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ACTIONS TAKEN AS PART OF THE HEALTH POLICY OF THE REPUBLIC OF POLAND DURING THE COVID-19 PANDEMIC

Abstract

The coronavirus pandemic has become a stimulus to introduce changes in the functioning of societies and to take health policy measures aimed at effective fight against the pandemic. Counteracting the spread of the virus and mitigating its negative effects are a challenge even for countries with organized health services. Several restrictions were introduced in health policy during the COVID-19 pandemic, but the pandemic remains a challenge that requires further action. The aim of this study was to analyze the activities undertaken in Poland as part of health policy. To find an answer to the presented research question, a literature review was carried out, which provided information on the functioning of health policies, programs and intervention techniques that were introduced in the fight against the pandemic.

Keywords: health policy, Poland, COVID-19 pandemic, health service

Introduction

The Agency for Health Technology Assessment and Tariff System emphasizes that health policy during a pandemic should be conducted in such a way as to enable the efficient functioning of the economy, while maintaining the necessary security measures. It is worth paying attention to the fact that the COVID-19 pandemic is a global threat, while different countries are in different stages of fighting the pandemic and the implemented strategies show different effectiveness¹. The World Health Organization has published a list considering the level of preparedness of individual countries to respond to the threat of COVID-19. 5 levels of

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¹ *Przegląd strategii walki z COVID-19 w okresie jesienno-zimowym*, Agencja Oceny Technologii Medycznych i Taryfikacji Wydział Świadczeń Opieki Zdrowotnej, <https://www.aotm.gov.plf> (05.08.2020).

readiness were considered, and Poland was included in level 4. The categorization of countries is aimed at selecting countries with the least possibilities to fight the pandemic, and in addition, these countries will be provided with assistance from the WHO in the first place². The work was written to identify activities undertaken in Poland as part of health policy and its functioning during the pandemic.

Restrictions as a tool to fight the pandemic

A. Stawicka and R. Stawicki point out that during the COVID-19 pandemic it is particularly important to ensure the efficient operation of state authorities in the field of protection of the health and life of citizens, by creating and supervising the implementation of regulations aimed at combating the pandemic, but also mitigating its social and economic consequences³.

As part of the fight against the COVID-19 pandemic, the following rules and restrictions were introduced (as at 07/12/2021)⁴:

- Movement restrictions – obligation to maintain a minimum distance of 1.5 meters between pedestrians. The following are excluded from this obligation: parents with children requiring care (up to the age of 13), people living together or running a farm, people with a disability certificate, people with a certificate of need for special education, people who cannot independently move and their guardians; covering the mouth and nose in confined spaces is mandatory throughout the country. The nose and mouth may only be covered with a mask. It is not required in the open air, in the forest, park, greenery, botanical gardens, historic gardens, on roads and squares, in cemeteries, promenades, boulevards, parking places for vehicles, forest parking lots, in family allotments and on the beach, and during private travel by car, motorcycle, quadricycle, moped, at the workplace to eat.

- Quarantine – the restriction applies to people who: cross the border of the Republic of Poland, which is the external border of the EU, cross the border of the Republic of Poland from the Schengen area, have had contact with people infected with coronavirus, live with an infected (isolated) person, have been referred for COVID-19 testing by a primary or overnight doctor health care.

² *Ibidem*.

³ A. Stawicka, R. Stawicki, *Pandemia Covid-19. Sytuacja w wybranych krajach europejskich*, Warszawa 2020, s. 3.

⁴ *Koronawirus: informacje i zalecenia. Aktualne zasady o ograniczenia*, Serwis RP, <https://www.gov.pl>, (09.08.2021).

- Social life – museums and art galleries operate under a strict sanitary regime. There is a limit of people – 1 person on 10 m². The cinemas operate in a strict sanitary regime - max. 75 percent occupancy. It is necessary to cover the mouth and nose. Theaters, operas, and open-air philharmonics operate in a strict sanitary regime - max. 75% occupancy. It is necessary to maintain a distance of 1.5 m between viewers or listeners. The event may be attended by no more than 250 people. The rooms operate in a strict sanitary regime - max. 75% occupancy with 1.5 m distance between viewers or listeners. Ensuring that there is no more than 1 person in the room at the same time per 10 m² of its surface. It is necessary to cover the mouth and nose. Cultural houses and centers conducting activities by cultural centers and centers as well as community centers is allowed in the open air and indoors, provided that the participation does not exceed 75% participants. Ensure that participants follow the order to cover their mouth and nose.

