



MINISTRY OF SCIENCE AND HIGHER EDUCATION OF THE RUSSIAN FEDERATION
Federal State Autonomous Educational Institution of Higher Education

"Far Eastern Federal University"

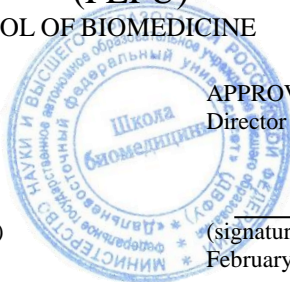
(FEFU)

SCHOOL OF BIOMEDICINE

AGREED
Head of OP

(signature)
February 02, 2021

Yu.S. Khotimchenko
(FULL NAME)



APPROVE

Director of the Department of Pharmacy and Pharmacology

E.V. Khozhaenko
(signature) (I.O. Surname)
February 02, 2021

WORKING PROGRAM OF THE DISCIPLINE

Research Workshop: Comparative Analysis of Health Systems

Area of study 32.04.01 Public health

Master's program "Leadership and governance in public health (program in English for foreign citizens)"

Form of training: full-time

Course 1 semester 2

lectures - hour.

practical classes 18 hours.

total classroom hours 18 hours.

independent work 90 hours.

Pass with grade 2 semester

The work program was compiled in accordance with the requirements of the Federal State Educational Standard in the field of study 32.04.01 Public Health, approved by order of the Ministry of Education and Science of Russia dated 31.05.2017 No. 485.

The work program was discussed at a meeting of the Department of Pharmacy and Pharmacology Protocol No. 5 dated January 28, 2021

Director of the Department Ph.D., E.V. Khozhaenko

Reverse side of the title page of the RPD

1. The work program was revised at a meeting of the Department / department / department (implementing the discipline) and approved at a meeting of the Department / department / department (issuing structural unit), protocol dated “ ____ ” _____ 2021 No. _____
2. The work program was revised at a meeting of the Department / department / department (implementing the discipline) and approved at a meeting of the Department / department / department (issuing structural unit), protocol dated “ ____ ” _____ 2021 No. _____
3. The work program was revised at a meeting of the Department / department / department (implementing the discipline) and approved at a meeting of the Department / department / department (issuing structural unit), protocol dated “ ____ ” _____ 2021 No. _____
4. The work program was revised at a meeting of the Department / department / department (implementing the discipline) and approved at a meeting of the Department / department / department (issuing structural unit), protocol dated “ ____ ” _____ 2021 No. _____
5. The work program was revised at a meeting of the Department / department / department (implementing the discipline) and approved at a meeting of the Department / department / department (issuing structural unit), protocol dated “ ____ ” _____ 2021 No. _____

1. Goals and objectives of mastering the discipline:

The objectives of the research seminar "Research Workshop: Comparative Analysis of Health Systems" in the specialty 32.04.01 Public Health, the master's program "Leadership and governance in public health (a program in English for foreign citizens)" are to form a holistic theoretical understanding of system of health care, disclosure of key problems of modern legislation and practice in the field of health care.

The objectives of the research seminar are:

1. The study of the current legislation of the Russian Federation, international law in the field of medicine.

2. Conducting a comparative analysis of healthcare systems, forming a holistic view of the system and structure of healthcare legislation in foreign countries, identifying and analyzing the main trends in healthcare development, analyzing the advantages and disadvantages of various systems.

3. To instill skills and abilities to use the acquired knowledge in practical activities.

Professional competencies of graduates and indicators of their achievement:

Task type	Code and name of professional competence (result of development)	Code and name of the indicator of achievement of competence
organizational and managerial	PC-3 The ability to organize, plan and control the activities of a structural unit of a medical organization	PC-3.1 Knows the standards of medical care PC-3.2 Knows how to assess the resources of a medical organization and implement a quality management system PC-3.3 Possesses the necessary skills for compiling reporting documentation, evaluating the activities of a healthcare institution
organizational and managerial	PC-6 The ability to develop plans and programs, form a system of indicators for the activities of a medical organization, evaluate the effectiveness of a medical organization, develop options for management decisions and assess the risks associated with their implementation	PC-6.1 Knows the features of the formation of a system of indicators of a medical organization PC-6.2 Is able to evaluate the effectiveness of the medical organization, taking into account the formed system of indicators PC-6.3 Has the skills to form performance indicators, evaluate their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

Code and name of the indicator of achievement of competence	Name of the assessment indicator (the result of training in the discipline)
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PC-3.1 Knows the standards of medical care	Knows the standards of medical care Able to provide first aid Proficient in first aid
PC-3.2 Knows how to assess the resources of a medical organization and implement a quality management system	Knows the quality management system of a medical organization Knows how to evaluate the resources of a medical organization and implement a quality management system Possesses the skill of assessing the resources of a medical organization and implementing a quality management system
PC-3.3 Possesses the necessary skills for compiling reporting documentation, evaluating the activities of a healthcare institution	Knows the reporting documentation of the medical organization Able to prepare reporting documentation of a medical organization Possesses the necessary skills for compiling reporting documentation, evaluating the activities of a healthcare institution
PC-6.1 Knows the features of the formation of a system of indicators of a medical organization	Knows the features of the formation of a system of indicators of a medical organization Able to form and fulfill the indicators of a medical organization Possesses the skill of forming and fulfilling the indicators of a medical organization
PC-6.2 Is able to evaluate the effectiveness of the medical organization, taking into account the formed system of indicators	Knows the main performance indicators of a medical organization Knows how to evaluate the effectiveness of the activities of a medical organization, taking into account the formed system of indicators Possesses the skill of evaluating the effectiveness of the activities of a medical organization, taking into account the formed system of indicators
PC-6.3 Has the skills to form performance indicators, evaluate their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation	Knows the main performance indicators of a medical organization Knows how to form performance indicators, evaluate their effectiveness, assess the risks associated with their implementation Possesses the skills of forming performance indicators, evaluating their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

