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Вища лікарська палата як представник професійного самоврядування в Польщі

АНОТАЦІЯ. Питання лікарського професійного самоврядування є важливим як з точки зору функціонування системи охорони здоров'я, так і з практики. Лікарські палати є зацікавленими сторонами в цій системі. Ці палати представляють медичне професійне самоврядування в Польщі. Існує 23 організації з районним статусом і військово-медична палата. Вища медична палата є найвищим органом професійного самоврядування в Польщі. Метою статті є представлення Вищої лікарської палати як представника професійного самоврядування в Польщі. В рамках прийнятих дослідницьких припущень було зроблено посилання на Закон «Про лікарські палати». Цей нормативно-правовий акт окреслює основні завдання, які виконує найвищий орган, що представляє аналізоване самоврядування. У рамках дослідження було проаналізовано окремі законодавчі положення, які визначають завдання та принципи діяльності лікарського самоврядування, а також права та обов'язки його членів.
КЛЮЧОВІ СЛОВА: *лікар; професійне медичне самоврядування; районні лікарські палати; вища лікарська палата.*

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The supreme medical chamber as a representative of professional self-government in Poland

ABSTRACT. The issue of medical professional self-government is essential from the point of view of the functioning of the health care system, as well as of a practical nature. The chambers of physicians qualify as stakeholders in this system. These chambers represent the medical professional self-government in Poland. There are 23 entities with district status and the Military Medical Chamber in Warsaw. The Supreme Medical Chamber is the highest organ of the medical professional self-government in Poland. The article aims to present the Supreme Medical Chamber as a representative of the professional self-government in Poland. Within the framework of the adopted research assumptions, reference was made to the Act on Medical Chambers. The discussed legal act outlines the fundamental tasks undertaken by the highest body representing the analyzed self-government in Poland. As part of the analysis, selected statutory provisions were analyzed, which organise the tasks and principles of operation of the doctors' self-government and the rights and duties of its members.
KEYWORDS: *doctor; professional self-government; district medical chamber; Supreme Medical Chamber.*

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Formulation of the problem. In the literature on the subject, professional self-government is treated as an independent and autonomous institution established to implement administrative tasks by a selected group of persons with the appropriate qualifications [7]. In Poland, its activities were regulated in the systemic dimension. It means that the legislator recognised the discussed self-government as one of the fundamental institutions of a democratic state of law. In addition, opportunities were created for professional self-governments by assigning them a specific public role [1]. Article 17 of the Constitution of the Republic of Poland indicates that using a law, professional self-governments may be created, representing persons exercising professions of public trust and taking care of the proper performance of these professions within the limits of the public interest and for its protection. In the following provision of the cited article, it is assumed that other types of self-government may also be created by law [4]. These self-governments may not infringe on the freedom of exercise of a profession or restrict the freedom to engage in economic activity. In light of the comments made, it must be concluded that the fundamental basis for the creation of professional self-government representation is indicated in the Basic Law.

In the medical community, professional self-government is formed by the medical chambers. These entities operate at the district level. Each medical chamber is an example of an organisation representing the interests of a larger collective of individuals. A Polish doctor or dentist granted the right to practice a profession is a member of the professional self-government. Membership of the chamber is obligatory and linked to the payment of a membership fee [5]. The medical professional self-government is an example of an independent institution that functions independently. Separate legal acts regulate its activities. The organisational units of the doctors' self-government with legal personality are the district chambers of physicians and the Supreme Medical Chamber. The chambers consist of 23 entities, including the Military Medical Chamber in Warsaw. The SMC is the highest organ of the medical professional self-government in Poland. Its bodies are constituted due to elections held during district medical congresses.

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Analysis of the problem research. In the Polish legal order, a doctor and a dentist are examples of separate medical professions which form a single professional self-government. It is possible to point out differences in the subject matter of the professions in question. First of all, it is assumed that the scope of competence of doctors is general. In the case of dentists, on the other hand, the scope concerns only the provision of health services to patients related to diseases such as teeth, oral cavity, craniofacial part and adjacent areas [9, p. 49]. The following legal acts regulate the activities of the medical professional self-government: the Act on Medical Chambers, the Act on the Profession of Doctors and Dentist, the Act on Medical Activity and the Code of Medical Ethics [3, 10, 11, 12]. The literature on the subject also draws attention to the fact that the medical profession – due to the specificity of its practice, and in particular, the specific nature of the relationship between the patient and the doctor – remains a profession of public trust [13, p. 93]. The entity supervising the performance of the analysed profession is the professional self-government, including its representation in the form of medical chambers.

Article 5 of the Act on Chambers summarises the tasks and rules of operation of the doctors' self-government and the rights and duties of its members. Referring to the statutory provisions, the following tasks falling within the scope of the entities in question can be identified [11]:

- establishing and ensuring compliance with the principles of medical ethics,
- ensuring the sound and conscientious practice of the medical profession,
- granting the right to practice as well as recognising the qualifications of doctors who are citizens of European Union Member States and who wish to practise their profession in the territory of the Republic of Poland, and issuing the documents Right to practice as a doctor or Right to practice as a dentist,
- suspension and withdrawal of the right to practise and restrictions on practising the profession,
- conducting professional liability proceedings against doctors,
- conducting proceedings for unfitness to practise medicine or

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insufficient training to practise medicine, leading or participating in the organisation of in-service training for doctors,

