

newsletter

MEDICAL EDUCATION DEVELOPMENT

UKRAINIAN-SWISS PROJECT

June–
September
2023



All medical education systems in all countries should undergo regular assessments and audits to identify their strong points as well as those areas that need adaptation and reform to improve the quality of teaching and learning. We live in a rapidly changing society with continuous scientific and clinical progress. Education, practical training, and clinical activities must be regularly adapted to take these changes into account.

Professor Peter Suter,
Dean of the Medical Faculty of the University
of Geneva (1984-2020),
Switzerland

When countries begin reconstruction, they can agree to someone else's conditions, use models from other countries and cultures, for example from the USA or Great Britain. However, these models often cannot be implemented in other cultures and contexts. It may seem that you can rebuild the country quickly using the models of others or joining other systems. But that is not true, since your strength comes precisely from your context. Slow down and create your own solutions.

Professor Janet Grant,
Advisor of the World Federation of Medical
Education, Director of CenMEDIC,
Great Britain

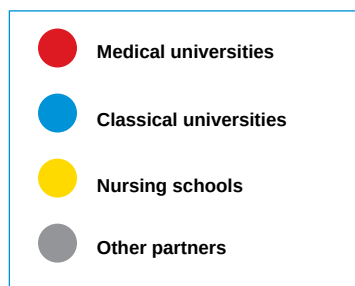
The challenges we face in reforming the education system are enormous. This complexity is not a unique feature only of the education system: it is a development shared with other social systems. In many ways, our societies have become more complex, harder to manage, and harder to regulate. This increase in social complexity has led to stronger links between professional and academic institutions and organizations in order to provide a qualitative scientific basis for professional activity. Good things take time. This applies to both scientific and education reform.

Professor Wim Groot,
Doctor of Science,
Maastricht University,
The Netherlands

We have to get used to natural disasters and wars as disasters created by people. Universities should teach future professionals how to work in conditions of limited resources, how to plan, prepare, adapt, redistribute and preserve resources during war, disaster, or peace. Questions of medical ethics will create tension and conflict between doctors and nurses working during crisis or war. Moreover, at universities medical specialists should be trained to counter misinformation. There were fewer fakes before but now this is a reality and we as medical specialists must be ready to resist.

Zaher Sahlul, Medical Doctor,
Specialist in Pulmonology and Intensive
Care, Co-founder of MedGlobal,
USA

CHAPTER 1. NEWS FROM HEIs



TOTAL MATCH: WELCOME THE PARTNERS OF THE SECOND PHASE OF THE PROJECT

During the first phase, the Project repeatedly received requests from higher medical education institutions for the opportunity to become partners. Therefore, before the start of the second phase, it was decided to increase the number of HEIs that will have access to the widest range of the Project interventions.

The final decision on the list of HEIs with which the Project will build long-term cooperation was made based on application forms and interviews with applicants. Together with 11 institutions we will implement activities aimed at qualitative changes in education, rethinking approaches to working with students, and comprehensive improvement of the competences of future and current medical specialists and medical educators. Those institutions that are not included in this list will have access to open events of the Project to obtain the necessary knowledge and skills to develop the learning environment of HEI.

Higher medical education institutions have gained autonomy. However, the transition from the long tradition of working in the style of receiving from the above indications of problems and possible solutions to an independent definition of goals, finding ways to implement them, and determining the point of differentiation is rather slow and difficult. Therefore, the development of the capacities of institutions and their autonomy was the framework in which our

Project worked in the first phase. We observed that through strengthened horizontal connections (including on the platforms established by the Project), universities and academies acquire incentives and tools for their development. Therefore, in the second phase, we strive to attract to the Project community those institutions that, on the one hand, already have their unique achievements, but are also ready for changes and cooperation.

Tetiana Chernysh,
the head of the implementation
office of the Ukrainian-Swiss project
“Medical Education Development”

During 2023-2027, the Project will cooperate with:

- Bukovinian State Medical University (partner of the first phase),
- Zhytomyr Medical Institute (partner of the first phase),
- Zaporizhzhia State Medical University,
- Ivano-Frankivsk National Medical University,
- Andrei Krupynskyi Lviv Medical Academy (partner of the first phase),
- Danylo Halytsky Lviv National Medical University,
- Bogomolets National Medical University,
- Sumy State University,

- I. Gorbachevsky Ternopil National Medical University (partner of the first phase),
- Uzhhorod National University,
- Kharkiv National Medical University (partner of the first phase).

The selection of partners for the second phase of the Project was a great challenge. Each applicant tried to talk about the challenges and ways of overcoming them based on the institution analysis, and not just to impress the committee. Our team appreciates sincerity and believes that common values help to work effectively and to improve. Therefore, we gave preference to such applications. I congratulate the new institutions in the great team of the Ukrainian-Swiss project and promise that it will not be easy, but it will be interesting, exciting, and motivating!

Olena Ignashchuk,
medical education coordinator of the
Ukrainian-Swiss project “Medical
Education Development”

In this edition of the newsletter, we talk with the Project partners about what they are proud of, what mistakes they learn from, how they invest in students and teachers, and also discuss their plans for the future.

So, let's get started!

DANYLO HALYTSKY LVIV NATIONAL MEDICAL UNIVERSITY


Date of foundation:

November 16, 1784


Number of students:

4 466


Number of interns:

1 710


Number of teachers:

1 350


Number of faculties:

6


Education format:

offline

LNMU IS PROUD OF:

The university strives to actively involve students and interns in mastering the most modern technologies used in the provision of medical care. For three years, specialists of the Department of Surgery, Plastic Surgery, and Endoscopy of the Faculty of Postgraduate Education on the basis of the Lviv First Territorial Medical Association have been successfully conducting minimally invasive surgical interventions using the Da Vinci robotic system. The Da Vinci robotic system enables a surgeon to perform minimally invasive surgery using advanced instruments and high-definition 3D imaging in hard-to-reach surgical places. Our interns and participants of the thematic improvement cycles for surgeons can also gain such skills.

Certainly, our university is proud of its Museum of Human Diseases and Anatomy Museum. Both are included in the State Register of Scientific Objects, which are national property. Created at the end of the 19th century, these museums are unique both for Ukraine and for the whole world. Our museums are a buzzing beehive during the classes of students working with unique exhibits, the rustling of artists' brushes, discussions at scientific meetings, and the admiring glances of visitors. We will be glad to see you inside the walls of our museums!

**WHAT MISTAKES AND DECISIONS
DOES LNMU LEARN FROM:**

Unfortunately, LNMU was unable to convince the representatives of the Ukrainian-Swiss project "Medical Education Development" that we need to join the first phase of the Project. We did not analyze the existing problems and did not create a plan for implementing ideas. But we have worked on our mistakes and are glad to join the second phase of the Project.

LNMU INVESTS IN:

At LNMU, we are clearly aware that tomorrow our students will become doctors who will make difficult decisions, and scientists who will overcome serious challenges. And together they will develop practical medicine and science in Ukraine. Teaching such specialists requires balanced and large investments, as well as providing them with access to modern knowledge, technologies, and achievements of the international scientific community. We invest in students through the proper and continuing education of teachers. We care about the constant improvement of the technological base, regularly updating the training programs of our HEI.

KHARKIV NATIONAL MEDICAL UNIVERSITY



Date of foundation:
January 17, 1905



Number of students:
4 184



Number of interns:
722



Number of teachers:
1 088



Number of faculties:
8 and a medical college



Education format:
online (partially practical classes offline)

KHNMU IS PROUD OF:

Our university is glad to be a part of the Ukrainian-Swiss project “Medical Education Development” in the first phase and now. Over the years, we managed not only to implement plans to improve the learning environment but also to learn to talk about ourselves. An extraordinary experience for us was the participation of KhNMU representatives in the Marathon of Medical Education and the podcast *Tangible Medical Education*.

In one of the episodes of the podcast, host Mychailo Wynnyckyj, together with Iryna Leshchyna, the vice-rector for scientific and pedagogical work of KhNMU, reflected on the state of medical education during the war. In another episode of the podcast, together with Inna Chukhno, deputy director of the educational and scientific institute of the quality of education of KhNMU, they discussed the quality of higher medical education and simulation technologies in education. This was not only an opportunity to tell about our experience, but also an incentive for further improvement.

KHNMU INVESTS IN:

It is extremely important to invest in education because education is our future. Our university invests in people who are engaged in the educational process. These are students and teachers. We believe that teachers should continuously develop professionally. Moreover, we strive to involve the best students in teaching at KhNMU in the future. We invest in our future.

WHAT MISTAKES AND DECISIONS DOES KHNMU LEARN FROM:

We regret that we were not able to implement the idea of creating a student space at KhNMU. It was supposed to be a space where students could relax, study, and work. However, we did not analyze enough and did not even come close to imagining how much work would have to be done. It was necessary to consider the peculiarities of the location of potential premises in order to calculate the necessary funds. The analysis of location options took a lot of time. We could not make a final decision. Soon the COVID-19 pandemic started, and we had to postpone this initiative. This case taught us that important decisions should be made within a specified period of time. We hope that we will be able to implement the future ideas because we will have not just a dream, but concrete steps for its implementation.

