

NEWSLETTER

MEDICAL EDUCATION DEVELOPMENT

UKRAINIAN-SWISS PROJECT

January–March
2020



Introductory words

I warmly welcome you to the first edition of our project newsletter. Through this letter, our entire project team wishes to stay in contact with you, to inform you about relevant topics in medical education and to provide access to valuable materials. As a project director, I wish to extend my gratitude to all our partners who contributed greatly to the substantial achievements we had in our first project year. I ask you to stay in touch

with the medical education reform community that has built up over the last year. We offer multiple channels through which you can follow current events and discussions (Website, Facebook, email). This is even more important in COVID-19 times where we are prevented from having more direct meetings.

**With best regards and wishes,
Martin Raab**

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March 12 – April 10, 2020

E-LEARNING IN HIGHER MEDICAL EDUCATION INSTITUTIONS

REPRESENTATIVES OF SIX PILOT HIGHER EDUCATIONAL INSTITUTIONS OF THE UKRAINIAN-SWISS “MEDICAL EDUCATION DEVELOPMENT” PROJECT HAVE COMPLETED ONLINE COURSE ON INTRODUCTION TO E-LEARNING.

Representatives of six pilot higher educational institutions of the Ukrainian-Swiss “Medical Education Development” Project have completed online course on Introduction to e-learning.

They have watched a video presentation, participated in two webinars, completed one individual and two group assignments, trained to use two distance learning platforms – LMS Moodle and Microsoft Teams, developed six (one for each institution) step-by-step programs for implementing (or update) e-learning into educational process. This online course is a great example of learning-by-doing, learning about distance learning platforms while completing tasks on the indicated platforms.

Considering the establishment of quarantine measures, the issue of quality distance learning has become extremely relevant for all educational institutions.

Project consultant on e-learning, Sergiy Sergiienko emphasizes the following aspects to be considered for the implementation of distance learning:

” In order to start moving and implementing something, you need to understand at least the direction of movement

The preparatory stage of the implementation is to describe the learning process from the perspective of the three main clients of the e-learning system: students, faculty, and administration. By describing the process, we can identify key points for exchanging information between teachers, students, and administrators. This is required in order to increase the speed of searching, accessing and sharing the necessary information with help of the information and communication technology (ICT) solution. Therefore, more time is spent on studying, not searching.

Priorities for the automation of educational processes in the higher educational institution are as follows:

- **automatization of communication between the educational process participants (teachers, students and administrators);**
- **access to educational materials;**
- **evaluation.**

The sequential steps of implementing an e-learning system are as follows:

STEP 1.

To create a single virtual space for communication between process participants. It can be carried out regardless of progress in other areas of automatization. Providing such a space is possible by connecting all participants to corporate mail, setting up group mailings, and creating group chats. There are now options for using cloud services like Office 365 or G Suite, with a quick set-up of the needed functionality.

STEP 2.

To develop templates for communication between process participants. Letter templates should describe the simple sequence of actions that a participant must take to solve a standard problem (such as reassignment or group/discipline entry). The standardization of the communication process will reduce the time spent on informing and supporting students in the educational and administrative processes. The templates you create can be used in the future to make chatbots for further automatization. You can begin to standardize the communication process at any time, you can constantly improve and adapt to new tasks.

STEP 3.

To launch the LMS platform and give teachers access for the familiarization and testing course creation.

Recent versions of LMS platforms have mobile applications for ease of use and access with Open ID, which will allow the use of corporate mail accounts to create and identify users on the platform. This simplifies administration process because the user is created only once and will be linked to his or her corporate mail profile in all other services.

STEP 4.

To teach faculty members and administrators how to tailor study materials for use on the LMS platform, how to develop tests to evaluate students' knowledge online. To assign responsible persons at the departments for adaptation and uploading of educational materials. The process is started after configuring the LMS platform and providing access to the faculty members and administration.

STEP 5.

To create standard templates to accompany students during the LMS training. Standard letters templates should be sent automatically and describe the simple sequence of steps that a participant must take to resolve a standard problem that has arisen.

STEP 6.

To configure automatic transfer of evaluation results into e-journals. This item is the most difficult to implement from a technical point of view. You can try to put it into action after everything else has been implemented and configured. An additional difficulty may be the existence of different e-journals and their editions.

Assessment of the quality of implemented solutions should be carried out during the reporting period (semester, academic year) to assess changes in the efficiency of the administration process, ease of use, the amount of time spent compared to the previous reporting periods.

