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ESTABLISHMENT OF RURAL MEDICAL POINTS AND THEIR ACTIVITIES

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ABOUT ARTICLE

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Abstract: The article analyzes the issues of building or adapting village medical centers, providing them with necessary medical equipment, and providing medical assistance to rural residents during the years of independence.

INTRODUCTION

On the eve of independence, only 37 percent of medical institutions in Uzbekistan were located in buildings built on the project, and the treatment facilities in the villages were almost simple, the period did not meet the requirements either. Two-thirds of these had sewage facilities and three-quarters had no hot water supply at all. The material and technical base of rural outpatient clinics and rural area hospitals was gradually strengthened and gradually provided with medical equipment.

During this period, the transformation of most of the rural settlements into large and medium-sized villages led to the convergence of the distance between the villages and the district centers. Naturally, in such conditions, specific opportunities are created in the territorial organization and development of medical services. As a result, a modern system of medical services began to be built and developed even in rural areas [2:16].

As part of the reforms in the health system in Uzbekistan, since 1993, rural vrachlnk points providing primary medical and sanitary assistance began to be built or rural outpatient clinics and hospitals were renovated and turned into a rural doctor's office. The main directions for the development of primary medical sanitary assistance in the village were established by the decision of the Cabinet of Ministers of the Republic of Uzbekistan dated May 21, 1996 No. 182 "on the program for the development of rural infrastructure of the Republic of Uzbekistan in the period up to 2000 ynl". In order to provide qualified medical care to the rural population, in accordance with the state program for health care reform of the Republic of Uzbekistan approved by the decree of the president of the Republic of Uzbekistan No. 2107

of the Republic of Uzbekistan, a network of units of primary medical sanitary assistance of a new type-rural doctor's offices – was established.

The transition to a two-stage primary care system, consisting of a five-stage system consisting of previously existing paramedic-obstetrics, rural outpatient clinics, rural precinct hospitals, a district hospital and a District Central Hospital, has begun.

The main directions for the development of primary medical sanitary care were outlined, and on this basis, the village, equipped with compact and modern equipment, was transferred to a two - stage system consisting of a medical center and district or urban medical associations. Its purpose was to bring medical care facilities closer to populated areas. To this end, 1,725 rural doctor's points, construction of hospitals with about 4,000 beds, reconstruction of 177 paramedic-obstetric points, conversion to a rural doctor's office and other activities were established [3:81].

The rural doctor's office is a medical institution, a treatment and preventive institution designed to provide outpatient medical care to residents of small urban-type settlements, small industrial enterprises or agricultural training areas. There were a certain number of functional diagnostics, treatment rooms, physiotherapy and children's and mother's departments, a pharmacy, a day hospital, a vaccination room, a laboratory and other auxiliary rooms. Outpatient services in rural areas can be provided through paramedic and obstetric points, the main structural unit of the rural health system. The formation of such a medical institution in the villages provided an opportunity to timely check the health of rural citizens, carry out preventive work and receive primary qualified medical care. The principle of the plot of activity is the active identification of patients, the provision of qualified medical care for them, the study of diseases. it makes it possible to carry out preventive and sanitary-whitening work. the medical care provided at a rural doctor's office varies in limitations and the number of staff and patients served. Usually the outpatient clinic is located around the village, in which the provision of medical care to the population is carried out in no more than 5 cases of the least specialist - with a therapist, surgeon, obstetrician and pediatrician. In addition, the presence of a pharmacy in the institution made it possible for patients to buy medicine without leaving the rural doctor's office [4:7]. Taking into account the number of residents served, the location and distance between the areas in which they live, the existing network of roads and a number of other factors, rural medical centers can be classified into the following four types:

- the first type-up to 1 thousand 500 people;
- the second type-from 1 thousand 500 people, up to 3 thousand 500 people;
- the third type-from 3 thousand 500 people, up to 6 thousand;
- the fourth type-is designed for a population of 6 thousand people, up to 10 thousand, and the doctors working there are medium and small medical personnel the state unit is determined in the established order based on the type of rural doctor's office and the number of attached residents [5:16].

An institution that provides access to basic medical services to local residents living in rural areas is the village doctor's office. Treatment, medical care and disease prevention and health promotion services are mainly carried out here. doctors such as internal medicine specialists, pediatricians, obstetricians and dentists operate in rural doctor's offices.

Unlike the specialist brigades that previously existed in rural doctor's offices, the practice employs general doctors who manage collective action. Specialist doctors undergo retraining to become a general practitioner. These general doctors who provide primary medical and sanitary care in public medical institutions in cities and villages are qualified.

On the basis of the state program for improving the health sector adopted at the initiative of the president of the Republic of Uzbekistan, the radical restructuring of the medical system was an important factor in the transition from inpatient medical care to preventive medicine, which requires a lot of spending and is not effective all the time.

Unlike the old system, as a result of the creation of the new system, the low-performing redundant links in the field were eliminated. This in turn provided comfort for the common people. In particular, in rural medical centers equipped with modern equipment, residents were able to get the treatment they needed. Previously, a district or municipal medical institution was also applied for a simple treatment [6:23].

In turn, the work on the construction and adaptation of rural doctor's offices in rural areas can be divided into 3 stages.

The first phase included the years 1991-2005 during which the rural outpatient clinics and paramedic-obstetrics were converted into a rural doctor's office and new ones were built.

The second phase is limited to 2006-2016. During this period, new village doctor's offices were built and jihadized with the necessary medical equipment.

The third phase is the period from 2017 to the present. As of 2017, the village doctor's office has been converted into a rural family polyclinic, with the latest modern medical device equipment installed. In addition to a doctor of general practice, the activities of a narrow range of specialists were also established there.

President of the Republic of Uzbekistan Shavkat Mirziyoyev expressed his opinion on rural medical centers on January 5, 2017 at a meeting with a group of leading specialists of the health sector, saying that "today, rural medical centers are equipped with laboratory analysis tools for conducting primary medical examinations, a number of diagnostic devices provide comfort for the population. But, there are not enough qualified specialists who use medical equipment. We cannot even deny that in some remote gods it is necessary to go to the district center or city to donate ordinary blood.

In some places, medical examinations are carried out only in their name. The lack of qualified specialists in remote areas means that there is a lot of work to be done on personnel issues. Rural doctor's offices need to work around the clock, " [1: 186] he noted.

In place of the conclusion, it is possible to say that the development of infrastructure in rural areas, where more than half of the country's population lives, was manifested in the provision of medical services to the population through rural medical centers and District Central polyclinics.

In the early years, most of the rural doctor's offices were located in adapted buildings, the provision of which had problems such as medical equipment and equipment, hot and cold water, lack of electricity.

There were also cases of failure to undergo retraining courses of higher education and secondary specialized medical personnel operating in rural medical centers.

As a result of the reforms carried out in the following years, the village doctor's offices were brought to a new modern appearance. The latter was provided with medical equipment and the necessary equipment. To protect the health of the population, a narrow range of specialists were established, in addition to general practitioners.

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