

The Role of Medical Education Institutions in the Improvement of Human Resources Management of the Health Care System

L.A. Aprosimov, P.G. Petrova, N.V. Borisova

Abstract

The questions of adequate medical training, using new forms of organization and technology training, establishment of modern management services that ensure the efficient management of staff performance were discussed.

The urgency to improve human resources management by the problem of finding effective mechanisms to optimize the staffing of the health system in areas with low population density, including the training, retraining and further vocational training of medical personnel.

International and domestic experience shows that among the structural changes in health care, the purpose of which is to increase the efficiency of the system, the greatest success achieved in the field of action of the organization work with the staff, their training and retraining. According to the WHO, the cost of training and the use of human resources constitute 60 to 80% of the public expenditure on health care.

The country's transition to a system of market relations, the study and implementation of international experience in higher and vocational education change the concept of human resource management, methodology, and practical implementation of management tasks in order to improve the efficiency of health care organizations. The rational use of the limited capabilities of human resources, the introduction of new technologies in higher and secondary vocational education, social orientation in personnel work, increasing the motivation of health personnel in the distal areas contribute to its higher efficiency. The crisis of the state of health of the population and the increased demand for medical services do not only occur against the background of increasing scarcity of financial and material resources, but also inevitably accompanied by a lack of qualified personnel.

Under these circumstances, the medical staff is seen as a valuable resource of health, able to carry out skilled, accessible, cost-effective health care to the population. Quality performance of health care is possible only when adequate training in the use of new forms of organization and technology training, establishment of modern management services that ensure the efficient management of staff performance.

Conducted by the Government and the Ministry of Health reform changes in health care gave concrete results, expressed in the creation of a multi-level system of vocational training, improvement of material and technical base. At the same time, the effective use of health care personnel remains an urgent need for practical health care. The current situation in the health care system implies a profound change in educational policy. As Russian President Vladimir Putin rightly said: "Current conditions determine not only the new challenges of modernization of the health system, but also new requirements for the preparation of highly qualified professionals with world trends". The development of health and medical science is caused by the successful promotion of medical education and its degree of saturation of the achievements of biomedical research. The progress of biomedical science stimulates the development of medical education and its symbiosis with science, forms the curriculum, determining their quality, hence the efficiency.

Keywords: medical education, medical schools, health care.

Currently, there are over 16,000 higher medical schools that operate on a national level, and their activity is stimulated by leading international organizations: the World Health Organization, the World Federation for Medical Education, UNESCO, the Council of Europe,



the International Institute of Medical Education, the Association of Schools of Public health in the European region, the European Association for medical Education and others. At present, almost all developed countries of the world are carried out reforms in the system of medical education. Along with Russia, the new laws on education come into effect from 2013 in several European countries, radical amendments to the existing law on education adopted in the U.S. this year. Combining international and national efforts contributes to the development of medical education in the world and ensures the progress of this important field of human activity.

Virtually all countries, and our country, to recognize that the problem of the education of health professionals are systemic in nature, and share common positions: the inconsistency of knowledge and skills of health care needs and quality of care, it is a narrow technical focus in the absence of a broader understanding of the context, it is prevailing focus on inpatient care at the expense of primary health care, is a quantitative and qualitative imbalances in the professional labor market is the lack of a balanced system of continuing professional development, and, finally, the weakness of the leadership and training of managers needed to improve the efficiency of the health system. The industry remains a significant shortage of personnel, continuing brain drain from public health facilities, increasing pressure on doctors because of inefficient forms of work organization, job dissatisfaction, social tensions staff.

Optimizing health can only be realized only through building material and technical resources of the health system; they must be targeted application and results-oriented. It should be noted that in the changed circumstances in the nationwide Russians health problem cannot be solved solely within the classical medicine and constant parameters of higher and secondary medical education. The changed conditions of life of the country constitute changes in the principles, targets, methods of health care system, and hence the process of training for work in it.