We wish all higher education institutions to succeed in distance learning establishment!

Nevertheless, please note that this is only one of many components that are being implemented within the Project (see page 6).

WINTER SESSION OF THE AUTUMN SCHOOL ON MEDICAL EDUCATION

January 20, 2020



The Winter Session of the Autumn School on Medical Education took place in Kyiv on January 20, 2020. More than 80 participants could join the event personally (offline) and more than 100 participants watched the Youtube online broadcast.

The representatives of administrations of higher medical education institutions, medical educators, medical doctors and nurses, and representatives of non-governmental organizations were present as participants of the event.

Best practices which are already in place in higher education institutions (HEIs), the support programs for educational institutions, ideas that should be initiated – all these topics were discussed by participants and by guests of the event. Overall, the Winter Session program was dedicated to the autonomy of higher education institutions and the changes that accompany it.

Petro Ilkiv, Program Officer of the Swiss Agency for Development and Cooperation in Ukraine, opened the meeting by welcoming participants with an important note: “Why are we investing in education? Because we understand that without medical education of high quality, we cannot talk about health care services of high quality and about healthy patients.”

The autonomy of higher education institutions and the quality of their educational processes are the key issues discussed during the Winter Session. The implementation of these aspects should determine the trajectory of further development of higher education institutions; therefore, the Project invited leading experts to cover

these areas during the event.

Inna Sovsun, Member of the Parliament of Ukraine, Senior Lecturer of the National University of Kyiv-Mohyla Academy and Kyiv School of Economics, declared, “Autonomy gives the universities freedom and opportunity to act without the approval of numerous state entities. Thus, it can greatly facilitate development.” However, many practical questions arise during the introduction of autonomy, partially because of the contradictions between the orders of different ministries, which was noted by the participants during the discussion.

During the session on quality assurance in the educational process, Serhiy Kvit, Head of the National Agency for Quality Assurance in Higher Education, remarked, “The Agency continues to develop a culture of quality assurance in higher education, as well as educational



services and research of high quality! We strive to adhere to international standards for quality assurance in higher education and continue to develop the legal framework and move to digitization.” The participants were able to ask and discuss many questions: student feedback, elective part of the curriculum, academic integrity, issues of continuous professional development (CPD) of teachers.

“And as we find the answers to the important questions that we face, we are motivated to move forward and make the changes we need today.” Oleh Petrenko, Head of the NSAU (2018–2019), supported the participants reminding that “we need to think about how we respond to current challenges. We must all now be ready to transformation, and this process is normal. The changes in education – the time for them has come – cannot be stopped.”

We are confident that, through these developments, medical HEIs will work to enhance their own autonomy and capacity, contributing to the continuous improvement of the quality of education and bringing it closer to the international standards.



SEMINAR ON CAPACITY BUILDING FOR THE PROJECT PILOT HIGHER MEDICAL EDUCATION INSTITUTIONS

January 21–22, 2020

January 21–22, 2020, a seminar on capacity building for six pilot institutions of higher medical education was held.



Participants from the Bukovyna State Medical University, Ternopil National Medical University, Kharkiv National Medical University, Lviv Medical Academy, Zhytomyr Medical Institute, Rivne Medical Academy discussed topics on leadership, strategic development of higher education institutions.

Inspiring Mychailo Wynnycky showed practical examples of managing higher education institutions and the best practices of university development from around the world. During the seminar, participants were able to identify their own priorities for development, the need to develop a scientific component of institution's activities, and the importance of quality communication, not only external, but also with students and staff.

The idea of establishing a simulation training center raised a great interest of the representatives of the pilot

institution. An important aspect of this topic was that the participants not only had an opportunity to discuss the requirements for facility premises and equipment, but also

together with our expert Andrii Tkachenko thoroughly considered the competencies that future doctors and nurses could acquire while studying in the simulation center.



January 21, 2020

THE SECOND MEETING OF THE PROJECT STEERING COMMITTEE



On 21 January 2020, the second Steering Committee meeting of the project “Medical Education Development in Ukraine” was held in Kyiv. During this meeting, the Project has presented the results of 2019, and also members of the Steering Committee approved the plan for 2020. Apart from the Steering Committee members (in particular, representatives of the Ministry of Health of Ukraine (MoH), Ministry of Education and Science (MoE), Swiss Agency for Development and Cooperation in Ukraine, National Health Service of Ukraine, Swiss Institute of Tropical and Public Health), the representatives of the regional health care departments, international projects, reformers, medical education professionals, managers of higher educational institutions, and other stakeholders joined the meeting and suggested ideas and possibilities for the collaboration.

