Forumul
Pacienților
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PATIENTS FORUM RESOLUTION 2025

I. General Considerations

Patients participation in decision-making processes is a fundamental condition for a transparent, efficient, and people-centered health system. Law No. 263/2005 recognizes the patient as a key participant in decisions concerning their own health; however, this principle remains insufficiently applied in practice.

The international direction is clear: WHO Resolution WHA77.2 (2024) calls on states to strengthen social participation in health, while OECD initiatives—such as the PaRIS program—emphasize the importance of systematically measuring patient experience and integrating it into public policies. Moldova has the opportunity to align with these standards by adapting them to the local context.

The conclusions of the National Study on Citizen Participation in Health Decision-Making (2024–2025), presented at the Patients Forum 2025, confirm that participation exists more at a declarative level than an operational one. Patients have only partial knowledge of their rights, access to information is unequal, and the mechanisms for expressing opinions are fragmented, difficult to access, and rarely analyzed in a systemic manner.

II. Key Findings

The current situation shows that many patients lack clear information about their rights and how these can be exercised or defended. In the absence of accessible communication, a culture of dialogue, and simple procedures, people tend to give up reporting problems or violations, which perpetuates a lack of response and reinforces distrust in institutions.

At the same time, medical institutions use different methods to collect feedback—some on paper, others through online forms or internal registers. Without a unified digitalized tool, data are difficult to collect in a timely manner and to compare, and patients’ opinions often remain underutilized. This lack of uniformity makes a real nationwide assessment of patient experience impossible.

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The doctor–patient relationship is, in many cases, marked by a communication model in which the patient plays a secondary role. Many patients hesitate to ask questions or request explanations, either out of respect, fear, or lack of confidence that their opinions will lead to change. This distance affects the quality of medical care and reduces patient involvement in their own treatment. Although legislation promotes personalized treatment, in practice many medical institutions still do not approach decision-making in a collaborative manner.

Short appointment times and the high number of patients consulted daily prevent adequate explanation of medical information, leaving patients often dependent on the doctor's opinion and less involved in decision-making.

Access to services remains unequal for patients from rural areas, older persons, patients with disabilities, people with chronic diseases, those with mental health disorders, individuals dependent on the care of others, homebound or bedridden patients, and other vulnerable groups. Barriers range from non-adapted physical infrastructure and long distances to digital barriers, lack of information, informal payments for healthcare, or logistical difficulties.

Patient organizations—the main actors capable of collectively representing the interests of beneficiaries of medical services with specific conditions—face a lack of resources and largely operate on a voluntary basis. This situation limits their ability to participate consistently in consultations, monitor policy implementation, and systematically support patients. Without predictable institutional support, these structures risk becoming fragile or disappearing, weakening the system's capacity to ensure a genuine patient voice.

There is also a persistent lack of transparency regarding available services, waiting lists, and access criteria, which affects patients' ability to make informed decisions and generates a perception of insecurity.

III. Strategic Directions for a Patient-Centered System

To strengthen patient involvement and build an open and accountable healthcare system, it is necessary to develop predictable consultation mechanisms, implement accessible and digitalized feedback solutions, increase citizens' level of information, protect vulnerable groups, and improve transparency at all levels.

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IV. Recommendations

MINISTRY OF HEALTH

- Implement a **national digitalized patient feedback system** that is easy to use, accessible, and anonymous, capable of providing a realistic picture of patient experience after accessing medical services.
- Ensure **consistent application of patient communication and counseling tools** and procedures within medical institutions through regular staff training and the development of effective mechanisms for monitoring communication practices.
- Ensure **dedicated investments in health education** and establish **support/financing mechanisms for patient associations.**
- Assess patient experience and publish an **annual Report** based on data collected through digital and traditional tools.
- Create a **National Register of Patient Associations and Organizations**, including descriptions of activities, services provided, and contact details, to facilitate patient referral to relevant organizations.
- Develop and disseminate **accessible** and **diverse informational materials** adapted to different categories of patients.

NATIONAL HEALTH INSURANCE COMPANY

- Use **patient feedback data in the evaluation and contracting process** of medical institutions.
- **Periodically publish**, through accessible tools, information on access to medical services, diversification of services covered by the Mandatory Health Insurance Fund, patient satisfaction levels, and other topics of public interest.
- Actively **include patient organizations in consultation and regulatory development processes in the health sector**—not only during the updating of the Single Program, but also in identifying real beneficiary needs, formulating proposals, testing solutions, and assessing their impact on patient experience and quality of medical care.

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IV. Recommendations

HEALTH INSTITUTIONS

- Use and implement **uniform and accessible mechanisms for collecting feedback,** including digital solutions available within institutions.
- Periodically organize **staff training in communication, ethics, and patient-centered care** (including the involvement of patient associations and organizations as experts/trainers).
- Ensure **physical, informational, and digital accessibility** for patients with special needs.
- Develop **partnerships with patient associations and NGOs**, involving their representatives as members of management boards, working groups, and decision-making processes.

PATIENT ORGANIZATIONS AND CIVIL SOCIETY

- Establish a **National Patients' Council** as a permanent consultation platform for health authorities, medical institutions, and other decision-makers.
- Actively **participate in consultations with authorities** and **monitor the implementation of the Forum Resolution.**
- Produce and publish annually the **Patient Barometer / Annual Index of Patient Experience** in the Republic of Moldova.
- Promote **health literacy and patient involvement in information and awareness-raising activities** regarding rights and responsibilities in healthcare.
- Strengthen **collaboration with medical institutions, NGOs, public authorities, and other institutions** to present and promote patient associations and their activities.

Adopted in Chișinău, 20 November 2025