

II Regional Conference The Future of Primary Health Care in the Balkans: Response to the Challenges

Organized by:
Ministry of Health, Republic of Serbia
City of Belgrade
Balkan's Primary Health Care Policy Project

Belgrade City Hall
October 13/14, 2008

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Regional Conference Program

The Future of Primary Health Care in the Balkans: Response to the Challenges

Hosted by:
Ministry of Health of the Republic of Serbia
City of Belgrade
Balkan's Primary Health Care Policy Project

October 13th and 14th, 2008

Location: City Hall, Belgrade, Republic of Serbia

Primary Health Care (PHC) has been identified by all countries in the Region as the backbone of their health care systems. The models of organization and delivery vary across countries but the principles are common and the policies guiding their development are similar.

As Governments strive to reform and improve their PHC systems they are faced with an uncertain future, of political, demographic and social changes and technological changes (especially information technology). Disease patterns are also changing as countries must be prepared to address communicable diseases that are impervious to national borders, and non-communicable diseases that demand greater attention to the environment and the lifestyle of populations. Inequities in access to health care services continue to be a problem as populations become more mobile.

Reforming PHC systems without taking a view of the future will be short-sighted. Across countries we see a greater involvement of the private sector in the financing and delivery of health services. Different forms of partnerships are being pursued with industry and Non-Governmental Organizations in order to meet the challenges of growing health care demands.

The Conference will ask the questions:

- *What are the likely futures facing PHC systems in the Region in the next 10 to 15 years?*
- *What are the key factors and how can they be managed towards achieving successful results?*
- *What is the contribution of the Balkans Primary Health Care Policy Project (BPHCPP) towards meeting future challenges?*

Expected Results

The 2nd Regional Conference is expected to:

1. Provide an opportunity for the participants to take a strategic view of the potential issues facing PHC within their health care systems and to begin critically assessing the challenges.
2. Provide an opportunity for the sharing of different or alternative strategies and the learn lessons from each others experiences.
3. To strengthen the relationship between actors facing common challenges.

Principles of the Conference

The Conference will be organized to allow for dialogue between the stakeholders in Primary Health Care. This means that voice must be given to vulnerable populations.

Participants

The participants will include:

- The Ministers of Health and their Teams from the different jurisdictions in the Balkans Primary Health Care Policy Project;
- Policy makers from related ministries;
- Representatives of the different stakeholder groups;
- Partners in the Project;
- Development Partners;
- Government representatives from other Countries in the Balkans
- Invited others

Organization of the Conference

A Conference Planning and Programme Committee will be responsible for the Organization and Management.

Co-Chairs:

Ivana Mišić, Assistant Minister, Ministry of Health of the Republic of Serbia

Predrag Zivotic, BPHCPP Project Coordinator

BiH Representatives:

Amela Lolić, Assistant Minister, Ministry of Health and Social Welfare of the Republic of Srpska, Bosnia and Herzegovina

Goran Čerkez, Assistant Minister of Health of the Federaton of Bosnia and Herzegovina

Members:

Irena Stanojević, BPHCPP Local Communication Consultant

Aleksandar Bojović, PHC Policy Officer, Ministry of Health of the Republic of Serbia

Brankica Novosel, BPHCPP Project Assistant

Miodrag Stefanović, BPHCPP Demonstration Sites Coordinator

Ivan Tašić, BPHCPP Project Assistant

Agency Miros with expertise in Conference Organization

Regional Conference Program

The Future of Primary Health Care in the Balkans: Response to the Challenges

Day 1

8:00 – 9:00	Registration	
9:00 – 10:00	Welcome, opening remarks	Tomica Milosavljević, Minister of Health of the Republic of Serbia Dragan Đilas, Mayor of Belgrade Ministers of Health (Region) Chaired by Orvill Adams
10:00 - 10:40	Key Note Presentation	Laurie McMahon, Office for Public Management, City University, London
10:40 – 10:55	Address by the European Forum of Primary Care	Danica Rotar Pavlič, Slovenia, EFPC Managing Board, WONCA Europe
10:55 – 11:15	PHC Reforms in Serbia	Tomica Milosavljević, Minister of Health of the Republic of Serbia
11:15 - 11:40	Refreshments	
11:40 – 12:10	“Faces of Primary Care”	Performance
12:10 – 13:10	Directions in PHC	Chaired by Ivana Mišić, Assistant Minister, Ministry of Health, Serbia
	• Demographic and social challenges for PHC	Snežana Simić, Medical Faculty Belgrade,
	• Financing Challenges – new models	Tijana Todorović Dorčić, Health Insurance Fund, Republic of Srpska, BiH
	• Towards European Union Integration -- managing tensions of change	Piotr Kulpa, Ministry of Health of Poland
	• Creating responsive organizations (e.g. Gender Agencies)	Goran Čerkez, Assistant Minister, Ministry of Health, Federation of Bosnia and Herzegovina, BiH
13:10 – 13:30	Discussion, Questions and Answers	
13:30 – 14.30	Lunch	
14:30 – 15:45	Round Table – Changing Roles of Stakeholders (associations,	Moderator: Miša Stojiljković, journalist

	chambers, public, private sector, industry, local government, government, politicians)	
15:45 – 16:15	Questions and Comments	
16.15 – 16:30	Wrap up commentary	Draženka Radoš Malićbegović, Assistant Minister, Ministry of Civil Affairs, Bosnia and Herzegovina
19:00	Official Conference Dinner: Deputy Club, Belgrade, Tolstojeva 2	Host: Ministry of Health of Serbia