The overall directions of the Project activities are the following:

- merging separate activities at the level of pilot higher education institutions (HEIs) into the complex and systematic approach to the capacity building (see page XX), the Project will collaborate with the pilot institutions to improve the educational process and educational environment, taking into account the need for systematic development of all components;

- facilitating the development of continuous professional development of high quality for family doctors, nurses, health care managers, the Project will establish and support peer groups initiative. Peer groups are designed to bring together medical professionals who seek professional development and who are willing to share their experiences, knowledge, and practical achievements with colleagues;
- supporting the development of nursing in Ukraine, the Project will contribute to building a community of nurses as group of change agents for the innovative and cost-efficient practice of advanced nurse practitioners;



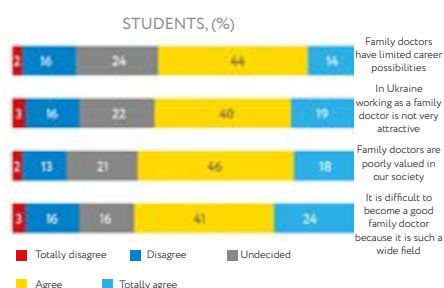
- the Project is ready to support the introduction of a new internatura model, including the launching of electronic distribution (e-match) for internatura programs. However, further actions in this direction depend on the Ministry of Health of Ukraine and on the approval of the respective decree on the new model of internatura. At the same time, the Project will train mentors who will be able to facilitate training of practical skills among the interns, who will be able to provide feedback and assure that interns are ready for future independent professional activity;
- the development of a course on human resource planning and management in health care is also considered in 2020, as well as a study on the proportion of graduates remaining in the family doctor's profession and their motivation;
- the project continues development of a Master's Degree Program in Healthcare Management and its modules. Already in the first half of 2020, part of the modules will be piloted as online courses. In general, the modules will have a mixed format (online + offline).

The core values of the Project, which are being implemented in all activities, are integrity, transparency and responsibility. We are pleased to work with our partners at all levels to achieve the best results and to ensure that Ukrainian medical education meets international standards.

Report “Perception of family medicine by students and teachers of higher medical education institutions”

Survey report «Perception of family medicine by students and teachers of higher medical education institutions» is published. The survey, the results of which is presented in the report, was conducted in year 2019 in five medical universities and covered 2405 students and 385 teachers.

This survey helped to analyze the most common ideas of students about family medicine and professional activities of family doctors in comparison with doctors of other specialties. So, 50% of students assume that it is not attractive to work as a family doctor in Ukraine, family doctors can manage only minor health problems; in addition, they have limited career opportunities. Teaching approach to family medicine on the undergraduate level of education raises a lot of questions – course “General practice – Family Medicine” is delivered at the end of the sixth year of study and often does not provide a possibility to get at least basic knowledge of the subject.



The survey demonstrates that only 20% of respondents are potentially interested in family medicine as their future specialty. The project expects that the results of this survey will influence the structure of the course and approaches to teaching the discipline of family medicine in medical HEIs, and this will allow to form an adequate students' perception of this specialty and also increase interest in it.

Link to the survey: <http://mededu.org.ua/uk/our-library/>

NEW COMPREHENSIVE APPROACH OF THE PROJECT TO CAPACITY BUILDING OF HIGHER MEDICAL EDUCATION INSTITUTIONS



Capacity building for higher education institutions is a process that integrates different levels, structures, processes, approaches. Accordingly, the Ukrainian-Swiss project «Medical education development» offers a comprehensive approach to the trajectories that will be implemented in pilot institutions, or more in general, to the development of medical HEIs. In particular, our collaboration focuses at the following areas:

- enhancement of teaching capacity;
- development of research capacities;
- introduction of modern e-learning;
- creation or development of laboratories for clinical skills, i.e. simulation centers;
- introduction of new approaches to curriculum revision, etc.

Following the logic of system thinking in health care, we consider care-provider-to-be (medical doctor, nurse, other medical professionals) as the centre of the system. The success of this provider-to-be is key idea for

the higher education institutions' improvement, quality enhancement, assuring adequate integrity, process and recognition of their approaches to international education.