- Care and education – all students returned to full-time teaching. Nurseries and kindergartens are open and provide care for children.

- International borders and traffic – people traveling from outside the European Union, from outside the Schengen area and from outside Turkey cannot be released from quarantine based on a test performed within 48 hours after returning to Poland. This possibility is allowed only after 7 days. The obligation to undergo quarantine is deemed to be fulfilled when the negative test result is entered by the medical diagnostic laboratory into the ICT system. People who, after arrival, stay in the territory of the Republic of Poland for no longer than 24 hours and have a flight ticket confirming departure from the territory of the Republic of Poland within 24 hours, are exempt from the obligation to undergo quarantine. The movement of passengers in rail transport, with the crossing of the Polish border, is suspended.

- Economy – DIY stores, furniture stores, and shopping malls are open in a strict sanitary regime. There is also a limit of people - max. 1 person on 10 m². Catering establishments operate in a strict sanitary regime - max. 75 percent occupancy of the premises. There is a distance between the tables (every second table can be occupied, the distance between the tables must be at least 1.5 m - unless there is a partition at least 1 m high between them, counting from the surface of the table). Catering establishments in restaurants operate in a strict sanitary regime - max. 75 percent occupancy of the premises. There is a distance between the tables (every second table can be occupied, the distance between the tables must be at least 1.5 m - unless there is a partition at least 1 m high between them, counting from the surface of the table). Hair-

dressing and beauty salons are open and can operate under strict sanitary regime. The hotels resumed operation. There is a guest limit – max. 75% hotel occupancy.

- Sports and recreation – gyms, fitness clubs, solariums operate in a sanitary regime. There is a limit of people - max. 1 person on 10 m². Swimming pools, aqua parks and closed sports facilities are also open, with a maximum of 75 percent occupancy of the facility. Not more than 50% of the public is made available. the number of seats provided for the audience, every second seat in the audience, alternately in rows, and in the absence of designated seats in the audience - with 1.5 m between the audience.

- Sanatoriums, health resorts, rehabilitation – spa activities were resumed. The condition for starting inpatient therapeutic rehabilitation in a rehabilitation center or curative-prophylactic stay will be a negative result of the diagnostic test for SARS-CoV-2 or vaccination against COVID-19. The material must be collected no earlier than 4 days before the start of the rehabilitation stay.

It is worth noting that the restrictions introduced earlier have had severe effects. In the second quarter of 2020, which fell most of the cuts, EU GDP fell by 13.9 percent year on year, and unemployment rose by 2.7 percent. These were the sharpest recorded declines since measurements began in 1995. The Polish economy lost over 8 percent of GDP in the second quarter of 2020. It was the largest decline in the Polish economy since the reforms carried out by Deputy Prime Minister Leszek Balcerowicz in 1990-1991⁵.

The functioning of the health service during a pandemic

It is worth noting that the National Health Fund constantly monitors the availability of healthcare services for patients and tries to respond to any symptoms of irregularities or limitations of this availability without undue delay⁶.

Problems in the system of functioning in the healthcare system during the COVID-19 pandemic⁷:

⁵ *Związek przedsiębiorców i pracodawców. Podsumowanie lockdownu w Polsce*, Związek Przedsiębiorców i Pracodawców, <https://zpp.net.pl> (09.01.2021).

⁶ *Koronawirus. NFZ informuje, jak walczy z epidemią*, Rzecznik Praw Obywatelskich, <https://bip.brpo.gov.pl> (09.08.2021).

⁷ *Główne problemy pacjentów w pandemii. Informacja RPO dla Rzecznika Praw Pacjenta*, Rzecznik Praw Obywatelskich, <https://bip.brpo.gov.pl> (24.02.2021).