In this regard, the World Federation for Medical Education established the Commission, which included 20 professional and academic leaders from around the community to develop a common vision and strategy for medical education and public health. The Commission has made appropriate conclusion on the results of 2012, "Today, we understand the need for third-generation reforms, which must be integrated to improve the efficiency of the health system by adapting the basic professional skills to the specific conditions for the use of the global potential of knowledge and experience". This conclusion is entirely reflects our mission at this stage, which involves increasing the capitalization of human resources and the competitiveness of the vocational education system, the formation of a system of continuous education.

The experience gained in the field of medical education at the international level is extensive and characterized by a multiplicity of national schools, their characteristics and traditions. Curricula considered the presence of the priority groups of diseases specific to different regions of the world, the principles of primary and secondary prevention, etc. Global vector of development of medical education and our strategic objective is to improve the system of vocational education. Today, we are lagging behind the development of vocational education in the countries of the European average of 10 years. The current system of additional vocational training does not meet the present level of health care, both in form and in content. In this regard, we will as soon as possible to establish a system of continuing professional medical education.

Despite the existence of national differences, the general laws of development of medical education prevail. In all countries, differentiated three stages or phases of the process at the level of undergraduate education (1st stage), is strictly regulated by the theoretical and clinical training. Specialization (2nd stage) is implemented in accordance with the needs of health care. The ongoing demographic shifts in the direction of increasing life expectancy, especially in developed countries dictate the need for more training in the field of geriatrics, cardiology, oncology, psychiatry, ophthalmology, etc. Continuing Professional Education (third stage) is



based on the achievements of the Life Sciences science and applications of advanced medical technologies.

In recent years, many countries and at the international level gave special importance to the development and implementation of standards within each phase of continuing education. In particular, the World Federation for Medical Education has developed international standards for the various stages of medical education, which were discussed and adopted by the World Conference on Medical Education in March 2003 in Copenhagen. In this regard, there is a need to develop evidence-based modern control system by medical personnel of medical institutions based on actual conditions and possibilities of state and municipal public health, considered one with the personnel management system of national health care.

Purposeful activity on the formation of the educational continuum in a medical institute of the North- Eastern Federal University named after M.K. Ammosov (NEFU) is carried out from the opening of the Faculty of postgraduate training of doctors in 1997. Currently, medical school came to qualitative changes in the activity from the perspective of the development of innovative approaches, which allows for optimal and sustainable form of educational space. Promotion of continuing professional education is a top priority for medical school until 2020, which is reflected in the program of development of the university. Solving problems of postgraduate training is carried out at the university through the implementation of strategic management, the deep integration of education, research and innovation, medical and international activities, development and implementation of mechanisms that increase the competitiveness of the real NEFU in medical training not only for the North -East of Russia, but also for the whole Far East region. The main task of medical school NEFU was and still is a quality career-oriented training of specialists in the priority areas of medicine and health care on the basis of a single production process, promotion and application of new skills. Today the medical school NEFU builds relationships with consumers of educational services on a new paradigm, "from the formation of knowledge and skills - to master the competencies". The principle of the Bologna Convention "Lifelong Education" is realized through vocational education programs in the clinical internship, the program of training and retraining (of 72 programs) , in graduate school (in 8 specialties) . With the 2013/14 school year for interns and residents, as well as for students of cycles of training and retraining programs developed and implemented simulation courses. To improve the quality of medical education are essential components of self-control institution, and evaluation of the examination. Current 2013 marked a successful completion of the International University of professional accreditation specialty "General Medicine" and successful state accreditation Rosobrnadzor specialties internship, residency and postgraduate studies.

As for the shortage of human resources industry, it is appropriate to note that a set of contingent on 1 course depends not only on the university, its policies, and the impact of competition. First of all, the interested party must be an employer, through the Ministry of Health, Chief Physician of the medical organization. Process of medical training in developed countries is focused on appropriate health care needs, and here it is used a well-known method of planning training, which helps to optimize the development of the health system.