Each track will be implemented in close collaboration with the pilot higher education institutions, other national and international partners and stakeholders, who can best contribute to the development of the HEIs' capacity building. At the same time, this approach will remain flexible, open to initiatives, ideas, innovations that rise in pilot institutions which the Project will be able to support with expertise, training, technical means and so on. Besides, this approach should remain systematic and it should facilitate the changes that are needed to improve the quality of medical education and to ensure that it meets international standards.

As of today, the Project supports English language courses attended by over 100 lecturers of pilot HEIs, facilitates the introduction of modern e-learning and clinical skills laboratories. To be continued!

24 FUTURE FACILITATORS OF PEER GROUPS

FOR PHYSICIANS, NURSES, HEALTH CARE MANAGERS ARE SELECTED

The Project supports establishment of high quality continuous professional development (CPD) system in Ukraine and promote implementation of innovative for our country educational approaches for family doctors, nurses, health care managers. One of such innovations is the peer groups initiative for medical professionals. This CPD method is quite common in Europe and in the world, so we are glad that we can extend this experience in our country.

Peer group – group of professionals of the same level (same job position), who do similar work, have similar functions. This group meets regularly – once or twice a month, to discuss, analyze professional situations, clinical cases, share knowledge and exchange experience. An important role in peer group establishment and development plays a facilitator – a member of peer group, who organizes meetings and ensures professional discussion during it.

Recognizing an important role of facilitators in peer groups implementation in Ukraine, the Project plans to provide trainings for these specialists, expert and informational support on all stages of initiative implementation.



In March 2020, based on the open call for applications, 24 future facilitators of peer groups were selected – 11 family doctors, 7 health care managers, 6 nurses from the six pilot regions of the Project (Chernivtsy, Ternopil, Lviv, Zhytomyr, Rivne, Kharkiv oblasts).

The next, second, wave of this initiative implementation will engage facilitators from other oblasts of Ukraine, and the third one – educators of HEIs.

We are glad that we have motivated, devoted, openminded professionals, who are ready together with us to develop CPD system for medical specialists, bring it closer to practical needs and international standards of modern education.

The recording of video lectures for master program “Management in health care” continues



Acknowledging the urgent need of health care managers in qualitative and modern education, the Project continues working on development of master program “Management in health care”. Step by step courses are filled with up-to-date information and knowledge.

At the moment the following courses are under active development: “Financing systems of health care”, “Financing management in health care”, “Quality management in health care”. Star lecturers, experienced experts, including Dr.Prof. Wim Groot, Pavlo Kovtoniuk, Natalia Riabtseva, Natalia Tulinova, Valerii Kidon, Anastasiia Senkus, Tetiana Trupets, develop video lectures under inspiring guidance of program coordinator Valentyna Anufriyeva.

Online parts of these courses will be available for piloting very soon. And very soon health care managers will learn more about the finance plan and finance strategy of the organization, principles, processes and instruments of quality management in health care. Follow our advertisements, be the first to enroll in our courses!





NEW COORDINATOR OF NURSING EDUCATION

Since January 2020, Glib Bitiukov is working with us as a coordinator of nursing education. Glib has medical education, graduated from Kyiv Medical College, Ternopil National Medical University, and also studied at HEIs of Malta and USA. He worked in the Ministry of Health of Ukraine. Nowadays Glib is a trainer on emergency medical assistance and works as a nurse in the hospital of Kyiv. In the project, Glib will coordinate nursing education component, in particular, he will support implementation of project activities in the pilot institutions and will promote introduction of the concept of a nurse with extended responsibilities, as a routine practice under health care provision on the primary level.

TELL OUR READERS, WHO ARE YOU AND WHICH RESPONSIBILITIES DO YOU HAVE IN THE PROJECT?

My name is Glib Bitiukov. In the Ukrainian-Swiss project "Medical Education Development", I coordinate nursing education. This includes revising the model of work on the primary health care level, redistribution of responsibilities between a physician and a nurses, strengthening of the role of a nurse in health care delivery, increasing professional opportunities and ensuring professional autonomy of nurse. Besides this, strengthening of education institutions that teach nurses is also critical, which includes support or renewal of educational environment, revision of curricula, including their harmonization with international standards, emphasizing trainings of practical skills, establishment of modern simulation centers in medical colleges and academies.

DO YOU ENJOY WORKING IN THE PROJECT? WHY?

Work in this project is an opportunity to influence the model of health care provision in Ukraine, to make it patient-oriented and also to strengthen medical staff motivation, their professional level, to update practical skills, to create modern algorithms of responsibilities distribution in medical care provision, which are based on holistic approach where not only illness but the state of a patient in general is important, as well as community role in forming healthy population. I can see the results of my efforts in the short term. This project influences policy development in health care due to the experience exchange with international stakeholders, analysis of current policy and search for tools of its improvement under support of international experts.

