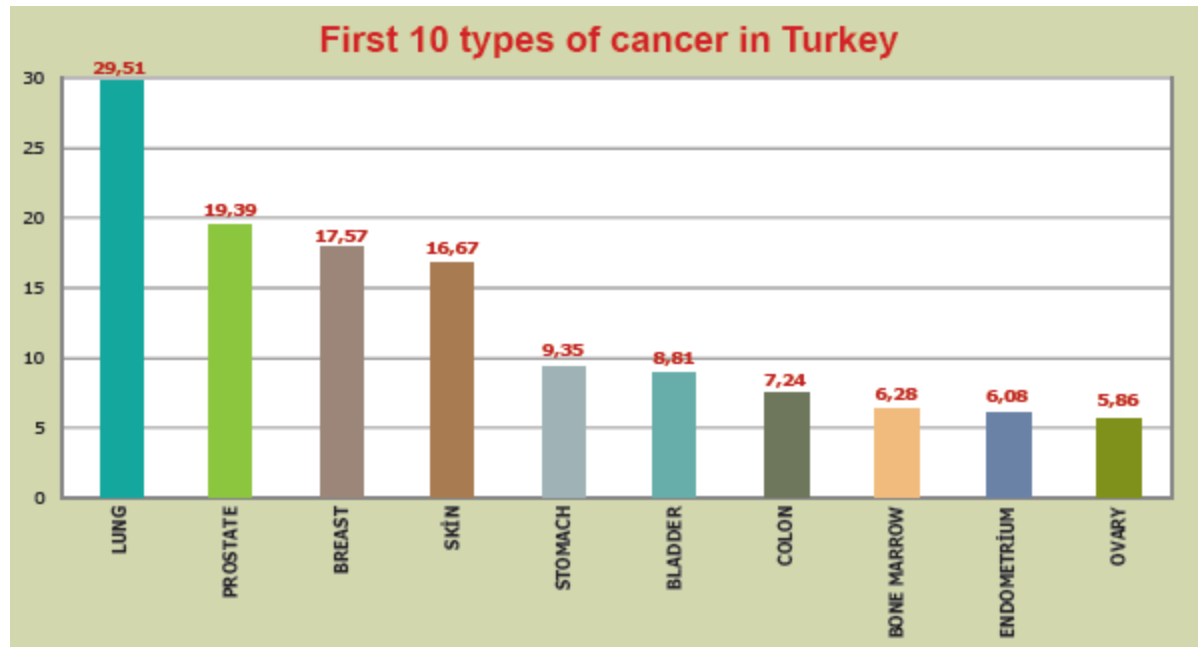


# A New Era in Health

## 3. Campaign for Primary Health Services

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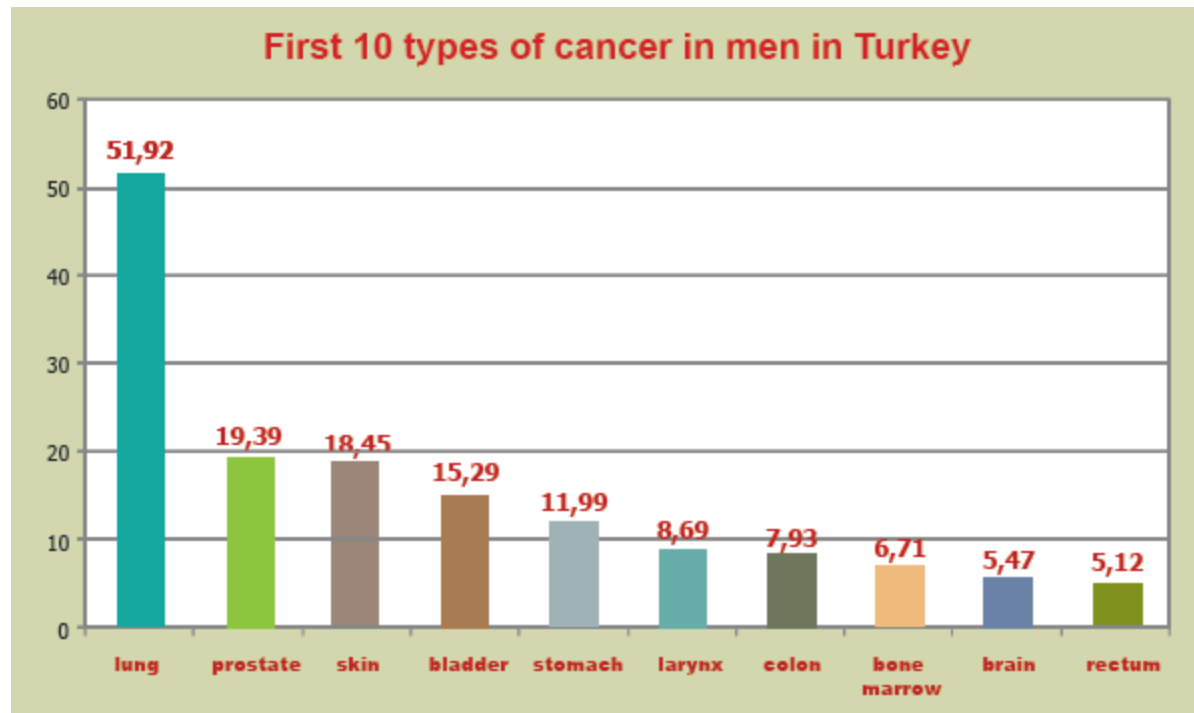


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Health Promotion, Social Movement and Awareness for Chronic Diseases

#### ▶ Cancer Registration:



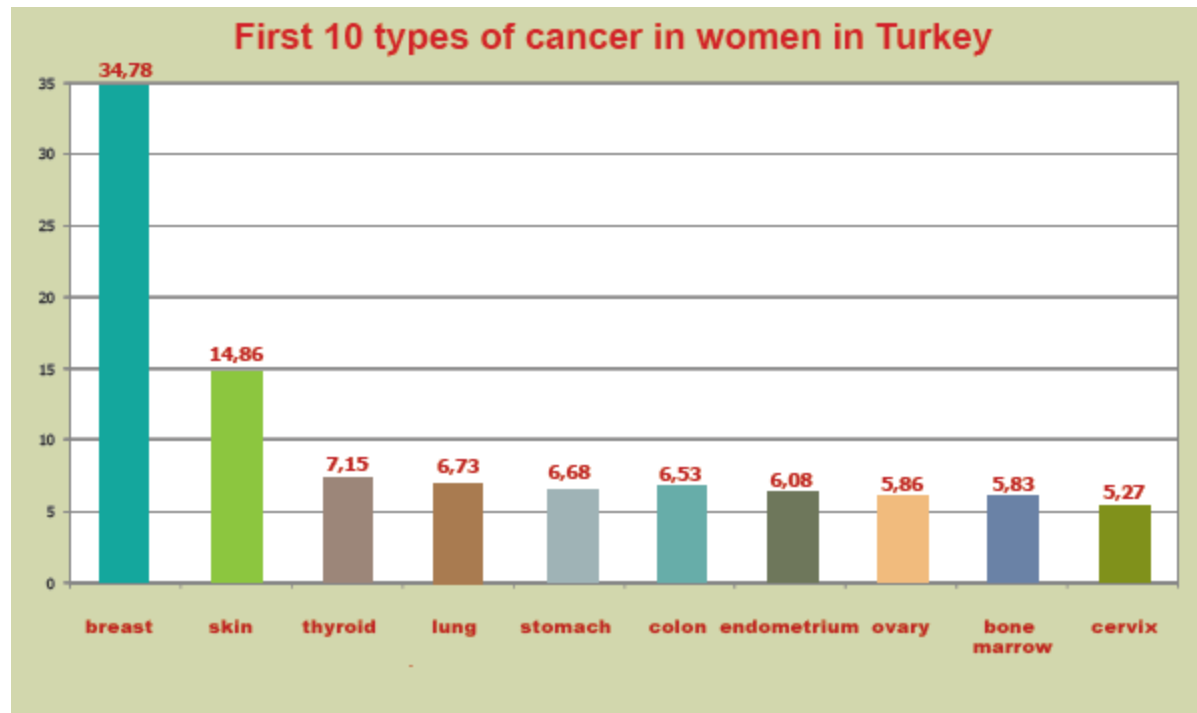


# A New Era in Health

## 3. Campaign for Primary Health Services

### ▶ Health Promotion, Social Movement and Awareness for Chronic Diseases

#### ▶ Cancer Registration:



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

#### ▶ Cancer Control Program:

- ▶ “National Cancer Control Program” was organized in coordination with NGOS and universities. Breast and cervical cancer screening programs have been carried on throughout the country and colorectal cancers will be included into the scope of cancer screening programs as of 2009.
- ▶ Studies on thermal power plants’ negative effects to the environment are going on.
- ▶ Regarding the electromagnetic fields, the relevant regulation required to be issued in the EU harmonization process is planned to be issued in 2009.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

- ▶ **Cancer Early Diagnosis, Screening and Training Centers Project**
  - ▶ It is a project jointly implemented by Ministry of Health and MEDA (Mediterranean Development and Aid Program) and within this framework 54 KETEMs were established until now in 52 provinces and 83 centers will have been established in all 81 provinces by the end of 2008.
  - ▶ In these centers, screening services are freely delivered to our citizens who cannot afford.
  - ▶ Colorectal Cancers will be included into the National Screening program in the beginning of 2009.
  - ▶ Pilot screenings for skin cancer have been conducted in Adana and Antalya KETEMs.