The impetus for learning throughout life should be the criterion for the selection of students entering medical schools and students at all stages of medical education. Therefore, special attention should be paid to the work and career guidance to students and graduates of secondary schools. Medical school puts a lot of effort for this work. But, as the analysis of this part, this activity would be more effective if it was connected to the medical community on the ground. We propose to include in the annual work plan of health facilities meeting with students and graduates of secondary schools, and educational outreach, publications and presentations in the media leading experts in career-oriented focus, with the popularization of specialty. It's no secret that the applicants often find it difficult to explain the committee why they have opted for

a particular specialization. The organization and carrying out together with the District Board of Education case competitions and workshops, preparation for republican competition "Step into the Future" would serve as an impetus for students in choosing a career. In the end, get on the end of their final training specialist - a native of the same district, is much more real than to attract young professionals - a native of another district. In this respect, a lot of work carried out by the Ministry of Health in cooperation with the Government of Republic of Sakha (Yakutia). For the third year are allocated to State order additional seats at the expense of the national budget. It would seem that we will be able to significantly reduce the shortage of personnel on the ground in a very difficult period of 2016-2020 years. But here, we met unexpected difficulties. The fact that children from areas with good results exam held on the general competition, and those who have the least points - under the state order. It turns out that the government order provides graduates of places known to be weak, and after the period of study - potentially weak specialists. What quality of professionals in the field can say in this situation of affairs? Analysis of the performance of students admitted under the state order showed that about 10% of them have been expelled for poor academic performance. The decision to exit from this situation, we see a clear division of target sites in themselves Regional Health and Education in the competition, where the best of the best will be given guaranteed places the obligation on mining locations specified period intern. This should have a positive impact attention and support, including financial, health care institutions themselves, which is regulated by the new Federal Law "On Education". The Institute of Medicine has spoken with the initiative to open the university preparatory courses health professionals, according to objective difficulties in the development of high school graduates from the Arctic area of the school curriculum in chemistry and biology. We believe this solution to the problem is very promising.

Continuing professional education (CPE) means the period of education or training of doctors, beginning after the completion of undergraduate and postgraduate medical education, continuing throughout the professional life of a doctor. However, CPE - it is far more serious activity throughout the period of continuous medical education. Therefore, CPE is a professional; it is necessary for every physician education and, at the same time serves as a prerequisite for improving the quality of health care. CPE mainly involves more self and practice-based self-active, unlike learning control side. In addition to the problem of increasing the level of individual professional education, aims CPE are also the preservation and development of competencies (knowledge, skills and abilities) of each physician needed to work with the ever-changing demands of patients. The objectives also include the development of the health system responsive to new scientific discoveries in medicine and faced with increasing demands of licensed entities and the public.

For the conduct of good practice throughout his professional life, physicians must comply with the current level through continuous training in any direction or continuing education. To ensure high-quality patient health care or maintenance service CPE should be aimed at strengthening the role of the doctor and the increase of its competence (both clinical skills and theoretical knowledge). Fundamental innovations alter the medical concepts and methods, and representatives of the medical profession must be adequate through CPE to absorb these innovations. By analogy with this, health workers have to constantly deal with new ethical requirements and factors of social and economic development, which requires every doctor taking on new roles. It is becoming increasingly significant role of CPE in the quality assurance and quality development of the health system.

Motivation to CPE for the individual doctor due to three main factors:

- Professional desire to ensure optimal care for each patient;
- A commitment to take into account the requirements of employers and society;
- The need to maintain a sense of satisfaction derived from work.



However, it is well known that only a highly competent professional can meet the needs of the population for health care at the appropriate level of quality, thereby protecting the legitimate rights and human dignity. In conclusion, it should be noted that the general patterns and trends in medical education in the world, despite some negative elements of its development, create prerequisites for the formation of medical professionalism of the twenty-first century, so essential to social and economic development of modern society.

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The authors



Aprosimov Leonid Arkad'evich, PhD, Associate Professor, Dean of the Faculty of postgraduate training of doctors, Medical Institute NEFU, Yakutsk, Republic Sakha (Yakutia), Russia

Petrova Palmyra Georgievna, MD, Professor, Director, Medical Institute NEFU, Yakutsk, Republic Sakha (Yakutia), Russia

Borisova Natalia Vladimirovna, MD, Associate Professor, Deputy Director for Academic Affairs, Medical Institute NEFU, Yakutsk, Republic Sakha (Yakutia), Russia.