WHICH PROFESSIONAL EXPERIENCE DO YOU FIND IMPORTANT?

I have been spending a lot of time on learning. This is one of the key components which form the trajectory of professional development. In medicine, continuous professional development is a lifestyle. I studied abroad: in USA, on Malta, had trainings on medical assistance in Czech Republic, Sweden, Germany, and this influenced a lot my work approach and ideology. Acquired education helped me to participate in large scale and ambitious projects. One of them is Eurovision 2017, where I was responsible for medical service. Besides that, as an advisor at the Ministry of Health of Ukraine, I participated in health care system transformation in 2016–2019. This experience helps not only to accelerate professional development, but also to establish personal values, as this is an opportunity to cooperate with interesting, experienced professionals who form an environment which promotes growth.

WHAT ARE YOUR UPCOMING PROFESSIONAL PLANS?

My project direction allows to effectively influence exactly those elements of health care system which need support. For example, today nurses in Ukraine have very limited responsibilities, in particular on the primary level of health care system, in comparison with their foreign colleagues. In the international classification of professions, a general practice nurse is an independent professional, who analyses patient's needs, conducts diagnostics, plans medical care, is responsible for community medical support, establishing healthy lifestyle in a community. As we see,

international practice offers a different approach to distribution of responsibilities between a medical doctor and a nurse, and strengthens the health care system due to the role of a nurse. Besides, it is also staff motivation, as in our system nurses usually do not have any opportunity for development. After college graduation, a nurse can spend the whole life obtaining the same position with the same salary as there are no other options. There is a lack of possibility to move forward. Though after developing a new model, we create a perspective to be independent, to have professional ambitious goals, not to stop on current achievements, to learn and to change. Financial motivation is no less important. Professional development is always financial development as well. Current health care system transformation in Ukraine gives this opportunity and we should use it.

TELL US ABOUT GLIB BITIUKOV'S PERSONALITY. WHAT CAN BE INTERESTING FOR OUR READERS?

I have a lot of interests, which allows me to realize myself. Life is not just a consecutive number of days. These are emotions, which fill these days, this is an opportunity to create things, which fill the world and will stay after us. What matters in not the belongings of a person, but what print she or he will leave in others. That is why I prefer my own development, openness and optimistic view of the world. I devote a lot of time to sport. It is nice to wake up in the morning and feel energy and eagerness to start a new day. To this end, it is important to take care of yourself. Of your physical and psychological health. To spend efforts to help others, to create something new, it is necessary to refresh, to develop and not to stop.

JOACHIM PELIKAN, E-LEARNING EXPERT OF THE PROJECT



WHAT ARE YOUR KEY DUTIES IN SWISS TPH?

I am responsible for e-learning projects and the learning platform based on Moodle. We are using e-learning and blended learning for a lot of professional postgraduate courses as well as different master programs. Additionally, we have projects with external partners where we are offering e-learning. Besides that, I am still a biologist and also the institute's photographer.

WHAT ARE THE KEY LESSONS LEARNT FOR YOU (AND US) FROM YOUR PREVIOUS PROFESSIONAL ACTIVITIES?

I was involved in a lot of projects in many different countries, and my key message is that you first have to understand the people in your projects, to listen to them and to be open. Mutual learning is a key element of Swiss TPH's activities, and mutual understanding is a prerequisite. I learned a lot in the projects from other people, and even if I am going somewhere as a consultant, I never have the attitude to know everything better. This does not mean that I do not have – or hold back – my own opinions.

YOUR MISSION TO UKRAINE IS LINKED TO E-LEARNING. HOW WOULD YOU EXPLAIN TO PEOPLE WHO HAVE NO IDEA ABOUT E-LEARNING WHAT YOU ARE GOING

IN YOUR OPINION, WHAT ARE THE THREE PRINCIPLES FOR MODERN EDUCATION TO BE BASED ON?

To begin with, involve students and also learn from them, as well as allow for peer-to-peer learning.

Secondly, act more as a facilitator and less as a teacher who knows everything.

Thirdly, avoid surface learning and create a learning environment which allows students to understand and to construct their knowledge.

TO DO IN KYIV?