# A New Era in Health

## 3. Campaign for Primary Health Services

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### ▶ **Health Promotion, Social Movement and Awareness for Chronic Diseases**

- ▶ **Early Warning, Registration, Follow-up, Analysis and Training System Project in Determining the Incidence of Subgroups of Human Papilloma Virus (HPV), an agent of Cervical Cancer, in Turkish Society**
- ▶ **National Cancer Institute**
- ▶ **Various Project Activities**
- ▶ **Trainings**



# A New Era in Health

## 4. Transformation in the Primary Family Healthcare Services: Medicine

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- ▶ The Health Transformation Program is planning the delivery of the healthcare service as human-centered, it sets forth the introduction to family medicine implementation (FMI) in primary healthcare services.
- ▶ The family physician takes due precautions to protect the person whose responsibility he/she undertook against diseases;
  - ▶ When the person becomes ill,
  - ▶ The family physician does his/her best to solve all kinds of health problems of that person
  - ▶ The family physician undertakes a coordinator's role through his/her providing consultancy services in health problems the solution of which requires specialty and special equipment by directing the person to other specialist physicians, dentists or secondary or tertiary health institutions.
- ▶ Family physicians;
  - ▶ Prevent waste in healthcare expenditures
  - ▶ Hinder the unnecessary long waiting lists
  - ▶ Patients' suffering in secondary healthcare services



# A New Era in Health

## 4. Transformation in the Primary Family Healthcare Services: Medicine

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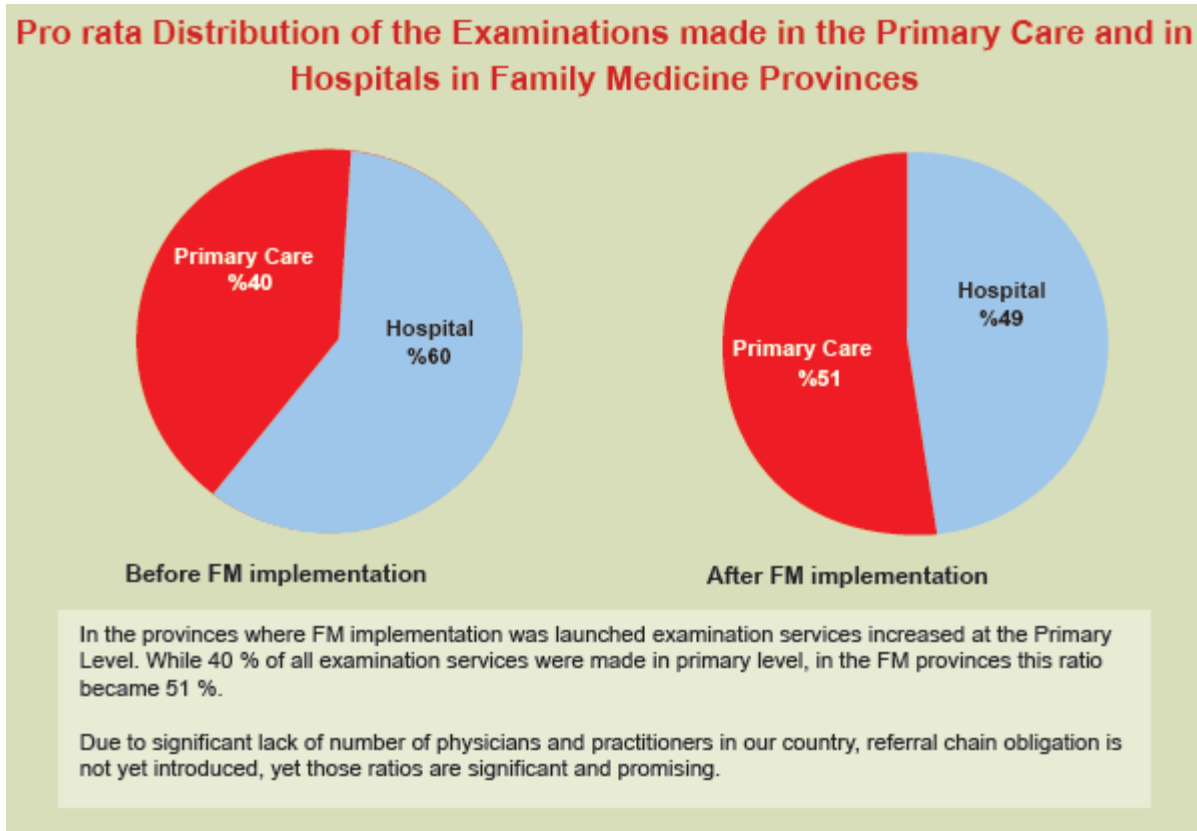
- ▶ Family Physicians Counseling Committee was formed with the participation of professional organizations and academicians.
- ▶ First and second phase
- ▶ First phase:
  - ▶ The general practitioners who will take part in the family medicine implementation (except for the family medicine specialists) were subjected to orientation training for 10 days long and the auxiliary health personnel were subjected to orientation training for 3 days long.
  - ▶ At the end of 2010, approximately 40.000 physicians from different duty and service have been trained.
- ▶ Second phase:
  - ▶ Long term training targeting the update and improvement of professional knowledge skills.



# A New Era in Health

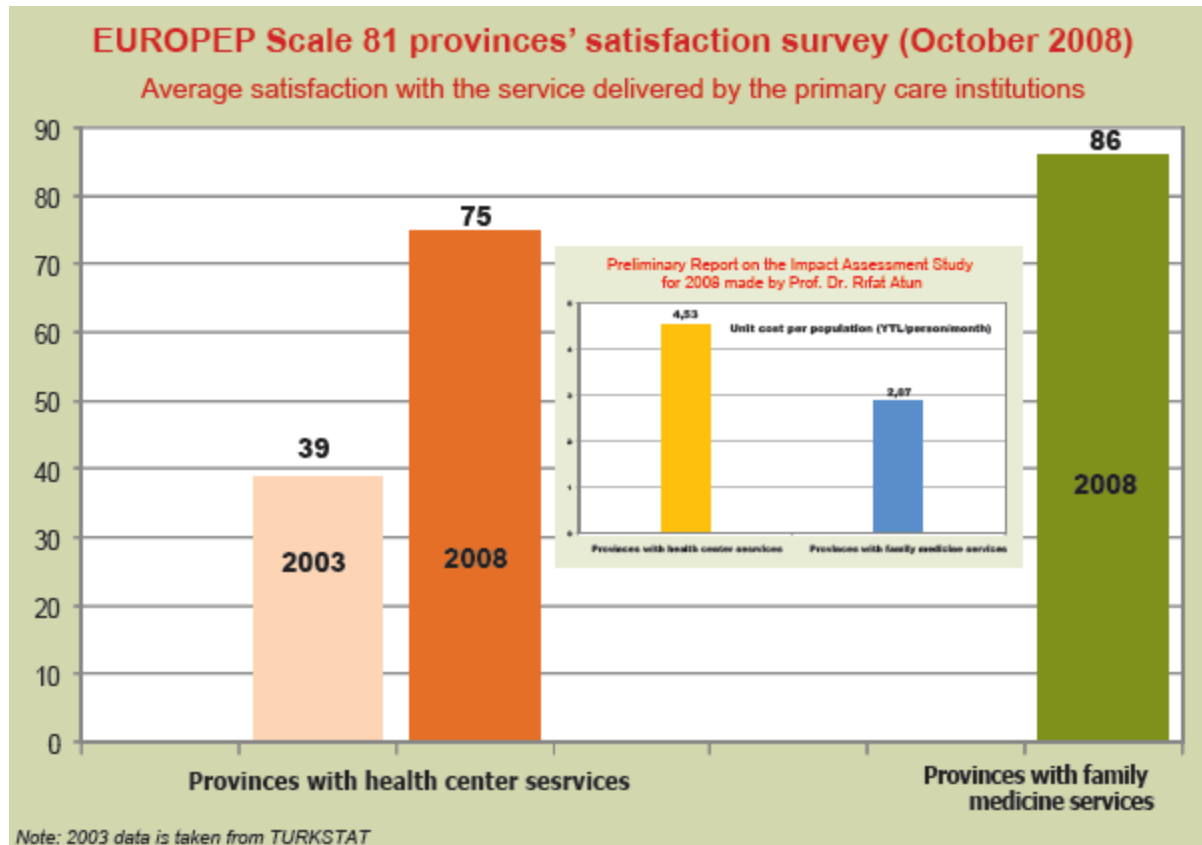
## 4. Transformation in the Primary Family Healthcare Services: Medicine

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# A New Era in Health

## 4. Transformation in the Primary Family Healthcare Services: Medicine





# A New Era in Health

## 5. Performance-Based Supplementary Payment, Quality and Accreditation

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- ▶ Performance based additional payment
- ▶ It was ensured that current human resources were used more effectively
- ▶ The personnel was financially supported in line with the difficulty and risk of healthcare services.
- ▶ Active in 2004
- ▶ The criteria set forth in the field of preventive and primary healthcare services in primary healthcare institutions are as follows:
  - ▶ Interregional development
  - ▶ Distance to the center
  - ▶ Vaccination
  - ▶ Infant follow-up
  - ▶ Pregnant follow-up
  - ▶ Newborn screenings
  - ▶ Family planning method utilization rate, etc.
  - ▶ Diagnosis and follow-up works for tuberculosis control.