Day 2

8:30 – 9:00	Coffee and Networking	
9:00 – 10:00	Balkans Primary Health Care Project contributions to date:	Chaired by Amela Lolić, Assistant Minister, Ministry of Health and Social Welfare, Republic of Srpska, BiH
	<ul style="list-style-type: none"> • Strengthening PHC Providers • Planning the health workforce • Improving Accountability Systems (Chambers) 	<p>Srećko Ristić, DZ Niš, Demonstration sites Serbia,</p> <p>Aida Ramić Čatak, Institute of Public Health of Bosnia i Hercegovine, BiH</p> <p>Nedeljko Milaković, Assistant Minister, Ministry of Health and Social Welfare, Republic of Srpska, BiH</p>
10:00 – 10:30	Question and Answers	
10:30 – 11:15	Examples of Good practices in PHC:	Chaired by Vildana Doder, Assistant Minister, Ministry of Health, Federation of Bosnia and Herzegovina, BiH
	<ul style="list-style-type: none"> • Working with vulnerable groups • Building community partnerships • Integrating levels of care 	<p>Dubravka Šaranović Racić, Advisor, Ministry of Health of Serbia</p> <p>Danica Rotar Pavlič, Medical Faculty Ljubljana, Slovenia, EFPC/WONCA Europe</p> <p>Amela Lolić, Assisntant Minister, Ministry of Health and Social Welfare, Republic of Srpska, BiH</p>
11:15 – 11:45	Questions and Answers	

11:45 – 12:15	Refreshments	
12:15 – 13:00	Poster Presentations	Chaired by Zoran Dimitrijević, Director, DZ Užice (Demonstration Site), Serbia
	Three 10 minute Presentations	
	Utilization of Clinical Practice Guideline on Diabetes in Republic of Srpska	Alen Šeranić, Ministry of Health and Social Welfare of Republic of Srpska, Bosnia and Herzegovina
	Youth Friendly Health Services	Dragan Ilić, MoH Expert Group for Youth Health in Serbia, Balkan's Youth and Health Project
	Domestic Violence in PHC	Olivera Mladenović, Dom zdravlja Lazarevac
13:00 – 13:30	Lessons Learned	Tomislav Stantić, State Secretary, Ministry of Health of the Republic of Serbia
13:30 – 14:00	Closing Remarks	Tomica Milosavljević, Minister of Health of the Republic of Serbia
14:00 – 15:00	Lunch, departure	

Balkans Primary Health Care Policy Project

OVERVIEW OF THE PROJECT

Prepared by:

Canadian Society for International Health
&
Queen's University

Overview of the Balkan's Primary Health Care Policy Project

The Canadian Society for International Health (CSIH), a leading non-governmental organization (NGO) in international health, and Queen's University (QU), a leader in international health education, signed a contract with the Canadian International Development Agency (CIDA) to work collaboratively on the design and implementation of the Balkans Primary Health Care Policy Project (BPHCPP). This CIDA directive project aims to contribute to the achievement of responsive and accountable primary health care (PHC) systems in Bosnia and Herzegovina (BiH) and Serbia that improves their citizens' health outcomes, creating an enabling environment for social, economic and political development. It is envisaged that the Project will be implemented from September 2006 to December 2009 in BiH and Serbia.

The socio-political and economic context in BiH and Serbia is very complex and undergoing a high degree of fundamental changes. Both countries have the goal of integration in the European Union (EU) and have started on the long process of preparation towards formal negotiations. In keeping with this direction the countries are reforming and building new institutions that are consistent with EU standards. This includes the reform of their respective health care systems. PHC is the cornerstone of reform in these countries; however, each country has chosen different models.

In Serbia PHC is based on the chosen doctor and his/her team. In BiH, PHC is based on the concept of family medicine. The systems are faced with a number of constraints, including the lack of guiding policies, low salaries, few opportunities for professional development and little respect for primary health care and its providers.

The BPHCPP had a focus **in Serbia** on PHC stewardship and delivery. Expected results of the Project in Serbia are:

- Improved capacity of government to lead cost-effective PHC policy development and to introduce appropriate regulation and tools for governance;
- Improved capacity of decision-makers for evidence-based practice and quality management in PHC;
- Increased capacity of providers to participate in formulation, monitoring and implementation of more effective, equitable PHC services;
- Opportunities and mechanisms for public participation in PHC policy development for improved services.