I have been involved in e-learning projects for 20 years, and I have heard a lot of different opinions about e-learning during this time. From exuberant enthusiasm to disappointment, everything was there. E-learning is not the solution for all problems in courses, still it can help to improve the quality of teaching. On the one hand, by making lecturers think more about didactics, and on the other hand, by attracting students who want to try something new and innovative. One should also not forget the possibility that through e-learning education is possible without face-to-face teaching.

HAVE YOU EVER BEEN IN KYIV BEFORE?

I was in 2006 in Kyiv for the first time,



within the Ukrainian–Swiss Perinatal Health Project. Since then I visited the city many times until 2013, as a consultant for e-learning, working together with our Ukrainian partners in the PIO as well as in universities.

WHAT DO YOU FIND THE MOST INTERESTING IN YOUR TRIPS TO UKRAINE?

I like the exchange with people, on a professional basis, but also I like to learn something about the country. I remember very well a long evening walk in Kyiv, together with a former member of the PIO in Kyiv, and he showed me many interesting sites of the city. As a photographer, I am very interested in things like that and I am still in contact with him.

WHAT BOOKS HAVE INSPIRED YOU AND WHICH ONES YOU WOULD RECOMMEND?

I read a lot, but there are some books which really inspire me. Among these, I liked many books from the American writers John Steinbeck and John Irving.

LIFE MOTO

Make as many good friends as possible, but also be able to enjoy silence and solitude out in nature.



ONLINE COURSE

Medical assistance during the COVID-19 pandemic

Recognizing the urgent need to provide valid and reliable information on the medical assistance that exists among medical doctors and nurses in the context of COVID-19, the Project in cooperation with the Academy of Family Medicine of Ukraine are launching an online course «Medical Assistance during the Pandemic».

On 3–28 April, lectures (for primary care professionals) will be broadcast on the Project's Youtube channel on Tuesdays and on Fridays at 5:00 PM. Access to the overall online course will also be available on the Public Health Center portal, enabling participants to obtain a CPD certificate upon successful completion of the course.

- Coronavirus disease: basics of infection control in outpatient practice. Home visits

- New born patronage during the COVID-19 pandemic
- Telephone Consultations: Algorithms for Successful Communication during the Pandemic
- Counseling of patients with panic attacks during the pandemic: the role of family doctor and nurse and nurse
- Vaccination during the COVID-19 pandemic
- Coronavirus and cardiovascular disease: international guidelines
- Algorithms for Pregnancy, Childbirth and Newborns in Coronavirus Disease
- Coronavirus disease and immunodeficiency states



- Coronavirus disease and chronic lung pathology

The online course is developed by the Academy of Family Medicine of Ukraine in cooperation with the Ukrainian-Swiss project «Medical education development» with the support of the Ukrainian Academy of Pediatric Specialties and the All-Ukrainian Association of Pediatric Immunodeficiencies and in the partnership with the National Health Service of Ukraine, the Centre for Public Health of Ukraine and the Ministry of Health of Ukraine.

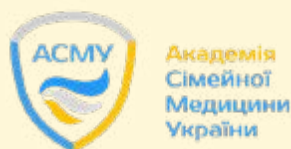


Dates and the venue for the Autumn School on Medical Education–2020 are announced

If epidemiological context is favorable, the Autumn School of Medical Education–2020 will happen! This year, the School is scheduled for 28–30 September and will take place in Kharkiv. It will be implemented jointly by the Ukrainian-Swiss Project «Medical Education Development» and Kharkiv National Medical University. As a good tradition, in the program of the School are presentations of leading international and national experts, Janet Grant and Serhiy Kvit, as well as the star guests, whom we will be announcing soon.

More information about Autumn School in the article (in Ukrainian): <https://bit.ly/2V1YPm3>. For full details and breaking news, School announcements, visit the Project's Facebook page.

Azov School of Family Doctor



In September 2020, the Academy of Family Medicine of Ukraine with the support of the Ukrainian-Swiss project «Medical education development» plans to organize the Azov Family Doctor's School. The purpose of the School is to enhance the quality of primary care in Ukraine through the education and communication of peers (GP, family doctors) on the use of modern technologies and international algorithms for providing care, evidence base.

50 participants, selected under the open competition will be able to meet in Berdiansk, Zaporizhzi oblast, to discuss continuous professional development, strengthening approaches to vaccination, as well as the prevention of negative cases among their patients. The event organizers seek to improve the clinical and leadership competencies of family doctors and nurses given the context of the ongoing changes that became possible thanks to health care reform in Ukraine.