- giving opinions and making proposals on matters of pre- and post-graduate training of doctors and other medical professions,
- chairing the committees conducting competitions for the position of chief executive officer and participating in competitions for other positions in health care, if separate regulations are provided,
- giving an opinion on doctors' candidacies for positions or functions, if separate regulations so provided,
- keeping registers of doctors, a register of medical practitioners under the terms of the regulations on medical activity, registers of training providers,
- giving an opinion on doctors' working conditions and salaries,
- integrating the medical community,
- acting to protect the medical profession, including defending the dignity of the medical profession and the individual and collective interests of members of the medical self-government,
- taking a position on the state of public health, state health policy and the organisation of health care,
- giving an opinion on or requesting draft legislation on health care and the medical profession,
- conducting research on health care and the medical profession,
- to provide interested doctors with information on the general rules of the profession, on the principles of medical ethics, and on health care legislation,
- running self-help institutions and other forms of material support for doctors and their families,
- interacting with public administrations, trade unions and other organisations at home and abroad on matters relating to health protection and the conditions of practice of the medical profession,
- cooperation with the self-governing bodies of the medical professions and other organisations representing the medical professions at home and abroad, as well as with the authorities of the Member States of the European Union,

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- cooperation with scientific societies, universities and institutes at home and abroad,
- management of the assets and economic activities of the medical chambers,
- carrying out other tasks as specified in separate regulations.

Based on the tasks presented above, it can be concluded that the medical chambers are examples of competent and opinion-forming entities. The legislator has entrusted the chambers with a number of tasks that are not only related to the exercise of a profession of public trust but also evidence of the exercise of care within the limits of public interest and for its protection.

The article aims to present the Supreme Medical Chamber as a representative of the professional self-government in Poland. Within the framework of the adopted research assumptions, it is essential to refer to the Act on Medical Chambers, which outlines a number of tasks performed by the highest body representing the analysed self-government in Poland.

Presentation of the main material. The remainder of this article refers to the provisions of the Act on Medical Chambers, which relate to the tasks determining the directions of SMC's activities. The seat of SMC and its bodies is Warsaw. The legislator granted SMC the competence to determine the area of activity of individual district medical chambers, their number and seats. It should be added that these determinations are made at the request of district medical assemblies, considering the fundamental national-territorial division. It is worth mentioning that the SMC maintains registers and prepares statements illustrating the current number of doctors and dentists by their membership in a medical chamber and professional titles. In addition, these data are also reported for public statistics, which illustrate medical human resources nationally [2]. Importantly, these summaries are a vital source of knowledge regarding the number of members of the individual chambers that comprise the national medical self-government [6]. At the beginning of 2024, there were 212195 current medical chamber members in the NIL register. Within this collective were 166 122 doctors, 45 465 dentists and 608 medics with dual practice rights [8].

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According to Article 35 of the law in question, the organs of SMC are [11]:

- National Medical Congress,
- Supreme Medical Council,
- Supreme Audit Commission,
- Supreme Medical Court,
- Supreme Ombudsman for Professional Responsibility.

The National Congress of Doctors is attended by delegates indicated by district medical assemblies and, in an advisory capacity, by members of outgoing SMC bodies who are not delegates. The SMC determines the number of delegates from individual district medical chambers based on the election regulations. The National Congress of Doctors is convened by the SMC every four years. According to the current legal order, the SMC may convene an Extraordinary National Congress of Doctors. Such a convention may be convened due to the following premises [11]:

- on its initiative,
- at the request of the Supreme Audit Commission,
- at the request of at least 1/3 of the district medical councils.

According to Article 38, the following issues are taken up at the National Conventions of Doctors [11]:

- establishing principles of medical ethics,
- adopting the programme of activities of the doctors' self-government,
- to consider and approve the report of the SMC bodies (Supreme Medical Council, Supreme Medical Court, Supreme Ombudsman for Professional Liability, National Election Commission),
- consideration of a proposal to discharge the Supreme Medical Council,
- adoption of rules of procedure (elections to and in the organs of the chambers of doctors and the procedure for dismissal of members of these organs, the Supreme Medical Council, the Supreme Audit Commission, the district election commission, the National Election Commission, the internal office of ombudsmen for professional responsibility, the internal office of medical courts),

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- to determine the number of members of the SMC and National Electoral Commission bodies,
- to elect from among the delegates to the convention the President and members of the Supreme Medical Council, the Supreme Ombudsman for Professional Liability, members of the Supreme Audit Commission, members of the National Election Commission,
- to elect members of the Supreme Medical Court from among the delegates or from among the doctors indicated by the outgoing Supreme Medical Court and to elect deputies to the Supreme Medical Court from among the delegates or from among the doctors indicated by the outgoing Supreme Ombudsman for Professional Liability,
- to establish the principle of distribution of the membership fee,
- to define the list of functions within SMC that may be remunerated.

Analyzing the above-mentioned statutory provisions, it can be assumed that critical decisions concerning the medical community are made at National Medical Congresses. During such meetings, issues related to the functioning of the professional self-government are discussed, as well as the reports of the SMC bodies are approved.

Conclusions. The professional self-government plays an essential role in a democratic state. It is worth noting that it is entrusted with several vital tasks determining the socio-economic order. Various actors are involved in ensuring it. It should be emphasised that the medical chambers are among them. Based on the considerations made, it can be concluded that the functioning of such chambers is subject to legal regulation and is based on separate legal acts. One of the critical entities of the medical self-government in Poland is the SMC. In summary, it should be recognised that this entity's activities are regulated by the Act on Medical Chambers. The legislator has entrusted the SMC with tasks related to supervising the exercise of the profession of doctor and dentist. However, several provisions of the analysed Act also organise fundamental issues concerning the activities of SMC and initiatives undertaken for the benefit of members of the medical self-government.

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