



The 31st CMAAO General Assembly & 52 Council Meeting

- Symposium -

“Health care in danger, Experience from Taiwan”

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Outline

1. Violence against medical professionals

– Prevention, management and legislation amendment

2. Medical litigation

– Current situation and future direction

3. Healthcare labor

– Burnout and lack of residents in high risk specialties



Violence against medical professionals

Prevention, management and legislation amendment

A legislator slapped a nurse, which accelerated the amendment of medical laws,



enhanced the legislation, and strengthen relevant supplementary measures to prevent violence

Criminal liability of hindering the medical care practices

Not apply to “No trial without complaint”



Releasing announcements against Violence to health professionals

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- ▶ 【全聯會聲明】醫療絕非服務業! 醫療暴力應受列管追蹤懲處結果
- ▶ 【全聯會聲明】醫療暴力頻傳 應建置周全機制保障醫病安全
- ▶ 【全聯會聲明】增加公費醫學生名額計畫，不宜貿然進行
- ▶ 【全聯會聲明】譴責醫療暴力！呼籲政府機關不應坐視醫療人員一再被打
- ▶ 【全聯會聲明】麥當勞廣告 對民眾就醫行為作出不良示範！本會認同影片下架，但呼籲台灣麥當勞負責人應正式道歉
- ▶ 全聯會再次呼籲健保署暫停執行重複用藥核扣方案，先完成修法程序，並以正式公文對外說明雲端藥歷適法性，簡化及改善重複用藥行政流程
- ▶ 本會召開第10屆第16次醫療政策委員會
- ▶ 本會召開第10屆第15次醫療政策委員會
- ▶ 【全聯會聲明】醫療暴力-徒法不足以自行！衛福部及法務部的擔當何在？
- ▶ 【全聯會聲明】為杜絕醫療暴力 應展現政府魄力
- ▶ 本會召開第10屆第12次醫療政策委員會

Posters to raise the public awareness

反暴力

共同維護醫療安全，動粗前請三思



暴力行為害人害己
在醫院診所任何暴力行為
均會影響病人就醫
並危害院內所有人的生命安全

院內暴力行為將會觸犯下列法條：

- ◎毆打他人：刑法第277條傷害罪，處三年以下有期徒刑或拘役；
刑法第278條重傷罪，處五年以上十二年以下有期徒刑。
- ◎恐嚇威脅：刑法第305條恐嚇罪，處二年以下有期徒刑或拘役。
- ◎辱罵他人：刑法第309條公然侮辱罪，處拘役。
- ◎毀損物品：刑法第354條毀損罪，處二年以下有期徒刑或拘役。