NEW JOINT PLANS: MED PROJECT AND HENRY MARSH



We do not stop amazing ourselves and to surprising you. Yes, we have an arrangement for joint interesting activities with Henry Marsh, a leading British neurosurgeon, famous writer and public activist. Therefore, in order to be prepared for our meetings, we recommend you to read his books and write down questions. If you are interested in our advice, then start with the «Do No Harm: Stories of Life, Death and Brain Surgery».

BOOK “FACULTY DEVELOPMENT IN THE HEALTH PROFESSION. A FOCUS ON RESEARCH AND PRACTICE”



The book “Faculty Development in the Health Profession. A Focus on Research and Practice” by Yvonne Steinert, is about the development of teaching, leadership and research skills of any employee of a medical education institution which is no less important than the continuing professional development of practicing physicians. Such development is a powerful tool not only for individual development, but also for developing the educational potential of the institution, enhancing its competitiveness, changing the organizational culture, which indirectly affects the formal, informal and hidden curriculum.

For example, here is a quote from the book:

“In academia, the idea of institutional benefit is pitched against the cherished value of academic freedom. This tension often becomes intense when universities are threatened by economic downturns, resulting in reductions in student enrolments in previously expanded areas, and the only way to reap institutional benefit is to reduce academic staff numbers or cut departments. Hence, although faculty development frequently means developing personnel more fit for the (twofold) purpose of the institution, this has been a challenging concept in institutions of professional learning or medical research.

This is largely because traditionally, individual personal and professional qualities (e.g. intellect and empowerment), especially in research capacity, have often been valued above institutional ones

and, more importantly, above humanistic and educational ones (Handy 1999). For example, Handy (1999) describes the cultures operating in medical and academic institutions as ‘person culture’, where charisma and expertise dominate the power hierarchy.

How the institution and the individuals within it perceive faculty development will determine how it is used. It is becoming increasingly common in most large universities for faculty development to address a wide range of issues: financial and management skills, including the management of change, conflict resolution, leadership, innovation, creativity, and cultural competence. However, the precise nature of the institutional, as opposed to the personal, goal (i.e. what type of benefit should ensue?) is often not made explicit. If faculty development is seen in an institution to be only for the benefit of an individual, maybe as a right, or at least as an essential concomitant of academic life, it is unlikely to be regarded as a force for change in that organization.

This means that if faculty development is to be an instrument of change in an organization, it should encompass promotion of its role within the institution as a mechanism both to enhance the skills of individuals and as a means to develop the academic capital of the institution. For example, faculty developers should find out before they start a project how their colleagues currently view the faculty development programs in their organization. Are these being run primarily to generate external income or goodwill from outside the organization? Are they responsive to faculty members’ needs? Do they work, as far as the typical recipient is concerned? Is there a faculty development ‘centre’ and is it lofty and insular, or responsive, collaborative and outgoing?

Thus, a first strategy in using faculty development to achieve organizational change might be as follows: Faculty development must be defined for, and promoted to, an institution’s members in a manner that clearly connects with its capacity to contribute to organizational change. This means that an explanation of why a program is being developed should be identified in the program’s rationale, promotional material and development activities. For example, promotional material for a faculty development activity in a university might

say, ‘This University is not seen by its students as offering sufficient, or timely, feedback to enable students to improve their work and this is having a deleterious impact on national ratings and government funding streams. So that we can do better, a systematic literature review has isolated the main features of a useful feedback strategy, a needs assessment conducted to determine training requirements, and a program devised for faculty that will promote a more sensitive, systematic and effectively delivered approach to feedback....’

The book also considers meetings of peer groups for higher medical education teachers a method of professional development. The Ukrainian–Swiss project «Medical Education Development» starting from 2020 is introducing groups of equals into the system of continuous medical education of doctors and nurses. However, medical educators will be offered tools for deployment groups of equals in their institution, as well.

More interesting things in the book: <https://cutt.ly/2tKrKST>

Online course “The role of physician in prevention, identification and reaction on cases of violence against children”

According to the study of the Council of Europe, every fifth Ukrainian child is a victim of sexual abuse, every third one is a victim of physical abuse, and every second is a victim of psychological abuse. Violence against children affects their brain function, mental health, leads to non-communicable, infectious, chronic diseases, and affects other areas of the child’s life. Often, the only specialist who sees the child and can detect the committed violence is the doctor.

Non-Governmental Organization «Childhood Without Violence» and International NGO «International Center for Development and Leadership» invite family doctors, pediatricians, nurses, specialists in other medical specialties to take a course «The role of a doctor in preventing, detecting and responding to cases of violence».