BOGOMOLETS NATIONAL MEDICAL UNIVERSITY



Date of foundation:
1841



Number of students:
11 984



Number of interns:
1 750



Number of teachers:
1 580



Number of faculties:
8



Education format:
offline

BNMU IS PROUD OF:

Our university is one of the oldest medical universities in Eastern Europe. The names of world-famous scientists and educators who changed the history of medicine are associated with it. And exactly here in 1918, we started teaching medicine in the Ukrainian language.

Among the features of the educational process, we would like to note that it is already the second year when our first-year students have the opportunity to study in English-speaking groups in order to master professional English terminology, which creates more career prospects. The university has the most modern distance learning platform LIKAR_NMU, which provides online access to educational opportunities for 20 thousand users. The use of such a platform makes it possible to design both a standardized and an individual study structure for each student.

The university is always involved in overcoming the challenges our state faces. Thus, during the COVID-19 pandemic, employees of clinical departments of the university and interns were involved in curative and preventive work in the health care institutions of Kyiv. Currently, students, interns, and teachers work as part of emergency teams, are partially mobilized to the Armed Forces of Ukraine, territorial defense, participate in the work of charitable and volunteer organizations. Medical specialists of the university have developed guidelines for the treatment of the wounded with combat injuries. Every day they consult, treat, and operate on the wounded during hostilities military and civilians.

The university is especially proud of its student self-government: the student council, the student scientific society, numerous student scientific groups. These all are powerful organizations that conduct social, educational, and entertainment activities. The students are the initiators of many events and are always at the epicenter of them!

I. GORBACHEVSKY TERNOPIL NATIONAL MEDICAL UNIVERSITY



Date of foundation:
1957



Number of students:
5 037



Number of interns:
618



Number of teachers:
677



Number of faculties:
5



Education format:
offline

TNMU INVESTS IN:

TNMU invests in students through teachers. Constant improvement of the scientific and pedagogical staff provides an opportunity to improve the educational process, introduce new learning technologies, and master practical skills. Thanks to proper teaching, students learn better. The university pays special attention to raising the level of foreign language proficiency among educators, mastering modern teaching technologies, and using equipment. For students, we strive to constantly improve the material and technical base and information support.

TNMU IS PROUD OF:

One of the important successes of the university is the establishment of the simulation training center, which is equipped with modern equipment, including mannequins, phantoms, etc. The creation of such a center provided an opportunity to introduce simulation learning technologies into the educational process at the undergraduate and postgraduate levels of education. Moreover, TNMU was the first university in the country to introduce an objective structured clinical exam and start training paramedics. The center has become extremely relevant in the training of specialists for emergency care, instructors of basic and advanced resuscitation measures, military doctors, combat medics, employees of the Ministry of Internal Affairs, State Emergency Services, and the civilian population.

WHAT MISTAKES AND DECISIONS DOES TNMU LEARN FROM:

At one of the newly created departments, the number of days to make up missed classes and to get consultations was two hours per week. Such a schedule was very inconvenient and led to untimely liquidation of academic debt by students. In the end, the university decided to increase the days for making up classes and hours for consultations. This example taught us how to schedule consultations based on the needs of students.

SUMY STATE UNIVERSITY



Date of foundation:
July 30, 1948



**Number of students
(health care specialties):**
1 150



Number of interns:
205



**Number of teachers
(health care specialties):**
150



**Number of faculties
(health care specialties):**
2



Education format:
offline

SUMSU INVESTS IN:

The university works according to the principle: investment in a teacher = investment in a student. It is important for us to be student-oriented, and at the same time to pay attention to the development of educators' potential as well as to contribute to the comprehensive development of the individual. Our students and teachers have the opportunity to undergo internships, participate in various trainings, seminars, conferences, carry out prestigious grant projects, etc.

SUMSU IS PROUD OF:

The Faculty of Medicine was founded in 1992. It is a very young, but ambitious specialty in our university. We can immediately implement the best modern practices, and not to change old ones. We have already reached the level of an educational and scientific medical institute. A university clinic is operating on our base. It is a modern, properly equipped and accredited polyclinic-ambulatory health care facility.

An important achievement for our institution is a receiving by a group of scientists of the biomedical research center and the *SUMEYA* center of two Horizon Europe projects in 2022: "Towards MXenes' biomedical applications by high-dimensional immune MAPping" and "Towards the development of a new antibacterial strategy for dentistry."



IVANO-FRANKIVSK NATIONAL MEDICAL UNIVERSITY



Date of foundation:
July 4, 1945



Number of students:
4 511



Number of interns:
887



Number of teachers:
799



Number of faculties:
4 and a medical college



Education format:
offline (lectures online)

IFNMU IS PROUD OF:

The university is introducing innovative models of education, such as “Virtual Patient” and “Educational College Hub”. The latter took first place at the All-Ukrainian competition “Pedagogical Oscar – 2023”. Also, the university has one of the best sports facilities with an indoor swimming pool, sports halls for basketball, volleyball, mini-football, tennis, martial arts and strength exercises, and outdoor courts for football, basketball, and tennis.

IFNMU has a wide network of clinical bases, where students improve the necessary clinical and non-clinical skills. In addition to regional and city health care facilities in Ivano-Frankivsk, the list of clinical bases also includes a primary health care center in the village of Uhryniv and an outpatient clinic of general practice – family medicine in the village Ivanykivka. There is an interdepartmental training and rehabilitation center “Arnica” in Yaremche, where students of the specialty “Physical therapy, occupational therapy” undergo practice. Rehabilitation and health camps for hearing-impaired children are held here annually.

We also have a special project for children. “Hospital for Bear Cubs” gives students the opportunity to help children overcome their fear of doctors in a game format.

IFNMU INVESTS IN:

Both students and teachers comprise a system of higher education and are important for the success of the university. The optimal balance of attention to each group is the key to achieving high-quality education.

How we invest in students:

- educational materials, laboratories, library resources;
- scholarships and support;
- student events, exhibitions, conferences, sports programs.

How we invest in teachers:







- funding of studies and trainings;
- involvement of teachers in scientific research;
- providing teachers with resources for creative teaching and research work.

WHAT MISTAKES AND DECISIONS DOES IFNMU LEARN FROM:

During the last years, our university has paid insufficient attention to international cooperation, particularly to the development of grant activities and participation in international projects involving foreign investments. This led to a weakening of the institutional, academic, and administrative potential, limited opportunities for students and teachers to participate in international exchanges, joint educational and research projects. This affected the fact that the university was not selected to participate in the first phase of the Ukrainian-Swiss project “Medical Education Development”. We had time to fix the situation. Now we are among the partners of the second phase of the Project.

ZAPORIZHZHIA STATE MEDICAL UNIVERSITY



	Date of foundation: 1903
	Number of students: 5 459
	Number of interns: 1 051
	Number of teachers: 780
	Number of faculties: 7 and a medical college
	Education format: mixed (online and offline)

ZSMU INVESTS IN:

The question of choosing who deserves more investment – a teacher or a student – does not arise in our university. The activity of ZSMU is structured in such a way that it organically combines the interests of both, the student and the teacher. The university implements a student-centered approach: all necessary conditions are created for students to acquire professional knowledge and skills. We have a modern campus with educational buildings, dormitories, training centers, a branch of the university clinic, and research laboratories. Moreover, modern equipment was provided. It includes an anatomical table “Anatomage”, virtual patient “Body Interact”, interactive mannequins, 3D rooms with 3D anatomy systems, a multifunctional educational and scientific complex with a library, etc. However, the university also pays great attention to the continuing professional development of educators, creating conditions for professional growth and improvement. The university constantly organizes thematic and specialized courses for teachers, including the study of foreign languages. Both students and teachers can undergo internships in HEIs and scientific organizations of the EU and other countries in the world.

WHAT MISTAKES AND DECISIONS DOES ZSMU LEARN FROM:

A few years ago, we thought about opening a branch abroad. Unfortunately, the COVID-19 pandemic and then a full-scale invasion prevented the implementation of this idea. Currently, due to close proximity to the front line and the difficulties associated with the introduction of offline education for Ukrainian and foreign students, we strongly feel the need to continue working in this direction and organize the educational process in a safer territory of Ukraine or abroad. We have been negotiating with partners, but sometimes the process is too slow, sometimes there is a lack of external support from state bodies, and sometimes we encounter the irresponsibility of some agents. It frustrates us, but at the same time sustains our firmness, endurance, desire to look for alternative ideas that will open the way to the realization of the set goal.

