



**Fédération Européenne
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National Report Poland
Dr. Ryszard Kijak (OZZL)

National Report Poland - Autumn 2018 - OZZL Report on the situation of doctors in Poland

OZZL Agreement of Resident Doctors, representing our young doctors in training, started 2 October 2017 with the action of rotational hunger protest. After this, we announced the action of canceling the clause opt-out. In this action approximately 5 thousand doctors took part.

The first effect of this protest was dismissing the health minister Konstanty Radziwill from the post, since he wasn't suitable for it. He was overbearing, too lofty and uncompromising. He disregarded young OZZL doctors.

8 February 2018 new health minister Lukas Szumowski signed an agreement with us. The agreement has compromising character, so purposes of doctors are only partly being served. Changes are going in good direction, but still far from the destination desired by doctors.

As a result of the agreement, 5 July 2018 the parliament passed a law. The new act is providing:

- achieve minimum 6,0% GDP public sources expenditure for healthcare in 2024;
- implementing "maximum 48 hours weekly working time" rule for doctors, without opt-out, since 2028;
- implementing minimum salary at a level of 1570 € gross for doctor's specialists working only in one public hospital (for those who signed declaration of loyalty not to work for the other hospital) since July 2018;
- implementing minimum salary at a level of 930 € in non-priority specialty and 1093 € in priority specialty gross for doctors in training (residents) during two first years of training, since July 2018;
- implementing minimum salary at a level of 1046 € in non-priority specialty and 1232 € in priority specialty gross for doctors in training (residents) after two first years of training, since July 2018;
- financial addition of 139 € in non-priority specialty and 163 € gross monthly in priority specialty for those doctors in training (residents) who declares that they will work in Poland minimum 2 years after completing specialty (within 5 years after it);
- establishing medical secretaries;
- granting the doctor employed in the public health care of the right to protection due to the public officer.

Passed act not fully agrees with notations of the agreement. Some demands were weakened, omitted or twisted by members of parliament. The parliament dominated by the ruling party rejected all amendments proposed by doctors and even by parliament's health commission. It can be a reason of a new wave of protests and strikes in the health care in Poland.

Ryszard Kijak, OZZL, Poland