• The dramatic situation in hospitals during the pandemic: lack of effective coordination of the ambulance service, lack of places in hospitals, lack of oxygen in hospitals and ambulances for patients with COVID-19, limitation of the necessary documentation, the status of soldiers in hospitals, insufficient training, and lack of medical personnel for the operation of ventilators, making admission to surgery dependent on the demonstration of a negative test result by an asymptomatic patient,

• Provision of healthcare for non-covid patients: limited access of seniors to health services, access of patients suffering from multiple sclerosis (MS) to health services during the pandemic, the situation of cancer patients, in particular those suffering from lung cancer, the situation of school dentists' offices and limitations in patients' access to dental services,

• Citizen access to SARS-CoV-2 tests: access to coronavirus tests has remained an issue since the start of the pandemic. Already on March 12, 2020, the Presidium of the Supreme Medical Council called on the Minister to radically increase access to tests for the detection of the presence of the SARS-CoV-2 coronavirus⁸. However, only with the entry into force of the regulation of October 8, 2020, on the standard of organizational health care for a patient suspected of being infected or infected with SARS-CoV-2 virus (Dz.U. poz. 1749), the principle was adopted that the doctor himself, considering current medical knowledge, assesses the validity of indications for commissioning such tests. However, the actual access to the tests remains a problem⁹,

• Access to flu vaccines: there have been signals from all over the country that there is a lack of flu vaccines during a pandemic. Citizens' uncertainty was compounded by the fact that they did not know when the flu vaccine would be available. Patients obtained information from pharmacies that the list of candidates for the vaccine was exhausted. This applied to pharmacies in the region or even 150 km away from their place of residence,

• Salary of medical personnel: over a dozen percent of medical personnel declare that they want to leave their job after the pandemic. The above decision is influenced by low and insufficient wages and the need to work in many jobs. Medical professionals note that medicine is under great pressure to work long because there is not enough staff. The low wage, which has been maintained for many years, forces the medics to work many hours to cover staff shortages. Healthcare professionals note

⁸ *Apel PNRL do Ministra Zdrowia, Naczelna Izba Lekarska*, <https://nil.org.pl> (09.08.2021).

⁹ S. Bounaoui, *Długie kolejki na testy na koronawirusa. NFZ: Powstają nowe punkty pobrań wymazów*, RMF.FM, <https://www.rmf24.pl> (15.10.2020).

that otherwise, if they started working eight hours each, the health system would collapse. It is worrying that in the Polish health care system there is a shortage of workers and female workers at all levels. It should be noted, for example, that we have 2.4 doctors per 100,000 inhabitants - this is the least in all of Europe. There is also a problem with medical diagnosticians and nurses. The average age of a nurse is 52, and in 2030 it will be 60. According to OECD data, per 100,000 there are 13 nurses in Germany, 9 in Europe on average, while in Poland there are 200 thousand nurses missing¹⁰,

- The right to respect for the private and family life of the patient: no possibility for parents (legal guardians) to stay with young patients in pediatric wards, suspension of family births due to the pandemic, dealing with the remains of people who died in connection with COVID-19, the possibility of saying goodbye to a person leaving.

The National Health Fund makes every effort to reduce the number of these problems to a minimum. To this point, the directors of the provincial branches of the National Health Fund constantly monitor the situation in their area, being in constant contact with Provincial Offices, Provincial Sanitary Inspectors, and hospital directors. Every day they collect information on the availability of beds and ventilators in hospitals dedicated to patients infected with the SARS-CoV-2 virus.

In the National Health Fund, order No. 28/2020 / GPF of the President of the National Health Fund of March 1, 2020, on the appointment of the Team for monitoring the correctness of proceedings in cases of suspected or infection with the SARS-CoV-2 coronavirus (as amended) goal team, which is, among others monitoring and reacting to the current situation in the health care system. The team works 24 hours a day, 7 days a week in the form of shifts¹¹.

Social programs for young people

In the environment of children and adolescents, the condition of distance learning limits the satisfaction of natural developmental needs. Research about children and adolescents during the pandemic was prepared by the Institute of Integrated Prevention. The research

¹⁰ A. Rozwadowska, *System eksploatacji zdrowia: zarabiają mało, bo muszą pracować więcej*, Wyborcza, <https://wyborcza.pl/7,155287,26458082,system-eksploatacji-zdrowia-pracownicy-medyczni-zarabiaja-malo.html>, 02.11.2020.