I. The complexity of the discipline and types of training sessions in the discipline

The total complexity of the discipline is 4 credits (144 academic hours).

Designation	Types of training sessions and work of the student
Etc	Practical lessons
Right electr.	
SR:	Independent work of the student during the period of theoretical training
including control	Independent work of the student and contact work of the student with the teacher during the period of intermediate certification
	And other types of work

Discipline structure:

Full-time form of education

N o.	Section name disciplines	Se me ster	The number of hours by type of training sessions and work of the student						Forms of intermediate certification
			Lek	lab	Etc	OK	SR	Cont rol	
	Topic 1. General characteristics of the health care system as a system	2			4			12	
	Topic 2. Health care in the Russian Federation. The system of health protection of citizens in the Russian Federation	2			2			12	
	Topic 3. US healthcare system	2			2			12	
	Topic 4. Health care system in Canada	2			2			12	
	Topic 5. Cuban health care system	2			2			12	
	Topic 6. UK healthcare system	2			2			10	
	Topic 7. The healthcare system in China and North Korea	2			2			10	
	Topic 8. Japanese healthcare system	2			2			10	
	Total:	2	-	-	18	-		90	Zchet

II. STRUCTURE AND CONTENT OF THE THEORETICAL PART OF THE COURSE

Lectures are not included in the curriculum.

IV. STRUCTURE AND CONTENT OF THE PRACTICAL PART OF THE COURSE AND INDEPENDENT WORK

Practical classes (18 hours)

Topic 1. General characteristics of the health care system as a system (4 hours)

1. Definition of the health care system.
2. Health care in various countries.
3. International cooperation in the field of health protection

Topic 2. Health care in the Russian Federation. The system of health protection of citizens in the Russian Federation (2 hours)

1. Health care in the Russian Federation.
2. The system of protecting the health of citizens in the Russian Federation.

Topic 3. US health care system (2 hours)

1. Structure of the US healthcare system.
2. State programs.
3. US doctors.
4. medical expenses.
5. Medical insurance.
6. US healthcare reform.

Topic 4. Health system in Canada (2 hours)

1. History of occurrence.
2. The structure of the medical service.
3. private medicine.
4. Rationing and control in health care.
5. Medical personnel.
6. Financing and payment system.

Topic 5. Cuban health care system (2 hours)

1. The Cuban healthcare system is the best in the world.
2. Institute of Family Physicians.
3. Medical education in Cuba.
4. Preventive focus of Cuban medicine.
5. Health problems in Cuba.
6. Prerequisites for the benefits of the Cuban healthcare model.

Topic 6. The UK health care system (2 hours)

1. History of occurrence.
2. The structure of the medical service.
3. private medicine.

4. Rationing and control in health care.
5. Medical personnel.
6. Financing and payment system.
7. Similarities and differences between the UK and Russian healthcare systems.

Topic 7. Health system in China and North Korea (2 hours)

1. Chinese health care system.
2. Health care system in North Korea.

Topic 8. Japanese healthcare system (2 hours)

1. insurance system in Japan.
2. Features of the Japanese health care system.
3. Japanese health care and technological progress.

Independent work

Questions for self-preparation:

1. Health care in the Russian Federation.
2. US healthcare system. The structure of the healthcare system. State programs. Medicare. Tricare. Medical Education in the USA. medical expenses. Medical insurance. US healthcare reform.
3. Health system of Canada. Canadian Health Law prohibits the provision of paid medical services, except for those not covered by provincial health plans.
4. Cuban health care system. Historical features of the development of Cuban healthcare. Comparative health care
Cuba and UK. Comparison of indicators of Great Britain and Cuba. The Cuban healthcare system is the best in the world. Institute of Family Physicians. Medical education in Cuba. Preventive focus of Cuban medicine. Health problems in Cuba. Caring for the health of citizens in other countries.
Prerequisites for the benefits of the Cuban healthcare model.
5. The UK health care system. The essence of the UK health care system, the history of occurrence. The structure of the medical service. Rationing and control in health care. Medical personnel. Financing and payment system. Similarities and differences between the healthcare systems of Russia and the UK.
6. Health care system in China and Korea. General characteristics of public health in China. Dynamics of development. Health System Transformation - People's Republic of China. Traditional Chinese medicine and pharmacology. Reforming the healthcare system in China. Priority directions of reforming the healthcare system. Current health problems in China.