ZHYTOMYR MEDICAL INSTITUTE



Date of foundation:
1875-1906



Number of students:
1 100



Number of teachers:
128



Number of faculties:
9



Education format:
mixed
(online and offline)

ZHMI IS PROUD OF:

The absolute priority of the educational process in ZhMI is the practical training of students. The majority of practical classes are held in the laboratories of our simulation center. During the last academic year, the instructors of the center also conducted more than 100 trainings for educators and residents of the region's communities. The most vivid training was in May 2023 together with rescuers of the State Emergency Service of Ukraine in Zhytomyr Region and specialists of the Center for Emergency Medical Aid and Disaster Medicine. Students in teams with experienced specialists were learning how to provide first aid to victims with various degrees of injuries.

Another significant event for ZhMI was the opening of the first training and resource center in Ukraine with the implementation of a universally progressive model of home visits to families with children from 0 to 3 years old. The center was opened with the support of the United Nations International Children's Emergency Fund (UNICEF). Thanks to the center, ZhMI will be able to improve conditions of practical training of future nurses, modernize educational programs of continuing professional development for medical professionals, and introduce courses on responsible parenthood for married couples.

ZHMI INVESTS IN:

It is worth investing in the development of both teachers and students. A motivated teacher is the key to continuous development of an educational institution. On the other hand, investment in students is not less important. For example, recently active members of the student government began to look for additional opportunities to implement their own ideas and eventually joined the Upshift program. As part of the program, a project was created to spread basic medical knowledge among the city community. Now they manage this activity on their own, and we try to support and help them. Sometimes support is not only money but also time and attention.

WHAT MISTAKES AND DECISIONS DOES ZHMI LEARN FROM:

We paid insufficient attention to the course "Humanity and Empathy in Health Care". The teachers of the institute are interested in the manual. They use these materials for preparing lectures or practical classes. However, we have not launched a specialized course on this topic. While other HEIs have successfully done so. This situation taught us not to forget to learn from the success of others and adopt the best experience. We have convinced ourselves that we should not wait for initiatives and changes, we need to gather a team of like-minded people and move forward. We will definitely launch this course.

BUKOVINIAN STATE MEDICAL UNIVERSITY



Date of foundation:
1944



Number of students:
3 378



Number of interns:
678



Number of teachers:
608



Number of faculties:
6 and medical college



Education format:
offline

BSMU IS PROUD OF:

In 2024 it will be 80 years since the foundation of BSMU. We are most proud of our history of continuous development, still grounded on profound traditions. Starting after the Second World War with five buildings, 75 teachers, and the first batch of 88 doctors, today the university educates more than 4000 future and current specialists and has 1200 employees.

Currently, our university is proud of the Center of Simulation and Innovative Technologies in Medicine *COSMIT*, the Medical and Psychological Center, and international cooperation. The *COSMIT* simulation center started working more than four years ago and is constantly developing, also thanks to the significant support of the Ukrainian-Swiss project "Medical Education Development". The medical and psychological center has been operating since 2004. Its employees provide psychological support and assistance to the entire university community. In the center, psychological intensive trainings are held. Moreover, there is a playback theater for students and employees.

BSMU INVESTS IN:

High quality of students' education is impossible without investment in teachers. At the same time, the sense of the work of educators and the university is an investment in students. We are talking about diverse investments – financial, intellectual, moral, emotional, and value-based. Medicine is developing extremely rapidly these days, therefore, without constant update, knowledge and skills quickly become outdated. We live in an era of role-changing of a teacher from a source of knowledge to an intermediary between the ocean of knowledge and a student. It can be described metaphorically: instead of feeding a student fish from this ocean, we as teachers should give him fishing gear, teach him how to use it, and distinguish between fish that can and cannot be eaten.

It is extremely important for us that educators share the right values because their own attitude towards patients, colleagues, and students influences the development of appropriate attitudes in students. Therefore, the development of the university is impossible without the right balance of investments in both teachers and students, as well as their interaction and cooperation.

UZHGOROD NATIONAL UNIVERSITY



Date of foundation:

October 18, 1945



**Number of students
(health care specialties):**

2 458



Number of interns:

448



**Number of teachers
(health care specialties):**

476



**Number of faculties
(health care specialties):**

5



Education format:

mixed (online and offline)



УжНУ – це якісна навчальна база для підготовки до медичної професії. При медичному факультеті функціонує новостворений симуляційний центр.

UZHNU IS PROUD OF:

A modern university is not limited to achievements only in education and science. The mission of the university is to serve society and direct educational and scientific efforts to the needs of this society. Uzhhorod National University unites more than 2500 employees and about 14000 students. Considering that the population of Uzhhorod as of 2022 was about 115000 people, statistically every seventh citizen is a member of our large university family. This gives us a motive to work and improve the environment around us and to contribute to the development of the urban community and society as a whole.

UZHNU INVESTS IN:

We need the best teachers to provide the student with the greatest possible support, the most up-to-date teaching materials, the most advanced experience, and practical skills. Uzhhorod is not the center of a powerful industrial and scientific infrastructure, and the existing limitations of the budget do not provide an opportunity to financially attract professors, clinical experts, and "stars" from other cities of Ukraine or from abroad. Therefore, our best solution is to develop our teachers and invest in their professional improvement in didactic, scientific, and clinical areas. The investment in teachers will bring new modern experiences to daily classes. Moreover, it will give the best specific effect per unit of invested funds and efforts, multiply knowledge, and develop the competences of our students more effectively. That is why our choice is to invest in teachers since the multiplier effect of this decision is obvious.

WHAT MISTAKES AND DECISIONS DOES UZHNU LEARN FROM:

In 2015 the administration of the medical faculty of UzhNU together with a team of proactive teachers considered the idea of forming new student groups based on the student's performance level. Before implementing this initiative, the management of the institution had a discussion with student self-government. Opponents argued that this step will lead to a decrease in the level of education and the graduation of untrained specialists. Attention was drawn to the fact that discrimination based on the level of knowledge is unacceptable, and the rating of academic success itself is not objective enough to consider only this indicator. In the end, the idea was abandoned. We learned to consider the importance of the moral aspects of every decision, even if the intentions were primarily good.

ANDREI KRUPYNSKYI LVIV MEDICAL ACADEMY



Date of foundation:
December 22, 1772



Number of students:
1 158



Number of teachers:
147



Number of faculties:
5



Education format:
mixed
(online and offline)

LMA IS PROUD OF:

LMA is proud of its inclusive educational process. For more than 20 years, students with visual, hearing and musculoskeletal impairments have been studying in the academy. It was a long journey. By trying and making mistakes, we developed special methodologies of teaching and studying, and learned how to communicate through touch and hearing. Our teachers recorded audio lectures on all disciplines of the curriculum for the training of visually impaired massage therapists. Moreover, they prepared and published textbooks in Braille. The academy is preparing the "Sign Dictionary of Medical Terms for the Deaf" for publication. There is a selective course "Sign Language" in the educational process of LMA for all educational programs.

LMA INVESTS IN:

Investing in the education of students will help to prepare high-quality graduates who will contribute to the creation of a positive image and reputation of HEI. Providing scholarships, grants, and other forms of financial support to students makes it possible to attract talented and ambitious applicants and increases the competitiveness of HEI. Modern tools and technologies will contribute to the strengthening of the quality of education and the acquisition of relevant skills and abilities.

Professional teachers are the basis of higher education. Investing in their comprehensive and professional development as well as the development of research activities directly affects the quality of education. Teachers are able to develop and apply innovative programs and teaching methods. Financial support of educators motivates self-improvement and fruitful work at their favorite workplace. It is important to balance investments between these two vectors to achieve successful results.



We are looking for the beginning of the activities of the second phase of the Project. As soon as they start, we will definitely tell you about them, invite to participate and jointly choose the most effective mechanisms for the development of medical education and health care in Ukraine. While we are waiting for official registration documents, let's remember the final events of the first phase of the Project. To learn more about the plans for the second phase of the Project, see the "Announcements" chapter.

PROJECT EVENTS

STUDY TOUR TO SWITZERLAND: MEDICAL EDUCATION POLICY AND UNIVERSITY CLINICS



Clinical training should form the basis of the education of doctors and nurses. The activity of university clinics, affiliated hospitals, and the involvement of all health care institutions in the training of future medical specialists are the basis of a high-quality system of medical education. On June 5-9, 2023 the Project organized a study tour to Basel and St. Gallen for representatives of the Ministry of Health of Ukraine, the National Health Service, hospitals, and medical universities in order to study the Swiss experience of developing medical education and ensuring proper clinical training of specialists at all stages of the educational process.