# A New Era in Health

## 5. Performance-Based Supplementary Payment, Quality and Accreditation

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- ▶ **The preventive healthcare services include:**
  - ▶ Interregional development
  - ▶ Distance to the center
  - ▶ Vaccination
  - ▶ Infant follow-up
  - ▶ Pregnant follow-up
  - ▶ Newborn screenings
  - ▶ Family planning method utilization rate, etc.
  - ▶ Diagnosis and follow-up works for tuberculosis control
- ▶ **Personnel's knowledge related to his/her profession is enhanced and necessary personnel substructure is formed in order to provide more qualified healthcare services through more qualified health personnel.**



# A New Era in Health

## 5. Performance-Based Supplementary Payment, Quality and Accreditation

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- ▶ The personnel who publish scientific studies and papers inside and outside the country are made an additional payment at a higher rate.
  - ▶ **Primary Healthcare Services and Institutional Performance and Quality**
    - ▶ Active 2005
    - ▶ Institutional-level performance measurement is the complement of the healthcare performance measurement delivered by the personnel.
    - ▶ Institutional-level performance measurement aims to increase the quality, efficiency and patient satisfaction in healthcare services and ensures the participation of all personnel in the qualified service due to its impact on individual performance.
- 



# A New Era in Health

## 5. Performance-Based Supplementary Payment, Quality and Accreditation

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### ▶ **Institutional Performance and Quality Implementation in Primary Health Institutions**

- ▶ Active 2005
- ▶ The criteria in the primary healthcare institutions are as follows:
  - ▶ Access to medical examination
  - ▶ I I 2 service quality indicator
  - ▶ Preventive service indicator: The most important indicator to reflect the developmen of a country.
  - ▶ I I 2 efficiency indicators



# A New Era in Health

## 5. Performance-Based Supplementary Payment, Quality and Accreditation

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### ▶ **Primary Healthcare Services in Secondary and Tertiary Health Institutions**

- ▶ The service quality standards of the criteria set forth to evaluate the institutional performance and quality of inpatient health institutions are as follows:
  - ▶ Training of personnel,
  - ▶ Training of patients,
  - ▶ Prevention and control of infections,
  - ▶ Laboratory safety,
  - ▶ Standards for improving the processes of hospital services.



# A New Era in Health

## 6. Human Resources Management in Health

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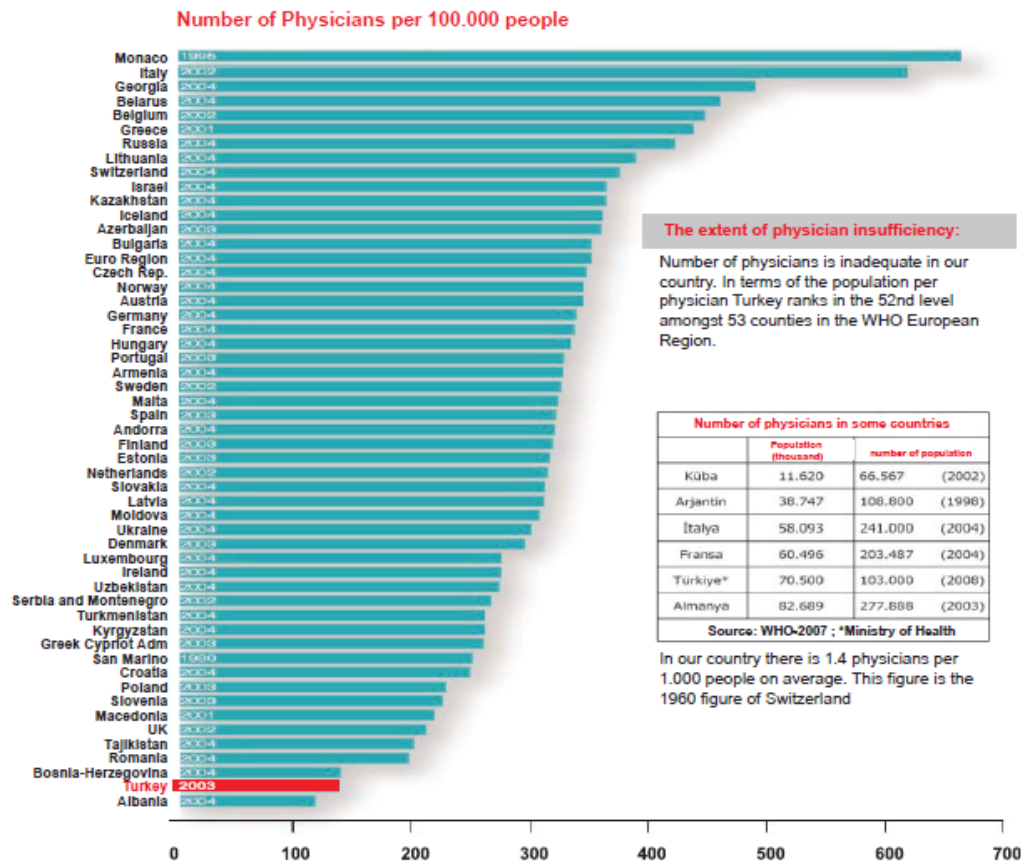
- ▶ **Determining the Human Resources Situation and Solution Planning**
  - ▶ It is important to raise the numbers particularly of the physicians and the nurses without compromising education quality in health human resources.
  - ▶ In terms of the number of physicians per hundred thousand, Turkey ranks at the bottom of the WHO European Region.



# A New Era in Health

## 6. Human Resources Management in Health

### ► Determining the Human Resources Situation and Solution Planning



**The extent of physician insufficiency:**

Number of physicians is inadequate in our country. In terms of the population per physician Turkey ranks in the 52nd level amongst 53 countries in the WHO European Region.

**Number of physicians in some countries**

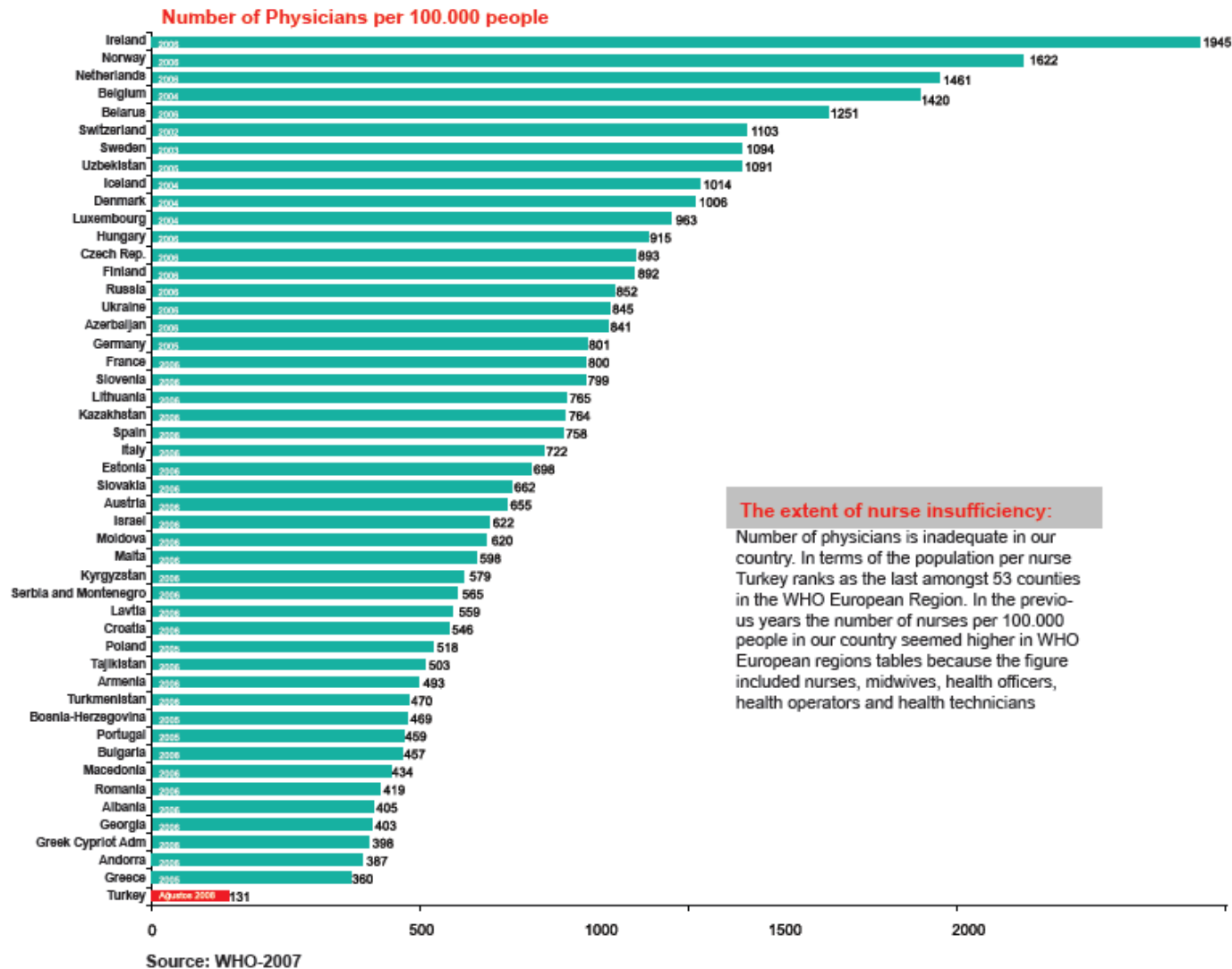
	Population (thousand)	number of population
Küba	11.620	66.567 (2002)
Arjantin	38.747	108.800 (1998)
İtalya	58.093	241.000 (2004)
Fransa	60.496	203.487 (2004)
Türkiye*	70.500	103.000 (2008)
Almanya	82.689	277.888 (2003)