7. Japanese healthcare system. Health insurance.

Guidelines for writing and formatting an abstract.

An abstract is a creative activity of a master student, which reproduces in its structure research activities to solve theoretical and applied problems in a certain branch of scientific knowledge. Because of this, term paper is the most important component of the educational process in higher education.

The abstract, being a model of scientific research, is an independent work in which a master's student, graduate student, applicant solves a problem of a theoretical or practical nature, applying the scientific principles and methods of this branch of scientific knowledge. The result of this scientific search may have not only subjective, but also objective scientific novelty, and therefore can be presented for discussion by the scientific community in the form of a scientific report or message at a scientific and practical conference, as well as in the form of a scientific article.

The abstract is carried out under the guidance of a supervisor and involves the acquisition of skills in building business cooperation based on ethical standards for the implementation of scientific activities. Purposefulness, initiative, disinterested cognitive interest, responsibility for the results of one's actions, conscientiousness, competence are personality traits that characterize the subject of research activities that correspond to the ideals and norms of modern science.

An abstract is an independent educational and research activity of a master student, postgraduate student and applicant. The supervisor provides advisory assistance and evaluates the process and results of activities. He provides an approximate topic of abstract papers, clarifies the problem and the topic of research together with the undergraduate, helps to plan and organize research activities, appoints the time and the minimum number of consultations. The supervisor accepts the text of the abstract for verification at least ten days before the defense.

Traditionally, a certain structure of the abstract has developed, the main elements of which, in the order of their location, are the following:

1. Title page.
2. Task.
3. Table of contents.
4. List of symbols, symbols and terms (if necessary).
5. Introduction.
6. The main part.
7. Conclusion.
8. Bibliographic list.

9. Applications.

The title page indicates: educational institution, graduating department, author, supervisor, research topic, place and year of the abstract.

The title of the abstract should be as short as possible and fully correspond to its content.

The table of contents (content) reflects the names of the structural parts of the abstract and the pages on which they are located. It is advisable to place the table of contents at the beginning of work on one page.

The presence of a detailed introduction is a mandatory requirement for the abstract. Despite the small volume of this structural part, its writing causes considerable difficulties. However, it is a well-executed introduction that is the key to understanding the entire work and testifies to the professionalism of the author.

Thus, the introduction is a very important part of the abstract. The introduction should begin with a rationale for the relevance of the chosen topic. When applied to the abstract, the concept of "relevance" has one feature. From how the author of the abstract knows how to choose a topic and how correctly he understands and evaluates this topic from the point of view of modernity and social significance, characterizes his scientific maturity and professional readiness.

In addition, in the introduction it is necessary to isolate the methodological basis of the abstract, to name the authors whose works formed the theoretical basis of the study. A review of the literature on the topic should show the author's thorough acquaintance with specialized literature, his ability to systematize sources, critically examine them, highlight the essential, determine the main thing in the current state of study of the topic.

The introduction reflects the significance and relevance of the chosen topic, defines the object and subject, purpose and objectives, and the chronological framework of the study.

The introduction ends with a statement of general conclusions about the scientific and practical significance of the topic, the degree of its study and availability of sources, and the formulation of a hypothesis.

In the main part, the essence of the problem is stated, the topic is revealed, the author's position is determined, factual material is given as an argument and for illustrations of the put forward provisions. The author needs to show the ability to consistently present the material while simultaneously analyzing it. Preference is given to the main facts, rather than small details.

The abstract ends with the final part, which is called the "conclusion". Like any conclusion, this part of the abstract plays the role of a conclusion determined by the logic of the study, which is in the form of a synthesis of the scientific

information accumulated in the main part. This synthesis is a consistent, logically coherent presentation of the results obtained and their relationship with the general goal and specific tasks set and formulated in the introduction. It is here that the so-called "inferential" knowledge is contained, which is new in relation to the original knowledge. The conclusion may include suggestions of a practical nature, thereby increasing the value of theoretical materials.

So, in the Conclusion of the abstract should be: a) the conclusions on the results of the study are presented; b) theoretical and practical significance, novelty of the abstract; c) the possibility of applying the results of the study is indicated.

After the conclusion, it is customary to place a bibliographic list of used literature. This list is one of the essential parts of the abstract and reflects the independent creative work of the author of the abstract.

The list of sources used is placed at the end of the work. It is issued either in alphabetical order (by the author's last name or the title of the book), or in the order in which references appear in the text of the written work. In all cases, the full title of the work, the names of the authors or the editor of the publication, if a team of authors participated in writing the book, data on the number of volumes, the name of the city and publishing house in which the work was published, the year of publication, the number of pages are indicated.

Topics and list of abstracts

1. Comparative analysis of healthcare systems in the system of market relations.
2. Medico-legal problems of health care reform.
3. Health as an international legal category.
4. International medical law.
5. General characteristics of the health care system as a system.
6. Alma-Ata conference in 1978. Its meaning.
7. WHO - history of origin.
8. WHO - tasks, functions.
9. Comparison of the healthcare system in the UK and Russia
10. Comparison of the healthcare system in the US and Russia
11. Health system of North Korea
12. French healthcare system
13. Danish healthcare system
14. Approaches to the classification of health systems

V. EDUCATIONAL AND METHODOLOGICAL PROVISION OF STUDENTS' INDEPENDENT WORK

Independent work is defined as an individual or collective learning activity carried out without the direct guidance of a teacher, but according to his instructions and under his control. Independent work is a cognitive learning activity, when the sequence of a student's thinking, his mental and practical operations and actions depends and is determined by the student himself.