A lot was seen, discussed, noted down, and it is extremely difficult to emphasize only a few key points, but we think it is necessary to dwell on the following:

- University hospitals and medical universities in Switzerland are independent institutions. These institutions work together to train students and interns. They build a management system for educational activity; determine the possible workload and the number of students they can train effectively. It is important to note that all specialists involved in the educational process combine three roles: teacher, clinician, and researcher. According to Swiss colleagues, only such a

combination of roles can ensure a proper professional background for interaction with medical students. It should be emphasized that every health care institution in Switzerland is involved in the training of students and interns. Although there is a requirement that a certain part of the training of a student or intern takes place in a multidisciplinary university hospital, the other part may involve working in a small private practice or a local hospital. Students are encouraged to gain different experiences and get to know different organizational cultures and interactions.

- Studying directly in the hospital begins already during the first year of

learning. First, students get acquainted with the work of the hospital, observe the work of doctors, participate in case discussions with them. With each subsequent year of study, the responsibility of students increases: they collect medical history, diagnose, practice skills of interaction in a team and with patients. Anticipating your question, most patients are happy to interact with students because they understand the importance of learning and actually like having multiple professionals interested in their health.

- If you look at the curriculum and study formats, you will see that there are a lot of different subjects in the student schedule, and the teaching methods are mostly interactive. During all years, students study clinical disciplines, work on the development of ethics and communication skills, study project management and other non-medical disciplines. In the student schedule, you can see the following formats: lectures (1.5 hours per week, mostly allocated to independent study), visiting patients together with doctors or residents, analysis of clinical cases, analysis of diagnostic results (for example, discussion of an X-ray), journal club (for discussion of important articles and other publications), workshops on clinical thinking, practical seminars on development of decision-making skills, organization of hospital work, use of medical protocols, etc. In addition to regular classes, interdisciplinary councils on complex clinical issues, reports of narrow specialists, winter and summer schools are held.

- The experience of organizing a simulation center where students can study themselves also turned out to be an interesting idea. Here students practice skills almost on their own. There is an opportunity to improve skills in ultrasound, gynecological, urological, ophthalmological procedures, as well as in emergency care. Senior students can play a mentor's role to teach younger



colleagues, otherwise, everyone has free access to mannequins and available equipment.

- Regarding postgraduate education and continuing professional development, the Swiss Institute of Postgraduate and Continuing Medical Education (SIWF) is responsible for the content and quality of the programs. The institute includes representatives of medical associations (which exist at the city, district, and canton level), medical education institutions, health care institutions, and the federal health care administration. The main task of SIWF is to form requirements for the content of postgraduate education programs and to accredit education centers, which can be hospitals, university departments, and private practices. Today, Switzerland has about 1500 accredited training centers.

Of course, this is not all interesting and useful aspects that the participants saw and learned during the study tour to Switzerland. However, the most important thing is the changes that specialists will be able to implement in Ukraine in order to ensure the improvement of the quality of medical education, especially the strengthening of the clinical training component. Although the Swiss colleagues noted that reforms take time, the most important is that changes require initiative and the understanding that the outdated education system cannot ensure the quality and safety of medicine today.

First of all, I drew attention to the fact that the educational process is not aimed at the number of diplomas obtained, but at the high-quality training of doctors. The number of students in the master's program is smaller than in Ukraine, but the quality of training is much better. This can be achieved due to the training in small groups: a teacher-clinician works with a group of 5-6 students. From the first year, students are involved in work and study directly in the hospital. It was also very impressive that there is a form of public-private partnership: a private certification agency, which includes representatives of hospitals, universities, health authorities, etc. The agency receives orders from interested parties for the attestation and accreditation of educational programs, but it remains independent from other bodies and institutions.

Yurii Ordynskyi,
medical director of the Rivne
Oblast Clinical Hospital

Today we focused on studying the activity of the university hospital. We did not talk only about administration, but also explored the process of acquiring clinical skills and visited a simulation center. Despite different institutional features, it turned out that we have many similar problems and possible successful solutions that we can implement.

Mykhailo Ryabinchuk,
chief specialist of the Department
of Professional Competence
Development at the Center for
Public Health

We are extremely grateful to Professor Renato Galeazzi for a very meaningful program of the visit and assistance in its implementation in Switzerland.



STUDY TOUR TO THE NETHERLANDS: MEDICAL EDUCATION AND DEVELOPMENT OF A MEDICAL UNIVERSITY

ON JUNE 19-23, MEDICAL EDUCATORS, MANAGERS OF MEDICAL AND NURSING HIGHER EDUCATION INSTITUTIONS VISITED MAASTRICHT UNIVERSITY

In June with the support of the Project, another educational trip took place. 25 medical educators, managers of medical and nursing higher education institutions visited Maastricht University (the Netherlands), where they studied the experience and were inspired by the activity of the medical faculty of the Dutch HEI. By the way, Swiss specialists used the experience of Maastricht University when planning the reform of medical

education several decades ago.

The history of Maastricht University began with medical education. In 1974 the Faculty of Medicine was founded here. Today, the university takes the 36th position in the ranking of European universities and is also among the top 10 medical schools in the EU. However, it is not the place in the rating that is the most valuable for our trip, but rather those features of the educational process that the

specialists of the HEI managed to implement and develop.

Our experts were able to see and discuss with their Dutch colleagues the values and visions on which the educational process at Maastricht University is based, how exactly the educational process is structured, what the university's development strategy consists of, and how the institution forms students' inclination to self-directed learning formats.

The participants talked about the values and structure of the university with Pamela Khabibovich, rector of Maastricht University. Among the key

principles on which the educational process in Maastricht is built are diversity and inclusiveness, integrity, sustainability, mutual respect, transparency, and democracy. These principles determine the interaction of participants in the educational process and partners of the institution.

Let's emphasize several key points that we consider important for the further development of medical education in Ukraine:

- To ensure the clinical component of learning, the university signs an agreement with the hospital, which becomes a university hospital, but continues to be an autonomous institution. All hospitals in the Netherlands are private, and their activity is regulated by the Ministry of Health. However, the general regulation of the activity of autonomous medical universities for the undergraduate level of medical education is carried out by the Ministry of Education. Postgraduate medical education and continuing professional development of medical specialists are already subordinated to the Ministry of Health.
- In the simulation center, training is structured in such a way as to ensure attention to the development of the competences of each student. The first visit of students to the center is an introductory one. Then students start to perform small manipulations, practice skills on basic mannequins. Training in the simulation center begins during the first year of study. It is important that the picture of normal anatomy and physiology of organs and systems studied by students coincide with their ability to examine the relevant parts of the body. Each student has a skills coach who sees progress over the years and who can be asked for additional training. Each student also has



a communication and reflection skills supervisor.

- Students start studying family medicine during the first year. Problem-oriented learning, on which the educational process at the university is based, involves solving certain “problems”, identifying issues, searching and studying literature, and discussing solutions. Students begin to master topics about general practice-family medicine while solving such “problems”. This subject is studied as a separate course in the fifth year. The course lasts 10 weeks. A third part of graduates choose general practice-family medicine as their specialty for residency.
- Research is an integral part of the work of every educator. Research results are integrated into the work of the hospital and published in international journals. 4520 articles were published by Maastricht University employees last year in international journals.
- Maastricht University pays special attention to continuing and consistent development of medical educators. In order to teach someone, a specialist needs to undergo training and obtain the qualification

of a university teacher. The received certificate is valid in all universities in the country. Also, educators constantly take specialized courses on teaching skills and learn from each other's experience. Employees of the Department of Education Development are responsible for the development and implementation of this training.

These are not all features that we consider valuable for the development of our medical education. But listing everything is impossible for a newsletter note. Therefore, together with the participants of the study tour, we will integrate the experience gained and the innovations seen in the institutions of medical and nursing education in Ukraine, including through further activities of the Project.

We express our special gratitude to Professor Wim Groot for his assistance in organizing the visit and supporting our Project on the path of reforming medical education in Ukraine.

FINAL MEETING OF THE PILOT INITIATIVE “ADVANCED NURSE PRACTITIONER”



During the meeting held on June 13 the project, together with partners and stakeholders, summarized the results of the pilot initiative “Advanced nurse practitioner”.

For more than two and a half years, the team of the Ukrainian-Swiss project “Medical Education Development” together with partners trained and helped nurses to improve their skills, as well as to improve the availability of services for patients and the efficiency of the use of health care resources.

During the meeting the participants discussed the opportunities that nurses got due to the expansion of their roles and responsibilities, the experience of managers related to the strengthening of the role of nurses in the institutions, and new challenges in health care and competences medical professionals,

in particular nurses, should develop to address them.

It was extremely valuable to learn about the journey of each pilot PHC facility in the project, about saved lives and improved access to high-quality medical care. It is important that nurses feel more confident in their new role, and patients' confidence in them continues to grow.

We invite you to view the presentations of the participants and the discussion of the final meeting on our [Facebook page](#).



Read about our project “Advanced

nurse practitioner” on the [website](#),



or in the final brief of the [initiative](#).



And for those who want to know even more, we have a profound report on the process of implementation and achieved results of this [initiative](#).