滋擾醫療機構秩序或妨礙醫療業務之執行：醫療法第106條，處新臺幣三萬元以上五萬元以下罰鍰。其觸犯刑法者，應移送司法機關辦理。



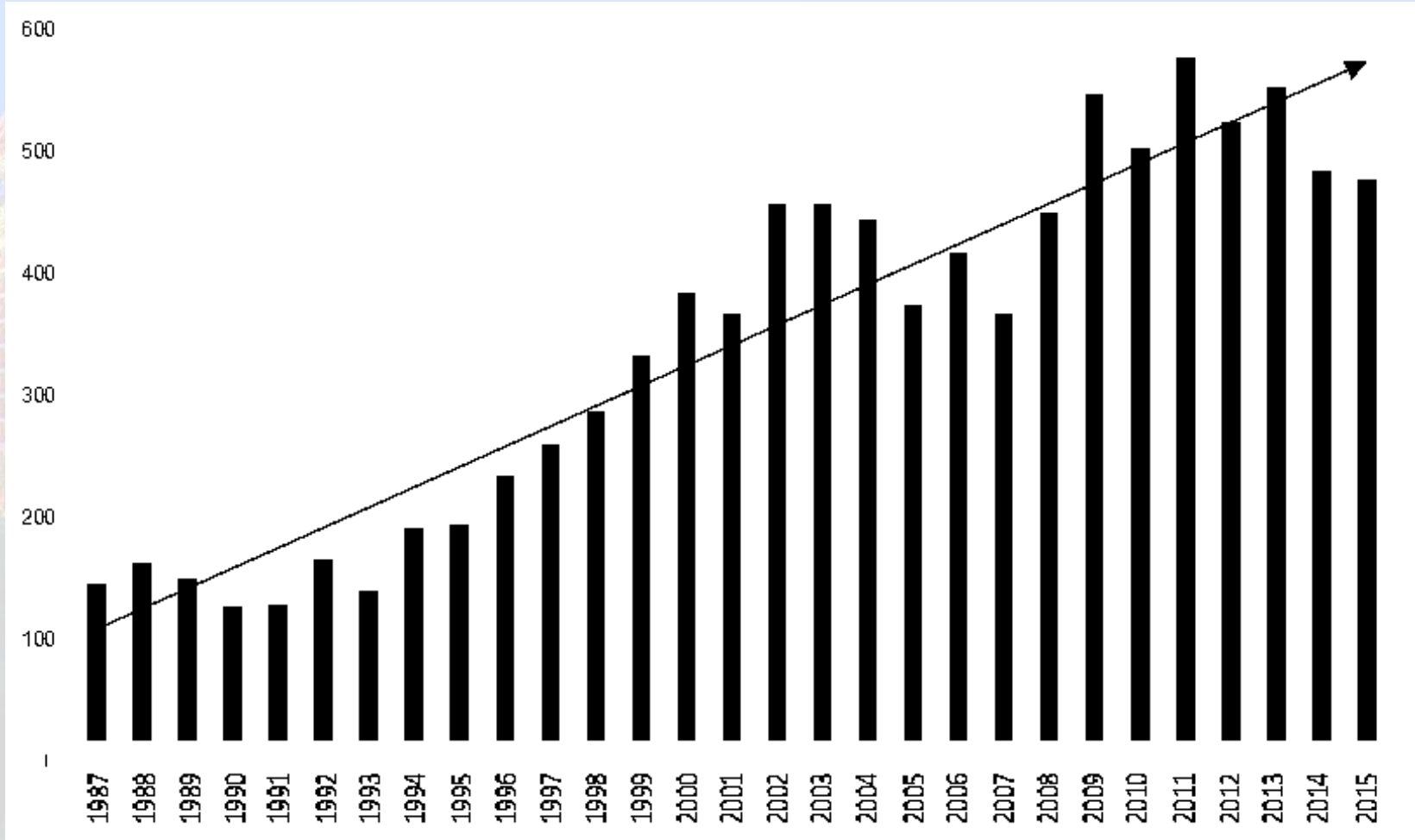
若您就醫時有任何疑問，請洽
衛生署「健保諮詢及醫療申訴」
專線 **0800-030-598**