Independent work of students contributes to the development of independence, responsibility and organization, a creative approach to solving problems at the educational and professional levels, which ultimately leads to the development of the skill of independent planning and implementation of activities.

The purpose of independent work of students is to master the necessary competencies in their field of study, experience in creative and research activities.

Forms of independent work of students:

- work with basic and additional literature, Internet resources;
- self-acquaintance with the lecture material presented on electronic media in the library of an educational institution;
- preparation of abstract reviews of sources of periodicals, reference notes, predetermined by the teacher;
- search for information on the topic with its subsequent presentation to the audience in the form of a report, presentations;
- preparation for the implementation of classroom control work;
- performance of home control works;
- performance of test tasks, problem solving;
- drawing up crossword puzzles, schemes;
- preparation of reports for presentation at a seminar, conference;
- filling out a workbook;
- essay writing, term paper;
- preparation for business and role-playing games;
- compiling a resume;
- preparation for tests and exams;
- other kinds activities, organized And carried out educational institution and student self-government bodies.

VI. CONTROL OF ACHIEVEMENTS OF THE GOALS OF THE COURSE

No.	Controlled	Appraisal tools - name
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p / p	modules / sections / topics of the discipline	Codes and stages of formation of competencies		current control	intermediate certification
1	Section 1 Health care in foreign countries	PC-3.1; PC-3.2; PC-3.3; PC-6.1; PC-6.2; PC-6.3	Knows the basics of planning and organizing measures to ensure the protection of public health, including drug supply; readiness properly draw up official medical documents, take measures to ensure the protection of public health, including at the international level	interview tests presentation	Exam Questions 1-51

VII. EDUCATIONAL AND METHODOLOGICAL SUPPORT OF DISCIPLINE

Main literature

1. Lisitsin Yu.P., Ulumbekova G.E. Public health and healthcare. - GEOTAR-Media. - 2013. - 544 p. Access mode: <http://www.studentlibrary.ru/book/ISBN9785970426548.html>

2. Public health and healthcare [Electronic resource]: textbook / Medic V. A., Yuryev V. K. - 2nd ed., corrected. and additional - M. : GEOTAR-Media, 2016. - 608c.- <http://www.studentlibrary.ru/book/ISBN9785970437100.html>

3. Public health and healthcare [Electronic resource]: textbook / V.A. Medic, V.I. Lisitsin. - 4th ed., revised. and additional - M. : GEOTAR-Media, 2016. - 496c. <http://www.studentlibrary.ru/book/ISBN9785970437018.htm>

4. Public health and healthcare [Electronic resource]: textbook / Yu. P. Lisitsyn, G. E. Ulumbekova. - 3rd ed., revised. and additional - M. : GEOTAR-Media, 2015. - 544 p. - <http://www.studentlibrary.ru/book/ISBN9785970432914.html>

5. Public health and healthcare [Electronic resource]: textbook / V. A. Medic, V. K. Yuryev. - 3rd ed., revised. and additional - M. : GEOTAR-Media, 2015. - 288c. - <http://www.studentlibrary.ru/book/ISBN9785970433256.html>

6. Public health and health care, health economics In 2 vols. Vol. 1 [Electronic resource]: textbook / ed. V. Z. Kucherenko. - M. : GEOTAR-Media, 2013. - <http://www.studentlibrary.ru/book/ISBN9785970424148.html>

7. Public health and healthcare. Part 2: textbook at 2 pm: / I.A. Naumov [and others]; ed. I.A. Naumov. - Minsk: "The Highest School", 2013. - 351 p. <http://znanium.com/catalog.php?bookinfo=509081>

8. Public health and healthcare. National leadership / ed. V. I. Starodubova O. P. Shchepina and others - M. : GEOTAR-Media, 2012. -624 p. <http://www.rosmedlib.ru/>

9. Petrov V.I., Nedogoda S.V. Evidence-based medicine GEOTAR-Media. - 2012. - 144 p. Access mode: <http://www.studentlibrary.ru/book/ISBN9785970423219.html>

10. Collection of tasks on public health: teaching aid / N.Yu. Perepelkin [i dr.].— Electron. text data. - Orenburg: Orenburg State Medical Academy, 2011. - 84 p. <http://www.iprbookshop.ru/21865.html>

11. Health economics: textbook. 2nd ed. / Ed. A.V. Reshetnikov. - M.: GEOTAR-Media, 2010. - 272 p. Access mode: <http://www.studmedlib.ru/book/ISBN9785970416044.html>

additional literature

1. Petrov V.I. Evidence-based medicine: textbook for medical schools and postgraduate education of doctors / V. I. Petrov, S. V. Nedogoda. M.: GEOTAR-Media, 2012.- 141 p.