AZOV SCHOOL OF FAMILY MEDICINE: A NEW MEETING

In June 2023, the 7th Azov School of Family Medicine was held with the support of the Project. Although this time the School was not held in Berdyansk, but in Transcarpathia, it was, as always, an intensive training course for PHC medical professionals.

On a competitive basis, the organizers of the School selected 40 participants from 660 applicants. It was an extremely difficult task, but traditionally only the most motivated primary health care specialists (family doctors, pediatricians, therapists, nurses) who have not previously participated in the Azov School were invited to participate. A new trend of the School is to invite family medicine interns in order to promote their integration into the professional community.

The Academy of Family Medicine of Ukraine is the leader and organizer of the School. In addition to the Ukrainian-Swiss project “Medical Education Development”, the partners of the Azov School are the Community Unions “Tviy Simeynyi Likar” and “Ukrainian Academy of Pediatric Specialties”. Among the guests of the event were the representatives of the National Health Service and the Ukrainian Healthcare Center.



As before, the Azov school had an extremely rich program. This program combined educational formats and socially useful activities. It lasted from seven in the morning until late at night for three days. Among the key topics of training were the best global standards of medical practice, international experience of PHC monitoring, problematic issues in the organization of health care; skills of BLS, AED, primary surgical

management of wounds, ultrasound; new services for war-affected communities, etc.

We know that the participants gained modern knowledge and skills, as well as inspiration to spread progressive ideas of primary health care in their own teams and to form a professional active community of specialists in family medicine. See you next time at the Azov School of Family Medicine!



AZOV CAMP FOR FAMILY MEDICINE INTERNS



Inspired by the Azov School, the Project created a new educational format exclusively for family medicine interns. At the end of June, the eight-day Azov Camp for Family Medicine Interns was held for the first time.

These were very busy days for the interns: theory, practice, clinical and communication skills, active recreation with elements of team interaction. Every day, the participants of the Camp did even more than the program of the event offered. No speaker could leave immediately after the class: questions, discussions of cases, requests for feedback on treatment strategies. And, after the end of the official program, the participants gathered

in the training hall and continued learning – otoscopy, ophthalmoscopy, neurological examination, ultrasound skills were practiced until midnight. Physical activity, intellectual exercises, discussions of books and watching movies together – the Camp collected all the pieces of the educational puzzle that are necessary for the comprehensive development of a medical professional and the promotion of the idea of lifelong learning. We would like to thank the extraordinary trainers of the Camp: Iryna Voloshyna, Fedir Lapiy, Ivan Chernenko, Serhii Horishchak, Kateryna Gurienko, Oksana Petrynych, Olena Korotun, Khrystyna Stroich, Vadym Vus, Mladena Kachurets, Lilia Skolska, as well as the facilitators and coordinators of the Camp: medical doctors Kateryna Pochtar, Anastasiia Gibeskul, Maryna Opalenko, Ilha Remizova for organizing the event, supporting and empowering the participants throughout the Camp.

Let this event become an important step in the professional development of family medicine interns. We hope that this format will become no less popular than the Azov School

In the final reflection circle at the end of the Camp, one participant said that he went to the Camp very demotivated regarding family medicine. But here he found support and like-minded people who helped him to look at the profession from a different angle. Another participant was so touched that she could not control her emotions. During these eight days, they became friends and did not want to lose contact and planned to continue meetings to discuss professional topics. The presentations of the participants were impressive. We asked them to talk about not only medicine. They had a lot to share: experience working in an insurance company, practicing yoga, grounding techniques, volunteering, running a telegram channel on medical law, books, etc. There were two representatives of UMSA (Ukrainian Medical Students Association), a trainer in pre-medical care, a specialist in eating disorders in children, a fan of art therapy, and metaphorical cards as tools of psychological support. It is difficult to list everyone because all the participants are incredible. Imagine how interesting and unique they are in their medical institution.

Anastasiia Gibeskul,
a family doctor and peer group
facilitator, co-organizer
of the Camp

of Family Medicine. Gratitude to our partners Academy “Dobrobut”, Community Union “Tviy Simeynyi Likar”, Academy of Family Medicine of Ukraine.



MASTER'S PROGRAM “HEALTH CARE MANAGEMENT”



Do you remember that in May, the partners of the updated master's program “Health Care Management” announced the selection of participants for studying? And already in September, 25 bright and ambitious master's students, having overcome the “three people per seat” competition, began their two-year educational journey at NaUKMA to become professional managers in the industry. 14 students received full or partial scholarships for tuition fees from the Ukrainian-Swiss project “Medical Education Development”, the Charitable Organization “Together for Ukraine”, the Community Organization “Patients of Ukraine”, the Agency for Legislative Initiatives,

Ukrainian School of Political Studies, Global Medical Knowledge Alliance, as well as private patrons.

On the first day of study, students not only received greetings from Serhiy Kvit, the President of NaUKMA, and Svitlana Oksamytna, Dean of the Faculty of Health Care, Psychology and Social Work of NaUKMA, but also attended the first classes. Pavlo Kovtonyuk, co-founder of the Ukrainian Healthcare Center, and guest lecturer Oleg Petrenko, the first head of the National Health Service of Ukraine, gave the first lecture of the course “Health Care Systems and Governance”. And then students moved on to the study

of “Fundamentals of Public Health Thinking” together with the senior lecturer of NaUKMA Yulia Vernyhor.

The participants also met with other co-organizers and lecturers of the program to hear about their expectations and training plans: Tetiana Chernysh, head of the project office of the Ukrainian-Swiss project “Medical Education Development”, associate professor, lecturer of the Department of Sociology of NaUKMA, Nataliia Riabtseva, Matviy Khrenov, co-founders of the Ukrainian Healthcare Center.

We are sure that such an intensive start will motivate the master's students to immediately transform the acquired knowledge into bold and effective solutions in health care.

Different specialists study together with me, and only some of them are medical professionals. We are of different ages, with different professional and personal backgrounds. The lecturers are incredible. The program is very interesting and diverse, although the questions for discussion are sometimes unexpected.

Maria Kukushkina,

head of the Oncodermatology Center of the Dobrobut Medical Network, student of the program



While we are working on the final plans of the activities for the next six months and completing the registration formalities of the Project in the second phase of its implementation, we have prepared a visualization of what we plan to work on together with you for the next four years to improve medical education and the quality of primary health care provided in Ukraine.

Capacity building of the educational programs and institutions



Autumn school on medical education



Learning environment assessment of undergraduate students: DREEM



Learning environment assessment of postgraduate practitioners: PHEEM



Family medicine perception among medical students and educators: survey results



Policy development support



Simulation centers' strategic development



Simulation technologies in medical education: trainings for trainers



Simulation approaches in medical education: online course



OpenMEDIS for simulation centers



Innovative teaching materials on simulation approaches



Curricula revision



Certificate program for medical educators



Teaching excellence



English for medical educators



Peer groups for medical educators



Digitalization of medical education



Moodle and its friends: online course



Distance and hybrid formats of education



Azov camp for post-graduate training family doctors (interns)



Mentorship in health care: online course



Managerial competencies for strategic development



School of rectors



Workshops for the teams of pilot medical schools



Joint medical program of Kyiv-Mohyla Academy and Dobrobut



Health care management: master's program at Kyiv-Mohyla academy



Summer club



Strategic management in health care: online course



Health financing systems: online course



Quality in health care: online course



Enhancing students' agency



Strengthening family medicine component in education



Research capacities



Journal on medical education



Humanity and empathy in health care



Evidence-based medicine



Study-tours for medical doctors, nurses, medical educators and policymakers



Fundraising in health care: online course



Financial management in health care: online course

But in fact, there will be even more initiatives that meet the development needs of medical HEIs, primary care, current and future healthcare professionals



Human resources and trust to PHC



Peer groups for health care staff



Online platform "Booster" for PHC



Human resources in health care: online course



Register of human resources: concept implementation support



Occupational standards for PHC



Enhancing roles of nurses at PHC: training and advocacy



Forum of PHC nurses



Organisational culture for PHC facilities



Ethics and confidentiality at PHC



Azov school for family medicine and other CPD for PHC

Health care management



Health care management: master's program at Kyiv-Mohyla academy



Summer club



Strategic management in health care: online course



Health financing systems: online course



Quality in health care: online course



Enhancing students' agency



Strengthening family medicine component in education



Research capacities



Journal on medical education



Humanity and empathy in health care



Evidence-based medicine



Study-tours for medical doctors, nurses, medical educators and policymakers



Fundraising in health care: online course



Financial management in health care: online course

THIS TIME WE INVITED FOR THE DISCUSSION PETER SUTER, THE HONORARY PROFESSOR, DOCTOR OF MEDICAL SCIENCES, FRCA. LATELY, PROFESSOR PETER SUTER WAS A DEAN OF THE MEDICAL FACULTY OF THE UNIVERSITY OF GENEVA, THE HEAD DOCTOR OF THE INTENSIVE CARE DEPARTMENT IN THE UNIVERSITY HOSPITAL OF THE SAME UNIVERSITY.