To achieve these results the CSIH/QU team has worked with the MOH and other stakeholders to implement the following, inter-related set of activities:

- 1) Policy Development
- 2) Quality of PHC Services
- 3) Role of Providers
- 4) Voice of Consumers.

In Bosnia and Herzegovina, the BPHCPP has had a focus on human resource planning and regulation. The expected results are:

- Improved capacity for development of HR planning;
- Improved understanding of education reforms required in the health sector to meet EU standards;
- Increased institutional capacity to educate professionals in HHR planning and management for PHC;

- Improved capacity for Regulation, Accountability and Quality.

To achieve these results the CSIH/QU team has worked with the MOH and other stakeholders to implement the following inter-related set of activities:

- 1) Health Human Resources (HHR) Planning, Management and Governance
- 2) Education of Health Professionals
- 3) Education for HHR
- 4) Regulation, Accountability and Quality.

Throughout the BPHCPP five cross cutting themes are addressed with respect to each of the activities. The themes are: vulnerable groups, public sector competence, private sector, EU accession and gender equality. Each of these themes poses challenges for PHC development in the two countries. The CSIH/QU team will ensure that they are adequately addressed throughout the project.

The BPHCPP also includes regional activities which will focus on partnership and coordination, knowledge translation and communication for improved PHC.

Sustainability of the processes and results from the PHCPP is an important objective of this work. This will be achieved through the building of individual and institutional capacity, the use of results and the alignment of the work of the Project with that of other initiatives within the respective jurisdictions. The critical element in sustainability will be ownership of the work of the BPHCPP by the key stakeholders in the countries.

The BPHCPP is accountable to CIDA and its local partners. This accountability has been realized through the establishment of Project Steering Committees in BiH and Serbia. The Project Steering Committees have been established under the leadership of CIDA.

To carry out the work of the PHCPP working groups have been formed. They were be guided by clear terms of reference agreed to by the respective Ministries of Health.

The project has five offices: Ottawa, Kingston, Sarajevo, Banja Luka and Belgrade. The Project Director and one Project Manager are based in the field while another Project Manager is in Ottawa. The Canadian Technical Assistance Team reflects the balance that is necessary to provide a comprehensive view of PHC Policy to the project, with focused areas of expertise relevant to the multidimensional nature of primary care.

Local technical and administrative personnel have been involved throughout the implementation and monitoring of the project in such a way as to encourage local ownership and ensure sustainability of results.

Frequently Asked Questions about Balkan's PHC Policy Project

1. What is the Balkans Primary Health Care Policy Project (BPHCP)?

Canadian Government through the Canadian International Development Agency (CIDA) funds the BPHCP project in the Republic of Serbia and in Bosnia and Herzegovina. This Project aims to contribute to the achievement of responsive and accountable primary health care systems in the Republic of Serbia and Bosnia and Herzegovina that improves their citizens health outcomes, creating an enabling environment for social, economic and political development.

The Project is part of a broader health programme in the region which includes: The Balkans Youth and Health Project, the Strengthening Balkans Civil Society's Voice for Public Health through Public Health Associations and CIDA Local Initiatives Programme.

In the Republic of Serbia the focus of the Project is on strengthening Primary Health Care (PHC) stewardship and service delivery. In Bosnia the Project focuses on Human Resources Management and Regulation. Throughout the Project five cross cutting themes are addressed: vulnerable groups, public sector competence, private sector, EU accession and gender equality.

2. Who is implementing the Project?

The BPHCP is executed by the a Canadian Consortium of the Canadian Society for International Health and Queen's University supported by a team of experts with experience and knowledge in primary health care and human resources for health.

The project is implemented from September 2006 to September 2009.

3. Who are the national partners in the Project?

The respective Governments are the principal partners in the Project. In Serbia the key partner is the Ministry of Health. In Bosnia and Herzegovina the key partners are the Ministries responsible for health in the two entities, the Ministry of Health and Social Welfare in the Republic of Sprska and the Ministry of Health in the Federation of Bosnia and Herzegovina. The Project will also work closely with the District of Brcko and the Ministry of Civil Affairs. The Project is implemented jointly with the respective Governments.

4. How does the Project work with its partners?

The Project creates an environment which provides space for all stakeholders to actively participate in its design and implementation and, therefore, take ownership of its results. Flexibility to respond to changing context and stakeholder needs is built into the Project.

5. Does the Project work with other partners in the two countries?

The Project is designed to engage with the key stakeholders in the respective jurisdictions. This includes: consumers, providers, policy makers, managers of health institutions,

regulators and educators. It will work with governments at all levels. Special attention will be paid to the issues of vulnerable populations.

6. Who are the beneficiaries of the Project?

Beneficiaries of the Project are governments at all levels, health workers, and consumers of health care. As the quality of health care workers improves and their services become more accessible those in need of services will benefit.