<http://lib.dvfu.ru:8080/lib/item?id=chamo:730071&theme=FEFU>

2. Trukhacheva N.V. Mathematical statistics in biomedical research using the Statistica package / NV Trukhacheva. M.: GEOTAR-Media, 2012. -379 p.

<http://lib.dvfu.ru:8080/lib/item?id=chamo:730137&theme=FEFU>

3. Ulumbekova G.E. Health care of Russia. What to do. Scientific substantiation of the "Strategy for the development of health care in the Russian Federation until 2020". - M. : GEOTAR - Media, 2010. - 594 p.

http://lib.dvfu.ru:8080/lib/item?id=Geotar:/usr/vtIs/ChamoHome/visualizer/data_geotar/geotar.xml.part1816..xml&theme=FEFU

4. Health Economics / Under. ed. Reshetnikova A.V. - M. : GEOTAR-MED, 2nd ed., 2010. - 272 p.

<http://lib.dvfu.ru:8080/lib/item?id=chamo:350145&theme=FEFU>

5. Alekseev V.A., Borisov K.N. Review of health care systems in the countries of the world. International Health/2011 <http://rosmedportal.com>

6. Alekseev V.A., Borisov K.N. Paradoxes in assessing Canada's healthcare system: public dissatisfaction with the system and a panegyric on official statistics <http://health-ua.com/articles/1668.html> 2011.

7. World Development Indicators: Health systems <http://wdi.worldbank.org/table/2.15#>

8. World Development Indicators: Incidence of tuberculosis (per 100,000 people) [http://data.worldbank.org/indicator/SH.TBS.INCD/countries?display=defau
lt](http://data.worldbank.org/indicator/SH.TBS.INCD/countries?display=default)

9. World Development Indicators: Mortality <http://wdi.worldbank.org/table/2.21#>

10. Edward W. Champion, MD, and Stephen Morrissey, Ph.D. A Different Model - Medical Care in Cuba N Engl J Med 2013; 368:297-299 January 24, 2013 DOI:

10.1056/NEJMp1215226 <http://www.nejm.org/doi/full/10.1056/NEJMp1215226>

11. Health Insurance: General Characteristics <http://www.pacificprime.com/country/>

12. Nicholas D. K Health Care? Ask Cuba Published: January 12, 2005 http://www.nytimes.com/2005/01/12/opinion/12kris.html?_r=0

13 Peter Lind Failure of American Health Care ("The Collapse of American Healthcare") [http://communities.washingtontimes.com/neighborhood/stress-and-
health-dr-lind/2012/nov/4/failure-american-health-care/](http://communities.washingtontimes.com/neighborhood/stress-and-health-dr-lind/2012/nov/4/failure-american-health-care/)

14. Tara Weiss Reasons Not To Become A Doctor // Reasons Not To Become A Doctor (English) [http://www.forbes.com/2008/05/05/physicians-training-prospects-
lead-careers-cx_tw_0505doctors.html](http://www.forbes.com/2008/05/05/physicians-training-prospects-lead-careers-cx_tw_0505doctors.html)

15. UNESCO Santiago offered a workshop on health literacy in Cuba 22.04.2014 - UNESCO Office in Santiago [http://www.unesco.org/new/en/member-states/single-
view/news/alfabetizacion_en_salud_la_unesco_santiago_imparte_taller_en_cuba/#
.U5rISPl_uCk](http://www.unesco.org/new/en/member-states/single-view/news/alfabetizacion_en_salud_la_unesco_santiago_imparte_taller_en_cuba/#.U5rISPl_uCk)

16. WHO praises Cuba's health care system http://news.xinhuanet.com/english/health/2012-03/28/c_131493136.htm

17. Alex K. The health care system in Cuba [http://cyberland.ws/687-
sistema-zdravoohraneniya-na-kube.html](http://cyberland.ws/687-sistema-zdravoohraneniya-na-kube.html)

18. Alekseev V.A., Borisov K.N., Rozhetskaya S.V. To the head of the hospital / International Health / Volume 2 2011 / US health problems and ongoing reform [http://www.rosmedportal.com/index.php?option=com_content&view=article&id=
1410:2011-10-11-21-28-46&catid=25:the-project](http://www.rosmedportal.com/index.php?option=com_content&view=article&id=1410:2011-10-11-21-28-46&catid=25:the-project)

19. WHO: Cuba is the country with the best medical system in the world Newsland 31.03.2012 <http://newsland.com/news/detail/id/927198/>

