

75. MANAGEMENT OF CONFLICT IN PRACTICE OF PRIMARE HEALTH CARE

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Introduction. Conflict is present in all domains of people's lives, and family medicine is no exception. Because each year the number of conflicts increases, which produces a huge blow to the image of the health system, including financial, emotional and time loss, the necessity of implementing a methodology for their prevention and resolution has emerged.

Materials and methods. This research was conducted through a retrospective study based on a Thomas-Kilmann standardized questionnaire (TKI-R), randomly applied to a sample of 200 individuals, out of which 70 were doctors and 130 were patients, aged between 20 and 76 years ($x = 48$ years) in On Clinic and CMF No.7. We opted for self-employment, avoiding the group in order to minimize the contamination of the response by mutual influence.

Results. It was found that all respondents adopted 3 main patterns of behavior in a conflict – avoidance (34%), deflation (24.5%) and compromise (21%); 15% of them chose to go on the road of confrontation and cooperation; Family doctors more often avoided conflict (52.2%), and patients almost went for confrontation and avoidance (23.8% and 26.1%);

Conclusions. We have identified that people prefer to circumvent conflicts (59.5%) rather than solve them, which means that society is not informed about ways to resolve conflicts.

Key words: conflict, family medicine

76. COLLABORATIVE MANAGEMENT OF THE FAMILY DOCTOR'S TEAM WITH PUBLIC SERVICES.

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Introduction. In 2016, a family doctor received about 3935 visits a year. (Visits 3001611 to / 762.75 med). Approximately (68%) of the normative acts within the Ministry of Health, NHIC, regulate the work of the family doctor team.

Aim of the study. Evaluation of the collaboration of the family doctor's team with the public services in the conditions of mandatory health insurance.

Materials and methods. The paper is a synthesis based on the retrospective study of the legislative acts that define the activity of the family doctor during the period 1998-2017. Methods of study: historical method, analytical method, comparative method, modeling method.

Results. The family doctor's team collaborates with the Ministry of Health, NHIC, LPA, Police, NGO. The work of the Family Physician Team is governed by 20 laws, 30 government decisions, 150 orders of the Ministry of Health, 5 laws-20 orders with (CNAM) the National Health Insurance Company, the National Center for Health Management (CNMS).

From the comparative analysis of the legal framework on groups it was found that the normative acts related to the Organization of the work of the family doctor team are 60%, Prevention 15%, Pathologies 25%.

Conclusions. 1. The family physician team is the key figure in the health system. Most of the normative acts (68%) within the Ministry of Health, CNAM refer to the work of the family doctor's team. 2. Collaboration of the Family Physician team is characterized by collaboration within the healthcare system but also with public services (Social Assistance, NGO, Police, APL).