7. What does the Project hope to achieve in the Republic of Serbia?

The Government of Serbia has articulated its commitment to strengthening the PHC system and has passed several key health laws in support of this policy direction. They are The Law on Health Care, The Health Insurance Law and the Law on Health Professionals' Chambers. Building on these laws the Project supports local partners to develop the PHC policy which will ensure access to high quality PHC services for all citizens. The Project works with the government to improve its policy development and implementation process through greater inclusion of stakeholders and use of evidence.

8. What are the main activities in the Republic of Serbia?

The project has four sets of inter-related activities:

- Policy development
- Quality of health services
- Role of providers
- Voice of consumers

Working Groups for the four areas guide the format and content of activities to:

- assess current situation and identify with stakeholders feasible actions for change
- build the capacity of managers and providers
- strengthen management systems
- develop tools and instruments for better communication between stakeholder groups
- apply selected clinical practice guidelines
- strengthen continuing professional development for improved quality of services
- develop strategy with consumer and vulnerable groups to improve participation in policy development

Demonstration sites will incorporate different interventions to gather evidence and information to strengthen processes and content for policy making while strengthening the capacity of sites to respond to the changing regulatory and organizational environment.

9. What does the Project hope to achieve in Bosnia and Herzegovina?

Two entities recently adopted a Primary Health Care Strategy which has to be supported by appropriate health human resources strategies. The Project improves supply and use of health workers to strengthen health service delivery. It builds capacity for the development of HHR planning and management, and supports alignment of education reforms with European standards. Quality of health workers will be improved by strengthening of regulation and accountability mechanisms, chambers and associations. the main activities in Bosnia and Herzegovina.

There are four sets of complementary and inter-related activities:

- Health Human Resources (HHR) planning, management and governance
- Education of health professionals
- Education for HHR
- Regulation, accountability and quality

10. What are HHR and why are they important?

HHR are all individuals, professionally trained and non professionals who are engaged in the delivery of health services to individuals and populations. The spectrum includes doctors, nurses, technicians, volunteers, and administrators. Research has shown that there is a direct link between health status of the population and number and type of health care workers. The costs of HHR are the largest health care cost.

11. What are the examples of the main activities and their results?

- Undertaking situation analyses as a basis for planning both in Serbia and Bosnia and Herzegovina
- Continuing education in planning and management of HHR for 120 operational managers and policy makers
- Collaboration with Public Health Institutes on collection of HHR information from PHC and health institutions to establish a solid basis for informed planning of HHR incl. Baseline assessment of current situation

Collaborative work with Institutes of Public Health and PHC Centers (Demonstration Sites) in Serbia in performing the Organizational Functional Assessment to be used as a baseline for the Project

- Supporting five people to the Master's level in HHR development in order to build capacity and leadership skills for HHR planning
- Development of HHR strategic plan to guide the development of HHR in the next 5-10 years where the consensus building on HHR planning approaches will precede
- Capacity building and leadership development for associations and chambers of health professionals
- Action learning through demonstration projects provides evidence to improve productivity and motivation of health workers, and efficiencies in service delivery.

Working Groups in the Republic of Srpska and in the Federation of Bosnia and Herzegovina take the lead in identifying and designing activities that contribute to the strengthening of the approaches to HHR planning and management.

12. What is the value of the Project?

The investment in the Project by CIDA is \$7 million Canadian Dollars for activities in Serbia and Bosnia and Herzegovina. It is estimated that \$3.5 Canadian Dollars will be spent for activities in Bosnia and Herzegovina including District Brcko, Federation of Bosnia and Herzegovina, and Republic of Srpska.

13. What are the regional activities?

Regional activities aim to build partnerships and coordinate across countries in the region.

They allow for knowledge translation and experiences exchange through better communication among different stakeholders. Activities include:

- Regional conferences, workshops and visits
- Communication vehicles for knowledge dissemination

The team of the Balkans Primary Health Care Policy Project combines Canadian and local expertise in primary health care policy and health human resources management which is supported by a dedicated administrative staff with extensive experience in implementation of the international development programs. Our offices are in Banja Luka, Belgrade, Kingston, Ottawa and Sarajevo.

Depending on activities the core Project team is expanded to include local experts hired on a short term basis.

BIOGRAPHIES

Prof. Tomica Milosavljević, MD

Born in 1955 in Kruševac, married, father of three children (wife Mirjana, physician).

Finished elementary and secondary school in Paraćin (Vuk Karadžić diplomas), and Medical School of University of Belgrade in 1979. In 1983 he got his Masters degree, and PHD in 1988, at Belgrade University Medical School.

Employed as regular professor of Medical School, Belgrade University, internist specialist, subspecialist in gastroenterohepatology at Clinical Centre of Serbia in Belgrade.