Medical litigation

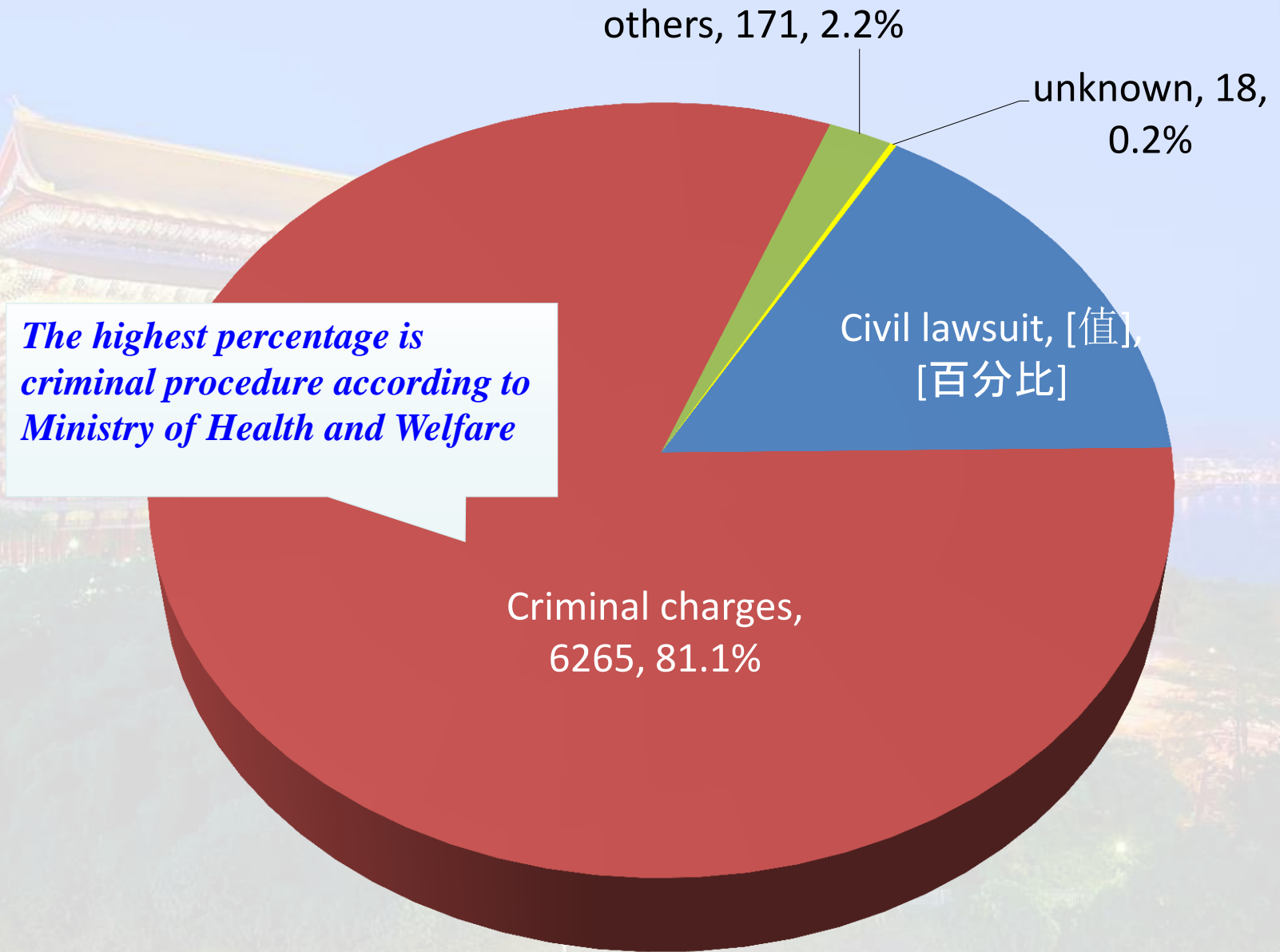
Current situation and future direction

The numbers of the forensic cases in Taiwan have been increasing over the past years