Source: WHO-2007 ; \*Ministry of Health

In our country there is 1.4 physicians per 1.000 people on average. This figure is the 1960 figure of Switzerland

# A New Era in Health

## 6. Human Resources Management in Health



### The extent of nurse insufficiency:

Number of physicians is inadequate in our country. In terms of the population per nurse Turkey ranks as the last amongst 53 countries in the WHO European Region. In the previous years the number of nurses per 100.000 people in our country seemed higher in WHO European regions tables because the figure included nurses, midwives, health officers, health operators and health technicians



# A New Era in Health

## 6. Human Resources Management in Health

### ► Determining the Human Resources Situation and Solution Planning

Number of students per academicians in schools of medicine in some countries

Country	Population (million)	Number of schools of medicine	Number of academicians	Number of students	Number of students per academician
Germany	82,6	36	3.550	79.866	22,5
Spain	41,9	28	2.500	36.049	14,4
Italy	58	39	12.583	148.157	11,8
France	60	44	5.849	62.921	10,8
Slovakia	5,4	3	893	6.561	7,3
Slovenia	2	1	285	1.717	6
Finland	5,2	5	698	3.583	5,1
Denmark	5,4	5	1.570	6.598	4,2
Turkey*	70,5	52	9.020	32.985	3,6

Our country is in WHO European Region. When the average of this region is taken as the basis, there should be 14.000 graduates from the schools of medicine every year according to the population we have

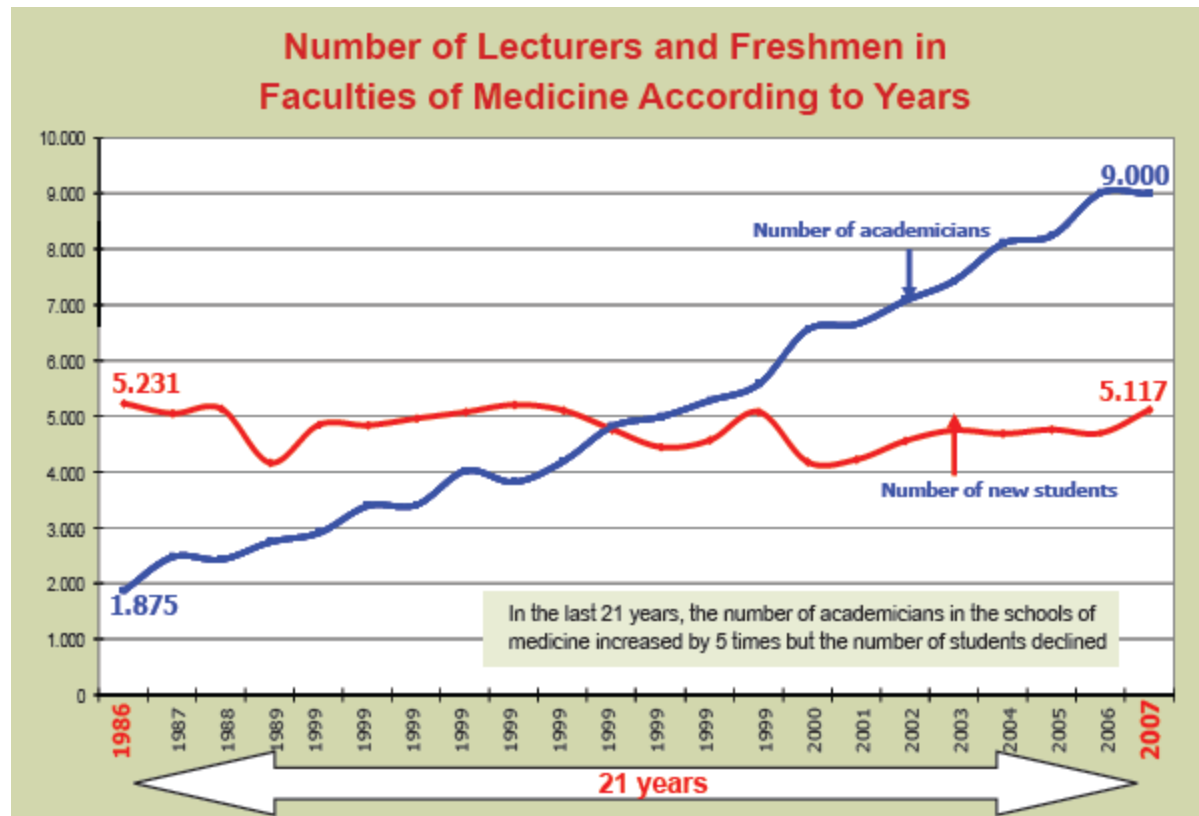
However, the annual number of graduates is the 1/3 of the European average (around 4.500).

Source: Ministry of Foreign Affairs, Ministry of Health

# A New Era in Health

## 6. Human Resources Management in Health

### ▶ Determining the Human Resources Situation and Solution Planning



# A New Era in Health

## 6. Human Resources Management in Health

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### ▶ **Determining the Human Resources Situation and Solution Planning**

- ▶ YÖK (Higher Education Council) increased the student quota for the Schools of Medicine by 30% and for the Nurse Vocational Schools by 15 % in 2008.
- ▶ The quotas were increased to 6 thousand for the Schools of Medicine and 14 thousand for the Nurse Schools (Health College and Nurse Vocational Schools) in 2008.



# A New Era in Health

## 6. Human Resources Management in Health

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### ▶ **Determining the Human Resources Situation and Solution Planning**

#### ▶ **The following estimation of requirements is within reason for 2023**

- ▶ In 2008, the number of physician application per capita will be around 6,3. We expect that this number will reach 7-8 per year in the following 15 years. As stated above, Turkish population is expected to reach 83 million in 2023. Thus, we estimate the total number of applications will reach 664.000.000 in 2023. ( $83.000.000 \times 8 = 664.000.000$ )
- ▶ For a qualified and reliable health service delivery, a physician should spare in average 15-20 minutes for a patient. Assuming that the family physicians and the specialists of the outpatient institutions spare 17 minutes for each patient, it would be reasonable to aim at meeting the requests of 25 patients a day. (in outpatient admission, a physician works for 7 hours a day;  $420 \text{ min} / 17 = \sim 25$ ).
- ▶ There are approximately 220 workdays a year,  $664.000.000 / 220 \text{ days} = 3.018.181$  application/day needs to be done.
- ▶  $3.018.181 / 25 = 120.727$  physician / day rate is found. (i.e. in 2023 we will need 120 thousand physicians who will be examining patients at the same time).

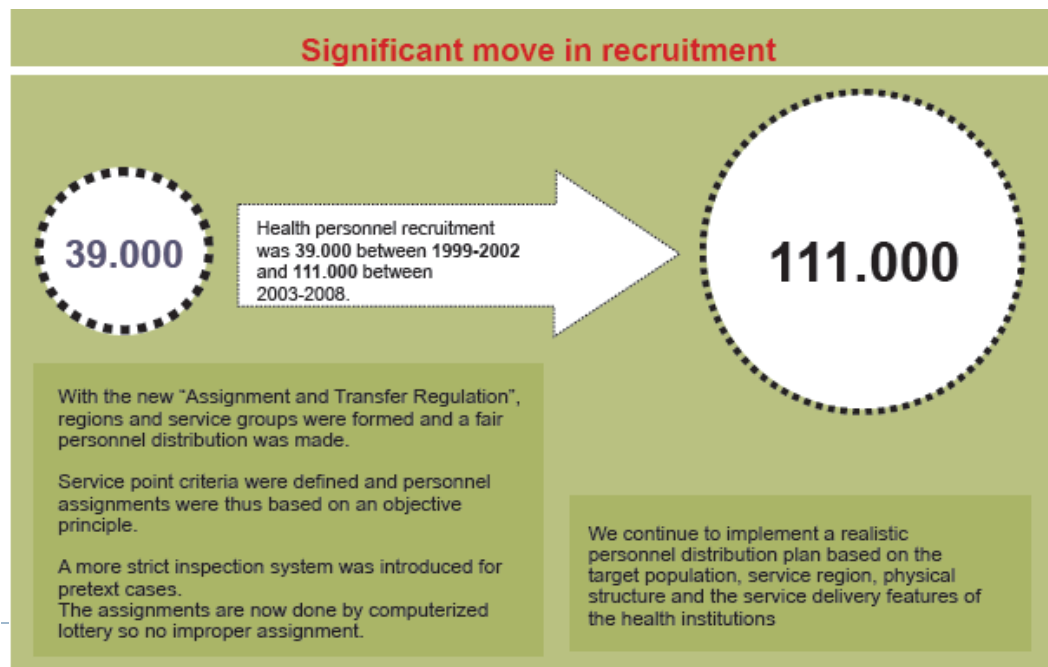


# A New Era in Health

## 6. Human Resources Management in Health

### ▶ Break-through in Health Human Resources

- ▶ 111 thousand new health personnel were appointed during 2003-2008.
- ▶ 16.000 contracted health personnel have been assigned in deprived health facilities which had no personnel for years in the past.
- ▶ The personnel (such as; housekeeping, security) in 2002 25 thousand, in 2008 95 thousand.