The purpose of the course is to develop the competence of doctors in all regions of Ukraine to identify and respond to the cases of child abuse.

You can take the course at: <https://courses.prometheus.org.ua/.../course-v1:ILDC+D.../about...>



POLICY “LIVE NO ONE BEHIND”

Nowadays leading world organizations, including Swiss Agency for Development and Cooperation, offer their partners to unite striving for equality in all directions into one policy “Leave no one behind”. This policy foresees prevention of (a) geographic marginalization; inequality based on (b) gender or sexual orientation; (c) health status or disability; (d) ethnicity, race, religion; end (e) inequality in education and in health knowledge.

More details about the policy: <https://cutt.ly/4tKwvnb>

In health care, strengthening of primary level of medical assistance and way to universal health coverage are the key elements of policy “Leave no one behind” implementation. While planning programs, interventions, events, in particular in medical education, we should thoroughly analyze opportunities for equal access of all groups to them without any limitations based on different characteristics.

Ensuring gender equality in medicine and in medical education

may be one of the possible aspects of implementing the policy «Leave no one behind». Many researches prove that gender is an essential determinant of health and illness. It is important to mention that gender concept describes differences between men and women which are constructed in different cultural environments (for example, Hammarstroem 2003; Pinn 2003). Gender awareness in doctors and nurses contributes to equity and equality in health and aims towards better health for men and women.

At the same time, there are a lot of facts which prove that medicine in many countries still stays gender blind. In particular, researchers say that medicine is not taking gender under consideration whenever relevant, for example when considering patients' needs, conducting surveys, etc. Moreover, medicine is blamed for being ‘androcentric’ because the body of knowledge on health and illness is predominantly about men and their health. Additionally, the way medical professionals see gender-role distribution negatively influences treatment and health outcomes, but gender inequality is overlooked as a determinant of health.

Medical education can play an important role in overcoming gender bias. In the framework of gender-sensitive curricula, students can get knowledge and insights on gender aspects of health and illness, as well as learn how to implement this knowledge in medical practice. Gender-sensitive medical education is a basis of gender-sensitive medicine, and also a catalyst of further social changes. Integration of gender aspects into curricula not only influences relationships between doctors and patients, but also affects HEIs teachers, their communication and attitudes towards specialty, which traditionally is seen in health care as male oriented.

More details and ideas: <https://link.springer.com/artic.../10.1007%2Fs10459-008-9100-z>

Article “Understanding the role of physicians within the managerial structure of hospitals”

The authors of the article “Understanding the role of physicians within the managerial structure of Russian hospitals” (2019) E. Kuhlmann et al. under the conditions of absence of developed approach to studying of managerial practices structure the present research and theoretical backgrounds in the following way:

(a) governance of health systems, in terms of principles and values of management (transparency, accountability, engagement, integrity, policies efficiency);

(b) clinical management, exploring the relationships between clinicians and managers, focusing on roles distribution, peculiarities of leadership and coordination of work. Important is the alignment of soft (trust, collaboration) and hard (financial incentives) levers;

(c) governance arrangements within hospitals – integration and system approach towards design of processes (where for example

quality improvement is connected with financial management, where clinicians are engaged in decision-making;

(d) the decisions clinicians and managers make on micro-level. Some organizational structures make it impossible to adequately perform, which brings organization to inefficiency and also to overstress in clinicians and nurses.

Trying to balance these approaches, researchers conducted exploratory research (63 individual interviews and 49 focus groups) and defined three major problems of hospital management on different levels:

(a) a weak system of coordination and exchange of information within the hospitals (meso-level),

(b) lacking mechanisms for coordination between hospitals (macro-level) that may reinforce existing inequalities in service provision,

(c) gaps in learning culture, and consequently, a risk that the same mistakes could be made repeatedly.

In general, the article offers the following results items: governance structures within the hospital, financial accountability mechanisms, quality and safety mechanisms, ensuring professional medical standards. Authors argue that clinical interaction between a clinician and a patient is effective under the condition of good management and insist on new approach towards hospital management on both levels (meso- and macro-), that is based on modern understanding of accountability and organizational learning. Creation of learning culture is important to avoid the mistakes in the future.

Access:

<https://doi.org/10.1016/j.healthpol.2019.05.020>

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The most updated information you can find on the project Facebook page:

<https://www.fb.com/MedEduUkraine/> or on the website: www.mededu.org.ua