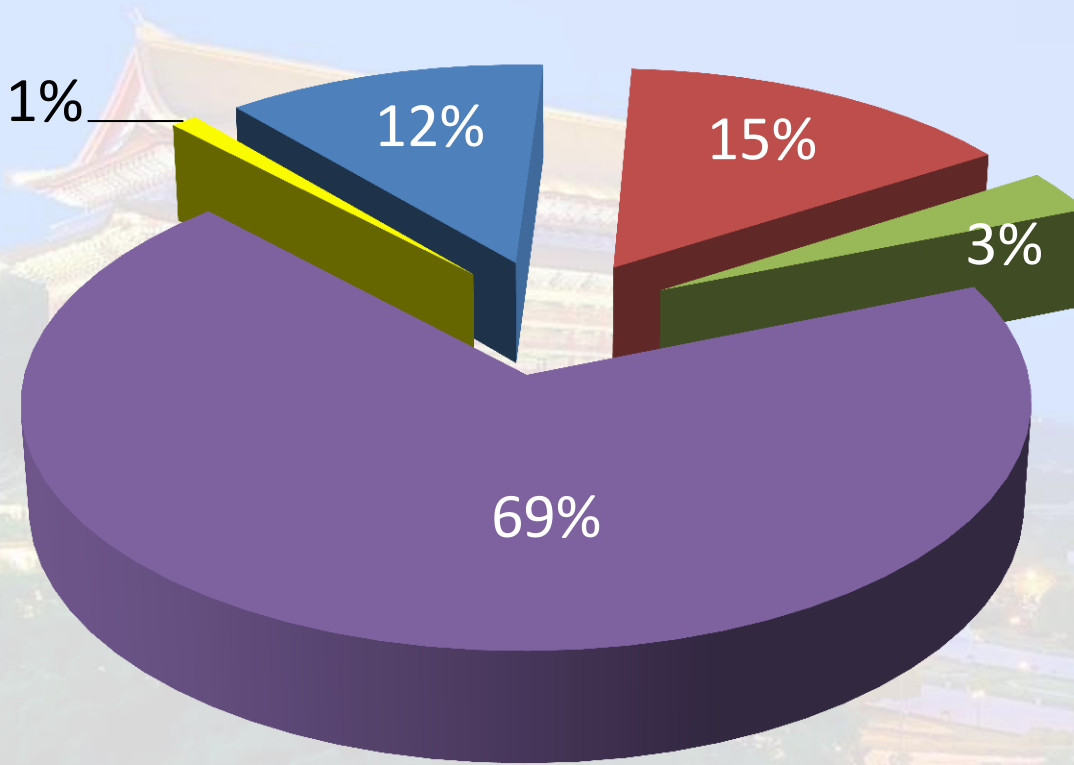
Ref. The statistics of Tainan Court (1987-2015)

The chart shows types of medical litigation:



The highest percentage is criminal procedure according to Ministry of Health and Welfare