He also headed the Swiss Academy of Medical Sciences. Peter Suter studied and did his professional training in Switzerland, Austria, and the USA. He made a lot of efforts to reform medical education in Switzerland.

In June we had an opportunity to meet Professor Peter Suter during the study tour which was aimed at learning the experience of university clinic functioning in Basel (Switzerland). And today we are really happy to have such a friend and mentor, who sincerely supports us to succeed in the medical education reform in Ukraine and openly shares his knowledge and experience. So, we talk about where to start the medical education reform, what to rely on, and where to get inspiration.

Recently you had an opportunity to meet Ukrainian colleagues during the study tour to Switzerland. What are your impressions? What conclusions did you make?

We had very interesting meetings and discussions! The medical education and training systems are very different in our two countries, but some of the questions and



challenges are similar. How to train young women and men for their future activities as medical doctors in the best way? How to combine in the undergraduate training theoretical and practical aspects? And finally, how to achieve in specialty training (internatura) in the adequate timeframe a good specialist, be it a family doctor or a narrow specialist, but experienced and ready to work independently? These are important questions, and we need to find answers, analyzing systems of medical education in different countries but also considering our own context. Great that we had an opportunity to discuss this with Ukrainian colleagues.

Where is the point of starting a medical education reform? And basically, how to understand that medical education reform is needed?

Health systems and needs, expectations of the population, as well as priorities of education and pedagogic methods, have changed significantly over the last decades. Analyzing these challenges, we considered the following aspects of

medical education in Switzerland:

- We had to combine better theoretical and practical learning in all years of the studies, ensuring practical skills teaching already in the first year.
- Ex-cathedra courses were frequently not appropriate and followed by few students.
- Students asked for a more active role in the acquirement of knowledge and skills: they wanted to have more educational formats – self-learning, problem-solving exercises, skills labs etc.

The requests for serious medical education reform came from three directions in our country. Specialist training centers and hospitals judged that the students were not well prepared for the start of clinical duties. Many teachers criticized the lack of coordination and priorities in the teaching program. Finally, the students felt that medical education lacked modern pedagogic methods, had too many repetitions, and too few relations to practical medicine in general. This situation didn't leave us a choice, we had to initiate implementation of changes. So, we started with pilot universities,



the most active educators, learning from the experience of Canada, the Netherlands, and building our own vision of good medical education.

Ideally, all medical education systems in all countries should undergo regular assessments and reviews. It helps to find out their strong points and to define the domains needing adaptations and reforms to improve the quality of teaching and training accordingly. We live in rapidly changing societies with continuous scientific and clinical developments. Education, practical training, and clinical activities must be adapted regularly to take these changes into account.

Should medical education be reformed simultaneously at all levels – undergraduate, postgraduate, and CPD?

Even in the case of the need for reforms in all three phases of education, a step-by-step approach seems appropriate to achieve good results in an adequate timeframe. A medical university can initiate and make its own reform, but such activity should include discussions

with partners and stakeholders of postgraduate-specialty training and CPD. You should start this communication at the early stages, as soon as the framework of reform is defined, and its key elements are outlined. This will allow early sensibilization and initiation of discussions for the two later phases. It is important that such cooperation could also give momentum for pilot and innovative programs, like peer groups (or so-called quality circles) development in CPD or the training of clinical mentors and teachers for postgraduate-specialty training

How long does it take to implement medical education reform?

Unfortunately, it won't happen fast. It can take years because there are no quick-ready solutions. I would recommend considering the following aspects for the successful reform. First, you should critically analyze the established curriculum. Don't address this just formally, revise thoughtfully the curriculum structure, content, applied teaching methods, identify gaps and possibilities for change. Then, in each institution establish a working

group of 5-7 experienced and motivated members to implement a reform project. These members must invest time and energy to make the appropriate planning of the whole process.

As the next step, you can revisit good examples of reforms and modern curricula in other countries. I would like to emphasize here that you should always look for good examples elsewhere, learn about modern pedagogic tools and methods. Look at what other universities are doing, partners in other countries, which pedagogic methods they use, and what topics are trendy among the professional community. Such an approach not only helps to identify steps for reform but also supports the continuous process of medical education quality assurance.

And finally, make a plan of concrete steps for the next few months, for the upcoming 1-3 years, and also in the longer run. Engage different professionals of the health system in discussions of the reform along the way: clinicians from hospitals and practitioners outside, teachers in medicine, nurses, students, etc. It is important to remember that reform is

not taking place in a vacuum, and not only 5-7 active members of a working group are responsible for it. So, inform regularly the faculty, students about the progress and the plan, motivate all actors by regular encouragement. Transparency during the planning and implementation is crucial for the acceptance of the proposed changes by the medical establishment and the general population.

One more important part is to establish a “steering committee” for the reform on the national level. This coordinating body should include experts from the teaching side, the clinical side, and the political level (executive and legislative).

And who is responsible for the implementation of medical education reform? Who are the key stakeholders in the process?

The Dean (or Rector) is responsible for the whole process of the reform on the local level. He or she delegates the leadership to the working group mentioned above and its leader. The support of the faculty and the university must be clearly demonstrated at several key points on the way to the introduction of the reform. Probably, not everybody is open and ready for some changes and novelties, somebody is inclined to protect the existing system. However, it is important to promote open-mindedness among colleagues. Try to get them on board of a promising, interesting venture. Profit from their experience, consider their remarks and proposals, emphasizing that together you can build an even better new learning institution.

Also, you should involve students in the process of the medical education reform. Remarks, criticisms, and proposals for improvements coming from the students have always to be taken seriously. However, some guidance must be provided only by



teachers and physicians actively involved in daily clinical work with patients. In my experience, the judgment of students can easily be included in the discussions of the working group mentioned above.

Is there a role for medical associations in medical education reform?

Yes, clearly. But like with students, constructive and active involvement is the key, with a good motivation for a better curriculum that contributes to better care for patients. If professional associations really represent clinically active doctors, they can play a crucial role during the reform process planning, and afterward while implementing the reform.

What factors should be in place to ensure the success of medical education reform?

The application of both a bottom-up and top-down approach is an important prerequisite for a successful reform. So, we should understand that quality medical education is not only defined by national policies and the needs of the population. It should also consider the requests and expectations of students, strengthening the role of motivated educators, their support

and training, integration of good developments and models from other universities and countries (for us such examples were the medical schools of Canada, some universities of the USA, Maastricht university).

If we are talking about the changes at the university level, the choice of the members of the working group responsible for the reform process is essential. They must show solid motivation, a clear will to invest time and effort in the common cause, a basic interest and competences in teaching and training, in new pedagogic methods. In addition, continuous support by the Dean and/or the Rector must be visible. A clear time plan must be established.

You have mentioned already ‘good medical education’ in our discussion. So, how do you define this aspect?

Good medical education produces good doctors with broad knowledge, learned skills, and a professional attitude. We can achieve this by using the motivation of students, their will to be trained for an interesting profession, to take responsibility, and to play an active role in constructive preparation for a demanding job. Never forget that these students are adults, not kids, and we should treat them as partners for building the future system of health care.

“TANGIBLE MEDICAL EDUCATION” PODCAST

IN SUMMER WE SUCCESSFULLY COMPLETED THE SECOND SEASON OF OUR “TANGIBLE MEDICAL EDUCATION” PODCAST

In summer we successfully completed the second season of our *Tangible Medical Education* podcast. Of course, we have not discussed all the most important topics of medical education. However, we believe that you, together with the host of the podcast Mychailo Wynnyckyj, a sociologist, trainer, and now the deputy minister of education, and great guests reasoned, reflected and asked yourself even more questions in order not to stop moving forward and continuously improve medical education in Ukraine.

We want to remind you about the last episodes of the second season, which we definitely recommend listening to if you haven't already.

In the 10th episode of the *Tangible Medical Education* podcast, we talk with **Anastasia Leukhina**, an independent facilitator, co-founder of the campaign [#пустітьвреаімацію](#), founder of the community organization “Horizontal. Medicine”, author of “Non-scary Book”, about the implementation of sustainable changes in health care, the importance of empathy for both patients and doctors, and whether it can be taught to medical professionals. We also talked about the importance of continuing professional development, the changes initiated by people, as well as about how to continue to live after loss, what “Non-scary Book” is about, and for whom it is. You can listen to this episode [here](#),

and buy Anastasia's book [here](#).



We are sure that many of you have been looking forward to meeting the guest of our 11th podcast episode again. This guest is a good friend of the Project, **Vsevolod Perelman**, doctor (MD, MSc, CCFP(EM), FCFP(C), CHSE-A, CIPS), associate professor at the University of Toronto (Canada), director of the simulation training center at Mount Sinai Hospital. In this episode, together with Vsevolod, we reflect on the experience of conducting simulation training remotely, get acquainted with the work of the simulation training center of the Mount Sinai Hospital, look for an answer to the existential question: should we spare the mannequins and other equipment of the simulation center, or allow students to use them for practice,



and delve a little deeper into the peculiarities of Canadian medical education. Don't miss this [episode](#).