From October 2000 to 2001 he was a member of Temporary management of Medical School, then a member of Deans' Council (till June of 2002). Since February 2001, he is Assistant Director of Clinical Centre of Serbia and a Director of Clinic for Gastroenterology and hepatology of Clinical Centre of Serbia.

He is the author of 300 scientific works, published in domestic and foreign medical literature, lecturer by call on several domestic and foreign meetings.

Professional improvement in Munich, London, Amsterdam.

From 1996-2000, he was the President of Association for Gastroenterology endoscopy of Yugoslavia. Since 2003 till 2006 he was the President of Society of colon proctologists of Yugoslavia. In 1993 he was elected for a member of International Gastro-Surgical Club. Since 2007, he is a member of American Gastroenterology Association.

In 2005, he was elected for future President of Gastroenterology Association of Serbia, for period of 2009-2013.

From 2002 to 2006, led state delegation (or was deputy chief of delegation) at Annual Assemblies of World Health Organization in Genève (May) and Regional Committee for Europe (September), as well as to European Conference on Mental Health 2005 in Helsinki (moderator of round table on experiences of countries in the Pact for Stability of SE Europe), to European Conference on Violence against Children in Palencia, Spain, 2006, European Conference on Obesity in Istanbul, 2006.

In September 2005, he was chosen for the member of Standing Committee of World Health Organization for Europe – governing body of WHO-EURO, which has 9 members, for a mandate from 2005-2008.

From June 2002 to July 2003, from March 2004 to November 2006, and then from May 2007 to June 2008, he is the Minister of Health in Government of the Republic of Serbia.

Member of political party G 17 plus since founding, Vice-President of the party.

Orvill Adams

Orvill Adams is the Director of Orvill Adams & Associates. The Consultancy specializes in working with policy makers and senior managers to formulate policies and to implement innovative and sustainable solutions to the complex health systems and health workforce challenges they face. The Consultancy works in developed, developing, countries in transition in the public and private sector. He is currently the Project Director of the Balkans Primary Health Care Policy Project working in the Bosnia and Herzegovina and in the Republic of Serbia.

Orvill Adams has more than 25 years of experience in senior positions in the public and private health sector. In the private sector he was the Director of Medical Economics with the Canadian Medical Association for 10 years. He then managed his own firm as a Principal in the Consulting Firm Curry Adams & Associates which focussed on health, education and social services issues. In the public sector he worked for 10 years at the World Health Organization, more than five as Director, initially of the Department of Health Services Provision and after, of the Department of Human Resources for Health. He has managed and developed health systems and health workforce tools and policies, and has worked in and with countries to implement them. He has interacted with Development Partners, both bilateral and multilateral, at global levels and within countries.

He is an adjunct lecturer at the University of Helsinki Department of General Practice in Primary Health Care, Quality and Management of Human Resources.

Orvill Adams is widely published in the area of health workforce development, management, policy and planning. He holds post graduate degrees in Economics and International Affairs.

Professor Laurie McMahon

is Director of *Loop2* - an independent catalyst consultancy that helps leaders and their organizations develop creative responses to growth and change. He has extensive experience in management and organisational development and change across a broad range of public and private sector organizations both in the UK and overseas.

He was the co-founder of The Office for Public Management a major management consultancy house in the UK and before forming *Loop2* led their organizational development practice. In his previous lives he was a Fellow of the King's Fund, a senior consultant in overseas healthcare and in academic settings ran highly successful post graduate management programmes for health care managers and professionals.

His main interests are in strategy development and implementation, organisational design and delivery, engineering large-scale organisational change and the use of behavioural modelling to understand complex futures. More recently he has focussed on helping professionals, providers, politicians and the public respond to the progressive introduction of business thinking into health systems.

Laurie is a Professor in Health Policy at City University, London and also policy advisor to Nuffield Health, health care adviser to Willmott Dixons - a major UK construction firm, was a special adviser to the WHO 'Investment for Health' programme, is the adviser on health systems to the law firm DLA Piper, a Fellow of the Institute of Quality Management, an honorary member of the UK Health Finance Management Association and a Senior Associate of the King's Fund health think tank in London.

Danica Rotar Pavlič

Dr Rotar Pavlic is at present Professor of Family Medicine at the Faculty of Medicine in Ljubljana, Slovenia. She has been author of articles in many professional journals and co-author of textbooks in the field of family medicine. Her PhD thesis' title was "Elderly people participation in healthcare".

Her professional interests are in the fields of managing the patients with chronic (cardiovascular) diseases in terms of general medicine, doctor-patient communication problems, impact of family and social environment on patient compliance, specific conditions in third life-period. She has contributed to writing manuals published by the Slovene Family Medicine Society within the scope of the Slovene Medical Association, where she was the author of several chapters.

Throughout her professional career, she acted as President of the Slovene National Board for Family Medicine and member of the Primary Care Committee at the Ministry of Health of Slovenia. She is a member of the Executive Board of the Section of General Medicine of Slovene Medical Association and member of the Education Committee at the Medical Chamber of Slovenia.