The attributes of medical malpractice in Taiwan:



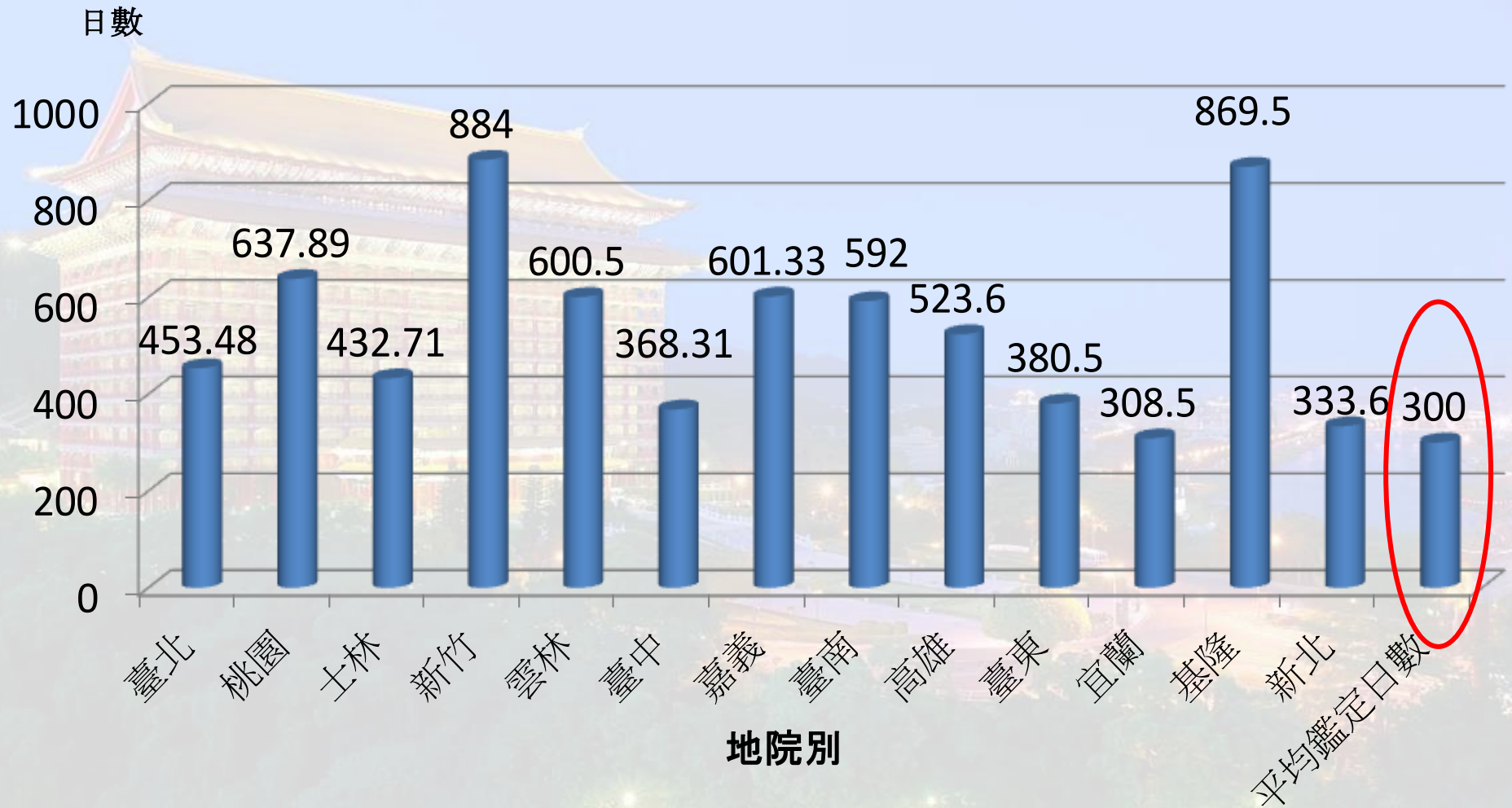
- medical negligence
- cause-effect unknown
- no medical malpractice
- no medical negligence
- no need for further investigation

