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本期荐读

我国的基层卫生综合改革任重道远,建立多渠道财政补偿机制和激励性分配机制是持续深化基层卫生综合改革的突破口。2009年新医改后基层医疗卫生机构纳入公益性事业单位,实行公共财政保障制度。2010年《国务院办公厅关于建立健全基层医疗卫生机构补偿机制的意见》(国办发〔2010〕62号)发布,强调政府投入责任,实行“核定任务、核定收支、绩效考核补助”的财政管理办法。这一改革从整体上保障了基层医疗卫生机构的运行和发展,但在具体实行过程中仍存在着有待解决的问题。各地区积极落实政策要求,勇于探索与创新,在健全基层医疗卫生机构补偿机制方面积累了一定经验。

其中,“公益一类财政供给、公益二类绩效管理”的改革方案,在完善基层运行机制、激发基层医疗卫生机构活力、提高居民获得感和满意度方面取得了积极成效,可作为典型经验在全国范围内进行推广。本期“特稿”栏目就聚焦此项改革方案,重点报道了广东、海南、山东等地区推行该项改革方案的具体做法和改革成效,在此基础上,汇总分析了对其他地区开展该项措施的对策建议。另外,《分级诊疗实施中家庭医生团队建设现状及对策研究》一文,梳理总结了上海闵行、深圳罗湖、河南息县三地的典型经验,从家庭医生团队建设角度探讨了人员薪酬激励和服务积极性问题;《基于胜任力的家庭医生团队中全科医生薪酬激励机制研究》一文,运用组合权重法、委托代理理论构建了针对不同胜任力水平的主动型薪酬激励机制。

上述荐读文章,可以为各地区深入开展财政补偿机制和激励性分配机制改革提供思路与参考,敬请关注。

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