20. Global Health Observatory data repository
<http://apps.who.int/gho/data/node.main.75?lang=en>
21. National Health Expenditure Data (USA), according to Ministry of Health// National Health Expenditure Data (US) from United States Department of Health and Human Services (CMS)
http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/index.html?redirect=/NationalHealthExpendData/01_Overview.asp
22. John Waller Cuba - health for all
<http://latinos.by.ru/cuba/index.html>
23. Efimova M. Healing America. History of the health care system in the United States
<http://www.svoboda.org/content/transcript/1882910.html>
24. Health of Cuba (based on materials from health-ua.com)
http://kpu-ch.com/news/zdravookhranenie_kuby/2012-05-24-841
25. Cancidailo T. Healthcare in Cuba: an example for many countries
<http://health-ua.com/articles/3692.html>
26. Kipervas I. American medicine: pros and cons
[http://www.rusamny.com/357/t04\(357\).htm](http://www.rusamny.com/357/t04(357).htm)
27. Kozlov K. United States: health care reform at a glance Sberbank of Russia 2010
http://www.sbrf.ru/common/img/uploaded/files/pdf/press_center/Review_us_health_reform.pdf
28. Medical record Cuban health care is named the standard of world quality
<http://medkarta.com/?cat=new&id=4121&s=0>
29. National Center for Health Statistics // National Center for Health Statistics
<http://www.cdc.gov/nchs/>
30. United States Profile Online World Health Organization// United States profile from the World Health Organization
<http://www.who.int/countries/usa/en/>
31. Website of the World Health Organization
<http://www.who.int/ru/>
32. Secrets of Cuban medicine. Why does a poor country treat its citizens better than Russia? Arguments and Facts No. 38 (1195)
http://gazeta.aif.ru/online/aif/1195/15_01
33. Tanner M "Comparative analysis of health systems in different countries"
<http://polit.ru/article/2010/05/31/healthcare/>
34. Financing of health systems. The path to universal health coverage. World health report - 2010. - 106 p.
http://www.who.int/whr/2010/whr10_en.pdf?ua=1
35. Social Insurance Fund of the Russian Federation - <http://www.fss.ru/ru/>
36. Center for Medical Law

<http://pravo-med.ru/>

37. Shvedova N.US health care (an economist's point of view)

<http://www.narcom.ru/publ/info/574>

38. Epidemic of modern

medicine <http://www.pubhealth.spb.ru/Illich/NemesisEpid.html>

**The list of resources of the information and telecommunication network
"Internet", necessary for the development of the discipline**

1. Patent database and patent search <http://www.freepatent.ru/>

2. Internet health portal <http://bio-x.ru/go.mail.ru/search?rf=e.mail.ru&fm=1&us=15&usln=3&usstr=health&usqid=7d41348ea69338f3&hasnavig=1&sbmt=1509229987234&q=health>

3. Site research <https://infopedia.su/4x3e87.html>;
<https://dic.academic.ru/dic.nsf/ruwiki/663252>

4. SSAU electronic library - <http://library.sgau.ru>

5. NEB - <http://elibrary.ru>

6. <http://edu.znate.ru/docs/3997/index-94535-6.html>

7. Student library <http://www.studmedlib.ru>

8. <http://vladmedicina.ru> Medical portal of Primorsky Krai

9. <http://www.rosminzdrav.ru> Official website of the Ministry of Health of the Russian Federation

10. <http://meduniver.com> Medical site about various fields of medicine

List of information technologies and software

- Microsoft Office Professional Plus 2010;
- an office suite that includes software for working with various types of documents (texts, spreadsheets, databases, etc.);
- 7Zip 9.20 - free file archiver with a high degree of data compression;
- ABBYY FineReader 11 - software for optical character recognition;
- Adobe Acrobat XI Pro - a software package for creating and viewing electronic publications in PDF format;
- ESET Endpoint Security - comprehensive protection of workstations based on Windows OS. Virtualization support + new technologies;
- WinDjView 2.0.2 is a program for recognizing and viewing files with the same name format DJV and DjVu.

VIII. METHODOLOGICAL INSTRUCTIONS FOR MASTERING THE DISCIPLINE

Practical classes of the course are held in all sections of the curriculum. Practical work is aimed at developing students' skills of independent research work. During practical classes, the master performs a set of tasks that allows you to consolidate the lecture material on the topic under study.

Active consolidation of theoretical knowledge is facilitated by the discussion of problematic aspects of the discipline in the form of a seminar and classes using active learning methods. At the same time, the development of skills of independent research activity in the process of working with scientific literature, periodicals, the formation of the ability to reasonably defend one's point of view, listen to others, answer questions, and lead a discussion take place.

When writing essays, it is recommended to independently find literature for it. The abstract reveals the content of the problem under study. Working on an essay helps to deepen the understanding of individual issues of the course, form and defend one's point of view, acquire and improve the skills of independent creative work, and conduct active cognitive work.

An interview and a survey are conducted to conduct ongoing monitoring and intermediate certification.

IX. LOGISTICS AND TECHNICAL SUPPORT OF THE DISCIPLINE

The material and technical support for the implementation of the discipline includes classrooms for lectures and practical classes, equipped with multimedia support and corresponding to sanitary and contrary rules and regulations.