In the 12th episode of the second season, we talk with **Olga Bershadska**, UNICEF educational trainer and consultant, NaUKMA teacher, adult learning expert, about plagiarism and academic integrity, changes in the culture of education, the peculiarities of student-teacher interaction in the online learning process. We also discuss what is



the role of teachers, whether it is possible to assess the development of such a component of competence as attitude, what is the value of peer groups, and how to become a good facilitator. Listen to this conversation [here](#),



and read more of Olga's thoughts on integrity [here](#).



In the 13th episode, we meet with **Ivanna Nebor**, the founder and head of the *INgenius medical platform*, an otolaryngologist surgeon, to focus on the topic of rehabilitation of our soldiers who were injured during the war, as well as to discuss medical education in Ukraine and the USA. So if you are interested in finding out what are the possibilities for improving the psychological rehabilitation of the military, how American medical education differs from Ukrainian, and how the American Step differs from the Ukrainian Krok, how the idea of creating the *INgenius medical platform* appeared and whether it



is worth translating recent medical publications into Ukrainian, then be sure to listen to this podcast [here](#).



We advise you not to miss the final sections of the podcast: "What have you read there?!" or "Why do I need books? I read the orders!" by Matviy Khrenov, as well as "Evidence-Based Medicine" by Dmytro Gulyaev. We won't reveal all the tips and tricks from our experts, but they are worth opening the podcast episodes. So, read only good books, and use only evidence-based medicine in your practice!

And the last episode is a warm conversation-reflection about what remained behind the scenes of creating a podcast: what our listeners liked the most and which episodes were listened the least, what experience we gained in the process of creating a podcast and how we chose topics, why we talked so much about evidence-based medicine, dignity, humanity, and why advised to read various books. Guests of the last episode of the podcast are Mychailo Wynnyckyj, a sociologist, trainer, lecturer of NaUKMA, Matviy Khrenov, co-founder of the Ukrainian Health Care Center, Dmytro Gulyaev, head of publishing, research and

educational projects of the community organization "Ukrainian Anti-Stroke Association", Anna-Veronika Krasnopolska, a communication specialist and one of the ideological inspirators of the podcast, as well as Bohdana Neborak, a Ukrainian journalist, lawyer, cultural manager, literary critic. Our bonus episode, the warmest conversation of the season is [here](#).



The *Tangible Medical Education* podcast was created by the team of the Ukrainian-Swiss project "Medical Education Development" in cooperation with [The Ukrainians](#) podcast studio.



We are truly grateful to the entire team, together with whom we managed to create a truly valuable product that the medical education community deserves!



THE BEST LEARNING OPPORTUNITIES

A unique opportunity to study at convenient time on relevant online courses created for you by the Ukrainian-Swiss project “Medical Education Development” together with partners. Choose yours and share your impressions with us, and most importantly, be sure to put the acquired knowledge into practice.

ONLINE COURSE “SIMULATION APPROACHES IN MEDICAL EDUCATION”

The course “Simulation Approaches in Medical Education” is available for educators, managers of medical HEIs, as well as CPD providers for medical professionals. Invited foreign speakers and Ukrainian colleagues share key theories, approaches and experiences regarding the features of adult education, the role of simulation in medical education and the organization of the simulation center. If you want to improve your teaching skills in a simulation center or improve the functioning of the center at the level of higher education institutions, then this course is for you. Available to study at your convenience. Search for a course on the [Skovoroda](#) platform.



ONLINE COURSE “MOODLE AND HIS FRIENDS”

This course is created for educators who want to make distance learning interesting, diverse and modern. Also, the course will be interesting for managers and assistants of educational programs, employees of departments, IT managers and administrators of educational systems. During the course, you will receive advice on building student-oriented learning, implementing the Moodle educational system, and learn about flexibility in the organization of the educational process. After completing the course, you will understand that Moodle can become your best friend on the way to implementing various educational approaches in learning!

So don't waste time, register for a free online course on the Moodle educational system on [Skovoroda](#) platform.



ONLINE COURSE “MENTORSHIP IN HEALTH CARE”



We firmly believe in the magical power of mentoring in health care. If you want to become a mentor, then this course is for you. The online course will be interesting for doctors who are already are or plan to be mentors, as well as educators who teach clinical disciplines in senior courses of medical HEIs. After completing the course, you will understand the role of a mentor in teaching clinical skills, learn how to apply the principles of adult learning and modern didactic approaches for the clinical professionalization of future doctors and interns. During the course, you will also understand how to provide effective feedback.

Do not miss the opportunity to gain modern knowledge and register today on [Skovoroda](#) platform.



The course was created in partnership with the “Dobrobut” Academy.

ONLINE COURSE “QUALITY MANAGEMENT IN HEALTH CARE”

The “Quality Management in Health Care” course will help health care facility managers to see the beauty of the quality management philosophy, offer the basic theory, as well as simple and understandable tools that can be immediately used in practice. The speakers of the course are practitioners. They share their own experiences using the tools that work for them. Yesterday they were asking the same questions as you, and today they are showing how quality management has worked for them.

The course structure includes meetings with mentors and group assignments. Prior registration is required for training. The current recruitment for the course has already been completed, but keep an eye on our announcements so you don't miss the opening of registration for the next recruitment. We invite you to [Skovoroda](#) platform, where you can familiarize yourself with the course schedule, [key topics and study requirements](#).



INTERNATIONAL EVENTS, CONFERENCES

AMEE – AN INTERNATIONAL CONFERENCE ON MEDICAL EDUCATION

#AMEE2023 is the world largest annual conference on medical education, which brings together various professionals involved in education: doctors, nurses, veterinarians and other professionals related to medicine. For the second year in a row, the representatives of the Project are participating in the event to present our achievements and learn the best world experience that can be adapted to our realities.

The key theme of the conference this year was inclusivity in medical education and science: gender issues, opportunities for people with disabilities, cultural and geographic barriers. Incredible stories of educators, scientists and students about barriers in their studies and work. However, by applying people-centered approaches to service delivery, these barriers can be overcome.

We can only be humans through other humans! That is why everything we do should be imbued with humanity and an effort to understand others. At the conference, I was impressed by the level of discussion about creating a safe space for students, where they can discuss even painful and unpleasant topics, and honestly admit that there are no ready-made answers to situations that occur in practice every day. This kind of space creates an opportunity for the development of future specialists. It was extremely



valuable to present our experience of peer groups development to such a professional community.

Olga Korolenko,
Monitoring and Evaluation
Coordinator of the Project

Also, special attention was paid to medical education in countries where war is going on. The symposium "Postgraduate Medical Education in Unstable and Conflict Conditions" was dedicated to Ukraine and Myanmar.

To describe my experience in a few words, it's networking and generating of ideas. Three thousand participants from all corners of the world, various branches and areas of activity related to medical education. These are incredible experiences, success stories and ideas that circulate in conversations. In my opinion, issues

of humanity and empathy, curriculum redesign, focus on clinical skills, development of science, in particular research in medical education, the development of medical communities for reflection and self-directed learning were extremely relevant for Ukrainian medical education. And also, a feeling of gratitude for all the support that was heard in response to the question – "Where are you from?". Ukraine is in the hearts and minds of everyone: Brazil, the Netherlands, India, the USA, Canada, Belgium, Great Britain, South Africa, Australia, New Zealand, Poland, Thailand, Ethiopia, Sweden! Everyone was thanked for their support and told about the indomitability of our soldiers, doctors, educators and students!

Olena Ignashchuk,
Medical Education Coordinator
of the Project



Next year the conference will be held in Basel, Switzerland. The Swiss Institute of Tropical and Public Health is located there. It is literally the home of our Project. We are sure that the Ukrainian delegation will be represented by an extremely powerful team and will share the experience of indomitability.

SUMMER SCHOOL IN LUGANO

On August 21-26, the 32nd Summer School on Politics, Economics and Management in Health Care was held in Lugano. The school brought together politicians, researchers, economists, and students for joint training, who not only gained knowledge, but also created projects to solve urgent problems in their communities. The multi-sectoral and international exchange of experience during training makes participation in the Summer School in Lugano particularly unique.

The summer school in Lugano was an extraordinary experience – a perfect combination of learning, interaction with colleagues from other countries, and fun, which really inspired me. The course “Methods of Community Involvement in Health Care” by the wonderful Nadine Luca and Maria Amalia Pesantes gave me a solid foundation for working with stakeholders. I am sure that this new knowledge will significantly improve the structure and accuracy of my work. Another very informative course, “Supporting Behavioural Change for Health Promotion through Multilevel Approaches,” taught by the brilliant Yana Manyuk, helped change my approach as a policy analyst to implementing social change. But, of course, the most valuable thing is the opportunity to communicate with participants from different countries, to discuss experiences and insights. The experience with which I returned to Ukraine is extremely important for building a better future.