# A New Era in Health

## 6. Human Resources Management in Health

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### ▶ **Transparency in Personnel Appointment**

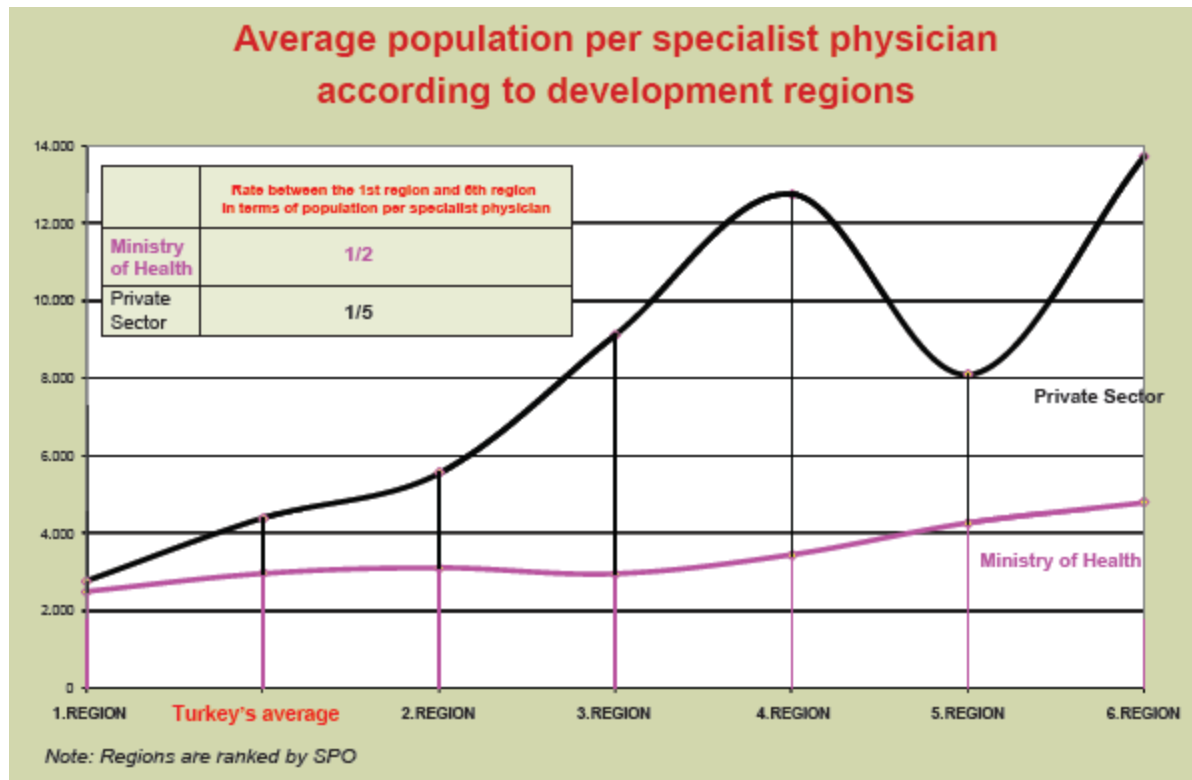
- ▶ Health Transformation Program;
  - ▶ Reduce the regional differences in personnel distribution into the acceptable levels
  - ▶ Determine realistic standards in accordance with the titles in personnel employment and to plan human resources in line with this
  - ▶ Establish an objective and equitable system to be used in the appointments and assignments.
- ▶ 7 thousand new health personnel were assigned in the East and Southeast Anatolia Regions.
- ▶ The compulsory service with incentives was put into effect for physicians.



# A New Era in Health

## 6. Human Resources Management in Health

### ► Transparency in Personnel Appointment



# A New Era in Health

## 6. Human Resources Management in Health

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### ▶ **Health Personnel Training**

- ▶ Orientation trainings are given to family physicians and nurses to be assigned in primary healthcare services.
- ▶ The curriculum of the in-house training for the longer second period is already prepared, the preparation of the training materials is completed.
- ▶ The scope of those training 6.500 students benefited from the system.
- ▶ In 2008, all provincial health directors were provided one-week orientation training and the training of the heads of health groups were initiated.





# A New Era in Health

## 7. National Medicine Policy

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- ▶ The duty of the Ministry of Health is to ensure our citizens to get the drugs in an efficient and reliable way with high quality and reasonable prices.
- ▶ The aim of the Health Transformation Program is to ensure that our citizens can reach the drugs without any discrimination and also to ensure this accession is to be sustained.
- ▶ **Reduction in Medicine Prices**
  - ▶ Discounts ranging from 1% to 80% have been done in approximately a thousand products just after the implementation was initiated.
  - ▶ The VAT rates for medicine have been reduced to 8% from 18% leading to another decline in medicine prices.
  - ▶ “The Single Reimbursement System”
  - ▶ The prescribed medicines will be reimbursed on condition that their prices are up to the 22% over the cheapest bioequivalent medicines.



# A New Era in Health

## 7. National Medicine Policy

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### ▶ Reduction in Medicine Prices

#### **“Price Decree” dated 1984:**

Prices were based on the firms' cost statements, it was not practically possible to investigate the cost of imported pharmaceuticals, and market prices were determined by adding the costs and the profit rates.

#### **The new decree dated February 6, 2004 by our government:**

We established the Reference Price System and introduced transparent, measurable, objective criteria and gradual profits which will decrease the burden on the public.

We established the structure which includes the reimbursement institutions to the decision making process.

We disposed the “Technical Obstacles in Trade” investigation” opened against our country by the EU Commission.

#### **Regulating the Pharmaceuticals' prices with the Reference Price System**

\*We take 5 EU member countries which have with cheapest pharmaceutical prices and are followed, as the reference. With the revision on the decree, number of the reference countries was turned into “between 5 and 10”, and in this way taking more countries as the reference was made possible.

\*We identify the maximum price of any pharmaceutical in our country by taking the cheapest price within those 5 countries as the basis. (Reference price)

\*The prices of almost a thousand medicines decreased by 1 to 80 % with this implementation.

**Annual Public Savings made  
by reference price system:**

**1 Billion YTL**

# A New Era in Health

## 7. National Medicine Policy

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### ► Reduction in Medicine Prices

**Public Pharmaceutical Expenditures in 2002 prices (million YTL) and Amount of Consumed Pharmaceuticals (million boxes)**

	2002	2003	2004	2005	2006	2007	% five year increase
Public Pharmaceutical Expenditures (million YTL)	5.232	5.428	5.601	5.753	5.944	6.056	16%
Consumed Pharmaceuticals (million boxes)	699	769	856	1.212	1.272	1.399	100%

Thanks to our pharmaceutical policies, the amount of medicines consumed in 5 years increased 100 % and the public pharmaceutical expenditure increased only by 16 % in reality.

We used the savings achieved by our pharmaceutical policies for ensuring public's easy access to medicine.

SSK enrollees and green card holders can now get their medicines from all pharmacies.



# A New Era in Health

## 7. National Medicine Policy

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### ▶ **Opening Pharmacies to Everybody**

- ▶ Easy and economic access to medicines and the result of those steps are observed by the public closely.
- ▶ With changes in the Green Card legislation, Green Card holders are also in the out-patient treatment system; hence they are free to obtain their medicine from any pharmacy.

### ▶ **Rational Drug and Material Management**

- ▶ TV programs to raise awareness of our public about rational drugs rate.
- ▶ Informing seminars to students in schools
- ▶ Include these issues in the curriculum of health lessons in schools.

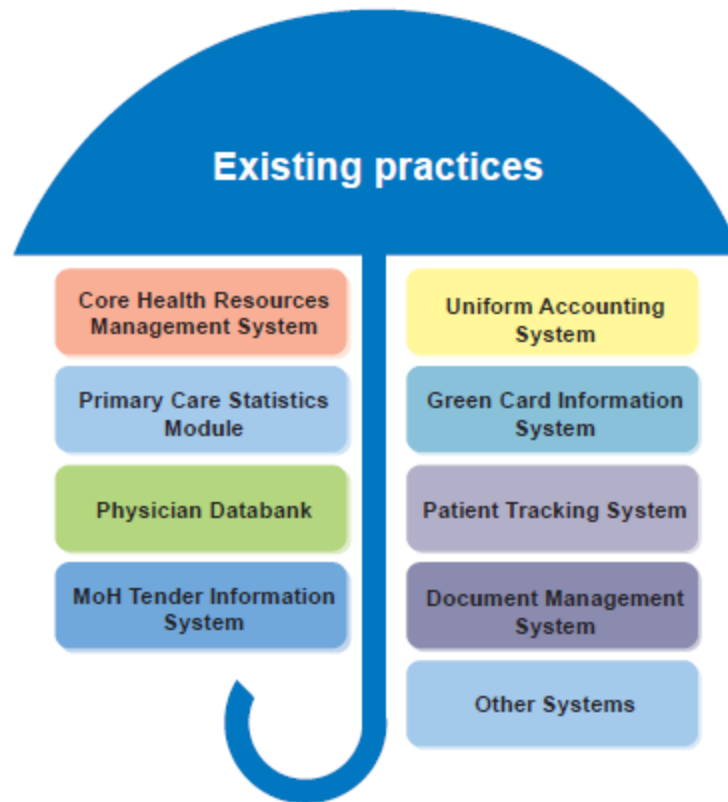


# A New Era in Health

## 8. Health Information System

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- ▶ An integrated information system is needed in order to establish harmoniation of all the components in the system.