¹¹ *Koronawirus. NFZ informuje, jak walczy z epidemią*, Biuletyn Informacji Publicznej RPO, <https://bip.brpo.gov.pl/pl/content/koronawirus-nfz-informuje-rpo-jak-walczy-z-epidemia>, 05.11.2020.

was carried out by sending a survey via e-mail and social media. The research sample was 2,079 people aged 13-19, and the research was carried out in April 2020.

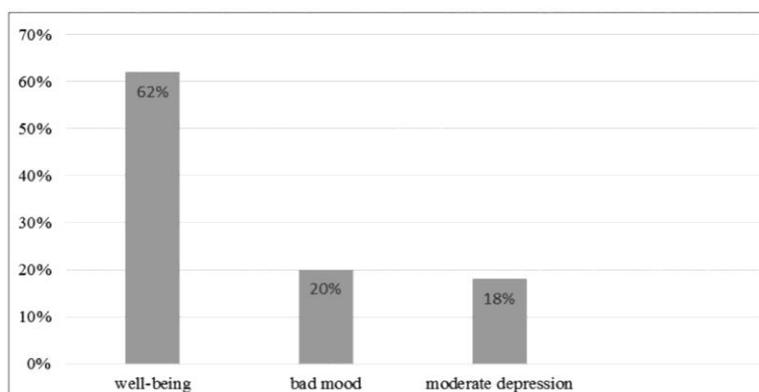


Fig. 1. Mental state of children and adolescents during the pandemic

Source: own study based on: In. W. Poleszak, *Ekspertyza dotycząca wskazań w zakresie prowadzenia działań i programów profilaktycznych adresowanych do dzieci młodzieży dotyczących zachowań ryzykownych w czasie pandemii COVID – 19, z uwzględnieniem nauczania dzieci w trybie on-line*, Państwowa Agencja Rozwiązywania Problemów Alkoholowych, <https://www.parpa.pl> (10.12.2020).

Research shows that most students, 62% to be exact, copes well with mood during a pandemic. However, one fifth of the surveyed adolescents report experiencing malaise and difficulties in coping with the situation. Another 18% indicate moderate depression (Figure 1). In the group of young people experiencing a mood of depression, girls slightly dominate. The research shows that only children and non-religious practitioners cope with remote learning and isolation. The pandemic is not tolerated very well by young people with a chronic disease, which may be due to both greater anxiety about health and difficulties in accessing health care.

The Ministry of Education and Science has prepared 4 post-pandemic student support programs. The programs are related to the health and physical condition of children and adolescents, psychological and pedagogical support, as well as help in mastering and consolidating the material. MEiN will allocate approximately PLN 244 million for their implementation. The aim of the programs is to comprehensively support young people in returning to school after a long period of distance learning¹².

¹² *Narodowy Program Wsparcia Uczniów po Pandemii – działania MEiN*, Ministerstwo Edukacji i Nauki, <https://www.gov.pl> (09.08.2021).

MEiN programs include¹³:

1. “PE from AWF - Active return of students to school” – restoring and increasing the level of physical fitness of students after a long time of distance learning – is a program prepared by the Ministry of Education and Science in cooperation with the Academies of Physical Education. Its main goal is to improve and monitor the physical condition of children and adolescents after returning to classroom activities. The project is being implemented in two stages:

- 1st stage of “Training for teachers” – it covers the preparation and delivery of training for physical education teachers and early childhood education teachers from all voivodships. Training topics cover both psychological and health aspects. During the training, teachers will learn, among others, methods of counteracting the effects of hypokinesia and social isolation. They will learn how to stimulate and keep students motivated to regular physical activity. The training is based on the latest scientific and implementation achievements developed by specialists from the Academy of Physical Education. The methodological part considers innovative solutions prepared by academic teachers.
- II stage “Sports Clubs” – the aim is to improve the physical condition of children and adolescents by participating in additional and free sports activities. The organization of these classes will be the starting point for conducting scientific research that will allow to determine the physical condition of children and adolescents after the period of isolation caused by the COVID-19 pandemic. During the course, fitness tests and quantitative research will be conducted. On their basis, a scientific report on the physical condition of children and adolescents will be prepared. Teachers who completed the training in the first stage and received a certificate will be able to apply for funds to conduct additional classes under the so-called “Sports Clubs”,