Liubov Hura,

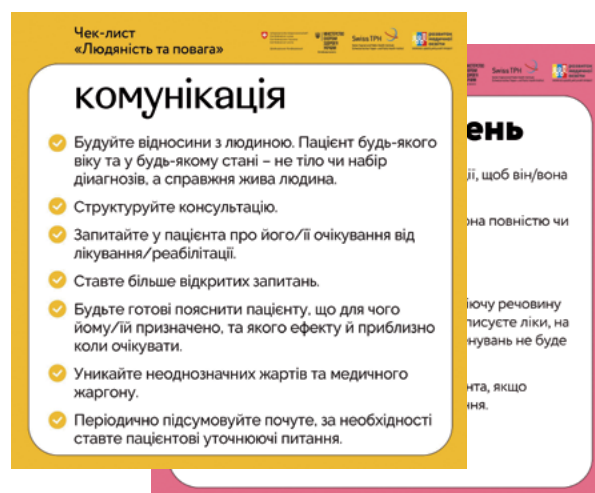
an analyst at the Ukrainian Health Care Center, a participant of the Lugano Summer School – 2023

This year, the School's program covered the following topics: migration, air pollution, ethics in public health, non-communicable diseases, system modelling, logistics in solving humanitarian issues, project management, supporting behavioural changes for health promotion, adaptive approaches to assessment, health care financing and much more. Plenary discussions are available on the [SSPH+ YouTube channel](#).



USEFUL MATERIALS

CHECKLISTS

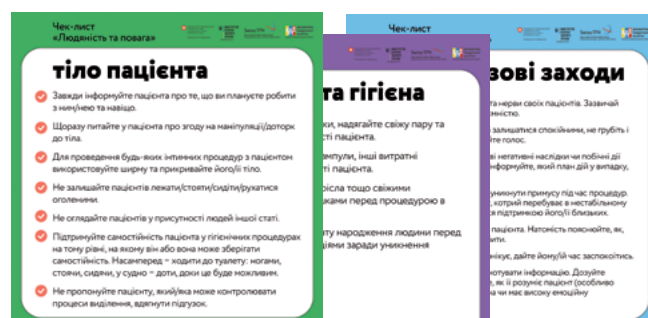


The communication skills of medical professionals are very important to build trust and ensure the proper treatment process. Patients can remember a careless word, look, or some other trifle for the rest of their lives. These simple things can become decisive in a patient's life, because after bad experience, he or she may stop seeking medical help and start to use alternative methods of cure or self-medication.

To help medical professionals pay attention to the key, but very simple and universal rules of interaction with patients, we offer several checklists. These rules are appropriate in various situations and will not require any special effort from you.

Download all checklists [by link](#).

The material was created based on the guide “Humanity and Empathy in Health Care”. This is the first Ukrainian publication on how to teach disciplines related to a patient-oriented approach in medical HEIs. Humanity and empathy are the skills that make you a competitive and successful professional.



REGISTER OF HUMAN RESOURCES IN HEALTH

The team of the Ukrainian Health Care Center, with the support of the Ukrainian-Swiss project “Medical Education Development”, has developed a strategic document “Register of Human Resources in Health: Conceptual Framework for Ukraine”, which is available [here](#).



The register will contribute to the understanding of the country's personnel potential in the field of health care and what strategic decisions will be needed. The register will accumulate quick and reliable information for the development

of new policies regarding human resources in health. It will also contain verified data on the professional path of a medical worker from entering an educational institution to leaving the profession, will store electronic confirmation of continuing professional development of specialists, and form confirmation of data about the staffing of medical institutions, for example, for concluding contracts with the National Health Service of Ukraine.

The registry will be useful:

- To employees or self-governing organizations: admission to the profession and accumulation of data on the professional path;
- To patients: when making a

decision to choose a doctor or health care facility;

- To employers: upon hiring, to check data on education and previous experience;
- To the Ministry of Health and its structures: to obtain data on human resources in the development of health care policies;
- To the National Health Service of Ukraine: for the validation of data on the personnel of the medical service providers during contracting;
- Medical HEIs: for entering data on undergraduate, postgraduate education and continuing professional development.

UPDATED WONCA TREE

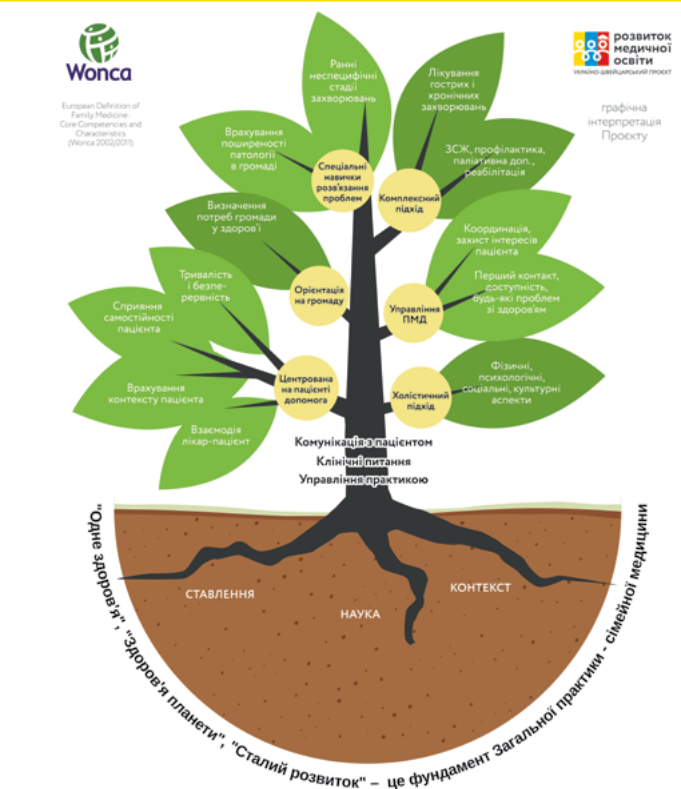
We are sure that all our readers know which tree we are talking about. The Wonca Tree is a graphic representation of the concept of general practice–family medicine.

In September 2023, the World Organization of Family Doctors (Wonca) updated the “tree” concept. The difference with the previous version is that the tree now has a soil that combines the concepts of “One Health”, “Planetary Health”, and “Sustainable Development”. This is the basis of general practice–family medicine.

The introduction to the updated definition states:

“One Health is an integrated, unifying approach to balancing and optimizing human, animal and environmental health. Planetary health is defined as the health of people and the natural systems on which human health depends, such as water, air and soil, which also affect plant life, food and energy systems.

Earth's natural systems are the basis of the Sustainable Development Goals. We all use the same resources and we are dependent on environmental factors. Recently, humanity has become aware of its role in the pollution of water, air and soil, which occurs both during everyday life and during work in the health care sector. Primary health care has the potential to positively influence the sustainable development of health care and solve problems associated with significant changes in climate and the



natural environment. As health professionals most closely involved with communities, primary care providers can advocate for measures to reduce the effects of climate and environmental change, encourage public participation, and promote measures that protect people from the effects of these changes”.

Source: <https://bit.ly/451mrcp>



Head of the Project Implementation Unit:

Tetiana Chernysh, PhD
tetiana.chernysh@mededu.org.ua

Project Leader:

Martin Raab, Head of the Department
Swiss Centre for International Health,
Swiss Tropical and Public Health Institute

Swiss Tropical and Public Health Institute
(Swiss TPH)
Kreuzstrasse 2, 4123 Allschwil,
Switzerland
martin.raab@swisstph.ch

Office contacts in Kyiv:

6b Liuterans'ka Str.,
01001 Kyiv, Ukraine

Phone:

+380 44 384 10 09



www.mededu.org.ua



[www.facebook.com/
MedEduUkraine](https://www.facebook.com/MedEduUkraine)



[www.youtube.com/channel/
UCuzomB6fdx05qaGhdXiyfGg](https://www.youtube.com/channel/UCuzomB6fdx05qaGhdXiyfGg)

The Project is financed by Swiss Agency of Development and Cooperation. Views and ideas, published here, belong to the author(s) and do not necessarily reflect views of Swiss Agency of Development and Cooperation.



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Swiss Confederation



MINISTRY
OF HEALTH
OF UKRAINE

Beneficiary of the project

Swiss TPH

Swiss Tropical and Public Health Institute
Schweizerisches Tropen- und Public Health-Institut



medical
education
development

UKRAINIAN-SWISS PROJECT

This publication is published within Ukrainian-Swiss Project “Medical Education Development”, which is implemented in Ukraine by Swiss Tropical and Public Health Institute (Swiss TPH) under support of Swiss Agency of Development and Cooperation.

©Ukrainian-Swiss Project “Medical Education Development”, 2023