# A New Era in Health

## 8. Health Information System

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- ▶ **Family Medicine Information System**
  - ▶ Keep the Electronic Health Records of 17 million citizens until now in the Family Medicine provinces.
  - ▶ The Uniform Accounting System was put into use.
  - ▶ Through the MoH Tender Information System, it is possible to see the tender results for the procurement of medicines, medical devices, materials and services in all MoH Provincial Health Directorates, all hospitals, and Hygiene Regional Directorates.
  - ▶ Through the Green Card Information System, the green card holders are included in the Retirement Fund prescription control system.
  - ▶ Through the Physician Data Bank, the diploma and the specialty information of all physicians during the republican Period are fettered into records.
  - ▶ Through the Tele-medicine Project, distant reporting service was provided in the field of screening with the use of information and communication technologies and a total of 18 hospitals are put into service consisting of 11 sender and 7 receiver hospitals in the field of tele-radiology, tele-pathology and the rollout works are continuing.

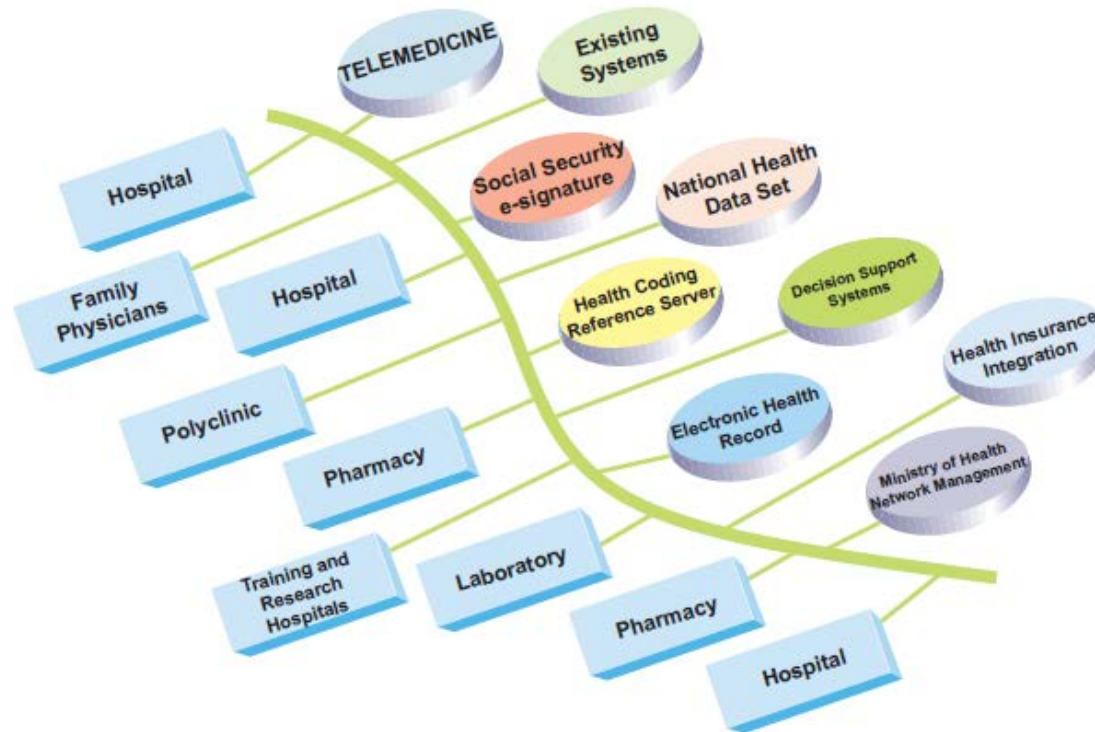


# A New Era in Health

## 8. Health Information System

### ► Family Medicine Information System

Health portal is functional



# A New Era in Health

## 8. Rationalism in Investment

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### **We conducted “Turkish Health Inventory” study.**

We assessed the financial, medical and technical analysis of investments.  
We made planning through on-site inspections and in collaboration with local administrators on district, provincial and regional level.  
We classified projects with regards to priority and significance.  
We made rational use of investment budgets based on above principles.

Health Investments Concluded in  
November 2002-November 2008

Hospital	Hospital side buildings	Health centers	Other	Total
211	191	752	95	1,249

The Amount Spent For Health Investment,  
Maintenance And Medical Hardware Between  
The Years 2003-2008 (Million YTL)

General Budget	Revolving Fund	Province Special Admin.	TOKI	TOTAL
3.274	3.260	753	207	7.594

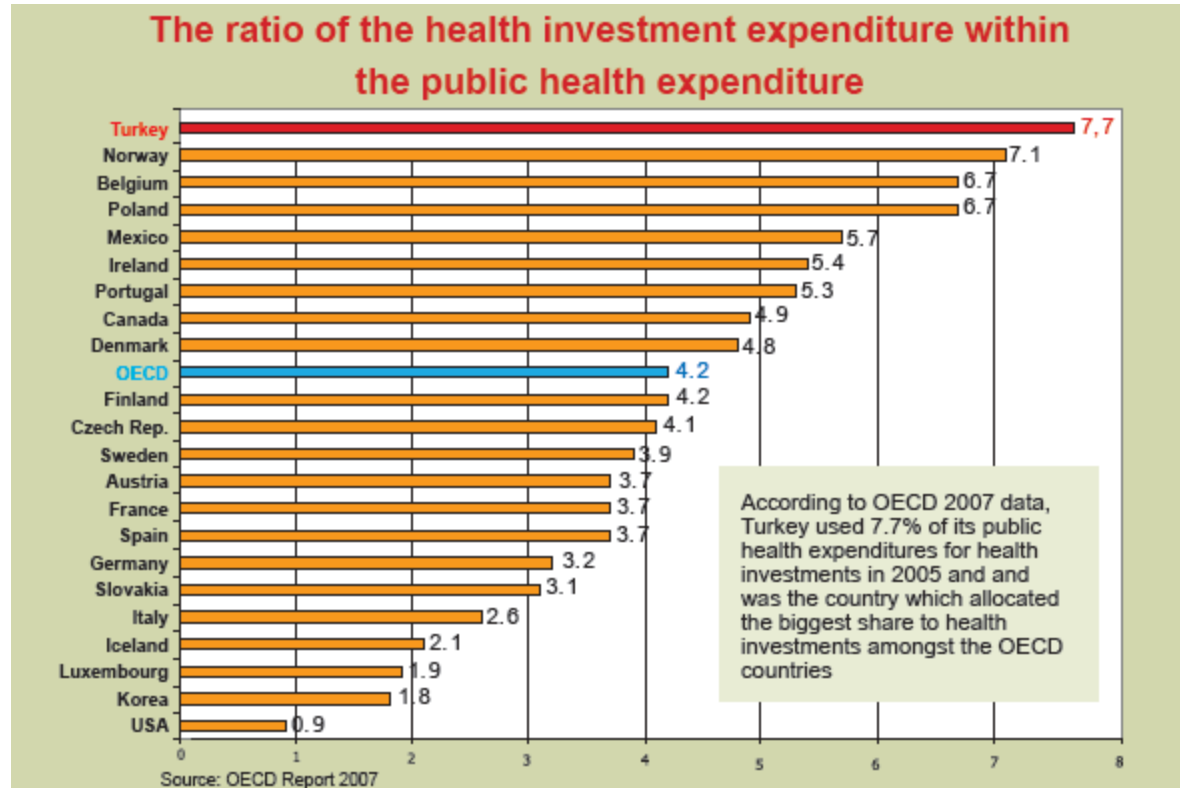
We spent 7 billion 594 million YTL under Health Transformation Program for investment, maintenance and medical devices. We opened 1.249 health facilities, of which 752 are health centers.





