



Vasco da Gama Movement

Annual National Report for Romania

For the attention of the Vasco da Gama Movement Europe Council, June 2016

Basic Information

1. Name of NEC: **Mihai Mara**
2. Do you have a Regional Exchange Coordinator (REC)? **No**
3. Do you receive financial support from your country's GP organization? **Yes, some expenses are covered.**
4. Do you have a National organisation for Family Medicine trainees? Do you have a National organisation for new Family Doctors, i.e. for the first five years after completion of training? If so, what is it called? **We don't have an organisation, we have a group within the National Society of Family Medicine, called tineriMF (=youngGPs), consisting of both trainees and new Family Doctors.**
5. How many members does your organisations for Family Medicine trainees and for new Family Medicine have? **Our young GPs group consists of 400 members.**

6. To the best of your knowledge, approximately how many GP trainees and new GPs in your country are actively involved in VdGM? **Only one actively involved in VdGM, and around 8 others in the national young GPs group.**

National Challenges and Successes

7. Please tell us about some of the activities of new and future Family Doctors in your country. **They participate to local / regional / national conferences and meetings, they interact online in a special yahoo group and on our youngGPs facebook group. Unfortunately it is not so easy to get them involved in projects, sometimes not even in online questionnaires.**

8. Please list the 3 top issues for Family Medicine trainees in your country. **Inadequate training, not having the opportunity to practice several usual procedures, low pay, low self esteem.**

9. Please list the 3 top issues for new Family Doctors (i.e. within the first 5 years after specialisation) in your country. **High bureaucracy, Low pay, Expensive practices in big cities.**

10. In general, in your country, do enough new doctors choose Family Medicine as career or not? If not, can you suggest reasons why. **Family Medicine is not viewed as proper speciality but rather as a plan B option. Plus all of the reasons at previous two questions.**

VdGM

11. Please list the top 3 ways in which you believe VdGM could improve. **VdGM should work on visibility. I feel as if a lot of young european family doctors still don't know what VdGM is.**

12. Please rank these three options in order of importance in relation to your experience of VdGM.

[Social Media Interaction] **Very Important.**

[Attending VdGM Meetings (e.g. Forum, Preconference)] **Moderately important**

[Social Media Interaction PLUS Attending Meetings] **Moderately important**

13. Please give suggestions how we can make Council meetings productive and enjoyable.

Have the agenda sent at least one day before the meeting via email.

14. Can you suggest one specific measure / intervention you think would be most likely to get GP trainees and new GPs in your country involved in both your national organisation and / or VdGM.

Making the work environment (gp office) less stressful, reducing the bureaucracy and having an IT system that works would make young GPs be more open minded about other projects, such as the national organization and VdGM. Till then the majority of young GPs are caught up in a job they did not think to be so stressful / exhausting.