As a researcher, Dr. Rotar Pavlič is interested in the tasks to be tackled by a GP, workloads of a GP, prevention in general medicine, home visits, management of chronic diseases, mental disturbances and quality improvement, patient compliance and doctor-patient communications. She is a national representative for Slovenia with the European General/Family Practice Research Network (EGPRN) and member of the Executive Board of the International Federation of Primary Care Research Networks (*IFPCRN*) since 2004. She is also a president of the Slovenian Heart Foundation and since 2005, member of the Executive Board of the European Heart Network. She has been a leader of international projects IMPROVE (Improvement of older patient involvement in medical care) and PREDICT (<http://www.rfc.ucl.ac.uk/departments/EUPredict/>).

She speaks Slovene, English, French and Latin.

Dr Ivana Mišić

Dr Ivana Mišić, Assistant Minister, Ministry of Health of Republic of Serbia was born in 1962. She graduated medicine and completed specialization in public health on the Faculty of Medicine in Belgrade. Further education in the area of health management, public health and health system reform was obtained during many months of training organized through recognized international universities and institutions in these areas: Hospital Management and Health Care Administration - Technion University, Israel; Health system in Transformation, Utrecht University, Netherland; Health System Reform and Sustainable Financing, World Bank Institute, USA and Hungary, etc.

Starting from 1997., dr Mišić works in Sector for organization of health services and health inspection of the Ministry of Health. In year 2002. dr Misić is appointed as Chief of Department for organization of health care services and parallel to this, she was engaged in monitoring and implementation of several international developmental projects and health system reforms: Primary health care system strengthening (International Committee of Red Cross, 2002.), Power Reduction Strategy (World Bank, 2003.), HIV/AIDS prevention (Global Fund, 2004.). From year 2004, as representative of the Republic of Serbia dr Mišić participates the work of the Council of Europe Committee for Health. Dr Mišić speaks English. Married, mother of two children.

Prof. Dr Snežana Simić

Dr. Simić is a Professor of Social Medicine at the Medical School, University of Belgrade. She also teaches and acts as head of several courses at the Center – School of Public Health at the same School. Prior to that, professor Simic was a vice – dean of the Medical School in Belgrade for Post Graduate Studies

Professor Simić has held numerous senior position in the Ministry of Health of the Republic of Serbia; she was the Assistant Minister of Health, responsible for Sector for health policy and planning; after that she was also Special Advisor to the Minister responsible for the areas of Health Care Quality Improvement, National Tobacco Control Program and Health Human Resources and Workforce Development. She was born in 1950 in Skopje, graduated at School of Medicine, University of Belgrade in 1975 where she also finished social medicine master degree studies in 1982 and doctorate studies in 1989.

Professor Simić is a Chair Person (President) of the Association of Public Health of Serbia, which she was one of founders of. She was a consultant for UNICEF programmes and activities in Republic of Serbia, Republic Srpska and in Georgia (in 1999). She speaks Serbian (native) English and Russian.

Piotr Kulpa

p.kulpa@mz.gov.pl

Graduate from the Nicolas Copernicus University, St. Petersburg University, National School of Public Affairs, Piotr Kulpa has been the keynote speaker at many international conferences regarding healthcare issues. He has published several articles on a broad range of topics, including European integration of health care, health insurance policy, social dialogue and labour affairs. He is the originator of the concept of the voluntary health insurance system in Poland. He has over 15 years experience of public service and administration. Some of the posts he has held up to date are:

- 2006- present - Ministry of Health, Director, Director General's Office
- 2005-2006 - Ministry of Health, Director of Health Insurance Department
- 2004-2005 - Ministry of Economy, deputy minister
- 2003-2004 - Ministry of Labour and Social Policy, Director of the Social Dialogue Department
- 2001-2003 - Secretary General to the Round Table of Social Dialogue for European Integration
- 1998-2001 - PGK International Ltd., chief manager of the "Parliaments of the World" project
- 1995-2000 - Senate of the Republic of Poland, secretary to parliamentary delegations

Dr Goran Čerkez

Dr Goran Čerkez was born in 1962 in Sarajevo where he graduated on the Faculty of Medicine and further specialized in public health with health care organization and health economics.

In the period from 1996-2001 dr Čerkez was Director of the World Bank Project in BiH. From 2001 Dr Čerkez is holding a position of Assistant Minister, Federal Ministry of Health.

Presently, dr Čerkez is member of the Executive Board in the Mental Health Project for the SE Europe, member of the task force for the health project within the Stability Pact and member of the HealthNet for the South-Eastern Europe.

Dr Čerkez was engaged as consultant in the WB project, projects of the Stability Pact and Council of Europe.

Amela Lolić

Primarius dr. Amela Lolić is Assistant Minister for Health and Social Welfare in Dept for Health Care Sector.