# A New Era in Health

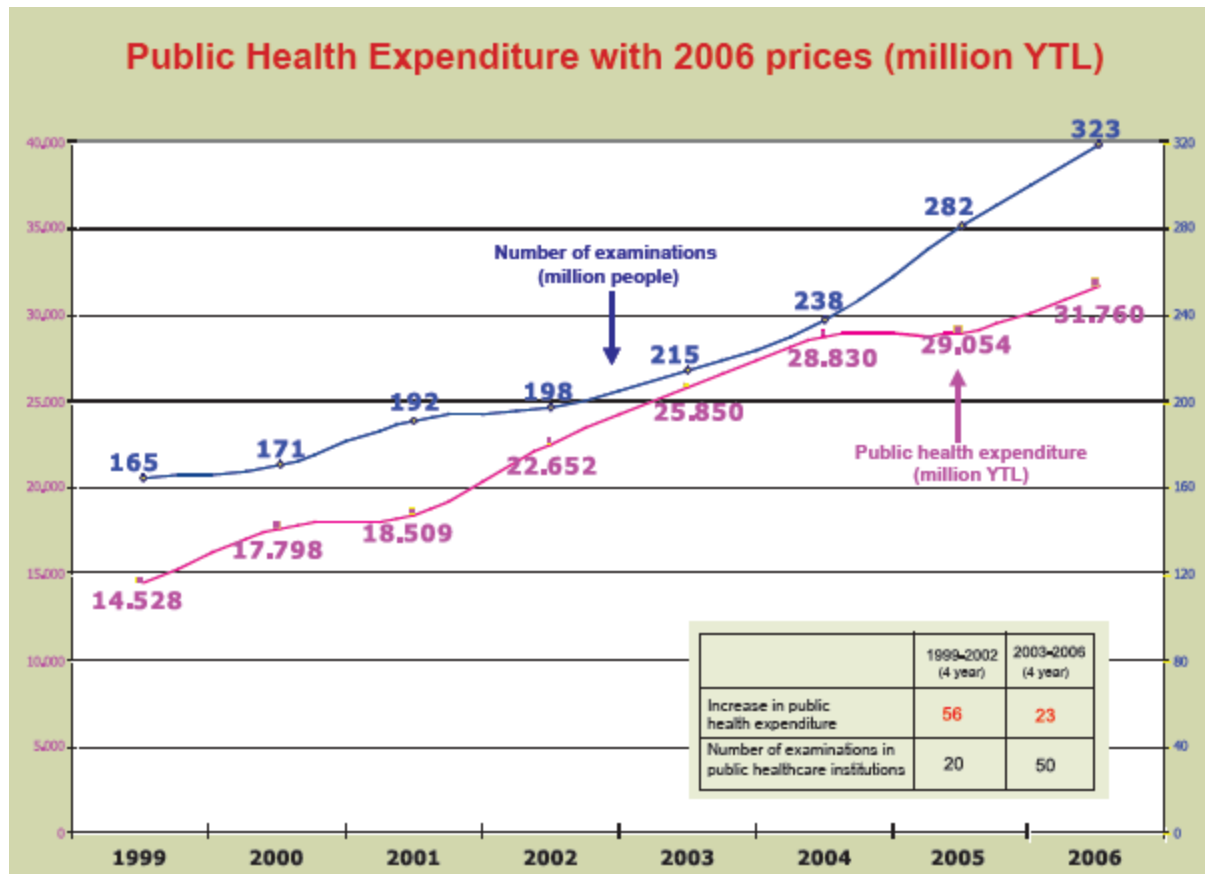
## 9. Rationalism in Investment



# A New Era in Health

## 10. Health Expenditures

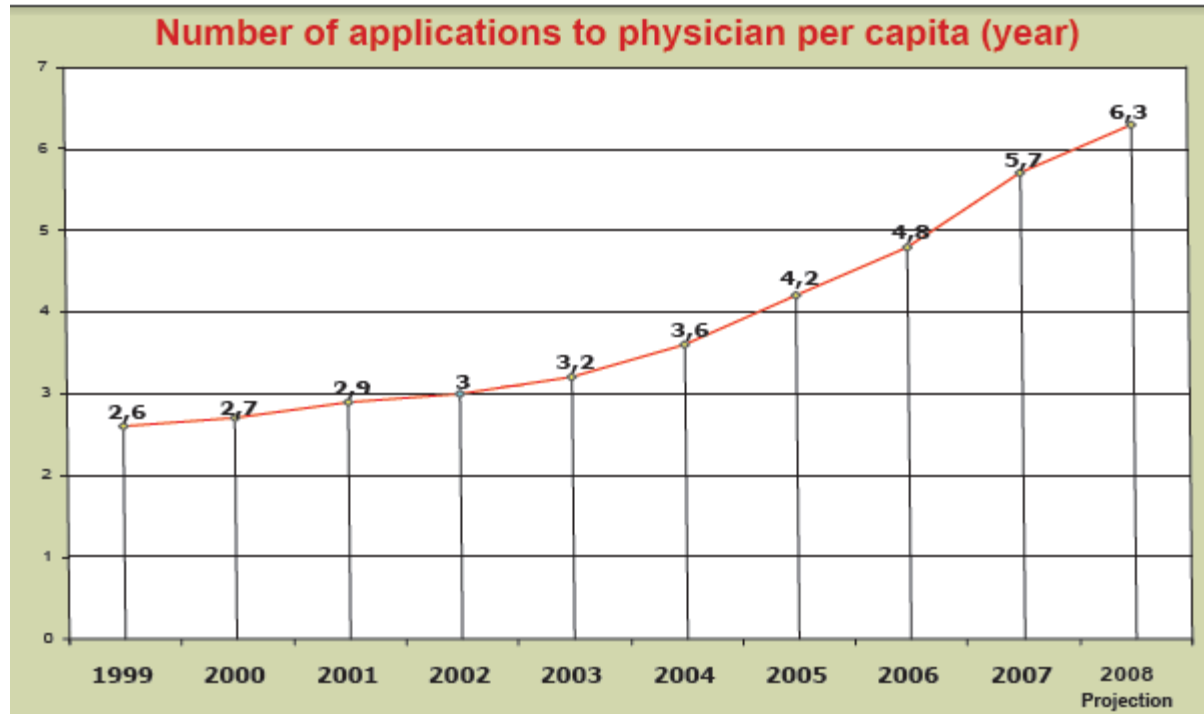
Health Transformation Program ensured the optimum use of the resources and established an effective, efficient and just health system.



