



ISSN: 2277- 7695
TPI 2016; 5(11): 28-30
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www.thepharmajournal.com
Received: 12-09-2016
Accepted: 10-10-2016

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Current Development of Higher Medical Education in Ukraine in Terms of European Integration

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Abstract

Higher Medical Education should provide high-quality training for students and should be an important part of the reforming of the health care and implementation of the social priorities of the state, since the quality of medical care depends on the level of training of the future doctors. Modern development of medical science and practice necessitate adjustments in the preparation and training of health professionals by approaching their education with international standards. Therefore, the quality of education in higher education establishments should be improved through effective organization and informatization of educational process, introduction of advanced research in teaching practice, increasing the professionalism of teachers by creation of modern teaching base in all educational fields, including medicine.

National Strategy for Health Reform (the Strategy) is a component of the National Action Plan for the reform. The purpose of the Strategy is to identify the key problems of the health system, potential directions and the ways of their solution to form a new state policy in this field, including regulatory transformation and the implementation of new financial mechanisms to ensure human rights in health care. Future reformed health care system is based on three fundamental principles - focus on people, on result and implementation.

Regarding the higher medical education the health reform is to restructure the qualitative changes in the training of medical personnel through staff training and professional development.

The main aim of the reforming of higher medical education is the generation of new medical personnel by introducing the European educational and health standards into the educational process of integration and improving the intellectual, scientific, educational, vocational-oriented level of future doctors, providing them with modern, more effective innovation and Health Information Technology. According to the National Strategy for Health Reform in Ukraine the submission of higher education institutions to the Ministry of Education is problematic on our opinion (until the provisions of the Law on Higher Education on university autonomy come into force); because at present the medical universities don't have university clinics, which greatly complicates the organization of legal and financial relationships with local hospitals.

The idea of medical higher education reform is the adaptation of the national higher education system to European standards.

Keywords: European integration, international standards, clinical thinking, mental ability, mental vision.

Introduction

The aim is to identify the directions and mechanisms of formation of a new health care system, the implementation of which will contribute to the preservation and strengthening of the public health, the priority of preventive health care, reducing the morbidity, disability and mortality, improving the quality and efficiency of medical assistance, the implementation of effective organizational, legal and financial and economic mechanisms, enhancing the social justice and protection of human rights to health care.

Methods and materials

One of the tools for achieving the goals of European integration of medical education is the implementation the European Credit Transfer System (ECTS) into the educational process, which helps the universities to achieve the quality of medical education in the light of the reforming of new system of Health Care in Ukraine.

Research results

The health status of the population is an indicator of the integrative development. It reflects the internal political, economic and social situation in the country. It is obvious that such

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Indicators of the state as the level of economic achievements, scientific and technological development, habitat condition, and finally, the culture and education, equal rights affect the health, i.e. the length and quality of the nation's life, its gene pool. The condition of Public Health in modern Ukraine does not meet the expectations of society and state.

At present the higher medical school in Ukraine continues to work on traditional information models that provide the students with only basic knowledge of the curriculum, which is not enough for the formation of their abilities to analyze changes in economic indicators, the impact of these changes on public health and the opportunities of economically effective correction of these changes. This educational process should ensure the implementation of the following tasks: firstly, the formation of students' (the future doctors') clinical thinking, the ability to talk with the patient, to determine all kinds of diagnoses, conduct a differential diagnosis, interpret data of laboratory and instrumental studies, prescribe an adequate treatment, provide first aid in cases of emergency.

Clinical thinking in the broadest sense - is the specificity of doctor's mental activity that provides the effective use of scientific data and personal experience for a specific patient. It is preferred for the doctor the analytic- synthetic type of perception and observation, the ability to capture a picture of the disease as a whole and in detail. The core of the clinical thinking is the mental ability to build a synthetic and dynamic picture of the disease, the transition from the perception of external manifestations of the disease to reproduction of its "internal" flow - pathogenesis. The development of "mental vision", the ability to turn on any symptom in the logical chain of reasoning - that is necessary for the clinician. [2, 5] Unfortunately, not much attention is paid to the teaching of clinical thinking of students. In general it is difficult for a future doctor to master the clinical thinking during the period allotted for studying clinical disciplines. Clinical thinking cannot be learned from textbooks and manuals. This requires the practice under the guidance of an experienced teacher. This work is likely to include:

the study of the samples of clinical thinking - the works of prominent local physicians and scientists V.P. Obratsov, M.D. Strazhesko, V.H. Vasilenko, B.S. Shkliar, their students and followers in a brilliantly composed clinical lectures;

- mastering the examples of clinical thinking from teachers during training, from work colleagues when examining patients, diagnosis and treatment assignment;
- independent study and exercises in solving practical problems at the patient's bedside by analyzing the existing symptoms, constantly asking ourselves the questions: why? how? for what?
- Analysis of each error, own and others', meaning that "nothing is more instructive as diagnostic error which is recognized, analyzed and thought out. Its educational value is often much higher than a correct diagnosis provided that the analysis is correct and methodical" (A. Martin). Since during the practical training there is not much time for individual work with patients, we believe that the practices of students' extra work (especially the students of the 6th course) in the clinic after school and at weekends deserves more promotion. The opportunity to talk with patients may previously be agreed with the attending physician to allow the students to make a brief medical history that should be discussed with the teacher in the study of relevant topics. Such practice may turn out to be an extra opportunity in the formation of students'

clinical thinking in clinical departments. [6, 8, 9] Understanding of these relations must be laid during the students' years of study to create a business friendly environment in the healthcare market in future.

The study of obstetrics and gynecology in the present conditions of the demographic crisis is extremely important. Improving reproductive health, increasing fertility, reducing perinatal losses is a priority of Obstetricians and Gynecologists. Thus the issue of quality of students training and retraining of health workers is growing especially in the period of reforming of health care. Innovations in medical education are closely related to the introduction of modern industry standards for higher medical education, the introduction of experts' licensing and certification system. The concept of higher medical education development involves the introduction into educational process the modern pedagogical and scientific innovation according to the international standards of union resources of the state, local communities and private entities. The creation of the university clinic will improve the educational process, introducing in the university the IV level of accreditation ratio teacher - student (listener, doctor- intern) 1 to 6 (4.5, 5), which will reduce the teachers' workload. The amendments to the organization of the clinical departments including the Department of Obstetrics and Gynecology, creating programs for distance learning for students, improving logistics, computerization and informatization of educational process will improve the educational process as well. For better learning it is used the simulation of such clinical situations as: - the progress of physiological childbirth, 17 – biomechanism of labor with breech presentation; - operative vaginal birth (forceps, vacuum extraction); - loss of the umbilical cord; - eclampsia and preeclampsia; - Cardiopulmonary resuscitation; - postpartum hemorrhage.

Conclusion

Thus the development and reform of higher medical education, bringing the teaching to the international standards will improve the quality of students learning and preparing a new generation of skilled medical workers. The continuity of education and support of doctors, increase of social prestige and respect for the profession of medical worker, effective economic motivation for productive work, legislative regulation of the requirements of professional ethics of medical workers, legal and institutional support of self-government of medical professions will ensure the future development of the healthcare industry.

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