Name of equipped premises and premises for independent work	List of main equipment
690922, Primorsky Territory, Vladivostok, Russian Island, Saperny Peninsula, Ayaks village, 10, School of Biomedicine, room M 422, area 158.6 m ²	Multimedia Audience: Motorized Screen 236*147cm Trim Screen Line; Projector DLP, 3000 ANSI Lm, WXGA 1280x800, 2000:1 EW330U Mitsubishi; document camera CP355AF Avervision, video camera MP-HD718 Multipix; Subsystem of specialized equipment fastenings CORSA-2007 Tuarex; Video switching subsystem: Audio switching and sound amplification subsystem: power amplifier, wireless LAN based on 802.11a/b/g/n 2x2 MIMO(2SS) access points.
690922, Primorsky Territory, Vladivostok, Russian Island, Saperny Peninsula, Ayaks village, 10, School of Biomedicine, room M 419,	Multimedia Audience: Motorized Screen 236*147cm Trim Screen Line; Projector DLP, 3000 ANSI Lm, WXGA 1280x800, 2000:1 EW330U Mitsubishi; document camera CP355AF Avervision, video camera MP-HD718 Multipix; Subsystem of specialized equipment fastenings

area 74.9 m ²	CORSA-2007 Tuarex; Video switching subsystem: Audio switching and sound amplification subsystem: power amplifier, wireless LAN based on 802.11a/b/g/n 2x2 MIMO(2SS) access points.
690922, Primorsky Territory, Vladivostok, Russian Island, Saperny Peninsula, Ayaks settlement, 10, room M612, area 47.2 m ²	Computer class for 22 workplaces: HP ProOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW, GigEth, Wi-Fi, W, usb kbd/ mse, Win7Pro(64-bit)+Win8.1Pro(64-bit), 1-1-1 Wty (25 pcs.)
Reading rooms of the FEFU Scientific Library with open access to the fund (building A - level 10)	HP ProOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW, GigEth, Wi-Fi, BT, usb kbd/ mse, Win7Pro (64-bit)+Win8.1Pro(64-bit), 1-1-1 Wty Internet access speed 500 Mbps. Workplaces for people with disabilities are equipped with Braille displays and printers; equipped with: portable devices for reading flat-print texts, scanning and reading machines, a video enlarger with the ability to regulate color spectra; magnifying electronic loupes and ultrasonic markers

X. VALUATION FUND

FOS passport

Professional competencies of graduates and indicators of their achievement:

Task type	Code and name of professional competence (result of development)	Code and name of the indicator of achievement of competence
organizational and managerial	PC-3 The ability to organize, plan and control the activities of a structural unit of a medical organization	PC-3.1 Knows the standards of medical care PC-3.2 Knows how to assess the resources of a medical organization and implement a quality management system PC-3.3 Possesses the necessary skills for compiling reporting documentation, evaluating the activities of a healthcare institution
organizational and managerial	PC-6 The ability to develop plans and programs, form a system of indicators for the activities of a medical organization, evaluate the effectiveness of a medical organization, develop options for management decisions and assess the risks associated with their implementation	PC-6.1 Knows the features of the formation of a system of indicators of a medical organization PC-6.2 Is able to evaluate the effectiveness of the medical organization, taking into account the formed system of indicators PC-6.3 Has the skills to form performance indicators, evaluate their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

Code and name of the indicator of achievement of competence	Name of the assessment indicator (the result of training in the discipline)
PC-3.1 Knows the standards of medical care	Knows the standards of medical care Able to provide first aid Proficient in first aid
PC-3.2 Knows how to assess the resources of a medical organization and implement a quality management system	Knows the quality management system of a medical organization Knows how to evaluate the resources of a medical organization and implement a quality management system Possesses the skill of assessing the resources of a medical organization and implementing a quality management system
PC-3.3 Possesses the necessary skills for compiling reporting documentation, evaluating the activities of a healthcare institution	Knows the reporting documentation of the medical organization Able to prepare reporting documentation of a medical organization Possesses the necessary skills for compiling reporting documentation, evaluating the activities of a healthcare institution
PC-6.1 Knows the features of the formation of a system of indicators of a medical organization	Knows the features of the formation of a system of indicators of a medical organization Able to form and fulfill the indicators of a medical organization Possesses the skill of forming and fulfilling the indicators of a medical organization
PC-6.2 Is able to evaluate the effectiveness of the medical organization, taking into account the formed system of indicators	Knows the main performance indicators of a medical organization Knows how to evaluate the effectiveness of the activities of a medical organization, taking into account the formed system of indicators Possesses the skill of evaluating the effectiveness of the activities of a medical organization, taking into account the formed system of indicators
PC-6.3 Has the skills to form performance indicators, evaluate their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation	Knows the main performance indicators of a medical organization Knows how to form performance indicators, evaluate their effectiveness, assess the risks associated with their implementation Possesses the skills of forming performance indicators, evaluating their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

The learning outcome is considered achieved if the level of competence formation is more than 60%, i.e. most of the indicators were positively evaluated.

2 Evaluation tools

Test questions

1. The World Health Organization lists the factors affecting health:
 - a) income and social status;
 - b) social support: family, friends and environment;
 - c) education;
 - d) profession and working conditions;
 - e) natural environment;

- e) personal hygiene and self-care;
- g) genetic inheritance;
- g) the level of medical care in the region of residence.