At age of 46 she has 23 years of work experience, gained in areas of primary health care, public health, social medicine, organization and health economics, health statistics and analysis, project design and coordination, formative and summative evaluation and education based on modern learning principles (undergraduate and postgraduate).

As a consultant, dr Lolić was engaged on many international projects (WB, EU, UNICEF, UNDP, ILO, WHO, IOM, OHCHR, DFID, UNESCO, UNFPA, Andalusia School of Public Health, Project Hope/University Hospital Geneva, Partnership for Health).

She has participated in creation and implementation of numerous strategies and action plans, then laws and regulations.

She is a member of several professional associations, committees and councils (Chairperson of the Iodine Deficiency Disorder in RS, member of the International Council for Iodine Deficiency Disorders - ICCIDD, members of the RS Council for Children, etc.).

Formal and informal education, participation on international conferences, seminars and meetings were reason for short and longer stays in different cities and countries (countries of former Yugoslavia, Libya, Iraq, France, Spain, Italy, Ukraine, Switzerland, Turkey, Great Britain, Romania, Japan, Belgium, Holland, Cyprus, USA, China, Canada, Georgia etc).

Dr Lolić published seven books and manuals (three books are result of research, two textbooks for students and doctors, one for teachers and one for parents and carers)

Married, mother of 26 years old daughter who graduated International Relationships and Diplomacy on University of Indianapolis.

Prim Dr Srećko Ristić

Deputy Director
Dom Zdravlja Niš

2004-2008 Deputy Director Dom Zdravlja Niš
1990- 2004 Head of dentistry department, head of the organisational dentistry department
1995 – obtained primarius degree
1989 – Specialized in oral surgery
1979 – Graduated from University of Niš School of Medicine Department of Dentistry

Member of the Assembly of Dentists Chamber of Serbia since its founding
Member of section on oral surgery within the Serbian Medical Association

Author of 40 published scientific papers on national and international conferences on subjects of oral and facial surgery and organization and management in health
Second author on 12 published papers on national and international conferences.

Mr. sc. dr Aida Ramić Čatak

Date and place of birth: August 22, 1964, Sarajevo.

Education: Graduated from the Sarajevo Medical Faculty in 1991. She specialized in social medicine with organization and economy of health care in Sarajevo in 1998.

In 2007, she successfully defended her magister's thesis entitled "The impact of socio-economic environmental factors on the development of tobacco smoking in children and young people" at the Medical Faculty in Sarajevo and became a Magister of Medical Sciences. In 2008, she successfully defended a project proposal for her doctor's thesis entitled "The impact of the media, as mass technologies, on knowledge, opinions and behaviour of smokers" at the Sarajevo Medical Faculty and she is currently preparing her doctor's thesis.

Working position: She has worked at the Institute for Public Health of the Federation of Bosnia and Herzegovina since 1997.

Current position: Managed the health promotion and education service at the Institute for Public Health of the Federation of Bosnia and Herzegovina since 2003.

Teaching posts: Held health promotion classes at the Faculty of Health Studies in Sarajevo.

Professional associations: Member of the Board of Executives of the Social Medicine/Public Health Association in the Federation of Bosnia and Herzegovina.

Participated in implementing projects in the public health sector in Bosnia and Herzegovina: Strengthening primary health care with a family medicine team in Bosnia and Herzegovina by Instituto Superiore di Sanita from Rome, **The development of family medicine program in Bosnia and Herzegovina by Queen's University Canada, EU Phare a project for the development of human resources in Bosnia and Herzegovina by Ireland-based NICARE**, EU Phare a program of financing and developing informatics systems in the health system of Bosnia and Herzegovina, Project of technical assistance and environmental protection in Bosnia and Herzegovina by the Andalusian School of Public Health EASP. WHO project of tobacco control in Bosnia and Herzegovina as part of the Stability Pact Initiative The Federal Ministry of Health and Queen's University, additional/continued PAT education of family medicine teams in public health CIDA Balkans Primary Health Care Policy Project, human resource development

Engagement in tobacco control activities: Managed a working group that drafted a Tobacco Control Strategy in the Federation of Bosnia and Herzegovina in 2003, Coordinator of the Federal Health Ministry and WHO for tobacco control in the Federation of Bosnia and Herzegovina since 2003. Coordinator of relevant tobacco control surveys in the Federation of Bosnia and Herzegovina (Global Youth Tobacco Survey in 2003, Global Health Professional Survey GHPS in 2005 and 2006. Global Youth Tobacco Survey GYTS in 2008) Manager of the Tobacco Control Project for Bosnia and Herzegovina, as part of the WHO and Stability Pact initiative for social cohesion 2006-2008 Member and active participant of NGOs that deal with tobacco control (Partnership for public health, Narko-Ne)

Dr Dubravka Šaranović Racić

Dr Šaranović Racić is at present Senior Advisor in the Ministry of Health of Serbia. She is responsible for preventative health care programmes and activities of the Ministry of Health related to vulnerable groups.