- low prosecution rate
- low conviction rate
- low sentencing rate
- high investigation rate

The results of criminal forensic are usually no errors (*purple*)

Ref: Ministry of Health & Welfare, Taiwan

The end of first trial was averaged nearly one year



The TMA advocates that criminal liability of medical malpractice should be explicit and reasonable

The medical environments are confronted with the following adversities:

- ◆ *Medical malpractice “high investigation rate” and “law conviction rate”.*
- ◆ *High risk specialties face the loss of doctors*

TMA exerts great endeavor to the Amendment of the Article 82-1 under the Medical Care Act with the anticipation that the criminal liability of medical malpractice should be explicit and reasonable.

Resolutions to medical malpractice

- A medical personnel shall commit to crime only if his medical practice causing the death or injury of any patient is due to his willful conduct or gross negligence. (*amendment on Article 82-1 of Medical Care Act*)
- The legislation of “Medical Malpractice and Medical Incident Compensation Act” should be postponed due to profound differences in doctors opinion.
- To establish “Medical mediation and patient care team” for medical dispute.



Healthcare labor

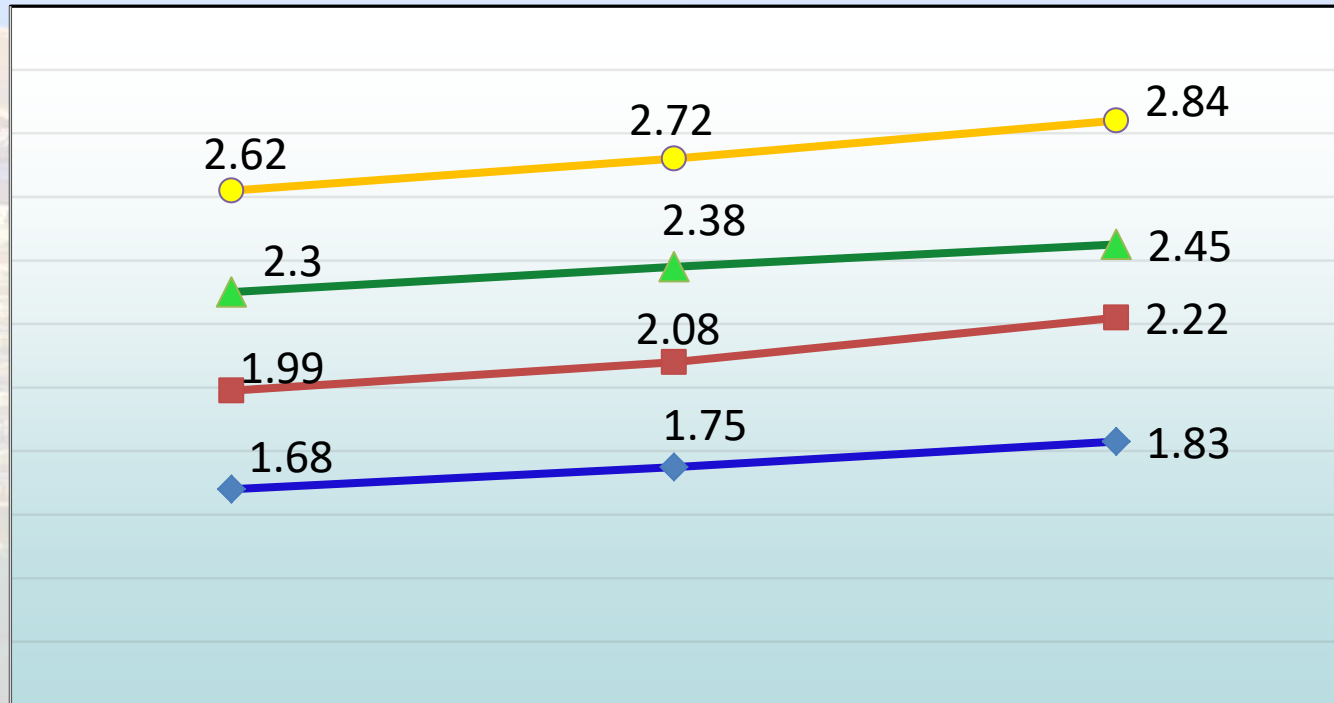
Burnout and lack of residents in high risk specialties

Physician density per 1000 population

Taiwan / Korea / Japan / New Zealand

DOCTORS

3.2
3
2.8
2.6
2.4
2.2
2
1.8
1.6
1.4
1.2
1



- ◆ Taiwan
- Korea
- ▲ Japan
- New Zealand

	2010	2012	2014	YEAR
Taiwan	1.68	1.75	1.83	
Korea	1.99	2.08	2.22	
Japan	2.3	2.38	2.45	
New Zealand	2.62	2.72	2.84	

The shortage of doctors

- *The rate of expanding ward beds in hospitals in Taiwan is higher than the increase number of medical students*
- *High-risk specialties face the rapid loss of doctors*
- *Long working hours of resident doctors*



Stress related work hazard

- *Karoshi (death and suicide)*
- *Cardiovascular events*
- *Chronic disease such as DM, HTN*
- *Emotional distress, lack of work satisfaction*
- *Low work performance and patient safety issue*

Solutions to the overwork of doctors

- *The Labor Act applies to doctors before September, 2019*
- *Supplementary measures*
 - *Strengthen PHC*
 - *Implement gate keeping*
 - *Co-payment*
 - *Reimbursement? NP? PA? medical student?*



The TMA's stand on healthcare labor issues

Advocate (resident) doctors to be included in Labor Act stage by stage

Put efforts to *doctor-patient relationship*, doctor & patient rights and security, and medical quality

Summary

- *“Health care in danger” is an important issue to not only health professionals but also the patients.*
- *Violence against medical staffs, medical litigation, and burnout of doctors are the highest ranked issues to devastate the health care system.*
- *Taiwan Medical Association has been focused on facts and implemented strategies to solve the problems.*

中秋節快樂



Happy moon festival!

Thank you.



香茗餅月凡時有
最是人月團圓時
秋