2. Psychological and pedagogical support for students and teachers – counteracting the effects of the pandemic, the Ministry of Education and Science, in cooperation with scientists from the Cardinal Stefan Wyszyński University and representatives of the Polish Academy of Sciences Foundation in Lublin, is implementing a pilot Psychological and Pedagogical Support Program. Activities under the program include:

- reaching 1,200 schools from all over Poland (16 provinces) – diagnosis of target groups,
- conducting trainings for teachers, parents, specialists, including specialists from psychological and pedagogical counseling centers,

¹³ *Ibidem.*

- developing a Model of Psychological and Pedagogical Support,
- organization of thematic conferences and publication of scientific monographs and post-conference publications,
- appointment and training of 64 Program Support Coordinators operating in 16 voivodships,
- organization of on-line psychological counseling for parents, students, and teachers, as well as specialists from psychological and pedagogical counseling centers,

3. Help in replenishing the knowledge – additional support activities – the supportive classes are designed to consolidate the knowledge and skills of selected compulsory general education classes. They are intended for students in grades IV-VIII of public and non-public primary schools and secondary schools, including special and artistic schools providing general education. Classes are held only at school, in a full-time form. The subjects in which the classes will be conducted are decided by the school head in consultation with the teachers,

4. Good to see – myopia prevention program – on July 2, 2021, the Minister of Education and Science, together with the Minister of Health, announced a program for the prevention of myopia in early childhood education students. Screening tests will be carried out by a team of experts from the Medical University of Lublin under the supervision of prof. dr. hab. Robert Rejdak. They will cover 900 children from grades 1-3 from Lublin schools, i.e., 300 students from Lublin, 300 from the municipal commune, 300 from the rural commune from the Lublin Province.

Summary

The situation caused by the pandemic became a stimulus to introduce changes in the functioning of the entire Polish society. As part of the fight against the coronavirus, several restrictions have been introduced to fight the pandemic. The functioning of the health service during the pandemic also needs to adapt to the current situation. Due to the increased number of sick people, there was a greater demand for medical equipment, as well as for the medical staff. This is an undoubted challenge for the health policy in Poland, which, despite taking many steps, is still not able to provide every patient with equal access to medical services. The main reason is that the Polish health service was not prepared for the pandemic and is still adjusting to the current situation in the country. In addition, health policy has also introduced social programs for young people that consider both the physical and mental side effects of distance learning. The introduction of social isolation was necessary,

but it was associated with side effects, including the deteriorated psychological situation of the society caused, inter alia, by the lack of contact with the environment.

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Działania podejmowane w ramach polityki zdrowotnej RP podczas pandemii Covid-19

Streszczenie

Pandemia koronawirusa stała się bodźcem do wprowadzenia zmian w funkcjonowaniu społeczeństw oraz podejmowania działań w ramach polityki zdrowotnej, mających na celu efektywną walkę z pandemią. Przeciwdziałanie rozprzestrzenianiu się wirusa oraz łagodzenie jego negatywnych skutków są wyzwaniem nawet dla krajów posiadających zorganizowaną służbę zdrowia. W ramach polityki zdrowotnej w czasie pandemii COVID-19 wprowadzono szereg ograniczeń, jednak pandemia nadal stanowi wyzwanie, które wymaga podejmowania dalszych działań. Celem niniejszej pracy była analiza działań podejmowanych w Polsce w ramach polityki zdrowotnej. W celu znalezienia odpowiedzi na przedstawione pytanie badawcze przeprowadzono przegląd literatury, który dostarczył informacji na temat funkcjonowania polityki zdrowotnej, programów i technik interwencyjnych, które zostały wprowadzone w ramach walki z pandemią.

Słowa kluczowe: polityka zdrowotna RP, pandemia COVID-19, służba zdrowia