2. Who funds the healthcare system in Canada

- financed through local taxes
- financed through government income taxes
- funded by employers
- financing is carried out through the acquisition of insurance policies
- health care in Canada is paid

3. Who finances the healthcare system in Cuba

- financed through local taxes
- financed through government income taxes
- funded by employers
- financing is carried out through the acquisition of insurance policies
- health care in Cuba is paid

4. Who funds the US healthcare system

- financed through local taxes
- financed through government income taxes
- funded by employers
- financing is carried out through the acquisition of insurance policies
- health care in the USA is paid

5. Who funds the UK healthcare system

- financed through local taxes
- financed through government income taxes
- funded by employers
- financing is carried out through the acquisition of insurance policies
- health care in the UK is paid

6. Who funds the South Korean healthcare system

- financed through local taxes
- financed through government income taxes
- funded by employers
- financing is carried out through the acquisition of insurance policies
- health care in South Korea is paid

7 Who Funds North Korea's Healthcare System

- financed through local taxes
 - financed through government income taxes
 - funded by employers
 - financing is carried out through the acquisition of insurance policies
- health care in North Korea is paid

8. Who funds the Japanese healthcare system

- financed through local taxes
- financed through government income taxes
- funded by employers
- financing is carried out through the acquisition of insurance policies
- health care in Japan is paid

9. Which country had the best healthcare system in the world in 1978

- In Canada
- in Cuba
- in USA
- In Great Britain
- in Japan
- in Russia

10. In which country was the healthcare system recognized as the best in the world in 2012

- In Canada
- in Cuba
- in USA
- In Great Britain
- in Japan
- in Russia

11. In which country did the formulary system originate?

- In Canada
- in Cuba
- in USA
- In Great Britain
- in Japan
- in Russia

12. What does the Canadian Health Act guarantee?

- the health of all citizens and permanent residents of Canada is insured by the state.

- every resident of Canada has the right to health care by institutions and healthcare workers of the country

The healthcare system in Canada is managed by government representatives and elected officials.

-Health care costs are paid from taxes collected from the population.

- Representatives report to the people of Canada.

- immigrants with a residence permit and conventional refugees are not eligible for medical care

13. The Canada Public Health Act was passed into law.

- in 1947

-in 1984

-in 2005

-in 2013

14. The United States leads the way in

- the level and effectiveness of scientific research

-life expectancy

- morbidity

- the number of Nobel laureates in the field of medicine

-provision with the most modern medical equipment

15. In 2000, the United States ranked in terms of the level of health of citizens

-56th place in the world

-1st place in the world

-2nd place in the world

72nd in the world

16. Does the US guarantee universal and comprehensive health insurance for its citizens

-Yes

-No

- USA does not work under health insurance programs

17. According to a 2009 Harvard study, lack of health insurance in the United States is responsible for about

- 45 thousand additional deaths per year
- 14 thousand additional deaths per year
- 78 thousand additional deaths per year
- there is no health insurance in the USA, medical care is funded by the state

18. The functions of the US Department of Health include

- control over the medical system and the implementation of social programs
- control over medical science
- monitoring the health situation
- control over the provision of medical care to all US citizens

19. US medicine operates at the following levels

- primary health care
- family medicine
- hospital care
- high-tech assistance
- public health

20. Does the United States have a single centralized health administration

- yes, its functions are performed by the US Department of Health
- yes, its functions are performed by a department of the US Government
- there is no unified centralized management

21. What types of hospitals are there in the USA

- state
- municipal
- private profitable
- private "non-profit"

22. Medicaid in the United States provides the following services

- inpatient and outpatient treatment
- consultations of surgeons
- consultations of ophthalmologists
- stay in nursing homes
- laboratory diagnostics
- X-ray methods of research

23. Duration of Residency for a Cardiac Surgeon in the USA

- 4 years
- 6 years
- 8 years
- 2 years

24. The duration of residency in the United States is

- 2 years
- 3 years
- 4 years
- 5 years

25. According to the US Department of Health, by 2017, medical expenses will amount to

- 15.5% of GDP
- 11% of GDP
- 17.5% of GDP
- 19.5% of GDP

26. What types of insurance are provided by US employers

- "fee for services"
- "managed services"
- "all inclusive"

27. What is the minimum cost of health insurance for 1 month in the USA

- 50 dollars
- 130 dollars
- 150 dollars
- 300 dollars

28. Which of the US presidents created programs Medicare And Medicaid?

- Johnson
- Truman
- Carter
- Reagan
- Obama

29. Longest Lifespan

- in USA
- In Canada
- in Russia

30. What is Canada's main health problem?

- poor quality of medical care
- long waiting lines
- high prices for medical services
- shortage of doctors
- shortage of nurses
- low salaries of doctors
- paid physiotherapy treatment

31. Canadian health law

- prohibits the provision of paid medical services
- allows the provision of paid medical services
- allows the provision of paid medical services that are not provided for in municipal health plans

32. Hospitals in Canada are mostly

- private
- state
- municipal

33. Which country has the highest availability of doctors

- in USA
- In Great Britain
- in France
- in Russia

34. Which country has the highest availability of nurses

- in USA
- In Great Britain
- in France
- in Russia

35 Smokes in Canada

- 15% of the population

- 18% of the population
- 23% of the population
- 26.5% of the population

36. Cuban health spending in 2012 was

- 8.2% of GDP
- 12% of GDP
- 4.3% of GDP
- 4.5% of GDP
- 8.6% of GDP

37. What is the main public health problem in Cuba?

- poor quality of medical care
- long waiting lines
- high prices for medical services
- shortage of doctors
- shortage of nurses
- low salaries of doctors
- paid physiotherapy treatment