# A New Era in Health

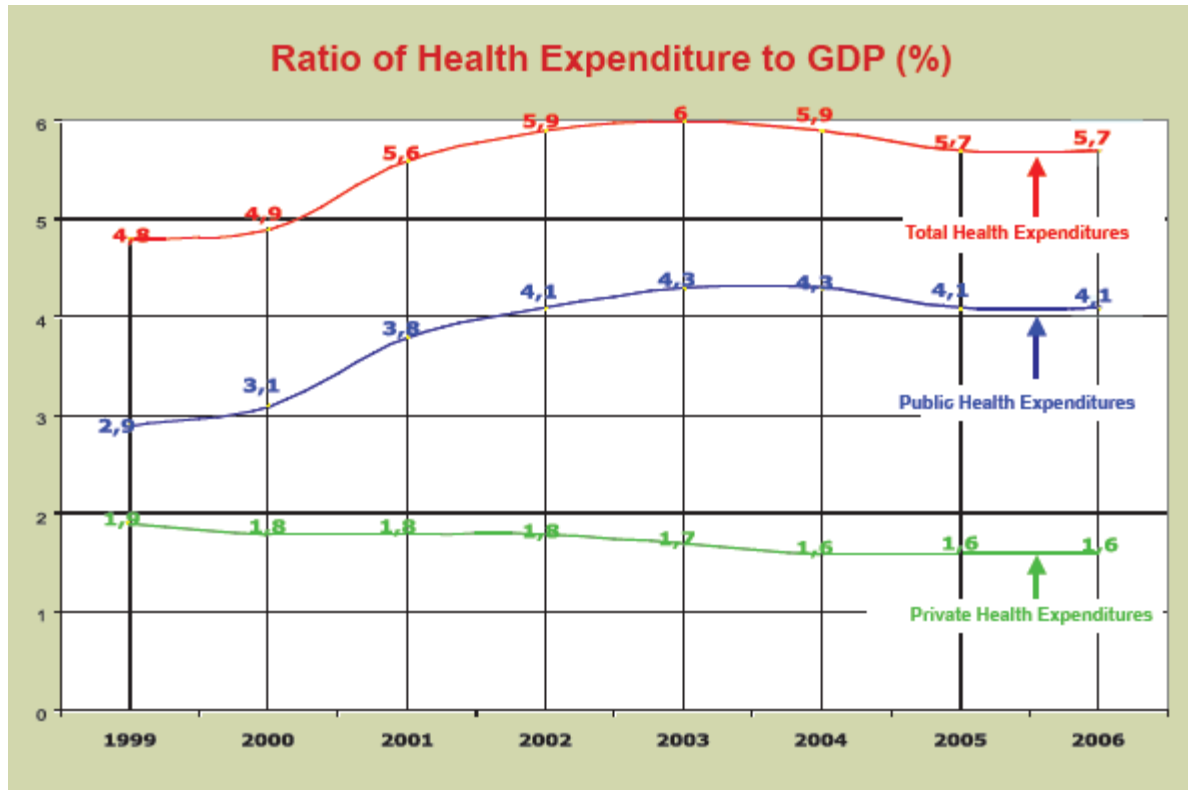
## 10. Health Expenditures

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# A New Era in Health

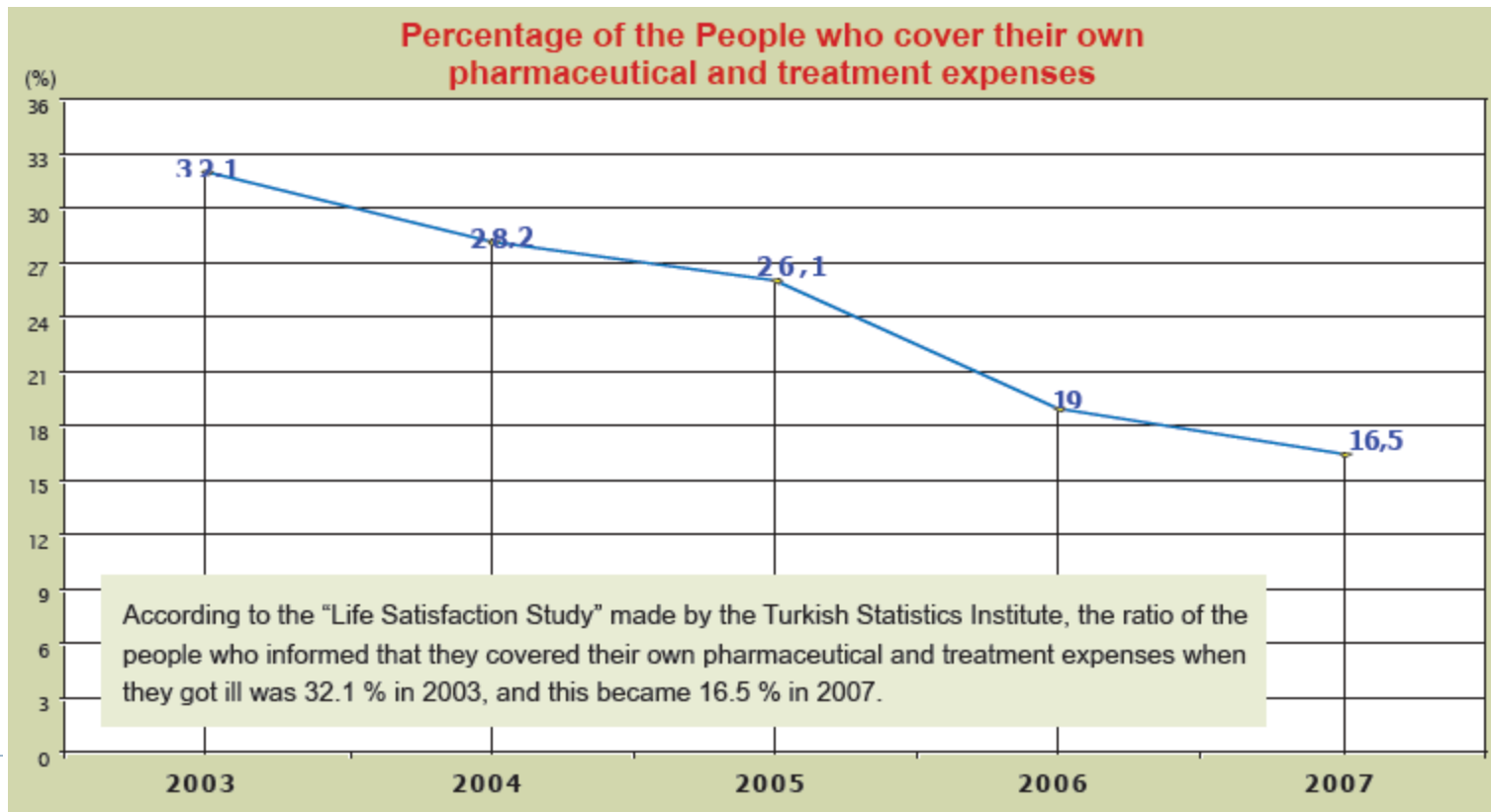
## 10. Health Expenditures



# A New Era in Health

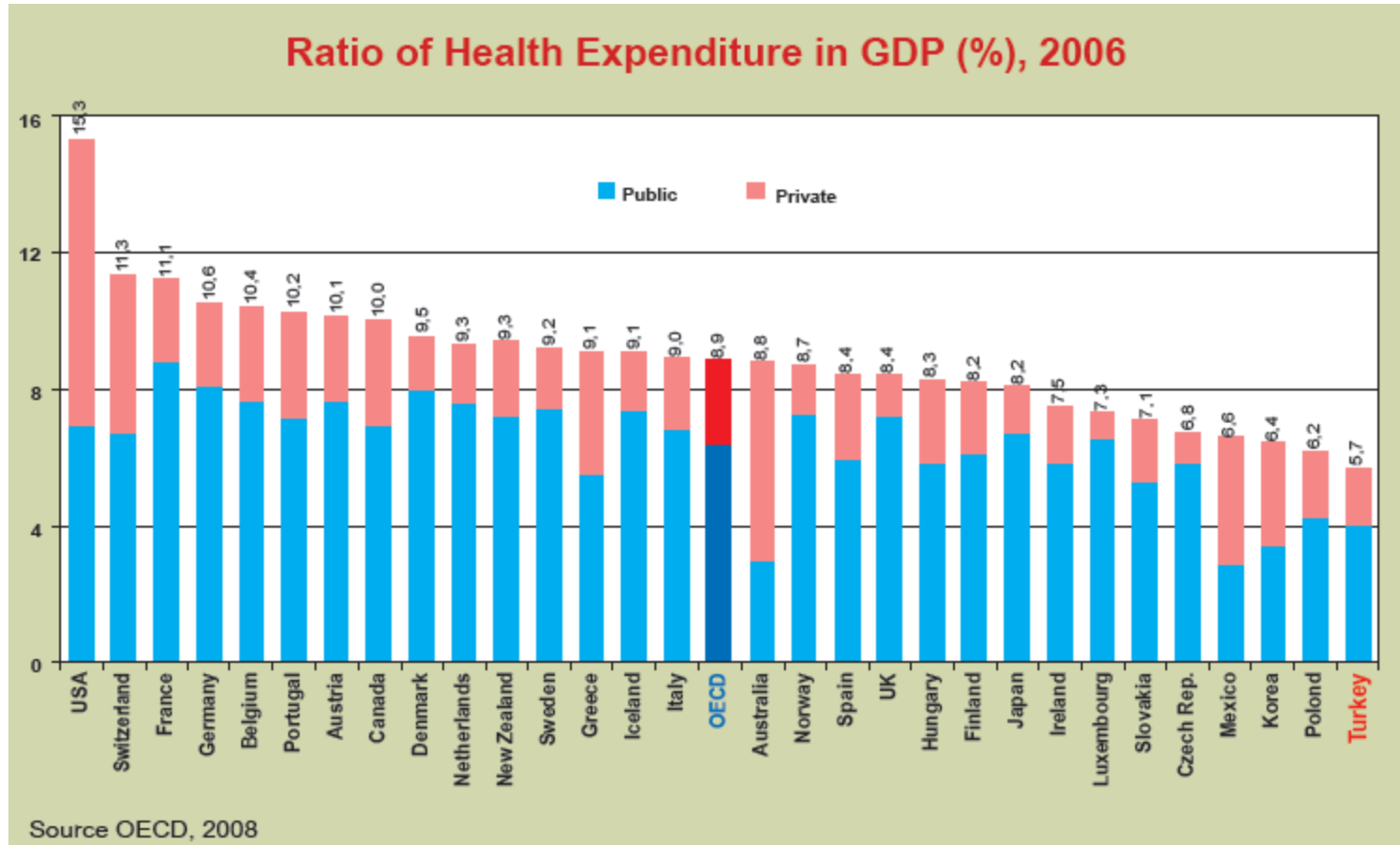
## 10. Health Expenditures

The share of or health expenditures in our GDP is the lowest amongst the OECD countries, and our country ranks as the third from the last in terms of public expenditures, but despite those ratios we have reached a position where we are able to deliver effective, qualified and sustainable health service.



# A New Era in Health

## 10. Health Expenditures

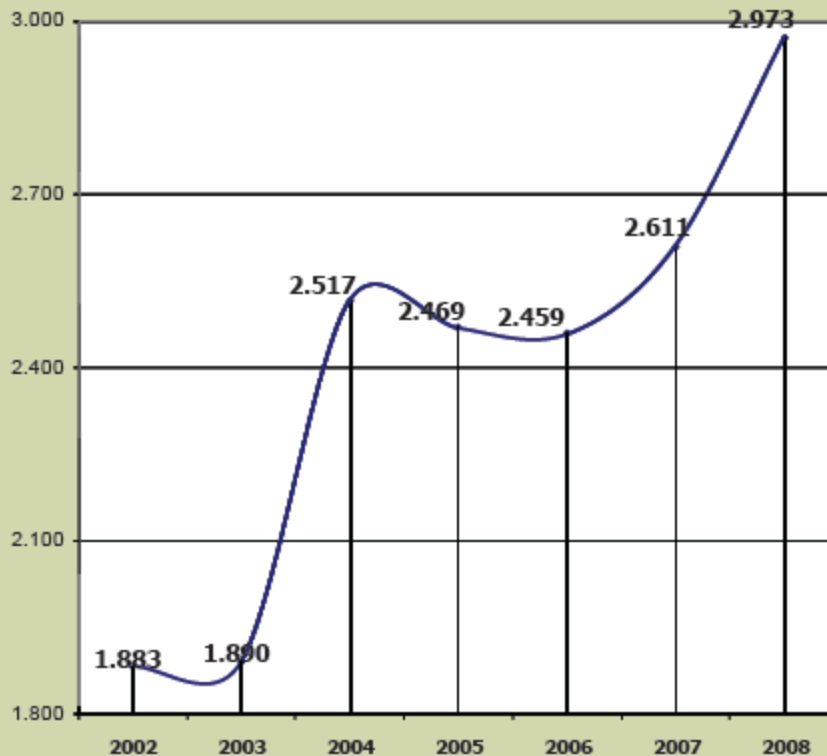


# A New Era in Health

## 10. Health Expenditures

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**Budget allocated for preventive and primary health care services in 2008 prices (million YTL)**



In six years we have increased the budget allocated for preventive and primary health care services by 58% in real terms. In 2009 the budget allocated for preventive and primary health care services is 3 billion 979 million YTL.

