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## POSTER ABSTRACT

### `Value of Primary Health Care` project: patient education in primary health care setting

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**Introduction:** The main responsibility of health care entities is to improve public health and stimulate patients to take care of their own health. An inseparable element of health promotion is the health education. It consists of developing skills of maintaining and improving health, of individuals and society in general and creating a health-friendly environment. Introduction of high quality health education is the main aim of the project `Explore the Value of Primary Health Care – Value of PHC` project in Poland.

**Description of political context and objectives:** Health education in Poland is provided to a limited extent. Health care system focuses rather on specialist and hospital care. Patients in Poland pay only little attention to prophylaxis; they do not want to participate willingly in activities promoting healthy lifestyle nor visit education centers. The main objective of the “Explore the value of primary health care” program is to change this. The biggest challenge for health education in Poland is to develop a systemic solution offering comprehensive support for patients. This could be achieved by appointing health educators in primary health care and promoting their services. The program started in March 2018 and is planned for 2 years.

**Population targeted:** The project is targeted at 26,168 patients and 434 health professionals will be involved. Ultimately, health education should cover all population of Poland.

**Highlights:** The aim of the project is to develop and implement tools for educating the medical and non-medical staff, which is to be responsible for patient education. Health education activities include a comprehensive doctor’s visit, health checkup, and educational consultation made by nurse, dietitian and/or psychologist. Medics are involved in this project as well. They participate in trainings on customer service, patients’ rights, prophylactic programs and rules governing health care system. In the project, certain tools facilitating cooperation between primary health care doctors and outpatient doctors will also be developed and implemented.

**Transferability:** An effective health education system requires the implementation of three health care policy instruments: adjustment to environmental conditions, support for self-health care and financial determinants. Top-down guidelines are to be created by a team of specialists, to be

provided to patients by health educators. The educators have to be thoroughly prepared and trained with regard to health knowledge and communication. A patient-educator conversation should be preceded by an analysis of patient's knowledge and studying preferences, i.e. based on words (lecture, conversation, discussion), observation and assessment (measurement of patient's parameters, presentation of appropriate pro-health behavior with regard to a particular illness) or practical activities (brainstorming, problem solving role play).

**Conclusions:** Simple education programs in primary health care have shown to be ineffective. Implementation of coordinated activities might improve health condition of the population. A substantive and commonly available education system can help to reduce the costs of health care by exerting a positive influence on patient's behavior.

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**Keywords:** education; poland; value

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