She has graduated at the Medical Faculty of the University of Belgrade in 1981 and became the Specialist in General Practice at the Medical Faculty in Belgrade in 1989. Her additional training was in the areas of health services management at the Faculty of Organizational Sciences in Belgrade.

She has held previously different leading positions in Primary Health Care Center of Obrenovac, one of Municipalities of the City of Belgrade; from 1983 through 1997, she has worked as General Practitioner in the Emergency Department of PHC Center in Obrenovac; between 1997 and 2003 she was the Head of Home Care Department of PHC Center in Obrenovac and from 2004 through to 2007 dr Šaranović Racić has been the Director of PHC Center in Obrenovac.

As a Director of PHC Center in Obrenovac, dr Šaranović Racić has initiated and implemented numerous projects and activities aiming at improvement of health care services, leading and managing the changes at the organization level.

Consultant for primary health care - Council of Europe

Dr Dragan Ilić

1.1.1.1 Born – 1954

Education: Master studies: Center for multidisciplinary studies - University of Belgrade
Master of Science Degree obtained in June 2000, Subject of Master Degree Thesis:
Prevention of HIV/AIDS.

Thesis title: «Health Related Behaviour of Students and Risk of HIV Infection»

Scientific title: Assistant researcher - Centre for multidisciplinary studies of Belgrade
University-from October 2000

Epidemiology specialization: Medical faculty of Belgrade University- Chair for
Epidemiology, Diploma: July 1990, GPA: excellent

Primarius title: Ministry of Health – Republic of Serbia
April 1998

Basic education: Medical faculty-University of Belgrade

Dr Olivera Mladenović

Born on 03.01.1964 in Lazarevac. Father Tomislav, mother Radmila. Graduated from Elementary school in Baroševac, graduated from high school in Lazarevac.

Enrolled medical school in 1982 and graduated in 1989. In the same year she started working in Dom Zdravlja Lazarevac. Married, husband Srđan, mother of two Stefan 19 and Ivan 13 years of age.

Since 2003 she works as a psychiatrist in a mental health department of DZ Lazarevac. Since 2005 she has been a head of the same department. Engaged in various projects related to primary and secondary prevention Participated on numerous conferences

Balkans Primary Health Care Policy Project

“The future of primary care in the Balkans: response to the challenges”

Second Regional Conference

Policy Round Table

Time: 14:20 – 16:15

Proposition

Traditional roles of stakeholders must change if primary health care is to continue to develop and be more responsive to the changing needs and expectations of consumers and providers.

Moderator: Miša Stojiljković, Journalist

Participants: The participants are intended to represent the perspectives of key stakeholder groups in PHC.

<i>Perspective</i>	<i>Representation</i>	<i>Presenter</i>
Regulatory/ standard setting agencies	Federation of Bosnia and Herzegovina	Aida Pilav, Assistant Minister of Health, Federation of Bosnia and Herzegovina
Private Sector	Republic of Srpska	Gordana Šukalo, Association of Private Sector Doctors of Republic of Srpska
Consumer	Republic of Serbia	Lepojka Čarević Mitanovski, NGO "Out of circle", Belgrade
Consumer	Republic of Serbia	Erna Oklapi Balkans Youth and Health project
PHC Provider Institutional	Republic of Serbia	Edit Szakmany Major, Director DZ Backa Topola
PHC Provider Associations	Federation of Bosnia and Herzegovina	Mirsad Muftić, Association of Physical Rehabilitation Specialists of Bosnia and Herzegovina
Local Government	Republic of Serbia	representative Municipality Stari Grad
Policy Makers – Ministry of Health	Republic of Serbia	Dragana Grbic advisor at the department for Health Financing and Health Insurance
Policy Makers - Institute for Health Insurance of Serbia	Republic of Serbia	Representative of the Health Insurance Fund (to be confirmed)
Business	Republic of Serbia	
Chamber of Health Professionals	Republic of Serbia	Dragan Šašić, Director, Chamber of Nurses and Technicians of Serbia (to be confirmed)

Audience reaction and comments will be sought at opportune moments.

Format

The Moderator will make a brief introduction and introduce the Proposition.

Each participant will be asked to introduce themselves and to make a three minute positional statement. The participants will be asked to prepare their statements in advance so that they stay within the time period.

The moderator will then follow-up on the statements by asking for reaction to the statements that have been made.

The questions posed by the moderator will include:

- What must happen to realize change?
- How realistic is it to expect groups who have power now to share it or listen to other view points?
- What signals can the policy makers give to consumers and providers to indicate that they are serious about wanting their input?

It is proposed that the participants meet with the Moderator 30 minutes before the Round Table begins to agree on the order of speakers and ground rules.

It is proposed that the session be video taped for future use by the Project and the respective stakeholders.

The participants should be prepared to respond to questions and to keep their comments brief. The Moderator will enforce time so that a broad range of views can be heard.